4467

2011-2012 Regular Sessions

IN SENATE

April 6, 2011

Introduced by Sen. McDONALD -- (at request of the Office for People With Developmental Disabilities) -- read twice and ordered printed, and when printed to be committed to the Committee on Mental Health and Developmental Disabilities

AN ACT to amend the mental hygiene law and the facilities development corporation act, in relation to state mental health and developmental disabilities programs, offices, and issues; and to repeal certain provisions of the mental hygiene law relating thereto

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

- Section 1. Subdivision 21 of section 1.03 of the mental hygiene law is REPEALED.
- S 2. Paragraph 1 of subdivision (a) of section 5.07 of the mental hygiene law, as added by chapter 223 of the laws of 1992 and the opening paragraph as amended by chapter 558 of the laws of 1999, is amended to read as follows:
- (1) The mental health services council and the advisory councils on [mental retardation and] developmental disabilities and alcoholism and substance abuse services shall each establish statewide goals and objectives to guide comprehensive planning, resource allocation and evaluation processes for state and local services for [the mentally ill, mentally retarded and developmentally disabled] PERSONS WITH MENTAL ILLNESS, DEVELOPMENTAL DISABILITIES and those suffering from chemical abuse or dependence, respectively. Such goals and objectives shall:
 - a. be measurable in terms of attainment;

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- b. be communicated to providers of services, department facilities, consumers and consumer representatives, and other appropriate state and local governmental agencies;
- 19 c. require that all state and local public and private services for 20 [the mentally disabled] PERSONS WITH MENTAL DISABILITIES be organized, 21 staffed and financed to best meet the needs of all [mentally disabled]

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets [] is old law to be omitted.

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 persons WITH MENTAL DISABILITIES whether receiving in-patient or non in-patient services;

- d. reflect the partnership between state and local governmental units; and
- e. emphasize that gaps in services be filled and that services are provided to [the multiply disabled] PERSONS WITH MENTAL DISABILITIES.
- S 3. Subdivision (a) of section 5.09 of the mental hygiene law, as added by chapter 978 of the laws of 1977, is amended to read as follows:
- (a) The facilities development corporation shall be entitled to exclusive possession, jurisdiction, supervision and control of all real property held for facilities operated by any of the offices of the department, such facilities being defined as mental hygiene facilities by section three of the facilities development corporation act, to exclusive possession, jurisdiction, supervision and control of such facilities, and to all payments made for the care, maintenance and treatment of patients at such facilities; provided, however, that the directors of the said corporation shall make all such property and all such facilities available to the commissioners and offices of the department of mental hygiene for use in the care, maintenance, and treatment of the mentally disabled.

The provisions of this section shall not be applicable to community mental health and [retardation] DEVELOPMENTAL DISABILITIES facilities as defined in section three of the facilities development corporation act or to payments made for the care, maintenance and treatment of patients at such community mental health and [retardation] DEVELOPMENTAL DISABILITIES facilities.

- S 4. Subdivisions (c) and (g) of section 7.09 of the mental hygiene law, subdivision (c) as amended by chapter 440 of the laws of 1987 and subdivision (g) as amended by chapter 601 of the laws of 2007, are amended to read as follows:
- (c) The commissioner shall administer the forensic psychiatric program of the office. Commitments to the commissioner of mental hygiene pursuant to the provisions of the criminal procedure law and the correction law shall be deemed to be commitments to the custody of the commissioner of mental health or the commissioner of [mental retardation and] developmental disabilities, as appropriate. The commissioner of mental health shall arrange with the commissioner of [mental retardation and] developmental disabilities for the placement, where appropriate, of any such committed person in a school.
- (g) The commissioner shall work cooperatively with the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities and the commissioner of the office of temporary and disability assistance to assist the commissioner of education in furnishing integrated employment services to individuals with severe disabilities, including the development of an integrated employment implementation plan, pursuant to article twenty-one of the education law.
- S 5. Subdivision (b) of section 7.31 of the mental hygiene law, as added by chapter 978 of the laws of 1977, is amended to read as follows:
- (b) The provisions of this section shall not be applicable to community mental health and [retardation] DEVELOPMENTAL DISABILITIES facilities, as defined in section three of the facilities development corporation act, nor to payments made for the care, maintenance, and treatment of patients at such community mental health and [retardation] DEVELOPMENTAL DISABILITIES facilities.

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S 6. Subdivisions (a) and (b) of section 7.38 of the mental hygiene law, as amended by chapter 405 of the laws of 1998, are amended to read as follows:

- The office shall, in consultation with the department of social services, the education department, the office [of mental retardation FOR PEOPLE WITH developmental disabilities, and the council on children and families, develop a plan and implement procedures to help assure that all persons who are at the age or time to first qualify for transitional care as described in section 7.37-a of this article, whom the office has accepted planning responsibilities, receive assistance in locating an appropriate and available residential placement or plan of services, within the state and within the system of care subject to the jurisdiction of the office, prior to the age or time at which they would otherwise have qualified for transitional care, if such individual had become twenty-one or become ineligible for educational services prior to July first, nineteen hundred ninety-six. For purposes of this section, the age or time at which a person would qualify for transitional care is twenty-one for persons in foster care, and the end of the school year in which they become twenty-one for persons in residential schools.
- The office shall, in consultation with the department of social services, the education department, the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities, and the council on children and families, develop a plan and implement procedures to help assure that all persons in transitional care receive assistance in locating appropriate and available placements or services within the adult care systems supervised or funded by the office, and to monitor the health and safety of persons receiving transitional funding pursuant to section 7.37-a of this article. In connection with the plans procedures, the office shall establish standards governing the quality of care provided to such persons by the residential programs, including standards relating to the development and monitoring of written individual services plans for each such person, the involvement of the individual and, unless the individual objects, parents, guardians or other persons interested in the care of such persons in the development of written individual services plans, and the investigation of complaints relating to the quality of care or services provided to such persons. In appropriate circumstances, the office shall work with the individual and, unless the individual objects, the parents, guardians or other family members to help determine what services would be necessary to enable the family to provide care for the person at their home or in an independent community setting, and shall provide or assist in arranging for those services to the extent funds are available for that purpose.
- S 6-a. The title heading of title C of the mental hygiene law, as added by chapter 978 of the laws of 1977, is amended to read as follows: [MENTAL RETARDATION AND] DEVELOPMENTAL DISABILITIES ACT
- S 7. The first and second undesignated paragraphs of section 13.01 of the mental hygiene law, as amended by chapter 676 of the laws of 1994, are amended to read as follows:

The state of New York and its local governments have a responsibility for the prevention and early detection of [mental retardation and] developmental disabilities and for the comprehensively planned provision of services including care, treatment habilitation and rehabilitation of their citizens with [mental retardation and] developmental disabilities.

Therefore, it shall be the policy of the state to conduct research and to develop programs to further the prevention and early detection of

[mental retardation and] developmental disabilities; to develop a comprehensive, integrated system of services which has as its primary purposes the promotion and attainment of independence, inclusion, individuality and productivity for persons with [mental retardation and] developmental disabilities; to serve the full range of needs of persons with [mental retardation and] developmental disabilities by expanding the number and types of community based services and developing new methods of service delivery; and to improve the equity, effectiveness and efficiency of services for persons with [mental retardation and] developmental disabilities by serving persons in the community as well as those in developmental centers, by improving the conditions in developmental centers, and by establishing accountability for carrying out the policies of the state with regard to such persons.

S 8. The section heading and subdivisions (a), (c), and (f) of section 13.05 of the mental hygiene law, the section heading as amended and subdivisions (c) and (f) as added by chapter 802 of the laws of 1986, subdivision (a) as amended by chapter 90 of the laws of 1990 and the opening paragraph of subdivision (c) as amended by chapter 168 of the laws of 2010, are amended to read as follows:

[Mental retardation and developmental] DEVELOPMENTAL disabilities advisory council.

- (a) There is hereby established a [mental retardation and] developmental disabilities advisory council. The council shall consist of the commissioner, the chairman of the conference of local mental hygiene directors or his designee, and at least thirty-three members to be appointed by the governor. Members shall be appointed only if they have demonstrated an active interest in or have obtained professional knowledge in the care of persons with [mental retardation or] developmental disabilities or in the field of [mental retardation and] developmental disabilities generally. The governor shall designate one of appointed members as chair. The council shall at all times include in its membership representatives of community service board [mental retardation and] developmental disabilities subcommittees, providers of services and non-governmental organizations concerned with services for [mentally retarded or developmentally disabled] persons WITH DEVELOP-MENTAL DISABILITIES. At least one-third of the membership of the advisory council shall consist of consumer representatives including persons with developmental disabilities, or their parents or guardians.
- (c) The [mental retardation and] developmental disabilities advisory council shall have no executive, administrative or appointive duties. The council shall have the duty to foster public understanding and acceptance of developmental disabilities. It shall, in cooperation with the commissioner of developmental disabilities, establish statewide goals and objectives for services for individuals with developmental disabilities and shall advise the commissioner on matters related to development and implementation of the OPWDD's triennial state developmental disabilities comprehensive plan as required under paragraph two of subdivision (b) of section 5.07 of this chapter. The advisory council shall have the power to consider any matter relating to the improvement of the state developmental disabilities program and shall advise the commissioner of developmental disabilities thereon and on any matter relating to the performance of their duties with relation to individuals with developmental disabilities and on policies, goals, budget and operation of developmental disabilities services.
- 1. The council shall establish such committees as deemed necessary by the chair with advice from the commissioner. Such committees shall

consider matters related to the various service populations served, and programs certified by the office, as well as other matters, including planning, fiscal, and consumer affairs. The council shall prepare and issue such reports on its activities as deemed necessary.

- 2. The council shall meet at least four times in each full calendar year. The council shall meet at the request of its chair or the commissioner.
- (f) The council shall assist the commissioner of [mental retardation and] developmental disabilities with the development and assessment of the triennial state developmental disabilities plan issued by the office. To ensure the full use of existing specialized and generic services in the community, to ensure that all providers and appropriate local governmental agencies are involved, and to ensure that local services to [developmentally disabled] persons WITH DEVELOPMENTAL DISABILITIES and their families are readily available and accessible, the council shall periodically assess the local planning process and make recommendations thereon to the commissioner and to the council for mental hygiene planning.
- S 9. Section 13.06 of the mental hygiene law, as added by chapter 367 of the laws of 1981, is amended to read as follows: S 13.06 Annual plan.

The commissioner shall submit an annual plan to the director of the budget for his review and approval. Such annual plan shall also be filed with the chairman of the assembly ways and means committee and the senate finance committee. Such plan shall identify those community residences to be converted to intermediate care facilities for [the mentally retarded] PERSONS WITH DEVELOPMENTAL DISABILITIES. In developing such plan, the commissioner shall utilize specific criteria, including client eligibility criteria, fiscal criteria and such other relevant criteria as he may deem necessary, to assess the appropriateness of such conversion. The procedures contained in this plan shall be applied on a case by case basis to individual community residential sites. No community residence shall be so converted unless it meets such criteria.

