## DRAFT ONLY NOT APPROVED FOR INTRODUCTION

SENATE FILE NO. SF0040

Involuntary hospitalization and treatment.

Sponsored by: Joint Judiciary Interim Committee

## A BILL

for

1 AN ACT relating to hospitalization and treatment of mentally ill persons; modifying procedures for involuntary 2 hospitalization; providing 3 for involuntary outpatient treatment; providing for and modifying definitions; 4 5 amending provisions relating to representation by the state 6 and county; amending provisions relating to payment by the county and by the state; repealing provisions; 7 providing for an effective date. 8 9

Be It Enacted by the Legislature of the State of Wyoming: 10

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- 12 Section 1. W.S. 25-10-101(a) by creating a new
- 13 paragraph (i), by creating a new paragraph (iii), by
- amending and renumbering (i) as (v), by creating new 14

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1
    paragraphs (vi) and (vii), by renumbering (iii) as (ix), by
2
    creating new paragraphs (x) through (xiv), by renumbering
3
    paragraphs (v) and (vi) as (xv) and (xvi), by creating a
4
    new paragraph (xvii), by renumbering (vii) as (xviii), by
5
    amending and renumbering (ix) and (x) as (xix) and (xx), by
    creating a new paragraph (xxi), by renumbering (xi) and
 6
    (xv) as (xxii) and (xxiii), by creating a new paragraph
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    (xxiv), by renumbering (xii) as (xxv), by amending and
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9
    renumbering (xiii) as (xxvi), by creating a new paragraph
    (xxvii) and by amending and renumbering (xiv) as (xxviii),
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11
    25-10-103, 25-10-104(a)(intro), (i) through (iv), (vi) and
    (vii), 25-10-105(a)(i) and (ii), 25-10-106(b)(i), (ii) and
12
13
    by creating a new subsection (c), 25-10-109(a), (b) (intro),
    (c) through (j), 25-10-110(a), (b), (d)(intro), (ii), (iv)
14
    through (vi), (g), (h), (j)(intro), (i)(intro), (A), (ii),
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    by creating a new paragraph (iv), (k)
16
                                                    and
                                                          (n),
17
    25-10-112(a)(intro), (i), (ii), (b), (c)(intro), (d)(intro)
    and (e), 25-10-116(a), (b) and by creating a new subsection
18
    (d), 25-10-122(a)(intro), (ii)
19
                                       and
                                             (b), 25-10-125,
    25-10-127 by creating a new subsection (a) and by amending
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21
    and renumbering (a) and (d)
                                      as
                                           (d)
                                                and
                                                    (e)
                                                           and
22
    42-4-103(a)(xvi) are amended to read:
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24 **25-10-101.** Definitions.

1	
2	(a) As used in this act:
3	
4	(i) "Certifier" means a law enforcement officer
5	or a licensed:
6	
7	(A) Psychiatrist or physician;
8	
9	(B) Psychologist;
10	
11	(C) Professional counselor, addictions
12	therapist, clinical social worker or marriage and family
13	therapist;
14	
15	(D) Physician's assistant;
16	
17	(E) Advanced practice registered nurse with
18	a clinical specialty in psychiatric and mental health
19	nursing working in collaboration with a licensed physician;
20	<u>or</u>
21	
22	(F) Nurse practitioner.
2.3	

1	(iii) "County attorney" means the county
2	attorney or the county and prosecuting attorney;
3	
4	$\frac{(i)}{(v)}$ "Court" means the district court $\frac{\text{which}}{(v)}$
5	ordered detention or hospitalization of the person pursuant
6	to this act, or the district court in the county where the
7	person resides, is found or is hospitalized of the county
8	in which an application for involuntary hospitalization or
9	involuntary outpatient treatment is filed;
10	
11	(vi) "Danger to himself" means that a person, as
12	evidenced by his current or past behavior, is likely in the
13	reasonably foreseeable future:
14	
15	(A) To attempt suicide or to inflict
16	serious bodily harm on himself; or
17	
18	(B) To suffer serious physical harm as a
19	result of his actions or inaction.
20	
21	(vii) "Danger to others" means that a person, as
22	evidenced by his current or past behavior, is likely in the
23	reasonably foreseeable future, to cause or attempt to cause

1	harm to another. Evidence that a person is a danger to
2	others may include, but is not limited to:
3	
4	(A) That he has inflicted, attempted or
5	threatened in an objectively serious manner to inflict
6	bodily harm on another;
7	
8	(B) That he has presented a danger to
9	another person by his actions or inaction; or
10	
11	(C) That he has recently and intentionally
12	caused significant damage to the substantial property of
13	others.
14	
15	(iii) (ix) "Department" means the state
16	department of health;
17	
18	(x) "Designated hospital" means a hospital
19	designated pursuant to W.S. 25-10-104;
20	
21	(xi) "Emergency detention certification" means a
22	form provided by the department used to certify the need
23	for emergency detention of a patient;
24	

