

## 32. Minor Consent

In California, individuals under 21 years old may apply for Minor Consent services without their parental or guardian consent or knowledge. The parent’s or guardian’s income and property are **NOT** counted in the determination of Minor Consent services.

A minor must apply for Minor Consent services; parent(s)/guardian(s) can **NOT** apply on behalf of their minor child. However, one parent may accompany a minor to apply for Minor Consent services when there is a need or desire to maintain confidentiality with the other parent. The confidentiality requirement is **NOT** waived in this situation; Notices of Action (NOAs) must **NOT** be sent to the home address.

Minor Consent applicants should have eligibility determined the same day as their intake interview.

Minor Consent services are sorted by age as follows:

**Table 32-1: Minor Consent Services**

Under 12 years old	12 years old and older
Pregnancy and pregnancy-related care	Pregnancy and pregnancy-related care
Family planning services	Family planning services
Sexual assault services	Sexual assault services
	Sexually transmitted diseases treatment
	Drug and alcohol abuse treatment/counseling
	Mental health outpatient care



**Note:**

Methadone treatment, psychotropic drugs, convulsive therapy, psychosurgery, and sterilization are excluded from the services which a minor may receive without parental consent.

[Refer to Chapter 32, Section 32.9 "Mental Health Applicants," page-16] for minors requesting outpatient mental health treatment and counseling.



**Reminder:**

Children under 12 years old are **NOT** eligible for Minor Consent related to drug or alcohol abuse, a sexually transmitted disease or for outpatient mental health care. **All County employees are mandated reporters, and must make a referral for Child Protective Services (CPS) if abuse or neglect is suspected.**

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## 32.1 Child Abuse Reporting Requirements

### 32.1.1 Mandatory Reporting

Employees of Social Services Agency departments are required to report suspected child abuse of children under 14 years old who are applying for minor consent services. Reasons for application may include the need for medical attention because of a sexually transmitted disease, pregnancy or abortion. However, such referrals may not include any information from which an inference may be drawn that the child applied for, or received, Medi-Cal. **The parent or guardian must NOT be contacted.**

### 32.1.2 Reporting Numbers

- Reports to Child Protective Services via the Child Abuse and Neglect (CAN) Units are made through the following numbers:
  - San Jose Area (408) 299-2071
  - Gilroy/Morgan Hill Area (408) 683-0601
  - Palo Alto Area (650) 493-1186
- Referrals must include only the minimum information as follows:
  - Name of person making the referral
  - Name of child
  - Current location of the child
  - Nature and extent of the injury
  - Fact that led the person making the referral to suspect child abuse.



#### Example:

| A child under 14 years old stated she is pregnant.

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## 32.2 Confidentiality

ALL MINOR CONSENT CASES ARE CONFIDENTIAL, PARENTS OR GUARDIANS **MUST NOT BE CONTACTED**.

The EW must:

- **NOT** contact the child's parent or guardian regarding the minor's application or inform the parent or guardian that there has been an application submitted for Minor Consent services.
- Advise the child that the parent or guardian will **NOT** be contacted.

**IMPORTANT:** DO NOT MAIL ANYTHING TO THE ADDRESS PROVIDED FOR MINOR CONSENT APPLICANTS.

- Not apply parental responsibility rules (tax dependency requirements).
- Maintain confidentiality on Minor Consent cases. However, the child is not required to do so. The parent's or guardian's knowledge of the Minor Consent application is not a reason to deny the application.



### Note:

The Minor Consent application or eligibility determination processes are not affected if the child chooses to inform parents, guardians or anyone else of his/her application for Minor Consent.

Although the County Social Services Agency does not contact parents or guardians directly, State law allows health care professionals to contact parents or guardians of a minor receiving outpatient mental health treatment or counseling, or services for drug or alcohol related problems to encourage them to participate in the treatment. However, the parents or guardians may not be contacted if the health care professionals treating the minor believe it would not be helpful for the minor to have parents or guardians involved.

Parents or guardians are required to pay for any services they receive while participating in the minor's treatment.

