



## Certification Page Regular and Emergency Rules

Revised September 2016

**Emergency Rules** (After completing all of Sections 1 through 3, proceed to Section 5 below)

**Regular Rules**

### 1. General Information

a. Agency/Board Name <b>Wyoming Department of Health</b>		
b. Agency/Board Address <b>6101 Yellowstone Road, Suite 220</b>	c. City <b>Cheyenne</b>	d. Zip Code <b>82002</b>
e. Name of Agency Liaison <b>Carol Day</b>	f. Agency Liaison Telephone Number <b>307-777-7110</b>	
g. Agency Liaison Email Address <b>carol.day3@wyo.gov</b>	h. Adoption Date <b>January 30, 2017</b>	
i. Program <b>Wyoming State Hospital</b>		

### 2. Legislative Enactment

For purposes of this Section 2, "new" only applies to regular rules promulgated in response to a Wyoming legislative enactment not previously addressed in whole or in part by prior rulemaking and does not include rules adopted in response to a federal mandate.

a. Are these rules new as per the above description and the definition of "new" in Chapter 1 of the Rules on Rules?

**No.**     **Yes.** Please provide the Enrolled Act Numbers and Years Enacted:

### 3. Rule Type and Information

a. Provide the Chapter Number, Title, and Proposed Action for Each Chapter.

*(Please use the Additional Rule Information form for more than 10 chapters and attach it to this certification)*

Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
6	Designated Hospitals	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
7	Standards for the Designation of Hospitals and Treatment Providers	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
8	Standards for Reimbursement of Designated Hospitals and Treatment Providers	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
9	Convalescent Leave from Involuntary Hospitalization	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
10	Standards for Convalescent Leave	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
11	Directed Outpatient Commitment (Wyo. Stat. Ann. 25-10-110.1)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
12	Exchange of Information under Title 25	<input checked="" type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
		<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
		<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
		<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed

**3. State Government Notice of Intended Rulemaking**

a. Date on which the Proposed Rule Packet (consisting of the Notice of Intent as per W.S. 16-3-103(a), Statement of Principal Reasons, strike and underscore format and a clean copy of each chapter of rules were: **September 25, 2016**

- approved as to form by the Registrar of Rules; and
- provided to the Legislative Service Office and Attorney General:

**4. Public Notice of Intended Rulemaking**

a. Notice was mailed 45 days in advance to all persons who made a timely request for advance notice.  No.  Yes.  N/A

b. A public hearing was held on the proposed rules.  No.  Yes. Please complete the boxes below.

Date:	Time:	City:	Location:

c. If applicable, describe the **emergency** which requires promulgation of these rules without providing notice or an opportunity for a public hearing:

**5. Final Filing of Rules**

a. Date on which the Certification Page with original signatures and final rules were sent to the Attorney General's Office for the Governor's signature: **January 31, 2017**

b. Date on which final rules were approved as to form by the Secretary of State and sent to the Legislative Service Office: **January 31, 2017**

c.  The Statement of Reasons is attached to this certification.

**6. Agency/Board Certification**

The undersigned certifies that the foregoing information is correct.

Signature of Authorized Individual

Printed Name of Signatory

Thomas O. Forslund

Signatory Title

Director, Wyoming Department of Health

Date of Signature

January 30, 2017

**7. Governor's Certification**

I have reviewed these rules and determined that they:

1. Are within the scope of the statutory authority delegated to the adopting agency;
2. Appear to be within the scope of the legislative purpose of the statutory authority; and, if emergency rules,
3. Are necessary and that I concur in the finding that they are an emergency.

Therefore, I approve the same.

Governor's Signature

Date of Signature

# Wyoming State Hospital Rule Promulgation

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## Chapters 6-12 Rules and Regulations for the Wyoming State Hospital Intent to Amend and Adopt New Rules

### Statement of Reasons

The Wyoming Department of Health proposes to adopt the following New and Amended Rules to comply with the provisions of Wyo. Stat. §§ 25-10-110 through -305, 2016 Wyo. Sess. Laws, 404-14, and the Wyoming Administrative Procedure Act, Wyo. Stats. §§ 16-3-101 through -115.

The Department in promulgating these Rules will clarify processes, standards, and payments for when treatment providers, under contract or agreement with the Department, provide services and care to patients court ordered to directed outpatient commitment pursuant to Wyo. Stat. Ann. § 25-10-110.1. Additionally, these Rules will clarify definitions and provisions related to designated hospitals, designated hospital billing, and convalescent leave from the Wyoming State Hospital and designated hospitals. Further, new Rule chapters 11 and 12 clarify provisions related to treatment providers and directed outpatient commitment, as well as provisions for the sharing of patient information under Wyo. Stat. Ann. §§ 25-10-110 through -305.

As required by Wyo. Stat. Ann. §16-3-103(a)(i)(G), these rules and regulations meet minimum substantive state statutory requirements.

Wyoming Department of Health  
Behavioral Health Division

Response to Comments on  
Rules and Regulations for the Wyoming State Hospital  
Chapters 6-12

Comment 1: Chapter 6, Section 4 (f): In conjunction with the definition of “Involuntary hospitalization,” this definition appears to prohibit the placement of a patient in a local hospital that has not executed a contract or agreement with the Department of Health and which does not submit its bills for reimbursement to the Department. If a local hospital chooses not to execute an agreement and not to submit bills to the Department, and if the County has chosen not to enter a transfer agreement with another County, then patients subject to an order for hospitalization would have no place to go except the State Hospital. And the placement of patients in such a local hospital would appear to be unlawful.

Response: Wyo. Stat. Ann. § 25-10-104(a)(iii) requires agreement. The definition of “Designated Hospital” has been clarified to include “under agreement with the Department.” CHANGE MADE.

