

FY 2023
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 2023 (July 1, 2022-June 30, 2023) 23 separate providers had clients subject to MOT, most of which were traditional community mental health agencies, but also included three private practitioners and the Veteran's Administration. In previous fiscal years furloughs and discharges were occasionally paused at the regional mental health institutes in response to the coronavirus pandemic. As an ongoing consequence there were more MOT cases that ended in termination (48) than the number of new MOT cases that were added (10). At year's end there were a total of 283 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 with an MOT obligation after their charges were retired. Individuals who were committed to a Regional Mental Health Institute under Title 33, Chapter 6, Part 5 for treatment who had not been charged with a criminal offense were also subject to release on MOT at discharge.

Many (28 of 48) of the individuals whose MOT obligation was terminated during FY 23 had their MOT terminated because they no longer required the legal obligation or whose circumstances changed so that it no longer applied. Seven individuals died during the fiscal year. Seven were no longer found to need MOT following a subsequent rehospitalization and were discharged by the hospital without MOT. Six were terminated by the MOT agency as they were compliant and no longer felt to need MOT. And four of the lapsed individuals had their MOT lapse as the agencies felt they no longer needed MOT to maintain their compliance. Two consumers were sufficiently stable to be allowed to relocate to other states without MOT. Two individuals whose MOT was terminated by court order no longer needed MOT. The length of time on MOT for those whose MOT was terminated during FY 23 ranged from four months to over 22 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 23.

**FY 2023
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

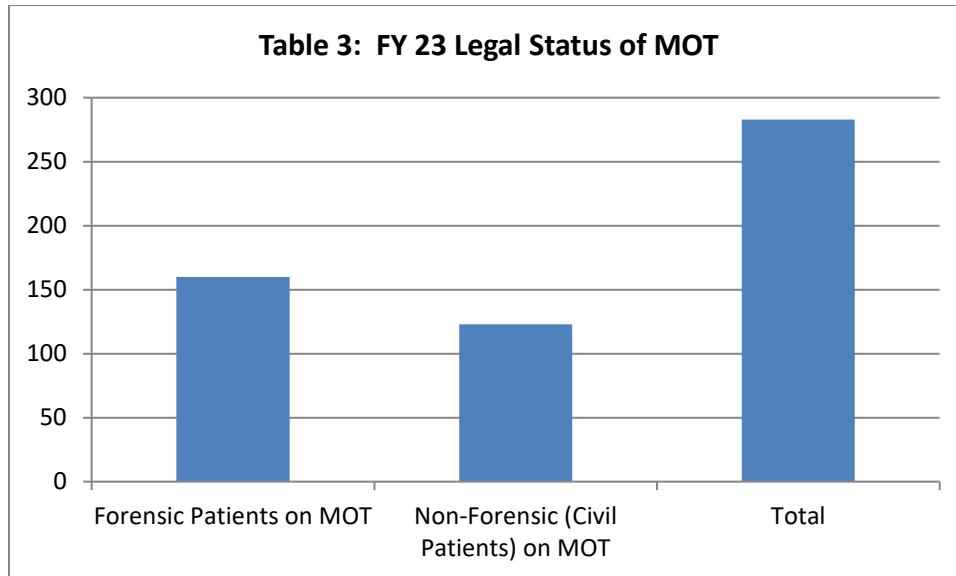
**Table 2: Total MOTs
On June 30, 2023**

Type of MOT	Active MOTs	Suspended MOTs Due to Hospitalization	Total MOTs
303b	69	3	72
303g	8	0	8
602	171	25	196
Both 303b and 602	6	1	7
Totals	254	29	283

Table 2, above, shows that on June 30, 2023, 10.25% of patients on MOT had their MOT suspended because they were hospitalized. The majority of the 283 total MOTs originated in Shelby County courts which oversee a total of 146 MOTs (a large number but a significant reduction from 190 in FY 21 and 160 in FY 22). Thirty-nine MOTs originated in Davidson County, 18 in Hamilton, 11 in Madison and eight in Knox. Five in Henderson County. Four in Lewis, Rutherford, and in Sumner Counties. Hardeman and Williamson Counties had three MOTs. Eight counties (Anderson, Gibson, Hickman, Lauderdale, Obion, Robertson, Scott and Tipton) have two MOTs each. Twenty-two counties have only one MOT (Bedford, Blount, Bradley, Campbell, Coffee, Crockett, Cumberland, Dyer, Fayette, Giles, Grundy, Hawkins, Marion, Maury, McMinn, Monroe, Overton, Rhea, Roane, Sullivan, Union, and Weakley).

