I Mina'trentai Ocho Na Liheslaturan Guåhan
BILL STATUS

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRED	CMTE REFERRED	FISCAL NOTES	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	NOTES
219-38 (COR)	Shelly V. Calvo	AN ACT TO *AMEND* SUBSECTION (K) OF §82A201 OF ARTICLE 2; TO *ADD* NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO *AMEND* § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025.	11/7/25 10:25 a.m. ^11/18/25 3:40 p.m.	11/20/25	Committee on Health and Veterans Affairs.	Request: 11/20/25 11/24/25	1/16/26 9:00 a.m.	3/3/26 8/17/26 As Amended. 9/18/26 Supplemental. As Amended and Substituted.	

Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

September 18, 2026

The Honorable Frank Blas Jr., Speaker
I Mina'trentai Ocho Na Liheslaturan Guåhan
163 *Hagåtña, Guåhan*
Chalan Santo Papa

VIA: **The Honorable V. Anthony Ada, Vice Speaker**
Chairperson, Committee on Rules

RE: Supplemental Committee Report on Bill No. 219-38 (COR)- As amended and substituted by the Committee on Health and Veterans Affairs - AN ACT TO AMEND SUBSECTION (K) OF § 82A201 OF ARTICLE 2; TO ADD NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO AMEND § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025."

Håfa Adai Speaker Blas,

Transmitted herewith is the Supplemental Committee Report on Bill No. 219-38 (COR)- As amended and substituted by the Committee on Health and Veterans Affairs - AN ACT TO AMEND SUBSECTION (K) OF § 82A201 OF ARTICLE 2; TO ADD NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO AMEND § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025."

Committee votes are as follows:

1 TO DO PASS
_____ TO NOT PASS
_5_ TO REPORT OUT ONLY
_____ TO ABSTAIN
_____ TO PLACE IN INACTIVE FILE

COMMITTEE ON RULES
RECEIVED:
September 18, 2026 10:03 a.m.
Marie Crisostomo

Sincerely,

Senator Sabrina Salas Matanane
Chairwoman, Committee on Health and Veterans Affairs

163 W. Chalan Santo Papa, Hagåtña, Guam 96910
(671) 989-2572 | Office.SenatorBri@guamlegislature.gov

Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

SUPPLEMENTAL COMMITTEE REPORT

Bill No. 219-38 (COR)- As amended and substituted by the Committee on Health and Veterans Affairs - AN ACT TO AMEND SUBSECTION (K) OF § 82A201 OF ARTICLE 2; TO ADD NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO AMEND § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025."

Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

September 16, 2026

To: **ALL MEMBERS**
Committee on Health and Veterans Affairs

From: **Senator Sabrina Salas Matanane**
Chairwoman, Committee on Health and Veterans Affairs

Subject: Supplemental Committee Report on Bill No. 219-38 (COR)- As amended and substituted by the Committee on Health and Veterans Affairs - AN ACT TO AMEND SUBSECTION (K) OF § 82A201 OF ARTICLE 2; TO ADD NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO AMEND § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025."

Transmitted herewith for your consideration is the Supplemental Committee Report on Bill No. 219-38 (COR)- As amended and substituted by the Committee on Health and Veterans Affairs- AN ACT TO AMEND SUBSECTION (K) OF § 82A201 OF ARTICLE 2; TO ADD NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO AMEND § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025."

- Committee Vote Sheet
- Copy of Bill No. 219-38 (COR) As introduced
- Copy of Bill No. 219-38 (COR) As amended
- Copy of Bill No. 219-38 (COR) As amended and substituted by the Committee
- Copy of Bill No. 219-38 (COR) As amended and substituted by the Committee Markup

Please take appropriate action on the attached vote sheet. Your attention to this matter is greatly appreciated. Should you have any questions or concerns, please contact the Office of Senator Sabrina Salas Matanane.

Sincerely,

Senator Sabrina Salas Matanane
Chairwoman, Committee on Health and Veterans Affairs

Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

COMMITTEE VOTE SHEET

Bill No. 219-38 (COR)- As amended and substituted by the Committee on Health and Veterans Affairs - AN ACT TO AMEND SUBSECTION (K) OF § 82A201 OF ARTICLE 2; TO ADD NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO AMEND § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025."

COMMITTEE MEMBERS	SIGNATURE AND DATE	TO DO PASS	TO NOT PASS	TO REPORT OUT ONLY	TO ABSTAIN	TO PLACE IN INACTIVE FILE
Senator Sabrina Salas Matanane Chairperson	E-vote 9.18.26			X		
Vice Speaker V. Anthony Ada Vice Chair, Committee on Health	E-VOTE 9.17.26			X		
Senator Vincent A.V. Borja Vice Chair, Committee on Veterans Affairs						
Speaker Frank F. Blas, Jr. Member	E-VOTE 9.17.26			X		
Senator Jesse A. Lujan Member						
Senator Shelly V. Calvo Member	E-VOTE 9.17.26	X				
Senator Christopher M. Duenas Member	E-VOTE 9.17.26			X		
Senator Eulogio Shawn Gumataotao Member	E-VOTE 9.17.26			X		
Senator Tina Rose Muna Barnes Member						

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THE GUAM LEGISLATURE

Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

URGENT-Request for E-Vote: Bill No. 219-38 (COR) as amended

7 messages

Office of Legislative Secretary Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>
Thu, Sep 17, 2026 at 1:49 PM

To: "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Tina Rose Muña-Barnes <senator.munabarnes@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>, Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>, Office of Senator Borja <contact@senatorvinceborja.com>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>
Bcc: Ann San Nicolas <ann.sn@guamlegislature.gov>, senator.sabrina@guamlegislature.gov, john.mafnas@guamlegislature.gov, Sergio Salas <sergio.salas@guamlegislature.gov>

:Hafa Adai Committee Members:

Please see the attached Supplemental Committee report relative to Substitute Bill NO. 219-38 (COR)- AN ACT TO AMEND SUBSECTION (K) OF § 82A201 OF ARTICLE 2; TO ADD NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO AMEND § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025."

- TO DO PASS
- TO NOT PASS
- TO REPORT OUT ONLY
- TO ABSTAIN
- TO PLACE IN INACTIVE FILE

Please submit your response **ASAP**. Your responses will be logged into the vote sheet which will be submitted as part of the final Committee Report to the Committee on Rules.

Please contact our office if you have any questions or concerns.

--

Annie San Nicolas
Administrative Officer/Committee Director

Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
***I Mina'trentai Ocho Na Liheslaturan Guåhan* | 38th Guam Legislature**
Chairperson, Committee on Health and Veterans Affairs
163 W. Chalan Santo Papa, Hagåtña, Guam 96910
office.senatorbri@guamlegislature.gov
671-989-2572

Supplemental Committee Report 219-38 - (2) copy.pdf
1347K

Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov> Thu, Sep 17, 2026 at 2:07 PM

To: Office of Legislative Secretary Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>
Cc: "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Tina Rose Muña-Barnes <senator.munabarnes@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>, Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>, Office of Senator Borja <contact@senatorvinceborja.com>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>

Hafa adai,

To do Pass

Respectfully,

Jacqueline Munoz

Office of the People | Senator Shelly V. Calvo

Majority Whip & Chairwoman

Committee on Child Welfare, Youth Affairs, Senior Citizens, Women's Affairs, Disability Services, the Arts, Culture, Historic Preservation & Hagåtña Restoration

38th Guam Legislature
163 Chalan Santo Papa, Hagåtña, Guam 96910

T +1 (671) 989-5682
E officeofsenatorshellycalvo@guamlegislature.gov

[Quoted text hidden]

Senator Chris Duenas <senator.duenas@guamlegislature.gov> Thu, Sep 17, 2026 at 2:28 PM
To: Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>
Cc: Office of Legislative Secretary Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>, "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Tina Rose Muña-Barnes <senator.munabarnes@guamlegislature.gov>, Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>, Office of Senator Borja <contact@senatorvinceborja.com>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>

To Report Out Only

Office of Senator Christopher M. Dueñas
Chairman, Committee on Finance and Government Operations
259 Martyr St., Hagatna, Guam 96910
senator.duenas@guamlegislature.gov
(671) 989-9554

[Quoted text hidden]

Vice Speaker V. Anthony Ada <vicespeakertonyada@guamlegislature.gov> Thu, Sep 17, 2026 at 3:18 PM

To: Office of Legislative Secretary Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>
Cc: "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Senator Tina Rose Muña-Barnes <senator.munabarnes@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>, Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>, Office of Senator Borja <contact@senatorvinceborja.com>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>

TO REPORT OUT ONLY

On Thu, Sep 17, 2026 at 1:50 PM Office of Legislative Secretary Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov> wrote:
[Quoted text hidden]

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Office of Vice Speaker V. Anthony Ada
38th Guam Legislature
I Mina'trentai Ocho Na Liheslaturan Guåhan
Guam Congress Building, 2nd Floor
163 Chalan Santo Papa
Hagåtña, Guam 96910
Phone: (671) 989-0855
Email: vicespeakertonyada@guamlegislature.gov

Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov> Thu, Sep 17, 2026 at 3:30 PM

To: Office of Legislative Secretary Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>
Cc: "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Tina Rose Muña-Barnes <senator.munabarnes@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>, Office of Senator Borja <contact@senatorvinceborja.com>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>

To Report Out Only

On Thu, Sep 17, 2026 at 1:50 PM Office of Legislative Secretary Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov> wrote:
[Quoted text hidden]

--

Office of Senator Eulogio Shawn Gumataotao
Chairman, Committee on Public Safety, Emergency Management, and Guam National Guard
38th Guam Legislature
120 Father Duenas Avenue Capitol Plaza Building, Suite 103, Hagåtña, Guam 96910
(671) 647-1409/1411

Speaker Frank Blas Jr. <speakerblas@guamlegislature.gov> Thu, Sep 17, 2026 at 4:32 PM

To: Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>
Cc: Office of Legislative Secretary Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>, Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Tina Rose Muña-Barnes <senator.munabarnes@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>, Office of Senator Borja <contact@senatorvinceborja.com>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>

To Report Out Only

Speaker, Frank F. Blas, Jr.

