research

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(b) Conduct.

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phases of alcohol and drug dependence;

investigations, and studies, including evaluation, of all

(c) Assist the development of educational and 🗗

ESTABLISHING A DIVISION OF ALCOHOL AND DRUG DEPENDEN INCREASING THE TAX ON ALCOHOLIC BEVERAGES TO CREATE FUNDING FOR AUTHORIZED PROGRAMS; AMENDING SECTIONS 4-1-401, 80-2702+ 80-2703, 80-2709 THROUGH 80-2720, AND 80-2722, R.C.M. 1947. BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA: Section 1. Section 80-2702, R.C.M. 1947, is amended to read as follows: department Bradle #80-2702. Outies authorized to accept gifts -- enter into contracts acquire and dispose of property. (1) The department of institutions, hereafter referred to as department in this, chapter, shall: assist in the support of (a) Plan, promote, and alcohol and drug dependence prevention, treatment, And control programs;

ALCOHOLISM INTOXICATION

programs relative to alcohol and drug dependence, and carry programs to assist the public. and technical professional groups, in becoming fully informed alcohol and drug dependence;

- (d) Promote, develop, and assist, financially and otherwise, alcohol and drug dependence programs administered by other state agencies. local government agencies. and private nonprofit organizations and agencies;
- (e) Encourage and promote effective use of facilities, resources, and funds in the planning and conduct of programs and activities for prevention, treatment, and control of alcohol and drug dependence and, in this respect, cooperate and utilize to the maximum possible extent the resources and services of federal, state, local agencies.
- 16 If) Establish a division of alcohol and drug 17 dependence.
 - (2) To carry out this act, the department may:
 - (a) Accept gifts, grants, and donations of money and property from public and private sources;
 - (b) Enter into contracts;

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- (c) Acquire and dispose of property."
- 23 Section 2. Section 80-2703, R.C.M. 1947, is amended to 24 read as follows:
- 25 *80-2703. Administration of federal program. The

- department of institutions division of lalcohol and drug
 dependence is hereby designated the single state agency for
 the administration of federal programs under:
- 4 (1) the Drug Abuse Office and Treatment Act of 1972,
 5 Public Law 92-255 as amended, 21 U.S.C. section 1176; and

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- (2) the Comprehensive Alcohol Abuse and Alcoholism

 Prevention, Treatment and Rehabilitation Act of 1970, Public

 Law 91-616 as amended, 42 U.S.C. section 4573.**
- 9 Section 3. Section 80-2709, R.C.M. 1947, is amended to
- 11 "80-2709• Definitions• For purposes of this set
 12 chapter:
 - (1) "alcoholic" means a person who habitually lacks self-control as to the use of alcoholic beverages, or uses alcoholic beverages to the extent that his health is substantially impaired or endangered or his social or economic function is substantially disrupted;
 - (2) "approved private treatment facility" means a private agency meeting the standards prescribed in section 69-6216 80-2713(1) and approved under section 69-6216 80-2713;
- 22 (3) *approved public treatment facility* means a
 23 treatment agency operating under the direction and control
 24 of the department or providing treatment under this act
 25 through a contract with the department and approved under

section 69-6216 <u>80-2713</u>;

- 2 (4) "department" means the department of institutions 3 provided for in section 82A-801, ReC.M. 1947;
- 4 (5) "division" means the division of alcohol and drug
 5 dependence:
- 6 (5)(6) "incapacitated by alcohol" means that a person,
 7 as a result of the use of alcohol, is unconscious or has his
 8 judgment otherwise so impaired that he is incapable of
 9 realizing and making a rational decision with respect to his
 10 need for treatment;
- 11 (6)(7): "incompetent person" means a person who has
 12 been adjudged incompetent by the district court;
- 13 (7)(8) "intoxicated person" means a person whose

 14 mental or physical functioning is substantially impaired as

 15 a result of the use of alcohol;
 - teligi "treatment" means the broad range of emergency, outpatient, intermediate, and inpatient services and care, including diagnostic evaluation, medical, psychiatric, psychological, and social service care, vocational rehabilitation and career counseling, which may be extended to alcoholics, and intoxicated persons, and family members;
- 22 (10) "family member", is the spouse, mother, father,
 23 childs or member of the household of an alcoholic whose life
 24 has been affected by the actions of the alcoholic and may
- 25 <u>require treatment</u>:

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LC 1017/01

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LC 1017/01

1	111) "prevention" has meaning on four levels: these
2	are:
3	(a) education to provide information to the school
4	children and general public relating to alcohol dependence
5	and alcoholism, treatment, and rehabilitative services and
6	to reduce the consequences of life experiences acquired by
7	contact with an alcoholic:
8	(b) early detection and recovery from the illness
9	before lasting emotional or physical damage, or both, have
10	occurred:
11	(c) if lasting emotional or physical damage, or both,
12	have occurred, to arrest the illness before full disability
13	has been reached:
14	(d) the provision of facility requirements to meet
15	division program standards and improve public accessibility
15	for_services.*
17	Section 4. Section 80-2710, R.C.M. 1947, is amended to
18	read as follows:
19	#80-2710. Powers of department division. The
20	department division of alcohol and drug dependence may:
21	(1) plan, establish, and maintain treatment programs as
22	necessary or desirable;
23	(2) coordinate its activities and cooperate with
24	alcoholism programs in this and other states, and make
25	contracts and other joint or cooperative arrangements with

ł	state, local, or private agencies in this and other state
2	for the treatment of alcoholics and intoxicated persons ar
3	for the common advancement of alcoholism programs;
	428 4

- (3) do other acts and things necessary or convenient to execute the authority expressly granted to it; and
- (4) provide treatment facilities for alcoholics₁ and
 intoxicated persons₂ and family members.⁴
- 8 Section 5. Section 80-2711, R.C.M. 1947, is amended to 9 read as follows:
- 10 #80-2711. Duties of department division. The
 11 department division shall:
 - (1) develop, encourage, and foster statewide, regional, and local plans and programs for the prevention of alcoholism and treatment of alcoholics and intoxicated persons in cooperation with public and private agencies, organizations, and individuals and provide technical assistance and consultation services for these purposes;
 - (2) coordinate the efforts and enlist the assistance of all public and private agencies, organizations, and individuals interested in prevention of alcoholism and treatment of alcoholics and intoxicated persons;
 - (3) cooperate with the department-of-institutions-and board of pardons in establishing and conducting programs to provide treatment for alcoholics and intoxicated persons in or on parole from penal institutions;

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LC 1017/01 LC 1017/01

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(4) cooperate with the department of education, the superintendent of public instruction, schools, police departments, courts, and other public and private agencies, organizations and individuals in establishing programs for the prevention of alcoholism and treatment of alcoholics and intoxicated persons, and preparing curriculum materials thereon for use at all levels of education;

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- (5) prepare, publish, evaluate, and disseminate educational material dealing with the nature and effects of alcohol;
- 11 (6) develop and implement, as an integral part of
 12 treatment programs, an educational program for use in the
 13 treatment of alcoholics and intoxicated persons, which
 14 program shall include the dissemination of information
 15 concerning the nature and effects of alcohol;
 - (7) organize and foster training programs for all persons engaged in treatment of alcoholics and intoxicated persons;
 - (8) sponsor and encourage research into the causes and nature of alcoholism and treatment of alcoholics and intoxicated persons, and serve as a clearing house for information relating to alcoholism;
 - (9) specify uniform methods for keeping statistical information by public and private agencies, organizations, and individuals, and collect and make available relevant

statistical information, including number of persons
treated, frequency of admission and readmission, and
frequency and duration of treatment;

(10) advise the governor in the preparation of a comprehensive plan for treatment of alcoholics and intoxicated persons for inclusion in the state's comprehensive health plan;

(11) review all state health, welfare, and treatment plans to be submitted for federal funding under federal legislation, and advise the governor on provisions to be included relating to alcoholism and intoxicated persons;

(12) assist in the development of, and cooperate with, alcohol education and treatment programs for employees of state and local governments and businesses and industrias in the state;

(13) utilize the support and assistance of interested persons in the community, particularly recovered alcoholics, to encourage alcoholics voluntarily to undergo treatment;

19 (14) cooperate with the department of justice in 20 establishing and conducting programs designed to deal with 21 the problem of persons operating motor vehicles while 22 intoxicated;

(15) encourage general hospitals and other appropriate health facilities to admit without discrimination alcoholics and intoxicated persons and to provide them with adequate

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LC 1017/01

- and appropriate treatment;
- 2 (16) encourage all health and disability insurance
- 3 programs to include alcoholism as a covered illness; and
- 4 (17) submit to the governor an annual report covering
- 5 the activities of the department division."
- 6 Section 6. Section 80-2712, R.C.M. 1947, is amended to
- 7 read as follows:

- 8 #80-2712. Comprehensive program for treatment. (1) Tha
- 9 department division shall establish a comprehensive and
- 10 coordinated program for the treatment of alcoholics and
- 11 intoxicated persons and family members.
- 12 (2) The program shall include:
- 13 (a) emergency treatment provided by a facility
- 14 affiliated with or part of the medical service of a general
- 15 hospital;
- 16 (b) inpatient treatment:
- 17 (c) intermediate treatment; and
- 18 (d) outpatient and followup treatment.
- 19 (3) The department division shall provide for adequate
- 20 and appropriate treatment for alcoholics and intoxicated
- 21 persons admitted under sections 69-6218-to-69-6221 80-2715
- 22 through 80-2718. Treatment may not be provided at a
- 23 correctional institution except for inmates.
- 24 (4) All appropriate public and private resources shall
- 25 be coordinated with and utilized in the program if possible.

- 1 (5) The department division shall prepare, publish, and
 2 distribute annually a list of all approved public and
 3 private treatment facilities.**
 - Section 7. Section 80-2713, R.C.M. 1947, is amended to read as follows:
- 6 #80-2713. Facility standards -- inspections -7 approvals. (1) The department division shall establish
 8 standards for approved treatment facilities that must be met
 9 for a treatment facility to be approved as a public or
 10 private treatment facility. and fix the fees to be charged
 11 for the required inspections. The standards may concern only
 12 the health standards to be met and standards of treatment to
 13 be afforded patients.
 - (2) The department division periodically shall inspect approved public and private treatment facilities at reasonable times and in a reasonable manner.
- 17 (3) The department division shall maintain a list of 18 approved public and private treatment facilities.
 - (4) Each approved public and private treatment facility shall file with the department division on request, data, statistics, schedules, and information the department division reasonably requires. An approved public or private treatment facility that without good cause fails to furnish any data, statistics, schedules, or information as requested, or files fraudulent returns thereof, shall be

LC 1017/01

removed from the list of approved treatment facilities.

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- (5) The department division, after holding a hearing in accordance with the Administrative Procedure Act, may suspend, revoke, limit, or restrict an approval, or refuse to grant an approval, for failure to meet its standards.
- (6) A district court may restrain any violation of this section, review any denial, restriction, or revocation of approval, and grant other relief required to enforce its provisions.
- (7) Upon petition of the department division and after a hearing held upon reasonable notice to the facility, a district court may issue a warrant to the department division authorizing it to enter and inspect at reasonable times, and examine the books and accounts of, any approved public or private treatment facility refusing to consent to inspection or examination by the department division or which the department division has reasonable cause to believe is operating in violation of this act.*
- 19 Section 8. Section 80-2714, R.C.M. 1947, is amended to 20 read as follows:
 - #80-2714. Acceptance for treatment -- rules. The department division shall adopt rules for acceptance of persons into the treatment program, considering available treatment resources and facilities, for the purpose of early and effective treatment of alcoholics, and intoxicated

- persons and family members. In adopting the rules the department division shall be guided by the following standards:
- (1) If possible a patient shall be treated on a voluntary rather than an involuntary basis.
- 6 {2} A patient shall be initially assigned or 7 transferred to outpatient or intermediate treatment, unless 8 he is found to require inpatient treatment.
- 9 (3) A person shall not be denied treatment solely
 10 because he has withdrawn from treatment against medical
 11 advice on a prior occasion or because he has relapsed after
 12 earlier treatment.
- 13 (4) An individualized treatment plan shall be prepared
 14 and maintained on a current basis for each patient person.
- 15 (5) Provision shall be made for a continuum of 16 coordinated treatment services, so that a person who leaves 17 a facility or a form of treatment will have available and 18 utilize other appropriate treatment.
- 19 Section 9. Section 40-2715, R.C.M. 1947, is amended to read as follows:
- 21 #80-2715. Voluntary treatment of alcoholics. (1) An
 22 alcoholic may apply for voluntary treatment directly to an
 23 approved public treatment facility. If the proposed patient
 24 is a minor or an incompetent person, he, a parent, a legal
 25 quardian, or other legal representative may make the

application.

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- (2) Subject to rules adopted by the department division, the administrator of an approved public treatment facility may determine who shall be admitted for treatment. If a person is refused admission to an approved public treatment facility, the administrator, subject to departmental division rules, shall refer the person to another approved public treatment facility for treatment if possible and appropriate.
 - approved public treatment facility, he shall be encouraged to consent to appropriate outpatient or intermediate treatment. If it appears to the administrator of the treatment facility that the patient is an alcoholic who requires help, the department division shall arrange for assistance in obtaining supportive services and residential facilities.
- (4) If a patient leaves an approved public treatment facility, with or against the advice of the administrator of the facility, the department division shall make reasonable provisions for his transportation to another facility or to his home. If he has no home he shall be assisted in obtaining shelter. If he is a minor or an incompetent person the request for discharge from an inpatient facility shall be made by a parent, legal quardian, or other legal

- representative or by the minor or incompetent if he was the original applicant.
- 3 Section 10. Section 80-2716, R.C.M. 1947, is amended 4 to read as follows:
 - #80-2716. Treatment and services for intoxicated persons and persons incapacitated by alcohol. (1) An intoxicated person may come voluntarily to an approved public treatment facility for emergency treatment. A person who appears to be intoxicated in a public place and to be in need of help, if he consents to the proffered help, may be assisted to his home, an approved public treatment facility, an approved private treatment facility, or other health facility by the police.
 - (2) A person who appears to be incapacitated by alcohol shall be taken into protective custody by the police and forthwith brought to an approved public treatment facility for emergency treatment. If no approved public treatment facility is readily: available he shall be taken to an emergency medical service customarily used for incapacitated persons. The police, in detaining the person and in taking him to an approved public treatment facility, is taking him into protective custody and shall make every reasonable effort to protect his health and safety. In taking the person into protective custody, the detaining officer may take reasonable steps to protect himself. No entry or other

LC 1017/01 LC 1017/01

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record may be made to indicate that the person taken into custody under this section has been arrested or charged with a crime.

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- (3) A person who comes voluntarily or is brought to an approved public treatment facility shall be examined by a licensed physician as soon as possible. He may then be admitted as a patient or referred to another health facility. The referring approved public treatment facility shall arrange for his transportation.
- (4) A person who by medical examination is found to be incapacitated by alcohol at the time of his admission or to have become incapacitated at any time after his admission, may not be detained at the facility (1) once he is no longer incapacitated by alcohol, or (2) if he remains incapacitated by alcohol for more than forty-eight (48) hours after admission as a patient, unless he is committed under section 69-6220 80-2717. A person may consent to remain in the facility as long as the physician in charge believes appropriate.
- (5) A person who is not admitted to an approved public treatment facility and is not referred to another health facility, may be taken to his home. If he has no home, the approved public treatment facility shall assist him in obtaining shelter.
- 25 (6) If a patient is admitted to an approved public

1 treatment facility, his family or next of kin shall be 2 notified as promptly as possible. If an adult patient who is 3 not incapacitated requests that there be no notification, his request shall be respected."

5 Section 11. Section 60-2717, R.C.M. 1947, is amended to read as follows:

7 *80-2717. Emergency commitment. (1) An intoxicated person who (a) has threatened, attempted, or inflicted physical harm on another and is likely to inflict physical harm on another unless committed, or (b) is incapacitated by alcohol, may be committed to an approved public treatment facility for emergency treatment. A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment.

(2) The certifying physician, spouse, quardian, or 15 relative of the person to be committed, or any other responsible person, may make a written application for 17 commitment under this section, directed to the administrator 18 of the approved public treatment facility. The application 19 shall state facts to support the need for emergency 20 treatment and be accompanied by a physician's certificate 22 stating that he has examined the person sought to be committed within two (2) days before the certificate's date 23 and facts supporting the need for emergency treatment. A 24 physician employed by the admitting facility or the department is not eligible to be the certifying physician.

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- (3) Upon approval of the application by the administrator of the approved public treatment facility, the person shall be brought to the facility by a peace officer, health officer, the applicant for commitment, the patient's spouse, the patient's guardian, or any other interested person. The person shall be retained at the facility to which he was admitted, or transferred to another appropriate public or private treatment facility, until discharged under subsection (5).
- (4) The administrator of an approved public treatment facility shall refuse an application if in his opinion the application and certificate fail to sustain the grounds for commitment.
- (5) When on the advice of the medical staff the administrator determines that the grounds for commitment no longer exist, he shall discharge a person committed under this section. No person committed under this section may be detained in any treatment facility for more than five (5) days. If a petition for involuntary commitment under section 69-6221 80-2718 has been filed within the five (5) days and the administrator in charge of an approved public treatment facility finds that grounds for emergency commitment still exist, he may detain the person until the petition has been heard and determined, but no longer than ten (10) days after

1 filing the petition.

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- 2 (6) A copy of the written application for commitment
 3 and of the physician's certificate, and a written
 4 explanation of the person's right to counsel, shall be given
 5 to the person within twenty-four (24) hours after commitment
 6 by the department division, who shall provide a reasonable
 7 opportunity for the person to consult counsel.*
 - Section 12. Section 80-2718, R.C.M. 1947, is amended to read as follows:
 - "80-2718. Involuntary commitment of alcoholics. (1) A person may be committed to the custody of the department--of institutions division by the district court upon the petition of his spouse or quardian, a relative, the certifying physician, or the chief of any approved public treatment facility. The petition shall allege that the person is an alcoholic who habitually lacks self-control as to the use of alcoholic beverages and that he (a) has threatened, attempted, or inflicted physical harm on another and that unless committed is likely to inflict physical harm on another; or (b) is incapacitated by alcohol. A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment. The petition shall be accompanied by a certificate of a licensed physician who has examined the person within two (2) days before submission of the petition, unless the person whose commitment is sought

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LC 1017/01

has refused to submit to a medical examination, in which case the fact of refusal shall be alleged in the petition. The certificate shall set forth the physician's findings in support of the allegations of the petition. A physician employed by the admitting facility or the department division is not eligible to be the certifying physician.

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(2) Upon filing the petition, the court shall fix a date for a hearing no later than ten (10) days after the date the petition was filed. A copy of the petition and of the notice of the hearing, including the date fixed by the court, shall be served on the petitioner, the person whose commitment is sought, his next of kin other than the petitioner, a parent or his legal quardian if he is a minor, the administrator in charge of the approved public treatment facility to which he has been committed for emergency care, and any other person the court believes advisable. A copy of the petition and certificate shall be delivered to each person notified.