In the following charts in this report, the six 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 23 there were 160 forensic patients on MOT and 123 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 2023, 10 new MOT cases were initiated. Of these cases, seven were initiated under TCA § 33-6-602, two under TCA § 33-7-303b, and one under TCA § 33-7-303g. This is a continuing decrease from FY 22 in which 17 new MOT cases were initiated, FY 21 in which 24 new MOT cases were initiated, 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 (and therefore discharges) during the pandemic during FYs 22 and 21 and the last three months of FY 20, or because the courts suspended hearings periodically during the same period.

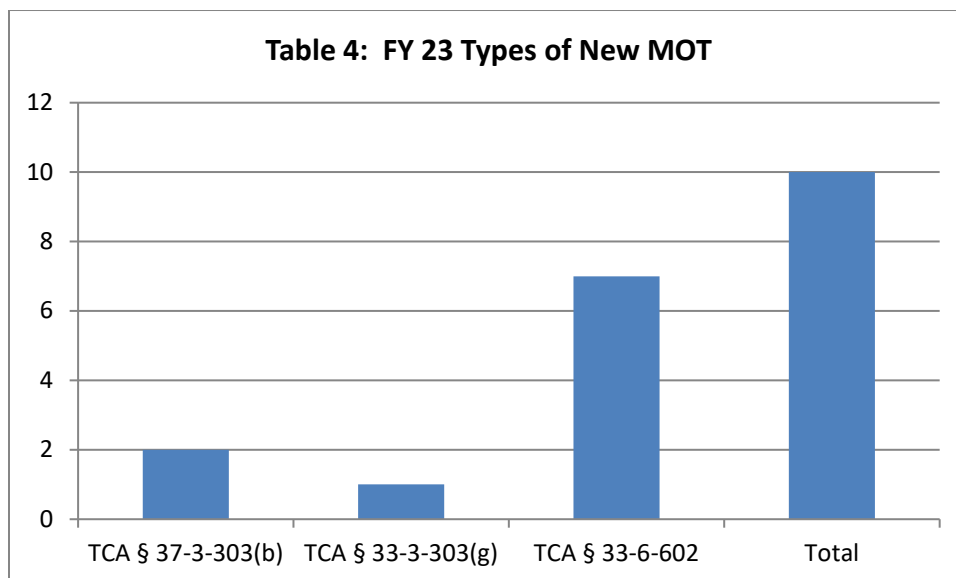
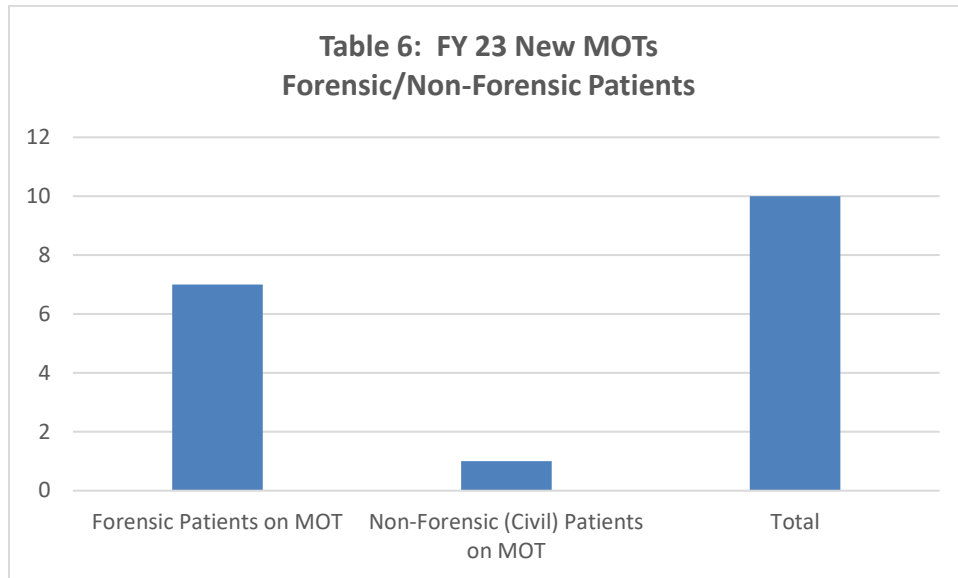


