

1-1 By: Huffman, Hinojosa S.B. No. 362
1-2 (In the Senate - Filed January 16, 2019; February 7, 2019,
1-3 read first time and referred to Committee on State Affairs;
1-4 April 8, 2019, reported adversely, with favorable Committee
1-5 Substitute by the following vote: Yeas 9, Nays 0; April 8, 2019,
1-6 sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8				
1-9	Huffman	X		
1-10	Hughes	X		
1-11	Birdwell	X		
1-12	Creighton	X		
1-13	Fallon	X		
1-14	Hall	X		
1-15	Lucio	X		
1-16	Nelson	X		
1-17	Zaffirini	X		

1-18 COMMITTEE SUBSTITUTE FOR S.B. No. 362 By: Huffman

1-19 A BILL TO BE ENTITLED
1-20 AN ACT

1-21 relating to court-ordered mental health services.
1-22 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
1-23 SECTION 1. Section 137.008(a), Civil Practice and Remedies
1-24 Code, is amended to read as follows:
1-25 (a) A physician or other health care provider may subject
1-26 the principal to mental health treatment in a manner contrary to the
1-27 principal's wishes as expressed in a declaration for mental health
1-28 treatment only:
1-29 (1) if the principal is under an order for temporary or
1-30 extended mental health services under Section 574.034, 574.0345,
1-31 ~~[or] 574.035~~, or 574.0355, Health and Safety Code, and treatment is
1-32 authorized in compliance with Section 574.106, Health and Safety
1-33 Code; or
1-34 (2) in case of an emergency when the principal's
1-35 instructions have not been effective in reducing the severity of
1-36 the behavior that has caused the emergency.
1-37 SECTION 2. Article 16.22, Code of Criminal Procedure, is
1-38 amended by amending Subsection (c) and adding Subsections (c-1),
1-39 (c-2), and (c-3) to read as follows:
1-40 (c) After the trial court receives the applicable expert's
1-41 written assessment relating to the defendant under Subsection (b-1)
1-42 or elects to use the results of a previous determination as
1-43 described by Subsection (a)(2), the trial court may, as applicable:
1-44 (1) resume criminal proceedings against the
1-45 defendant, including any appropriate proceedings related to the
1-46 defendant's release on personal bond under Article 17.032 if the
1-47 defendant is being held in custody;
1-48 (2) resume or initiate competency proceedings, if
1-49 required, as provided by Chapter 46B ~~[or other proceedings~~
1-50 ~~affecting the defendant's receipt of appropriate court-ordered~~
1-51 ~~mental health or intellectual disability services, including~~
1-52 ~~proceedings related to the defendant's receipt of outpatient mental~~
1-53 ~~health services under Section 574.034, Health and Safety Code];~~
1-54 (3) consider the written assessment during the
1-55 punishment phase after a conviction of the offense for which the
1-56 defendant was arrested, as part of a presentence investigation
1-57 report, or in connection with the impositions of conditions
1-58 following placement on community supervision, including deferred
1-59 adjudication community supervision; ~~[or]~~
1-60 (4) refer the defendant to an appropriate specialty

2-1 court established or operated under Subtitle K, Title 2, Government
2-2 Code; or

2-3 (5) if the offense charged does not involve an act,
2-4 attempt, or threat of serious bodily injury to another person,
2-5 release the defendant on bail while charges against the defendant
2-6 remain pending and enter an order transferring the defendant to the
2-7 appropriate court for court-ordered outpatient mental health
2-8 services under Chapter 574, Health and Safety Code.

2-9 (c-1) If an order is entered under Subsection (c)(5), an
2-10 attorney representing the state shall file the application for
2-11 court-ordered outpatient services under Chapter 574, Health and
2-12 Safety Code.

2-13 (c-2) On the motion of an attorney representing the state,
2-14 if the court determines the defendant has complied with appropriate
2-15 court-ordered outpatient treatment, the court may dismiss the
2-16 charges pending against the defendant and discharge the defendant.

2-17 (c-3) On the motion of an attorney representing the state,
2-18 if the court determines the defendant has failed to comply with
2-19 appropriate court-ordered outpatient treatment, the court shall
2-20 proceed under this chapter or with the trial of the offense.