1	(xii) "Emergency medical facility" means an
2	emergency unit of a hospital as defined in paragraph (xvi)
3	of this subsection or an emergency unit of a hospital as
4	defined in W.S. 35-2-901;
5	
6	(xiii) "Evaluator" means a person who is
7	employed by a treatment facility or who has a contract with
8	the department to conduct evaluations and who is a
9	licensed:
10	
11	(A) Psychiatrist or physician;
12	
13	(B) Psychologist;
14	
15	(C) Professional counselor, addictions
16	therapist, clinical social worker or marriage and family
17	therapist;
18	
19	(D) Physician's assistant;
20	
21	(E) Advanced practice registered nurse with
22	a clinical specialty in psychiatric and mental health
23	nursing working in collaboration with a licensed physician;
24	

1	(F) Nurse practitioner.
2	
3	(xiv) "Gravely disabled" means:
4	
5	(A) A person has a substantial disorder of
6	thought, mood, perception, orientation or memory;
7	
8	(B) The disorder grossly impairs the
9	person's judgment, behavior, capacity to recognize reality
10	or ability to meet the ordinary demands of life; and
11	
12	(C) The disorder has contributed to
13	behavior that indicates the person is unlikely to satisfy
14	his need for nourishment, essential personal or medical
15	care, shelter, self-protection or safety. No person shall
16	be deemed unable to satisfy his need for nourishment,
17	essential personal or medical care, shelter, self-
18	protection or safety if he is willing and able to meet
19	those needs with the supervision and assistance of others
20	who are willing and available to assist him.
21	
22	(v)(xv) "Head of hospital" means the individual
23	in charge of a hospital or his designee. When this act
24	requires or authorizes the head of a hospital to perform an

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act which involves the practice of medicine, the act shall
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2
    be performed by a physician;
3
             (vi) (xvi) "Hospital" means a facility designated
4
5
    pursuant to W.S. 25-10-104 or the state hospital;
6
             (xvii) "Medically cleared" means a physician or
7
    his designee has examined the patient and the physician has
8
9
    determined the patient:
10
11
                       Does not need emergency medical
                  (A)
12
    treatment; and
13
14
                  (B) Is not actively intoxicated by a
    substance or drug. "Actively intoxicated" means the
15
    intoxication is causing symptoms of mental illness and is
16
17
    causing the patient to be a danger to himself or others.
18
19
             (vii) (xviii) "Mental health center"
                                                     means
20
    community human
                     services program for the prevention,
21
    treatment and amelioration of mental illness under W.S.
    35-1-611 through 35-1-627 or an equivalently staffed and
22
    equipped student health service;
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1	(ix) (xix) "Mental illness" and "mentally ill"
2	mean: a physical, emotional, mental or behavioral disorder
3	which causes a person to be dangerous to himself or others
4	and which requires treatment, but
5	
6	(A) A person has a substantial disorder of
7	thought, mood, perception, orientation or memory;
8	
9	(B) The disorder grossly impairs the
10	person's judgment, behavior, capacity to recognize reality
11	or ability to meet the ordinary demands of life; and
12	
13	(C) Because of the disorder, the person is:
14	
15	(I) A danger to himself or others; or
16	
17	(II) Gravely disabled.
18	
19	(D) "Mental illness" and "mentally ill" do
20	not include addiction to drugs or alcohol, drug or alcohol
21	intoxication or developmental disabilities, except when one
22	(1) or more of those conditions co-occurs as a secondary
23	diagnosis with a mental illness.+
24	

(x) (xx) "Patient" means an individual receiving 1 2 treatment a person admitted to a hospital under W.S. 3 25-10-106 or a person who is detained pursuant to this act; 4 5 (xxi) "Person responsible for the care and custody of the patient" means a parent, step-parent, 6 7 guardian, relative, friend or other person who has provided for the patient's basic personal needs for food, clothing 8 9 or shelter; 10 11 (xi) (xxii) "Physician" means individual an licensed under the laws of this state to practice medicine, 12 or a physician in the service of the United States 13 14 government while in this state in the performance of his official duties; 15 16 17 (xv) (xxiii) "Resident" means a United States citizen who has been a resident of and domiciled in Wyoming 18 for not less than ninety (90) days and who has not claimed 19 20 residency elsewhere for the purpose of obtaining medical or 21 psychiatric services during that ninety (90) day period 22 immediately preceding the date when services under this act were sought or imposed. "Resident" also includes any alien 23 who has resided continuously in Wyoming for at least ninety 24

1 (90) days immediately prior to the date when services under this act were sought or imposed. "Resident" also includes 2 any active duty member, the spouse or minor child of any 3 4 active duty member of the armed forces of the United States 5 who is stationed in Wyoming; 6 (xxiv) "Rule" means a rule promulgated by the 7 8 department pursuant to this act; 9 (xii) (xxv) "State hospital" means the Wyoming 10 11 state hospital at Evanston, Wyoming; 12 (xiii) (xxvi) "Treatment" means 13 diagnosis, evaluation, care and intervention., which Treatment may 14 include psychiatric medication, individual and group mental 15 health counseling, illness management diversion services 16 such as immediate linkages to mental health services in the 17 community and discharge planning. Treatment shall begin at 18 the time of detention, if the person knowingly and 19 voluntarily consents, and shall continue throughout 20 21 involuntary hospitalization. Treatment may be given 22 without the consent of the detained person or his parent or guardian when treatment is limited to diagnosis or 23 24 evaluation or when treatment is necessary to prevent

