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**SENATE BILL 5765**

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**State of Washington**

**69th Legislature**

**2025 Regular Session**

**By** Senators Slatter, Nobles, and Trudeau

Read first time 02/18/25. Referred to Committee on Health & Long-Term Care.

1 AN ACT Relating to psychiatric pharmacists; amending RCW  
2 71.05.148, 71.05.230, and 71.05.585; reenacting and amending RCW  
3 71.05.020 and 71.05.020; providing a contingent effective date; and  
4 providing a contingent expiration date.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 **Sec. 1.** RCW 71.05.020 and 2024 c 371 s 17, 2024 c 209 s 5, and  
7 2024 c 62 s 18 are each reenacted and amended to read as follows:

8 The definitions in this section apply throughout this chapter  
9 unless the context clearly requires otherwise.

10 (1) "23-hour crisis relief center" has the same meaning as under  
11 RCW 71.24.025;

12 (2) "Admission" or "admit" means a decision by a physician,  
13 physician assistant, or psychiatric advanced registered nurse  
14 practitioner that a person should be examined or treated as a patient  
15 in a hospital;

16 (3) "Alcoholism" means a disease, characterized by a dependency  
17 on alcoholic beverages, loss of control over the amount and  
18 circumstances of use, symptoms of tolerance, physiological or  
19 psychological withdrawal, or both, if use is reduced or discontinued,  
20 and impairment of health or disruption of social or economic  
21 functioning;

1 (4) "Antipsychotic medications" means that class of drugs  
2 primarily used to treat serious manifestations of mental illness  
3 associated with thought disorders, which includes, but is not limited  
4 to atypical antipsychotic medications;

5 (5) "Approved substance use disorder treatment program" means a  
6 program for persons with a substance use disorder provided by a  
7 treatment program certified by the department as meeting standards  
8 adopted under chapter 71.24 RCW;

9 (6) "Attending staff" means any person on the staff of a public  
10 or private agency having responsibility for the care and treatment of  
11 a patient;

12 (7) "Authority" means the Washington state health care authority;

13 (8) "Behavioral health disorder" means either a mental disorder  
14 as defined in this section, a substance use disorder as defined in  
15 this section, or a co-occurring mental disorder and substance use  
16 disorder;

17 (9) "Behavioral health service provider" means a public or  
18 private agency that provides mental health, substance use disorder,  
19 or co-occurring disorder services to persons with behavioral health  
20 disorders as defined under this section and receives funding from  
21 public sources. This includes, but is not limited to: Hospitals  
22 licensed under chapter 70.41 RCW; evaluation and treatment facilities  
23 as defined in this section; community mental health service delivery  
24 systems or community behavioral health programs as defined in RCW  
25 71.24.025; licensed or certified behavioral health agencies under RCW  
26 71.24.037; an entity with a tribal attestation that it meets minimum  
27 standards or a licensed or certified behavioral health agency as  
28 defined in RCW 71.24.025; facilities conducting competency  
29 evaluations and restoration under chapter 10.77 RCW; approved  
30 substance use disorder treatment programs as defined in this section;  
31 secure withdrawal management and stabilization facilities as defined  
32 in this section; and correctional facilities operated by state,  
33 local, and tribal governments;

34 (10) "Co-occurring disorder specialist" means an individual  
35 possessing an enhancement granted by the department of health under  
36 chapter 18.205 RCW that certifies the individual to provide substance  
37 use disorder counseling subject to the practice limitations under RCW  
38 18.205.105;

1 (11) "Commitment" means the determination by a court that a  
2 person should be detained for a period of either evaluation or  
3 treatment, or both, in an inpatient or a less restrictive setting;

4 (12) "Community behavioral health agency" has the same meaning as  
5 "licensed or certified behavioral health agency" defined in RCW  
6 71.24.025;

7 (13) "Conditional release" means a revocable modification of a  
8 commitment, which may be revoked upon violation of any of its terms;

9 (14) "Crisis stabilization unit" means a short-term facility or a  
10 portion of a facility licensed or certified by the department, such  
11 as an evaluation and treatment facility or a hospital, which has been  
12 designed to assess, diagnose, and treat individuals experiencing an  
13 acute crisis without the use of long-term hospitalization, or to  
14 determine the need for involuntary commitment of an individual;

15 (15) "Custody" means involuntary detention under the provisions  
16 of this chapter or chapter 10.77 RCW, uninterrupted by any period of  
17 unconditional release from commitment from a facility providing  
18 involuntary care and treatment;

19 (16) "Department" means the department of health;

20 (17) "Designated crisis responder" means a mental health  
21 professional appointed by the county, by an entity appointed by the  
22 county, or by the authority in consultation with a tribe or after  
23 meeting and conferring with an Indian health care provider, to  
24 perform the duties specified in this chapter;

25 (18) "Detention" or "detain" means the lawful confinement of a  
26 person, under the provisions of this chapter;

27 (19) "Developmental disabilities professional" means a person who  
28 has specialized training and three years of experience in directly  
29 treating or working with persons with developmental disabilities and  
30 is a psychiatrist, physician assistant working with a psychiatrist  
31 who is acting as a participating physician as defined in RCW  
32 18.71A.010, psychologist, psychiatric advanced registered nurse  
33 practitioner, or social worker, and such other developmental  
34 disabilities professionals as may be defined by rules adopted by the  
35 secretary of the department of social and health services;

36 (20) "Developmental disability" means that condition defined in  
37 RCW 71A.10.020(6);

38 (21) "Director" means the director of the authority;

1 (22) "Discharge" means the termination of hospital medical  
2 authority. The commitment may remain in place, be terminated, or be  
3 amended by court order;

4 (23) "Drug addiction" means a disease, characterized by a  
5 dependency on psychoactive chemicals, loss of control over the amount  
6 and circumstances of use, symptoms of tolerance, physiological or  
7 psychological withdrawal, or both, if use is reduced or discontinued,  
8 and impairment of health or disruption of social or economic  
9 functioning;

10 (24) "Evaluation and treatment facility" means any facility which  
11 can provide directly, or by direct arrangement with other public or  
12 private agencies, emergency evaluation and treatment, outpatient  
13 care, and timely and appropriate inpatient care to persons suffering  
14 from a mental disorder, and which is licensed or certified as such by  
15 the department. The authority may certify single beds as temporary  
16 evaluation and treatment beds under RCW 71.05.745. A physically  
17 separate and separately operated portion of a state hospital may be  
18 designated as an evaluation and treatment facility. A facility which  
19 is part of, or operated by, the department of social and health  
20 services or any federal agency will not require certification. No  
21 correctional institution or facility, or jail, shall be an evaluation  
22 and treatment facility within the meaning of this chapter;

