

- 1.1 Senator moves to amend S.F. No. 2443 as follows:
- 1.2 Page 2, strike line 11
- 1.3 Renumber the clauses in sequence
- 1.4 Page 5, line 6, after "annually" insert "complete an informed choice curriculum and"
- 1.5 Page 5, line 7, delete "topics" and insert "standards"
- 1.6 Page 8, line 9, after "annually" insert "complete an informed choice curriculum and"
- 1.7 Page 8, line 10, delete "topics" and insert "standards"
- 1.8 Page 9, delete article 2
- 1.9 Page 20, delete section 4
- 1.10 Page 52, after line 23, insert:
- 1.11 "Sec. 37. Minnesota Statutes 2024, section 253B.07, subdivision 2b, is amended to read:
- 1.12 Subd. 2b. **Apprehend and hold orders.** (a) The court may order the treatment facility
- 1.13 or state-operated treatment program to hold the proposed patient or direct a health officer,
- 1.14 peace officer, or other person to take the proposed patient into custody and transport the
- 1.15 proposed patient to a treatment facility or state-operated treatment program for observation,
- 1.16 evaluation, diagnosis, care, treatment, and, if necessary, confinement, when:
- 1.17 (1) there has been a particularized showing by the petitioner that serious physical harm
- 1.18 to the proposed patient or others is likely unless the proposed patient is immediately
- 1.19 apprehended;
- 1.20 (2) the proposed patient has not voluntarily appeared for the examination or the
- 1.21 commitment hearing pursuant to the summons; or
- 1.22 (3) a person is held pursuant to section 253B.051 and a request for a petition for
- 1.23 commitment has been filed.
- 1.24 (b) The order of the court may be executed on any day and at any time by the use of all
- 1.25 necessary means including the imposition of necessary restraint upon the proposed patient.
- 1.26 Where possible, a peace officer taking the proposed patient into custody pursuant to this
- 1.27 subdivision shall not be in uniform and shall not use a vehicle visibly marked as a law
- 1.28 enforcement vehicle. Except as provided in section 253D.10, subdivision 2, in the case of
- 1.29 an individual on a judicial hold due to a petition for civil commitment under chapter 253D,
- 1.30 assignment of custody during the hold is to the ~~commissioner~~ executive board. The

~~commissioner~~ executive board is responsible for determining the appropriate placement within a secure treatment facility under the authority of the ~~commissioner~~ executive board.

(c) A proposed patient must not be allowed or required to consent to nor participate in a clinical drug trial while an order is in effect under this subdivision. A consent given while an order is in effect is void and unenforceable. This paragraph does not prohibit a patient from continuing participation in a clinical drug trial if the patient was participating in the clinical drug trial at the time the order was issued under this subdivision."

Page 52, line 28, strike "commissioner" and insert "executive board"

Page 54, line 18, reinstate the stricken language

Page 54, line 19, reinstate the stricken language and strike "2025" and insert "2027"

Page 55, after line 2, insert:

"Sec. 40. Minnesota Statutes 2024, section 253B.141, subdivision 2, is amended to read:

Subd. 2. **Apprehension; return to facility or program.** (a) Upon receiving the report of absence from the head of the treatment facility, state-operated treatment program, or community-based treatment program or the committing court, a patient may be apprehended and held by a peace officer in any jurisdiction pending return to the facility or program from which the patient is absent without authorization. A patient may also be returned to any state-operated treatment program or any other treatment facility or community-based treatment program willing to accept the person. A person who has a mental illness and is dangerous to the public and detained under this subdivision may be held in a jail or lockup only if:

(1) there is no other feasible place of detention for the patient;

(2) the detention is for less than 24 hours; and

(3) there are protections in place, including segregation of the patient, to ensure the safety of the patient.

(b) If a patient is detained under this subdivision, the head of the facility or program from which the patient is absent shall arrange to pick up the patient within 24 hours of the time detention was begun and shall be responsible for securing transportation for the patient to the facility or program. The expense of detaining and transporting a patient shall be the responsibility of the facility or program from which the patient is absent. The expense of detaining and transporting a patient to a state-operated treatment program shall be paid by

3.1 the ~~commissioner~~ executive board unless paid by the patient or persons on behalf of the
3.2 patient.

