SENATE BILL 831

J1 4lr2186
CF HB 767

By: **Senator Kelley**
Introduced and read first time: January 31, 2014
Assigned to: Finance

A BILL ENTITLED

AN ACT concerning

Public Health – Mental Hygiene Law – Assisted Outpatient Treatment

FOR the purpose of providing that an application for assisted outpatient treatment may be submitted to a court by certain individuals; requiring that the application include certain information; requiring an applicant to provide to the court and a certain individual a certain treatment plan before a certain hearing is held; providing that a certain treatment plan may include certain alternative treatments; providing that a certain treating physician does not have to be the physician who supported a certain application; requiring, under certain circumstances, a certain treatment plan to include certain information regarding medication; requiring a treating physician to take certain actions when a treatment plan is being developed; requiring, except under certain circumstances, a court to hold a hearing on a certain application within a certain time period; requiring that a certain individual be represented by counsel at certain proceedings and be given the opportunity to take certain actions; authorizing, under certain circumstances, the court to hold the hearing in the absence of a certain individual; authorizing, under certain circumstances, the court to request a certain individual to consent to an examination by a certain physician; authorizing, under certain circumstances, the court to order a certain individual to be taken into custody and transported to a hospital for a certain examination; prohibiting a certain individual from being held for more than a certain number of hours; requiring certain physicians to testify at a certain hearing and to make certain statements; prohibiting the court from prohibiting an applicant from presenting certain evidence; authorizing, under certain circumstances, a court to order assisted outpatient treatment for a certain individual; requiring a certain order to include a certain treatment plan; providing that a certain court order may authorize a treating physician to initiate certain treatment without an additional hearing or further approval by the court; prohibiting a certain order from being effective for more than a certain period of time; requiring, under certain circumstances, a court to deny a certain application; authorizing a certain individual to submit certain motions

EXPLANATION: **CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.**
[Brackets**]** indicate matter deleted from existing law.

to the court during a certain time period; requiring a treating physician to apply to the court for approval before making certain changes to a certain treatment plan; requiring, except under certain circumstances, a court to hold a hearing on certain changes to a certain treatment plan; authorizing the treating physician to make certain changes to a certain treatment plan without applying to the court for approval; authorizing an applicant to apply to the court for an extension of a certain order within a certain time period before the order expires; requiring the court to hold a hearing in accordance with a certain provision of law on an application for an extension; authorizing a court to extend a certain order for a certain period of time; requiring a court to deny an application for an extension under certain circumstances; providing that an individual's substantial failure to comply with a certain order may constitute presumptive reasons for a certain physician to petition for a certain evaluation; prohibiting an individual's failure to comply with a certain order from being grounds for a certain finding or involuntary admission to a State facility under certain provisions of law; defining certain terms; and generally relating to assisted outpatient treatment.

BY adding to
Article – Health – General
Section 10–929 through 10–937 to be under the new part "Part V. Assisted Outpatient Treatment"
Annotated Code of Maryland
(2009 Replacement Volume and 2013 Supplement)

Preamble

WHEREAS, A small but significant subset of individuals with severe mental illness repeatedly fail to adhere to prescribed treatment due to an affliction known as anosognosia, which causes an individual to lack the insight to recognize that the individual has a mental illness and a critical need for treatment; and

WHEREAS, When individuals with severe mental illness remain untreated, they suffer unnecessarily from homelessness, poverty, repeated arrests, trauma, and suicide; and

WHEREAS, Individuals with anosognosia lack the capacity to make rational and informed decisions regarding their civil rights; and

WHEREAS, Maryland is one of only five states without a statutory or regulatory provision that allows a court to order assisted outpatient treatment for an individual on the finding that the individual suffers from a severe and disabling mental illness and demonstrates difficulty in voluntarily adhering to prescribed mental health treatment; and

WHEREAS, Multiple studies of the benefits of assisted outpatient treatment in other states show that assisted outpatient treatment helps restore an individual's

dignity and mental faculties, which are prerequisites for the individual being able to exercise the individual's civil rights; now, therefore,

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article – Health – General

10–927. RESERVED.

10–928. RESERVED.

PART V. ASSISTED OUTPATIENT TREATMENT.

10–929.

