

FY 2021
Mandatory Outpatient Treatment (MOT)
Annual Report

Executive Summary

Mandatory Outpatient Treatment (MOT) refers to a legal obligation for a person to participate in outpatient mental health and/or substance abuse 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. The treatment itself is the same treatment as for any individual living with mental illness and/or substance use disorders, such as supervised housing, medications, psychosocial programming, and various forms of therapy.

In Fiscal Year 2021 (July 1, 2020-June 30, 2021), 31 separate providers had clients subject to MOT, most of which were traditional community mental health agencies, but also included private practitioners and the Veteran’s Administration. During this period furloughs and discharges were occasionally paused at the regional mental health institutes in response to the coronavirus pandemic so there were more MOT cases that ended in termination (35) than the number of new MOT cases that were added (24). At year’s end there were a total of 349 MOT cases across the state of Tennessee.

The individuals constituting new MOT cases were predominately individuals who had been found Not Guilty by Reason of Insanity, committed to a Regional Mental Health Institute, and then discharged to the community with an MOT obligation or individuals charged with a criminal offense who were found to be unrestorably incompetent to stand trial after being committed to a Regional Mental Health Institution and then discharged to the community after their charges were retired with an MOT obligation. Individuals who were committed to a Regional Mental Health Institute for treatment who had not been charged with a criminal offense were also subject to release on MOT at discharge.

Most (24 of 35) of the individuals whose MOT obligation was terminated during FY 21 had their MOT terminated because they no longer required the legal obligation or whose circumstances changed so that it no longer applied (one entered a nursing home, one transferred to a mental health provider who didn’t provide MOT, one was hospitalized indefinitely, seven passed away of natural causes, 14 simply did not require MOT in order to participate in treatment). Five individuals eloped from their placements and their whereabouts are unknown. Four individuals had their MOT terminated by court order. Two were not compliant with treatment even with MOT. The length of time on MOT for those whose MOT was terminated during FY 21 ranged from 205 days to over 34 years.

MOT cases are logged and tracked by the MOT Coordinator in the Office of Forensic and Juvenile Court Services of the Tennessee Department of Mental Health and Substance Abuse Services. The following is a detailed report of MOT activity during FY 21.

**FY 2021
Mandatory Outpatient Treatment (MOT)
Annual Report
Debbie Wynn, LCSW, MOT Coordinator**

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 who had been judicially committed, or may result in civil or criminal contempt

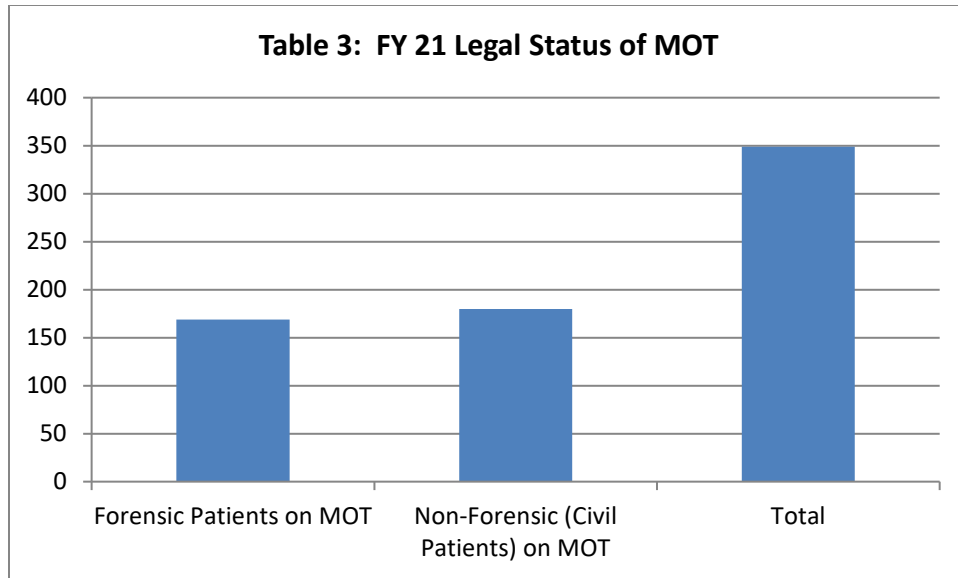
**Table 2: Total MOTs
June 30, 2021**

Type of MOT	Active MOTs	Suspended MOTs Due to Hospitalization	Total MOTs
303b	82	4	86
303g	6	0	6
602	227	25	252
Both 303b and 602	5	0	5
Totals	320	29	349

