

# INVOLUNTARY COMMITMENT OF THOSE WITH SUBSTANCE USE DISORDER: SUMMARY OF STATE LAWS

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# INVOLUNTARY COMMITMENT OF THOSE WITH SUBSTANCE USE DISORDER: SUMMARY OF STATE LAWS

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## SUMMARY

Involuntary commitment, or sometimes referred to as civil commitment, is a legal process by which a judge may order an individual with symptoms of a serious mental illness to be confined to treatment for a period of time against the individual's wishes.<sup>1</sup> Originally reserved only for the treatment of individuals with severe mental illness, many states have expanded their involuntary commitment laws to apply to individuals with severe substance use disorder (SUD). Laws that allow for the involuntary commitment of individuals with severe SUDs vary widely among jurisdictions.

The Legislative Analysis and Public Policy Association (LAPPA) has undertaken an extensive research project to determine the laws that address the involuntary commitment of those with SUDs in the 50 states, District of Columbia, and U.S. territories and collected the results of that research into this document. Starting on page 12, LAPPA provides state-by-state tables describing aspects of each law currently in effect, as of December 2024, including:

- Statutory citations to relevant laws;
- Substantive amendments to the cited laws, if any;
- Whether the laws allow for the involuntary commitment of an individual with a primary diagnosis of SUD;
- The court of relevant jurisdiction for involuntary commitment proceedings;
- The type of treatment a judge may order;
- Who may file a petition for involuntary commitment;
- The time between the filing of the petition and the hearing;
- The elements of a petition for involuntary commitment;
- The legal standard for a hearing on involuntary commitment;
- The maximum length of an initial involuntary commitment order;
- The renewal process for an involuntary commitment order;
- The penalty for submitting a false petition for involuntary commitment;
- Additional provisions of note; and
- Recently proposed, but not enacted, legislation.

LAPPA designed this document to: (1) provide a singular resource for each jurisdiction's laws; (2) allow for a comparison of these laws between jurisdictions; and (3) identify and highlight interesting provisions. The primary conclusions from the research and analysis are set forth below, accompanied by several maps depicting many of the results in graphic form.<sup>2</sup>

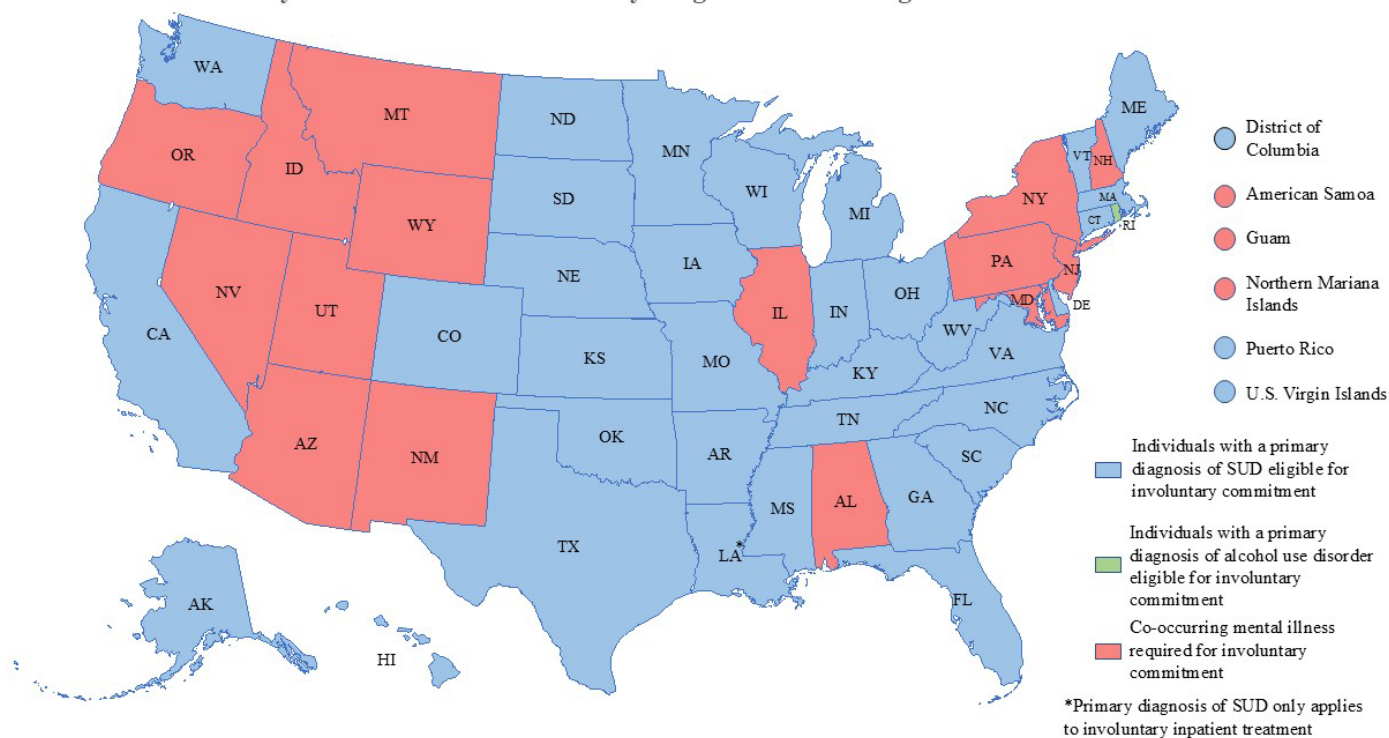
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<sup>1</sup> See Alan A. Cavaola and David Dolan, *Considerations in Civil Commitment of Individuals with Substance Use Disorders*, 37 SUBSTANCE USE & ADDICTION J. 181 (2015), <http://dx.doi.org/10.1080/08897077.2015.1029207>.

<sup>2</sup> The goal of this research document is to provide accurate and complete information that is free of omissions or errors. If you believe that this document contains misinformation, omissions, or errors, please email LAPPA at [info@thelappa.org](mailto:info@thelappa.org).

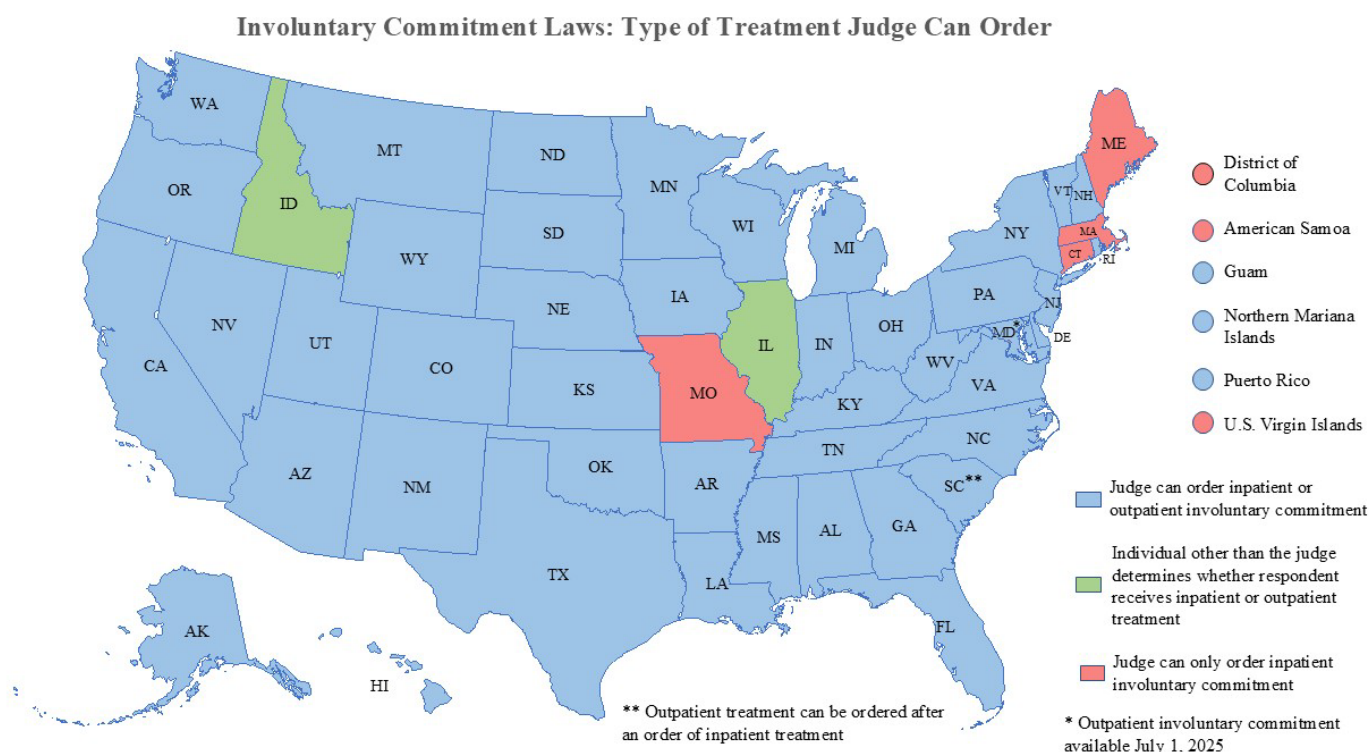
- All 50 states, the District of Columbia, and U.S. territories have an involuntary commitment law. In 34 states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands, the involuntary commitment law can be used to involuntarily commit an individual with a primary diagnosis of SUD. In Louisiana, a primary diagnosis of SUD is only applicable to inpatient involuntary commitment. In Rhode Island, the involuntary commitment law can be used only to involuntarily commit an individual with alcohol use disorder and cannot be used to involuntarily commit individuals with a primary diagnosis of substance use disorder involving substances other than alcohol. In the remaining 15 states, American Samoa, Guam, and the Northern Mariana Islands, individuals with a primary diagnosis of SUD cannot be involuntarily committed. This does not mean that individuals with SUD are prohibited from being involuntarily committed in those jurisdictions but rather that the individual must have a co-occurring mental illness in order to satisfy the criteria for involuntary commitment.

**Involuntary Commitment Laws: Primary Diagnosis of SUD Eligible for Commitment**



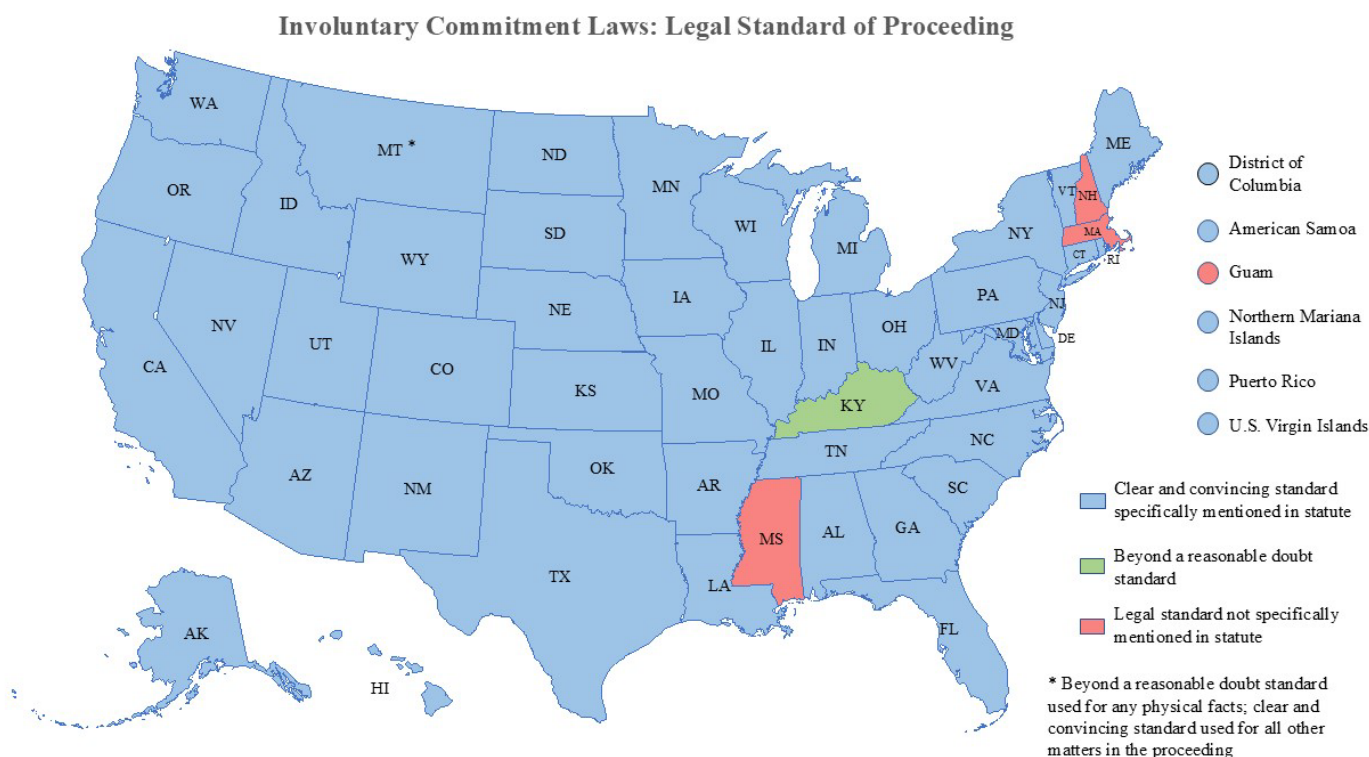


- The type of treatment that a judge can order in an involuntary commitment proceeding varies by jurisdiction. In 43 states, Guam, Northern Mariana Islands, and Puerto Rico, a judge in an involuntary commitment proceeding can order an individual to participate in inpatient or outpatient treatment. In South Carolina, the judge can order outpatient treatment after an order of inpatient treatment. In Idaho, whether an individual is to participate in inpatient or outpatient treatment is determined by a “dispositioner” within the state department of health and welfare after a judge issues an order that involuntary treatment is necessary. In Illinois, the petitioner must submit a petition for involuntary admission for either inpatient treatment or outpatient treatment. In five states, the District of Columbia, American Samoa, and the U.S. Virgin Islands, a judge in an involuntary commitment proceeding can only order an individual to participate in inpatient treatment. In Connecticut and Tennessee, the inpatient facility can refer the individual to outpatient treatment after the expiration of the judge’s inpatient order.



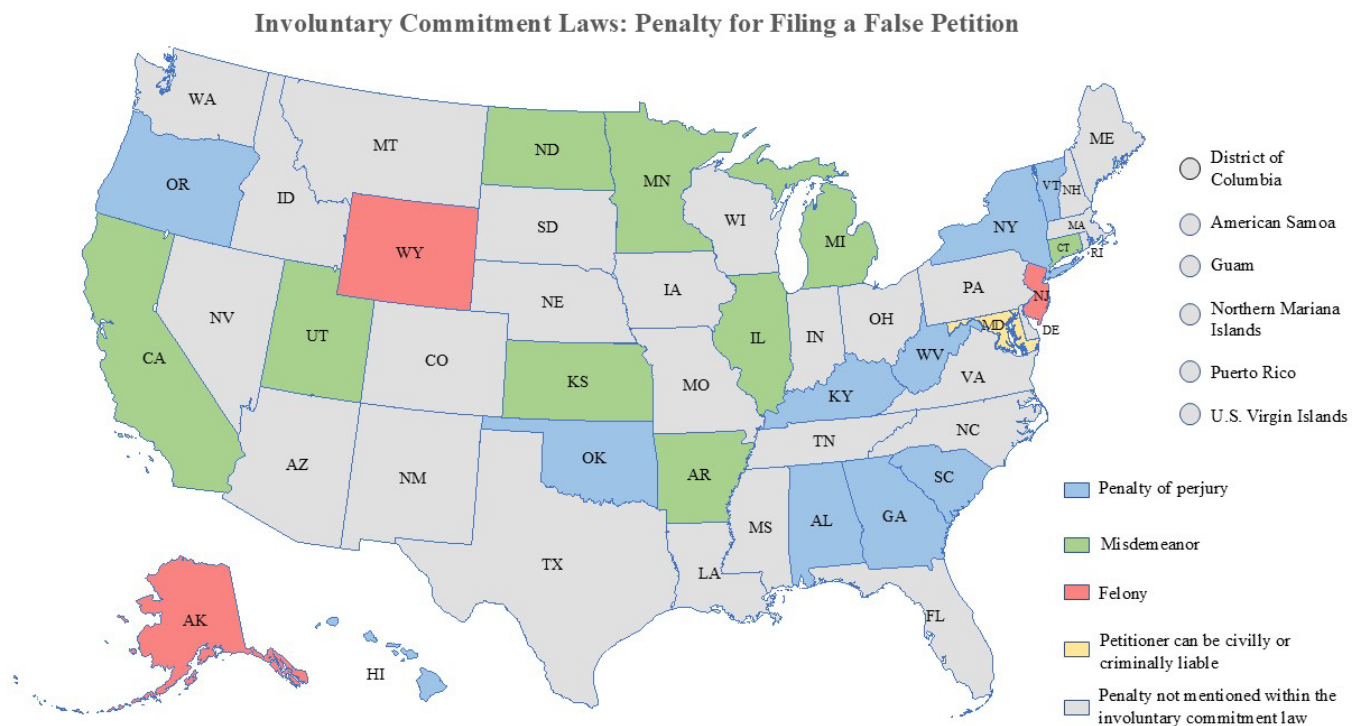


- In the 1979 U.S. Supreme Court Case of *Addington v. Texas* (441 U.S. 418), the Court ruled that “clear and convincing evidence” is the required legal standard for involuntary commitment cases. The clear and convincing evidence standard is a higher burden of proof than the “preponderance of the evidence” standard used in civil proceedings but not as high as the “beyond a reasonable doubt” standard used in criminal proceedings.<sup>3</sup> The Supreme Court determined that the clear and convincing evidence standard would properly balance the rights of the respondent against the rights of the state to protect its citizens. Forty-five states, the District of Columbia, American Samoa, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands specifically mention the clear and convincing evidence standard within their involuntary commitment laws. Kentucky uses the higher standard of beyond a reasonable doubt for involuntary commitment proceedings. Montana uses the beyond a reasonable doubt standard for physical facts and the clear and convincing standard for all other matters within the involuntary commitment proceeding. Three states and Guam do not specify within their involuntary commitment statutes what the legal standard is for those proceedings, but based on the *Addington* ruling, it is assumed that they use the standard of clear and convincing evidence or higher.



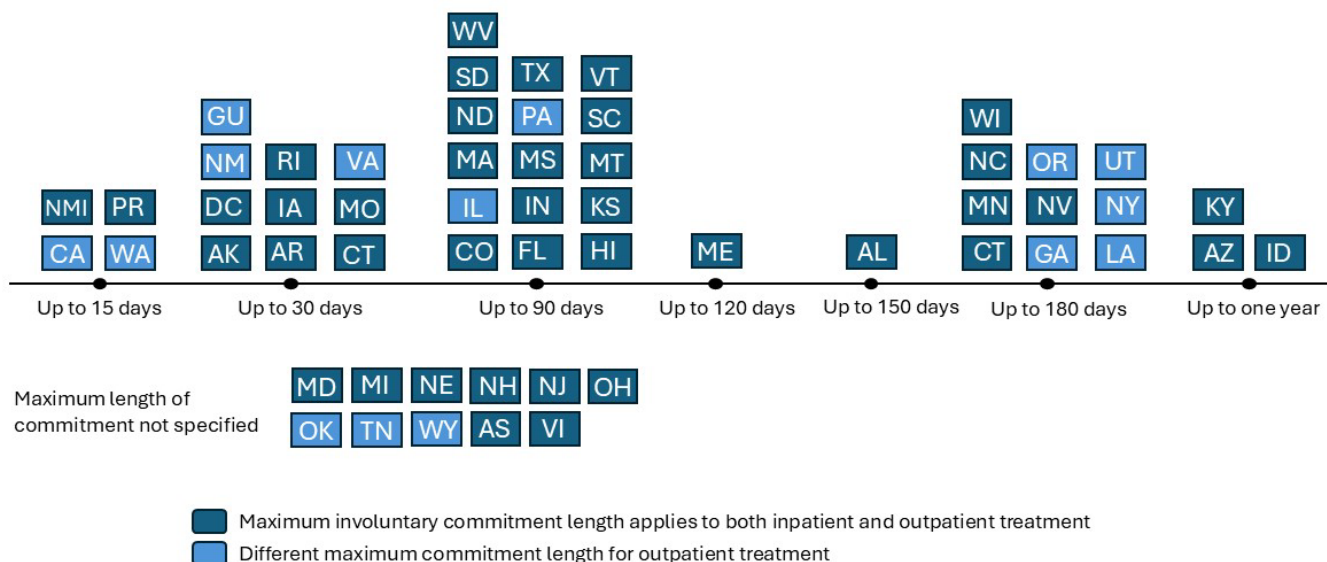
<sup>3</sup> Matthew T. Walton and Martin T. Hall, *Involuntary Civil Commitment for Substance Use Disorder: Legal Precedents and Ethical Considerations for Social Workers*, 32 SOC. WORK IN PUB. HEALTH 382, 387 (2017), <https://doi.org/10.1080/19371918.2017.1327388>.

- Twenty-four states specifically delineate within their involuntary commitment laws a penalty for filing a false petition for involuntary commitment. Of the 24 states, nine states consider the filing of a false petition to violate the penalty of perjury, nine states categorize the filing of a false petition as a misdemeanor, and three states categorize the filing of a false petition as a felony. Maryland states that an individual who files a false petition can be held civilly or criminally liable. The remaining jurisdictions do not specify a penalty for filing a false petition within their involuntary commitment laws, but another area of state law may be an applicable penalty for the filing of a false petition.



- The maximum length of an initial involuntary commitment period varies greatly by jurisdiction, ranging from up to 15 days to one year. The most commonly implemented maximum length is 90 days. Nine states, American Samoa, and the U.S. Virgin Islands do not specify the maximum length of commitment in their involuntary commitment statutes. Fifteen states and Guam have different maximum commitment lengths for inpatient and outpatient treatment. For those jurisdictions, the maximum length of involuntary commitment for inpatient treatment is represented in the chart below; the maximum length of commitment for outpatient treatment in these jurisdictions is longer than those for inpatient treatment. In the District of Columbia, the involuntary commitment statute only specifies the maximum commitment length for individuals committed due to alcohol use disorder.

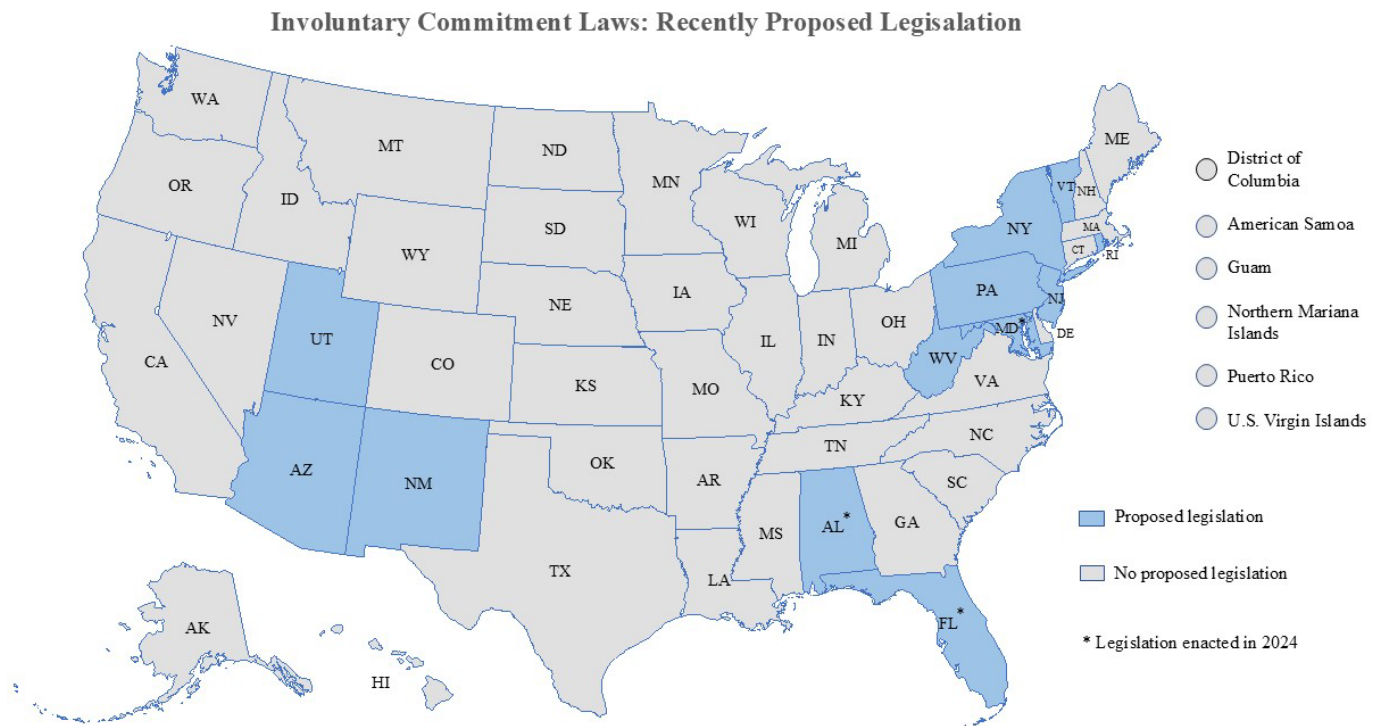
### Involuntary Commitment Laws: Maximum Length of Involuntary Commitment



- ### Involuntary Commitment Laws: Renewal of an Initial Commitment Order



- During 2023 and 2024, 12 states introduced legislation related to involuntary commitment. In three of these states (Alabama, Florida, and Maryland), at least one piece of proposed legislation became law. In four states (Arizona, New Jersey, Pennsylvania, and Rhode Island), the legislature introduced legislation to allow for the involuntary commitment of individuals with a primary diagnosis of SUD.