Table 5: FY 2023 Added MOTs by Month

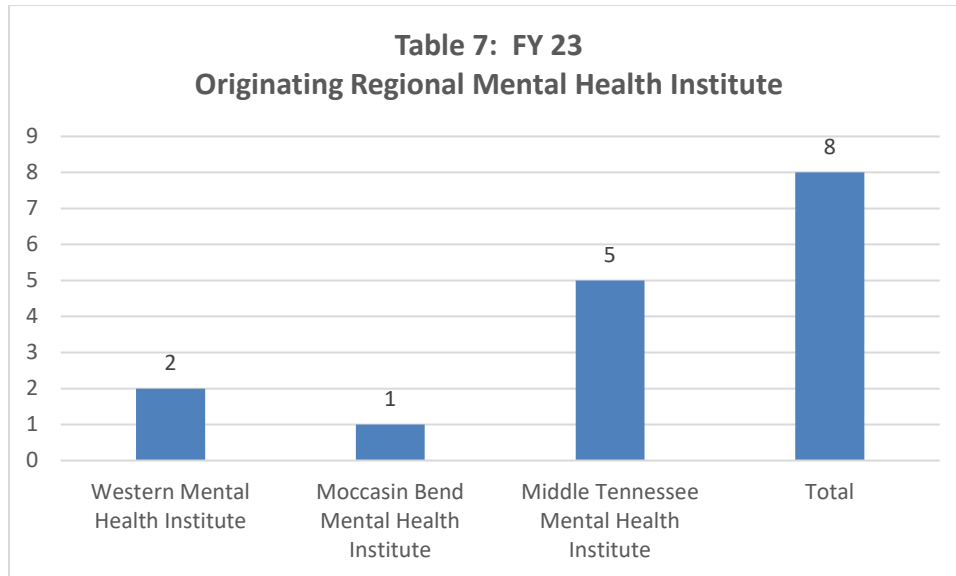
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	TOTALS
Added Total	2	2	1	0	1	1	0	0	1	1	1	0	10
303b	1	0	0	0	0	0	0	0	0	1	0	0	2
303g	0	1	0	0	0	0	0	0	0	0	0	0	1
602	1	1	1	0	1	1	0	0	1	0	1	0	7

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. Only one of the FY 23 new MOT cases had a non-forensic legal status and nine had forensic legal statuses. The breakout by month, above, shows releases continued to be slow as movement was restricted due to the continuing effects of the pandemic, and new MOTs under the auspices of T.C.A. § 33-3-303(b) and (g) were impacted by the previous cancellation or reduction of court hearings.



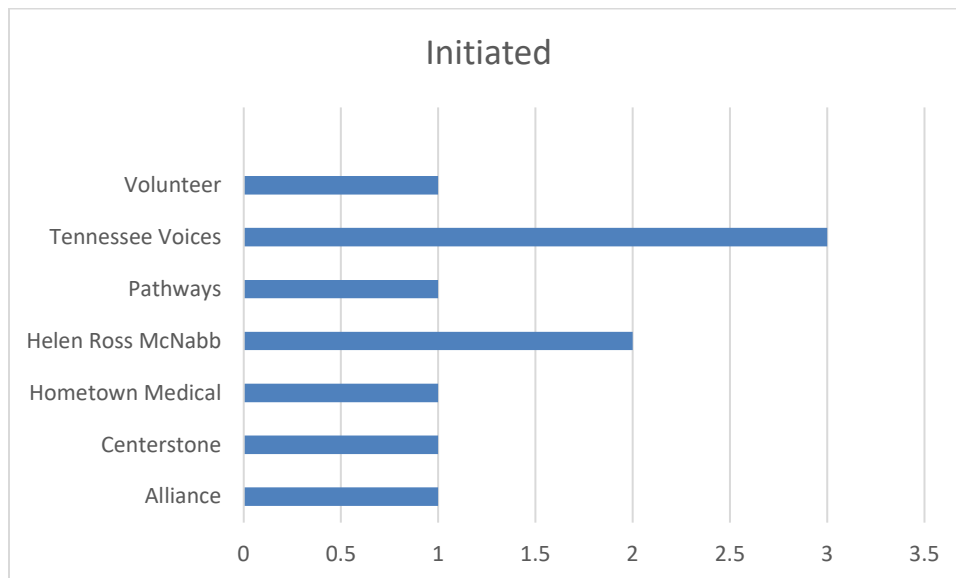
Four of the 10 new MOT consumers had legal charges that originated in Davidson County. The remaining six MOT consumers had legal charges that originated in Hamilton, Henderson, Knox, Madison, Shelby, and Williamson counties.

