

ISSUE BRIEF

MICHIGAN LAWS RELATED TO RIGHT OF A MINOR TO OBTAIN HEALTH CARE WITHOUT CONSENT OR KNOWLEDGE OF PARENTS

This document summarizes the rights of minors to consent to various types of health care without the consent or knowledge of their parents.¹ It also covers whether the law permits information concerning the minor's health care to be shared with the parent. Though the details of this document apply only in Michigan, the legal provisions likely have counterparts in other states. Lawyers in other states may have developed, or could develop, comparable summaries for their states. You may wish to talk with your attorney or find a public health attorney in your state.

LAWS REGARDING CONSENT TO MEDICAL AND SURGICAL CARE BY MINORS IN GENERAL

GENERAL RULES	IS PARENTAL CONSENT REQUIRED?	IS PARENTAL ACCESS TO THE MINOR'S INFORMATION PERMITTED? ²
General Rule: A minor is a person 17 years or younger. Emancipation of Minors Act, MCL 722.1 ; Age of Majority Act, MCL 722.52 .	Required.	Yes.
Emancipation/Emancipated Minor Emancipation of Minors Act, MCL 722.1 – 722.6	Not required.	No.

GENERAL RULES

IS PARENTAL CONSENT
REQUIRED?

IS PARENTAL ACCESS TO THE
MINOR'S INFORMATION
PERMITTED?²

1. An emancipation occurs by court order via a petition filed by a minor with the family division of circuit court.
2. An emancipation also occurs by operation of law under any of the following circumstances:
 - » When a minor is validly emancipated under the laws of another state.
 - » When an individual reaches the age of 18 years.
 - » During the period when the minor is on active duty with the United States Armed Forces.
 - » For the purposes of consenting to routine, nonsurgical medical care or emergency medical treatment, when the minor is in the custody of a law enforcement agency and the minor's parent or guardian cannot be promptly located.
 - » For the purposes of consenting to his or her own preventive health care or medical care including surgery, dental care, or mental health care, except vasectomies or any procedure related to reproduction, during the period when the minor is a prisoner committed to the jurisdiction of the department of corrections and is housed in a state correctional facility; or the period when the minor is a probationer residing in a special alternative incarceration unit. This only applies if a parent cannot promptly be located by the department of corrections or another responsible official.
 - » Minors who were legally married prior to September 19, 2023, were released from parental control. [MCL 551.251](#). After that date, individuals must be 18 years or older to marry. [MCL 551.103](#).

Homeless Children and Youths

The McKinney-Vento Homeless Assistance Act, PL 100-77, [42 USC § 11431 et seq.](#)

Homeless children are to have access to education and other services for which they are eligible. To the extent services for dental, medical and other such needs are available at school, children experiencing homelessness must have access to them.

Depends on services provided.

McKinney-Vento does not change state law with regard to consent for health services, whether or not the homeless minor is in the custody of a parent or guardian.

Depends on services provided.

McKinney-Vento does not change the applicability of federal or state privacy laws, whether or not the homeless minor is in the custody of a parent or guardian.

GENERAL RULES

IS PARENTAL CONSENT
REQUIRED?

IS PARENTAL ACCESS TO THE
MINOR'S INFORMATION
PERMITTED?²

Homeless families and homeless children and youths must also receive referrals to health care services, dental services, mental health and substance abuse services, housing services, and other appropriate services. [42 USC § 11432\(g\)\(6\)\(A\)\(iv\)](#).

LAWS REGARDING CONSENT TO MEDICAL AND SURGICAL CARE BY HEALTH SERVICE TYPE

HEALTH SERVICE

IS PARENTAL CONSENT REQUIRED?

IS PARENTAL ACCESS TO THE MINOR'S INFORMATION
PERMITTED?

Abortion

The Parental Rights Restoration Act,
[MCL 722.901 – 722.908](#)

Generally, a person may not perform an abortion on a minor without first obtaining the written consent of the minor and a parent. The minor may obtain an abortion without the consent of a parent if the minor obtains a waiver of the parental consent requirement pursuant to a petition filed with the probate court. The parental consent requirement does not apply to an abortion performed pursuant to a medical emergency.