The majority of the 349 total MOTs originated in Shelby County courts which oversee a total of 190 MOTs. Forty-eight MOTs originated in Davidson County, 22 in Hamilton, and 14 in Knox. Eleven originated in Madison County, seven in Sumner, four in Hardeman and Rutherford. Four counties (Anderson, Gibson, Lewis, Scott) have three MOTs each. Eight counties (Giles, Henderson, Henry, Hickman, Robertson, Sullivan, Tipton, and Williamson) have two MOTs each. Twenty-one counties have only one MOT (Bedford, Bradley, Campbell, Carroll, Chester, Coffee, Cumberland, Dyer, Grundy, Hawkins, Lauderdale, Marion, Maury, McMinn, Monroe, Obion, Overton, Rhea, Roane, Union, and Weakley).

In the following charts in this report, the five individuals who have 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 under 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 21 there were 169 forensic patients on MOT and 180 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

In FY 2021, 24 new MOT cases were initiated. Of these cases all 24 were initiated under TCA § 33-6-602. This was a decrease from FY 20 in which 36 new MOT cases were initiated and FY 19 in which 45 new MOT cases were initiated. This may partially be attributed to the regional mental health institutes eliminating or reducing furloughs during the pandemic during FY 21 and the last three months of FY 20, and also because the courts suspended hearings periodically during the same period.

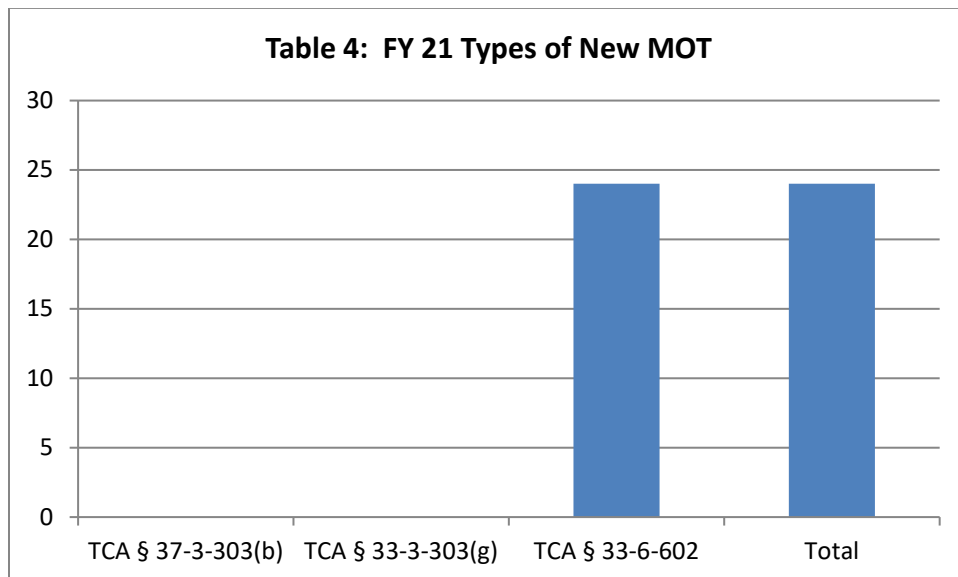
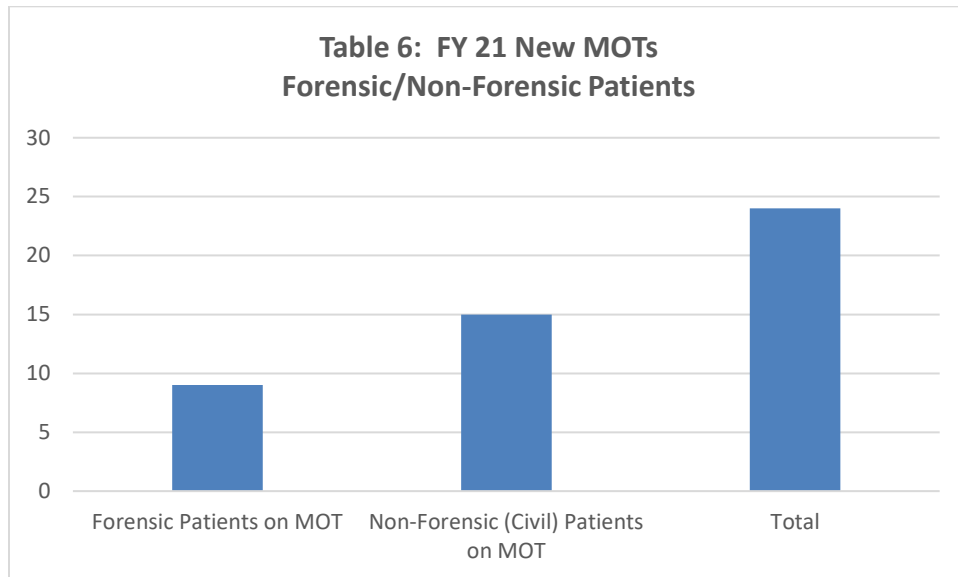


