STATE OF WYOMING

DRAFT ONLY NOT APPROVED FOR INTRODUCTION

SENATE	FILE	NO
O \square I	$_{\rm L}$	110.

Title 25 revisions.

Sponsored by: Select Committee on Mental Health and Substance Abuse Services

A BILL

for

1 AN ACT relating to involuntary commitments and emergency detentions; amending definitions as specified; expanding 2 the definition of "mental illness" and "mentally ill" as 3 specified; specifying services that can be considered 4 5 treatment; clarifying liability for costs of emergency 6 detention; specifying responsibility for the transportation of a detainee, a patient and a discharged person under 7 8 specified conditions; clarifying conditions under which the 9 state or county shall accept a provider's discharge of debt 10 for treatment of a detainee or patient; requiring counties to establish a single point of responsibility for treatment 11 of detainees; requiring rule making as specified; 12 conforming provisions; and providing for an effective date. 13

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1 2 Be It Enacted by the Legislature of the State of Wyoming: 3 4 **Section 1.** W.S. 25-10-101(a) (ii) (intro) and (C), (iv), (ix) and (xiii), 25-10-104 by creating a new 5 6 subsection (b), 25-10-109(b)(ii) and (d), 25-10-112(a)(ii), 7 (iii) and by creating a new paragraph (iv), (d)(intro), (e) and by creating a new subsection (g) and 25-10-125 are 8 9 amended to read: 10 11 25-10-101. Definitions. 12 13 (a) As used in this act: 14 15 (ii) "Dangerous to himself or others or unable 16 to satisfy basic needs" means that, as a result of mental illness, a person: 17 18 19 (C) Evidences behavior manifested by recent acts or omissions that, due to mental illness, he is unable 20 to satisfy basic needs for nourishment, essential medical 21

care, shelter or safety so that a substantial probability

exists that death, serious physical injury, serious

physical debilitation, serious mental 1 debilitation, 2 destabilization from lack of or refusal to take prescribed psychotropic medications for a diagnosed condition or 3 serious physical disease will imminently ensue, unless the 4 individual receives prompt and adequate treatment for this 5 6 mental illness. The behaviors manifested by recent acts or 7 omissions may be exhibited through a totality of recent circumstances and may include a history of mental illness, 8 9 including previous hospitalizations. No person, however, 10 shall be deemed to be unable to satisfy his need for 11 nourishment, essential medical care, shelter or safety if

he is able to satisfy those needs with the supervision and

assistance of others who are willing and available.

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(iv) "Examiner" means a licensed psychiatrist, a 15 16 licensed physician, a licensed advanced practitioner of nursing with a clinical specialty in psychiatric and mental 17 18 health nursing, working in collaboration with a licensed physician, a licensed psychologist, a licensed professional 19 counselor, a licensed addictions therapist, a licensed 20 clinical social worker or a licensed marriage and family 21 22 therapist;

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(ix) "Mental illness" and "mentally ill" mean $\frac{a}{a}$ 1 2 physical, an emotional, mental or behavioral disorder which 3 causes a person to be dangerous to himself or others or unable to satisfy basic needs and which requires treatment; 4 *** STAFF COMMENT *** 5 6 (a) (ii) and (ix), as currently Paragraphs written, appear to be circular, 7 i.e., require a mental illness and a danger to self or 8 9 others or unable to satisfy basic needs, with 10 each definition dependent on the other. Per directions from the Committee in July, paragraph 11 12 (a) (ix) is revised to eliminate the problem with circularity. With the deletion of that language 13 14 in the paragraph, the term "physical" could be 15 overbroad and include conditions unrelated to conditions requiring detention or hospitalization 16 17 under Title 25, so the term was stricken. 18 (xiii) "Treatment" means diagnosis, evaluation, 19 intervention, which may include psychiatric medication, 20 individual and group mental health counseling, illness 21 22 management therapy or prescribed care other than diversion 23 services such as immediate linkages to mental health 24 services in the community and discharge planning. 25 Treatment shall begin at the time of detention if the 26 person knowingly and voluntarily consents and continue 27 throughout involuntary hospitalization. Treatment may be 28 given without the consent of the detained person or his 29 parent or guardian when treatment is limited to diagnosis 30 or evaluation or when treatment is necessary to prevent

1	immediate and serious physical harm to the person or
2	others. "Treatment" does not include observation—or
3	supervision; or discharge planning;
4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	*** STAFF COMMENT *** The preceding paragraph was amended by deleting "family education or" and striking "therapy" because the state cannot be required to pay for third party treatment that is not directly related to the emergency detention or involuntary hospitalization, and therapy is superfluous since therapy would now be covered under "counseling". Discharge planning was moved from an exclusion to the definition of treatment and has been included within the definition of treatment. Language was added to require consent of the detainee for treatment with an exception, which language is consistent with the language in W.S. 25-10-109(f).
20	25-10-104. Duties of department of health as to
21	hospitals other than state hospital; rules and regulations.
22 23	(b) The department shall, through rules and
24	regulations, develop and implement standards governing:
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26	(i) Mental health examiners to include training
27	and the definition of the roles and responsibilities of the
28	examiners while conducting evaluations under W.S. 25-10-
29	<u>109;</u>
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31	(ii) Convalescent leave;

