## IOWA

# **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.

#### **Recommended Citation**

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#### **Disclaimer**

Minor Consent and Confidentiality: A Compendium of State and Federal Laws is made available for informational purposes only and does not constitute legal advice or representation. Laws can be interpreted in different ways. For legal advice, a practicing attorney who has comprehensive knowledge of all relevant laws – federal state, and local – and who has been informed of all relevant details of the situation should be consulted. The authors have attempted to assure that the information presented is accurate as of May 2024. However, laws change frequently, new regulations are promulgated, and cases decided. The National Center for Youth Law and the authors specifically disclaim any liability for loss or risk incurred as a consequence of the use and the application, either directly or indirectly, of any material in this publication.

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#### **Quick Guide**

See glossary for explanation of categories and definitions of terms.

#### General

- S Age of Majority
- S Emancipation
- Minor Marriage

#### Minor Consent to Health Care-Services

- S Abortion<sup>3</sup>
  - **Emergency Care**
- S 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

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

- S Emancipated Minor
  - High School Graduate
- Married Minor
  - Minor, Age or Maturity
  - Minor in Armed Forces
  - Minor Living Apart from Parent/ Guardian
  - Minor Parent
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#### Other

- S Emergency Care
- S Financial Responsibility
- Gender Affirming Care, Restriction

#### **Confidentiality and Disclosure**

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

Key

S

State law found4



Federal/other law may apply

<sup>&</sup>lt;sup>4</sup> Symbol indicates law found that either allows providers to offer services without parental consent or explicitly gives minors authority to consent.



<sup>&</sup>lt;sup>1</sup> The information in this chapter represents the state of the law as of May 2024 after a diligent search of statutes, regulations, case law, and guidance.

<sup>&</sup>lt;sup>2</sup> 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).

<sup>&</sup>lt;sup>3</sup> This category includes parental involvement laws.

#### General

#### Age of Majority

Iowa Code § 599.1 provides that the age of majority is 18.

#### **Emancipation**

Iowa Code §§ 232C.1 - 232C.4 establish the procedures for a minor to become emancipated. Iowa Code § 232C.4 provides that an emancipation order shall have the same effect as a minor reaching age of majority except for limited circumstances as described in the statute.

#### **Minor Marriage**

Iowa Code § 599.1 provides that a married minor of any age is deemed to have attained the age of majority. The legal requirements for a minor to marry are set forth in Iowa Code § 595.2. Minors age 16 or 17 are allowed to marry with parent or guardian consent and a court order.

#### **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**

*lowa Code § 232C.4* provides that an emancipated minor has the right to consent for medical, dental, or psychiatric care.

#### **Married Minor**

No provision was found that expressly authorizes married minors to consent for health care. However, *lowa Code §* 599.1 provides that a married minor of any age is deemed to have attained the age of majority.

#### **Minor in Armed Forces**

Ind. Code § 16-36-1-3 provides that a minor who is in the U.S. military may consent to their own health care.

#### **Minor in State Custody**

Iowa Code § 599.1 provides that a person under age 18 who has been tried and convicted as an adult and committed to the department of corrections is deemed to have attained the age of majority for the purpose of consenting to medical care, related services, and treatment.

#### **Minor Consent-Services**

#### **Abortion**

Abortion is legal in lowa, but there are many restrictions, including a six-week ban. For up to date information on the status of abortion restrictions in lowa, see <a href="Center for Reproductive Rights">Center for Reproductive Rights</a>, After Roe Fell: Abortion Laws by <a href="State">State</a>.

To the extent abortion is legally permitted, minors may consent for abortion, but *Iowa Code § 135L.3* provides that an unmarried minor may not obtain an abortion without advance notification to one parent. The law includes a judicial bypass, an emergency exception, and an exception for cases of child abuse under *Iowa Code chapter 232* or sexual abuse under *Iowa Code chapter 709*. For up to date information on parent involvement laws for abortion in all 50 states, see <u>If When How's Abortion Laws by State</u>.

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

Iowa Code § 141A.7 provides: "A person may apply for voluntary treatment, contraceptive services, or screening or treatment for HIV infection and other sexually transmitted diseases directly to a licensed physician and surgeon, an osteopathic physician and surgeon, a physician assistant, or a family planning clinic. . . .The minor shall give written consent to these procedures and to receive the services, screening, or treatment."

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**

No specific legal provision expressly authorizes minors to consent for outpatient mental health services apart from services from a mental health professional for rehabilitation and treatment of a substance use disorder under *lowa Code § 125.33* and services related to sexual assault under *lowa Code § 915.35*.

#### **Pregnancy-Related Care**

No specific legal provision expressly authorizes minors to consent for pregnancy-related care.

