MISSISSIPPI LEGISLATURE

By: Senator(s) Thompson

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REGULAR SESSION 2022

To: Judiciary, Division A; County Affairs

SENATE BILL NO. 2623

1 AN ACT TO AMEND SECTION 41-21-67, MISSISSIPPI CODE OF 1972, 2 TO LIMIT THE FINANCIAL RESPONSIBILITY OF THE BOARD OF SUPERVISORS 3 FOR PAYMENT OF TREATMENT COSTS NEEDED BY CERTAIN MENTALLY ILL 4 COUNTY RESIDENTS UNDER ORDER OF COMMITMENT WHO ARE INDIGENT TO A 5 NEGOTIATED DISCOUNTED FEE OR, IN THE ABSENCE OF A NEGOTIATED FEE 6 SCHEDULE, TO THE MEDICAID REIMBURSEMENT RATE; TO AMEND SECTION 41-21-73, MISSISSIPPI CODE OF 1972, TO CONFORM; AND FOR RELATED 7 8 PURPOSES.

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:
 10 SECTION 1. Section 41-21-67, Mississippi Code of 1972, is
 11 amended as follows:

12 41-21-67. (1) Whenever the affidavit provided for in Section 41-21-65 is filed with the chancery clerk, the clerk, upon 13 14 direction of the chancellor of the court, shall issue a writ directed to the sheriff of the proper county to take into custody 15 16 the person alleged to be in need of treatment and to take the person for pre-evaluation screening and treatment by the 17 appropriate community mental health center established under 18 19 Section 41-19-31. The community mental health center will be 20 designated as the first point of entry for pre-evaluation 21 screening and treatment. If the community mental health center is S. B. No. 2623 ~ OFFICIAL ~ G1/222/SS26/R716

22 unavailable, any reputable licensed physician, psychologist, nurse 23 practitioner or physician assistant, as allowed in the discretion of the court, may conduct the pre-evaluation screening and 24 25 examination as set forth in Section 41-21-69. The order may 26 provide where the person shall be held before being taken for 27 pre-evaluation screening and treatment. However, when the affidavit fails to set forth factual allegations and witnesses 28 29 sufficient to support the need for treatment, the chancellor shall 30 refuse to direct issuance of the writ. Reapplication may be made 31 to the chancellor. If a pauper's affidavit is filed by an affiant 32 who is a quardian or conservator of a person in need of treatment, 33 the court shall determine if either the affiant or the person in 34 need of treatment is a pauper and if * * * the affiant or the person in need of treatment is determined to be a pauper, the 35 county of the residence of the respondent shall bear the costs of 36 37 the commitment proceedings in court, unless funds for those 38 purposes are made available by the state.

In any county in which a Crisis Intervention Team has been established under the provisions of Sections 41-21-131 through 41 41-21-143, the clerk, upon the direction of the chancellor, may require that the person be referred to the Crisis Intervention Team for appropriate psychiatric or other medical services before the issuance of the writ.

45 (2) Upon issuance of the writ, the chancellor shall
46 immediately appoint and summon two (2) reputable, licensed

S. B. No. 2623 ~ OFFICIAL ~ 22/SS26/R716 PAGE 2 (csq\kr) 47 physicians or one (1) reputable, licensed physician and either one 48 (1) psychologist, nurse practitioner or physician assistant to conduct a physical and mental examination of the person at a place 49 50 to be designated by the clerk or chancellor and to report their 51 findings to the clerk or chancellor. However, any nurse 52 practitioner or physician assistant conducting the examination 53 shall be independent from, and not under the supervision of, the 54 other physician conducting the examination. A nurse practitioner 55 or psychiatric nurse practitioner conducting an examination under 56 this chapter must be functioning within a collaborative or 57 consultative relationship with a physician as required under Section 73-15-20(3). In all counties in which there is a county 58 59 health officer, the county health officer, if available, may be 60 one (1) of the physicians so appointed. If a licensed physician is not available to conduct the physical and mental examination 61 62 within forty-eight (48) hours of the issuance of the writ, the 63 court, in its discretion and upon good cause shown, may permit the examination to be conducted by the following: (a) two (2) nurse 64 65 practitioners, one (1) of whom must be a psychiatric nurse 66 practitioner; or (b) one (1) psychiatric nurse practitioner and 67 one (1) psychologist or physician assistant. Neither of the physicians nor the psychologist, nurse practitioner or physician 68 69 assistant selected shall be related to that person in any way, nor 70 have any direct or indirect interest in the estate of that person nor shall any full-time staff of residential treatment facilities 71

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72 operated directly by the State Department of Mental Health serve 73 as examiner.