Table 5: FY 2021 Added MOTs by Month

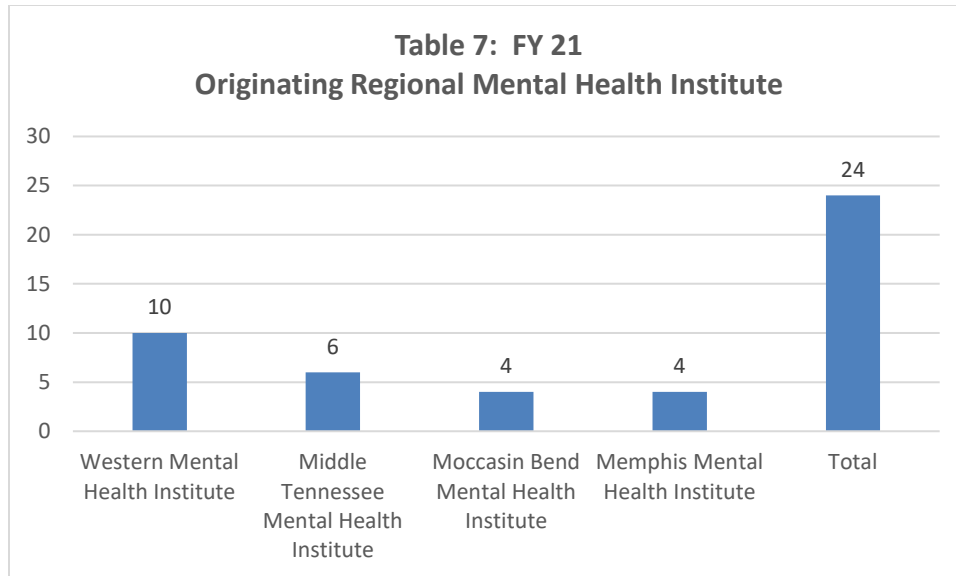
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	TOTALS
Added Total	3	3	0	1	1	3	1	2	4	0	5	1	24
303b	0	0	0	0	0	0	0	0	0	0	0	0	0
303g	0	0	0	0	0	0	0	0	0	0	0	0	0
602	3	3	0	1	1	3	1	2	4	0	5	1	24

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. Fifteen of the FY 21 new MOT cases had non-forensic legal statuses and nine had forensic legal statuses. The breakout by month, above, shows releases slowed as movement was restricted due to the pandemic, and new MOTs under the auspices of T.C.A. § 33-3-303(b) and (g) were impacted by the cancellation or reduction of court hearings.



