

ASSEMBLY BILL (AB) 665 IMPLEMENTATION: MINOR CONSENT FOR OUTPATIENT MENTAL HEALTH TREATMENT OR COUNSELING

Frequently Asked Questions (FAQs)

Overview and Scope

This FAQ document focuses on implementation of Assembly Bill (AB) 665, which expanded the consent standard for minors to access outpatient mental health treatment or counseling services through Medi-Cal. Please refer to the following documents for policy guidance related to AB 665:

- » [Behavioral Health Information Notice \(BHIN\) 24-046](#)
- » [All Plan Letter \(APL\) 24-019](#)
- » [Medi-Cal Eligibility Procedures Manual Section 4V](#)
- » [Medi-Cal Provider Manual](#)

If you have additional questions that are not addressed below, please reach out to CountySupport@dhcs.ca.gov.

General

1. What did Assembly Bill (AB) 665 change?

[AB 665](#) primarily expanded the consent standard for minors to access outpatient mental health treatment or counseling via Medi-Cal. To do so, AB 665 amended, repealed, and added to [Section 6924](#) of the Cal. Family Code (FC), which covers minor consent for Medi-Cal outpatient mental health treatment or counseling services. Before July 1, 2024, minors could consent to these services without a parent or guardian's consent *only* if:

1. the minor would present a danger of serious physical or mental harm to self or others without the outpatient mental health treatment or counseling or was the alleged victim of incest or child abuse; and
2. the minor, in the opinion of the attending professional person, was mature enough to participate intelligently in the outpatient services.

AB 665 removed requirement (1) to align with existing law, such that minors using their Medi-Cal benefits may consent to their own services if the professional person deems them mature enough to participate intelligently. AB 665 also updated the definition of a “professional person” to include additional provider types in alignment with Health & Safety Code (HSC) [Section 124260](#). Lastly, AB 665 provides that outpatient mental health treatment services shall involve the parent or guardian, unless, after consulting with the minor, the professional person determines that the involvement would be inappropriate. Please note that AB 665 did not change the eligibility criteria for or the scope of covered benefits available through limited scope Medi-Cal Minor Consent Services.

2. What provider types are included under the definition of a “professional person”?

A “professional person” means either a professional person as defined in Cal. Health & Safety Code (HSC) [Section 124260](#), or a chief administrator of an agency referred to in Cal. Family Code [Section 6924\(a\)\(1\) and \(3\)](#). Assembly Bill 665 added several professionals to the definition of a “professional person,” including a registered psychologist, a registered psychosocial assistant, and a psychology trainee (while working under the supervision of a licensed professional); an associate clinical social worker; a social work intern; a clinical counselor trainee (while working under the supervision of a licensed professional); and a board-certified or board eligible psychiatrist. See HSC [Section 124260](#) for the complete list of eligible provider types included under the definition of “professional person.”

3. What are the Medi-Cal pathways for minors 12 years of age or older to access and consent to outpatient mental health treatment or counseling?

Minors 12 years of age or older who are not enrolled in full scope Medi-Cal must apply for limited scope Minor Consent Services according to the application process outlined in [Section 4V](#) of the Medi-Cal Member Eligibility Procedures Manual. For minors accessing limited scope Medi-Cal Minor Consent Services, the minor will be assigned to a separate Medi-Cal case from the parent or guardian, if applicable.

Minors 12 years of age or older who are enrolled in full scope Medi-Cal are not required to apply for limited scope Medi-Cal Minor Consent Services in order to access outpatient mental health treatment or counseling.

Please see the following table for a summary of the pathways described above.