(3) At the hearing the court shall hear all relevant testimony, including, if possible, the testimony of at least one licensed physician who has examined the person whose commitment is sought. The person shall have a right to have a licensed physician of his own choosing examine him and testify on his behalf, and if he has no funds with which to pay such physician, the reasonable costs of one such

examination and testimony shall be paid by the county. The person shall be present unless the court believes that his presence is likely to be injurious to him; he shall be advised of his right to counsel and, if he is unable to hire his own counsel, the court shall appoint an attorney to represent him at the expense of the county. The court shall examine the person in open court, or if advisable, shall examine the person in chambers. If he refuses an examination by a licensed physician and there is sufficient evidence to believe that the allegations of the petition are true, or if the court believes that more medical evidence is necessary, the court may make a temporary order committing him to the department of institutions division for a period of not more than five (5) days for purposes of a diagnostic examination.

(4) If after hearing all relevant evidence, including the results of any diagnostic examination by the department of--institutions division, the court finds that grounds for involuntary commitment have been established by clear and convincing evidence, it shall make an order of commitment to the department--of--institutions division. It may not order commitment of a person unless it determines that the department--of--institutions <u>division</u> is able to provide adequate and appropriate treatment for him and the treatment is likely to be beneficial.

25 (5) A person committed under this section shall remain

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1 in the custody of the department-of-institutions division 2 for treatment for a period of thirty (30) days unless sooner discharged. At the end of the thirty (30) day period, he shall be discharged automatically unless the deportment-of institutions division before expiration of the period 5 obtains a court order from the district court of the committing district for his recommitment upon the grounds 7 set forth in subsection (1) for a further period of ninety 8 9 (90) days unless sooner discharged. If a person has been 10 committed because he is an alcoholic likely to inflict physical harm on another: the department of institutions 11 division shall apply for recommitment if after examination 12 it is determined that the likelihood still exists. 13

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(6) A person recommitted under subsection (5) who has not been discharged by the department--of--institutions division before the end of the ninety (90) day period shall be discharged at the expiration of that period unless the department-of-institutions division, before expiration of the period, obtains a court order from the district court of the committing district on the grounds set forth in subsection (1) for recommitment for a further period not to exceed ninety (90) days. If a person has been committed because he is an alcoholic likely to inflict physical harm another, the department division shall apply for recommitment if after examination it is determined that the likelihood still exists. Only two (2) recommitment orders under subsections (5) and (6) are permitted.

(7) Upon the filing of a petition for recommitment under subsections (5) or (6), the court shall:fix a date for hearing no later than ten (10) days after the date the petition was filed. A copy of the petition and of the notice of hearing, including the date fixed by the court, shall be served on the petitioner, the person whose commitment is sought, his next of kin other than the petitioner, the original petitioner under subsection (1) if different from the petitioner for recommitment, one of his parents or his legal quardian if he is a minor, and any other person the court believes advisable. At the hearing the court shall proceed as provided in subsection (3).

- (8) A person committed to the custody of the department of--institutions division for treatment shall be discharged at any time before the end of the period for which he has been committed if either of the following conditions is met:
- (a) in case of an alcoholic committed on the grounds of likelihood of infliction of physical harm upon another, that he is no longer in need of treatment or the likelihood no longer exists; or
- (b) in case of an alcoholic committed on the grounds of the need of treatment and incapacity, that the incapacity no longer exists, further treatment will not be likely to bring

LC 1017/01

LC 1017/01

about significant improvement in the person's condition; or treatment is no longer adequate or appropriate.

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- (9) The court shall inform the person whose commitment or recommitment is sought of his right to contest the application, be represented by counsel at every stage of any proceedings relating to his commitment and recommitment, and have counsel appointed by the court or provided by the court, if he 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 regardless of his wishes. The person whose commitment or recommitment is sought shall be informed of his right to be examined by a licensed physician of his choice. If the person is unable to obtain a licensed physician and requests examination by a physician, the court shall employ a licensed physician.
- (10) If a private treatment facility agrees with the request of a competent patient or his patient, sibling, adult child, or guardian to accept the patient for treatment, the department—of—institutions division may transfer him to the private treatment facility.
- (11) A person committed under this section may at any time seek to be discharged from commitment by writ of habeas corpus or other appropriate means.
- 25 (12) The venue for proceedings under this section is

- 1 the place in which person to be committed resides or is
- 2 present.**
- 3 Section 13. Section 80-2719, R.C.M. 1947, is amended
 4 to read as follows:
- 5 #80-2719. Records of alcoholics and intoxicated 6 persons. (1) The registration and other records of treatment 7 facilities shall remain confidential and are privileged to 8 the patient.
- 9 (2) Notwithstanding subsection (1), the department
 10 division may make available information from patients*
 11 records for purposes of research into the causes and
 12 treatment of alcoholism Information under this subsection
 13 shall not be published in a way that discloses patients*
 14 names or other identifying information.*
- Section 14. Section 80-2720, R.C.M. 1947, is amended to read as follows:
- #80-2720. Visitation and communication of patients.

 (1) Subject to reasonable rules regarding hours of
 visitation which the department division may adopt, patients
 in any approved treatment facility shall be granted
 opportunities for adequate consultation with counsel, and
- 22 for continuing contact with family and friends consistent
- 23 with an effective treatment program.
- 24 (2) Neither mail nor other communication to or from a 25 patient in any approved treatment facility may be

LC 1017/01 LC 1017/01

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intercepted, read, or censored. The administrator may adopt reasonable rules regarding the use of telephone by patients in approved treatment facilities."

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- 4 Section 15. Section 80-2722, R.C.M. 1947, is amended to read as follows:
- #80-2722. Departmental-reports Reports to legislature. 6 7 The department division shall achieve full implementation of В the provisions of the act, as set forth in this chapter and 9 related sections, no later than January 1, 1976. A progress 10 report on the implementation shall be made to the 1975 11 legislative session. Thereafter the department division shall report, to each legislative session, on the status of 12 13 the implemented act. This report, or any part thereof, may be included as the department's state plan for alcohol abuse 14 15 and alcoholism."
- 16 Section 16. There is a new R.C.M. section numbered 17 80-2725 that reads as follows:
- 18 80-2725. State-approved alcoholism programs utilizing 19 funding generated by taxation on alcoholic beverages. 20 (1) State-approved alcoholism programs utilizing funding 21 for the treatment, rehabilitation, and prevention of 22 alcoholism, as provided by the counties of Montana and the 23 division, generated by taxation on alcoholic beverages shall 24 not be required to provide matching funds. This section 25 shall not preclude the acceptance, by approved alcoholic

programs in Montana, of gifts, bequests, or the donation of services or money for the treatment, rehabilitation, or prevention of alcoholism.

- (2) State-approved alcoholism programs using revenue generated by the taxation on alcoholic beverages may not refuse treatment, rehabilitation, or prevention of alcoholism services solely because of an individual's inability to pay.
- (3) When revenue is generated by the payments of fees for services by state-approved alcoholism programs, such payments for services must be returned to:
- (a) the county treasurer of a county in which funding has been provided from taxation on alcoholic beverages to the extent of funds allocated to the program by the county.
- (b) the state's general fund when funding has been provided from taxation on alcoholic beverages to the extent of such funding as allocated to the program by the division.
- (4) Revenue generated by 4-1-401 and 4-1-404 for the treatment, rehabilitation, and prevention of alcoholism which has not been encumbered for those purposes by the counties of Montana and the division shall be returned to the state's general fund within 30 days after the close of each fiscal year.
- Section 17. Section 4-1-401, R.C.N. 1947, is amended to read as follows:

1 *4-1-401. License tax on liquor -- amount --2 distribution of proceeds. The department of revenue is 3 hereby authorized and directed to charge, receive and collect at the time of sale and delivery of any liquor under any provisions of the laws of the state of Montana a license tax of five-percent-(5%) 15% of the retail selling price on 7 all liquor so sold and delivered. Said tax shall be charged and collected on all liquor brought into the state and taxed 9 by the department of revenue. The retail selling price 10 shall be computed by adding to the cost of said liquor the 11 state markup as designated by the department. Said five 12 percent--- (5%) 15% license tax shall be figured in the same 13 manner as the state excise tax and shall be in addition to 14 said state excise tax. The department of revenue shall 15 retain the amount of such five-percent-(5%) 15% license tax 16 so received in a separate account. Four-fifths--14/5% 17 Iwo-thirds of these revenues shall be distributed to the 18 counties according to the amount of liquor purchased in each county. Sne-fifth--(1/5) One-third of these revenues shall 19 be deposited in the general -- fund retained by the state. 20 21 Provided, however, in the case of purchases of liquor by a 22 retail liquor licensee for use in his business, the 23 department shall make such regulations as are necessary to 24 apportion that proportion of license tax so generated to the 25 county where the licensed establishment is located, for use

as provided in section 4-1-402, R.C.B. 1947. The department

revenue shall pay quarterly to each county treasurer the

proportion of the license tax due each county.

4 The county treasurer of each county shall retain one fourth - (1/4) seven-tenths of said license tax, and shall, within thirty--(30) days after receift thereof, 7 apportion the remaining three-fearths-(3/4) three-tenths thereof to the treasurers of the incorporated cities and towns within his county, said apportionment to be based in 10 each instance upon the proportion which the gross sale of 11 liquor in such incorporated city or town bears to the gross 12 sale of liquor in all of the incorporated cities and towns 13 in his said county.

Of the seven-tenths of the tax retained by the county.

the county treasurer shall deposit six-sevenths of this

ancunt in a fund within the county for the treatment.

rehabilitation, and prevention of alcoholism as approved by

the state of Montana. The remaining one-seventh of the funds

shall be retained in the county treasury for use by that

county.

The one-third of the license tax or liquor retained by
the state shall be deposited within the division of alcohol
and drug dependency each quarter for the treatment.
rehabilitation and prevention of alcoholism as approved by
the state."

-28-

Section 18. Section 4-1-404, R.C.M. 1947, is amended to read as follows:

3 *4-1-404. Tax on imported beer -- computation in case of barrels of capacity other than thirty-one gallons. A tax of three dollars (\$3) per barrel of thirty-one (31) gallons, is hereby levied and imposed on each and every barrel of 6 7 beer manufactured out of this state and sold herein by any 8 wholesaler, which said tax shall be due at the end of each 9 month from said wholesaler, upon any such beer so sold by 10 him during that month. As to any beer imported and sold in 11 containers other than barrels, or in barrels of more or less 12 capacity than thirty-one (31) gallons, the quantity content 13 shall be ascertained and computed by the department of 14 revenue in determining the amount of tax due, as herein 15 provided for. An additional tax of twenty-five-cents-(\$+25) 16 \$1.75 per barrel is levied and imposed as provided by this 17 section, and such additional tax is also to be levied and 18 imposed at the same rate upon beer manufactured within the 19 state. The additional tax of twenty-five-cents-(\$=25) \$1.75 20 is to be deposited, notwithstanding sections 4-1-407 and 4-1-408, or any other provision, in-the-general-fund within 21 22 the division of alcohol and drug dependency each quarter for 23 the treatment: remabilitation, and prevention of alcoholism 24 as approved by the state."

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STATE OF MONTANA

REQUEST NO. 338-77

FISCAL NOTE

Form BD-15

n cor	mpliance	with a	written	request	received .	February 4	, 1	9 _77_	_ , there	is hereby	/ submitte	ed a Fiscal N	ote
or	House	Bill 62	7		pursua	nt to Chapter 53, I	_aws of Mo	ntana, 1	965 - Thi	rty-Ninth	Legislativ	ve Assembly.	
Background information used in developing this Fiscal Note is available from the Office of Budget and Program Planning, to members													
of the Legislature upon request.													

DESCRIPTION OF PROPOSED LEGISLATION:

An act to amend certain provisions of the Uniform Alcoholism Intoxication Act; establishing a Division of Alcohol and Drug Dependency; increasing the tax on alcoholic beverages to create funding for authorized programs.

ASSUMPTIONS:

- 1. The establishment of a Division of Alcohol and Drug Dependency would have no fiscal impact due to no increase in staff or salaries. The job duties would remain the same.
- 2. Projected expenditures for alcohol services are as reflected in the Executive Budget.
- 3. \$1.50 per barrel of the tax on beer will continue to be deposited in the General Fund.
- 4. Removing the 1/3 match requirement will have no effect on state funds.
- 5. Fees assessed people receiving services returned to the county or state will have minimal effect.

FISCAL IMPACT:

	FY 78	FY 79
Effect on General Fund		
Recommended General Fund expenditures for state alcohol programs	\$1.598M	\$1.591M
Current law revenue on beer and liquor tax to General Fund	1.879M	2.027M
Net to General Fund	.281M	.436M
Proposed law revenue on beer and liquor tax to General Fund	1.263M	<u>1.373M</u>
Net gain to General Fund	<u>\$.982M</u>	<u>\$.937M</u>
Funds available for alcohol services under House Bill 627		
State	\$3.502M	\$3.731M
Local	2.435M	2.556M
•	5.937M	6,287M
Proposed expenditures	5.495M	5.601M
Reversion to Earmarked Revenue Account	<u>\$.442M</u>	<u>\$.686M</u>

TECHNICAL NOTE:

The funds provided by the tax on alcohol for alcohol services should be set up in this bill as an "Earmarked Revenue Account" to provide for clarity of the law and more accountability. This should be reflected throughout the bill to handle reversions and revenues for the portion of the tax on alcohol for alcohol services.

Office of Budget and Program Planning

Date: <u>ユーケーノフ</u>

BUDGET DIRECTOR

STATE OF MONTANA

FISCAL NOTE

REQUEST NO. 338-77 (amended)

Form BD-15

·	April 12 , 19 77 , there is hereby submitted a Fiscal Note Chapter 53, Laws of Montana, 1965 - Thirty-Ninth Legislative Assembly.
	Note is available from the Office of Budget and Program Planning, to members
of the Legislature upon request.	

DESCRIPTION OF PROPOSED LEGISLATION:

An act to amend certain provisions of the uniform Alcoholism Intoxication Act increasing the tax on alcoholic beverages to create funding for authorized programs.

ASSUMPTIONS:

- 1. Projected expenditures for alcohol services are as reflected in House Bill 145.
- 2. \$1.50 per barrel of the \$4.00 tax on beer will continue to be deposited into the General Fund; \$1.50 will be for cities and counties and the remaining \$1.00 will go to an Earmarked Revenue Account for alcohol programs.
- 3. As amended, the change in percentage allocation impacts local government general funds and local funds available for alcohol programs. The amendments do not change the effect on the state General Fund as presented in the previous fiscal note.

FISCAL IMPACT:

	FY 78	<u>FY 79</u>
Funds available for alcohol services under House Bill 627*		•
State	\$2.194 M	\$2.335 M
Local	<u>1.159 м</u>	<u>1.217 M</u>
Total	\$3,353 M	\$3.552 M
Additional General Fund monies available for		
other purposes under proposed law	<u>\$1.262 M</u>	\$1.372 M

^{*}It is anticipated that all funds available for alcohol services will be expended in the 1979 biennium.

BUDGET DIRECTOR

Office of Budget and Program Planning

45th Legislature HB 0627/02

READING

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Approved by Committee on Taxation

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L	HOUSE BILL NO. 627
2	INTRODUCED BY H. BAETH, FABREGA, ROTH, SHELDEN, HULAR,
3	GILLIGAN, UNDERDAL, E. GUNDERSON, LUND, HOLMES, R. BAETH,
4	RROPP, STAIGMILLER+ DASSINGER+ ELLERD+ L+ HIRSCH+ CURTISS+
5	McLANE: UHDE, BRAND: BURNEIT, J. GUNDERSON, MELOY, VINCENT,
6	RAMIREZ, COURTNEY, KESSLER, KENNERLY, GERKE, MANUEL, SCULLY,
7	WILLIAMS, PALMER, HALVORSEN, O'CONNELL, ELLIS, O'KEEFE, DAY,
Ŋ	FEDA, ERNST, RYAN, COX, HALDRON, KEYSER, DUSSAULT, PISTORIA,
9	HUENNEKENS, FRATES, HARPER, BENGTSON, MODO, BRADLEY, ROBBINS
10	LIEN, SOUTH, JENSEN, DRISCOLL, STOBIE, ELLISON, HAND, HANSEN
11	QUILICI, CONROY, FAGG, KANDUCH, BARDANGUYE, METCALF, MENAHAN
12	
13	A BILL FOR AN ACT ENTITLED: "AN ACT TO AMEND CERTAIN
14	PROVISIONS OF THE UNIFORM ALCOHOLISM INTOXICATION ACT.
15	ESTABLISHING A DIVISION OF ALCOHOL AND DRUG BEPENDENCY
16	<u>DEPENDENCE</u> ; INCREASING THE TAX ON ALCOHOLIC BEVERAGES TO
17	CREATE FUNDING FOR AUTHORIZED PRUGRAMS; ESTABLISHING CERTAIN
18	REQUIREMENTS FOR PROGRAMS RECEIVING STATE FUNDING SUPPORT:
19	AMENDING SECTIONS 4-1-401, 80-2702, 80-2703, 80-2709 THROUGH
20	80-2720. AND 80-2722. R.C.M. 1947."
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22	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
23	Section 1. Section 80+2702: R.C.M. 1947: is amended to
24	read as follows:
25	#80-2702. Duties of department department

authorized to accept gifts — enter into contracts —
acquire and dispose of property. (1) The department of
institutions, hereafter referred to as department in this
chapter, shall:

HB 0627/02

- 5 (a) Plan, promote, and assist in the support of .
 6 alcohol and drug dependence prevention, treatment, and 7 control programs;
 - (b) Conduct, sponsor, and support research, investigations, and studies, including evaluation, of all phases of alcohol and drug dependence;
- 11 (c) Assist the development of educational and training
 12 programs relative to alcohol and drug dependence, and carry
 2 13 on programs to assist the public, and technical and
 14 professional groups, in becoming fully informed about
 15 alcohol and drug dependence;
 - (d) Promote, develop, and assist, financially and otherwise, alcohol and drug dependence programs administered by other state agencies, local government agencies, and private nonprofit organizations and agencies;
- 20 (e) Encourage and promote effective use of facilities.
 21 resources, and funds in the planning and conduct of programs
 22 and activities for prevention, treatment, and control of
 23 alcohol and drug dependence and, in this respect, cooperate
 24 with and utilize to the maximum possible extent the
 25 resources and services of federal, state, and local

HB 0627/02

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- 2 (f) Establish a division of alcohol and drug
 3 dependence.
- (2) To carry out this act, the department may:
- 5 (a) Accept gifts, grants, and donations of money and
- 6 property from public and private sources;
- (b) Enter into contracts;
- 8 (c) Acquire and dispose of property.
- 9 Section 2. Section 80-2703, R.C.M. 1947, is amended to
- 10 read as follows:
- 11 *80-2703. Administration of federal program. The
- 12 department of institutions division of alcohol and drug
- 13 <u>dependence</u> is hereby designated the single state agency for
- 14 the administration of federal programs under:
- 15 (1) the Drug Abuse Office and Treatment Act of 1972,
- 16 Public Law 92-255 as amended, 21 U-S-C- section 1176; and
- 17 (2) the Comprehensive Alcohol Abuse and Alcoholism
- 18 Prevention, Treatment and Rehabilitation Act of 1970, Public
- 19 Law 91-616 as amended, 42 U.S.C. section 4573.**
- 20 Section 3. Section 80-2709, Receme 1947, is amended to
- 21 read as follows:
- 22 #80-2709. Definitions. For purposes of this act
- 23 chapter:
- 24 (1) "alcoholic" means a person who habitually lacks
- 25 self-control as to the use of alcoholic beverages, or uses