2-21 SECTION 3. Section 55.13(d), Family Code, is amended to
2-22 read as follows:

2-23 (d) After conducting a hearing on an application under this
2-24 section, the juvenile court shall:

2-25 (1) if the criteria under Section 574.034 or 574.0345,
2-26 Health and Safety Code, are satisfied, order temporary mental
2-27 health services for the child; or

2-28 (2) if the criteria under Section 574.035 or 574.0355,
2-29 Health and Safety Code, are satisfied, order extended mental health
2-30 services for the child.

2-31 SECTION 4. Section 55.38(b), Family Code, is amended to
2-32 read as follows:

2-33 (b) After conducting a hearing under Subsection (a)(2), the
2-34 juvenile court shall:

2-35 (1) if the criteria under Section 574.034 or 574.0345,
2-36 Health and Safety Code, are satisfied, order temporary mental
2-37 health services; or

2-38 (2) if the criteria under Section 574.035 or 574.0355,
2-39 Health and Safety Code, are satisfied, order extended mental health
2-40 services.

2-41 SECTION 5. Section 55.57(b), Family Code, is amended to
2-42 read as follows:

2-43 (b) After conducting a hearing under Subsection (a)(2), the
2-44 juvenile court shall:

2-45 (1) if the criteria under Section 574.034 or 574.0345,
2-46 Health and Safety Code, are satisfied, order temporary mental
2-47 health services; or

2-48 (2) if the criteria under Section 574.035 or 574.0355,
2-49 Health and Safety Code, are satisfied, order extended mental health
2-50 services.

2-51 SECTION 6. Subchapter B, Chapter 22, Government Code, is
2-52 amended by adding Section 22.1106 to read as follows:

2-53 Sec. 22.1106. JUDICIAL INSTRUCTION RELATED TO
2-54 COURT-ORDERED MENTAL HEALTH SERVICES. The court of criminal appeals
2-55 shall ensure that judicial training related to the problems of
2-56 court-ordered mental health services is provided at least once
2-57 every year. The instruction may be provided at the annual Judicial
2-58 Education Conference.

2-59 SECTION 7. Section 501.057(b), Government Code, is amended
2-60 to read as follows:

2-61 (b) Not later than the 30th day before the initial parole
2-62 eligibility date of an inmate identified as mentally ill, an
2-63 institutional division psychiatrist shall examine the inmate. The
2-64 psychiatrist shall file a sworn application for court-ordered
2-65 temporary mental health services under Chapter 574, Health and
2-66 Safety Code, if the psychiatrist determines that the inmate is
2-67 mentally ill and as a result of the illness the inmate meets at
2-68 least one of the criteria listed in Section 574.034 or 574.0345,
2-69 Health and Safety Code.

3-1 SECTION 8. Section 574.002(c), Health and Safety Code, is
 3-2 amended to read as follows:

3-3 (c) Any application must contain the following information
 3-4 according to the applicant's information and belief:

3-5 (1) the proposed patient's name and address;
 3-6 (2) the proposed patient's county of residence in this
 3-7 state;

3-8 (3) a statement that the proposed patient is a person
 3-9 with mental illness and meets the criteria in Section 574.034,
 3-10 574.0345, ~~or~~ 574.035, or 574.0355 for court-ordered mental health
 3-11 services; and

3-12 (4) whether the proposed patient is charged with a
 3-13 criminal offense.

3-14 SECTION 9. Section 574.031, Health and Safety Code, is
 3-15 amended by adding Subsections (d-1) and (d-2) to read as follows:

3-16 (d-1) In a hearing for temporary inpatient or outpatient
 3-17 mental health services under Section 574.034 or 574.0345, the
 3-18 proposed patient and the proposed patient's attorney, by a written
 3-19 document filed with the court, may waive the right to cross-examine
 3-20 witnesses, and, if that right is waived, the court may admit, as
 3-21 evidence, the certificates of medical examination for mental
 3-22 illness. The certificates admitted under this subsection
 3-23 constitute competent medical or psychiatric testimony, and the
 3-24 court may make its findings solely from the certificates. If the
 3-25 proposed patient and the proposed patient's attorney do not waive
 3-26 in writing the right to cross-examine witnesses, the court shall
 3-27 proceed to hear testimony. The testimony must include competent
 3-28 medical or psychiatric testimony.