(3) The clerk shall ascertain whether the respondent is represented by an attorney, and if it is determined that the respondent does not have an attorney, the clerk shall immediately notify the chancellor of that fact. If the chancellor determines that the respondent for any reason does not have the services of an attorney, the chancellor shall immediately appoint an attorney for the respondent at the time the examiners are appointed.

81 (4)(a) If the chancellor determines that there is probable 82 cause to believe that the respondent is mentally ill and that 83 there is no reasonable alternative to detention, the chancellor 84 may order that the respondent be retained as an emergency patient 85 at any licensed medical facility for evaluation by a physician, 86 nurse practitioner or physician assistant and that a peace officer 87 transport the respondent to the specified facility. If the 88 community mental health center serving the county has partnered 89 with Crisis Intervention Teams under the provisions of Sections 90 41-21-131 through 41-21-143, the order may specify that the 91 licensed medical facility be a designated single point of entry 92 within the county or within an adjacent county served by the 93 community mental health center. If the person evaluating the 94 respondent finds that the respondent is mentally ill and in need 95 of treatment, the chancellor may order that the respondent be retained at the licensed medical facility or any other available 96

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97 suitable location as the court may so designate pending an 98 admission hearing. If necessary, the chancellor may order a peace officer or other person to transport the respondent to that 99 facility or suitable location. Any respondent so retained may be 100 101 given such treatment as is indicated by standard medical practice. 102 However, the respondent shall not be held in a hospital operated 103 directly by the State Department of Mental Health, and shall not 104 be held in jail unless the court finds that there is no reasonable 105 alternative.

106 For indigent patients with no payor source, the (b) 107 county of residence of the respondent shall bear the costs of 108 treatment by paying a negotiated fee as agreed to by the medical 109 care service providers. In the absence of a negotiated discounted fee schedule, medical care service providers will be paid by the 110 111 county of residence an amount no greater than the reimbursement 112 rate applicable based on the Mississippi Medicaid reimbursement 113 rate, and the county will not be liable for any cost associated with medical attention for a respondent that exceeds the 114 115 Mississippi Medicaid reimbursement rate for all medical care 116 services, durable and nondurable goods, prescription drugs and 117 medications required for the respondent. 118 Whenever a licensed psychologist, nurse (5) (a)

110 (d) whenever a freehold poychologist, harse
119 practitioner or physician assistant who is certified to complete
120 examinations for the purpose of commitment or a licensed physician
121 has reason to believe that a person poses an immediate substantial

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122 likelihood of physical harm to himself or others or is gravely 123 disabled and unable to care for himself by virtue of mental 124 illness, as defined in Section 41-21-61(e), then the physician, 125 psychologist, nurse practitioner or physician assistant may hold 126 the person or may admit the person to and treat the person in a 127 licensed medical facility, without a civil order or warrant for a period not to exceed seventy-two (72) hours. However, if the 128 129 seventy-two-hour period begins or ends when the chancery clerk's 130 office is closed, or within three (3) hours of closing, and the chancery clerk's office will be continuously closed for a time 131 132 that exceeds seventy-two (72) hours, then the seventy-two-hour 133 period is extended until the end of the next business day that the 134 chancery clerk's office is open. The person may be held and 135 treated as an emergency patient at any licensed medical facility, 136 available regional mental health facility, or crisis intervention The physician or psychologist, nurse practitioner or 137 center. 138 physician assistant who holds the person shall certify in writing the reasons for the need for holding. 139

140 If a person is being held and treated in a licensed medical 141 facility, and that person decides to continue treatment by 142 voluntarily signing consent for admission and treatment, the 143 seventy-two-hour hold may be discontinued without filing an 144 affidavit for commitment. Any respondent so held may be given 145 such treatment as indicated by standard medical practice. Persons 146 acting in good faith in connection with the detention and

S. B. No. 2623 22/SS26/R716 PAGE 6 (csq\kr) 147 reporting of a person believed to be mentally ill shall incur no 148 liability, civil or criminal, for those acts.

149 Whenever an individual is held for purposes of (b) 150 receiving treatment as prescribed under paragraph (a) of this 151 subsection, and it is communicated to the mental health 152 professional holding the individual that the individual resides or 153 has visitation rights with a minor child, and if the individual is 154 considered to be a danger to the minor child, the mental health 155 professional shall notify the Department of Child Protection 156 Services prior to discharge if the threat of harm continues to 157 exist, as is required under Section 43-21-353.