- alcoholic beverages to the extent that his health is substantially impaired or endangered or his social or economic function is substantially disrupted:
 - (2) "approved private treatment facility" means a private agency meeting the standards prescribed in section 69-6216 80-2713(1) and approved under section 69-6216 80-2713;
- 8 (3) "approved public treatment facility" means a freatment agency operating under the direction and control of the department or providing treatment under this set CHAPIER through a contract with the department and approved under section 69-6216 80-2713;
 - (4) "department" means the department of institutions provided for in section 82A-801, R.C.M. 1947;
- 15 (5) "division" means the division of alcohol and drug
 16 generatine ESTABLISHED BY THE DEPARTMENT UNDER 60-2702:
- 17 (5):161 "incapacitated by alcohol" means that a person,

 18 as a result of the use of alcohol, is unconscious or has his

 19 judgment otherwise so impaired that he is incapable of

 20 realizing and making a rational decision with respect to his

 21 need for treatment;
- 22 (6)[1] "incompetent person" means a person who has been adjudged incompetent by the district court;
- 24 (7)481 "intoxicated person" means a person whose
 25 mental or physical functioning is substantially impaired as

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HB 0627/02

1	a result of the use of alcohol;
2	+8+(9) "treatment" means the broad range of emergency.
3	cutpatient, intermediate, and impatient services and care,
4	including diagnostic evaluation, medical, psychiatric,
5	psychological, and social service care, vocational
6	rehabilitation and career counseling, which may be extended
7	to alcoholics, and intoxicated persons, and family members:
8	(10) "family member", is the spouse, mother, father,
9	child, or member of the household of an alcoholic whose life
10	has been affected by the actions of the alcoholic and may
11	require treatment:
12	(11) "prevention" has meaning on four levels: these
13	are:
14	(a) education to provide information to the school
15	children and general public relating to alcohol dependence
16	and alcoholism, treatment, and rehabilitative services and
17	to reduce the consequences of life experiences acquired by
18	contact with an alcoholic:
19	(b) early detection and recovery from the illness
20	before lasting emotional or physical damage, or both, have
21	occurred:
22	(c) if lasting emotional or physical damage, or both.
23	have occurred, to arrest the illness before full disability

(d) the provision of facility requirements to meet

has been reached:

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1	division program standards and improve public accessibility
2	for services."
3	Section 4. Section 80-2710, R.C.M. 1947, is amended to
4	read as follows:
5	#80-2710. Powers of deportment <u>division</u> . The
6	department division of alcohol and drug dependence may:
7	(1) plan, establish, and maintain treatment programs as
8	necessary or desirable;
9	(2) coordinate its activities and cooperate with
10	alcoholism programs in this and other states, and make
11	contracts and other joint or cooperative arrangements with
12	state, local, or private agencies in this and other states
13	for the treatment of alcoholics and intoxicated persons and
14	for the common advancement of alcoholism programs;
15	(3) do other acts and things necessary or convenient to
16	execute the authority expressly granted to it; and
17	(4) provide treatment facilities for alcoholics and
18	intoxicated persons, and family members."
19	Section 5. Section 80-2711, R.C.M. 1947, is amended to
20	read as follows:
21	#80-2711. Duties of department division. The
22	department division shall:
23	(1) develop, encourage, and foster statewide, regional.

and local plans and programs for the prevention of

alcoholism and treatment of alcoholics and intoxicated

-5- HB 627 -0- Hd 627

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HB 0627/02

persons in cooperation with public and private agencies, organizations, and individuals and provide technical assistance and consultation services for these purposes;

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- (2) coordinate the efforts and enlist the assistance of all public and private agencies, organizations, and individuals interested in prevention of alcoholism and treatment of alcoholics and intoxicated persons;
- (3) cooperate with the department of -- institutions -- and board of pardons in establishing and conducting programs to provide treatment for alcoholics and intoxicated persons in or on parole from penal institutions;
- (4) cooperate with the department of education, the superintendent of public instruction, schools, police departments, courts, and other public and private agencies, organizations and individuals in establishing programs for the prevention of alcoholism and treatment of alcoholics and intoxicated persons, and preparing curriculum materials thereon for use at all levels of education:
- (5) prepare, publish, evaluate, and disseminate educational material dealing with the nature and effects of alcohol;
 - (6) develop and implement, as an integral part of treatment programs, an educational program for use in the treatment of alcoholics and intoxicated persons, which program shall include the dissemination of information

-7-

1 concerning the nature and effects of alcohol;

- 2 (7) organize and foster training programs for all 3 persons engaged in treatment of alcoholics and intoxicated 4 persons;
 - (8) sponsor and encourage research into the causes and nature of alcoholism and treatment of alcoholics and intoxicated persons, and serve as a clearing house for information relating to alcoholism;
- 9 (9) specify uniform methods for keeping statistical information by public and private agencies, organizations, and individuals, and collect and make available relevant statistical information, including number of persons treated, frequency of admission and readmission, and frequency and duration of treatment;
- 15 (10) advise the governor in the preparation of a comprehensive plan for treatment of alcoholics and 17 intoxicated persons for inclusion in the state's 18 comprehensive health plan;
- 19 (11) review all state health, welfare, and treatment 20 plans to be submitted for federal funding under federal 21 legislation, and advise the governor on provisions to be 22 included relating to alcoholism and intoxicated persons;
- 23 (12) assist in the development of, and cooperate with, 24 alcohol education and treatment programs for employees of 25 state and local governments and businesses and industries in

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- (13) utilize the support and assistance of interested persons in the community, particularly recovered alcoholics, to encourage alcoholics voluntarily to undergo treatment;
- 5 (14) cooperate with the department of justice in 6 establishing and conducting programs designed to deal with 7 the problem of persons operating motor vehicles while 8 intoxicated;
 - (15) encourage general hospitals and other appropriate health facilities to admit without discrimination alcoholics and intoxicated persons and to provide them with adequate and appropriate treatment;
- 13 (16) encourage all health and disability insurance
 14 programs to include alcoholism as a covered illness; and
- 15 (17) submit to the governor an annual report covering
 16 the activities of the department division."
- 17 Section 6. Section 80-2712, R.C.M. 1947, is amended to read as follows:
 - "80-2712. Comprehensive program for treatment. (1) The department division shall establish a comprehensive and coordinated program for the treatment of alcoholics, and intoxicated persons, and family members.
 - (2) The program shall include:
- 24 (a) emergency treatment provided by a facility 25 affiliated with or part of the medical service of a general

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- (b) inpatient treatment:
- (c) intermediate treatment; and
- (d) outpatient and followup treatment.
- 5 (3) The department division shall provide for adequate
 6 and appropriate treatment for alcoholics and intoxicated
 7 persons admitted under sections 69-6218-to-69-6221 80-2715
 8 through 80-2718. Treatment may not be provided at a
 9 correctional institution except for inmates.

HB 0627/02

- (4) All appropriate public and private resources shall
 be coordinated with and utilized in the program if possible.
- 12 (5) The department division shall prepare, publish, and
 13 distribute annually a list of all approved public and
 14 private treatment facilities.**
- Section 7. Section 90-2713, R.C.M. 1947, is amended to read as follows:
- #80-2713. Facility standards -- inspections --17 18 approvals. (1) The department division shall establish 19 standards for approved treatment facilities that must be met 20 for a treatment facility to be approved as a public or 21 private treatment facility, and fix the fees to be charged 22 for the required inspections. The standards may concern only 23 the health standards to be met and standards of treatment to 24 be afforded patients.
- 25 (2) The department division periodically shall inspect

-9- HB 627

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HB 0627/02

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1 approved public and private treatment facilities at
2 reasonable times and in a reasonable manner.

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- (3) The department division shall maintain a list of approved public and private treatment facilities.
- (4) Each approved public and private treatment facility shall file with the department division on request, data, statistics, schedules, and information the department division reasonably requires. An approved public or private treatment facility that without good cause fails to furnish any data, statistics, schedules, or information as requested, or files fraudulent returns thereof, shall be removed from the list of approved treatment facilities.
- (5) The department division, after holding a hearing in accordance with the Administrative Procedure Act, may suspend, revoke, limit, or restrict an approval, or refuse to grant an approval, for failure to meet its standards.
- (6) A district court may restrain any violation of this section, review any denial, restriction, or revocation of approval, and grant other relief required to enforce its provisions.
- (7) Upon petition of the department division and after a hearing held upon reasonable notice to the facility, a district court may issue a warrant to the department division authorizing it to enter and inspect at reasonable times, and examine the books and accounts of, any approved

public or private treatment facility refusing to consent to inspection or examination by the department division or which the department division has reasonable cause to believe is operating in violation of this act."

Section 8. Section 80-2714, R.C.M. 1947, is amended to read as follows:

#80-2714. Acceptance for treatment -- rules. The department division shall adopt rules for acceptance of persons into the treatment program, considering available treatment resources and facilities, for the purpose of early and effective treatment of alcoholics, and intoxicated persons, and family members. In adopting the rules the department division shall be guided by the following standards:

- (1) If possible a patient shall be treated on a voluntary rather than an involuntary basis.
- (2) A patient shall be initially assigned or transferred to outpatient or intermediate treatment, unless he is found to require inpatient treatment.
- 20 (3) A person shall not be denied treatment solely
 21 because he has withdrawn from treatment against medical
 22 advice on a prior occasion or because he has relapsed after
 23 earlier treatment.
 - (4) An individualized treatment plan shall be prepared and maintained on a current basis for each patient person.

-11-

HB 627

-12-

нв 0627/02

(5) Provision shall be made for a continuum of coordinated treatment services, so that a person who leaves a facility or a form of treatment will have available and utilize other appropriate treatment.

5 Section 9. Section 80-2715, R.C.M. 1947, is amended to 6 read as follows:

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*80-2715. Voluntary treatment of alcoholics. (1) An alcoholic may apply for voluntary treatment directly to an approved public treatment facility. If the proposed patient is a minor or an incompetent person, he, a parent, a legal guardian, or other legal representative may make the application.

- (2) Subject to rules adopted by the department division, the administrator of an approved public treatment facility may determine who shall be admitted for treatment. If a person is refused admission to an approved public treatment facility, the administrator, subject to departmental division rules, shall refer the person to another approved public treatment facility for treatment if possible and appropriate.
- approved public treatment facility, he shall be encouraged to consent to appropriate outpatient or intermediate treatment. If it appears to the administrator of the treatment facility that the patient is an alcoholic who

-13-

requires help, the department division shall arrange for assistance in obtaining supportive services and residential facilities.

HB 0627/02

- 4 (4) If a patient leaves an approved public treatment 5 facility, with or against the advice of the administrator of the facility, the department division shall make reasonable 7 provisions for his transportation to another facility or to B his home. If he has no home he shall be assisted in 9 obtaining shelter. If he is a minor or an incompetent person 10 the request for discharge from an inpatient facility shall 11 be made by a parent, legal quardian, or other legal 12 representative or by the minor or incompetent if he was the original applicant." 13
- 14 Section 10. Section 80-2716. R.C.M. 1947. is amended 15 to read as follows:
- #80-2716. Treatment and services for intoxicated 16 17 persons and persons incapacitated by alcohol. (1) An 18 intoxicated person may come voluntarily to an approved public treatment facility for emergency treatment. A person 19 who appears to be intoxicated in a public place and to be in 20 need of help, if he consents to the proffered help, may be 21 assisted to his home, an approved public treatment facility, 22 23 an approved private treatment facility, or other health facility by the police. 24
- 25 (2) A person who appears to be incapacitated by alcohol

H5 627 -14- HB 627

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shall be taken into protective custody by the police and forthwith brought to an approved public treatment facility for emergency treatment. If no approved public treatment facility is readily available he shall be taken to an emergency medical service customarily used for incapacitated persons. The police, in detaining the person and in taking him to an approved public treatment facility, is taking him into protective custody and shall make every reasonable effort to protect his health and safety. In taking the person into protective custody, the detaining officer may take reasonable steps to protect himself. No entry or other record may be made to indicate that the person taken into custody under this section has been arrested or charged with a crime.

- (3) A person who comes voluntarily or is brought to an approved public treatment facility shall be examined by a licensed physician as soon as possible. He may then be admitted as a patient or referred to another health facility. The referring approved public treatment facility shall arrange for his transportation.
- (4) A person who by medical examination is found to be incapacitated by alcohol at the time of his admission or to have become incapacitated at any time after his admission, may not be detained at the facility (1) once he is no longer incapacitated by alcohol, or (2) if he remains incapacitated

by alcohol for more than forty-eight (48) hours after admission as a patient, unless he is committed under section 69-6220 80-2717. A person may consent to remain in the facility as long as the physician in charge believes appropriate.

- 6 (5) A person who is not admitted to an approved public
 7 treatment facility and is not referred to another health
 8 facility: may be taken to his home. If he has no home, the
 9 approved public treatment facility shall assist him in
 10 obtaining shelter.
- 11 (6) If a patient is admitted to an approved public 12 treatment facility, his family or next of kin shall be 13 notified as promptly as possible. If an adult patient who is 14 not incapacitated requests that there be no notification, 15 his request shall be respected.**
- 16 Section 11. Section 80-2717, R.C.M. 1947, is amended 17 to read as follows:
 - #80-2717. Emergency commitment. (1) An intoxicated person who (a) has threatened, attempted, or inflicted physical harm on another and is likely to inflict physical harm on another unless committed, or (b) is incapacitated by alcohol, may be committed to an approved public treatment facility for emergency treatment. A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment.

(2) The certifying physician, spouse, guardian, or relative of the person to be committed, or any other responsible person, may make a written application for commitment under this section, directed to the administrator of the approved public treatment facility. The application shall state facts to support the need for emergency treatment and be accompanied by a physician's certificate stating that he has examined the person sought to be committed within two (2) days before the certificate's date and facts supporting the need for emergency treatment. A physician employed by the admitting facility or the department is not eligible to be the certifying physician.

- (3) Upon approval of the application by the administrator of the approved public treatment facility, the person shall be brought to the facility by a peace officer, health officer, the applicant for commitment, the patient's spouse; the patient's guardian, or any other interested person. The person shall be retained at the facility to which he was admitted, or transferred to another appropriate public or private treatment facility, until discharged under subsection (5).
- (4) The administrator of an approved public treatment facility shall refuse an application if in his opinion the application and certificate fail to sustain the grounds for commitment.

-17-

- (5) When on the advice of the medical staff the administrator determines that the grounds for commitment no longer exist, he shall discharge a person committed under this section. No person committed under this section may be detained in any treatment facility for more than five (5) days. If a petition for involuntary commitment under section 69-6221 80-2718 has been filed within the five (5) days and the administrator in charge of an approved public treatment facility finds that grounds for emergency commitment still exist, he may detain the person until the petition has been heard and determined, but no longer than ten (10) days after filing the petition.
- (6) A copy of the written application for commitment and of the physician's certificate, and a written explanation of the person's right to counsel, shall be given to the person within twenty-four (24) hours after commitment by the department division, who shall provide a reasonable opportunity for the person to consult counsel."
- 19 Section 12. Section 80-2718, R.C.M. 1947, is amended 20 to read as follows:
 - #80-2718. Involuntary commitment of alcoholics. (1) A person may be committed to the custody of the department—of institutions division by the district court upon the petition of his spouse or guardian, a relative, the certifying physician, or the chief of any approved public

HB 627

-18- HE 627

HS 0627/02

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treatment facility. The petition shall allege that the person is an alcoholic who habitually lacks self-control as to the use of alcoholic beverages and that he (a) has threatened, attempted, or inflicted physical harm on another and that unless committed is likely to inflict physical harm on another; or (b) is incapacitated by alcohol. A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment. The petition shall be accompanied by a certificate of a licensed physician who has examined the person within two (2) 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 shall be alleged in the petition. The certificate shall set forth the physician's findings in support of the allegations of the petition. A physician employed by the admitting facility or the department division is not eligible to be the certifying physician.

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(2) Upon filing the petition, the court shall fix a date for a hearing no later than ten (10) days after the date the petition was filed. A copy of the petition and of the notice of the hearing, including the date fixed by the court, shall be served on the petitioner, the person whose commitment is sought, his next of kin other than the petitioner, a parent or his legal guardian if he is a minor, the administrator in charge of the approved public treatment

facility to which he has been committed for emergency care, and any other person the court believes advisable. A copy of the petition and certificate shall be delivered to each person notified.

(3) At the hearing the court shall hear all relevant testimony, including, if possible, the testimony of at least one licensed physicia, who has examined the person whose commitment is sought. The person shall have a right to have a licensed physician of his own choosing examine him and testify on his behalf, and if he has no funds with which to pay such physician, the reasonable costs of one such examination and testimony shall be paid by the county. The person shall be present unless the court believes that his presence is likely to be injurious to him; he shall be advised of his right to counsel and, if he is unable to hire his own counsel, the court shall appoint an attorney to represent him at the expense of the county. The court shall examine the person in open court, or if advisable, shall examine the person in chambers. If he refuses an examination by a licensed physician and there is sufficient evidence to believe that the allegations of the petition are true, or if the court believes that more medical evidence is necessary, the court may make a temporary order committing him to the department-of-institutions division for a period of not more than five (5) days for purposes of a diagnostic examination.

-19- HB 627

-20- H3 527

(4) If after hearing all relevant evidence, including the results of any diagnostic examination by the department of-institutions division: the court finds that grounds for involuntary commitment have been established by clear and convincing evidence, it shall make an order of commitment to the department-of-institutions division. It may not order commitment of a person unless it determines that the department of -- institutions division is able to provide adequate and appropriate treatment for him and the treatment is likely to be beneficial.

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- (5) A person committed under this section shall remain in the custody of the department-of-institutions division for treatment for a period of thirty (30) days unless sooner discharged. At the end of the thirty (30) day period, he shall be discharged automatically unless the department-of institutions division before expiration of the period obtains a court order from the district court of the committing district for his recommitment upon the grounds set forth in subsection (1) for a further period of ninety (90) days unless sooner discharged. If a person has been committed because he is an alcoholic likely to inflict physical harm on another, the department of institutions division shall apply for recommitment if after examination it is determined that the likelihood still exists.
 - (6) A person recommitted under subsection (5) who has

not been discharged by the department-of-institutions 1 division before the end of the ninety (90) day period shall 2 be discharged at the expiration of that period unless the 3 department-of-institutions division, pefore expiration of the period, obtains a court order from the district court of the committing district on the grounds set forth in subsection (1) for recommitment for a further period not to 7 exceed ninety (90) days. If a person has been committed Q because he is an alcoholic likely to inflict physical harm 10 on another, the department division shall 11 recogniteent if after examination it is determined that the 12 likelihood still exists. Only two (2) recommitment orders 13 under subsections (5) and (6) are permitted.

(7) Upon the filing of a petition for recommitment under subsections (5) or (6), the court shall fix a date for hearing no later than ten (10) days after the date the petition was filed. A copy of the petition and of the notice of hearing, including the date fixed by the court, shall be served on the petitioner, the person whose commitment is sought, his next of kin other than the petitioner, the original petitioner under subsection (1) if different from the petitioner for recommitment, one of his parents or his legal quardian if he is a minor, and any other person the court believes advisable. At the hearing the court shall proceed as provided in subsection (3).