3-29 (d-2) In a hearing for extended inpatient or outpatient
 3-30 mental health services under Section 574.035 or 574.0355, the court
 3-31 may not make its findings solely from the certificates of medical
 3-32 examination for mental illness but shall hear testimony. The court
 3-33 may not enter an order for extended mental health services unless
 3-34 appropriate findings are made and are supported by testimony taken
 3-35 at the hearing. The testimony must include competent medical or
 3-36 psychiatric testimony.

3-37 SECTION 10. The heading to Section 574.034, Health and
 3-38 Safety Code, is amended to read as follows:

3-39 Sec. 574.034. ORDER FOR TEMPORARY INPATIENT MENTAL HEALTH
 3-40 SERVICES.

3-41 SECTION 11. Sections 574.034(g) and (h), Health and Safety
 3-42 Code, are amended to read as follows:

3-43 (g) An order for temporary inpatient ~~[or outpatient]~~ mental
 3-44 health services shall state that treatment is authorized for not
 3-45 longer than 45 days, except that the order may specify a period not
 3-46 to exceed 90 days if the judge finds that the longer period is
 3-47 necessary.

3-48 (h) A judge may not issue an order for temporary inpatient
 3-49 ~~[or outpatient]~~ mental health services for a proposed patient who
 3-50 is charged with a criminal offense that involves an act, attempt, or
 3-51 threat of serious bodily injury to another person.

3-52 SECTION 12. Subchapter C, Chapter 574, Health and Safety
 3-53 Code, is amended by adding Section 574.0345 to read as follows:

3-54 Sec. 574.0345. ORDER FOR TEMPORARY OUTPATIENT MENTAL HEALTH
 3-55 SERVICES. (a) The judge may order a proposed patient to receive
 3-56 court-ordered extended outpatient mental health services only if:

3-57 (1) the judge finds that appropriate mental health
 3-58 services are available to the proposed patient; and

3-59 (2) the judge or jury finds, from clear and convincing
 3-60 evidence, that:

3-61 (A) the proposed patient is a person with severe
 3-62 and persistent mental illness;

3-63 (B) as a result of the mental illness, the
 3-64 proposed patient will, if not treated, experience deterioration of
 3-65 the ability to function independently to the extent that the
 3-66 proposed patient will be unable to live safely in the community
 3-67 without court-ordered outpatient mental health services;

3-68 (C) outpatient mental health services are needed
 3-69 to prevent a relapse that would likely result in serious harm to the

4-1 proposed patient or others; and

4-2 (D) the proposed patient has an inability to
 4-3 participate in outpatient treatment services effectively and
 4-4 voluntarily, demonstrated by:

4-5 (i) any of the proposed patient's actions
 4-6 occurring within the two-year period that immediately precedes the
 4-7 hearing; or

4-8 (ii) specific characteristics of the
 4-9 proposed patient's clinical condition that significantly impair
 4-10 the proposed patient's ability to make a rational and informed
 4-11 decision whether to submit to voluntary outpatient treatment.

4-12 (b) To be clear and convincing under Subsection (a)(2), the
 4-13 evidence must include expert testimony and evidence of a recent
 4-14 overt act or a continuing pattern of behavior that tends to confirm:

4-15 (1) the deterioration of ability to function
 4-16 independently to the extent that the proposed patient will be
 4-17 unable to live safely in the community;

4-18 (2) the need for outpatient mental health services to
 4-19 prevent a relapse that would likely result in serious harm to the
 4-20 proposed patient or others; and

4-21 (3) the proposed patient's inability to participate in
 4-22 outpatient treatment services effectively and voluntarily.

4-23 (c) An order for temporary outpatient mental health
 4-24 services shall state that treatment is authorized for not longer
 4-25 than 45 days, except that the order may specify a period not to
 4-26 exceed 90 days if the judge finds that the longer period is
 4-27 necessary.

4-28 (d) A judge may not issue an order for temporary outpatient
 4-29 mental health services for a proposed patient who is charged with a
 4-30 criminal offense that involves an act, attempt, or threat of
 4-31 serious bodily injury to another person.

4-32 SECTION 13. The heading to Section 574.035, Health and
 4-33 Safety Code, is amended to read as follows:

4-34 Sec. 574.035. ORDER FOR EXTENDED INPATIENT MENTAL HEALTH
 4-35 SERVICES.

4-36 SECTION 14. Sections 574.035(d), (h), and (i), Health and
 4-37 Safety Code, are amended to read as follows:

4-38 (d) The jury or judge is not required to make the finding
 4-39 under Subsection (a)(4) [~~or (b)(2)(F)~~] if the proposed patient has
 4-40 already been subject to an order for extended mental health
 4-41 services.