I Mina'trentai Ocho na Liheslaturan Guåhan 38th Guam Legislature

Guam Congress Building, 163 Chalan Santo Papa, Hagatña

(671)969-6456
speakerblas@guamlegislature.gov

[Quoted text hidden]

Office of Legislative Secretary Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov> Fri, Sep 18, 2026 at 9:32 AM
To: "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Tina Rose Muña-Barnes <senator.munabarnes@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>, Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>, Office of Senator Borja <contact@senatorvinceborja.com>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>

To Report Out Only.
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[Quoted text hidden]

Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

BILL NO. 219-38 (COR) — COMMITTEE FINDINGS AND RECOMMENDATIONS

I. Committee Findings

The Committee finds that Substitute **Bill No. 219-38 (COR)** is intended to strengthen Guam's Assisted Outpatient Treatment (AOT) framework under the Baby Alexa Law by allowing earlier intervention for individuals experiencing serious mental illness. The original bill proposed expanding the categories of persons who could petition for AOT and establishing procedures concerning the filing of petitions, service of notice, the right to counsel, and AOT hearings. The Committee Report reflects that the measure was intended to balance early intervention with clinical oversight, judicial review, due process, individual rights, and public safety.

The Committee further finds that testimony from the Guam Behavioral Health and Wellness Center (GBHWC) raised concerns that broadly expanding petitioning authority could generate more petitions than the existing AOT program has the resources to manage. GBHWC/JIBWICK indicated that each petition requires clinical review, psychiatric evaluation, coordination, case management, and follow-up, and recommended that any expansion be appropriately scaled to available resources or accompanied by additional staffing and resources.

The Committee also finds that the Judiciary identified the need for additional safeguards when petitioning authority is expanded to non-clinical individuals. These included standardized petitioner training, oversight of petitions, clarification of who may petition, protection against conflicts of interest, additional clinical review when an individual refuses examination, adequate notice, guaranteed counsel for indigent respondents, and clearer procedural protections.

II. Differences Between the Original and Amended Versions

Provision	Original Bill / Committee Report	Amended Bill
§ 82A201(k) – Petitioner	Expanded the categories of persons who could petition for AOT.	Narrows and restructures the petitioner categories and requires completion of standardized petitioner training. The amended language specifically identifies parents, spouses, siblings, adult children, caregivers, agency/treatment-facility directors, hospital directors, licensed mental-health providers, parole/probation officers, the Public Guardian, and qualified legal officers/attorneys.

Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

Provision	Original Bill / Committee Report	Amended Bill
§ 82A402 – Petition to Court	Established the petition process and required a clinical affirmation/affidavit from a qualified mental-health professional.	Adds an additional safeguard requiring review by a **second licensed mental-health professional** when the respondent refuses examination before the petition is filed.
§ 82A403 – Service	Established service of the petition.	Clarifies the parties who must receive notice and requires service at least **72 hours before the hearing**, subject to a knowing and voluntary waiver after consultation with counsel.
§ 82A404 – Right to Counsel	Created a right to counsel.	Strengthens the provision by requiring appointment of counsel without cost when the respondent is financially unable to obtain counsel and provides counsel sufficient time and access to relevant records.
New § 82A405 – Training and Oversight	**Not included in the original bill.**	Creates standardized training for non-clinical petitioners, certification of training, emergency-filing provisions, de-identified data collection, annual reporting, and an advisory oversight group.
New § 82A406 – Evidentiary Standard; Duration; Review; Appeal	**Not included in the original bill.**	Establishes a **clear and convincing evidence** standard, limits an initial AOT order to six months, requires review at least every 90 days, permits motions to modify or terminate, and provides an appeal mechanism.
§ 82A501 – AOT Hearing	Addressed continuances of the assisted-treatment hearing.	Substantially expands the provision to establish hearing deadlines, notice requirements, adjournments, testimony, periodic review,

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Provision	Original Bill / Committee Report	Amended Bill
		appeals/modification, and specific requirements for proceedings in the respondent's absence.

The original Committee Report Digest describes Bill No. 219-38 as amending § 82A201(k), adding §§ 82A402, 82A403 and 82A404, and amending § 82A501. The amended bill, by contrast, expressly adds **§§ 82A405 and 82A406**, demonstrating that these are new statutory provisions beyond the original bill's stated structure.

III. Committee Recommendations to Amend

Based on the testimony and the changes incorporated into the amended version, the Committee recommends that Bill No. 219-38 be amended to:

1. **Require standardized training for non-clinical petitioners** before they may file an AOT petition, with an exception for court-authorized emergency filings.
2. **Establish oversight and reporting requirements** through GBHWC, including collection of de-identified petition data, annual reporting, and an advisory oversight group.
3. **Maintain clinical safeguards** by requiring a qualified mental-health professional to support the petition and, when the respondent refuses examination, requiring review and affirmation by a second licensed mental-health professional.
4. **Strengthen due-process protections** by establishing specific service requirements and at least 72 hours' notice before the hearing, unless knowingly and voluntarily waived after consultation with counsel.
5. **Guarantee appointed counsel for indigent respondents** and provide counsel adequate time and access to relevant records.
6. **Establish a clear and convincing evidence standard** before an AOT order may be issued and require the court to determine that the treatment plan is medically appropriate, individualized, recovery-oriented, and the least restrictive available alternative.
7. **Limit the initial AOT order to six months**, require review at least every 90 days, and provide mechanisms for modification, termination, and appeal.

8. **Clarify and strengthen the in-absentia hearing provision**, requiring documented reasonable efforts to obtain the respondent's attendance and a specific finding on the record that proceeding in the respondent's absence is necessary to prevent undue delay or substantial risk of harm.

IV. Committee's Overall Finding

The Committee finds that the underlying intent of Bill No. 219-38—to facilitate earlier access to Assisted Outpatient Treatment while addressing serious mental-health needs—is supported by the public hearing record. However, the Committee further finds that the expansion of petitioning authority should be accompanied by clear clinical, procedural, judicial, and due-process safeguards.

The Committee Report expressly concludes that the bill's intent is sound but requires refinement to balance clinical safeguards with judicial protections. It identifies the need to consider program capacity, medical justification, petitioner training and oversight, notice and hearing procedures, counsel for indigent respondents, and standards of proof.

Accordingly, the Committee recommends advancing Bill No. 219-38 (COR), as amended, with the foregoing safeguards and amendments incorporated.

The Committee on Health and Veterans Affairs **hereby reports on Bill No. 219-38 (COR)- As amended and substituted by the Committee on Health and Veterans Affairs - AN ACT TO AMEND SUBSECTION (K) OF § 82A201 OF ARTICLE 2; TO ADD NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO AMEND § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA with Recommendation To Report out Only.**

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
2025 (FIRST) Regular Session

Bill No. 219-38 (COR)

Introduced by: Shelly Vargas Calvo

AN ACT TO *AMEND* SUBSECTION (K) OF §82A201 OF ARTICLE 2; TO *ADD* NEW § 82A402, § 82A403, AND § 82A404 TO ARTICLE 4; AND TO *AMEND* § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025.

BE IT ENACTED BY THE PEOPLE OF GUAM:

SECTION 1. Short Title. This Act shall be cited as the "Baby Alexya Law Reform Act of 2025."

SECTION 2. Legislative Findings and Intent. *I Liheslaturan Guåhan* affirms that Guam's Baby Alexya Law, Public Law 33-71, was enacted in 2015 to prevent violence and protect public safety by enabling Assisted Outpatient Treatment (AOT) for individuals with serious, treatable mental illnesses. Nearly a decade later, a persistent procedural gap remains in Guam's mental health framework: many individuals exhibiting clear signs of psychiatric crisis continue to enter the justice system before they are ever seen by behavioral health providers.

I Liheslaturan Guåhan notes that the current statute limits petitioning authority to the Director of the Guam Behavioral Health and Wellness Center (GBHWC), or their designee, in conjunction with the treating psychiatrist or physician, creating delays in intervention and narrowing pathways for advocacy.