### 32.2.1 Confidentiality for Applications Received by Mail, Email, Fax, and Any Other Means

If an application for Minor Consent is received by mail, email, fax, or any other means other than in person or telephone, the Eligibility Worker must express extreme caution when pursuing eligibility for the child. If there is a phone number available on the application (received by mail, email, fax, etc.) the EW may call that number and, without identifying him/herself, ask for the child by **first name only**. If the

person that answers the phone indicates that the child is unavailable the EW must end the call without sharing any information or indicating the reason for the call.

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## 32.3 Definition of “Child” for Minor Consent

The following is the definition of a “child” for Minor Consent:

- Any person under 21 years old living with his/her parent(s) or caretaker relative.



### Exception:

Blind or disabled persons 18 - 21 years old living at home and not in school are considered adults.

- A person 18 - 21 years old, married or unmarried, who is living away from home (i.e. attending school) and who **is being claimed as a tax dependent** by parent(s).
- A person 14 - 18 years old living away from home and who has a parent, caretaker relative or legal guardian handling **ANY** of his/her financial affairs.



### Note:

A person 14 - 18 years old living away from home and handling **all** of his/her **own** financial affairs is considered an ADULT, regardless of tax dependency and is **NOT** eligible for Minor Consent services.

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## 32.4 Who Can Apply

- A child
- Incompetent Child

When a child is not competent to complete or sign required forms, the following persons may do so on the child's behalf:

- If the child has a conservator or executor, then the conservator or executor must complete and sign the necessary forms (including the DHCS 7068).
- If the child has no spouse, conservator, or executor:
  - The county must evaluate and determine the child's need for protective services.

- The MC 4026 and DHCS 7068 may be completed and signed by a relative, a person who has knowledge of the child's circumstances, or a representative of a public agency or the county department.

### 32.4.1 Adults

A person under 21 years old who is an adult (by Medi-Cal definition) is **NOT** eligible for Minor Consent services. An adult may request Medi-Cal through the regular process. [\[Refer to Chapter 5, "Applications"\]](#)



**Example:**

An unmarried 16-year-old person living away from home, handling his/her own financial affairs, is an adult by Medi-Cal definition. The EW would deny the application for Minor Consent (providing the appropriate denial NOA) and process the application for Medi-Cal.



**Example:**

A married 17-year-old person living with his/her parents, whether or not claimed as a tax dependent, is a child by Medi-Cal definition. Process the Minor Consent application.



**Example:**

An 18 - 21 year old disabled individual living with his/her parents and not attending school is an adult by Medi-Cal definition. The parent(s) do not need to apply for him/her. The EW would deny the application for Minor Consent (providing the appropriate denial NOA) and process the application for Medi-Cal.

### 32.4.2 Other Services

[\[Refer to Chapter 5, "Applications"\]](#) for children who are in need of Medi-Cal services other than Minor Consent.

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## 32.5 Existing Public Assistance Case

A separate minor consent case does **NOT** need to be opened for minors who are already included in a public assistance case (CalWORKs or a parent's Medi-Cal case with zero SOC). When a minor is already eligible for zero SOC Medi-Cal, his/her separate application for Minor Consent must be denied.

If a minor is covered under a Managed Care plan the minor should be referred back to the plan for treatment unless the minor is requesting drug/alcohol abuse treatment or mental health treatment. If the minor is enrolled in a Managed Care plan and the minor requests drug/alcohol abuse or mental health treatment, a minor consent application should be taken and processed. [Refer to Chapter 32, Section 32.9 "Mental Health Applicants," page-16]

If the minor is included in a case with zero SOC Medi-Cal (i.e. the parent/caretaker relative/guardian's case) and **no** Other Health Coverage (OHC), then issue a paper immediate need card. Do **NOT** issue a replacement Benefits Identification Card (BIC) because this will deactivate the child's BIC which may be in the parent/caretaker/guardian's possession.

The EW must issue a minor a Minor Consent Medi-Cal card, if the minor is:

- Part of a case with SOC Medi-Cal,
- Part of a family **not** currently receiving Medi-Cal,
- Excluded from another case,
- An ineligible member of another case, or
- Active on parent's Medi-Cal case, but is coded with OHC.