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immediate and serious physical harm to the person or others
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    and discharge planning. Treatment may be inpatient or
 3
    outpatient. Outpatient treatment may include mental health
    services in the community, housing, residential treatment,
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    crisis stabilization and related support. "Treatment" does
 5
    not include observation or supervision;
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7
              (xxvii) "Treatment facility" means a community
8
9
    mental health center under contract with the department to
10
    provide outpatient treatment;
11
              (xiv) (xxviii) "This act" means W.S. 25-10-101
12
13
    through \frac{25-10-305}{25-10-127}.
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15
         25-10-103. Admission and treatment of persons with
    mental illness.
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    Subject to the rules and regulations of the hospital
18
    department, the head of a hospital or a treatment facility
19
20
    may admit persons and treat patients who have symptoms of
21
    mental illness pursuant to W.S. 25-10-106, 25-10-109 or
22
    <del>25 10 110 this</del> act.
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25-10-104. Duties of department of health as 1 to 2 treatment facilities and designated hospitals. 3 4 (a) The department, with respect to designated 5 hospitals or other licensed and treatment facilities other than the state hospital, shall: 6 7 (i) Adopt standards for the designation 8 9 hospitals or other licensed and treatment facilities as 10 qualified to accept patients and provide treatment under 11 this act; 12 13 (ii) Designate hospitals or other licensed and treatment facilities which qualify under the standards 14 adopted pursuant to paragraph (i) of this subsection. The 15 16 designated hospitals and treatment facilities shall be 17 posted on the department's website; 18 19 (iii) Enter into contracts with designated hospitals or other licensed and treatment facilities for 20 21 the inpatient and outpatient treatment of persons patients 22 with mental illness, and for other services incident to the hospitalization and treatment of patients. 23 Designated

hospitals or other licensed treatment facilities having a

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contract with the department and treatment facilities shall
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2
    treat and receive individuals detained patients under W.S.
 3
    25-10-109 this act;
4
5
              (iv) Require reports from designated hospitals
    and other licensed and treatment facilities concerning the
 6
    services rendered to patients under the provisions of this
 7
8
    act;
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10
              (vi) Investigate complaints made by or on behalf
    of patients with mental illness under this act; and
11
12
13
              (vii) Promulgate rules
                                            and
                                                   regulations-
    including rules regarding reimbursement
14
                                                   <del>under</del>
    25-10-112 necessary to implement this act.
15
16
17
         25-10-105. Duties of department of health as to state
18
    hospital.
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20
              The department shall:
         (a)
21
22
              (i)
                   Adopt standards governing
                                                    the
                                                          state
    hospital; and
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(ii) Visit the state hospital to review methods 1 2 of treatment of patients.; and 3 4 25-10-106. Voluntary applications for admission. 5 (b) A person who has symptoms of mental illness but 6 because of minority or incompetency is not capable of 7 making a responsible, voluntary application for admission 8 9 may be admitted for treatment upon application by a parent or guardian if the application: 10 11 (i) Is accompanied by a statement of an examiner 12 13 evaluator that the person is mentally ill; and 14 15 (ii) An examiner at the hospital evaluator, based on a personal interview, determines that the person 16 17 is mentally ill. 18 (c) Notwithstanding any other provision of this act, 19 20 neither the department nor any county shall be liable under 21 this act for costs associated with evaluation or treatment of a person voluntarily admitted under this section. 22

25-10-109. Emergency detention; 1 evaluation; 2 treatment. 3 4 (a) When a <del>law enforcement officer or examiner</del> 5 certifier has reasonable cause to believe a person is mentally ill pursuant to as defined by W.S. 25-10-101, the 6 certifier may detain the person may be detained by 7 completing an emergency detention certification. 8 9 Immediately after detaining the person, the

10

officer shall contact an examiner The patient shall be 11 examined by a physician or his designee immediately after 12 13 he is detained. If the patient was not detained at an emergency medical facility, the certifier shall facilitate 14 the transfer of the patient to an emergency medical 15 facility for a medical examination. Once the patient has 16 17 been medically cleared by a physician, the physician shall notify the evaluator. A preliminary examination evaluation 18 of the person patient shall be conducted by an examiner 19 20 evaluator within twenty four (24) four (4) hours after the 21 detention. If a preliminary examination is not conducted 22 within twenty four (24) hours the detained person shall be released. If the examiner giving the preliminary 23 examination patient has been medically cleared. If the 24

1 <u>evaluator finds that the patient is mentally ill, the</u>

2 patient shall remain detained. A patient who remains

3 detained shall be transferred as soon as possible to the

4 nearest hospital with capacity to treat the patient. The

5 patient shall be released if an evaluation is not timely

6 conducted or if the evaluator finds that the person:

7 patient is not mentally ill.

8

9 No person A second evaluation of the patient shall be detained for more than seventy two (72) hours, 10 11 excluding Saturdays, Sundays and legal holidays, without a hearing under subsections (h) through (k) of this section 12 13 conducted by an evaluator no less than twenty-four (24) 14 hours and no more than thirty-six (36) hours after the first evaluation. If the evaluator finds that the patient 15 is mentally ill, the patient shall remain detained. The 16 patient shall be released if an evaluation is not timely 17 conducted or if the evaluator finds that the patient is not 18

20

19

mentally ill.