Consequently, *I Liheslaturan Guåhan* acknowledges that family members, roommates, and the Public Guardian often have direct and sustained insight into a person's condition and can identify escalating behavior that warrants intervention before tragedy occurs. Similarly, legal advocates such as the Attorney General and Public Defender, along with parole and probation officers, frequently encounter individuals with untreated mental illness and are uniquely positioned to advocate for early, community-based outpatient care.

Accordingly, *I Liheslaturan Guåhan* appreciates the unique position of trusted individuals and legal officers to identify these high-risk individuals and advocate for early outpatient treatment. Involving these individuals and professionals in the petitioning process can lead to earlier intervention, reduced cycles of incarceration or hospitalization, and improved long-term outcomes for individuals and communities alike.

I Liheslaturan Guåhan further finds that jurisdictions such as California, New York, and Pennsylvania demonstrate the effectiveness of granting petitioning authority to a diverse array of stakeholders, resulting in reduced hospitalization rates, improved treatment adherence, and enhanced public safety. Specifically, New York's Kendra's Law allows trusted individuals—such as family members, licensed mental health providers, and law enforcement officers—to request the filing of AOT petitions, fostering early, community-based responses to mental health crises.

It is therefore the intent of *I Liheslaturan Guåhan* to expand the petitioning authority under Guam's Baby Alexya Law, Chapter 82A of Title 10, GGA, to include designated individuals such as adult family members, roommates, licensed

mental health professionals, agency directors, hospital administrators, legal officers, peace officers, parole and probation officers, and the Guam Public Guardian.

Furthermore, it is also the intent of *I Liheslaturan Guåhan* to ensure that all petitions filed by new authorized entities are accompanied by current psychiatric evaluations and clinical affirmations of treatment necessity, maintaining alignment with medical best practices. This safeguard fosters greater inter-agency collaboration among behavioral health professionals, legal advocates, and judicial authorities to holistically address the intersection of untreated mental illness and public safety. Thus, the process ensures that individuals are not denied potentially life-saving treatment due to procedural limitations while preserving the due process and clinical integrity of the AOT framework.

Correspondingly, *I Liheslaturan Guåhan* emphasizes the importance of a clear and structured petition filing process, including the requirement for an affirmation or affidavit of a treating professional and the conditions under which the petition can be filed. The petitioner must also provide written notice of the petition to the subject of the petition and other relevant parties. In addition, the subject of the petition shall have the right to be represented by counsel and a prompt hearing to contest the petition.

Lastly, *I Liheslaturan Guåhan* finds that enhancing judicial flexibility is essential in ensuring timely intervention. In cases where the subject of an AOT petition has received proper notice yet fails to appear despite reasonable efforts to elicit attendance, the court may proceed with the hearing in the subject's absence. Such in absentia proceedings shall be authorized only when the court finds, and sets forth on record, the factual basis for conducting the hearing without the individual present.

By creating an inclusive and responsive AOT framework that reflects the realities of Guam's justice and healthcare systems and empowers qualified

individuals to act in the interest of safety and recovery, *I Liheslaturan Guåhan* reaffirms its commitment to preventing avoidable harm, supporting vulnerable residents, and strengthening Guam's behavioral health continuum.

SECTION 3. § 82A201(k) of Article 2, Chapter 82A, Title 10, Guam Code Annotated, is hereby *amended* as follows:

"(k) Petitioner shall ~~only~~ mean t~~he Director of the Guam Behavioral Health and Wellness Center or his or her designee, in conjunction with the treating psychiatrist or physician who has examined the respondent and who *shall* file the petition~~:

~~(1) *Respondent* means the person who is the subject of a petition or certificate~~

(1) A person eighteen (18) years of age or older with whom the person who is the subject of the petition resides;

(2) A person who is the parent, spouse, or sibling or child eighteen (18) years of age or older of the person who is the subject of the petition;

(3) The director of a public or private agency, treatment facility, charitable organization, or licensed residential care facility providing mental health services to the person who is the subject of the petition in whose institution the subject of the petition resides;

(4) The director of a hospital in which the person who is the subject of the petition is hospitalized;

(5) A licensed mental health treatment provider who is either supervising the treatment of, or treating for a mental illness, the person who is the subject of the petition;

(6) A peace officer, parole officer, or probation officer assigned to supervise the person who is the subject of the petition;

(7) The Guam Public Guardian, acting pursuant to Chapter 72 of Title 15, GCA, or any other lawful appointment;

(8) A judge before whom the person who is the subject of the petition appears;

(9) The Attorney General of Guam, upon establishing probable cause that the individual poses a significant threat to public safety due to untreated mental illness; or

(10) A licensed attorney acting as a public defender, guardian ad litem, or other court-appointed legal representative, upon establishing that AOT would serve the best interests of the individual and community.

SECTION 4. A new § 82A402 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A402. Petition to the Court.

(a) A petition for an order authorizing assisted outpatient treatment (AOT) may be filed in the Superior Court of Guam.

(b) The petition shall state:

(1) each of the criteria for AOT as set forth in § 82A401 of this Chapter;

(2) facts which support the petitioner's belief that the subject of the petition meets each criterion, provided that the hearing on the petition need not be limited to the stated facts; and

(3) that the subject of the petition is present, or is reasonably believed to be present, in Guam.

(c) The petition shall include a clinical affirmation or affidavit that AOT is medically appropriate, with supporting documentation,

from a qualified mental health professional, who shall not be the petitioner, stating either that:

(1) such licensed professional has personally examined the subject of the petition no more than seven (7) days prior to the submission of the petition, recommends AOT for the subject of the petition, and is willing and able to testify at the hearing on the petition; or

(2) no more than seven (7) days prior to the filing of the petition, such licensed professional, or his or her designee, has made appropriate attempts but has not been successful in eliciting the cooperation of the subject of the petition to submit to an examination, such professional has reason to suspect that the subject of the petition meets the criteria for AOT, and such professional is willing and able to examine the subject of the petition and testify at the hearing on the petition.

SECTION 5. A new § 82A403 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A403. Service.

The petitioner shall cause written notice of the petition to be given to the subject of the petition and a copy thereof to be given personally or by mail to:

(a) the respondent;

(b) the respondent's legal guardian or conservator, if known;

(c) the qualified mental health professional whose affirmation or affidavit accompanied the petition; and

(d) the Director of the Guam Behavioral Health and Wellness Center, or his or her designee.

SECTION 6. A new § 82A404 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A404. Right to Counsel.

The subject of the petition shall have the right to be represented by counsel. In the event that the subject is unable to afford legal representation, counsel shall be appointed for them in accordance with applicable law. "

SECTION 7. § 82A501 of Article 5, Chapter 82A, Title 10, Guam Code Annotated, is hereby *amended* to read as follows:

"§ 82A501. ~~Continuance~~ Assisted Treatment Hearing.

(a) Upon receipt of the petition, the court shall fix the date for a hearing. Such date shall be no later than three (3) days from the date such petition is received by the court, excluding Saturdays, Sundays and holidays.

(b) Adjournments shall be permitted only for good cause shown. In granting adjournments, the court shall consider the need for further examination by a licensed professional or the potential need to provide assisted outpatient treatment expeditiously. The court may, for good cause, order a continuance of up to forty-eight (48) hours or, if this period ends on a Saturday, Sunday or holiday, to the end of the next day on which the court is open. The continuance shall extend the emergency treatment/observation period or any temporary treatment order until the time of the hearing.

(c) The court shall cause the subject of the petition, any other person receiving notice as set forth in § 82A403 of this Chapter, the petitioner, the qualified mental health professional whose affirmation or affidavit accompanied the petition, and such other persons as the court may determine to be advised of such date. Upon such date, or upon such other date to which the proceeding may be adjourned, the court shall hear testimony and, if it be

deemed advisable and the subject of the petition is available, examine the subject of the petition in or out of court.

(d) If the subject of the petition does not appear at the hearing, and appropriate attempts to elicit the attendance of the subject have failed, the court may conduct the hearing in the subject's absence. In such case, the court shall set forth the factual basis for conducting the hearing without the presence of the subject of the petition."

SECTION 8. Effective Date. This Act shall become effective upon enactment.

SECTION 9. Severability. If any provision of this Act or its application to any person or circumstance is found to be invalid or inorganic, such invalidity shall not affect other provisions or applications of this Act that can be given effect without the invalid provision or application, and to this end the provisions of this Act are severable.

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
2025 (FIRST) Regular Session

Bill No. 219-38 (COR)
As Amended by the Committee on Health and Veterans Affairs

Introduced by: Shelly Vargas Calvo

AN ACT TO *AMEND* SUBSECTION (K) OF §82A201 OF ARTICLE 2; TO *ADD* NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO *AMEND* § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025.

BE IT ENACTED BY THE PEOPLE OF GUAM:

SECTION 1. Short Title. This Act shall be cited as the "Baby Alexya Law Reform Act of 2025."

