

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

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.	Speaker Antonio R. Unpingco Legislative Session Hall Guam Congress Building October 16, 2026					
NAME	Yea	Nay	Not Voting/ Abstained	Out During Roll Call	Absent	Excused
Vice Speaker V. Anthony Ada	✓					
Senator Chris Barnett	✓					
Speaker Frank F. Blas, Jr.	✓					
Senator Vincent A.V. Borja	✓					
Senator Shelly V. Calvo	✓					
Senator Christopher M. Dueñas	✓					
Senator Eulogio Shawn Gumataotao	✓					
Senator Jesse A. Lujan	✓					
Senator Tina Rose Muña-Barnes	✓					
Senator William A. Parkinson	✓					
Senator Sabina Flores Perez	✓					
Senator Sabrina Salas Matanane	✓					
Senator Joe S. San Agustin	✓					
Senator Telo T. Taitague	✓					
Senator Therese M. Terlaje	✓					

TOTAL

15	0				
Yea	Nay	Not Voting/ Abstained	Out During Roll Call	Absent	Excused

CERTIFIED TRUE AND CORRECT:

RENNAE V. C. MENO
Clerk of the Legislature

I = Pass

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

**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.”**

1 **BE IT ENACTED BY THE PEOPLE OF GUAM:**

2 **Section 1. Short Title.** This Act shall be cited as the “Baby Alexya Law
3 Reform Act of 2025.”

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

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

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

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

25 *I Liheslatura* further finds that jurisdictions such as California, New York,
26 and Pennsylvania demonstrate the effectiveness of granting petitioning authority to
27 a diverse array of stakeholders, resulting in reduced hospitalization rates, improved

1 treatment adherence, and enhanced public safety. Specifically, New York's
2 *Kendra's Law* allows trusted individuals, such as family members, licensed mental
3 health providers, and law enforcement officers, to request the filing of AOT
4 petitions, fostering early, community-based responses to mental health crises.

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

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

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

27 Lastly, *I Liheslatura* finds that enhancing judicial flexibility is essential in

1 ensuring timely intervention. In cases where the subject of an AOT petition has
2 received proper notice yet fails to appear despite reasonable efforts to elicit
3 attendance, the court may proceed with the hearing in the subject's absence. Such in
4 absentia proceedings shall be authorized only when the court finds, and sets forth on
5 record, the factual basis for conducting the hearing without the individual present.

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

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

16 “(k) “Petitioner” shall only mean a person who has completed any
17 standardized petitioner training required under §82A405 of this Chapter and
18 who is one of the following:

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

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

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

27 (4) A licensed mental health treatment provider who is either

1 supervising the treatment of, or treating for a mental illness, the person
2 who is the subject of the petition;

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

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

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

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

13 **“§ 82A402. Petition to the Court.**

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

16 (b) The petition shall state:

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

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

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

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

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

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

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

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

21 **“§ 82A403. Service.**

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

25 (a) the respondent;

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

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

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

5 (e) any other person the court directs.

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

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

11 **“§ 82A404. Right to Counsel.**

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

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

19 **“§ 82A405. Petitioner Training and Oversight.**

20 (a) The Guam Behavioral Health and Wellness Center, in
21 consultation with the Superior Court of Guam, the Office of the Public
22 Defender, the Office of the Attorney General, and qualified consumer and
23 family advocates, shall develop a standardized training program for non-
24 clinical petitioners. The training shall address the statutory criteria for AOT,
25 the distinction between dangerousness and nonconforming behavior,
26 confidentiality, cultural competency, least restrictive care, recovery-oriented

1 treatment, conflicts of interest, and the prohibition against using AOT for
2 punishment, coercion, retaliation, or convenience.

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

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

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

17 **“§ 82A406. Evidentiary Standard; Duration; Review; and Appeal.**

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

24 (b) An initial AOT order shall not exceed six (6) months. The court
25 shall review the order at least once every ninety (90) days. Continuation or
26 renewal shall require a new finding, by clear and convincing evidence, that

1 the statutory criteria remain satisfied and that less restrictive alternatives
2 remain insufficient.

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

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

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

15 **"§ 82A501. Assisted Treatment Hearing.**

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

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

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

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

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

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

18 (3) Within thirty (30) days of the adjournment of the hearing,
19 the subject of the petition or their counsel may seek review or
20 reconsideration of an AOT order or request modification of the order
21 before the Superior Court.

22 (i) A hearing shall be set no later than seven (7) days
23 from the date the request is filed with the court, excluding
24 Saturdays, Sundays, and holidays.

25 (ii) New evidence and/or arguments, including but not
26 limited to, medical records, medical examination, supporting
27 documentation, and testimony by the qualified mental health

1 professional supervising the treatment of the person who is the
2 subject of the petition, may be presented during rehearing.

3 (iii) If the court grants the review, reconsideration or
4 request for modification, the court shall make appropriate or
5 reasonable modifications to the AOT order or its duration, order
6 a new AOT plan, or vacate the AOT order.

7 (iv) If the court denies the review, reconsideration or
8 request for modification, the court shall certify that fact and
9 authorize the continuance of the AOT order. The certification
10 shall be filed with the public or private agency, treatment facility,
11 charitable organization, or licensed residential care facility
12 providing mental health services to the person who is the subject
13 of the petition and in which the subject resides.

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

20 **Section 10. Effective Date.** This Act shall become effective 180 (one
21 hundred and eighty) days after enactment.

22 **Section 11. Three-Year Legislative Review.** No later than three (3) years
23 after the effective date of this Act, GBHWC shall submit to *I*
24 *Maga'hågan/Maga'låhen Guåhan* and the Speaker of *I Liheslaturan Guåhan* a
25 comprehensive implementation report evaluating petition volume, petitioner
26 training, case outcomes, treatment access, disparities, due-process compliance, order
27 duration and renewal, adverse events, and recommendations for amendment or

1 continuation. The appropriate standing committee of *I Liheslaturan Guåhan* shall
2 conduct a public oversight hearing on the report.

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