

**SENATE SUBSTITUTE FOR
HOUSE BILL NO. 5810**

A bill to amend 1974 PA 258, entitled
"Mental health code,"
by amending sections 100a, 400, 401, 409, 410, 434, 435, 436, 438,
452, 455, 461, 464a, 468, 469a, 472a, 473, 474, 474a, 475, 475a,
477, 478, 482, and 489 (MCL 330.1100a, 330.1400, 330.1401,
330.1409, 330.1410, 330.1434, 330.1435, 330.1436, 330.1438,
330.1452, 330.1455, 330.1461, 330.1464a, 330.1468, 330.1469a,
330.1472a, 330.1473, 330.1474, 330.1474a, 330.1475, 330.1475a,
330.1477, 330.1478, 330.1482, and 330.1489), sections 100a, 401,
434, 435, 438, 452, 455, 461, 468, 469a, 472a, 474, 474a, and 475
as amended by 2016 PA 320, section 400 as amended by 2004 PA 553,
section 409 as amended by 2006 PA 306, section 410 as amended by
2004 PA 556, section 436 as amended by 1995 PA 290, section 464a as

amended by 2014 PA 200, section 473 as amended by 2004 PA 498, section 475a as added and section 482 as amended by 1996 PA 588, and section 477 as amended by 1986 PA 117, and by adding section 308a.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Sec. 100a. (1) "Abilities" means the qualities, skills, and
2 competencies of an individual that reflect the individual's talents
3 and acquired proficiencies.

4 (2) "Abuse" means nonaccidental physical or emotional harm to
5 a recipient, or sexual contact with or sexual penetration of a
6 recipient as those terms are defined in section 520a of the
7 Michigan penal code, 1931 PA 328, MCL 750.520a, that is committed
8 by an employee or volunteer of the department, a community mental
9 health services program, or a licensed hospital or by an employee
10 or volunteer of a service provider under contract with the
11 department, community mental health services program, or licensed
12 hospital.

13 (3) "Adaptive skills" means skills in 1 or more of the
14 following areas:

15 (a) Communication.

16 (b) Self-care.

17 (c) Home living.

18 (d) Social skills.

19 (e) Community use.

20 (f) Self-direction.

21 (g) Health and safety.

22 (h) Functional academics.

1 (i) Leisure.

2 (j) Work.

3 (4) "Adult foster care facility" means an adult foster care
4 facility licensed under the adult foster care facility licensing
5 act, 1979 PA 218, MCL 400.701 to 400.737.

6 (5) "Alcohol and drug abuse counseling" means the act of
7 counseling, modification of substance use disorder related
8 behavior, and prevention techniques for individuals with substance
9 use disorder, their significant others, and individuals who could
10 potentially develop a substance use disorder.

11 (6) "Applicant" means an individual or his or her legal
12 representative who makes a request for mental health services.

13 (7) "Approved service program" means a substance use disorder
14 services program licensed under part 62 of the public health code,
15 1978 PA 368, MCL 333.6230 to 333.6251, to provide substance use
16 disorder treatment and rehabilitation services by the department-
17 designated community mental health entity and approved by the
18 federal government to deliver a service or combination of services
19 for the treatment of incapacitated individuals.

20 (8) "Assisted outpatient treatment" or "AOT" means the
21 categories of outpatient services ordered by the court under
22 section 468 or 469a. Assisted outpatient treatment may include **A**
23 case management **PLAN AND CASE MANAGEMENT** services to provide care
24 coordination. Assisted outpatient treatment may also include 1 or
25 more of the following categories of services: medication; periodic
26 blood tests or urinalysis to determine compliance with prescribed
27 medications; individual or group therapy; day or partial day

1 programming activities; vocational, educational, or self-help
2 training or activities; assertive community treatment team
3 services; alcohol or substance use disorder treatment and
4 counseling and periodic tests for the presence of alcohol or
5 illegal drugs for an individual with a history of alcohol abuse or
6 substance use disorder; supervision of living arrangements; and any
7 other services within a local or unified services plan developed
8 under this act that are prescribed to treat the individual's mental
9 illness and to assist the individual in living and functioning in
10 the community or to attempt to prevent a relapse or deterioration
11 that may reasonably be predicted to result in suicide, the need for
12 hospitalization, or serious violent behavior. The medical review
13 and direction included in an assisted outpatient treatment plan
14 shall be provided under the supervision of a psychiatrist.

15 (9) "Board" means the governing body of a community mental
16 health services program.

17 (10) "Board of commissioners" means a county board of
18 commissioners.

19 (11) "Center" means a facility operated by the department to
20 admit individuals with developmental disabilities and provide
21 habilitation and treatment services.

22 (12) "Certification" means formal approval of a program by the
23 department in accordance with standards developed or approved by
24 the department.

25 (13) "Child abuse" and "child neglect" mean those terms as
26 defined in section 2 of the child protection law, 1975 PA 238, MCL
27 722.622.

1 (14) "Child and adolescent psychiatrist" means 1 or more of
2 the following:

3 (a) A physician who has completed a residency program in child
4 and adolescent psychiatry approved by the Accreditation Council for
5 Graduate Medical Education or the American Osteopathic Association,
6 or who has completed 12 months of child and adolescent psychiatric
7 rotation and is enrolled in an approved residency program as
8 described in this subsection.

9 (b) A psychiatrist employed by or under contract as a child
10 and adolescent psychiatrist with the department or a community
11 mental health services program on March 28, 1996, who has education
12 and clinical experience in the evaluation and treatment of children
13 or adolescents with serious emotional disturbance.

14 (c) A psychiatrist who has education and clinical experience
15 in the evaluation and treatment of children or adolescents with
16 serious emotional disturbance who is approved by the director.

17 (15) "Children's diagnostic and treatment service" means a
18 program operated by or under contract with a community mental
19 health services program, that provides examination, evaluation, and
20 referrals for minors, including emergency referrals, that provides
21 or facilitates treatment for minors, and that has been certified by
22 the department.

23 (16) "Community mental health authority" means a separate
24 legal public governmental entity created under section 205 to
25 operate as a community mental health services program.

26 (17) "Community mental health organization" means a community
27 mental health services program that is organized under the urban

1 cooperation act of 1967, 1967 (Ex Sess) PA 7, MCL 124.501 to
2 124.512.

3 (18) "Community mental health services program" means a
4 program operated under chapter 2 as a county community mental
5 health agency, a community mental health authority, or a community
6 mental health organization.

7 (19) "Consent" means a written agreement executed by a
8 recipient, a minor recipient's parent, or a recipient's legal
9 representative with authority to execute a consent, or a verbal
10 agreement of a recipient that is witnessed and documented by an
11 individual other than the individual providing treatment.

12 (20) "County community mental health agency" means an official
13 county or multicounty agency created under section 210 that
14 operates as a community mental health services program and that has
15 not elected to become a community mental health authority or a
16 community mental health organization.

17 (21) "Department" means the department of health and human
18 services.

19 (22) "Department-designated community mental health entity"
20 means the community mental health authority, community mental
21 health organization, community mental health services program,
22 county community mental health agency, or community mental health
23 regional entity designated by the department to represent a region
24 of community mental health authorities, community mental health
25 organizations, community mental health services programs, or county
26 community mental health agencies.

27 (23) "Dependent living setting" means all of the following:

1 (a) An adult foster care facility.

2 (b) A nursing home licensed under ~~article 17~~ **PART 217** of the
3 public health code, 1978 PA 368, MCL ~~333.20101 to~~
4 ~~333.22260~~ **333.21701 TO 333.21799E**.

5 (c) A home for the aged licensed under ~~article 17~~ **PART 213** of
6 the public health code, 1978 PA 368, MCL ~~333.20101 to~~
7 ~~333.22260~~ **333.21301 TO 333.21335**.