SECTION 2. Legislative Findings and Intent. *I Liheslaturan Guåhan* affirms that Guam's Baby Alexya Law, Public Law 33-71, was enacted in 2015 to prevent violence and protect public safety by enabling Assisted Outpatient Treatment (AOT) for individuals with serious, treatable mental illnesses. Nearly a decade later, a persistent procedural gap remains in Guam's mental health framework: many

individuals exhibiting clear signs of psychiatric crisis continue to enter the justice system before they are ever seen by behavioral health providers.

I Liheslaturan Guåhan notes that the current statute limits petitioning authority to the Director of the Guam Behavioral Health and Wellness Center (GBHWC), or their designee, in conjunction with the treating psychiatrist or physician, creating delays in intervention and narrowing pathways for advocacy.

Consequently, *I Liheslaturan Guåhan* acknowledges that family members, roommates, and the Public Guardian often have direct and sustained insight into a person's condition and can identify escalating behavior that warrants intervention before tragedy occurs. Similarly, legal advocates such as the Attorney General and Public Defender, along with parole and probation officers, frequently encounter individuals with untreated mental illness and are uniquely positioned to advocate for early, community-based outpatient care.

Accordingly, *I Liheslaturan Guåhan* appreciates the unique position of trusted individuals and legal officers to identify these high-risk individuals and advocate for early outpatient treatment. Involving these individuals and professionals in the petitioning process can lead to earlier intervention, reduced cycles of incarceration or hospitalization, and improved long-term outcomes for individuals and communities alike.

I Liheslaturan Guåhan further finds that jurisdictions such as California, New York, and Pennsylvania demonstrate the effectiveness of granting petitioning authority to a diverse array of stakeholders, resulting in reduced hospitalization rates, improved treatment adherence, and enhanced public safety. Specifically, New York's Kendra's Law allows trusted individuals—such as family members, licensed mental health providers, and law enforcement officers—to request the filing of AOT petitions, fostering early, community-based responses to mental health crises.

It is therefore the intent of *I Liheslaturan Guåhan* to expand the petitioning authority under Guam's Baby Alexya Law, Chapter 82A of Title 10, GGA, to include designated individuals such as adult family members, roommates, licensed mental health professionals, agency directors, hospital administrators, legal officers, peace officers, parole and probation officers, and the Guam Public Guardian.

Furthermore, it is also the intent of *I Liheslaturan Guåhan* to ensure that all petitions filed by new authorized entities are accompanied by current psychiatric evaluations and clinical affirmations of treatment necessity, maintaining alignment with medical best practices. This safeguard fosters greater inter-agency collaboration among behavioral health professionals, legal advocates, and judicial authorities to holistically address the intersection of untreated mental illness and public safety. Thus, the process ensures that individuals are not denied potentially life-saving treatment due to procedural limitations while preserving the due process and clinical integrity of the AOT framework.

Correspondingly, *I Liheslaturan Guåhan* emphasizes the importance of a clear and structured petition filing process, including the requirement for an affirmation or affidavit of a treating professional and the conditions under which the petition can be filed. The petitioner must also provide written notice of the petition to the subject of the petition and other relevant parties. In addition, the subject of the petition shall have the right to be represented by counsel and a prompt hearing to contest the petition.

Lastly, *I Liheslaturan Guåhan* finds that enhancing judicial flexibility is essential in ensuring timely intervention. In cases where the subject of an AOT petition has received proper notice yet fails to appear despite reasonable efforts to elicit attendance, the court may proceed with the hearing in the subject's absence. Such in absentia proceedings shall be authorized only when the court finds, and sets forth on record, the factual basis for conducting the hearing without the individual present.

By creating an inclusive and responsive AOT framework that reflects the realities of Guam's justice and healthcare systems and empowers qualified individuals to act in the interest of safety and recovery, *I Liheslaturan Guåhan* reaffirms its commitment to preventing avoidable harm, supporting vulnerable residents, and strengthening Guam's behavioral health continuum.

SECTION 3. § 82A201(k) and (l) of Article 2, Chapter 82A, Title 10, Guam Code Annotated, is hereby *amended* as follows:

"(k) Petitioner shall only mean t~~he Director of the Guam Behavioral Health and Wellness Center or his or her designee, in conjunction with the treating psychiatrist or physician who has examined the respondent and who *shall* file the petition~~a person who has completed any standardized petitioner training required under §82A405 of this Chapter and who is one of the following:

(1) A person eighteen (18) years of age or older who resides in the same household as the person who is the subject of the petition and who has regular, direct, and sustained knowledge of other person's condition and recent behavior~~with whom the person who is the subject of the petition resides~~;

(2) A parent, spouse, sibling, or child eighteen (18) years of age or older of the person who is the subject of the petition;

(3) The director of a public or private agency, treatment facility, charitable organization, or licensed residential care facility providing mental health services to the person who is the subject of the petition in whose institution the subject of the petition resides;

(4) The director of a hospital in which the person who is the subject of the petition is hospitalized;

(5) A licensed mental health treatment provider who is either supervising the treatment of, or treating for a mental illness, the person who is the subject of the petition;

(6) A peace officer or probation officer assigned to supervise the person who is the subject of the petition;

(7) The Guam Public Guardian, acting pursuant to Chapter 72 of Title 15, GCA, or any other lawful appointment; or

(8) A legal officer or licensed attorney who is not involved in adjudicating, prosecuting, or defending the person who is the subject of the petition in the same proceeding and who has lawful professional basis to believe that AOT may be appropriate.

~~(1) *Respondent* means the person who is the subject of a petition or certificate~~

SECTION 4. A new § 82A402 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A402. Petition to the Court.

(a) A petition for an order authorizing assisted outpatient treatment (AOT) may be filed in the Superior Court of Guam.

(b) The petition shall state:

(1) each of the criteria for AOT as set forth in § 82A401 of this Chapter;

(2) facts which support the petitioner's belief that the subject of the petition meets each criterion, provided that the hearing on the petition need not be limited to the stated facts; and

(3) that the subject of the petition is present, or is reasonably believed to be present, in Guam.

(c) The petition shall include a clinical affirmation or affidavit that AOT is medically appropriate, with supporting documentation, from a qualified mental health professional, who shall not be the petitioner, stating either that:

(1) such licensed professional has personally examined the subject of the petition no more than seven (7) days prior to the submission of the petition, recommends AOT for the subject of the petition, and is willing and able to testify at the hearing on the petition; or

(2) no more than seven (7) days prior to the filing of the petition, such licensed professional, or his or her designee, has made appropriate attempts but has not been successful in eliciting the cooperation of the subject of the petition to submit to an examination, such professional has reason to suspect that the subject of the petition meets the criteria for AOT, and such professional is willing and able to examine the subject of the petition and testify at the hearing on the petition.

SECTION 5. A *new* § 82A403 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A403. Service.

The petitioner shall cause written notice of the petition to be served upon the respondent and shall cause a copy thereof to be served personally or by certified mail upon:

(a) the respondent;

(b) the respondent's legal guardian or conservator, if known;

(c) the qualified mental health professional whose affirmation or affidavit accompanied the petition; and

(d) the Director of the Guam Behavioral Health and Wellness Center, or his or her designee.

(e) any other person the court directs. Notice shall be

SECTION 6. A new § 82A404 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A404. Right to Counsel.

The subject of the petition shall have the right to be represented by counsel at every critical stage of the proceeding. If the subject is financially unable to obtain counsel, the court shall appoint counsel without cost to the subject. Counsel shall be provided sufficient time and access to relevant records, consistent with applicable confidentiality law, to prepare for the hearing."

SECTION 7. A *new* § 82A405 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A405. Petitioner Training and Oversight.

(a) The Guam Behavioral Health and Wellness Center, in consultation with the Superior Court of Guam, the Office of the Public Defender, the Office of the Attorney General, and qualified consumer and family advocates, shall develop a standardized training program for non-clinical petitioners. The training shall address the statutory criteria for AOT, the distinction between dangerousness and nonconforming behavior, confidentiality, cultural competency, least restrictive care, recovery-oriented treatment, conflicts of interest, and the prohibition against using AOT for punishment, coercion, retaliation, or convenience.

(b) Before filing a petition, a non-clinical petitioner shall certify completion of the standardized training, except that the court may permit an

emergency filing upon a showing of good cause and require completion thereafter.

(c) GBHWC shall maintain de-identified data regarding petitions filed, petitioner categories, dispositions, order duration, renewals, and demographic information sufficient to identify disparities while protecting confidentiality. GBHWC shall submit an annual report to *I Maga'hågan Guåhan* and the Speaker of *I Liheslaturan Guåhan* and shall convene an advisory oversight group that includes clinical, legal, consumer, family, and civil-rights representatives to review implementation and recommend corrective action."

SECTION 8. A *new* § 82A406 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A406. Evidentiary Standard; Duration; Review; and Appeal.

(a) The court may order AOT only upon clear and convincing evidence that the respondent meets every criterion set forth in § 82A401 and that the proposed treatment plan is medically appropriate, individualized, recovery-oriented, and the least restrictive available alternative reasonably capable of meeting the respondent's treatment needs and protecting the respondent or the public.