<b><u>ALABAMA</u></b>	
<b>Statute(s)</b>	ALA. CODE § 22-52-1.1 <i>et seq.</i> (West 2024)
<b>Relevant substantive amendment(s)</b>	January 1, 2025 - Law amended to cover individuals with a mental illness with a co-occurring substance use disorder.
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; individuals with a substance use disorder must have a co-occurring mental illness in order to be eligible for involuntary commitment.
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Outpatient or inpatient treatment
<b>Who may petition?</b>	Anyone may file a petition.
<b>Time between the filing of the petition and the hearing</b>	The final hearing must be held within 30 days of the date that the respondent was served with a copy of the petition seeking to commit the respondent.
<b>Elements of the petition</b>	The petition must be in writing, executed under oath, and must include the following information: (1) the name and address, if known, of the respondent; (2) the name and address, if known, of the respondent's spouse, legal counsel, or next-of-kin; (3) that the petitioner has reason to believe the respondent is mentally ill or is mentally ill with a secondary diagnosis of co-occurring substance use disorder; (4) that the beliefs of the petitioner are based on specific behavior, acts, attempts, or threats, which shall be specified and described in detail; (5) the names and addresses of other individuals with knowledge of the respondent's mental illness or mental illness with a secondary diagnosis of co-occurring substance use disorder who may be called as witnesses. The petition may be accompanied by any other relevant information.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	150 days
<b>Renewal of commitment order</b>	A petition for renewal of an inpatient or outpatient commitment order may be filed by the director of a state mental health facility or his designee at least 30 days prior to the expiration of the current commitment order. The judge of probate shall conduct a hearing, within 30 days after the date of petition, to consider the petition for renewal of the commitment order. Any order renewing an order for commitment to treatment must not exceed a period of one year. In cases where outpatient treatment has been renewed, a revocation petition seeking inpatient treatment may not be filed and a new petition seeking inpatient treatment will be required.
<b>Penalty for false petition</b>	Penalty of perjury



<b><u>ALABAMA</u></b>	
<b>Additional provision(s) of note</b>	<p>The probate judge must appoint a guardian ad litem to represent and to protect the rights of the respondent and shall determine if the respondent has the funds with which to employ an attorney to represent the respondent and if the respondent has the mental ability to secure the services of an attorney. If the respondent does not have funds with which to employ an attorney or does not have the mental ability to secure the services of an attorney, the probate judge must appoint an attorney, who may be the same person as the guardian ad litem, to represent the respondent. No statement made or act done by the respondent in the presence of the probate judge prior to the respondent obtaining the services of an attorney, by appointment or otherwise, can be considered by the probate judge in determining whether the respondent should be committed.</p> <p>Prior to the order, no limitations should be placed upon the respondent's liberty nor treatment imposed upon the respondent unless such limitations are necessary to prevent the respondent from doing substantial and immediate harm to himself or to others or to prevent the respondent from leaving the jurisdiction of the court. No respondent should be placed in a jail or other facility for persons accused of or convicted of committing crimes.</p> <p>All hearings shall be heard by the probate judge without a jury and shall be open to the public unless the respondent or his attorney requests in writing that the hearings be closed to the public.</p> <p>In any commitment proceeding, costs will be paid by the state general fund upon order of the probate judge, except, that if the petition is denied and the petitioner is not indigent and is not a law enforcement officer or other public official acting within the line and scope of his or her duties, all costs may be taxed against the petitioner, or if the petition is granted and the person sought to be committed is not indigent, the probate judge may order all costs paid from the estate of the person committed.</p>
<b>Recently proposed legislation</b>	None, other than legislation enacted in 2024.

<b><u>ALASKA</u></b>	
<b>Statute(s)</b>	ALASKA STAT. §§ 47.37.190 through 47.37.270 (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes, for someone who is “an alcoholic or drug abuser,” which ALASKA STAT. §§ 47.37.270 (West 2024) defines as “a person who demonstrates increased tolerance to alcohol or drugs, who suffers from withdrawal when alcohol or drugs are not available, whose habitual lack of self-control concerning the use of alcohol or drugs causes significant hazard to the person’s health, and who continues to use alcohol or drugs despite the adverse consequences.”
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	A spouse, guardian, relative, certifying physician, physician’s assistant, advanced practice registered nurse, or an administrator in charge of a public treatment facility.
<b>Time between the filing of the petition and the hearing</b>	After the petition is filed, the court shall fix a date for a hearing no later than 10 days after the date the petition was filed.
<b>Elements of the petition</b>	Must allege that the person is an alcoholic or drug abuser who: (1) has threatened, attempted to inflict, or inflicted physical harm on another and that unless committed is likely to inflict physical harm on another; or (2) is incapacitated by alcohol or drugs. The petition must be accompanied by a certificate of a licensed physician, physician assistant, or advanced practice registered nurse who has examined the person within two days before submission of the petition, unless the person whose commitment is sought has refused to submit to a medical examination, in which case the fact of refusal must be alleged in the petition. The certificate must set out the physician’s, physician assistant’s, or advanced practice registered nurse’s findings of the examination in support of the allegations of the petition.
<b>Legal standard for hearing</b>	“Clearly established”
<b>Length of commitment</b>	30 days

<b><u>ALASKA</u></b>	
<b>Renewal of commitment order</b>	At any time during a person's 30-day commitment, the director of an approved public facility or approved private facility may file with the court a petition for a 180-day commitment of that person. The petition must include all material required under § 47.37.190(a) and must allege that the person continues to be an alcoholic or drug abuser who is incapacitated by alcohol or drugs, or who continues to be at risk of serious physical harm or illness. Upon the filing of a petition for recommitment, the court must fix a date for hearing no later than 10 days after the date the petition was filed.
<b>Penalty for false petition</b>	A person who knowingly initiates an involuntary commitment petition under without having good cause to believe that the other person is an alcoholic or drug abuser and is incapacitated or at risk of serious physical harm or illness if not treated is guilty of a class C felony.
<b>Additional provision(s) of note</b>	<p>A person who is the subject of a petition does not have the right to a jury.</p> <p>A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment.</p>
<b>Recently proposed legislation</b>	None

<b><u>ARIZONA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• ARIZ. REV. STAT. ANN. § 36-501 (West 2024) (definitions)</li> <li>• ARIZ. REV. STAT. ANN. § 36-533, <i>et seq.</i> (West 2024) (court-ordered treatment)</li> <li>• ARIZ. REV. STAT. ANN. § 36-545.05 (West 2024) (costs)</li> </ul>
<b>Relevant substantive amendment(s)</b>	October 30, 2023 amendment to § 36-533 adds an exception to the two physician evaluation requirement for individuals who live in counties with less than 500,000 people.
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the individual must have a “mental disorder” in addition to “drug abuse” and “alcoholism” in order to be eligible for involuntary commitment.
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	<ul style="list-style-type: none"> <li>• Outpatient treatment</li> <li>• Combined inpatient and outpatient treatment</li> <li>• Inpatient treatment</li> </ul>
<b>Who may petition?</b>	Not specified
<b>Time between the filing of the petition and the hearing</b>	The court shall order the hearing to be held within six business days after the petition is filed, except that, on good cause shown, the court may continue the hearing at the request of either party. The hearing may be continued for a maximum of thirty days at the request of the proposed patient. The hearing may be continued for a maximum of three business days at the request of the petitioner.
<b>Elements of the petition</b>	<p>A petition for court ordered treatment must allege: (1) that the patient is in need of a period of treatment because the patient, as a result of mental disorder, is a danger to self or to others or has a persistent or acute disability or a grave disability; (2) the treatment alternatives that are appropriate or available; (3) that the patient is unwilling to accept or incapable of accepting treatment voluntarily.</p> <p>The petition shall be accompanied by the affidavits of the two physicians who participated in the evaluation and by the affidavit of the applicant for the evaluation, if any. In a county with a population of less than 500,000 people, the petition may be accompanied by the affidavits of one physician and either one physician assistant who is experienced in psychiatric matters or one psychiatric and mental health nurse practitioner who conducted an independent evaluation and by the affidavit of the applicant for the evaluation, if any.</p>

<b><u>ARIZONA</u></b>	
<b>Elements of the petition (continued)</b>	<p>The affidavits of the physicians or other health professionals shall describe in detail the behavior that indicates that the person, as a result of mental disorder, is a danger to self or to others or has a persistent or acute disability or a grave disability and shall be based on the physician's or other health professional's observations of the patient and study of information about the patient. A summary of the facts that support the allegations of the petition shall be included. The affidavit shall also include any of the results of the physical examination of the patient if relevant to the patient's psychiatric condition.</p> <p>The petition shall request the court to issue an order requiring the person to undergo a period of treatment. If the petition requests the court to determine that the patient is chronically resistant to treatment, the petition must allege the facts that support the request. The petition must also include: (1) a statement that in the opinion of the petitioner the person does or does not require guardianship or conservatorship, or both, and the reasons on which the statement is based; (2) a request that the court order an independent investigation and report for the court if in the opinion of the petitioner the person does require guardianship or conservatorship, or both; (3) a statement that in the opinion of the petitioner the person does or does not require temporary guardianship or conservatorship, or both, and the reasons on which the statement is based; (4) a request that the court appoint a temporary guardian or conservator, or both, if in the opinion of the petitioner the person does require temporary guardianship or conservatorship, or both; (5) if the person has an existing guardian, a statement identifying the existing guardian and a request that the court consider imposing additional duties on the existing guardian.</p> <p>If the patient is not detained in an evaluation agency when the petition is filed, the petition must contain a statement of any facts and circumstances that lead the petitioner to believe that the proposed patient may be safely transported to the evaluation agency by an authorized transporter, if available in the jurisdiction, without the assistance of a peace officer.</p>
<b>Legal standard for hearing</b>	Clear and convincing evidence

<b><u>ARIZONA</u></b>	
<b>Length of commitment</b>	<p>The maximum periods of inpatient treatment that a court may order are as follows:</p> <ul style="list-style-type: none"> <li>• 90 days for a person found to be a danger to self.</li> <li>• 180 days for a person found to be a danger to others.</li> <li>• 180 days for a person found to have a persistent or acute disability.</li> <li>• 365 days for a person found to have a grave disability.</li> </ul> <p>State law does not specify a maximum length of commitment for outpatient treatment.</p>
<b>Renewal of commitment order</b>	<p>If the medical director believes that continued court-ordered treatment is necessary or appropriate, no later than 30 days before the expiration of the court order for treatment, the medical director must file with the court an application for continued court-ordered treatment alleging the basis for the application and must file simultaneously with the application any psychiatric examination conducted.</p>
<b>Penalty for false petition</b>	<p>Not specified in statute</p>
<b>Additional provision(s) of note</b>	<p>At least 72 hours before the court conducts the hearing on the petition for court-ordered treatment, a copy of the petition, affidavits in support of the petition and the notice of the hearing must be served on the patient, who must be informed of the purpose of the hearing and advised of the patient's right to consult counsel. If the patient has not employed counsel, counsel will be appointed by the court at least three days before the hearing.</p> <p>At all hearings conducted pursuant to §§ 36-539 and 36-543, a person has the right to have an analysis of the person's mental condition by an independent evaluator. If the person is unable to afford an evaluation, the court shall appoint an independent evaluator acceptable to the patient from a list of physicians, psychiatric and mental health nurse practitioners with sufficient relevant experience as determined by the medical director and psychologists who are willing to accept court-appointed evaluations.</p> <p>When a patient is given court ordered treatment, the patient must pay all or such portion of the established charged as the patient can afford. If the patient is indigent, not charges should be made against the patient.</p>
<b>Recently proposed legislation</b>	<p>Yes, see <a href="#">Pending State Legislation</a></p>



<b><u>ARKANSAS</u></b>	
<b>Statute(s)</b>	ARK. CODE ANN. § 20-64-801, <i>et seq.</i> (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes, for addiction to alcohol or other drugs.
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Residential, inpatient, or outpatient treatment
<b>Who may petition?</b>	Any person having any reason to believe that a person is homicidal, suicidal, or gravely disabled may file a petition with the clerk of the circuit court of the county in which the person alleged to be addicted to alcohol or other drugs resides or is detained.
<b>Time between the filing of the petition and the hearing</b>	In each case a hearing shall be set by the court within five days, excluding weekends and holidays, of the filing of a petition for involuntary commitment
<b>Elements of the petition</b>	The petition for involuntary commitment must: <ul style="list-style-type: none"> <li>• State whether the person is believed to be homicidal, suicidal, or gravely disabled;</li> <li>• Describe the conduct, signs, and symptoms upon which the petition is based;</li> <li>• Contain the names and addresses of any witnesses having knowledge relevant to the allegations contained in the petition; and</li> <li>• Contain a specific prayer for commitment of the person to an appropriate designated receiving facility or program, including residential inpatient or outpatient treatment for his or her addiction to alcohol or other drugs.</li> </ul>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	21 days
<b>Renewal of commitment order</b>	An additional 45-day commitment order may be requested if in the opinion of the treatment staff a person remains suicidal, homicidal, or gravely disabled.

<b><u>ARKANSAS</u></b>	
<b>Penalty for false petition</b>	Any person willfully making false statements on a petition for involuntary commitment, petition for involuntary commitment with request for continued detention, or petition for involuntary commitment with request for immediate detention, or who willfully makes false statements for the purpose of inducing another to bring such a petition, knowing the statements to be false, or with reckless disregard as to the truthfulness of the statements shall be guilty of a Class A misdemeanor.
<b>Additional provision(s) of note</b>	<p>The individual subject to the petition for involuntary commitment has the right to effective assistance of counsel, including the right to a court-appointed attorney.</p> <p>Every person ordered to involuntary treatment must have a treatment plan within 24 hours of detention.</p> <p>No person admitted voluntarily or committed involuntarily to a receiving facility or program will be considered incompetent per se by virtue of the admission or commitment.</p>
<b>Recently proposed legislation</b>	None

<b><u>CALIFORNIA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• CAL. WELF. &amp; INST. CODE § 5008 (West 2024) (definitions)</li> <li>• CAL. WELF. &amp; INST. CODE § 5200 through 5213 (West 2024) (court ordered evaluation for mentally disordered individuals)</li> <li>• CAL. WELF. &amp; INST. CODE § 5250 (West 2024) (initial commitment period)</li> <li>• CAL. WELF. &amp; INST. CODE § 5254 (West 2024) (certification review hearing)</li> <li>• CAL. WELF. &amp; INST. CODE § 5270.10 through 5270.70 (West 2024) (renewal)</li> <li>• CAL. WELF. &amp; INST. CODE § 5345 through 5349.1 (West 2024) (involuntary outpatient treatment)</li> </ul>
<b>Relevant substantive amendment(s)</b>	January 1, 2024- amended the definition of “gravely disabled” to include a severe substance use disorder or a co-occurring mental health disorder and a severe substance use disorder.
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes, severe substance use disorder is included in the definition of “gravely disabled.”
<b>Court of relevant jurisdiction</b>	Superior court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• Inpatient - Any individual may file a petition</li> <li>• Outpatient - Any person 18 years of age or older with whom the person who is the subject of the petition resides; the parent, spouse, sibling, or child 18 years of age or older of the person who is the subject of the petition; the director of a public or private agency, treatment facility, charitable organization, or licensed residential care facility providing mental health services to the person who is the subject of the petition in whose institution the subject of the petition resides; the director of a hospital in which the person who is the subject of the petition is hospitalized; a licensed mental health treatment provider who is either supervising the treatment of, or treating for a mental illness, the person who is the subject of the petition; a peace officer, parole officer, or probation officer assigned to supervise the person who is the subject of the petition; or a judge of a superior court before whom the person who is the subject of the petition appears.</li> </ul>

<b><u>CALIFORNIA</u></b>	
<b>Time between the filing of the petition and the hearing</b>	<ul style="list-style-type: none"> <li>• Inpatient - A hearing is to be held within four days of the date on which the person is certified for a period of intensive treatment to determine whether or not probable cause exists to detain the person for intensive treatment.</li> <li>• Outpatient - No later than five days from the date the petition is received by the court, excluding Saturdays, Sundays, and holidays.</li> </ul>
<b>Elements of the petition</b>	<ul style="list-style-type: none"> <li>• Inpatient - Before filing the petition, there must be a pre-petition screening to determine whether there is probable cause to believe the allegations. The person or agency providing prepetition screening must conduct a reasonable investigation of the allegations and make a reasonable effort to personally interview the subject of the petition. The screening must also determine whether the person will agree voluntarily to receive crisis intervention services or an evaluation in his own home or in a facility designated by the county and approved by the State Department of Health Care Services. If the petition is filed, it shall be accompanied by a report containing the findings. The petition must state: <ul style="list-style-type: none"> <li>○ The name and address of the petitioner and his or her interest in the case;</li> <li>○ The name of the person alleged, as a result of mental disorder, to be a danger to others, or to himself, or to be gravely disabled, and, if known to the petitioner, the address, age, sex, marital status, and occupation of the person.</li> <li>○ The facts upon which the allegations of the petition are based;</li> <li>○ The name of every person known or believed by the petitioner to be legally responsible for the care, support, and maintenance of the person who is the subject of the petition; and</li> <li>○ Other information that the court may request.</li> </ul> </li> </ul>

<b><u>CALIFORNIA</u></b>	
<b>Elements of the Petition (continued)</b>	<ul style="list-style-type: none"> <li>Outpatient - The petition must state: (1) facts that support the petitioner's belief that the person who is the subject of the petition meets the criteria for assisted outpatient treatment; and (2) that the person who is the subject of the petition is present, or is reasonably believed to be present, within the county where the petition is filed. The petition must be accompanied by an affidavit of a licensed mental health treatment provider designated by the local mental health director who must state: (1) that he or she has personally examined the person who is the subject of the petition no more than 10 days prior to the submission of the petition, the facts and reasons why the person meets the criteria for assisted outpatient treatment, that she or she recommends assisted outpatient treatment and is willing and able to testify at the hearing on the petition; or (2) that, no more than 10 days prior to the filing of the petition, he or she has made appropriate attempts to elicit the cooperation of the person who is the subject of the petition, but has not been successful in persuading that person to submit an examination, but he or she has reason to believe that the person meets the criteria for assisted outpatient treatment and he or she is willing and able to examine the person and testify at the hearing.</li> </ul>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>Inpatient -14 days</li> <li>Outpatient - Six months</li> </ul>

<b><u>CALIFORNIA</u></b>	
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient - A person may be certified for an additional period of not more than 30 days of intensive treatment under the following condition: (1) the professional staff of the agency or facility treating the person has found that the person remains gravely disabled as a result of a mental disorder or impairment by chronic alcoholism; and (2) the person remains unwilling or unable to accept treatment voluntarily. The person must be released after the additional 30 days unless he or she: (1) agrees to receive further treatment voluntarily; (2) is the subject of a conservatorship petition; or (3) is the subject of a petition for post-certification treatment of a dangerous person. If, after 15 days of the 30-day period of intensive treatment pursuant to this article, but at least seven days before expiration of the 30 days, the professional staff of the agency or facility treating the person finds that the person remains gravely disabled as a result of a mental disorder or impairment by chronic alcoholism and the person remains unwilling or unable to accept treatment voluntarily, the professional person in charge of the facility providing intensive treatment to the person may file a petition in the superior court for the county in which the facility providing intensive treatment is located, seeking approval for up to an additional 30 days of intensive treatment.</li> <li>• Outpatient - If the director of the assisted outpatient treatment program determines that the condition of the patient requires further assisted outpatient treatment, the director shall apply to the court, prior to the expiration of the period of the initial assisted outpatient treatment order, for an order authorizing continued assisted outpatient treatment for a period not to exceed 180 days from the date of the order.</li> </ul>
<b>Penalty for false petition</b>	Any individual who seeks a petition for court-ordered evaluation knowing that the person for whom the petition is sought is not, as a result of mental disorder, a danger to himself, or to others, or gravely disabled is guilty of a misdemeanor, and may be held liable in civil damages by the person against whom the petition was sought.



<b><u>CALIFORNIA</u></b>	
<b>Additional provision(s) of note</b>	<p>The person who is the subject of the petition shall have the right to be represented by counsel at all stages of a proceeding commenced under this section. If the person so elects, the court shall immediately appoint the public defender or other attorney to assist the person in all stages of the proceedings. The person shall pay the cost of the legal services if able to do so.</p> <p>Counties that implement assisted outpatient treatment must in consultation with the State Department of Health Care Services, client and family advocacy organizations, and other stakeholders, develop a training and education program for purposes of improving the delivery of services to mentally ill individuals who are, or who are at risk of being, involuntarily committed under this part. This training shall be provided to mental health treatment providers contracting with participating counties and to other individuals, including, but not limited to, mental health professionals, law enforcement officials, and certification hearing officers involved in making treatment and involuntary commitment decisions. The training must include the following: (1) information relative to legal requirements for detaining a person for involuntary inpatient and outpatient treatment, including criteria to be considered with respect to determining if a person is considered to be gravely disabled; and (2) methods for ensuring that decisions regarding involuntary treatment, as provided for in this part, direct patients toward the most effective treatment. Training shall include an emphasis on each patient's right to provide informed consent to assistance.</p>
<b>Recently proposed legislation</b>	None

<b><u>COLORADO</u></b>	
<b>Statute(s)</b>	COLO. REV. STAT. ANN. § 27-81-112 (West 2024) (Involuntary commitment of a person with a substance use disorder)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	Outpatient or inpatient treatment
<b>Who may petition?</b>	A spouse or guardian, a relative, a physician, an advanced practice registered nurse, the administrator in charge of an approved treatment facility, a certified peace officer, or any other responsible person.
<b>Time between the filing of the petition and the hearing</b>	The court shall fix a date for a hearing no later than ten days, excluding weekends and holidays, after the date the petition was filed.
<b>Elements of the petition</b>	<p>The petition must allege that the person has a substance use disorder and has threatened or attempted to inflict or has inflicted physical harm on him or herself or on another and that unless committed, the person is likely to inflict physical harm on the him or herself or on another or that the person is incapacitated by substances.</p> <p>The petition must be accompanied by a certificate of a licensed physician who has examined the person within ten days before submission of the petition, unless the person whose commitment is sought has refused to submit to a medical examination, in which case the fact of refusal must be alleged in the petition, or an examination cannot be made of the person due to the person's condition. The certificate must set forth the physician's findings in support of the petition's allegations.</p>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days
<b>Renewal of commitment order</b>	At the end of the 90-day period, the treatment facility must automatically discharge the person unless the Behavioral Health Administration, before expiration of the 90-day period, obtains a court order for the person's recommitment for an additional 90-day period. Only two recommitment orders are permitted.
<b>Penalty for false petition</b>	Not specified by statute

<b><u>COLORADO</u></b>	
<b>Additional provision(s) of note</b>	<p>A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment.</p> <p>The individual whose commitment is sought has the right to be represented by counsel at every stage of any proceedings related to the person's commitment and to have counsel appointed by the court or provided by the court if the person wants the assistance of counsel and is unable to obtain counsel.</p>
<b>Recently proposed legislation</b>	None

<b><u>CONNECTICUT</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>CONN. GEN. STAT. ANN. § 17a-685 (West 2024) (application for involuntary commitment)</li> <li>CONN. GEN. STAT. ANN. § 17a-689 (West 2024) (false petitions)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	<p>Inpatient treatment</p> <p>The administrator of the treatment facility for inpatient treatment can refer the individual to outpatient treatment upon expiration of his or her inpatient treatment commitment period.</p>
<b>Who may petition?</b>	Any person, including the spouse, a relative or a conservator of a person sought to be committed, a physician or the administrator of a treatment facility.
<b>Time between the filing of the petition and the hearing</b>	The court must assign a time for a hearing not later than seven business days after the date the application was filed.
<b>Elements of the petition</b>	<p>The application must allege that the person is an alcohol-dependent person or a drug-dependent person who is dangerous to himself or herself or dangerous to others when he or she is an intoxicated person or who is gravely disabled. The application must contain a statement that the applicant has arranged for treatment in a treatment facility. A statement to that effect from such facility shall be attached to the application.</p> <p>At or before the hearing on the application, there must be filed with the court a certificate of a licensed physician who has examined the person within two days before submission of the application. The physician's certificate must set forth the physician's findings, including clinical observation or information, or the person's medical history, in support of the allegations of the application, and a finding of whether the person presently needs and is likely to benefit from treatment, and must include a recommendation as to the type and length of treatment and inpatient facilities available for such treatment.</p> <p>“Intoxicated person” means a person whose mental or physical functioning is substantially impaired as a result of the use of alcohol or drugs.</p>

<b><u>CONNECTICUT</u></b>	
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Between 30 to 180 days
<b>Renewal of commitment order</b>	Before expiration of the initial commitment period, the administrator of an inpatient or outpatient treatment facility may, on the advice of the medical officer of the facility, apply to recommitment the person for inpatient treatment. The recommitment order can be between 30 to 180 days. A recommitted person who not been discharged before the end of the recommitment period will be discharged automatically at the expiration of that period. When the recommitted person is discharged, the administrator of the treatment facility must, if advised to do so by the medical officer of the facility, refer the person to an outpatient treatment facility. A person referred to an outpatient treatment facility must remain in outpatient treatment for a period of 12 months unless discharged sooner by the administrator of the treatment facility on the advice of the medical officer.
<b>Penalty for false petition</b>	Any person who willfully and knowingly causes or attempts to cause any person not an alcohol-dependent person or not a drug-dependent person to be committed pursuant, or any person who knowingly makes a false statement of fact or belief in any petition, certificate or report required, or any person who willfully and knowingly reports falsely to any court, judge, prosecutor or law enforcement officer that any person is an alcohol-dependent person or a drug-dependent person, may be imprisoned not more than one year or fined not more than \$1,000 or both.
<b>Additional provision(s) of note</b>	<p>The respondent has a right to counsel, and if indigent, to have counsel appointed to represent him or her.</p> <p>All the expenses in connection with an application are to be paid by the applicant, unless the applicant is indigent, in which case such expenses will be paid by the state from funds appropriated to the Department of Mental Health and Addiction Services.</p>
<b>Recently proposed legislation</b>	None

<b><u>DELAWARE</u></b>	
<b>Statute(s)</b>	DEL. CODE ANN. tit. 16 §§ 2211 through 2223 (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; “person in need of treatment” is defined as an individual who engages in “substance abuse.” “Substance abuse” is defined as the chronic, habitual, regular, or recurrent use of alcohol, inhalants, or controlled substances. DEL. CODE ANN. tit. 16 § 2203 (West 2024)
<b>Court of relevant jurisdiction</b>	Superior court or family court
<b>Type of treatment judge can order</b>	Residential treatment or outpatient treatment
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• The initial petition request can be filed by anyone with knowledge that an individual may be a person in need of treatment. Following this initial petition, the person in need of treatment will be transported to a facility for evaluation and treatment as medically necessary for a period not to exceed two working days.</li> <li>• No more than two working days after the date a patient is admitted to a licensed treatment facility or program under a request for involuntary treatment, the administrator of the treatment facility, through the attorney general, will file a petition for involuntary commitment to a licensed treatment facility, supported by affidavit with the Court, unless the patient is discharged or admitted on a voluntary basis.</li> </ul>
<b>Time between the filing of the petition and the hearing</b>	No later than eight working days from the filing of the petition.
<b>Elements of the petition</b>	<ul style="list-style-type: none"> <li>• The initial petition must concisely provide the observations, circumstances and knowledge regarding the petitioner’s belief that a particular individual is in need of treatment. The request must also contain the written certificate of a physician stating that the physician has reviewed the request and examined the patient and concluded that in the physician's medical opinion the individual is a person in need of treatment and is either incapable of or unwilling to consent to treatment. If the individual is incapable of consenting to treatment, the certificate shall state with particularity the physician's findings regarding why the individual is incapable of providing voluntary informed consent to treatment.</li> </ul>