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## 32.6 Application Requirements

Applications for Minor Consent services may be submitted either in-person or by telephone; mail; email; or fax. The applicant may choose to be interviewed in person or by telephone. Applications and all required forms for Minor Consent Services must be signed either with a wet signature, telephonic signature, or through DocuSign. [Refer to Chapter 41, "Telephonic Signature"].

A Minor Consent application is valid for **one month only**. The child must reapply and complete a new MC 4026 (except for outpatient mental health services) and a MC210 or a printed and signed Statement of Facts (SOF) for each month services are needed. [Refer to Chapter 32, Section 32.9 "Mental Health Applicants," page-16] for details about mental health services.

The EW must review the MC 4026 with the minor and verify that the information on the MC 4026 has not changed. The MC 4026 contains specific rights and responsibilities that must be read and signed upon initial application and all following redeterminations.



### Reminder:

All minor consent cases are confidential and parents are not to be contacted regarding their child's receipt of the requested services. A minor must apply for minor consent services. Parent(s) may not apply on behalf of their minor child. Whether applying or renewing eligibility

for the Minor Consent program in person or over the phone, contact must ONLY be directed to the minor applying for or renewing services, and the confidentiality requirement must not be waived under any circumstance.

### 32.6.1 Forms

The application requirements of the Minor Consent program include the following:

- “Request for Eligibility Limited Services” (MC 4026)
- “Statement of Need for Mental Health Services Medi-Cal Minor Consent Program” (SCD 558)
- “Statement of Facts” MC 210 (printed copies of this form are provided by DHCS. This form is obsolete for all other purposes)



#### Important:

The SSApp must NOT be used for Minor Consent.

- “Supplement to Statement of Facts for Retroactive Coverage/Restoration” (MC 210A) (If retro Medi-Cal is requested.)
- “Important Information for Persons Requesting Medi-Cal” (MC 219)



#### Reminder:

The applicant is not required to sign the MC 219. However, it must be documented in the **Maintain Case Comments** window that the form was given to the client and the date provided. An MC 219 is required at intake and at least every 12 months at redetermination, or when a break in aid of one month or more occurs, but not every month when an MC 4026 is completed.

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## 32.7 Eligibility Criteria

Minor consent applicants do not have to provide the same level of verification as an applicant for full-scope Medi-Cal.

**A minor must be considered to be living in the home to be eligible for Minor Consent services.** If they are away temporarily (i.e. school/college), they are considered living in the home. If the minor is living temporarily with another relative or friend, they are considered living in their parent’s home if their parent(s) are legally and financially responsible for the minor (i.e. minor is claimed as a tax dependent).

If a public agency has legal responsibility for a minor, he/she is not eligible for Minor Consent services. If a minor is a Seriously Emotionally Disturbed (SED) child they are considered living in the home in

regard to determining Medi-Cal eligibility. An SED child may apply for Minor Consent. However, Minor Consent will not cover mental health treatment or counseling that is required by the child's Individual Educational Plan (IEP), whether the SED child is in 24-hour care or a day treatment program.

### 32.7.1 Citizenship/Alien Status

- Lack of verification of satisfactory immigration status **does not** prevent eligibility for Minor Consent.
- IEVS and SAVE requirements **do not** apply to Minor Consent.
- Non-citizen minors must be advised that USCIS will **not** be contacted regarding his/her immigration status.



#### Note:

Any Minor Consent applicant who STATES THAT HE/SHE IS NOT LEGALLY PRESENT IN THE U.S. must be denied benefits. However, the EW may **not** request verification of any child's immigration status if the child does not have easy access to such verification. For example, if the child states that he/she does not know his/her status or where his/her documentation papers are, the EW is to assume that he/she is here legally and will not pursue verification of immigration status.

### 32.7.2 Identity

The identity of a child applying for Minor Consent services does **NOT** have to be verified. Minor consent applicants are **NOT** required to provide any identification. Minor consent applicants are **NOT** required to provide their Social Security Number (SSN) for eligibility. If the minor provides his/her SSN at application, the EW must not use the SSN for screening purposes or for any eligibility determination.