(b) An initial AOT order shall not exceed six (6) months. The court shall review the order at least once every ninety (90) days. Continuation or renewal shall require a new finding, by clear and convincing evidence, that the statutory criteria remain satisfied and that less restrictive alternatives remain insufficient.

(c) The respondent, respondent's counsel, legal guardian, or treating qualified mental health professional may move at any time for modification or termination of the order based on changed circumstances, treatment

progress, the availability of a less restrictive alternative, or failure to provide the services required by the treatment plan.

(d) A respondent may appeal an order granting, renewing, or materially modifying AOT in the same manner as permitted for other final civil orders. Unless otherwise ordered by the appellate court, the filing of an appeal does not automatically stay an order, but expedited review shall be available."

SECTION 9. § 82A501 of Article 5, Chapter 82A, Title 10, Guam Code Annotated, is hereby *amended* to read as follows:

"§ 82A501. ~~Continuance~~ Assisted Treatment Hearing.

~~The court may, for good cause, order a continuance of up to forty-eight (48) hours or, if this period ends on a Saturday, Sunday or holiday, to the end of the next day on which the court is open. The continuance *shall* extend the emergency treatment/observation period or any temporary treatment order until the time of the hearing.~~

(a) Upon receipt of the petition, the court shall fix the date for a hearing. Such date shall be no later than seven (7) days from the date such petition is received by the court, excluding Saturdays, Sundays and holidays and shall occur no earlier than seventy-two (72) hours after service unless the respondent, after consultation with counsel, knowingly and voluntarily wave the notice period.

(b) Adjournments shall be permitted only for good cause shown. In granting adjournments, the court shall consider the need for further examination by a licensed professional or the potential need to provide assisted outpatient treatment expeditiously. The court may, for good cause, order a continuance of up to forty-eight (48) hours or, if this period ends on a Saturday, Sunday or holiday, to the end of the next day on which the court is

open. The continuance shall extend the emergency treatment/observation period or any temporary treatment order until the time of the hearing.

(c) The court shall cause the subject of the petition, any other person receiving notice as set forth in § 82A403 of this Chapter, the petitioner, the qualified mental health professional whose affirmation or affidavit accompanied the petition, and such other persons as the court may determine to be advised of such date. Upon such date, or upon such other date to which the proceeding may be adjourned, the court shall hear testimony and, if it be deemed advisable and the subject of the petition is available, examine the subject of the petition in or out of court.

(d) An in absentia hearing may proceed only after the court finds that documented, reasonable efforts to contact the subject and secure the subject's attendance have failed and that proceeding without the subject is necessary to prevent undue delay or substantial risk of harm. The court shall state for the record the specific efforts made and the factual basis supporting the finding of necessity."

SECTION 10. Effective Date. This Act shall become effective upon enactment.

SECTION 11. Three-Year Legislative Review. No later than three (3) years after the effective date of this Act, GBHWC shall submit to *I Maga'hågan Guåhan* and the Speaker of *I Liheslaturan Guåhan* a comprehensive implementation report evaluating petition volume, petitioner training, case outcomes, treatment access, disparities, due-process compliance, order duration and renewal, adverse events, and recommendations for amendment or continuation. The appropriate standing committee of *I Liheslaturan Guåhan* shall conduct a public oversight hearing on the report.

SECTION 12. Severability. If any provision of this Act or its application to any person or circumstance is found to be invalid or inorganic, such invalidity shall not affect other provisions or applications of this Act that can be given effect without the invalid provision or application, and to this end the provisions of this Act are severable.

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
2025 (FIRST) Regular Session

Bill No. 219-38 (COR)
As amended; and substituted by the
Committee on Health and Veterans Affairs.

Introduced by: Shelly V. Calvo

AN ACT TO *AMEND* OF § 82A201(k) OF ARTICLE 2; TO *ADD* NEW §§ 82A402, 82A403, 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO *AMEND* § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025.

BE IT ENACTED BY THE PEOPLE OF GUAM:

Section 1. Short Title. This Act shall be cited as the "Baby Alexya Law Reform Act of 2025."

Section 2. Legislative Findings and Intent. *I Liheslaturan Guåhan* affirms that Guam's Baby Alexya Law, Public Law 33-71, was enacted in 2015 to prevent violence and protect public safety by enabling Assisted Outpatient Treatment (AOT) for individuals with serious, treatable mental illnesses. Nearly a decade later, a persistent procedural gap remains in Guam's mental health framework: many individuals exhibiting clear signs of psychiatric crisis continue to enter the justice system before they are ever seen by behavioral health providers.

I Liheslatura notes that the current statute limits petitioning authority to the Director of the Guam Behavioral Health and Wellness Center (GBHWC), or their

designee, in conjunction with the treating psychiatrist or physician, creating delays in intervention and narrowing pathways for advocacy.

Consequently, *I Liheslatura* acknowledges that adult family members, household members and direct knowledge of the individual's condition, and the Public Guardian may be able to identify escalating behavior that warrants intervention before tragedy occurs. Similarly, parole and probation officers, agency directors, hospital administrators, licensed mental health professionals, and legal officers who are not involved in adjudicating or defending the subject in the same proceeding may be positioned to request early, community-based outpatient care.

Accordingly, *I Liheslatura* appreciates the unique position of trusted individuals and legal officers to identify these high-risk individuals and advocate for early outpatient treatment. Involving these individuals and professionals in the petitioning process can lead to earlier intervention, reduced cycles of incarceration or hospitalization, and improved long-term outcomes for individuals and communities alike.

I Liheslatura further finds that jurisdictions such as California, New York, and Pennsylvania demonstrate the effectiveness of granting petitioning authority to a diverse array of stakeholders, resulting in reduced hospitalization rates, improved treatment adherence, and enhanced public safety. Specifically, New York's *Kendra's Law* allows trusted individuals—such as family members, licensed mental health providers, and law enforcement officers—to request the filing of AOT petitions, fostering early, community-based responses to mental health crises.

It is therefore the intent of *I Liheslaturan Guåhan* to expand the petitioning authority under Guam's Baby Alexya Law, Chapter 82A of Title 10, GGA, to include designated adult family members, qualifying household members, licensed mental health professionals, agency directors, hospital administrators, parole and probation officers, the Guam Public Guardian, and limited legal officers or attorneys who have

no conflict of interest in the same proceeding.

Furthermore, it is also the intent of *I Liheslatura* to ensure that all petitions filed by new authorized entities are accompanied by current psychiatric evaluations and clinical affirmations of treatment necessity, maintaining alignment with medical best practices. This safeguard fosters greater inter-agency collaboration among behavioral health professionals, legal advocates, and judicial authorities to holistically address the intersection of untreated mental illness and public safety. Thus, the process ensures that individuals are not denied potentially life-saving treatment due to procedural limitations while preserving the due process and clinical integrity of the AOT framework.

Correspondingly, *I Liheslatura* emphasizes the importance of a clear and structured petition filing process, including the requirement for an affirmation or affidavit of a treating professional and the conditions under which the petition can be filed. The petitioner must also provide written notice of the petition to the subject of the petition and other relevant parties. In addition, the subject of the petition shall have the right to be represented by counsel and a prompt hearing to contest the petition.

Lastly, *I Liheslatura* finds that enhancing judicial flexibility is essential in ensuring timely intervention. In cases where the subject of an AOT petition has received proper notice yet fails to appear despite reasonable efforts to elicit attendance, the court may proceed with the hearing in the subject's absence. Such in absentia proceedings shall be authorized only when the court finds, and sets forth on record, the factual basis for conducting the hearing without the individual present.

By creating an inclusive and responsive AOT framework that reflects the realities of Guam's justice and healthcare systems and empowers qualified individuals to act in the interest of safety and recovery, *I Liheslatura* reaffirms its commitment to preventing avoidable harm, supporting vulnerable residents, and strengthening Guam's behavioral health continuum. Assisted outpatient treatment shall be ordered and implemented in a manner consistent with the principles of least restrictive care,

individualized treatment, recovery-oriented practice, and respect for the dignity and legal rights of the respondent.

Section 3. § 82A201(k) of Article 2, Chapter 82A, Title 10, Guam Code Annotated, is hereby *amended* as follows:

"(k) *Petitioner* shall only mean t~~he Director of the Guam Behavioral Health and Wellness Center or his or her designee, in conjunction with the treating psychiatrist or physician who has examined the respondent and who *shall* file the petitio~~n a person who has completed any standardized petitioner training required under §82A405 of this Chapter and who is one of the following:

(1) A parent, spouse, sibling, or child eighteen (18) years of age or older of the person who is the subject of the petition;;

(2) The director of a public or private agency, treatment facility, charitable organization, or licensed residential care facility providing mental health services to the person who is the subject of the petition in whose institution the subject of the petition resides;

(3) The director of a hospital in which the person who is the subject of the petition is hospitalized;

(4) A licensed mental health treatment provider who is either supervising the treatment of, or treating for a mental illness, the person who is the subject of the petition;

(5) A parole officer, or probation officer assigned to supervise the person who is the subject of the petition;

(6) The Guam Public Guardian, acting pursuant to Chapter 72 of Title 15, GCA, or any other lawful appointment;

(7) A legal officer or licensed attorney who is not involved in adjudicating, prosecuting, or defending the person who is the subject of

the petition in the same proceeding and who has a lawful professional basis to believe that AOT may be appropriate."