<b><u>DELAWARE</u></b>	
<b>Elements of the petition (continued)</b>	<ul style="list-style-type: none"> <li>The administrator's petition must state that, upon an evaluation by a physician, he or she reasonably and in good faith believes that the involuntary patient is a person in need of treatment who should be continued as a patient at the facility until the patient is determined no longer to be in need of treatment at the treatment facility or program. The petition shall also state that the involuntary patient has been advised of the patient's procedural and substantive rights under this chapter. A copy of supporting certificates by an examining physician shall be attached to the petition. The petition must indicate the facility's reasonable belief, based upon investigation, as to whether the involuntary patient is able to afford counsel and an independent expert witness.</li> </ul>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	30 days
<b>Renewal of commitment order</b>	If continued involuntary treatment is warranted beyond the 30 days, the court must hold hearings to determine the necessity for continued involuntary treatment at intervals of not more than six months.
<b>Penalty for false petition</b>	Any person that willingly causes or conspires with or assists another to cause the unwarranted involuntary confinement of any individual in a substance use disorder treatment facility will be punished by a fine not exceeding \$500 or imprisonment not exceeding one year, or both.
<b>Additional provision(s) of note</b>	<p>The refusal to undergo treatment does not in itself constitute evidence of lack of judgment as to the need for treatment.</p> <p>If the person in need of treatment is unable to afford counsel, then the court will appoint counsel to represent him or her.</p> <p>The person in need of treatment has the right to be examined by an independent, licensed professional in the area of substance abuse and treatment and to have such persons testify as a witness on the patient's behalf, such witness to be court-appointed if the involuntary patient cannot afford to retain such witness.</p> <p>Any party to the proceedings may appeal an order of discharge or involuntary treatment to the Supreme Court within 30 days of the entry of such order. The appeal shall not operate as a stay of the order of disposition unless the court or the Supreme Court so directs.</p>
<b>Recently proposed legislation</b>	None

<b><u>DISTRICT OF COLUMBIA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• D.C. CODE ANN. § 24-607 (West 2024) (Involuntary commitment- alcoholism)</li> <li>• D.C. CODE ANN. §§ 24-702 through 715 (West 2024) (Involuntary commitment- substance use)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes, for someone who is a “drug user” (defined as anyone who “uses any habit-forming narcotic drugs so as to endanger the public morals, health, safety, or welfare, or who is so far addicted to the use of such habit-forming narcotic drugs as to have lost the power of self-control with reference to his addiction”) or a “chronic alcoholic.”
<b>Court of relevant jurisdiction</b>	Superior court
<b>Type of treatment judge can order</b>	Inpatient treatment
<b>Who may petition?</b>	The DC mayor, if he or she has probable cause to believe that a DC resident is a drug user or chronic alcoholic, may petition for involuntary commitment through the corporation counsel. Whenever the Mayor files an order of examination, he or she must immediately appoint two qualified physicians, one of whom shall be a psychiatrist, to examine the said patient, and within five days after such appointment, each physician must file with the United States Attorney for the District of Columbia, a written report of such examination, which must include a statement of his or her conclusion as to whether the patient is a “drug user.” The United States Attorney for the District of Columbia must review the facts and circumstances of each case submitted to him or her and present by petition those in which he or she feels justification exists in the public interest to the Superior Court of the District of Columbia for determination and disposition or dismiss the patient from custody.
<b>Time between the filing of the petition and the hearing</b>	Within five days after the date on which the petition is filed with the court.
<b>Elements of the petition</b>	The petition must state that the person is a chronic alcoholic or drug user and is a continuing danger to the safety of him or herself or of others.
<b>Legal standard for hearing</b>	Clear and convincing evidence

<b><u>DISTRICT OF COLUMBIA</u></b>	
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• For alcohol - 30 days</li> <li>• For drugs - Not specified. The head of the hospital is required to submit written reports to the court within six months after the commitment, and for successive intervals of time, thereafter, stating the reasons why the patient has not been released.</li> </ul>
<b>Renewal of commitment order</b>	<p>For alcohol</p> <ul style="list-style-type: none"> <li>• 30 days for a second commitment within any 24-month period</li> <li>• 90 days for any third or subsequent commitment within any 24-month period</li> </ul> <p>For drugs - The court, upon petition of the patient after confinement for one year, must inquire into the refusal or failure of the head of the hospital to release him or her. If the court finds that the patient is no longer in need of care, treatment, guidance, or rehabilitation, or has received maximum benefits, it must order the patient released</p>
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>If any person subject to a commitment proceeding initiated does not have an attorney and cannot afford one, the Court must appoint one to represent him or her.</p> <p>The hearing is to be conducted without a jury unless, a jury is demanded by the patient or by the U.S. Attorney for the District of Columbia.</p> <p>For two years after his or her release, the patient must report to the mayor at such times and places as required, for a physical examination to determine whether the patient has again become a “drug user.” If the Mayor determines that the person is a drug user, then he or she can order the patient into an institution. Any failures to report to the mayor for an examination are reported to the U.S. Attorney for the District of Columbia and a statement of such failure is filed with the court. The court can issue an order for the patient to be confined for examination.</p> <p>In the event a patient elects to designate a hospital to which he or she wishes to be committed, he or she will be required to satisfy the court that such hospital has medical, rehabilitation, and security facilities comparable to the institutions designated by the mayor and, in addition, the patient will bear the cost of such hospitalization.</p> <p>A patient in any involuntary commitment proceedings is not to be deemed a criminal and the commitment of any such patient is not to be deemed a conviction.</p>

<b><u>DISTRICT OF COLUMBIA</u></b>	
<b>Recently proposed legislation</b>	None

<b><u>FLORIDA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>FLA. STAT. ANN. § 397.675 (West 2024) (Criteria for involuntary admissions)</li> <li>FLA. STAT. ANN. § 397.68111, <i>et seq.</i> (West 2024) (involuntary admission procedures)</li> </ul>
<b>Relevant substantive amendment(s)</b>	<p>July 1, 2024</p> <ul style="list-style-type: none"> <li>§ 397.675 amended to make individuals with a substance use disorder and a co-occurring mental health disorder eligible for involuntary admission.</li> <li>§397.68141 amended to allow a petition to be accompanied by a certificate or report from a qualified professional who examined the respondent within 30 days before the petition was filed.</li> <li>§ 397.6957 amended to add requirements for the clinical assessment.</li> <li>§ 397.697 amended to add special requirements for involuntary outpatient treatment and a reporting requirement.</li> </ul>
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes, if the person is “substance abuse impaired” (which is defined as having a substance use disorder or a condition involving the use of alcoholic beverages, illicit or prescription drugs, or any psychoactive or mood-altering substance in such a manner as to induce mental, emotional, or physical problems or cause socially dysfunctional behavior (FLA. STAT. ANN. § 397.311 (West 2024)) or has a substance use disorder and a co-occurring mental health disorder.
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	<p>Inpatient or outpatient treatment</p> <p>To qualify for involuntary outpatient treatment, an individual must be supported by a social worker or case manager of a licensed service provider, or a willing, able, and responsible individual appointed by the court who shall inform the court and parties if the respondent fails to comply with his or her outpatient program. In addition, unless the respondent has been involuntarily ordered into inpatient treatment at least twice during the last 36 months, or demonstrates the ability to substantially comply with the outpatient treatment while waiting for residential placement to become available, he or she must receive an assessment from a qualified professional or licensed physician expressly recommending outpatient services, such services must be available in the county in which the respondent is located, and it must appear likely that the respondent will follow a prescribed outpatient care plan.</p>

<b><u>FLORIDA</u></b>	
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• If the respondent is an adult, a petition may be filed by the respondent's spouse or legal guardian, any relative, a service provider, or an adult who has direct personal knowledge of the respondent's "substance abuse impairment" and his or her prior course of assessment and treatment.</li> <li>• If the respondent is a minor, a petition may be filed by a parent, legal guardian, or service provider.</li> </ul>
<b>Time between the filing of the petition and the hearing</b>	The court shall schedule a hearing to be held on the petition within 10 court working days unless a continuance is granted.
<b>Elements of the petition</b>	<p>The petition must contain the name of the respondent; the name of the petitioner; the relationship between the respondent and the petitioner; the name of the respondent's attorney, if known; and the factual allegations presented by the petitioner establishing the need for involuntary services for substance abuse impairment. The factual allegations must demonstrate: (1) the reason for the petitioner's belief that the respondent is substance abuse impaired; (2) the reason for the petitioner's belief that because of such impairment the respondent has lost the power of self-control with respect to substance abuse; and (3) (a) the reason the petitioner believes that the respondent has inflicted or is likely to inflict physical harm on himself or herself or others unless the court orders involuntary services; or (b) the reason the petitioner believes that the respondent's refusal to voluntarily receive care is based on judgment so impaired by reason of substance abuse that the respondent is incapable of appreciating his or her need for care and of making a rational decision regarding that need for care.</p> <p>The petition may be accompanied by a certificate or report from a qualified professional who examined the respondent within 30 days before the petition was filed. The certificate or report must include the qualified professional's findings relating to his or her assessment of the patient and his or her treatment recommendations. If the respondent was not assessed before the filing of a treatment petition or refused to submit to an evaluation, the lack of assessment or refusal must be noted in the petition.</p>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days

<b><u>FLORIDA</u></b>	
<b>Renewal of commitment order</b>	Whenever a service provider believes that an individual who is nearing the scheduled date of his or her release from involuntary treatment services continues to meet the criteria for involuntary treatment, a petition for renewal of the involuntary treatment services order must be filed with the court before the expiration of the court-ordered services period. The petition may be filed by the service provider or by the person who filed the petition for the initial treatment order if the petition is accompanied by supporting documentation from the service provider. If the court finds that the petition for renewal of the involuntary treatment services order should be granted, it may order the respondent to receive involuntary treatment services for a period not to exceed an additional 90 days. When the conditions justifying involuntary services continue to exist after an additional 90 days of service, a new petition requesting renewal of the involuntary treatment services order may be filed.
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>The court may prohibit, or a law enforcement agency may waive, any service of process fees if a petitioner is determined to be indigent.</p> <p>Upon the filing of a petition for involuntary services for a substance abuse impaired person with the clerk of the court, the court must immediately determine whether the respondent is represented by an attorney or whether the appointment of counsel for the respondent is appropriate.</p>



<b><u>FLORIDA</u></b>	
<b>Additional provision(s) of note (continued)</b>	<p>A respondent may not be involuntarily ordered into treatment without a clinical assessment being performed, unless he or she is present in court and expressly waives the assessment. In nonemergency situations, if the respondent was not, or had previously refused to be, assessed by a qualified professional and, based on the petition, testimony, and evidence presented, it reasonably appears that the respondent qualifies for involuntary treatment services, the court shall issue an involuntary assessment and stabilization order to determine the appropriate level of treatment the respondent requires. Additionally, in cases where an assessment was attached to the petition, the respondent may request, or the court on its own motion may order, an independent assessment by a court-appointed or otherwise agreed upon qualified professional. The respondent shall be informed by the court of the right to an independent assessment. The respondent's assessment by a qualified professional must occur within 72 hours after his or her arrival at a licensed service provider unless the respondent shows signs of withdrawal or a need to be either detoxified or treated for a medical condition, which shall extend the amount of time the respondent may be held for observation until such issue is resolved but no later than the scheduled hearing date, absent a court-approved extension. If the respondent is a minor, such assessment must be initiated within the first 12 hours of the minor's admission to the facility. No later than the ordinary close of business on the day before the hearing, the qualified professional shall transmit, in accordance with any applicable confidentiality requirements, his or her clinical assessment to the clerk of the court, who shall enter it into the court file. The report must contain a recommendation on the level of substance abuse treatment the respondent requires, if any, and the relevant information on which the qualified professional's findings are based. This document must further note whether the respondent has any co-occurring mental health or other treatment needs. The qualified professional's failure to include a treatment recommendation, much like a recommendation of no treatment, shall result in the petition's dismissal.</p>

<b><u>FLORIDA</u></b>	
<b>Additional provision(s) of note (continued)</b>	<p>The court may order a respondent to undergo treatment through a privately funded licensed service provider, instead of a publicly funded licensed service providers if the respondent has the ability to pay for the treatment, or if any person on the respondent's behalf voluntarily demonstrates a willingness and an ability to pay for the treatment.</p> <p>If the court orders involuntary treatment services, a copy of the order must be sent to the managing entity, the Department of Children and Families (department)t, and the Louis de la Parte Florida Institute (Institute). The department and institute must also receive and maintain copies of involuntary assessment and treatment orders; the qualified professional assessments; the professional certificates; and the law enforcement officers' protective custody reports. The institute is to use such documents to prepare annual reports analyzing the data the documents contain, without including patients' personal identifying information, and shall post such reports on its website and provide copies of the reports to the department, the President of the Senate, and the Speaker of the House of Representatives by December 31 of each year.</p> <p>Discharge planning and procedures for any respondent's release from involuntary treatment services must include and document the respondent's needs, and actions to address such needs, for, at a minimum: (1) Follow-up behavioral health appointments; (2) Information on how to obtain prescribed medications; (3) Information pertaining to available living arrangements and transportation; and (4) Referral to recovery support opportunities, including, but not limited to, connection to a peer specialist.</p>
<b>Recently proposed legislation</b>	None, other than legislation enacted in 2024.

<b><u>GEORGIA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>GA. CODE ANN. § 37-7-1 (West 2024) (Definitions)</li> <li>GA. CODE ANN. § 37-7-60, <i>et seq.</i> (West 2024) (Treatment of involuntary patients)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes. An “alcoholic, drug dependent individual, or drug abuser” may be ordered into involuntary treatment.
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Anyone may file a petition executed under oath,
<b>Time between the filing of the petition and the hearing</b>	No sooner than ten days and no later than 15 days after such petition is filed
<b>Elements of the petition</b>	<p>The petitioner may file an application with the community mental health center for a court order evaluation of the respondent. Upon the filing of such application, the community mental health center shall make a preliminary investigation and, if the investigation shows that there is probable cause to believe that such allegation is true, it shall file a petition with the court in the county where the patient is located seeking an involuntary admission for evaluation.</p> <p>Alternatively, the petitioner can file the petition directly with the court. The petition must be accompanied by the certificate of a physician or psychologist stating that he has examined the patient within the preceding five days and has found that the patient may be an alcoholic, a drug dependent individual, or a drug abuser requiring involuntary treatment and that a full evaluation of the patient is necessary.</p>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>Inpatient - six months</li> <li>Outpatient - one year</li> </ul>
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>If continued inpatient treatment is necessary at the end of the six-month period, the chief medical officer can apply for an order authorizing continued treatment for up to 12 months.</li> <li>If continued outpatient treatment is necessary, the physician or psychologist responsible for treatment can petition for an order of continued outpatient treatment for a period not to exceed one year.</li> </ul>

<b><u>GEORGIA</u></b>	
<b>Penalty for false petition</b>	Penalty of perjury
<b>Additional provision(s) of note</b>	The patient or the patient's representatives may apply for court appointed counsel if the patient cannot afford counsel.
<b>Recently proposed legislation</b>	None

<b><u>HAWAII</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• HAWAII REV. STAT. ANN. §§ 334-60.2 through 62 (West 2024) (involuntary inpatient treatment)</li> <li>• HAWAII REV. STAT. ANN. §§ 334-141 through 148 (West 2024) (involuntary outpatient treatment)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes, for “substance abuse or addiction”
<b>Court of relevant jurisdiction</b>	Family court
<b>Type of treatment judge can order</b>	Inpatient or Outpatient treatment
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• Inpatient - any person</li> <li>• Outpatient - any “family member,” which is defined as individual who is a member of the immediate family of the person who is the subject of the petition, including spouse, child, parent, grandparent, or any related individual who resides in the same household as the individual who is the subject of the petition.</li> </ul>
<b>Time between the filing of the petition and the hearing</b>	Within 10 days of the filing of the petition

<b><u>HAWAII</u></b>	
<b>Elements of the petition</b>	<ul style="list-style-type: none"> <li>• Inpatient - The attorney general, the attorney general's deputy, special deputy, or appointee designated to present the case shall assist the petitioner to state the substance of the petition in plain and simple language. The petition may be accompanied by a certificate of the licensed physician, advanced practice registered nurse, or psychologist who has examined the person within two days before submission of the petition, unless the person whose commitment is sought has refused to submit to medical or psychological examination, in which case the fact of refusal shall be alleged in the petition. The certificate shall set forth the signs and symptoms relied upon by the physician, advanced practice registered nurse, or psychologist to determine that the person is in need of care or treatment, or both, and whether the person is capable of realizing and making a rational decision with respect to the person's need for treatment. If the petitioner believes that further evaluation is necessary before commitment, the petitioner may request such further evaluation. The petition must include the name, address, and telephone number of at least one of the following individuals in the following order of priority: the subject of the petition's spouse or reciprocal beneficiary, legal parents, adult children, and legal guardian, if one has been appointed. If the subject of the petition has no living spouse or reciprocal beneficiary, legal parent, adult children, or legal guardian, or if none can be found, notice must be served on at least one of the subject's closest adult relatives, if any can be found.</li> <li>• Outpatient - The petition must be in writing under penalty of perjury and include facts relating to: (1) the conduct of the respondent that indicates "substance abuse or addiction;" (2) the respondent's history of substance abuse, treatment, and relapse; (3) the effects of the respondent's conduct on the family; (4) the petitioner's good faith belief that the respondent poses an imminent danger to self or to others if he or she does not receive treatment; (5) the availability of treatment and financial resources to pay for treatment; and (6) any other reason for seeking court intervention.</li> </ul>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days

<b><u>HAWAII</u></b>	
<b>Renewal of commitment order</b>	Upon renewal of the petition for either inpatient or outpatient treatment, the court may extend the petition for an additional 90 days. If at the end of a recommitment period for inpatient treatment the court finds that the criteria for involuntary hospitalization continue to exist and are likely to continue beyond 90 days, the court may order recommitment for a period not to exceed 180 days.
<b>Penalty for false petition</b>	Penalty of perjury
<b>Additional provision(s) of note</b>	<p>The petitioner bears all fees and costs related to bringing the petition. The petitioner or respondent bears all costs of private treatment. If the respondent is eligible to receive publicly funded treatment and such a program is available for the respondent, the court may order the treatment in such a program.</p> <p>No presumption of insanity or legal incompetency shall exist with respect to any patient by reason of the patient's admission to a psychiatric facility involuntarily.</p>
<b>Recently proposed legislation</b>	None



<b><u>IDAHO</u></b>	
<b>Statute(s)</b>	IDAHO CODE ANN. § 66-329 (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; only individuals with substance use disorder that have a co-occurring mental illness are eligible for involuntary commitment. Individuals who are primarily impaired by substance use and do not have a mental illness do not qualify for involuntary commitment.
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	The court can order the proposed patient committed to the custody of the director of the state department of health and welfare (department director) for observation, care, and treatment. The department director, through his or her “dispositioner,” will determine within 24 hours the least restrictive available inpatient facility or outpatient treatment, consistent with the needs of the patient. “Dispositioner” is defined as a designated examiner employed by or under contract with the department of health and welfare and designated by the department director to determine the appropriate location for care and treatment of involuntary patients. “Designated examiner” is defined as a psychiatrist, psychologist, psychiatric nurse, or social worker and such other mental health professionals.
<b>Who may petition?</b>	A friend, relative, spouse or guardian of the proposed patient, a licensed physician, a physician assistant or advanced practice registered nurse practicing in a hospital, a prosecuting attorney or other public official of a municipality, county or of the state of Idaho, or the director of any facility in which such patient may be.
<b>Time between the filing of the petition and the hearing</b>	Not more than seven days from the receipt of the court ordered designated examiners' reports

<b><u>IDAHO</u></b>	
<b>Elements of the petition</b>	The application must state the name and last known address of the proposed patient; the name and address of the spouse, guardian, next of kin, or friend of the proposed patient; whether the proposed patient can be cared for privately in the event commitment is not ordered; whether the proposed patient is, at the time of the application, a voluntary patient; whether the proposed patient has applied for release pursuant to § 66-320; and a simple and precise statement of the facts showing that the proposed patient is mentally ill and either likely to injure himself or others or is gravely disabled due to mental illness. Any such application must be accompanied by a certificate of a designated examiner stating that he has personally examined the proposed patient within the last 14 days and is of the opinion that the proposed patient is: (1) mentally ill; (2) likely to injure himself or others or is gravely disabled due to mental illness; and (3) lacks capacity to make informed decisions about treatment; or a written statement by the applicant that the proposed patient has refused to submit to examination by a designated examiner.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	One year
<b>Renewal of commitment order</b>	Not addressed by statute
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>IDAHO</u></b>	
<b>Additional provision(s) of note</b>	<p>Upon receipt of an application for commitment, the court must, within 48 hours, appoint another designated examiner to make a personal examination of the proposed patient, or if the proposed patient has not been examined, the court shall appoint two designated examiners to make individual personal examinations of the proposed patient and may order the proposed patient to submit to an immediate examination. The designated examiners must report to the court their findings within the following 72 hours as to the mental condition of the proposed patient and his need for custody, care, or treatment by a facility. The reports shall be in the form of written certificates that shall be filed with the court. The court may terminate the proceedings and dismiss the application without taking any further action in the event the reports of the designated examiners are to the effect that the proposed patient is not mentally ill or, although mentally ill, is not likely to injure himself or others or is not gravely disabled due to mental illness. If the proceedings are terminated, the proposed patient must be released immediately. If the designated examiner's certificate states a belief that the proposed patient is mentally ill and either likely to injure himself or others or is gravely disabled due to mental illness, the judge of such court shall issue an order authorizing any health officer, peace officer, or director of a facility to take the proposed patient to a facility in the community in which the proposed patient is residing or to the nearest facility to await the hearing. Under no circumstances shall the proposed patient be detained in a non-medical unit used for the detention of individuals charged with or convicted of penal offenses.</p> <p>An opportunity to be represented by counsel shall be afforded to every proposed patient, and, if neither the proposed patient nor others provide counsel, the court shall appoint counsel</p>
<b>Recently proposed legislation</b>	None

<b><u>ILLINOIS</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• 405 ILL. COMP. STAT. ANN. § 5/1-129 (West 2024) (definition of mental illness)</li> <li>• 405 ILL. COMP. STAT. ANN. § 5/3-700 through 706 (West 2024) (involuntary commitment- inpatient)</li> <li>• 405 ILL. COMP. STAT. ANN. § 5/3-750 through 756 (West 2024) (involuntary commitment- outpatient)</li> <li>• 405 ILL. COMP. STAT. ANN. § 5/3-800 through 820 (West 2024) (hearings)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the definition of “mental illness” excludes a substance use disorder.
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	The petitioner submits a petition for involuntary admission for either inpatient treatment or outpatient treatment. A petition for involuntary admission on an outpatient basis may be combined with or accompanied by a petition for involuntary admission on an inpatient basis, and vice versa.
<b>Who may petition?</b>	Any person 18 years of age or older
<b>Time between the filing of the petition and the hearing</b>	<ul style="list-style-type: none"> <li>• Inpatient - within five days, excluding Saturdays, Sundays, and holidays, after its receipt of the second certificate or after the respondent is admitted to a mental health facility, whichever is earlier.</li> <li>• Outpatient - within 15 days, excluding Saturdays, Sundays, and holidays, after its receipt of the second certificate.</li> </ul>

<b><u>ILLINOIS</u></b>	
<b>Elements of the petition</b>	The petition must include all of the following: (1) a detailed statement of the reason for the assertion that the respondent is subject to involuntary admission, including the signs and symptoms of a mental illness and a description of any acts, threats, or other behavior or pattern of behavior supporting the assertion and the time and place of their occurrence; (2) the name and address of the spouse, parent, guardian, substitute decision maker, if any, and close relative, or if none, the name and address of any known friend of the respondent whom the petitioner has reason to believe may know or have any of the other names and addresses. If the petitioner is unable to supply any such names and addresses, the petitioner shall state that diligent inquiry was made to learn this information and specify the steps taken; (3) the petitioner's relationship to the respondent and a statement as to whether the petitioner has legal or financial interest in the matter or is involved in litigation with the respondent. If the petitioner has a legal or financial interest in the matter or is involved in litigation with the respondent, a statement of why the petitioner believes it would not be practicable or possible for someone else to be the petitioner; and (4) the names, addresses and phone numbers of the witnesses by which the facts asserted may be proved. The petition may be accompanied by the certificate of a physician, qualified examiner, psychiatrist, advanced practice psychiatric nurse, or clinical psychologist which certifies that the respondent is subject to involuntary admission. A “qualified examiner” is defined as a clinical social worker, a registered nurse with a master’s degree in psychiatric nursing, a licensed clinical professional counselor, or a licensed marriage and family therapist.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient - 90 days</li> <li>• Outpatient - 180 days</li> </ul>

<b><u>ILLINOIS</u></b>	
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient - Prior to the expiration of the initial order if the facility director believes that the recipient continues to be subject to involuntary admission on an inpatient basis, a new petition and two new certificates may be filed with the court. If a petition is filed, the facility director shall file with the court a current treatment plan which includes an evaluation of the recipient's progress and the extent to which he is benefiting from treatment. Following a hearing, the court may order a second period of commitment on an inpatient basis not to exceed 90 days only if it finds that the recipient continues to be subject to involuntary admission on an inpatient basis.</li> <li>• Outpatient - Prior to the expiration of the initial order, if the facility director or the custodian believes that the recipient continues to be subject to involuntary admission on an outpatient basis, a new petition and 2 new certificates may be filed with the court. If a petition is filed, the facility director or the custodian shall file with the court a current treatment plan which includes an evaluation of the recipient's progress and the extent to which he or she is benefiting from treatment. Following a hearing, the court may order a second period of commitment on an outpatient basis not to exceed 180 days only if it finds that the recipient continues to be subject to involuntary admission on an outpatient basis.</li> </ul>
<b>Penalty for false petition</b>	Knowingly making a material false statement in the petition is a Class A misdemeanor.
<b>Additional provision(s) of note</b>	<p>If no certificate was filed with the physician, the respondent must be examined separately by a physician, or clinical psychologist, advanced practice psychiatric nurse, or qualified examiner and by a psychiatrist.</p> <p>Court hearings shall be open to the press and public unless the respondent or some other party requests that they be closed. The court may also indicate its intention to close a hearing, including when it determines that the respondent may be unable to make a reasoned decision to request that the hearing be closed. A request that a hearing be closed shall be granted unless there is an objection to closing the hearing by a party or any other person.</p>

