

Legislative Analysis



HOMELESS AND RUNAWAY YOUTH

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<http://www.house.mi.gov/hfa>

House Bill 4085 as introduced
Sponsor: Rep. Lori M. Stone

Analysis available at
<http://www.legislature.mi.gov>

House Bill 4086 as introduced
Sponsor: Rep. John R. Roth

House Bill 4087 as introduced
Sponsor: Rep. Amos O'Neal

Committee: Families, Children and Seniors
Complete to 5-15-23

SUMMARY:

House Bill 4085 would amend 1973 PA 116, known as the child care licensing act, to allow a *child caring institution* to provide services to *homeless youth* and *runaway youth* for up to 72 hours with or without parental consent.

The act defines a *child caring institution* as a child care facility that is organized to receive minor children for care, maintenance, and supervision, usually on a 24-hour basis,¹ in buildings maintained by the institution for that purpose, and that operates throughout the year.

Homeless youth would mean an individual for whom it is not possible to live in a safe environment with a relative, who has no other safe alternative living arrangement, and who is either of the following:

- Seeking shelter in a basic center as described in federal law.²
- Seeking enrollment in a transitional living program as described in federal law and either of the following:
 - At least 16 years of age but less than 22 years of age.
 - Not less than 22 years of age as of the expiration of the maximum period of stay permitted under as described in federal law if the individual commences the stay before reaching 22 years of age

Runaway youth would mean an individual who is seeking shelter in a basic center as described in federal law, who is less than 18 years of age, and who absents themselves from home or a place of legal residence without the permission of a parent or legal guardian.

¹ The bill would add an exception to the 24-hour requirement for homeless youth provided services for up to 72 hours under its provisions.

² For a brief description of basic centers and transitional living programs, see: https://www.acf.hhs.gov/sites/default/files/documents/fysb/rhy_factsheet_043018_508.pdf
For further information: <https://www.acf.hhs.gov/fysb/runaway-homeless-youth>

The bill would not apply to youth who are under a court order exercising jurisdiction under chapter XIA of the Probate Code (known as the juvenile code) or to youth who are currently under the custody of the state.

MCL 722.111 and proposed MCL 722.111b

House Bill 4086 would also amend the child care licensing act. The bill would expand the definition of *minor child* for purposes of the act.

Currently, *minor child* means either an individual who is less than 18 years of age or an individual who meets all of the following:

- The individual is a resident in a child caring institution, family foster home, or family foster group home.
- The individual is at least 18 but less than 21 years of age.
- The individual meets the requirements of the Young Adult Voluntary Foster Care Act.³

Under the bill, *minor child* would additionally include an individual who meets all of the following:

- The individual is a resident in a child caring institution, family foster home, or family foster group home.
- The individual is at least 18 but less than 21 years of age.
- The individual is homeless.

Although the bill uses the term *homeless* rather than *homeless youth*, it would include a definition for the term *homeless youth* that is identical to that in House Bill 4085.

MCL 722.111

House Bill 4087 would create a new act to allow homeless youth or runaway youth (defined as in House Bill 4085) access to health care without parental consent and allow health care providers to treat homeless or runaway youth without parental consent.

Under the bill, a homeless or runaway youth could consent to, contract for, and receive medical, dental, or behavioral health examinations, care, or treatment without a parent's or guardian's permission, authority, or consent. Acceptable documentation demonstrating the individual's status as a homeless or runaway youth would include a signed statement from the following:

- A director or designee of a governmental or nonprofit entity receiving public or private funding to provide services to individuals who are homeless or runaway youth.
- A local educational agency liaison for homeless or runaway youth designated under federal law, a local educational agency foster care point of contact designated under federal law, or a school social worker or counselor.
- An attorney representing the individual in any legal matter.
- The individual and two adults with knowledge of the individual's actual circumstances.

The bill would not allow a homeless or runaway youth to consent to an abortion.

³ <https://www.michigan.gov/mdhhs/faq/fc1821>

A homeless or runaway youth who is a parent could consent to, contract for, and receive medical, dental, and behavioral health exams, care, or treatment for their child.

A physician or other qualified professional licensed to practice in this state who provides medical, dental, or behavioral health exams, care, or treatment to a homeless or runaway youth could not be held liable in a civil or criminal action for providing services without having obtained permission from their youth's parent or guardian. The bill would not, however, relieve the physician or qualified licensed professional from liability for negligence in the diagnosis or treatment of a homeless or runaway youth.

Identification of an individual as a homeless or runaway youth would not automatically mean they have experienced child abuse or neglect.

The bill would not supersede the mandatory reporting requirements under the Child Protection Law.

FISCAL IMPACT:

House Bills 4085 and 4086 would increase costs for the Department of Health and Human Services (DHHS) and local units of government by an indeterminant amount. The fiscal impact of the bill would be dependent on an increased number of homeless or runaway youths, who are not under court jurisdiction or state custody, receiving services in child caring institutions. Child caring institutions that contract with DHHS receive both state per diem and county per diem rates based on services provided and capacity. Child caring institutions may also experience increased staffing costs due to contracted staff-to-youth ratios. An increase of youth in residential care would require an increased number of staff to comply with contracted ratios.

House Bill 4087 should have a negligible fiscal cost on the state's Medicaid budget. This fiscal cost depends on any increased medically necessary services provided to any homeless youth that are enrolled in Medicaid and who are not able to receive any required parental consent for the medical service. For fiscal year 2022-23, the federal Medicaid reimbursement rate is 64.71%.

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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.