### 32.7.3 Responsible Relatives

The parents of the child are not responsible in any way towards the services the child may receive as part of Minor Consent.

Parental responsibility rules do not apply to a child applying for Minor Consent services. (Tax dependency requirements do not apply.)

### 32.7.4 Other Health Coverage

If a minor is included in his/her parent's case and the child's parent(s) have other OHC, the EW must remove the OHC code from the minor's paper immediate need card. EWs must not report OHC



information for children who are applying for Minor Consent services unless the minor has his/her own OHC through an employer.

If an immediate need card is being issued to the minor based on the parent's Medi-Cal case and the minor has an OHC code on MEDS, the EW 15 transaction should be used to immediately and permanently remove the OHC code for that individual. This will avoid any situation in which the Health Insurance System (HIS) will put back the OHC code before the minor receives the Minor Consent services. If a minor no longer needs Minor Consent services, then the OHC must be reentered into MEDS before the next month of eligibility. This action will make sure that services are correctly tied to the OHC.



**Note:**

OHC information must not be entered in CalWIN.

The chart below shows the required EW actions when a Minor Consent applicant has OHC.

**Table 32-2: Procedures for Minor Consent with OHC**

When the Minor...	Then the EW...
Is <b>not</b> currently active in a Medi-Cal case, but has any OHC (from parents, guardians, or other relatives),	Establishes Minor Consent in the minor's own separate case: <ul style="list-style-type: none"> <li>Indicate the minor has no OHC.</li> </ul>
Is active in another Medi-Cal case (for example, parents) and coded for OHC,	Processes the Minor Consent application in the minor's own separate case: <ul style="list-style-type: none"> <li>Indicate the minor has no OHC.</li> </ul>
Is active in another Medi-Cal case (for example, parents) as a child: <ul style="list-style-type: none"> <li>With no share of cost (SOC),</li> <li>Who is eligible for full-scope benefits, and</li> <li>Who has no OHC,</li> </ul>	<ul style="list-style-type: none"> <li>Denies the Minor Consent application.</li> <li>Provides appropriate denial Notice of Action (NOA).</li> <li>Issues an immediate need paper BIC from the active Medi-Cal case. (<b>DO NOT</b> issue a replacement BIC, as this will deactivate the child's BIC which may be in the parent/caretaker's possession.)</li> </ul> <p><b>Exception:</b></p> <ul style="list-style-type: none"> <li>Outpatient mental health services, or</li> <li>Alcohol and drug abuse services</li> </ul> <p>These two services are <b>not</b> available under Managed Care and the minor must be processed for Minor Consent eligibility.</p>

### 32.7.5 Health Care Options

If a child is enrolled in a Medi-Cal Managed Care plan as a health care option instead of fee-for-service Medi-Cal, deny the Minor Consent application and provide NOA (print immediately and hand the NOA to the client in the office).

- Advise the minor to seek care under that plan.
- Issue an immediate need paper BIC from the active Medi-Cal case. (**DO NOT** issue a replacement BIC, as this will deactivate the child's BIC which may be in the parent/caretaker's possession and would breach confidentiality.)

**Exception:**

If the services requested are for outpatient mental health or alcohol and drug abuse, do **NOT** deny a Minor Consent applicant child enrolled in a Medi-Cal Managed Care plan instead of fee-for-service Medi-Cal.

These two services are not available under Managed Care and the minor must be processed for Minor Consent eligibility as there is no Managed Care code for this program.

### 32.7.6 Income

The following rules apply in the treatment of income in a Minor Consent case:

- Only the child's available income is used to determine SOC.

**Example:**

Social Security Administration benefits for a child are sent to the parent or guardian. This income is considered unavailable to the child and not included in the child's budget.

- There is no income in-kind to the child from parents or guardians.
- The student exemption on earned income applies to Minor Consent clients.

### 32.7.7 Property

Only the child's available property is used to determine eligibility. The property of parents or guardians is **NOT** considered. **DO NOT** contact parents or guardians about resources held in trust for the child.