4-42 (h) An order for extended inpatient [~~or outpatient~~] mental
 4-43 health services shall state that treatment is authorized for not
 4-44 longer than 12 months. The order may not specify a shorter period.

4-45 (i) A judge may not issue an order for extended inpatient
 4-46 [~~or outpatient~~] mental health services for a proposed patient who
 4-47 is charged with a criminal offense that involves an act, attempt, or
 4-48 threat of serious bodily injury to another person.

4-49 SECTION 15. Subchapter C, Chapter 574, Health and Safety
 4-50 Code, is amended by adding Section 574.0355 to read as follows:

4-51 Sec. 574.0355. ORDER FOR EXTENDED OUTPATIENT MENTAL HEALTH
 4-52 SERVICES. (a) The judge may order a proposed patient to receive
 4-53 court-ordered temporary outpatient mental health services only if:

4-54 (1) the judge finds that appropriate mental health
 4-55 services are available to the proposed patient; and

4-56 (2) the judge or jury finds, from clear and convincing
 4-57 evidence, that:

4-58 (A) the proposed patient is a person with severe
 4-59 and persistent mental illness;

4-60 (B) as a result of the mental illness, the
 4-61 proposed patient will, if not treated, experience deterioration of
 4-62 the ability to function independently to the extent that the
 4-63 proposed patient will be unable to live safely in the community
 4-64 without court-ordered outpatient mental health services;

4-65 (C) outpatient mental health services are needed
 4-66 to prevent a relapse that would likely result in serious harm to the
 4-67 proposed patient or others;

4-68 (D) the proposed patient has an inability to
 4-69 participate in outpatient treatment services effectively and

5-1 voluntarily, demonstrated by:
5-2 (i) any of the proposed patient's actions
5-3 occurring within the two-year period that immediately precedes the
5-4 hearing; or
5-5 (ii) specific characteristics of the
5-6 proposed patient's clinical condition that significantly impair
5-7 the proposed patient's ability to make a rational and informed
5-8 decision whether to submit to voluntary outpatient treatment;
5-9 (E) the proposed patient's condition is expected
5-10 to continue for more than 90 days; and
5-11 (F) the proposed patient has received:
5-12 (i) court-ordered inpatient mental health
5-13 services under this subtitle or under Subchapter D or E, Chapter
5-14 46B, Code of Criminal Procedure, for a total of at least 60 days
5-15 during the preceding 12 months; or
5-16 (ii) court-ordered outpatient mental
5-17 health services under this subtitle or under Subchapter D or E,
5-18 Chapter 46B, Code of Criminal Procedure, during the preceding 60
5-19 days.
5-20 (b) The jury or judge is not required to make the finding
5-21 under Subsection (a)(2)(F) if the proposed patient has already been
5-22 subject to an order for extended mental health services.
5-23 (c) To be clear and convincing under Subsection (a)(2), the
5-24 evidence must include expert testimony and evidence of a recent
5-25 overt act or a continuing pattern of behavior that tends to confirm:
5-26 (1) the deterioration of ability to function
5-27 independently to the extent that the proposed patient will be
5-28 unable to live safely in the community;
5-29 (2) the need for outpatient mental health services to
5-30 prevent a relapse that would likely result in serious harm to the
5-31 proposed patient or others; and
5-32 (3) the proposed patient's inability to participate in
5-33 outpatient treatment services effectively and voluntarily.
5-34 (d) An order for extended outpatient mental health services
5-35 must state that treatment is authorized for not longer than 12
5-36 months. The order may not specify a shorter period.
5-37 (e) A judge may not issue an order for extended outpatient
5-38 mental health services for a proposed patient who is charged with a
5-39 criminal offense that involves an act, attempt, or threat of
5-40 serious bodily injury to another person.
5-41 SECTION 16. Section 574.036(e), Health and Safety Code, is
5-42 amended to read as follows:
5-43 (e) The judge may enter an order:
5-44 (1) committing the person to a mental health facility
5-45 for inpatient care if the trier of fact finds that the person meets
5-46 the commitment criteria prescribed by Section 574.034(a) or
5-47 574.035(a); or
5-48 (2) committing the person to outpatient mental health
5-49 services if the trier of fact finds that the person meets the
5-50 commitment criteria prescribed by Section 574.0345(a) [574.034(b)]
5-51 or 574.0355(a) [574.035(b)].
5-52 SECTION 17. Sections 574.037(b-2) and (c-2), Health and
5-53 Safety Code, are amended to read as follows:
5-54 (b-2) The person responsible for the services shall submit
5-55 the program to the court before the hearing under Section 574.034,
5-56 574.0345, ~~or~~ 574.035, or 574.0355 or before the court modifies an
5-57 order under Section 574.061, as appropriate.
5-58 (c-2) A court may [~~on its own motion,~~] set a status
5-59 conference in accordance with Section 574.0665 [~~with the person~~
5-60 responsible for the services, the patient, and the patient's
5-61 attorney].
5-62 SECTION 18. Sections 574.061(a), (b), (c), (d), (e), and
5-63 (h), Health and Safety Code, are amended to read as follows:
5-64 (a) The facility administrator of a facility to which a
5-65 patient is committed for inpatient mental health services, not
5-66 later than the 30th day after the date the patient is committed to
5-67 the facility, shall assess the appropriateness of transferring the
5-68 patient to outpatient mental health services. The facility
5-69 administrator may recommend that [~~may request~~] the court that

