

**FY 2019
Mandatory Outpatient Treatment (MOT)
Annual Report**

Mandatory Outpatient Treatment (MOT) refers to a legal obligation for a person to participate in outpatient treatment. The purpose of MOT is to provide a less restrictive alternative to inpatient care for service recipients with a mental illness who require continued treatment to prevent deterioration in their mental condition and who will respond to a legal obligation to participate in outpatient treatment. There are three main types of MOT in Tennessee law, one in Title 33, Chapter 6, Part 6 (the requirements for which are defined in T.C.A. § 33-6-602), one in T.C.A. § 33-7-303(b), and one in T.C.A. § 33-7-303(g). Differences are summarized in Table 1, below:

Table 1: Three Types of MOT

T.C.A. § 33-6-602	T.C.A. § 33-7-303(b)	T.C.A. § 33-7-303(g)
Starts in the hospital for those committed under Title 33, Chapter 6, Part 5	Starts in the community for NGRI acquittees after evaluation under T.C.A. § 33-7-303(a)	Is required for service recipients found not guilty by reason of insanity of murder or a class A felony under Title 39, Chapter 13 whether released after evaluation under 33-7-303(a) or after commitment under 33-7-303(c).
Expires six months after release or previous renewal unless renewed	Does not expire	Does not expire: Need for continued treatment reviewed by court after an initial six month mandatory period, thereafter the court reviews annually
Can be modified or terminated by provider	Can only be terminated by the court	Can only be terminated by the court
A court finding of non-compliance can result in re-hospitalization	Does not allow for hospitalization, may result in civil or criminal contempt	Allows for hospitalization for those judicially committed, or may result in civil or criminal contempt

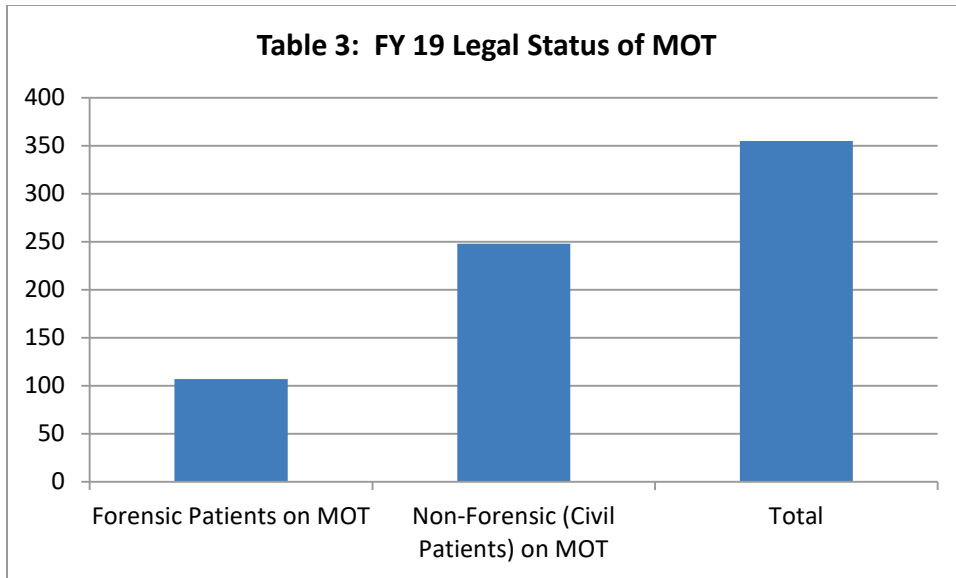
**Table 2: Total MOTs
June 30, 2019**

Type of MOT	Active MOTs	Suspended MOTs Due to Hospitalization	Total MOTs
303b	97	2	99
303g	3	0	3
602	237	15	252
Both 303b and 602	1	0	1
Totals	338	17	355