Medi-Cal Eligibility Status	Consent Mechanism
<p>Minors who are eligible for full scope Medi-Cal (either on their own or under their parent or guardian)*</p> <p><i>* This includes minors under legal guardianship of a public agency and minors receiving services through Fee-For-Service Medi-Cal.</i></p>	<ul style="list-style-type: none"> • May consent to and receive outpatient mental health treatment or counseling through their full scope Medi-Cal coverage. • Have the option to, but do not need to, apply for limited scope Medi-Cal Minor Consent Services, as outlined in Section 4V of the Medi-Cal Eligibility Procedures Manual. This would provide them with a Medi-Cal card with no links to their parent/guardian's Medi-Cal.
<p>Minors who are not eligible for full scope Medi-Cal</p>	<ul style="list-style-type: none"> • May consent to and receive outpatient mental treatment or counseling by applying for limited scope Medi-Cal Minor Consent Services as outlined in Section 4V of the Medi-Cal Eligibility Procedures Manual.

4. Can minors ages 12 and older consent to Medi-Cal outpatient mental health treatment or counseling regardless of whether the minor's parent or guardian is involved in their care?

Yes. Minors ages 12 and older can consent to outpatient mental health treatment or counseling if, in the opinion of the attending professional person, the minor is mature enough to participate intelligently in these services, regardless of whether the minor's parent or guardian is involved in the treatment services.

Please see Question 20 for additional information on the consent standard for children and youth in the foster care system.

5. Does AB 665 apply to outpatient non-specialty mental health services (NSMHS) delivered by Managed Care Plans (MCPs)?

Yes. MCPs must ensure that minors ages 12 and older may consent to non-specialty mental health outpatient treatment or counseling, if, in the opinion of the attending professional person, the minor is mature enough to participate intelligently in these services. Please see [APL 24-019](#) for MCP guidance regarding the provision of non-specialty mental health outpatient treatment or counseling services to minors as a result of AB 665.

6. Does AB 665 change requirements for mandated reporters?

No. AB 665 does not change requirements for mandated reporters as outlined in Cal. Penal Code (PC) [Section 11166\(a\)](#) related to knowledge or observation of a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect.

7. How will a provider determine if (1) a minor seeking outpatient mental health treatment or counseling is mature enough to participate intelligently and (2) that involvement of the parent or guardian in a minor's outpatient mental health treatment would not be appropriate?

The professional person should use their clinical judgment and expertise to make these determinations. See Question #2 for the definition of professional person.

8. Are providers required to document their determinations regarding the appropriateness of involvement of the parent or guardian in the client record?

Yes. Per [BHIN 24-046](#) and [APL 24-019](#), the professional person (see Question #2) must document their determination in the member record, stating either: (1) whether and when the person attempted to contact the minor's parent or guardian, and whether the attempt to contact was successful; or (2) the reason why, in the professional person's opinion, it would be inappropriate to contact the minor's parent or guardian.

9. Does AB 665 enable minors ages 12 years or older to consent to inpatient and/or residential mental health treatment?

No. The changes to consent under AB 665 are limited to outpatient mental health treatment or counseling and do not pertain to a minor's consent for admission to an inpatient mental health/psychiatric facility.

Specific to minors who are under the jurisdiction of the juvenile court, Welf. & Inst. Code [Section 6552](#) addresses when a ward or dependent of the juvenile court may make a voluntary application for inpatient treatment with the advice of counsel.

10. Does AB 665 allow minors ages 12 years or older to consent to psychiatric or medication services?

No. Per [Section 4V](#) of the Medi-Cal Member Eligibility Procedures Manual and Cal. Family Code [Section 6924\(f\)](#), minors cannot receive narcotic replacement therapy (NRT) in a narcotic treatment program (NTP) or psychotropic drugs, convulsive therapy, and psychosurgery without parental or guardian consent. However, per Cal. Family Code [Section 6929\(e\)](#), a minor 16 years of age or older may consent to receive medications for opioid use disorder from a licensed narcotic treatment program as replacement narcotic therapy without the consent of the minor's parent or guardian only if, and to the extent, expressly permitted by federal law.

11. Does AB 665 change confidentiality and parent/guardian notification requirements?

No. AB 665 does not change existing requirements for confidentiality and/or parent/guardian notification. Mental health plans (MHPs), managed care plans (MCPs), and providers are subject to all applicable federal and state laws and regulations pertaining to confidentiality for minors receiving services.