6-1 entered the commitment order ~~[to]~~ modify the order to require the
 6-2 patient to participate in outpatient mental health services.

6-3 (b) A ~~[The]~~ facility administrator's recommendation under
 6-4 Subsection (a) ~~[request]~~ must explain in detail the reason for the
 6-5 recommendation ~~[request]~~. The recommendation ~~[request]~~ must be
 6-6 accompanied by a supporting certificate of medical examination for
 6-7 mental illness signed by a physician who examined the patient
 6-8 during the seven days preceding the recommendation ~~[request]~~.

6-9 (c) The patient shall be given notice of a facility
 6-10 administrator's recommendation under Subsection (a) ~~[the request]~~.

6-11 (d) On request of the patient or any other interested
 6-12 person, the court shall hold a hearing on a facility
 6-13 administrator's recommendation that the court modify the
 6-14 commitment order ~~[the request]~~. The court shall appoint an
 6-15 attorney to represent the patient at the hearing and shall consult
 6-16 with the local mental health authority before issuing a decision.
 6-17 The hearing shall be held before the court without a jury and as
 6-18 prescribed by Section 574.031. The patient shall be represented by
 6-19 an attorney and receive proper notice.

6-20 (e) If a hearing is not requested, the court may make a ~~[the]~~
 6-21 decision regarding a facility administrator's recommendation based
 6-22 on:

- 6-23 (1) ~~[solely from]~~ the recommendation;
- 6-24 (2) ~~[request and]~~ the supporting certificate; and
- 6-25 (3) consultation with the local mental health
 6-26 authority concerning available resources to treat the patient.

6-27 (h) A modified order may ~~[not]~~ extend beyond the term of the
 6-28 original order, but may not exceed the term of the original order by
 6-29 60 days.

6-30 SECTION 19. Subchapter E, Chapter 574, Health and Safety
 6-31 Code, is amended by adding Section 574.0665 to read as follows:

6-32 Sec. 574.0665. STATUS CONFERENCE. A court on its own motion
 6-33 may set a status conference with the patient, the patient's
 6-34 attorney, and the person designated to be responsible for the
 6-35 patient's court-ordered outpatient services under Section 574.037.

6-36 SECTION 20. Section 574.069(e), Health and Safety Code, is
 6-37 amended to read as follows:

6-38 (e) The court shall dismiss the request if the court finds
 6-39 from clear and convincing evidence that the patient continues to
 6-40 meet the criteria for court-ordered extended mental health services
 6-41 prescribed by Section 574.035 or 574.0355.

6-42 SECTION 21. Section 574.081, Health and Safety Code, is
 6-43 amended by amending Subsections (b) and (c) and adding Subsections
 6-44 (a-1), (a-2), and (c-1) to read as follows:

6-45 (a-1) In this section, "state hospital" means a mental
 6-46 health facility that:

- 6-47 (1) can provide 24-hour residential and psychiatric
 6-48 services; and
- 6-49 (2) is a facility operated by the department.

6-50 (a-2) Subject to available resources, Subsection (a)
 6-51 applies to a patient scheduled to be furloughed or discharged from a
 6-52 state hospital or a private mental health facility if the patient's
 6-53 treatment at the state hospital or private mental health facility
 6-54 occurs under a contract and private psychiatric bed statement of
 6-55 work between the state hospital or private mental health facility
 6-56 and the commission.