The majority of the 355 total MOTs originated in Shelby County courts which oversee a total of 200 MOTs. Fifty MOTS originated in Davidson County, 19 in Hamilton, and 15 in Knox. Nine originated in Madison County, six in Sumner, five in Hardeman, four in Anderson. Four counties (Gibson, Rutherford, Scott, and Tipton) have three MOTs each. Five counties (Cumberland, Hickman, Maury, Sullivan, and Williamson) have two MOTs each. Twenty-five counties have only one MOT (Bedford, Bradley, Campbell, Carroll, Chester, Cocke, Coffee, Dyer, Giles, Grundy, Hawkins, Henderson, Henry, Lauderdale, Lewis, Marion, McMinn, Monroe, Montgomery, Overton, Putnam, Roane, Robertson, Union and Weakley).

In the following charts in this report, the one individual who has a MOT under both T.C.A. § 33-6-602 and T.C.A. § 33-7-303(b) will be counted under T.C.A. § 33-6-602 as they are eligible for re-hospitalization under T.C.A. § 33-6-602 if they become non-compliant with their MOT contract.

Non-forensic patients who are judicially committed to a hospital for involuntary care under Title 33, Chapter 6, Part 5, Tenn. Code Annotated may be released on MOT when eligible for discharge if they meet the criteria for MOT under T.C.A. § 33-6-602. Forensic patients may be released on MOT if they are committed subsequent to T.C.A. § 33-7-301(b) or 33-7-303(c) and meet the criteria for MOT under T.C.A. § 33-6-602 just like non-forensic patients. Forensic patients may be placed on MOT in the community under T.C.A. § 33-7-303(b) or (g) if the consumer is adjudicated not guilty by reason of insanity, does not meet commitment standards under Title 33, Chapter 6, Part 5, Tenn. Code Ann., and meets the criteria for MOT. In FY 19 there were 107 forensic patients on MOT and 248 non-forensic patients on MOT. Many of the non-forensic patients released on MOT were originally forensic cases in the RMHIs under 33-7-301(b) but had their charges retired prior to discharge.



New MOT Cases

Forty-five new MOT cases were initiated in FY 2019. Of these cases, 41 were initiated under TCA § 33-6-602, two were initiated under TCA § 33-7-303(b) and two were initiated under T.C.A. § 33-7-303(g). This was a substantial increase from FY 2018 in which 30 new MOT cases were initiated.