- S 10. Subdivisions (b), (c) and (e) of section 13.07 of the mental hygiene law, subdivisions (b) and (c) as amended by chapter 676 of the laws of 1994 and subdivision (e) as added by chapter 978 of the laws of 1977, are amended to read as follows:
- (b) It shall advise and assist the governor in developing policies designed to meet the needs of persons with [mental retardation and] developmental disabilities and encourage their full inclusion and participation in society.
- (c) The office shall have the responsibility for seeing that persons with [mental retardation and] developmental disabilities specified in the foregoing subdivision are provided with services including care and treatment, that such services are of high quality and effectiveness, and that the personal and civil rights of persons receiving such services are protected. The services provided shall seek to promote and attain independence, inclusion, individuality and productivity for persons with [mental retardation and] developmental disabilities.
- (e) Consistent with the requirements of subdivision (b) of section 5.05 of this chapter, the office shall carry out the provisions of article thirty-one OF THIS CHAPTER as such article pertains to regulation and quality control of services for [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES.

S 11. Subdivisions (a) and (c) of section 13.11 of the mental hygiene law, as added by chapter 978 of the laws of 1977, are amended to read as follows:

- (a) The commissioner shall have the professional jurisdiction, supervision, and control of the office and all department facilities for [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOP-MENTAL DISABILITIES.
- (c) The commissioner may, within the amounts appropriated therefor, lease space or facilities in which services for [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES are to be provided. He may delegate this authority to the facilities development corporation.
- S 12. Section 13.13 of the mental hygiene law, as added by chapter 978 of the laws of 1977, is amended to read as follows: S 13.13 Local services.
- Local services for [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES shall be planned, financed and implemented in accordance with the provisions of article forty-one of this chapter.
- S 13. Subdivision (a) and the opening paragraph of subdivision (c) of section 13.15 of the mental hygiene law, subdivision (a) as amended by chapter 515 of the laws of 1992 and the opening paragraph of subdivision (c) as amended by chapter 552 of the laws of 1978, are amended to read as follows:
- (a) The commissioner shall plan, promote, establish, develop, coordinate, evaluate, and conduct programs and services of prevention, diagnosis, examination, care, treatment, rehabilitation, training, and research for the benefit of individuals [who are mentally retarded and developmentally disabled] WITH DEVELOPMENTAL DISABILITIES. Such programs shall include but not be limited to in-patient, out-patient, partial hospitalization, day care, emergency, rehabilitative, and other appropriate treatments and services. He shall take all actions that are necessary, desirable, or proper to implement the purposes of this chapter and to carry out the purposes and objectives of the office within the amounts made available therefor by appropriation, grant, gift, devise, bequest, or allocation from the mental [hygiene] HEALTH services fund established under section ninety-seven-f of the state finance law.

The commissioner shall prepare annually for the governor, the legislature and the state commission on quality of care for the mentally disabled a written evaluation report concerning the delivery of care and services in family care homes and other community residences and projected plans for providing and improving such homes and residences. Such report concerning family care shall detail efforts to maintain and improve the quality of care for [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES in the family care program including, but not limited to the following:

- S 14. Paragraph 8 of subdivision (a) and paragraph 2 of subdivision (b) of section 13.16 of the mental hygiene law, as added by chapter 720 of the laws of 1979, are amended to read as follows:
- 8. If known, the nature and amount of any interest in, or relationship with, any other residential facility for [the mentally retarded] PERSONS WITH DEVELOPMENTAL DISABILITIES, held by any person named in response to subparagraph (c) of paragraph three of this subdivision or by any affiliate of such person.
- 2. "Controlling person" of any corporation, partnership or other entity means any person who by reason of a direct or indirect ownership

interest (whether of record or beneficial) has the ability, acting either alone or in concert with others with ownership interest, to direct or cause the direction of the management or policies corporation, partnership or other entity. Neither the commissioner nor any employee of the department nor any member of a local legislative of a county or municipality, nor any county or municipal official except when acting as the administrator of a residential facility [the mentally retarded] PERSONS WITH DEVELOPMENTAL DISABILITIES, shall by reason of his or her official position, be deemed a controlling person of any corporation, partnership or other entity nor shall any person who serves as an officer, administrator or other employee of corporation, partnership or other entity or as a member of a board of directors or trustees of any corporation be deemed to be a controlling person of such corporation, partnership or other entity as a result of such position or his or her official actions in such position.

- S 15. Subdivisions (b) and (d) of section 13.17 of the mental hygiene law, subdivision (b) as amended by section 1 of part J of chapter 58 of the laws of 2009 and subdivision (d) as added by chapter 978 of the laws of 1977, are amended to read as follows:
- (b) There shall be in the office the developmental disabilities services offices named below serving the areas either currently or previously served by a school, for the care and treatment of [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOP-MENTAL DISABILITIES and for research and teaching in the science and skills required for the care and treatment of such [mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES:

Bernard M. Fineson Developmental Disabilities Services Office
Brooklyn Developmental Disabilities Services Office
Broome Developmental Disabilities Services Office
Capital District Developmental Disabilities Services Office
Central New York Developmental Disabilities Services Office
Finger Lakes Developmental Disabilities Services Office
Institute for Basic Research in Developmental Disabilities
Hudson Valley Developmental Disabilities Services Office
Metro New York Developmental Disabilities Services Office
Long Island Developmental Disabilities Services Office
Sunmount Developmental Disabilities Services Office
Taconic Developmental Disabilities Services Office
Western New York Developmental Disabilities Services Office

Staten Island Developmental Disabilities Services Office

The New York State Institute for Basic Research in Developmental Disabilities is designated as an institute for the conduct of medical research and other scientific investigation directed towards furthering knowledge of the etiology, diagnosis, treatment and prevention of [mental retardation and] developmental disabilities.

(d) The commissioner may permit other offices of the department and any public or private non-profit organization or political subdivision of the state to operate programs for [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES, not inconsistent with the programs and objectives of the office in any facility under his jurisdiction. The commissioner may permit any facility under his jurisdiction to operate programs for [the mentally disabled] PERSONS WITH MENTAL DISABILITIES, not inconsistent with programs and objectives of the department, under contracts or agreements with other offices within the department.

S 16. Subdivision (a) of section 13.23 of the mental hygiene law, as added by chapter 978 of the laws of 1977, is amended to read as follows:

- (a) The commissioner shall have the power to establish such programs of training and education related to [mental retardation and developmental disability] DEVELOPMENTAL DISABILITIES as he shall deem desirable.
- S 17. Paragraphs a and b of subdivision 1 and paragraph a of subdivision 3 of section 13.24 of the mental hygiene law, as added by chapter 612 of the laws of 1981, are amended to read as follows:
- a. "Sheltered workshops" means a program operated for the purpose of providing sheltered employment to [mentally retarded and developmentally disabled] persons WITH DEVELOPMENTAL DISABILITIES.
- b. "Work activity and day training services" means pre-vocational activities defined by regulation of the commissioner designed to enhance the ability of a [mentally retarded or developmentally disabled] person WITH A DEVELOPMENTAL DISABILITY to receive vocational rehabilitation services.
- a. Provision of equitable funding to all [developmentally disabled and mentally retarded] individuals WITH DEVELOPMENTAL DISABILITIES which is not dependent upon prior residence in facilities of the office.
- S 18. Subdivision (b) of section 13.31 of the mental hygiene law, as added by chapter 978 of the laws of 1977, is amended to read as follows:
- (b) The provisions of this section shall not be applicable to community mental health and [retardation] DEVELOPMENTAL DISABILITIES facilities, as defined in section three of the facilities development corporation act, nor to payments made for the care, maintenance, and treatment of patients at such community mental health and [retardation] DEVELOPMENTAL DISABILITIES facilities.
- S 19. Subdivision (a) of section 13.33 of the mental hygiene law, as amended by chapter 663 of the laws of 1995, is amended to read as follows:
- (a) Each developmental disabilities services office under the jurisdiction of the commissioner shall have a board of visitors consisting of least seven but not more than fourteen members; provided, however, that the Central New York developmental disabilities services office shall have a board of visitors consisting of at least ten, but not more than seventeen members; and that the Finger Lakes developmental disabilities services office shall have a board of visitors consisting of at least fourteen, but not more than twenty-one members. When a school is replaced by a developmental disabilities services office, the members of that school's board of visitors shall continue to serve their terms as the board of visitors for the new developmental disabilities services office. Members appointed or reappointed after the effective date of this chapter shall be appointed by the governor, by and with the advice and consent of the senate. Members shall be appointed for four year terms to expire on the thirty-first day of December of the fourth year of the term of office provided however, when more than three terms expire in any one year, members may be appointed for terms of fewer years as designated by the governor so that no more than three members' terms expire in any one year. All terms of office shall expire on the thirty-first day of December of the designated year. A member whose term has expired shall, however, remain in office until such member's successor has been appointed and has taken office, or until such member shall have resigned or have been removed from office in the manner hereinafter Should any member resign or be removed from office, the governor shall promptly submit, for senate consent, a successor candi-

date to fill the remaining term of the vacated office. A visitor may be removed by the governor for cause after notice and an opportunity for hearing on the charges. In making appointments to boards of visitors, governor shall endeavor to ensure that the membership of each such board shall adequately reflect the composition of the community or communities served by the facility, that the membership of each such board includes at least three individuals who are parents or relatives patients or of former patients and that the remainder includes only those persons, including former patients, who shall have expressed an active interest in, or shall have obtained professional knowledge in the [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES or in [mental retardation and] develop-mental disability endeavors generally.

- S 20. The section heading of section 13.37 of the mental hygiene law, as amended by chapter 508 of the laws of 2008, is amended to read as follows:
- Powers of the office and commissioner in relation to the planning and referral of [mentally retarded and developmentally disabled] children WITH DEVELOPMENTAL DISABILITIES for adult services.
- S 21. The second undesignated paragraph of section 15.01 of the mental hygiene law, such section as renumbered by chapter 978 of the laws of 1977, is amended as follows:
- "in need of care and treatment" means that a person [is mentally retarded] HAS A DEVELOPMENTAL DISABILITY and would benefit from care and treatment as a resident in a school.
- S 22. Section 15.03 of the mental hygiene law, as amended by chapter 296 of the laws of 1996, is amended to read as follows: S 15.03 Admission to a school.

Unless otherwise specifically provided for by statute, a [mentally retarded] person WITH A DEVELOPMENTAL DISABILITY shall be admitted to a school as a resident only pursuant to the provisions of this article. The section of the mental hygiene law under which the resident is admitted or under which any change of legal status is subsequently effected, shall be stated in the resident's record. For the purposes of this article, a school does not include a facility licensed as an intermediate care facility, a community residence, or a family care home, except when such a facility is specifically designated as a school by the commissioner.

- S 23. Paragraph 1 of subdivision (a) and subdivision (b) of section 15.05 of the mental hygiene law, such section as renumbered by chapter 978 of the laws of 1977, are amended to read as follows:
- 1. if he is a relative of the person applying for the admission or of the person alleged to [be mentally retarded] HAVE A DEVELOPMENTAL DISABILITY.
- (b) A certificate, as required by this article, must show that the person [is mentally retarded] HAS A DEVELOPMENTAL DISABILITY and shall be based on an examination of the person alleged to [be mentally retarded] HAVE A DEVELOPMENTAL DISABILITY made within six months prior to the date of admission. The date of the certificate shall be the date of such examination. All certificates shall contain the facts and circumstances upon which the judgment of the examiners is based and shall show that the condition of the person examined is such that he needs care or treatment in a school and such other information as the commissioner may by regulation require.