23 (25) "Gravely disabled" means a condition in which a person, as a  
24 result of a behavioral health disorder: (a) Is in danger of serious  
25 physical harm resulting from a failure to provide for his or her  
26 essential human needs of health or safety; or (b) manifests severe  
27 deterioration in routine functioning evidenced by repeated and  
28 escalating loss of cognitive or volitional control over his or her  
29 actions and is not receiving such care as is essential for his or her  
30 health or safety;

31 (26) "Habilitative services" means those services provided by  
32 program personnel to assist persons in acquiring and maintaining life  
33 skills and in raising their levels of physical, mental, social, and  
34 vocational functioning. Habilitative services include education,  
35 training for employment, and therapy. The habilitative process shall  
36 be undertaken with recognition of the risk to the public safety  
37 presented by the person being assisted as manifested by prior charged  
38 criminal conduct;

39 (27) "Hearing" means any proceeding conducted in open court that  
40 conforms to the requirements of RCW 71.05.820;

1 (28) "History of one or more violent acts" refers to the period  
2 of time ten years prior to the filing of a petition under this  
3 chapter, excluding any time spent, but not any violent acts  
4 committed, in a behavioral health facility, or in confinement as a  
5 result of a criminal conviction;

6 (29) "Imminent" means the state or condition of being likely to  
7 occur at any moment or near at hand, rather than distant or remote;

8 (30) "In need of assisted outpatient treatment" refers to a  
9 person who meets the criteria for assisted outpatient treatment  
10 established under RCW 71.05.148;

11 (31) "Individualized service plan" means a plan prepared by a  
12 developmental disabilities professional with other professionals as a  
13 team, for a person with developmental disabilities, which shall  
14 state:

15 (a) The nature of the person's specific problems, prior charged  
16 criminal behavior, and habilitation needs;

17 (b) The conditions and strategies necessary to achieve the  
18 purposes of habilitation;

19 (c) The intermediate and long-range goals of the habilitation  
20 program, with a projected timetable for the attainment;

21 (d) The rationale for using this plan of habilitation to achieve  
22 those intermediate and long-range goals;

23 (e) The staff responsible for carrying out the plan;

24 (f) Where relevant in light of past criminal behavior and due  
25 consideration for public safety, the criteria for proposed movement  
26 to less-restrictive settings, criteria for proposed eventual  
27 discharge or release, and a projected possible date for discharge or  
28 release; and

29 (g) The type of residence immediately anticipated for the person  
30 and possible future types of residences;

31 (32) "Intoxicated person" means a person whose mental or physical  
32 functioning is substantially impaired as a result of the use of  
33 alcohol or other psychoactive chemicals;

34 (33) "Judicial commitment" means a commitment by a court pursuant  
35 to the provisions of this chapter;

36 (34) "Legal counsel" means attorneys and staff employed by county  
37 prosecutor offices or the state attorney general acting in their  
38 capacity as legal representatives of public behavioral health service  
39 providers under RCW 71.05.130;

1 (35) "Less restrictive alternative treatment" means a program of  
2 individualized treatment in a less restrictive setting than inpatient  
3 treatment that includes the services described in RCW 71.05.585. This  
4 term includes: Treatment pursuant to a less restrictive alternative  
5 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant  
6 to a conditional release under RCW 71.05.340; and treatment pursuant  
7 to an assisted outpatient treatment order under RCW 71.05.148;

8 (36) "Licensed physician" means a person licensed to practice  
9 medicine or osteopathic medicine and surgery in the state of  
10 Washington;

11 (37) "Likelihood of serious harm" means:

12 (a) A substantial risk that: (i) Physical harm will be inflicted  
13 by a person upon his or her own person, as evidenced by threats or  
14 attempts to commit suicide or inflict physical harm on oneself; (ii)  
15 physical harm will be inflicted by a person upon another, as  
16 evidenced by behavior which has caused such harm or which places  
17 another person or persons in reasonable fear of sustaining such harm;  
18 or (iii) physical harm will be inflicted by a person upon the  
19 property of others, as evidenced by behavior which has caused  
20 substantial loss or damage to the property of others; or

21 (b) The person has threatened the physical safety of another and  
22 has a history of one or more violent acts;

23 (38) "Medical clearance" means a physician or other health care  
24 provider, including an Indian health care provider, has determined  
25 that a person is medically stable and ready for referral to the  
26 designated crisis responder or facility. For a person presenting in  
27 the community, no medical clearance is required prior to  
28 investigation by a designated crisis responder;

29 (39) "Mental disorder" means any organic, mental, or emotional  
30 impairment which has substantial adverse effects on a person's  
31 cognitive or volitional functions;

32 (40) "Mental health professional" means an individual practicing  
33 within the mental health professional's statutory scope of practice  
34 who is:

35 (a) A psychiatrist, psychologist, physician assistant working  
36 with a psychiatrist who is acting as a participating physician as  
37 defined in RCW 18.71A.010, psychiatric advanced registered nurse  
38 practitioner, psychiatric nurse, or social worker, as defined in this  
39 chapter and chapter 71.34 RCW;

1 (b) A mental health counselor, mental health counselor associate,  
2 marriage and family therapist, or marriage and family therapist  
3 associate, as defined in chapter 18.225 RCW;

4 (c) A certified or licensed agency affiliated counselor, as  
5 defined in chapter 18.19 RCW; or

6 (d) A licensed psychological associate as described in chapter  
7 18.83 RCW;

8 (41) "Peace officer" means a law enforcement official of a public  
9 agency or governmental unit, and includes persons specifically given  
10 peace officer powers by any state law, local ordinance, or judicial  
11 order of appointment;

12 (42) "Physician assistant" means a person licensed as a physician  
13 assistant under chapter 18.71A RCW;

14 (43) "Private agency" means any person, partnership, corporation,  
15 or association that is not a public agency, whether or not financed  
16 in whole or in part by public funds, which constitutes an evaluation  
17 and treatment facility or private institution, or hospital, or  
18 approved substance use disorder treatment program, which is conducted  
19 for, or includes a department or ward conducted for, the care and  
20 treatment of persons with behavioral health disorders;