Required.

Written consent of minor and one parent/legal guardian or a judicial waiver (court order) of parental consent from probate court.

Parental consent is not required for an abortion performed in a medical emergency.

State law is silent on parental access to minors' information, thus, if the provider is covered by HIPAA, provider discretion applies. See section on "*HIPAA Privacy Regulations*."

Birth Control

There are no specific MI statutes on this issue; this is a Federal Constitutional "right of privacy."

Provider discretion applies for providers not funded by Title X or Title XIX.

There are no specific MI statutes on this issue; this is a Federal Constitutional "right of privacy."

State law is silent on parental access to minors' information, thus, provider discretion applies for providers covered by HIPAA and not funded by Title X. See section on "*HIPAA Privacy Regulations*."

HEALTH SERVICE

IS PARENTAL CONSENT REQUIRED?

IS PARENTAL ACCESS TO THE MINOR'S INFORMATION PERMITTED?

- Federal Constitutional “right of privacy” limits state restrictions on sale/distribution of contraceptives, including to minors. *Carey v. Population Services Int'l*, 431 US 678 (1977).
- Parents have no constitutional right to be notified that their child is seeking or has obtained contraceptives. *Doe v Irwin* 615 F2d 1162 (6th Cir., 1980).

Generally, practitioners must be aware that there is no statutory authority or protection for their actions.

Parental consent not required for services provided by Title X funded agencies or funded by Title XIX. See section on “*Title X Agencies*.”

Access not permitted when services provided by Title X funded agencies. See section on “*Title X Agencies*.”

Generally, pharmacies are covered by the HIPAA Privacy regulations. To the extent that pharmacies maintain records on purchase of emergency contraceptive pills, **pharmacist discretion applies.**

Title X Agencies: Family planning agencies funded under Title X of the Public Health Service Act must provide family planning and related services without regard to age or marital status. [42 CFR 59.5](#). See section on “*Title X Agencies*.”

Medicaid (Title XIX) Funded Services: States that receive federal funding for Medicaid (Title XIX) must cover family planning services and supplies furnished to eligible individuals of child-bearing age, including minors who can be considered to be sexually active who desire such services and supplies. [42 USC § 1396d\(a\)\(4\)\(C\)](#). Numerous federal courts have interpreted this provision to bar requirements that minors obtain parental consent to access family

HEALTH SERVICE

IS PARENTAL CONSENT REQUIRED?

IS PARENTAL ACCESS TO THE MINOR'S INFORMATION PERMITTED?

planning services funded by Medicaid.
T.H. v. Jones, 425 F. Supp. 873 (D. Utah 1975), *aff'd in part*, 425 U.S. 986 (1976); *Planned Parenthood Ass'n of Utah v. Dandoy*, 810 F.2d 984 (10th Cir. 1987); *Doe v. Pickett*, 480 F. Supp. 1218 (S.D. W. Va. 1979).

Under Michigan law, a person shall not distribute a family planning drug or device in a public school or on public school property. [MCL 380.1507](#).

Emergency Care

There are no specific MI statutes on this issue. Case law indicates that parent or guardian consent is required; however, parental consent can be implied for emergency care if actual consent cannot be obtained. *Luka v. Lowrie*, 171 Mich. 122 (1912); *Franklyn v Peabody*, 249 Mich 363 (1930); *Banks v Wittenberg*, 82 Mich App 274 (1978).

Parental consent may not be required for emergency care for specific services with unique statutory requirements. See, for example, section on "*Abortion*."

Governor has power to issue executive orders and directives, which could allow prophylaxis or medical care to an unaccompanied minor during a declared

Required, unless immediate medical attention is needed to preserve the life or health of the patient and obtaining parental consent is impracticable.

Potential for Governor to waive consent requirements that interfere with response to an emergency or disaster.

Yes.

HEALTH SERVICE**IS PARENTAL CONSENT REQUIRED?****IS PARENTAL ACCESS TO THE MINOR'S INFORMATION PERMITTED?**

emergency or disaster under Emergency Management Act. [MCL 30.401 et seq.](#)

Immunizations

Michigan's communicable disease rules mandate immunizing children against specified diseases and infections. [R 325.176](#). However, immunization requirements do not eliminate parental consent requirements.