Comment 2: Chapter 6, Section 4 (m): This definition is mostly irrelevant to Wyo. Stat. §§ 25-10-101 -128 (2015 & Supp. 2016), and it creates confusion in the assessment of “mental illness” and “dangerous to himself or others.” This term does not appear in the statutory definitions of § 101(a), and it is only relevant in the assessment of costs under § 25-10-112. The Rules should clearly state “The “medically necessary” standard is only relevant in the assessment of costs under § 25-10-112, and it shall not be used as a basis for decisions related to detention, hospitalization, discharge, directed outpatient commitment, or release on convalescent leave.

Response: Treatment services are provided within the framework of Wyo. Stat. Ann. § 25-10-109 through - 127 (Title 25). To ensure a patient is provided the most appropriate care in the least restrictive environment, it is necessary to include an expectation of medical necessity when considering the various levels of treatment options available within Title 25, such as hospitalization, directed outpatient commitment, and convalescent leave. NO CHANGE.

Comment 3: Chapter 6, Section 4 (o): Our concern is with subsection (o), which defines a "treatment provider" as "a community mental health center under contract or agreement with the Department to provide outpatient or residential treatment..." By virtue of the substantive provisions in later chapters, this definition excludes a hospital from providing services to an individual under a directed outpatient commitment order. This is problematic from two perspectives:

First, limitation of resources. By limiting treatment providers who can provide services to persons under a directed outpatient commitment order to community mental health centers, the Department has limited the resources available to the patients - and the courts who order the outpatient commitment. For example, in Laramie County, BHS has a large Out Patient Psychiatric Clinic with four psychiatrists, a psychiatric nurse team and numerous therapists available to treat

individuals on an outpatient commitment, compared to Peak Wellness, which has one full-time and one very part-time psychiatrist.

This leads directly to the second concern:

Impact on patient care. Again, the limitation mandates that patients receive treatment from a community mental health center. For some patients, this will mean a break in the continuity of care, since some individuals will already be patients of the outpatient clinic at BHS. I can assure you, having handled hundreds of involuntary hospitalization proceedings during my tenure as Deputy County Attorney, that the patient's counsel and the court are always focused on what is best for the patient- and changing providers simply because of a definitional exclusion in the rules will not sit well with the presiding judge.

The proposed language in Chapter 6, Section 4(o) should be amended to include designated hospitals: A treatment provider should be defined as "a community mental health center or designated hospital under contract or agreement with the Department ...."

I am aware, Mr. Johansson, that you stated, during the October 24 meeting of the Cheyenne Crisis Intervention Training meeting, that the Department must have the treatment provider under contract for purposes of implementing the directed outpatient commitment process. I believe this issue can be resolved, and the Department's needs met, by re-drafting language in Chapter 7, Standards for the Designation of Hospitals and Treatment Providers. Please see discussion, below.

Response: Wyo. Stat. Ann. § 25-10-104 allows the Department to select designated hospitals or other treatment providers which qualify to provide services. In addition to providing outpatient services, community mental health centers (as providers in the public mental health system of care) have access to a range of regional and statewide services such as housing, community-based crisis stabilization, and substance use disorder residential treatment. These centers are already under contract with the Department to provide services, which can be monitored by the Department and include service outcomes and expectations. NO CHANGE.

Comment 4: Chapter 6, Section 4 (o): Read in conjunction with Wyo. Stat. § 25-10-101(a)(xiv), & -110.1(e) (Supp. 2016), this definition appears to prohibit a local hospital, the state hospital, or indeed any entity other than a contracted community mental health center, from administering directed outpatient commitment. In Laramie County, the local hospital is a significant provider of outpatient treatment services, and no reason is apparent for excluding the hospital's outpatient services department from administering directed outpatient commitment. Particularly if a local hospital enters into a contract to serve as a "designated hospital," it should not be frozen out of the opportunity to supervise outpatient commitments.

Response: Wyo. Stat. Ann. § 25-10-104 allows the Department to select designated hospitals or other treatment providers which qualify to provide services. In addition to providing outpatient services, community mental health centers (as providers in the public mental health system of care) have access to a range of regional and statewide services such as housing, community-based crisis stabilization, and substance use disorder residential treatment. These centers are already under contract with the Department to provide services, which can be monitored by the Department and include service outcomes and expectations. NO CHANGE.

Comment 5: Chapter 6, Section 4 (r): Is "volunteer assistance" even considered in W.S. §25-10-109 anymore? This subsection could probably be deleted.

Response: The term "volunteer assistance" is not used in Chapter 7. This definition will be deleted from Chapter 6. CHANGE MADE.

Comment 6: Chapter 6, Section 4: These Rules do not define, or establish the qualifications required to serve as, a "gatekeeper." Requiring a gatekeeper to meet the qualifications of an "examiner," for example might be appropriate.

Response: Gatekeeping will be piloted in several community mental health centers statewide. It is the Department's intent to allow flexibility in implementing gatekeeping, within limitations of Wyo. Stat. Ann § 25-10-112(g), to meet individual county needs and circumstances. The Department may consider additional requirements based on the results of the gatekeeper pilots. NO CHANGE.

Comment 7: Chapter 7, Section 3 (a): Hospitals and treatment providers that have not executed agreements with the Department of Health appear to be excluded from the requirements of this section. In other words, in the absence of executed agreements, the safety and security of patients—and staff, visitors, and persons attending hearings—is not assured.

Response: The Department has no authority to govern hospitals or treatment providers, which do not have an agreement with the Department through these Rules. The safety of persons attending hearings is not addressed in these Rules. NO CHANGE.

Comment 8: Chapter 7, Section 3 (a): Also, there is no apparent enforcement mechanism for these requirements. If the remedy is to withhold an agreement, then the provider would appear to be an unlawful site for "involuntary hospitalization." With the elimination of visitation by Department staff, the guarantee of safety and security appears to be meaningless.