21 (44) "Professional person" means a mental health professional,  
22 substance use disorder professional, or designated crisis responder  
23 and shall also mean a physician, physician assistant, psychiatric  
24 advanced registered nurse practitioner, registered nurse, and such  
25 others as may be defined by rules adopted by the secretary pursuant  
26 to the provisions of this chapter;

27 (45) "Psychiatric advanced registered nurse practitioner" means a  
28 person who is licensed as an advanced registered nurse practitioner  
29 pursuant to chapter 18.79 RCW; and who is board certified in advanced  
30 practice psychiatric and mental health nursing;

31 (46) "Psychiatrist" means a person having a license as a  
32 physician and surgeon in this state who has in addition completed  
33 three years of graduate training in psychiatry in a program approved  
34 by the American medical association or the American osteopathic  
35 association and is certified or eligible to be certified by the  
36 American board of psychiatry and neurology;

37 (47) "Psychologist" means a person who has been licensed as a  
38 psychologist pursuant to chapter 18.83 RCW;

39 (48) "Public agency" means any evaluation and treatment facility  
40 or institution, secure withdrawal management and stabilization

1 facility, approved substance use disorder treatment program, or  
2 hospital which is conducted for, or includes a department or ward  
3 conducted for, the care and treatment of persons with behavioral  
4 health disorders, if the agency is operated directly by federal,  
5 state, county, or municipal government, or a combination of such  
6 governments;

7 (49) "Release" means legal termination of the commitment under  
8 the provisions of this chapter;

9 (50) "Resource management services" has the meaning given in  
10 chapter 71.24 RCW;

11 (51) "Secretary" means the secretary of the department of health,  
12 or his or her designee;

13 (52) "Secure withdrawal management and stabilization facility"  
14 means a facility operated by either a public or private agency or by  
15 the program of an agency which provides care to voluntary individuals  
16 and individuals involuntarily detained and committed under this  
17 chapter for whom there is a likelihood of serious harm or who are  
18 gravely disabled due to the presence of a substance use disorder.  
19 Secure withdrawal management and stabilization facilities must:

20 (a) Provide the following services:

21 (i) Assessment and treatment, provided by certified substance use  
22 disorder professionals or co-occurring disorder specialists;

23 (ii) Clinical stabilization services;

24 (iii) Acute or subacute detoxification services for intoxicated  
25 individuals; and

26 (iv) Discharge assistance provided by certified substance use  
27 disorder professionals or co-occurring disorder specialists,  
28 including facilitating transitions to appropriate voluntary or  
29 involuntary inpatient services or to less restrictive alternatives as  
30 appropriate for the individual;

31 (b) Include security measures sufficient to protect the patients,  
32 staff, and community; and

33 (c) Be licensed or certified as such by the department of health;

34 (53) "Social worker" means a person with a master's or further  
35 advanced degree from a social work educational program accredited and  
36 approved as provided in RCW 18.320.010;

37 (54) "Substance use disorder" means a cluster of cognitive,  
38 behavioral, and physiological symptoms indicating that an individual  
39 continues using the substance despite significant substance-related  
40 problems. The diagnosis of a substance use disorder is based on a

1 pathological pattern of behaviors related to the use of the  
2 substances;

3 (55) "Substance use disorder professional" means a person  
4 certified as a substance use disorder professional by the department  
5 of health under chapter 18.205 RCW;

6 (56) "Therapeutic court personnel" means the staff of a mental  
7 health court or other therapeutic court which has jurisdiction over  
8 defendants who are dually diagnosed with mental disorders, including  
9 court personnel, probation officers, a court monitor, prosecuting  
10 attorney, or defense counsel acting within the scope of therapeutic  
11 court duties;

12 (57) "Treatment records" include registration and all other  
13 records concerning persons who are receiving or who at any time have  
14 received services for behavioral health disorders, which are  
15 maintained by the department of social and health services, the  
16 department, the authority, behavioral health administrative services  
17 organizations and their staffs, managed care organizations and their  
18 staffs, and by treatment facilities. Treatment records include mental  
19 health information contained in a medical bill including but not  
20 limited to mental health drugs, a mental health diagnosis, provider  
21 name, and dates of service stemming from a medical service. Treatment  
22 records do not include notes or records maintained for personal use  
23 by a person providing treatment services for the department of social  
24 and health services, the department, the authority, behavioral health  
25 administrative services organizations, managed care organizations, or  
26 a treatment facility if the notes or records are not available to  
27 others;

28 (58) "Tribe" has the same meaning as in RCW 71.24.025;

29 (59) "Video," unless the context clearly indicates otherwise,  
30 means the delivery of behavioral health services through the use of  
31 interactive audio and video technology, permitting real-time  
32 communication between a person and a designated crisis responder, for  
33 the purpose of evaluation. "Video" does not include the use of audio-  
34 only telephone, facsimile, email, or store and forward technology.  
35 "Store and forward technology" means use of an asynchronous  
36 transmission of a person's medical information from a mental health  
37 service provider to the designated crisis responder which results in  
38 medical diagnosis, consultation, or treatment;

39 (60) "Violent act" means behavior that resulted in homicide,  
40 attempted suicide, injury, or substantial loss or damage to property;

1       (61) "Board-certified psychiatric pharmacist" is a pharmacist  
2 licensed under chapter 18.64 RCW who holds a psychiatric pharmacy  
3 specialty certification.

4       **Sec. 2.** RCW 71.05.020 and 2024 c 371 s 18, 2024 c 209 s 6, and  
5 2024 c 62 s 19 are each reenacted and amended to read as follows:

6       The definitions in this section apply throughout this chapter  
7 unless the context clearly requires otherwise.

8       (1) "23-hour crisis relief center" has the same meaning as under  
9 RCW 71.24.025;

10       (2) "Admission" or "admit" means a decision by a physician,  
11 physician assistant, or psychiatric advanced registered nurse  
12 practitioner that a person should be examined or treated as a patient  
13 in a hospital;

14       (3) "Alcoholism" means a disease, characterized by a dependency  
15 on alcoholic beverages, loss of control over the amount and  
16 circumstances of use, symptoms of tolerance, physiological or  
17 psychological withdrawal, or both, if use is reduced or discontinued,  
18 and impairment of health or disruption of social or economic  
19 functioning;

20       (4) "Antipsychotic medications" means that class of drugs  
21 primarily used to treat serious manifestations of mental illness  
22 associated with thought disorders, which includes, but is not limited  
23 to atypical antipsychotic medications;