<b><u>ILLINOIS</u></b>	
<b>Additional provision(s) of note (continued)</b>	<p>The respondent is entitled to a jury on the question of whether he is subject to involuntary admission on an inpatient or outpatient basis. The jury shall consist of six individuals to be chosen in the same manner as are jurors in other civil proceedings.</p> <p>Every respondent alleged to be subject to involuntary admission on an inpatient or outpatient basis shall be represented by counsel. If the respondent is indigent or an appearance has not been entered on his behalf at the time the matter is set for hearing, the court shall appoint counsel for him.</p> <p>No respondent may be found subject to involuntary admission on an inpatient or outpatient basis unless at least one psychiatrist, clinical social worker, clinical psychologist, advanced practice psychiatric nurse, or qualified examiner who has examined the respondent testifies in person at the hearing. The respondent may waive the requirement of the testimony subject to the approval of the court.</p>
<b>Recently proposed legislation</b>	None



<b><u>INDIANA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• IND. CODE ANN. § 12-7-2-130 (West 2024) (definition of mental illness)</li> <li>• IND. CODE ANN. § 12-23-11.1-1 (West 2024) (involuntary treatment for SUD)</li> <li>• IND. CODE ANN. § 12-26-1-1 <i>et seq.</i> (West 2024) (Involuntary treatment procedures)</li> </ul>
<b>Relevant substantive amendment(s)</b>	July 1, 2023 amendment to IND. CODE ANN. § 12-7-2-130, added a temporary impairment as a result of alcohol or drug use to the definition of mental illness.
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; an individual who is an “alcoholic,” “incapacitated by alcohol,” or a “drug abuser” may be involuntarily committed. Furthermore, the definition of “mental illness/mentally ill” includes alcoholism, addiction to narcotics or dangerous drugs, and temporary impairment as a result of alcohol or drug use.
<b>Court of relevant jurisdiction</b>	<ul style="list-style-type: none"> <li>• A court having probate jurisdiction.</li> <li>• A superior court in a county in which the circuit court has exclusive probate jurisdiction.</li> <li>• A mental health division of a superior court.</li> </ul>
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• For temporary commitment of an individual, the petition can be filed by anyone at least 18 years of age.</li> <li>• If an individual is reasonably expected to require custody, care, or treatment in a facility for more than 90 days, then a petition for regular commitment can be filed by a health officer, a police officer, the court, a superintendent of a facility, a friend, a relative, a spouse, a guardian, a prosecutor, a superintendent of a treatment facility or a third-party contractor with the division of mental health and addiction.</li> </ul>
<b>Time between the filing of the petition and the hearing</b>	<ul style="list-style-type: none"> <li>• For temporary commitment, the court, within three days after a proceeding has begun, shall enter an order setting a hearing date. The hearing date must be more than one day, but less than 14 days from the date of notice.</li> <li>• For regular commitment, the court, upon receiving a petition for regular commitment or a report recommending treatment in a facility for more than 90 days, shall enter an order setting a hearing date. If an individual is currently under a commitment order, then the hearing must be held before the expiration of the current commitment period.</li> </ul>

<b><u>INDIANA</u></b>	
<b>Elements of the petition</b>	<ul style="list-style-type: none"> <li>• For temporary commitment, the petition must include a physician's written statement stating the following: (1) the physician has examined the individual within the past 30 days; and (2) the physician believes the individual is mentally ill and either dangerous or gravely disabled and in need of custody, care, or treatment in an appropriate facility.</li> <li>• For regular commitment, the petition must include a physician's written statement stated the following: (1) the physician has examined the individual within the past 30 days; and (2) the physician believes that the individual is mentally ill and either dangerous or gravely disabled and in need of custody, care, or treatment in facility for a period expected to be more than 90 days.</li> </ul>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days
<b>Renewal of commitment order</b>	The period of temporary commitment can be extended for one additional period of no more than 90 days through a proceeding. The proceeding must be filed by the attending physician or superintendent of the institution before the end of the first period of commitment. At least 20 days before the end of the first or second temporary commitment period, the superintendent of the facility or the attending physician must make a report to the court stating: (1) the mental condition of the individual; (2) whether the individual is dangerous or gravely disabled, and (3) whether the individual needs continuing care and treatment in a facility for a period of more than 90 days.
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	The following must, in consultation with the division of mental health and addiction, provide or be provided information and training concerning involuntary commitment, including the use of involuntary commitment for individuals who have a substance abuse or addiction condition: (1) judges, provided by the office of judicial administration; (2) prosecutors, provided by the prosecuting attorneys council; and (3) public defenders, provided by the public defender council of Indiana.

<b><u>INDIANA</u></b>	
<b>Additional provision(s) of note (continued)</b>	<p>The individual alleged to have a mental illness has the right to be represented by counsel.</p> <p>The petitioner may be represented by counsel. The court may appoint counsel for a petitioner upon a showing of the petitioner's indigency and the court shall pay for such counsel if appointed.</p> <p>detention or commitment of an individual under does not deprive the individual of the right to do the following: (1) dispose of property; (2) execute instruments; (3) make purchases; (4) enter into contracts; (5) give testimony in a court of law; and (5) vote.</p>
<b>Recently proposed legislation</b>	None

<b><u>IOWA</u></b>	
<b>Statute(s)</b>	IOWA CODE ANN. § 125.74, <i>et seq.</i> (West 2024)
<b>Relevant substantive amendment(s)</b>	July 1, 2023 amendment to § 125.74, <i>et seq.</i> changed all references of “substance abuse” or “substance-related disorder” to “substance use disorder.”
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any interested person
<b>Time between the filing of the petition and the hearing</b>	A hearing must be held no more than 48 hours after the filing of the court ordered physician’s or mental health professional’s report, excluding Saturdays, Sundays, and holidays.
<b>Elements of the petition</b>	The petition must: (1) state the applicant’s belief that the respondent is a person who presents a danger to self or others and lacks judgmental capacity due to either a substance use disorder or a serious mental impairment; (2) state facts in support of that belief; and (3) be accompanied by one or more of the following: (a) a written statement by a physician or mental health professional in support of the application; (b) one or more supporting affidavits corroborating the application; and (c) corroborative information obtained and reduced to writing by the clerk or the clerk’s designee, but only when circumstances make it infeasible to obtain the information in (a) or (b).
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	30 days
<b>Renewal of commitment order</b>	At the end of the 30 period, the respondent must be discharged automatically unless the administrator of the facility, before expiration of the period, obtains a court order for the respondent's recommitment for a further period not to exceed 90 days. A recommitted respondent who has not been discharged by the facility before the end of the 90-day period must be discharged at the expiration of that period unless the administrator of the facility, before expiration of the period, obtains a court order for the respondent's recommitment for a further period not to exceed 90 days.
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>IOWA</u></b>	
<b>Additional provision(s) of note</b>	<p>The applicant, if not the county attorney, may apply for the appointment of counsel if he or she financially unable to employ an attorney to assist the applicant in presenting evidence in support of the application for commitment.</p> <p>The court shall allow the respondent to select an attorney or shall assign an attorney to the respondent. If the respondent is financially unable to pay an attorney, the county shall compensate the attorney at an hourly rate to be established by the county board of supervisors.</p> <p>During the hearing, the applicant and the respondent will be afforded an opportunity to testify and to present and cross-examine witnesses, and the court may receive the testimony of other interested individuals. If the respondent is present at the hearing, and has been medicated within 12 hours, or a longer period of time as the court may designate, prior to the beginning of the hearing or a session of the hearing, the court must be informed of that fact and of the probable effects of the medication upon convening of the hearing.</p> <p>A person who is committed has the right to: (1) prompt evaluation, emergency services, and care and treatment as indicated by sound clinical practice; (2) render informed consent (If the person refuses treatment which in the opinion of the chief medical officer is necessary, or if the person is incompetent and the next of kin or guardian refuses to consent to the treatment or no next of kin or guardian is available, the facility may petition a court of appropriate jurisdiction for approval to treat the person.); (3) the protection of the person's constitutional rights; and (4) Enjoy all legal, medical, religious, social, political, personal, and working rights and privileges, which the person would enjoy if not committed, consistent with the effective treatment of the person and of the other persons in the facility.</p>
<b>Recently proposed legislation</b>	None

<b><u>KANSAS</u></b>	
<b>Statute(s)</b>	KAN. STAT. ANN. §§ 59-29b45, <i>et seq.</i> (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	The head of a treatment facility or anyone else may file a petition seeking involuntary commitment of a voluntary patient who now lacks capacity to make an informed decision concerning treatment and who is refusing treatment efforts or has requested discharge from the treatment facility.
<b>Time between the filing of the petition and the hearing</b>	No earlier than seven days or later than 14 days after the date of the filing of the petition.
<b>Elements of the petition</b>	The petition must include: (1) the belief that the named person has an alcohol or substance abuse problem and the facts upon which this belief is based; (2) the name, age, whereabouts, and permanent address of the person with an alcohol or substance abuse problem; (3) the name and address of the person's spouse or nearest relative or relatives, or legal guardian; (4) the name and address of the person's legal counsel, if known; (5) whether the person is able to pay for medical services or any information about the person's financial circumstances or indigency; (6) the name and address of any person who has custody of the person and any known pending criminal charge or charges or of any outstanding arrest warrant(s), if known; (7) the name(s) and address(es) any witness(es) with knowledge of facts relevant to the issue being brought before the court; and (8) the name and address of a proposed treatment facility where the person can receive treatment, if known.

<b><u>KANSAS</u></b>	
<b>Elements of the petition (continued)</b>	The petition must be accompanied by: (1) a signed certificate from a physician, psychologist or state certified alcohol and substance abuse counselor stating that he or she has personally examined the person and has found that the person, in such professional's opinion, is likely to be a person with an alcohol or substance abuse problem subject to involuntary commitment, unless the court allows the petition to be accompanied by a verified statement by the petitioner that the petitioner had attempted to have the person seen by a physician, psychologist or state certified alcohol and substance abuse counselor, but that the person failed to cooperate to such an extent that the examination was impossible to conduct; (2) a statement of consent to the admission of the proposed patient to the treatment facility named by the petitioner signed by the head of that treatment facility or other documentation which shows the willingness of the treatment facility to admitting the proposed patient for care and treatment; and (3) if applicable, a copy of any notice in which the named person has sought discharge from a treatment facility into which they had previously entered voluntarily, or a statement from the treating physician or psychologist that the person was admitted as a voluntary patient but now lacks capacity to make an informed decision concerning treatment and is refusing reasonable treatment efforts, and including a description of the treatment efforts being refused.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Three months
<b>Renewal of commitment orders</b>	If a patient continues to need involuntary treatment, the court can order continued treatment for a specified period of time not to exceed three months for any initial order for continued treatment and no more than six months in any subsequent order for continued treatment.
<b>Penalty for false petition</b>	Any person who for a corrupt consideration or advantage, or through malice, makes or joins in making or advises the making of any false petition, report or order will be guilty of a class A misdemeanor.
<b>Additional provision(s) of note</b>	The court must issue an order appointing an attorney to represent the proposed patient at all stages of the proceedings and until all orders resulting from such proceedings are terminated. The court must give preference, in the appointment of this attorney, to any attorney who has represented the proposed patient in other matters if the court has knowledge of that prior representation. The proposed patient has the right to engage an attorney of his or her own choice and, in such event, the attorney appointed by the court will be relieved of all duties by the court.



<b><u>KANSAS</u></b>	
<b>Additional provision(s) of note (continued)</b>	<p>The proposed patient has the right to demand a jury trial. The jury, if one is demanded, shall consist of six individuals.</p> <p>In the event no appropriate treatment facility has agreed to provide treatment for the patient, then the secretary for aging and disability services will be given responsibility for providing or securing treatment for the patient.</p> <p>Every patient being treated in any treatment facility has the following rights: (1) to wear the patient's own clothes, keep and use the patient's own personal possessions including toilet articles and keep and be allowed to spend the patient's own money; (2) to communicate by all reasonable means with a reasonable number of persons at reasonable hours of the day and night, including both to make and receive confidential telephone calls, and by letter, both to mail and receive unopened correspondence; (3) to conjugal visits if facilities are available for such visits; (4) to receive visitors in reasonable numbers and at reasonable times each day; (5) to refuse involuntary labor other than the housekeeping of the patient's own bedroom and bathroom, provided that nothing herein shall be construed so as to prohibit a patient from performing labor as a part of a therapeutic program to which the patient has given their written consent and for which the patient receives reasonable compensation; (6) not to be subject to such procedures as psychosurgery, electroshock therapy, experimental medication, aversion therapy or hazardous treatment procedures without the written consent of the patient or the written consent of a parent or legal guardian; (7) to have explained, the nature of all medications prescribed, the reason for the prescription and the most common side effects and, if requested, the nature of any other treatments ordered; (8) to communicate by letter with the secretary for aging and disability services, the head of the treatment facility and any court, attorney, physician, psychologist, licensed addiction counselor or minister of religion; (9) to contact or consult privately with the patient's physician or psychologist, licensed addiction counselor, minister of religion, legal guardian or attorney at any time and if the patient is a minor, their parent; (10) to be visited by the patient's physician, psychologist, licensed addiction counselor, minister of religion, legal guardian or attorney at any time and if the patient is a minor, their parent; (11) to be informed orally and in writing of their rights upon admission to a treatment facility; and (12) to be treated humanely consistent with generally accepted ethics and practices.</p>
<b>Recently proposed legislation</b>	None

<b><u>KENTUCKY</u></b>	
<b>Statute(s)</b>	KY. REV. STAT. ANN. §§ 222.430 through 222.437 (West 2024)
<b>Relevant substantive amendment(s)</b>	A 2019 amendment to § 222.430, <i>et seq.</i> changed all references to “alcohol and other drug abuse” to “substance use disorder.”
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	A spouse, relative, friend, or guardian of the individual concerning whom the petition is filed
<b>Time between the filing of the petition and the hearing</b>	If, after reviewing the allegations contained in the petition and examining the petitioner under oath, it appears to the court that there is probable cause to believe the respondent should be ordered to undergo treatment, then the court will set a date for a hearing within 14 days.
<b>Elements of the petition</b>	The petition must include: (1) the petitioner’s relationship to the person; (2) the respondent’s name, address, and location; (3) the name and residence of the respondent’s parents, if alive, or legal guardian, if any; (4) the name and residence of respondent's spouse, if any; (5) the name and residence of the person who has custody of the respondent, if any, or the name and residence of a close relative; and (6) the petitioner’s believe, including the factual basis therefore, that the respondent is suffering from an alcohol or other drug abuse disorder and presents a danger or threat of danger to self, family, or others if not treatment for substance use disorder.
<b>Legal standard for hearing</b>	Beyond a reasonable doubt
<b>Length of commitment</b>	60 days or 360 days depending on what was requested in the petition.
<b>Renewal of commitment order</b>	Not addressed by statute
<b>Penalty for false petition</b>	Penalty of perjury
<b>Additional state law provisions of note</b>	Any petition filed must be accompanied by a guarantee, signed by the petitioner obligating that person to pay all costs for treatment of the respondent for substance use disorder that is ordered by the court.
<b>Recently proposed legislation</b>	None

<b><u>LOUISIANA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• LA. REV. STAT. ANN. § 28:2 (West 2024) (definitions)</li> <li>• LA. REV. STAT. ANN. §§ 28:54 through 56 (West 2024) (inpatient involuntary commitment)</li> <li>• LA. REV. STAT. ANN. §§ 28:66 through 77 (West 2024) (outpatient involuntary commitment)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes, for inpatient involuntary commitment; no, for involuntary outpatient treatment.
<b>Court of relevant jurisdiction</b>	District court or court that has family jurisdiction
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• Inpatient - the Louisiana Department of Health or any person of legal age</li> <li>• Outpatient - A petition to obtain an order authorizing involuntary outpatient treatment may be initiated by one of the following persons: (1) the director, administrator, or treating physician of a hospital in which the respondent is hospitalized; (2) the director, administrator, or treating physician of an emergency receiving center in which the respondent is receiving services; (3) the director of the local governing entity, or his designee, in the parish in which the respondent is present or reasonably believed to be present; (4) any interested person through counsel; or (5) the Louisiana Department of Health. "Interested person" means anyone of legal age who has an interest in the outcome of a particular case, which may include but shall not be limited to any adult relative or friend of the respondent, any official or representative of a public or private agency, corporation, or association that is concerned with the respondent's welfare, or any other person found suitable by the court.</li> </ul>
<b>Time between the filing of the petition and the hearing</b>	<ul style="list-style-type: none"> <li>• Inpatient - No later than 18 calendar days after the filing of the petition</li> <li>• Outpatient - No later than 30 days after the filing of the petition</li> </ul>

<b><u>LOUISIANA</u></b>	
<b>Elements of the petition</b>	The petition must contain the facts that are the basis of the assertion and provide the respondent with adequate notice and knowledge relative to the nature of the proceedings. The petition must contain the following information regarding the respondent: (1) name; (2) date of birth; (3) alias names, if any; (4) social security number; (5) sex; and (6) race. If the petitioner is unable to provide any of the required information, then he or she must include the reasons why that information cannot be provided.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient               <ul style="list-style-type: none"> <li>○ Alcohol use disorder - 45 days</li> <li>○ All other judicial commitments - 180 days</li> </ul> </li> <li>• Outpatient - one year</li> </ul>
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient-               <ul style="list-style-type: none"> <li>○ Alcohol use disorder - If continuous involuntary treatment is necessary, the court can recommit the patient for 60 days. No more than two 60-day recommitments may be ordered in connection with the same continuous confinement.</li> <li>○ All other judicial commitments- The court can order an additional 180-day judicial commitment, if necessary. If a person has been judicially committed for four consecutive 180-day periods and during this time has not been conditionally discharged, then the period of subsequent judicial commitment may exceed 180 days, but cannot exceed one year.</li> </ul> </li> <li>• Outpatient - If any person or entity authorized to file a petition determines that a respondent requires further involuntary outpatient treatment, he or she shall file a petition for continued treatment prior to the expiration of the involuntary outpatient treatment ordered by the court. If a respondent has been ordered to receive outpatient treatment for four consecutive six-month to one-year periods, the period of any subsequent order may exceed one year but shall not exceed two years.</li> </ul>
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>LOUISIANA</u></b>	
	<p>A petitioner who is unable to afford an attorney may seek the assistance of any legal aid society or similar agency if available.</p> <p>The respondent has the right to counsel. If the respondent is indigent, he or she has the right to have counsel appointed to represent him or her by the Mental Health Advocacy Service.</p> <p>If the placement determined by the court is unavailable, the court may commit the respondent to the Louisiana Department of Health for appropriate placement subject to the availability of department resources until such time as an opening is available for transfer to the treatment facility determined by the court.</p>
<b>Additional provision(s) of note (continued)</b>	If the respondent ordered to involuntary outpatient treatment refuses to take medication or refuses to take or fails blood or other laboratory tests as required by court order, the physician, psychiatric mental health nurse practitioner, or psychologist may consider his or her refusal in determining whether the respondent is in need of inpatient treatment services.
<b>Recently proposed legislation</b>	None

<b><u>MAINE</u></b>	
<b>Statute(s)</b>	ME. REV. STAT. ANN. tit. 34-B § 3801 (West 2024) (Definitions) ME. REV. STAT. ANN. tit. 34-B § 3864 (West 2024) (Judicial commitment)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; the state defines a mentally ill person as someone with “a psychiatric or other disease that substantially impairs that person's mental health,” which includes anyone suffering the “effects from the use of drugs, narcotics, hallucinogens or intoxicants, including alcohol.”
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient treatment
<b>Who may petition?</b>	Any health officer, law enforcement officer, or other person
<b>Time between the filing of the petition and the hearing</b>	No later than 14 days from the date of the application. For good cause shown, on a motion by any party or by the court on its own motion, the hearing on commitment or on involuntary treatment may be continued for a period not to exceed 21 additional days.
<b>Elements of the petition</b>	The petition must state the applicant’s belief that the person is mentally ill and, because of the person’s illness, poses a likelihood of serious harm and the grounds for this belief. The written application must be accompanied by a dated certificate, signed by a medical practitioner stating: (1) that the practitioner has examined the person on the date of the certificate; (2) that the medical practitioner is of the opinion that the person is mentally ill and, because of that illness, poses a likelihood of serious harm; and (3) that adequate community resources are unavailable for the care and treatment of the person’s mental illness.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Four months
<b>Renewal of commitment order</b>	If the chief administrative office of the facility to which a person has been committed recommends that continued involuntary treatment is necessary for the person, then the chief administrative officer must notify the Commissioner of Health and Human Services (commissioner). The commissioner may then, not later than 21 days prior to the expiration of a period of commitment ordered by the court, request the district court issue an order for recommitment. Subsequent commitments can be for up to one year.
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>MAINE</u></b>	
<b>Additional provision(s) of note</b>	<p>The patient has the right to retain an attorney or to have an attorney appointed.</p> <p>Prior to the commencement of the hearing, the court shall inform the person that if an order of involuntary commitment is entered, that person is a prohibited person and may not own, possess, or have under that person's control a firearm.</p> <p>The hearing is confidential, and a report of the proceedings may not be released to the public or press, except by permission of the person or the person's counsel and with approval of the presiding District Court Judge, except that the court may order a public hearing on the request of the person or the person's counsel.</p> <p>With the exception of expenses incurred by the applicant the District Court is responsible for any expenses incurred under this section, including fees of appointed counsel, witness and notice fees and expenses of transportation for the proposed patient.</p>
<b>Recently proposed legislation</b>	None

<b><u>MARYLAND</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• MD. HEALTH GEN. CODE ANN. § 10-101 (West 2024) (definitions)</li> <li>• MD. HEALTH GEN. CODE ANN. § 10-613 through 619 (West 2024) (involuntary admissions)</li> <li>• MD. HEALTH GEN. CODE ANN. § 10-631 through 633 (West 2024) (hearing on admission)</li> <li>• MD. CTS. &amp; JUD. PROC. § 5-623 (West 2024) (false applications)</li> <li>• MD. HEALTH GEN. CODE ANN. § 10-6A (West 2024) (involuntary outpatient treatment, effective July 1, 2025)</li> </ul>
<b>Relevant substantive amendment(s)</b>	Beginning July 1, 2025, Maryland will have a process for involuntary outpatient treatment.
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; An individual must have a “mental disorder” in order to qualify for involuntary commitment. “Mental disorder” is defined as behavioral or emotional illness that results from a psychiatric disorder. It also includes a mental illness that so substantially impairs the mental or emotional functioning of an individual as to make care or treatment necessary or advisable for the welfare of the individual or for the safety of the person or property of another.
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	Inpatient and outpatient treatment beginning July 1, 2025
<b>Who may petition?</b>	Anyone with “a legitimate interest in the welfare of the individual.”
<b>Time between the filing of the petition and the hearing</b>	Within 10 days of the date of the initial confinement of the individual.
<b>Elements of the petition</b>	Each application for involuntary admission must be in writing, dated, state the relationship of the applicant to the individual for whom admission is sought, and be signed by the applicant. The application must be accompanied by the certificates of: (1) one physician and one psychologist; (2) two physicians; (3) one physician and one psychiatric nurse practitioner; (4) one physician and one licensed certified social worker-clinical; or (5) one physician and one licensed clinical professional counselor. The certificates should include (1) a diagnosis of a mental disorder of the individual; (2) an opinion that the individual needs inpatient care or treatment; and (3) an opinion that admission to a facility is needed for the protection of the individual or another. A certificate may not be used as part of the application if the examination on which the certificate is made was done more than one week before the certificate is signed or more than 30 days before the facility receives the application for admission.



<b><u>MARYLAND</u></b>	
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Not specified
<b>Renewal of commitment order</b>	Not addressed by statute
<b>Penalty for false petition</b>	A person who in bad faith and with unreasonable grounds applies for involuntary admission of an individual will be civilly or criminally liable for making the application.
<b>Additional provision(s) of note</b>	None
<b>Recently proposed legislation</b>	None, other than legislation enacted in 2024

<b><u>MASSACHUSETTS</u></b>	
<b>Statute(s)</b>	MASS. GEN. LAWS ANN. ch. 123 § 35 (West 2024)
<b>Relevant substantive amendment(s)</b>	August 9, 2018 amendment added a provision requiring facilities used for commitment to provide all U.S. Food and Drug Administration approved forms of medication for addiction treatment to any individual for whom such treatment is medically appropriate.
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient treatment
<b>Time between the filing of the petition and the hearing</b>	Upon receipt of a petition, the court must “immediately schedule a hearing.” A specific timeline is not mentioned.
<b>Who may petition?</b>	Any police officer, physician, spouse, blood relative, guardian, or court official
<b>Elements of the petition</b>	The petition must state that the person with an alcohol or substance use disorder is at a substantial risk of physical harm: (1) to the person as manifested by evidence of threats of, or attempts at, suicide or serious bodily harm; (2) to others as manifested by evidence of homicidal or other violent behavior or evidence that others are placed in reasonable fear of violent behavior and serious physical harm to them; or (3) or injury as manifested by evidence that such person’s judgment is so affected that he or she is unable to protect him or herself in the community and that reasonable provision for his or her protection is not available in the community. There must be an imminent threat to the person.
<b>Legal standard for hearing</b>	Not specified by statute
<b>Length of commitment</b>	90 days
<b>Renewal of commitment order</b>	A renewal process is not specified in statute, but the court may order an individual to be followed by case management services provided by the department of public health for up to one year after they are released from the facility.
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>MASSACHUSETTS</u></b>	
<b>Additional provision(s) of note</b>	<p>The respondent has the right to be represented by legal counsel and may present an independent expert or other testimony. If the court finds the person indigent, it shall immediately appoint counsel.</p> <p>If the department of public health informs the court that there are no suitable facilities available for treatment licensed or approved by the department of public health or the department of mental health, or if the court makes a specific finding that the only appropriate setting for treatment for the person is a secure facility, then the person may be committed to: (1) a secure facility for women approved by the department of public health or the department of mental health, if a female; or (2) the Massachusetts correctional institution at Bridgewater or other such facility as designated by the commissioner of correction, if a male; provided, however, that any person so committed shall be housed and treated separately from persons currently serving a criminal sentence.</p> <p>A facility used for commitment under this section for a person found to be a person with a substance use disorder shall maintain or provide for the capacity to possess, dispense and administer all drugs approved by the federal Food and Drug Administration for use in opioid agonist treatment, including partial agonist treatment, and opioid antagonist treatment for opioid use disorder and shall make such treatment available to any person for whom such treatment is medically appropriate.</p> <p>The court, upon ordering the commitment of a person found to be a person with an alcohol use disorder or substance use disorder pursuant to this section, must transmit the person's name and nonclinical identifying information, including the person's social security number and date of birth, to the department of criminal justice information services. The court must notify the person that he or she is prohibited from being issued a firearm identification card or a license to carry unless a petition for relief is subsequently granted.</p>
<b>Recently proposed legislation</b>	None

<b><u>MICHIGAN</u></b>	
<b>Statute(s)</b>	MICH. COMP. LAWS ANN. §§ 330.1281a through 330.1281c (West 2014)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	A spouse, family member, or guardian of the respondent, or health professional
<b>Time between the filing of the petition and the hearing</b>	If after reviewing the contents of the petition and examining the petitioner under oath, the court finds that there is probable cause to believe that the respondent may reasonably benefit from treatment, the court must schedule a hearing to be held within seven days.
<b>Elements of the petition</b>	The petition must include: (1) the petitioner's name and address; (2) the petitioner's relationship to the respondent; (3) the respondent's name, address, and current location; (4) the name and address of the respondent's parents, if living and known; (5) the name and address of the respondent's guardian, if any and if known; (6) the name and address of the respondent's spouse, if any and if known; (7) the name and address of the respondent's adult children, if any and if known; (8) the name and address of the individual who has custody of the respondent, if any and if known; (9) a description of the facts that lead the petitioner to believe that the respondent has a substance use disorder and presents an imminent danger or imminent threat of danger to self, family, or others as a result of the substance use disorder, or that a substantial likelihood of the threat of danger in the near future exists if the respondent does not receive treatment.