Response: A provision was added in Chapter 7, Section 4 (e) which requires hospitals or treatment providers under contract or agreement with the Department to comply with these rules. CHANGE MADE

Comment 9: Chapter 7, Section 3 (a): This is a very good section, as long as it is enforced. There has been such a bed shortage and no way to force facilities to take aggressive patients. This way, if a provider is a designated hospital, the contract can be crafted to include the necessity for proper facilities for such aggressive patients. Since all the Designated Hospital contracts have been allowed to lapse, there are very few facilities which will accept aggressive patients, and Counties have a difficult time in finding beds. Many such patients end up in jail.

Response: A provision was added in Chapter 7, Section 4 (e) which requires contracts or agreements with hospitals or treatment providers to comply with these rules. CHANGE MADE

Comment 10: Chapter 7, Section 3 (e) and (f): Please add a requirement that the Designated Hospital or treatment provider shall promptly provide documentation, notice, and evidence to the County Attorney's office as well.

Response: Wyo. Stat. Ann. §25-10-116(b) currently provide for notice. These provisions are cited in the Rules. The Department cannot expand these provisions. NO CHANGE.

Comment 11: Chapter 7, Section 4: Again, we renew our concerns that the State should require many, if not most, designated hospitals to include a means to accept aggressive patients. Otherwise, counties are left in a terrible bind trying to find someone to accept such a patient, and that patient is often placed in jail, where they do not receive any treatment.

Response: The Department cannot require a designated hospital or treatment provider to admit persons to whom the hospital or treatment provider cannot provide appropriate care. The Emergency Medical Treatment and Labor ACT (EMTALA) requires hospitals to stabilize individuals presenting at the emergency room, and, if unable to provide appropriate care, transfer the patient to a hospital equipped to meet the needs of the individual. NO CHANGE.

Comment 12: Chapter 7, Section 4: We also ask that the Dept. of Health consult with counties when crafting these individual contracts, to discern each county's needs and concerns.

Response: The Department does not have authority to address individual county needs when developing agreements with designated hospitals. NO CHANGE.

Comment 13: In general, these proposed rules seem to address only the needs of the State and not that of the Counties (Please also see our comments on Chapter 8, below.). The counties are mandated to keep the patient for at least the first 72 hours and are also in need of properly outfitted facilities. The designated hospital is supposed to be in place for both the State and the counties' detainments. The fact that these contracts were all allowed to quietly lapse and that the counties' inquiries regarding renewal of these contracts have fallen on deaf ears for several years has complicated matters. When we had a designated hospital contract in place, Pine Ridge had to take aggressive patients. Now we are left scrambling to find a place for such patients, as their designated hospital contract has lapsed and they no longer must take such patients. Wyoming Behavioral Institute takes aggressive patients sometimes, evaluated on a case-by-case basis. The next nearest facility of which we are aware is in Cheyenne.

Response: The Department is aware of this issue, however, the Department does not have the authority to address individual county needs. The Department will enter into agreements with designated hospitals which will assist counties in assuring appropriate care is provided. NO CHANGE.

Comment 14: Chapter 7, Section 4: Subsection (a) of this section provides that the Department "may enter into a contract or agreement with a designated hospital for the provision of *inpatient* psychiatric treatment ...." The statute upon which this subsection is based, Wyo. Stat. §25-10-104, does not limit the services to inpatient services. In fact, the statute requires the Department to "designate hospitals or other treatment providers which qualify to provide *services* under this act"

and to "enter into contracts or agreements with designated hospitals or other treatment providers for the *treatment of patients with mental illness.*" Wyo. Stat. §25-10-104(a)(ii), (iii). Clearly, the statute does not limit the contracting to the provision of inpatient services, and I would argue the proposed rule inappropriately changes the scope of services anticipated by the Legislature.

Changing the language in subsection (a) to simply state "for the provision of psychiatric treatment" would comply with statutory language, meet the Department's stated need to have providers under contract, and allow designated hospitals to provide services to individuals placed on an out-patient commitment order. NOTE: if this subsection is changed, so also should the language of Chapter 9, Section 4(e) be changed to omit the word "inpatient" from the last sentence of the phrase defining involuntary hospitalization.

Response: Wyo. Stat. Ann. § 25-10-104 allows the Department to select designated hospitals or other treatment providers which qualify to provide services. In addition to providing outpatient services, community mental health centers (as providers in the public mental health system of care) have access to a range of regional and statewide services such as housing, community-based crisis stabilization, and substance use disorder residential treatment. These centers are already under contract with the Department to provide services, which can be monitored by the Department and service outcomes collected. NO CHANGE.

Comment 15: Chapter 7, Section 4 (a) (v): The addition of subparagraph (a)(v) appears to acknowledge the increasing use of hospital emergency rooms to detain and treat mentally ill persons in Wyoming. This practice, known as "psychiatric boarding," is problematic. See Joseph D. Bloom, MD, Psychiatric Boarding in Washington State and the Inadequacy of Mental Health Resources, 43 J. Am. Acad. Psychiatry Law 218–22 (2015) (copy attached).

Response: This provision is in consideration of Critical Access hospitals which admit individuals on a temporary basis until transportation can be arranged to a hospital with psychiatric services or until other diversionary services in the community are arranged. NO CHANGE.

Comment 16: Chapter 8, Section 2 (a): These rules should also be adopted to keep the counties' costs managed. This section only mentions the State.

Response: The Department has no authority to manage costs to counties. However, the Department hopes that savings under these provisions will benefit counties indirectly by improving all services provided by designated hospitals and treatment providers. NO CHANGE

Comment 17: Chapter 8, Section 3 (a): Please include a provision that the same type of documentation must be provided to counties, as we are the ones who begin the process pursuant to W.S. §25-10-109. This subsection only mentions the State. We also ask that the wording include a provision that they provide the documentation required by the relevant county, as we don't necessarily require the same information.

Response: Wording is added in the final rule requiring the same documentation to be provided to the responsible county. The documentation listed is not all-inclusive, therefore, the responsible county can require additional information. CHANGE MADE.