3.3 Sec. 41. Minnesota Statutes 2024, section 253B.18, subdivision 6, is amended to read:

3.4 Subd. 6. **Transfer.** (a) A patient who is a person who has a mental illness and is
3.5 dangerous to the public shall not be transferred out of a secure treatment facility unless it
3.6 appears to the satisfaction of the executive board, after a hearing and favorable
3.7 recommendation by a majority of the special review board, that the transfer is appropriate.
3.8 Transfer may be to another state-operated treatment program. In those instances where a
3.9 commitment also exists to the Department of Corrections, transfer may be to a facility
3.10 designated by the commissioner of corrections.

3.11 (b) The following factors must be considered in determining whether a transfer is
3.12 appropriate:

3.13 (1) the person's clinical progress and present treatment needs;

3.14 (2) the need for security to accomplish continuing treatment;

3.15 (3) the need for continued institutionalization;

3.16 (4) which facility can best meet the person's needs; and

3.17 (5) whether transfer can be accomplished with a reasonable degree of safety for the
3.18 public.

3.19 (c) If a committed person has been transferred out of a secure treatment facility pursuant
3.20 to this subdivision, that committed person may voluntarily return to a secure treatment
3.21 facility for a period of up to 60 days with the consent of the head of the treatment facility.

3.22 (d) If the committed person is not returned to the original, nonsecure transfer facility
3.23 within 60 days of being readmitted to a secure treatment facility, the transfer is revoked and
3.24 the committed person must remain in a secure treatment facility. The committed person
3.25 must immediately be notified in writing of the revocation.

3.26 (e) Within 15 days of receiving notice of the revocation, the committed person may
3.27 petition the special review board for a review of the revocation. The special review board
3.28 shall review the circumstances of the revocation and shall recommend to the ~~commissioner~~
3.29 executive board whether or not the revocation should be upheld. The special review board
3.30 may also recommend a new transfer at the time of the revocation hearing.

(f) No action by the special review board is required if the transfer has not been revoked and the committed person is returned to the original, nonsecure transfer facility with no substantive change to the conditions of the transfer ordered under this subdivision.

(g) The head of the treatment facility may revoke a transfer made under this subdivision and require a committed person to return to a secure treatment facility if:

(1) remaining in a nonsecure setting does not provide a reasonable degree of safety to the committed person or others; or

(2) the committed person has regressed clinically and the facility to which the committed person was transferred does not meet the committed person's needs.

(h) Upon the revocation of the transfer, the committed person must be immediately returned to a secure treatment facility. A report documenting the reasons for revocation must be issued by the head of the treatment facility within seven days after the committed person is returned to the secure treatment facility. Advance notice to the committed person of the revocation is not required.

(i) The committed person must be provided a copy of the revocation report and informed, orally and in writing, of the rights of a committed person under this section. The revocation report must be served upon the committed person, the committed person's counsel, and the designated agency. The report must outline the specific reasons for the revocation, including but not limited to the specific facts upon which the revocation is based.

(j) If a committed person's transfer is revoked, the committed person may re-petition for transfer according to subdivision 5.

(k) A committed person aggrieved by a transfer revocation decision may petition the special review board within seven business days after receipt of the revocation report for a review of the revocation. The matter must be scheduled within 30 days. The special review board shall review the circumstances leading to the revocation and, after considering the factors in paragraph (b), shall recommend to the ~~commissioner~~ executive board whether or not the revocation shall be upheld. The special review board may also recommend a new transfer out of a secure treatment facility at the time of the revocation hearing.

Sec. 42. Minnesota Statutes 2024, section 253B.19, subdivision 2, is amended to read:

Subd. 2. **Petition; hearing.** (a) A patient committed as a person who has a mental illness and is dangerous to the public under section 253B.18, or the county attorney of the county from which the patient was committed or the county of financial responsibility, may petition the judicial appeal panel for a rehearing and reconsideration of a decision by the

~~commissioner~~ executive board under section 253B.18, subdivision 5. The judicial appeal panel must not consider petitions for relief other than those considered by the executive board from which the appeal is taken. The petition must be filed with the supreme court within 30 days after the decision of the executive board is signed. The hearing must be held within 45 days of the filing of the petition unless an extension is granted for good cause.