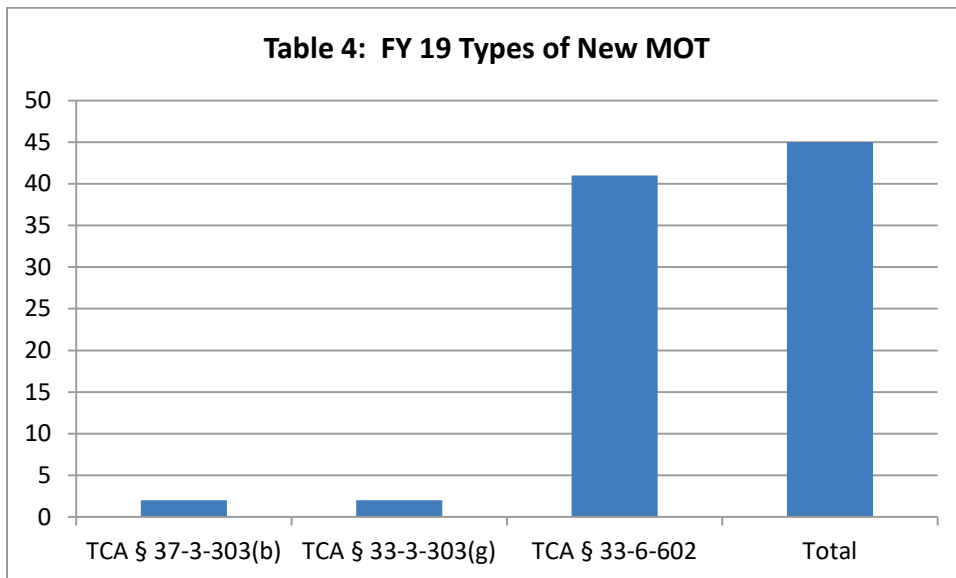
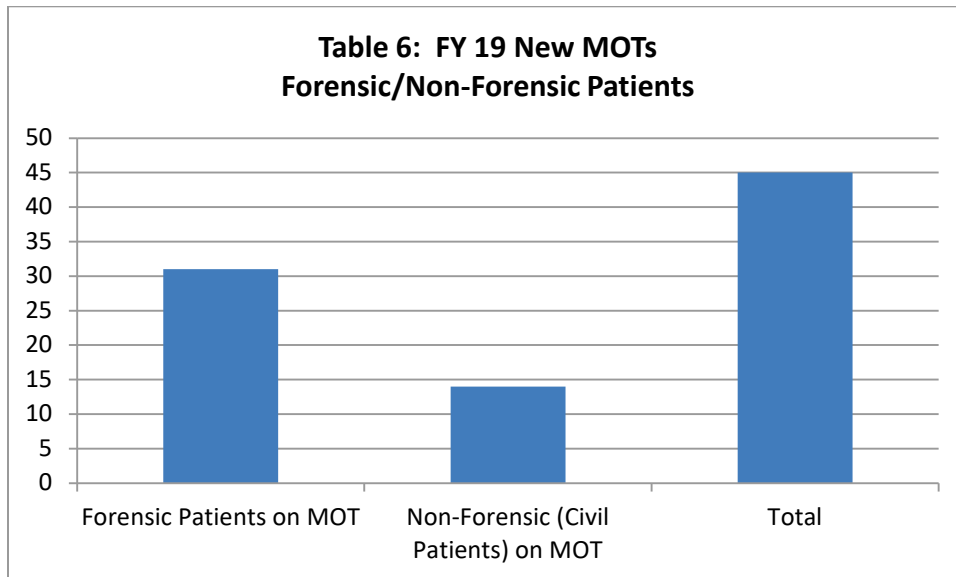


Table 5: FY 2019 Added MOTs by Month

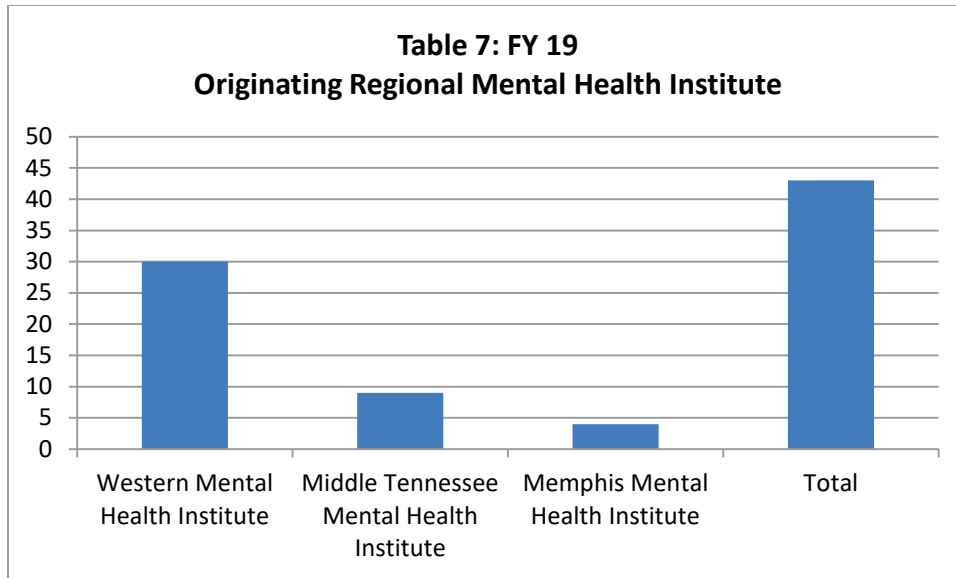
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	TOTALS
Added Total	4	2	7	6	2	3	5	3	4	5	1	3	45
303b	1	0	0	0	0	0	0	0	1	0	0	0	2
303g	0	0	1	0	0	0	0	0	0	1	0	0	2
602	3	2	6	6	2	3	5	3	3	4	1	3	41

TCA § 33-6-602 patients may have been in either forensic or non-forensic legal status, whereas all TCA § 33-7-303(b) and 303(g) MOTs are considered forensic patients having been found NGRI on a criminal offense. Thirty-one of the FY 19 new MOT cases had non-forensic legal statuses and 14 had forensic legal statuses.