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-21-H8 627

-22-H3 627 нь 0627/02 H6 0627/02

(8) A person committed to the custody of the department of institutions division for treatment shall be discharged at any time before the end of the period for which he has been committed if either of the following conditions is met:

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- (a) in case of an alcoholic committed on the grounds of likelihood of infliction of physical harm upon another, that he is no longer in need of treatment or the likelihood no longer exists; or
- (b) in case of an alcoholic committed on the grounds of the need of treatment and incapacity, that the incapacity no longer exists, further treatment will not be likely to bring about significant improvement in the person's condition, or treatment is no longer adequate or appropriate.
- (9) The court shall inform the person whose commitment or recommitment is sought of his right to contest the application, be represented by counsel at every stage of any proceedings relating to his commitment and recommitment, and have counsel appointed by the court or provided by the court, if he 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 regardless of his wishes. The person whose commitment or recommitment is sought shall be informed of his right to be examined by a licensed physician of his choice. If the person is unable to

obtain a licensed physician and requests examination by a physician, the court shall employ a licensed physician.

- 3 (10) If a private treatment facility agrees with the 4 request of a competent patient or his parent, sibling, adult 5 child, or guardian to accept the patient for treatment, the 6 department—of—institutions division may transfer him to the 7 private treatment facility.
- 8 (11) A person committed under this section may at any
 9 time seek to be discharged from commitment by writ of habeas
 10 corpus or other appropriate means.
- 11 (12) The venue for proceedings under this section is 12 the place in which person to be committed resides or is 13 present.**
- 14 Section 13. Section 80-2719, R.C.M. 1947, is amended 15 to read as follows:
- 16 *80-2719. Records of alcoholics and intoxicated 17 persons. (1) The registration and other records of treatment 18 facilities shall remain confidential and are privileged to 19 the patient.
- 20 (2) Notwithstanding subsection (1), the department
 21 division may make available information from patients*
 22 records for purposes of research into the causes and
 23 treatment of alcoholism. Information under this subsection
 24 shall not be published in a way that discloses patients*
 25 names or other identifying information.**

-23- HB 627 -24- H3 627

HB 0627/02

Section 14. Section 80-2720, R.C.M. 1947, is amended to read as follows:

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#80-2720. Visitation and communication of patients.

(1) Subject to reasonable rules regarding hours of visitation which the department division may adopt, patients in any approved treatment facility shall be granted opportunities for adequate consultation with counsel, and for continuing contact with family and friends consistent with an effective treatment program.

(2) Neither mail nor other communication to or from a patient in any approved treatment facility may be intercepted, read, or censored. The administrator may adopt reasonable rules regarding the use of telephone by patients in approved treatment facilities."

Section 15. Section 80-2722, R.C.M. 1947, is amended to read as follows:

"80-2722. Departmental-reports Reports to legislature. The department division shall achieve full implementation of the provisions of the act, as set forth in this chapter and related sections, no later than January 1, 1976. A progress report on the implementation shall be made to the 1975 legislative session. Thereafter the department division shall report, to each legislative session, on the status of the implemented act. This report, or any part thereof, may be included as the department's state plan for alcohol abuse

2 Section 16. There is a new R.C.M. section numbered 80-2725 that reads as follows: 80-2725. State-approved alcoholism programs utilizing funding generated by taxation on alcoholic beverages. 11)--State-approved--alcoholism--programs--utilizing-funding 7 for--the--treatmenty--rehabilitationy--and---prevention---of alcoholism--as--provided-by-the-counties-of-Montana-and-the divisiony generated by taxation on alcoholic beverages shall 10 not-be-required to-provide--sotching--funday--This--section 11 shall--not--preclude--the--acceptancey-by-approved-alcoholic 12 programs-in-Montanay-of-qiftsy-bequestsy-or-the-donation-of services-or-money-for-the-treatmenty-rehabilitations-or 13 14 prevention of alcoholisms 15 (2)--State-approved-alcoholism-programs--using--revenue 16 qenerated-by-the-taxation-on-alcoholic-beverages-may-not 17 refuse---treatmenty---rehabilitationy---or---prevention---of alcoholism---services--solely--because--of--an--individual-s 18 19 inobility-to-pays 20 (3)--when-revenue-is-generated-by-the-payments-of--fees 21 for--services--by--state-approved--alcoholism-programsy-such 22 payments-for-services-must-be-returned-to+ 23 to)--the-county-treasurer-of-a-county-in-which--funding 24 has--been--provided--from-taxation-on-alcoholic-beverages-to 25 the-extent-of-funds-allocated-to-the-program-by-the--county*

and alcoholism."

-25- H3 627

-26- HB 627

HB 0627/02

each fiscal year.

1	(b)thestate*sgeneralfundwhen-funding-has-been
2	provided-from-taxation-on-alcoholic-beverages-to-theextent
3	of-sucn-funding-as-allocated-to-the-program-by-the-division=
4	(1) REVENUE GENERATED BY 4-1-401 AND 4-1-404 FOR THE
5	IREATHENT, REHABILITATION, AND PREVENTION OF ALCOHOLISM MAY
6	BE DISTRIBUTED IN FITHER OF THE FOLLOWING MANNERS:
7	1A1 AS PAYMENT OF FEES FOR ALCOHOLISM SERVICES
8	PROVIDED BY STATE-APPROVED ALCOHOLISM PROGRAMS. CERTIFIED
9	ALCOHOLISM COUNSELORS, LICENSED PHYSICIANS, AND LICENSED
10	HUSPIIALS: AND
11	1B) AS GRANTS TO PERSONS OPERATING STATE-APPROVED
12	ALCOHOLISM PROGRAMS.
13	(2) NO PERSON OPERATING A STATE-APPROVED ALCOHOLISM
14	PRUGRAM MAY BE REQUIRED TO PROVIDE MATCHING FUNDS AS A
15	CONDITION OF RECEIVING A GRANT UNDER SUBSECTION (1) OF THIS
16	SECTION.
17	(3) IN ADDITION TO FUNDING RECEIVED UNDER IHIS
18	SECTION. A PERSON OPERATING A STATE-APPROVED ALCOHOLISM
19	PROGRAM MAY ACCEPT GIFTS. BEQUESTS. OR THE DONATION OF
20	SERVICES OR HONEY FOR THE TREATMENT. REHABILITATION. OR
21	PREVENTION OF ALCOHOLISM.
22	(4) NO PERSON RECEIVING FUNDING UNDER THIS SECTION TO
23	SUPPORT OPERATION OF A STATE-APPROVED ALCOHOLISM PROGRAM MAY
24	REFUSE ALCOHOLISM TREATMENT, REHABILITATION, OR PREVENTION
25	SERVICES TO A PERSON SOLELY BECAUSE OF THAT PERSON*S

1	INABILITY TO PAY FOR THOSE SERVICES.
2	(5) A GRANT MADE UNDER THIS SECTION IS SUBJECT TO TH
3	FO'LOWING CONDITIONS:
4	(A) THE GRANT APPLICATION MUST CONTAIN AN ESTIMATE O
5	ALL PROGRAM INCOME INCLUDING INCOME FROM EARNED FEES, GIETS
6	BEQUESTS. DONATIONS. AND GRANTS FROM OTHER THAN STAT
7	SOURCES DURING THE PERIOD FOR WHICH GRANT SUPPORT IS SOUGHT
8	(B) WHENEYER. DURING THE PERIOD OF GRANT SUPPORT
9	PROGRAM INCOME EXCEEDS THE AMOUNT ESTIMATED IN THE GRAN
10	APPLICATION: THE AMOUNT OF THE EXCESS SHALL BE REPORTED I
11	IHE GRANIOR.
12	(C) THE EXCESS SHALL BE USED BY THE GRANTEE UNDER TH
13	IERMS OF THE GRANT IN ACCORDANCE WITH DME OR A COMBINATION
13 14	TERMS OF THE GRANT IN ACCORDANCE WITH ONE OR A COMBINATION OF THE FOLLOWING OPTIONS:
14	DE THE FOLLOWING OPTIONS:
14 15	OF THE FOLLOWING OPTIONS: (1) USE FOR ANY PURPOSE THAT FURTHERS THE UBJECTIVE
14 15 16	OF THE FOLLOWING OPTIONS: (I) USE FOR ANY PURPOSE THAT FURTHERS THE UBJECTIVE OF THE LEGISLATION UNDER WHICH THE GRANT WAS MADE: OR
14 15 16 17	OF THE FOLLOWING OPTIONS: (I) USE FOR ANY PURPOSE THAT FURTHERS THE UBJECTIVE OF THE LEGISLATION UNDER WHICH THE GRANT WAS MADE: OR (II) DEDUCT FROM TOTAL PROJECT COSTS TO DETERMINE TH
14 15 16 17	OF THE FOLLOWING OPTIONS: (1) USE FOR ANY PURPOSE THAT FURTHERS THE UBJECTIVE DE THE LEGISLATION UNDER WHICH THE GRANT WAS MADE: OR (11) DEDUCT FROM TUTAL PROJECT COSTS TO DETERMINE THE NET COSTS ON WHICH THE GRANTOR'S SHARE OF THE COSTS I
14 15 16 17 18	DE THE FOLLOWING OPTIONS: (I) USE FOR ANY PURPOSE THAT FURTHERS THE UBJECTIVE DE THE LEGISLATION UNDER WHICH THE GRANT WAS MADE: OR (II) DEDUCT FROM TOTAL PROJECT COSTS TO DETERMINE THE NET COSTS ON WHICH THE GRANTOR'S SHARE OF THE CUSTS I
14 15 16 17 18 19	OF THE FOLLOWING OPTIONS: (I) USE FOR ANY PURPOSE THAT FURTHERS THE UBJECTIVE DE THE LEGISLATION UNDER WHICH THE GRANT WAS MADE: OR (II) DEPUT FROM TOTAL PROJECT COSTS TO DETERMINE THE NET COSTS ON WHICH THE GRANTOR'S SHARE OF THE COSTS I BASED. (4)(6) Revenue generated by 4-1-401 and 4-1-404 for
14 15 16 17 18 19 20 21	OF THE FOLLOWING OPTIONS: (I) USE FOR ANY PURPOSE THAT FURTHERS THE UBJECTIVE DE THE LEGISLATION UNDER WHICH THE GRANT WAS MADE: OR (II) DEDUCT FROM TOTAL PROJECT COSTS TO DETERMINE THE NET COSTS ON WHICH THE GRANTOR'S SHARE OF THE CUSTS I BASEDa (4)(6) Revenue generated by 4-1-401 and 4-1-404 fo the treatment, rehabilitation, and prevention of alcoholis

-27- HB 627

-28- H6 62**7**

HB 0627/02 HB 0627/02

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1 Section 17. Section 4-1-401. R.C.M. 1747. is amended 2 to read as follows:

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#4-1-401. License tax on liquor -- amount -distribution of proceeds. The department of revenue is hereby authorized and directed to charge, receive and collect at the time of sale and delivery of any liquor under any provisions of the laws of the state of Montana a license tax of five percent-(5%) 15% of the retail selling price on all liquor so sold and delivered. Said tax shall be charged and collected on all liquor brought into the state and taxed by the department of revenue. The retail selling price shall be computed by adding to the cost of said liquor the state markup as designated by the department. Said five percent-(5%) 15% license tax shall be figured in the same manner as the state excise tax and shall be in addition to said state excise tax. The department of revenue shall retain the amount of such five-percent-(5%) 15% license tax so received in a separate account. Four-fifths-(4/5) Two-thirds of these revenues shall be distributed to the counties according to the amount of liquor purchased in each county. Bne-fifth-(1/5) <u>One-third</u> of these revenues shall be deposited-in-the-general-fund retained by the state. Provided, however, in the case of purchases of liquor by a retail liquor licensee for use in his business, the department shall make such regulations as are necessary to

apportion that proportion of license tax so generated to the county where the licensed establishment is located, for use as provided in section 4-1-402, R.C.M. 1947. The department of revenue shall pay quarterly to each county treasurer the proportion of the license tax due each county.

The county treasurer of each county shall retain one-fourth (1/4) seven-tenths of said license tax, and shall, within thirty—(30) days after receipt thereof, apportion the remaining three fourths—(3/4) three-tenths thereof to the treasurers of the incorporated cities and towns within his county, said apportionment to be based in each instance upon the proportion which the gross sale of liquor in such incorporated city or town bears to the gross sale of liquor in all of the incorporated cities and towns in his said county.

Of the seven-tenths of the tax retained by the county:

the county treasurer shall deposit six-sevenths of this

amount in a fund within the county for the treatment:

rehabilitation: and prevention of alcoholism as approved by

the state of Montana. The remaining one-seventh of the funds

shall be retained in the county treasury for use by that

county:

Ine one-third of the license tax on liquor retained by
the state shall be deposited within WITH THE STATE TREASURER

10 THE CREDIT OF the division of alcohol and drug dependency

-29- HB 627

-30- Hb 627

H3 0627/02

1 DEPENDENCE each quarter for the treatments rehabilitation

2 and prevention of alcoholism as approved by the state.*

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3 Section 18. Section 4-1-404, R.C.M. 1947, is amended 4 to read as follows:

*4-1-404. Tax on imported beer -- computation in case of barrels of capacity other than thirty-one gallons. A tax of three dollars (\$3) per barrel of thirty-one (31) gallons, is hereby levied and imposed on each and every barrel of beer manufactured out of this state and sold herein by any wholesaler, which said tax shall be due at the end of each month from said wholesaler, upon any such beer so sold by him during that month. As to any beer imported and sold in containers other than barrels, or in barrels of more or less capacity than thirty-one (31) gallons, the quantity content shall be ascertained and computed by the department of revenue in determining the amount of tax due, as heréin provided for. An additional tax of twenty-five-cents--(\$+25) \$1.75 per barrel is levied and imposed as provided by this section, and such additional tax is also to be levied and imposed at the same rate upon beer manufactured within the state. The additional tax of twenty-five-cents-(\$=25) 11.75 is to be deposited, notwithstanding sections 4-1-407 and 4-1-408, or any other provision, in-the-general-fund within WITH THE STATE TREASURER TO THE CREDIT OF the division of alcohol and drug dependency DEPENDENCE each quarter for the

HB 0627/02

- treatment, rehabilitation, and prevention of alcoholism as
- 2 approved by the state."

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-32- H8 627

2	INTRODUCED BY W. BAETH: FABREGA: ROTH: SHELDEN: MULAR:
3	GILLIGAN, UNDERDAL, E. GUNDERSON, LUND, HOLMES, R. BAETH,
4	KROPP, STAIGMILLER, DASSINGER, ELLERD, L. HIRSCH, CURTISS,
5	McLane, UHD2, BRAND, BURNETT, J. GUNDERSON, NELOY, VINCENT,
6	RAMIREZ, COURTNEY, KESSLER, KENNERLY, GERKE, MANUEL, SCULLY,
7	WILLIAMS, PALMER, HALVORSEN, O'CONNELL, ELLIS, O'KEEFE, DAY,
8	FEDA, ERNST, RYAN, COX, WALDRON, KEYSER, DUSSAULT, PISTORIA.
9	HUENNEKENS, FRATES, HARPER, BENGTSON, WOOD, BRADLEY, ROBBINS
10	LIEN. SOUTH, JENSEN. DRISCOLL, STOBIE, ELLISON, HAND, HANSEN
11	QUILICI, CONROY, FAGG, KANDUCH, BARDANOUVE, METCALF, MENAHAN
12	
13	A BILL FOR AN ACT ENTITLED: "AN ACT TO AMEND CERTAIN
14	PROVISIONS OF THE UNIFORM ALCOHOLISM INTOXICATION ACT.
15	ESTABLISHING A DIVISION OF ALCOHOL AND DRUG BEPENDENCY
16	DEPENDENCE: INCREASING THE TAX ON ALCOHOLIC BEVERAGES TO
17	CREATE FUNDING FOR AUTHORIZED PROGRAMS; ESTABLISHING CERTAIN
18	REQUIREMENTS FOR PROGRAMS RECEIVING STATE FUNDING SUPPORT:
19	AMENDING SECTIONS 4-1-401, 80-2702, 80-2703, 80-2709 THROUGH
20	80-2720, AND 80-2722, R.C.M. 1947.*
∠1	
22	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
23	Section 1. Section 80-2702, R.C.M. 1947, is amended to
24	read as follows:
25	*80-2702. Duties of department department

HOUSE BILL NO. 627

1	authorized to accept gifts enter into contracts
2	acquire and dispose of property. (1) The department of
3	institutions, hereafter referred to as department in this
4	chapter, shall:
5	(a) Plan, promote, and assist in the support of
6	alcohol and drug dependence prevention, treatment, and
7	control programs;
8	(b) Conduct, sponsor, and support research,
9	investigations, and studies, including evaluation, of all
10	phases of alcohol and drug dependence;
11	(c) Assist the development of educational and training
12	programs relative to alcohol and drug dependence, and carry
13	on programs to assist the public, and technical and
14	professional groups, in becoming fully informed about
15	alcohol and drug dependence;
16	(d) Promote, develop, and assist, financially and
17	otherwise, alcohol and drug dependence programs administered
18	by other state agencies, local government agencies, and
19	private nonprofit organizations and agencies;
20	(e) Encourage and promote effective use of facilities.
21	resources, and funds in the planning and conduct of programs
22	and activities for prevention, treatment, and control of
23	alcohol and drug dependence and, in this respect, cooperate
24	with and utilize to the фахімыт possible extent the
25	resources and services of federal, state, and local

HB 0627/02

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- (f) Establish a division of alcohol and drug 3 dependence.
- (2) To carry out this act, the department may: 4
- (a) Accept difts, grants, and donations of money and property from public and private sources; 6
 - (b) Enter into contracts:
- (c) Acquire and dispose of property." А
- 9 Section 2. Section 80-2703, R.C.M. 1947, is amended to
- 10 read as follows:
- 11 *80-2703. Administration of federal program. The 12 department-of-institutions division of alcohol and drug 13 dependence is hereby designated the single state agency for
- the administration of federal programs under: 14
- 15 (1) the Drug Abuse Office and Treatment Act of 1972.
 - Public Law 92-255 as amended, 21 U.S.C. section 1176; and
- 17 (2) the Comprehensive Alcohol Abuse and Alcoholism 18 Prevention, Treatment and Rehabilitation Act of 1970, Public
 - Law 91-616 as amended: 42 U.S.C. section 4573.**
- 20 Section 3. Section 80-2709, R.C.M. 1947, is amended to
- 21 read as follows:
- 22 *80-2709. Definitions. For purposes of this act
- 23 chapter:
- (1) "alcoholic" means a person who habitually lacks 24 25
 - self-control as to the use of alcoholic beverages, or uses