(A) IN THIS PART THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

(B) "APPLICANT" MEANS AN INDIVIDUAL WHO SUBMITS AN APPLICATION FOR ASSISTED OUTPATIENT TREATMENT TO A COURT UNDER § 10–930 OF THIS PART.

(C) "APPLICATION" MEANS AN APPLICATION FOR ASSISTED OUTPATIENT TREATMENT SUBMITTED TO A COURT UNDER § 10–930(A) OF THIS PART.

(D) "ASSISTED OUTPATIENT TREATMENT" MEANS A SPECIFIC REGIMEN OF OUTPATIENT TREATMENT FOR A MENTAL DISORDER THAT IS ORDERED BY A COURT UNDER § 10–933(A)(1) OF THIS PART.

(E) "ASSISTED OUTPATIENT TREATMENT PLAN" MEANS THE TREATMENT PLAN THAT IS INCLUDED IN AN ASSISTED OUTPATIENT ORDER UNDER § 10–933(A)(2) OF THIS PART.

(F) "COURT" MEANS THE DISTRICT COURT OR A CIRCUIT COURT OF THE STATE.

(G) "TREATING PHYSICIAN" MEANS A PHYSICIAN WHO IS OR WILL BE RESPONSIBLE FOR THE MEDICAL TREATMENT OF AN INDIVIDUAL'S MENTAL DISORDER DURING THE PERIOD THE INDIVIDUAL IS SUBJECT TO AN ASSISTED OUTPATIENT TREATMENT ORDER.

(H) "TREATMENT PLAN" MEANS A PLAN DEVELOPED UNDER THE SUPERVISION OF A TREATING PHYSICIAN THAT:

(1) INCORPORATES ALL OUTPATIENT MENTAL HEALTH TREATMENT SERVICES THAT ARE DETERMINED TO BE ESSENTIAL AND AVAILABLE FOR THE MAINTENANCE OF THE HEALTH AND SAFETY OF AN INDIVIDUAL FOR WHOM AN APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT; AND

(2) FOR EACH OUTPATIENT TREATMENT SERVICE, IDENTIFIES A COMMUNITY–BASED PROVIDER THAT HAS AGREED TO PROVIDE THE SERVICE TO THE INDIVIDUAL FOR WHOM AN APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT.

10–930.

(A) AN APPLICATION FOR ASSISTED OUTPATIENT TREATMENT MAY BE SUBMITTED TO A COURT BY:

(1) THE DIRECTOR OF A COMMUNITY MENTAL HEALTH SERVICES PROGRAM THAT RECEIVES STATE FUNDING UNDER SUBTITLE 9 OF THIS TITLE; OR

(2) AN ADULT WHO HAS A LEGITIMATE INTEREST IN THE WELFARE OF THE INDIVIDUAL FOR WHOM THE ADULT SEEKS ASSISTED OUTPATIENT TREATMENT.

(B) AN APPLICATION SHALL:

(1) BE IN WRITING;

(2) BE SIGNED BY THE APPLICANT;

(3) STATE:

(I) THE APPLICANT'S NAME, ADDRESS, AND RELATIONSHIP, IF ANY, TO THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT;

(II) THE NAME AND ANY KNOWN ADDRESS OF THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT;

(III) THAT THE APPLICANT HAS REASON TO BELIEVE THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT MEETS THE CRITERIA FOR ASSISTED OUTPATIENT TREATMENT LISTED IN § 10–933(A)(1) OF THIS PART; AND

(IV) FOR EACH CRITERION LISTED IN § 10–933(A)(1) OF THIS PART, THE SPECIFIC ALLEGATIONS OF FACT THAT SUPPORT THE APPLICANT'S BELIEF THAT THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT MEETS THE CRITERION; AND

(4) INCLUDE AN AFFIDAVIT OR AFFIRMATION OF A PHYSICIAN, STATING THAT THE PHYSICIAN:

(I) IS WILLING AND ABLE TO TESTIFY AT THE APPLICATION HEARING UNDER § 10–932(A) OF THIS PART; AND

(II) 1. A. PERSONALLY EXAMINED THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT WITHIN 10 DAYS BEFORE THE DATE OF THE APPLICATION; AND

B. CONCLUDED THAT THE INDIVIDUAL MEETS THE CRITERIA LISTED IN § 10–933(A)(1) OF THIS PART; OR

2. A. WAS UNSUCCESSFUL, AFTER MAKING REASONABLE ATTEMPTS WITHIN 10 DAYS BEFORE THE DATE OF THE APPLICATION, IN PERSUADING THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT TO SUBMIT TO AN EXAMINATION; AND

B. IN GOOD FAITH BELIEVES THAT THE INDIVIDUAL MEETS THE CRITERIA LISTED IN § 10–933(A)(1) OF THIS PART.

10–931.

