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TO: ALL INTERESTED PARTIES

FROM: Marisa Ramos, PhD
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RE: LOCAL HEALTH OFFICER AUTHORITY TO USE HIV SURVEILLANCE DATA FOR PARTNER SERVICES

The California Department of Public Health (CDPH), Office of AIDS (OA) in collaboration with CDPH, Division of Communicable Disease Control, Sexually Transmitted Disease (STD) Control Branch clarifies that local health officers (LHOs) and their designees (i.e., partner services staff) can use locally-acquired HIV surveillance data to identify individuals infected with HIV and offer them partner services.

Background

HIV partner services is an activity that facilitates confidential notification of individuals who may have been exposed to HIV and offers them HIV testing and prevention services. In California, the statewide program is administered and supported by CDPH OA and the STD Control Branch, in order to take advantage of the skilled workforce of disease investigation specialists (DIS). LHD DIS/partner services staff follow the Centers for Disease Control and Prevention (CDC) partner services guidelines and protocols and provide comprehensive partner services by offering clients options for partner notification, eliciting partners to notify, and assisting with notification of partners if requested by the HIV- infected client. The majority of states use their HIV/AIDS surveillance system to alert DIS/partner services staff regarding newly diagnosed/reported clients. DIS/partner services staff then initiate contact with the client directly to offer partner services. CDPH OA and STD Control Branch staff, at the state level, do not use HIV surveillance data to initiate partner services. California Law does provide authority to LHOs to use HIV surveillance data to do so.

LHO authority to use HIV surveillance data for partner services

California Health and Safety Code (HSC) Section [120175](#) provides LHOs with broad authority to proactively investigate cases of disease, to ascertain the infection source, and take measures as may be necessary to prevent the spread of the disease or occurrence of additional cases. Thus, LHOs or their designees, who may be STD Control Branch staff or DIS/partner services staff working on the LHO's behalf, may use HIV surveillance data to identify HIV-infected individuals and initiate partner services with them. HIV surveillance data consists of LHD-acquired/developed data or data shared with the LHO by the state or another jurisdictional LHO. LHOs and their



DIS/partner services staff should ensure that their activities adhere to CDC security and confidentiality requirements and California HSC confidentiality protections within both the surveillance and partner services areas before proceeding with utilizing HIV surveillance data to identify potential clients for partner services.

Existing Law

Local health officers or their designees, including partner services staff, may:

- Tell anyone reasonably believed to be a spouse, or sex, or needle-sharing partner of a person who has tested positive for HIV about their exposure to HIV. The LHO or their designees may not disclose any identifying information about the person with HIV or the physician making the report to the LHD. Any person to whom the disclosure is made must be referred for appropriate care and follow-up. Health and Safety Code (HSC) Section 121015[d]]

State/local health department HIV staff may:

- Disclose personally identifying information about HIV-positive reported individuals to other local and state health department staff without written authorization. HSC Section 121025(b) specifically authorizes state and local public health agencies to disclose personally identifying information to CDPH and to other local public health agencies when the information is necessary for the investigation, control, or surveillance of disease, or the coordination of, linkage to, or reengagement in care for a person or persons. This includes partner services. (HSC Section 121015[d]]

Physicians or surgeons may:

- With the written consent of the patient with HIV, provide LHO or the LHD partner services staff the patient's contact information for partner services. (HSC Section 121015[a]]
- Without the written consent of the patient with HIV, notify the spouse, or sex, or needle-sharing partners of the patient if the physician or surgeon: 1) discusses the test results with the patient; 2) offers the patient appropriate educational and psychological counseling, including information on the risks of transmitting HIV to other people and methods of avoiding those risks; 3) attempts to obtain the patient's voluntary consent for notification of their contacts; and 4) notifies the patient of their intent to notify the patient's contacts prior to any notification. (HSC Section 121015[b]]

Summary

CDPH OA and the STD Control Branch support the expansion of all evidence-based HIV prevention and testing strategies. Surveillance- and venue-based partner services are an important part of comprehensive care for persons living with HIV/AIDS and an

important strategy for increasing the percentage of people living with HIV who know their serostatus, a key objective in the National HIV/AIDS Strategy and California's Integrated HIV Surveillance, Prevention, and Care Plan. If you have any additional questions please contact Jesse Peck at Jesse.Peck@cdph.ca.gov.