Comment 18: Chapter 8, Section 3 (b) and (c): Please include the counties here as well.

Response: Counties may have differing time lines for submitting claims and the content of those claims. The Department questions its authority to set this standard for counties and declines to set a single standard for all counties. NO CHANGE.

Comment 19: Chapter 8, Section 4: Again, counties are left out of this section, though they should be included.

Response: The Department has no authority to determine the rates to be paid by counties. However, the Department hopes these provisions will benefit counties indirectly by establishing a base rate to be paid by the Department. NO CHANGE.

Comment 20: Chapter 9, Section 4 (d): A hospital that does not bill the Department cannot serve as a designated hospital, and cannot serve as a lawful site of “involuntary hospitalization,” as defined by the Rules. If the local hospital does not bill the Department, if it lacks a contract, and if the county lacks a patient transfer agreement, then a court ordering involuntary hospitalization in that county may only place a patient at the State Hospital.

Response: The requirement for a contract or agreement between the Department and designated hospitals or treatment providers is clear in Wyo. Stat. Ann. § 25-10-104(a)(iii). Therefore, the definition of “Designated Hospital” in Chapter 9, Section 4(d) has been clarified to include “under agreement with the Department.” CHANGE MADE.

Comment 21: Chapter 9, Section 4 (d): These Rules do not define, or establish the qualifications required to serve as, a “gatekeeper.” Requiring a gatekeeper to meet the qualifications of an “examiner,” for example might be appropriate.

Response: Chapter 9 applies only to convalescent leave and is an inappropriate place to address gatekeeping. Gatekeeping will be piloted in several community mental health centers statewide. It is the Department’s intent to allow flexibility in implementing gatekeeping, within limitations of Wyo. Stat. Ann § 25-10-112(g), to meet individual county needs and circumstances. The Department may consider additional requirements based on the results of the gatekeeper pilots. NO CHANGE.

Comment 22: Chapter 9, Section 4 (e): Add “s” to the word “mean.”

Response: This suggestion will be incorporated into the final Rule. CHANGE MADE.

Comment 23: Chapter 10, Section 4 (a) (iii): Change “discharged” to “released.”

Response: This suggestion will be incorporated into the final Rule. CHANGE MADE.

Comment 24: Chapter 10 Section 4 (c) (ii): The Wyoming Supreme Court has questioned the authority of a County Attorney to participate in civil commitment proceedings after a patient is hospitalized, including proceedings related to convalescent leave. See *In re RB*, 294 P.2d 24, 31 (Wyo. 2013); but see, *id.*, at 35 n.4 (declining to address statutory authority for former §§ 4(c)(ii) & (iii)). The

Department's forms should be developed assuming that the county attorneys lack any authority to appear for the state in hearings under this section.

Response: Wyo. Stat. Ann. § 25-10-127 requires notice to the county attorney, which includes a copy of the signed Convalescent Leave Plan. Chapter 9, Section 4(b) (ii) of the Rules specify the requirements to be included in the Convalescent Leave Plan. NO CHANGE.

Comment 25: Chapter 10 Section 5 (a): Delete “Wyoming State Hospital or designated hospital” and insert “the hospital from which the patient was given convalescent leave.”

Response: Wording in Chapter 10 Sections 5 (a), (b), (c), (f), and (g) was clarified to be consistent with Wyo. Stat. Ann. § 25-10-127 (b). CHANGE MADE.

Comment 26: Chapter 10 Section 5 (a): The Wyoming Supreme Court has questioned the authority of a County Attorney to participate in civil commitment proceedings after a patient is hospitalized, including proceedings related to convalescent leave. See *In re RB*, 294 P.2d 24, 31 (Wyo. 2013); but see, *id.*, at 35 n.4 (declining to address statutory authority for former §§ 4(c)(ii) & (iii)). Therefore, it should be assumed that the county attorneys lack any authority to appear for the state in hearings under this section.

Response: Chapter 10 Section 5 (a) does not reference the county attorney. NO CHANGE.

Comment 27: Chapter 10 Section 5 (c): Where is the patient detained pending hearing and/or transportation?

Response: Chapter 10 Section 4 (b) (ii) details the information to be included in the Convalescent Leave Plan, which includes, in subsection E, “The preferred location for detention and the method of detention of the patient if Convalescent Leave is revoked.” NO CHANGE.

Comment 28: Chapter 10, Section 5 (c): Also, within Section 5, the county attorney's office should also be notified of the revocation.

Response: Chapter 10, Section 5 (f) requires the hospital from which the patient was given convalescent leave to provide copies of the Notice of Return from Convalescent Leave filed with the court to “appropriate parties.” The definition of “appropriate parties” in Chapter 9 Section 4 (a) includes the county attorney involved in the involuntary hospitalization procedures for the patient. NO CHANGE.

Comment 29: Chapter 10, Section 5, (c): And finally, If convalescent leave is revoked, may it be reinstated?

Response: There is no prohibition in these Rules which prevents reinstatement of Convalescent Leave. NO CHANGE.

Comment 30: Chapter 10, Section 8 (b): The prohibition of “on-going responsibilities” for the

state hospital staff appears to violate the plain language of Wyo. Stat. § 25-10-127(a)(iii) (Supp. 2016) (requiring “provisions for continuing responsibility”).

Response: The wording in Chapter 10, Section 8 (b) has been changed to state the hospital shall not provide direct care or treatment of the patient while on Convalescent Leave. The hospital will maintain the responsibility for reviewing and monitoring treatment process in Section 8 (a). CHANGE MADE.

