Minor Consent and Confidentiality

A Compendium of State and Federal Laws



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National Center for Youth Law

The National Center for Youth Law (NCYL) is a national, non-profit advocacy organization that has fought to protect the rights of children and youth for more than fifty years. Headquartered in Oakland, California, NCYL leads high impact campaigns that weave together litigation, research, policy development, and technical assistance.

What this compendium is:

This is a compendium of laws that may be relevant when minors wish to access certain types of sensitive health care and/or wish to access care on their own consent. Each state compendium begins with a chart entitled "quick guide." The topics listed in the quick guide represent the categories of laws most frequently identified across all states. A circle next to a particular category signifies that a relevant state or federal law was found. Where a law was found, those laws are described in the "summary" section. Each state's compendium ends with a list of resources, including links to a series of Appendices that delve deeper into key topics.

What this compendium is not:

This is not a comprehensive guide to all consent, confidentiality, and disclosure laws in any state. For example, the compendium does not include all laws that allow or require parents or persons acting *in loco parentis* to consent to care. Nor does it summarize disclosure laws that may allow or require disclosure of health information for mandated child abuse or public health reporting.

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Quick Guide

See glossary for explanation of categories and definitions of terms.

General

- Age of Majority
- Emancipation
- Minor Marriage

Minor Consent to Health Care-Services

- Abortion³
 - **Emergency Care**
- Family Planning/Contraceptives
- **Outpatient Mental Health Care**
- **Pregnancy Related Care**

Reportable, Communicable, Infectious Disease Care

- Sexual Assault Care
- Sexually Transmitted Infection/ Disease/HIV Care
- Substance Use Care

Confidentiality and Disclosure

- Confidentiality/Access to Records
- Disclosure to Parents/Guardians
 - Insurance Claims/Billing

Minor Consent to Health Care-Minor's **Status**

- S **Emancipated Minor**
 - High School Graduate
- S Married Minor
 - Minor, Age or Maturity
 - Minor in Armed Forces
- Minor Living Apart from Parent/ Guardian
 - Minor Parent
- S Minor in State Custody **Pregnant Minor**

Other

- Anatomical Gift/Donation
- Conversion Therapy,⁴ Ban
- Electroconvulsive Treatment. **S** Restriction
- Financial Responsibility
- Gender Affirming Care
- Good Faith Reliance/Immunity from Liability
- Minor Parent, Consent for Child's Care
- Reproductive Freedom
- Shield Laws

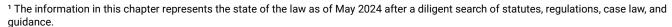
Key

S

State law found⁵



Federal/other law may apply



² This chapter does not address all the consent and confidentiality rules that may apply when minors are in special care situations such as living with a relative, in federal or state custody, or under court jurisdiction (including dependency, delinquency, or immigration custody).

⁵ Symbol indicates law found that either allows providers to offer services without parental consent or explicitly gives minors authority to consent.



³ This category includes parental involvement laws.

⁴ This category includes statutes or case law that ban conversion therapy or prohibit banning of conversion therapy.

General

Age of Majority

Colo. Rev. Stat. § 13-22-101 provides that the age of majority is 18 years for certain purposes, including "to make decisions in regard to his own body and the body of his issue, whether natural or adopted by such person, to the full extent allowed to any other adult person."

Emancipation

No statute expressly defines emancipated minor in general or specifies a legal process by which a minor may become emancipated; however, some statutes and court decisions acknowledge emancipation for specific purposes. However, references to emancipated minors are found in many sections of state law. For example, *Colo. Rev. Stat. §* 19-7-307 provides for a minor in foster care to

petition for emancipation from the foster system. *Colo. Rev. Stat. §* 19-2.5-203 defines "emancipated juvenile" for purposes of juvenile justice proceedings. *Colo. Rev. Stat. §* 13-21-107.5 defines "emancipated minor" for purposes of damages claims in court. *Colo. Rev. Stat. §* 25-4-902 provides that an "emancipated student" under age 18 may authorize immunization for school purposes. *Colo. Rev. Stat. §* 1519-204 authorizes an emancipated minor to make an anatomical gift. *Colo. Rev. Stat. §* 15-14-210 refers to emancipation as a basis for termination of guardianship.

Minor Marriage

Colo. Rev. Stat. §§ 14-2-106 and 14-2-108 provide that minors age 16 years and older may marry with judicial approval.