24       (5) "Approved substance use disorder treatment program" means a  
25 program for persons with a substance use disorder provided by a  
26 treatment program certified by the department as meeting standards  
27 adopted under chapter 71.24 RCW;

28       (6) "Attending staff" means any person on the staff of a public  
29 or private agency having responsibility for the care and treatment of  
30 a patient;

31       (7) "Authority" means the Washington state health care authority;

32       (8) "Behavioral health disorder" means either a mental disorder  
33 as defined in this section, a substance use disorder as defined in  
34 this section, or a co-occurring mental disorder and substance use  
35 disorder;

36       (9) "Behavioral health service provider" means a public or  
37 private agency that provides mental health, substance use disorder,  
38 or co-occurring disorder services to persons with behavioral health  
39 disorders as defined under this section and receives funding from

1 public sources. This includes, but is not limited to: Hospitals  
2 licensed under chapter 70.41 RCW; evaluation and treatment facilities  
3 as defined in this section; community mental health service delivery  
4 systems or community behavioral health programs as defined in RCW  
5 71.24.025; licensed or certified behavioral health agencies under RCW  
6 71.24.037; an entity with a tribal attestation that it meets minimum  
7 standards or a licensed or certified behavioral health agency as  
8 defined in RCW 71.24.025; facilities conducting competency  
9 evaluations and restoration under chapter 10.77 RCW; approved  
10 substance use disorder treatment programs as defined in this section;  
11 secure withdrawal management and stabilization facilities as defined  
12 in this section; and correctional facilities operated by state,  
13 local, and tribal governments;

14 (10) "Co-occurring disorder specialist" means an individual  
15 possessing an enhancement granted by the department of health under  
16 chapter 18.205 RCW that certifies the individual to provide substance  
17 use disorder counseling subject to the practice limitations under RCW  
18 18.205.105;

19 (11) "Commitment" means the determination by a court that a  
20 person should be detained for a period of either evaluation or  
21 treatment, or both, in an inpatient or a less restrictive setting;

22 (12) "Community behavioral health agency" has the same meaning as  
23 "licensed or certified behavioral health agency" defined in RCW  
24 71.24.025;

25 (13) "Conditional release" means a revocable modification of a  
26 commitment, which may be revoked upon violation of any of its terms;

27 (14) "Crisis stabilization unit" means a short-term facility or a  
28 portion of a facility licensed or certified by the department, such  
29 as an evaluation and treatment facility or a hospital, which has been  
30 designed to assess, diagnose, and treat individuals experiencing an  
31 acute crisis without the use of long-term hospitalization, or to  
32 determine the need for involuntary commitment of an individual;

33 (15) "Custody" means involuntary detention under the provisions  
34 of this chapter or chapter 10.77 RCW, uninterrupted by any period of  
35 unconditional release from commitment from a facility providing  
36 involuntary care and treatment;

37 (16) "Department" means the department of health;

38 (17) "Designated crisis responder" means a mental health  
39 professional appointed by the county, by an entity appointed by the  
40 county, or by the authority in consultation with a tribe or after

1 meeting and conferring with an Indian health care provider, to  
2 perform the duties specified in this chapter;

3 (18) "Detention" or "detain" means the lawful confinement of a  
4 person, under the provisions of this chapter;

5 (19) "Developmental disabilities professional" means a person who  
6 has specialized training and three years of experience in directly  
7 treating or working with persons with developmental disabilities and  
8 is a psychiatrist, physician assistant working with a psychiatrist  
9 who is acting as a participating physician as defined in RCW  
10 18.71A.010, psychologist, psychiatric advanced registered nurse  
11 practitioner, or social worker, and such other developmental  
12 disabilities professionals as may be defined by rules adopted by the  
13 secretary of the department of social and health services;

14 (20) "Developmental disability" means that condition defined in  
15 RCW 71A.10.020(6);

16 (21) "Director" means the director of the authority;

17 (22) "Discharge" means the termination of hospital medical  
18 authority. The commitment may remain in place, be terminated, or be  
19 amended by court order;

20 (23) "Drug addiction" means a disease, characterized by a  
21 dependency on psychoactive chemicals, loss of control over the amount  
22 and circumstances of use, symptoms of tolerance, physiological or  
23 psychological withdrawal, or both, if use is reduced or discontinued,  
24 and impairment of health or disruption of social or economic  
25 functioning;

26 (24) "Evaluation and treatment facility" means any facility which  
27 can provide directly, or by direct arrangement with other public or  
28 private agencies, emergency evaluation and treatment, outpatient  
29 care, and timely and appropriate inpatient care to persons suffering  
30 from a mental disorder, and which is licensed or certified as such by  
31 the department. The authority may certify single beds as temporary  
32 evaluation and treatment beds under RCW 71.05.745. A physically  
33 separate and separately operated portion of a state hospital may be  
34 designated as an evaluation and treatment facility. A facility which  
35 is part of, or operated by, the department of social and health  
36 services or any federal agency will not require certification. No  
37 correctional institution or facility, or jail, shall be an evaluation  
38 and treatment facility within the meaning of this chapter;

39 (25) "Gravely disabled" means a condition in which a person, as a  
40 result of a behavioral health disorder: (a) Is in danger of serious

1 physical harm resulting from a failure to provide for his or her  
2 essential human needs of health or safety; or (b) manifests severe  
3 deterioration from safe behavior evidenced by repeated and escalating  
4 loss of cognitive or volitional control over his or her actions and  
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6 safety;

7 (26) "Habilitative services" means those services provided by  
8 program personnel to assist persons in acquiring and maintaining life  
9 skills and in raising their levels of physical, mental, social, and  
10 vocational functioning. Habilitative services include education,  
11 training for employment, and therapy. The habilitative process shall  
12 be undertaken with recognition of the risk to the public safety  
13 presented by the person being assisted as manifested by prior charged  
14 criminal conduct;

15 (27) "Hearing" means any proceeding conducted in open court that  
16 conforms to the requirements of RCW 71.05.820;

17 (28) "History of one or more violent acts" refers to the period  
18 of time ten years prior to the filing of a petition under this  
19 chapter, excluding any time spent, but not any violent acts  
20 committed, in a behavioral health facility, or in confinement as a  
21 result of a criminal conviction;

22 (29) "Imminent" means the state or condition of being likely to  
23 occur at any moment or near at hand, rather than distant or remote;

