

# Legislative Analysis



## DUAL LICENSURE FOR MENTAL HEALTH AND SUBSTANCE USE DISORDER PROGRAMS

Phone: (517) 373-8080  
<http://www.house.mi.gov/hfa>

### Senate Bill 962 as reported from House committee

Sponsor: Sen. Wayne Schmidt

House Committee: Health Policy

Senate Committee: Health Policy

Complete to 10-24-18

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

*(Enacted as Public Act 388 of 2018)*

### SUMMARY:

Senate Bill 962 would amend the Adult Foster Care Facility Licensing Act to allow an adult foster care facility to be licensed as a substance use disorder (SUD) program as well, in recognition that the needs fulfilled by those programs may be co-occurring.

Currently, the Act omits alcohol and SUD rehabilitation centers from classification as an adult foster care facility. The bill would create an exception if an alcohol or SUD rehabilitation center were licensed as both a SUD program and an adult foster care facility and approved as a *co-occurring enhanced crisis residential program*.

Under the bill, a *co-occurring enhanced crisis residential program* would mean a program approved by the Department of Health and Human Services (DHHS) for providing short-term intensive mental health and SUD services that is able to address the mental health needs or SUD needs, or both, of an individual through enhanced programming and staffing patterns that are reviewed and approved by DHHS.

The bill would also specify that a resident of an adult foster care facility, when that facility is also licensed as an SUD program and approved as a co-occurring enhanced crisis residential program, would not be considered to require continuous nursing care. [Note: Under the Act, adult foster care facilities are for adults who do not require continuous nursing care.]

The bill would take effect 90 days after enactment.

MCL 400.703, 400.704, and 400.726a

### BRIEF DISCUSSION:

According to committee testimony, the bill is intended to allow individuals with a mental illness who are also suffering from substance use disorders to be treated at the same facility. Often, those needs are co-occurring, meaning that they exist simultaneously, but patients are forced to choose between the two needs and two applicable levels of care: sub-acute for the crisis centers that treat mental health needs, and inpatient/residential for the detoxification centers. The bill would give facilities the option of being licensed for both needs, and allow patients to opt into treatment at those facilities for co-occurring needs.

**HOUSE COMMITTEE ACTION:**

The House Committee on Health Policy reported the Senate-passed version of the bill without amendment.

**FISCAL IMPACT:**

Senate Bill 962 would not have an impact on the expenditures or revenues of any unit of state or local government.

**POSITIONS:**

The following organizations testified in support of the bill (10-3-18):

Community Mental Health for Central Michigan  
Hope Network

The Michigan Department of Health and Human Services' Community-Based Services program indicated support for the bill. (10-3-18)

Legislative Analyst: Jenny McInerney  
Fiscal Analyst: Marcus Coffin

---

■ 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.