Of the eight new MOTs originating under T.C.A. § 33-6-602, five originated at Middle Tennessee Mental Health Institute, two at Western Mental Health Institute, and one at Moccasin Bend Mental Health Institute.



Below is a table of the mental health agencies or providers which accepted the ten new MOT consumers.

**Table 8: FY 23
MOT Agencies Serving New MOT Consumers**



Terminations

In FY 2023, there were 48 MOT consumers whose MOT services were terminated, similar to FY 22 when 47 MOT consumers had services terminated but a substantial increase from FY 21 when 35 MOT consumers had services terminated. Seven of these were terminated in FY 23 due to the death of the consumer by natural causes. Seven consumers had MOT that was allowed to lapse by their MOT agency. Five were terminated by court order. Four were terminated at the time of a hospital discharge by the regional mental health institute when their Treatment Teams decided that they no longer needed MOT services.

The twenty-five remaining consumers had their MOT terminated by decision of the MOT agencies' Treatment Team. Of these 25 individuals six of them were complying with their MOT contracts and no longer needed MOT services to remain in compliance. The agencies lost contact with five consumers. Five more individuals acquired new charges and were incarcerated for a period long enough that the agency chose to terminate their MOT. Four individuals suffered worsening physical health and needed to enter a nursing home or receive CHOICES services in a family member's home and due to their health status were not felt to benefit from MOT. Two individuals moved to another state with the approval of their MOT agency. Two more individuals were non-compliant and could not be brought into compliance.

Of the 48 consumers whose MOT were terminated or lapsed, 11 received MOT services under the auspices of T.C.A. § 33-7-303(b), and 37 received MOT services under the auspices of T.C.A. § 33-6-602.

**Table 9: FY 2023 MOTs Terminated or Lapsed
By Type**

T.C.A. § 33-7-303(g)	TCA § 33-7-303(b)	TCA § 33-6-602
0	11	37

Table 10: FY 2023 Terminated MOTs by Month

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	TOTALS
Terminated Total	4	6	8	3	5	3	2	3	0	2	6	6	48
303b	0	2	2	1	0	2	0	0	0	1	2	1	11
303g	0	0	0	0	0	0	0	0	0	0	0	0	0
602	4	4	6	2	5	1	2	3	0	1	4	5	37

The length of MOT service of those 48 consumers whose MOT was terminated ranged from four months to over 22 years, as outlined below:

**Table 11: FY 2023 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
3	5	15	12	13

As noted above, seven consumers died of natural causes while on active MOT in FY 23. One of the deceased consumers was receiving MOT services under TCA § 33-6-602 and six were receiving services under TCA § 33-7-303(b). Of the remaining 41 consumers whose MOT was terminated, 36 were receiving MOT services under TCA § 33-6-602 and five under TCA § 33-7-303(b).

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. Twenty-one of the 48 individuals had their MOT terminated for this reason. Seven were found to no longer need MOT following a subsequent rehospitalization and were discharged by the hospital without MOT. Six were terminated by the MOT agency as they were compliant and no longer felt to need MOT. And four of the lapsed individuals had their MOT lapse as the agencies felt they no longer needed MOT to maintain their compliance. Two consumers were sufficiently stable to be allowed to relocate to other states without MOT. Two individuals whose MOT was terminated by court order no longer needed MOT.