<b><u>MICHIGAN</u></b>	
<b>Elements of the petition (continued)</b>	<p>The petition must include a certified statement from a health professional who has examined the respondent within two days before the day the petition is filed. The certified statement must include: (1) findings in support of the need for involuntary treatment; (2) a statement regarding whether the respondent presents an imminent danger or imminent threat of danger to self, family, or others as a result of the substance use disorder, or a substantial likelihood of the threat of danger in the near future exists if the respondent does not receive treatment; (3) a statement regarding whether the respondent can reasonably benefit from treatment; and (an indication of the type and length of treatment required. In lieu of a certified statement from a health professional, the petition may include a statement that the respondent refused to undergo an examination by a health professional concerning his or her possible need for treatment.</p> <p>The petition must also include the name and address of the person or public or private facility with which the petitioner has arranged for the treatment of the respondent. The petitioner must include a verification from the person or public or private facility that it has agreed to provide the treatment and the estimated cost of the treatment. Unless waived by the court for good cause, the petitioner must submit with the petition a guarantee, signed by the petitioner or another individual authorized to submit a petition for the respondent under this section, obligating the guarantor to pay the costs of the examinations, the costs of the respondent that are associated with a hearing, and the costs of any treatment ordered by the court.</p>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Not specified
<b>Renewal of commitment order</b>	Not addressed by statute
<b>Penalty for false petition</b>	An individual who: (1) furnishes false information for the purpose of obtaining an order of involuntary treatment; (2) causes or otherwise secures, or conspires with or assists another to cause or secure, without a reason to believe the respondent has a substance use disorder, an order of involuntary treatment; or (3) causes, or conspires with or assists another to cause, the denial to any individual a right accorded that individual, is guilty of a misdemeanor punishable by imprisonment for not more than one year or a fine of not more than \$5,000, or both.

<b><u>MICHIGAN</u></b>	
<b>Additional provision(s) of note</b>	The respondent may retain counsel and, if the respondent is unable to retain counsel, that the respondent may be represented by court-appointed counsel at public expense if the respondent is indigent.
<b>Recently proposed legislation</b>	None

<b><u>MINNESOTA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• MINN. STAT. ANN. § 253B.02 (West 2024) (definitions)</li> <li>• MINN. STAT. ANN. § 253B.07 through 24 (West 2024) (judicial commitment procedures)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; Individuals who are “chemically dependent” qualify for involuntary commitment. A “chemically dependent person” is defined as any person: (1) determined as being incapable of self-management or management of personal affairs by reason of the habitual and excessive use of alcohol, drugs, or other mind-altering substances; and (2) whose recent conduct as a result of habitual and excessive use of alcohol, drugs, or other mind-altering substances poses a substantial likelihood of physical harm to self or others as demonstrated by: (a) a recent attempt or threat to physically harm self or others; (b) evidence of recent serious physical problems; or (c) a failure to obtain necessary food, clothing, shelter, or medical care. A chemically dependent person also includes “pregnant woman who has engaged during the pregnancy in habitual or excessive use, for a nonmedical purpose, of any of the following substances or their derivatives: opium, cocaine, heroin, phencyclidine, methamphetamine, amphetamine, tetrahydrocannabinol, or alcohol.”
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any “interested person,” which is defined as an adult who has a specific interest in the patient or proposed patient, including but not limited to a public official, including a local welfare agency; a health care or mental health provider; the legal guardian, spouse, parent, legal counsel, adult child, next of kin, or other person designated by a patient or proposed patient; or a health plan company that is providing coverage for a proposed patient.
<b>Time between the filing of the petition and the hearing</b>	Within 14 days from the date of the filing of the petition

<b><u>MINNESOTA</u></b>	
<b>Elements of petition</b>	<p>Prior to filing a petition for commitment of a proposed patient, an interested person must apply to the designated agency in the county of financial responsibility or the county where the proposed patient is present for conduct of a preliminary investigation. The designated agency will appoint a screening team to conduct an investigation. The investigation must include: (1) an interview with the proposed patient and other individuals who appear to have knowledge of the condition of the proposed patient, or the specific reasons why the proposed patient was not interviewed; (2) identification and investigation of specific alleged conduct which is the basis for application; (3) identification, exploration, and listing of the specific reasons for rejecting or recommending alternatives to involuntary placement; and (4) seeking input from the proposed patient's health plan company to provide the court with information about the patient's relevant treatment history and current treatment provider.</p> <p>The petition must set forth the name and address of the proposed patient, the name and address of the patient's nearest relatives, and the reasons for the petition. The petition must contain factual descriptions of the proposed patient's recent behavior, including a description of the behavior, where it occurred, and the time period over which it occurred. Each factual allegation must be supported by observations of witnesses named in the petition. The petition must be accompanied by a written statement by an examiner stating that the examiner has examined the proposed patient within the 15 days preceding the filing of the petition and is of the opinion that the proposed patient has a designated disability and should be committed to a treatment facility, state-operated treatment program, or community-based treatment program. The statement must include the reasons for the opinion.</p>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Six months
<b>Renewal of commitment order</b>	If the court finds that the person continues to need treatment, it can extend the commitment period to 12 months. At the conclusion of the 12 months, the commitment may not be continued unless a new petition is filed.
<b>Penalty for false petition</b>	Any person who willfully makes, joins in, or advises the making of any false petition or report, or knowingly or willfully makes any false representation for the purpose of causing the petition or report to be made or for the purpose of causing an individual to be improperly committed under this chapter, is guilty of a gross misdemeanor.



<b><u>MINNESOTA</u></b>	
<b>Additional provision(s) of note</b>	<p>A patient has the right to be represented by counsel at any proceeding under this chapter. The court must appoint a qualified attorney to represent the proposed patient if neither the proposed patient nor others provide counsel.</p> <p>The court may exclude any person not necessary for the conduct of the proceedings from the hearings except any person requested to be present by the proposed patient.</p> <p>No person by reason of commitment or treatment pursuant to this chapter is to be deprived of any legal right, including but not limited to the right to dispose of property, sue and be sued, execute instruments, make purchases, enter into contractual relationships, vote, and hold a driver's license. Commitment or treatment of any patient pursuant to this chapter is not a judicial determination of legal incompetency.</p>
<b>Recently proposed legislation</b>	None

<b><u>MISSISSIPPI</u></b>	
<b>Statute(s)</b>	MISS. CODE ANN. § 41-31-1 through 23 (West 2024)
<b>Relevant substantive amendment(s)</b>	<p>July 1, 2019:</p> <ul style="list-style-type: none"> <li>• Amendment to § 41-31-3 required the department of mental health develop a “uniform alcohol and drug commitment affidavit” and a “uniform alcohol and drug commitment guide.”</li> <li>• Amendment to § 41-31-5 allowed the court to order involuntary outpatient treatment.</li> <li>• Section 41-31-18 added to provide a recommitment procedure.</li> </ul>
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; individuals alleged to be “an alcoholic or drug addict” may be involuntarily committed.
<b>Court of relevant jurisdiction</b>	Chancery court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	The husband, wife, child, mother, father, next of kin, or any friend or relative of the respondent, or the county health officer
<b>Time between the filing of the petition and the hearing</b>	No less than five days nor more than 20 days from the filing of the affidavit
<b>Elements of the petition</b>	The affidavit must allege that such person is an “alcoholic or drug addict,” as the case may be, is a resident citizen of this state, and because of his alcoholism or drug addiction is incapable of or unfit to look after and conduct his affairs, or is dangerous to himself or others, or has lost the power of self-control because of periodic, constant or frequent use of alcoholic beverages or habit-forming drugs, and that he or she is in need of care and treatment, and that his or her detention, care, and treatment at an institution will improve his health.
<b>Legal standard for hearing</b>	Not specified by statute
<b>Length of commitment</b>	30 to 90 days
<b>Renewal of commitment order</b>	The court will have continuing jurisdiction over a person committed to an inpatient or outpatient treatment program for one year after completion of the treatment program. During that time, the court may conduct a hearing to determine whether the person needs to be committed for further alcohol and drug treatment.
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>MISSISSIPPI</u></b>	
<b>Additional provision(s) of note</b>	<p>The department of mental health is required to develop a “uniform alcohol and drug commitment affidavit” (affidavit) to be utilized in all counties to initiate commitment proceedings. The affidavit must be provided by the clerk of the chancery court to any party affiant seeking a civil commitment and also must be made available to the public on the website of the Mississippi Department of Mental Health. The Department of Mental Health, in consultation with the Mississippi Chancery Clerks Association, the Mississippi Conference of Chancery Court Judges and the Mississippi Association of Community Mental Health Centers, must develop a written guide setting out the steps in the commitment process. The guide must include: (1) steps in the alcohol and drug commitment process from affidavit to commitment, written in easily understandable layman's terms; (2) a schedule of fees and assessments that will be charged to commence a commitment proceeding under this chapter; (3) eligibility requirements and instructions for filing a pauper's affidavit; and (4) a statement on the front cover of the guide advising that persons who pursue an alcohol and drug commitment under this chapter are not required to retain an attorney for any portion of the commitment process. The guide must be provided by the clerk of the chancery court to any party or affiant seeking a civil commitment under this chapter, and also must be made available to the public on the website of the Mississippi Department of Mental Health.</p> <p>The clerk must ascertain whether the respondent is represented by an attorney, and if it is determined that the respondent does not have an attorney, the clerk immediately must notify the chancellor of that fact. If the chancellor determines that the respondent for any reason does not have the services of an attorney, the chancellor shall appoint an attorney for the respondent before a hearing on the affidavit.</p>
<b>Recently proposed legislation</b>	None

<b><u>MISSOURI</u></b>	
<b>Statute(s)</b>	MO. ANN. STAT. § 631.115 through 175 (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Inpatient treatment
<b>Who may petition?</b>	Any adult, including a mental health professional, peace officer, registered nurse, licensed physician, or qualified counselor can file an application for evaluation of a person presenting a likelihood of serious harm to himself or others as a result of alcohol or drug abuse, or both. Within the 96-hour evaluation period, the head of the alcohol or drug abuse facility may file a petition to have the period detained.
<b>Time between the filing of the petition and the hearing</b>	Within two judicial days after the day the petition for detention is filed
<b>Elements of the petition</b>	Within 96 hours following initial detention, the head of the facility may file, or cause to be filed, a petition for a 30-day involuntary detention, treatment, or rehabilitation period provided he or she has reasonable cause to believe that the person abuses alcohol or drugs and presents a likelihood of serious harm to himself or herself or others as a result of alcohol or drug abuse, or both. The petition must: (1) allege that the respondent, by reason of alcohol or drug abuse, or both, presents a likelihood of serious harm to himself or herself or to others; (2) allege that the respondent is in need of continued detention, treatment, and rehabilitation; (3) allege the specific behavior of the respondent or the facts which support such conclusion; (4) allege that an alcohol or drug abuse facility which is appropriate to handle the respondent's condition has agreed to accept the respondent; and (5) be signed by a licensed physician who has examined the respondent.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	30 days
<b>Renewal of commitment order</b>	The court may order the respondent to be detained for treatment and rehabilitation for an additional period not to exceed 90 days
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>MISSOURI</u></b>	
<b>Additional provision(s) of note</b>	The respondent has the right to be represented by an attorney and can elect to have the hearing open or closed to the public.
<b>Recently proposed legislation</b>	None

<b><u>MONTANA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• MONT. CODE ANN. § 53-21-102 (West 2024) (definitions)</li> <li>• MONT. CODE ANN. § 53-21-114, <i>et seq.</i> (West 2024) (involuntary commitment procedure)</li> </ul>
<b>Relevant substantive amendment(s)</b>	N/A
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the state excludes addiction to drugs or alcohol and drug or alcohol intoxication from the definition of “mental disorder.” However, a mental disorder may co-occur with addiction or chemical dependency.
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient treatment; however, at any time during the patient's commitment, the court may, on its own initiative or upon application of the professional person in charge of the patient, the patient, the patient's next of kin, the patient's attorney, a third party responsible for payment for the care of the patient, or the friend of respondent appointed by the court, order the patient to be placed in the care and custody of relatives or guardians or to be provided outpatient therapy or other appropriate placement or treatment.
<b>Who may petition?</b>	The county attorney, upon the written request of any person having direct knowledge of the facts
<b>Time between the filing of the petition and the hearing</b>	Five days from the initial hearing, including weekends and holidays, unless the fifth day falls upon a weekend or holiday
<b>Elements of the petition</b>	The petition must contain: (1) the name and address of the person requesting the petition and the person's interest in the case; (2) the name of the respondent and, if known, the address, age, sex, marital status, and occupation of the respondent; (3) the purported facts supporting the allegation of mental disorder, including a report by a mental health profession, a statement of the disposition sought, and the need for commitment; (4) the name and address of every person known or believed to be legally responsible for the care, support, and maintenance of the respondent; (5) the name and address of the respondent's next of kin to extent known; (6) the name and address of any person whom the county attorney believes might be willing and able to be appointed as friend of the respondent; (7) the name, address, and phone number of the attorney, if any, who has most recently represented the respondent; if there is no attorney, there must be a statement as to whether the respondent is indigent and unable to afford the services of an attorney; (8) a statement of the rights of the respondent; and (9) the name and address of the mental health facility to which it is proposed that the respondent may be committed.

<b><u>MONTANA</u></b>	
<b>Legal standard for hearing</b>	Proof beyond a reasonable doubt with respect to any physical facts or evidence and clear and convincing evidence as to all other matters. The respondent's mental disorder must be proved to a reasonable medical certainty. Imminent threat of self-inflicted injury or injury to others must be proved by overt acts or omissions, sufficiently recent in time as to be material and relevant as to the respondent's present condition.
<b>Length of commitment</b>	Three months
<b>Renewal of commitment order</b>	Not less than two calendar weeks prior to the end of the three-month period of commitment, the professional person in charge of the patient at the place of commitment may petition the district court in the county where the patient is committed for extension of the commitment period unless otherwise ordered by the original committing court. The petition must be accompanied by a written report and evaluation of the patient's mental and physical condition. The report must describe any tests and evaluation devices that have been employed in evaluating the patient, the course of treatment that was undertaken for the patient, and the future course of treatment anticipated by the professional person. The court can extend the order of commitment for six months.
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>The respondent has the right to be represented by counsel. If the person is indigent or if in the court's discretion assignment of counsel is in the best interest of justice, the judge must order the office of state public defender to immediately assign counsel to represent the person at either the hearing or the trial, or both.</p> <p>A respondent may not be detained in a jail or other correctional facility pending a hearing or trial to determine whether the respondent should be committed to a mental health facility.</p> <p>At any time prior to the date set for the hearing, the respondent, through counsel, may request a jury trial, and upon the request, the time set for hearing must be vacated and the matter set on the court's jury calendar at the earliest date possible, the matter taking precedence over all other matters. If the issues are tried by a jury, at least two-thirds of the jurors must concur on a finding that the respondent is suffering from a mental disorder and requires commitment. The court may order the trial closed to the public for the protection of the respondent.</p>

<b><u>MONTANA</u></b>	
<b>Additional provision(s) of note (continued)</b>	<p>The costs of precommitment psychiatric detention, precommitment psychiatric examination, and precommitment psychiatric treatment of the respondent and any cost associated with testimony during an involuntary commitment proceeding by a professional person acting must be billed to the following entities in the listed order of priority: (1) the respondent, the parent or guardian of a respondent, if a minor, or the respondent's private insurance carrier, if any; (2) a public assistance program, such as Medicaid, for a qualifying respondent; or (3) the county of residence of the respondent in an amount not to exceed the amount paid for the service by a public assistance program. The adult respondent or the parent or guardian of a minor must pay the cost of treatment and custody ordered, except to the extent that the adult or minor is eligible for public mental health program funds.</p> <p>No person who has received evaluation or treatment may be discriminated against because of that status. The fact that a person has received evaluation and treatment, whether voluntarily or involuntarily, at a mental health facility may not be admitted into evidence in a subsequent proceeding for involuntary commitment or for the appointment of a guardian or conservator unless it is necessary to a determination of the present condition of the respondent or the prognosis for treatment in the present case and the judge determines that the need for the evidence outweighs the prejudicial effect of its admission.</p>
<b>Recently proposed legislation</b>	None



<b><u>NEBRASKA</u></b>	
<b>Statute(s)</b>	NEB. REV. STAT. ANN. § 71-901 <i>et seq.</i> (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes, a “mentally ill and dangerous person” includes an individual who is substance dependent.
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any person who believes that another person is mentally ill and dangerous may communicate such belief to the county attorney. If the county attorney concurs that such person is mentally ill and dangerous and that neither voluntary hospitalization nor other treatment alternatives less restrictive of the subject's liberty than inpatient or outpatient treatment ordered by a mental health board is available or would suffice to prevent harm, then he or she can file a petition.
<b>Time between the filing of the petition and the hearing</b>	Within seven calendar days after the subject has been taken into emergency protective custody.
<b>Elements of the petition</b>	The petition must be in writing and include the following: (1) the subject’s name and address, if known; (2) the name and address of the subject’s spouse, legal counsel, guardian or conservator, and next of kin, if known; (3) the name and address of anyone providing psychiatric or other care or treatment to the subject, (4) a statement that the county attorney has probable cause to believe that the subject of the petition is mentally ill and dangerous; (5) a statement that the beliefs of the county attorney are based on specific behaviors, acts, attempts, or threats which must be specified and described in detail in the petition; and (6) the name and address of any other person who may have knowledge of the subject’s mental illness or substance dependence and who may be called as a witness at a mental health board hearing with respect to the subject.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	The length of detainment is not specified, but the facility must submit reports to the mental health board on the person every 90 days for the first year and every six months thereafter.
<b>Renewal of commitment order</b>	Not addressed by statute
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>NEBRASKA</u></b>	
<b>Additional provision(s) of note</b>	<p>A subject will have the right to be represented by counsel in all proceedings. If the subject is found to be indigent, the mental health board must certify that fact to the district or county court by delivering to the clerk of such court a certificate for appointment of counsel as soon as possible after a subject is taken into emergency protective custody or such petition is filed.</p> <p>All mental health board hearings will be closed to the public except at the request of the subject</p>
<b>Recently proposed legislation</b>	None

<b><u>NEVADA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• NEV. REV. STAT. § 433A.0175 (West 2024) (definition of “person in a mental health crisis)</li> <li>• NEV. REV. STAT. § 433A.200 through 330 (West 2024) (involuntary inpatient treatment)</li> <li>• NEV. REV. STAT. § 433A.335 through 345 (West 2024) (involuntary outpatient treatment)</li> </ul>
<b>Relevant substantive amendment(s)</b>	October 1, 2021-procedures for involuntary outpatient treatment established
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the term “person in a mental health crisis” does not include any person whose capacity is diminished by brief periods of intoxication caused by alcohol or drugs, or dependence upon or addiction to alcohol or other substances, unless a mental illness diagnosis is also present.
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• Inpatient - Any physician, physician assistant, psychologist, social worker, or registered nurse, or by any officer authorized to make arrests in the state.</li> <li>• Outpatient - (1) any person who is at least 18 years of age and resides with the person to be treated; (2) the spouse, parent, adult sibling, adult child or legal guardian of the person to be treated; (3) a physician, physician assistant, psychologist, social worker, or registered nurse who is providing care to the person to be treated; (4) the administration of the division of public and behavioral health of the state department of health and human services; or (5) the medical director of a division of public and behavioral health facility in which the person is receiving treatment.</li> </ul>
<b>Time between the filing of the petition and the hearing</b>	<ul style="list-style-type: none"> <li>• Inpatient - Within six judicial days after the date on which the clerk receives the petition</li> <li>• Outpatient - Within 30 judicial days after the date on which the clerk receives the petition</li> </ul>

<b><u>NEVADA</u></b>	
<b>Elements of the petition</b>	<ul style="list-style-type: none"> <li>• Inpatient- The petition must be accompanied by: (1) a certification from a healthcare practitioner stating that he or she has examined the person alleged to be a person in a mental health crisis and has concluded that the person is a person in a mental health crisis; or (2) a sworn written statement by the petitioner stating that (a) he or she has probable cause to believe that the person is a person in a mental health crisis and the person has refused to submit to examination or treatment; or (b) the person alleged to be a person in a mental health crisis has been placed on a mental health crisis hold and has been determined to have a medical condition that requires immediate treatment.</li> <li>• Outpatient- The petition must allege that: (1) the person is at least 18 years of age; (2) the person has a mental illness; (3) the person has a history of poor compliance with treatment for his or her mental illness that has resulted in at least one of the following circumstances: (a) at least twice during the immediately preceding 48 months, poor compliance with mental health treatment has been a significant factor in causing the person to be hospitalized or receive services in the behavioral health unit of a detention facility or correctional facility; (b) poor compliance with mental health treatment has been a significant factor in causing the person to commit, attempt to commit or threaten to commit serious physical harm to himself or herself or others during the immediately preceding 48 months; or (c) poor compliance with mental health treatment has resulted in the person being hospitalized, incarcerated or detained for a cumulative period of at least 6 months; (4) because of his or her mental illness, the person is unwilling or unlikely to voluntarily participate in outpatient treatment that would enable the person to live safely in the community without the supervision of the court; and (5) assisted outpatient treatment is the least restrictive appropriate means to prevent further disability or deterioration that would result in the person becoming a person in a mental health crisis. The petition must also be accompanied by a sworn statement from a healthcare practitioner stating that he or she: (1) evaluated the person who is the subject of the petition not earlier than 10 days before the filing of the petition; (2) recommends that the person be ordered to receive assisted outpatient treatment; and (3) is willing and able to testify at a hearing on the petition of the motion.</li> </ul>
<b>Legal standard for hearing</b>	Clear and convincing evidence

<b><u>NEVADA</u></b>	
<b>Length of commitment</b>	Six months
<b>Renewal of commitment order</b>	The treatment facility/program may petition to renew the involuntary admission of the person for additional periods not to exceed six months each.
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	The person alleged to be a person in a mental health crisis or any relative or friend on the person's behalf is entitled to retain counsel to represent the person in any proceeding before the district court relating to involuntary court-ordered admission, and if he or she fails or refuses to obtain counsel, the court must advise the person and the person's guardian or next of kin, if known, of such right to counsel and must appoint counsel. The compensation must be charged against the estate of the person for whom the counsel was appointed or, if the person is indigent, against the county where the person alleged to be a person in a mental health crisis last resided.
<b>Recently proposed legislation</b>	None

<b><u>NEW HAMPSHIRE</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• N.H. REV. STAT. ANN. § 135-C:2 (West 2024) (definitions)</li> <li>• N.H. REV. STAT. ANN. § 135-C:20 through C:26 (involuntary admissions- general)</li> <li>• N.H. REV. STAT. ANN. § 135-C:34 through C: 54 (non-emergency involuntary admissions)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; continuous or noncontinuous periods of intoxication caused by substances such as alcohol or drugs, or the dependence upon or addiction to any substance such as alcohol or drugs is excluded from the definition of “mental illness.”
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any “responsible person”
<b>Time between the filing of the petition and the hearing</b>	Within 15 days, excluding Saturdays, Sundays, and legal holidays, from the date of receipt of the petition.
<b>Elements of the petition</b>	The petition must include: (1) the name of the person sought to be admitted and his or her last known address; (2) the specific acts or actions that the petitioner alleges satisfy the involuntary treatment standard; (3) a certificate from a physician, physician assistant, or advanced practice registered nurse who is approved by either a designated receiving facility or a community mental health program approved by the commissioner, who has examined the person sought to be admitted within five days of the date the petition is filed and who agrees that, based on this examination, such person satisfies the involuntary commitment standard; and (4) the names and addresses of witnesses who can testify to the occurrence of the specific acts or actions of the person sought to be admitted which the petitioner alleges.
<b>Legal standard for hearing</b>	Not specified
<b>Length of commitment</b>	Not specified, but the order is valid for five years. In any order for involuntary inpatient treatment, the court must include in the duration of the order an appropriate period of time, if any, to allow for conditional discharge.