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S 24. Subdivision (b) of section 15.13 of the mental hygiene law, as amended by chapter 789 of the laws of 1985, is amended to read as follows:

If such voluntary resident gives notice in writing to the director of the resident's desire to leave the school, the director shall promptly release the resident; provided, however, that if there are reasonable grounds for belief that the resident may be in need of involuntary care and treatment, the director may retain the resident for a period not to exceed seventy-two hours from receipt of such notice. Before the expiration of such seventy-two hour period, the director shall either release the resident or apply to a court of record in the county where the school is located for an order authorizing the involuntary retention of such resident. The application and proceedings in connection therewith shall be in the manner prescribed in this article for a court authorization to retain an involuntary resident, except that notice of such application shall be served forthwith and, if a hearing be demanded, the date for hearing to be fixed by the court shall be at a time not later than three days from the date such notice has been received by the court. If it be determined by the court that the resident [is mentally retarded] HAS A DEVELOPMENTAL DISABILITY and IS in need of retention for involuntary care and treatment in the school, court shall forthwith issue an order authorizing the retention of such resident for care and treatment in the school, or, if requested by the resident, his guardian, or committee, such other non-public school as may be within the financial means of the resident, for a period not exceeding sixty days from the date of such order. Further applications for retention of the resident for periods not exceeding one year, successive two year periods thereafter, respectively, may thereafter be made in accordance with the provisions of this article.

In the case of a resident under eighteen years of age, such notice requesting release of the resident may be given by the resident, by the person who made application for his admission, by a person of equal or closer relationship to the resident, or by the mental hygiene legal service. If such notice be given by any other person, the director may in his discretion refuse to discharge the resident and, in the event of such refusal, such other person or the mental hygiene legal service may apply to the supreme court or to a county court for the release of the resident.

- S 25. Paragraph 1 of subdivision (a) of section 15.15 of the mental hygiene law, such section as renumbered by chapter 978 of the laws of 1977, is amended to read as follows:
- 1. that the school to which he is requesting admission is a school for [the mentally retarded] PERSONS WITH DEVELOPMENTAL DISABILITIES.
- S 26. Subdivision (a) of section 15.19 of the mental hygiene law, such section as renumbered by chapter 978 of the laws of 1977, is amended to read as follows:
- (a) It shall be the duty of all state and local officers having duties to perform relating to [the mentally retarded] PERSONS WITH DEVELOP-MENTAL DISABILITIES to encourage any such person suitable therefor and in need of care and treatment for [mental retardation] A DEVELOPMENTAL DISABILITY to apply for admission as a voluntary resident.
- S 27. Subdivisions (a) and (c) of section 15.25 of the mental hygiene law, subdivision (c) as amended by chapter 789 of the laws of 1985 and such section as renumbered by chapter 978 of the laws of 1977, are amended to read as follows:

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- (a) The director of any school may receive and retain therein as a resident any person in need of care and treatment who does not object thereto and who is so profoundly or severely [mentally retarded] DEVEL-OPMENTALLY DISABLED that he does not have sufficient understanding to make him suitable for admission as a voluntary resident upon an application, accompanied by a certificate of an examining physician or certified psychologist. The application shall conform to the requirements for an application set forth in section [33.27] 15.27 OF THIS ARTICLE. The certificate of the examining physician or certified psychologist, in addition to the other requirements for such certificate set forth in this article, must show that the person sought to be admitted meets the requirements of this section.
- (c) If notice in writing that the resident be released from the school is given to the director by the resident or any person on his behalf or by the mental hygiene legal service, the director shall promptly release the resident; provided, however, that, if there are reasonable grounds for belief that the resident may be in need of involuntary care treatment, the director may retain the resident for a period not to exceed seventy-two hours from the receipt of such notice. Before the expiration of such seventy-two hour period, the director shall either release the resident or apply to a court of record in the county where the school is located for an order authorizing the involuntary retention such resident. The application and proceedings in connection therewith shall be in the manner prescribed in this article for a court authorization to retain an involuntary resident, except that notice of such application shall be served forthwith and, if a hearing be demanded, the date for hearing to be fixed by the court shall be at a time not later than three days from the date such notice has been received by the court. If it be determined by the court that the resident [is mentally retarded] HAS A DEVELOPMENTAL DISABILITY and IS in need of retention for involuntary care and treatment in the school, the court shall forthwith issue an order authorizing the retention of such resident for care and treatment in the school for a period not exceeding sixty days from the date of such order. Further applications for retention of the resident for periods not exceeding one year, successive two year periods thereafter, respectively, may thereafter be made in accordance with the provisions of this article.
- S 28. Subdivision (a), paragraphs 1 and 4 of subdivision (b) and subdivision (c) of section 15.27 of the mental hygiene law, paragraph 4 of subdivision (b) as amended by chapter 7 of the laws of 2007 and such section as renumbered by chapter 978 of the laws of 1977, are amended to read as follows:
- (a) The director of a school may receive and retain therein as a resident any person alleged to [be mentally retarded] HAVE A DEVELOPMENTAL DISABILITY and BE in need of involuntary care and treatment upon the certificates of two examining physicians or of one examining physician and one certified psychologist, accompanied by an application for the admission of such person. The examination may be conducted jointly but each examiner shall execute a separate certificate.
- 1. any person with whom the person alleged to [be mentally retarded] HAVE A DEVELOPMENTAL DISABILITY resides.
- 4. an officer of any well recognized charitable institution or agency or home including but not limited to the superintendent of a correctional facility, as such term is defined in paragraph (a) of subdivision four of section two of the correction law, in whose institution the

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person alleged to [be mentally retarded] HAVE A DEVELOPMENTAL DISABILITY resides.

- (c) Such application shall contain a statement of the facts upon which the allegation of [mental retardation] DEVELOPMENTAL DISABILITY and need for care and treatment are based and shall be executed under penalty of perjury but shall not require the signature of a notary public thereon.
- S 29. Paragraph 1 of subdivision (b) of section 15.29 of the mental hygiene law, such section as renumbered by chapter 978 of the laws of 1977, is amended to read as follows:
- 1. the nearest relative of the person alleged to [be mentally retarded] HAVE A DEVELOPMENTAL DISABILITY, other than the applicant, if there be any such person known to the director.
- S 30. Subdivision (c) of section 15.31 of the mental hygiene law, as amended by chapter 789 of the laws of 1985, is amended to read as follows:
- (c) The court which receives such notice shall fix the date hearing at a time not later than five days from the date such notice is received by the court and cause the resident, any other person ing the hearing, the director, the mental hygiene legal service 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 examine the person alleged [be mentally retarded] HAVE A DEVELOPMENTAL DISABILITY if it be deemed advisable in or out of court. If it be determined that the resiin need of retention, the court shall deny the application for the resident's release. If it appears that the relatives of the resident or a committee of his person are willing and able properly to care for him at some place other than a school, then, upon their written consent, the court may order the transfer of the resident to the care and custody such relatives or such committee. If it be determined that the resident is not in need of retention, the court shall order the release of the resident.
- S 31. Section 15.35 of the mental hygiene law, as renumbered by chapter 978 of the laws of 1977, is amended to read as follows:

S 15.35 Review of court authorization to retain an involuntary resident. If a person who has been denied release or whose retention or ued retention has been authorized pursuant to this article, or any relative or friend in his behalf, be dissatisfied with any such order he may, within thirty days after the making of any such order, rehearing and a review of the proceedings already had and of such order upon a petition to a justice of the supreme court other than the justice presiding over the court making such order. Such justice shall cause a jury to be summoned and shall try the question of [mental retardation] DEVELOPMENTAL DISABILITY and the need for retention the resident so authorized to be retained. Any such resident or the person applying on his behalf for such review may waive the trial fact by a jury and consent in writing to trial of such fact by the court. No such petition for rehearing and review may be made by anyone other than the person so authorized to be retained or the father, mother, husband, wife, or child of such person, unless the petitioner have first obtained the leave of the court upon good cause shown. If the the jury, or the decision of the court when jury trial has verdict of been waived, be that such person is not [mentally retarded] DEVELOP-MENTALLY DISABLED or is not in need of retention the justice shall forthwith discharge him, but if the verdict of the jury, or the decision of the court where a jury trial has been waived, be that such person [is

mentally retarded] HAS A DEVELOPMENTAL DISABILITY and IS in need of retention the justice shall certify that fact and make an order author-izing continued retention under the original order. Such order shall be presented, at the time of authorization of continued retention of such [mentally retarded] person WITH A DEVELOPMENTAL DISABILITY, filed with, the director of the school in which the [mentally retarded] person WITH A DEVELOPMENTAL DISABILITY is authorized to be retained, and a copy thereof shall be forwarded to the department by such director and filed in the office thereof. Proceedings under the order shall not be stayed pending an appeal therefrom, except upon an order of a justice of the supreme court, made upon notice and after a hearing, with provisions made therein for such temporary care or confinement of the alleged [mentally retarded] person WITH A DEVELOPMENTAL DISABILITY as may be deemed necessary.

S 32. The section heading, subdivisions (a) and (b) and paragraph 1 of subdivision (c) of section 16.01 of the mental hygiene law, as added by chapter 786 of the laws of 1983 and paragraph 1 of subdivision (c) as added by chapter 234 of the laws of 1998, are amended to read as follows:

Evaluation of services for [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES.

- (a) The commissioner shall ensure that all services provided under this chapter for [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES are periodically evaluated.
- (b) The commissioner shall, by regulations, establish and maintain evaluation criteria and methods which assure the utility of data generated in the evaluation of services in different areas of the state provided under this chapter for [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES, including, but not limited to:
- (1) Uniform definitions of services to [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES;
 - (2) Uniform standards for all comparable services and programs;
 - (3) Uniform financial reporting procedures for comparable providers;
 - (4) Uniform clinical reporting procedures; and
- (5) Requirements for the generation and maintenance of uniform data for all individuals receiving services from any provider of services.
- (1) Notwithstanding any other provision of law, the commissioner, or his designee, may require from any hospital, as defined under article twenty-eight of the public health law, any information, report, or record necessary for the purpose of carrying out the functions, powers and duties of the commissioner related to the investigation of deaths and complaints of abuse, mistreatment, or neglect concerning [mentally retarded or developmentally disabled individuals] PERSONS WITH DEVELOP-MENTAL DISABILITIES who receive services, or had prior to death received services, in a facility as defined in section 1.03 of this chapter, or are receiving medicaid waiver services from the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities in a non-certified setting, and have been treated at such hospitals.
- S 33. Paragraphs 1, 2 and 3 of subdivision (a) of section 16.03 of the mental hygiene law, as added by chapter 786 of the laws of 1983 and paragraph 3 as amended by chapter 555 of the laws 1993, are amended to read as follows:
- (1) Operation of a residential facility for the care and treatment of [the mentally retarded or developmentally disabled] PERSONS WITH DEVEL-OPMENTAL DISABILITIES including a family care home.

