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) As amended; and substituted by the Committee on Health and Veterans Affairs; and further substituted and amended on the Floor.	Shelly V. Calvo Telo T. Taitague V. Anthony Ada Chris Barnett Frank F. Blas, Jr. Vincent A.V. Borja Christopher M. Dueñas Eulogio Shawn Gumataotao Sabrina Salas Matanane Joe S. San Agustin Therese M. Terlaje	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.	

SESSION DATE	TITLE	DATE PASSED	TRANSMITTED	DUE DATE	PUBLIC LAW NO.	DATE SIGNED	NOTES
9/28/26	AN ACT TO *AMEND* § 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."	10/16/26	10/19/26	10/30/26	38-147	10/30/26	Received: 10/30/26 Mess and Comm. Doc. No. 38GL-26-3125

LOURDES A. LEON GUERRERO
GOVERNOR

JOSHUA F. TENORIO
LT. GOVERNOR

UFISINAN I MAGA'HÅGAN GUÅHAN
OFFICE OF THE GOVERNOR OF GUAM

38GL-26-3125

OFFICE OF THE SPEAKER
FRANK F. BLAS JR.
OCT 30 2026
Time: 4:30pm
Received:

Transmitted via Email to: speakerblas@guamlegislature.org

October 30, 2026

THE HON. FRANK BLAS, JR., *Speaker*
I Mina'trentai Ocho Na Liheslaturan Guåhan
38th Guam Legislature
Guam Congress Building
163 Chalan Santo Papa
Hagåtña, Guam 96910

Re: Bill No. 219-38 (COR), "AN ACT TO *AMEND* § 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.'"

Håfa Adai Mr. Speaker,

Mental health is an essential part of a person's overall health and well-being. Unfortunately, mental health care has too often been overlooked, underserved, and surrounded by stigma. Mental health challenges affect people from all walks of life, including members of our island community. The fear of judgment, discrimination, or social consequences may prevent individuals from seeking the care they need. Without timely intervention and appropriate treatment, some individuals may experience a serious mental health crisis that places their well-being and safety at risk.

When a mental health crisis escalates, law enforcement officers are often called upon to respond. Our police officers serve our community with dedication and courage, but responding to someone experiencing a serious mental health crisis can present difficult and unpredictable circumstances. These situations can place considerable strain on the individual, their family, responding officers, and others involved. In some cases, they may also result in criminal charges or other consequences that further complicate a person's recovery. Whenever possible, we should provide opportunities for treatment and intervention before a crisis reaches that point.

Under existing law, only the Director of the Guam Behavioral Health and Wellness Center (GBHWC) or the Director's designee may petition the court for Assisted Outpatient Treatment (AOT). This limitation can prevent family members and other qualified individuals who recognize the warning signs of a serious mental health crisis from directly seeking court intervention. Those

closest to a person experiencing mental health difficulties are often the first to recognize changes in behavior or circumstances that suggest additional care may be needed.

Bill No. 219-38 (COR) addresses this limitation by expanding the individuals authorized to petition the court for AOT. Parents, spouses, siblings, and children will now have an opportunity to seek court intervention when a loved one may need assisted outpatient treatment. This change recognizes the important role families can play in identifying the need for treatment and helping their loved ones receive appropriate care before a crisis becomes more serious.

The legislation also extends this authority to qualified mental health professionals outside of GBHWC, parole officers, and the Guam Public Guardian. These individuals may be in a position to recognize when someone is experiencing serious mental health difficulties and may benefit from court-supervised treatment. Expanding access to the petition process creates additional opportunities for early intervention while preserving the court's responsibility to determine whether assisted outpatient treatment is appropriate.

When the Legislature originally established the framework for assisted outpatient treatment, it recognized the serious consequences that can result when individuals experiencing severe mental health difficulties do not receive appropriate care. Those concerns remain relevant today. This legislation builds upon that framework by allowing more people to seek help while maintaining important protections for the rights of individuals who may be subject to court-ordered treatment.

No person experiencing a mental health crisis should be left without a reasonable opportunity to receive the care and support they need. By empowering families and qualified professionals to seek timely intervention, Bill No. 219-38 (COR) takes an important step toward strengthening mental health care on Guam, supporting families, and protecting the safety and well-being of our community.

For these reasons, I sign Bill No. 219-38 (COR) into law as **Public Law No. 38-147.**

Senseramente,

LOURDES A. LEON GUERRERO
I Maga'hågan Guåhan
Governor of Guam

38GL-26-3125
Messages and Communications
RECEIVED
COMMITTEE ON RULES
October 31, 2026
1:21 p.m.
Marie Crisostomo

Enclosure(s): Bill No. 219-38 (COR) nka P.L. 38-147
cc via email: *Honorable* Joshua F. Tenorio, *Sigundo Maga'låhen Guåhan*, Lt. Governor of Guam
Compiler of Laws

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
2026 (SECOND) Regular Session

CERTIFICATION OF PASSAGE OF AN ACT TO *I MAGA'HÅGAN GUÅHAN*

This is to certify that **Bill No. 219-38 (COR), "AN ACT TO *AMEND* § 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,"** was on the 16th day of October 2026, duly and regularly passed.

Frank F. Blas, Jr.
Speaker

Attested:

Sabrina Salas Matanane
Legislative Secretary

This Act was received by *I Maga'hågan Guåhan* this 19th day of October, 2026, at 4:53 o'clock P.M.

Assistant Staff Officer
Maga'håga's Office

APPROVED:
10/30/2026
Lourdes A. Leon Guerrero
I Maga'hågan Guåhan

Date: 10/30/2026

Public Law No. 38-147

2026-26646
OFFICE OF THE GOVERNOR
CENTRAL FILES OFFICE
Rec'd By: Elaine Taisacan
Date: 10/19/26 Time: 4:53pm

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; and further substituted and amended on the Floor.

Introduced by: Shelly V. Calvo
Telo T. Taitague
V. Anthony Ada
Chris Barnett
Frank F. Blas, Jr.
Vincent A.V. Borja
Christopher M. Dueñas
Eulogio Shawn Gumataotao
Sabrina Salas Matanane
Joe S. San Agustin
Therese M. Terlaje
Jesse A. Lujan
Tina Rose Muña-Barnes
William A. Parkinson
Sabina Flores Perez

AN ACT TO *AMEND* § 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 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 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 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, 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 is hereby *added* to Article 4 of Chapter 82A, Title 10, Guam Code Annotated, 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 is hereby *added* to Article 4 of Chapter 82A, Title 10, Guam Code Annotated, 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 is hereby *added* to Article 4 of Chapter 82A, Title 10, Guam Code Annotated, to read as follows:

"**§ 82A404. Right to Counsel.**

The subject of the petition shall have the right to be represented by counsel at every 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 is hereby *added* to Article 4 of Chapter 82A, Title 10, Guam Code Annotated, 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/Maga'låhen 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 is hereby *added* to Article 4 of Chapter 82A, Title 10, Guam Code Annotated, 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. Assisted Treatment 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 seek review or reconsideration of an AOT order or request modification of the order before the Superior Court.

(i) A hearing shall be set no later than seven (7) days from the date the request is filed with 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 grants the review, reconsideration 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 vacate the AOT order.

(iv) If the court denies the review, reconsideration 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 180 (one hundred and eighty) days after 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/Maga'låhen 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.