



State of California—Health and Human
Services Agency
**California Department of
Public Health**



February 10, 2022

TO: All Californians

SUBJECT: Revision Of Mandatory Reporting Of Covid-19 Results By Health Care Providers

State Public Health Officer Order of February 10th, 2022

Both health care providers (HCP) and laboratories are required to report cases of Coronavirus disease 2019 (COVID-19)[1] pursuant to provisions of title 17, California Code of Regulations sections 2500 and 2505 (hereinafter, all references to sections are to title 17 of the California Code of Regulations). HCP reporting is required under section 2500, which states that HCPs must report every confirmed or suspect case immediately by telephone. (Cal. Code Regs., tit. 17, § 2500, subd. (b), (j).) Laboratory reporting is required under section 2505, which states that laboratories must report findings consistent with COVID-19 within one hour. (Cal. Code Regs., tit. 17, § 2505, subd. (e)(1).)

Laboratory reporting can be done through automated electronic systems, but HCP reporting is largely not automated and requires manual processes that are more time consuming. In the context of the very large number of COVID-19 cases[2] currently being identified, HCP reporting has become increasingly difficult. Also, at this stage in the pandemic, with thousands of cases being reported daily, immediate reporting by HCP is no longer feasible due to volume.

Immediate reporting by laboratories within one hour is no longer needed, and laboratories have shifted to automated reports, usually on a daily schedule. A daily reporting requirement for laboratories would align with the current daily reporting cadence to state dashboards, and CDPH receives hospitalization data via two additional reporting structures to complement these reports.

Additionally, steps to optimize reporting efforts by focusing provider reporting on severe COVID-19 and aligning laboratory reporting with daily automated reporting are needed. As CDPH currently already depends primarily on laboratory reporting for identification and monitoring of COVID-19 cases, limiting HCP reporting to severe cases, such as hospitalizations and deaths, would reflect the evolving priorities for COVID-19 surveillance. If the situation arises such that the California Department of Public Health and/or or a local health officer requests COVID-19 information from an HCP, this information would still be made available pursuant to section 2500. However, an HCP conducting point of care COVID-19 testing are considered to be laboratories, and therefore would still be required to report all COVID-19 test results, consistent with laboratory reporting requirements.

In addition to CDPH's authority under the Health and Safety Code to take actions necessary to manage the response to the COVID-19 pandemic and prevent the spread of communicable diseases, Paragraph 3 of Executive Order N-07-21 suspends the Administrative Procedure Act with respect to State Health Officer Orders issued in response to COVID-19.

I, as State Public Health Officer of the State of California, order:

1. California Code of Regulations, title 17, sections 2500(b) and 2500(j) are temporarily modified to eliminate the requirements for health care providers to report COVID-19 cases, except as follows:
 - a. Within one working day of identification of hospitalization and/or death of a patient due to COVID-19, health care providers shall report this information.
 - b. The reporting of hospitalizations and deaths by healthcare providers required by subparagraph a. is in addition to weekly reporting of hospitalized COVID-19 cases by hospitals as required under AFL 21-25.[3]
 - c. Health care providers conducting point of care testing must still report test results consistent with the requirements for laboratories.[4]
2. California Code of Regulations, title 17, sections 2505(a)(3) and (e)(1) are temporarily modified to allow for laboratories to report COVID-19 results within 24 hours from the time the laboratory notifies the health care provider or other person authorized to receive the report.
3. The terms of this Order supersede any conflicting terms in any other California Department of Public Health orders, directives or guidance.
4. Except to the extent this Order provides otherwise, all other terms in all of my other orders remain in effect and shall apply statewide.
5. This Order shall take effect immediately and remain in effect until rescinded.
6. This Order is issued pursuant to Executive Order N-07-21, paragraph 3, Health and Safety Code sections 120125, 120130, 120140, 120175, and 131080.



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[1] COVID-19 is also referred to as "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and "Coronavirus, novel strains" within the text of the sections of the cited regulations.

[2] COVID-19.ca.gov Tracking COVID-19 in California web page.

[3] California Department of Public Health AFL 21-25 web page.

[4] "All laboratories—including laboratories, testing locations operating as temporary overflow or remote locations for a laboratory, and other facilities or locations performing testing at point of care or with at-home specimen collection related to SARS-CoV-21—shall report data for all testing completed, for each individual tested, within 24 hours of results being known or determined, on a daily basis to the appropriate state or local public health department based on the individual's residence." *COVID-19 Pandemic Response, Laboratory Data Reporting: CARES Act Section 18115* (January 8, 2021) as of January 24, 2022 (PDF).

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