**BILL ANALYSIS**

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| Senate Research Center | C.S.S.B. 944 |
| 88R19814 MPF-F | By: Kolkhorst |
|  | Health & Human Services |
|  | 3/23/2023 |
|  | Committee Report (Substituted) |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Currently, state supported living center (SSLC) residents may be admitted through voluntary admission, in which the resident has the capacity to consent and wishes to live in an SSLC, or involuntary admission. Involuntary admissions include court-mandated forensic commitment or circumstances where the resident's legal guardian consents for the individual to live at an SSLC.

In the admissions process, local intellectual and developmental disability authorities (LIDDAs) must evaluate a patient's eligibility and, if applicable, secure a guardian's approval. LIDDAs then submit an application packet to a given SSLC on behalf of the individual. If this is satisfied, the applicant is matched with an available bed that is specific to their needs.

Section 593.052, Title 7, Health and Safety Code, delineates four criteria that a LIDDA must use to determine a patient's eligibility for admission to an SSLC. The resident must be diagnosed with an intellectual disability. Documented evidence must demonstrate that the potential resident is at risk of hurting themselves or others. Alternatively, an individual must be unable to or is currently not caring for their basic needs. To be admitted, the resident must not be able to be served in a less restrictive community-based setting. Finally, the residential facilities can provide appropriate treatment and care for the resident's needs.

Persons currently admitted with the consent of a legally authorized representative can only be admitted through the involuntary admission requirements, which often require guardians to obtain a civil commitment order. To obtain this, Section 593.050, Title 7, Health and Safety Code, stipulates that the party that filed the application must prove "beyond a reasonable doubt" that the admission of a potential resident to an SSLC is appropriate. Thus, in their application, parents must meet a high standard of proof, demonstrating that placement into an SSLC is undoubtedly the best treatment option for their child.

LIDDAs have increasingly stalled or refused to refer potential residents, even when the admission criteria is met. When this occurs, a patient is left without the care that they desperately need.

S.B. 944 allows a parent or guardian to petition the court to issue a commitment order. This would allow parents to secure admission to an SSLC by fulfilling the high standard of proof required to receive such an order.

Committee Substitute Changes

C.S.S.B. 944 amends references in Chapter 593 of Health and Safety Code that state an individual cannot be admitted to an SSLC without an interdisciplinary team (IDT) recommendation. This is revised to include the exception outlined in Section 6 of the bill.

The substitute adds an exception to the requirement that an individual must receive an IDT recommendation to be admitted to an SSLC. In this change, an IDT recommendation is not mandatory if a commitment order is secured.

In commitment order proceedings, C.S.S.B. 944 requires that evidence is presented that indicates the patient is at risk of hurting themselves or others. Alternatively, evidence must be shown that an individual is unable to or is not currently caring for their needs.

C.S.S.B. 944 amends current law relating to the commitment order for individuals with intellectual disabilities who are committed to state supported living centers.

**RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends the heading to Section 593.013, Health and Safety Code, to read as follows:

Sec. 593.013. INTERDISCIPLINARY TEAM RECOMMENDATION.

SECTION 2. Amends Section 593.013(a), Health and Safety Code, to create an exception under Section 593.0511.

SECTION 3. Amends Section 593.041(d), Health and Safety Code, to create an exception under Section 593.0511.

SECTION 4. Amends Section 593.050(d), Health and Safety Code, to require that the results of the determination of an intellectual disability and the current interdisciplinary team report and recommendations, except in the case of a long-term placement under Section 593.0511, be presented in evidence.

SECTION 5. Amends Subchapter C, Chapter 593, Health and Safety Code, by adding Section 593.0511, as follows:

Sec. 593.0511. LONG-TERM PLACEMENT WITHOUT INTERDISCIPLINARY TEAM RECOMMENDATION. Authorizes a court to commit a proposed patient to long-term placement in a residential care facility without an interdisciplinary team recommendation under Section 593.013 (Requirement of Interdisciplinary Team Recommendation) if the court determines beyond a reasonable doubt that the placement is appropriate.

SECTION 6. Amends Section 593.052(a), Health and Safety Code, as follows:

(a) Prohibits a proposed resident from being committed to a residential care facility unless certain criteria are met, including if a petition to the court to issue a commitment order by the guardian of the proposed resident or, if the proposed resident is a minor, the parent of the proposed resident or the current interdisciplinary team report and recommendations, if applicable, show that because of the proposed resident's intellectual disability, the proposed resident meets certain criteria. Deletes existing text prohibiting a proposed resident from being committed to a residential care facility unless certain criteria are met, including if evidence is presented showing that because of the resident's intellectual disability, the proposed resident meets certain criteria.

SECTION 7. Effective date: September 1, 2023.