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1 2 (iii) Conditional outpatient commitment. 3 25-10-109. Emergency detention. 4 5 6 (b) Immediately after detaining the person, the 7 officer shall contact examiner. A preliminary an examination of the person shall be conducted by an examiner 8 within twenty-four (24) hours after the detention. If a 9 10 preliminary examination is not conducted within twenty-four 11 (24) hours the detained person shall be released. If the 12 examiner giving the preliminary examination finds that the 13 person: 14 15 (ii) Was mentally ill, but is no 16 dangerous to himself or others and is able to satisfy basic needs, the person shall be released immediately; or 17 18 (d) A person taken into custody under this section 19 may be detained in a hospital or other suitable facility 20 which is appropriate under the circumstances. The person 21

shall not be detained in a nonmedical facility used for

detention of persons charged with or convicted of penal

- 1 offenses except in extreme emergency. or if there are no
- 2 other reasonable alternatives. The law enforcement officer
- 3 who detained the person shall immediately notify the person
- 4 responsible for the care and custody of the detained
- 5 person, if known, of the time and place of detention.

- 7 25-10-112. Liability for costs of detention,
- 8 involuntary hospitalization and proceedings therefor.

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- 10 (a) Subject to the provisions of subsections (d) and
- 11 (e) of this section, the county in which a person is
- 12 detained or in which involuntary hospitalization
- 13 proceedings are brought shall pay the costs of:

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- 15 (ii) Proceedings for detention or involuntary
- 16 hospitalization pursuant to W.S. 25-10-109 or 25-10-110.
- 17 The costs of these proceedings include the cost of
- 18 appointed counsel and examiners; and

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- 20 (iii) Clothing, if the person does not have and
- 21 cannot afford to purchase adequate clothing; and

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1 (iv) Any necessary travel to a hospital or a detention facility, which shall be provided by a peace 2 3 officer or ambulance, except transportation provided under W.S. 25-10-125 (b) may be provided by any reasonable means 4 5 as determined by the county responsible for the payment of 6 such transportation. 7 STAFF COMMENT *** New language was added on in the introductory 8 9 clause to limit "necessary travel".

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11 The hospital or other treatment provider shall (d) 12 attempt to recover all costs of treatment from public and private health insurance, from patients, and 13 from 14 government benefit programs prior to seeking payment from 15 the county or the department. The county and the department shall accept the hospital's discharge of its 16 17 obligation to collect costs from the client as provided 18 under this subsection and shall not impose other means to collect from the client any treatment or other costs 19 20 directly related to the client's detention or involuntary 21 hospitalization. The hospital or other treatment provider 22 shall have discharged its obligation to recover costs under 23 this subsection if it:

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1	(e) When a person is detained under W.S. 25-10-109,
2	the county in which the person resided shall be liable for
3	costs of treatment for the first seventy-two (72) hours of
4	detention, in addition to any Saturday, Sunday or legal
5	holiday that falls within the seventy-two (72) hours. If
6	the person remains in detention after the hearing pursuant
7	to W.S. 25-10-109(k)(iii), the department shall directly,
8	or under contract with local providers, provide psychiatric
9	treatment for those conditions specified in paragraph
10	(a)(i) of this section until the person is released from
11	detention or involuntary commitment is ordered, subject to
12	payment of costs as provided in this subsection or

14 *** STAFF COMMENT ***

subsection (c) of this section.

The new language in the preceding subsection was added pursuant to a request at the July meeting to avoid medical costs for conditions unrelated to the reasons for the extended detention. The intent of this added language would be to allow the WDH to avoid such costs, at least until the detainee was involuntarily hospitalized as a result of the second hearing, at which time the State would be assuming responsibility for the person, which might then include responsibility for the entire medical care of the patient.

27 (g) Each board of county commissioners shall
28 establish a single point of responsibility to identify,
29 make referrals to, intervene and coordinate with community

1	or regional resources prior to and after an emergency
2	detention. The single point of responsibility may be
3	assigned to a community mental health center, designated
4	hospital or other entity that is able to provide treatment
5	as defined under this act. The department shall develop
6	rules and regulations specifying designation of the single
7	point of responsibility for counties and the core
8	activities that may be conducted by the single point of
9	responsibility.
11 12 13 14 15 16 17 18 19	The preceding paragraph would have a fiscal impact upon counties. The question is whether this concept should be enacted at all, enacted on a statewide basis, or enacted as a pilot project. If enacted as a pilot project, it may be preferable to remove it from the statute and create a new noncodified provision, pending the results of the pilot project.
21	25-10-125. Clothing and transportation upon
22	discharge.
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24	(a) The department, pursuant to W.S. 25-10-112 shall
25	insure that a patient discharged <pre>from the state's custody</pre>
26	possesses suitable clothing and adequate means to insure
27	his arrival at the home from which he was admitted or

1	another place within the state, which is in the best
2	interests of the state and of the patient.
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4	(b) The county responsible for payment of costs
5	pursuant to W.S. 25-10-112(a) shall insure that a patient
6	discharged from emergency detention within seventy-two (72)
7	hours, or upon expiration of emergency detention after
8	seventy-two (72) hours without a court order for
9	hospitalization under W.S. 25-10-110, possesses suitable
10	clothing and adequate means to insure his arrival at the
11	home from which he was admitted or another place within the
12	county, which is in the best interests of the county and of
13	the patient.
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15	Section 2. This act is effective July 1, 2010.
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(END)