(b) For an appeal under paragraph (a), the supreme court shall refer the petition to the chief judge of the judicial appeal panel. The chief judge shall notify the patient, the county attorney of the county of commitment, the designated agency, the executive board, the head of the facility or program to which the patient was committed, any interested person, and other persons the chief judge designates, of the time and place of the hearing on the petition. The notice shall be given at least 14 days prior to the date of the hearing.

(c) Any person may oppose the petition. The patient, the patient's counsel, the county attorney of the committing county or the county of financial responsibility, and the executive board shall participate as parties to the proceeding pending before the judicial appeal panel and shall, except when the patient is committed solely as a person who has a mental illness and is dangerous to the public, no later than 20 days before the hearing on the petition, inform the judicial appeal panel and the opposing party in writing whether they support or oppose the petition and provide a summary of facts in support of their position. The judicial appeal panel may appoint court examiners and may adjourn the hearing from time to time. It shall hear and receive all relevant testimony and evidence and make a record of all proceedings. The patient, the patient's counsel, and the county attorney of the committing county or the county of financial responsibility have the right to be present and may present and cross-examine all witnesses and offer a factual and legal basis in support of their positions. The petitioning party seeking discharge or provisional discharge bears the burden of going forward with the evidence, which means presenting a prima facie case with competent evidence to show that the person is entitled to the requested relief. If the petitioning party has met this burden, the party opposing discharge or provisional discharge bears the burden of proof by clear and convincing evidence that the discharge or provisional discharge should be denied. A party seeking transfer under section 253B.18, subdivision 6, must establish by a preponderance of the evidence that the transfer is appropriate.

Sec. 43. Minnesota Statutes 2024, section 253D.29, subdivision 1, is amended to read:

Subdivision 1. **Factors.** (a) A person who is committed as a sexually dangerous person or a person with a sexual psychopathic personality shall not be transferred out of a secure

treatment facility unless the transfer is appropriate. Transfer may be to ~~other treatment programs~~ a facility under the control of the executive board.

(b) The following factors must be considered in determining whether a transfer is appropriate:

(1) the person's clinical progress and present treatment needs;

(2) the need for security to accomplish continuing treatment;

(3) the need for continued institutionalization;

(4) which ~~other treatment program~~ facility can best meet the person's needs; and

(5) whether transfer can be accomplished with a reasonable degree of safety for the public.

Sec. 44. Minnesota Statutes 2024, section 253D.29, subdivision 2, is amended to read:

Subd. 2. **Voluntary readmission to a secure treatment facility.** (a) After a committed person has been transferred out of a secure treatment facility pursuant to subdivision 1 and with the consent of the executive director, a committed person may voluntarily return to a secure treatment facility for a period of up to 60 days.

(b) If the committed person is not returned to the ~~other treatment program~~ secure treatment facility to which the person was originally transferred pursuant to subdivision 1 within 60 days of being readmitted to a secure treatment facility under this subdivision, the transfer to the ~~other treatment program~~ secure treatment facility under subdivision 1 is revoked and the committed person shall remain in a secure treatment facility. The committed person shall immediately be notified in writing of the revocation.

(c) Within 15 days of receiving notice of the revocation, the committed person may petition the special review board for a review of the revocation. The special review board shall review the circumstances of the revocation and shall recommend to the judicial appeal panel whether or not the revocation shall be upheld. The special review board may also recommend a new transfer at the time of the revocation hearing.

(d) If the transfer has not been revoked and the committed person is to be returned to the ~~other treatment program~~ facility to which the committed person was originally transferred pursuant to subdivision 1 with no substantive change to the conditions of the transfer ordered pursuant to subdivision 1, no action by the special review board or judicial appeal panel is required.