- alcoholic beverages to the extent that his health is
- substantially impaired or endangered or his social or
- economic function is substantially disrupted;
- 4 (2) "approved private treatment facility" means a
- private agency meeting the standards prescribed in section
 - 69-6216 80-2713(1) and approved under section 69-6216
- 7 80-2713;
- (3) *approved public treatment facility* means a
- 9 treatment agency operating under the direction and control
- of the department or providing treatment under this act 10
- CPAPIER through a contract with the department and approved 11
- 12 under section 69-6216 80-2713;
- (4) "department" means the department of institutions 13
- provided for in section 82A-801, R.C.M. 1947; 14
- 15 (5) "division" means the division of alcohol and drug
- 16 dependence ESTABLISHED BY THE DEPARTMENT UNDER 80-2702:
- (5)(6) "incapacitated by alcohol" means that a person: 17
- as a result of the use of alcohol, is unconscious or has his 18
- judgment otherwise so impaired that he is incapable of 19
- realizing and making a rational decision with respect to his 20
- 21 need for treatment:
- t6)[7] "incompetent person" means a person who has 22
- 23 been adjudged incompetent by the district court;
- 24 †7)(8) "intoxicated person" means a person whose
- 25 mental or physical functioning is substantially impaired as

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Ha 0627/02

1	a result of the use of alcohol;
2	(49) "treatment" means the broad range of emergency.
3	outpatient, intermediate, and impatient services and care,
4	including diagnostic evaluation, medical, psychiatric
5	psychological, and social service care, vocational
6	rehabilitation and career counseling, which may be extended
7	to alcoholics, and intoxicated persons, and family members
8	110) "family member", is the spouse, mother, father
9	childs or member of the household of an alcoholic whose life
10	has been affected by the actions of the alcoholic and mag
11	require treatment:
12	(11) "prevention" has meaning on four levels; these
13	are:
14	(a) education to provide information to the school
15	children and general public relating to alcohol dependence
16	and alcoholism, treatment, and rehabilitative services and
17	to reduce the consequences of life experiences acquired by
18	contact with an alcoholic:
19	(b) early detection and recovery from the illness
20	before lasting emotional or physical damage, or both, have
21	occurred:
22	(c) if lasting emotional or physical damage, or both
23	have occurred, to arrest the illness before full disabilit
24	has been reached:
25	(d) the provision of facility requirements to mee

ı	division program standards and improve public accessibility
2	for services."
3	Section 4. Section 80-2710, R.C.M. 1947, is amended to
4	read as follows:
5	*80-2710. Powers of department <u>division</u> . The
6	department division of alcohol and drug dependence may:
7	(1) plan, establish, and maintain treatment programs as
8	necessary or desirable;
9	(2) coordinate its activities and cooperate with
10	alcoholism programs in this and other states, and make
11	contracts and other joint or cooperative arrangements with
12	state, local, or private agencies in this and other state:
13	for the treatment of alcoholics and intoxicated persons and
14	for the common advancement of alcoholism programs;
15	(3) do other acts and things necessary or convenient to
16	execute the authority expressly granted to it; and
17	(4) provide treatment facilities for alcoholics, end
18	intoxicated persons. and family members."
19	Section 5. Section 80-2711, R.C.M. 1947, is amended to
20	read as follows:
21	#80-2711. Duties of department <u>division</u>. The
22	department division shall:
23	(1) develop, encourage, and foster statewide, regional,
24	and local plans and programs for the prevention of

alcoholism and treatment of alcoholics and intoxicated

Ho 0627/02

HB 0627/02

persons in cooperation with public and private agencies, organizations, and individuals and provide technical assistance and consultation services for these purposes:

- (2) coordinate the efforts and enlist the assistance of all public and private agencies, organizations, and individuals interested in prevention of alcoholism and treatment of alcoholics and intoxicated persons;
- (3) cooperate with the department-of--institutions--and board of pardons in establishing and conducting programs to provide treatment for alcoholics and intoxicated persons in or on parole from penal institutions;
- (4) cooperate with the department of education, the superintendent of public instruction, schools, police departments, courts, and other public and private agencies, organizations and individuals in establishing programs for the prevention of alcoholism and treatment of alcoholics and intoxicated persons, and preparing curriculum materials thereon for use at all levels of education;
- (5) prepare, publish, evaluate, and disseminate educational material dealing with the nature and effects of alcohol;
- (6) develop and implement, as an integral part of treatment programs, an educational program for use in the treatment of alcoholics and intoxicated persons, which program shall include the dissemination of information

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concerning the nature and effects of alcohol;

- (7) organize and foster training programs for all
 persons engaged in treatment of alcoholics and intoxicated
 persons;
- 5 (8) sponsor and encourage research into the causes and 6 nature of alcoholism and treatment of alcoholics and 7 intoxicated persons, and serve as a clearing house for 8 information relating to alcoholism;
- 9 (9) specify uniform methods for keeping statistical
 10 information by public and private agencies, organizations,
 11 and individuals, and collect and make available relevant
 12 statistical information, including number of persons
 13 treated, frequency of admission and readmission, and
 14 frequency and duration of treatment;
- 15 (10) advise the governor in the preparation of a line comprehensive plan for treatment of alcoholics and intoxicated persons for inclusion in the state's comprehensive health plan;
- 19 (11) review all state health, welfare, and treatment 20 plans to be submitted for federal funding under federal 21 legislation, and advise the governor on provisions to be 22 included relating to alcoholism and intoxicated persons;
 - (12) assist in the development of, and cooperate with, alcohol aducation and treatment programs for employees of state and local governments and businesses and industries in

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- (13) utilize the support and assistance of interested persons in the community, particularly recovered alcoholics, to encourage alcoholics voluntarily to undergo treatment;
- (14) cooperate with the department of justice in establishing and conducting programs designed to deal with the problem of persons operating motor vehicles while intoxicated;
- (15) encourage general hospitals and other appropriate health facilities to admit without discrimination alcoholics and intoxicated persons and to provide them with adequate and appropriate treatment;
- 13 (16) encourage all health and disability insurance 14 programs to include alcoholism as a covered illness; and
 - (17) submit to the governor an annual report covering the activities of the department division."
- 17 Section 6. Section 80-2712, R.C.M. 1947, is amended to 18 read as follows:
 - #80-2712. Comprehensive program for treatment. (1) The department division shall establish a comprehensive and coordinated program for the treatment of alcoholics. and intoxicated persons. and family members.
 - (2) The program shall include:
- 24 (a) emergency treatment provided by a facility 25 affiliated with or part of the medical service of a general

1 hospital;

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- (b) inpatient treatment;
- (c) intermediate treatment; and
- 4 (d) outpatient and followup treatment.
- 5 (3) The department division shall provide for adequate
 6 and appropriate treatment for alcoholics and intoxicated
 7 persons admitted under sections 69-6218-to-69-6221 80-2715
 8 through 80-2718- Treatment may not be provided at a
- (4) All appropriate public and private resources shall
 be coordinated with and utilized in the program if possible.

correctional institution except for inmates.

- 12 (5) The department division shall prepare, publish, and
 13 distribute annually a list of all approved public and
 14 private treatment facilities.**
- Section 7. Section 80-2713, R.C.M. 1947, is amended to read as follows:
 - **80-2713. Facility standards -- inspections -- approvals. (1) The department division shall establish standards for approved treatment facilities that must be met for a treatment facility to be approved as a public or private treatment facility, and fix the fees to be charged for the required inspections. The standards may concern only the health standards to be met and standards of treatment to be afforded patients.
- 25 (2) The department <u>division</u> periodically shall inspect

HB 0627/02 HB 0627/02

approved public and private treatment facilities at reasonable times and in a reasonable manner.

3 (3) The department division shall maintain a list of 4 approved public and private treatment facilities.

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- (4) Each approved public and private treatment facility shall file with the department division on request, data, statistics, schedules, and information the department division reasonably requires. An approved public or private treatment facility that without good cause fails to furnish any data, statistics, schedules, or information as requested, or files fraudulent returns thereof, shall be removed from the list of approved treatment facilities.
- (5) The department division, after holding a hearing in accordance with the Administrative Procedure Act, may suspend, revoke, limit, or restrict an approval, or refuse to grant an approval, for failure to meet its standards.
- (6) A district court may restrain any violation of this section, review any denial, restriction, or revocation of approval, and grant other relief required to enforce its provisions.
- (7) Upon petition of the department division and after a hearing held upon reasonable notice to the facility, a district court may issue a warrant to the department division authorizing it to enter and inspect at reasonable times, and examine the books and accounts of, any approved

- 1 public or private treatment facility refusing to consent to
- 2 inspection or examination by the department division or
- 3 which the department division has reasonable cause to
- 4 believe is operating in violation of this act."
- 5 Section 8. Section 80-2714, R.C.M. 1947, is amended to
- read as follows:
- 7 **80-2714. Acceptance for treatment -- rules. The
- 8 department division shall adopt rules for acceptance of
- 9 persons into the treatment program, considering available
- 10 treatment resources and facilities, for the purpose of early
- 11 and effective treatment of alcoholics, and intoxicated
 - persons, and family members. In adopting the rules the
- 13 department division shall be guided by the following
- 14 standards:

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- 15 (1) If possible a patient shall be treated on a
 - voluntary rather than an involuntary basis.
- 17 (2) A patient shall be initially assigned or
- 18 transferred to outpatient or intermediate treatment, unless
- 19 he is found to require inpatient treatment.
- 20 (3) A person shall not be denied treatment solely
- 21 because he has withdrawn from treatment against medical
- 22 advice on a prior occasion or because he has relapsed after
- 23 earlier treatment.
- 24 (4) An individualized treatment plan shall be prepared
- 25 and maintained on a current basis for each patient person•

HB 0627/02

HB 627

(5) Provision shall be made for a continuum of coordinated treatment services, so that a person who leaves a facility or a form of treatment will have available and utilize other appropriate treatment."

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- Section 9. Section 80-2715, R.C.M. 1947, is amended to read as follows:
- "80-2715. Voluntary treatment of alcoholics. (1) An alcoholic may apply for voluntary treatment directly to an approved public treatment facility. If the proposed patient is a minor or an incompetent person, he, a parent, a legal guardian, or other legal representative may make the application.
- (2) Subject to rules adopted by the department division, the administrator of an approved public treatment facility may determine who shall be admitted for treatment. If a person is refused admission to an approved public treatment facility, the administrator, subject to departmental division rules, shall refer the person to another approved public treatment facility for treatment if possible and appropriate.
- (3) If a patient receiving inpatient care leaves an approved public treatment facility, he shall be encouraged to consent to appropriate outpatient or intermediate treatment. If it appears to the administrator of the treatment facility that the patient is an alcoholic who

- requires help, the department <u>division</u> shall arrange for assistance in obtaining supportive services and residential facilities.
- 4 (4) If a patient leaves an approved public treatment
 5 facility, with or against the advice of the administrator of
 6 the facility, the department division shall make reasonable
 7 provisions for his transportation to another facility or to
 8 his home. If he has no home he shall be assisted in
 9 obtaining shelter. If he is a minor or an incompetent person
 10 the request for discharge from an inpatient facility shall
 11 be made by a parent, legal guardian, or other legal
 12 representative or by the minor or incompetent if he was the
 13 original applicant.**
- 14 Section 10. Section 80-2716, R.C.M. 1947, is amended 15 to read as follows:
- 16 #80-2716. Treatment and services for intoxicated persons and persons incapacitated by alcohol. (1) An 17 18 intoxicated person may come voluntarily to an approved 19 public treatment facility for emergency treatment. A person 20 who appears to be intoxicated in a public place and to be in 21 need of help, if he consents to the proffered help, may be 22 assisted to his home, an approved public treatment facility. 23 an approved private treatment facility, or other health facility by the police. 24
- 25 (2) A person who appears to be incapacitated by alcohol

+13- HB 627 -14-

HB U627/02

Hs 0627/02

shall be taken into protective custody by the police and forthwith brought to an approved public treatment facility for emergency treatment. If no approved public treatment facility is readily available he shall be taken to an emergency medical service customarily used for incapacitated persons. The police, in detaining the person and in taking him to an approved public treatment facility, is taking him into protective custody and shall make every reasonable effort to protect his health and safety. In taking the person into protective custody, the detaining officer may take reasonable steps to protect himself. No entry or other record may be made to indicate that the person taken into custody under this section has been arrested or charged with a crime.

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(3) A person who comes voluntarily or is brought to an approved public treatment facility shall be examined by a licensed physician as soon as possible. He may then be admitted as a patient or referred to another health facility. The referring approved public treatment facility shall arrange for his transportation.

(4) A person who by medical examination is found to be incapacitated by alcohol at the time of his admission or to have become incapacitated at any time after his admission, may not be detained at the facility (1) once he is no longer incapacitated by alcohol, or (2) if he remains incapacitated

by alcohol for more than forty-eight (48) hours after admission as a patient, unless he is committed under section 69-6220 80-2717. A person may consent to remain in the facility as long as the physician in charge believes appropriate.

6 (5) A person who is not admitted to an approved public
7 treatment facility and is not referred to another health
8 facility, may be taken to his home. If he has no home, the
9 approved public treatment facility shall assist him in
10 obtaining shelter.

11 (6) If a patient is admitted to an approved public 12 treatment facility, his family or next of kin shall be 13 notified as promptly as possible. If an adult patient who is 14 not incapacitated requests that there be no notification, 15 his request shall be respected.

Section 11. Section 80-2717, R.C.M. 1947, is amended to read as follows:

18 #80-2717. Emergency commitment. (1) An intoxicated person who (a) has threatened, attempted, or inflicted 19 20 physical harm on another and is likely to inflict physical 21 narm on another unless committed, or (b) is incapacitated by 22 alcohol, may be committed to an approved public treatment 23 facility for emergency treatment. A refusal to undergo 24 treatment does not constitute evidence of lack of judgment 25 as to the need for treatment.

-15- H3 627

-16- HD 627

(2) The certifying physician, spouse, guardian, or relative of the person to be committed, or any other responsible person, may make a written application for commitment under this section, directed to the administrator of the approved public treatment facility. The application shall state facts to support the need for emergency treatment and be accompanied by a physician's certificate stating that he has examined the person sought to be committed within two (2) days before the certificate's date and facts supporting the need for emergency treatment. A physician employed by the admitting facility or the department is not eligible to be the certifying physician.

- (3) Upon approval of the application by the administrator of the approved public treatment facility, the person shall be brought to the facility by a peace officer, nealth officer, the applicant for commitment, the patient's spouse, the patient's guardian, or any other interested person. The person shall be retained at the facility to which he was admitted, or transferred to another appropriate public or private treatment facility, until discharged under subsection (5).
- (4) The administrator of an approved public treatment facility shall refuse an application if in his opinion the application and certificate fail to sustain the grounds for commitment.

- (5) When on the advice of the medical staff the administrator determines that the grounds for commitment no longer exist, he shall discharge a person committed under this section. No person committed under this section may be detained in any treatment facility for more than five (5) days. If a petition for involuntary commitment under section 69-6221 80-2718 has been filed within the five (5) days and the administrator in charge of an approved public treatment facility finds that grounds for emergency commitment still exist, he may detain the person until the petition has been heard and determined, but no longer than ten (10) days after filing the petition.
- (6) A copy of the written application for commitment and of the physician's certificate, and a written explanation of the person's right to counsel, shall be given to the person within twenty-four (24) hours after commitment by the department division, who shall provide a reasonable opportunity for the person to consult counsel."
- Section 12. Section 80-2718, R.C.M. 1947, is amended to read as follows:
 - #80-2718. Involuntary commitment of alcoholics. (1) A person may be committed to the custody of the department -of institutions division by the district court upon the petition of his spouse or guardian, a relative, the certifying physician, or the chief of any approved public

-17- HB 627

-18-

H3 627

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treatment facility. The petition shall allege that the person is an alcoholic who habitually lacks self-control as to the use of alcoholic beverages and that he (a) has threatened, attempted, or inflicted physical harm on another and that unless committed is likely to inflict physical harm on another; or (b) is incapacitated by alcohol. A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment. The petition shall be accompanied by a certificate of a licensed physician who has examined the person within two (2) 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 shall be alleged in the petition. The certificate shall set forth the physician's findings in support of the allegations of the petition. A physician employed by the admitting facility or the department division is not eligible to be the certifying physician.

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(2) Upon filing the petition, the court shall fix a date for a hearing no later than ten (10) days after the date the petition was filed. A copy of the petition and of the notice of the hearing, including the date fixed by the court, shall be served on the petitioner, the person whose commitment is sought, his next of kin other than the petitioner, a parent or his legal guardian if he is a minor, the administrator in charge of the approved public treatment

facility to which he has been committed for emergency care, and any other person the court believes advisable. A copy of the petition and certificate shall be delivered to each person notified.

5 (3) At the hearing the court shall hear all relevant testimony, including, if possible, the testimony of at least 7 one licensed physician who has examined the person whose commitment is sought. The person shall have a right to have a licensed physician of his own choosing examine him and 10 testify on his behalf, and if he has no funds with which to pay such physician, the reasonable costs of one such 11 12 examination and testimony shall be paid by the county. The person shall be present unless the court believes that his 13 14 presence is likely to be injurious to him; he shall be advised of his right to counsel and, if he is unable to hire 15 16 his own counsel, the court shall appoint an attorney to 17 represent him at the expense of the county. The court shall examine the person in open court, or if advisable, shall 18 19 examine the person in chambers. If he refuses an examination 20 by a licensed physician and there is sufficient evidence to believe that the allegations of the petition are true, or if 21 22 the court believes that more medical evidence is necessary, 23 the court may make a temporary order committing him to the department of institutions division for a period of not more 24 25 than five (5) days for purposes of a diagnostic examination.

H8 0627/02

(4) If after hearing all relevant evidence, including the results of any diagnostic examination by the department of institutions division, the court finds that grounds for involuntary commitment have been established by clear and convincing evidence, it shall make an order of commitment to the department of institutions division. It may not order commitment of a person unless it determines that the department of institutions division is able to provide adequate and appropriate treatment for him and the treatment is likely to be beneficial.

- in the custody of the department—of—institutions division for treatment for a period of thirty (30) days unless sooner discharged. At the end of the thirty (30) day period, he shall be discharged automatically unless the department—of institutions division before expiration of the period obtains a court order from the district court of the committing district for his recommitment upon the grounds set forth in subsection (1) for a further period of ninety (90) days unless sooner discharged. If a person has been committed because he is an alcoholic likely to inflict physical harm on another, the department—of—institutions division shall apply for recommitment if after examination it is determined that the likelihood still exists.
 - (6) A person recommitted under subsection (5) who has

not been discharged by the deportment-of-institutions division before the end of the ninety (90) day period shall be discharged at the expiration of that period unless the department-of-institutions division, before expiration of the period, obtains a court order from the district court of the committing district on the grounds set forth in subsection (1) for recommitment for a further period not to exceed ninety (90) days. If a person has been committed because he is an alcoholic likely to inflict physical harm on another, the department division shall apply for recommitment if after examination it is determined that the likelihood still exists. Only two (2) recommitment orders under subsections (5) and (6) are permitted.

(7) Upon the filing of a petition for recommitment under subsections (5) or (6), the court shall fix a date for hearing no later than ten (10) days after the date the petition was filed. A copy of the petition and of the notice of hearing, including the date fixed by the court, shall be served on the petitioner, the person whose commitment is sought, his next of kin other than the petitioner, the original petitioner under subsection (1) if different from the petitioner for recommitment, one of his parents or his legal guardian if he is a minor, and any other person the court believes advisable. At the hearing the court shall proceed as provided in subsection (3).