24 (30) "In need of assisted outpatient treatment" refers to a  
25 person who meets the criteria for assisted outpatient treatment  
26 established under RCW 71.05.148;

27 (31) "Individualized service plan" means a plan prepared by a  
28 developmental disabilities professional with other professionals as a  
29 team, for a person with developmental disabilities, which shall  
30 state:

31 (a) The nature of the person's specific problems, prior charged  
32 criminal behavior, and habilitation needs;

33 (b) The conditions and strategies necessary to achieve the  
34 purposes of habilitation;

35 (c) The intermediate and long-range goals of the habilitation  
36 program, with a projected timetable for the attainment;

37 (d) The rationale for using this plan of habilitation to achieve  
38 those intermediate and long-range goals;

39 (e) The staff responsible for carrying out the plan;

1 (f) Where relevant in light of past criminal behavior and due  
2 consideration for public safety, the criteria for proposed movement  
3 to less-restrictive settings, criteria for proposed eventual  
4 discharge or release, and a projected possible date for discharge or  
5 release; and

6 (g) The type of residence immediately anticipated for the person  
7 and possible future types of residences;

8 (32) "Intoxicated person" means a person whose mental or physical  
9 functioning is substantially impaired as a result of the use of  
10 alcohol or other psychoactive chemicals;

11 (33) "Judicial commitment" means a commitment by a court pursuant  
12 to the provisions of this chapter;

13 (34) "Legal counsel" means attorneys and staff employed by county  
14 prosecutor offices or the state attorney general acting in their  
15 capacity as legal representatives of public behavioral health service  
16 providers under RCW 71.05.130;

17 (35) "Less restrictive alternative treatment" means a program of  
18 individualized treatment in a less restrictive setting than inpatient  
19 treatment that includes the services described in RCW 71.05.585. This  
20 term includes: Treatment pursuant to a less restrictive alternative  
21 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant  
22 to a conditional release under RCW 71.05.340; and treatment pursuant  
23 to an assisted outpatient treatment order under RCW 71.05.148;

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25 medicine or osteopathic medicine and surgery in the state of  
26 Washington;

27 (37) "Likelihood of serious harm" means:

28 (a) A substantial risk that: (i) Physical harm will be inflicted  
29 by a person upon his or her own person, as evidenced by threats or  
30 attempts to commit suicide or inflict physical harm on oneself; (ii)  
31 physical harm will be inflicted by a person upon another, as  
32 evidenced by behavior which has caused harm, substantial pain, or  
33 which places another person or persons in reasonable fear of harm to  
34 themselves or others; or (iii) physical harm will be inflicted by a  
35 person upon the property of others, as evidenced by behavior which  
36 has caused substantial loss or damage to the property of others; or

37 (b) The person has threatened the physical safety of another and  
38 has a history of one or more violent acts;

39 (38) "Medical clearance" means a physician or other health care  
40 provider, including an Indian health care provider, has determined

1 that a person is medically stable and ready for referral to the  
2 designated crisis responder or facility. For a person presenting in  
3 the community, no medical clearance is required prior to  
4 investigation by a designated crisis responder;

5 (39) "Mental disorder" means any organic, mental, or emotional  
6 impairment which has substantial adverse effects on a person's  
7 cognitive or volitional functions;

8 (40) "Mental health professional" means an individual practicing  
9 within the mental health professional's statutory scope of practice  
10 who is:

11 (a) A psychiatrist, psychologist, physician assistant working  
12 with a psychiatrist who is acting as a participating physician as  
13 defined in RCW 18.71A.010, psychiatric advanced registered nurse  
14 practitioner, psychiatric nurse, or social worker, as defined in this  
15 chapter and chapter 71.34 RCW;

16 (b) A mental health counselor, mental health counselor associate,  
17 marriage and family therapist, or marriage and family therapist  
18 associate, as defined in chapter 18.225 RCW;

19 (c) A certified or licensed agency affiliated counselor, as  
20 defined in chapter 18.19 RCW; or

21 (d) A licensed psychological associate as described in chapter  
22 18.83 RCW;

23 (41) "Peace officer" means a law enforcement official of a public  
24 agency or governmental unit, and includes persons specifically given  
25 peace officer powers by any state law, local ordinance, or judicial  
26 order of appointment;

27 (42) "Physician assistant" means a person licensed as a physician  
28 assistant under chapter 18.71A RCW;

29 (43) "Private agency" means any person, partnership, corporation,  
30 or association that is not a public agency, whether or not financed  
31 in whole or in part by public funds, which constitutes an evaluation  
32 and treatment facility or private institution, or hospital, or  
33 approved substance use disorder treatment program, which is conducted  
34 for, or includes a department or ward conducted for, the care and  
35 treatment of persons with behavioral health disorders;

36 (44) "Professional person" means a mental health professional,  
37 substance use disorder professional, or designated crisis responder  
38 and shall also mean a physician, physician assistant, psychiatric  
39 advanced registered nurse practitioner, registered nurse, and such

1 others as may be defined by rules adopted by the secretary pursuant  
2 to the provisions of this chapter;

3 (45) "Psychiatric advanced registered nurse practitioner" means a  
4 person who is licensed as an advanced registered nurse practitioner  
5 pursuant to chapter 18.79 RCW; and who is board certified in advanced  
6 practice psychiatric and mental health nursing;

7 (46) "Psychiatrist" means a person having a license as a  
8 physician and surgeon in this state who has in addition completed  
9 three years of graduate training in psychiatry in a program approved  
10 by the American medical association or the American osteopathic  
11 association and is certified or eligible to be certified by the  
12 American board of psychiatry and neurology;

13 (47) "Psychologist" means a person who has been licensed as a  
14 psychologist pursuant to chapter 18.83 RCW;

15 (48) "Public agency" means any evaluation and treatment facility  
16 or institution, secure withdrawal management and stabilization  
17 facility, approved substance use disorder treatment program, or  
18 hospital which is conducted for, or includes a department or ward  
19 conducted for, the care and treatment of persons with behavioral  
20 health disorders, if the agency is operated directly by federal,  
21 state, county, or municipal government, or a combination of such  
22 governments;

23 (49) "Release" means legal termination of the commitment under  
24 the provisions of this chapter;

25 (50) "Resource management services" has the meaning given in  
26 chapter 71.24 RCW;

27 (51) "Secretary" means the secretary of the department of health,  
28 or his or her designee;