Consent to Health Care

Consent for healthcare refers to granting permission for a healthcare service. A healthcare provider generally must obtain consent before providing care. Adults typically consent to their own healthcare, except in cases of legal incapacity. State and federal laws and court decisions help establish who has the legal authority to provide consent on behalf of minors. Typically, federal and state law require parent or guardian consent for a minor's care. However, the laws in every state include exceptions that allow or require others to consent, in addition to or instead of a parent or guardian. These exceptions include exceptions that allow minors to consent to some or all health care based on the minor's "status" (situation in life) and exceptions that allow minors to consent to certain types of care based on the services sought. Sometimes, these laws are written in a way that allows providers to offer services without parental consent; sometimes, they are written in a way that explicitly gives minors the authority to consent. Federal law also allows minors to consent to specific care in some cases. See Appendix B for more on consent including the important role of parents and other adults in minors' healthcare.

The following sections summarize the minor consent laws in the state:

Minor Consent-Minor's Status

Emancipated Minor

No statute explicitly grants emancipated minors the right to consent to health care generally, but several statutes provide this right in specific circumstances. For example, *Colo. Rev. Stat. § 25-4-902* provides that an "emancipated student" under age 18 may authorize immunization for school purposes, and *Colo. Rev. Stat. § 15-19-204* authorizes an emancipated minor to consent to donation of the minor's body or body part.

Married Minor

Colo. Rev. Stat. §§ 13-22-103 and 14-2-109.3. provide that any married or divorced minor may consent for hospital, medical, dental, emergency health, and surgical care, as well as tissue or organ donation; and parent consent is not necessary.

Minor Living Apart from Parent/Guardian

Colo. Rev. Stat. § 13-22-103 provides that any minor age 15 or older who is living separate and apart from their parents or legal guardian, with or without their consent, and is managing their own financial affairs, regardless of the source of income, may consent for hospital, medical, dental, emergency health, and surgical care as well as organ or tissue donation and parent consent is not necessary. When such consent is given, the minor shall have the same rights, powers, and obligations as if they had reached the age of majority. Colo. Rev. Stat. § 25-6-102 prohibits an unmarried person under age 18 years from consenting to permanent sterilization without parent or guardian consent.

Minor in State Custody

Colo. Rev. Stat. § 18-1.3-407(4.5) provides that the consent of the parent, parents, or legal guardian of a minor who



has been sentenced to the youthful offender system is not necessary in order to authorize hospital, medical, mental health, dental, emergency health, or emergency surgical care. *Colo. Rev. Stat. § 25-6-102* prohibits an unmarried person under age 18 years from consenting to permanent sterilization without parent or quardian consent.

Minor Consent-Services

Abortion

Abortion is legal and protected in Colorado. As a general matter, *Colo. Rev. Stat. §* 25-6-403 provides that every "pregnant individual has a fundamental right to continue a pregnancy and give birth or to have an abortion and to make decisions about how to exercise that right" and *Colo. Rev. Stat. §* 25-6-404 prohibits any public entity from denying, restricting, interfering with, or discriminating against an individual's fundamental right to have an abortion. For up to date information on the status of abortion protections and restrictions in Colorado, see Center for Reproductive Rights, After Roe Fell: Abortion Laws by State.

A minor may consent for abortion, however *Colo. Rev. Stat. §§ 13-22-704 - 13-22-708* require parent or guardian notice before an abortion may be performed upon an unemancipated minor under age 18; and the abortion cannot be performed until at least 48 hours after written notice of the abortion has been delivered personally or via postpaid certified mail to a parent. The law contains a judicial bypass and exceptions for emergencies and for child abuse and neglect. *Colo. Rev. Stat. § 13-22-704* and *Colo. R. Civ. Procedure. 2(a)* provide the procedures for obtaining a judicial bypass. *For more information on judicial bypass, find the "Under Age __" section on your state's link in If When How's Abortion Laws by State.*

For up to date information on the status of abortion protections and restrictions in all 50 states and DC, see Center for Reproductive Rights, After Roe Fell: Abortion Laws by State. See also Appendix C. These laws are changing rapidly, so consultation with counsel is also essential.

Family Planning/Contraceptives

Colo. Rev. Stat. § 13-22-105 provides that, with the consent of the minor, a licensed, certified, or registered health care provider acting within the provider's scope of practice may furnish contraceptive procedures, supplies, or information to a minor without notification to or the consent of the minor's parent or parents, legal guardian, or any other person having custody of or decision-making responsibility for the minor.