Twenty-nine of the 45 new MOT consumers had legal charges that originated in Shelby County. Five had legal charges that originated in Davidson County, and Chester, Dyer, Henry, Knox, Hamilton, Henry, Knox, Madison, Robertson, Sumner, and Weakley Counties had one each.

Of the 41 new MOTs originating under T.C.A. § 33-6-602, 29 originated at Western Mental Health Institute, eight at Middle Tennessee Mental Health Institute, and four at Memphis Mental Health Institute (which serves only acute forensic cases). Of the two new MOTs originating under T.C.A. § 33-6-303(g), one originated at MTMHI and one at WMHI. Two of the new MOTs originated in the community under T.C.A. § 33-7-303(b).



Terminations

In FY 2019, there were 30 MOT consumers whose MOT services were terminated. Two of these were terminated due to the death of the consumer (both due to natural causes). Twenty-eight others had their MOT terminated by decision of the MOT agency’s Treatment Team or by court order.

Of the 30 consumers whose MOT was terminated, six of them received MOT services under the auspices of T.C.A. § 33-7-303(b), and 24 received MOT services under the auspices of T.C.A. § 33-6-602.

**Table 8: FY 2019 MOTs Terminated
By Type**

TCA § 33-7-303(b)	TCA § 33-6-602
6	24

Table 9: FY 2019 Terminated MOTs by Month

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	TOTALS
Terminated Total	2	3	2	3	4	3	4	0	1	4	2	2	30
303b	1	0	0	0	1	0	1	0	0	1	1	1	6
602	1	3	2	3	3	3	3	0	1	3	1	1	24

The length of MOT service of those 30 consumers whose MOT was terminated by the MOT agency or by court order varied as outlined below:

**Table 10: FY 2019 MOT Terminations
By Number of Years on MOT at Time of Termination**

0 – 1 Year	1 – 2 Years	2 – 5 Years	5 – 10 Years	10 + Years
7	5	5	5	8

As noted above, two consumers died of natural causes while on active MOT in FY 19. Of these two one was receiving MOT services under TCA § 33-6-602 and one was receiving services under TCA § 33-7-303(b). Of the remaining 28 consumers whose MOT was terminated, 24 were receiving MOT services under TCA § 33-6-602 and four under TCA § 33-7-303(b).

The most common reason for an MOT to be terminated was that the person had successfully adjusted to the community and no longer needed MOT. Seventeen individuals were doing well on their MOT and no longer needed a legal obligation under MOT to remain compliant. Four individuals moved out of the service area of their MOT agency (all moved out of state). Four individuals had their MOT terminated subsequent to being incarcerated on new legal charges. Three of the consumers were not compliant even with a MOT obligation, so the agency chose to terminate their contracts based on their lack of compliance. As mentioned earlier, two individuals were deceased.

**Table 11: FY 2019 MOT Terminations
By Reason**

MOT no longer necessary for compliance	Incarcerated	Moved out of state or out of service area	Not compliant even with a legal obligation	Deceased
17 (57%)	4 (13%)	4 (13%)	3 (10%)	2 (7%)

Only 15 of the 29 MOT agencies that were active in FY 2019 elected to terminate MOT services to a consumer.

