

SENATE

STATE OF MINNESOTA

NINETY-FOURTH SESSION

S.F. No. 1492

(SENATE AUTHORS: LATZ, Draheim, Abeler, Utke and Hoffman)		
DATE	D-PG	OFFICIAL STATUS
02/17/2025	410	Introduction and first reading Referred to Judiciary and Public Safety
03/06/2025	674	Author added Abeler
03/10/2025	721	Author added Utke
03/24/2025	983a	Comm report: To pass as amended and re-refer to State and Local Government
	1026	Author added Hoffman
04/01/2025		Comm report: To pass as amended and re-refer to Judiciary and Public Safety

1.1

A bill for an act

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relating to the attorney general; establishing a Civil Commitment Coordinating

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Division; establishing various grant programs; requiring reports; appropriating

1.4

money; proposing coding for new law in Minnesota Statutes, chapter 8.

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BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

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Section 1. **[8.365] DEFINITIONS.**

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(a) The definitions in section 253B.02 apply to sections 8.37 to 8.39.

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(b) For the purposes of sections 8.37 to 8.39, the following terms have the meanings

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given:

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(1) "engagement services" means the services described under section 253B.041;

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(2) "outpatient civil commitment" means the option available to a committing court

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under section 253B.09, subdivision 1, paragraph (c); and

1.13

(3) "provisional discharge" means the option available to the head of a treatment facility

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or community-based treatment program under section 253B.09, subdivision 1.

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Sec. 2. **[8.37] CIVIL COMMITMENT COORDINATING DIVISION.**

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Subdivision 1. Civil Commitment Coordinating Division established. There shall be

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in the Office of the Attorney General a Civil Commitment Coordinating Division. A civil

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commitment coordinator shall be appointed by the attorney general. The civil commitment

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coordinator shall perform duties that may lawfully be assigned to the coordinator by the

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attorney general or by law.

2.1 Subd. 2. **Duties of the civil commitment coordinator.** The civil commitment coordinator  
2.2 must:

2.3 (1) continuously maintain the Civil Commitment Advisory Committee;

2.4 (2) in consultation with the Civil Commitment Advisory Committee, provide best  
2.5 practices and guidance regarding engagement services, outpatient civil commitment, and  
2.6 provisional discharge to committing courts, counties, designated agencies, treatment facilities,  
2.7 and community-based treatment programs;

2.8 (3) advocate for increased statewide capacity for engagement services, outpatient civil  
2.9 commitment, and provisional discharge;

2.10 (4) provide ongoing technical assistance to those at the local and regional level tasked  
2.11 with monitoring participants civilly committed under chapter 253B;

2.12 (5) provide guidance on data collection of outcomes related to engagement services,  
2.13 outpatient civil commitment, and provisional discharge;

2.14 (6) aggregate and analyze all data submitted by all jurisdictions by either contracting  
2.15 with a third party to perform these tasks or entering into an interagency agreement with the  
2.16 commissioner of management and budget to utilize the Results First Initiative to perform  
2.17 these tasks;

2.18 (7) ensure that any data submitted is treated in accordance with chapter 13;

2.19 (8) create a public awareness campaign designed to educate the public about the  
2.20 availability and effectiveness of engagement services;

2.21 (9) administer diversion study grants under section 8.38; and

2.22 (10) administer engagement services, outpatient civil commitment, and provisional  
2.23 discharge grants under section 8.39.

2.24 Subd. 3. **Civil Commitment Advisory Committee.** (a) The attorney general shall  
2.25 establish the Civil Commitment Advisory Committee. The Civil Commitment Advisory  
2.26 Committee shall advise the civil commitment coordinator on identification of best practices  
2.27 regarding engagement services, outpatient civil commitment, and provisional discharge;  
2.28 development of guidance for implementation of engagement services, outpatient civil  
2.29 commitment, and provisional discharge; development of data reporting requirements and  
2.30 standards; identification of outcomes to be measured through data analysis; development  
2.31 of grading criteria for grant applications; and other topics as determined by the coordinator.

