	Comment of the second sec
1	INTRODUCED BY MILLING SCHUTTE BILL NO. 84 Pprog
2	INTRODUCED BY Christians Amon Del Koth Benedit Vialing
3	BY REQUEST OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES
4	
5	A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE SERVICES PROVIDED BY THE MONTANA
6	CHEMICAL DEPENDENCY CENTER; ELIMINATING THE PROVISION OF EMERGENCY SERVICES AT THE
7	MONTANA CHEMICAL DEPENDENCY CENTER FOR INTOXICATED PERSONS OR PERSONS
8	INCAPACITATED BY ALCOHOL; AMENDING SECTIONS 53-21-603, 53-24-207, AND 53-24-303, MCA;
9	AND REPEALING SECTION 53-24-304, MCA."
10	
11	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
12	
13	Section 1. Section 53-21-603, MCA, is amended to read:
14	"53-21-603. Chemical dependency treatment center. (1) There is a Montana chemical
15	dependency treatment center. The Montana chemical dependency treatment center is the approved public
16	treatment facility as defined in 53-24-103.
17	(2) The Montana chemical dependency treatment center shall provide detoxification, evaluation,
18	treatment, referral, and rehabilitation to persons in Montana who are referred for the inpatient treatment
19	of alcoholism or other chemical dependency."
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21	Section 2. Section 53-24-303, MCA, is amended to read:
22	"53-24-303. Treatment and services for intoxicated persons and persons incapacitated by alcohol.
23	(1) An intoxicated person may come voluntarily to an approved public treatment facility for emergency
24	<del>treatment.</del> A person who appears to be intoxicated in a public place and to be in need of help <del>, if he</del>
25	<del>consents to the proffered help,</del> may be assisted to <del>his</del> <u>the person's</u> home, <del>an approved public treatment</del>
26	facility, an approved private treatment facility, or other health facility by the police <u>, if the person consents</u>
27	to an offer for help.
28	(2) A person who appears to be incapacitated by alcohol shall must be taken into protective
29	custody by the police and forthwith brought to an approved public treatment facility for emergency
30	<del>troatment. If no approved public treatment facility is readily available, he shall <u>must</u> be taken to an</del>

- 1 -



emergency medical service customarily used for incapacitated persons. The police, in detaining the person and in taking him to an approved public treatment facility, are taking him the person into protective custody and shall make every reasonable effort to protect his the person's health and safety. In taking the person into protective custody, the detaining officer may take reasonable steps to protect himself for the officer's own protection. No An entry or other record may not be made to indicate that the person taken into custody under this section has been arrested or charged with a crime.

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

11 (4) A person who by modical examination is found to be incapacitated by alcohol at the time of 12 his admission or to have become incapacitated at any time after his admission may not be detained at the 13 facility once he is no longer incapacitated by alcohol or, if he remains incapacitated by alcohol, for more 14 than 48 hours after admission as a patient unless he is committed under 53-24-304. A person may consent 15 to remain in the facility as long as the physician in charge believes appropriate.

16 (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 sholtor.

19 (6) If a patient is admitted to an approved public treatment facility, his family or next of kin may
 20 be notified if the patient consents to such notification."

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22 Section 3. Section 53-24-207, MCA, is amended to read:

23 "53-24-207. Comprehensive program for treatment. (1) The department shall establish a
 24 comprehensive and coordinated program for the treatment of chemically dependent persons, intoxicated
 25 persons, and family members.

26 (2) The program shall must include:

(a) emergency treatment provided by a facility affiliated with or part of the medical service of a
 general hospital;

- 29 (b) inpatient treatment;
- 30 (c) intermediate treatment;



- 2 -

1	(d) outpatient treatment; and
2	(e) <del>follow up</del> <u>followup</u> services.
3	(3) The department shall provide for adequate and appropriate treatment for alcoholics and
4	intoxicated persons admitted under 53-24-301 through <del>53-24-304</del> <u>53-24-303</u> .
5	(4) All appropriate public and private resources shall must be coordinated with and utilized used
6	in the program if possible.
7	(5) The department shall prepare, publish, and distribute annually a list of all approved public and
8	private treatment facilities."
9	
10	NEW SECTION. Section 4. Repealer. Section 53-24-304, MCA, is repealed.
11	-END-



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## STATE OF MONTANA - FISCAL NOTE

Fiscal Note for SB0084, as introduced

## DESCRIPTION OF PROPOSED LEGISLATION:

A bill revising the services provided by the Montana Chemical Dependency Center, (MCDC), eliminating the provision of emergency services at the MCDC for intoxicated persons or persons incapacitated by alcohol.

ASSUMPTIONS:

- 1. The Executive Budget contains a new proposal which would eliminate the detox only unit of the MCDC. Using FY94 numbers, this would eliminate approximately 350 admissions to the center.
- 2. There would be 3.50 FTE eliminated with the implementation of this bill. (Pooled positions that include counselors and LPNs.)
- 3. Savings to the state special revenue alcohol tax, used to fund the detox unit, would be \$122,680 in FY96 and \$123,209 in FY97 if the new proposal is adopted.

## FISCAL IMPACT:

No additional fiscal impact.

## EFFECT ON COUNTY OR OTHER LOCAL REVENUES OR EXPENDITURES:

If SB84 is not passed, the earmarked alcohol FY96 and FY97 appropriation will have to be increased for the MCDC. This would require a further reduction to community based programs from the alcohol tax account. The Department of Corrections and Human Services is currently projecting an \$800,000 earmarked distribution to counties for approved programs each year. Failure of SB84 would result in a decrease of the distribution to approximately \$700,000 each year.