### 32.7.8 Case Rules

A minor applying for Minor Consent **MUST BE** in his/her own separate case. **DO NOT** add other family members (including newborns) to a Minor Consent case.

[Refer to Chapter 32, Section 32.8 "Pregnant Minors," page-13] for additional information about an unmarried father in the home.

### 32.7.9 Maintenance Need

The maintenance need would normally be for one (1) person (the minor). However, a pregnant minor would have a maintenance need for 2 persons.

### 32.7.10 Minor Consent Aid Codes

Only four aid codes are used for Minor Consent.

**Table 32-3: Minor Consent Aid Codes**

Aid Code	Description
7M	Restricted to minors who are at least 12 years old and requesting Minor Consent solely for sexually transmitted diseases, drug and alcohol abuse, family planning or sexual assault services. NOT TO BE USED FOR MENTAL HEALTH SERVICES.
7N	<ul style="list-style-type: none"> <li>Used only for pregnant minors with no age restriction.</li> <li>Limited to pregnancy-related, family planning, and postpartum services. (Always has a zero SOC.)</li> </ul>
7P	Restricted to minors who are at least 12 years old and requesting Minor Consent for OUTPATIENT MENTAL HEALTH and sexually transmitted diseases, drug and alcohol abuse, family planning, or sexual assault services.
7R	Restricted to minors under 12 years old who are requesting Minor Consent for family planning and sexual assault services. NOT TO BE USED FOR MENTAL HEALTH, DRUG OR ALCOHOL ABUSE, OR SEXUALLY TRANSMITTED DISEASES.

Selection of the appropriate aid code is based on two factors:

- Age of the child, and
- Type of service requested.



**Note:**

When a pregnant minor requests a service outside the scope of those provided under aid code 7N (pregnancy related), two Minor Consent aid codes will be necessary.



**Example:**

A 13-year-old pregnant minor applies for Minor Consent. The EW approves Minor Consent using aid code 7N for pregnancy related services. The Minor also requests mental health services with appropriate documentation. EW approves the other Minor Consent service using aid code 7P. Only one MC 4026 is required and only one NOA is issued. One paper BIC must be issued.

### 32.7.11 Notice of Action

A child applying on the basis of Minor Consent must be given a NOA in the office at the end of the interview and eligibility determination (if interviewing in person), or be mailed with a NOA to an address provided by the minor consent applicant.

NOAs are to be issued for each month a Medi-Cal eligibility determination is made.

The MC 239 V is the appropriate NOA to use for Minor Consent situations. This NOA has the citation sections pre-populated on the form. The EW should advise the applicant to read and destroy the NOA if confidentiality may be at risk due to their living situation.

EWs may also use the county form, “Medi-Cal Approval Notice” (SCD 1225) (8/97).



#### Reminder:

All minor consent cases are confidential. Notices of Action (NOAs) or paper BIC cards shall not be sent to the home address, to preserve the confidentiality of the minor’s case.

### 32.7.12 Period of Eligibility

Minor Consent cases are certified for **one month at a time**. If an ongoing need exists for Minor Consent then:

- The minor must reapply each month, and
- A new MC 4026 (except for outpatient mental health services) is completed and eligibility redetermined.



#### Note:

For outpatient Minor Consent mental health services, the minor must reapply each month. A new SCD 558 or other acceptable mental health statement is required EACH MONTH to redetermine eligibility for ongoing Minor Consent. The minor is not required to complete an MC 4026 each month. [[Refer to Chapter 32, Section 32.9 "Mental Health Applicants," page-16](#)]

### 32.7.13 Reporting Responsibility

Children receiving Minor Consent, including mental health services, are required to report to their EW each month, changes which may impact their eligibility. The changes may be reported to the EW either in-person or by telephone; mail; email; fax, or any other means.

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## 32.8 Pregnant Minors

### 32.8.1 Verification

A minor does **NOT** need to provide pregnancy verification for Minor Consent.

### 32.8.2 Unmarried Father

If an unmarried minor mother is living with the father of the unborn, **DO NOT** add the unmarried father to the minor mother's Minor Consent case.