Eight of the 24 new MOT consumers had legal charges that originated in Shelby County. Four had legal charges that originated in Davidson. Three had legal charges originating in Hamilton County. Two counties (Hardeman, Madison) had two new MOTs each. And five had legal charges originating in Carroll, Lewis, Obion, Rhea, and Williamson Counties.

Of the 24 new MOTs originating under T.C.A. § 33-6-602, ten originated at Western Mental Health Institute, six at Middle Tennessee Mental Health Institute, four at Moccasin Bend Mental Health Institute, and four at Memphis Mental Health Institute (which typically serves only acute forensic cases).



Terminations

In FY 2021, there were 35 MOT consumers whose MOT services were terminated. Seven of these were terminated due to the death of the consumer by natural causes. Fifteen others had their MOT terminated by decision of the MOT agency’s Treatment Team or by court order. Eight of the consumers had MOTs that were not renewed by their MOT agencies, so their MOT was allowed to lapse. Five of the consumers left their housing without permission and the agency could not locate them.

Of the 35 consumers whose MOT were terminated or lapsed, one received MOT services under the auspices of T.C.A. § 33-7-303(g), seven received MOT services under the auspices of T.C.A. § 33-7-303(b), and 27 received MOT services under the auspices of T.C.A. § 33-6-602.

**Table 8: FY 2021 MOTs Terminated or Lapsed
By Type**

T.C.A. § 33-7-303(g)	TCA § 33-7-303(b)	TCA § 33-6-602
1	7	27

Table 9: FY 2021 Terminated MOTs by Month

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	TOTALS
Terminated Total	0	3	8	2	0	2	5	0	8	2	1	3	35
303b	0	0	1	0	0	1	1	0	1	2	0	1	7
303g	0	0	0	0	0	0	0	1	0	0	0	0	1
602	0	3	7	2	0	1	4	0	7	0	1	2	27

The length of MOT service of those 35 consumers whose MOT was terminated by the MOT agency, death, or by court order ranged from nine months to over 34 years, as outlined below:

**Table 10: FY 2021 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
4	8	6	7	10

As noted above, seven consumers died of natural causes while on active MOT in FY 21. Three of the deceased consumers were receiving MOT services under TCA § 33-6-602 and four were 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, three under TCA § 33-7-303(b), and one under TCA § 33-7-303(g).

The most common reason for a MOT to be terminated was that the person had successfully adjusted to the community and no longer needed MOT. Six individuals were doing well on their MOT and no longer needed a legal obligation under MOT to remain compliant, and the MOT agencies for eight individuals allowed their MOTs to lapse due to compliance. Four MOTs were terminated by court order, and five MOTs were terminated after the consumer eloped and could not be located. Two of the consumers were not compliant even with a MOT obligation, so the agency chose to terminate his contract based on their lack of compliance. One individual transferred to a new mental health provider who did not provide MOT services. One consumer entered a nursing home, and one was hospitalized in a regional mental health institute on a long-term basis. As mentioned earlier, seven individuals were deceased.

**Table 11: FY 2021 MOT Terminations
By Reason**

MOT lapsed due to no longer needed	Deceased	MOT no longer necessary for compliance	Terminated following elopement or loss of contact with consumer	Terminated by court order	Not compliant even with a legal obligation	Entered nursing home	New provider that doesn't accept MOT	Long-term hospitalization
8 (22%)	7 (20%)	6 (17%)	5 (14%)	4 (11%)	2 (6%)	1 (3%)	1 (3%)	1 (3%)

Only 17 of the 31 MOT agencies that were active in FY 2021 elected to terminate MOT services to a consumer.