<b><u>NEW HAMPSHIRE</u></b>	
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• For involuntary outpatient orders, the court will retain jurisdiction of the case for the duration of the order. At any time during the period of such order, any person may petition the court for a hearing on whether the order should be amended, or the person should be involuntarily admitted to a receiving facility.</li> <li>• For involuntary inpatient orders, the court may retain jurisdiction of the case for the duration of the order. The court may include in its order a provision requiring the petitioner or the receiving facility to show cause upon a date set by the court as to why the person has not been granted a conditional discharge. At such a proceeding, the burden will be upon the petitioner or the receiving facility to demonstrate by a preponderance of the evidence that either (1) the person has been offered a conditional discharge, the conditions of the discharge were reasonable and appropriate, and the person has not consented to those conditions; or (2) the person requires further inpatient treatment at the facility.</li> </ul>
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>The right of a client or a person sought to be admitted to a program or facility to legal counsel prior to and during any judicial hearing conducted under this chapter is absolute and unconditional. The right to legal counsel for any client or person sought to be admitted during any judicial proceeding will be waived only if the client or person sought to be admitted makes an informed decision to do so.</p> <p>The client or person sought to be admitted is required pay the costs of the legal services in connection with hearings. If the client or person sought to be admitted is unable to pay for counsel, the court must appoint either a member of New Hampshire Legal Assistance, or its successor organization, or another attorney who will be compensated at a rate as determined by the supreme court.</p>
<b>Recently proposed legislation</b>	None

<b><u>NEW JERSEY</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• N.J. STAT. ANN. § 30:4-27.2 (West 2024) (definitions)</li> <li>• N.J. STAT. ANN. § 30:4-27.10 through 27.22 (West 2024) (involuntary commitment procedures)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the term “mental illness” does not include “simple alcohol intoxication” or “a transitory reaction to drug ingestion.”
<b>Court of relevant jurisdiction</b>	Superior court or a municipal court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• A short-term care or psychiatric facility or a special psychiatric hospital can initiate court proceedings for involuntary commitment to inpatient or outpatient treatment.</li> <li>• A screening service or outpatient treatment provider can initiate court proceedings for commitment to outpatient treatment.</li> <li>• The Attorney General may initiate a court proceeding for the involuntary commitment to treatment of any person</li> </ul>
<b>Time between the filing of the petition and the hearing</b>	Within 20 days from initial commitment
<b>Elements of the petition</b>	The petition must include a clinical certificate completed by a psychiatrist on the patient’s treatment team.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Not specified



<b><u>NEW JERSEY</u></b>	
<b>Renewal of commitment order</b>	<p>A patient committed pursuant to a court order who is not administratively discharged is to be afforded periodic court review hearings regarding the need for involuntary commitment to treatment and of the least restrictive environment for that commitment.</p> <ul style="list-style-type: none"> <li>• For involuntary inpatient treatment, the court must conduct the first review hearing three months from the date of the first hearing, the next review hearing nine months from the date of the first hearing and subsequent review hearings 12 months from the date of the first hearing and annually thereafter. The court may schedule additional review hearings but, except in extraordinary circumstances, not more often than once every 30 days.</li> <li>• For involuntary outpatient treatment, the court must conduct the first review hearing six months from the date of the first hearing, the next review hearing nine months from the date of the first hearing and subsequent review hearings 12 months from the date of the first hearing and annually thereafter. The court may schedule additional review hearings but, except in extraordinary circumstances, not more often than once every 30 days.</li> </ul>
<b>Penalty for false petition</b>	<p>Any person who is a relative by blood or marriage of the person being screened who executes a clinical certificate, or any person who signs a clinical certificate for any purpose or motive other than for purposes of care, treatment and confinement of a person in need of involuntary commitment to treatment, shall be guilty of a crime of the fourth degree.</p>
<b>Additional provision(s) of note</b>	<p>A patient should not be presumed to be mentally incapacitated solely because of an examination or treatment for mental illness.</p> <p>A patient subject to involuntary commitment to treatment must have counsel present at the hearing and will not be permitted to appear at the hearing without counsel.</p> <p>A person discharged either by the court or administratively from an outpatient treatment provider, short-term care or psychiatric facility or special psychiatric hospital must have a discharge plan prepared by the treatment team at the facility or provider, as appropriate. The treatment team must give the patient an opportunity to participate in the formulation of the discharge plan.</p>

<b><u>NEW JERSEY</u></b>	
<b>Additional provision(s) of note (continued)</b>	The chief executive officer of a state or county psychiatric facility, or his or her designee, may authorize the payment of interim financial assistance to discharged patients for living expenses, pending determination of public benefits entitlements, when this assistance is necessary and appropriate pursuant to regulations adopted by the commissioner. When public benefit entitlements are received, discharged patients shall reimburse the psychiatric facility for all interim financial assistance provided.
<b>Recently proposed legislation</b>	Yes, see <a href="#">Pending State Legislation</a>

<b><u>NEW MEXICO</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• N.M. STAT. ANN. § 43-1-2 through 25 (West 2024) (involuntary inpatient treatment)</li> <li>• N.M. STAT. ANN. § 43-1B-1 through 14 (West 2024) (involuntary outpatient treatment)</li> </ul>
<b>Relevant substantive amendment(s)</b>	July 1, 2024 - provisions on involuntary outpatient treatment established
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the definition of “mental disorder” does not mention substance use disorder.
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• Inpatient, individual receiving emergency evaluation - A physician or evaluation facility can seek commitment of a client by filing a petition with the court within five days of the client’s admission for an emergency mental health evaluation.</li> <li>• Inpatient, individual not receiving an emergency evaluation - An interested person who reasonably believes that an adult is suffering from a mental disorder and presents a likelihood of serious harm to the adult's own self or others, but does not require emergency care, may request the district attorney to investigate and determine whether reasonable grounds exist to commit the adult.</li> <li>• Outpatient - A petition may be filed by: (1) a person 18 years of age or older who resides with the respondent; (2) the parent or spouse of the respondent; (3) the sibling or child or the respondent, provided that they are 18 years of age or older; (4) the director of a hospital where the respondent is hospitalized; (5) the director of a public or charitable organization or agency or a home where the respondent resides and that provides mental health services to the respondent; (6) a qualified professional who either supervises the treatment of or treats the respondent for a mental disorder or has supervised or treated the presented for a mental disorder within the past 48 months; or (7) a surrogate decision maker.</li> </ul>
<b>Time between the filing of the petition and the hearing</b>	<ul style="list-style-type: none"> <li>• Inpatient - Not less than five days from the date the petition is served</li> <li>• Outpatient - No sooner than three or later than seven days after the date of service</li> </ul>

<b><u>NEW MEXICO</u></b>	
<b>Elements of the petition</b>	<ul style="list-style-type: none"> <li>• Inpatient, individual receiving emergency evaluation - The petition must include a description of the specific behavior or symptoms of the client that evidence a likelihood of serious harm to the client or others and include an initial screening report by the evaluating physician individually or with the assistance of a mental health professional or, if a physician is not available, by a mental health professional acceptable to the court. The petition must also list the prospective witnesses for commitment and a summary of the matters to which they will testify.</li> <li>• Inpatient, individual not receiving an emergency evaluation - The applicant may present to the district attorney any medical reports or other evidence immediately available to the applicant but will not be required to obtain a medical report or other particular evidence in order to make a petition. If the district attorney determines that reasonable grounds exist to commit the adult, the district attorney may petition the court for a hearing.</li> <li>• Outpatient - The petition must include (1) each criterion for assisted outpatient treatment as set forth in § 43-1B-3; (2) facts that support the petitioner's belief that the respondent meets each criterion; and (3) whether the respondent is present or is reasonably believed to be present within the county where the petition is filed. The petition must also be accompanied by an affidavit of a qualified professional stating that (1) he or she personally examined the respondent no more than 10 days prior to the filing of the petition, that the qualified professional recommends assisted outpatient treatment for the respondent and that the qualified professional is willing and able to testify at the hearing on the petition either in person or by contemporaneous transmission from a different location; or (2) no more than 10 days prior to the filing of the petition, the qualified professional or the qualified professional's designee has unsuccessfully attempted to persuade the respondent to submit to an examination, that the qualified professional has reason to believe that the respondent meets the criteria for assisted outpatient treatment and that the qualified professional is willing and able to examine the respondent and testify at the hearing on the petition either in person or by contemporaneous transmission from a different location.</li> </ul>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient -30 days</li> <li>• Outpatient - one year</li> </ul>

<b><u>NEW MEXICO</u></b>	
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient - A physician or evaluation facility may file a petition for extended commitment within 21 days after the beginning of the 30-day commitment. The petition must explain the necessity for extended commitment, specify the treatment that has been provided during the evaluation, and include an individual treatment plan for the proposed commitment period. The petition must also list the prospective witnesses for commitment and a summary of the matters to which they will testify. If, at the conclusion of the hearing, the court determines by clear and convincing evidence that the client presents a likelihood of harm to the client's self or to others, that extended treatment is likely to improve the client's condition and that the proposed extended commitment is consistent with the least drastic means principle, the court can order commitment of the client for a period not to exceed six months, except that when the client has been committed for two consecutive periods of commitment, any commitment commencing thereafter must not exceed one year. At the expiration of the commitment order, the client may be detained only after a new commitment hearing, unless waived after consultation with the client's attorney, and entry of a new order for commitment not to exceed six months.</li> <li>• Outpatient - Prior to the expiration of the period of assisted outpatient treatment, a party or the respondent's surrogate decision-maker may apply to the court for a subsequent order authorizing continued assisted outpatient treatment for a period not to exceed one year.</li> </ul>
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	Clients are to be represented by counsel at all proceedings and are entitled to obtain advice of counsel at any time regarding their status. The court must appoint counsel to represent a client who has not retained counsel and is unable to do so. When appointing counsel, the court must give preference to nonprofit organizations offering representation to persons with a mental illness or a developmental disability. A client will be liable for the cost of legal representation unless the client is indigent.

<b><u>NEW MEXICO</u></b>	
<b>Additional provision(s) of note (continued)</b>	<p>Neither the fact that a person has been accepted at or admitted to a hospital or institutional facility, nor the receiving of mental health or developmental disability treatment services, will constitute a sufficient basis for a finding of incompetence or the denial of any right or benefit of whatever nature which he or she would have otherwise.</p> <p>Clients who are indigent may receive care and treatment at state-operated facilities without charge.</p> <p>An assisted outpatient treatment order is not to be construed as a determination that the respondent is incompetent.</p>
<b>Recently proposed legislation</b>	Yes, see <a href="#">Pending State Legislation</a>

<b><u>NEW YORK</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• N.Y. MENTAL HYG. § 1.03 (McKinney 2024) (definitions pertaining to the department of mental hygiene)</li> <li>• N.Y. MENTAL HYG. § 9.01 (McKinney 2024) (definitions pertaining to the hospitalization of a person with a mental illness)</li> <li>• N.Y. MENTAL HYG. § 9.27, <i>et seq.</i> (McKinney 2024) (involuntary admission)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; substance use disorder is not mentioned within the definition of “mentally illness.” However, if a person is examined and determined to be mentally ill, the fact that such person suffers from “alcohol or substance abuse” does not preclude commitment.
<b>Court of relevant jurisdiction</b>	Supreme court or county court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	<ul style="list-style-type: none"> <li>• Inpatient - The petition may be executed by any one of the following: (1) any person with whom the person alleged to be mentally ill resides; (2) the father or mother, husband or wife, brother or sister, or the child of any such person or the nearest available relative; (3) the committee of such person; (4) an officer of any public or well recognized charitable institution or agency or home, including but not limited to the superintendent of a correctional facility, in whose institution the person alleged to be mentally ill resides and the designee authorized by the commissioner of the department of corrections and community supervision responsible for community supervision in the region where such person alleged to be mentally ill has been released to any form of supervision following incarceration; (5) the director of community services or social services official of the city or county in which any such person may be; (6) the director of the hospital in which the patient is hospitalized; (7) the director or person in charge of a facility providing care to “alcoholics, or substance abusers or substance dependent persons;” (8) the director of the division of youth; (9) a social services official or authorized agency which has care and custody or guardianship and custody of a child over the age of 16; (10) subject to the terms of any court order a person or entity having custody of a child pursuant to an order; or (11) a qualified psychiatrist who is either supervising the treatment of or treating such person for a mental illness in a facility licensed or operated by the office of mental health.</li> </ul>

<b><u>NEW YORK</u></b>	
<b>Who may petition? (continued)</b>	<ul style="list-style-type: none"> <li>• Outpatient - (1) any person 18 years of age or older with whom the subject of the petition resides; (2) the parent, spouse, sibling, or child 18 years of age or older of the subject of the petition; (3) the director of a hospital in which the subject of the petition is hospitalized; (4) the director of any public or charitable organization, agency or home providing mental health services to the subject of the petition or in whose institution the subject of the petition resides; (5) a psychiatrist who is either supervising the treatment of or treating the subject of the petition for a mental illness; (6) a psychologist or social worker who is treatment the subject of the petition for mental illness; (7) the director of community services, or his or her designee, or the social services official of the city or county in which the subject of the petition is present or reasonably believed to be present; (9) or a parole or probation officer assigned to supervise the subject of the petition.</li> </ul>
<b>Time between the filing of the petition and the hearing</b>	<ul style="list-style-type: none"> <li>• Inpatient - not later than five days from the date the court is given notice for a request for such hearing</li> <li>• Outpatient - no later than three days from the date such petition is received by the court, excluding Saturdays, Sundays, and holidays.</li> </ul>
<b>Elements of the petition</b>	<ul style="list-style-type: none"> <li>• Inpatient - The petition must be executed within 10 days prior to such admission and must contain a statement of the facts upon which the allegation of mental illness and need for care and treatment are based and be executed under penalty of perjury but it does not require the signature of a notary public thereon. The petition must be accompanied by the certificates of two examining physicians.</li> </ul>



<b><u>NEW YORK</u></b>	
<b>Elements of the petition (continued)</b>	<ul style="list-style-type: none"> <li>Outpatient - The petition must state the facts which support the petitioner's belief that the subject of the petition meets the criteria for assisted outpatient treatment and that the subject of the petition is present, or is reasonably believed to be present, within the county where such petition is filed. The petition must be accompanied by an affirmation or affidavit of a physician, who cannot be the petitioner, stating either that: (1) he or she has personally examined the subject of the petition no more than 10 days prior to the submission of the petition, recommends assisted outpatient treatment for the subject of the petition, and is willing and able to testify at the hearing on the petition; or (2) no more than 10 days prior to the filing of the petition, such physician or his or her designee has made appropriate attempts but has not been successful in eliciting the cooperation of the subject of the petition to submit to an examination, such physician has reason to suspect that the subject of the petition meets the criteria for assisted outpatient treatment, and such physician is willing and able to examine the subject of the petition and testify at the hearing on the petition.</li> </ul>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>Inpatient - six months</li> <li>Outpatient - one year</li> </ul>
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>Inpatient - The period for the further continued retention of the patient authorized by any subsequent order shall be for periods not to exceed two years each from the date of the order.</li> <li>Outpatient - Within 30 days prior to the expiration of an order of assisted outpatient treatment, the program director may petition the court to order continued assisted outpatient treatment for a period not to exceed one year from the expiration date of the current order.</li> </ul>
<b>Penalty for false petition</b>	<ul style="list-style-type: none"> <li>Inpatient - Penalty of perjury</li> <li>Outpatient - A person making a false statement or providing false information or false testimony in a petition or hearing will be subject to criminal prosecution</li> </ul>

<b><u>NEW YORK</u></b>	
<b>Additional provision(s) of note</b>	<p>The subject of the petition will have the right to be represented by the mental hygiene legal service, or privately financed counsel, at all stages of a proceeding.</p> <p>The office of mental health, in consultation with the office of court administration, is required to prepare educational and training materials on the use of involuntary assisted outpatient treatment, which are to be made available to local governmental units, providers of services, judges, court personnel, law enforcement officials and the general public.</p>
<b>Recently proposed legislation</b>	Yes, see <a href="#">Pending State Legislation</a>

<b><u>NORTH CAROLINA</u></b>	
<b>Statute(s)</b>	N.C. GEN. STAT. ANN. § 122C-281 through 294 (West 2024)
<b>Relevant substantive amendment(s)</b>	October 1, 2019 amendment added a reporting requirement to § 122C-294
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; “substance abusers” may be involuntarily committed.
<b>Court of relevant jurisdiction</b>	Superior court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Anyone with knowledge of “a substance abuser who is dangerous to self or others”
<b>Time between the filing of the petition and the hearing</b>	Within 10 days of the day the respondent is taken into custody for evaluation
<b>Elements of the petition</b>	The affidavit must include the facts on which the affiant’s opinion is based.
<b>Legal standard for hearing</b>	“Clear, cogent, and convincing evidence”
<b>Length of commitment</b>	Up to 180 days. Respondents that are to be held in an inpatient facility for longer than 45 consecutive days are subject to a supplemental hearing in which the court will determine if the respondent continues to meet the criteria for commitment. If the court determines that the respondent continues to meet the criteria and that further treatment in the inpatient facility is necessary, the court may authorize continued care in the facility for not more than 90 days, after which a rehearing for the purpose of determining the need for continued care in the inpatient facility will be held, or the court may order the respondent released from the inpatient facility and continued on the commitment on an outpatient basis.
<b>Renewal of commitment order</b>	Fifteen days before the end of the initial or subsequent periods of commitment, the facility or physician treating the respondent must notify the clerk of the superior court if the respondent continues to meet the criteria for commitment. If the respondent continues to meet the criteria for commitment, the court may order additional commitment periods not in excess of 365 days each.
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>NORTH CAROLINA</u></b>	
<b>Additional provision(s) of note</b>	<p>The respondent may be represented by his or her counsel of choice. If the respondent is indigent, counsel must be appointed to represent the respondent in accordance with rules adopted by the Office of Indigent Defense Services.</p> <p>The hearing is to be closed to the public unless the respondent requests otherwise.</p> <p>The Department of Health and Human Services must provide the data collected by the Division of Mental Health, Developmental Disabilities, and Substance Use Services concerning the number of respondents receiving treatment under involuntary commitment in designated facilities to the Fiscal Research Division and the Joint Legislative Oversight Committee for Health and Human Services on October 1 of each year</p>
<b>Recently proposed legislation</b>	None

<b><u>NORTH DAKOTA</u></b>	
<b>Statute(s)</b>	N.D. CENT. CODE ANN. § 25-03.1-01, <i>et seq.</i> (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; “person requiring treatment” is defined as a person who is mentally ill or an individual with a substance use disorder.
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Anyone 18 years of age or older
<b>Time between the filing of the petition and the hearing</b>	Within 14 days of the preliminary hearing. If the preliminary hearing is not required, the involuntary treatment hearing must be held within four days, exclusive of weekends and holidays, of the date the court received the expert examiner's report, not to exceed 14 days from the time the petition was served.
<b>Elements of the petition</b>	The petition must state: (1) assertions that the individual is a person requiring the treatment; (2) detailed facts that are the basis of that assertion; (3) the names, telephone numbers, and addresses of any witnesses to those facts; and (4) the name, telephone number, and address of the nearest relative or guardian of the respondent, or, if none, of a friend of the respondent. The petition may be accompanied by (1) a written statement supporting the petition from a tier 1 mental health professional or an addiction counselor who is practicing within the professional scope of practice and who has personally examined the respondent within forty-five days of the date of the petition and/or (2) one or more supporting affidavits otherwise corroborating the petition. In assisting the petitioner in completing the petition, the state's attorney may direct a tier 1 or tier 2 mental health professional designated by the regional human service center to investigate and evaluate the specific facts alleged by the petitioner.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days
<b>Renewal of commitment order</b>	If the director or superintendent believes a patient continues to require treatment, the director or superintendent, not less than fourteen days before the expiration of the initial order, can petition the court where the facility is located for a determination that the patient continues to be a person requiring treatment and for an order of continuing treatment, which may be for a period not to exceed one year.

<b><u>NORTH DAKOTA</u></b>	
<b>Penalty for false petition</b>	A person that makes a petition for involuntary treatment of an individual without having good cause to believe the individual is a person who is both mentally ill and has a substance use disorder and as a result is likely to cause serious harm to self or others is guilty of a class A misdemeanor.
<b>Additional provision(s) of note</b>	<p>The respondent has the right to counsel. If the court determines that the respondent is indigent, the court will order that appointed counsel be compensated from county funds of the county that is the respondent's place of residence in a reasonable amount based upon time and expenses. After notice and hearing, the court may order a respondent with appointed counsel to reimburse the county for expenditures made on the respondent's behalf.</p> <p>The judge must be notified if the respondent has been medicated within 24 hours of the beginning of the hearing or an adjourned session of the hearing, and of the probable effects of the medication.</p> <p>No determination that a person requires treatment, no court order authorizing hospitalization or alternative treatment, nor any form of admission to a hospital gives rise to a presumption of, constitutes a finding of, or operates as an adjudication of legal incompetence, or of the inability to give or withhold consent.</p>
<b>Recently proposed legislation</b>	None

<b><u>OHIO</u></b>	
<b>Statute(s)</b>	OHIO REV. CODE ANN. §§ 5119.90 to 5119.98 (West 2023)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; for a person experiencing alcohol or “other drug abuse”
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	A spouse, relative, or guardian of the individual for whom the petition is filed
<b>Time between the filing of the petition and the hearing</b>	Within seven days of the receipt of the petition
<b>Elements of the petition</b>	The petition must include: (1) the petitioner’s relationship to the respondent; (2) the respondent’s name, address, and current location; (3) the name and residence of the respondent’s parents, if living, or the respondent’s legal guardian, if any; (4) the name and residence of the respondent’s spouse, if any; (5) the name and residence of the person having custody of the respondent, if any, or if no such person is known, the name and residence of a near relative for a statement that the person is unknown; (6) the petitioner’s belief, including the factual basis for the belief, that the respondent is experiencing alcohol and other drug abuse and presents an imminent danger or imminent threat of danger to self, family, or others if not treated for alcohol or other drug abuse; and (7) if the petitioner believes that the respondent is experience “opioid or opiate abuse,” any evidence that the respondent has overdosed and been revived one or more times by an opioid antagonist, overdosed in a vehicle, or overdosed in the presence of a minor.

<b><u>OHIO</u></b>	
<b>Elements of the petition (continued)</b>	<p>The petition must be accompanied by a certificate from a physician who has examined the respondent within two days prior to the day that the petition is filed. The physician's certificate must: (1) set forth the physician's findings in support of the need to treat the respondent for alcohol or other drug abuse; (2) indicate if the respondent presents an imminent danger or imminent threat of danger to self, family, or others if not treated; and (3) indicate the type and length of treatment required and if the respondent can reasonably benefit from treatment. If the physician's certificate indicates that inpatient treatment is required, the certificate must identify any inpatient facilities known to the physician that are able and willing to provide the recommended inpatient treatment. If the respondent refuses to undergo an examination with a physician concerning the respondent's possible need for treatment for alcohol or other drug abuse, the petition must state that the respondent has refused all requests made by the petitioner to undergo a physician's examination. In that case, the petitioner will not be required to provide a physician's certificate with the petition.</p> <p>The petition must contain a statement that the petitioner has arranged for treatment of the respondent and be accompanied by a statement from the person or facility who has agreed to provide the treatment that verifies that the person or facility has agreed to provide the treatment and the estimated cost of the treatment. Additionally, the petition must be accompanied by (1) one of the following: (a) a security deposit to be deposited with the clerk of the probate court that will cover half of the estimated cost of treatment of the respondent; (b) documentation establishing that insurance coverage of the petitioner or respondent will cover at least half of the estimated cost of treatment of the respondent; or (c) other evidence to the satisfaction of the court establishing that the petitioner or respondent will be able to cover some of the estimated cost of treatment of the respondent; and (2) one of the following: (a) a guarantee, signed by the petitioner or another person authorized to file the petition, obligating the guarantor to pay the costs of the examinations of the respondent conducted by the physician and qualified health professional, the costs of the respondent that are associated with the hearing conducted, and the costs of any treatment ordered by the court; (b) documentation establishing that insurance coverage of the petitioner or respondent will cover the costs described; or (c) documentation establishing that the petitioner or respondent will cover some of the costs described.</p>
<b>Legal standard for hearing</b>	Clear and convincing evidence



<b><u>OHIO</u></b>	
<b>Length of commitment</b>	Not specified, but the court can require aftercare for three to six months.
<b>Renewal of commitment order</b>	Not addressed by statute
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>The respondent may retain counsel and, if the person is unable to obtain an attorney, the respondent may be represented by court-appointed counsel at public expense if the person is indigent.</p> <p>Each board of alcohol, drug addiction, and mental health services on at least an annual basis must submit to the clerk of the probate court a list of hospitals and treatment providers in the counties served by the board that are able and willing to provide treatment for alcohol and other drug abuse.</p>
<b>Recently proposed legislation</b>	None

<b><u>OKLAHOMA</u></b>	
<b>Statute(s)</b>	OKLA. STAT. ANN. tit. 43A, §§ 5-410 to 5-421 (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; a “person requiring treatment” includes an individual with a “drug or alcohol dependency”
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	<p>The following persons may file or request the district attorney to file a petition: (1) a treatment advocate; (2) the father, mother, husband, wife, grandparent, brother, sister, guardian, or child over the age of 18 of the individual; (3) a licensed mental health professional; (4) a person in charge of any correctional institution; (5) any peace officer within the county in which the individual resides or may be found; or (6) the district attorney.</p> <p>Petitions filed to determine if an individual should be ordered to assisted outpatient treatment can only be filed by a licensed mental health professional employed by the Department of Mental Health and Substance Abuse Services or employed by a community mental health center certified by the Department.</p>
<b>Time between the filing of the petition and the hearing</b>	Not specified, but if the respondent requests a jury trial, the court must schedule the trial within five days of the demand, excluding weekends and holidays.
<b>Elements of the petition</b>	The petition must contain a statement of the facts upon which the allegation is based and, if known, the names and addresses of any witnesses to the alleged facts.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Inpatient - not specified, but the court must review the respondent’s involuntary commitment status at least once every three months. Outpatient - one year
<b>Renewal of commitment order</b>	Outpatient - Within 30 days prior to the expiration of the order, a licensed mental health professional employed by the Department of Mental Health and Substance Abuse Services or employed by a community mental health center certified by the Department may file a petition to extend the order of outpatient treatment. If the court finds the assisted outpatient treatment should continue, it will make such an order extending the assisted treatment an additional year and order the treatment plan updated as necessary. Subsequent extensions of the order may be obtained in the same manner.