If the unmarried father is requesting Medi-Cal for himself and/or his other mutual or separate child(ren), then a separate case must be opened with minor mother as *Not Requesting* Medi-Cal. Minor mother will be an ineligible member in the case.

The EW must first evaluate all members (except minor mother) in the case for MAGI Medi-Cal. If ineligible for MAGI Medi-Cal, then evaluate for Non-MAGI Medi-Cal. If there is a SOC, then apply *Sneede v. Kizer* rules. [Refer to "[Sneede v Kizer](#)," page 28-1]



#### Example:

A pregnant 16-year-old, living with her parents, is applying for Minor Consent. The father of the unborn (17 years old) is also requesting Medi-Cal and is residing with minor mother. He is also employed. There will be 2 separate cases in this scenario. The pregnant 16-year-old will have her own separate Minor Consent case (no one else will be in her case). The 2nd case will be both unmarried minor parents but the pregnant 16-year-old minor will be *Not Requesting* Medi-Cal. She will be an ineligible member in the 2nd case.



#### Note:

If an unmarried father is requesting Minor Consent, then he must have his own separate case. **DO NOT** add the minor mother or newborn to his Minor Consent case.

### 32.8.3 Newborn

Once the child is born, the newborn must be in a separate case from minor mother's Minor Consent case. **DO NOT** add the newborn to minor mother's Minor Consent case.

- If the newborn is only living with the minor mother (father is not in the home), the minor mother will be *Not Requesting* Medi-Cal and an ineligible member in the newborn's separate case.

- If the father of the unborn child is **NOT** living with minor mother, then the newborn (common child) must be in his/her own separate case.
- If the father of the unborn child is living with minor mother and he has his own separate case, then the newborn (common child) must be added to the father's case.
- The minor mother's unborn can also be included in the senior parent's case if the senior parent(s) are aware of the pregnancy.

### 32.8.4 Pregnant Minor Needing Services Other Than Pregnancy Services

Pregnant minors requesting Minor Consent pregnancy services receive the zero SOC pregnancy aid code 7N. If the pregnant minor requests services outside the scope of those provided under aid code 7N, two Minor Consent aid codes will be necessary.

#### No Share of Cost



##### Example:

A 13-year-old pregnant minor applies for Minor Consent services. The EW approves Minor Consent using aid code 7N for pregnancy related services. The minor also requests mental health services with appropriate documentation. The EW approves the other Minor Consent service using aid code 7P. Only one MC 4026 is required and only one NOA is issued as both programs are zero SOC. One paper BIC must be issued.

#### Share of Cost



##### Example:

A pregnant minor applies for Minor Consent services. The EW determines that she is eligible but due to her income she would have a SOC. The EW approves Minor Consent using aid code 7N with zero SOC as the minor is requesting pregnancy related services. The EW also approves the other Minor Consent services under the appropriate aid code with the appropriate SOC. One MC 4026 is required; however, two NOAs are necessary because one program has a SOC and the other no SOC. One paper BIC must be issued.

### 32.8.5 Continued Eligibility

Continued Eligibility (CE) rules apply to Minor Consent mothers and Deemed Eligibility (DE) rules apply to their newborns. [[Refer to Chapter 29, "Infants, Children, and Pregnant Individuals"](#)]

## Mothers

Any increase in the minor mother's income is **not** counted in her SOC determination for pregnancy related services. However, she must have met her SOC (if applicable) at least once during her pregnancy, in order to qualify for CE.

## Infants

An infant born to a Minor Consent mother is entitled to DE benefits.

A separate case must be created for the newborn with minor mom as the *Head of Household* and case applicant. The minor mom will be an ineligible member in the child's separate case.

The EW will need to obtain the following:

- The newborn's name, date of birth, and gender.



### Note:

An SSN is not required until the child reaches 1 year old.

- A Single Streamline Application (CCFRM 604) or Statement of Facts (if none is on file).



### Reminder:

The newborn is exempt from income increases until he/she turns 1 year old.

## 32.8.6 Postpartum Benefits

A Minor Consent client is entitled to zero SOC postpartum benefits for 60 days after her pregnancy ends. She is **not** required to file a separate application.