Table 12: FY 2021 MOT Terminations By Community MOT Agency

Agency Name	Number of Terminations	Total Number of Consumers in MOT Service June 30, 2021
A Plus Care Solutions	1	1
Alliance Health Services	3	108
Cherokee	1	1
CMI Healthcare Services	4	29
Generations	4	37
Helen Ross McNabb	1	15
Hometown Medical Services	3	9
LifeCare	2	0
Memphis Health Care	1	0
Omni Community Health	2	0
Pathways Community Mental Health	1	12
Quinco	1	6
Ridgeview	2	10
Springwood Community Health	1	0
Support Solutions	1	2
Tennessee Voices	3	9
Veterans Administration Medical Center Memphis	4	5
Absolute Care	0	5
Centerstone	0	30
Elam Mental Health Center	0	2
Extended Family Care	0	4
Frontier	0	2
Harbert Hills Nursing Home	0	1
HealthQuest	0	1
Loving Arms	0	1
Mental Health Cooperative	0	21
Pine Meadows Healthcare & Rehabilitation	0	1
Pleasant View Health Care	0	1
Professional Care Services of West TN	0	6
Project Transition	0	1
Volunteer	0	29
Total	35	349

MOT Agencies

Thirty-one separate community agencies or private providers provided MOT services during FY 2021. Twenty-one agencies are traditional community mental health centers. Four 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. Three providers are individuals in private practice who provide contracted services to housing agencies. The final provider is the Memphis Veterans Administration Medical Center, which only accepts veterans with specific qualifications.

Active MOTs

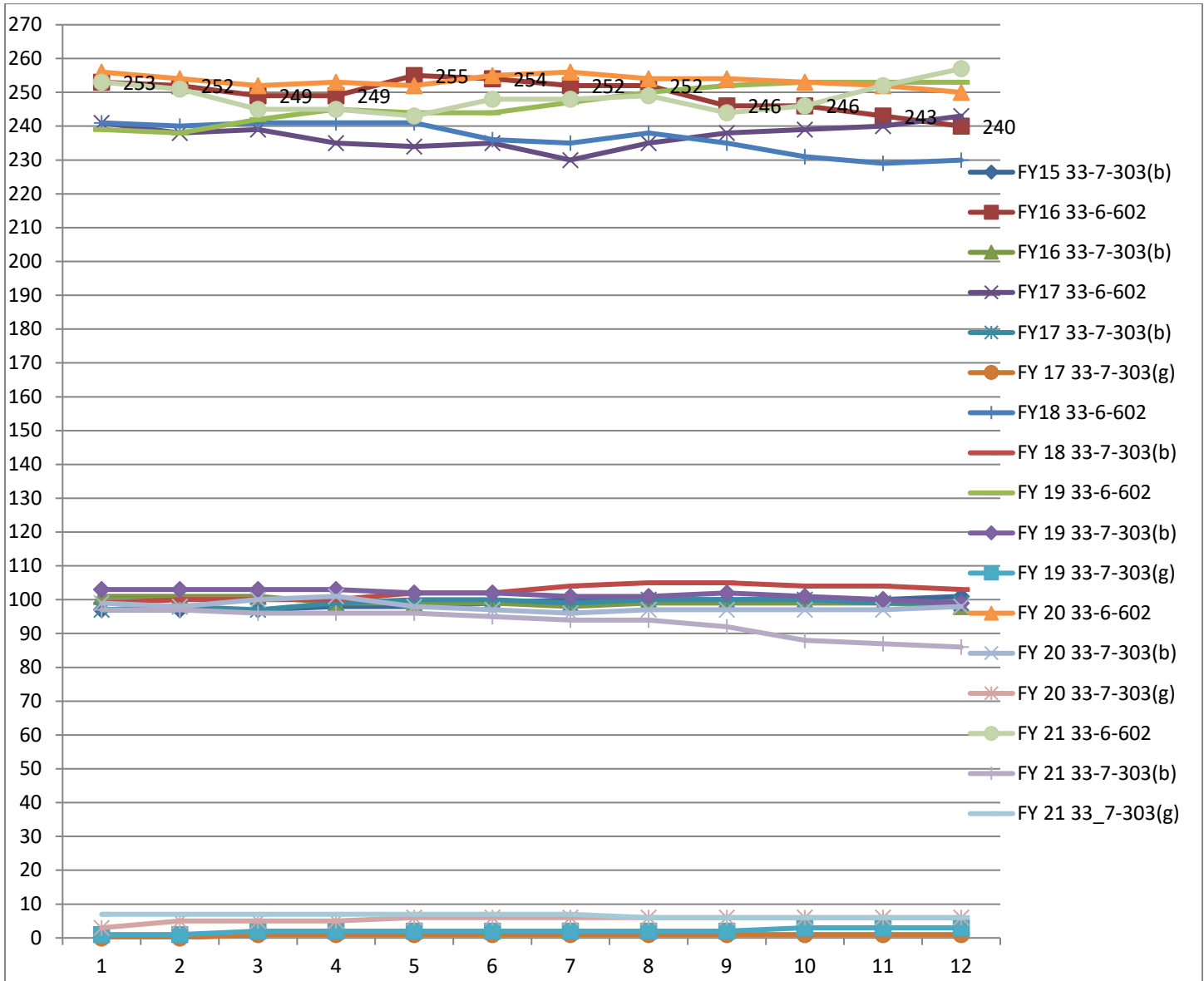
The total number of active MOTs changes monthly as new MOTs are originated and active MOTs are terminated.