**Table 12: FY 2019 MOT Terminations
By Community MOT Agency**

Agency Name	Number of Terminations	Total Number of Consumers in Service June 30, 2019
A Plus Care Solutions	1	1
Alliance Health Services	8	108
Case Management, Inc.	2	34
Centerstone, Inc.	4	23
Cherokee	1	2
Ecker Center	1	0
Extended Family Care	3	4
Generations	2	43
LifeCare	2	8
MCK Behavior Services	1	0
Mental Health Coop	1	22
Pathways Community Mental Health	1	12
Professional Care Services	1	9
Ridgeview	1	11
Volunteer	1	29
Elam Mental Health Center	0	2
Frontier	0	1
Dr. Hugh Moore (private provider)	0	1
Harbert Hills Nursing Home	0	1
Helen Ross McNabb	0	15
Hometown Medical Services (private provider)	0	7
Loving Arms	0	1
Pine Meadows Healthcare & Rehabilitation	0	1
Pleasant View Health Care	0	1
Project Transition	0	1
Quinco	0	8
Resources for Human Development	0	1
Support Solutions	0	3
Veterans Administration (Memphis)	0	7
Total	30	355

MOT Agencies

Twenty-nine separate community agencies or private providers provided MOT services during FY 2019. Twenty-one agencies are traditional community mental health centers. Three providers are nursing homes. Two agencies are contracted to provide services through the Department of Intellectual and Developmental Disabilities, which only accepts consumers with intellectual disabilities. Two providers are individuals in private practice. The final provider is the Memphis Veterans Administration Medical Center, which only accepts veterans with specific qualifications.

Active MOTs

The total number of active MOTs changes monthly as new MOTs are originated and active MOTs are terminated.

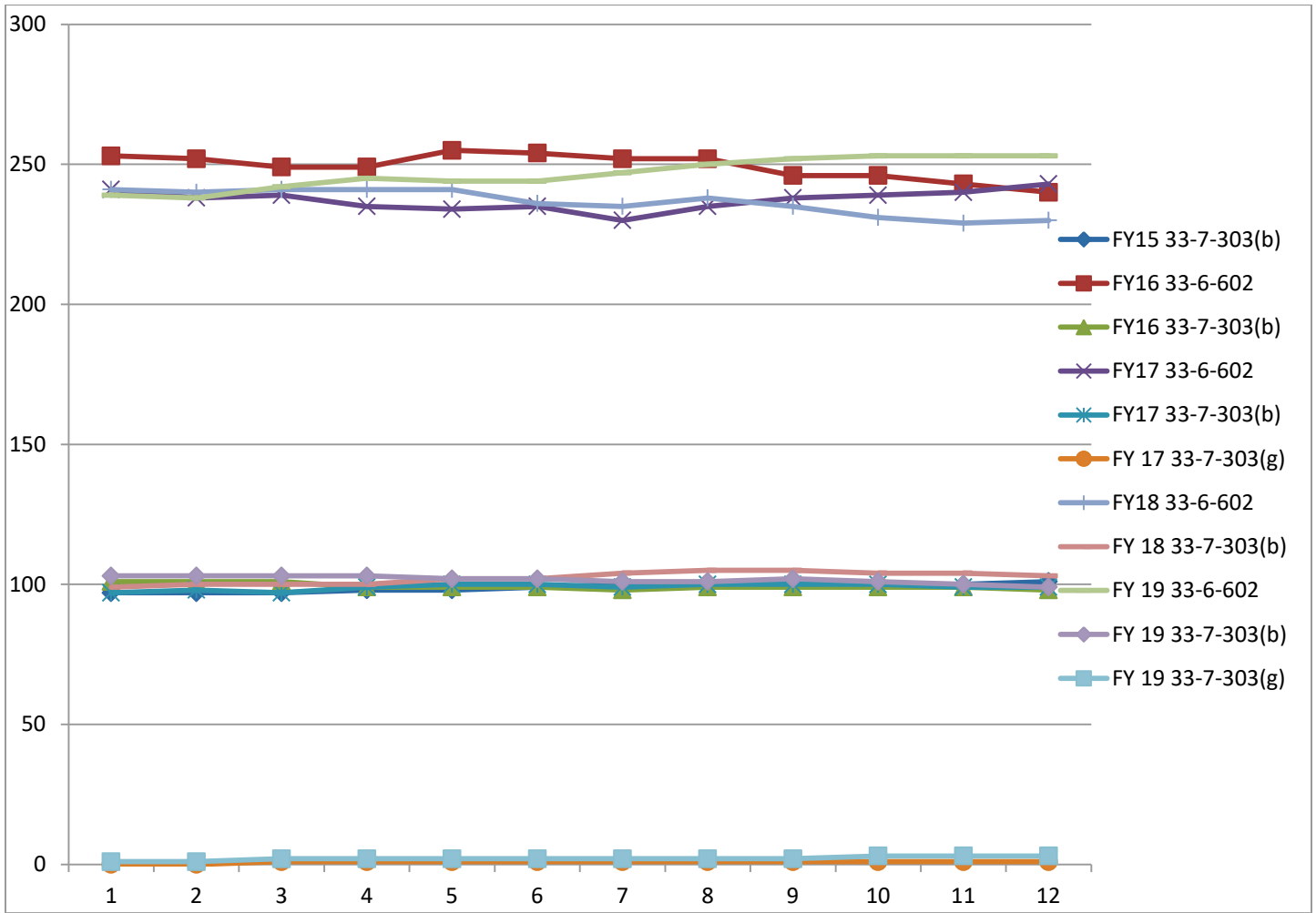
Table 13: FY 2015, FY 2016, FY 2017, FY 2018, FY 2019 Monthly MOTs