21 (d) A person taken into custody under this section
22 may be detained in a hospital or other suitable facility
23 which is appropriate under the circumstances. The person
24 patient shall not be detained in a nonmedical facility used

1 for detention of persons charged with or convicted of penal

2 offenses except in cases of extreme emergency. or if there

3 are no other reasonable alternatives. The law enforcement

4 officer who detained the person shall immediately notify

5 the person responsible for the care and custody of the

6 detained person, if known, of the time and place of

7 detention.

8

9 (e) The law enforcement officer or examiner who

10 initially detained the person certifier shall make a

11 written statement of the facts of the emergency detention.

12 A copy of the statement shall be given to the detained

13 person county attorney, the patient, the person responsible

14 for the care and custody of the patient, if known, the

15 department and to any subsequent examiner evaluator.

16

17 (f) When a person patient is detained under emergency

18 circumstances this section, treatment may be given during

19 the emergency detention period if the person patient

20 voluntarily and knowingly consents. The parent or guardian

21 of a minor or incompetent person patient may consent to

22 treatment. If the parent or guardian of a minor patient

23 does not consent to treatment, a petition may be filed

24 under the Child Protection Act. Treatment may be given

1 without the consent of the detained person patient or his parent or guardian when treatment is limited to diagnosis 2 3 or evaluation or when treatment is necessary to prevent 4 immediate and serious physical harm to the person patient 5 or others. Prior to treatment, the person patient shall be fully advised of the scope of treatment, and a report of 6 the treatment shall be filed with the court if involuntary 7 hospitalization proceedings are commenced 8 under W.S. 9 25-10-110. An examiner or a physician evaluator or provider 10 who provides treatment in good faith pursuant to this subsection shall be immune from civil liability for the 11 treatment except there shall be no immunity from liability 12 13 for negligent acts or deliberate misconduct.

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patient shall be informed orally and in writing of his right to contact his family and an attorney, of his right to appointed counsel if he is indigent, of his right to remain silent and that his statements may be used as a basis for involuntary hospitalization or involuntary outpatient treatment.

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23 (h) When a person is If a patient detained in 24 emergency detention and is not released after the first

1	evaluation or second evaluation, the county attorney may
2	file an application for involuntary hospitalization is
3	filed, the court shall appoint an attorney to represent the
4	detained person unless he has his own attorney, and the
5	court shall conduct a hearing within seventy-two (72)
6	hours, excluding Saturdays, Sundays and legal holidays, of
7	the initial detention to determine whether continued
8	detention is required pending involuntary hospitalization
9	proceedings. Notice of the preliminary hearing shall be
10	given to the detained person and his attorney. The court
11	may delay the hearing only at the request of the detained
12	person or his parent, guardian or his attorney. An
13	emergency detention hearing may be waived at the request of
14	the detained person or the detained person's attorney,
15	except in cases where a licensed physician's assistant was
16	the only examiner for the emergency detention. If an
17	emergency detention hearing has been waived, the court may
18	immediately conduct the involuntary hospitalization
19	hearing, provided that a licensed physician's assistant
20	shall not be the examiner for an involuntary
21	hospitalization hearing or involuntary outpatient treatment
22	under W.S. 25-10-110.

1	(j) At the hearing the court shall advise If the
2	<pre>evaluator finds that the detained person and his parent,</pre>
3	guardian or attorney of the contents of the written
4	statement of emergency detention required in subsection (e)
5	of this section and the application for involuntary
6	hospitalization patient is mentally ill, the patient or the
7	person responsible for his care and custody and the county
8	attorney may agree to a voluntary outpatient treatment plan
9	if the evaluator finds that the patient is likely to follow
10	a voluntary treatment plan and will not likely harm himself
11	or others while subject to the plan. Treatment under this
12	subsection shall be subject to the following:
13	
14	(i) The treatment plan shall be prepared by the
15	evaluator. In preparing the plan, the evaluator shall
16	consult the treating providers, the patient and the person
17	responsible for the care and custody of the patient, if
18	known;
19	
20	(ii) The treatment plan shall set forth the
21	period of treatment. The plan may require periodic
22	reporting, continuation of medication and submission to
23	testing and restriction of travel, consumption of alcoholic

1	beverages or drugs, associations with other persons or
2	other reasonable conditions;
3	
4	(iii) Treatment shall be provided by a treatment
5	facility if public funds are paid for treatment;
6	
7	(iv) The treatment facility or treatment
8	provider shall immediately report to the county attorney
9	any material noncompliance by the patient with the
10	treatment plan;
11	
12	(v) If the patient fails to comply with the
13	conditions or complete the treatment plan, the county
14	attorney may file an application for involuntary
15	hospitalization or involuntary outpatient treatment under
16	W.S. 25-10-110.
17	
18	25-10-110. Involuntary hospitalization or involuntary
19	outpatient treatment proceedings.
20	
21	(a) Proceedings for the involuntary hospitalization
22	of a person or involuntary outpatient treatment may be
23	commenced by the filing of a written application with the
24	court by the county attorney in the county in which the