8 (24) "Designated representative" means any of the following:

9 (a) A registered nurse or licensed practical nurse licensed or
10 otherwise authorized under part 172 of the public health code, 1978
11 PA 368, MCL 333.17201 to 333.17242.

12 (b) A paramedic licensed or otherwise authorized under part
13 209 of the public health code, 1978 PA 368, MCL 333.20901 to
14 333.20979.

15 (c) A physician's assistant licensed or otherwise authorized
16 under part 170 or 175 of the public health code, 1978 PA 368, MCL
17 333.17001 to 333.17084 and 333.17501 to 333.17556.

18 (d) An individual qualified by education, training, and
19 experience who performs acts, tasks, or functions under the
20 supervision of a physician.

21 (25) "Developmental disability" means either of the following:

22 (a) If applied to an individual older than 5 years of age, a
23 severe, chronic condition that meets all of the following
24 requirements:

25 (i) Is attributable to a mental or physical impairment or a
26 combination of mental and physical impairments.

27 (ii) Is manifested before the individual is 22 years old.

1 (iii) Is likely to continue indefinitely.

2 (iv) Results in substantial functional limitations in 3 or
3 more of the following areas of major life activity:

4 (A) Self-care.

5 (B) Receptive and expressive language.

6 (C) Learning.

7 (D) Mobility.

8 (E) Self-direction.

9 (F) Capacity for independent living.

10 (G) Economic self-sufficiency.

11 (v) Reflects the individual's need for a combination and
12 sequence of special, interdisciplinary, or generic care, treatment,
13 or other services that are of lifelong or extended duration and are
14 individually planned and coordinated.

15 (b) If applied to a minor from birth to 5 years of age, a
16 substantial developmental delay or a specific congenital or
17 acquired condition with a high probability of resulting in
18 developmental disability as defined in subdivision (a) if services
19 are not provided.

20 (26) "Director" means the director of the department or his or
21 her designee.

22 (27) "Discharge" means an absolute, unconditional release of
23 an individual from a facility by action of the facility or a court.

24 (28) "Eligible minor" means an individual less than 18 years
25 of age who is recommended in the written report of a
26 multidisciplinary team under rules promulgated by the department of
27 education to be classified as 1 of the following:

1 (a) Severely mentally impaired.

2 (b) Severely multiply impaired.

3 (c) Autistic impaired and receiving special education services
4 in a program designed for the autistic impaired under subsection
5 (1) of R 340.1758 of the Michigan ~~administrative code~~
6 **ADMINISTRATIVE CODE** or in a program designed for the severely
7 mentally impaired or severely multiply impaired.

8 (29) "Emergency situation" means a situation in which an
9 individual is experiencing a serious mental illness or a
10 developmental disability, or a minor is experiencing a serious
11 emotional disturbance, and 1 of the following applies:

12 (a) The individual can reasonably be expected within the near
13 future to physically injure himself, herself, or another
14 individual, either intentionally or unintentionally.

15 (b) The individual is unable to provide himself or herself
16 food, clothing, or shelter or to attend to basic physical
17 activities such as eating, toileting, bathing, grooming, dressing,
18 or ambulating, and this inability may lead in the near future to
19 harm to the individual or to another individual.

20 (c) The individual has mental illness that has impaired his or
21 her judgment so that the individual is unable to understand his or
22 her need for treatment ~~, and that impaired judgment, on the basis~~
23 ~~of competent clinical opinion, presents a substantial risk of~~
24 ~~significant physical or mental harm to the individual in the near~~
25 ~~future or presents a substantial risk of significant physical harm~~
26 ~~to others in the near future.~~ **AND PRESENTS A RISK OF HARM.**

27 (30) "Executive director" means an individual appointed under

1 section 226 to direct a community mental health services program or
2 his or her designee.

3 **SEC. 308A. IF THERE IS AN INCREASE IN THE NUMBER OF PERSONS**
4 **REQUIRING TREATMENT UNDER SECTION 401 AFTER THE EFFECTIVE DATE OF**
5 **THE AMENDATORY ACT THAT ADDED THIS SECTION, THE STATE MUST PAY ALL**
6 **OF THE ADDITIONAL COSTS ASSOCIATED WITH THE INCREASE.**

7 Sec. 400. As used in this chapter, unless the context requires
8 otherwise:

9 (a) "Clinical certificate" means the written conclusion and
10 statements of a physician or a licensed psychologist that an
11 individual is a person requiring treatment, together with the
12 information and opinions, in reasonable detail, that underlie the
13 conclusion, on the form prescribed by the department or on a
14 substantially similar form.

15 (b) "Competent clinical opinion" means the clinical judgment
16 of a physician, psychiatrist, or licensed psychologist.

17 (c) "Court" means the probate court or the court with
18 responsibility with regard to mental health services for the county
19 of residence of the subject of a petition, or for the county in
20 which the subject of a petition was found.

21 (d) "Formal voluntary hospitalization" means hospitalization
22 of an individual based on both of the following:

23 (i) The execution of an application for voluntary
24 hospitalization by the individual or by a patient advocate
25 designated under the estates and protected individuals code, 1998
26 PA 386, MCL 700.1101 to ~~700.8102~~, **700.8206**, to make mental health
27 treatment decisions for the individual.

1 (ii) The hospital director's determination that the individual
2 is clinically suitable for voluntary hospitalization.

3 (e) "Informal voluntary hospitalization" means hospitalization
4 of an individual based on all of the following:

5 (i) The individual's request for hospitalization.

6 (ii) The hospital director's determination that the individual
7 is clinically suitable for voluntary hospitalization.

8 (iii) The individual's agreement to accept treatment.

9 (f) "Involuntary mental health treatment" means court-ordered
10 hospitalization, ~~alternative~~**ASSISTED OUTPATIENT** treatment, or
11 combined hospitalization and ~~alternative~~**ASSISTED OUTPATIENT**
12 treatment as described in section 468.

13 (g) "Mental illness" means a substantial disorder of thought
14 or mood that significantly impairs judgment, behavior, capacity to
15 recognize reality, or ability to cope with the ordinary demands of
16 life.

17 (h) "Preadmission screening unit" means a service component of
18 a community mental health services program established under
19 section 409.

20 (i) "Private-pay patient" means a patient whose services and
21 care are paid for from funding sources other than the community
22 mental health services program, the department, or other state or
23 county funding.

24 (j) "Release" means the transfer of an individual who is
25 subject to an order of combined hospitalization and ~~alternative~~
26 **ASSISTED OUTPATIENT** treatment from 1 treatment program to another
27 in accordance with his or her individual plan of services.

1 (k) "Subject of a petition" means an individual regarding whom
2 a petition has been filed with the court asserting that the
3 individual is or is not a person requiring treatment or for whom an
4 objection to involuntary mental health treatment has been made
5 under section 484.

6 Sec. 401. (1) As used in this chapter, "person requiring
7 treatment" means (a), (b), OR (c): ~~or (d):~~

8 (a) An individual who has mental illness, and who as a result
9 of that mental illness can reasonably be expected within the near
10 future to intentionally or unintentionally seriously physically
11 injure himself, herself, or another individual, and who has engaged
12 in an act or acts or made significant threats that are
13 substantially supportive of the expectation.

14 (b) An individual who has mental illness, and who as a result
15 of that mental illness is unable to attend to those of his or her
16 basic physical needs such as food, clothing, or shelter that must
17 be attended to in order for the individual to avoid serious harm in
18 the near future, and who has demonstrated that inability by failing
19 to attend to those basic physical needs.

