

## Department of Planning and Budget 2016 Fiscal Impact Statement

**1. Bill Number:** HB606

House of Origin	<input checked="" type="checkbox"/> Introduced	<input type="checkbox"/> Substitute	<input type="checkbox"/> Engrossed
Second House	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input type="checkbox"/> Enrolled

**2. Patron:** Bell, Robert B.

**3. Committee:** Courts of Justice

**4. Title:** Temporary detention order; voluntary admission.

**5. Summary:** This bill provides that a magistrate shall issue a temporary detention order if a person (i) has a mental illness and there exists a substantial likelihood in the near future that he will cause serious harm to himself or others or suffer serious harm due to his lack of capacity to protect himself or provide for his basic needs and (ii) is in need of hospitalization or treatment, regardless of whether the person is willing and capable of volunteering for hospitalization or treatment. Currently, a temporary detention order cannot be issued if a person volunteers for hospitalization or treatment. If the person accepts voluntary admission, the bill provides that the temporary detention order will be deemed to have expired at that time and no commitment hearing need be held.

**6. Budget Amendment Necessary:** See 8. below.

**7. Fiscal Impact Estimates:** Indeterminate

**8. Fiscal Implications:** The bill alters the current temporary detention order practices within the Department of Behavioral Health and Developmental Services system. Under the bill, temporary detention orders would expire if an individual accepts voluntary inpatient treatment after a consultation with a justice of the court. It is not current practice within the courts for these individuals to have dedicated face-to-face meetings with justices to inform them of their rights and the consequences of accepting voluntary treatment. The number of individuals who, after meeting with a justice of the court would accept voluntary treatment, is unknown.

The new procedure could lengthen the time between evaluation and actual admission to a hospital for some individuals. It may also increase the length of stay of some admissions, because the minimum number of days of voluntary hospitalization under this procedure might be longer than the period of temporary detention under the current process, which is 72 hours. If the average length of stay for these TDO turned voluntary admissions increases, it will increase pressure on state facilities and may impact availability of beds system-wide.

The variations by which such a commitment could be paid for are numerous and depend on the type of hospital, whether the patient is insured or uninsured, and whether the patient could be covered by Medicaid, however as a non-TDO admission, it would no longer be

eligible for reimbursement from the Involuntary Mental Commitment Fund, which could impact revenue to state facilities.

**9. Specific Agency or Political Subdivisions Affected:** Department of Behavioral Health and Developmental Services, Community Services Boards, Courts of Justice

**10. Technical Amendment Necessary:** No.