1	person patient is initially detained. Proceedings may also
2	be initiated or in the county in which there is a
3	designated hospital if there is a written agreement
4	executed by the county in which the person resides and the
5	designated hospital stating that the county in which the
6	person resides will be responsible for costs of treatment
7	under W.S. 25-10-112(e) that are not covered by the state
8	or treatment facility. The county attorney shall appear or
9	behalf of the state. The proceedings shall be commenced by
10	filing a written application with the court captioned "Ir
11	the Interest of". The application shall be accompanied
12	by either:
13	
14	(i) A <del>certificate <u>statement</u> of an <u>examiner</u></del>
15	stating evaluator setting forth:
16	
17	(A) That he has <del>examined the proposed</del>
18	evaluated the patient, not more than fifteen (15) days
19	prior to the date that the application was filed under this
20	subsection reviewed the patient's medical and treatment
21	records and consulted with the treating providers where the
22	<pre>patient is detained;</pre>
23	

1 (B) His findings and the proposed patient's 2 history; and 3 4 (C) His opinion that the proposed patient 5 is mentally ill; or 6 (ii) A written statement by the applicant and by 7 an examiner evaluator that the proposed patient has refused 8 to submit to examination by an examiner an evaluation, 9 10 together with a statement of the facts and circumstances 11 supporting the application. 12 13 (b) Except as provided in subsection (g) of this section, the court shall conduct a hearing within ninety-14 six (96) hours, excluding Saturdays, Sundays and legal 15 holidays, of the initial detention under W.S. 25-10-109(a). 16 17 Unless the proposed patient is represented by counsel, the court shall appoint an attorney to represent him. 18 19 Upon receipt of an filing the application, the 20 21 court county attorney shall issue serve notice thereof to the proposed patient, the person responsible for the care 22 or and custody of the proposed patient, if known, the 23 department and other persons designated by the court. The 24

1 notice shall be served as provided by the Wyoming Rules of 2 Civil Procedure. The notice shall apprise the proposed 3 patient: 4 5 (ii) Of the identity of the appointed examiner, and his authority to conduct an examination evaluator; 6 7 8 (iv) Of the requirements for an That the court 9 may order involuntary hospitalization order or involuntary outpatient treatment under subsection (j) of this section; 10 11 basis for 12 (v) Of the the proposed 13 hospitalization or involuntary outpatient treatment, 14 including a detailed statement of the facts and supporting testimony; and 15 16 17 (vi) That a The time and date of the hearing. will be held if warranted by the report of the examination 18 19 of the proposed patient. 20 21 (g) Within five (5) days twenty-four (24) hours of 22 receipt of the notice of hearing, the proposed patient or his counsel may request a hearing before a jury. The 23 24 hearing shall begin within fifteen (15) days of the jury

1 request. The patient shall remain involuntarily detained until the completion of the hearing. If upon the basis of 2 3 the appointed examiner's evaluator's report or from other 4 information available to the court, the court concludes 5 that the proposed patient does not understand his rights, the court may call a jury upon its own motion or upon the 6 request of the person responsible for the care and custody 7 of the proposed patient. A jury shall be selected pursuant 8 9 to W.S. 1-11-101 through 1-11-129, and the proceedings 10 shall follow the Wyoming Rules of Civil Procedure.

11

12 (h) The proposed patient, the applicant county 13 attorney, and all others to whom notice is required may 14 appear at the hearing to testify and may present witnesses. The court may receive the testimony of other persons. The 15 proposed patient shall be present at the hearing unless he 16 17 waives his right to appear. All persons not necessary to protect the rights of the parties shall be excluded from 18 the hearing. The hearing shall be conducted in as informal 19 20 a manner as is consistent with orderly procedure and in a 21 physical setting which will not have a harmful effect on 22 the mental health of the proposed patient. Reliable hearsay evidence shall be admissible, including evidence upon which 23 the evaluator relied in forming his opinion. Any hearing 24

1 conducted under this subsection shall be recorded by the 2 court reporter or by electronic, mechanical or other appropriate means. The county attorney shall provide the 3 4 department with all final orders entered by the court 5 requiring involuntary hospitalization or involuntary outpatient treatment. 6 7 (j) If, upon completion of the hearing 8 9 consideration of the record, the court or the jury finds by 10 clear and convincing evidence that the proposed patient is 11 mentally ill the court shall consider the least restrictive and most therapeutic alternatives, including involuntary 12 13 outpatient treatment, and shall: 14 (i) Order his If hospitalization, assign him to 15 16 a hospital, and is ordered: 17 (A) Send to the hospital, with the patient 18 a certified copy of the findings of fact and order and a 19 copy of the examiner's evaluator's report; 20 21 22 (ii) Suspend the proceedings pending voluntary treatment as approved by the examiner and by the facility 23 24 or individual who will provide the treatment. If the court