20 (c) An individual who has mental illness, whose judgment is so
21 impaired by that mental illness, ~~that he or she is unable to~~
22 ~~understand his or her need for treatment, and whose impaired~~
23 ~~judgment,~~ **AND WHOSE LACK OF UNDERSTANDING OF THE NEED FOR TREATMENT**
24 **HAS CAUSED HIM OR HER TO DEMONSTRATE AN UNWILLINGNESS TO**
25 **VOLUNTARILY PARTICIPATE IN OR ADHERE TO TREATMENT THAT IS**
26 **NECESSARY, on the basis of competent clinical opinion, TO PREVENT A**
27 **RELAPSE OR HARMFUL DETERIORATION OF HIS OR HER CONDITION, AND**

1 presents a substantial risk of significant physical or mental harm
2 to the individual ~~in the near future or presents a substantial risk~~
3 ~~of physical harm to OR others. in the near future.~~

4 ~~—— (d) An individual who has mental illness, whose understanding~~
5 ~~of the need for treatment is impaired to the point that he or she~~
6 ~~is unlikely to voluntarily participate in or adhere to treatment~~
7 ~~that has been determined necessary to prevent a relapse or harmful~~
8 ~~deterioration of his or her condition, and whose noncompliance with~~
9 ~~treatment has been a factor in the individual's placement in a~~
10 ~~psychiatric hospital, prison, or jail at least 2 times within the~~
11 ~~last 48 months or whose noncompliance with treatment has been a~~
12 ~~factor in the individual's committing 1 or more acts, attempts, or~~
13 ~~threats of serious violent behavior within the last 48 months. An~~
14 ~~individual under this subdivision is only eligible to receive~~
15 ~~assisted outpatient treatment.~~

16 (2) An individual whose mental processes have been weakened or
17 impaired by a dementia, an individual with a primary diagnosis of
18 epilepsy, or an individual with alcoholism or other drug dependence
19 is not a person requiring treatment under this chapter unless the
20 individual also meets the criteria specified in subsection (1). An
21 individual described in this subsection may be hospitalized under
22 the informal or formal voluntary hospitalization provisions of this
23 chapter if he or she is considered clinically suitable for
24 hospitalization by the hospital director.

25 Sec. 409. (1) Each community mental health services program
26 shall establish 1 or more preadmission screening units with 24-hour
27 availability to provide assessment and screening services for

1 individuals being considered for admission into hospitals or
2 ~~alternative~~**ASSISTED OUTPATIENT** treatment programs. The community
3 mental health services program shall employ mental health
4 professionals or licensed bachelor's social workers licensed under
5 ~~article 15~~**PART 185** of the public health code, 1978 PA 368, MCL
6 ~~333.16101 to 333.18838,~~**333.18501 TO 333.18518**, to provide the
7 preadmission screening services or contract with another agency
8 that meets the requirements of this section. Preadmission screening
9 unit staff shall be supervised by a registered professional nurse
10 or other mental health professional possessing at least a master's
11 degree.

12 (2) Each community mental health services program shall
13 provide the address and telephone number of its preadmission
14 screening unit or units to law enforcement agencies, the
15 department, the court, and hospital emergency rooms.

16 (3) A preadmission screening unit shall assess an individual
17 being considered for admission into a hospital operated by the
18 department or under contract with the community mental health
19 services program. If the individual is clinically suitable for
20 hospitalization, the preadmission screening unit shall authorize
21 voluntary admission to the hospital.

22 (4) If the preadmission screening unit of the community mental
23 health services program denies hospitalization, the individual or
24 the person making the application may request a second opinion from
25 the executive director. The executive director shall arrange for an
26 additional evaluation by a psychiatrist, other physician, or
27 licensed psychologist to be performed within 3 days, excluding

1 Sundays and legal holidays, after the executive director receives
2 the request. If the conclusion of the second opinion is different
3 from the conclusion of the preadmission screening unit, the
4 executive director, in conjunction with the medical director, shall
5 make a decision based on all clinical information available. The
6 executive director's decision shall be confirmed in writing to the
7 individual who requested the second opinion, and the confirming
8 document shall include the signatures of the executive director and
9 medical director or verification that the decision was made in
10 conjunction with the medical director. If an individual is assessed
11 and found not to be clinically suitable for hospitalization, the
12 preadmission screening unit shall provide appropriate referral
13 services.

14 (5) If an individual is assessed and found not to be
15 clinically suitable for hospitalization, the preadmission screening
16 unit shall provide information regarding alternative services and
17 the availability of those services, and make appropriate referrals.

18 (6) A preadmission screening unit shall assess and examine, or
19 refer to a hospital for examination, an individual who is brought
20 to the unit by a peace officer or ordered by a court to be
21 examined. If the individual meets the requirements for
22 hospitalization, the preadmission screening unit shall designate
23 the hospital to which the individual shall be admitted. The
24 preadmission screening unit shall consult with the individual and,
25 if the individual agrees, it shall consult with the individual's
26 family member of choice, if available, as to the preferred hospital
27 for admission of the individual.

1 (7) If the individual chooses a hospital not under contract
2 with a community mental health services program, and the hospital
3 agrees to the admission, the preadmission screening unit shall
4 refer the individual to the hospital that is requested by the
5 individual. Any financial obligation for the services provided by
6 the hospital shall be satisfied from funding sources other than the
7 community mental health services program, the department, or other
8 state or county funding.

9 Sec. 410. Except as otherwise provided in section 402a, an
10 individual who requests, applies for, or assents to either informal
11 or formal voluntary admission to a hospital **OR OUTPATIENT TREATMENT**
12 **PROGRAM** operated by the department or a hospital **OR OUTPATIENT**
13 **TREATMENT PROGRAM** under contract with a community mental health
14 services program may be considered for admission by the hospital **OR**
15 **OUTPATIENT TREATMENT PROGRAM** only after authorization by a
16 community mental health services preadmission screening unit.

17 Sec. 434. (1) Any individual 18 years of age or over may file
18 with the court a petition that asserts that an individual is a
19 person requiring treatment.

20 (2) The petition shall contain the facts that are the basis
21 for the assertion, the names and addresses, if known, of any
22 witnesses to the facts, and, if known, the name and address of the
23 nearest relative or guardian, or, if none, a friend, if known, of
24 the individual.

25 (3) Except as provided in subsection (7), the petition shall
26 be accompanied by the clinical certificate of a physician or a
27 licensed psychologist, unless after reasonable effort the

1 petitioner could not secure an examination. If a clinical
2 certificate does not accompany the petition, ~~an affidavit setting~~
3 **THE PETITIONER SHALL SET** forth the reasons an examination could not
4 be secured ~~shall also be filed. WITHIN THE PETITION.~~ The petition
5 may also be accompanied by a second clinical certificate. If 2
6 clinical certificates accompany the petition, at least 1 clinical
7 certificate ~~shall~~ **MUST** have been executed by a psychiatrist.

8 (4) Except as otherwise provided in subsection (7) and section
9 455, a clinical certificate that accompanies a petition ~~shall~~ **MUST**
10 have been executed within 72 hours before the filing of the
11 petition, and after personal examination of the individual.

12 (5) If the individual is found not to be a person requiring
13 treatment under this section, the petition and any clinical
14 certificate shall be maintained by the court as a confidential
15 record to prevent disclosure to any person who is not specifically
16 authorized under this chapter to receive notice of the petition or
17 clinical certificate.

18 (6) The petition described in this section may assert that the
19 subject of the petition should receive assisted outpatient
20 treatment in accordance with section ~~468(2)(e).~~ **468(2)(D).**

21 (7) A petition that does not seek hospitalization but only
22 requests that the subject of the petition receive assisted
23 outpatient treatment is not subject to subsection (3) or (4).

24 Sec. 435. (1) If the petition is accompanied by 1 clinical
25 certificate, the court shall order the individual to be examined by
26 a psychiatrist.