(A) (1) BEFORE A HEARING IS HELD UNDER § 10–932(A) OF THIS PART, THE APPLICANT SHALL PROVIDE TO THE COURT AND TO THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT A PROPOSED WRITTEN TREATMENT PLAN.

(2) THE TREATING PHYSICIAN UNDER WHOSE SUPERVISION THE TREATMENT PLAN WAS DEVELOPED MAY NOT BE REQUIRED TO BE THE SAME PHYSICIAN WHOSE AFFIDAVIT OR AFFIRMATION WAS INCLUDED IN AN APPLICATION UNDER § 10–930(B) OF THIS PART.

(B) IF A TREATMENT PLAN PROVIDED TO A COURT UNDER SUBSECTION (A)(1) OF THIS SECTION INCLUDES A RECOMMENDATION REGARDING MEDICATION, THE TREATMENT PLAN SHALL:

(1) STATE WHETHER THE MEDICATION SHOULD BE SELF–ADMINISTERED OR ADMINISTERED BY AN AUTHORIZED PROFESSIONAL; AND

(2) SPECIFY THE TYPE OF MEDICATION THAT IS MOST LIKELY TO PROVIDE THE MAXIMUM BENEFIT TO THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT.

(C) WHEN A TREATMENT PLAN THAT WILL BE PROVIDED TO A COURT UNDER SUBSECTION (A)(1) OF THIS SECTION IS BEING DEVELOPED, THE TREATING PHYSICIAN SHALL:

(1) PROVIDE THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT, AND ANY OTHER INDIVIDUAL WHOM THE INDIVIDUAL REQUESTS, A REASONABLE OPPORTUNITY TO ACTIVELY PARTICIPATE IN THE DEVELOPMENT OF THE PLAN; AND

(2) IF THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT HAS EXECUTED AN ADVANCE DIRECTIVE FOR MENTAL HEALTH TREATMENT, CONSIDER ANY DIRECTIONS AND PREFERENCES INCLUDED IN THE ADVANCE DIRECTIVE.

(D) A TREATMENT PLAN MAY INCLUDE AN ALTERNATIVE TREATMENT THAT THE TREATING PHYSICIAN ANTICIPATES MAY BECOME NECESSARY TO MAINTAIN THE INDIVIDUAL'S HEALTH OR SAFETY DURING THE PERIOD OF ASSISTED OUTPATIENT TREATMENT.

10–932.

(A) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, WITHIN 3 BUSINESS DAYS AFTER THE DATE AN APPLICATION FOR ASSISTED OUTPATIENT TREATMENT IS RECEIVED BY A COURT, THE COURT SHALL HOLD A HEARING ON THE APPLICATION.

(2) (I) FOR GOOD CAUSE SHOWN, A COURT MAY HOLD A HEARING LATER THAN 3 BUSINESS DAYS AFTER THE DATE AN APPLICATION FOR ASSISTED OUTPATIENT TREATMENT IS RECEIVED.

(II) IN DETERMINING WHETHER GOOD CAUSE IS SHOWN, A COURT SHALL CONSIDER THE NEED TO EXPEDITIOUSLY PROVIDE ASSISTED OUTPATIENT TREATMENT TO THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT.

(B) THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT SHALL:

(1) BE REPRESENTED BY COUNSEL AT THE HEARING AND AT ALL STAGES OF A COURT PROCEEDING REGARDING AN APPLICATION; AND

(2) BE GIVEN AN OPPORTUNITY TO PRESENT EVIDENCE, CALL WITNESSES, AND CROSS–EXAMINE ADVERSE WITNESSES.

(C) IF THE INDIVIDUAL FOR WHOM AN APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT DOES NOT APPEAR AT THE HEARING AND APPROPRIATE ATTEMPTS TO HAVE THE INDIVIDUAL APPEAR HAVE FAILED, THE COURT MAY CONDUCT THE HEARING IN THE INDIVIDUAL'S ABSENCE.