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- (2) Operation of any distinct part of a general hospital or other facility possessing an operating certificate, pursuant to article twenty-eight of the public health law, operated for the primary purpose of providing residential or non-residential services for [the mentally retarded or developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES.
- (3) Operation of a facility established or maintained by a public agency, board, or commission, or by a corporation or voluntary association for the rendition of out-patient or non-residential services for [the mentally retarded or developmentally disabled] PERSONS WITH DEVEL-OPMENTAL DISABILITIES; provided, however, that such operation shall not be deemed to include (i) professional practice, within the scope of a professional license or certificate issued by an agency of the state, by an individual practitioner or by a partnership of such individuals or by a professional service corporation duly incorporated pursuant business corporation law or by a university faculty practice corporation duly incorporated pursuant to the not-for-profit corporation law or (ii) non-residential services which are licensed, supervised, or operated by another agency of the state and non-residential services which are chartered or issued a certificate of incorporation pursuant to the education law or (iii) pastoral counseling by a clergyman or minister, those defined as clergyman or minister by section two of the religious corporations law.
- S 34. Subdivision (i) of section 16.05 of the mental hygiene law, as amended by chapter 618 of the laws of 1990, is amended to read as follows:
- (i) In the event that the holder of an operating certificate for a residential facility issued by the commissioner pursuant to this article wishes to cease the operation or conduct of any of the activities, as defined in paragraph one of subdivision (a) of section 16.03 of this article, for which such certificate has been issued or to cease operation of any one or more of facilities for which such certificate has issued; wishes to transfer ownership, possession or operation of the premises and facilities upon which such activities are being conducted or to transfer ownership, possession or operation of any one or more of the premises or facilities for which such certificate has been issued; or elects not to apply to the commissioner for re-certification upon the expiration of any current period of certification, it shall be the duty of such certificate holder to give to the commissioner written notice of such intention not less than sixty days prior to the intended effective date of such transaction. Such notice shall set forth a detailed plan which makes provision for the safe and orderly transfer [mentally retarded or developmentally disabled] person WITH A DEVELOPMENTAL DISABILITY served by such certificate holder pursuant such certificate into a program of services appropriate to such person's on-going needs and/or for the continuous provision of a lawfully operated program of such activities and services at the premises and facilities to be conveyed by the certificate holder. Such certificate holder cease to provide any such services to any such [mentally retarded or developmentally disabled] person WITH A DEVELOPMENTAL DISA-BILITY under any of the circumstances described in this section until the notice and plan required hereby are received, reviewed and by the commissioner. For the purposes of this paragraph, the requirement of prior notice and continuous provision of programs and services by the certificate holder shall not apply to those situations and changes in circumstances directly affecting the certificate holder that

reasonably foreseeable at the time of occurrence, including, but not limited to, death or other sudden incapacitating disability or infirmity. Written notice shall be given to the commissioner as soon as reasonably possible thereafter in the manner set forth within this [paragraph] SUBDIVISION.

- S 35. Subdivision (b) of section 16.11 of the mental hygiene law, as added by chapter 786 of the laws of 1983, is amended to read as follows:
- (b) The commissioner shall have the power to conduct investigations into the operations of any person or entity which holds an operating certificate issued by the office, into the operation of any facility or program issued an operating certificate by the office and into the operations, related to the provision of services regulated by this chapter, of any person or entity providing a residence for one or more unrelated persons [who are mentally retarded or developmentally disabled] WITH DEVELOPMENTAL DISABILITIES.
- S 36. The opening paragraph and subparagraph c of paragraph 1 of subdivision (b) of section 16.17 of the mental hygiene law, as amended by chapter 169 of the laws of 1992, are amended to read as follows:

An operating certificate may be temporarily suspended or limited without a prior hearing for a period not in excess of sixty days upon written notice to the facility following a finding by the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities that a client's health or safety is in imminent danger. Upon such finding and notice, the power of the commissioner temporarily to suspend or limit an operating certificate shall include, but shall not be limited to, the power to:

- c. Suspend or limit or cause to be suspended or limited the payment of any governmental funds to the facility provided that such action shall not in any way jeopardize the health, safety and welfare of any [mentally retarded or developmentally disabled] person WITH A DEVELOPMENTAL DISABILITY in such program or facility;
- S 37. The section heading, subdivisions (a), (c) and paragraphs 1 and 3 of subdivision (d) of section 16.19 of the mental hygiene law, the section heading and subdivision (a) as amended by chapter 91 of the laws of 1993 and subdivision (c) and paragraphs 1 and 3 of subdivision (d) as amended by chapter 356 of the laws of 2006, are amended to read as follows:
- Confinement, care and treatment of [the mentally retarded and develop-mentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES.
- (a) No individual who is or appears to [be mentally retarded or developmentally disabled] HAVE A DEVELOPMENTAL DISABILITY shall be detained, deprived of liberty or otherwise confined without lawful authority, or inadequately, unskillfully, cruelly or unsafely cared for or supervised by any person.
- (c) In addition to any other remedies available under this article, the commissioner may bring an action in the supreme court to enjoin any person from unlawfully subjecting a [mentally retarded or developmentally disabled] person WITH A DEVELOPMENTAL DISABILITY to physical, sexual, or emotional abuse, or active, passive or self neglect, or detaining a [mentally retarded or developmentally disabled] person WITH A DEVELOPMENTAL DISABILITY or providing inadequate, unskillful, cruel or unsafe care or supervision for such a person.
- (1) If, upon receiving a report that any adult thought to have [mental retardation or another] A developmental disability has been subjected to physical, sexual, or emotional abuse, or active, passive or self neglect, and the commissioner has reason to believe that such adult is

known by the commissioner to have received services from providers duly authorized by the commissioner and has been subjected to such abuse or neglect, the commissioner shall intervene pursuant to this section or, if such adult has not received services from said authorized providers, the commissioner shall, immediately or as soon as practicable, notify adult protective services established pursuant to section four hundred seventy-three of the social services law. The commissioner shall, within forty-eight hours, forward copies of reports made pursuant to this subdivision to the state commission of quality of care and advocacy for persons with disabilities and indicate if such report was referred to adult protective services.

- The commissioner and the commissioner of children and family services shall submit a report on the physical, sexual, or emotional abuse, or active, passive or self neglect of adults with [mental retardation or other] developmental disabilities to the governor, temporary president of the senate and speaker of the assembly by January first, two thousand seven, and annually thereafter. In consultation with the commission on quality of care and advocacy for persons with disabilities, the commissioner and the commissioner of children and family services shall include in such report a description of systemic issues; a summary of strategies used for intervening in such cases; an ation of the success of such strategies; an evaluation of the implementation of the memorandum of understanding developed pursuant graph two of this subdivision and the specific status of developmental disabilities services offices and local departments of social services, with respect to entering into an agreement as required by paragraph two of this subdivision; and any recommendations the commissioner believes are necessary to protect adults from abuse or mistreatment. The report shall also include the number of reports and a summary of ations and trends contained in such reports which were:
- a. made to the commissioner pursuant to paragraph one of this subdivision;
- b. not referred to adult protective services, but in response to which the commissioner intervened, and the outcome of such intervention; and
- c. referred to adult protective services pursuant to paragraph one of this subdivision and the outcome of such referral.
- S 38. Subdivision (b) of section 16.29 of the mental hygiene law, as amended by chapter 24 of the laws of 2007, is amended to read as follows:
- (b) The commissioner shall provide necessary assistance to the state commission on quality of care and advocacy for persons with disabilities in the conduct of investigations pursuant to section 45.07 of this chapter, shall consider its recommendations for appropriate preventive and remedial action including legal actions, and shall provide or direct a residential facility licensed or operated by the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities to provide written reports thereon to the commission as to the implementation of plans of prevention and remediation approved by such office.
- S 39. Paragraph 1 of subdivision (a) of section 16.31 of the mental hygiene law, as added by chapter 618 of the laws of 1990, is amended to read as follows:
- 1. For persons residing in family care, community residences or schools for [the mentally retarded] PERSONS WITH DEVELOPMENTAL DISABILITIES, the amount specified in subdivision one of section one hundred thirty-one-o of the social services law.

S 40. The section heading of section 16.35 of the mental hygiene law, as added by section 2 of part F of chapter 58 of the laws of 2007, is amended to read as follows:

[Mental retardation and developmental] DEVELOPMENTAL disabilities services quality improvement demonstration program.

- S 41. Subdivision (b) of section 29.07 of the mental hygiene law is amended to read as follows:
- (b) If the commissioner shall determine that overcrowding exists in the department schools, he may, within the amounts appropriated therefor, authorize admission for care and treatment of any [mentally retarded] person WITH A DEVELOPMENTAL DISABILITY to a designated facility approved for such purposes by the commissioner. The patient and any liable relatives shall be liable for payment of fees in accordance with article forty-three of this chapter.
- S 42. Subparagraph (v) of paragraph 2 of subdivision (b) of section 31.27 of the mental hygiene law, as amended by section 2 of part E of chapter 111 of the laws of 2010, is amended to read as follows:
- (v) a description of local resources available to the program to prevent unnecessary hospitalizations of persons, which shall include agreements with local mental health, health, substance abuse, alcoholism or alcohol abuse, [mental retardation and] developmental disabilities, or social services agencies to provide appropriate services;
- S 43. Paragraph 11 of subdivision (a) of section 33.02 of the mental hygiene law, as amended by chapter 306 of the laws of 1995, is amended to read as follows:
- 11. an individualized plan of treatment or services and to participate in the development of that plan including the opportunity for a patient sixteen years of age or older to request a significant individual to himself or herself including any relative, close friend or individual otherwise concerned with such person's welfare to participate in the development of such plan, except that at comprehensive psychiatric emergency programs such plan shall be in accordance with the commissioner's regulations and the opportunity for participation by a significant individual shall be provided where practicable. For the purposes of this paragraph, a written treatment plan may include the program narrative for clients served by an integrated community certified by the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities;
- S 44. Paragraph 1 of subdivision (d) and paragraphs 1 and 2 of subdivision (e) of section 33.03 of the mental hygiene law, as added by chapter 57 of the laws of 1988 and paragraphs 1 and 2 of subdivision (e) as added by chapter 210 of the laws of 2008, are amended to read as follows:
- 1. Such standards shall take into account the: medical, psychological, social, vocational, educational and recreational needs of patients including the specialized needs of patients such as those whose mental illness is combined with chemical dependency[, mental retardation] or developmental disability. The standards shall also take into account the type and mix of programs required at a given facility, and the availability of programming at a variety of times and locations.

 1. Notwithstanding the provisions of subdivisions four and five of
- 1. Notwithstanding the provisions of subdivisions four and five of section twenty-nine hundred eighty-one of the public health law, the commissioners of health, and [mental retardation and] developmental disabilities may approve and authorize the use of a simplified advance health care directives form by persons receiving supports and services from a provider of services which is authorized to provide services pursuant to article sixteen of this chapter. Such form shall specify, at

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the option of the principal, what end-of-life treatment the person wishes to receive; may designate a health care agent consistent with the 3 article; and may, at the option of the principal, provisions of this authorize the health care agent to commence making decisions immediately upon the execution of the proxy, provided that all such decisions made prior to a determination of incapacity pursuant to section twenty-nine 5 6 7 hundred eighty-three of the public health law shall be made in direct 8 consultation with the principal and the attending physician; and 9 provided, further, that if, after such consultation, the principal disa-10 grees with the agent's proposed decision, the principal's wishes shall 11 prevail; and provided, further, that, in the case of any decision to withhold or withdraw artificial nutrition or hydration, the principal's 12 wishes must have been recorded in the health care directive or stated in 13 14 the presence of the agent and the attending physician; and 15 provided, that the consultation among principal, agent and attending physician must be summarized and recorded in the principal's medical 16 17 record.