Generally required.

For exceptions, see sections on "*Title X agencies*," "*Prenatal and Pregnancy-Related Health Care*," and "*Emergency Care*."

Generally, yes.

For exceptions, see sections on "*Title X Agencies*" and "*Prenatal and Pregnancy-Related Health Care*."

Mental Health – Inpatient Care

Mental Health Code, Chapter 4A. [MCL 330.1498a-330.1498t](#)

Parents may admit for inpatient care.

Minor may request inpatient care if 14 years or older, but parent must consent.

Absent consent, hospital may seek court order for admission if in best interest of child.

Required.

A minor of any age may be hospitalized for mental health reasons if a parent/legal guardian or agency requests.

A minor of 14 years or older who has been hospitalized may object to hospitalization and obtain court review.

A minor 14 years or older may request hospitalization, but hospital must contact parents to obtain consent.

For admission, minor must be found suitable for hospitalization. Suitability shall not be based solely on one or more of the following: epilepsy; developmental delay; brief periods of intoxication; juvenile offenses; or sexual, religious or political activity.

Yes.**Mental Health – Outpatient Care**

Mental Health Code, [MCL 330.1707](#)

Not required.

A minor age 14 or older may request and receive up to 12 outpatient sessions or four months of outpatient

Provider discretion applies.

Information may be given to parent, guardian or person in loco parentis for a compelling reason based on a substantial probability of harm to the minor or to another individual; mental health professional must

HEALTH SERVICE

IS PARENTAL CONSENT REQUIRED?

IS PARENTAL ACCESS TO THE MINOR'S INFORMATION PERMITTED?

Minor may consent to outpatient mental health services if 14 years or older. Pregnancy termination referral services and the use of psychotropic drugs are excluded.

counseling. After this, parental or guardian consent is required to continue services.

notify minor of his/her intent to inform parent.

Prenatal and Pregnancy-Related Health Care

Public Health Code, [MCL 333.9132](#)

Minor may consent to maintain life and improve the health of the minor or the minor's child or fetus.

Not required.

The consent of any other person, including the putative father of the baby or spouse, parent, guardian or person in loco parentis, is not necessary to authorize health care to a minor or to a child of a minor.

"Health care" refers to treatment or services intended to maintain the life and improve the health of both the minor and the minor's child or fetus.

At the initial visit permission must be requested of the patient to contact their parents for any additional medical information that may be necessary or helpful.

See section on "*Title X agencies*" if services provided to minor by Title X funded agency.

Provider discretion applies.

Before providing care, the patient must be informed that notification may take place.

For medical reasons information may be given to or withheld from the putative father of the baby or the minor's spouse, parent, guardian or person in loco parentis without consent of the minor and notwithstanding their express refusal to the providing of the information.

Access not permitted when services provided to minor by Title X funded agency. See section on "*Title X Agencies*."

Provision of Health Care for a Child of the Minor

Public Health Code, [MCL 333.9132](#)

Minor may consent to maintain life and improve the health of the minor or the minor's child or fetus.

Not required.

The minor mother shall consent to care for her child.

The consent of any other person, including the father of the baby or spouse, parent, guardian or foster parent, is not necessary to authorize health care to a child of a minor.

A health care professional may inform the parent, guardian or putative father of the child about health care given or needed without consent of the minor.

Minor Mother.

See above regarding prenatal and pregnancy-related care.

HEALTH SERVICE**IS PARENTAL CONSENT REQUIRED?****IS PARENTAL ACCESS TO THE MINOR'S INFORMATION PERMITTED?**

Substance Use Disorder Services**Not required.****Provider discretion applies.**Mental Health Code, [MCL 330.1264](#)

For medical reasons information as to the treatment given or needed may be given to or withheld from the spouse, parent, guardian or person in loco parentis without consent of the minor even if the minor expressly refuses to consent to disclosures of the information.

Minor may consent to the provision of substance use disorder related medical or surgical care, treatment, or services.

For providers that are [Part 2 programs](#) and covered by 42 CFR Part 2, if the minor consented to the treatment, then the minor must consent to disclose their records. 42 CFR § 2.14.