Comment 31: Chapter 11: Again, our principal concern with this chapter is the exclusion of an outpatient treatment unit of a hospital from the definition of a treatment provider. Therefore, we respectfully request either that the definition of "treatment provider" in Chapter 6, Section 4(o) to include a designated hospital, or that the references throughout this chapter be changed so that instead of reading "treatment provider," they read "treatment provider *or designated hospital.*"

Response: Wyo. Stat. Ann. § 25-10-104 allows the Department to select designated hospitals or other treatment providers which qualify to provide services. In addition to providing outpatient services, community mental health centers (as providers in the public mental health system of care) have access to a range of regional and statewide services such as housing, community-based crisis stabilization, and substance use disorder residential treatment. These centers are already under contract with the Department to provide services, which can be monitored by the Department and service outcomes collected. NO CHANGE.

Comment 32: Chapter 11, Section 4 (b): The statutory authority for this limitation is not apparent, and it appears to conflict with the express language of Wyo. Stat. § 25-10-112(c) (Supp. 2016), which makes the Department responsible for costs incurred beyond seventy-two hours after “continued emergency detention is ordered pursuant to W.S. 25-10-109(k)(iii).”

Response: Chapter 11, Section 4 (b) will be stricken from the final rule. CHANGE MADE.

Comment 33: Chapter 11, Section 4 (b): Section 4(b) of this chapter is of concern as well. It provides that "if a court orders an individual to directed outpatient commitment under a court-approved provider not under contract with the Behavioral Health Division, it is not the responsibility of the Department to arrange for payment and reimbursement of such a provider." Arguably, this limitation is contrary to Wyo. Stat. §25-10-112(c) which requires the Department to pay for all costs of treatment after the first 72 hours of detention. In addition, it is clearly contrary to the language of Wyo. Stat. §25-10-110.1(e) which requires treatment to be provided "by a treatment center *or a court approved treatment provider.*"

Response: Chapter 11, Section 4 (b) will be stricken from the final rule. CHANGE MADE.

Comment 34: Chapter 12, Section 3 (a): The language of this section should be reconciled with the language of Wyo. Stat. § 25-10-122 (Supp. 2016). This section ignores information about patients who have not been “determined mentally ill” in a hearing. For example, it suggests that information about a patient awaiting a hearing under section 109 may not be shared with the county attorney, a gatekeeper, or the Court. This would make conducting hearings and preparing for hearings impossible.

Response: Wyo. Stat. § 25-10-122 allows for sharing of information for administration of the Act “as necessary to carry out the purposes of this Act.” CHANGE MADE

Comment 35: Chapter 12, Section 3 (a): In addition, the state hospital and designated hospitals should be added to the list of recipients of information, to maintain consistency with section 122(b).

Response: The Wyoming State Hospital and designated hospitals are referenced in the section by using the terms “healthcare providers” and “treatment providers.” NO CHANGE

Comment 36: One matter that is not addressed by the rules, but perhaps should be, is the ambiguity created by the language in Wyo. Stat. 25-10-110.1(h), which provides that, in the event that the directed outpatient commitment is to be revoked, once the court enters an ex parte order of detention, "the matter shall be set for hearing within seventy-two (72) hours." The statute is silent on when the 72-hour time period begins. It would make sense for that time period to begin only after the patient is served with the order-which itself may occur well after 72 hours has elapsed since the signing of the order.

Response: The statute is clear on its face. The hearing must be set within seventy-two (72) hours of the ex parte order. NO CHANGE.

## **CHAPTER 6**

### **Designated Hospitals**

#### **Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act (“the Act”), at Wyo. Stat. Ann. §§ 25-10-101 through -305, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

#### **Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish definitions applicable to Chapter 7, Standards for the Designation of Hospitals pursuant to Wyo. Stat. Ann. § 25-10-104 and Chapter 8, Standards for the Reimbursement of Designated Hospitals or Other Treatment Providers pursuant to Wyo. Stat. Ann. § 25-10-112.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules, which reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

#### **Section 3. General Provisions.**

(a) Terminology. Except as otherwise specified, the terminology used in these rules is the standard terminology used in the industry, and has the standard meaning used in accounting, healthcare, Medicaid and Medicare.

(b) The incorporation by reference of any external standard is intended to be the incorporation of that standard as it is in effect on the effective date of this Chapter of these rules and regulations.

#### **Section 4. Definitions.**

The following definitions shall apply in the interpretation and enforcement of Chapters 6, 7, and 8 of these rules:

(a) “CARF Accreditation” means accreditation according to the Commission on Accreditation of Rehabilitation Facilities.

(b) “Centers for Medicare and Medicaid (CMS) Certification” means the state survey agency has determined that a healthcare entity has been determined to meet the Social Security Act’s provider or supplier definitions, and is in compliance with standards required by Federal regulations.

(c) “Claims” means the process of billing the allowable cost of services under the Act to the Department or responsible county pursuant to Wyo. Stat. Ann. § 25-10-112.

(d) “CMS 1500” means the billing claim form for healthcare services approved by the Centers for Medicaid and Medicare Services, which is used by physicians (formerly the HCFA 1500).

(e) “Department” means the Wyoming Department of Health.

(f) “Designated Hospital” means a general hospital or psychiatric treatment hospital or unit that provides care to an individual detained under Wyo. Stat. Ann. §§ 25-10-109 through -110.1, which is under an agreement with the Department and bills the Department or the responsible county for the costs of care under the Act.

(g) “Directed Outpatient Commitment” means as defined at Wyo. Stat. Ann. § 25-10-110.1.

(h) “Emergency Detention” means the detention of a person pursuant to Wyo. Stat. Ann. § 25-10-109.

(i) “Inpatient psychiatric treatment” means the medical diagnosis, treatment and care of persons with mental illness requiring hospitalization which is provided under the direction of a licensed, board certified psychiatrist, directed at reducing the risk, symptoms and impact of the psychiatric disorder.

(j) “Involuntary hospitalization” means the hospitalization of a person against his will under Wyo. Stat. Ann. § 25-10-110, at the Wyoming State Hospital or at a designated hospital or treatment provider under agreement with the Department to provide inpatient psychiatric treatment.

(k) “JCAHO” means the Joint Commission for the Accreditation of Healthcare Organizations.