27 (2) If the petition is not accompanied by a clinical

1 certificate, and if the court is satisfied a reasonable effort was
2 made to secure an examination, the court shall order the individual
3 to be examined by a psychiatrist and either a physician or a
4 licensed psychologist.

5 (3) The individual may be received and detained at the place
6 of examination as long as necessary to complete the examination or
7 examinations, but not more than 24 hours.

8 (4) After an examination ordered under subsection (1), the
9 examining psychiatrist shall either transmit a clinical certificate
10 to the court or report to the court that execution of a clinical
11 certificate is not warranted. After each examination ordered under
12 subsection (2), the examining psychiatrist, or the examining
13 physician or licensed psychologist, as applicable, shall either
14 transmit a clinical certificate to the court or report to the court
15 that execution of a clinical certificate is not warranted.

16 (5) If 1 examination was ordered and the examining
17 psychiatrist reports that execution of a clinical certificate is
18 not warranted, or if 2 examinations were ordered and 1 of the
19 examining physicians or the licensed psychologist reports that
20 execution of a clinical certificate is not warranted, the court
21 shall dismiss the petition or order the individual to be examined
22 by a psychiatrist, or if a psychiatrist is not available, by a
23 physician or licensed psychologist. If a third examination report
24 states that execution of a clinical certificate is not warranted,
25 the court shall dismiss the petition.

26 (6) This section does not apply to a petition filed under
27 section ~~434(6)~~. **434(7)**.

1 Sec. 436. (1) If it appears to the court that the individual
2 will not comply with an order of examination under section 435, the
3 court may order a peace officer to take the individual into
4 protective custody and transport him or her to a preadmission
5 screening unit or hospital designated by the community mental
6 health services program or to another suitable place for the
7 ordered examination or examinations.

8 (2) A COURT ORDER FOR A PEACE OFFICER TO TAKE AN INDIVIDUAL
9 INTO PROTECTIVE CUSTODY AND TRANSPORT THE INDIVIDUAL AS DESCRIBED
10 IN SUBSECTION (1) MUST BE EXECUTED WITHIN 10 DAYS AFTER THE COURT
11 ENTERS THE ORDER. IF THE ORDER IS NOT EXECUTED WITHIN 10 DAYS AFTER
12 THE COURT ENTERS THE ORDER, THE LAW ENFORCEMENT AGENCY MUST REPORT
13 TO THE COURT THE REASON THE ORDER WAS NOT EXECUTED WITHIN THE
14 PRESCRIBED TIME PERIOD.

15 (3) FOLLOWING THE FILING OF A PETITION FOR ASSISTED OUTPATIENT
16 TREATMENT, IF IT COMES TO THE COURT'S ATTENTION THAT THE INDIVIDUAL
17 WILL NOT MAKE HIMSELF OR HERSELF AVAILABLE FOR AN EVALUATION, THE
18 COURT MAY ORDER LAW ENFORCEMENT TO TRANSPORT THE INDIVIDUAL FOR THE
19 MENTAL HEALTH EVALUATION AND TO TAKE THE INDIVIDUAL TO THE
20 DESIGNATED PREADMISSION SCREENING UNIT OR HOSPITAL. THE COURT MUST
21 BE SATISFIED THAT REASONABLE EFFORT WAS MADE TO SECURE AN
22 EXAMINATION BEFORE THE COURT ORDERS A PEACE OFFICER TO TRANSPORT
23 THE INDIVIDUAL FOR AN EVALUATION. AT THE TIME THE INDIVIDUAL
24 ARRIVES AT THE PREADMISSION SCREENING UNIT OR HOSPITAL, THE
25 PREADMISSION SCREENING UNIT OR HOSPITAL MUST COMPLETE AN ASSESSMENT
26 THAT INCLUDES AN EXAMINATION UPON THE ARRIVAL OF THE INDIVIDUAL AND
27 RELEASE THE INDIVIDUAL FOLLOWING THE CONCLUSION OF THE EXAMINATION

1 UNLESS THE MEDICAL PROFESSIONAL WHO EXAMINES THE INDIVIDUAL FINDS
2 THE NEED FOR IMMEDIATE HOSPITALIZATION. IF IMMEDIATE
3 HOSPITALIZATION IS NECESSARY, THE DIRECTOR MUST FILE A PETITION,
4 ACCOMPANIED BY 2 CLINICAL CERTIFICATES, WITH THE PROBATE COURT
5 WITHIN 24 HOURS AFTER THE MEDICAL PROFESSIONAL'S FINDING. THE
6 PETITION MUST REQUEST INVOLUNTARY HOSPITALIZATION AND MAY REQUEST A
7 COMBINATION OF HOSPITALIZATION AND ASSISTED OUTPATIENT TREATMENT.
8 THE COURT MUST SET A HEARING IN ACCORDANCE WITH SECTION 452(1).

9 Sec. 438. If it appears to the court that the individual
10 requires immediate assessment because the individual presents a
11 substantial risk of significant physical or mental harm to himself
12 or herself in the near future or presents a substantial risk of
13 significant physical harm to others in the near future, the court
14 may order the individual hospitalized and may order a peace officer
15 to take the individual into protective custody and transport the
16 individual to a preadmission screening unit designated by the
17 community mental health services program. If the preadmission
18 screening unit authorizes hospitalization, the peace officer shall
19 transport the individual to a hospital designated by the community
20 mental health services program, unless other arrangements are
21 provided by the preadmission screening unit. If the examinations
22 and clinical certificates of the psychiatrist, and the physician or
23 the licensed psychologist, are not completed within 24 hours after
24 hospitalization, the individual shall be released.

25 Sec. 452. (1) The court shall fix a date for every hearing
26 convened under this chapter. Except as provided in subsection (2),
27 the hearing shall be convened promptly, but not more than 7 days

1 after the court's receipt of any of the following:

2 (a) A petition for a determination that an individual is a
3 person requiring treatment, a clinical certificate executed by a
4 physician or a licensed psychologist, and a clinical certificate
5 executed by a psychiatrist.

6 (b) A petition for a determination that an individual
7 continues to be a person requiring treatment and a clinical
8 certificate executed by a psychiatrist.

9 (c) A petition for discharge filed under section 484.

10 (d) A demand or notification that a hearing that has been
11 temporarily deferred under section 455(6) be convened.

12 (2) A hearing for a petition under section ~~434(6)~~**434(7)** shall
13 be convened not more than 28 days after the filing of the petition,
14 unless the petition was filed while the subject of the petition was
15 an inpatient at a psychiatric hospital, in which case the hearing
16 shall be convened within 7 days of the filing of the petition.

17 Sec. 455. (1) The subject of a petition has the right to be
18 present at all hearings. This right may be waived by a waiver of
19 attendance signed by the subject of a petition, witnessed by his or
20 her legal counsel, and filed with the court or it may be waived in
21 open court at a scheduled hearing. The subject's right to be
22 present at a hearing is considered waived by the subject's failure
23 to attend the hearing after receiving notice required by section
24 453 and any applicable court rule, providing the subject has had an
25 opportunity to consult with counsel as required under section 454.
26 The court may exclude the subject from a hearing if the subject's
27 behavior at the hearing makes it impossible to conduct the hearing.

1 The court shall enter on the record its reasons for excluding the
2 subject of a petition from the hearing. The subject's presence may
3 be waived by the court if there is testimony by a physician or
4 licensed psychologist who has recently observed the subject that
5 the subject's attendance would expose him or her to serious risk of
6 physical harm.

7 (2) The subject of the petition under section 434, after
8 consultation with counsel, may stipulate to the entry of any order
9 for treatment.

