

Statement of Introduction  
Minor Access to Medical Records and Appointments Amendment Act  
Councilmember Christina Henderson  
April 30, 2021

Today, along with Councilmembers Brianne K. Nadeau, Janeese Lewis George, Charles Allen, Brooke Pinto, Mary M. Cheh, and Robert C. White, Jr., I am introducing the Minor Access to Medical Records and Appointments Amendment Act of 2021. This bill will increase privacy for youth and encourage them to seek medical services when needed by making it easier for them to independently access vital medical records and schedule medical appointments.

In the District of Columbia, there are a substantial number of 16- and 17-year old's that have little to no adult support due to homelessness, shifts in foster care, or other unfortunate circumstances. For the 2020-2021 school year, the number of youth in foster care currently attending high school in the District is 195. According to data from OSSE, the number of students who experienced homelessness during the 2019-2020 school year was 7,139.

The 2019 D.C. Youth Risk Behavior Survey (YRBS) stated that suicide was among the leading causes of death nationally for youth 10-24 years old. In D.C., youth are contemplating and attempting suicide at alarming rates. According to the 2019 YRBS, among high school students in the District of Columbia, 14.3% of males and 23.5% of females seriously thought about ending their lives in the previous year, while 13.5% of males and 15.5% of females attempted suicide.

Further, in 2019 one in ten D.C. high school students reported experiencing physical violence, and 5 percent of students reported experiencing sexual violence according to data from OSSE. Generally, if confidentiality is not guaranteed or parental notification is required, adolescents are more likely to postpone or refuse sexual health care or withhold information from healthcare providers – particularly if it might entail reporting domestic violence. The Commonwealth Fund Survey of the Health of Adolescent Girls found that the leading reason teenagers gave for not getting health care they knew they needed was concerns about confidentiality.

Current D.C. law allows a minor over the age of 12 who is deemed capable of providing informed consent by a doctor to access various medical procedures and care, subject to medical best practices and professional standards, including contraceptive services, mental health care, prenatal care, and abortions, without parental consent. However, the law is unclear as to whether parental consent may be required to actually schedule such appointments, or secure records that would inform a provider's decision-making. Allowing youth who are 16 years of age and older to also schedule their appointments or request medical records will further improve health outcomes for young residents in the District and complement existing minor consent laws. This bill will also allow providers who administer medical appointments to seek reimbursement directly from the insurer without parental consent.

I look forward to working with my Council colleagues and other stakeholders to advance and pass this legislation which will help improve access to healthcare for youth in the District.

1 Brianne K. Nadeau

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4 Mary M. Cheh

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7 Charles Allen

8 Councilmember Charles Allen

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10 Robert C. White, Jr.

11 Councilmember Robert C. White, Jr.

12 Christina Henderson

13 Councilmember Christina Henderson

14 Janeese Lewis George

15 Councilmember Janeese Lewis George

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17 Brooke Pinto

18 Councilmember Brooke Pinto

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20 A BILL

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24 IN THE COUNCIL OF THE DISTRICT OF COLUMBIA  
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29 To amend Chapter 6 of Title 22-B of the District of Columbia Municipal Regulations to permit a  
30 minor who is sixteen years of age or older to access their medical records and make  
31 medical appointments.

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33 BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this  
34 act may be cited as the “Minor Access to Medical Records and Appointments Amendment Act  
35 of 2021”.

36 Sec. 2. Chapter 6 of Title 22-B of the District of Columbia Municipal Regulations (22-B  
37 DCMR § 600) is amended by adding a new subsection 600.10 to read as follows:

38           “600.10 (a) A minor who is 16 years of age or older shall have access to the minor’s  
39 medical records without parental consent.

40           “(b) A minor who is 16 years of age or older may make medical appointments and  
41 consent to health services for the minor’s personal medical care, without parental consent if the  
42 minor is capable of meeting the informed consent standard.”

43           “(c) For the purposes of this subsection, a minor shall be deemed to meet the informed  
44 consent standard if the minor is able to comprehend the need for, the nature of, and any  
45 significant risks ordinarily inherent in the medical care.”

46           “(d) Providers who administer medical appointments under the authority of this  
47 subsection shall seek reimbursement, without parental consent, directly from the insurer, which  
48 may be Medicaid, Alliance, or private insurance. The provider shall notify the insurer that the  
49 appointment has been provided under the authority of this section.

50           “(1) Insurers shall not send an Explanation of Benefits for services provided under  
51 the authority of this subsection.”

52           Sec. 3. Fiscal impact statement.

53           The Council adopts the fiscal impact statement in the committee report as the fiscal  
54 impact statement required by section 4a of the General Legislative Procedures Act of 1975,  
55 approved October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

56           Sec. 4. Effective date.

57           This act shall take effect following approval by the Mayor (or in the event of veto by the  
58 Mayor, action by Council to override the veto), a 30-day period of congressional review as  
59 provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December

60 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of  
61 Columbia Register.