Section 4. A new § 82A402 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"**§ 82A402. Petition to the Court.**

(a) A petition for an order authorizing assisted outpatient treatment (AOT) may be filed in the Superior Court of Guam.

(b) The petition shall state:

(1) each of the criteria for AOT as set forth in § 82A401 of this Chapter;

(2) facts which support the petitioner's belief that the subject of the petition meets each criterion, provided that the hearing on the petition need not be limited to the stated facts; and

(3) that the subject of the petition is present, or is reasonably believed to be present, in Guam.

(c) The petition shall include a clinical affirmation or affidavit that AOT is medically appropriate, with supporting documentation, from a qualified mental health professional, who shall not be the petitioner, stating either that:

(1) such licensed professional has personally examined the subject of the petition no more than seven (7) days prior to the submission of the petition, recommends AOT for the subject of the petition, and is willing and able to testify at the hearing on the petition; or

(2) no more than seven (7) days prior to the filing of the petition, such licensed professional, or his or her designee, has made appropriate attempts but has not been successful in eliciting the cooperation of the subject of the petition to submit to an examination, such professional has

reason to suspect that the subject of the petition meets the criteria for AOT, and such professional is willing and able to examine the subject of the petition and testify at the hearing on the petition."

(d) If the subject of the petition refuses examination, a second licensed mental health professional must review the petition and affirm the necessity of the assisted outpatient treatment before filing. This additional review would provide an important check in cases when direct examination is not possible."

Section 5. A new § 82A403 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"**§ 82A403. Service.**

The petitioner shall cause written notice of the petition to be served upon the respondent and shall cause a copy thereof to be served personally or by certified mail upon:

(a) the respondent;

(b) the respondent's legal guardian or conservator, if known;

(c) the qualified mental health professional whose affirmation or affidavit accompanied the petition; and

(d) the Director of the Guam Behavioral Health and Wellness Center, or his or her designee.

(e) any other person the court directs.

Notice shall be served at least seventy-two (72) hours before the hearing, unless the respondent, after consultation with counsel, knowingly and voluntarily waives the notice period."

Section 6. A new § 82A404 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"**§ 82A404. Right to Counsel.**

The subject of the petition shall have the right to be represented by counsel at every critical stage of the proceeding. If the subject is financially unable to obtain counsel, the court shall appoint counsel without cost to the subject. Counsel shall be provided sufficient time and access to relevant records, consistent with applicable confidentiality law, to prepare for the hearing."

Section 7. A *new* § 82A405 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"**§ 82A405. Petitioner Training and Oversight.**

(a) The Guam Behavioral Health and Wellness Center, in consultation with the Superior Court of Guam, the Office of the Public Defender, the Office of the Attorney General, and qualified consumer and family advocates, shall develop a standardized training program for non-clinical petitioners. The training shall address the statutory criteria for AOT, the distinction between dangerousness and nonconforming behavior, confidentiality, cultural competency, least restrictive care, recovery-oriented treatment, conflicts of interest, and the prohibition against using AOT for punishment, coercion, retaliation, or convenience.

(b) Before filing a petition, a non-clinical petitioner shall certify completion of the standardized training, except that the court may permit an emergency filing upon a showing of good cause and require completion thereafter.

(c) GBHWC shall maintain de-identified data regarding petitions filed, petitioner categories, dispositions, order duration, renewals, and demographic information sufficient to identify disparities while protecting confidentiality. GBHWC shall submit an annual report to *I Maga'hågan Guåhan* and the Speaker of *I Liheslaturan Guåhan* and shall convene an advisory oversight group that includes clinical, legal, consumer, family, and

civil-rights representatives to review implementation and recommend corrective action."

Section 8. A *new* § 82A406 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A406. Evidentiary Standard; Duration; Review; and Appeal.

(a) The court may order AOT only upon clear and convincing evidence that the respondent meets every criterion set forth in § 82A401 and that the proposed treatment plan is medically appropriate, individualized, recovery-oriented, and the least restrictive available alternative reasonably capable of meeting the respondent's treatment needs and protecting the respondent or the public.

(b) An initial AOT order shall not exceed six (6) months. The court shall review the order at least once every ninety (90) days. Continuation or renewal shall require a new finding, by clear and convincing evidence, that the statutory criteria remain satisfied and that less restrictive alternatives remain insufficient.

(c) The respondent, respondent's counsel, legal guardian, or treating qualified mental health professional may move at any time for modification or termination of the order based on changed circumstances, treatment progress, the availability of a less restrictive alternative, or failure to provide the services required by the treatment plan.

(d) A respondent may appeal an order granting, renewing, or materially modifying AOT in the same manner as permitted for other final civil orders. Unless otherwise ordered by the appellate court, the filing of an appeal does not automatically stay an order, but expedited review shall be available."

Section 9. § 82A501 Assisted Treatment Hearing of Article 5, Chapter 82A, Title 10, Guam Code Annotated, is hereby *amended* to read as follows:

"**§ 82A501. ~~Continuance~~ Assisted Treatment Hearing.**

~~The court may, for good cause, order a continuance of up to forty-eight (48) hours or, if this period ends on a Saturday, Sunday or holiday, to the end of the next day on which the court is open. The continuance shall extend the emergency treatment/observation period or any temporary treatment order until the time of the hearing.~~

(a) Upon receipt of the petition, the court shall fix the date for a hearing. The hearing shall be scheduled no later than seven (7) days from the date the petition is received by the court, excluding Saturdays, Sundays, and holidays, and shall occur no earlier than seventy-two (72) hours after service unless the respondent, after consultation with counsel, knowingly and voluntarily waives the notice period.

(b) Adjournments shall be permitted only for good cause shown. In granting adjournments, the court shall consider the need for further examination by a licensed professional or the potential need to provide assisted outpatient treatment expeditiously. The court may, for good cause, order a continuance of up to forty-eight (48) hours or, if this period ends on a Saturday, Sunday or holiday, to the end of the next day on which the court is open. The continuance shall extend the emergency treatment/observation period or any temporary treatment order until the time of the hearing.

(c) The court shall cause the subject of the petition, any other person receiving notice as set forth in § 82A403 of this Chapter, the petitioner, the qualified mental health professional whose affirmation or affidavit accompanied the petition, and such other persons as the court may determine to be advised of such date. Upon such date, or upon such other date to which the proceeding may

be adjourned, the court shall hear testimony and, if it be deemed advisable and the subject of the petition is available, examine the subject of the petition in or out of court.

(1) The court shall determine, based on each of the criteria pursuant to § 82A401 of this Chapter that the subject of the petition meets, the duration of an AOT order.

(2) The court shall establish guidelines for periodic review of the AOT order on a quarterly basis by a qualified mental health professional, to ensure that AOT remains medically appropriate for the subject of the petition.

(3) Within thirty (30) days of the adjournment of the hearing, the subject of the petition or their counsel may appeal an AOT order or request modification of the order.

(i) The court shall fix the date for a rehearing and a review of the proceedings already had no later than seven (7) days from the date such appeal or request is received by the court, excluding Saturdays, Sundays, and holidays.

(ii) New evidence and/or arguments, including but not limited to, medical records, medical examination, supporting documentation, and testimony by the qualified mental health professional supervising the treatment of the person who is the subject of the petition, may be presented during rehearing.

(iii) If the court finds that there is probable cause for such appeal or request for modification, the court shall make appropriate or reasonable modifications to the AOT order or its duration, order a new AOT plan, or repeal the AOT order.

(iv) If the court finds that there is no probable cause for such appeal or request for modification, the court shall certify that fact and authorize the continuance of the AOT order. The certification shall be filed with the public or private agency, treatment facility, charitable organization, or licensed residential care facility providing mental health services to the person who is the subject of the petition and in which the subject resides.

(d) An in absentia hearing may proceed only after the court finds that documented, reasonable efforts to contact the subject and secure the subject's attendance have failed and that proceeding without the subject is necessary to prevent undue delay or substantial risk of harm. The court shall state for the record the specific efforts made and the factual basis supporting the finding of necessity."

Section10. Effective Date. This Act shall become effective upon enactment.

Section 11. Three-Year Legislative Review. No later than three (3) years after the effective date of this Act, GBHWC shall submit to *I Maga'hågan Guåhan* and the Speaker of *I Liheslaturan Guåhan* a comprehensive implementation report evaluating petition volume, petitioner training, case outcomes, treatment access, disparities, due-process compliance, order duration and renewal, adverse events, and recommendations for amendment or continuation. The appropriate standing committee of *I Liheslaturan Guåhan* shall conduct a public oversight hearing on the report.

