# **Minor Consent for STD Prevention Services**

# Frequently Asked Questions about California Law

## 1. What does this law say?

On January 1, 2012, a California law (known as AB 499 or Chapter 652, Statutes of 2011) expanded the legal authority of minors 12 years and older to consent to confidential medical services for the *prevention* of sexually transmitted diseases (STDs) without their parents' consent.

The law permits adolescents age 12 through 17 years to consent to:

- <u>Hepatitis B</u> vaccination
- Human papillomavirus (HPV) vaccination
- HIV pre- and post- exposure medications
- Additional STD prevention services that may become available in the future.

## 2. Does the law mean minors can get all vaccinations without a parent's consent?

No. The law allows minors to consent only for vaccines that prevent sexually-transmitted diseases. Currently, this includes only two adolescent vaccines: **HPV** and **Hepatitis B**. In the future, any new vaccines that prevent sexually-transmitted diseases would also be included.

# 3. Is it new that minors can request certain health services without a parent's consent?

No. Minor consent has been part of California law <u>since 1968</u>. The current law amends the <u>existing Family Code 6926</u>, which has allowed minors 12 and older to consent to STD-related *diagnosis and treatment* services, such as testing for and treatment of chlamydia, gonorrhea, and syphilis. Now, the law has been updated to include *prevention* services. A <u>2008 study by the CDC</u> found that about 1 in 4 girls ages 14-19 had been infected with an STD, including HPV.

California law also allows youth to receive confidential care for reproductive health care, mental health care, and substance abuse treatment.

#### 4. What rights do parents have?

The law does not grant parents the right to prevent their child from seeking confidential immunization with HPV or Hepatitis B vaccine or to see records of a confidential vaccination.

#### 5. Does the law provide any financial assistance to cover the costs of prevention services?

No. The law does not create any new funding or financial assistance.

#### 6. Can a parent be held liable for the cost of minor-consented vaccines?

No. The law says that parents cannot be held responsible for vaccinations consented to by the minor.

# 7. Where can minors with no health insurance go for free or low-cost services?

Options include:

- California Local Health Departments
- Federally Qualified Health Centers
- STD clinic or family planning clinic enrolled in Vaccines for Children (VFC) Program (When on the website, scroll down page to find "VFC locator.")

Minors considering these options should be advised to call about prices and vaccine availability.

#### 8. Can a minor seek free confidential vaccinations through Vaccines for Children (VFC)?

**VFC-Eligible Minors:** VFC-eligible minors ages 12-18 years of age can receive HPV and Hepatitis B vaccines from their usual medical provider through the VFC program without parental consent. (Cont'd Page 2)

**Privately Insured Minors**: VFC-enrolled family-planning or STD clinics may provide VFC vaccine to privately insured minors ages 12-18 years of age who are seeking these vaccines without parental consent. Because these unaccompanied minors cannot access their insurance at the clinic, they are considered to be uninsured for VFC purposes and can receive these two vaccines under the VFC Program. However, as a "specialized VFC-eligible group," this group is subject to additional VFC Program screening, vaccination documentation, and ordering requirements. See the CDC's guidance on reporting requirements by clinics for confidential immunizations given to unaccompanied minors.

#### 9. How does my clinic sign up for VFC?

Providers can enroll by contacting VFC. Learn more at www.EZIZ.org or by calling 1-877-243-8832.

## 10. Can a minor seek HPV and Hepatitis B vaccinations at a pharmacy?

Many but not all pharmacies provide HPV and Hepatitis B vaccines, typically for a fee. Vaccines can be expensive, so minors considering this option should be advised to call the pharmacy about prices and vaccine availability.

#### 11. Do I need to show an unaccompanied minor a VIS before administering vaccinations?

Yes. The National Childhood Vaccine Injury Act requires providers to share the Vaccine Information Statement (VIS) before administering each vaccination (not just with the first dose). Check the VIS edition date (on the back bottom corner) to make sure you are using the current version (available at <a href="https://www.cdc.gov/vaccines/pubs/vis/default.htm">www.cdc.gov/vaccines/pubs/vis/default.htm</a>.) As the language in the VIS can be technical, it is also advisable to make sure the patient understands the benefits and risks of the vaccine.

Record this required information in the patient's medical record or a permanent office log:

- date the VIS is provided
- date the vaccine is administered
- name, office address, and title of the person who administers the vaccine
- vaccine manufacturer and lot number.

### 12. How and where are confidential immunization services entered in a patient's record?

Providers should refer to their standard confidentiality protocols for written or electronic records.

# 13. Can the California Immunization Registry (CAIR) currently distinguish confidential from non-confidential immunizations?

Not at this time.

# 14. Must a vaccinating clinic disclose confidential services to the patient's primary care provider (PCP)?

No. However, it is recommended that providers encourage minor patients to share their immunization history with their PCP to avoid inadvertently repeating confidential vaccinations.

# 15. If a minor later decides to disclose the confidential information to a parent or guardian, what follow-up is needed in the patient's record?

Use standard procedures to document the immunization in the patient's non-confidential medical record.

# 16. What are strategies to remind the patient about additional confidential doses in a multi-dose vaccine series?

Determine with the minor the appropriate contact information for follow-up communications, such as scheduling and reminders. Scheduling the next follow-up appointment while the patient is at the clinic may be helpful.