-21- HB 627

-22- H3 627

Нь 0627/02

(8) A person committed to the custody of the department of-institutions division for treatment shall be discharged at any time before the end of the period for which he has been committed if either of the following conditions is met:

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- (a) in case of an alcoholic committed on the grounds of likelihood of infliction of physical harm upon another, that he is no longer in need of treatment or the likelihood no longer exists; or
- (b) in case of an alcoholic committed on the grounds of the need of treatment and incapacity, that the incapacity no longer exists, further treatment will not be likely to bring about significant improvement in the person's condition, or treatment is no longer adequate or appropriate.
- (9) The court shall inform the person whose commitment or recommitment is sought of his right to contest the application, be represented by counsel at every stage of any proceedings relating to his commitment and recommitment, and have counsel appointed by the court or provided by the court, if he 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 regardless of his wishes. The person whose commitment or recommitment is sought shall be informed of his right to be examined by a licensed physician of his choice. If the person is unable to

-23-

obtain a licensed physician and requests examination by a physician, the court shall employ a licensed physician.

He 0627/02

- 3 (10) If a private treatment facility agrees with the 4 request of a competent patient or his parent, sibling, adult 5 child, or guardian to accept the patient for treatment, the 6 department—of—institutions division may transfer him to the 7 private treatment facility.
- 8 (11) A person committed under this section may at any
 9 time seek to be discharged from commitment by writ of habeas
 10 corpus or other appropriate means.
- 11 (12) The venue for proceedings under this section is 12 the place in which person to be committed resides or is 13 present."
- Section 13. Section 80-2719, R.C.N. 1947, is amended to read as follows:
- 16 **80-2719. Records of alcoholics and intoxicated 17 persons. (1) The registration and other records of treatment 18 facilities shall remain confidential and are privileged to 19 the patient.
- 20 (2) Notwithstanding subsection (1), the department
 21 division may make available information from patients*
 22 records for purposes of research into the causes and
 23 treatment of alcoholism. Information under this subsection
 24 shall not be published in a way that discloses patients*
 25 names or other identifying information.*

HB 627 -24- H3 627

HB 0627/02 HB 0627/02

Section 14. Section 80-2720, R.C.M. 1947, is amended to read as follows:

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*80-2720. Visitation and communication of patients. (1) Subject to reasonable rules regarding hours of visitation which the department division may adopt, patients in any approved treatment facility shall be granted opportunities for adequate consultation with counsel, and for continuing contact with family and friends consistent with an effective treatment program.

(2) Neither mail nor other communication to or from a patient in any approved treatment facility may be intercepted, read, or censored. The administrator may adopt reasonable rules regarding the use of telephone by patients in approved treatment facilities."

Section 15. Section 80-2722, R.C.M. 1947, is amended to read as follows:

*80-2722. Becartmental-reports Reports to legislature. The department division small achieve full implementation of the provisions of the act, as set forth in this chapter and related sections, no later than January 1, 1976. A progress report on the implementation shall be made to the 1975 legislative session. Thereafter the department division shall report, to each legislative session, on the status of the implemented act. This report, or any part thereof, may be included as the department's state plan for alcohol abuse

-25-

and alcoholism." 2 Section 16. There is a new R.C.M. section numbered 80-2725 that reads as follows: 80-2725. State-approved alcoholism programs utilizing funding generated by taxation on alcoholic beverages. 11)--State-approved--alcoholism--programs--utilizing-funding 7 for-the-treatmenty--rehabilitationy--and---prevention---af alcoholismy--as--provided-by-the-counties-of-Montana-and-the division-generated-by-taxation-on-alcoholic-beverages-shall 10 not-be-required-to--provide--matching--fundsy--This--section shall--not--preclude--the--acceptancey-by-approved-alcoholic 11 12 programs in Montanay of giftsy beggestsy or the donation - of 13 services--or--money--for--the--treatmenty-rehabilitationy-or 14 prevention-of-alcoholisms 15 (2)--State-approved-alcoholism-programs--using--revenue 16 generated by the taxation on alcoholic peverages may not 17 refuse---treatmenty---rehabilitationy---or---prevention---of 18 etcoholism---services---solely---because--of--en--individual*s 19 inability-to-pays 20 (3)--When-revenue-is-generated-by-the-payments-of--fees 21 for--services--by--state-approved--alcoholism-programsy-such 22 payments-for-services-must-be-returned-to+ ta)--the-county-treusurer-of-a-county-in-which--funding 23

has-been-provided-from taxation-on-alcoholic-beverages-to

the-extent-of-funds-allocated-to-the-program-by-the--countys

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HB 627 ~/6HB 0627/02 H5 0627/02

1	(b)thestate*sgeneralfundwhen-funding-has-bee
2	provided-from-taxation-on-alcoholic-beverages-to-theexten
3	of-such-funding-as-allocated-to-the-program-by-the-division
4	(1) REVENUE GENERATED BY 4-1-401 AND 4-1-404 FOR IH
5	IREATMENT, REHABILITATION, AND PREVENTION OF ALCOHOLISM MA
6	BE DISTRIBUTED IN FITHER OF THE FOLLOWING MANNERS:
7	(A) AS PAYMENT OF FEES FOR ALCOHOLISM SERVICE
8	PROVIDED BY STATE-APPROVED ALCOHOLISM PROGRAMS. CERTIFIE
9	ALCOHOLISM COUNSELORS, LICENSED PHYSICIANS, AND LICENSE
0	HUSPITALS: AND
1	18) AS GRANTS TO PERSONS OPERATING STATE-APPROVE
2	ALCOHOLISH PROGRAMS.
3	12) NO PERSON OPERATING A STATE-APPROVED ALCOHOLIS
4	PROGRAM MAY BE REQUIRED TO PROVIDE MATCHING FUNOS AS
5	CONDITION OF RECEIVING A GRANT UNDER SUBSECTION (1) OF THI
6	SECTION.
7	(3) IN ADDITION TO FUNDING RECEIVED UNDER THE
8	SECTION. A PERSON OPERATING A STATE-APPROVED ALCOHOLIS
9	PROGRAM MAY ACCEPT GIFTS. BEQUESTS. UR THE DONATION O
0	SERVICES OR MONEY FOR THE TREATMENT REHABILITATION . O
1	PREVENTION OF ALCOHOLISM.
2	(4) NU PERSON RECEIVING FUNDING UNDER THIS SECTION T
3	SUPPORT OPERATION OF A STATE-APPROVED ALCOHOLISH PROGRAM MA
4	REFUSE ALCOHOLISM TREATMENTS REHABILITATIONS OR PREVENTED
5	SERVICES TO A PERSON SOLELY BECAUSE OF THAT PERSON*

T	INABILITY TO PAI FOR INUSE SERVICES.
2	(5) A GRANT MADE UNDER THIS SECTION IS SUBJECT TO THE
3	FOLLOWING CONDITIONS:
4	(A) THE GRANT APPLICATION MUST CONTAIN AN ESTIMATE OF
5	ALL PROGRAM INCOME INCLUDING INCOME FROM EARNED FEES. GIFTS:
6	BEQUESTS: DONATIONS: AND GRANTS FROM GIMER THAN STATE
7	SOURCES DURING THE PERICO FOR WHICH GRANT SUPPORT IS SOUGHT.
8	(B) WHENEVER DURING THE PERIOD OF GRANT SUPPORT
9	PROGRAM INCOME EXCEEDS THE AMOUNT ESTIMATED IN THE GRANT
10	APPLICATION. THE AMOUNT OF THE EXCESS SHALL BE REPORTED TO
11	I) E _RANTOR.
12	(C) THE EXCESS SHALL BE USED BY THE GRANTEE UNDER THE
13	TERMS OF THE GRANT IN ACCORDANCE WITH ONE OR A COMBINATION
14	OF THE FOLLOWING OPTIONS:
15	(1) USE FOR ANY PURPOSE THAT FURTHERS THE OBJECTIVES
16	GE THE LEGISLATION UNDER WHICH THE GRANT WAS MADE: OR
17	(II) DEDUCT FROM TUTAL PROJECT COSTS TO DETERMINE THE
18	NET COSTS ON WHICH THE GRANTOR'S SHARE OF THE COSTS IS
19	BASED.
20	(4)161 Revenue generated by 4-1-401 and 4-1-404 for
21	the treatment, rehabilitation, and prevention of alcoholism
22	which has not been encumbered for those purposes by the
23	counties of Montana and \underline{OR} the division shall be returned to
24	the state's general fund within 30 days after the close of
25	each fiscal year.

-27- HB 627

-28- Hô 627

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Section 17. Section 4-1-401, R.C.M. 1947, is amended to read as follows:

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*4-1-401. License tax on liquor -- amount -distribution of proceeds. The department of revenue is hereby authorized and directed to charge, receive and collect at the time of sale and delivery of any liquor under any provisions of the laws of the state of Montana a license tax of five-percent-(5%) 15% of the retail selling price on all liquor so sold and delivered. Said tax shall be charged and collected on all liquor brought into the state and taxed by the department of revenue. The retail selling price shall be computed by adding to the cost of said liquor the state markup as designated by the department. Said five percent-(5%) 15% license tax shall be figured in the same manner as the state excise tax and shall be in addition to said state excise tax. The department of revenue shall retain the amount of such five-percent-15% 15% license tax so received in a separate account. Four-fifths-(4/5) Iwo-thirds of these revenues shall be distributed to the counties according to the amount of liquor purchased in each county. One-fifth (1/5) One-third of these revenues shall be deposited -- in -- the -- general -- fund retained by the state. Provided, however, in the case of purchases of liquor by a retail liquor licensee for use in his business, the department shall make such regulations as are necessary to apportion that proportion of license tax so generated to the county where the licensed establishment is located, for use as provided in section 4-1-402, R.C.M. 1947. The department of revenue shall pay quarterly to each county treasurer the proportion of the license tax due each county.

The county treasurer of each county shall retain one-fourth-(1/4) seven-tenths of said license tax, and shall, within thirty--(30) days after receipt thereof, apportion the remaining three-fourths--(3/4) three-tenths thereof to the treasurers of the incorporated cities and towns within his county, said apportionment to be based in each instance upon the proportion which the gross sale of liquor in such incorporated city or town bears to the gross sale of liquor in all of the incorporated cities and towns in his said county.

Of the seven-tenths of the tax retained by the county.

the county treasurer shall deposit six-sevenths of this amount in a fund within the county for the treatment.
rehabilitation, and prevention of alcoholism as approved by the state of Montana. The remaining one-seventh of the funds shall be retained in the county treasury for use by that county.

The one-third of the license tax on liquor retained by
the state shall be deposited within WITH THE STATE TREASURER
TO THE CREDIT OF the division of alcohol and drug dependency

-29- HB 627

-30- Ho 627

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DEPENDENCE each quarter for the treatment: rehabilitation

and prevention of alcoholism as approved by the state."

3 Section 18. Section 4-1-404, R.C.M. 1947, is amended 4 to read as follows:

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#4-1-404. Tax on imported beer -- computation in case of barrels of capacity other than thirty-one gallons. A tax of three dollars (\$3) per barrel of thirty-one (31) gallons, is hereby levied and imposed on each and every barrel of beer manufactured out of this state and sold herein by any wholesaler, which said tax shall be due at the end of each month from said wholesaler, upon any such beer so sold by him during that month. As to any beer imported and sold in containers other than barrels, or in barrels of more or less capacity than thirty-one (31) gallons, the quantity content shall be ascertained and computed by the department of revenue in determining the amount of tax due, as herein provided for. An additional tax of twenty-five-cents--15+25) \$1.75 per barrel is levied and imposed as provided by this section, and such additional tax is also to be levied and imposed at the same rate upon beer manufactured within the state. The additional tax of twenty-five-cents-(\$+25) il-75 is to be deposited, notwithstanding sections 4-1-407 and 4-1-408, or any other provision, in-the-general-fund within MITH THE STATE TREASURER TO THE CREDIT OF the division of alcohol and drug dependency DEPENDENCE each quarter for the

BB 0627/02

treatment: rehabilitation: and prevention of alcoholism as

2 approved by the state.**

-End-

-32- H8 627

April 6, 1977 Page 2 House Bill No.627

11. Amend page 12, section 8, line 8.

Following: line 7
Strike: "division"
Insert: "department"

12. Amend page 12, section 8, line 13.

Following: line 12 Strike: "division" Insert: "department"

13. Amend page 13, section 9, line 5, through line 13 on page 14.

Following: line 4

Strike: section 9 in its entirety Renumber: subsequent sections

14. Amend page 18, section 11, line 17.

Following: "by the"
Strike: "division"
Insert: "department"

15. Amend page 18, section 12, line 19 through line 1, page 26.

Following: line 18

Strike: sections 12 through 15 in their entirety

Renumber: subsequent sections

16. Amend page 29, section 17, line 8.

Following: "tax of"

Strike: "15" Insert: "10"

17. Amend page 29, section 17, line 14.

Following: line 13

Strike: "15" Insert: "10"

18. Amend page 29, section 17, line 17.

Following: "of such"

Strike: "15" Insert: "10"

19. Amend page 30, section 17, line 25 and line 1, page 31.

Following: "CREDIT OF the"

Strike: "division of alcohol and drug DEPENDENCE"

Insert: "department of institutions"

20. Amend page 31, section 18, line 18.

Following: line 17 Strike: "\$1.75" Insert: "\$1.00"

21. Amend page 31, section 18, line 21.

Following: "tax of"

Strike: "\$1.75" Insert: "\$1.00"

22. Amend page 31, section 18, lines 24, and 25.

· Following: "CREDIT OF the"

Strike: "division of alcohol and drug DEPENDENCE"

Insert: "department of institutions"

Senate Committee on Public Health, Welfare & Safety

That House Bill No. 627 be amended as follows:

1. Amend page 1, title, lines 14, 15 and 16.

Following: "ACT"

Strike: ", ESTABLISHING A DIVISION OF ALCOHOL AND DRUG DEPENDENCE"

2. Amend page 1, section 1, line 23 through line 19 on page 3.

Following: line 22

Strike: Sections 1 and 2 in their entirety

Renumber: subsequent sections

3. Amend page 4, section 3, lines15 and 16.

Following: line 14

Strike: subsection (5) in its entirety

Renumber: subsequent subsections

4. Amend page 6, section 4, line 5.

Following: "powers of"
Strike: "division"
Insert: "department"

insert: department

5. Amend page 6, section 4, line 6.

Following: line 5

Strike: "division of alcohol and drug dependence"

Insert: "department"

6. Amend page 6, section 5, line 19, through line 16 on page 9.

Following: line 18

Strike: section 5 in its entirety Renumber: subsequent sections

7. Amend page 9, section 6, line 20.

Following: line 19
Strike: "division"
Insert: "department"

8. Amend page 10, section 6, line 5.

Following: "the"
Strike: "division"
Insert: "department"

9. Amend page 10, section 6, line 12.

Following: "The"
Strike: "division"
Insert: "department"

10. Amend page 10, section 7, line 15.

Following: line 14

Strike: Section 7 in its entirety Renumber: subsequent sections

SENATE COMMITTEE OF THE WHOLE

That House Bill No. 627 be amended as follows:

Amend title, lines 19 and 20.

Following: "4-1-401."

"80-2702, 80-2703," Strike:

"4-1-404" Insert: Following: "80-2709"

"through 80-2720, and 80-2722," Strike:

Insert: ", 80-2710, 80-2712, 80-2714, 80-2716, 80-2717"

2. Amend page 30, section 17, line 7.

Following: "(1/4)"

Strike: "seven-tenths"

Insert: "50%"

3. Amend page 30, section 17, line 9. Following: "(3/4)"

Strike: "three-tenths"

Insert: "50%"

Amend page 30, section 17, line 16. 4.

Following: "of the"

Strike: "seven-tenths"

Insert: "50%"

SENATE COMMITTEE OF THE WHOLE

That House Bill No. 627 be amended as follows:

1. Amend title, lines 19 and 20.

Following: "4-1-401."

"80-2702, 80-2703," Strike:

Insert: "4-1-404" Following: "80-2709"

"through 80-2720, and 80-2722," Strike:

Insert: ", 80-2710, 80-2712, 80-2714, 80-2716, 80-2717"

2. Amend page 30, section 17, line 7.

Following: "(1/4)"

Strike: "seven-tenths"

"⁵⁰%" Insert:

3. Amend page 30, section 17, line 9. Following: "(3/4)"

Strike: "three-tenths"

Insert: "50%"

4. Amend page 30, section 17, line 16.

Following: "of the"

Strike: "seven-tenths"

Insert: "50%"

read-as-follows+

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2	INTRODUCED BY W. BAETH, FABREGA, ROTH, KROPP, MULAR, DAY,
š	SHELDEN. STAIGHILLER, DASSINGER, BRAND, HIRSCH, CURTISS,
4	FEDA, ESTENSON, ERNST, WALDRON, KEYSER, DUSSAULT, PISTORIA,
5	MCLANE, UHDE, ELLERD, BURNETT, J. GUNDERSON, MELDY, VINCENT,
6	GILLIGAN, UNDERDAL, E. GUNDERSON, COURTNEY, HOLMES, R. BAETH,
7	RAMIREZ, LUND, KESSLER, KENNERLY, GERKE, MANUEL, SCULLY, COX,
8	WILLIAMS, PALMER, HALVORSON, O'CONNELL, ELLIS, O'KEEFE, RYAN,
9	HUENNEKENS, FRATES, HARPER, BENGTSON, WOOD, BRADLEY, ROBBINS,
10	LIEN, SOUTH, JENSEN, DRISCOLL, STOBIE, ELLISON, HAND, HANSEN,
11	QUILICI: CONROY: FAGG: KANDUCH: BARDANOUVE: METCALF: MENAHAN
12	·
13	A BILL FOR AN ACT ENTITLED: "AN ACT TO AMEND CERTAIN
14	PROVISIONS OF THE UNIFORM ALCOHOLISM INTOXICATION $ACT_{\overline{\bullet}}$
15	ESTABLISHING-ADIVISIONOFALCOHOLANDDRUGDEPENDENCY
16	BEPENDENCE ; INCREASING THE TAX ON ALCOHOLIC BEVERAGES TO
17	CREATE FUNDING FOR AUTHORIZED PROGRAMS; ESTABLISHING CERTAIN
18	REQUIREMENTS FOR PROGRAMS RECEIVING STATE FUNDING SUPPORT:
19	AMENDING SECTIONS 4-1-401, 80-2702+-80-2703+ 4-1-404.
20	80-2709 THRBUGH-80-2720y-ANB-80-2722y- 80-2710: 80-2712:
21	80-2714. 80-2716. AND 80-2717. R.C.M. 1947."
22	
23	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
24	Section-lySection-80-2702y-RyCyMy-1947y-is-amended-to