Under limited circumstances minors may be provided with substance use disorder treatment or rehabilitation services without their consent. [MCL 330.1265](#).

Title X Agencies³**Not required.****No.**

Title X of the Public Health Service Act funds agencies to provide services to promote the reproductive and general health care of the family planning client population, [42 USC § 300 et seq.](#); [42 CFR Part 59](#). For information on available health services, go to [Michigan Department of Health & Human Services Family Planning](#).

Title X agencies may not require the consent of parents or guardians for the provision of services to a minor.

To the extent practical, Title X agencies should encourage family participation; however, family involvement in a minor's family planning services is not mandatory. [42 USC § 300\(a\)](#); [42 CFR 59.10\(b\)](#).

Title X agencies cannot notify a parent or guardian before or after a minor has requested or received Title X family planning services.

All information as to personal facts and circumstances obtained by project staff about individuals receiving services, including minors, must be held confidential and must not be disclosed without documented consent, except as may be necessary to provide services to the patient or as required by law, with appropriate safeguards for confidentiality.

Funded agencies must provide services without regard to age or marital status, [42 CFR 59.5](#).

When billing for services, Title X agencies must make reasonable efforts to avoid jeopardizing client confidentiality and must inform a minor client of any potential for disclosure of their confidential information to a policyholder that is someone other than the client. [42 CFR 59.10](#).

Sexually Transmitted Infection (STI) and HIV**Not required for diagnosis or treatment.****Provider discretion applies as to the treatment given or needed.**

For medical reasons information as to the treatment given or needed, may be given to or withheld from the spouse, parent, guardian or

HEALTH SERVICE

IS PARENTAL CONSENT REQUIRED?

IS PARENTAL ACCESS TO THE MINOR'S INFORMATION PERMITTED?

Public Health Code, [MCL 333.5127](#), [MCL 333.5131](#), [MCL 333.5133](#) and [MCL 722.623](#)

Minor may consent to medical or surgical care for diagnoses and treatment of an STI or HIV

MCL 333.5127 does **not** apply to medical care to *prevent* an STI disease, such as a vaccine.

Reportable as reasonable cause to suspect child abuse or neglect if pregnancy of a child less than 12 years of age.

Reportable as reasonable cause to suspect child abuse or neglect if an STI is present in a child who is over 1 month of age but less than 12 years of age.

Also not required for medical care to prevent sexually transmitted infection or HIV (e.g. vaccine) if services provided by Title X funded agency.

See section on "*Title X Agencies.*"

person in loco parentis without consent of the minor and notwithstanding the express refusal of the minor to the providing of the information.

Information may be disclosed to the state health department, local health department, or health care provider to protect the health of an individual, prevent further transmission of HIV, or diagnose and care for a patient. MCL 333.5131(5).

Access not permitted when services provided to minor by Title X funded agency. See section on "*Title X Agencies.*"

Dispensing Naloxone to Minors

See section on "*Substance Use Disorder Services*" for minors seeking medical care for themselves.

The Michigan Naloxone [Standing Order](#) authorizes registered pharmacies to dispense Naloxone to Eligible Individuals without a prescription and without identifying a particular patient.

Not required.

Registered pharmacies can dispense Naloxone to Eligible Individuals, including minors, without additional requirements.

It appears that there are no restrictions on dispensing Naloxone to minors.

Pharmacist discretion applies.

HEALTH SERVICE

IS PARENTAL CONSENT REQUIRED?

IS PARENTAL ACCESS TO THE MINOR'S INFORMATION PERMITTED?

“Eligible Individuals” means individuals within the state of Michigan, who are seeking opioid antagonists.

The standing order was issued pursuant to [MCL 333.17744e](#), which provides that “a pharmacist may dispense an opioid antagonist to any individual pursuant to a standing order issued by the chief medical executive”

OTHER LAWS RELATED TO MINORS’ RIGHT TO PRIVACY REGARDING HEALTH INFORMATION

Reporting of Communicable and Other Diseases, Disabilities and Conditions

Public Health Code, [MCL 333.5111](#) and Communicable Disease Rules [R 325.171](#) *et seq.*

Requires physicians and laboratories and permits other health care providers to report designated communicable and other diseases, disabilities and conditions to the local health department or the Michigan Disease Surveillance System.

information to be provided includes individually identifiable information.