Sec. 45. Minnesota Statutes 2024, section 253D.29, subdivision 3, is amended to read:

Subd. 3. **Revocation.** (a) The executive director may revoke a transfer made pursuant to subdivision 1 and require a committed person to return to a secure treatment facility if:

(1) remaining in a nonsecure setting will not provide a reasonable degree of safety to the committed person or others; or

(2) the committed person has regressed in clinical progress so that the ~~other treatment program~~ facility to which the committed person was transferred is no longer sufficient to meet the committed person's needs.

(b) Upon the revocation of the transfer, the committed person shall be immediately returned to a secure treatment facility. A report documenting reasons for revocation shall be issued by the executive director within seven days after the committed person is returned to the secure treatment facility. Advance notice to the committed person of the revocation is not required.

(c) The committed person must be provided a copy of the revocation report and informed, orally and in writing, of the rights of a committed person under this section. The revocation report shall be served upon the committed person and the committed person's counsel. The report shall outline the specific reasons for the revocation including, but not limited to, the specific facts upon which the revocation is based.

(d) If a committed person's transfer is revoked, the committed person may re-petition for transfer according to section 253D.27.

(e) Any committed person aggrieved by a transfer revocation decision may petition the special review board within seven days, exclusive of Saturdays, Sundays, and legal holidays, after receipt of the revocation report for a review of the revocation. The matter shall be scheduled within 30 days. The special review board shall review the circumstances leading to the revocation and, after considering the factors in subdivision 1, paragraph (b), shall recommend to the judicial appeal panel whether or not the revocation shall be upheld. The special review board may also recommend a new transfer out of a secure treatment facility at the time of the revocation hearing.

Sec. 46. Minnesota Statutes 2024, section 253D.30, subdivision 4, is amended to read:

Subd. 4. **Voluntary readmission.** (a) With the consent of the executive director, a committed person may voluntarily return to ~~the Minnesota Sex Offender Program~~ a secure treatment facility from provisional discharge for a period of up to 60 days.

(b) If the committed person is not returned to provisional discharge status within 60 days of being readmitted to ~~the Minnesota Sex Offender Program~~ a secure treatment facility, the provisional discharge is revoked. The committed person shall immediately be notified of the revocation in writing. Within 15 days of receiving notice of the revocation, the committed person may request a review of the matter before the special review board. The special review board shall review the circumstances of the revocation and, after applying the standards in subdivision 5, paragraph (a), shall recommend to the judicial appeal panel whether or not the revocation shall be upheld. The board may recommend a return to provisional discharge status.

(c) If the provisional discharge has not been revoked and the committed person is to be returned to provisional discharge, ~~the Minnesota Sex Offender Program is not required to petition for a further review by the special review board~~ no action by the special review board or judicial appeal panel is required unless the committed person's return to the community results in substantive change to the existing provisional discharge plan.

Sec. 47. Minnesota Statutes 2024, section 253D.30, subdivision 5, is amended to read:

Subd. 5. **Revocation.** (a) The executive director may revoke a provisional discharge if either of the following grounds exist:

(1) the committed person has departed from the conditions of the provisional discharge plan; or

(2) the committed person is exhibiting behavior which may be dangerous to self or others.

(b) The executive director may revoke the provisional discharge and, either orally or in writing, order that the committed person be immediately returned to a secure treatment facility ~~or other treatment program~~. A report documenting reasons for revocation shall be issued by the executive director within seven days after the committed person is returned to the secure treatment facility ~~or other treatment program~~. Advance notice to the committed person of the revocation is not required.

(c) The committed person must be provided a copy of the revocation report and informed, orally and in writing, of the rights of a committed person under this section. The revocation report shall be served upon the committed person, the committed person's counsel, and the county attorneys of the county of commitment and the county of financial responsibility. The report shall outline the specific reasons for the revocation, including but not limited to the specific facts upon which the revocation is based.

9.1 (d) An individual who is revoked from provisional discharge must successfully re-petition
9.2 the special review board and judicial appeal panel prior to being placed back on provisional
9.3 discharge."

9.4 Page 83, line 30, reinstate the stricken language and after "governed" insert "or"

9.5 Page 84, delete article 4

9.6 Page 86, delete article 5

9.7 Page 112, delete article 6

9.8 Renumber the sections and articles in sequence and correct the internal references

9.9 Amend the title accordingly