Section 12. Severability. If any provision of this Act or its application to any person or circumstance is found to be invalid or inorganic, such invalidity shall not affect other provisions or applications of this Act that can be given effect without the invalid provision or application, and to this end the provisions of this Act are severable.

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
2025 (FIRST) Regular Session

Bill No. 219-38 (COR)
As amended~~; further amended~~; and substituted
by the
Committee on Health and Veterans Affairs.
~~As Amended by the Committee on Health and Veterans Affairs~~

Introduced by: Shelly V. Calvo

AN ACT TO *AMEND* ~~SUBSECTION (K)~~ OF § 82A201 ~~(k)~~ OF ARTICLE 2; TO *ADD* NEW ~~§~~§§ 82A402, ~~§~~ 82A403, ~~AND §~~ 82A404, 82A405, AND 82A406 TO ARTICLE 4; AND TO *AMEND* § 82A501 OF ARTICLE 5; ALL OF CHAPTER 82A, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO EXPANDING AND SAFEGUARDING PETITIONING AUTHORITY FOR ASSISTED OUTPATIENT TREATMENT UNDER THE BABY ALEXYA LAW; AND TO CITE THIS ACT AS THE "BABY ALEXYA LAW REFORM ACT OF 2025.

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BE IT ENACTED BY THE PEOPLE OF GUAM:

~~SECTION~~ Section 1. **Short Title.** This Act shall be cited as the "Baby Alexya Law Reform Act of 2025."

Section~~SECTION~~ 2. **Legislative Findings and Intent.** *I Liheslaturan ~~Guåhan~~Guåhan* affirms that Guam's Baby Alexya Law, Public Law 33-71, was enacted in 2015 to prevent violence and protect public safety by enabling Assisted Outpatient Treatment (AOT) for individuals with serious, treatable mental illnesses. Nearly a decade later, a persistent procedural gap remains in Guam's mental health

framework: many individuals exhibiting clear signs of psychiatric crisis continue to enter the justice system before they are ever seen by behavioral health providers.

I Liheslatura notes that the current statute limits petitioning authority to the Director of the Guam Behavioral Health and Wellness Center (GBHWC), or their designee, in conjunction with the treating psychiatrist or physician, creating delays in intervention and narrowing pathways for advocacy.

Consequently, *I Liheslatura* acknowledges that adult family members, ~~roommates, and the Public Guardian, often have direct and sustained insight into a person's condition and can~~ household members and direct knowledge of the individual's condition, and the Public Guardian may be able to identify escalating behavior that warrants intervention before tragedy occurs. Similarly, ~~legal advocates such as the Attorney General and Public Defender, along with parole and probation officers, frequently encounter individuals with untreated mental illness and are uniquely positioned to advocate for early, community-based outpatient care.~~ parole and probation officers, agency directors, hospital administrators, licensed mental health professionals, and legal officers who are not involved in adjudicating or defending the subject in the same proceeding may be positioned to request early, community-based outpatient care.

Commented [RM2]: SUB Language

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Accordingly, *I Liheslatura* appreciates the unique position of trusted individuals and legal officers to identify these high-risk individuals and advocate for early outpatient treatment. Involving these individuals and professionals in the petitioning process can lead to earlier intervention, reduced cycles of incarceration or hospitalization, and improved long-term outcomes for individuals and communities alike.

I Liheslatura further finds that jurisdictions such as California, New York, and Pennsylvania demonstrate the effectiveness of granting petitioning authority to a

diverse array of stakeholders, resulting in reduced hospitalization rates, improved treatment adherence, and enhanced public safety. Specifically, New York's *Kendra's Law* allows trusted individuals—such as family members, licensed mental health providers, and law enforcement officers—to request the filing of AOT petitions, fostering early, community-based responses to mental health crises.

It is therefore the intent of *I Liheslaturan Guåhan* to expand the petitioning authority under Guam's Baby Alexya Law, Chapter 82A of Title 10, GGA, to include designated ~~individuals such as adult family members, roommates, licensed mental health professionals, agency directors, hospital administrators, legal officers, peace officers, parole and probation officers, and the Guam Public Guardian.~~ adult family members, qualifying household members, licensed mental health professionals, agency directors, hospital administrators, parole and probation officers, the Guam Public Guardian, and limited legal officers or attorneys who have no conflict of interest in the same proceeding.

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Furthermore, it is also the intent of *I Liheslatura* to ensure that all petitions filed by new authorized entities are accompanied by current psychiatric evaluations and clinical affirmations of treatment necessity, maintaining alignment with medical best practices. This safeguard fosters greater inter-agency collaboration among behavioral health professionals, legal advocates, and judicial authorities to holistically address the intersection of untreated mental illness and public safety. Thus, the process ensures that individuals are not denied potentially life-saving treatment due to procedural limitations while preserving the due process and clinical integrity of the AOT framework.

Correspondingly, *I Liheslatura* emphasizes the importance of a clear and structured petition filing process, including the requirement for an affirmation or affidavit of a treating professional and the conditions under which the petition can be filed. The petitioner must also provide written notice of the petition to the subject of the petition and other relevant parties. In addition, the subject of the petition shall have the

right to be represented by counsel and a prompt hearing to contest the petition.

Lastly, *I Liheslatura* finds that enhancing judicial flexibility is essential in ensuring timely intervention. In cases where the subject of an AOT petition has received proper notice yet fails to appear despite reasonable efforts to elicit attendance, the court may proceed with the hearing in the subject's absence. Such in absentia proceedings shall be authorized only when the court finds, and sets forth on record, the factual basis for conducting the hearing without the individual present.

By creating an inclusive and responsive AOT framework that reflects the realities of Guam's justice and healthcare systems and empowers qualified individuals to act in the interest of safety and recovery, *I Liheslatura* reaffirms its commitment to preventing avoidable harm, supporting vulnerable residents, and strengthening Guam's behavioral health continuum. Assisted outpatient treatment shall be ordered and implemented in a manner consistent with the principles of least restrictive care, individualized treatment, recovery-oriented practice, and respect for the dignity and legal rights of the respondent.

Commented [RM5]: SUB Language

~~SECTION~~Section ~~3.~~ ~~§~~ 82A201(k) of Article 2, Chapter 82A, Title 10, Guam Code Annotated, is hereby *amended* as follows:

"(k) ~~*Petitioner*~~ shall only mean ~~the Director of the Guam Behavioral Health and Wellness Center or his or her designee, in conjunction with the treating psychiatrist or physician who has examined the respondent and who *shall* file the petition the Director of the Guam Behavioral Health and Wellness Center or his or her designee, in conjunction with the treating psychiatrist or physician who has examined the respondent and who shall file the petition~~ a person who has completed any standardized petitioner training required under §82A405 of this Chapter and who is one of the following:

~~(1) A person eighteen (18) years of age or older who resides in the same household as the person who is the subject of the petition and who has regular,~~

~~direct, and sustained knowledge of other person's condition and recent behaviorwith whom the person who is the subject of the petition resides;~~

(~~2~~ 1~~)~~) A parent, spouse, sibling, or child eighteen (18) years of age or older of the person who is the subject of the petition;;

(~~3~~ 2~~)~~) The director of a public or private agency, treatment facility, charitable organization, or licensed residential care facility providing mental health services to the person who is the subject of the petition in whose institution the subject of the petition resides;

((~~4~~ 3~~)~~) The director of a hospital in which the person who is the subject of the petition is hospitalized;

(~~5~~ 4~~)~~) A licensed mental health treatment provider who is either supervising the treatment of, or treating for a mental illness, the person who is the subject of the petition;

(~~6~~ 5~~)~~) A ~~peace officer,~~ parole officer, or probation officer assigned to supervise the person who is the subject of the petition;

Commented [RM6]: SUB Language

(~~7~~ 6~~)~~) The Guam Public Guardian, acting pursuant to Chapter 72 of Title 15, GCA, or any other lawful appointment;

~~(8 7) A judge before whom the person who is the subject of the petition appears;~~

((~~9~~ 78)~~-~~ A legal officer or licensed attorney who is not involved in adjudicating, prosecuting, or defending the person who is the subject of the petition in the same proceeding and who has a lawful professional basis to believe that AOT may be appropriate."

~~(1) Respondent means the person who is the subject of a petition or certificate~~

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~~SECTION~~**Section 4~~.~~.** A new § 82A402 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"**§ 82A402~~.~~. Petition to the Court.**

(a)~~.~~ A petition for an order authorizing assisted outpatient treatment (AOT) may be filed in the Superior Court of Guam.

(b~~.~~) The petition shall state:

(1~~.~~) each of the criteria for AOT as set forth in § 82A401 of this Chapter;

(2~~.~~) facts which support the petitioner's belief that the subject of the petition meets each criterion, provided that the hearing on the petition need not be limited to the stated facts; and

(3~~.~~) that the subject of the petition is present, or is reasonably believed to be present, in Guam.