6-57 (b) The physician shall prepare the plan as prescribed by
 6-58 commission ~~[department]~~ rules and shall consult the patient and the
 6-59 local mental health authority in the area in which the patient will
 6-60 reside before preparing the plan. The local mental health
 6-61 authority shall be informed of and must participate in planning the
 6-62 discharge of a patient ~~[is not required to participate in preparing~~
 6-63 a plan for a patient furloughed or discharged from a private mental
 6-64 health facility].

6-65 (c) The plan must address the patient's mental health and
 6-66 physical needs, including, if appropriate:

- 6-67 (1) the need for outpatient mental health services
 6-68 following furlough or discharge; and
- 6-69 (2) the need for sufficient psychoactive medication on

7-1 furlough or discharge to last until the patient can see a
7-2 physician[~~, and~~
7-3 ~~[(2) the person or entity that is responsible for~~
7-4 ~~providing and paying for the medication]].~~

7-5 (c-1) Except as otherwise specified in the plan and subject
7-6 to available funding provided to the commission and paid to a
7-7 private mental health facility for this purpose, a private mental
7-8 health facility that is contracting with a local mental health
7-9 authority is responsible for providing or paying for psychoactive
7-10 medication and any other medication prescribed to the patient to
7-11 counteract adverse side effects of psychoactive medication on
7-12 furlough or discharge sufficient to last until the patient can see a
7-13 physician. The commission shall adopt rules to determine the
7-14 quantity and manner of providing psychoactive medication, as
7-15 required by this section. The executive commissioner may not adopt
7-16 rules requiring a mental health facility to provide or pay for
7-17 psychoactive medication for more than seven days after furlough or
7-18 discharge.

7-19 SECTION 22. Sections 574.104(a), (b), and (d), Health and
7-20 Safety Code, are amended to read as follows:

7-21 (a) A physician who is treating a patient may, on behalf of
7-22 the state, file an application in a probate court or a court with
7-23 probate jurisdiction for an order to authorize the administration
7-24 of a psychoactive medication regardless of the patient's refusal
7-25 if:

7-26 (1) the physician believes that the patient lacks the
7-27 capacity to make a decision regarding the administration of the
7-28 psychoactive medication;

7-29 (2) the physician determines that the medication is
7-30 the proper course of treatment for the patient;

7-31 (3) the patient is under an order for inpatient mental
7-32 health services under this chapter or other law or an application
7-33 for court-ordered mental health services under Section 574.034,
7-34 574.0345, ~~[or]~~ 574.035, or 574.0355 has been filed for the patient;
7-35 and

7-36 (4) the patient, verbally or by other indication,
7-37 refuses to take the medication voluntarily.

7-38 (b) An application filed under this section must state:

7-39 (1) that the physician believes that the patient lacks
7-40 the capacity to make a decision regarding administration of the
7-41 psychoactive medication and the reasons for that belief;

7-42 (2) each medication the physician wants the court to
7-43 compel the patient to take;

7-44 (3) whether an application for court-ordered mental
7-45 health services under Section 574.034, 574.0345, ~~[or]~~ 574.035, or
7-46 574.0355 has been filed;

7-47 (4) whether a court order for inpatient mental health
7-48 services for the patient has been issued and, if so, under what
7-49 authority it was issued;

7-50 (5) the physician's diagnosis of the patient; and

7-51 (6) the proposed method for administering the
7-52 medication and, if the method is not customary, an explanation
7-53 justifying the departure from the customary methods.

7-54 (d) The hearing on the application may be held on the date of
7-55 a hearing on an application for court-ordered mental health
7-56 services under Section 574.034, 574.0345, ~~[or]~~ 574.035, or 574.0355
7-57 but shall be held not later than 30 days after the filing of the
7-58 application for the order to authorize psychoactive medication. If
7-59 the hearing is not held on the same day as the application for
7-60 court-ordered mental health services under those sections [~~Section~~
7-61 ~~574.034 or 574.035~~] and the patient is transferred to a mental
7-62 health facility in another county, the court may transfer the
7-63 application for an order to authorize psychoactive medication to
7-64 the county where the patient has been transferred.