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**

Iowa Code § 915.35 provide that a professional who has been licensed or certified by the state to provide immediate or short-term medical services or mental health services to minor who has been sexually abused or subjected to any other unlawful sexual conduct may provide these services to a minor without the prior consent or knowledge of the minor's parents or guardians. The minor must be informed if a child abuse report is required.

#### Sexually Transmitted Infection/Disease/HIV Care

lowa Code § 139A.35 provides that a minor may consent for medical care or services for the prevention, diagnosis, or treatment of a sexually transmitted disease or infection by a hospital, clinic, or health care provider and the consent of a parent or other person is not necessary. Such medical care or services shall be provided by or under the supervision of a physician licensed to practice medicine and surgery or osteopathic medicine and surgery, a physician assistant, or an advanced registered nurse practitioner.

Iowa Code § 141A.7 provides: "A person may apply for voluntary treatment, contraceptive services, or screening or treatment for HIV infection and other sexually transmitted diseases directly to a licensed physician and surgeon, an osteopathic physician and surgeon, a physician assistant,

or a family planning clinic. . . The minor shall give written consent to these procedures and to receive the services, screening, or treatment."

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**

lowa Code § 125.33 provides that a minor with a substance use disorder may apply for voluntary treatment or rehabilitation services directly to a facility or to a licensed physician and surgeon or osteopathic physician and surgeon or to a mental health professional. This includes both inpatient and outpatient care for addiction or dependence on a "chemical substance". lowa Code § 125.2 defines "facility," "substance use disorder" and "chemical substance" for this purpose.



#### **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**

#### HIV

Iowa Code § 141A.9 provides for the confidentiality of HIV and AIDS information and records, including HIV test results, and specifies to whom HIV test results may be released and when a written release or court order is required.

#### **Mental Health**

*lowa Code* §§ 228.1 − 228.11 contain provisions related to the protection and disclosure of mental health and psychological information.

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 H** for information about the HIPAA Privacy Rule and disclosure of information to parents and guardians.

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

#### Contraception, Sexually Transmitted Disease/ Infection/HIV

Iowa Code § 141A.7 provides that the fact that a minor sought or is receiving contraceptive services, or screening or treatment for HIV and other sexually transmitted diseases services or treatment shall not be disclosed.

lowa Code § 141A.7 also provides that a minor must be informed prior to HIV testing that the facility must notify the minor's legal guardian if the minor tests positive for HIV. Testing facilities must have available a program to assist minors with the notification process. A testing facility which is precluded by federal statute, regulation, or CDC guidelines from notifying the guardian is exempt from the notification requirement but must have the assistance program in place.



#### **Substance Use**

Iowa Code § 125.33 provides that if a minor personally makes application for treatment or rehabilitation services for substance use disorder, the fact that the minor sought treatment or rehabilitation or is receiving services shall not be reported or disclosed to the parents or guardian without the minor's consent.

#### **Sexual Assault**

Iowa Code § 915.35 provide that a professional licensed or certified by the state to provide immediate or short-term medical services or mental health services to minor who has been sexually abused or subjected to any other unlawful sexual conduct may provide the services to a minor without the prior knowledge of the minor's parents or guardians. The minor must be informed if a child abuse report is required.

#### 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 H** for information about the HIPAA Privacy Rule and disclosure of information to parents and guardians.

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.

#### **Emergency Care**

Iowa Code § 147A.10 allows provision of emergency care to any individual regardless of age without civil liability for failure to obtain consent if the patient is unable to give consent and no other person authorized to give consent is readily available.

#### **Financial Responsibility**

*Iowa Code § 232C.4* provides that parents are exempt from an obligation to provide medical support for an emancipated minor, unless deemed necessary by the court.

#### **Gender Affirming Care, Restriction**

Iowa Code § 147.164 prohibits health care professionals from providing puberty blockers; testosterone, estrogen, or progesterone "in an amount greater than would normally be produced endogenously in a healthy individual of that individual's age and sex", or specified surgeries "for the purpose of attempting to alter the appearance of, or affirm the minor's perception of, the minor's gender or sex, if that appearance or perception is inconsistent with the minor's

sex." Exceptions are included for specific medical purposes. Violations are considered unprofessional conduct and may lead to loss of license. Enforcement may also occur by the Attorney General or by a civil action for damages, injunctive, or declaratory relief.

For up to date information on the status of restrictions and protections on gender affirming care for minors, see Movement Advancement Project's "Equality Maps: Bans on Best Practice Medical Care for Transgender Youth" These laws are changing rapidly so consultation with counsel is essential. See also Appendix G.



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## Resources

lowa Code https://www.legis.iowa.gov/law/statutory

lowa Administrative Code <a href="https://www.legis.iowa.gov/law/administrativerules">https://www.legis.iowa.gov/law/administrativerules</a>



### **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