See https://www.michigan.gov/documents/mdch/Reportable_Diseases_Michigan_by_Pathogen_478489_7.pdf for 2025 list of reportable diseases, disabilities and conditions.

Health departments required to protect confidentiality of individuals’ information regarding HIV/AIDS. Information may be disclosed in limited circumstances, such as to protect the health of an individual, to prevent further transmission of HIV and to diagnose and care for a patient, [MCL 333.5131](#)

Health departments required to protect medical and epidemiological information that identifies an individual. Information may be disclosed if health officer determines disclosure is necessary to protect the public health, [MCL 333.5111\(3\)](#); R 325.181.

Reporting of Abuse or Neglect

Child Protection Law, [MCL 722.621 et seq.](#)

The following individuals are required to report suspected “child abuse or neglect” to Child Protective Services:

Physicians	Licensed emergency medical care providers.
Licensed master social workers.	School counselors.
Dentists.	Audiologists.
Licensed bachelor's social workers.	Teachers.
Physician's assistants.	Psychologists.
Registered social service technicians.	Law enforcement officers.
Registered dental hygienists.	Marriage and family therapists.
Social service technicians.	Members of the clergy.
Medical examiners.	Licensed professional counselors.
Persons employed in a professional capacity in any office of the Friend of the Court.	Regulated childcare providers.
Nurses.	Social workers.
School administrators.	Employees of an organization or entity that, as a result of federal funding statutes, regulations, or contracts, would be prohibited from reporting in the absence of a state mandate or court order (example: domestic violence provider).

Child abuse” means harm or threatened harm to a child's health or welfare that occurs through nonaccidental

physical or mental injury, sexual abuse, sexual exploitation, or maltreatment, by a parent, a legal guardian, any other person responsible for the child's health or welfare, a teacher, a teacher's aide, a member of the clergy, or an individual 18 years of age or older who is involved with a youth program.

“Child neglect” means harm or threatened harm to a child's health or welfare by a parent, legal guardian or any other person responsible for the child's health or welfare that occurs through either of the following:

(i) Negligent treatment, including the failure to provide adequate food, clothing, shelter or medical care.

(ii) Placing a child at an unreasonable risk to the child's health or welfare by failure of the parent, legal guardian or other person responsible for the child's health or welfare to intervene to eliminate that risk when that person is able to do so and has, or should have, knowledge of the risk.

Sexual activity that is illegal under criminal sexual conduct statute may or may not be reportable. Look at whether the actor is a person responsible for the child's welfare or other individual identified by law. See *Peo v Beardsley*, 263 Mich App 408 (2004).

Pregnancy of a child less than 12 years of age or the presence of an STI in a child who is over 1 month of age but less than 12 years of age is reasonable cause to suspect child abuse and neglect have occurred and must be reported.

Physical therapist assistants.	Physical therapists.
Athletic trainers.	Occupational therapists.

Medical Records Access Act, [MCL 333.26261-MCL 333.26271](#)

Provides for and regulates access to and disclosure of medical records.

Applies to most health care providers.

A pharmacist, pharmacy, and psychiatrist psychologist, social worker, or professional counselor who provides only mental health services are excluded from this act.

Under this act, a minor’s parent, guardian or person acting in loco parentis has the right to review and obtain a copy of the minor’s medical record, unless the minor lawfully obtained health care without the consent or notification of a parent, guardian or other person acting in loco parentis, in which case the minor has the exclusive right to exercise the rights of a patient under this act with respect to those medical records relating to that care.

Part 2, [42 CFR 2.14](#)

Imposes restrictions upon the use and disclosure of substance use disorder patient records held by any Part 2 program.

Defers to state law as to whether minors can consent to treatment.

If the minor consents to treatment as permitted by state law, then consent for use or disclosure of the records held by a Part 2 program may be given only by the minor patient.

If state law requires parental consent to treatment, both the minor and the parent/guardian must consent to the use or disclosure.