29 (52) "Secure withdrawal management and stabilization facility"  
30 means a facility operated by either a public or private agency or by  
31 the program of an agency which provides care to voluntary individuals  
32 and individuals involuntarily detained and committed under this  
33 chapter for whom there is a likelihood of serious harm or who are  
34 gravely disabled due to the presence of a substance use disorder.  
35 Secure withdrawal management and stabilization facilities must:

36 (a) Provide the following services:

37 (i) Assessment and treatment, provided by certified substance use  
38 disorder professionals or co-occurring disorder specialists;

39 (ii) Clinical stabilization services;

1 (iii) Acute or subacute detoxification services for intoxicated  
2 individuals; and

3 (iv) Discharge assistance provided by certified substance use  
4 disorder professionals or co-occurring disorder specialists,  
5 including facilitating transitions to appropriate voluntary or  
6 involuntary inpatient services or to less restrictive alternatives as  
7 appropriate for the individual;

8 (b) Include security measures sufficient to protect the patients,  
9 staff, and community; and

10 (c) Be licensed or certified as such by the department of health;

11 (53) "Severe deterioration from safe behavior" means that a  
12 person will, if not treated, suffer or continue to suffer severe and  
13 abnormal mental, emotional, or physical distress, and this distress  
14 is associated with significant impairment of judgment, reason, or  
15 behavior;

16 (54) "Social worker" means a person with a master's or further  
17 advanced degree from a social work educational program accredited and  
18 approved as provided in RCW 18.320.010;

19 (55) "Substance use disorder" means a cluster of cognitive,  
20 behavioral, and physiological symptoms indicating that an individual  
21 continues using the substance despite significant substance-related  
22 problems. The diagnosis of a substance use disorder is based on a  
23 pathological pattern of behaviors related to the use of the  
24 substances;

25 (56) "Substance use disorder professional" means a person  
26 certified as a substance use disorder professional by the department  
27 of health under chapter 18.205 RCW;

28 (57) "Therapeutic court personnel" means the staff of a mental  
29 health court or other therapeutic court which has jurisdiction over  
30 defendants who are dually diagnosed with mental disorders, including  
31 court personnel, probation officers, a court monitor, prosecuting  
32 attorney, or defense counsel acting within the scope of therapeutic  
33 court duties;

34 (58) "Treatment records" include registration and all other  
35 records concerning persons who are receiving or who at any time have  
36 received services for behavioral health disorders, which are  
37 maintained by the department of social and health services, the  
38 department, the authority, behavioral health administrative services  
39 organizations and their staffs, managed care organizations and their  
40 staffs, and by treatment facilities. Treatment records include mental

1 health information contained in a medical bill including but not  
2 limited to mental health drugs, a mental health diagnosis, provider  
3 name, and dates of service stemming from a medical service. Treatment  
4 records do not include notes or records maintained for personal use  
5 by a person providing treatment services for the department of social  
6 and health services, the department, the authority, behavioral health  
7 administrative services organizations, managed care organizations, or  
8 a treatment facility if the notes or records are not available to  
9 others;

10 (59) "Tribe" has the same meaning as in RCW 71.24.025;

11 (60) "Video," unless the context clearly indicates otherwise,  
12 means the delivery of behavioral health services through the use of  
13 interactive audio and video technology, permitting real-time  
14 communication between a person and a designated crisis responder, for  
15 the purpose of evaluation. "Video" does not include the use of audio-  
16 only telephone, facsimile, email, or store and forward technology.  
17 "Store and forward technology" means use of an asynchronous  
18 transmission of a person's medical information from a mental health  
19 service provider to the designated crisis responder which results in  
20 medical diagnosis, consultation, or treatment;

21 (61) "Violent act" means behavior that resulted in homicide,  
22 attempted suicide, injury, or substantial loss or damage to property;

23 (62) "Board-certified psychiatric pharmacist" is a pharmacist  
24 licensed under chapter 18.64 RCW who holds a psychiatric pharmacy  
25 specialty certification.

26 **Sec. 3.** RCW 71.05.148 and 2024 c 209 s 9 are each amended to  
27 read as follows:

28 (1) A person is in need of assisted outpatient treatment if the  
29 court finds by clear, cogent, and convincing evidence pursuant to a  
30 petition filed under this section that:

31 (a) The person has a behavioral health disorder;

32 (b) Based on a clinical determination and in view of the person's  
33 treatment history and current behavior, at least one of the following  
34 is true:

35 (i) The person is unlikely to survive safely in the community  
36 without supervision and the person's condition is substantially  
37 deteriorating; or

38 (ii) The person is in need of assisted outpatient treatment in  
39 order to prevent a relapse or deterioration that would be likely to

1 result in grave disability or a likelihood of serious harm to the  
2 person or to others;

3 (c) The person has a history of lack of compliance with treatment  
4 for his or her behavioral health disorder that has:

5 (i) At least twice within the 36 months prior to the filing of  
6 the petition been a significant factor in necessitating  
7 hospitalization of the person, or the person's receipt of services in  
8 a forensic or other mental health unit of a state or tribal  
9 correctional facility or local correctional facility, provided that  
10 the 36-month period shall be extended by the length of any  
11 hospitalization or incarceration of the person that occurred within  
12 the 36-month period;

13 (ii) At least twice within the 36 months prior to the filing of  
14 the petition been a significant factor in necessitating emergency  
15 medical care or hospitalization for behavioral health-related medical  
16 conditions including overdose, infected abscesses, sepsis,  
17 endocarditis, or other maladies, or a significant factor in behavior  
18 which resulted in the person's incarceration in a state, tribal, or  
19 local correctional facility; or

20 (iii) Resulted in one or more violent acts, threats, or attempts  
21 to cause serious physical harm to the person or another within the 48  
22 months prior to the filing of the petition, provided that the 48-  
23 month period shall be extended by the length of any hospitalization  
24 or incarceration of the person that occurred during the 48-month  
25 period;

26 (d) Participation in an assisted outpatient treatment program  
27 would be the least restrictive alternative necessary to ensure the  
28 person's recovery and stability; and

29 (e) The person will benefit from assisted outpatient treatment.

30 (2) The following individuals may directly file a petition for  
31 less restrictive alternative treatment on the basis that a person is  
32 in need of assisted outpatient treatment:

33 (a) The director of a hospital where the person is hospitalized  
34 or the director's designee;

35 (b) The director of a behavioral health service provider  
36 providing behavioral health care or residential services to the  
37 person or the director's designee;

38 (c) The person's treating mental health professional or substance  
39 use disorder professional or one who has evaluated the person;

40 (d) A designated crisis responder;

1 (e) A release planner from a corrections facility; or

2 (f) An emergency room physician.

