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State of Minnesota
HOUSE OF REPRESENTATIVES

**EIGHTY-FIFTH
SESSION**

HOUSE FILE NO. 738

February 8, 2007

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The bill was read for the first time and referred to the Committee on Public Safety and Civil Justice

March 12, 2007

Committee Recommendation and Adoption of Report:

To Pass

Read Second Time

1.1 A bill for an act
1.2 relating to civil commitment; expanding early intervention services; amending
1.3 Minnesota Statutes 2006, section 253B.065, subdivision 5.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. Minnesota Statutes 2006, section 253B.065, subdivision 5, is amended to
1.6 read:

1.7 Subd. 5. **Early intervention criteria.** (a) A court shall order early intervention
1.8 treatment of a proposed patient who meets the criteria under paragraph (b) or (c). The
1.9 early intervention treatment must be less intrusive than long-term inpatient commitment
1.10 and must be the least restrictive treatment program available that can meet the patient's
1.11 treatment needs.

1.12 (b) The court shall order early intervention treatment if the court finds all of the
1.13 elements of the following factors by clear and convincing evidence:

1.14 (1) the proposed patient is mentally ill;

1.15 (2) the proposed patient refuses to accept appropriate mental health treatment; and

1.16 (3) the proposed patient's mental illness is manifested by instances of grossly
1.17 disturbed behavior or faulty perceptions and either:

1.18 (i) the grossly disturbed behavior or faulty perceptions significantly interfere with
1.19 the proposed patient's ability to care for self and the proposed patient, when competent,
1.20 would have chosen substantially similar treatment under the same circumstances; or

1.21 (ii) due to the mental illness, the proposed patient received court-ordered inpatient
1.22 treatment under section 253B.09 at least two times in the previous three years; the patient
1.23 is exhibiting symptoms or behavior substantially similar to those that precipitated one or
1.24 more of the court-ordered treatments; and the patient is reasonably expected to physically

2.1 or mentally deteriorate to the point of meeting the criteria for commitment under section
2.2 253B.09 unless treated.

2.3 For purposes of this paragraph, a proposed patient who was released under
2.4 section 253B.095 and whose release was not revoked is not considered to have received
2.5 court-ordered inpatient treatment under section 253B.09.

2.6 (c) The court may order early intervention treatment if the court finds that a pregnant
2.7 woman is a chemically dependent person. A chemically dependent person for purposes
2.8 of this section is a woman who has during pregnancy engaged in excessive use, for a
2.9 nonmedical purpose, of controlled substances or their derivatives, alcohol, or inhalants that
2.10 will pose a substantial risk of damage to the brain or physical development of the fetus.

2.11 (d) For purposes of paragraph paragraphs (b) and (c), none of the following
2.12 constitute a refusal to accept appropriate mental health treatment:

2.13 (1) a willingness to take medication but a reasonable disagreement about type or
2.14 dosage;

2.15 (2) a good-faith effort to follow a reasonable alternative treatment plan, including
2.16 treatment as specified in a valid advance directive under chapter 145C or section 253B.03,
2.17 subdivision 6d;

2.18 (3) an inability to obtain access to appropriate treatment because of inadequate health
2.19 care coverage or an insurer's refusal or delay in providing coverage for the treatment; or

2.20 (4) an inability to obtain access to needed mental health services because the provider
2.21 will only accept patients who are under a court order or because the provider gives persons
2.22 under a court order a priority over voluntary patients in obtaining treatment and services.