3.1 (b) The Civil Commitment Advisory Committee must consist of no fewer than 11  
3.2 members and no more than 20 members. The membership of the committee must include:

3.3 (1) the attorney general or a designee who is not the civil commitment coordinator;

3.4 (2) the chief executive officer of Direct Care and Treatment or a designee;

3.5 (3) the commissioner of public safety or a designee;

3.6 (4) the commissioner of corrections or a designee;

3.7 (5) the ombudsman for mental health and developmental disabilities or a designee;

3.8 (6) a member representing district court judges, appointed by the chief justice of the  
3.9 supreme court;

3.10 (7) a member representing district court administrators, appointed by the chief justice  
3.11 of the supreme court;

3.12 (8) a member representing county administrators or county social services administrators,  
3.13 appointed by the attorney general;

3.14 (9) a member representing federally recognized Tribes in Minnesota and urban Indian  
3.15 communities, appointed by the Indian Affairs Council;

3.16 (10) a member who is a defense attorney and has represented a person referred for civil  
3.17 commitment, appointed by the attorney general;

3.18 (11) a member who was previously civilly committed, appointed by the attorney general;

3.19 (12) a member who is a parent, sibling, or child of a person currently or previously  
3.20 civilly committed, appointed by the attorney general;

3.21 (13) a member who is a person for whom engagement services were successfully  
3.22 provided, appointed by the attorney general;

3.23 (14) a member who is a provider of engagement services, appointed by the attorney  
3.24 general;

3.25 (15) a member who represents a treatment facility or community-based treatment program  
3.26 that accepts civilly committed participants, appointed by the attorney general; and

3.27 (16) up to five additional members appointed by the attorney general.

3.28 (c) The attorney general must consult with the chief executive officer of Direct Care  
3.29 and Treatment before making appointments to the committee.

(d) The members of the Civil Commitment Advisory Committee serve without compensation.

Sec. 3. **[8.38] DIVERSION STUDIES.**

Subdivision 1. **Diversion studies.** Each county must conduct diversion studies in accordance with the requirements of this section. Diversion studies must examine each county's local behavioral health system's capacity to divert people who have a mental illness, developmental disability, or chemical use disorder away from the local justice system and into treatment. The civil commitment coordinator must establish uniform study guidelines, data requirements, including any qualitative data or narrative requirements, and data reporting procedures for diversion studies. The coordinator must ensure that the study guidelines and data requirements will allow the coordinator to determine how people with a mental illness, people with a developmental disability, and people with a substance use disorder come into contact with and move through the local criminal justice system and what resources are available or needed to divert individuals away from the local justice system.

Subd. 2. **Diversion study reporting requirements.** By October 1, 2027, and every two years thereafter, each county must submit to the coordinator in the manner established under subdivision 1 all required data and narratives related to its diversion study.

Subd. 3. **Statewide diversion study report.** By April 1, 2028, and every two years thereafter, the civil commitment coordinator must submit to the chairs and ranking minority members of the legislative committees with jurisdiction over civil commitment, mental health, or Direct Care and Treatment a report summarizing the county-level data submitted under subdivision 2. The coordinator must include in the report county, regional, and state-level needs assessments. The coordinator must include in subsequent reports comparisons to the data submitted in prior reports and any statistically significant trends the coordinator's analysis reveals.

Subd. 4. **Diversion study grants.** The civil commitment coordinator must establish a diversion study grant program through which a county may apply for supplemental funding to fulfill the requirements of this section. A county awarded a grant under this subdivision must use a portion of the awarded money as determined by the coordinator to develop a countywide action plan to increase diversions away from the local justice system and into treatment.

5.1       Sec. 4. **[8.39] ENGAGEMENT SERVICES, OUTPATIENT CIVIL COMMITMENT,**  
5.2 **AND PROVISIONAL DISCHARGE GRANTS.**

5.3       Subdivision 1. **Engagement services, outpatient civil commitment, and provisional**  
5.4 **discharge grants.** The civil commitment coordinator must establish engagement services,  
5.5 outpatient civil commitment, and provisional discharge grants to provide supplemental  
5.6 funding to counties to expand the county's capacity to provide engagement services,  
5.7 outpatient civil commitment, and provisional discharge. When considering a grant application  
5.8 under this section, the coordinator must consider whether the applicant received a grant  
5.9 under Laws 2024, chapter 125, article 4, section 10, and, if available, the required evaluation  
5.10 of the grant activities.