3 (3) A court order for less restrictive alternative treatment on  
4 the basis that the person is in need of assisted outpatient treatment  
5 may be effective for up to 18 months. The petitioner must personally  
6 interview the person, unless the person refuses an interview, to  
7 determine whether the person will voluntarily receive appropriate  
8 treatment.

9 (4) The petitioner must allege specific facts based on personal  
10 observation, evaluation, or investigation, and must consider the  
11 reliability or credibility of any person providing information  
12 material to the petition.

13 (5) The petition must include:

14 (a) A statement of the circumstances under which the person's  
15 condition was made known and the basis for the opinion, from personal  
16 observation or investigation, that the person is in need of assisted  
17 outpatient treatment. The petitioner must state which specific facts  
18 come from personal observation and specify what other sources of  
19 information the petitioner has relied upon to form this belief;

20 (b) A declaration from a physician, physician assistant, advanced  
21 practice registered nurse (~~(practitioner)~~), board-certified  
22 psychiatric pharmacist, or the person's treating mental health  
23 professional or substance use disorder professional, who has examined  
24 the person no more than 10 days prior to the submission of the  
25 petition and who is willing to testify in support of the petition, or  
26 who alternatively has made appropriate attempts to examine the person  
27 within the same period but has not been successful in obtaining the  
28 person's cooperation, and who is willing to testify to the reasons  
29 they believe that the person meets the criteria for assisted  
30 outpatient treatment. If the declaration is provided by the person's  
31 treating mental health professional or substance use disorder  
32 professional, it must be cosigned by a supervising physician,  
33 physician assistant, or advanced practice registered nurse  
34 (~~(practitioner)~~) who certifies that they have reviewed the  
35 declaration;

36 (c) The declarations of additional witnesses, if any, supporting  
37 the petition for assisted outpatient treatment;

38 (d) The name of an agency, provider, or facility that agrees to  
39 provide less restrictive alternative treatment if the petition is  
40 granted by the court; and

1 (e) If the person is detained in a state hospital, inpatient  
2 treatment facility, jail, or correctional facility at the time the  
3 petition is filed, the anticipated release date of the person and any  
4 other details needed to facilitate successful reentry and transition  
5 into the community.

6 (6)(a) Upon receipt of a petition meeting all requirements of  
7 this section, the court shall fix a date for a hearing:

8 (i) No sooner than three days or later than seven days after the  
9 date of service or as stipulated by the parties or, upon a showing of  
10 good cause, no later than 30 days after the date of service; or

11 (ii) If the respondent is hospitalized at the time of filing of  
12 the petition, before discharge of the respondent and in sufficient  
13 time to arrange for a continuous transition from inpatient treatment  
14 to assisted outpatient treatment.

15 (b) A copy of the petition and notice of hearing shall be served,  
16 in the same manner as a summons, on the petitioner, the respondent,  
17 the qualified professional whose affidavit accompanied the petition,  
18 a current provider, if any, and a surrogate decision maker or agent  
19 under chapter 71.32 RCW, if any.

20 (c) If the respondent has a surrogate decision maker or agent  
21 under chapter 71.32 RCW who wishes to provide testimony at the  
22 hearing, the court shall afford the surrogate decision maker or agent  
23 an opportunity to testify.

24 (d) The respondent shall be represented by counsel at all stages  
25 of the proceedings.

26 (e) If the respondent fails to appear at the hearing after  
27 notice, the court may conduct the hearing in the respondent's  
28 absence; provided that the respondent's counsel is present.

29 (f) If the respondent has refused to be examined by the qualified  
30 professional whose affidavit accompanied the petition, the court may  
31 order a mental examination of the respondent. The examination of the  
32 respondent may be performed by the qualified professional whose  
33 affidavit accompanied the petition. If the examination is performed  
34 by another qualified professional, the examining qualified  
35 professional shall be authorized to consult with the qualified  
36 professional whose affidavit accompanied the petition.

37 (g) If the respondent has refused to be examined by a qualified  
38 professional and the court finds reasonable grounds to believe that  
39 the allegations of the petition are true, the court may issue a  
40 written order directing a peace officer who has completed crisis

1 intervention training to detain and transport the respondent to a  
2 provider for examination by a qualified professional. A respondent  
3 detained pursuant to this subsection shall be detained no longer than  
4 necessary to complete the examination and in no event longer than 24  
5 hours.

6 (7) If the petition involves a person whom the petitioner or  
7 behavioral health administrative services organization knows, or has  
8 reason to know, is an American Indian or Alaska Native who receives  
9 medical or behavioral health services from a tribe within this state,  
10 the petitioner or behavioral health administrative services  
11 organization shall notify the tribe and Indian health care provider.  
12 Notification shall be made in person or by telephonic or electronic  
13 communication to the tribal contact listed in the authority's tribal  
14 crisis coordination plan as soon as possible, but before the hearing  
15 and no later than 24 hours from the time the petition is served upon  
16 the person and the person's guardian. The notice to the tribe or  
17 Indian health care provider must include a copy of the petition,  
18 together with any orders issued by the court and a notice of the  
19 tribe's right to intervene. The court clerk shall provide copies of  
20 any court orders necessary for the petitioner or the behavioral  
21 health administrative services organization to provide notice to the  
22 tribe or Indian health care provider under this section.

23 (8) A petition for assisted outpatient treatment filed under this  
24 section shall be adjudicated under RCW 71.05.240.

25 (9) After January 1, 2023, a petition for assisted outpatient  
26 treatment must be filed on forms developed by the administrative  
27 office of the courts.