Counties with a close proximity to Butte, i.e., Silver Bow, Lewis and Clark, and Missoula, will need a solution for their problem with revolving door alcoholics.

DAVE LEWIS, BUDGET DIRECTOR DATE Office of Budget and Program Planning

CHRIS CHRISTIAENS, PRIMARY SPONSOR DATE

Fiscal Note for SB0084, as introduced

58 84

LCO281.01 APPROVED BY COM ON PUBLIC HEALTH, WELFARE & SAFETY

SENITEBILLNO. <u>X'</u> 1 lingual 2 INTRODUCED BY & BY REQUEST OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES 3 4 A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE SERVICES PROVIDED BY THE MONTANA 5 6 CHEMICAL DEPENDENCY CENTER; ELIMINATING THE PROVISION OF EMERGENCY SERVICES AT THE MONTANA CHEMICAL DEPENDENCY CENTER FOR INTOXICATED PERSONS OR PERSONS 7 8 INCAPACITATED BY ALCOHOL; AMENDING SECTIONS 53-21-603, 53-24-207, AND 53-24-303, MCA; 9 AND REPEALING SECTION 53-24-304, MCA." 10 11 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA: 12 13 Section 1. Section 53-21-603, MCA, is amended to read: "53-21-603. Chemical dependency treatment center. (1) There is a Montana chemical 14 dependency treatment center. The Montana chemical dependency treatment center is the approved public 15 16 treatment facility as defined in 53-24-103. 17 (2) The Montana chemical dependency treatment center shall provide detoxification, evaluation, 18 treatment, referral, and rehabilitation to persons in Montana who are referred for the inpatient treatment 19 of alcoholism or other chemical dependency." 20 21 Section 2. Section 53-24-303, MCA, is amended to read: 22 "53-24-303. Treatment and services for intoxicated persons and persons incapacitated by alcohol. 23 (1) An intexicated person may come voluntarily to an approved public treatment facility for emergency 24 treatment. A person who appears to be intoxicated in a public place and to be in need of help, if he 25 consents to the proffered help, may be assisted to his the person's home, an approved public treatment 26 facility, an approved private treatment facility, or other health facility by the police, if the person consents 27 to an offer for help. 28 (2) A person who appears to be incapacitated by alcohol shall must be taken into protective 29 custody by the police and forthwith-brought to an approved public treatment facility for emergency 30 troatment. If no approved public treatment facility is readily available, he shall must be taken to an



54th Legislature

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 8 examined by a licensed physician as seen as possible. He may then be admitted as a patient or referred
 9 to another health facility. The referring approved public treatment facility shall arrange for his
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11 (4) A person who by modical examination is found to be incapacitated by alcohol at the time of 12 his admission or to have become incapacitated at any time after his admission may not be detained at the 13 facility once he is no longer incapacitated by alcohol or, if he remains incapacitated by alcohol, for more 14 than 48 hours after admission as a patient unless he is committed under 53-24-304. A person may consent 15 to remain in the facility as long as the physician in charge believes appropriate.

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 17 another health facility may be taken to his home. If he has no home, the approved public treatment facility
 18 shall assist him in obtaining shelter.

- 19 (6) If a patient is admitted to an approved public treatment facility, his family or next of kin may
  20 be notified if the patient consents to such notification."
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22 Section 3. Section 53-24-207, MCA, is amended to read:

"53-24-207. Comprehensive program for treatment. (1) The department shall establish a
 comprehensive and coordinated program for the treatment of chemically dependent persons, intoxicated
 persons, and family members.

26 (2) The program shall must include:

(a) emergency treatment provided by a facility affiliated with or part of the medical service of a
 general hospital;

- 29 (b) inpatient treatment;
- 30 (c) intermediate treatment;



- 2 -

1	(d) outpatient treatment; and
2	(e) <del>follow up</del> <u>followup</u> services.
3	(3) The department shall provide for adequate and appropriate treatment for alcoholics and
4	intoxicated persons admitted under 53-24-301 through <del>53-24-304</del> <u>53-24-303</u> .
5	(4) All appropriate public and private resources shall must be coordinated with and utilized used
6	in the program if possible.
7	(5) The department shall prepare, publish, and distribute annually a list of all approved public and
8	private treatment facilities."
9	
10	NEW SECTION. Section 4. Repealer. Section 53-24-304, MCA, is repealed.
11	-END-

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1	SENITTE BILL NO. X4 Sprage
2	INTRODUCED BY Christians Amon Deb Kota Benedit Fiation
3	BY REQUEST OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES
4	
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6	CHEMICAL DEPENDENCY CENTER; ELIMINATING THE PROVISION OF EMERGENCY SERVICES AT THE
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26	facility, an approved private treatment facility, or other health facility by the police <u>, if the person consents</u>
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5	(4) All appropriate public and private resources shall must be coordinated with and utilized used
6	in the program if possible.
7	(5) The department shall prepare, publish, and distribute annually a list of all approved public and
8	private treatment facilities."
9	
10	NEW SECTION. Section 4. Repeater. Section 53-24-304, MCA, is repeated.
11	-END-



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1	SENATE BILL NO. 84
2	INTRODUCED BY CHRISTIAENS, SIMON, KOTTEL, BENEDICT, KEATING, SPRAGUE
3	BY REQUEST OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES
4	
5	A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE SERVICES PROVIDED BY THE MONTANA
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