5.11       Subd. 2. **Required uses of funding.** All grantees must use a portion as determined by  
5.12 the coordinator of awarded funds for:

5.13       (1) outreach to and education of potential engagement services staff, providers,  
5.14 community-based treatment programs, and treatment facilities to encourage their participation  
5.15 in engagement services;

5.16       (2) supplementing county funding of engagement services, which may include but is  
5.17 not limited to hiring additional staff for prepetition screening teams, contracting with  
5.18 additional agencies to provide engagement services, or supplemental funding to mobile  
5.19 crisis teams, certified peer specialists, community-based treatment programs, treatment  
5.20 facilities, and homeless outreach workers;

5.21       (3) outreach to potential treatment facilities and community-based treatment programs  
5.22 to educate and encourage facilities and programs to accept civilly committed participants;

5.23       (4) supplementing county funding of outpatient civil commitment, which may include  
5.24 but is not limited to supplemental funding to treatment facilities and community-based  
5.25 treatment programs willing to accept civilly committed participants; and

5.26       (5) supplementing county funding for supervision of and services provided to participants  
5.27 released on provisional discharge to ensure continuity of care, adherence to the provisional  
5.28 discharge plan, and to reduce the risk of revocation of provisional discharge.

5.29       Subd. 3. **Reporting requirements.** By October 1, 2027, and every two years thereafter,  
5.30 all recipients of grant funding under this section during the prior reporting period must  
5.31 submit to the civil commitment coordinator deidentified data on each individual who during  
5.32 the prior reporting period:

5.33       (1) received engagement services;

(2) was civilly committed under section 253B.09, subdivision 1, paragraph (c);

(3) was accepted by a treatment facility or community-based treatment program; or

(4) was provisionally discharged under section 253B.15.

The deidentified data on each individual must include data on the individual's adherence to treatment and other information as determined by the coordinator. For the purposes of this subdivision, the coordinator shall determine the reporting period.

Subd. 4. **Evaluation.** (a) The civil commitment coordinator must evaluate the impact of supplemental funding under this section on engagement in treatment before initiation of a prepetition screening process under section 253B.07, utilization of outpatient civil commitment, the frequency of revocations of provisional discharge, and other measures as determined by the coordinator.

(b) By April 1, 2028, and every two years thereafter, the coordinator must submit to the chairs and ranking minority members of the legislative committees with jurisdiction over civil commitments, mental health, or Direct Care and Treatment a report summarizing the coordinator's evaluation under paragraph (a).

**Sec. 5. APPROPRIATION; CIVIL COMMITMENT COORDINATING DIVISION.**

(a) \$..... in fiscal year 2026 and \$..... in fiscal year 2027 are appropriated from the general fund to the attorney general for the Civil Commitment Coordinating Division under Minnesota Statutes, section 8.37.

(b) Of the amount in paragraph (a), \$..... in fiscal year 2026 and \$..... in fiscal year 2027 are for one additional staff member to serve as the civil commitment coordinator.

(c) Of the amount in paragraph (a), \$..... in fiscal year 2026 and \$..... in fiscal year 2027 are for a contract with a third party or an interagency agreement to provide data analytic services.

(d) Of the amount in paragraph (a), \$..... in fiscal year 2026 and \$..... in fiscal year 2027 are for a public awareness campaign to educate the public about the availability and effectiveness of engagement services.

**Sec. 6. APPROPRIATION; DIVERSION STUDY GRANTS.**

\$..... in fiscal year 2026 and \$..... in fiscal year 2027 are appropriated from the general fund to the attorney general for diversion study grants under Minnesota Statutes, section 8.38.

7.1      Sec. 7. **APPROPRIATION; ENGAGEMENT SERVICES, OUTPATIENT CIVIL**  
7.2 **COMMITMENT, AND PROVISIONAL DISCHARGE GRANTS.**

7.3      \$..... in fiscal year 2026 and \$..... in fiscal year 2027 are appropriated from the general  
7.4 fund to the attorney general for engagement services, outpatient civil commitment, and  
7.5 provisional discharge grants under Minnesota Statutes, section 8.39.