(D) (1) THE PHYSICIAN WHO RECOMMENDS ASSISTED OUTPATIENT TREATMENT FOR AN INDIVIDUAL FOR WHOM AN APPLICANT SEEKS TREATMENT AND WHOSE MOST RECENT EXAMINATION OF THE INDIVIDUAL WAS WITHIN 10 DAYS BEFORE THE HEARING SHALL TESTIFY AT THE HEARING.

(2) THE PHYSICIAN SHALL STATE THE FACTS AND CLINICAL DETERMINATIONS THAT SUPPORT THE PHYSICIAN'S BELIEF THAT THE INDIVIDUAL FOR WHOM ASSISTED OUTPATIENT TREATMENT IS BEING SOUGHT MEETS THE CRITERIA FOR ASSISTED OUTPATIENT TREATMENT LISTED IN § 10–933(A)(1) OF THIS PART.

(3) (I) IF THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT REFUSED TO BE EXAMINED BY A PHYSICIAN, THE COURT MAY REQUEST THE INDIVIDUAL TO CONSENT TO AN EXAMINATION BY A PHYSICIAN APPOINTED BY THE COURT.

(II) IF THE INDIVIDUAL DOES NOT CONSENT TO AN EXAMINATION BY A COURT–APPOINTED PHYSICIAN AND THE COURT FINDS REASONABLE CAUSE TO BELIEVE THAT THE ALLEGATIONS IN THE APPLICATION ARE TRUE, THE COURT MAY ORDER THE INDIVIDUAL TO BE TAKEN INTO CUSTODY AND TRANSPORTED TO A HOSPITAL FOR EXAMINATION BY A PHYSICIAN.

(III) IF A COURT ORDERS THAT AN INDIVIDUAL BE TAKEN INTO CUSTODY UNDER SUBPARAGRAPH (II) OF THIS PARAGRAPH, THE INDIVIDUAL MAY NOT BE HELD FOR MORE THAN 24 HOURS.

(E) (1) THE TREATING PHYSICIAN UNDER WHOSE SUPERVISION THE TREATMENT PLAN PROVIDED TO THE COURT WAS DEVELOPED SHALL TESTIFY AT THE HEARING TO EXPLAIN THE TREATMENT PLAN.

(2) FOR EACH CATEGORY OF PROPOSED OR ALTERNATE TREATMENT, THE TREATING PHYSICIAN SHALL STATE:

(I) THE SPECIFIC RECOMMENDATION; AND

(II) THE CLINICAL BASIS FOR THE PHYSICIAN'S BELIEF THAT THE RECOMMENDED TREATMENT IS ESSENTIAL OR MAY BECOME ESSENTIAL TO THE MAINTENANCE OF THE INDIVIDUAL'S HEALTH OR SAFETY.

(3) IF THE TREATMENT PLAN INCLUDES A RECOMMENDATION REGARDING MEDICATION, THE TREATING PHYSICIAN SHALL STATE:

(I) THE TYPES OR CLASSES OF MEDICATION RECOMMENDED;

(II) THE BENEFICIAL AND DETRIMENTAL PHYSICAL AND MENTAL EFFECTS OF THE RECOMMENDED MEDICATION; AND

(III) WHETHER THE MEDICATION SHOULD BE SELF–ADMINISTERED OR ADMINISTERED BY AN AUTHORIZED PROFESSIONAL.

(4) IF THE INDIVIDUAL FOR WHOM THE APPLICANT SEEKS ASSISTED OUTPATIENT TREATMENT HAS EXECUTED AN ADVANCE DIRECTIVE FOR MENTAL HEALTH TREATMENT, THE TREATING PHYSICIAN SHALL STATE THE CONSIDERATION GIVEN TO ANY DIRECTIONS AND PREFERENCES INCLUDED IN THE ADVANCE DIRECTIVE IN DEVELOPING THE TREATMENT PLAN.

(F) A COURT MAY NOT PROHIBIT AN APPLICANT FROM PRESENTING RELEVANT EVIDENCE IN SUPPORT OF AN APPLICATION ON THE GROUNDS THAT THE EVIDENCE DOES NOT RELATE TO A FACT ALLEGED IN THE APPLICATION.

10–933.