<b><u>OKLAHOMA</u></b>	
<b>Penalty for false petition</b>	Penalty of perjury
<b>Additional provision(s) of note</b>	<p>The respondent has the right to counsel, including court-appointed counsel, and if the person has no counsel, that the court must appoint an attorney to represent the person at no cost if the person is an indigent person and cannot afford an attorney.</p> <p>The respondent has the right to a closed hearing, unless he or she requests otherwise.</p> <p>The respondent has the right to a jury trial, upon request. The jury, if requested, will be composed of six people.</p>
<b>Recently proposed legislation</b>	None

<b><u>OREGON</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• OR. REV. STAT. ANN. § 426.005 (West 2024) (definitions)</li> <li>• OR. REV. STAT. ANN. §§ 426.070 through 170 (West 2024) (involuntary commitment procedure)</li> <li>• OR. REV. STAT. ANN. §§ 426.301 and 426.307 (West 2024) (renewal of commitment)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the definition of “person with mental illness” does not include substance use disorder.
<b>Court of relevant jurisdiction</b>	Circuit court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	The following may initiate a commitment procedure: (1) two persons; (2) the local health officer; or (3) any magistrate or judge of a court of a federally recognized Indian tribe located in this state.
<b>Time between the filing of the petition and the hearing</b>	Five judicial days from the day a court issues a citation to the respondent
<b>Elements of the petition</b>	The petition must: (1) be in writing under oath; (2) be given to the community mental health program director or a designee of the director in the county where the person alleged to have a mental illness resides; (3) state that the respondent is a person with mental illness and is in need of treatment, care, or custody. If the petition is initiated by two individuals, the petition must include the addresses of the two individuals making the request.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient - 180 days</li> <li>• Outpatient - 12 months</li> </ul>
<b>Renewal of commitment order</b>	At the end of the 180-day period of commitment, any person whose status has not been changed to voluntary shall be released unless the Oregon Health Authority certifies to the court in the county where the treating facility is located that the person is still a person with mental illness and is in need of further treatment. The court can order an additional period of commitment for up to 180 days.
<b>Penalty for false petition</b>	Penalty of perjury

<b><u>OREGON</u></b>	
<b>Additional provision(s) of note</b>	<p>The court must be fully advised of all drugs and other treatment known to have been administered to the person alleged to have a mental illness that may substantially affect the ability of the person to prepare for or function effectively at the hearing.</p> <p>The respondent has the right to obtain suitable legal counsel possessing skills and experience commensurate with the nature of the allegations and complexity of the case during the proceedings. If the respondent is determined to be financially eligible for appointed counsel at state expense, the court will appoint legal counsel to represent him or her. If no request for legal counsel is made, the court must appoint suitable legal counsel unless the respondent expressly, knowingly, and intelligently refuses counsel.</p> <p>A person, other than a person incarcerated upon a criminal charge, who has been adjudged to be a person with mental illness or against whom commitment proceedings have been instituted may not be confined in any prison, jail or other enclosure where those charged with a crime or a violation of a municipal ordinance are incarcerated, unless the person represents an immediate and serious danger to staff or physical facilities of a hospital or other facility approved by the Oregon Health Authority for the care, custody and treatment of the person.</p>
<b>Recently proposed legislation</b>	None

<b><u>PENNSYLVANIA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>PA. STAT. &amp; CONS. STAT. tit. 50 § 4102 (West 2024) (definitions)</li> <li>PA. STAT. &amp; CONS. STAT. tit. 50 §§ 7301 to 7306 (West 2024) (involuntary commitment procedure)</li> </ul>
<b>Relevant substantive amendment(s)</b>	April 22, 2024 amendment added provisions for involuntary outpatient treatment.
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the definition of “mental disability” does not include substance use disorder.
<b>Court of relevant jurisdiction</b>	Court of common pleas
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any responsible party
<b>Time between the filing of the petition and the hearing</b>	“As soon as practicable”
<b>Elements of the petition</b>	<ul style="list-style-type: none"> <li>Inpatient - The petition must be in writing and set for the facts constituting reasonable grounds to believe that the respondent is within the criteria for court-ordered treatment. The petition must also state the name of any examining physician and the substance of his or her opinion regarding the mental condition of the respondent.</li> <li>Outpatient - The petition must be in writing and set forth the facts constituting reasonable grounds to believe that the respondent is within the criteria for assisted outpatient treatment. The petition must be accompanied by a statement of a psychiatrist, or a statement signed by a clinical licensed psychologist, stating that he or she has examined the respondent and is of the opinion that the person is in needed of assisted outpatient treatment. Alternatively, the petition can be accompanied by a written statement by the petitioner, under oath, that the respondent has refused to submit to an examination by a psychiatrist or by a clinical licensed psychologist.</li> </ul>
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>Inpatient - 90 days</li> <li>Outpatient - 180 days</li> </ul>

<b><u>PENNSYLVANIA</u></b>	
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient - The court may order treatment for an additional period upon the application of the county administrator or the director of the facility in which the person is receiving treatment. The additional period of involuntary treatment must not exceed 180 days.</li> <li>• Outpatient - At the expiration of a period of assisted outpatient treatment, the court may order treatment for an additional period upon the application of the county administrator or the treatment team. The additional period of involuntary treatment must not exceed 180 days.</li> </ul>
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>The court must appoint an attorney to represent the respondent, unless the respondent can afford, and desires to have, private representation.</p> <p>The hearing is to be public unless it is requested to be private by the respondent or his or her counsel.</p>
<b>Recently proposed legislation</b>	Yes, see <a href="#">Pending State Legislation</a>

<b><u>RHODE ISLAND</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• R.I. GEN. LAWS ANN. § 23-1.10-12 (West 2024) (involuntary commitment procedure)</li> <li>• R.I. GEN. LAWS ANN. § 23-1.10-15 (West 2024) (payment)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes, but only for individuals with alcohol use disorder.
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	A spouse or guardian, a relative, a certifying physician, or the administrator in charge of any approved public treatment facility
<b>Time between the filing of the petition and the hearing</b>	No later than 10 days after the date the petition was filed
<b>Elements of the petition</b>	The petition must state that the person is an alcoholic who habitually lacks self-control as to the use of alcoholic beverages and that he or she: (1) has threatened, attempted, or inflicted physical harm on him or herself or another and that unless committed is likely to inflict physical harm on him or herself or another; or (2) will continue to suffer abnormal mental, emotional, or physical distress, will continue to deteriorate in ability to function independently if not treated, and is unable to make a rational and informed choice as to whether or not to submit to treatment, and as a result, poses a danger to himself or herself. The petition must also be accompanied by a certificate of a licensed physician who has examined the person within three days before submission of the petition, unless the person whose commitment is sought has refused to submit to a medication examination, in which case the fact of refusal must be alleged in the petition. The certificate must set forth the physician's findings in support of the allegations of the petition.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	30 days
<b>Renewal of commitment order</b>	The Department of Mental Health can obtain a court order for recommitment for a further period of 90 days. Only two recommitment orders are permitted.
<b>Penalty for false petition</b>	Not addressed by statute



<b><u>RHODE ISLAND</u></b>	
<b>Additional provision(s) of note</b>	<p>The person whose commitment or recommitment is sought has the right to be represented by counsel at every stage of any proceedings relating to his or her commitment and recommitment, and have counsel appointed by the court or provided by the court if he or she wants the assistance of counsel and is unable to obtain counsel. If the court believes that the person needs the assistance of counsel, the court shall require, by appointment if necessary, counsel for him or her regardless of his or her wishes.</p> <p>If treatment is provided by an approved public treatment facility and the patient has not paid the charge for that treatment, the department is entitled to any payment: (1) received by the patient or to which he or she may be entitled because of the services rendered; and (2) from any public or private source available to the department because of the treatment provided to the patient. A patient in an approved treatment facility, or the estate of the patient, or a person obligated to provide for the cost of treatment and having sufficient financial ability, is liable to the division for cost of maintenance and treatment of the patient in an approved treatment facility in accordance with established rates. The director shall adopt rules governing financial ability that take into consideration the income, savings, and other personal and real property of the person required to pay, and any support being furnished by him or her to any person he or she is required by law to support.</p>
<b>Recently proposed legislation</b>	Yes, see <a href="#">Pending State Legislation</a>

<b><u>SOUTH CAROLINA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• S.C. CODE ANN. § 44-52-10 (West 2024) (definitions)</li> <li>• S.C. CODE ANN. §§ 44-52-70 through 160 (West 2024) (involuntary commitment procedure)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; for individuals who are “chemically dependent.” “Chemical dependency” is defined as a chronic disorder manifested by repeated use of alcohol or other drugs to an extent that it interferes with a person's health, social, or economic functioning; some degree of habituation, dependence, or addiction may be implied.
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Inpatient treatment; outpatient treatment can be ordered following inpatient treatment.
<b>Who may petition?</b>	Any adult person or head of a treatment facility
<b>Time between the filing of the petition and the hearing</b>	Upon the filing of the petition, the court must fix a date for the hearing to be held not later than 20 days after the date of filing of the petition unless reasonable delay is sought for good cause shown.
<b>Elements of the petition</b>	The petition must state that the person is chemically dependent and in need of involuntary commitment. The petition must be accompanied by a certificate from a licensed physician stating that he or she has examined the individual within 48 hours before the filling of the petition, unless the individual has refused to submit to a medical exam in which case the fact of refusal must be alleged in the petition. The certificate of the physician must state that in his or her opinion, based upon stated reasons, the person is chemically dependent and in need of involuntary commitment for care and treatment.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days

<b><u>SOUTH CAROLINA</u></b>	
<b>Renewal of commitment order</b>	<p>The court can order treatment on an outpatient basis following inpatient treatment for a period of one year.</p> <p>If a person who was involuntarily committed violates the conditions of his release including a failure to adhere to an outpatient treatment program as ordered by the court, the court may, upon a written affidavit of the head of the treatment facility or the director of a treatment program under whose supervision the person was released, and upon notice to the person and his counsel, order a supplemental hearing and further order inpatient treatment. Any person with respect to whom further involuntary inpatient treatment is ordered as a result of the supplemental hearing, may be recommitted for a period of treatment not to exceed 60 days.</p>
<b>Penalty for false petition</b>	Penalty of perjury
<b>Additional provision(s) of note</b>	<p>A person taken into custody for the purpose of examination may not be placed in a jail or other correctional facility except for protective custody purposes.</p> <p>The person for whom involuntary commitment is sought must be represented by counsel at all stages of the proceeding. If the individual cannot afford to hire an attorney, the court shall appoint an attorney to represent him.</p>
<b>Recently proposed legislation</b>	None

<b><u>SOUTH DAKOTA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• S.D. CODIFIED LAWS § 34-20A-2 (West 2024) (definitions)</li> <li>• S.D. CODIFIED LAWS § 34-20A-70 through 34-20A-89 (West 2024) (involuntary commitment procedure)</li> </ul>
<b>Relevant substantive amendment(s)</b>	July 1, 2023 amendment modified the requirements for the certificate accompanying the petition.
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; an individual who is an “alcoholic or drug abuser” can be involuntarily committed.
<b>Court of relevant jurisdiction</b>	Circuit court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	A spouse, guardian, relative, physician, administrator of an approved treatment facility, or “any other responsible person.”
<b>Time between the filing of the petition and the hearing</b>	No later than ten days, excluding Saturdays, Sundays, and legal holidays, after the date the petition was filed
<b>Elements of the petition</b>	The petition must state that the person is an alcoholic or drug abuser who habitually lacks self-control as to the use of alcoholic beverages or other drugs and: (1) has threatened, attempted, or inflicted physical harm on him or herself or another and that unless committed is likely to inflict harm on him or herself or on another; (2) is incapacitated by the effects of alcohol or drugs; or (3) is pregnant and abusing alcohol or drugs. The petition must be accompanied by a certificate from a licensed physician or an addiction counselor who has examined the person within five days before submission of the petition, unless the person has refused to submit to an examination. If the person has refused to submit to an examination, the fact of refusal must be alleged in the petition. The certificate must set forth the physician's or the addiction counselor's findings in support of the allegations of the petition and a level of care recommendation for substance use treatment. An admitting facility may not provide treatment to the person whose commitment is sought if the physician or addiction counselor who provides the certificate is employed by the admitting facility, unless the person to be committed requests to receive treatment at the facility.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days

<b><u>SOUTH DAKOTA</u></b>	
<b>Renewal of commitment order</b>	The administrator or an authorized designee of the facility to which the patient is committed can seek a court order for recommitment for a further period of 90 days. Only two recommitment orders are permitted.
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment.</p> <p>The circuit court judge, upon receipt of a written application prepared by the clerk of courts, must appoint an attorney to represent the applicant. The appointed attorney is to be paid by the county where the hearing and commitment proceedings are taking place at a rate to be fixed by the circuit judge. The county is to be reimbursed for such expense by the petitioner, if the petitioner is a family member and is financially able to do so.</p> <p>Upon service of the petition, the person whose commitment is sought must be notified, in writing, of the person's right to be represented by counsel at every stage of any proceedings relating to commitment, and that if the person is unable to obtain counsel, the court may appoint one to the person. If the court believes that the person needs the assistance of counsel, the court shall require, by appointment if necessary, counsel for him or her regardless of his or her wishes.</p> <p>If an approved treatment facility provides treatment to a person who was involuntarily committed, the approved treatment facility may assess the payment for treatment to the person, to legally responsible relatives, to a conservator, or to the county of residence if indigent, or may bill the department through contract with the approved treatment facility.</p>
<b>Recently proposed legislation</b>	None

<b><u>TENNESSEE</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• TENN. CODE ANN. § 33-1-101 (West 2024) (definitions)</li> <li>• TENN. CODE ANN. §§ 33-6-501 through 33-6-510 (West 2024) (inpatient involuntary commitment)</li> <li>• TENN. CODE ANN. §§ 33-6-601 through 33-6-624 (West 2024) (outpatient involuntary commitment)</li> <li>• TENN. CODE ANN. § 33-6-701 (West 2024) (inpatient discharge)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; the definition of “mental illness” includes “alcohol dependence” and “drug dependence”
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	Inpatient treatment. Hospital staff can obligate a patient to participate in outpatient treatment upon discharge from inpatient treatment.
<b>Who may petition?</b>	A parent, legal guardian, legal custodian, conservator, spouse, or a responsible relative of the person alleged to be in need of care and treatment, a licensed physician, a licensed psychologist, a health or public welfare officer, an officer authorized to make arrests in the state, or the chief officer of a facility in which the person currently is being treated
<b>Time between the filing of the petition and the hearing</b>	Not specified

<b><u>TENNESSEE</u></b>	
<b>Elements of the petition</b>	The petition must state that: (1) the person has a mental illness or serious emotional disturbance; (2) the person poses a substantial likelihood of serious harm (defined as when the person has threatened or attempted suicide or to inflict serious bodily harm on the person; threatened or attempted homicide or other violent behavior; placed others in reasonable fear of violent behavior and serious physical harm; or is unable to avoid severe impairment or injury from specific risks; and there is a substantial likelihood that the harm will occur unless the person is placed under involuntary treatment, because of the mental illness or serious emotional disturbance); (3) the person needs care, training, or treatment because of the mental illness or serious emotional disturbance; and (4) all available less drastic alternatives to placement in a hospital or treatment resource are unsuitable to meet the needs of the person. Two physicians; one physician and one psychologist; or one physician and one qualified advanced practice provider must file certificates of need for care and treatment certifying that the defendants satisfies the criteria for involuntary commitment and showing the factual foundation for the conclusions on each item.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient - Not specified, but the chief officer of the public or private hospital must, as often as practicable, but not less than every six months, examine the patient to determine if he or she is eligible for discharge.</li> <li>• Outpatient - Six months</li> </ul>
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient - Not specified</li> <li>• Outpatient - Obligation to participate in outpatient treatment can be renewed for six months.</li> </ul>
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	None
<b>Recently proposed legislation</b>	None

<b><u>TEXAS</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• TEX. HEALTH AND SAFETY CODE § 462.001 (West 2024) (definitions)</li> <li>• TEX. HEALTH AND SAFETY CODE §§ 462.061 to 462.080 (West 2024) (court-ordered treatment)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; individuals with a “chemical dependency” can be involuntarily committed.
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	A county or district attorney or any other adult
<b>Time between the filing of the petition and the hearing</b>	Within 14 days after the date on which the petition is filed
<b>Elements of the petition</b>	The petition must state: (1) the person’s name and address; (2) that the proposed patient is a person with a chemical dependency who: (a) is likely to cause serious harm to the person or others; or (b) will continue to suffer abnormal mental, emotional, or physical distress, will continue to deteriorate in ability to function independently if not treated, and is unable to make a rational and informed choice as to whether to submit to treatment; and (3) that the proposed patient is not charged with a criminal offense that involves an act, attempt, or threat of serious bodily injury to another person. The petition must use the initials of the proposed patient and not the proposed patient’s full name. Only the district or county attorney may file an application that is not accompanied by a certificate of medical examination for chemical dependency.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days
<b>Renewal of commitment order</b>	A petitioner who has reasonable cause to believe that a patient remains chemically dependent and that, because of the chemical dependency, the patient is likely to cause serious physical harm to himself or others may file a petition to renew the original order for court-ordered treatment. The application must be accompanied by two new certificates of medical examination for chemical dependency. An application for renewal is considered an original application for court-ordered treatment. The court can commit the proposed patient for a period of no more than 90 days.



<b><u>TEXAS</u></b>	
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>A hearing on court-ordered treatment must be before a jury unless the proposed patient and the proposed patient's attorney waive the right to a jury. The waiver may be filed at any time after the proposed patient is served with the application and receives notice of the hearing. The waiver must be in writing, under oath, and signed and sworn to by the proposed patient and the proposed patient's attorney.</p> <p>The court shall appoint an attorney to represent the proposed patient if the proposed patient does not retain an attorney of the proposed patient's choice.</p> <p>The proposed patient is entitled to elect to have the hearing open or closed to the public.</p>
<b>Recently proposed legislation</b>	None

<b><u>UTAH</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• UTAH CODE ANN. § 26B-5-301 (West 2024) (definitions)</li> <li>• UTAH CODE ANN. §§ 26B-5-330 through 26B-5-351 (West 2024) (involuntary commitment procedures)</li> </ul>
<b>Relevant substantive amendment(s)</b>	<ul style="list-style-type: none"> <li>• May 14, 2019 law established procedures for involuntary outpatient treatment.</li> <li>• May 1, 2024 amendment to § 26B-5-332 allowed psychiatric mental health nurse practitioners to perform the court ordered examination of the proposed patient. The amendment also established the requirement to provide patients with discharge instructions.</li> </ul>
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the definition of “mental illness” does not mention substance use disorder.
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	A responsible individual who has credible knowledge of an adult's mental illness
<b>Time between the filing of the petition and the hearing</b>	Within 10 calendar days after the day on which the designated examiners are appointed
<b>Elements of the petition</b>	The petition must be a written application that includes the proposed patient’s name, date of birth, and social security number. The petition must include a certificate from a licensed physician or a designated examiner stating that within seven days immediately preceding the certification, the physician or designated examiner examined the proposed patient and is of the opinion that the proposed patient has a mental illness and should be involuntarily committed. Alternatively, the petition can include a written statement by the petitioner sworn to under oath stating that the proposed patient has been requested to, but has refused to, submit to an examination of mental condition by a physician or designated examiner and providing the facts upon which the application is based. The petition must also include a statement whether the proposed patient has previously been under an assisted outpatient treatment order.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient - Six months</li> <li>• Outpatient - 12 months</li> </ul>

<b><u>UTAH</u></b>	
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient - Before the expiration of the commitment order, the court must conduct a review hearing. If the court finds that the patient still meets the criteria for involuntary commitment, then it can issue an order for commitment for an indeterminate period. The local mental health authority or the local mental health authority's designee responsible for the care of a patient under an order of commitment for an indeterminate period must, at six-month intervals, reexamine the reasons upon which the order of indeterminate commitment was based.</li> <li>• Outpatient - At a review hearing, the court may extend the duration of an involuntary outpatient treatment order by up to 12 months.</li> </ul>
<b>Penalty for false petition</b>	Any person who attempts to place another person in the custody of a local mental health authority contrary to the provisions of Part 3 of the Utah Health and Human Services Code is guilty of a class B misdemeanor, in addition to liability in an action for damages, or subject to other criminal charges.
<b>Additional provision(s) of note</b>	<p>The court must provide the proposed patient an opportunity to be represented by counsel, and if neither the proposed patient nor others provide counsel, the court must appoint counsel and allow counsel sufficient time to consult with the proposed patient before the hearing. In the case of an indigent proposed patient, the county in which the proposed patient resides or is found shall make payment of reasonable attorney fees for counsel, as determined by the court.</p> <p>The county in which the proposed patient resides or is found shall pay the costs of all involuntary commitment proceedings.</p>

<b><u>UTAH</u></b>	
<b>Additional provision(s) of note (continued)</b>	<p>A local mental health authority must provide discharge instructions to each individual committed at or before the time the individual is discharged from the local mental health authority's custody, regardless of the circumstances under which the individual is discharged. The discharge instructions must include: (1) a summary of why the individual was committed to the local mental health authority; (2) detailed information about why the individual is being discharged from the local mental health authority's custody; (3) a safety plan for the individual based on the individual's mental illness or mental or emotional state; (4) notification to the individual's primary care provider, if applicable; (5) if the individual is discharged without food, housing, or economic security, a referral to appropriate services, if such services exist in the individual's community; (6) the phone number to call or text for a crisis services hotline, and information about the availability of peer support services; (7) a copy of any psychiatric advance directive presented to the local mental health authority, if applicable; (8) information about how to establish a psychiatric advance directive if one was not presented to the local mental health authority; (9) as applicable, information about medications that were changed or discontinued during the commitment; (10) a list of any screening or diagnostic tests conducted during the commitment; (11) a summary of therapeutic treatments provided during the commitment; (12) any laboratory work, including blood samples or imaging, that was completed or attempted during the commitment; and (13) information about how to contact the local mental health authority if needed.</p> <p>A health insurance provider may not deny an insured the benefits of the insured's policy solely because the health care that the insured receives is provided under a court order for assisted outpatient treatment.</p>
<b>Recently proposed legislation</b>	Yes, see <a href="#">Pending State Legislation</a>

<b><u>VERMONT</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>VT. STAT. ANN. tit. 18 §§ 8401 through 8405 (West 2024) (mentally ill users of alcohol or drugs)</li> <li>VT. STAT. ANN. tit. 18 §§ 7611 through 7629 (West 2024) (involuntary commitment procedure)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; a “drug addict” may be admitted to a designated hospital and provided with care and treatment in the same manner and under the same conditions as a mental ill person. The law defines “drug addict” as a person who shows signs of mental illness because of his or her use of drugs, hallucinogens, stimulants, or sedatives or who has an uncontrollable desire for their use or consumption.
<b>Court of relevant jurisdiction</b>	Family division of the Superior Court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any interested party
<b>Time between the filing of the petition and the hearing</b>	Within 10 days from the date of the receipt of the application or 20 days from the date of the receipt of the application if a psychiatric examination is ordered
<b>Elements of the petition</b>	The written petition must contain the name and address of the applicant and a statement of the current and relevant facts upon which the allegations of mental illness and need for treatment is based. The application is to be signed by the applicant under penalty of perjury. The application must be accompanied by a certificate of a licensed physician, which shall be executed under penalty of perjury stating that the physician has examined the proposed patient within five days after the date the petition is filed and is of the opinion that the proposed patient is a person in need of treatment, including the current and relevant facts and circumstances upon which the physician's opinion is based, or a written statement by the applicant that the proposed patient refused to submit to an examination by a licensed physician.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days

<b><u>VERMONT</u></b>	
<b>Renewal of commitment order</b>	If, prior to the expiration of an involuntary commitment order, the Commissioner of Mental Health believes that the condition of the patient is such that the patient continues to require treatment, the Commissioner can apply to the court for a determination that the patient is a patient in need of further treatment and for an order of continued treatment. If the court finds that the patient is in need of further treatment, it can issue an order for further treatment for up to one year.
<b>Penalty for false petition</b>	Penalty of perjury
<b>Additional provision(s) of note</b>	When the application is filed, the court shall appoint counsel for the proposed patient.
<b>Recently proposed legislation</b>	Yes, see <a href="#">Pending State Legislation</a>

<b><u>VIRGINIA</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• VA. CODE ANN. § 37.2-800 (West 2024) (definitions)</li> <li>• VA. CODE ANN. § 37.2-814 through 37.2-828 (West 2024) (involuntary commitment procedures)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; the definition of “mental illness” includes “substance abuse”
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any responsible person which includes a family member, a community services board or behavioral health authority, any treating physician of the person, a certified evaluator, or a law-enforcement officer
<b>Time between the filing of the petition and the hearing</b>	Within 72 hours of the execution of the temporary detention; however, if the 72-hour period herein specified terminates on a Saturday, Sunday, legal holiday, or day on which the court is lawfully closed, the person may be detained, as herein provided, until the close of business on the next day that is not a Saturday, Sunday, legal holiday, or day on which the court is lawfully closed.
<b>Elements of the petition</b>	Not specified
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient - 30 days</li> <li>• Outpatient - 180 days</li> </ul>
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient - Upon expiration of an order for involuntary inpatient admission, the individual may be recommitted to additional inpatient treatment or outpatient treatment upon further petition and order of the court for a period not to exceed 180 days. The director of a state facility shall conduct a review of the progress of each person admitted to the facility at intervals of 30, 60, and 90 days after admission of the person, and every six months thereafter to determine whether the person should be retained at the state facility.</li> </ul>

<b><u>VIRGINIA</u></b>	
<b>Renewal of commitment order (continued)</b>	<ul style="list-style-type: none"> <li>• Outpatient - At any time within 30 days prior to the expiration of a mandatory outpatient treatment order or order for mandatory outpatient treatment following a period of involuntary inpatient treatment, any person or entity that may file a petition for review of a mandatory outpatient treatment order or order for mandatory outpatient treatment following a period of involuntary inpatient treatment may petition the court to continue the order for a period not to exceed 180 days.</li> </ul>
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>The judge or special justice shall ascertain if the person whose admission is sought is represented by counsel, and, if he or she is not represented by counsel, the judge or special justice shall appoint an attorney to represent him. However, if the person requests an opportunity to employ counsel, the judge or special justice shall give him a reasonable opportunity to employ counsel at his own expense.</p> <p>The admission of any person to a facility shall not, of itself, create a presumption of legal incapacity.</p>
<b>Recently proposed legislation</b>	None



<b><u>WASHINGTON</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• WASH. REV. CODE ANN. § 71.05.010 (West 2024) (definitions)</li> <li>• WASH. REV. CODE ANN. § 71.05.100, <i>et seq.</i> (West 2024) (involuntary commitment procedure)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; a “behavioral health disorder” includes substance use disorders and co-occurring mental disorders and substance use disorders.
<b>Court of relevant jurisdiction</b>	Superior court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	A designated crisis responder, an immediate family member, a guardian, or a tribe if the person is a member of such a tribe. “Immediate family member” means a spouse, domestic partner, child, stepchild, parent, stepparent, grandparent, or sibling.
<b>Time between the filing of the petition and the hearing</b>	Within five judicial days after the petition is filed
<b>Elements of the petition</b>	The petition must be accompanied by a sworn declaration from the petitioner, and other witnesses, if desired, describe why the person should be detained for evaluation and treatment. The description of why the person should be detained may contain, but it not limited to, in the information identified in § 71.05.212. The petition must contain a description of the relationship between the petitioner and the person and the date on which an investigation was requested from the designated crisis responder.
<b>Legal standard for hearing</b>	Probable cause for initial detention; “clear, cogent, and convincing evidence” for continued detention
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient - 14 days</li> <li>• Outpatient - 90 days</li> </ul>
<b>Renewal of commitment order</b>	At any time during a person's 14-day intensive treatment period, the professional person in charge of a treatment facility or his or her professional designee or the designated crisis responder may petition the superior court for an order requiring such person to undergo an additional period of treatment. The petition for 90-day treatment must be filed with the clerk of the superior court at least three days before expiration of the 14-day period of intensive treatment.
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>WASHINGTON</u></b>	
<b>Additional provision(s) of note</b>	<p>Any person, or his or her estate, or his or her spouse, who is involuntarily detained pursuant to this chapter for the purpose of treatment and evaluation outside of a facility maintained and operated by the department of social and health services shall be responsible for the cost of such care and treatment. In the event that an individual is unable to pay for such treatment or in the event payment would result in a substantial hardship upon the individual or his or her family, then the county of residence of such person shall be responsible for such costs. If it is not possible to determine the county of residence of the person, the cost shall be borne by the county where the person was originally detained.</p> <p>The respondent has the right to be represented by an attorney and to have an attorney appointed if the person is indigent.</p> <p>The respondent has the right to refuse psychiatric medications, including antipsychotic medication, beginning 24 hours prior to the probable cause hearing.</p> <p>The respondent can request a jury trial for the continuation of treatment hearing.</p> <p>No indigent patient shall be conditionally released or discharged from involuntary treatment without suitable clothing, and the superintendent of a state hospital shall furnish the same, together with such sum of money as he or she deems necessary for the immediate welfare of the patient.</p> <p>When a person has been involuntarily committed for treatment to a hospital for a period of 90, and the superintendent or professional person in charge of the hospital determines that the person no longer requires active psychiatric treatment at an inpatient level of care, the behavioral health administrative services organization, managed care organization, or agency providing oversight of long-term care or developmental disability services that is responsible for resource management services for the person must work with the hospital to develop an individualized discharge plan, including whether a petition should be filed for less restrictive alternative treatment on the basis that the person is in need of assisted outpatient treatment, and arrange for a transition to the community in accordance with the person's individualized discharge plan within 14 days of the determination.</p>
<b>Recently proposed legislation</b>	None