158 This paragraph (b) shall be known and may be cited as the 159 "Andrew Lloyd Law."

160 SECTION 2. Section 41-21-73, Mississippi Code of 1972, is 161 amended as follows:

162 41-21-73. (1) The hearing shall be conducted before the 163 chancellor. However, the hearing may be held at the location 164 where the respondent is being held. Within a reasonable period of 165 time before the hearing, notice of same shall be provided the 166 respondent and his attorney, which shall include: (a) notice of 167 the date, time and place of the hearing; (b) a clear statement of 168 the purpose of the hearing; (c) the possible consequences or 169 outcome of the hearing; (d) the facts that have been alleged in 170 support of the need for commitment; (e) the names, addresses and

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171 telephone numbers of the examiner(s); and (f) other witnesses 172 expected to testify.

173 The respondent must be present at the hearing unless the (2)chancellor determines that the respondent is unable to attend and 174 175 makes that determination and the reasons therefor part of the 176 record. At the time of the hearing, the respondent shall not be so under the influence or suffering from the effects of drugs, 177 178 medication or other treatment so as to be hampered in 179 participating in the proceedings. The court, at the time of the 180 hearing, shall be presented a record of all drugs, medication or 181 other treatment that the respondent has received pending the 182 hearing, unless the court determines that such a record would be 183 impractical and documents the reasons for that determination.

184 (3) The respondent shall have the right to offer evidence,
185 to be confronted with the witnesses against him and to
186 cross-examine them and shall have the privilege against
187 self-incrimination. The rules of evidence applicable in other
188 judicial proceedings in this state shall be followed.

(4) If the court finds by clear and convincing evidence that
the proposed patient is a person with mental illness or a person
with an intellectual disability and, if after careful
consideration of reasonable alternative dispositions, including,
but not limited to, dismissal of the proceedings, the court finds
that there is no suitable alternative to judicial commitment, the
court shall commit the patient for treatment in the least

S. B. No. 2623 ~ OFFICIAL ~ 22/SS26/R716 PAGE 8 (csq\kr) 196 restrictive treatment facility that can meet the patient's 197 treatment needs. Treatment before admission to a state-operated facility shall be located as closely as possible to the patient's 198 199 county of residence and the county of residence shall be 200 responsible for that cost. Admissions to state-operated 201 facilities shall be in compliance with the catchment areas 202 established by the State Department of Mental Health. A 203 nonresident of the state may be committed for treatment or 204 confinement in the county where the person was found.

Alternatives to commitment to inpatient care may include, but shall not be limited to: voluntary or court-ordered outpatient commitment for treatment with specific reference to a treatment regimen, day treatment in a hospital, night treatment in a hospital, placement in the custody of a friend or relative, or the provision of home health services.

For persons committed as having mental illness or having an intellectual disability, the initial commitment shall not exceed three (3) months.

(5) No person shall be committed to a treatment facility whose primary problems are the physical disabilities associated with old age or birth defects of infancy.

(6) The court shall state the findings of fact and conclusions of law that constitute the basis for the order of commitment. The findings shall include a listing of less

S. B. No. 2623 **~ OFFICIAL ~** 22/SS26/R716 PAGE 9 (csq\kr) 220 restrictive alternatives considered by the court and the reasons 221 that each was found not suitable.

(7) A stenographic transcription shall be recorded by a stenographer or electronic recording device and retained by the court.

(8) Notwithstanding any other provision of law to the contrary, neither the State Board of Mental Health or its members, nor the State Department of Mental Health or its related facilities, nor any employee of the State Department of Mental Health or its related facilities, unless related to the respondent by blood or marriage, shall be assigned or adjudicated custody, guardianship, or conservatorship of the respondent.

(9) The county where a person in need of treatment is found is authorized to charge the county of the person's residence for the costs incurred while the person is confined in the county where such person was found <u>subject to the provisions of Section</u> <u>41-21-67 for medical treatment</u>.

237 **SECTION 3.** This act shall take effect and be in force from 238 and after July 1, 2022.

S. B. No. 2623 ~ OFFICIAL ~ 22/SS26/R716 ST: Involuntary civil commitments; limit PAGE 10 (csq\kr) county's liability for costs of medical treatment.