**Table 12: FY 2023 MOT Terminations
By Reason**

	Lapsed	Terminated by Court	Terminated by Death	Terminated by MOT	Terminated by RMHI	Total Cases
Absolute Care				2		2
Alliance Frayser			1	7	1	9
Alliance Southeast				4	1	5
Centerstone			1	3		4
CMI Health		1				1
Generations-East				2		2
Generations-West					1	1
Hometown Medical	3					3
HRM-Chatt			1	2		3
HRM-Knox			1			1
Loving Arms	1					1
Meharry			1			1
MHC				2		2
Pathways		1	1	2		4
Quinco	1					1
Ridgeview Harrim		1	1			2
Ridgeview Oneid		1				1
Support Solutions	1				1	2
Tenn Voices	1			1		2
Volunteer		1				1
Total	7	5	7	25	4	48

Table 13: FY 2023 MOT Terminations By Community MOT Agency

Agency Name	Number of Terminations	Total Number of Consumers in MOT Service June 30, 2023
Absolute Care	2	4
Alliance Health Services (Frayser and Southeast locations)	14	74
Centerstone	4	27
CMI Healthcare Services	1	24
Generations (east and west locations)	3	35
Helen Ross McNabb (Chattanooga and Knoxville locations)	4	13
Hometown Medical Services	3	9
Loving Arms	1	0
Meharry (Elam Mental Health Center)	1	0
Mental Health Coop	2	21
Pathways Community Mental Health	4	13
Quinco	1	4
Ridgeview (Harriman and Oneida locations)	3	3
Support Solutions	2	1
Tennessee Voices	2	8
Volunteer	1	27
Cherokee	0	1
Extended Family Care	0	2
Harbert Hills Nursing Home	0	1
HealthQuest	0	1
Professional Care Services of West TN	0	7
Project Transition	0	1
Ridgeview (Oak Ridge location)	0	3
Veterans Administration Medical Center Memphis	0	4
Total	48	283

MOT Agencies

Twenty-three separate community agencies or private providers provided MOT services during FY 2023. Fourteen agencies are traditional community mental health centers. Three providers are individuals in private practice who provide contracted services to housing agencies. Two agencies are contracted to

provide services through the Department of Intellectual and Developmental Disabilities, which only accepts consumers with intellectual disabilities. One provider is a nursing home. One provider is a medical group. One provider is a housing and recovery program. 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 initiated and active MOTs are terminated.

Table 14: FY 2015, FY 2016, FY 2017, FY 2018, FY 2019, FY 2020, FY 2021, FY 2022, FY 2023 Monthly MOTs

	FY15 602	FY15 303b	FY16 602	FY16 303b	FY17 602	FY17 303b	FY18 602	FY18 303b	FY19 602	FY19 303b	FY20 602	FY20 303b	FY21 602	FY21 303b	FY22 602	FY22 303b	FY22 602	FY22 303b
July	245	97	253	101	241	97	241	99	239	103	256	99	284	93	249	89	222	84
August	245	97	252	101	238	98	240	100	238	103	254	98	284	93	254	89	216	88
September	247	97	249	101	239	97	241	100	242	103	252	100	281	92	251	89	211	86
October	250	98	249	99	235	99	241	100	245	103	253	101	274	92	250	88	210	84
November	248	98	255	99	234	100	241	102	244	102	252	98	272	92	246	88	206	84
December	247	99	254	99	235	100	236	102	244	102	255	97	271	91	234	87	207	82
January	248	100	252	98	230	99	235	104	247	101	256	96	267	90	230	84	205	82
February	246	100	252	99	235	100	238	105	250	101	254	97	267	90	230	84	204	82
March	245	100	246	99	238	100	235	105	252	102	254	97	260	89	229	84	203	82
April	250	100	246	99	239	100	231	104	253	101	253	97	260	87	225	84	204	82
May	257	100	243	99	240	99	229	104	253	100	252	97	259	87	221	84	201	80
June	256	101	240	98	243	99	230	103	253	99	250	98	257	86	221	86	197	79

	FY 18 303g	FY 19 303g	FY 20 303g	FY 21 303g	FY 22 303g	FY 23 303g
July	0	1	3	7	6	1
August	0	1	5	7	6	0
September	1	2	5	7	6	0
October	1	2	5	7	6	0
November	1	2	6	7	6	0

December	1	2	6	7	7	0
January	1	2	6	7	7	0
February	1	2	6	6	7	0
March	1	2	6	6	7	0
April	1	3	6	6	7	0
May	1	3	6	6	7	0
June	1	3	6	6	7	8

In FY 23 the number of MOTs under TCA § 33-6-602 showed significant decline as they decreased from a high of 222 in July, 2022 to a low of 197 in June, 2023. MOTs under TCA § 37-3-303(b) also decreased from a high of 84 to a low of 79. There was one added MOT under TCA 33-7-303(g) this year increasing the total to eight.