	FY15 602	FY15 303(b)	FY16 602	FY16 303(b)	FY17 602	FY17 303(b)	FY 18 602	FY 18 303(b)	FY 18 303(g)	FY 19 602	FY 19 303(b)	FY 19 303(g)
July	245	97	253	101	241	97	241	99	0	239	103	1
August	245	97	252	101	238	98	240	100	0	238	103	1
September	247	97	249	101	239	97	241	100	1	242	103	2
October	250	98	249	99	235	99	241	100	1	245	103	2
November	248	98	255	99	234	100	241	102	1	244	102	2
December	247	99	254	99	235	100	236	102	1	244	102	2
January	248	100	252	98	230	99	235	104	1	247	101	2
February	246	100	252	99	235	100	238	105	1	250	101	2
March	245	100	246	99	238	100	235	105	1	252	102	2
April	250	100	246	99	239	100	231	104	1	253	101	3
May	257	100	243	99	240	99	229	104	1	253	100	3
June	256	101	240	98	243	99	230	103	1	253	99	3

In FY 19 the number of MOTs under TCA § 33-6-602 increased from a low of 239 in July to a high of 253 in June. Seventy percent of these new MOTs originated from Western Mental Health Institute, which worked closely with a grantee under the Tennessee Move Initiative to increase discharges. Since FY 15 the number of MOTs under TCA § 33-6-602 had been slowly decreasing until the increase noted in FY 19.

MOTs under TCA § 37-3-303(b) remained stable as they varied from a high of 103 to a low of 99. Two additional MOTs under TCA 33-7-303(g) were added this year bringing the total to 3.

Table 14: FY 2015, FY 2016, FY 2017, FY 2018, FY 2019 Monthly MOTs by Trend Line



Affidavits of Non-Compliance

All MOT consumers signed a contract with a supervising agency at the time his or her MOT services were initiated. These MOT contracts are occasionally modified as needed to meet the consumer’s changing treatment needs. When the recipient is not in compliance with their MOT contract the agency attempts to bring them into compliance. If they cannot be brought into satisfactory compliance the agency files an Affidavit of Non-Compliance to alert the court and/or the district attorney of the non-compliance.

A wide range of differing outcomes can result following the filing of an Affidavit of Non-Compliance. A previously non-compliant consumer may become compliant upon learning of the potential court hearing. If they meet commitment criteria they may be admitted on an emergency basis to a private or a state hospital. If they are receiving MOT services under the auspices of T.C.A. § 33-6-602 or under the auspices of T.C.A. § 33-7-303(g) (and they were discharged from a mental health hospital following a judicial commitment), then at the non-compliance court hearing they may be re-committed to the hospital of their

original commitment. If they are receiving MOT services under the auspices of T.C.A. 33-7-303(b) or were placed on MOT under the auspices of T.C.A. § 33-7-303(g) while in the community (without having been committed to a hospital) then the court may order civil or criminal contempt charges.