Colo. Rev. Stat. § 25-6-102 provides that all medically acceptable contraceptive procedures, supplies, and information must be readily accessible to each person regardless of sex, sexual orientation, gender identity,

gender expression, race, age, income, number of children, marital status, citizenship, or motive. However, unmarried minors may not consent to permanent sterilization without the consent of a parent or guardian.

Colo. Rev. Stat. § 25-6-404 prohibits any public entity from denying, restricting, interfering with, or discriminating against an individual's fundamental right to (a) use or refuse contraception, (b) continue a pregnancy and give birth, or (c) have an abortion.

See Appendix I for information about the Title X Family Planning Program and minor consent for family planning, including contraception services. See Appendix C for discussion of contraception and the U.S. Constitution.

Outpatient Mental Health Care

Age 15 or older:

Colo. Rev. Stat. § 27-65-104 provides that a minor who is age 15 years or older may consent to receive "mental health services" with or without the consent of a parent or legal guardian rendered by a facility, a professional person, or mental health professional.

Age 12 or older:

Colo. Rev. Stat. § 12-245-203.5 provides that a "mental health professional" may provide outpatient psychotherapy services to a minor who is age 12 years or older without the consent of the minor's parent or legal guardian, if the mental health professional determines that:

- (a) the minor is knowingly and voluntarily seeking such services, and
- (b) the provision of psychotherapy is clinically indicated and necessary to the minor's well-being.

For purposes of Colo. Rev. Stat. § 12-245-203.5, Colo. Rev. Stat. § 12-245-202 defines "psychotherapy services" as "treatment, diagnosis, testing, assessment, or counseling in a professional relationship to assist individuals or groups to alleviate behavioral and mental health disorders, understand unconscious or conscious motivation, resolve emotional, relationship, or attitudinal conflicts, or modify behaviors that interfere with effective emotional, social, or intellectual functioning. Psychotherapy follows a planned procedure of intervention that takes place on a regular basis, over a period of time, or in the cases of testing, assessment, and brief psychotherapy, psychotherapy can be a single intervention."

Colo. Rev. Stat. § 12-245-203.5 provides that a minor may not refuse psychotherapy services when a mental health professional and the minor's parent or legal guardian agree psychotherapy services are in the best interest of the minor. Colo. Rev. Stat. § 12-245-203.5 includes definitions of "mental health professional" and "psychotherapy services' relevant to that provision.



Pregnancy-Related Care

Colo. Rev. Stat. § 13-22-103.5 provides that, notwithstanding other provisions, pregnant minors may consent to their own prenatal, delivery, and post-delivery medical care related to the intended live birth of a child.

Colo. Rev. Stat. § 25-6-404 prohibits any public entity from denying, restricting, interfering with, or discriminating against an individual's fundamental right to (a) use or refuse contraception, (b) continue a pregnancy and give birth, or (c) have an abortion.

See Appendix I for information about the Title X Family Planning Program and minor consent for family planning services, including certain pregnancy-related care.

Sexual Assault Care

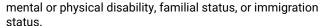
Colo. Rev. Stat. § 13-22-106 provides that with the consent of a minor who indicates that they were the victim of a sexual offense, under Colo. Rev. Stat. Title 13, Article, 3, Part 4, a licensed physician may perform the customary and necessary examinations to obtain evidence of the sexual offense, and may prescribe for and treat the minor for any immediate condition caused by the sexual offense. However, the provider must make a reasonable effort to notify the parents or guardians or any other person with custody or medical decision-making authority for the minor prior to commencing examination or treatment of the minor. If the parent or guardian or person with custody or medical decision-making authority objects to treatment, the provider may examine and treat the minor, but the provider must make a child abuse report to the county department or local law enforcement agency pursuant to Colorado mandated reporting law, Colo. Rev. Stat. §§ 19-3-301 - 19-

Colo. Rev. Stat. § 13-22-106 provides that if a minor is unable to give consent by reason of age or mental or physical condition and it appears that the minor has been the victim of a sexual offense, the physician shall not examine or treat the minor but shall proceed with a mandated child abuse report.

Sexually Transmitted Infection/Disease/HIV Care

Colo. Rev. Stat. § 25-4-409 provides that any health-care provider or facility may, upon a minor's request, perform a diagnostic examination on the minor for a sexually transmitted infection (STI), treat the minor for a STI, or discuss, administer, dispense, or prescribe preventive measures or medications for STIs without the consent or notification of the minor's parent. Colo. Rev. Stat. § 25-4-402 includes a definition of "sexually transmitted infections" that includes HIV.