Affidavits of Non-Compliance

All MOT consumers sign 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 had been 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 2023, a total of 18 new Affidavits of Non-Compliance were filed, and twelve others were continued from the previous fiscal year awaiting resolution, for a total of 30. At the end of the year only 17 were still unresolved. The 18 new Affidavits is a similar frequency as the 19 Affidavits of Non-Compliance filed in FY 22, but substantially fewer than the 27 Affidavits of Non-Compliance filed in FY 21 and a noticeable decrease from the 42 Affidavits of Non-Compliance filed in FY 2020.

At the end of FY 23 there were 283 individuals on MOT and 17 individuals with non-compliance affidavits still pending resolution, which is 6% of the total.

Table 15: FY 23 Community Agencies Filing Affidavits of Non-Compliance

Agency	Non-Compliance Affidavits Filed
Alliance	4
Centerstone	2
Generations	4
Helen Ross McNabb	2
Hometown Medical Services	1
Mental Health Coop	3
Pathways	4
Ridgeview	2
Tennessee Voices	1
Veterans Administration	1
Volunteer	6
Total	30

Eight of the 12 Affidavits of Non-Compliance that were carried over from FY 22 to FY 23 originated under the auspices of T.C.A. § 33-7-303(b). This type of MOT does not provide the option of being re-hospitalized in the originating regional mental health institute but rather a penalty of contempt of court. One of the 12 Affidavits is a type of MOT that originated under the auspices of T.C.A. § 33-7-303(g) in the community which also does not allow for rehospitalization of the consumer. So nine of the 12 Affidavits that were carried over to the new fiscal year only provided for incarceration as a means of bringing the consumer into compliance.

Table 16: FY 23 Affidavits of Non-Compliance Continuing from FY 22 to FY 23 by Type of MOT

T.C.A. § 33-7-303(b)	TCA § 33-6-602	TCA § 33-7-303(g)
8	3	1

Table 17: Affidavits of Non-Compliance Continuing from FY 22 to FY 23 by County of Original Legal Charge

County	Number
Hamilton	3
Shelby	3
Hardeman	1
Madison	1
Monroe	1

Roane	1
Rutherford	1
Williamson	1
Total	12

For the year FY 23 Shelby County had the greatest number of non-compliant MOT consumers (nine) with the next highest number originating in Hamilton County. Shelby County also had the greatest number of MOT clients (51%) of the total number of MOTs.

Table 18: FY 23 County of Original Legal Charge, Non-Compliant MOTs

Originating County	Number
Shelby	9
Hamilton	5
Davidson	4
Madison	2
Gibson	1
Grundy	1
Hardeman	1
Henderson	1
Lauderdale	1
Madison	1
Monroe	1
Roane	1
Rutherford	1
Williamson	1
Total	30

Of the seventeen non-compliant consumers remaining active at the end of FY 23, 8 (47%) had MOT under the auspices of T.C.A. § 33-6-602, and nine (53%) under the auspices of T.C.A. § 33-7-303(b) or (g).

Table 19: FY 23 Type of Non-Compliant MOT Consumers at End of Fiscal Year

Type of MOT	Number
T.C.A. § 33-6-602	8
T.C.A. § 33-7-303(b)	8
T.C.A. § 33-7-303(g)	1
Total	17

The majority of non-compliant consumers were those placed on MOT following adjudication as NGRI but who were not hospitalized. The second largest group is those committed to a RMHI following an

adjudication of NGRI on at least one felony charge. The third largest category 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). And the fourth group is non-compliant consumers who were involuntarily committed to a RMHI following an emergency hospitalization with no criminal charges.

