

FINAL BILL REPORT

SHB 1641

C 275 L 17
Synopsis as Enacted

Brief Description: Concerning informed consent for nonemergency, outpatient, primary health care services for unaccompanied homeless youth under the federal McKinney-Vento homeless assistance act.

Sponsors: House Committee on Judiciary (originally sponsored by Representatives McBride, Caldier, Graves, Jinkins, Fey, Clibborn and Stanford).

House Committee on Judiciary
Senate Committee on Health Care

Background:

Consent for Medical Treatment of a Minor.

Generally, persons under the age of 18 cannot provide consent for their own medical care.

There are some exceptions to this general rule if the minor:

- is in need of emergency medical treatment;
- is seeking family planning services or pregnancy care;
- is aged 16 or older and the court has entered a decree of emancipation;
- is aged 15 or older and satisfies the court created "mature minor rule," meaning the minor has, based on a number of factors, demonstrated the maturity to provide consent for medical treatment;
- is aged 13 or older and seeking mental health treatment; or
- is aged 13 or older and seeking outpatient substance abuse treatment.

If a minor's consent is not sufficient to access health care services, informed consent for health care may be obtained from a member of one of the following classes of persons in the following order of priority:

1. the court-appointed guardian or custodian of the patient;
2. a person authorized by the court, in dependency or termination of parental rights proceedings, to consent to medical care for a child in out-of-home placement;
3. parents of the minor patient;
4. the individual to whom the minor's parent has given signed authorization to make health care decisions for the minor patient; and
5. a competent adult representing himself or herself to be a relative responsible for the health care of such a minor patient or a competent adult who has signed and dated a

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declaration under penalty of perjury stating that the adult person is a relative responsible for the health care of the minor patient.

A health care provider may, but is not required to, rely on the representation of a person claiming to be a relative responsible for the care of a minor patient, as long as the health care provider does not have actual notice of the falsity of the statement. The provider or a health care facility may, in its discretion, require documentation of a person's claimed status as being a relative responsible for the health care of the minor patient, but there is no obligation to require such documentation. Providers and facilities are immune from suit in any action, civil or criminal, or from professional or other disciplinary action, when such reliance is based on a declaration signed under penalty of perjury stating that the adult person is a relative responsible for the health care of the minor patient.

Consent for Medical Treatment of a Homeless Minor.

The school code separately provides that a school nurse, school counselor, or homeless student liaison is authorized to provide consent for health care for a homeless student if all of the following conditions are met:

- Consent is necessary for nonemergency outpatient primary care services, including physical examinations, vision examinations and eyeglasses, dental examinations, hearing examinations and hearing aids, immunizations, treatments for illnesses and conditions, and routine follow-up care customarily provided by a health care provider in an outpatient setting, excluding elective surgeries.
- The patient meets the definition of a homeless child or youth under the federal McKinney-Vento Homeless Assistance Act, which is aimed at addressing the problems that homeless children and youth face in enrolling, attending, and succeeding in school.
- The patient is not under the supervision or control of a parent, custodian, or legal guardian.

A person consenting to health care for a homeless student and the person's employing school are not liable for any care or payment for care. Written notice of this exemption from liability must be given to the person providing care.

Summary:

The provision in the school code authorizing a school nurse, school counselor, or homeless student liaison to consent for health care for a homeless student under certain conditions is repealed, and authorizing language is placed in the section that deals generally with informed consent for health care for minors and others not competent to consent.

A school nurse, school counselor, or homeless student liaison are authorized to provide consent for health care for a homeless student under the following conditions:

- Consent is necessary for nonemergency outpatient primary care services, including physical examinations, vision examinations and eyeglasses, dental examinations, hearing examinations and hearing aids, immunizations, treatments for illnesses and conditions, and routine follow-up care customarily provided by a health care provider in an outpatient setting, excluding elective surgeries.

- The patient meets the definition of a homeless child or youth under the federal McKinney-Vento Homeless Assistance Act, which is aimed at addressing the problems that homeless children and youth have faced in enrolling, attending, and succeeding in school.
- The patient is not under the supervision or control of a parent, custodian, or legal guardian and is not in the care and custody of the Department of Social and Health Services.

The person authorized to consent to care, and the person's employing school or school district, are not subject to administrative sanctions or civil damages resulting from the consent or nonconsent for care, any care, or payment for any care. Nothing prevents a health care facility or provider from seeking reimbursement from other sources for care provided.

Upon request by a health care facility or provider, the person authorized to consent must provide a declaration signed and dated under penalty of perjury stating that he or she is a school nurse, school counselor, or homeless student liaison and that the minor patient meets the statutory requirements. The declaration must also include written notice of exemption from liability.

A health care provider may, but is not required to, rely on the representation of a school nurse, school counselor, or homeless student liaison authorized to consent to health care of the minor patient if the health care provider does not have actual notice of the falsity of the statement. A health care provider or facility may, in its discretion, require documentation of a person's claimed status as being a school nurse, school counselor, or homeless student liaison authorized to consent, but there is no obligation to require such documentation. Providers and facilities are immune from suit in any civil or criminal action, or from professional or other disciplinary action, when reliance is based on a declaration signed under penalty of perjury stating that the adult person is a person claiming to be authorized to consent to the health care of the minor patient.

Votes on Final Passage:

House	90	7	
Senate	46	3	(Senate amended)
House	88	7	(House concurred)

Effective: July 23, 2017