- 2. The simplified advance health care directives form, authorized by paragraph one of this subdivision, shall be developed by the commissioner of [mental retardation and] developmental disabilities, in consultation with the commissioner of health, providers of service authorized to provide services pursuant to article sixteen of this chapter, advocates, including self-advocates, and parents and family members of persons receiving services from such providers.
- S 45. Section 33.06 of the mental hygiene law, as added by chapter 192 of the laws of 2010, is amended to read as follows: S 33.06 Reports of abuse or mistreatment.

The commissioner of the office of mental health and the commissioner the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities shall establish procedures or mechanisms to receive allegations or complaints of abuse or mistreatment of individuals served by agencies and providers licensed or operated by the offices, including receipt of anonymous allegations or complaints. Such mechanisms include the operation of a toll-free number. Allegations or complaints received shall be evaluated and, if necessary, referred for appropriate corrective action, consistent with laws, regulations and procedures established for the investigation, resolution and response to incident reports to ensure the care and safety of all patients. The inability of the person reporting the abuse to identify the alleged perpetrator shall, in no circumstance, constitute the sole cause to reject such allegation for investigation or fail to refer such allegation for corrective action. When an allegation of abuse or maltreatment of a child is made, the allegation shall be referred to the statewide central register of child abuse and maltreatment, established pursuant section four hundred twenty-two of the social services law.

- S 46. Subdivisions (f), (h) and (i) of section 33.07 of the mental hygiene law, as added by section 2 of part A of chapter 111 of the laws of 2010, are amended to read as follows:
- (f) The commissioners of mental health, [mental retardation and] developmental disabilities, and alcoholism and substance abuse services shall post on the offices' respective websites, in a prominent location, the applicable standards, regulations and/or policies established pursuant to this section.
- (h) The office of mental health and the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities and mental hygiene legal service shall collaboratively review, at least annually, the management

of funds which a department facility director receives as a representative payee or of funds received pursuant to section 29.23 of this title. In such review, the office of mental health and the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities shall make available final federal reviews regarding facility directors' handling of federal benefits and other related documents to aid the proper conduct of such review.

- (i) The office of mental health and the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities shall, by the fifteenth day of December of each year, commencing on December fifteenth, two thousand eleven, submit and publish on its official website, a report to the governor, speaker of the assembly, temporary president of the senate, chair of the assembly committee on mental health, and the chair of the senate committee on mental health, detailing how persons' federal benefits are being utilized.
- S 47. Subparagraph (ii) of paragraph 13 of subdivision (c) of section 33.13 of the mental hygiene law, as amended by chapter 491 of the laws of 2008, is amended to read as follows:
- (ii) providing information to the criminal justice information services division of the federal bureau of investigation by the commissioner of mental health or the commissioner of [mental retardation and] developmental disabilities, for the purposes of responding to queries to the national instant criminal background check system regarding attempts to purchase or otherwise take possession of firearms, in accordance with applicable federal laws or regulations.
- S 48. Paragraphs 3 and 6 of subdivision (a) and paragraph 2 of subdivision (b) of section 33.16 of the mental hygiene law, paragraph 3 of subdivision (a) as amended by chapter 571 of the laws of 2005, paragraph 6 of subdivision (a) as separately amended by chapters 226 and 233 of the laws of 1991 and paragraph 2 of subdivision (b) as amended by chapter 233 of the laws of 1991, are amended to read as follows:
- 3. "Facility" means a facility as defined in section 1.03 of this chapter, a program requiring approval for operation pursuant to article thirty-two of this chapter, institutions offering training in psychotherapy, psychoanalysis and related areas chartered pursuant to section two hundred sixteen of the education law, or, notwithstanding section 1.03 of this chapter, any provider of services for persons with mental illness[, mental retardation] or developmental disabilities which is operated by, under contract with, receives funding from, or is otherwise approved to render services by, a director of community services pursuant to article forty-one of this chapter or one or both of the offices, including any such provider which is exempt from the requirement for an operating certificate under article sixteen or article thirty-one of this chapter.
- 6. "Qualified person" means any properly identified patient or client, guardian of a [mentally retarded or developmentally disabled] person WITH A DEVELOPMENTAL DISABILITY appointed pursuant to article seventeen—A of the surrogate's court procedure act, or committee for an incompetent appointed pursuant to [article seventy—eight of] this chapter or a parent of an infant, or a guardian of an infant appointed pursuant to article seventeen of the surrogate's court procedure act or other legally appointed guardian of an infant who may be entitled to request access to a clinical record pursuant to paragraph three of subdivision (b) of this section, or a parent, spouse or adult child of an adult patient or client who may be entitled to request access to a

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clinical record pursuant to paragraph four of subdivision (b) of this 2 section.

- Subject to the provisions of subdivision (c) of this section, upon 2. the written request of a committee for an incompetent appointed pursuant to [article seventy-eight of] this chapter or a guardian of the person [mentally retarded or developmentally disabled] person WITH A DEVELOPMENTAL DISABILITY appointed pursuant to article seventeen-A of the surrogate's court procedure act, a facility shall provide an opportunity, within ten days, for the committee or such guardian to inspect any clinical record concerning the patient or client in the possession of such facility. Provided, however, in the case of any such request by such a guardian to inspect the clinical record concerning a client eighteen years of age or older, the facility shall notify such client of such request.
- S 49. Section 41.01 of the mental hygiene law, as amended by chapter of the laws of 1977, the closing paragraph as amended by section 6 of part E of chapter 111 of the laws of 2010, is amended to follows:
- S 41.01 Declaration of purpose.

This article is designed to enable and encourage local governments to develop in the community preventive, rehabilitative, and treatment services offering continuity of care; to improve and to expand existing community programs for [the mentally ill, the mentally retarded and the developmentally disabled] PERSONS WITH MENTAL ILLNESS, DEVELOPMENTAL DISABILITIES, and those suffering from the diseases of alcoholism and substance abuse; to plan for the integration of community and state services and facilities for [the mentally disabled] INDIVIDUALS MENTAL DISABILITIES; and to cooperate with other local governments and with the state in the provision of joint services and sharing of manpower resources.

Effective implementation of this article requires the direction administration, by each local governmental unit, of a local comprehensive planning process for its geographic area in which all providers services shall participate and cooperate in the provision of all necessary information. It also initiates a planning effort involving state, local governments and other providers of service for the purpose of promoting continuity of care through the development of integrated systems of care and treatment for [the mentally ill, mentally retarded and developmentally disabled] INDIVIDUALS WITH MENTAL ILLNESS, DEVELOP-MENTAL DISABILITIES, and for those suffering from the diseases of alcoholism and substance abuse.

- S 50. Subdivisions 3, 4, 6 and 9 of section 41.03 of the mental subdivision 3 as amended by chapter 746 of the laws of hygiene law, 1986, subdivisions 4 and 9 as amended by chapter 223 of the 1992, subdivision 6 as amended by chapter 520 of the laws of 1981 and subdivisions 4, 6 and 9 as renumbered by section 7 of part E of 111 of the laws of 2010, are amended to read as follows:
- 3. "local services" includes services for [the mentally ill, the mentally retarded, the developmentally disabled] INDIVIDUALS WITH MENTAL ILLNESS OR DEVELOPMENTAL DISABILITIES whose conditions, including but limited to cerebral palsy and epilepsy, are associated with mental disabilities, and those suffering from alcoholism, alcohol substance abuse or substance dependence, which are provided by a local government or by a voluntary agency pursuant to a contract with a local governmental unit or the office of mental health.

4. "local facility" means a facility offering local services and includes a community mental health and [retardation] DEVELOPMENTAL DISABILITIES facility as defined in section three of the facilities development corporation act and, for the purposes of this article, a mental hygiene facility, as defined in said section, to be made available for use in providing local services under lease, sublease, license or permit from the facilities development corporation to one or more local governmental units or to a voluntary agency at the request of a commissioner of an office in the department.

- 6. "board" means a community services board for services to [the mentally ill, mentally retarded and developmentally disabled] INDIVID-UALS WITH MENTAL ILLNESS AND DEVELOPMENTAL DISABILITIES, those suffering from alcoholism, alcohol abuse, substance abuse or substance dependence.
- 9. (a) "operating costs" means expenditures, excluding capital costs, incurred in the operation and maintenance of the community mental health, [mental retardation] DEVELOPMENTAL DISABILITIES, and alcoholism services board and of local facilities in accordance with this article and the regulations of the commissioner, by a local government or by a voluntary agency pursuant to a contract with a local governmental unit.
- (b) Subject to the regulations of the commissioner, operating costs shall include that part of rental costs paid to those community mental health, [mental retardation] DEVELOPMENTAL DISABILITIES, alcoholism, or substance abuse services companies, which represents interest accrued after January first, nineteen hundred eighty-one and is paid on obligations incurred by such companies, organized pursuant to article seventy-five of this chapter and which participated in mortgage financing in accordance with chapter one thousand thirty-four of the laws of nineteen hundred sixty-nine, (ii) rentals paid to the facilities development corporation, (iii) salaries of or per diem compensation to board members, (iv) costs for which state aid or reimbursement is claimed under provisions of law other than this article.
- (c) Operating costs may include interest incurred on any obligation which is necessarily related to the efficient and economic delivery of approved services to persons with alcoholism, substance abuse addiction, mental illness or [mental retardation and] developmental disabilities, subject to the commissioner's certification of the reasonableness of the interest expense. Interest as authorized by this subdivision shall only include reasonable and competitive rates of interest incurred in accordance with regulations promulgated by the commissioner.
- (d) Subject to the regulations of the commissioner, operating costs shall include rent incurred, or depreciation and interest expenditures incurred, in connection with the design, construction, acquisition, reconstruction, rehabilitation or improvement of a local facility; provided that where the rent, financing or refinancing of the design, construction, acquisition, reconstruction, rehabilitation or improvement of a local facility is through the facilities development corporation, operating costs shall include the debt service to be paid to amortize obligations, including principal and interest, issued by the New York state medical care facilities finance agency to finance or refinance the capital costs of such facilities.
- S 51. Subdivision (b) of section 41.05 of the mental hygiene law, as amended by chapter 978 of the laws of 1977, is amended to read as follows:
- (b) Each local governmental unit shall have a community services board for services to [the mentally ill, the mentally retarded and developmentally disabled] INDIVIDUALS WITH MENTAL ILLNESS, DEVELOPMENTAL DISA-

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BILITIES and those suffering from alcoholism and substance abuse which shall have separate subcommittees for mental health, [mental retardation and] developmental disabilities, and alcoholism, except that, at the discretion of the local government, a subcommittee for alcoholism and substance abuse may be substituted for a subcommittee for alcoholism.

- S 52. Subdivisions (a) and (b) of section 41.11 of the mental hygiene law, as amended by section 12 of part E of chapter 111 of the laws of 2010, are amended to read as follows:
- (a) In all local governments with a population less than one hundred thousand, community services boards, at the option of the local government, shall have either nine or fifteen members appointed by the local government. In all other local governments, a community services board shall have fifteen members appointed by the local government.