**Table 20: FY 23 Discharge Legal Status Code
Non-Compliant Consumers**

Discharge Legal Status Code	Number
303(b) or (g) after Outpatient Evaluation (since 7/1/2009)	13
Commitment after NGRI; Includes at Least One Felony Charge	9
Criminal Charges Dropped With Civil Commitment	6
Involuntary Civil Commitment	2
Total	30

Nine consumers were awaiting their MOT non-compliance hearing at the end of FY 23.

Five consumers became compliant during the non-compliance procedures and their court hearings were cancelled.

After an Affidavit of Non-Compliance was filed, five of the non-compliant MOT consumers were subsequently hospitalized. Four were returned to their original regional mental health institutes following a hearing on their non-compliance. Another was hospitalized by court order for treatment under the auspices of TCA § 33-7-301(b) related to new criminal charges.

Four consumers were in jail. One was in jail awaiting hearings on charges unrelated to his MOT non-compliance and the other three had charges related to their MOT non-compliance as well as new charges.

Three consumers had their MOTs terminated prior to their non-compliance hearings as two could not be located for over a year and the other was sentenced to a lengthy jail term on new criminal charges.

Two consumers did not appear at their non-compliance hearings, and warrants were issued by the court. One consumer has moved out of state without permission.

The final consumer's MOT was terminated by his death.

Table 21: FY 23 Outcome of Non-Compliance Affidavits

Status	Number
Awaiting non-compliance hearing	9
Consumer became compliant prior to court hearing	5
Hospitalized for non-compliance or further treatment.	5
In jail awaiting hearing on unrelated charges or non-compliance	4
MOT terminated by court or by terminated or allowed to lapse by the agency	3
Warrant issued when consumer did not appear for hearing	2
Moved out of state without permission	1
Deceased	1
Total	30

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.

Slightly more than half (12 of 23) MOT agencies or independent practitioners providing compliance ratings used the numeric scoring system. Some of these twelve 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 22: FY 2023 Numeric Compliance Ratings

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	July to December 2021	January to June 2022	July to December 2022	January to June 2023
0*	5	3	2	0	3	0	0	0	4	3
1	12	12	12	12	16	14	17	12	9	7
1.1 to 1.69	14	17	16	17	15	23	8	8	8	7
1.70 to 1.99	9	9	4	3	4	3	9	10	7	4
2	90	86	81	69	74	72	70	57	61	68
Total Rated	130	127	115	101	112	112	104	87	88	88
Total Not Rated	225	228	191	196	237	237	210	227	168	163

*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 24 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 23: FY 2023 Types of Original Legal Charges by Frequency

Charge(s)	Number of Occurrences
Aggravated Assault (felony)	83
Simple Assault (misdemeanor)	37
None	29
Theft	24
Murder	23
Vandalism/Trespassing/Nuisance	20

Sex Offense	19
Attempted Murder	15
Arson	9
Weapons Offenses	9
Kidnapping/Attempted Kidnapping	7
Robbery	6
Escape/Failure to Comply/Obstruction of Justice	2
Total	283

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 36 defendants with a developmental disability ordered to participate in MOT for incompetent defendants in FY 22. Seventeen have completed their competency training. TDMHSAS is awaiting notification of completion for the 19 others who were still receiving training at the end of FY 23.

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 (felonies against a person), 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 23 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 23 one consumer was discharged under the new law, raising the total number of persons on MOT under the

auspices of T.C.A. § 33-7-303(g) to eight. At this point other resources have been available to meet the treatment and housing needs of these consumers.

Summary and Conclusion:

As noted in the introduction, 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 data reported here support MOT in Tennessee as an effective mechanism to support the recovery of people living with mental illness who might otherwise have difficulty actively participating in treatment in the community. In FY 23 **new** affidavits of non-compliance were filed in only **6%** of all MOT cases. When those affidavits that were carried over from FY 22 are included that percentage rises to 10%. A person living with a severe and persistent mental illness may require hospitalization even if they are compliant with treatment. Even so, as a point-in-time measure, on June 30, 2023, only 10.25% of all patients with an MOT obligation were hospitalized. Finally, the most common reason by far for the termination of the MOT is that the person had recovered to the point they no longer required a legal obligation to participate in treatment, which is the ultimate goal of MOT in Tennessee.