The EW must explain that the client is entitled to postpartum benefits but the client must request to receive postpartum benefits.

Issue 60-day postpartum benefits according to the chart below:

**Table 32-4: Postpartum Benefits**

If the minor...	Then the EW must...
Received Minor Consent benefits with zero SOC in the month her pregnancy ends,	<ul style="list-style-type: none"> <li>• Advise the client of postpartum benefits, including family planning services.</li> <li>• When the minor requests postpartum benefits, submit an SCD 1296 to the CST to extend Minor Consent benefits for another month. (An MC 4026 is not required.)</li> <li>• Hand-issue a NOA.</li> </ul>
Received Minor Consent benefits with a SOC, and meets her SOC in the month pregnancy ends,	<ul style="list-style-type: none"> <li>• Issue zero SOC postpartum benefits under aid code 7N (An MC 4026 is not required, but the minor must request these benefits.)</li> <li>• Due to Minor Consent confidentiality, issue aid code 7N as an immediate need paper BIC.</li> <li>• Hand-issue a NOA.</li> </ul>

A Minor Consent recipient may continue to need Medi-Cal for family planning services once her pregnancy has ended. Advise the minor that these services are available under Minor Consent aid codes 7M, 7P, or 7R.

## 32.9 Mental Health Applicants

### 32.9.1 Applicants

A child who applies for Minor Consent due to outpatient mental health care is **NOT** required to complete an MC 4026 at application or reapplication. However, an SCD 558 or other acceptable mental health needs statement and a paper MC210 or a printed and signed SOF are required.

An application for Minor Consent, mental health services, must be processed as follows:

- If a child refuses to complete or sign the SCD 558, or provide a statement of need for mental health care, then the EW must deny the application.
- If a child is **NOT** competent to complete or sign the SCD 558, or provide the mental health statement, then the EW must deny the application for mental health services. However, the child may still be eligible for other Minor Consent services. [\[Refer to Chapter 32, Section 32.4 "Who Can Apply," page-4\]](#)



### 32.9.2 Mental Health Statement

Minors requesting outpatient mental health treatment and counseling must provide a statement from a mental health professional which states the:

- Child needs mental health treatment or counseling,
- Estimated length of time treatment will be needed, and
- Child meets both of the following conditions:
  - Is mature enough to participate intelligently in the mental health treatment or counseling, AND
  - Is one of the following:
    - In danger of causing serious physical or mental harm to self or others without mental health treatment or counseling; or
    - The alleged victim of incest or child abuse.

Below is a list of mental health professionals who can provide the mental health statement:

- Licensed marriage, family or child counselor
- Licensed educational psychologist
- Credentialed school psychologist
- Clinical psychologist
- Licensed psychologist
- Licensed Clinical Social Worker (LCSW)
- Psychiatrist.



**Note:**

The minor may contact the Santa Clara County Mental Health Department to request an SCD 558.

Central Wellness & Benefits Center  
2221 Enborg Lane  
San Jose, CA 95128  
Phone: (800) 704 - 0900 or (408) 885 - 6220

EWs may give applicants the SCD 558 to be completed by the mental health professional in order to meet the above requirement. A new SCD 558 or other acceptable mental health statement must be submitted each month to re-approve Minor Consent in the following month.

### 32.9.3 Eligibility

Once determined eligible for Minor Consent outpatient mental health services, the child is certified for one month at a time. If an ongoing need exists, the child must reapply each month and provide the EW with a new mental health statement or SCD 558, and eligibility will be redetermined.

Minors receiving outpatient mental health services may also need other types of Minor Consent benefits. Aid code 7P provides for mental health services as well as sexual assault, drug/alcohol abuse, family planning, and sexually transmitted diseases.

### 32.9.4 Mental Health Treatment Limitations

Currently there is no limitation on the mental health services that a Minor Consent client can receive. Minor Consent is a state-funded program that provides confidential mental health services to eligible minors.

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## 32.10 Monthly Reapplications

If a minor received Minor Consent in the previous month and reapplies in the following month, the Continuing EW must:

- Obtain an MC 4026 from the minor.
- Obtain an MC 210 or a printed and signed SOF.