1	finds that the proposed patient does not require continuous
2	inpatient hospitalization, would be more appropriately
3	treated in an and that the patient is likely to comply with
4	an outpatient treatment order and will not likely cause
5	harm to himself or others while subject to an outpatient
6	treatment order, the court may order involuntary outpatient
7	treatment. program or a combination of outpatient and
8	inpatient treatment or will be able to appropriately
9	control his illness by following a prescribed treatment
LO	plan, the court shall consider such treatment options. If
L1	the court finds that the proposed patient does not require
L2	continuous hospitalization and the funding is available, it
L3	shall consider conditional outpatient treatment for a
L4	period of time deemed appropriate and may designate an
L5	outpatient care provider, including mental health centers.
L6	Conditional outpatient treatment Involuntary outpatient
L7	treatment shall be subject to the following:
L8	
L9	(A) The court shall set forth the period of
20	treatment in the order and require the patient to comply
21	with a treatment plan prepared by the evaluator;
22	
23	(B) The evaluator shall consult the
24	treating providers, the patient and the person responsible

for the care and custody of the patient, if known, in 1 2 preparing the plan; 3 4 (C) Treatment shall be provided by a 5 treatment facility if public funds are paid for treatment; 6 7 (D) The court shall order the patient to comply with all directives and treatment required by the 8 treatment facility or treatment provider. The court may 9 require periodic reporting, continuation of medication and 10 to testing and restriction of 11 submission consumption of alcoholic beverages or drugs, associations 12 with other persons or other reasonable conditions as the 13 court may specify; provided the court may suspend the 14 imposition of the conditional outpatient treatment order 15 for failure to meet the conditions and order involuntary 16 hospitalization under this section; or 17 18 19 The treatment facility or treatment (E) provider shall immediately report to the county attorney 20 21 any material noncompliance by the patient with the 22 outpatient treatment order;

23

1	(F) The court retains jurisdiction to
2	modify or revoke the outpatient treatment order at any
3	time;
4	
5	(G) Upon motion of the county attorney to
6	modify or revoke the outpatient treatment order, the court
7	may enter an ex parte order for immediate detention if the
8	court finds that the patient is a danger to himself or
9	others. If the court enters an ex parte order of
10	detention, the matter shall be set for hearing within
11	ninety-six (96) hours, excluding Saturdays, Sundays and
12	legal holidays, of the time the patient is taken into
13	<pre>custody;</pre>
14	
15	(H) Notice of a hearing on a motion to
16	modify or revoke the order for outpatient treatment shall
17	be given as provided in subsection (d) of this section. If
18	the court finds by a preponderance of evidence that the
19	patient violated any condition of the outpatient treatment
20	order, the court may modify the conditions of treatment or
21	may enter an order for inpatient hospitalization.
22	
23	(iv) Suspend the proceedings pending voluntary
24	treatment as approved by the evaluator and by a treatment

1 facility or the treatment provider if the court finds the

2 patient will not likely harm himself or others while

3 subject to voluntary treatment.

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5 (k) The court is authorized to appoint a special commissioner to assist in the conduct of involuntary 6 hospitalization and involuntary outpatient proceedings. In 7 proceedings under this act, regularly appointed court 8 9 commissioners may exercise the authority granted by W.S. any case in which the court refers 10 5-3-307. In application to the commissioner, the commissioner shall 11 conduct the involuntary hospitalization and outpatient 12 13 treatment proceedings under this section and on the basis thereof shall either recommend dismissal of the application 14 or hold a hearing as provided in this section and make 15 recommendations to the court regarding the disposition of 16 17 the proposed patient and of the proceedings.

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(n) The court shall inquire into the medical condition of every patient found to be mentally ill. If the court determines based upon the advice of a physician, that the patient's present primary need is for medical treatment or care and whose need for psychiatric care is secondary, the court may delay ordering the commitment involuntary

- 1 hospitalization or involuntary outpatient treatment of the
- 2 patient to the Wyoming state hospital until such time as
- 3 the patient receives medical care and the patient's need
- 4 for psychiatric care is primary.

- 6 25-10-112. Liability for proceedings and costs of
- 7 detention, involuntary hospitalization and involuntary
- 8 outpatient treatment.

9

- 10 (a) Subject to the provisions of subsections (d) and
- 11 (e) of this section and W.S. 25-10-106, the county in which
- 12 a person is detained or in which involuntary
- 13 hospitalization proceedings are brought patient is a
- 14 resident shall pay the costs of detention as follows:

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- 16 (i) The county shall pay the costs of the first
- 17 seventy-two (72) hours of detention, in addition to any
- 18 Saturday, Sunday or legal holiday that falls within the
- 19 seventy-two (72) hours, pursuant to W.S. 25-10-109,
- 20 including costs of and 25-10-110. "Costs" means the
- 21 expenses of transportation, involuntary outpatient
- 22 treatment, involuntary hospitalization and related medical
- 23 treatment for those conditions:

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1 (A) That resulted in the **emergency** 2 detention of the person patient; or 3 4 (B) That are attributable to affirmative 5 actions taken by the person patient that have placed the person patient in danger of suicide or serious bodily harm 6 and require immediate medical attention. 7 8 9 (ii) Proceedings for detention or involuntary hospitalization or involuntary outpatient treatment 10 pursuant to W.S.  $\frac{25-10-109}{0}$  or  $\frac{25-10-110}{0}$ . The costs of 11 these proceedings shall include the cost of appointed 12 counsel, and examiners but shall not include the cost of 13 14 the evaluator; 15 (b) Subject to the provisions of subsection (d) of 16 17 this section, When a detained person or proposed patient is not a resident of Wyoming, the department shall pay the 18 costs listed in paragraphs (a) (i) through (iii) subsection 19 (a) of this section. 20 21 22 (c) Subject to the provisions of subsections (d) and (e) of this section, if continued emergency detention is 23 ordered pursuant to W.S. 25 10 109(k)(iii), the county's 24