10 (3) The subject of a petition under section 434 who is
11 hospitalized pending the court hearing, within 72 hours after the
12 petition and clinical certificates have been filed with the court,
13 shall meet with legal counsel, a treatment team member assigned by
14 the hospital director, a person assigned by the executive director
15 of the responsible community mental health services program or
16 other program as designated by the department, and, if possible, a
17 person designated by the subject of the petition, in order to be
18 informed of all of the following:

19 (a) The proposed plan of treatment in the hospital.

20 (b) The nature and possible consequences of commitment
21 procedures.

22 (c) The proposed plan of treatment in the community consisting
23 of either an alternative to hospitalization or a combination of
24 hospitalization and ~~alternative~~ **ASSISTED OUTPATIENT** treatment with
25 hospitalization not to exceed 60 days.

26 (d) The right to request that the hearing be temporarily
27 deferred, with a continuing right to demand a hearing during the

1 deferral period. The deferral period shall be 60 days if the
 2 individual chooses to remain hospitalized, or ~~90-180~~ days if the
 3 individual chooses ~~alternative-OUTPATIENT~~ treatment or a
 4 combination of hospitalization and ~~alternative treatment~~.

5 **OUTPATIENT TREATMENT.**

6 (4) The person designated by the subject of the petition under
 7 subsection (3) may be any person who is willing and able to attend
 8 the meeting, including a representative of an advocacy group or the
 9 recipient rights adviser of the hospital.

10 (5) The hospital in which the subject of a petition under
 11 section 434 is hospitalized shall notify the participants of the
 12 meeting required by subsection (3).

13 (6) The subject of a petition under section 434 ~~who is~~
 14 ~~hospitalized pending the court hearing~~ may file with the court a
 15 request to temporarily defer the hearing for not longer than 60
 16 days if the individual chooses to remain hospitalized, or ~~90-180~~
 17 days if the individual chooses ~~alternative-OUTPATIENT~~ treatment or
 18 a combination of hospitalization and ~~alternative-OUTPATIENT~~
 19 treatment. The request shall include a stipulation that the
 20 individual agrees to remain hospitalized and to accept treatment as
 21 may be prescribed for the deferral period, ~~or to accept and follow~~
 22 the proposed plan of treatment as described in subsection (3)(c)
 23 for the deferral period, **OR TO ACCEPT AND FOLLOW THE PROPOSED PLAN**
 24 **FOR OUTPATIENT TREATMENT**, and further agrees that at any time the
 25 individual may refuse treatment and demand a hearing under section
 26 452. The request to temporarily defer the hearing shall be on a
 27 form provided by the department and signed by the individual in the

1 presence of his or her legal counsel and shall be filed with the
2 court by legal counsel.

3 (7) Upon receipt of the request and stipulation under
4 subsection (6), the court shall temporarily defer the hearing.
5 During the deferral period, both the original petition and the
6 clinical certificates remain valid. If the hearing is convened, the
7 court may require additional clinical certificates and information
8 from the provider. The court shall retain continuing jurisdiction
9 during the deferral period.

10 (8) Upon receipt of a copy of the request to temporarily defer
11 the hearing under subsection (6), if the individual has agreed to
12 remain hospitalized, the hospital director shall treat the
13 individual as a formal voluntary patient without requiring the
14 individual to sign formal voluntary admission forms. If the
15 individual, at any time during the period in which the hearing is
16 being deferred, refuses the prescribed treatment or requests a
17 hearing, either in writing or orally, treatment shall cease, the
18 hospitalized individual shall remain hospitalized with the status
19 of the subject of a petition under section 434, and the court shall
20 be notified to convene a hearing under section 452(1)(d).

21 (9) Upon receipt of a copy of the request to temporarily defer
22 the hearing under subsection (6), if the individual has agreed to
23 participate in an alternative to hospitalization in the community,
24 the hospital director shall release the individual from the
25 hospital to the ~~alternative~~ **OUTPATIENT** treatment provider. If the
26 individual, at any time during the deferral period, refuses the
27 prescribed treatment or requests a hearing, either in writing or

1 orally, treatment shall cease and the court shall be notified to
2 convene a hearing under section 452(1)(d). Upon notification, the
3 court shall, if necessary, order a peace officer to transport the
4 individual to the hospital where the individual shall remain until
5 the hearing is convened. The individual shall be given the status
6 of the subject of a petition under section 434.

7 (10) If the individual has remained hospitalized and if, not
8 earlier than 14 days nor later than 7 days before the expiration of
9 the deferral period, the hospital director believes that the
10 condition of the individual is such that he or she continues to
11 require treatment, and believes that the individual will not agree
12 to sign a formal voluntary admission request or is considered by
13 the hospital not to be suitable for voluntary admission, the
14 hospital director shall notify the court to convene a hearing under
15 section 452(1)(d).

16 (11) If the individual is participating in an alternative to
17 hospitalization in the community as described in subsection (3)(c)
18 and if, not earlier than 14 days nor later than 7 days before the
19 expiration of the deferral period, the executive director of the
20 community mental health services program responsible for the
21 treatment that is an alternative to hospitalization believes that
22 the condition of the individual is such that he or she continues to
23 require treatment, and believes that the individual will not agree
24 to accept treatment voluntarily or is considered by the ~~alternative~~
25 **OUTPATIENT** treatment program provider not suitable for voluntary
26 treatment, the executive director shall notify the court to convene
27 a hearing under section 452(1)(d).

1 Sec. 461. (1) ~~Except as otherwise provided in this section, an~~
2 **AN** individual may not be found to require treatment unless at least
3 1 physician or licensed psychologist who has personally examined
4 that individual testifies in person or by written deposition at the
5 hearing.

6 (2) For a petition filed under section ~~434(6)~~ **that was not**
7 ~~accompanied by, or that has not subsequently been supplemented by,~~
8 ~~a psychiatrist's clinical certificate, 434(7),~~ **THAT DOES NOT SEEK**
9 **HOSPITALIZATION BEFORE THE HEARING,** an individual may not be found
10 to require treatment unless **A PSYCHIATRIST WHO HAS PERSONALLY**
11 **EXAMINED THAT INDIVIDUAL TESTIFIES. A PSYCHIATRIST'S TESTIMONY IS**
12 **NOT NECESSARY IF A PSYCHIATRIST SIGNS THE PETITION. IF A**
13 **PSYCHIATRIST SIGNS THE PETITION,** at least 1 physician or licensed
14 psychologist ~~and 1 psychiatrist who have~~ **HAS** personally examined
15 that individual **MUST** testify. ~~in person or by written deposition at~~
16 ~~the hearing.~~ **THE REQUIREMENT FOR TESTIMONY MAY BE WAIVED BY THE**
17 **SUBJECT OF THE PETITION. IF THE TESTIMONY GIVEN IN PERSON IS**
18 **WAIVED, A CLINICAL CERTIFICATE COMPLETED BY A PHYSICIAN, LICENSED**
19 **PSYCHOLOGIST, OR PSYCHIATRIST MUST BE PRESENTED TO THE COURT BEFORE**
20 **OR AT THE INITIAL HEARING.**

21 (3) The examinations required under this section for a
22 petition filed under section ~~434(6)~~ **434(7)** shall be arranged by the
23 court and the local community mental health services program or
24 other entity as designated by the department.

25 (4) A written deposition may be introduced as evidence at the
26 hearing only if the attorney for the subject of the petition was
27 given the opportunity to be present during the taking of the

1 deposition and to cross-examine the deponent. This testimony or
2 deposition may be waived by the subject of a petition. An
3 individual may be found to require treatment even if the petitioner
4 does not testify, as long as there is competent evidence from which
5 the relevant criteria in section 401 can be established.