(l) “Medicaid” means medical assistance and services provided pursuant to Title XIX of the Social Security Act or the Wyoming Medical Assistance and Services Act, at Wyo. Stat. Ann. §§ 42-4-101, *et seq.*

(m) “Medically necessary” means items and services which may be justified as reasonable, necessary, or appropriate, based on evidence-based clinical standards of care, as measured by the Level of Care Utilization System (LOCUS) tool.

(n) “Medical Records” means all documents in the possession of or subject to the control of the designated hospital, which describe the patient’s psychiatric assessments, diagnosis, condition or treatment.

(o) “Treatment Provider” or “treatment center” means a community mental health center under contract or agreement with the Department to provide outpatient or residential treatment to persons with mental illness or substance use disorders.

(p) “Universal billing claim form” means the national standardized form used by hospitals and other healthcare facilities or treatment providers which summarizes the allowable costs for services provided by the hospital or other treatment provider.

(q) “Utilization Review” means the process of comparing requests for medical services to guidelines deemed appropriate for such services.

#### **Section 5. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

#### **Section 6. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

#### **Section 7. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**CHAPTER 6**  
**Rules and Regulations for Designated Hospitals**  
**General Provisions**

**Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act (“the Act”), at ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-101, *et seq.* through -305, and the Wyoming Administrative Procedure Act at ~~W.S.~~ Wyo. Stat. Ann. §§ 16-3-101, *et seq.* through -115.

**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish definitions applicable to Chapter 7, Standards for the Designation of Hospitals pursuant to ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-104 and Chapter 8, Standards for the Reimbursement of Designated Hospitals or Other Treatment Providers pursuant to ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-112.

(b) The Department may issue manuals; or bulletins ~~or both~~ to interpret the provisions of these rules, ~~which. Such manuals and bulletins shall be consistent with and~~ reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

**Section 3. General Provisions.**

(a) Terminology. Except as otherwise specified, the terminology used in these rules is the standard terminology used in the industry, and has the standard meaning used in accounting, healthcare, Medicaid and Medicare.

(b) The incorporation by reference of any external standard is intended to be the incorporation of that standard as it is in effect on the effective date of this Chapter of these rules and regulations.

**Section 4. Definitions.**

The following definitions shall apply in the interpretation and enforcement of Chapters 6, 7, and 8 of these rules: ~~Where the context in which words are used in these rules indicates that such is the intent, words in the singular shall include the plural and vice versa. Throughout these rules gender pronouns are used interchangeably, except where the context dictates otherwise. The drafters have attempted to utilize each gender pronoun in equal numbers, in random distribution. Words in each gender shall include individuals of the other gender.~~

(a) “CARF Accreditation” means accreditation according to the Commission on Accreditation of Rehabilitation Facilities.

(b) “Centers for Medicare and Medicaid (CMS) Certification” means the state survey agency has determined that a healthcare entity has been determined to meet the Social Security



Act's provider or supplier definitions, and is in compliance with standards required by Federal regulations.

(c) "Claims" means the process of billing the allowable cost of services under the Act to the Department or responsible county pursuant to ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-112.

(d) "CMS 1500" means the billing claim form for healthcare services approved by the Centers for Medicaid and Medicare Services, which is used by physicians (formerly the HCFA 1500).

(e) "Department" means the Wyoming Department of Health.

(f) "~~Designated Hospital~~" means a ~~holding hospital or psychiatric treatment hospital, general hospital or psychiatric treatment hospital or unit that provides care to an individual detained under Wyo. Stat. Ann. §§ 25-10-109 through -110.1, which is under an agreement with the Department and bills the Department or the responsible county for the costs of care under the Act.~~

(g) "Directed Outpatient Commitment" means as defined at Wyo. Stat. Ann. §25-10-110.1.

~~(gh)~~ "Emergency Detention" means the detention of a person pursuant to W.S. § 25-10-109.

~~(h) "Holding Hospital" means any hospital that provides care to an individual detained under W.S. § 25-10-109 and which bills the Department or the responsible county for the costs of that care under W.S. § 25-10-112.~~

~~(i) "Hospital" means a licensed institution or a unit in a licensed institution which provides one (1) or more of the following to patients by or under the supervision of an organized medical staff, as indicated in the Department's Rules and Regulations for Licensure of Hospitals, Chapter 12, Section 4, Definitions (m):~~

~~(i) Diagnostic and therapeutic services for medical diagnosis, treatment and care of injured, disabled or sick persons;~~

~~(ii) Rehabilitation services for the mental health rehabilitation of injured, disabled or sick persons;~~

~~(iii) Acute care;~~

~~(iv) Psychiatric care; and/or~~

~~(v) Swing Beds.~~

(j) "Inpatient psychiatric treatment" means the medical diagnosis, treatment and care of persons with mental illness requiring hospitalization which is provided under the direction of a

licensed, board certified psychiatrist, directed at reducing the risk, symptoms and impact of the psychiatric disorder.

(~~kj~~) “Involuntary hospitalization” means the hospitalization of a person against their will under ~~W.S. Wyo. Stat. Ann. §§ 25-10-110~~, at the Wyoming State Hospital or at a ~~psychiatric treatment~~ designated hospital under contract agreement with the Department to provide inpatient psychiatric treatment.

(~~kk~~) “JCAHO” means the Joint Commission for the Accreditation of Healthcare Organizations.

(~~ml~~) “Medicaid” means medical assistance and services provided pursuant to Title XIX of the Social Security Act and/or the Wyoming Medical Assistance and Services Act, at ~~W.S. Wyo. Stat. Ann. §§ 42-4-101~~, *et seq.*

(~~mm~~) “Medically necessary” means items and services which may be justified as reasonable, necessary, ~~and/or~~ appropriate, based on evidence-based clinical standards of care as measured by the Level of Care Utilization System (LOCUS) tool.