28 **Sec. 4.** RCW 71.05.230 and 2022 c 210 s 11 are each amended to  
29 read as follows:

30 A person detained for (~~one hundred twenty~~) 120 hours of  
31 evaluation and treatment may be committed for not more than  
32 (~~fourteen~~) 14 additional days of involuntary intensive treatment or  
33 (~~ninety~~) 90 additional days of a less restrictive alternative  
34 treatment. A petition may only be filed if the following conditions  
35 are met:

36 (1) The professional staff of the facility providing evaluation  
37 services has analyzed the person's condition and finds that the  
38 condition is caused by a behavioral health disorder and results in:

1 (a) A likelihood of serious harm; or (b) the person being gravely  
2 disabled; and are prepared to testify those conditions are met; and

3 (2) The person has been advised of the need for voluntary  
4 treatment and the professional staff of the facility has evidence  
5 that he or she has not in good faith volunteered; and

6 (3) The facility providing intensive treatment is certified to  
7 provide such treatment by the department or under RCW 71.05.745; and

8 (4) (a) (i) The professional staff of the facility or the  
9 designated crisis responder has filed a petition with the court for a  
10 (~~fourteen~~) 14 day involuntary detention or a (~~ninety~~) 90 day less  
11 restrictive alternative. The petition must be signed by:

12 (A) One physician, physician assistant, board-certified  
13 psychiatric pharmacist, or psychiatric advanced registered nurse  
14 practitioner; and

15 (B) One physician, physician assistant, psychiatric advanced  
16 registered nurse practitioner, or mental health professional.

17 (ii) If the petition is for substance use disorder treatment, the  
18 petition may be signed by a substance use disorder professional  
19 instead of a mental health professional and by an advanced practice  
20 registered nurse (~~practitioner~~) instead of a psychiatric advanced  
21 registered nurse practitioner. The persons signing the petition must  
22 have examined the person.

23 (b) If involuntary detention is sought the petition shall state  
24 facts that support the finding that such person, as a result of a  
25 behavioral health disorder, presents a likelihood of serious harm, or  
26 is gravely disabled and that there are no less restrictive  
27 alternatives to detention in the best interest of such person or  
28 others. The petition shall state specifically that less restrictive  
29 alternative treatment was considered and specify why treatment less  
30 restrictive than detention is not appropriate. If an involuntary less  
31 restrictive alternative is sought, the petition shall state facts  
32 that support the finding that such person, as a result of a  
33 behavioral health disorder, presents a likelihood of serious harm or  
34 is gravely disabled and shall set forth any recommendations for less  
35 restrictive alternative treatment services; and

36 (5) A copy of the petition has been served on the detained  
37 person, his or her attorney, and his or her guardian, if any, prior  
38 to the probable cause hearing; and

1 (6) The court at the time the petition was filed and before the  
2 probable cause hearing has appointed counsel to represent such person  
3 if no other counsel has appeared; and

4 (7) The petition reflects that the person was informed of the  
5 loss of firearm rights if involuntarily committed for mental health  
6 treatment; and

7 (8) At the conclusion of the initial commitment period, the  
8 professional staff of the agency or facility or the designated crisis  
9 responder may petition for an additional period of either 90 days of  
10 less restrictive alternative treatment or 90 days of involuntary  
11 intensive treatment as provided in RCW 71.05.290; and

12 (9) If the hospital or facility designated to provide less  
13 restrictive alternative treatment is other than the facility  
14 providing involuntary treatment, the outpatient facility so  
15 designated to provide less restrictive alternative treatment has  
16 agreed to assume such responsibility.

17 **Sec. 5.** RCW 71.05.585 and 2024 c 62 s 22 are each amended to  
18 read as follows:

19 (1) Less restrictive alternative treatment, at a minimum,  
20 includes the following services:

21 (a) Assignment of a care coordinator;

22 (b) An intake evaluation with the provider of the less  
23 restrictive alternative treatment;

24 (c) A psychiatric evaluation, a substance use disorder  
25 evaluation, or both;

26 (d) A schedule of regular contacts with the provider of the  
27 treatment services for the duration of the order;

28 (e) A transition plan addressing access to continued services at  
29 the expiration of the order;

30 (f) An individual crisis plan;

31 (g) Consultation about the formation of a mental health advance  
32 directive under chapter 71.32 RCW; and

33 (h) Notification to the care coordinator assigned in (a) of this  
34 subsection if reasonable efforts to engage the client fail to produce  
35 substantial compliance with court-ordered treatment conditions.

36 (2) Less restrictive alternative treatment may additionally  
37 include requirements to participate in the following services:

38 (a) Medication management;

39 (b) Psychotherapy;

- 1 (c) Nursing;
- 2 (d) Substance use disorder counseling;
- 3 (e) Residential treatment;
- 4 (f) Partial hospitalization;
- 5 (g) Intensive outpatient treatment;
- 6 (h) Support for housing, benefits, education, and employment; and
- 7 (i) Periodic court review.

8 (3) If the person was provided with involuntary medication under  
9 RCW 71.05.215 or pursuant to a judicial order during the involuntary  
10 commitment period, the less restrictive alternative treatment order  
11 may authorize the less restrictive alternative treatment provider or  
12 its designee to administer involuntary antipsychotic medication to  
13 the person if the provider has attempted and failed to obtain the  
14 informed consent of the person and there is a concurring medical  
15 opinion approving the medication by a psychiatrist, physician  
16 assistant working with a psychiatrist who is acting as a  
17 participating physician as defined in RCW 18.71A.010, psychiatric  
18 advanced registered nurse practitioner, board-certified psychiatric  
19 pharmacist, or physician or physician assistant in consultation with  
20 an independent mental health professional with prescribing authority.

21 (4) Less restrictive alternative treatment must be administered  
22 by a provider that is certified or licensed to provide or coordinate  
23 the full scope of services required under the less restrictive  
24 alternative order and that has agreed to assume this responsibility.

25 (5) The care coordinator assigned to a person ordered to less  
26 restrictive alternative treatment must submit an individualized plan  
27 for the person's treatment services to the court that entered the  
28 order. An initial plan must be submitted as soon as possible  
29 following the intake evaluation and a revised plan must be submitted  
30 upon any subsequent modification in which a type of service is  
31 removed from or added to the treatment plan.

32 (6) A care coordinator may disclose information and records  
33 related to mental health services pursuant to RCW 70.02.230(2)(k) for  
34 purposes of implementing less restrictive alternative treatment.

35 (7) For the purpose of this section, "care coordinator" means a  
36 clinical practitioner who coordinates the activities of less  
37 restrictive alternative treatment. The care coordinator coordinates  
38 activities with the designated crisis responders that are necessary  
39 for enforcement and continuation of less restrictive alternative  
40 orders and is responsible for coordinating service activities with

1 other agencies and establishing and maintaining a therapeutic  
2 relationship with the individual on a continuing basis.

3 NEW SECTION. **Sec. 6.** Section 1 of this act expires when section  
4 2 of this act takes effect.

5 NEW SECTION. **Sec. 7.** Section 2 of this act takes effect when  
6 the contingency in section 26, chapter 433, Laws of 2023 takes  
7 effect.

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