Whenever practicable at least one member shall be a licensed physician and one member shall be a certified psychologist and otherwise at least two members shall be licensed physicians, such members to have demonstrated an interest in the field of services for [the mentally disabled] PERSONS WITH MENTAL DISABILITIES. The other members shall represent the community interest in all the problems of [the mentally disabled] PERSONS WITH MENTAL DISABILITIES and shall include representatives from community agencies for [the mentally ill, the mentally retarded developmentally disabled] PERSONS WITH MENTAL ILLNESS, DEVELOPMENTAL DISABILITIES, and those suffering from alcoholism and substance abuse. The community services board shall have separate subcommittees for mental health, [mental retardation and] developmental disabilities, alcoholism or, at the discretion of the local government, alcoholism and substance abuse. Each separate subcommittee shall have no more than nine members appointed by the local government, except that each subcommittee mental health shall have no more than eleven members appointed by the local government. Three of each such subcommittee shall be members the board. Each separate subcommittee shall be composed of persons who have demonstrated an interest in the field of services for the particular class of mentally disabled and shall include former patients, parents or relatives of such [mentally disabled] persons WITH MENTAL DISABILITIES and community agencies serving the particular class of mentally disabled, except that each subcommittee for mental health shall include at least two members who are or were consumers of mental health services, and at least two members who are parents or relatives of persons with mental illness. Each separate subcommittee shall advise the community services board and the director of community services regarding the exercise of all policy-making functions vested in such board or director, as such functions pertain to the field of services for the particular class of mentally disabled individuals represented by subcommittee. In addition, each subcommittee for mental health shall be authorized to annually evaluate the local services plan, and shall be authorized to report on the consistency of such plan with the needs of persons with serious mental illness, including children and adolescents with serious emotional disturbances. Any such report shall be forwarded annually to the community services board and the director of community services and a copy shall also be sent to the commissioner prior to the submission of the local services plan, provided, however, that the provisions of this paragraph shall not apply to cities of over a million in population.

(b) In cities of over a million a community services board shall consist of fifteen members to be appointed by the mayor. There shall be at least two residents of each county within such cities on the board.

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least one shall be a licensed physician and at least one shall be a certified psychologist. The other members shall represent the community interest in all of the problems of the mentally disabled and shall include representatives from community agencies for [the mentally ill, the mentally retarded and developmentally disabled] PERSONS WITH MENTAL 5 6 AND DEVELOPMENTAL DISABILITIES, and those suffering from alco-7 holism and substance abuse. The community services board shall have 8 separate subcommittees for mental health, [mental retardation and] developmental disabilities, and alcoholism or, at the discretion of 9 10 local government, alcoholism and substance abuse. Each separate subcom-11 mittee shall have no more than nine members appointed by the local government, except that each subcommittee for mental health shall have no more than eleven members appointed by the local government. Three 12 13 members of each such subcommittee shall be members of the board. Each 14 15 separate subcommittee shall be composed of persons who have demonstrated an interest in the field of services for the particular class of mental-16 ly disabled and shall include former patients, parents or relatives of 17 [mentally disabled] persons WITH MENTAL DISABILITIES and community 18 19 agencies serving the particular class of mentally disabled, except that 20 each subcommittee for mental health shall include at least two members 21 who are or were consumers of mental health services, and two members who 22 are parents or relatives of persons with mental illness. Each 23 subcommittee shall advise the community services board and the director 24 of community services regarding the exercise of all policy-making func-25 tions vested in such board or director, as such functions pertain to the 26 field of services for the particular class of [mentally disabled] individuals WITH MENTAL DISABILITIES represented by such subcommittee. 27 28 each subcommittee for mental health shall be authorized to annually evaluate the local services plan, and shall be authorized to 29 30 report on the consistency of such plan with the needs of persons with serious mental illness, including children and adolescents with serious 31 32 emotional disturbances. Any such report shall be forwarded annually to 33 the community services board and the director of community services, and 34 a copy shall also be sent to the commissioner prior to the submission of 35 the local services plan. 36

S 52-a. Subdivisions (a) and (b) of section 41.11 of the mental hygiene law, subdivision (a) as amended by chapter 672 of the laws of 1982 and subdivision (b) as amended by chapter 206 of the laws of 1989, are amended to read as follows:

(a) In all local governments with a population less than one hundred thousand, community services board, at the option of the local government, shall have either nine or fifteen members appointed by the local government. In all other local governments, a community services board shall have fifteen members appointed by the local government.

Whenever practicable at least one member shall be a licensed physician and one member shall be a certified psychologist and otherwise at least two members shall be licensed physicians, such members to have demonstrated an interest in the field of services for the mentally disabled. The other members shall represent the community interest in all the problems of the mentally disabled and shall include representatives from community agencies for [the mentally ill, the mentally retarded and developmentally disabled] INDIVIDUALS WITH MENTAL ILLNESS, DEVELOPMENTAL DISABILITIES, and those suffering from alcoholism and substance abuse. The community services board shall have separate subcommittees for mental health, [mental retardation and] developmental disabilities, and alcoholism or, at the discretion of the local government, alcoholism and

 substance abuse. Each separate subcommittee shall have no more than nine members appointed by the local government. Three of each such subcommittee shall be members of the board. Each separate subcommittee shall be composed of persons who have demonstrated an interest in the field of services for the particular class of mentally disabled and shall include former patients, parents or relatives of such mentally disabled persons and community agencies serving the particular class of mentally disabled. Each separate subcommittee shall advise the community services board and the director of community services regarding the exercise of all policy-making functions vested in such board or director, as such functions pertain to the field of services for the particular class of [mentally disabled] individuals WITH MENTAL DISABILITIES represented by such subcommittee. Provided however that the provisions of this paragraph shall not apply to cities of over a million in population.

- In cities of over a million a community services board shall consist of fifteen members to be appointed by the mayor. There shall least two residents of each county within such cities on the board. At least one shall be a licensed physician and at least one shall be a certified psychologist. The other members shall represent the community interest in all of the problems of [the mentally disabled] PERSONS MENTAL DISABILITIES and shall include representatives from community agencies for [the mentally ill, the mentally retarded and mentally disabled] PERSONS WITH MENTAL ILLNESS, DEVELOPMENTAL DISABILI-TIES, and those suffering from alcoholism and substance abuse. community services board shall have separate subcommittees for mental health, [mental retardation and] developmental disabilities, holism or, at the discretion of the local government, alcoholism and substance abuse. Each separate subcommittee shall have no more than nine members appointed by the local government. Three members of subcommittee shall be members of the board. Each separate subcommittee shall be composed of persons who have demonstrated an interest field of services for the particular class of mentally disabled and shall include former patients, parents or relatives of such [mentally disabled] persons WITH MENTAL DISABILITIES and community agencies serving the particular class of mentally disabled. Each separate subcommittee shall advise the community services board and the director of community services regarding the exercise of all policy-making functions vested in such board or director, as such functions pertain to the field of services for the particular class of [mentally disabled individuals] PERSONS WITH MENTAL DISABILITIES represented by such subcommittee.
- S 53. Paragraph 5 of subdivision (c) of section 41.34 of the mental hygiene law, as amended by chapter 1024 of the laws of 1981, is amended to read as follows:
- (5) In the event the municipality objects to establishment of a facility in the municipality because to do so would result in such a concentration of community residential facilities for [the mentally disabled] PERSONS WITH MENTAL DISABILITIES or combination of such facilities and other facilities licensed by other state agencies that the nature and character of areas within the municipality would be substantially altered; or the sponsoring agency objects to the establishment of a facility in the area or areas suggested by the municipality; or in the event that the municipality and sponsoring agency cannot agree upon a site, either the sponsoring agency or the municipality may request an immediate hearing before the commissioner to resolve the issue. The commissioner shall personally or by a hearing officer conduct such a hearing within fifteen days of such a request.

 In reviewing any such objections, the need for such facilities in the municipality shall be considered as shall the existing concentration of such facilities and other similar facilities licensed by other state agencies in the municipality or in the area in proximity to the site selected and any other facilities in the municipality or in the area in proximity to the site selected providing residential services to a significant number of persons who have formerly received in-patient mental health services in facilities of the office of mental health or the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities. The commissioner shall sustain the objection if he determines that the nature and character of the area in which the facility is to be based would be substantially altered as a result of establishment of the facility. The commissioner shall make a determination within thirty days of the hearing.

S 54. The opening paragraph of subdivision (b) of section 41.35 of the mental hygiene law, as amended by chapter 658 of the laws of 1977, is amended to read as follows:

The demonstration programs required to be developed pursuant to this section shall include at least one single system program for comprehensive services for all mentally disabled persons or all services to one or more of the following classes of mentally disabled: [the mentally ill; the mentally retarded and developmentally disabled] PERSONS WITH MENTAL ILLNESS, A DEVELOPMENTAL DISABILITY; those suffering from alcohol abuse or alcoholism; or alcoholics, alcohol abusers and substance abusers. Such comprehensive services provided pursuant to a single system program shall be provided by a local governmental unit or group of local government units or an approved non-governmental agent or a combination of providers of service and a local governmental unit or units.

- S 55. Subdivision (d) of section 41.36 of the mental hygiene law, as amended by section 18 of part E of chapter 111 of the laws of 2010, is amended to read as follows:
- (d) Each local governmental unit shall include in its annual local plan a review of existing community residential facilities providing reimbursable services and a recommendation of anticipated needs for the development of such facilities, consistent with the needs of [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOP-MENTAL DISABILITIES within the jurisdiction of the local governmental unit.
- S 56. The opening paragraph of subdivision (a) of section 41.37 of the mental hygiene law, as amended by chapter 218 of the laws of 1988, is amended to read as follows:

The commissioner of the office of mental health or the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities is authorized, within appropriations made therefor, to make grants to local governmental units and voluntary nonprofit agencies developing a community residence as defined in subdivision twenty-eight of section 1.03 of this chapter. The commissioner of the office of mental health is authorized, within appropriations made therefor, to make grants to voluntary nonprofit agencies developing a residential treatment facility for children and youth. Such grants shall be limited to the development costs incurred prior to the operation of a community residence or a residential treatment facility for children and youth, or for development costs incurred to expand the capacity to provide services at such residences and facilities.

