

**Minor and Parent Access and Consent for Outpatient Treatment**  
**Working Document- Parent Initiated Treatment Stakeholder Advisory Group**

	<b>Low Minor Engagement High Parent Engagement</b>	<b>High Minor Engagement Low Parent Engagement</b>	<b>High Minor Engagement High Parent Engagement</b>
Access/Consent	Parent Accessed Treatment	Minor Accessed Treatment	Minor/Parent Accessed Treatment (joint)
Parent Involvement	Automatic	NEW: Expectation to reach out to parents unless not clinically indicated and document.	Automatic
Release of information to parents	NEW: Focused release of information to parents without minor consent (and with clinician discretion)	NEW: Focused release of information to parents without minor consent (and with clinician discretion)	CURRENT: Full release of information to parents signed by minor
Release of information to treating providers	NEW: Parents can authorize release of information to current treatment providers and/or recommended treatment providers	CURRENT: Minor can authorize release of information to current treatment providers and/or recommended treatment providers	CURRENT: Minor/Parent can jointly authorize release of information to current treatment providers and/or recommended treatment providers
Medical Necessity <i>(details to be worked out in Admissions/ MN workgroup)</i>	CURRENT: All mental health treatment billed to insurance requires a mental health diagnosis and determination of medical necessity	CURRENT: All mental health treatment billed to insurance requires a mental health diagnosis and determination of medical necessity	CURRENT: All mental health treatment billed to insurance requires a mental health diagnosis and determination of medical necessity
External Oversight/ Precautions	NEW: Requirement that only licensed providers or community mental health agencies can treat minors	NEW: Requirement that only licensed providers or community mental health agencies can treat minors	NEW: Requirement that only licensed providers or community mental health agencies can treat minors

**Minor and Parent Access and Consent for Acute Inpatient Treatment**  
**Working Document- Parent Initiated Treatment Stakeholder Advisory Group**

	<b>Low Minor Engagement High Parent Engagement</b>	<b>High Minor Engagement Low Parent Engagement</b>	<b>High Minor Engagement High Parent Engagement</b>
Access/Consent	Parent Accessed Treatment NEW: Definition of parent expanded to Kinship Caregiver	Minor Accessed Treatment	Minor/Parent Accessed Treatment (joint)
Release of information to parents	NEW: Focused release of information to parents without minor consent (and with clinician discretion)	CURRENT: parent(s) notification of admission  NEW: Focused release of information to parents without minor consent (and with clinician discretion)	CURRENT: parent(s) notification of admission  CURRENT: Full release of information to parents signed by minor
Release of information to treating providers	NEW: Parents can authorize release of information to current treatment providers and/or recommended treatment providers	CURRENT: Minor can authorize release of information to current treatment providers and/or recommended treatment providers	CURRENT: Minor/Parent can jointly authorize release of information to current treatment providers and/or recommended treatment providers
Medical Necessity <i>(details to be worked out in Admissions/ MN workgroup)</i>	CURRENT: All mental health treatment billed to insurance requires a mental health diagnosis and determination of medical necessity	CURRENT: All mental health treatment billed to insurance requires a mental health diagnosis and determination of medical necessity	CURRENT: All mental health treatment billed to insurance requires a mental health diagnosis and determination of medical necessity
External Oversight/ Precautions	NEW: Requirement that only licensed providers or community mental health agencies can treat minors  CURRENT: DSHS notification after admission; review between 7-14 days	NEW: Requirement that only licensed providers or community mental health agencies can treat minors  CURRENT: none	NEW: Requirement that only licensed providers or community mental health agencies can treat minors  CURRENT: none