Table 13: FY 2015, FY 2016, FY 2017, FY 2018, FY 2019, FY 2020, FY 2021 Monthly MOTs

	FY 15 602	FY 15 303b	FY 16 602	FY 16 303b	FY 17 602	FY 17 303b	FY 18 602	FY 18 303b	FY 18 303g	FY 19 602	FY 19 303b	FY 19 303g	FY 20 602	FY 20 303b	FY 20 303g	FY 21 602	FY 21 303b	FY 21 303g
July	245	97	253	101	241	97	241	99	0	239	103	1	256	99	3	284	93	7
August	245	97	252	101	238	98	240	100	0	238	103	1	254	98	5	284	93	7
September	247	97	249	101	239	97	241	100	1	242	103	2	252	100	5	281	92	7
October	250	98	249	99	235	99	241	100	1	245	103	2	253	101	5	274	92	7
November	248	98	255	99	234	100	241	102	1	244	102	2	252	98	6	272	92	7
December	247	99	254	99	235	100	236	102	1	244	102	2	255	97	6	271	91	7
January	248	100	252	98	230	99	235	104	1	247	101	2	256	96	6	267	90	7
February	246	100	252	99	235	100	238	105	1	250	101	2	254	97	6	267	90	6
March	245	100	246	99	238	100	235	105	1	252	102	2	254	97	6	260	89	6
April	250	100	246	99	239	100	231	104	1	253	101	3	253	97	6	260	87	6
May	257	100	243	99	240	99	229	104	1	253	100	3	252	97	6	259	87	6
June	256	101	240	98	243	99	230	103	1	253	99	3	250	98	6	257	86	6

In FY 21 the number of MOTs under TCA § 33-6-602 showed some decline as they decreased from a high of 284 in July, 2020 to a low of 257 in June, 2021. MOTs under TCA § 37-3-303(b) showed some decrease as they decreased from a high of 93 to a low of 86. There was one terminated MOT under TCA 33-7-303(g) this year reducing the total to six.

Table 14: FY 2015, FY 2016, FY 2017, FY 2018, FY 2019, FY 2020, FY 2021 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 returned to the hospital from which they were released. 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. Those cases may only be hospitalized through a new involuntary commitment procedure.

During FY 2021, a total of 27 new Affidavits of Non-Compliance were filed, however one individual had affidavits filed twice, so 26 individuals were involved. This was a noticeable decrease from the 42 Affidavits of Non-Compliance filed in FY 2020. At the end of FY 21 there were 349 individuals on MOT; 27 individuals with non-compliance affidavits is 8% of the total. The majority of the non-compliant MOT consumers had legal charges that originated in Shelby County, which also had 54% of the total number of MOTs.

Table 15: FY 21 County of Original Legal Charge, Non-Compliant MOTs

Originating County	Number
Shelby	18
Davidson	3
Madison	2
Dyer	1
Roane	1
Williamson	1
Total	26

Of the twenty-six non-compliant consumers, 22 (85%) had MOT under the auspices of T.C.A. § 33-6-602, and four (15%) under the auspices of T.C.A. § 33-7-303(b). That distribution is fairly similar to the overall distribution of MOTs under 33-6-602 (73%) and 33-7-303(b) & (g) (27%), suggesting that a consumer is no more likely to be considered non-compliant simply because of the type of MOT.