(~~nn~~) “Medical Records” means all documents, in whatever form, in the possession of or subject to the control of the designated hospital, which describe the patient’s diagnosis, condition and/or treatment.

(~~po~~) “~~Other Treatment provider~~” or “~~treatment center~~” means a ~~licensed physician, who provides services under W.S. § 25-10-109 and W.S. § 25-10-110 and who bills the Department or responsible county for those services independent of a designated hospital.~~ community mental health center under contract or agreement with the Department to provide outpatient or residential treatment to persons with mental illness or substance abuse disorders.

(~~qp~~) “Patient” means ~~an individual receiving care by a designated hospital or other treatment provider for a mental illness pursuant to W.S. §§ 25-10-101 through 25-10-305.~~

(~~rq~~) “Physician” means ~~an individual licensed to practice medicine.~~

(~~sr~~) “Treatment” means ~~diagnosis, evaluation, intervention, which may include psychiatric medication, individual and group mental health counseling, illness management and diversion services such as immediate linkages to mental health services in the community, and discharge planning. These services begin at the time of detention and continue throughout involuntary hospitalization. Treatment does not mean observation or supervision.~~

(~~tp~~) “Universal billing claim form” means the national standardized form used by hospitals and other healthcare facilities or treatment providers which summarizes the allowable costs for services provided by the hospital or other treatment provider.

(q) “Utilization Review” means the process of comparing requests for medical services to guidelines or criteria that are deemed appropriate for such services.

~~(t) “Volunteer assistance” means monitoring of a person detained under W.S. §§ 25-10-109, by a member of the community independent of that person’s regular employment.~~

~~(s) “Wyoming State Hospital” means the state healthcare facility serving persons with mental illness located in Evanston, Wyoming.~~

**Section 5. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

**Section 6. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

**Section 57. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**CHAPTER 7**  
**Rules and Regulations for Designated Hospitals**  
**Standards for the Designation of Hospitals and Treatment Providers**

**Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act, (“the Act”) at ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-101, *et seq.* through -305, and the Wyoming Administrative Procedure Act at ~~W.S.~~ Wyo. Stat. Ann. §§ 16-3-101, *et seq.* through -115.

**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish standards for the designation of hospitals and to define the conditions under which the Department may enter into a contract or agreement with a designated hospital or ~~other licensed treatment facility~~ provider for the inpatient psychiatric treatment or community-based treatment of persons with mental illness pursuant to ~~W.S.~~ Wyo. Stat. Ann. § 25-10-104.

(b) The Department may issue manuals, or bulletins ~~or both~~ to interpret the provisions of these rules, ~~which. Such manuals and bulletins shall be consistent with~~ and reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

**Section 3. Designated Hospital Requirements and Treatment Provider Requirements**

(a) Designated hospitals or treatment providers, ~~which bill the Department for services pursuant to W.S. § 25-10-112,~~ shall have a safe and secure location to hold an individual who is emergently detained under ~~W.S.~~ Wyo. Stat. Ann. § 25-10-109 in a suitable setting pursuant to the Act and based on the patient’s condition, ~~with or without law enforcement or volunteer assistance.~~

(b) Designated hospitals or treatment providers shall provide treatment services with the patient’s consent ~~and~~ or allow access to the patient by community mental health center staff or the patient’s private mental health provider for purposes of providing treatment with the patient’s consent. Treatment services may be provided without patient consent or the consent of his parent or guardian when treatment is limited to diagnosis or evaluation or when treatment is necessary to prevent immediate and serious physical harm to the person or others pursuant to ~~W.S.~~ Wyo. Stat. Ann. § 25-10-109(f).

(c) Designated hospital staff or treatment provider staff shall have access to ongoing psychiatric consultation services provided by the Wyoming State Hospital for purposes of prescribing and monitoring psychotropic medications. ~~The Wyoming State Hospital shall notify designated hospitals of the process to receive consultative services.~~

(d) Designated hospital staff or treatment provider staff shall consult with the Wyoming State Hospital staff in advance of the following anticipated extended hospital stays: ~~This~~

~~consultation shall be conducted in a manner to reasonably function as a utilization review of the recommended continued stay.~~

- (i) An anticipated extension of an emergency detention beyond 72 hours; ~~and~~
- (ii) An anticipated extended ~~involuntary hospitalization~~ detention beyond 14 days; and
- (iii) An anticipation of an involuntary hospitalization order.

(e) If the patient's symptoms resolve so that ~~they no longer meet the statutory requirements for emergency detention or involuntary hospitalization~~ are no longer required prior to the patient's transfer to the Wyoming State Hospital, the designated hospital or treatment provider shall be responsible for, ~~and shall~~ file the appropriate documentation evidencing the reason for the patient's release as required by ~~W.S. Wyo. Stat. Ann. §25-10-116(b)~~. If a hearing is requested, the designated hospital or treatment provider ~~shall~~ must appear to explain and support its decision that the patient no longer meets the criteria for emergency detention or involuntary hospitalization.

~~(f) Three months after the patient's admission to the designated hospital, and every six (6) months thereafter, the head of the designated hospital or his designee shall evaluate the treatment and progress of each patient.~~

~~(g)~~ (gf) If conditions justifying hospitalization continue to exist, the designated hospital or treatment provider ~~shall be responsible for, and~~ shall send to the court notice of the determination for continued hospitalization ~~and, including~~ a detailed statement of the factual basis for the determination. Notice of the determination shall also be sent to the patient and the person responsible for the patient's care and custody. As required by ~~W.S. Wyo. Stat. Ann. § 25-10-116(c)~~ the notice shall include:

- (i) The patient's right to contest the determination;
- (ii) The patient's right to a hearing; and
- (iii) The patient's right to counsel.