Colo. Rev. Stat. § 25-4-403 provides that programs and services that provide for the investigation, identification, testing, preventive care, and treatment of sexually transmitted infections are available regardless of a person's actual or perceived race, creed, color, ancestry, national origin, religion, age, sex sexual orientation, gender identity,



Colo. Rev. Stat. § 25-4-410 specifies consent and counseling requirements for STI testing and treatment.

Colo. Rev. Stat. § 25-4-411 includes provisions for confidential and anonymous HIV counseling and testing.

See Appendix I for information about the Title X Family Planning Program and minor consent for family planning, including STI/STD/HIV services.

Substance Use Care

Colo. Rev. Stat. § 13-22-102 provides that notwithstanding any other provision of law, a minor may consent for examination, prescription, and treatment for use of drugs or a substance use disorder without the consent of or notification to their parents or guardian.



Confidentiality & Disclosure

Federal and state laws determine the privacy and confidentiality of medical and health information. Different laws may apply depending on the health services provided, the source of funding, the location of care, the type of provider, and the characteristics of the patient.

One law with overarching importance is the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule, a federal regulation that protects the privacy of patient health information held by health care providers who transmit certain information electronically and other "covered entities." As a general rule, HIPAA prohibits healthcare providers from disclosing protected health information without a signed authorization. HIPAA specifies who must sign an authorization to release information. When minors have consented for their own care, HIPAA says the minors usually must sign the release. HIPAA includes exceptions that allow or require a provider to disclose protected information without an authorization in some circumstances, such as to meet state child abuse reporting requirements. HIPAA also addresses when parents and guardians may access a minor's health information: It explains how this HIPAA rule intersects with state law and other federal laws regarding parent access, and includes rules for what to do about parent access when state law is silent, and for authorized limitations on access in some situations.

See Appendix H for a detailed discussion of HIPAA. Other appendices address other important federal health privacy laws that may apply in addition to, or instead of, HIPAA. See Appendix I (Title X, family planning), Appendix J (Part 2, substance use), Appendix K (FERPA, education records), Appendix L (insurance and billing), and Appendix M (21st Century Cures Act Information Blocking, EHI).

The following sections summarize selected state laws related to confidentiality, access to records, and disclosure to parents/guardians:

Confidentiality/Access to Records

Colo. Rev. Stat. §§ 25-1-801 and 25-1-802 provide that medical records in the custody of a health facility or health care provider are subject to inspection by the patient or patient's designated representative with a few exceptions. These sections specify the types of "health facility" and "health care provider" covered by the requirements. These sections do not require a person responsible for the diagnosis or treatment of minors for sexually transmitted infections pursuant to Colo. Rev. Stat. § 25-4-409 1 or for diagnosis or treatment of a substance use disorder or use of drugs pursuant to Colo. Rev. Stat. § 13-22-102 to release patient records of such diagnosis or treatment to a parent or quardian.

See Appendix H for information about minors' access to and control of their medical information under HIPAA when they have consented to their own care.

Federal laws that may apply in addition to or in lieu of HIPAA and state laws

See **Appendix K** for information about federal confidentiality protection for education records.

See **Appendix J** for information about federal confidentiality protections for certain substance use treatment records.

See Appendix I for information about federal confidentiality protection for information about services delivered using Title X Family Planning Program funding.

See Appendix M for information about disclosure of information to parents under the 21st Century Cures Act Information Blocking Rule.

Disclosure of Health Information to Parents/Guardians

Mental Health

Colo. Rev. Stat. § 27-65-104 provides that a professional person providing mental health services to a minor age 15 years or older who has given their own consent for the services may, with or without the minor's authorization, advise the parent or legal guardian of the services given or needed.

Colo. Rev. Stat. § 12-245-203.5, provides that if a minor age 12 years or older receives mental health services based on their own consent the mental health professional may notify the minor's parent or legal guardian of psychotherapy services given or needed, with the minor's consent, unless notifying the parent or guardian would be inappropriate or detrimental to the minor's care. The mental health professional shall engage the minor in a discussion about the importance of involving and notifying the minor's parent or legal guardian and shall encourage notification to help support the minor's care and treatment. The professional must document when attempts to contact or notify a parent or guardian are made and whether the attempt was successful or unsuccessful.



Colo. Rev. Stat. § 12-245-203.5 also provides that a mental health professional may notify the parent or guardian of services given or needed, without the minor's consent, if the mental health professional, in their professional opinion, believes the minor is unable to manage the minor's care or treatment.