7-65 SECTION 23. Section 574.151, Health and Safety Code, is
7-66 amended to read as follows:

7-67 Sec. 574.151. APPLICABILITY. This subchapter applies only
7-68 to a person for whom a motion for court-ordered mental health
7-69 services is filed under Section 574.001, for whom a final order on

8-1 that motion has not been entered under Section 574.034, 574.0345,
8-2 [~~or~~] 574.035, or 574.0355 and who requests voluntary admission to
8-3 an inpatient mental health facility:

8-4 (1) while the person is receiving at that facility
8-5 involuntary inpatient services under Subchapter B or under Chapter
8-6 573; or

8-7 (2) before the 31st day after the date the person was
8-8 released from that facility under Section 573.023 or 574.028.

8-9 SECTION 24. Section 152.00164(b), Human Resources Code, is
8-10 amended to read as follows:

8-11 (b) Before a child who is identified as having a mental
8-12 illness is discharged from the custody of the juvenile board or
8-13 local juvenile probation department under Section 152.00163(b),
8-14 the juvenile board or local juvenile probation department shall
8-15 arrange for a psychiatrist to examine the child. The juvenile board
8-16 or local juvenile probation department shall refer a child
8-17 requiring outpatient psychiatric treatment to the appropriate
8-18 mental health authority. For a child requiring inpatient
8-19 psychiatric treatment, the juvenile board or local juvenile
8-20 probation department shall file a sworn application for
8-21 court-ordered mental health services, as provided in Subchapter C,
8-22 Chapter 574, Health and Safety Code, if:

8-23 (1) the child is not receiving court-ordered mental
8-24 health services; and

8-25 (2) the psychiatrist who examined the child determines
8-26 that the child has a mental illness and the child meets at least one
8-27 of the criteria listed in Section 574.034 or 574.035, Health and
8-28 Safety Code.

8-29 SECTION 25. Section 244.012(b), Human Resources Code, is
8-30 amended to read as follows:

8-31 (b) Before a child who is identified as mentally ill is
8-32 discharged from the department's custody under Section 244.011(b),
8-33 a department psychiatrist shall examine the child. The department
8-34 shall refer a child requiring outpatient psychiatric treatment to
8-35 the appropriate mental health authority. For a child requiring
8-36 inpatient psychiatric treatment, the department shall file a sworn
8-37 application for court-ordered mental health services, as provided
8-38 in Subchapter C, Chapter 574, Health and Safety Code, if:

8-39 (1) the child is not receiving court-ordered mental
8-40 health services; and

8-41 (2) the psychiatrist who examined the child determines
8-42 that the child is mentally ill and the child meets at least one of
8-43 the criteria listed in Section 574.034 or 574.035, Health and
8-44 Safety Code.

8-45 SECTION 26. The Supreme Court shall:

8-46 (1) adopt rules to streamline and promote the
8-47 efficiency of court processes under Chapter 573, Health and Safety
8-48 Code; and

8-49 (2) adopt rules or implement other measures to create
8-50 consistency and increase access to the judicial branch for mental
8-51 health issues.

8-52 SECTION 27. The following sections of the Health and Safety
8-53 Code are repealed:

8-54 (1) Sections 574.034(b), (e), and (f); and

8-55 (2) Sections 574.035(b), (f), and (g).

8-56 SECTION 28. The Health and Human Services Commission is
8-57 required to implement a provision of this Act only if the
8-58 legislature appropriates money specifically for that purpose. If
8-59 the legislature does not appropriate money specifically for that
8-60 purpose, the Health and Human Services Commission may, but is not
8-61 required to, implement a provision of this Act using other
8-62 appropriations available for that purpose.

8-63 SECTION 29. The changes in law made by this Act to Chapter
8-64 574, Health and Safety Code, apply to a commitment proceeding under
8-65 that chapter that occurs on or after the effective date of this Act,
8-66 regardless of whether conduct of a proposed patient being evaluated
8-67 for that purpose occurred before, on, or after the effective date of
8-68 this Act.

8-69 SECTION 30. The changes in law made by this Act to Article

9-1 16.22, Code of Criminal Procedure, and Chapter 574, Health and
9-2 Safety Code, apply to a proceeding for court-ordered mental health
9-3 services that occurs on or after the effective date of this Act,
9-4 regardless of when an offense with which the defendant is charged
9-5 was committed.

9-6 SECTION 31. This Act takes effect September 1, 2019.

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