Initiative 141



Legislative Council Staff

Nonpartisan Services for Colorado's Legislature

Fiscal Summary

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LCS TITLE: PARENTAL CONSENT FOR HEALTH CARE TREATMENT OF A CHILD

Fiscal Summary of Initiative 141

This fiscal summary, prepared by the nonpartisan Director of Research of the Legislative Council, contains a preliminary assessment of the measure's fiscal impact. A full fiscal impact statement for this initiative is or will be available at leg.colorado.gov/bluebook. This fiscal summary identifies the following impact.

State spending. By requiring that mental health and medical providers and facilities seek parental consent in most circumstances, the measure will affect state programs that directly provide medical care, as well as regulatory programs that oversee health care professionals and facilities. Agencies responsible for providing care may require additional staff to ensure that consent is received from parents. This includes, among others, the Department of Human Services, which provides health care to children and youth in the juvenile justice system and through mental health facilities and contractors. Agencies that regulate services and providers, such as the Department of Regulatory Agencies and the Colorado Department of Public Health and Environment, will have also have additional workload and costs to adjust policies and program operations, and in some cases to take disciplinary action for noncompliance with the measure.

Local government spending. Similar to the state impacts above, the measure will potentially increase workload and costs for local governments to adjust policies and program operations in accordance with the measure. Local governments and programs that may be affected include school districts, county departments of human services, and law enforcement agencies, among others.

Economic impacts. The economic impacts of the measure are unknown, as they depend on future actions and decisions, primarily by parents. If the measure's consent requirements impact delivery of services for children, health and future economic outcomes for those children may change.