(A) (1) AFTER HOLDING A HEARING UNDER § 10–932 OF THIS PART, A COURT MAY ORDER ASSISTED OUTPATIENT TREATMENT FOR AN INDIVIDUAL

WHO IS THE SUBJECT OF THE APPLICATION IF THE COURT FINDS, BY CLEAR AND CONVINCING EVIDENCE, THAT:

(I) THE INDIVIDUAL IS AN ADULT;

(II) THE INDIVIDUAL HAS A MENTAL DISORDER;

(III) THE INDIVIDUAL IS CAPABLE OF SURVIVING SAFELY IN THE COMMUNITY WITH APPROPRIATE OUTPATIENT TREATMENT AND SUPPORT;

(IV) IF THE INDIVIDUAL DOES NOT ADHERE TO OUTPATIENT TREATMENT, THE INDIVIDUAL IS LIKELY TO DETERIORATE AND WILL PRESENT A DANGER TO THE LIFE OR SAFETY OF THE INDIVIDUAL OR OTHERS;

(V) THE INDIVIDUAL IS UNLIKELY TO ADEQUATELY ADHERE TO OUTPATIENT TREATMENT ON A VOLUNTARY BASIS AS DEMONSTRATED BY:

1. THE INDIVIDUAL'S PRIOR HISTORY OF NONADHERENCE TO VOLUNTARY TREATMENT; OR

2. SPECIFIC CHARACTERISTICS OF THE INDIVIDUAL'S CLINICAL CONDITION THAT PREVENT THE INDIVIDUAL FROM MAKING RATIONAL AND INFORMED DECISIONS REGARDING MENTAL HEALTH TREATMENT; AND

(VI) ASSISTED OUTPATIENT TREATMENT IS THE LEAST RESTRICTIVE ALTERNATIVE APPROPRIATE TO MAINTAIN THE HEALTH AND SAFETY OF THE INDIVIDUAL.

(2) IF A COURT ORDERS ASSISTED OUTPATIENT TREATMENT UNDER PARAGRAPH (1) OF THIS SUBSECTION, THE ORDER:

(I) MAY NOT BE EFFECTIVE FOR A PERIOD OF MORE THAN 1 YEAR;

(II) SHALL INCLUDE AN ASSISTED OUTPATIENT TREATMENT PLAN THAT:

1. IS LIMITED IN SCOPE TO THE RECOMMENDATIONS INCLUDED IN THE TREATMENT PLAN PROVIDED TO THE COURT UNDER § 10–931(A)(1) OF THIS PART; AND

2. INCLUDES ONLY THOSE RECOMMENDATIONS MADE IN THE TREATMENT PLAN THAT THE COURT FINDS, BY CLEAR AND CONVINCING EVIDENCE, TO BE ESSENTIAL TO THE MAINTENANCE OF THE INDIVIDUAL'S HEALTH OR SAFETY; AND

(III) MAY AUTHORIZE THE TREATING PHYSICIAN TO INITIATE, WITHOUT AN ADDITIONAL HEARING OR FURTHER APPROVAL BY THE COURT, AN ALTERNATIVE TREATMENT THAT:

1. WAS INCLUDED IN THE TREATMENT PLAN PROVIDED TO THE COURT UNDER § 10–931(A)(1) OF THIS PART; AND

2. THE COURT FINDS, BY CLEAR AND CONVINCING EVIDENCE, MAY BECOME ESSENTIAL TO THE MAINTENANCE OF THE INDIVIDUAL'S HEALTH OR SAFETY DURING THE PERIOD OF ASSISTED OUTPATIENT TREATMENT.

(B) IF, AFTER HEARING ALL RELEVANT EVIDENCE, A COURT DOES NOT FIND BY CLEAR AND CONVINCING EVIDENCE THAT THE CRITERIA LISTED IN SUBSECTION (A)(1) OF THIS SECTION ARE MET, THE COURT SHALL DENY THE APPLICATION.

10–934.

AN INDIVIDUAL SUBJECT TO AN ASSISTED OUTPATIENT TREATMENT ORDER MAY SUBMIT A MOTION TO THE COURT TO STAY, VACATE, OR MODIFY THE ORDER AT ANY TIME DURING THE PERIOD THE ORDER IS EFFECTIVE.

10–935.

