

DRAFT FOR COMMENT

***Please send comments about this survey to
Sheri Heffelfinger, (406) 444-3596, sheffelfinger@mt.gov.***

SURVEY QUESTIONS FOR HJR 50 STUDY OF PRECOMMITMENT COSTS

1. In each of the following fiscal years, how many times did your county attorney's office receive a finding or determination from a mental health professional pursuant to section 53-21-129, MCA, recommending that a person be involuntarily committed to the Montana State hospital; and how many times did the county attorney's office actually file a petition for an involuntary commitment to the Montana State Hospital?

	Number of determinations recommending involuntary commitment	Number of petitions for involuntary commitment filed by the county attorney
FY 2004		
FY 2005		
FY 2006		
FY 2007		

2. In each of the following fiscal years, what were your county's total costs under section 53-21-132, MCA, for the involuntary commitment of a person to the Montana State Hospital? To the extent possible, please itemize the costs in the categories shown.

	Detention	Examination	Treatment	Testimony	TOTAL
FY 2004					
FY 2005					
FY 2006					
FY 2007					

3. Please list each facility you use for precommitment psychiatric detention, examination, and treatment and identify the per diem cost to the county at each facility, whether you have a negotiated contract rate, what services/items are included in the per diem rate (such as room and board) and what services/items are charged to the county but not included in that rate (such as medications or professional services), and what was the average length of stay at the facility for pre-commitment detention, examination, and treatment in FY 2007.

Facility	Per Diem Rate	Is this a negotiated contract rate? (Yes/No)	Services/Items covered by the Rate	Services/Items NOT covered by the Rate	Avg. length of stay in pre-commitment cases

4. In each of the following fiscal years, by facility, how many days of detention, evaluation, and treatment did you pay for as part of your precommitment costs?

Number of days paid for during involuntary precommitment process

	(Name of facility)	(Name of facility)
FY 2004		
FY 2005		
FY 2006		
FY 2007		

5. In each of the following fiscal years, how many times did you transport an individual to the Montana State Hospital for precommitment psychiatric detention, examination, and treatment, what was your total cost for these transports, and how many times, if any, did the MSH decline to accept an individual for psychiatric detention, examination, and treatment?

	How many individuals were transported by your county to the MSH for precommitment detention, evaluation, and/or treatment?	What were your total costs for precommitment transportation to the MSH?	In how many instances did the MSH decline to accept an individual for precommitment detention, examination, or treatment because the MSH did not have an available bed?
FY 2004			
FY 2005			
FY 2006			
FY 2007			

6. If you (county commissioners) had a choice between precommitment detention, evaluation, and treatment at a local facility and the same service at the Montana State Hospital and if the MSH had a lower per diem rate, considering the cost for transportation to the MSH, would you transport to the MSH or use the local facility? Please explain.

7. Please provide any other comments/recommendations you would like the Law and Justice Interim Committee to consider during its HJR 50 examination of the civil involuntary commitment costs and process.