Colo. Rev. Stat. § 12-245-203.5 provides that a mental health professional is required to notify a minor's parents or legal guardian if a minor receiving psychotherapy services communicates a serious threat of imminent physical violence against a specific person/s, unless such notification would be inappropriate or detrimental to the minor's care and treatment.

Sexually Transmitted Infection

Colo. Rev. Stat. § 25-4-409 provides that diagnosis, care, treatment, and prevention for a sexually transmitted infection provided to a minor are confidential and a heathcare provider or facility must not disclose information related to that care to any person other than the minor if the minor is older than age 13 years. A healthcare provider or facility may – based on their discretion – involve the minor's parent or legal guardian if the minor is age 13 years or younger. A health-care provider is required to counsel the minor on the importance of bringing the minor's parent or legal guardian into the minor's confidence regarding the consultation, exam, or treatment.

Sexual Offense

Colo. Rev. Stat. § 13-22-106 provides that prior to examining or providing treatment to a minor who claims they are a victim of a sexual offense, the physician shall make a reasonable effort to notify the parent or guardian of the minor.

Substance Use

Colo. Rev. Stat. § 13-22-102 provides that a physician is not required to notify the parent or guardian of any examination

or treatment of a minor for substance use disorder or use of drugs.

HIPAA rules relevant to disclosure to parents/ quardians

See Appendix H for information about minors' access to and control of their medical information under HIPAA when they have consented to their own care, the HIPAA rule when state law is silent as to parent access, and the HIPAA rule authorizing providers to limit access to records in certain circumstances.

Federal laws that may apply in addition to or in lieu of HIPAA and state laws

See Appendix K for information about federal confidentiality protection for education records.

See Appendix J for information about federal confidentiality protections for certain substance use treatment records.

See Appendix I for information about federal confidentiality protection for information about services delivered using Title X Family Planning Program funding.

See Appendix M for information about disclosure of information to parents under the 21st Century Cures Act Information Blocking Rule.

Insurance Claims/ Billing

See Appendix L for information about confidentiality protection in the billing and insurance claims process under the HIPAA Privacy Rule.

Other

This section summarizes a range of laws that may not explicitly address minor consent or disclosure of information but that health care providers often have questions about when minors seek care, especially when they seek care on their own.

Anatomical Gift/Donation

Colo. Rev. Stat. § 15-19-204 provides that emancipated minors may make an anatomical gift of the minor's body or body part during their lifetime.

Colo. Rev. Stat. § 13-22-103 provides that a minor living apart from parents or guardian may consent to tissue or organ donation.

"Conversion Therapy," Ban

For up to date information on the status of statutes or case law that ban conversion therapy for minors, or prohibit state entities from banning conversion therapy for minors in all 50 states and DC, see Movement Advancement Project's "Equality Maps: Conversion "Therapy" Laws." These laws are changing rapidly so consultation with counsel is essential.



Electroconvulsive Treatment, Restriction

Colo. Rev. Stat. § 13-20-403 prohibits electroconvulsive treatment on a minor under age 16 years. Electroconvulsive treatment may be performed on a minor age 16 years or older only with the concurring approval of two persons licensed to practice medicine and specializing in psychiatry and a parent or guardian of such minor.

Financial Responsibility

Colo. Rev. Stat. § 13-22-103 provides that a health care professional who relies in good faith on the consent of a minor who is living apart from his or her parents or guardian or who is married is not liable to the parents or guardian for failure to obtain their consent for the care.

Colo. Rev. Stat. § 18-1.3-407(4.5) provides that the parent, parents, or legal guardian of a minor in the youthful offender system is not liable to pay the charges for the care provided to the minor based on the minor's consent.

Gender Affirming Care

There are no restrictions on access to gender affirming care in Colorado law at this time.

For up to date information on the status of restrictions on gender affirming care for minors, see Movement

Advancement Project's "Equality Maps: Bans on Best

Practice Medical Care for Transgender Youth." See also

Appendix G for further information about gender-affirming care.

Good Faith Reliance/Immunity from Liability

Colo. Rev. Stat. § 13-22-103 provides that a health care professional who relies in good faith on the consent of a minor who is living apart from their parents or guardian or who is married is not liable to the parents or guardian for failure to obtain their consent for the care.