During FY 2019, a total of 39 new Affidavits of Non-Compliance were filed, however two of these were filed on the same individual, so 38 individuals were involved. There were an average of 349 individuals on MOT at any one point during FY 19; 38 individuals with non-compliance affidavits is 11% of the total.

The majority of the non-compliant MOT consumers had legal charges that originated in Shelby County, which also had 56% of the total number of MOTs.

Table 15: FY 19 County of Original Legal Charge, Non-Compliant MOTs

Originating County	Number
Shelby	26
Davidson	5
Madison	3
Williamson	2
Rutherford	1
Scott	1
Total	38

Of the thirty-eight non-compliant consumers, 26 (68%) had MOT under the auspices of T.C.A. § 33-6-602, and 12 (31%) under the auspices of T.C.A. § 33-7-303(b). That distribution closely matches the overall distribution of MOTs under 33-6-602 (71%) and 33-7-303(b) & (g) (29%), suggesting that a consumer is no more likely to be considered non-compliant simply because of the type of MOT.

Table 16: FY 19 Type of Non-Compliant MOT Consumers

Type of MOT	Number
T.C.A. § 33-6-602	26
T.C.A. § 33-7-303(b)	12
Total	38

The majority of non-compliant consumers had been committed to an RMHI as a pre-trial criminal defendant but had their charges dismissed and remained committed as a civil involuntary patient until release on MOT (criminal charges dropped with civil commitment). The second largest category of non-compliant consumers is those with MOT under the auspices of T.C.A. § 33-7-303(b).

**Table 17: FY 19 Discharge Legal Status Code
Non-Compliant Consumers**

Discharge Legal Status Code	Number
Criminal Charges Dropped With Civil Commitment	18
303(b) after Inpatient Evaluation (before 7/1/2009)	7
303(b) after Outpatient Evaluation (since 7/1/2009)	4
Involuntary Civil Commitment	3
Re-Commitment to MHI after prior MOT Non-Compliance after civil (non-forensic) commitment	1
Commitment after NGRI; Includes at Least One Felony Charge	5
Total	38

After an Affidavit of Non-Compliance was filed, seventeen of the non-compliant MOT consumers were subsequently hospitalized either by court order (sixteen) or by emergency status (one).

Eight consumers became compliant with their MOT contract after the Affidavit of Non-Compliance was filed. Of these eight consumers that became compliant there seem to be few commonalities. Four were from Shelby County, two from Madison County, and one each were from Davidson and Williamson Counties. They were equally divided between T.C.A. § 33-6-602 (four) and T.C.A. § 33-7-303(b) (four). Three were receiving MOT services from Alliance Health Services, two from Pathways, and one each from Extended Family Care, LifeCare, and Volunteer.

The current location of six of the non-compliant consumers is unknown. Four of these consumers have had a court hearing and have a court order to transport them to the originating hospital when they are located, but the other two were unable to be served as their location is unknown. At the end of the fiscal year, five of the non-compliant consumers were awaiting a court hearing on their non-compliance. One consumer's MOT was terminated by the court after she moved out of state without permission, and one other consumer's MOT was terminated by the agency after he moved out of state without permission. One individual's MOT was terminated after he was incarcerated on new charges.

Table 18: FY 19 Outcome of Non-Compliance Affidavit

Hospitalized	17
Became Compliant after Affidavit Filed	8
Location Unknown	6
Awaiting a Court Hearing	5
MOT Terminated after Moving Out of State	2
Terminated after Incarceration	1
Total	39

Compliance Ratings

Agencies were asked to provide compliance ratings for each consumer using a scoring system ranging from “0” to “2”. The number “0” was used for **never** compliant with any items on the MOT Contract, “1” was used for **sometimes** compliant with items on the MOT Contract, and “2” was used for **always** compliant with items on the MOT Contract.