<b><u>WEST VIRGINIA</u></b>	
<b>Statute(s)</b>	W. VA. CODE ANN. §§ 27-5-2 through 27-5-11 (West 2024)
<b>Relevant substantive amendment(s)</b>	June 10, 2022 amendment to § 27-5-4 specified that the legal standard for the final civil commitment hearing is clear and convincing evidence.
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	Circuit court or magistrate court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any adult
<b>Time between the filing of the petition and the hearing</b>	Not specified
<b>Elements of the petition</b>	The person making the application must do so under oath. The petition must contain statements by the applicant that the individual is likely to cause serious harm to self or others due to what the applicant believes are symptoms of mental illness or substance use disorder. The applicant must state in detail the recent overt acts upon which the clinical opinion is based. The applicant must file with his or her application the certificate of a physician or a psychologist stating that in his or her opinion the individual is mentally ill or has a substance use disorder and that because of the mental illness or substance use disorder, the individual is likely to cause serious harm to self or others and requires continued commitment and treatment, and should be hospitalized. The certificate must state in detail the recent overt acts on which the conclusion is based, including facts that less restrictive interventions and placements were considered but are not appropriate and available. A certificate is not necessary when an affidavit is filed by the applicant showing facts and the individual has refused to submit to examination by a physician or a psychologist.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	90 days

<b><u>WEST VIRGINIA</u></b>	
<b>Renewal of commitment order</b>	If the chief medical officer determines that the individual requires commitment and treatment at the mental health facility or state hospital at any time for a period longer than 90 days, then the individual will remain at the mental health facility or state hospital until the chief medical officer of the mental health facility or state hospital determines that the individual's clinical presentation no longer requires further commitment and treatment. The chief medical officer must provide notice to the court, the prosecuting attorney, the individual, and the individual's guardian or attorney, or both, if applicable, that the individual requires commitment and treatment for a period in excess of 90 days and, in the notice, the chief medical officer must describe how the individual continues to meet commitment criteria and the need for ongoing commitment and treatment. The court, prosecuting attorney, the individual, or the individual's guardian or attorney, or both, if applicable, may request any information from the chief medical officer that the court or prosecuting attorney considers appropriate to justify the need for the individual's ongoing commitment and treatment. The court may hold any hearing that it considers appropriate.
<b>Penalty for false petition</b>	Penalty of perjury
<b>Additional provision(s) of note</b>	The respondent has the right to consult and be represented by counsel at every stage of the proceeding. If the individual has not retained counsel, the court or mental hygiene commissioner, at least six days prior to hearing, shall appoint a competent attorney to represent him or her.
<b>Recently proposed legislation</b>	Yes, see <a href="#">Pending State Legislation</a>

<b><u>WISCONSIN</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• WIS. STAT. ANN. § 51.01 (West 2024) (definitions)</li> <li>• WIS. STAT. ANN. § 51.20 (West 2024) (involuntary commitment procedure)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; individuals that are “drug dependent” can be involuntarily committed. “Drug dependence” is defined as a disease that is characterized by a person's use of one or more drugs that is beyond the person's ability to control to the extent that the person's physical health is substantially impaired or his or her social or economic functioning is substantially disrupted.
<b>Court of relevant jurisdiction</b>	Probate court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any adult with personal knowledge of the behavior and signed by that person and two other adults.
<b>Time between the filing of the petition and the hearing</b>	<ul style="list-style-type: none"> <li>• Probable cause hearing - within 72 hours after the individual is taken into custody for emergency detention, excluding Saturdays, Sundays, and legal holidays. If the subject individual is not detained, then the court will schedule a hearing within a reasonable time of the filing of the petition.</li> <li>• If court determines that there is probable cause - A final hearing will be scheduled within 14 days from the time of detention of the subject individual. If the subject individual is not detained, the hearing will be scheduled within 30 days of the hearing to determine probable cause.</li> </ul>

<b><u>WISCONSIN</u></b>	
<b>Elements of the petition</b>	The petition must state that the person: (1) is mentally ill or drug dependent and would benefit from treatment; (2) is dangerous because he or she shows: (a) a substantial probability of physical harm to him or herself as evidenced by recent threats of or attempts at suicide or serious bodily harm; (b) a substantial probability of physical harm to other individuals as evidenced by recent homicidal or other violent behavior, or by evidence that others are placed in reasonable fear of violent behavior and serious physical harm to them, as evidenced by a recent overt act, attempt or threat to do serious physical harm; (c) impaired judgment, evidenced by a pattern of recent acts or omissions, that there is a substantial probability of physical impairment or injury to himself or herself or others; or (d) behavior in which he or she is unable to satisfy basic needs for nourishment, medical care, shelter or safety without prompt and adequate treatment so that a substantial probability exists that death, serious physical injury, serious physical debilitation, or serious physical disease will imminently ensue unless the individual receives prompt and adequate treatment for this mental illness. The petition must contain the names and mailing addresses of the petitioners and their relation to the subject individual and must also contain the names and mailing addresses of the individual's spouse, adult children, parents or guardian, custodian, brothers, sisters, person in the place of a parent and person with whom the individual resides or lives. If this information is unknown to the petitioners or inapplicable, the petition must state so. The petition must contain a clear and concise statement of the facts which constitute probable cause to believe the allegations of the petition. The petition is to be sworn to be true.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Six months
<b>Renewal of commitment order</b>	Subsequent consecutive orders of commitment may be for a period not to exceed one year. Every patient committed involuntarily is to be reevaluated by the treatment staff or visiting physician within 30 days after the commitment, within three months after the initial reevaluation, and again thereafter at least once every six months for the purpose of determining whether such patient has made sufficient progress to be entitled to transfer to a less restrictive facility or discharge.
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>WISCONSIN</u></b>	
<b>Additional provision(s) of note</b>	<p>At the time of the filing of the petition the court is to assure that the subject individual is represented by adversary counsel by referring the individual to the state public defender, who will appoint counsel for the individual without a determination of indigency.</p> <p>If a jury is demanded by the individual against whom a petition has been filed or by the individual's counsel if the individual does not object, the court will direct that a jury of six people be selected to determine if the allegations specified are true. A jury trial is deemed waived unless demanded at least 48 hours in advance of the time set for final hearing. No jury verdict will be valid or received unless agreed to by at least five of the jurors.</p> <p>Every hearing which is held under this section is to be open, unless the subject individual or the individual's attorney, acting with the individual's consent, moves that it be closed. If the hearing is closed, only individuals of interest, including representatives of providers of service and their attorneys and witnesses, may be present. If the subject individual is a minor, every hearing is to be closed unless an open hearing is demanded by the minor through his or her counsel.</p>
<b>Recently proposed legislation</b>	None

<b><u>WYOMING</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• WYO. STAT. ANN. § 25-10-101 (West 2024) (definitions)</li> <li>• WYO. STAT. ANN. §§ 25-10-110 through 25-10-129 (West 2024) (involuntary commitment procedure)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the definition of “mental illness” does not include addiction to drugs or alcohol, or drug or alcohol intoxication.
<b>Court of relevant jurisdiction</b>	District court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any individual
<b>Time between the filing of the petition and the hearing</b>	Not specified
<b>Elements of the petition</b>	The petition must be accompanied by either: (1) a certificate of an examiner stating: (a) that he or she has examined the proposed patient not more than 15 days prior to the date that the applicable was filed; (2) his or her findings and the proposed patient’s history; and (3) his or her opinion that the proposed patient is mentally ill; or (2) a written statement by the applicant and by an examiner that the proposed patient has refused to submit to examination by an examiner, together with a statement of the facts and circumstances supporting the petition.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient - Not specified, but three months after each patient's admission to the hospital, the head of the hospital must evaluate the progress of each patient and must reevaluate the treatment and progress every six months thereafter.</li> <li>• Outpatient - Two years; must be reviewed by the court every six months</li> </ul>
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient - When the head of a hospital determines after an evaluation that the conditions justifying hospitalization continue to exist, he or she must send the court notice of his or her determination and a detailed statement of the factual basis for the determination. The court may order a hearing to review the determination.</li> <li>• Outpatient - Not specified</li> </ul>



<b><u>WYOMING</u></b>	
<b>Penalty for false petition</b>	A person who willfully causes the unwarranted hospitalization of any individual is guilty of a felony punishable by a fine not exceeding \$5,000.00 or imprisonment not exceeding five years, or both.
<b>Additional provision(s) of note</b>	<p>Unless the proposed patient is represented by counsel, the court must appoint an attorney to represent him or her.</p> <p>Within five days of receipt of the notice of hearing, the proposed patient or his or her counsel may request a hearing before a jury.</p> <p>The county in which a person is detained or in which involuntary commitment proceedings are brought is to pay the costs of the proceedings for detention or involuntary commitment, including the cost of appointed counsel and examiners.</p> <p>The hospital or other treatment provider must attempt to recover all costs of treatment from public and private health insurance and from government benefit programs, including the veterans' administration, the Indian health service of the United States department of health and human services and any other federal agency that may be responsible for the costs of treatment, prior to seeking payment from the county or the state department of health.</p> <p>Admission to a hospital via involuntary commitment does not create any presumption with respect to the patient's mental or legal competency to exercise civil, contractual or other rights for which a legal standard of competency exists. Admission to a hospital via involuntary commitment is not sufficient cause for guardianship of the person or estate of any patient.</p>
<b>Recently proposed legislation</b>	None

<b><u>AMERICAN SAMOA</u></b>	
<b>Statute(s)</b>	AM. SAMOA CODE ANN. § 13.1501, <i>et seq.</i> (2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No. The law applies to individuals “suffering from mental illness or deficiency,” however, the law does not define “mental illness.”
<b>Court of relevant jurisdiction</b>	Trial division
<b>Type of treatment judge can order</b>	Inpatient treatment
<b>Who may petition?</b>	Any person
<b>Time between the filing of the petition and the hearing</b>	Within four court days from completion of the notification procedure following the submission of the petition
<b>Elements of the petition</b>	The petition must state the reasons for the need for involuntary commitment
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Not specified, but review hearings must be held at nine-month intervals following the original date of commitment.
<b>Renewal of commitment order</b>	Not specified
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	<p>At all stages of the commitment process, commencing with the second certificate of medical need for commitment and until ultimate release from commitment, the person about whom the court is considering commitment shall be represented by legal counsel, either of his or her own choosing at his or her own cost, or counsel appointed by the court.</p> <p>A presumption of legal incompetency shall exist with respect to any person committed under this chapter. The fact of the commitment shall not otherwise itself modify or vary any civil right of the person committed.</p>
<b>Recently proposed legislation</b>	None

<b><u>GUAM</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• 10 GUAM CODE ANN. § 82101 (West 2024) (definitions)</li> <li>• 10 GUAM CODE ANN. §§ 82201 through 82204 (West 2024) (evaluation procedure)</li> <li>• 10 GUAM CODE ANN. §§ 82301 through 82307 (West 2024) (involuntary inpatient commitment)</li> <li>• 10 GUAM CODE ANN. §§ 82501 through 82506 (West 2024) (inpatient involuntary commitment renewal)</li> <li>• 10 GUAM CODE ANN. § 82a101, et seq. (West 2024) (involuntary outpatient commitment)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the terms “mentally ill” and “mentally disordered” do not include a person suffering from “brief periods of intoxication caused by substances such as alcohol and drugs.”
<b>Court of relevant jurisdiction</b>	Superior court
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any person may bring another to the Guam Behavioral Health and Wellness Center or an emergency room of a hospital for examination by a qualified mental health professional.
<b>Time between the filing of the petition and the hearing</b>	Within 72 hours of the filing of the 28-day certificate

<b><u>GUAM</u></b>	
<b>Elements of the petition</b>	<ul style="list-style-type: none"> <li>• Inpatient - A qualified mental health professional must form an opinion as to whether the person does have a mental illness, and as a result thereof is a danger to self, a danger to others or gravely disabled. The findings of the examination are to be reduced to writing and recorded on the “72-hour hold application.” The application must specify the circumstances under which the person's condition was brought to the attention of the qualified health professional and his or her conclusion that there is probable cause that the person is a danger to self, a danger to others or gravely disabled as a result of a mental disorder. If at the end of the 72-hour evaluation period, the individual is still a danger to self, a danger to others or is gravely disabled because of a mental illness, he or she will remain in treatment and evaluation at the facility upon the written certification of two qualified mental health professionals that he is still in need of treatment.</li> <li>• Outpatient - A petition for involuntary outpatient treatment may be sought within the 72-hour hold as provided when initiated pursuant to § 82201.</li> </ul>
<b>Legal standard for hearing</b>	Not specified by statute
<b>Length of commitment</b>	<ul style="list-style-type: none"> <li>• Inpatient - 28 days</li> <li>• Outpatient - 180 days</li> </ul>
<b>Renewal of commitment order</b>	<ul style="list-style-type: none"> <li>• Inpatient - At any time during the 28-day intensive treatment period, the qualified medical professional in charge of the facility may petition the Superior Court for an order requiring the patient to undergo an additional period of treatment for up to 90 days. The person must be released from involuntary treatment at the expiration of the 90 days unless the qualified mental health professional staff of the facility in which he or she is confined files a new petition for post-certification treatment on the grounds that he or she has threatened, attempted, or inflicted physical harm on themselves or on another person during his or her period of post-certification treatment and he or she is a person, who, by reason of a mental illness, presents an imminent threat of substantial harm to others.</li> <li>• Outpatient - The process for renewing an involuntary outpatient treatment order is the same as the application for an original treatment order by petition. The first renewal may last up to 180 days and subsequent renewals may last up to 360 days.</li> </ul>
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>GUAM</u></b>	
<b>Additional provision(s) of note</b>	The court must appoint legal counsel to represent the person being detained.  For involuntary outpatient hearings, the hearing must be open to anyone unless the respondent requests that it be closed.
<b>Recently proposed legislation</b>	None

<b><u>NORTHERN MARIANA ISLANDS</u></b>	
<b>Statute(s)</b>	3 N. MAR. I. CODE § 2501, <i>et seq.</i> (2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	No; the definition of “mental illness” does not mention substance use disorder.
<b>Court of relevant jurisdiction</b>	Not specified
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any person
<b>Time between the filing of the petition and the hearing</b>	Not specified
<b>Elements of the petition</b>	The petition must include detailed information regarding the factual circumstances and observations constituting probable cause for involuntary psychiatric evaluation and treatment. The recent acts, Attempts, or threats evidencing dangerousness must be within 14 days of the filing of the petition for commitment.
<b>Legal standard for hearing</b>	Clear and convincing evidence

<b><u>NORTHERN MARIANA ISLANDS</u></b>	
<b>Length of commitment</b>	14 days
<b>Renewal of commitment order</b>	If the person is, at the time of the renewal or extension hearing, mentally ill and a danger to self or others, the court may grant a renewal or extension of the commitment for up to 60 days. For purposes of this section, the recent overt acts evidencing dangerousness must be within 30 days of each hearing for renewal or extension of the commitment. If, after the initial 14-day commitment and two renewals (120 days), there is clear and convincing evidence that the person continues to be mentally ill and a danger to self or others, then the court may renew or extend the commitment for successive periods of up to 180 days each.
<b>Penalty for false petition</b>	Any person intentionally giving a false statement on an application, knowing it to be false, which leads to a commitment will be liable in a civil action. The applicant will also be subject to applicable criminal laws.
<b>Additional provision(s) of note</b>	Involuntary commitment proceedings are to be open to the public.  Any person detained involuntarily for evaluation and treatment may have an attorney or advocate contacted, including an interpreter, at the earliest possible time, to provide advocacy or representation in contesting involuntary detention or for advocacy or representation concerning any matter that may develop as a result of detention. If a person is unable to pay for the lawyer, then one will be provided free at government expense.
<b>Recently proposed legislation</b>	None

<b><u>PUERTO RICO</u></b>	
<b>Statute(s)</b>	<ul style="list-style-type: none"> <li>• P.R. LAWS ANN. tit 24 § 6152b (West 2024) (definitions)</li> <li>• P.R. LAWS ANN. tit 24 §§ 6155i through 6155v (involuntary commitment procedure)</li> </ul>
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes; “controlled substance or alcohol abuse” or dependency is included in the definition of “mental disorder.”
<b>Court of relevant jurisdiction</b>	Court of First Instance
<b>Type of treatment judge can order</b>	Inpatient or outpatient treatment
<b>Who may petition?</b>	Any state or municipal police officer, or any other citizen
<b>Time between the filing of the petition and the hearing</b>	Not specified
<b>Elements of the petition</b>	<p>The sworn petition must contain: (1) detailed reasons that are grounds to state that the adult should be admitted involuntarily, including a description of the acts or significant dangers that support said statement, as well as the place and date they occurred, with names, exact address, telephone number and personal data of the persons who witnessed the acts, if any; (2) the name and address of the spouse, legal guardian or closest family member; and if there are none of these, the name or address of any other person, entity or institution with interest in the adult subject to evaluation for involuntary admission. If the petitioner is unable to supply the corresponding names and addresses, he/she shall state the steps that were taken to obtain this information and the specific measures followed, even if they were unsuccessful; and (3) the relationship between the petitioner and the adult subject to evaluation for involuntary admission, as well as a statement by the petitioner as to having or not any type of interest with said adult, as the case may be, but not limited to any economic or litigious interest, be it civil or criminal. Every petition for involuntary admission for a maximum term of 15 days must be filed in court within the 24 hours provided by the order for temporary detention previously issued by the court. The petition for the maximum term must be accompanied by a certification from a psychiatrist and establish that the person meets the criteria for involuntary admission and immediate hospitalization in a hospital institution or any other providing institution in order to receive treatment.</p>
<b>Legal standard for hearing</b>	Clear and convincing evidence

<b><u>PUERTO RICO</u></b>	
<b>Length of commitment</b>	15 days
<b>Renewal of commitment order</b>	The director of the mental health institution or his/her representative or by request from the person's family member or legal guardian, can file in court a petition for order to extend involuntary admission. Said petition must be accompanied by a second certification issued by a psychiatrist. In cases in which the adult is receiving detoxification services, a physician may issue this second certification. The petition must be filed in court up to three days before the end of the initial period of 15 days. Within 48 hours upon filing the petition for order to extend involuntary admission, the court, after holding hearings, will determine if the second hospitalization period requested is appropriate. If in the hearing, the court finds that the adult shall continue to receive involuntary treatment services, it may order an extension of the involuntary hospitalization for a term not to exceed 15 days.
<b>Penalty for false petition</b>	Not addressed by statute
<b>Additional provision(s) of note</b>	Every adult subject to a petition to order involuntary admission has the right to be represented by an attorney or family advocate, whoever is available. If the adult is indigent and has not been able to hire an attorney, the court shall appoint a public attorney.
<b>Recently proposed legislation</b>	None



<b><u>U.S. VIRGIN ISLANDS</u></b>	
<b>Statute(s)</b>	V.I. CODE ANN. tit. 19 §1026 (West 2024)
<b>Relevant substantive amendment(s)</b>	None
<b>Involuntary commitment allowed for primary diagnosis of SUD?</b>	Yes
<b>Court of relevant jurisdiction</b>	Superior court
<b>Type of treatment judge can order</b>	Inpatient treatment
<b>Who may petition?</b>	A spouse or guardian, a relative, a certifying or treating medical practitioner, behavioral health professional, community member, or the administrator or supervisor in charge of any approved public treatment facility.
<b>Time between the filing of the petition and the hearing</b>	Not later than five days after the date the petition was filed.
<b>Elements of the petition</b>	The petition must state the following: (1) description of the actions committed by the person; (2) history of the person's illness if known; (3) whether the person has threatened, attempted, or inflicted harm on themselves or others, or attempted to damage property in the past and currently; (4) whether the person is on drugs or alcohol; and (5) whether drugs or alcohol is a factor in the person's behavior. The petition must be accompanied by a certificate of a medical practitioner or behavioral health professional who has examined the person within seven calendar days before submission of the petition unless the person whose commitment is sought has refused to submit to a medical examination, in which case the fact of refusal must be stated in the certification. The certificate must set forth the medical practitioner or behavioral health professional's findings in support of the allegations of the petition.
<b>Legal standard for hearing</b>	Clear and convincing evidence
<b>Length of commitment</b>	Not specified
<b>Renewal of commitment order</b>	Not specified
<b>Penalty for false petition</b>	Not addressed by statute

<b><u>U.S. VIRGIN ISLANDS</u></b>	
<b>Additional provision(s) of note</b>	<p>A refusal to undergo treatment does not constitute evidence of a lack of judgment as to the need for treatment.</p> <p>The respondent has the right to be represented by counsel at every stage of any proceedings relating to commitment.</p> <p>The hearing must be closed to the public and kept confidential and a report of the proceedings may not be released to the public or press, except by approval of the court.</p>
<b>Recently proposed legislation</b>	None

<b><u>PENDING STATE LEGISLATION</u></b>	
<b>State/Bill Number/Status</b>	<b>Description</b>
<a href="#"><u>Arizona</u></a> S.B. 1578, 56th Leg., 2nd Reg. Sess. (Ariz. 2024) (held in house)	This bill would modify the definition of “mental disorder” to include substance use disorder. This would allow for the involuntary commitment of individuals with a substance use disorder as a primary diagnosis. This bill would also establish that an individual who suffers from a substance use disorder may not be ordered by a court to undergo treatment unless that individual meets all of the following: (1) has been diagnosed by a qualified health professional as suffering from a substance use disorder; (2) has a substance use disorder that is severe and persistent and results in the person being a danger to self or others or having a grave disability and being unwilling or unable to accept voluntary treatment; and (3) can reasonably benefit from treatment.
<a href="#"><u>New Jersey</u></a> S.B. 91, 221st Leg., 1st Ann. Sess. (N.J. 2024) (pending in committee)	This bill would expand the definition of mental illness within the involuntary commitment law to include substance use disorder if a person’s substance use disorder makes the person dangerous to self or dangerous to others or property.
<a href="#"><u>New Jersey</u></a> A. 1325, 221st Leg., 1st Ann. Sess. (N.J. 2024) (pending in committee)	This bill amends the law governing involuntary commitment by amending the definition of the term "dangerous to self" to include individuals who have been administered an opioid antidote for the emergency treatment of an apparent opioid overdose. Under the bill, an individual who has recently been administered an opioid antidote is to be determined to be dangerous to self.
<a href="#"><u>New Mexico</u></a> S.B. 9, 56th Leg., 1st Spec. Sess. (N.M. 2024) (postponed indefinitely)	This bill modifies the definition of “harm to self” and “harm to others” within the provisions for both involuntary inpatient and outpatient treatment.
<a href="#"><u>New York</u></a> S.B. 8754, 246th Leg., Reg. Sess. (N.Y. 2024) (died upon legislature’s adjournment); A. 6514, 246th Leg., Reg. Sess. (N.Y. 2024) (died upon legislature’s adjournment)	This bill would allow a community member or community ambassador to apply for involuntary admission of a person alleged to be mentally ill.
<a href="#"><u>New York</u></a> A. 7827, 246th Leg., Reg. Sess. (N.Y. 2024) (died upon legislature’s adjournment)	This bill would allow a “qualified clinical examiner” to complete the certificate of examination of a person for involuntary care and treatment. A qualified clinical examiner means a psychiatric nurse practitioner, a psychologist, or a clinical social worker. Currently, the law only allows physicians to submit a certificate of examination.

<b><u>PENDING STATE LEGISLATION</u></b>	
<b>State/Bill Number/Status</b>	<b>Description</b>
<b><u>New York</u></b> A. 6934, 246th Leg., Reg. Sess. (N.Y. 2024) (died upon legislature's adjournment)	This bill would allow a psychiatric nurse practitioner to complete the certificate of examination of a person for involuntary care and treatment. Currently, the law only allows physicians to submit a certificate of examination.
<b><u>Pennsylvania</u></b> S.B. 962, 2023-2024 Leg., Reg. Sess. (Pa. 2023) (pending in committee)	This bill would establish a protocol for the involuntary treatment of individuals with a primary diagnosis of substance use disorder.
<b><u>Rhode Island</u></b> H.B. 6072, 2023 Leg., Reg. Sess. (R.I. 2023) (withdrawn at sponsor's request)	This bill creates a uniform process for involuntary commitment for individuals with substance use disorder and/or alcohol use disorder.
<b><u>Utah</u></b> S.B. 157, 65th Leg., 2024 Gen. Sess. (Utah 2024) (bill died)	This bill would change the requirement for the court to schedule a hearing for involuntary commitment from 10 days to five days after the day on which the designated examiners are appointed.
<b><u>Vermont</u></b> H.B. 632, 2023-2024 Leg., Reg. Sess. (Vt. 2023) (bill died upon legislature's adjournment)	This bill would allow an advance practice registered nurses to submit certificates as part of the involuntary commitment petition and perform court ordered psychiatric examinations.
<b><u>West Virginia</u></b> H.B. 4684, 86th Leg., Reg. Sess. (W. Va. 2024) (bill died upon legislature's adjournment)	This bill would limit who can submit an application for involuntary commitment to a physician, psychologist, licensed professional counselor, licensed independent social worker, advanced nurse practitioner, physician assistant, or law enforcement officer.
<b><u>West Virginia</u></b> H.B. 5254, 86th Leg., Reg. Sess. (W. Va. 2024) (bill died upon legislature's adjournment)	This bill would add a new temporary observation release section to the involuntary commitment law. This section would allow a hospital to release a commitment individual on a temporary observation period for up to 120 days, conditioned on the patient's compliance with a treatment plan and monitoring by the certified community mental health center where the patient resides.

## ABOUT THE LEGISLATIVE ANALYSIS AND PUBLIC POLICY ASSOCIATION

Based in Washington D.C., and led by and comprised of experienced attorneys, the Legislative Analysis and Public Policy Association is a 501(c)(3) nonprofit organization whose mission is to conduct legal and legislative research and analysis and draft legislation on effective law and policy in the areas of public safety and health, substance use disorders, and the criminal justice system.

LAPPA produces timely model laws and policies that can be used by national, state, and local public health, public safety, and substance use disorder practitioners who want the latest comprehensive information on law and policy as well as up-to-the-minute comparative analyses, publications, educational brochures, and other tools ranging from podcasts to fact sheets. Examples of topics on which LAPPA has assisted stakeholders include naloxone laws, law enforcement/community engagement, alternatives to incarceration for those with substance use disorders, medication-assisted treatment in correctional settings, and the involuntary commitment and guardianship of individuals with alcohol or substance use disorders.



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