S 57. The opening paragraph of section 41.40 of the mental hygiene law, as added by chapter 445 of the laws of 1989, is amended to read as follows:

The commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities is directed to submit to the governor and the legislature no later than January first, nineteen hundred ninety-one, a report and recommendations of actions necessary to encourage the development of small community residential programs including programs of ten beds or less. Such report and recommendations shall consider:

- S 58. The section heading, subdivision 1 and paragraph (p) of subdivision 2 of section 41.41 of the mental hygiene law, as added by chapter 225 of the laws of 1984, are amended to read as follows:
- Rights of [mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES.
- 1. Each person who resides in a community residence has the same basic and legal rights as all other persons of the same age. Such rights are in no way diminished by the fact that such persons who [are mentally retarded or otherwise developmentally disabled] HAVE A DEVELOPMENTAL DISABILITY live in a community residence.
- (p) The right to vote; and the right to participate in activities that educate [the mentally retarded and developmentally disabled] PERSONS WITH DEVELOPMENTAL DISABILITIES in their civic responsibilities.
- S 59. Subdivision (d) of section 41.43 of the mental hygiene law, as amended by chapter 552 of the laws of 1992, is amended to read as follows:
- (d) [mental retardation and] developmental disabilities advisory council created by section 13.05 of this chapter shall establish a committee pursuant to the provisions of paragraph one of subdivision (c) section 13.05 of this chapter, comprised of members selected by the commissioner, to be called the committee on family support services. The committee shall (i) provide information to the commissioner on the needs of families caring at home for a family member with a developmental disability; (ii) advise the commissioner on policies related to family supports and services; and (iii) offer advice to the commissioner on the implementation and monitoring of family support services. the committee shall include persons with a developmental disability, family members of persons with a developmental disability, and professionals and others with an interest in the care of persons with developmental disabilities. A majority of the committee shall family members of persons with developmental disabilities. Members shall only receive reimbursement for expenses incurred in connection with their duties on the committee.
- S 60. Subdivisions 4, 5, 6, 9 and 12 of section 43.04 of the mental hygiene law, subdivision 4 as amended and subdivision 12 as added by chapter 41 of the laws of 1992 and subdivisions 5, 6 and 9 as added by chapter 938 of the laws of 1990, are amended to read as follows:
- 4. Gross receipts received from all services rendered within the service categories set forth in subdivision one of this section shall include, without limitation, all monies received on account of such services pursuant to rates of reimbursement established by the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities and paid by the state, and shall not include, subject to the provisions of subdivision twelve of this section, charitable contributions, grants, donations, bequests and income from non-service related fund raising activities and governmental deficit financing.

5. Estimated payments by or on behalf of providers of services to the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities of funds due from the assessments pursuant to subdivision two of this section shall be made on a monthly basis. Estimated payments shall be due on or before the fifteenth day following the end of a calendar month to which an assessment applies.

- 6. (a) If an estimated payment made for a month to which an assessment applies is less than seventy percent of an amount the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities determines is due, based on evidence of prior period moneys received by a provider of services or evidence of moneys received by such provider of services for that month, such commissioner may estimate the amount due from such provider of services and may collect the deficiency pursuant to paragraph (c) of this subdivision.
- (b) If an estimated payment made for a month to which an assessment applies is less than ninety percent of an amount the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities determines is due, based on evidence of prior period moneys received by a provider of service or evidence of monies received by such provider of services for that month, and at least two previous estimated payments within the preceding six months were less than ninety percent of the amount due, based on similar evidence, such commissioner may estimate the amount due from such provider of services and may collect the deficiency pursuant to paragraph (c) of this subdivision.
- (c) Upon receipt of notification from the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities of a provider of service's delinquency under this section, the comptroller or a fiscal intermediary designated by the director of the budget, or the commissioner of social services, shall withhold from the amount of any payment to be made by the state to a provider of services the amount of the deficiency determined under paragraph (a) or (b) of this subdivision or paragraph (d) of subdivision seven of this section. Upon withholding such amount, the comptroller or a designated fiscal intermediary, or the commissioner of social services, shall pay the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities, or his designee, such amount withheld on behalf of the provider of services.
- (d) The commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities shall provide a provider of services with notice of any estimate of an amount due for an assessment pursuant to paragraph (a) or (b) of this subdivision or paragraph (d) of subdivision seven of this section at least three days prior to collection of such amount by such commissioner. Such notice shall contain the financial basis for such commissioner's estimate.
- (e) In the event a provider of services objects to an estimate by the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities pursuant to paragraph (a) or (b) of this subdivision or paragraph (d) of subdivision seven of this section of the amount due for an assessment, the provider of services, within sixty days of notice of an amount due, may request a hearing. If a hearing is requested, such commissioner shall provide the provider of services an opportunity to be heard and to present evidence bearing on the amount due for an assessment within thirty days after collection of an amount due or receipt of a request for a hearing, whichever is later. An administrative hearing is not a prerequisite to seeking judicial relief.

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(f) The commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities may direct that a hearing be held without any request by a provider of services.

- 9. Funds accumulated, including income from invested funds, from the assessments specified in this section, including interest and penalties, shall be deposited by the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities and credited to the general fund.
- 12. Each exclusion of sources of gross receipts received from the assessments effective on or after April first, nineteen hundred ninetytwo established pursuant to this section shall be contingent upon (a) qualification of the assessments for waiver pursuant to federal law and regulation; or (b) consistent with federal law and regulation, not requiring a waiver by the secretary of the department of health and human services related to such exclusion; in order for the assessments under this section to be qualified as a broad-based health care related tax for purposes of the revenues received by the state pursuant to the assessments not reducing the amount expended by the state as medical assistance for purposes of federal financial participation. The commissioner of the office [of mental retardation and] PEOPLE WITH developmental disabilities shall collect the assessments relying on such exclusions, pending any contrary action by the secretary of the department of health and human services. In the event the secretary of the department of health and human services determines that the assessments do not so qualify based on any such exclusion, exclusion shall be deemed to have been null and void as of April first, nineteen hundred ninety-two, and the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities shall collect any retroactive amount due as a result, without interest or penalty provided the provider of services pays the retroactive amount due within ninety days of notice from the commissioner of the office [of retardation and] FOR PEOPLE WITH developmental disabilities to the provider of services that an exclusion is null and void. and penalties shall be measured from the due date of ninety days following notice from the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities to the provider of services.
- S 60-a. Subdivision 7, paragraphs (a) and (b) of subdivision 8 and subdivision 11 of section 43.04 of the mental hygiene law, subdivision 7 as added by chapter 938 of the laws of 1990, the opening paragraph of paragraph (a) and paragraphs (c) and (d) of subdivision 7, paragraph (b) of subdivision 8 and subdivision 11 as amended by chapter 41 of the laws of 1992, paragraph (a) of subdivision 8 as amended by section 21 of subpart D of part V-1 of chapter 57 of the laws of 2009 and paragraphs (b) and (c) of subdivision 11 as amended by section 212 of part A of chapter 389 of the laws of 1997, are amended to read as follows:
- 7. (a) Every provider of services shall submit reports on a cash basis of actual gross receipts received from all services rendered within the services categories set forth in subdivision one of this section to persons with developmental disabilities and operating income for each month as follows:
- (i) for the period January first, nineteen hundred ninety-one through January thirtieth, nineteen hundred ninety-one, the report shall be filed on or before March fifteenth, nineteen hundred ninety-one.
- (ii) for the period January first, nineteen hundred ninety-one through March thirty-first, nineteen hundred ninety-one and each quarter there-

after, the report shall be filed on or before the forty-fifth day after the end of the quarter.

- (b) Every provider of services shall submit a certified annual report on a cash basis of gross receipts received in such calendar year from all services to persons with developmental disabilities and operating income. The reports shall be in such form as may be prescribed by the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities to accurately disclose information required to implement this section.
- (c) Final payments shall be due for all providers of services for the assessments pursuant to subdivision two of this section upon the due date for submission of the applicable quarterly report.
- (d) The commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities may recoup deficiencies in final payments pursuant to paragraph (c) of subdivision six of this section.
- If an estimated payment made for a month to which an assessment applies is less than ninety percent of the actual amount due for month, interest shall be due and payable to the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental bilities on the difference between the amount paid and the amount due from the day of the month the estimated payment was due until of payment. The rate of interest shall be twelve percent per annum or at the rate of interest set by the commissioner of taxation and finance with respect to underpayments of tax pursuant to subsection section one thousand ninety-six of the tax law minus four percentage points. Interest under this paragraph shall not be paid if is less than one dollar. Interest, if not paid by the due date of the following month's estimated payment, may be collected by commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities pursuant to paragraph (c) of subdivision of this section in the same manner as an assessment pursuant to subdivision two of this section.
- (b) If an estimated payment made for a month to which an assessment applies is less than seventy percent of the actual amount due for such month, a penalty shall be due and payable to the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities of five percent of the difference between the amount paid and the amount due for such month when the failure to pay is for a duration of not more than one month after the due date of the payment with an additional five percent for each additional month or fraction thereof during which such failure continues, not exceeding twenty-five percent in the aggregate. A penalty may be collected by such commissioner pursuant to paragraph (c) of subdivision six of this section in the same manner as an assessment pursuant to subdivision two of this section.
- 11. [(b)] (A) The assessment shall not be collected in excess of six million two hundred thousand dollars from providers of services specified in subdivision two of this section for the period of April first, nineteen hundred ninety-seven through March thirty-first, nineteen hundred ninety-eight. The amount of the assessment collected pursuant to subdivision two of this section in excess of six million two hundred thousand dollars for the period of April first, nineteen hundred ninety-seven through March thirty-first, nineteen hundred ninety-eight shall be refunded to providers of services by the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities based on the ratio which a provider of services' assessment for such

period bears to the total of the assessments for such period paid by such providers of services.

- [(c)] (B) The additional assessment shall not be collected in excess of thirty-six million one hundred thousand dollars from providers of services specified in subdivision two of this section for the period of April first, nineteen hundred ninety-seven through March thirty-first, nineteen hundred ninety-eight. The amount of the additional assessment collected pursuant to subdivision two of this section in excess of thirty-six million one hundred thousand dollars for the period of April first, nineteen hundred ninety-seven through March thirty-first, nineteen hundred ninety-eight shall be refunded to providers of services by the commissioner of the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities based on the ratio which a provider of services' additional assessment for such period bears to the total of the additional assessments for such period by such providers of services.
- S 61. Subparagraph e of paragraph 2 and paragraph 9 of subdivision (c), paragraph 1 of subdivision (k) and subdivision (w) of section 45.07 of the mental hygiene law, subparagraph e of paragraph 2 and paragraph 9 of subdivision (c) as amended by chapter 323 of the laws of 2008, paragraph 1 of subdivision (k) as amended by section 6 of part H of chapter 58 of the laws of 2005 and subdivision (w) as added by chapter 536 of the laws of 2005, are amended to read as follows:
- e. upon receipt of such report of child abuse or neglect, commence within twenty-four hours, an appropriate investigation which shall include but not be limited to an evaluation of the residential care facility in which the child resides who is named in the report and a determination of the risk to such child if he or she continues to remain the existing residential care facility as well as a determination of the nature, extent and cause of any condition enumerated in such report and, after seeing to the safety of the child and, to the maximum extent feasible, the other children in the facility forthwith: (i) notify the the report and other persons named in the report in writing of the existence of the report and their respective rights pursuant title six of article six of the social services law in regard to amendment; and (ii) notify the director or operator of the residential facility and the office of mental health, the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities or the office of alcoholism and substance abuse services of the existence of such report including the name of any child alleged to be abused or neglected, the name of the subject of the report of child abuse or neglect, and other information which may be necessary to assure the health and safety of the children in the residential care facility;
- 9. The commission shall prepare an annual report to the governor and legislature on the protection of children in residential care from abuse and neglect, including the implementation of the provisions of this paragraph and other applicable provisions of law, including reports received, results of investigations by types of facilities, remedial actions taken, and efforts undertaken by the office of mental health, the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities, and the office of alcoholism and substance abuse services to provide training pursuant to standards established by such offices pursuant to section 16.29, 31.30 or 32.11 of this chapter.
- 1. Establish an adult home and residence for adults resident advocacy program to assist residents, who have at any time received or are receiving services from a mental hygiene provider, of adult homes and

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residences for adults, as defined in section two of the social services law, where at least twenty-five percent or twenty-five residents, whichever is less, have at any time received or are receiving services from a mental hygiene provider which is licensed, operated or funded by the office of mental health or office [of mental retardation and] FOR PEOPLE WITH developmental disabilities, in understanding their legal rights, and to promote and protect the rights of such residents. Based on the level of appropriations made available therefor, the chair of the commission shall determine the feasibility of establishing such program on a statewide basis or, if not so feasible, the chair, after consultation with the commissioner of the department of health, shall designate those regions in which such program may be established.