Seventeen of 29 MOT agencies or independent practitioners providing compliance ratings used the numeric scoring system. Certain of these seventeen agencies only provided compliance ratings from certain qualified mental health professionals (QMHP), and other QMHPs at the agency did not participate in compliance rating. Some QMHPs used whole numbers, and others used gradations of numbers to express variance in compliance. Renewals/reviews were due every six months, so each consumer would have been rated twice yearly.

Table 19: FY 2019 Numeric Compliance Ratings

FY 2019 Compliance Ratings	July to December 2018	January to June 2019
0*	5	3
1	12	12
1.1 to 1.69	14	17
1.70 to 1.99	9	9
2	90	86
Total Rated	130	127
Total Not Rated	225	228

*Scores of 0 are followed up by agency attempts to bring the consumers back into compliance, and if these efforts are not successful, then Affidavits of Non-Compliance are filed.

Types of Original Legal Charges by Frequency

Table 20 shows the different types of criminal offenses that MOT consumers were charged with associated with the process that led to them being placed on MOT. As described above, patients committed to an RMHI under Title 33, Chapter 6, Part 5 may not have had any criminal charges associated with the hospitalization prior to their release on MOT under T.C.A. § 33-6-602. Those consumers are categorized in Table 20 as “none.” That includes only patients who never had a criminal charge during this hospitalization. Patients who had their charges retired prior to release on MOT are counted in the category of the charge that was retired. Patients with multiple charges are only counted once under the most serious charge.

Table 20: FY 2019 Types of Original Legal Charges by Frequency

Charge(s)	Number of Occurrences
Aggravated Assault (felony)	100
None	68
Simple Assault (misdemeanor)	43
Vandalism/Trespassing/Nuisance	43
Theft	25
Murder	19
Attempted Murder	16
Sex Offense	13
Arson	7
Escape/Failure to Comply/Obstruction of Justice	7
Weapons Offenses	7
Robbery	4
Kidnapping	3
Total	355

MOT for Intellectually Disabled Persons

Mandatory Outpatient Treatment may be ordered for persons with an intellectual disability who are incompetent to stand trial on felony criminal charges or have been found not guilty by reason of insanity on a capital offense (e.g. first degree murder) due to intellectual disability. This process begins with a

court-ordered evaluation under TCA § 33-7-301 conducted by an evaluator certified by the TDMHSAS Office of Forensic and Juvenile Court Services. Services in these circumstances are provided by the Tennessee Department of Intellectual and Developmental Disabilities (TDIDD) either directly or through contracted providers. The circumstances under which a court may order MOT for an intellectually disabled person with criminal charges are defined by statute in Title 33, Chapter 5, Parts 4 and 5.

There were 38 defendants with a developmental disability ordered to participate in MOT for incompetent defendants in FY 19. Seven have completed their competency training and TDMHSAS was awaiting notification of completion for the 31 others who were still receiving training at the end of FY 19.

MOT for Persons Found NGRI of First Degree Murder or Certain Other Class A Felonies

Effective 7/1/2017 legislation took effect which requires persons found not guilty by reason of insanity (NGRI) of a charge of first degree murder or a Class A felony under Title 39, Chapter 13, to participate in mandatory outpatient treatment (MOT) when discharged from the hospital or released by the court following the outpatient evaluation under T.C.A. § 33-7-303(a) who are not committable to a hospital. This legislation mandates that any person ordered by the trial court to participate in outpatient treatment must do so for an initial period of six months. The court may continue the MOT beyond the initial six month period. After the initial six month period the court shall review the person's need for continued MOT on an annual basis.

The Legislature appropriated some funds for FY 19 to pay for MOT services for persons on MOT under the new law who do not have insurance or income to meet their treatment or housing needs. During FY 19 two consumers were discharged under the new law, bringing the total number of persons on MOT under the auspices of T.C.A. § 33-7-303(g) to three. At this point other resources have been available to meet the treatment and housing needs of these consumers.