

MAINE STATE LEGISLATURE

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Date: 06-11-07

(Filing No. S- 266)

HEALTH AND HUMAN SERVICES

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STATE OF MAINE

SENATE

123RD LEGISLATURE

FIRST REGULAR SESSION

COMMITTEE AMENDMENT "A" to S.P. 669, L.D. 1855, Bill, "An Act To Clarify Involuntary Admissions for Psychiatric Hospitalizations"

Amend the bill by striking out all of section 9 (page 4, lines 25 to 38 in L.D.)

Amend the bill in section 11 in §3864 in subsection 5 in paragraph C in the 3rd, 4th and 5th lines (page 11, lines 16 to 18 in L.D.) by striking out the following: "A hearing must be held on every application, even if the examiners' report indicates that the person is not mentally ill or does not pose a likelihood of serious harm."

Amend the bill in section 11 in §3864 in subsection 8 in the 5th line (page 12, line 38 in L.D.) by striking out the following: "30" and inserting the following: '30 21'

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

SUMMARY

This amendment:

- 1. Removes the language concerning a certification outside the hospital emergency room permitting a physician's assistant, certified psychiatric clinical nurse specialist or nurse practitioner, as well as a licensed physician or licensed clinical psychologist, to make the certification;
- 2. Removes the requirement of a hearing in every involuntary commitment proceeding; and
- 3. Reduces the notice period for continued involuntary hospitalization from 30 days to 21 days.

FISCAL NOTE REQUIRED
(See attached)

COMMITTEE AMENDMENT



123rd MAINE LEGISLATURE

LD 1855

LR 1058(02)

An Act To Clarify Involuntary Admissions for Psychiatric Hospitalizations

Fiscal Note for Bill as Amended by Committee Amendment "A "

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - General Fund

Fiscal Detail and Notes

The additional costs associated with changes to involuntary admission statutes can be absorbed by the Department of Health and Human Services and the Judicial Department utilizing existing budgeted resources.