

S.F. 2212 -- to Enhance Iowa's Assisted Outpatient Treatment (AOT) Law

Frequently Asked Questions

Q. What is Assisted Outpatient Treatment (AOT)?

A. AOT is a court-ordered, community-based intervention for individuals with serious mental illness (schizophrenia or bipolar disorder) who cannot, on their own, recognize their need for treatment. As a result, they often find themselves caught in the revolving door of hospitalization and/or incarceration. A person under an AOT order receives treatment services in the community to help prevent further psychiatric deterioration.

Q. How does Iowa's current AOT law work?

A. Under current law, a judge may order a person who meets the definition of "seriously mentally impaired" into inpatient or outpatient treatment. "Seriously mentally impaired" includes persons who are *currently* likely to injure themselves or others, cause serious emotional injury to others, or who are gravely disabled.

Q. How would S.F. 2212 enhance Iowa's AOT law?

A. S.F. 2212 would expand the definition of "seriously mentally impaired" to include a person who has "a history of lack of compliance with treatment" and any of the following apply:

- (1) Lack of compliance has been a significant factor in the need for emergency hospitalization.
- (2) Lack of compliance has resulted in one or more acts of seriously physical injury to the person's self or others or an attempt to physically injure the person's self or others.

Expanding the definition to include those with a history of lack of compliance with treatment enables families to get help for a loved one *before* a violent act or threat of violence occurs.

Q. How does a person who meets the definition come to the attention of the court?

A. Any "interested person" may file an application with the clerk of the district court of the county where the person lives.

Q. What due process protections does a person have who is the subject of an application?

A. The person is afforded full due process protections.

Q. What type of treatment does a person who is placed on AOT receive in the community?

A. Each treatment plan is designed around the unique needs of the person, preferably with the person's input. However, intensive case management is a critical component of almost any AOT treatment plan.

Q. What if appropriate outpatient treatment services are not available in the community?

A. If a judge cannot be assured that the appropriate treatment is available in the community, then the judge should not order the person into AOT.

Q. What guarantee is there that the person will receive needed treatment?

A. A significant benefit of AOT is that in addition to ordering the person to participate in treatment, it effectively orders the treatment system to serve the person because the court is now invested in the treatment outcome and is monitoring the provision of care.

Q. What happens if a person does not follow the treatment plan?

A. The treatment provider is required to submit a report to the court every ninety days. If the person fails to adhere to the treatment order the court shall order the person to be hospitalized unless the court finds the refusal is for good cause.

Q. Is AOT ordered in lieu of hospitalization or at discharge from hospitalization?

A. The ideal time to order AOT is as the person is stepping down from a hospital. At this point, the person has been stabilized and can better understand the expectations of the court. However, AOT can also be ordered as an alternative to hospitalization.

Q. Who pays for treatment for a person on AOT?

A. In most instances, a person who meets the criteria for AOT is already on Medicaid and therefore, Medicaid would cover the cost of treatment. If the person has private insurance, the insurance company would be billed, otherwise the mental health and disability services region is responsible for payment.

Q. How frequently is AOT ordered?

A. AOT is intended for that very small number of people who cycle in and out of ERs, hospitals or jails. However, for those individuals, it can often mean the difference between life and death.