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EDMUND G. BROWN JR.  
Governor

January 5, 2018

TO: ALL INTERESTED PARTIES

**SUBJECT: ASSEMBLY BILL 2640 – PUBLIC HEALTH: HIV**

On September 26, 2016, Assembly Bill (AB) 2640 was signed by Governor Edmund G. Brown and went in to effect January 1, 2017. AB 2640 creates new California Health and Safety Code (HSC) for HIV testing requirements in healthcare and non-healthcare settings. This letter outlines the requirements for HIV testing in healthcare and non-healthcare settings resulting from AB 2640.

### SUMMARY OF REQUIREMENTS

When a patient who is known to be at high risk for HIV infection tests negative for HIV, medical providers or a person administering the HIV test shall advise the patient of the need for periodic retesting, explain the limitations of current testing technology and the current window period for verification of results, and **provide information about methods that prevent or reduce the risk of contracting HIV, including, but not limited to, preexposure prophylaxis and postexposure prophylaxis, consistent with guidance of the federal Centers for Disease Control and Prevention (CDC)**, and may offer prevention counseling or a referral to prevention counseling.

#### Existing law:

Existing law places certain requirements on the information shared by medical providers with patients for HIV testing, including informing the patient that the test is planned, providing information about the test, informing the patient that there are numerous treatment options available for a patient who tests positive for HIV and that a person who tests negative for HIV should continue to be routinely tested, and advising the patient that he or she has the right to decline the test. If a patient declines the test, the medical care provider shall note that fact in the patient's medical file.

**Health & Safety Code Section 120990(h):** After the results of a test performed pursuant to this section have been received, the medical care provider or the person who administers the test shall ensure that the patient receives timely information and counseling, as appropriate, to explain the results and the implications for the patient's health. If the patient tests positive for HIV infection, the medical provider or the person who administers the test shall inform the patient that there are numerous treatment



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options available and identify follow-up testing and care that may be recommended, including contact information for medical and psychological services. If the patient tests negative for HIV infection and is **determined to be at high risk for HIV infection by the medical provider or person administering the test**, the medical provider or the person who administers the test shall advise the patient of the need for periodic retesting, explain the limitations of current testing technology and the current window period for verification of results, and **provide information about methods that prevent or reduce the risk of contracting HIV, including, but not limited to, preexposure prophylaxis and postexposure prophylaxis, consistent with guidance of the federal Centers for Disease Control and Prevention**, and may offer prevention counseling or a referral to prevention counseling.

## Resources

OA is committed to providing training and technical assistance to healthcare facilities for the implementation of this new 2016 HIV testing law. For [more information about OA and California HIV services](#), please visit our website at <https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OAmain.aspx>.

If you have any questions about the information in this letter, AB 2640 or implementation best practices, please [contact Matthew Willis](#) at the Office of AIDS at (916) 449-5797 or by email at [Matthew.Willis@cdph.ca.gov](mailto:Matthew.Willis@cdph.ca.gov).

Sincerely,



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