Minor Consent FAQs

What laws in Colorado allow minors to consent for confidential services?

Colorado state law determines the age of competence for which someone is permitted to make decisions in regard to his or her own body is 18 years or older. However, in Colorado, minors are able to consent to certain confidential health care services under the law (see External References).

Many laws that allow a minor to consent to medical treatment address medical situations in which a minor may be less likely to seek treatment if parental consent were required. Many U.S. states have laws in place that allow minors to consent to various mental health or reproductive/sexual health services, because it’s proven an effective way to improve the health of teens, lower the number of unplanned pregnancies, etc. Preventing poor health outcomes for youth is the impetus behind many of these laws that expand minor consent to certain types of care.

The American Academy of Pediatrics supports adolescent confidentiality and the ability for adolescents to consent for certain health concerns, in accordance with state law. Offering these services aligns with best practice in adolescent medicine.

What services will minors be able to consent to?

Beginning on July 1, 2021, DPS students that are unemancipated minors (under age 18) will be able to access confidential health care services at DSBHCs, in accordance with Colorado statutes. This care may take place pursuant to the minor’s own consent, without parental consent or notification (unless otherwise stated), for the following categories of care:

A. Mental Health
   a. A minor age 12 and older may seek and obtain outpatient psychotherapy services without the consent of a parent or guardian. Notification to the parent or guardian is only permitted in specific circumstances as outlined in the policy “Care and Treatment of Persons with Mental Illness”.
   b. In addition to outpatient psychotherapy services, a minor age 15 and older may seek and obtain mental health services including hospitalization and/or medication without the consent of a parent or guardian. Parental notification for mental health services may be given if it is determined to be in the minor’s best interests, as outlined in the policy “Care and Treatment of Persons with Mental Illness”.

B. Treatment pertaining to the use of drugs or substance use disorder
C. Voluntary treatment for alcoholism or intoxication
D. Birth control services, except permanent sterilization
E. Pregnancy testing and counseling
F. Prenatal care, delivery, and post-delivery care for herself that is related to the intended live birth of a child (note - prenatal care only available at Florence Crittenton SBHC)
G. Sexually transmitted infections including HIV, prevention, testing and treatment
   a. The consent of a parent is not a prerequisite for a minor to receive a consultation, examination or treatment for sexually transmitted infections.
   b. Information must not be divulged to any person other than the minor except that child abuse and reporting under C.R.S. 19-3-301 applies.
c. If the minor is 13 years or age or younger the health care provider may involve the minor’s parent or legal guardian.
d. A health care provider shall counsel the minor on the importance of bringing his or her parent or legal guardian into the minor’s confidence regarding the consultation exam or treatment.

Why is the policy changing now?

Providing access to confidential health care services is importantly to protect the health and wellbeing of all DPS students. Denver Health School-Based Health Centers (DSBHCs) continually strive to provide the highest quality of care based on clinical best practices. By further removing barriers to care, SBHCs help ensure that students have the resources necessary to make responsible decisions regarding their health.

How does Denver Health encourage parent/guardian involvement in their child’s health care?

Supporting family communication is a principal goal of DSBHCs. Clinic staff encourage all patients to discuss their health care and their decisions with parents, guardians, and other trusted adults. Parents are not routinely notified when a student uses the SBHCs, except by student request or when staff becomes aware of serious health concerns.

Where do I send a parent/guardian who has further questions or concerns?

Any parent or guardian who has questions or concerns can be referred to Denver Health School-Based Health Centers. Parents/guardians can call # (303) 602-8958 or email DSBHCs at SBHC@dhha.org. Parents/guardians will be able to speak with the appropriate school-based health center representative based on their questions or concerns.

Can Denver Health share information with school staff about which students have consented into confidential services?

Denver Health will not share information with school staff about students that have consented into confidential services. Information pertaining to clinical services provided by DSBHCs are housed in medical records created and maintained by Denver Health and are not considered education records or subject to the Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99). Denver Health medical records documenting confidential services rendered to minors may be released only in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and State law.

External References
Competence of persons eighteen years of age or older, C.R.S. §§: 27-81-109

The American Academy of Pediatrics “Confidential Health Care Services”

Voluntary Applications for Mental Health Services – Treatment of Minors, C.R.S. §§ 27-65-103


Voluntary Treatment of Persons with Substance Use Disorders, C.R.S. §§: 27-81-109

Minors - Consent for Medical Care and Treatment for Use of Drugs or a Substance Use Disorder, C.R.S. §§13-22-102

Minors – Birth Control Services Rendered by Physicians, C.R.S. §§ 13-22-105

Minors - consent for medical care – pregnancy, C.R.S. §§ 13-22-103.5

Minors – Treatment – Consent, C.R.S. §§ 25-4-409

Policy, Authority, and Prohibition against Restrictions, C.R.S. §§ 25-6-102

Child Protection Act of 1987, C.R.S. §§ 19-3-301

Uses and Disclosures of Protected Healthcare Information: General Rules, 45 C.F.R.§ 164.502