HOUSE RESEARCH

- Bill Summary :

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Overview

Under Minnesota Statutes, chapter 253B, when there is no suitable alternative to judicial commitment, a court may commit a person who is mentally ill, developmentally disabled, or chemically dependent to the least restrictive program that can meet the person's treatment needs. This bill, if passed, would add mandatory assisted outpatient treatment with weekly appointments for at least one year for all persons committed by a court as mentally ill, and would require compliance through required reporting and law enforcement authority.

Section

- Exceptions to consent requirement. Amends § 144.293, subd. 5. Adds to the exceptions to the prohibition on the release of health records without release; allows release of health records to a committing court or law enforcement agency for purposes of providing notice of the failure of a patient to appear for an assisted outpatient treatment appointment or failure to substantially comply with a court-approved treatment plan.
- Peace or health officer authority. Amends § 253B.05, subd. 2. Requires a peace officer to take a person into custody and transport the person to a treatment facility if law enforcement has received notice of the person's failure to appear for an assisted outpatient treatment appointment or failure to substantially comply with a court-approved treatment plan.
- **Early intervention criteria.** Amends § 253B.065, subd. 5. Adds criteria for when a court must order early intervention treatment, to include a patient who previously received court-ordered treatment.

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Section

Apprehend and hold orders. Amends § 253B.07, subd. 2b. Allows for a court order to hold a patient in a treatment facility if an evaluation has been ordered for a patient who has failed to substantially comply with an order for assisted outpatient treatment.

- **Initial commitment period.** Amends § 253B.09, subd. 5. Specifies that the maximum period of initial commitment (6 months) does not apply if the person is subject to a mandatory assisted outpatient treatment order.
- Mandatory assisted outpatient treatment. Proposes coding for § 253B.09, subd. 6. Creates requirement for all commitment orders for persons committed as mentally ill and dangerous to include a requirement that the person participate in mandatory assisted outpatient treatment for one year after discharge from a treatment facility.

Requires the head of the treatment facility to arrange for case manager assignment, and for the case manager, in consultation with the person and treating providers, to develop a written individual treatment plan. The treatment plan must include an array of services, as necessary, and be individually tailored. The treatment plan must include at least weekly appointments with a case manager or treatment provider and verification that the person is taking medications as prescribed. Requires that the treatment plan be presented to the committing court for review and approval.

Requires the case manager or treatment provider to notify the committing court and law enforcement if the person fails to appear for one scheduled appointment or otherwise fails to substantially comply with the treatment plan, for the purposes of taking the person into custody pursuant to section 253B.05, subd. 2.

Mentally ill or chemically dependent persons. Amends § 253B.13, subd. 1. Specifies that the maximum period of commitment after a review hearing (12 months) does not apply if the person is subject to a mandatory assisted outpatient treatment order.