liability for any costs of detention, treatment or 1 transportation shall terminate after the first seventy two 2 (72) hours of detention, in addition to any Saturday, 3 Sunday or legal holiday. The department shall be 4 5 responsible for those costs after the expiration of the county's responsibility for payments of the costs. The 6 county attorney shall notify the department of the 7 continued emergency detention order or involuntary 8 9 hospitalization order within twenty-four (24) hours. After the first seventy-two (72) hours of detention, in addition 10 11 to any Saturday, Sunday or legal holiday that falls within the seventy-two (72) hours, the department shall pay all 12 13 costs of transportation, involuntary outpatient treatment, 14 transportation and continued emergency detention incurred 15 after the first seventy-two (72) hours of detention, in addition to any Saturday, Sunday or legal holiday, shall be 16 17 paid by: and involuntary hospitalization.

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(d) The hospital or other treatment provider treatment facility shall attempt to recover all costs of treatment from public and private health insurance, from patients, and from government benefit programs prior to seeking payment from the county or the department. The hospital or other treatment provider treatment facility

shall have discharged its obligation to recover costs under
this subsection if it:

(e) When a person patient is detained under W.S.

5 25-10-109 or 25-10-110, the county in which the person resided shall be liable for costs of treatment for the 6 first seventy-two (72) hours of detention, in addition to 7 any Saturday, Sunday or legal holiday that falls within the 8 seventy-two (72) hours. If the person remains in detention 9 10 after the hearing pursuant to W.S. 25 10 109(k)(iii), the department shall directly, or under contract with local 11 providers, provide treatment for those conditions specified 12 13 in paragraph (a) (i) of this section until the person is released from detention or involuntary commitment is 14 ordered, subject to payment of costs as provided in this 15 subsection or subsection (c) of this section department 16 17 shall pay the cost of the evaluator and any treatment plan 18 prepared by the evaluator.

19

20 **25-10-116.** Periodic examinations of patients; 21 determination of discharge or continued hospitalization; 22 notice; hearing.

23

1 (a) Three (3) months after each patient's admission
2 to the hospital, the head of the hospital shall evaluate
3 the progress of each patient and shall reevaluate the
4 treatment and progress every six (6) months thereafter. The
5 evaluation shall consider whether voluntary or involuntary
6 outpatient treatment is appropriate.

7

When the head of a hospital determines after the 8 9 examination required by subsection (a) of this section or W.S. 10 25-10-113 that the conditions by iustifying hospitalization of involuntary patients hospitalization no 11 longer exist, he shall report his determination to the 12 13 court, the county attorney, the district attorney, family members and the mental health center which were involved in 14 15 the initial proceedings. Unless, if the patient is held under an order of a court having criminal jurisdiction, the 16 17 patient and the person responsible for the patient's care and custody, if known. The report shall include a discharge 18 19 plan. If, within three (3) five (5) days after the notice is sent, the county attorney, the patient or the person 20 21 responsible for the patient's care or custody files an 22 objection, the court upon motion orders shall order a 23 hearing on continuing the patient's hospitalization. The 24 hearing shall be held within fourteen (14) days of receipt

1 of the objection. Notice of the hearing shall be given to the county attorney, the district attorney if the patient 2 3 is held under an order of a court having criminal 4 jurisdiction, the patient, the person responsible for the 5 patient's care and custody, if known, and the hospital. The county attorney shall appear at the hearing to represent 6 7 the county. The attorney general may represent the department at the hearing. The court may approve the 8 9 discharge, order involuntary outpatient treatment subject 10 to the requirements of W.S. 25-10-110(j) or may order other 11 appropriate relief. If no objection is filed, the head of the hospital shall discharge the patient. The hearing shall 12 13 be held as soon as practicable and shall follow the procedures in W.S. 25 10 118. Notice of the hearing shall 14 conform with W.S. 25-10-116(c). 15

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(d) If the patient is held on order of a court having criminal jurisdiction in any action or proceeding arising out of a criminal offense, the court having criminal jurisdiction in the matter shall conduct the hearing under subsection (c) of this section. In all events, the court shall conduct a hearing not less than once each year to determine whether the continued hospitalization of the patient is necessary, based on the reports required under

- 1 this section and any other information provided to the
- 2 court by a hospital or a federal hospital under W.S.
- 3 25-10-111 or the patient's counsel. The county attorney
- 4 shall represent the county at the hearing. The attorney
- 5 general may represent the department at the hearing. After
- 6 a hearing, the court shall make its findings and enter an
- 7 order continuing hospitalization, requiring involuntary
- 8 outpatient treatment subject to the requirements of W.S.
- 9 25-10-110(j) or may order other appropriate relief.

- 11 25-10-122. Records to be kept confidential;
- 12 exceptions.