6 Sec. 464a. (1) Upon entry of a court order directing that an
7 individual be involuntarily hospitalized under this chapter or that
8 an individual involuntarily undergo a program of ~~alternative~~
9 ~~treatment or a program of combined hospitalization and alternative~~
10 **ASSISTED OUTPATIENT** treatment under this chapter, the court shall
11 immediately order the department of state police to enter the court
12 order into the law enforcement information network. The department
13 of state police shall remove the court order from the law
14 enforcement information network only upon receipt of a subsequent
15 court order for that removal.

16 (2) The department of state police shall immediately enter an
17 order described in subsection (1) into the law enforcement
18 information network or shall immediately remove an order from the
19 law enforcement information network as ordered by the court under
20 this section.

21 (3) This section does not apply to an order of involuntary
22 treatment for substance use disorder under chapter 2A.

23 Sec. 468. (1) For a petition filed under section 434, if the
24 court finds that an individual is not a person requiring treatment,
25 the court shall enter a finding to that effect and, if the person
26 has been hospitalized before the hearing, shall order that the
27 person be discharged immediately.

1 (2) For a petition filed under section 434, if an individual
2 is found to be a person requiring treatment, the court shall do 1
3 of the following:

4 (a) Order the individual hospitalized in a hospital
5 recommended by the community mental health services program or
6 other entity as designated by the department.

7 (b) Order the individual hospitalized in a private or veterans
8 administration hospital at the request of the individual or his or
9 her family, if private or federal funds are to be utilized and if
10 the hospital agrees. If the individual is hospitalized in a private
11 or Veterans Administration hospital under this subdivision, any
12 financial obligation for the hospitalization shall be satisfied
13 from funding sources other than the community mental health
14 services program, the department, or other state or county funding.

15 ~~—— (c) Order the individual to undergo a program of treatment~~
16 ~~that is an alternative to hospitalization and that is recommended~~
17 ~~by the community mental health services program or other entity as~~
18 ~~designated by the department.~~

19 (C) ~~(d)~~ Order the individual to undergo a program of combined
20 ~~hospitalization and alternative treatment or hospitalization and~~
21 assisted outpatient treatment, as recommended by the community
22 mental health services program or other entity as designated by the
23 department.

24 (D) ~~(e)~~ Order the individual to receive assisted outpatient
25 treatment through a community mental health services program, or
26 other entity as designated by the department, capable of providing
27 the necessary treatment and services to assist the individual to

1 live and function in the community as specified in the order. The
2 court may include **A** case management **PLAN AND CASE MANAGEMENT**
3 services and 1 or more of the following:

4 (i) Medication.

5 (ii) Blood or urinalysis tests to determine compliance with or
6 effectiveness of prescribed medication.

7 (iii) Individual or group therapy, or both.

8 (iv) Day or partial day programs.

9 (v) Educational or vocational training.

10 (vi) Supervised living.

11 (vii) ~~Assisted~~ **ASSERTIVE** community treatment team services.

12 (viii) Substance use disorder treatment.

13 (ix) Substance use disorder testing for individuals with a
14 history of alcohol or substance use and for whom that testing is
15 necessary to assist the court in ordering treatment designed to
16 prevent deterioration. A court order for substance use testing is
17 subject to review **HEARING** once every 180 days.

18 (x) Any other services prescribed to treat the individual's
19 mental illness and either to assist the individual in living and
20 functioning in the community or to help prevent a relapse or
21 deterioration that may reasonably be predicted to result in suicide
22 or the need for hospitalization.

23 (3) **IN DEVELOPING AN ASSISTED OUTPATIENT TREATMENT PLAN, A**
24 **PSYCHIATRIST SHALL SUPERVISE THE PREPARATION AND IMPLEMENTATION OF**
25 **THE ASSISTED OUTPATIENT TREATMENT PLAN. THE ASSISTED OUTPATIENT**
26 **TREATMENT PLAN SHALL BE COMPLETED WITHIN 30 DAYS AFTER ENTRY OF THE**
27 **COURT'S ORDER OF ASSISTED OUTPATIENT TREATMENT AND A COPY SHALL BE**

1 FORWARDED TO THE PROBATE COURT FOR FILING WITHIN 3 DAYS AFTER
2 COMPLETION OF THE PLAN TO BE MAINTAINED IN THE COURT FILE.

3 (4) ~~(3)~~—In developing an assisted outpatient treatment order,
4 the court shall consider any preference or medication experience
5 reported by the individual or his or her designated representative,
6 whether or not the individual has an existing individual plan of
7 services under section 712, and any direction included in a durable
8 power of attorney or advance directive that exists.

9 (5) ~~(4)~~—Before an order of assisted outpatient treatment
10 expires, if the individual has not previously designated a patient
11 advocate or executed a durable power of attorney or an advance
12 directive, the responsible community mental health services program
13 or other entity as designated by the department shall ascertain
14 whether the individual desires to establish a durable power of
15 attorney or an advance directive. If so, the community mental
16 health services program or other entity as designated by the
17 department shall direct the individual to the appropriate community
18 resource for assistance in developing a durable power of attorney
19 or an advance directive.

20 (6) ~~(5)~~—If an order for assisted outpatient treatment
21 conflicts with the provisions of an existing durable power of
22 attorney, advance directive, or individual plan of services
23 developed under section 712, the assisted outpatient treatment
24 order shall be reviewed for possible adjustment by a psychiatrist
25 not previously involved with developing the assisted outpatient
26 treatment order. If an order for assisted outpatient treatment
27 conflicts with the provisions of an existing advance directive,

1 durable power of attorney, or individual plan of services developed
2 under section 712, the court shall state the court's findings on
3 the record or in writing if the court takes the matter under
4 advisement, including the reason for the conflict.

5 Sec. 469a. (1) Except for a petition filed as described under
6 section ~~434(6)~~, **434(7)**, before ordering a course of treatment for
7 an individual found to be a person requiring treatment, the court
8 shall review a report on alternatives to hospitalization that was
9 prepared under section 453a not more than 15 days before the court
10 issues the order. After reviewing the report, the court shall do
11 all of the following:

12 (a) Determine whether a treatment program that is an
13 alternative to hospitalization or that follows an initial period of
14 hospitalization is adequate to meet the individual's treatment
15 needs and is sufficient to prevent harm that the individual may
16 inflict upon himself or herself or upon others within the near
17 future.

18 (b) Determine whether there is an agency or mental health
19 professional available to supervise the individual's ~~alternative~~
20 treatment program.

21 (c) Inquire as to the individual's desires regarding
22 alternatives to hospitalization.

23 (2) If the court determines that there is a treatment program
24 that is an alternative to hospitalization that is adequate to meet
25 the individual's treatment needs and prevent harm that the
26 individual may inflict upon himself or herself or upon others
27 within the near future and that an agency or mental health

1 professional is available to supervise the program, the court shall
2 issue an order for ~~alternative~~ **ASSISTED OUTPATIENT** treatment or
3 combined hospitalization and ~~alternative~~ **ASSISTED OUTPATIENT**
4 treatment in accordance with section 472a. The order shall state
5 the community mental health services program or, if private
6 arrangements have been made for the reimbursement of mental health
7 treatment services in an alternative setting, the name of the
8 mental health agency or professional that is directed to supervise
9 the individual's ~~alternative~~ **ASSISTED OUTPATIENT** treatment program.
10 The order may provide that if an individual refuses to comply with
11 a psychiatrist's order to return to the hospital, a peace officer
12 shall take the individual into protective custody and transport the
13 individual to the hospital selected.

14 (3) If the court orders assisted outpatient treatment as the
15 alternative to hospitalization, the order shall be consistent with
16 the provisions of section ~~468(2)(e)~~ **468(2)(D)**.