HOUSE BILL NO. 627

1	"UU-2102wDuttesofdepartmentdepartment
2	authorizedtoacceptgiftsenterintocontracts
3	acquire-and-disposeofproperty(1)Thedepartmentof
4	institutionsyhereafterreferredto-as-department-in-this
5	chaptery-shell:
6	ta)Planypromoteyandassistinthesupportaf
7	ałcohołendd rugdependencepreventionytreatwentya nd
8	control-programs;
9	(b)Conductysponsorysupportresearchy
ıo	investigationsyandstudiesyincluding-evaluationy-of-all
11	phases-of-alcohol-and-drug-dependence;
12	{c}Assist-the-development-of-educational-and-training
13	programs-relative-to-sicobol-and-drug-dependencey-andcarry
14	onprogramstoassistthepublicyandtechnicaland
15	professionalgroupsyinbecomingfullyinformedabout
16	alcohol-and-drug-dependence;
17	(d)Promotevdevelopyandassistyfinanciallyand
8 1	otherwisey-alcohol-and-drug-dependence-programs-administered
19	by-other-stateagencieslocalgovernmentagenciesand
20	private-nonprofit-organizations-and-agencies;
21	(e)Encourage-and-promote-effective-use-of-facilitiesv
22	resourcesy-and-funds-in-the-planning-and-conduct-of-programs
23	andactivitiesforpreventionytreatmenty-and-control-of
24	alcohol-and-drug-dependence-andy-in-this-respectycooperate
25	withandutilizetothemaximumpossibleextentthe

HB 0627/03 HB 0627/03

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1	resourcesandservicesoffederalystateyandlocal
2	agencies
3	fflEstablishadivisionofalcoholanddrug
4	dependences
5	(2)To-corry-out-this-acty-the-department-may+
6	(a)Accept-giftsy-grantsy-and-donations-ofmoneyand
7	property-from-public-and-private-sources;
8	(b)Enter-into-contracts;
9	(c)kcquire-and-dispose-of-propertyw ™
10	Section-2:Section-88-2703y-RuGaMa-1947y-is-amended-to
11	rend-as-follows:
12	#80-2703wAdministrationoffederalprograms he
13	department-of-institutions division-of-alcohol-and-drug
14	<u>dependence</u> is-hereby-designated-the-single-state-agency-for
15	the-administration-of-federal-programs-under+
16	(1)the-Drug-Abuse-Office-and-Treatment-Actof1972y
17	Public-taw-92-255-as-amendedy-21-Uw5*Ew-section-11769-and
18	(2)theComprehensiveAlcoholAbuseand-Alcoholism
19	Preventiony-Treatment-and-Rehabilitation-Act-of-1970y-Public
20	Law-91-616-as-amendedy-42-U+S+C+-section-4573+■
21	Section 1. Section 80-2709, R.C.M. 1947, is amended to
22	read as follows:
23	*80-2709. Definitions. For purposes of this act
24	<pre>chapter:</pre>
25	(1) "alcoholic" means a person who habitually lacks

sel	f-contr	ol as to t	he use of	f alcoholic	c beve	rages	or u	uses
alc	oholic	beverages	to the	extent	that	his	health	is
sub	stantia	illy impai	red or	endangere	d or	his	social	or
eco	nomic f	unction is	substant	ially dis	rupted	l ;		
	(2)	<pre>mapproved</pre>	private	treatmen	t fac	ility'	mean:	s a

- private agency meeting the standards prescribed in section 69-6216 80-2713(1) and approved under section 69-6216 80-2713;
- (3) "approved public treatment facility" means a treatment agency operating under the direction and control of the department or providing treatment under this act CHAPIER through a contract with the department and approved under section 69-6216 80-2713:
- 14 (4) "department" means the department of institutions provided for in section 82A-801, R.C.M. 1947;

t51---division-means-the-division-of-stechol-and--drug dependence ESTABLISHED-BY-THE DEPARTMENT-UNDER-80-27021

(5)(6)(5) "incapacitated by alcohol" means that a person, as a result of the use of alcohol, is unconscious or has his judgment otherwise so impaired that he is incapable of realizing and making a rational decision with respect to his need for treatment;

- 23 t6)171(6) "incompetent person" means a person who has 24 been adjudged incompetent by the district court;
- 25 (7)t6)(7) "intoxicated person" means a person whose

HB 627

НВ 0627/03 НВ 0627/03

has been reached:

1	mental or physical functioning is substantially impaired as
2	a result of the use of alcohol;
3	(8)(2)(8) "treatment" means the broad range of
4	emergency, outpatient, intermediate, and inpatient services
5	and care, including diagnostic evaluation, medical,
6	psychiatric, psychological, and social service care,
7	vocational rehabilitation and career counseling, which may
8	be extended to alcoholics, and intoxicated persons, and
9	family members:
	. 1121 Thaile members. In the payment of the
1	father, child, or sember of the bousehold of an alcoholic
12	whose life has been affected by the actions of the alcoholic
13	and may require treatment:
14	(11)(10) "prevention" has meaning on four levels: these
15	are:
16	(a) education to provide information to the school
1 <i>i</i>	children and general public relating to alcohol dependence
18	and alcoholism, treatment, and rehabilitative services and
19	to reduce the consequences of life experiences acquired by
20	contact with an alcoholic:
21	(b) early detection and recovery from the illness
22	before lasting emotional or physical damage, or both, have
23	occurred:

(c) if lasting emotional or physical damage. or both.

have occurred to arrest the illoess before full disability

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2	(d) the provision of facility requirements to meet
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3	division program standards and improve public accessibility
4	for services."
5	Section 2. Section 80-2710, R.C.M. 1947, is amended to
6	read as follows:
7	#80-2710. Powers of department division DEPARIMENT.
8	The department <u>division of alcohol-and drug-dependence</u>
9	DEPARIMENI may:
10	(1) plane establishe and maintain treatment programs as
11	necessary or desirable;
12	(2) coordinate its activities and cooperate with
13	alcoholism programs in this and other states, and make
14	contracts and other joint or cooperative arrangements with
15	state, local, or private agencies in this and other states
16	for the treatment of alcoholics and intoxicated persons and
17	for the common advancement of alcoholism programs;
18	(3) do other acts and things necessary or convenient to
19	execute the authority expressly granted to it; and
20	(4) provide treatment facilities for alcoholics and
21	intoxicated persons * and family members **
22	Section-5Section-80-2711y-RefeMe-1947y-is-amended-to
23	read-as-follows+
24	*80-2711Butiesofdepartment divisionThe
25	department <u>division</u> -shall+

2 4 4 4 7 7 7 7 7 7 7 7 7 7 8 8 9 9 9 9 11 11 11 11 11 11 11	treatment—of—oleoholics—and—intoxicated—bersonsy—whice program—shall—include—the—dissemination—of—information (i)-organize—and—forter—training—programs—for—alpersons—engaged—in_treatment of_alcoholics—and_intoxicate persons (6)-sponsor—and—encourage—research—into—the—causes—an nature——of—alcoholism—and—treatment—of—alcoholics—an intoxicated—personsy—and—treatment—of—alcoholics—an intoxicated—personsy—and—treatment—of—alcoholics—an information—relating—to—alcoholism; (9)specify—uniform—methods—for-keeping-statistica information—by-public—and—private—agenciesy—organizationss and—individualsy—and—collect—ond-make—available—relevan statistical—informationy—including—number—of—person treatedy——frequency—of—edmission—end—readmissiony—an frequency—and—duration—of—treatment; (10)-advise—the—qovernor—in—the—preparation—of— comprehensive—health—plont intoxicated—persons—for—treatment—of—alcoholics—an intoxicated—persons—for—treatment—of—alcoholics—an intoxicated—persons—for—treatment—in—the—statesi comprehensive—health—plont
24	<pre>tegistationyendedvisethegovernor-on-provisions-to-be included-relating-to-alcoholism-and-intoxicated-persons;</pre>

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HB 0627/03 HB 0627/03

(12)-assist-in-the-development-ofy-and-cooperatewithy
alcoholeducationandtreatment-programs-for-employees-of
state-and-local-governments-and-businesses-and-industries-in
the-state;
(13)-utilize-the-support-and-assistanceofinterested
persons-in-the-community-particularly-recovered-alcoholics+
to-encourage-alcoholics-voluntarily-to-undergo-treatment;
(14)-cooperatewiththedepartmentofjusticein
establishing-and-conducting-programs-designed-todealwith
theproblemofpersonsoperatingmatorvehicleswhile
intoxi cat ed;
(15)-encourage-general-hospitols-and-otherappropriate
health-facilities-to-admit-without-discrimination-alcoholics
andintoxicatedpersonsand-to-provide-them-with-adequate
and-appropriate-treatment;
<pre>tid}-encourageallhealthanddisabilityinsurance</pre>
programs-to-include-alcoholism-as-a-covered-illness;-and
(17)-submittothe-governor-an-annual-report-covering
the-activities-of-the-department <u>division</u> *
Section 3. Section 80-2712, R.C.M. 1947, is amended to
read as follows:
read as lottoms.
#80-2712. Comprehensive program for treatment. (1) The

alcoholics, and intoxicated persons, and family members.

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- 2 (a) emergency treatment provided by a facility 3 affiliated with or part of the medical service of a general 4 hospital;
 - (b) inpatient treatment;

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- (c) intermediate treatment; and
- (d) outpatient and followup treatment.

(2) The program shall include:

- 8 (3) The department division DEPARIMENI shall provide
 9 for adequate and appropriate treatment for alcoholics and
 10 intoxicated persons admitted under sections 69-6218--to
 11 69-6221 80-2715 through 80-2718. Treatment may not be
 12 provided at a correctional institution except for inmates.
 - (4) All appropriate public and private resources shall be coordinated with and utilized in the program if possible.
- 15 (5) The department division DEPARIMENI shall prepare.

 16 publish, and distribute annually a list of all approved

 17 public and private treatment facilities.**
- 18 Section—Tw--Section—80-2713y—RwEwMw-1947y—is-emended—to
 19 reed—es-follows+
- 20 #88-2713w--Facility---standards------inspections---21 approvalsw (t)--The--department division--shall--establish
 22 atandards-for-approved-treatment-facilities-that-must-be-met
 23 for--a--treatment--facility--to--be--approved-as-a-public-or
 24 private-treatment-facilityw-and-fix-the-fees-to--be--charged
 25 for-the-required-inspectionsw-The-standards-may-concern-only

the-health-standards-to-be-met-and-standards-of-treatment-to
be-afforded-patients*
(2)The-department <u>division</u> -periodically-shall-inspect
approvedpublicandprivatetreatmentfacilitiesat
reasonable-times-and-in-a-reasonable-manner*
(3)Thedepartment <u>division</u> -shall-maintain-a-list-of
approved-public-and-private-treatment-facilitiesw
(4)-Each-approved-public-and-private-treatment-facility
shall-file-with-the-department <u>division-on-requesty-datay</u>
statisticsyschedulesyandinformationthedepartment
division-reasonably-requiresw-An-approved-public-orprivate
treatmentfacility-that-without-good-cause-fails-to-furr -sh
onydataystatisticsyschedulesyorinformationas
requestedyorfilesfraudulentreturns-thereofy-shall-be
removed-from-the-list-of-approved-treatment-facilities.
(5)-The-department <u>division</u> y-ofter-holding-a-hearing-in
accordancewiththeAdministrativeProcedureActymay
suspendyrevokeylimity-or-restrict-an-approvaly-or-refuse
to-grant-an-approvaly-for-failure-to-meet-its-standards*
<pre>f6}-A-district-court-may-restrain-any-violation-of-this</pre>
sectiony-review-any-denialy-restrictionyorrevocationof
approvalsandgrantotherrelief-required-to-enforce-its
provisions
† 7}-Upon-petition-of-the-department <u>division-andafter</u>

a--hearing--held--upon--reasonable-notice-to-the-facilityy-a

l	districtcourtmayissueawarranttothedepartment
2	<u>division</u> authorizingit-to-enter-and-inspect-at-reasonable
3	timesy-and-examine-the-books-and-accounts-ofyanyapproved
4	public-or-private-treatment-facility-refusing-to-consent-to
5	inspection-or-examinationbythedepartment <u>division</u> or
6	which-thedepartment <u>division</u> hasreasonablecauseto
7	believe-is-operating-in-violation-of-this-acta*
8	Section 4. Section 80-2714, R.C.M. 1947, is amended to
9	read as follows:
10	*80-2714. Acceptance for treatment rules. The
11	department division DEPARIMENT shall adopt rules for
12	acceptance of persons into the treatment program,
13	considering available treatment resources and facilities,
14	for the purpose of early and effective treatment of
15	alcoholics, and intoxicated persons, and family members. In
16	adopting the rules the department <u>division</u> <u>DEPARIMENI</u> shall
17	be guided by the following standards:
18	(1) If possible a patient shall be treated on a
19	voluntary rather than an involuntary basis.
20	(2) A patient shall be initially assigned or
21	transferred to outpatient or intermediate treatment, unless
22	he is found to require inpatient treatment.
23	(3) A person shall not be denied treatment solely

because he has withdrawn from treatment against medical

advice on a prior occasion or because he has relapsed after

HB 627

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earlier treatment.

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- (4) An individualized treatment plan shall be prepared and maintained on a current basis for each potient person.
- (5) Provision shall be made for a continuum of coordinated treatment services, so that a person who leaves a facility or a form of treatment will have available and utilize other appropriate treatment.
- Section-9*--Section-80-2715y-R*C*M*-1947y-is-amended-to
- #88-2715v--Voluntary-treatment-of--sicoholicsv (1)-An alcoholic-may-apply-for-voluntary-treatment-directly--to--an approved--public-treatment-facilityv-If-the.proposed-patient is-a-minor-or-en-incompetent-persony-hev-a-parenty--a--legal quardiany---or--other--legal--representative--may--make--the applications
- (2)—Subject—to—rules—adopted—by—the—department

 division—the—administrator—of—an—approved—public—treatment
 facility—may—determine—who—shall—be—admitted—for—treatment

 If—a—person—is—refused—admission—to—an—approved—public
 treatment——facility——the——administrator——subject——to
 departmental division—rules—shall—refer—the—person—to
 another—approved—public—treatment—facility—for—treatment—if
 possible—and—appropriate—
- (3)--if--a--patient--receiving-inpatient-core-leaves-an approved-public-treatment-facility-he-shall--be--encouraged

i	toconsenttoappropriateoutpatientorintermediate
!	treatment=Ifitappearstotheadministratorofthe
3	treatmentfacilitythatthepatientis-an-alcoholic-who
•	requires-helpy-the-department <u>division</u> -shallarrangefor
5	assistancein-abtaining-supportive-services-and-residentie
5	facititiesv

- (4)-if-a-patient-leaves-an-approved-public-treatment facility-with-or-against-the-advice-of-the-administrator-of the-facility-the-department <u>division</u>-shall-make-reasonable provisions-for-his-transportation-to-another-facility-or--to his-homes-if-he-has-no-home-he-shall-be-assisted-in obtaining-shelters-if-he-is-a-minor-or-an-incompetent-person the-request-for-discharge-from-an-inpatient--facility--shall be--made--by--a--parenty--legal--guardiany--or--other--legal representative-or-by-the-minor-or-incompetent-if-he-was--the original-applicants**
- Section 5. Section 80-2716, R.C.M. 1947, is amended to read as follows:
- m80-2716. Treatment and services for intoxicated persons and persons incapacitated by alcohol. (1) An intoxicated person may come voluntarily to an approved public treatment facility for emergency treatment. A person who appears to be intoxicated in a public place and to be in need of help, if he consents to the proffered help, may be assisted to his home, an approved public treatment facility,

-14- HB 627

HB 0627/03 H9 0627/03

an approved private treatment facility, or other health facility by the police.

- (2) A person who appears to be incapacitated by alcohol shall be taken into protective custody by the police and forthwith brought to an approved public treatment facility for emergency treatment. If no approved public treatment facility is readily available he shall be taken to an emergency medical service customarily used for incapacitated persons. The police, in detaining the person and in taking him into protective custody and shall make every reasonable effort to protect his health and safety. In taking the person into protective custody, the detaining officer may take reasonable steps to protect himself. No entry or other record may be made to indicate that the person taken into custody under this section has been arrested or charged with a crime.
- (3) A person who comes voluntarily or is brought to an approved public treatment facility shall be examined by a licensed physician as soon as possible. He may then be admitted as a patient or referred to another health facility. The referring approved public treatment facility shall arrange for his transportation.
- (4) A person who by medical examination is found to be incapacitated by alcohol at the time of his admission or to

-15-

- have become incapacitated at any time after his admission, may not be detained at the facility (1) once he is no longer incapacitated by alcohol, or (2) if he remains incapacitated by alcohol for more than forty-eight (48) hours after admission as a patient, unless he is committed under section 69-6220 80-2717. A person may consent to remain in the facility as long as the physician in charge believes appropriate.
- 9 (5) A person who is not admitted to an approved public
 10 treatment facility and is not referred to another health
 11 facility, may be taken to his home. If he has no home, the
 12 approved public treatment facility shall assist him in
 13 obtaining shelter.
 - (6) If a patient is admitted to an approved public treatment facility, his family or next of kin shall be notified as promptly as possible. If an adult patient who is not incapacitated requests that there be no notification, his request shall be respected.
- Section 6. Section 80-2717, R.C.M. 1947, is amended to read as follows:
- 21 M80-2717. Emergency commitment. (1) An intoxicated 22 person who (a) has threatened, attempted, or inflicted 23 physical harm on another and is likely to inflict physical 24 harm on another unless committed, or (b) is incapacitated by 25 alcohol, may be committed to an approved public treatment

НВ 0627/03 HB 0627/03

facility for emergency treatment. A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment.

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- (2) The certifying physician, spouse, guardian, or relative of the person to be committed, or any other responsible person, may make a written application for commitment under this section, directed to the administrator of the approved public treatment facility. The application shall state facts to support the need for emergency treatment and be accompanied by a physician's certificate stating that he has examined the person sought to be committed within two (2) days before the certificate's date and facts supporting the need for emergency treatment. A physician employed by the admitting facility or the department is not eligible to be the certifying physician.
- (3) Upon approval of the application by the administrator of the approved public treatment facility, the person shall be brought to the facility by a peace officer, health officer, the applicant for commitment, the patient's spouse, the patient's guardian, or any other interested person. The person shall be retained at the facility to which he was admitted, or transferred to another appropriate public or private treatment facility, until discharged under subsection (5).
 - (4) The administrator of an approved public treatment

facility shall refuse an application if in his opinion the application and certificate fail to sustain the grounds for commitment.