#### Exception:

An MC 4026 is not required for mental health services, but a mental health needs statement (SCD 558, etc.) must be on file each month.

- Complete an SCD 1296 and submit it to the CST as soon as possible, extending Minor Consent for another month.



#### Note:

Do not delay submitting an SCD 1296 as eligibility must be activated in order for the provider to confirm monthly eligibility status.

- Do not issue another Minor Consent paper BIC, unless the minor has lost or misplaced the one previously issued. The paper BIC is valid for one year.

**Note:**

All minors must reapply each month and complete an MC 4026 (except for mental health services) and a paper MC 210 or a printed and signed SOF.

- Hand-issue a new NOA.

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## 32.11 Issuance Procedures

### 32.11.1 Paper Benefits Identification Card

The Minor Consent BIC is a paper BIC. It is for identification purposes only, and does not indicate Minor Consent eligibility.

The paper BIC shows an ISSUE DATE and a GOOD THRU date. The GOOD THRU date will be 365 days from the issuance date. This means the BIC is valid as an identification card only for one year.

These dates may be misleading for Minor Consent recipients and providers. Some may interpret the ISSUE and GOOD THRU dates to mean period of Minor Consent eligibility.

Minor Consent cards are certified for one month at a time. EWs must explain the requirement to reapply each month that additional Minor Consent services are needed. Minor Consent will show a one month closed period of eligibility on MEDS.

### 32.11.2 Approvals in CalWIN

Minor Consent cases are established in CalWIN; however, the actual issuance of the Minor Consent services is completed through a MEDS online transaction.

On monthly reapplications, do not complete Application Registration on another application.

Refer to [User's Guide to State Systems Handbook](#) for complete instructions on case approvals.

### 32.11.3 MEDS Online Procedures

To assure confidentiality of Minor Consent cases, Minor Consent benefits must be activated online each month. As a result, a Minor Consent case cannot be approved ongoing MEDS eligibility.

Refer to [User's Guide to State Systems Handbook](#) for complete instructions on MEDS online issuances of Minor Consent Medi-Cal benefits.

- If the minor has a SOC, the Medi-Cal provider will enter the obligation to the SOC database. If a provider cannot or will not do so, the EW must submit a request [MEDS SOCO] to the MTO to reduce the SOC.
- To protect the confidentiality of minor applicants, SSNs **MUST NOT** be entered in CalWIN or MEDS. This is to prevent the linking of limited services and regular Medi-Cal records. The MEDS record will show a pseudo number as the MEDS ID.
- The EW **MUST NOT** enter a home address. **Use the district office's address instead.**
- Do **NOT** create Child Health and Disability Prevention (CHDP) referrals.

### 32.11.4 Benefits Identification Card Mail Procedures

The MC 4026 provides applicants with the option of having their Minor Consent paper BIC sent to a mailing address.

A Minor Consent paper BIC and NOA are mailed only when the client makes the request on the MC 4026. Minors applying for mental health services (which do not require an MC 4026) who want their BIC or NOA mailed must make the request in writing. Scan the written request into IDM.

EWs must follow the procedures below when the minor indicates that he/she wants the BIC mailed:

**Table 32-5: Minor Consent BIC Mail Procedures**

Step	Action
1.	Discuss confidentiality and confirm with the minor that he/she wants the BIC mailed to the address indicated on the MC 4026.
2.	Enter the district office address as the home address and mailing address in CalWIN.
3.	Complete an SCD 1296 to the CST with instructions to return the paper BIC to the EW.
4.	Manually mail the paper BIC to the address indicated on the MC 4026.
5.	Manually mail the NOAs to the address indicated on the MC 4026, if not previously hand-issued to the client.

## 32.12 Inter County Transfer and Ex Parte Process

Inter County Transfer (ICT) and Ex Parte policies do **NOT** apply to Minor Consent.

- An Ex Parte review must **NOT** be conducted as the SSN must not be used to screen for other eligibility.

- EWs must **NOT** contact the minor or other family members to request additional information due to confidentiality rules. If information is missing the EW may need to deny Minor Consent services.