17 Sec. 472a. (1) Upon the filing of a petition under section 434
18 and a finding that an individual is a person requiring treatment,
19 the court shall issue an initial order of involuntary mental health
20 treatment that shall be limited in duration as follows:

21 (a) An initial order of hospitalization shall not exceed 60
22 days.

23 ~~— (b) Except as provided in subdivision (d), an initial order of~~
24 ~~alternative treatment shall not exceed 90 days.~~

25 ~~— (c) Except as provided in subdivision (e), an initial order of~~
26 ~~combined hospitalization and alternative treatment shall not exceed~~
27 ~~90 days. The hospitalization portion of the initial order shall not~~

1 ~~exceed 60 days.~~

2 (B) ~~(d)~~ An initial order of assisted outpatient treatment
3 shall not exceed 180 days.

4 (C) ~~(e)~~ An initial order of combined hospitalization and
5 assisted outpatient treatment shall not exceed 180 days. The
6 hospitalization portion of the initial order shall not exceed 60
7 days.

8 (2) Upon the receipt of a petition under section 473 before
9 the expiration of an initial order under subsection (1) and a
10 finding that the individual continues to be a person requiring
11 treatment, the court shall issue a second order for involuntary
12 mental health treatment that shall ~~be limited in duration as~~
13 ~~follows:~~

14 ~~—— (a) A second order of hospitalization shall not exceed 90~~
15 ~~days.~~

16 ~~—— (b) A second order of alternative treatment or assisted~~
17 ~~outpatient treatment shall not exceed 1 year.~~

18 ~~—— (c) A second order of combined hospitalization and alternative~~
19 ~~treatment or hospitalization and assisted outpatient treatment~~
20 ~~shall not exceed 1 year. The hospitalization portion of the second~~
21 ~~order shall not exceed 90 days.~~

22 (3) Upon the receipt of a petition under section 473 before
23 the expiration of a second order under subsection (2) and a finding
24 that the individual continues to be a person requiring treatment,
25 the court shall issue a continuing order for involuntary mental
26 health treatment that shall ~~be limited in duration as follows:~~

27 ~~—— (a) A continuing order of hospitalization shall not exceed 1~~

1 year.

2 ~~—— (b) A continuing order of alternative treatment or assisted~~
3 ~~outpatient treatment shall not exceed 1 year.~~

4 ~~—— (c) A continuing order of combined hospitalization and~~
5 ~~alternative treatment or hospitalization and assisted outpatient~~
6 ~~treatment shall not exceed 1 year. The hospitalization portion of a~~
7 ~~continuing order for combined hospitalization and alternative~~
8 ~~treatment or hospitalization and assisted outpatient treatment~~
9 ~~shall not exceed 90 days.~~

10 (4) Upon the receipt of a petition under section 473 before
11 the expiration of a continuing order of involuntary mental health
12 treatment, including a continuing order issued under section 485a
13 or a 1-year order of hospitalization issued under former section
14 472, and a finding that the individual continues to be a person
15 requiring treatment, the court shall issue another continuing order
16 for involuntary mental health treatment as provided in subsection
17 (3) for a period not to exceed 1 year. The court shall continue to
18 issue consecutive 1-year continuing orders for involuntary mental
19 health treatment under this section until a continuing order
20 expires without a petition having been filed under section 473 or
21 the court finds that the individual is not a person requiring
22 treatment.

23 (5) If a petition for an order of involuntary mental health
24 treatment is not brought under section 473 at least 14 days before
25 the expiration of an order of involuntary mental health treatment
26 as described in subsections (2) to (4), a person who believes that
27 an individual continues to be a person requiring treatment may file

1 a petition under section 434 for an initial order of involuntary
2 mental health treatment as described in subsection (1).

3 Sec. 473. Not less than 14 days before the expiration of an
4 initial, second, or continuing order of involuntary mental health
5 treatment issued under section 472a or section 485a, a hospital
6 director or an agency or mental health professional supervising an
7 individual's ~~alternative treatment or~~ assisted outpatient treatment
8 shall file a petition for a second or continuing order of
9 involuntary mental health treatment if the hospital director or
10 supervisor believes the individual continues to be a person
11 requiring treatment and that the individual is likely to refuse
12 treatment on a voluntary basis when the order expires. The petition
13 shall contain a statement setting forth the reasons for the
14 hospital director's or supervisor's or their joint determination
15 that the individual continues to be a person requiring treatment, a
16 statement describing the treatment program provided to the
17 individual, the results of that course of treatment, and a clinical
18 estimate as to the time further treatment will be required. The
19 petition shall be accompanied by a clinical certificate executed by
20 a psychiatrist.

21 Sec. 474. (1) If an individual is subject to a combined order
22 of hospitalization and ~~either alternative treatment or~~ assisted
23 outpatient treatment, the decision to release the individual from
24 the hospital to the ~~alternative treatment program or~~ assisted
25 outpatient treatment program shall be a clinical decision made by a
26 psychiatrist designated by the hospital director in consultation
27 with the director of the ~~alternative treatment program or the~~

1 ~~assisted outpatient treatment program. If the hospital is operated~~
2 ~~by or under contract with the department or a community mental~~
3 ~~health services program and private payment arrangements have not~~
4 ~~been made, the decision shall be made in consultation with the~~
5 ~~treatment team designated by the executive director of the~~
6 ~~community mental health services program.~~ **IF AN INDIVIDUAL IS**
7 **SUBJECT TO AN ORDER OF ASSISTED OUTPATIENT TREATMENT, THE DECISION**
8 **TO RELEASE THE INDIVIDUAL FROM THE ASSISTED OUTPATIENT TREATMENT**
9 **PROGRAM SHALL BE A CLINICAL DECISION MADE BY A PSYCHIATRIST**
10 **DESIGNATED BY THE DIRECTOR OF THE ASSISTED OUTPATIENT TREATMENT**
11 **PROGRAM.** Notice of the return of the individual to the ~~alternative~~
12 ~~treatment program or to the assisted outpatient treatment program~~
13 shall be provided to the court with a statement from a psychiatrist
14 explaining the belief that the individual is clinically appropriate
15 for ~~alternative treatment or assisted outpatient treatment.~~ At
16 least 5 days before releasing an individual from the hospital to
17 the ~~alternative treatment program or assisted outpatient treatment~~
18 program, the hospital director shall notify the agency or mental
19 health professional that is responsible to supervise the
20 individual's ~~alternative treatment program or assisted outpatient~~
21 treatment program that the individual is about to be released. The
22 hospital shall share relevant information about the individual with
23 the supervising agency or professional for the purpose of providing
24 continuity of treatment.

25 (2) If there is a disagreement between the hospital and the
26 executive director regarding the decision to release the individual
27 to the ~~alternative treatment program or assisted outpatient~~

1 treatment program, either party may appeal in writing to the
2 department director within 24 hours of the decision. The department
3 director shall designate the psychiatrist responsible for clinical
4 affairs in the department, or his or her designee, who shall also
5 be a psychiatrist, to consider the appropriateness of the release
6 and make a decision within 48 hours after receipt of the written
7 appeal. Either party may appeal the decision of the department to
8 the court in writing within 24 hours after the department's
9 decision.

10 (3) If private arrangements have been made for the
11 reimbursement of mental health treatment services in an alternative
12 setting and there is a disagreement between the hospital and the
13 director of the ~~alternative treatment program or assisted~~
14 outpatient treatment program regarding the decision to release the
15 individual, either party may petition the court for a determination
16 of whether the individual should be released from the hospital to
17 the ~~alternative treatment program or assisted~~ outpatient treatment
18 program.

19 (4) The court shall make a decision within 48 hours after
20 receipt of a written appeal under subsection (2) or a petition
21 under subsection (3). The court shall consider information provided
22 by both parties and may appoint a psychiatrist to provide an
23 independent clinical examination.