- (5) When on the advice of the medical staff the administrator determines that the grounds for commitment no longer exist, he shall discharge a person committed under this section. No person committed under this section may be я detained in any treatment facility for more than five (5) days. If a petition for involuntary commitment under section 69-6221 80-2718 has been filed within the five (5) days and the administrator in charge of an approved public treatment facility finds that grounds for emergency commitment still exist, he may detain the person until the petition has been heard and determined, but no longer than ten (10) days after filing the petition.
 - (6) A copy of the written application for commitment and of the physician's certificate, and a written explanation of the person's right to counsel, shall be given to the person within twenty-four (24) hours after commitment by the department division DEPARIMENT, who shall provide a reasonable opportunity for the person to consult counsel.
- 22 Section-12w-Section-80-2718w-RwEwMw-1947y-is-amended
 23 to-read-ss-follows:
- 24 MUO-2710w--Involuntary--commitment-of-alcoholicsw (1)-A
 25 person-may-be-committed-to-the-custody-of-the-department--of

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institutions division-by--the--district--court--upon---the petition---of--his--spouse--or--quordion,--a--relativey--the certifying-physiciany-or-the-chief-of--any--approved--public treatment--facilityw--The--petition--shall--allege--that-the person-is-an-alcoholic-who-habitually-lacks-self-control--as to--the--use--of--alcoholic--beverages--and--that-he-(a)-has threatenedy-attemptedy-or-inflicted-physical-harm-on-another and-that-unless-committed-is-likely-to-inflict-physical-harm on-anothers-or-(b)-is-incapacitated-by-alcoholy-A-refusal-to undergo-treatment-does-not-constitute-evidence--of--lack--of iudament-as-to-the-need-for-treatment-The-petition-shall-be accompanied-by-a-certificate-of-a-licensed-physician-who has examined-the-person-within-two-{2}-days-before-submission-of the--petitiony--unless-the-person-whose-commitment-is-sought has-refused-to-submit-to-a--medical--examination--in--which case--the--fact-of-refusel-shall-be-alleged-in-the-publitions The-certificate-shall-set-forth-the-physician*s-findings--in support--of--the--allegations--of--the-petitionw-A-physician employed--by--the--admitting--facility--or--the---department division-is-not-eligible-to-be-the-certifying-physicians

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(27-Upon-filing-the-petitiony-the-court-shall-fix-a date-for-a-hearing-no-later-than-ten-(10)--days;-after-the date-the-petition-was-filedy-A-copy-of-the-petition-and-of the-notice-of-the-hearingy-including-the-date-fixed-by-the courty--shall-be-served-on-the-petitionery-the-person-whose

commitment-is--soughty--his--next--of--kin--other--thon--the
petitionery-a-parent-or-his-legal-quardian-if-he-is-a-minory
the-administrator-in-charge-of-the-approved-public-treatment
facility--to-which-he-has-been-committed-for-emergency-carey
and-any-other-person-the-court-believes-advisables-A-copy-of
the-petition-and-certificate---shall--be--delivered--to--each
person-notifieds

(3)--At--the--hearing-the-court-shall-hear-all-relevant testimonyy-includingy-if-possibley-the-testimony-of-at-least one-licensed-physician-who-has--examined--the--person--whose commitment--is-soughtw-The-person-shall-have-a-right-to-have a-licensed-physician-of-his-own--choosing--examine--him-rand testify--on-his-behalfy-and-if-he-has-no-funds-with-which-to pay--such--physiciany--the--reasonable--costs--of--one--such examination--and--testimony-shall-be-paid-by-the-countyv-The person-shall-be-present-unless-the-court-believes--that--his presence--is--likely--to--be--injurious--to-himt-he-shell-be advised-of-his-right-to-counsel-andv-if-he-is-unable-to-hire his-own-counsely-the-court--shall--appoint--an--attorney--to represent--him-at-the-expense-of-the-county--The-court-shall examine-the-person-in-open-courty--or--if--advisabley--shall examine-the-person-in-chambers--If-he-refuses-an-examination by--a-licensed-physicien-and-there-is-sufficient-evidence-to believe-that-the-allegations-of-the-petition-are-truev-or-if the-court-believes-that-more-medical-evidence-is--necessarys

-20- HB 627

department of institutions division for a period of not more than five (5) days for purposes of a diagnostic examination; (4) if offer hearing old relevant evidence including the results of any diagnostic examination by the department of institutions division the court finds that grounds for involuntary commitment have been established by clear and convincing evidence; it shall make an order of commitment to the department of institutions division is able to may not order commitment of institutions division is able to provide adequate and appropriate treatment for him and the treatment of adequate and appropriate treatment for him and the treatment (5) - A person committed under this section shall remain in the custody of the department of institutions division for treatment for a period of thirty (30) days unless sooner dischargeds At the confidence of the thirty (30) days unless sooner dischargeds automatically unless the department of institutions division
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t98}--days--unless--sooner--dischorgeds-if-a-person-has-been

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committed-becouse-he--is--an--alcoholic--likely--to--inflict physical--harm--on--anothery--the-department-of-institutions HB 627

HB 0627/03

tegat-quardien-if-he-is-a-minory-and-anyotherpersonthe	-4	*ishes*-frepersonwhosecossitesentorrecossitesentis
courtbetievesadvisableAtthe-hearing-the-court-shall	2	soughtshall-beinformed-of-his-right-to-be-examined-by-a
proceed-as-provided-in-subsection-{3}=	٤	}icensed-physician-of-his-choice!f-the-person-is-unable-to
{8}-4-person-committed-to-the-custody-of-the-department	4	obtain-a-licensed-physicion-and-requestsexominationbys
of-institutions <u>dixision</u> -for-treatment-shall-bedischarged	5	· physiciony-the-court-shall-employ-a-licensed-physicion*
atonytimebefore-the-end-of-the-period-for-which-he-has	9	{18}1faprivate-treatment-facility-agrees-with-the
been-committed-if-either-of-the-following-conditions-is-met:	7	request-of-a-competent-potient-or-his-parenty-siblingy-adult
taj-in-case-of-an-alcoholic-committed-on-the-grounds-of	ಹ	child,-or-quardian-to-accept the-patient-for-treatmentythe
tikelihood-of-infliction-of-physical-harm-upon-anothery-that	6	departmentof-institutions <u>digision</u> -may-transfer-him-to-the
he-is-no-tonger-in-need-of-treatment-orthelikelihoodno	10	private-treatment-facility.
tonger-extatat-or	11	{ii}-i-a-person-committed-under-this-section-mayatany
<pre>{b}-in-case-of-an-alcoholic-committed-on-the-ground: -of</pre>	12	time-seek-to-be-discharged-from-commitment-by-writ-of-habeas
the need of treatment and incapacity, that the incapacity no	13	corpus-or-other-appropriate-means.
tonger-exists.further-treatment-will-not-be-likely-to-bring	14	{12}Thevenuefor-proceedings-under-this-section-is
aboutsignificant-improvement-in-the-person*s-conditiony-or	15	the-place-in-which-person-tobecommittedresidesoris
treatment-is-no-longer-adequate-or-appropriates	16	presente
{9}-¥he-court-sholi-inform-the-person-whosecommitment	11	Section-13 wSection88-2719 yRutsHw-1947 y-is-amended
orrecommitmentissoughtofhisrightto-contest-the	18	to-read-as-foltoss
application.be-represented-by-counsel-at-every-stage-of-any	19	*88-2719*Recordsofalcoholicsandintoxicated
proceedings-relating-to-his-commitment-and-recommitmenty-and	20	persons* {ij-The-registration-and-other-records-of-treatment
have-counset-appointed-bythecourtorprovidedbythe	21	facititiesshallremain-confidential-and-are-privileged-to
courtyifhe-wants-the-assistance-of-counsel-and-is-unable	22	the-patients
to-obtain-counselw-if-the-courtbelievesthattheperson	23	{2}Notwithstandingsubsection{1}ythedeportment
needs-the-assistance-of-counsely-the-court-shall-requirey-by	54	<u>digision</u> maymakeavailableinformationfrompatients ²
appointmentif-necessary,-counsel-for-him-regardless-of-his	52	recordsforpurposesofresearchintothecausesand

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HB 627 -42-HB 627

-53-

HB 0627/03 HB 0627/03

treatmentofalcoholism=-information-under-this-subsection
shall-not-be-published-in-awaythatdisclosespatients*
names-or-other-identifying-information.
Section-14Section88-2728RafaMa-1947is-amended
to-read-as-follows:
#88-2728Visitation-andcommunicationofpatients-
(1)Subjecttoreasonablerulesregardinghoursof
visitation-which-the-department <u>division</u> -may-adopty-patients
inanyapprovedtreatmentfacilityshallbegranted
opportunitiesforadequateconsultation-with-counsely-and
for-continuing-contact-with-familyandfriendsconsistent
with-on-effective-treatment-programs
(2)Neithermail-nor-other-communication-to-or-from-a
patient-in-any-approvedtreatmentfacilitymaybe
patientinanyapprovedtreatmentfacilitymaybe
patientinanyapprovedtreatmentfacilitymaybe interceptedyready-or-censoredy-The-administrator-may-adopt
patientinanyapprovedtreatmentfacilitymaybe interceptedyready-or-censoredy-The-administrator-may-adopt reasonable-rules-regarding-the-use-of-telephone-bypatients
patientinanyapprovedtreatmentfacilitymaybe interceptedyready-or-censoredy-The-administrator-may-adopt reasonable-rules-regarding-the-use-of-telephone-bypatients in-approved-treatment-facilitiess*
patientinanyapprovedtreatmentfacilitymaybe interceptedyready-or-censoredy-The-administrator-may-adopt reasonable-rules-regarding-the-use-of-telephone-bypatients in-approved-treatment-facilitiesy# Section-15ySection80-2722yRy6yMy-1947y-is-amended
patient—in—any—approved—treatment—facility—may—be interceptedy—ready—or—censoredy—The—administrator—may—adopt reasonable—rules—regarding—the—use—of—telephone—by—patients in—approved—treatment—facilitiess# Section—15**—Section—80-2722y—Rv6*M*—1947y—is—amended to—read—as—follows*
patient—in—any—approved—treatment—facility—may—be interceptedy—ready—or—censoredy—The—administrator—may—adopt reasonable—rules—regarding—the—use—of—telephone—by—patients in—approved—treatment—facilities»* Section—15*—Section—80—2722y—R*6*M*—1947*—is—amended to—read—as—follows* *80—2722*—Departmental—reports Reports to—legislature*
patient—in—any—approved—treatment—facility—may—be interceptedy—ready—or—censoredy—The—administrator—may—adopt reasonable—rules—regarding—the—use—of—telephone—by—patients in—approved—treatment—facilitiess# Section—15**—Section—80-2722y—R*C**M*—1947y—is—amended to—read—as—follows+ #80-2722*—Departmental—reports Reports to—legislature* The—department division—shall—achieve—full—implementation—of

legislative--session---Thereafter--the--department division

1	shall-reporty-to-each-legislative-sessiony-on-the-statuso
2	theimplementedacts-This-reports-or-any-part-thereofy-ma
3	be-included-as-the-department's-state-plan-for-alcohol-abus
4	and-olcoholisme"
5	Section 7. There is a new R.C.M. section numbere
6	80-2725 that reads as follows:
7	80-2725. State-approved alcoholism programs utilizin
8	funding generated by taxation on alcoholic beverages
9	(±)State-approvedalcoholismprogramsutilizing-fundin
10	forthetreatmentyrehabilitationyandpreventiono
11	alcoholismyasprovided-by the counties-of-Montana and th
12	divisiony-generated-by-taxation-on-alcoholic-beverages-shal
13	not-be-required-toprovidematchingfundsThissectio
14	shallnotprecludetheacceptancey-by-approved-alcoholi
15	programs-in-Montanay-of-giftsy-bequestsy-or-the-donationo
16	servicesormoneyforthetreatmenty-rehabilitationy-o
17	prevention-of-alcoholismu
18	†2}State-approved-alcoholism-programsusingrevenu
19	generatedbythetoxotionon-alcoholic-beverages-may-no
20	refusetreatmentyrehabilitationyorpreventiono
21	atcohotismservicessotetybecouseofanindividual*
22	inability-to-pay*
23	(3)When-revenue-is-generated-by-the-psyments-offee
24	forservicesbystate-approvedalcoholism-programsy-suc
25	payments-for-services-must-be-returned-to:

-25- HB 627

-26- HB 627

ī	tajthe-county-treasurer-or-a-county-in-whitchtunding
2	hasbeenprovidedfrom-taxation-on-alcoholic-beverages-to
3	the-extent-of-funds-allocated-to-the-program-by-thecounty
4	(b)thestate*sqeneralfundwhen-funding-has-beer
5	provided-from-toxation-on-alcoholic-beverages-to-theextent
6	of-such-funding-as-allocated-to-the-program-by-the-divisions
7	(1) REVENUE GENERATED BY 4-1-401 AND 4-1-404 FOR THE
8	IREAIMENT. REMABILITATION. AND PREVENTION OF ALCOHOLISH MAN
9	BE DISTRIBUTED IN FITHER OF THE FOLLOWING MANNERS:
10	(A) AS PAYMENT OF FEES FOR ALCOHOLISM SERVICES
11	PROVIDED BY STATE-APPROVED ALCOHOLISM PROGRAMS. CERTIFIED
12	ALCOHOLISM COUNSELORS. LICENSED PHYSICIANS. AND LICENSED
13	HDSPITALS: AND
14	(B) AS GRANTS TO PERSONS OPERATING STATE-APPROVED
15	ALCOHOLISM_PRUGRAMS.
16	121 NO PERSON OPERATING A STATE-APPROVED ALCOHOLISM
17	PROGRAM MAY BE REQUIRED TO PROVIDE MATCHING FUNDS AS A
18	CONDITION OF RECEIVING A GRANT UNDER SUBSECTION (1) OF THIS
19	SECTION.
20	131 IN ADDITION TO FUNDING RECEIVED UNDER THIS
21	SECTION. A PERSON OPERATING A STATE-APPROVED ALCOHOLISM
22	PROGRAM MAY ACCEPT GIFTS. BEQUESTS. OR THE DONATION OF
23	SERVICES OR MONEY FOR THE TREATMENT. REHABILITATION. OF
24	PREVENTION OF ALCOHOLISM.
25	(4) NO PERSON RECEIVING FUNDING UNDER THIS SECTION IC

1	SUPPORT OPERATION OF A STATE-APPROVED ALCOHOLISM PROGRAM MAY
2	REFUSE ALCOHOLISM TREATMENT. REHABILITATION. OR PREVENTION
3	SERVICES TO A PERSON SOLELY BECAUSE OF THAT PERSON'S
4	INABILITY TO PAY FOR THOSE SERVICES.
5	(5) A GRANT MADE UNDER THIS SECTION IS SUBJECT TO THE
6	FOLLOWING CONDITIONS:
7	(A) THE GRANT APPLICATION MUST CONTAIN AN ESTIMATE OF
8	ALL PROGRAM INCOME INCLUDING INCOME FROM EARNED FEES. GIFTS.
9	BEQUESTS. DONATIONS. AND GRANTS FROM OTHER THAN STATE
10	SOURCES DURING THE PERIOD FOR WHICH GRANT SUPPORT IS SOUGHT.
11	(B) WHENEVER DURING THE PERIOD OF GRANT SUPPORTS
12	PROGRAM INCOME EXCEEDS THE AMOUNT ESTIMATED IN THE GRANT
13	APPLICATION: THE AMOUNT OF THE EXCESS SHALL BE REPORTED TO
14	IHE GRANIOR.
15	(C) THE EXCESS SHALL BE USED BY THE GRANTEE UNDER THE
16	TERMS OF THE GRANT IN ACCORDANCE WITH ONE OR A COMBINATION
17	OF THE FOLLOWING OPTIONS:
18	(1) USE FOR ANY PURPOSE THAT FURTHERS THE GBJECTIVES
19	OF THE LEGISLATION UNDER WHICH THE GRANT HAS MADE: OR
20	(11) DEDUCT FROM TOTAL PROJECT COSTS TO DETERMINE THE
21	NET COSTS ON WHICH THE GRANTOR'S SHARE OF THE COSTS IS
22	BASED.
23	141161 Revenue generated by 4-1-401 and 4-1-404 for
24	the treatment, rehabilitation, and prevention of alcoholism
25	which has not been encumbered for those purposes by the

-27- H8 627 -28- H8 627

HB 0627/03 HB 0627/03

counties of Montana and ΩR the division shall be returned to the state's general fund within 30 days after the close of each fiscal year.

4 Section 8. Section 4-1-401, R.C.M. 1947, is amended to read as follows:

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"4-1-401. License tax on liquor -distribution of proceeds. The department of revenue is hereby authorized and directed to charge, receive and collect at the time of sale and delivery of any liquor under any provisions of the laws of the state of Montana a license tax of five-percent-(5%) 15% 10% of the retail selling price on all liquor so sold and delivered. Said tax shall be charged and collected on all liquor brought into the state and taxed by the department of revenue. The retail selling price shall be computed by adding to the cost of said liquor the state markup as designated by the department. Said five percent-(5%) 15% 10% license tax shall be figured in the same manner as the state excise tax and shall be in addition to said state excise tax. The department of revenue shall retain the amount of such five-percent-(5%) 15% 10% license tax so received in a separate account. Four-fifths-(4/5) Two-thirds of these revenues shall be distributed to the counties according to the amount of liquor purchased in each county. One-fifth--(1/5) One-third of these revenues shall be deposited-in-the-general-fund retained by the state.

Provided, however, in the case of purchases of liquor by a retail liquor licensee for use in his business, the department shall make such regulations as are necessary to apportion that proportion of license tax so generated to the county where the licensed establishment is located, for use as provided in section 4-1-402, R.C.M. 1947. The department of revenue shall pay quarterly to each county treasurer the proportion of the license tax due each county.

The county treasurer of each county shall retain one-fourth—(1/4) seven—tenths 50% of said license tax, and shall, within thirty—(30) days after receipt thereof, apportion the remaining three-fourths (3/4) three-tenths 50% thereof to the treasurers of the incorporated cities and towns within his county, said apportionment to be based in each instance upon the proportion which the gross sale of liquor in such incorporated city or town bears to the gross sale of liquor in all of the incorporated cities and towns in his said county.

Of the seven-tenths 50% of the tax retained by the county, the county treasurer shall deposit six-sevenths of this amount in a fund within the county for the treatment, rehabilitation, and prevention of alcoholism as approved by the state of Montana. The remaining one-seventh of the funds shall be retained in the county treasury for use by that county.

-29- HB 627 -30- HB 627

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HB 0627/03

The one-third of the license tax on liquor retained by the state shall be deposited within WITH THE STATE TREASURER IO THE CREDII OF the division of alcohol-and-drug dependency DEPENDENCE DEPARTMENT OF INSTITUTIONS each quarter for the treatment, rehabilitation and prevention of alcoholism as approved by the state."

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- 7 Section 9. Section 4-1-404, R.C.M. 1947, is amended to 8 read as follows:
 - *4-1-404. Tax on imported beer -- computation in case of barrels of capacity other than thirty-one gallons. A tax of three dollars (\$3) per barrel of thirty-one (31) gallons, is hereby levied and imposed on each and every barrel of beer manufactured out of this state and sold herein by any wholesaler, which said tax shall be due at the end of each month from said wholesaler, upon any such beer so sold by him during that month. As to any beer imported and sold in containers other than barrels, or in barrels of more or less capacity than thirty-one (31) gallons, the quantity content shall be ascertained and computed by the department of revenue in determining the amount of tax due, as herein provided for. An additional tax of twenty-five-cents--(\$#25) \$1.00 per barrel is levied and imposed as provided by this section, and such additional tax is also to be levied and imposed at the same rate upon beer manufactured within the state. The additional tax of twenty-five-cents--(\$\vec{4}\vec{2}\vec{5}\)

- \$1=75 \$1=00 is to be deposited, notwithstanding sections 1
- 4-1-407 and 4-1-408, or any other provision, in-the-general 2
- 3 fund within WITH THE STATE TREASURER TO THE CREDIT OF the
- division-of-elcohol and dependency DEPENDENCE 4
- 5 DEPARIMENT OF INSTITUTIONS each quarter for the treatments
- rehabilitation, and prevention of alcoholism as approved by 6

-32-

the state." 7

-End-