There is an exception for disclosures to parents to reduce a substantial threat to the life or well-being of the minor or another person if (1) minor lacks capacity to make a rational decision and (2) the threat to life or well-being can be reduced by communicating with the parent or guardian.

HIPAA Privacy Regulations, [45 CFR Parts 160 and 164](#)

Apply to most health care providers

Establish minimum national privacy standards

Establish right of patients to access their own health information

HIPAA defers to state law as to whether minors can consent to treatment.

Under these regulations, generally, a parent, guardian or other person authorized by state law to consent to the minor’s health care, has access to the minor’s health information. Exceptions:

- 1) When the minor is the one who consents to care and the consent of the parent is not required under State or other applicable law.

-
- 2) If another person authorized by law consents to the health care service, then parent has no right of access to health information concerning that service.
 - 3) When parent agrees to a confidential relationship between provider and minor, then parent has no right of access to health information concerning that service.

Even with exceptions (1)-(3) above, parents may have access to medical records of the minor if state law requires or permits parental access. Parental access is denied if state law prohibits access. If state law is silent as to access, health care provider may exercise discretion as to whether to provide access. 45 CFR 164.502(g).

Provider may refuse to provide parent with access in situations of domestic violence, abuse or neglect or where minor could be endangered.

Provider may disclose health information when required by law, also in situations of imminent threat to the health and safety of a person or the public. 45 CFR 164.512

Laws Available Online

Michigan Statutes: www.legislature.mi.gov

Michigan Administrative Rules: <https://www.michigan.gov/lara/bureau-list/moahr/admin-rules>

Federal Statutes: <http://uscode.house.gov>

Federal Regulations: <http://www.ecfr.gov/>

February 2026

This document was originally developed by Denise Chrysler, J.D. former director of the Network for Public Health Law—Mid-States Region, while employed by the Michigan Department of Community Health (MDCH). It has been updated by Emma Kaeser, J.D., Staff Attorney and Meghan Mead, J.D., Deputy Director, Network for Public Health Law—Mid-States Region. Thank you to MDCH for its permission to make this fact sheet available. The Network promotes public health and health equity through non-partisan educational resources and technical assistance. These materials provided are provided solely for educational purposes and do not constitute legal advice. The Network's provision of these materials does not create an attorney-client relationship with you or any other person and is subject to the [Network's Disclaimer](#).

SUPPORT

Support for the Network provided by the Robert Wood Johnson Foundation. The views expressed in this document do not necessarily reflect the views of the Foundation.



Robert Wood Johnson
Foundation

¹ “Parent” is used throughout this document for brevity. It is meant to include guardians or other legal representatives of the minor who are authorized by law to make decisions or act on behalf of the minor.

² This resource assumes that the minors’ information is not covered by the Family Educational Rights and Privacy Act (FERPA), [20 USC § 1232g](#); [34 CFR Part 99](#), which applies to information, including what may be health information, in educational records held by certain educational agencies and institutions. FERPA provides for a broad parental right of access to inspect and review the educational records of students under the age of 18. This right of access generally preempts state law to the contrary. Thus, while a minor’s right to consent to treatment does not depend on whether the records of such treatment would be covered by FERPA, records covered by FERPA can generally be accessed by parents notwithstanding more stringent privacy protections in state law.

³ In a recent lawsuit, *Deanda v. Becerra*, the Fifth Circuit Court of Appeals held that Title X agencies in Texas must follow a Texas law requiring parental consent for care provided to a minor. 96 F. 4th 750 (5th Cir. 2024). In response to this ruling, the U.S. Department of Health and Human Services Office of Population Affairs (OPA) issued a [policy notice](#) stating that OPA will not be enforcing 42 CFR 59.10(b), which prohibits Title X agencies from requiring parental consent for care provided to a minor and from notifying parents or guardians of a minor’s request for or receipt of family planning services, in Texas. OPA also stated that it will not enforce 42 CFR 59.10(b) elsewhere in the Fifth Circuit, which includes Texas, Louisiana, and Mississippi, to the extent that it conflicts with state law. Notwithstanding *Deanda*, 42 CFR 59.10(b) remains in effect, and OPA continues to enforce its requirements in Michigan and in all other states outside of the Fifth Circuit.