Colo. Rev. Stat. § 18-1.3-407(4.5) provides that neither the department nor any hospital, physician, surgeon, mental health-care provider, dentist, trained emergency health-care provider, or agent or employee thereof who, in good faith, relies on the consent of a minor in the Youthful Offenders System is liable for civil damages for failure to secure the consent of the minor's parent, parents, or legal guardian prior to rendering such care.

Colo. Rev. Stat. § 13-22-102 provides that a licensed physician incurs no civil or criminal liability for examining, prescribing, or treating a minor for use of drugs or a substance use disorder without the consent or notification of the minor's parents or legal guardian, so long as the minor consents.

Colo. Rev. Stat. § 13-22-103 provides that a health care professional who relies in good faith on the consent of a minor who is living apart from his or her parents or guardian or who is married shall not be liable for civil damages for

failure to secure consent of the minor's parent/s or legal quardian/s.

Colo. Rev. Stat. § 25-4-409 provides that when a minor consents to an examination, administration of preventive services, or treatment for a sexually transmitted infection, the responsible health-care provider is immune from civil or criminal liability on the basis of the patient's minority status.

Minor Parent, Consent for Child's Care

Colo. Rev. Stat. § 13-22-103 provides that any minor parent may consent for hospital, medical, dental, emergency health, and surgical care for their child. Colo. Rev. Stat. § 13-22-103(3) provides that any parent – including a parent who is a minor – may request and consent to the furnishing of hospital, medical, dental, emergency health, or surgical care, as well as organ and tissue donation, for their child or ward.

Reproductive Freedom

Colo. Rev. Stat. § 25-6-403 provides that "[e]very individual has a fundamental right to make decisions about the individual's reproductive health care, including the fundamental right to use or refuse contraception" and "a pregnant individual has a fundamental right to continue a pregnancy and give birth or to have an abortion and to make decisions about how to exercise that right."

Colo. Rev. Stat. § 25-6-404 provides that a public entity shall not "[d]eny, restrict, interfere with, or discriminate against an individual's fundamental right to use or refuse contraception or to continue a pregnancy and give birth or to have an abortion in the regulation or provision of benefits, facilities, services, or information."

Shield Laws

Colorado has passed a series of laws to provide protections for health care providers and patients against disciplinary actions, adverse licensing actions, civil actions, and criminal prosecutions and procedures, both in state and from out of state, based solely on the provision, receipt, assistance, or support for reproductive health care services and gender-affirming health services that are "legally protected health-care activity" permitted under the laws of Colorado and were provided in accordance with the applicable standard of care. Examples of these laws are found at *Colo. Rev. Stat.* §§ 10-4-109.6, 10-16-121, 12-30-121, 16-5-104, and 18-13-133.

For up to date information on the status of abortion protections including shield laws in all 50 states, see Center for Reproductive Rights, After Roe Fell: Abortion Laws by State.

For up to date information on shield laws for gender affirming care, see Movement Advancement Project's "Equality Maps: Bans on Best Practice Medical Care for Transgender Youth".



Resources

Colorado Revised Statutes https://leg.colorado.gov/agencies/office-legislative-legal-services/colorado-revised-statutes

Colorado Code of Regulations https://www.sos.state.co.us/CCR/Welcome.do



Appendices

Appendix A. Glossary of Terms

Appendix B. Overview of Consent and Confidentiality When Minors Seek Health Care

Appendix C. Contraception, Abortion, and Pregnancy-Related Care for Minors: Consent and Confidentiality Considerations

Appendix D. Sexually Transmitted Infections, Sexually Transmitted Diseases, and HIV Care for Minors: Consent and Confidentiality Considerations

Appendix E. Mental Health Care for Minors: Consent and Confidentiality Considerations

Appendix F. Substance Use Care for Minors: Consent and Confidentiality Considerations

Appendix G. Gender Affirming Care for Minors: Consent and Confidentiality Considerations

Appendix H. HIPAA Privacy Rule and Confidentiality Implications for Minors' Health Information

Appendix I. Title X Family Planning Program and Family Planning Services for Minors

Appendix J. 42 CFR Part 2 and Confidentiality Implications for Substance Use Care for Minors

Appendix K. FERPA and Confidentiality Implications for School-Based and School-Linked Health Care for Minors

Appendix L. Confidentiality in Health Insurance Claims and Billing

Appendix M. Electronic Health Information, the 21st Century Cures Act, and Confidentiality for Minor Patients

Appendix N. State Law Table: Minor Consent/Access Based on Status

Appendix O. State Law Table: Minor Consent/Access for Specific Services