24 Sec. 474a. During the period of an order of combined
25 hospitalization and ~~alternative~~ **ASSISTED OUTPATIENT** treatment or
26 combined hospitalization and assisted outpatient treatment,
27 hospitalization may be used as clinically appropriate and when

1 ordered by a psychiatrist, for up to the maximum period for
2 hospitalization specified in the order. Subject to section 475, the
3 decision to hospitalize the individual shall be made by the
4 director of the ~~alternative treatment program or~~ assisted
5 outpatient treatment program, who shall notify the court when the
6 individual is hospitalized. The notice to the court shall include a
7 statement from a psychiatrist explaining the need for
8 hospitalization.

9 Sec. 475. (1) During the period of an order for ~~alternative~~
10 **ASSISTED OUTPATIENT** treatment or combined hospitalization and
11 ~~alternative-ASSISTED OUTPATIENT~~ treatment, if the agency or mental
12 health professional who is supervising an individual's ~~alternative~~
13 **ASSISTED OUTPATIENT** treatment program determines that the
14 individual is not complying with the court order or that the
15 ~~alternative-ASSISTED OUTPATIENT~~ treatment has not been or will not
16 be sufficient to prevent harm that the individual may inflict on
17 himself or herself or upon others, then the supervising agency or
18 mental health professional shall notify the court immediately. If
19 the individual believes that the ~~alternative-ASSISTED OUTPATIENT~~
20 treatment program is not appropriate, the individual may notify the
21 court of that fact.

22 (2) If it comes to the attention of the court that an
23 individual subject to an order of ~~alternative-ASSISTED OUTPATIENT~~
24 treatment or combined hospitalization and ~~alternative-ASSISTED~~
25 **OUTPATIENT** treatment is not complying with the order, that the
26 ~~alternative-ASSISTED OUTPATIENT~~ treatment has not been or will not
27 be sufficient to prevent harm to the individual or to others, or

1 that the individual believes that the ~~alternative~~ **ASSISTED**
2 **OUTPATIENT** treatment program is not appropriate, the court may do
3 either of the following without a hearing and based upon the record
4 and other available information:

5 (a) Consider other alternatives to hospitalization and modify
6 the order to direct the individual to undergo another program of
7 ~~alternative~~ **ASSISTED OUTPATIENT** treatment for the duration of the
8 order.

9 (b) Modify the order to direct the individual to undergo
10 hospitalization or combined hospitalization and ~~alternative~~
11 **ASSISTED OUTPATIENT** treatment. The duration of the hospitalization,
12 including the number of days the individual has already been
13 hospitalized if the order being modified is a combined order, shall
14 not exceed 60 days for an initial order or 90 days for a second or
15 continuing order. The modified order may provide that if the
16 individual refuses to comply with the psychiatrist's order to
17 return to the hospital, a peace officer shall take the individual
18 into protective custody and transport the individual to the
19 hospital selected.

20 (3) During the period of an order for assisted outpatient
21 treatment or a combination of hospitalization and assisted
22 outpatient treatment, if the agency or mental health professional
23 who is supervising an individual's assisted outpatient treatment
24 determines that the individual is not complying with the court
25 order, the supervising agency or mental health professional shall
26 notify the court immediately.

27 (4) If it comes to the attention of the court that an

1 individual subject to an order of assisted outpatient treatment or
2 a combination of hospitalization and assisted outpatient treatment
3 is not complying with the order, the court may require 1 or more of
4 the following, without a hearing:

5 (a) That the individual be taken to the preadmission screening
6 unit established by the community mental health services program
7 serving the community in which the individual resides.

8 (b) That the individual be hospitalized for a period of not
9 more than 10 days.

10 (c) Upon recommendation by the community mental health
11 services program serving the community in which the individual
12 resides, that the individual be hospitalized for a period of more
13 than 10 days, but not longer than the duration of the order for
14 assisted outpatient treatment or a combination of hospitalization
15 and assisted outpatient treatment, or not longer than 90 days,
16 whichever is less.

17 (5) The court may direct peace officers to transport the
18 individual to a designated facility or a preadmission screening
19 unit, as applicable, and the court may specify conditions under
20 which the individual may return to assisted outpatient treatment
21 before the order expires.

22 (6) An individual hospitalized without a hearing as provided
23 in subsection (4) may object to the hospitalization according to
24 the provisions of section 475a.

25 Sec. 475a. (1) If an individual is hospitalized without a
26 hearing after placement in an ~~alternative~~ **ASSISTED OUTPATIENT**
27 treatment program, the individual has a right to object to the

1 hospitalization. Upon transfer of the individual to the hospital,
2 the hospital shall notify the individual of his or her right to
3 object under this section.

4 (2) Upon receipt of an objection to a hospitalization under
5 ~~section~~**SUBSECTION** (1), the court shall schedule a hearing for a
6 determination that the individual requires hospitalization.

7 Sec. 477. (1) A person responsible for providing treatment to
8 an individual ordered to undergo a program of ~~alternative~~**ASSISTED**
9 **OUTPATIENT** treatment or a program of combined hospitalization and
10 ~~alternative~~**ASSISTED OUTPATIENT** treatment may terminate the
11 treatment to the individual if the provider of the treatment
12 considers the individual clinically suitable for termination of
13 treatment, and shall terminate the treatment when the individual's
14 mental condition is such that he or she no longer meets the
15 criteria of a person requiring treatment.

16 (2) Upon termination of ~~alternative~~**ASSISTED OUTPATIENT**
17 treatment or combined hospitalization and ~~alternative~~**ASSISTED**
18 **OUTPATIENT** treatment, the court shall be notified by the provider
19 of the treatment.

20 Sec. 478. If, upon the discharge of a patient hospitalized by
21 court order or the termination of ~~alternative~~**ASSISTED OUTPATIENT**
22 treatment to an individual receiving ~~alternative~~**ASSISTED**
23 **OUTPATIENT** treatment ~~pursuant to~~**UNDER** this chapter, it is
24 determined that the individual would benefit from the receipt of
25 further treatment, the hospital or provider of ~~alternative~~**ASSISTED**
26 **OUTPATIENT** treatment shall offer him **OR HER** appropriate treatment
27 on a voluntary basis, or shall aid him **OR HER** to obtain treatment

1 from another source.

2 Sec. 482. Each individual subject to a 1-year order of
3 involuntary mental health treatment has the right to adequate and
4 prompt review of his or her current status as a person requiring
5 treatment. Six months from the date of a 1-year order of
6 involuntary mental health treatment, the executive director of the
7 community mental health services program responsible for treatment
8 or, if private arrangements for the reimbursement of mental health
9 treatment services have been made, the hospital director or
10 director of the ~~alternative~~-**ASSISTED OUTPATIENT** treatment program
11 shall assign a physician or licensed psychologist to review the
12 individual's clinical status as a person requiring treatment.

13 Sec. 489. (1) No determination that a person requires
14 treatment, no order of court authorizing hospitalization or
15 ~~alternative~~-**ASSISTED OUTPATIENT** treatment, nor any form of
16 admission to a hospital ~~shall give~~-**GIVES** rise to a presumption of,
17 ~~constitute~~-**CONSTITUTES** a finding of, or ~~operate~~-**OPERATES** as an
18 adjudication of legal incompetence.

19 (2) No order of commitment under any previous statute of this
20 state, ~~shall~~, in the absence of a concomitant appointment of a
21 guardian, ~~constitute~~-**CONSTITUTES** a finding of or ~~operate~~-**OPERATES**
22 as an adjudication of legal incompetence.

23 Enacting section 1. This amendatory act takes effect 90 days
24 after the date it is enacted into law.