12. If the minor consents to involve their parent/guardian in their treatment can the Mental Health Plan (MHP) or Managed Care Plan (MCP) send notices to their home?

AB 665 did not change parental/guardian notification practices. Only if in the opinion of the professional person, after consulting with the minor, the involvement of the parents/guardians is inappropriate should MHPs or MCPs suppress Notice of Adverse Benefit Determination (NOABD)/Notice of Action documents and any other

communication, without the express consent of the minor, to protect the confidentiality of the minor.

13. Can minor consent services received via full scope Medi-Cal be billed to Medi-Cal even though services are provided without parental consent?

Yes. Minor consent services provided to minors enrolled in full scope Medi-Cal can be billed to Medi-Cal and are reimbursable without parental consent. Providers should claim for these services in accordance with Medi-Cal billing guidance for Mental Health Plans (Specialty Mental Health Services) and Managed Care Plans (Non-Specialty Mental Health Services).

Limited Scope Medi-Cal Minor Consent Services

14. What are limited scope Medi-Cal Minor Consent Services?

Limited scope Medi-Cal Minor Consent services, previously referred to as the *Minor Consent Program*, are restricted to the aid codes and diagnostic codes outlined in the Provider Manual.

Under limited scope Medi-Cal Minor Consent Services, most outpatient services provided are authorized for a period of one month, except for covered outpatient mental health treatment or counseling as recommended by a mental health professional, which can continue without the need to reapply for Minor Consent Services for the length of time indicated on the letter from the mental health professional, up to six months. If it is determined that the minor is in need of additional outpatient mental health treatment or counseling services beyond the length of time indicated on the original letter, a new letter from a mental health professional will be required. See [Section 4V](#) of the Medi-Cal Member Eligibility Procedures Manual for specific requirements related to redetermining eligibility for limited scope Medi-Cal Minor Consent Services.

15. Does AB 665 make any changes to limited scope Medi-Cal Minor Consent Services?

Yes. [AB 665](#) makes limited changes to limited scope Medi-Cal Minor Consent Services. AB 665 is an act to amend, repeal, and add to [Section 6924](#) of the Cal. Family Code (FC), which covers minor consent for Medi-Cal outpatient mental health treatment or

counseling services. Before July 1, 2024, minors could consent to these services without a parent or guardian's consent *only* if:

1. the minor would present a danger of serious physical or mental harm to self or others without the outpatient mental health treatment or counseling or was the alleged victim of incest or child abuse; **and**
2. the minor, in the opinion of the attending professional person, was mature enough to participate intelligently in the outpatient services.

AB 665 removed requirement (1) to align with existing law and updated the definition of a "professional person" to include additional provider types in alignment with Cal. Health & Safety code (HSC) [Section 124260](#). Lastly, AB 665 provides that outpatient mental health treatment services shall involve the parent or guardian, unless, after consulting with the minor, the professional person determines that the involvement would be inappropriate.

Beyond these changes, existing policies and procedures for accessing and delivering limited scope Medi-Cal Minor Consent Services are unchanged.

16.Are providers required to verify the age of a minor seeking outpatient mental health treatment through limited scope Medi-Cal Minor Consent Services?

No. Per Cal. Code Regs. Tit. 22, [Section 50167\(a\)\(6\)\(D\)](#), minors seeking outpatient mental health treatment through limited scope Medi-Cal Minor Consent Services are not required to provide any form of identification or their social security number (SSN) for eligibility purposes. If the minor provides their SSN, providers may not use it for screening purposes or eligibility determination.

17.Can undocumented minors ages 12 and older apply for limited scope Medi-Cal Minor Consent Services to receive outpatient mental health treatment or counseling?

Yes. Undocumented minors may apply to limited scope Medi-Cal Minor Consent Services to receive outpatient mental health treatment or counseling. Additionally, an undocumented minor age 12 and older who is already eligible for full scope Medi-Cal can consent to outpatient mental health treatment or counseling without applying for limited scope Medi-Cal.