(c~~.~~) The petition shall include a clinical affirmation or affidavit that AOT is medically appropriate, with supporting documentation, from a qualified mental health professional, who shall not be the petitioner, stating either that:

(1~~.~~) such licensed professional has personally examined the subject of the petition no more than seven (7) days prior to the submission of the petition, recommends AOT for the subject of the petition, and is willing and able to testify at the hearing on the petition; or

(2~~.~~) no more than seven (7) days prior to the filing of the petition, such licensed professional, or his or her designee, has made appropriate attempts but has not been successful in eliciting the cooperation of the subject of the petition to submit to an examination, such professional has reason to suspect that the subject of the petition meets the criteria for AOT, and such professional is willing and able to examine the subject of the petition and testify at the hearing on the petition."

(d~~)~~) If the subject of the petition refuses examination, a second licensed mental health professional must review the petition and affirm the necessity of the assisted outpatient treatment before filing. This additional review would provide an important check in cases when direct examination is not possible."

~~SECTION~~Section ~~5.~~ 5. ~~-~~A new § 82A403 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"**§ 82A403. ~~-~~Service.**

The petitioner shall cause written notice of the petition to be served upon the respondent and shall cause a copy thereof to be served personally or by certified mail upon:

(a~~)~~) the respondent;

(b~~)~~) the respondent's legal guardian or conservator, if known;

(c)~~-~~ the qualified mental health professional whose affirmation or affidavit accompanied the petition; and

(d) ~~-~~the Director of the Guam Behavioral Health and Wellness Center, or his or her designee.

(e) ~~-~~any other person the court directs.

Notice shall be served at least seventy-two (72) hours before the hearing, unless the respondent, after consultation with counsel, knowingly and voluntarily waives the notice period."

~~SECTION~~Section **6.** ~~-~~A new § 82A404 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"**§ 82A404. ~~-~~Right to Counsel.**

The subject of the petition shall have the right to be represented by counsel at every critical stage of the proceeding. If the subject is financially unable to obtain counsel, the court shall appoint counsel without cost to the subject.

Counsel shall be provided sufficient time and access to relevant records, consistent with applicable confidentiality law, to prepare for the hearing."

~~SECTION~~Section 7. A *new* § 82A405 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"**§ 82A405. Petitioner Training and Oversight.**

(a) The Guam Behavioral Health and Wellness Center, in consultation with the Superior Court of Guam, the Office of the Public Defender, the Office of the Attorney General, and qualified consumer and family advocates, shall develop a standardized training program for non-clinical petitioners. The training shall address the statutory criteria for AOT, the distinction between dangerousness and nonconforming behavior, confidentiality, cultural competency, least restrictive care, recovery-oriented treatment, conflicts of interest, and the prohibition against using AOT for punishment, coercion, retaliation, or convenience.

(b~~)~~) Before filing a petition, a non-clinical petitioner shall certify completion of the standardized training, except that the court may permit an emergency filing upon a showing of good cause and require completion thereafter.

(c) GBHWC shall maintain de-identified data regarding petitions filed, petitioner categories, dispositions, order duration, renewals, and demographic information sufficient to identify disparities while protecting confidentiality. GBHWC shall submit an annual report to *I Maga'hågan Guåhan* and the Speaker of *I Liheslaturan Guåhan* and shall convene an advisory oversight group that includes clinical, legal, consumer, family, and civil-rights representatives to review implementation and recommend corrective action."

~~SECTION~~Section ~~8.~~ A *new* § 82A406 of Article 4, Chapter 82A, Title 10, Guam Code Annotated, is hereby *added* to read as follows:

"§ 82A406. Evidentiary Standard; Duration; Review; and Appeal.

(a~~)~~) The court may order AOT only upon clear and convincing evidence that the respondent meets every criterion set forth in § 82A401 and that the proposed treatment plan is medically appropriate, individualized, recovery-oriented, and the least restrictive available alternative reasonably capable of meeting the respondent's treatment needs and protecting the respondent or the public.

(b) An initial AOT order shall not exceed six (6) months. The court shall review the order at least once every ninety (90) days. Continuation or renewal shall require a new finding, by clear and convincing evidence, that the statutory criteria remain satisfied and that less restrictive alternatives remain insufficient.

(c) The respondent, respondent's counsel, legal guardian, or treating qualified mental health professional may move at any time for modification or termination of the order based on changed circumstances, treatment progress, the availability of a less restrictive alternative, or failure to provide the services required by the treatment plan.

(d) A respondent may appeal an order granting, renewing, or materially modifying AOT in the same manner as permitted for other final civil orders. Unless otherwise ordered by the appellate court, the filing of an appeal does not automatically stay an order, but expedited review shall be available."

~~SECTION~~Section **9.** § 82A501 Assisted Treatment Hearing of Article 5, Chapter 82A, Title 10, Guam Code Annotated, is hereby *amended* to read as follows:

"**§ 82A501. ~~Continuance~~ Assisted Treatment Hearing.**

~~The court may, for good cause, order a continuance of up to forty-eight (48) hours or, if this period ends on a Saturday, Sunday or holiday, to the end of the next day on which the court is open. The continuance shall extend the emergency treatment/observation period or any temporary treatment order until the time of the hearing.~~

(a~~)~~) Upon receipt of the petition, the court shall fix the date for a hearing. ~~Such date shall be no later than three (3) days from the date such petition is received by the court, excluding Saturdays, Sundays and holidays.~~ The hearing shall be scheduled no later than seven (7) days from the date the petition is received by the court, excluding Saturdays, Sundays, and holidays, and shall occur no earlier than seventy-two (72) hours after service unless the respondent, after consultation with counsel, knowingly and voluntarily waives the notice period.

(b~~)~~) Adjournments shall be permitted only for good cause shown. In granting adjournments, the court shall consider the need for further examination by a licensed professional or the potential need to provide assisted outpatient treatment expeditiously. The court may, for good cause, order a continuance of up to forty-eight (48) hours or, if this period ends on a Saturday, Sunday or holiday, to the end of the next day on which the court is open. The continuance shall extend the emergency treatment/observation period or any temporary treatment order until the time of the hearing.

(c~~)~~) The court shall cause the subject of the petition, any other person receiving notice as set forth in § 82A403 of this Chapter, the petitioner, the qualified mental health professional whose affirmation or affidavit accompanied the petition, and such other persons as the court may determine to be advised of

such date. Upon such date, or upon such other date to which the proceeding may be adjourned, the court shall hear testimony and, if it be deemed advisable and the subject of the petition is available, examine the subject of the petition in or out of court.

(1) The court shall determine, based on each of the criteria pursuant to § 82A401 of this Chapter that the subject of the petition meets, the duration of an AOT order.

(2) The court shall establish guidelines for periodic review of the AOT order on a quarterly basis by a qualified mental health professional, to ensure that AOT remains medically appropriate for the subject of the petition.

(3) Within thirty (30) days of the adjournment of the hearing, the subject of the petition or their counsel may appeal an AOT order or request modification of the order.

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(i) The court shall fix the date for a rehearing and a review of the proceedings already had no later than seven (7) days from the date such appeal or request is received by the court, excluding Saturdays, Sundays, and holidays.

(ii) New evidence and/or arguments, including but not limited to, medical records, medical examination, supporting documentation, and testimony by the qualified mental health professional supervising the treatment of the person who is the subject of the petition, may be presented during rehearing.

(iii) If the court finds that there is probable cause for such appeal or request for modification, the court shall make appropriate or reasonable modifications to the AOT order or its duration, order a new AOT plan, or repeal the AOT order.

(iv) If the court finds that there is no probable cause for such appeal or request for modification, the court shall certify that fact and authorize the continuance of the AOT order. The certification shall be filed with the public or private agency, treatment facility, charitable organization, or licensed residential care facility providing mental health services to the person who is the subject of the petition and in which the subject resides."

Commented [RM9]: SUB Language

(d) An in absentia hearing may proceed only after the court finds that documented, reasonable efforts to contact the subject and secure the subject's attendance have failed and that proceeding without the subject is necessary to prevent undue delay or substantial risk of harm. The court shall state for the record the specific efforts made and the factual basis supporting the finding of necessity."

~~SECTION 8.~~ ~~SECTION~~Section ~~10.~~ **Effective Date.** This Act shall become effective upon enactment.

~~SECTION~~Section **11.** **Three-Year Legislative Review**. No later than three (3) years after the effective date of this Act, GBHWC shall submit to *I Maga'hågan Guåhan* and the Speaker of *I Liheslaturan Guåhan* a comprehensive implementation report evaluating petition volume, petitioner training, case outcomes, treatment access, disparities, due-process compliance, order duration and renewal, adverse events, and recommendations for amendment or continuation. The appropriate standing committee of *I Liheslaturan Guåhan* shall conduct a public oversight hearing on the report.

~~SECTION 9.~~ Section~~SECTION~~ **12.** **Severability.** If any provision of this Act or its application to any person or circumstance is found to be invalid or inorganic, such invalidity shall not affect other provisions or applications of this Act that can be

given effect without the invalid provision or application, and to this end the provisions of this Act are severable.