

Committee on Children, Families, and Elder Affairs

CS/CS/SB 1262 — Mental Health and Substance Abuse

by Appropriations Committee; Children, Families, and Elder Affairs Committee; and Senators Burgess, Rouson, and Perry

The bill makes several changes to procedures surrounding voluntary and involuntary examinations of individuals under the Baker and Marchman Acts. The bill prohibits restrictions on visitors, phone calls, and written correspondence for Baker Act patients unless certain qualified medical professionals document specific conditions are met. The bill requires law enforcement officers to search certain electronic databases for Emergency Contact Information (ECI) of Baker and Marchman Act patients being transported to a receiving facility. The bill also expands the entities who can access the ECI to specifically include receiving facilities, hospitals, and licensed detoxification and addictions receiving facilities.

Under the bill, patients subject to an involuntary Baker Act examination who do not meet the criteria for a petition for involuntary services must be released at the end of 72 hours, regardless of whether the examination period ends on a weekend or holiday, as long as certain discharge criteria are met. The bill also permits psychiatric advanced practice registered nurses practicing under the protocol of a psychiatrist in a nationally accredited community mental health center to conduct discharge examinations for patients held under an involuntary Baker Act.

Additionally, the bill makes it a first degree misdemeanor for a person to knowingly and willfully:

- Furnish false information for the purpose of obtaining emergency or other involuntary admission for any person;
- Cause, or conspire with another to cause, any emergency or other involuntary mental health procedure for the person under false pretenses; or
- Cause, or conspire with another to cause, without lawful justification, any person to be denied their rights under the Baker Act statutes.

The bill requires receiving facilities to offer voluntary Baker and Marchman Act patients the option to authorize the release of clinical information to certain individuals known to the patient within 24 hours of admission.

The bill clarifies that telehealth may be used when discharging patients under an involuntary Baker Act examination, and directs facilities receiving transportation reports detailing the circumstances of a Baker Act to share such reports with the Department of Children and Families (DCF) for use in analyzing annual Baker Act data.

The bill also makes several changes to the Commission on Mental Health and Substance Abuse (Commission), including:

- Authorizing the Commission to conduct meetings in person at locations throughout the state or via teleconference or other electronic means;
- Authorizing members to receive per diem and reimbursement and travel expenses;

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- Authorizing the Commission to access information and records necessary to carry out its duties, including exempt and confidential information, provided that the Commission does not disclose such exempt or confidential information; and
- Modifying the due date for the Commission's interim report from September 1, 2022 to January 1, 2023.

The DCF anticipates that collecting and processing Baker Act transportation reports will cost approximately \$90,000 for the first year of reporting.

If approved by the Governor, these provisions take effect July 1, 2022.

Vote: Senate 38-0; House 117-0