Minors are eligible for full scope Medi-Cal benefits regardless of immigration status, as long as they meet the eligibility requirements laid out in Welf. & Inst. Code [Section 14007.8](#).

Welf. & Inst. Codes [Section 14007.8](#) (a)(1) states, "An individual who is 25 years of age or younger, and who does not have satisfactory immigration status or is unable to establish satisfactory immigration status as required by [Section 14011.2](#), shall be eligible for the full scope of Medi-Cal benefits, if they are otherwise eligible for benefits under this chapter."

18.What is the role of a provider who identifies a minor with a limited scope Minor Consent Medi-Cal card?

AB 665 did not make changes to requirements for providers providing services to minors enrolled in limited scope Minor Consent Services. When minors present their Minor Consent Services card to a provider, the provider verifies their eligibility through the Point of Service (POS) network. The eligibility verification system will return a restricted eligibility service message for the Minor Consent Service entered into the Medi-Cal Eligibility Data System (MEDS). The Provider Manual specifies that minors are entitled to the category of service which is transmitted via the eligibility verification system. Providers are also informed that Minor Consent Services are confidential, and parents are not to be contacted regarding their child's receipt of the requested services.

19.Can a minor ages 12 or older who has insurance coverage via their parents' employment apply for limited scope Medi-Cal Minor Consent?

Yes. Minors ages 12 or older may access outpatient mental health treatment or counseling through their parents' private insurance or by applying for limited scope Medi-Cal Minor Consent Services if they have concerns about parental notification. AB 665 aligned Medi-Cal minor consent requirements for outpatient mental health treatment or counseling with those already in place for private insurance under state law, so the consent standard is now the same for minors using Medi-Cal and minors using private insurance.

Youth in Foster Care/Out of Home Placement

20.Did AB 665 change the consent standard for outpatient mental health treatment or counseling for children and youth in the foster care system?



No. Per Cal. Welfare & Institutions Code (W&I) [Section 16001.9](#), subdivision (a)(24)(C), all children in foster care have the right, at 12 years of age or older, to consent to or decline outpatient mental health services, without the consent or knowledge of any adult.

21. Do children and youth in out of home placement with full scope Medi-Cal have to sign up for the Minor Consent Medi-Cal program in order to consent to outpatient mental health treatment or counseling?

No. Children and youth ages 12 and older in out of home placement have two pathways to consent to outpatient mental health treatment or counseling: 1) as part of their full scope Medi-Cal coverage or 2) via limited scope Medi-Cal Minor Consent Services (if they choose, but it is not required).

22. How should a Mental Health Plan (MHP) or Managed Care Plan (MCP) proceed when youth ages 12 or older in foster care do not want the county child welfare agency to know that they are receiving services?

Per Cal. Welfare & Institutions Code (W&I) [Section 16001.9](#), subdivision (a)(24)(C), which is not changed or overridden by AB 665, all children in foster care have the right, at 12 years of age or older, to consent to or decline outpatient mental health services, without the consent or knowledge of any adult. MHPs and MCPs must establish and ensure safeguards are in place to suppress confidential information and prevent any communication that would violate the minor's confidentiality from being inappropriately delivered to the minor's parent, guardian, or the child welfare agency.

23. Does AB 665 apply to minors in the juvenile justice system?

Yes. Cal. Welfare & Institutions Code (W&I) [Section 739\(h\)](#), focused on wards of juvenile court, provides that "nothing in this section shall be construed to interfere with a minor's right to authorize or refuse medical, surgical, dental, or other care when the minor's consent for care is sufficient or specifically required pursuant to existing law".

School-Based Health Services

24. What is the contact for additional questions specific to school-based mental health services?

For questions related to school-based mental health services, please contact DHCS.SBS@dhcs.ca.gov.

For questions related to the Local Educational Agency Medi-Cal Billing Option Program (LEA BOP), please contact LEA@dhcs.ca.gov.