- (w) Receive and review reports required pursuant to section 16.19 of this chapter and take any action as required by law. The commission shall also assist the commissioner of [the office of mental retardation and] developmental disabilities in developing and preparing recommendations required by paragraph four of subdivision (d) of section 16.19 of this chapter for submission to the governor, temporary president of the senate and speaker of the assembly.
- S 62. Subdivision (a) of section 45.09 of the mental hygiene law, as amended by section 7 of part H of chapter 58 of the laws of 2005, is amended to read as follows:
- (a) The commission, any member or any employee designated by the chair, must be granted access at any and all times to any mental hygiene facility, or adult home or residence for adults in which at least twenty-five percent or twenty-five residents, whichever is less, have at any time received or are receiving services from a mental hygiene provider which is licensed, operated or funded by the office of mental health, or office [of mental retardation and] FOR PEOPLE WITH developmental disabilities in order to carry out the functions of the commission as provided for by section 45.10 of this article, or part thereof, and to all books, records, and data pertaining to any such facility deemed necessary for carrying out the commission's functions, powers and duties. The commission, any members or any employee designated by chair may require from the officers or employees of such facility or from the commissioners of the offices of the department hygiene or in the case of an adult home or residence for adults, from the officers or employees of an adult home or residence for adults or from the department of health any information deemed necessary for the purpose of carrying out the commission's functions, powers and duties. The commission, any member, or any employee designated by the chair may require from any hospital, as defined under article twenty-eight of public health law, any information, report or record necessary for the purpose of carrying out the functions, powers and duties of the commission related to the investigation of deaths and complaints of abuse or mistreatment concerning patients or former patients of mental hygiene facilities who have been treated at such hospitals, and from any adult care facility as defined in paragraph twenty-one of section two of social services law, such information, report or record, including access to such facility necessary for the purpose of carrying out functions, powers and duties of the commission related to the investigation of deaths, as provided for by section 45.17 of this article, concerning patients of mental hygiene facilities who resided at such residential care facilities at the time of their death or were former residents of such residential care facilities and the commission determines that such information, report or record is necessary for

completion of its investigation. The results of investigations involving such residents of adult care facilities shall be provided promptly to the commissioner of the department of health and shall be treated as a record or personal information within the meaning of section ninety-six of the public officers law and shall not be disclosed except in accord-ance with such section ninety-six. Information, books, records or data which are confidential as provided by law shall be kept confidential by commission and by non-profit organizations receiving contracts pursuant to subdivision (k) of section 45.07 of this article limitations on the release thereof imposed by law upon the party furnishing the information, books, records or data shall apply to commission and such non-profit organizations receiving contracts pursu-ant to subdivision (k) of section 45.07 of this article.

S 63. The opening paragraph of subdivision (a) of section 45.10 of the mental hygiene law, as amended by section 8 of part H of chapter 58 of the laws of 2005, is amended to read as follows:

The commission shall have the following authority with respect to adult homes or residences for adults, as defined by section two of the social services law, where at least twenty-five percent or twenty-five of the residents, whichever is less, are persons who have at any time received or are receiving services from a mental hygiene provider which is licensed, operated or funded by the office of mental health or the office [of mental retardation and] FOR PEOPLE WITH developmental disabilities.

- S 64. Subdivision (a) of section 61.01 of the mental hygiene law is amended to read as follows:
- (a) The commissioner or his authorized representative may receive, use, or distribute federal financial or technical assistance to support construction, research, staffing, or other programs or activities in mental health, [mental retardation,] developmental disabilities, alcoholism, or drug addiction appropriated under federal health, mental health, or [mental retardation] DEVELOPMENTAL DISABILITIES legislation or regulations or under other federal legislation or regulations which provide assistance to the mentally disabled, including but not limited to vocational rehabilitation programs, alcoholism programs, drug addiction programs, poverty programs, or special programs for children or the aged.
- S 65. Section 61.03 of the mental hygiene law is amended to read as follows:
- S 61.03 Department is authorized state agency.

The department shall be the authority, when designated by the governor, to supervise and administer financial or technical assistance as the designee under a state plan or as may be required by federal legislation making such assistance available for programs or activities in mental health, [mental retardation,] developmental disabilities, alcoholism, drug addiction, and other areas under the department's jurisdiction and control.

- S 66. Section 61.05 of the mental hygiene law is amended to read as follows:
- S 61.05 Advancement of state mental health and [mental retardation] DEVELOPMENTAL DISABILITIES programs through intergovernmental cooperation.

The commissioner may promote state programs or activities in mental health, [mental retardation] DEVELOPMENTAL DISABILITIES, alcoholism, drug addiction, and other areas within the scope of the department's activities and may cooperate with the federal government, local govern-

ments, other state governments, other state agencies, and nongovernmental organizations to fulfill the objectives and purposes of this chapter.

- S 67. Subdivision (a) of section 67.03 of the mental hygiene law is amended to read as follows:
- (a) For the purposes of this article any person who resides in the state continuously for one year, and any person under the age of sixteen or any [mentally retarded] person WITH A DEVELOPMENTAL DISABILITY whose parents or persons having legal custody of him have resided in the state continuously for one year, shall be considered a state resident. Residence so acquired continues until the resident has remained away from the state for one year.
- S 68. Section 75.01 of the mental hygiene law is amended to read as follows:
- S 75.01 Short title.

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- This article shall be known and may be cited and referred to as the "community mental health services and [mental retardation] DEVELOPMENTAL DISABILITIES services companies law".
- S 69. Paragraph 5 of subdivision (b) and subparagraph (iii) of paragraph 3 of subdivision (c) of section 75.13 of the mental hygiene law are amended to read as follows:
- 5. To construct, reconstruct, rehabilitate, improve, alter, repair, lease, manage, or operate and otherwise provide community mental health services or [mental retardation] DEVELOPMENTAL DISABILITIES services projects;
- (iii) Enter into any contracts relating to the management or operation of community mental health services or [mental retardation] DEVELOP-MENTAL DISABILITIES services projects;
- S 70. Subdivision (b) of section 80.03 of the mental hygiene law, as amended by chapter 198 of the laws of 2008, is amended to read as follows:
- (b) "A patient in need of surrogate decision-making" means a patient defined in subdivision twenty-three of section 1.03 of this chapter who is: a resident of a mental hygiene facility including a resident of housing programs funded by an office of the department or whose federal funding application was approved by an office of the department or for whom such facility maintains legal admission status therefor; or, receiving home and community-based services for persons with mental disabilities provided pursuant to section 1915 of the federal social security act; or receiving individualized support services; or, case management or service coordination funded, approved, or provided by the office [of mental retardation and] FOR PEOPLE WITH developmental disaand, for whom major medical treatment is proposed, and who is determined by the surrogate decision-making committee to lack the ability to consent to or refuse such treatment, but shall not include minors with parents or persons with legal guardians, committees or conservators who are legally authorized, available and willing to make such health care decisions. Once a person is eligible for surrogate decision-maksuch person may continue to receive surrogate decision-making as authorized by this section regardless of a change in residential status.
- S 71. Paragraph 6 of subdivision (c) of section 81.09 of the mental hygiene law, as amended by chapter 438 of the laws of 2004, is amended to read as follows:
- 6. interviewing or consulting with professionals having specialized knowledge in the area of the person's alleged incapacity including but

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not limited to [mental retardation,] developmental disabilities, alcohol and substance abuse, and geriatrics.

- S 72. Subdivision 2 of section 3 of section 1 of chapter 359 of the laws of 1968 constituting the facilities development corporation act, as amended by chapter 723 of the laws of 1993, is amended to read as follows:
- 7 2. "Community mental health and [retardation] DEVELOPMENTAL DISABILI-8 TIES facility" shall mean a building, a unit within a building, a labo-9 ratory, a classroom, a housing unit, a dining hall, an activities 10 center, a library, or any structure on or improvement to real property, 11 an interest in real property, including an interest in, and proprietary lease from, an organization formed for the purpose of cooperative 12 13 ownership of real property, of any kind or description, including 14 fixtures and equipment which are an integral part of such building, unit 15 or structure or improvement, a walkway, a roadway or a parking lot 16 improvements and connections for water, sewer, gas, electrical, tele-17 phone, heating, air conditioning and other utility services, or a combi-18 nation of any of the foregoing, whether for patient care and treatment 19 or staff, staff family or service use, located in a city, or in a county wholly included within a city, authorized to provide community 20 21 mental health services in accordance with the provisions of 22 [forty-one] 41 of the mental hygiene law, which is utilized or to be utilized for the administration and conduct of programs for [the mental-23 ly ill or the mentally retarded] PERSONS WITH MENTAL ILLNESS OR DEVELOP-24 25 MENTAL DISABILITIES, or both, and for the provision of services 26 for, or utilized or to be utilized in the performance of services benefitting or assisting the care, treatment, rehabilitation or mainte-27 28 nance of persons with mental disabilities, and approved to provide such 29 services, pursuant to a written agreement with the appropriate commissioner of an office of the department of mental hygiene. Nothing in this 30 31 subdivision shall be deemed to supercede the provisions of article 41 of 32 mental hygiene law, where applicable. A community mental health and [retardation] DEVELOPMENTAL DISABILITIES facility shall 33 34 include a residential facility to be operated as a community residence 35 for persons with mental disabilities and a treatment facility for use in the conduct of an alcoholism treatment program or of a substance abuse 36 37 treatment program as defined in the mental hygiene law.
 - S 73. This act shall take effect immediately; provided, however, that:
 - (a) the amendments to subdivision (b) of section 31.27 of the mental hygiene law made by section forty-two of this act shall not affect the repeal of such section and shall be deemed repealed therewith;
 - (b) the amendments to subdivision (e) of section 33.03 of the mental hygiene law made by section forty-four of this act shall take effect on the same date and in the same manner as section 1 of chapter 210 of the laws of 2008 takes effect; and shall not affect the repeal of such subdivision and shall be deemed repealed therewith;
 - (c) the amendments to subdivisions (f), (h) and (i) of section 33.07 of the mental hygiene law made by section forty-six of this act shall not affect the repeal of such subdivisions and shall be deemed repealed therewith; and
 - (d) the amendments to subdivisions (a) and (b) of section 41.11 of the mental hygiene law made by section fifty-two of this act shall be subject to the expiration and reversion of such subdivisions pursuant to section 7 of part R2 of chapter 62 of the laws of 2003, as amended, when

1 upon such date the provisions of section fifty-two-a of this act shall 2 take effect.