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## Medi-Cal Minor Consent Services

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Eligible minors may receive confidential and limited-scope Medi-Cal Minor Consent Services listed in this section in accordance with *California Family Code*, Sections 6920-6930.

For additional eligibility information, refer to the *Eligibility: Recipient Identification Cards* section in the Part 1 manual.

### **Reimbursable Services**

The services are categorized by age as follows:

#### **Under Age 12**

- Pregnancy and pregnancy-related services
- Family planning services
- Sexual assault services

#### **Ages 12 and Older**

- Pregnancy and pregnancy-related services
- Family Planning services
- Sexual assault services
- Infections, contagious or communicable disease diagnosis and treatment
- Sexually transmitted infections diagnosis and treatment
- Drug and alcohol use treatment and counseling
- Outpatient mental health treatment and counseling
- Intimate partner violence services

The above listed services which a minor may consent to on their own are referred to as Medi-Cal Minor Consent Services.

### **Minors Under the Responsibility of a Public Agency**

If a public agency has legal responsibility for a minor (for example, child welfare), the minor is eligible for Medi-Cal Minor Consent Services.

## Confidentiality Reminder: Parent/Guardian Notification

Medi-Cal Minor Consent Services are confidential, and parent/guardian(s) are not to be contacted regarding their child's receipt of these services.

For minors receiving outpatient Medi-Cal Minor Consent mental health services, state law requires involvement of the minor's parent/guardian(s) unless the professional person treating or counseling the minor, after consulting with the minor, determines the involvement of the minor's parent/guardian(s) would be inappropriate.

## Aid Codes and Service Restrictions

Medi-Cal Minor Consent Services are not full-scope Medi-Cal and are limited to the services listed in this section. Minors indicate which services they are requesting when applying for Medi-Cal Minor Consent Services. Medi-Cal providers must identify the range of services for which a minor is eligible under Medi-Cal Minor Consent Services.

Aid codes 7M, 7N, 7P and 7R identify minors eligible to receive confidential, limited-scope services under Medi-Cal Minor Consent Services. Refer to the *Aid Codes Master Chart* section in the Part 1 manual for code definitions and restrictions.

**Aid Code Eligibility Message Table**

Aid Code	Eligibility Message
7M	<p>"Recipient limited to services related to Sexually Transmitted Diseases, sexual assault, drug and alcohol abuse, and family planning with no Share of Cost."</p> <p>"Recipient limited to services related to Sexually Transmitted Diseases, sexual assault, drug and alcohol abuse, and family planning with a Share of Cost of \$ ____."</p>
7N	"Recipient limited to services related to pregnancy and family planning with no Share of Cost."
7P	<p>"Recipient limited to services related to Sexually Transmitted Diseases, sexual assault, drug and alcohol abuse, family planning, and outpatient mental health with no Share of Cost."</p> <p>"Recipient limited to services related to Sexually Transmitted Diseases, sexual assault, drug and alcohol abuse, family planning, and outpatient mental health with a Share of Cost of \$ ____."</p>
7R	<p>"Recipient limited to services related to family planning and sexual assault with no Share of Cost."</p> <p>"Recipient limited to services related to family planning and sexual assault with a Share of Cost of \$ ____."</p>

## **Claim Completion**

Authorized services for Medi-Cal Minor Consent Services are limited to the diagnosis codes listed below, as applicable to the aid codes listed in this section. Providers must maintain documentation indicating that the services rendered relate to the applicable restriction. In addition, the date of service and name of the provider who prescribed the limited service should be documented and readily available.

To ensure prompt claims processing, the following statement must be included in the *Remarks area/Additional Claim Information* field (Box 19) of the claim: "This service is applicable to (related service restriction)."

## **ICD-10-CM Diagnosis Codes**

The following ICD-10-CM diagnosis codes are valid for billing Medi-Cal Minor Consent Services

### **ICD-10-CM Codes for Billing Covered Services**

<b>Code</b>	<b>Description</b>
A50.01 thru A59.9	Syphilis and other venereal diseases
A60.00 thru A60.09	Genital herpes
A63.0	Anogenital (venereal) warts
A63.8	Other specified predominantly sexually transmitted diseases
A64	Unspecified sexually transmitted disease
B15.0 thru B19.9	Viral hepatitis
B20	Human Immunodeficiency Virus (HIV) disease
F01.50 thru F90.0	Mental health and drug dependence
N34.1	Nonspecific urethritis
N70.01 thru N99.89	Disorders of the female reproductive system
O00.00 thru O9A.53	Complications of pregnancy and termination of pregnancy
S00.00XA thru T88.9	Injury or poisoning (if related to a sexual assault, use codes which indicate assault when applicable)
Y04.8XXA thru Y04.8XXS	Rape

**ICD-10-CM for Billing Covered Services (continued)**

<b>Code</b>	<b>Description</b>
Z13.89*	Screening for depression (not isolated) or alcoholism
Z04.41, Z04.42	Encounter for examination and observation following alleged rape
Z20.2	Contact with and (suspected) exposure to infections with a predominantly sexual mode of transmission
Z22.4	Carrier of infections with a predominantly sexual mode of transmission
Z30.011	Encounter for initial prescription of contraceptive pills
Z30.012	Encounter for initial prescription of emergency contraception
Z30.013	Encounter for initial prescription of injectable contraceptive
Z30.018	Encounter for initial prescription of other contraceptives
Z30.430	Encounter for insertion of intrauterine contraceptive device
Z30.432	Encounter for removal of intrauterine contraceptive device
Z30.433	Encounter for removal and reinsertion of intrauterine contraceptive device

**ICD-10-CM codes for Billing Services (continued)**

<b>Code</b>	<b>Description</b>
Z32.01	Encounter for pregnancy test, result positive
Z32.02	Encounter for pregnancy test, result negative
Z33.1	Pregnant state, incidental
Z33.2	Encounter for elective termination of pregnancy
Z34.00 thru Z39.2	Pregnancy, postpartum care
Z36.0 thru Z36.9	Encounter for antenatal screening of mother
Z64.0 thru Z64.1	Multiple or unwanted pregnancy
Z65.8*	Alcoholism
Z71.41	Alcohol abuse counseling and surveillance or alcoholic
Z71.7 thru Z71.89	Counseling on HIV and other Sexually Transmitted Diseases
Z72.51*	High-risk sexual behavior
Z92.0	Personal history of contraception
Z97.5	Presence of intrauterine contraceptive device

## **Legend**

Symbols used in the document above are explained in the following table.

<b>Symbol</b>	<b>Description</b>
«	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
»	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.
*	Some specialty mental health services, including inpatient services and most psychotropic medications, provided through the county behavioral health delivery system are not benefits of the Medi-Cal Minor Consent Services. For more information on specialty mental health and substance use disorder services, see BHIN #24-046.