13

- 14 (a) Records and reports made under this act which
- 15 directly or indirectly identify a patient, a former patient
- 16 or an individual for whom an application for
- 17 hospitalization or involuntary outpatient treatment has
- 18 been filed, shall be confidential and shall not be
- 19 disclosed by any person unless:

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- 21 (ii) Disclosure is necessary to carry out this
- 22 act, including disclosure to county or state officials
- 23 responsible for payment of costs under this act and for

1 enforcement of this act. Disclosure shall be limited to the minimum necessary to carry out the purposes of this act; or 2 3 Patient records identified in subsection (a) of 4 5 this section may be provided without consent of the patient, parent or quardian by and between a mental health 6 center treatment facility, a treating provider, the state 7 hospital and hospitals designated under W.S. 25-10-104, 8 9 only for the purpose of facilitating referral treatment, admission, readmission or transfer of the patient under 10 11 this act or for subsequent treatment of a patient for a 12 mental illness. 13 25-10-125. Clothing and 14 transportation upon discharge. 15 16 17 The department, pursuant to W.S. 25-10-112 shall insure that a patient who is discharged from the state's 18 19 custody after seventy-two (72) hours has occurred from the 20 initial detention possesses suitable clothing and adequate 21 means to insure his arrival at the home from which he was 22 admitted or another place within the state, which is in the

best interests of the state and of the patient.

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trial placement;

1 (b) The county responsible for payment of costs 2 pursuant to W.S. 25-10-112(a) shall insure that a patient 3 discharged from emergency detention within seventy-two (72) 4 hours, or upon expiration of emergency detention after seventy-two (72) hours without a court order for 5 hospitalization under W.S. 25 10 110, of the initial 6 detention possesses suitable clothing and adequate means to 7 insure his arrival at the home from which he was admitted 8 9 or another place, which is in the best interests of the 10 county and of the patient. 11 25-10-127. Trial 12 placement; convalescent leave; 13 discharge; readmittance. 14 (a) During a period of detention of a patient under 15 W.S. 25-10-110, the state hospital or a designated hospital 16 17 may grant a patient placement into the community on a trial basis subject to the following: 18 19 20 The hospital has determined that the patient 21 is likely to follow the conditions the hospital determines 22 necessary for the patient and has determined that the patient will not likely harm himself or others during the 23

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2	(ii) The trial placement shall not constitute a
3	discharge from the hospital;
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5	(iii) The patient agrees to any conditions the
6	hospital determines are necessary during the placement;
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8	(iv) The hospital notifies the court and the
9	county attorney prior to the trial placement:
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11	(A) Where the patient will reside;
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13	(B) How the patient will pay for his living
14	expenses; and
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16	(C) Any conditions of the placement.
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18	(v) The trial placement shall not exceed two (2)
19	months;
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21	(vi) If medication management, monitoring or
22	other outpatient services are required, a treatment
23	facility has agreed to provide the treatment or services;
24	

(vii) If the patient has successfully completed 1 2 the trial placement, the hospital may transition the 3 patient to convalescent leave under this section. 4 5 (a) (d) After providing fourteen (14) days notice to the court and county attorney who initiated involuntary 6 hospitalization procedures, the state hospital 7 designated hospital may release an improved patient on 8 9 convalescent status. leave subject to the following: 10 11 (i) The hospital has determined that the patient is likely to follow the conditions the hospital determines 12 13 necessary for the patient and has determined that the 14 patient will not likely harm himself or others during convalescent leave; 15 16 17 (ii) Release on convalescent status leave shall include a plan of treatment on an outpatient or nonhospital 18 basis and other provisions for continuing responsibility to 19 20 and by the hospital. Prior to the end of one (1) year on 21 convalescent status leave, and not less than annually 22 thereafter, the hospital shall reexamine the facts relating to the hospitalization of the patient on convalescent 23 24 status—leave and if the hospital determines hospitalization

is no longer anticipated, the hospital shall discharge the 1 2 patient and make a report of discharge to the court and 3 county attorney involved in ordering the hospitalization, 4 if any; 5 (iii) The hospital from which the patient is 6 given convalescent leave may readmit to the hospital an 7 involuntary hospitalized patient who has been released on 8 9 convalescent leave if the hospital reasonably believes that 10 it is in the best interests of the patient. The patient 11 readmitted shall have all the rights he had upon admission to the hospital. It is the responsibility of the hospital 12 to provide or pay for any transportation or other services 13 14 in connection with any revocation of a convalescent leave; 15 16 (iv) The hospital shall discharge any patient who has remained on convalescent leave for a period of two 17 (2) continuous years. 18 19 This section shall not apply to a person 20 <del>(d)</del>(e) 21 patient who has been committed to the hospital pursuant to 22 a criminal proceeding.

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24 42-4-103. Authorized services and supplies.

2 (a) Services and supplies authorized for medical

3 assistance under this chapter include:

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5 (xvi) Services <u>and treatment</u> provided by an

6 institution or treatment facility as defined by W.S.

7 25-10-101(a)(xxvii) for mental illnesses;

8

9 **Section 2.** W.S. 25-10-101(a)(ii) and (iv),

10 25-10-104(a)(v), 25-10-105(a)(iii), 25-10-109(b)(i) through

11 (iii), (k) and (m), 25-10-110(c), (e), (f), (j)(iii) and

12 (m), 25-10-112(c)(i), (ii) and (g), 25-10-123, 25-10-127(b)

13 and (c) are repealed.

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Section 3. This act is effective July 1, 2014.

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17 (END)