Table 16: FY 21 Type of Non-Compliant MOT Consumers

Type of MOT	Number
T.C.A. § 33-6-602	22
T.C.A. § 33-7-303(b)	4
Total	26

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 who were involuntarily committed to a RMHI following an emergency hospitalization. The third largest group is those committed to a RMHI following an adjudication of NGRI on at least one felony charge.

**Table 17: FY 21 Discharge Legal Status Code
Non-Compliant Consumers**

Discharge Legal Status Code	Number
Criminal Charges Dropped With Civil Commitment	15
Involuntary Civil Commitment	5
Commitment after NGRI; Includes at Least One Felony Charge	4
Unknown legal status code due to age of MOT and unavailability of records	1
303(b) after Outpatient Evaluation (since 7/1/2009)	1
Total	26

Twelve consumers are awaiting their MOT non-compliance hearing. This is a higher number than usual, but courts have had abbreviated schedules March-June of 2020 and most of 2021 due to COVID-19.

After an Affidavit of Non-Compliance was filed, six of the non-compliant MOT consumers were subsequently hospitalized by court order.

Three consumers did not appear at their non-compliance hearings, and warrants were issued by the court. For one other, at the non-compliance hearing the court ordered a forensic evaluation under T.C.A. § 33-7-301(a).

Two consumers became compliant during the non-compliance procedures and their court hearings were cancelled. One consumer became compliant and was at his request transferred to another agency which did not accept MOTs, thus his MOT was terminated.

One consumer is in jail awaiting a hearing on charges unrelated to his MOT non-compliance.

Table 18: FY 21 Outcome of Non-Compliance Affidavit

Awaiting non-compliance hearing	12
Hospitalized for non-compliance or as emergency	6
Warrant issued when consumer did not appear for hearing	3
Consumer became compliant prior to court hearing	2
MOT terminated by court or by agency	1
Referred for forensic evaluation under T.C.A. § 33-7-301(a)	1
In jail awaiting hearing on unrelated charges	1
Total	26

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.

Not quite half (13 of 31) MOT agencies or independent practitioners providing compliance ratings used the numeric scoring system. Some of these fourteen 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 fractions of numbers to express variance in compliance. Renewals/reviews were due every six months, so each consumer who was rated would have been rated twice yearly.

Table 19: FY 2021 Numeric Compliance Ratings

FY 2019 Compliance Ratings	July to December 2018	January to June 2019	July to December 2020	January to June 2020	July to December 2020	January to June 2021
0*	5	3	2	0	3	0
1	12	12	12	12	16	14
1.1 to 1.69	14	17	16	17	15	23
1.70 to 1.99	9	9	4	3	4	3
2	90	86	81	69	74	72
Total Rated	130	127	115	101	112	112
Total Not Rated	225	228	191	196	237	237

*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 2021 Types of Original Legal Charges by Frequency

Charge(s)	Number of Occurrences
Aggravated Assault (felony)	94
None	61
Simple Assault (misdemeanor)	50
Theft	35
Vandalism/Trespassing/Nuisance	19
Murder	18
Attempted Murder	17
Sex Offense	16
Arson	10
Weapons Offenses	9
Escape/Failure to Comply/Obstruction of Justice	9
Robbery	5
Kidnapping	5
Obstruction of Justice	1
Total	349

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 (i.e., first degree murder) due to intellectual disability (the latter circumstance has not occurred in many years). 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 34 defendants with a developmental disability ordered to participate in MOT for incompetent defendants in FY 21. Eleven have completed their competency training. TDMHSAS is awaiting notification of completion for the 23 others who were still receiving training at the end of FY 21.

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 21 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 21 no consumers were discharged under the new law, leaving the total number of persons on MOT under the auspices of T.C.A. § 33-7-303(g) at six. At this point other resources have been available to meet the treatment and housing needs of these consumers.