

## House Amendments to Senate Bill No. 2623

TO THE SECRETARY OF THE SENATE:

THIS IS TO INFORM YOU THAT THE HOUSE HAS ADOPTED THE AMENDMENTS SET OUT BELOW:

### AMENDMENT NO. 1

Amend by striking all after the enacting clause and inserting in lieu thereof the following:

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  
13 Section 41-21-65 is filed with the chancery clerk, the clerk, upon  
14 direction of the chancellor of the court, shall issue a writ  
15 directed to the sheriff of the proper county to take into custody  
16 the person alleged to be in need of treatment and to take the  
17 person for pre-evaluation screening and treatment by the  
18 appropriate community mental health center established under  
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  
22 unavailable, any reputable licensed physician, psychologist, nurse  
23 practitioner or physician assistant, as allowed in the discretion  
24 of the court, may conduct the pre-evaluation screening and  
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  
28 affidavit fails to set forth factual allegations and witnesses  
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 guardian 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  
35 person in need of treatment is determined to be a pauper, the  
36 county of the residence of the respondent shall bear the costs of  
37 the commitment proceedings in court, unless funds for those  
38 purposes are made available by the state.

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

45 (2) Upon issuance of the writ, the chancellor shall  
46 immediately appoint and summon two (2) reputable, licensed  
47 physicians or one (1) reputable, licensed physician and either one  
48 (1) psychologist, nurse practitioner or physician assistant to  
49 conduct a physical and mental examination of the person at a place  
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  
58 Section 73-15-20(3). In all counties in which there is a county  
59 health officer, the county health officer, if available, may be  
60 one (1) of the physicians so appointed. If a licensed physician  
61 is not available to conduct the physical and mental examination  
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  
64 examination to be conducted by the following: (a) two (2) nurse  
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  
68 physicians nor the psychologist, nurse practitioner or physician  
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  
71 nor shall any full-time staff of residential treatment facilities  
72 operated directly by the State Department of Mental Health serve  
73 as examiner.

74 (3) The clerk shall ascertain whether the respondent is  
75 represented by an attorney, and if it is determined that the  
76 respondent does not have an attorney, the clerk shall immediately  
77 notify the chancellor of that fact. If the chancellor determines  
78 that the respondent for any reason does not have the services of

79 an attorney, the chancellor shall immediately appoint an attorney  
80 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  
96 retained at the licensed medical facility or any other available  
97 suitable location as the court may so designate pending an  
98 admission hearing. If necessary, the chancellor may order a peace  
99 officer or other person to transport the respondent to that  
100 facility or suitable location. Any respondent so retained may be  
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 (b) For indigent patients with no payor source, the  
107 county of residence of the respondent may bear the costs of  
108 treatment or placement by paying a negotiated fee as agreed to by  
109 the medical care service providers. In the absence of a  
110 negotiated discounted fee schedule, medical care service providers  
111 will be paid by the county of residence an amount no greater than  
112 the reimbursement rate applicable based on the Mississippi  
113 Medicaid reimbursement rate, and the county will not be liable for  
114 any cost associated with medical attention or placement for a  
115 respondent that exceeds the Mississippi Medicaid reimbursement  
116 rate for all medical care services, durable and nondurable goods,  
117 prescription drugs and medications required for the respondent.

118 (5) (a) Whenever a licensed psychologist, nurse  
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  
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  
128 period not to exceed seventy-two (72) hours. However, if the  
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  
131 chancery clerk's office will be continuously closed for a time  
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  
137 center. The physician or psychologist, nurse practitioner or  
138 physician assistant who holds the person shall certify in writing  
139 the reasons for the need for holding.

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  
147 reporting of a person believed to be mentally ill shall incur no  
148 liability, civil or criminal, for those acts.

149 (b) Whenever an individual is held for purposes of  
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  
171 telephone numbers of the examiner(s); and (f) other witnesses  
172 expected to testify.

173 (2) The respondent must be present at the hearing unless the  
174 chancellor determines that the respondent is unable to attend and  
175 makes that determination and the reasons therefor part of the  
176 record. At the time of the hearing, the respondent shall not be  
177 so under the influence or suffering from the effects of drugs,  
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.

189 (4) If the court finds by clear and convincing evidence that  
190 the proposed patient is a person with mental illness or a person  
191 with an intellectual disability and, if after careful  
192 consideration of reasonable alternative dispositions, including,  
193 but not limited to, dismissal of the proceedings, the court finds  
194 that there is no suitable alternative to judicial commitment, the  
195 court shall commit the patient for treatment in the least  
196 restrictive treatment facility that can meet the patient's  
197 treatment needs. Treatment before admission to a state-operated  
198 facility shall be located as closely as possible to the patient's  
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.

205 Alternatives to commitment to inpatient care may include, but  
206 shall not be limited to: voluntary or court-ordered outpatient  
207 commitment for treatment with specific reference to a treatment



208 regimen, day treatment in a hospital, night treatment in a  
209 hospital, placement in the custody of a friend or relative, or the  
210 provision of home health services.

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

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

217 (6) The court shall state the findings of fact and  
218 conclusions of law that constitute the basis for the order of  
219 commitment. The findings shall include a listing of less  
220 restrictive alternatives considered by the court and the reasons  
221 that each was found not suitable.

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

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

232 (9) The county where a person in need of treatment is found  
233 is authorized to charge the county of the person's residence for

234 the costs incurred while the person is confined in the county  
235 where such person was found subject to the provisions of Section  
236 41-21-67 for medical treatment.

237 **SECTION 3.** This act shall take effect and be in force from  
238 and after July 1, 2022, and shall stand repealed on June 30, 2022.

**Further, amend by striking the title in its entirety and  
inserting in lieu thereof the following:**

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  
7 41-21-73, MISSISSIPPI CODE OF 1972, TO CONFORM; AND FOR RELATED  
8 PURPOSES.

HR12\SB2623A.J

Andrew Ketchings  
Clerk of the House of Representatives