



Senate Fiscal Agency
P. O. Box 30036
Lansing, Michigan 48909-7536



BILL ANALYSIS

Telephone: (517) 373-5383
Fax: (517) 373-1986
TDD: (517) 373-0543

House Bill 4476 (Substitute H-1 as reported without amendment)
Sponsor: Representative Barb Vander Veen
House Committee: Family and Children Services
Senate Committee: Health Policy

Date Completed: 6-15-04

RATIONALE

Reportedly, nearly 600,000 Americans care for a relative or friend who is unable to care for himself or herself because of a physical or mental disability, chronic or terminal illness, or other special need. The daily responsibilities of caring for a loved one with special needs can result in significant emotional and physical strain and financial hardship. One option for family caregivers who need temporary relief is respite care, which, according to the National Respite Coalition Task Force, has been shown to prevent or delay more costly out-of-home placements, reduce the risk of abuse or neglect, and help keep all family members safe and stable. Reportedly, however, some family caregivers have difficulty finding affordable, quality respite care, or are hesitant to seek such assistance. It has been suggested that a resource network should be established to disseminate information about respite care and facilitate the statewide coordination of these services.

CONTENT

The bill would create the "Michigan Lifespan Respite Services Resource Act" to require the Director of the Department of Community Health (DCH) to establish within the DCH the Michigan Lifespan Respite Services Resource Network, in order to develop and encourage statewide coordination of respite services and to work with community-based private nonprofit or for-profit agencies, public agencies, and interested citizen groups to engage in networking community lifespan respite services information resources.

The Network would have to do all of the following:

- Develop and distribute respite services information.
- Promote information exchange and coordination among State and local governments, community lifespan respite services programs, agencies serving individuals who need respite care, families of individuals unable to care for themselves, and respite care advocates to encourage efficient provision of respite services and reduce duplication of effort.
- Promote a statewide network of community lifespan respite services.
- Establish a respite care website and toll-free respite care information hotline.

"Respite care" would mean providing short-term relief to primary caregivers from the demands of ongoing care for an individual whose health and welfare would be jeopardized if left unattended. A "caregiver" would be an individual providing ongoing care for an individual unable to care for himself or herself.

ARGUMENTS

(Please note: The arguments contained in this analysis originate from sources outside the Senate Fiscal Agency. The Senate Fiscal Agency neither supports nor opposes legislation.)

Supporting Argument

Many people prefer to care for family members with special needs at home, allowing them to live less restricted, more independent lives, rather than place them in an institution. Although remaining in a familiar environment with loved ones has

clear clinical benefits for many people, it can be very stressful for caregivers. The responsibility of constantly attending to another person can cause exhaustion or physical illness, make holding a job outside the home difficult, place a strain on a marriage, and hinder a person's ability to address other family crises that may arise.

Despite the hardships of providing 24-hour care, family members often are reluctant to take a break. They might not feel comfortable leaving their loved ones in someone else's care, even for a short period of time, or might feel that asking for help reflects poorly on their ability to care for their relatives. Some people are under the misconception that respite care is only for emergencies. Caregivers who would like to use respite care often do not know where to look if no services exist in their immediate area. The proposed Network would promote coordination of services and provide "one-stop shopping" for those seeking information about respite care options, enabling individuals with special needs to remain at home with their families.

Also, taking advantage of respite care can give caregivers the relief they need to continue in that role, which is a far less costly option than institutionalizing a person. Reportedly, it would cost nearly \$200 billion per year to replace the care that family members provide in the home with paid care.

Legislative Analyst: Julie Koval

FISCAL IMPACT

This bill would have an indeterminate fiscal impact on the Department of Community Health. Funding would need to be provided (either through a new appropriation or a redirection of current appropriations) to pay for costs related to the establishment of the program as well as administrative costs necessary for maintaining it. Similar programs have been established in other states since the late 1990s. Appropriations for these programs have ranged from \$50,000 to \$1,200,000 a year.

The U.S. Senate has passed Federal legislation (S. 538) authorizing Lifespan Respite Care grants and cooperative agreements that would be made available to

the states. The U.S. House has not taken any action on this bill. If this legislation were enacted and funds were appropriated for this purpose, Michigan could be eligible to apply for and receive these funds to cover costs related to the establishment and maintenance of a Lifespan Respite Services Resource Network.

Fiscal Analyst: Dana Patterson

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.