(A) (1) IN THIS SECTION, "MATERIAL CHANGE" MEANS:

(I) AN ADDITION OF A CATEGORY OF SERVICES TO OR REMOVAL OF A CATEGORY OF SERVICES THAT IS INCLUDED IN AN ASSISTED OUTPATIENT TREATMENT PLAN; OR

(II) A DEVIATION FROM THE TERMS OF AN ASSISTED OUTPATIENT TREATMENT PLAN RELATING TO THE ADMINISTRATION OF PSYCHOTROPIC DRUGS.

(2) "MATERIAL CHANGE" DOES NOT INCLUDE AN ALTERNATIVE TREATMENT THAT AN ASSISTED OUTPATIENT TREATMENT ORDER AUTHORIZES

A TREATING PHYSICIAN TO INITIATE WITHOUT AN ADDITIONAL HEARING OR FURTHER APPROVAL BY THE COURT.

(B) (1) A TREATING PHYSICIAN SHALL APPLY TO THE COURT FOR APPROVAL BEFORE INSTITUTING ANY MATERIAL CHANGE IN THE ASSISTED OUTPATIENT TREATMENT PLAN.

(2) (I) EXCEPT AS PROVIDED IN SUBPARAGRAPH (II) OF THIS PARAGRAPH, WITHIN 5 DAYS AFTER RECEIVING AN APPLICATION UNDER PARAGRAPH (1) OF THIS SUBSECTION, THE COURT SHALL HOLD A HEARING ON THE PROPOSED MATERIAL CHANGE.

(II) A COURT IS NOT REQUIRED TO HOLD A HEARING ON A PROPOSED MATERIAL CHANGE IF THE INDIVIDUAL SUBJECT TO AN ASSISTED OUTPATIENT TREATMENT ORDER NOTIFIES THE COURT IN WRITING THAT THE INDIVIDUAL AGREES TO THE PROPOSED MATERIAL CHANGE.

(C) IF A CHANGE TO AN ASSISTED OUTPATIENT TREATMENT PLAN IS NOT A MATERIAL CHANGE, THE PHYSICIAN MAY MAKE A CHANGE WITHOUT APPLYING TO THE COURT FOR APPROVAL.

10–936.

(A) WITHIN 30 DAYS BEFORE AN ASSISTED OUTPATIENT TREATMENT ORDER EXPIRES, THE APPLICANT MAY APPLY TO THE COURT FOR AN EXTENSION OF THE ORDER.

(B) IF THE APPLICANT APPLIES FOR AN EXTENSION UNDER SUBSECTION (A) OF THIS SECTION, THE COURT SHALL HOLD A HEARING ON THE APPLICATION IN ACCORDANCE WITH § 10–932 OF THIS PART.

(C) (1) AFTER A HEARING IS HELD, IF THE COURT FINDS BY CLEAR AND CONVINCING EVIDENCE THAT THE CRITERIA LISTED IN § 10–933(A)(1) OF THIS PART ARE MET, THE COURT MAY EXTEND THE ORDER FOR A PERIOD NOT TO EXCEED 1 YEAR.

(2) AFTER A HEARING IS HELD, IF THE COURT DOES NOT FIND BY CLEAR AND CONVINCING EVIDENCE THAT THE CRITERIA LISTED IN § 10–933(A)(1) OF THIS PART ARE MET, THE COURT SHALL DENY THE APPLICATION FOR AN EXTENSION.

(D) IF THE COURT HAS NOT MADE A DETERMINATION REGARDING AN APPLICATION FOR AN EXTENSION BEFORE THE ORDER EXPIRES, THE ORDER SHALL REMAIN IN EFFECT UNTIL THE COURT MAKES THE DETERMINATION.

10–937.

(A) AN INDIVIDUAL'S SUBSTANTIAL FAILURE TO COMPLY WITH AN ASSISTED OUTPATIENT TREATMENT ORDER MAY CONSTITUTE PRESUMPTIVE REASONS FOR THE TREATING PHYSICIAN TO PETITION FOR AN EMERGENCY EVALUATION IN ACCORDANCE WITH § 10–622 OF THIS TITLE.

(B) AN INDIVIDUAL'S FAILURE TO COMPLY WITH AN ASSISTED OUTPATIENT TREATMENT ORDER MAY NOT BE GROUNDS FOR:

(1) A FINDING OF CONTEMPT OF COURT; OR

(2) INVOLUNTARY ADMISSION TO A STATE FACILITY UNDER SUBTITLE 6 OF THIS TITLE.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2014.