#### **Section 4. Contracts or Agreements with Designated Hospitals.**

(a) Pursuant to ~~W.S. Wyo. Stat. Ann. § 25-10-104~~, the Department may enter into a contract or agreement with a designated hospital for the provision of inpatient psychiatric treatment if the designated hospital meets any of the following qualifications:

- (i) A hospital which meets the "special provisions applying to psychiatric hospitals," pursuant to 42 CFR § 482.60, ~~as being qualified to treat persons with mental illness;~~
- (ii) A general hospital with a specific inpatient psychiatric unit;

(iii) A hospital without a specific inpatient psychiatric unit with psychiatric services available, to include a psychiatrist as a member of the medical staff of the hospital; or

(iv) Other licensed treatment facilities and limited licensed hospitals which have psychiatrists available for consultation, such as residential crisis stabilization centers; or

(v) A Wyoming hospital that does not have specific psychiatric services, but admits a patient on an emergency basis when no other appropriate level of care is available.

(b) To enter into a contract or agreement with the Department, the hospital or facility must submit a letter of intent to the Wyoming State Hospital. Enclosed with the letter of intent must be the following documents:

(i) A copy of the hospital or facility's license issued by the state survey agency; and

(ii) A copy of the hospital or facility's most recent JCAHO or CARF accreditation certificate and/or Centers for Medicare and Medicaid (CMS) certification.

(c) Once verification of all documents has been completed by the Wyoming State Hospital, notification of acceptance or rejection will be provided to the hospital. If the hospital is accepted, a contract outlining the hospital or facility's responsibilities with regard to accepting patients and providing treatment for persons with mental illnesses, as defined in W.S. Wyo. Stat. Ann. §25-10-110, will be initiated by the Division.

(d) Contract or agreement extensions or the development of new contracts will be completed ~~annually~~ biennially pending receipt by the Wyoming State Hospital of the documents listed in Section 4(b)(i) and (ii).

(e) The contract or agreement shall require compliance with these rules.

#### ~~Section 5. Visitation to Designated Hospitals.~~

~~The Wyoming Department of Health or its designee will conduct annual visits to designated hospitals pursuant to W.S. § 25-10-104(d) and review compliance with these rules and with the contract requirements as applicable.~~

#### **Section 65. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

#### **Section 76. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals ~~and~~ or bulletins, which are inconsistent with this Chapter.

**Section 87. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

## CHAPTER 8

### Standards for Reimbursement of Designated Hospitals and Treatment Providers

#### Section 1. Authority.

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act (“the Act”), codified at Wyo. Stat. Ann. §§ 25-10-101 through -305, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

#### Section 2. Purpose and Applicability.

(a) These rules have been adopted to establish standards for the reimbursement of designated hospitals or other treatment providers and to establish standards to manage costs billed to the Department pursuant to Wyo. Stat. Ann. § 25-10-112.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules, which reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

#### Section 3. Filing of Claims.

(a) Designated hospitals or treatment providers filing claims with the Department or responsible county under Wyo. Stat. Ann. § 25-10-112 for services provided pursuant to Wyo. Stat. Ann. § 25-10-109, Wyo. Stat. Ann. § 25-10-110 or Wyo. Stat. Ann. § 25-10-110.1 shall provide documentation to the Department or responsible county detailing the services rendered and the payment requested. This documentation shall include, but is not limited to:

(i) All relevant and requested medical records directly related to the services for which payment is being requested;

(ii) An itemized billing statement (for services provided by designated hospitals) for services, including:

(1) A universal billing form;

(2) A CMS 1500.

(iii) The emergency detention notice, Form 3-81, and the continued emergency detention court order, if applicable;

(iv) The involuntary hospitalization court order, if applicable, and any papers showing the patient’s release from involuntary hospitalization, Form 14-81.

(v) A certification signed by the designated hospital representative or treatment provider, indicating that the patient has no public or private health insurance and that there are no other governmental benefit programs from which it can recover the costs of treatment;



(vi) Documentation of all efforts made to recover costs of treatment from public and private health insurance, and from government benefit programs prior to seeking payment from the Department.

(b) The Department may not pay claims submitted more than one (1) year after the service date.

(c) The Department may not pay claims for medical treatment for conditions that are not directly related to the emergency detention or involuntary hospitalization.

#### **Section 4. Payment of Claims.**

(a) Payment made by the Department pursuant to Wyo. Stat. Ann. § 25-10-112, for services provided by a designated hospital or other treatment provider under Wyo. Stat. Ann. § 25-10-109 and Wyo. Stat. Ann. § 25-10-110, shall not exceed:

(i) The current rate for similar services as determined by Medicaid;

(ii) A fixed, all-inclusive per diem rate as determined by the Department; or

(iii) Payments arranged through mental health or substance abuse contracts with the Behavioral Health Division, if applicable.

(b) In considering a claim for payment, the Department shall determine if the costs submitted by the designated hospital or treatment provider are reasonably related to the care furnished to the patient and if the care furnished to the patient was medically necessary for the specific treatment of the patient's mental illness.

(c) After a designated hospital has submitted all documentation as required in Section 4(b) of Chapter 7, the Department shall pay each claim within 45 days of receipt of the claim pursuant to Wyo. Stat. Ann. § 16-6-602.

#### **Section 5. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

#### **Section 6. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

#### **Section 7. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**CHAPTER 7**  
**Standards for the Designation of Hospitals and Treatment Providers**

**Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act, (“the Act”) at Wyo. Stat. Ann. §§ 25-10-101 through -305, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish standards for the designation of hospitals and to define the conditions under which the Department may enter into a contract or agreement with a designated hospital or treatment provider for the inpatient psychiatric treatment or community-based treatment of persons with mental illness pursuant to Wyo. Stat. Ann. § 25-10-104.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules which reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

**Section 3. Designated Hospital Requirements and Treatment Provider Requirements**

(a) Designated hospitals or treatment providers shall have a safe and secure location to hold an individual who is emergently detained under Wyo. Stat. Ann. § 25-10-109 in a suitable setting pursuant to the Act and based on the patient’s condition.

(b) Designated hospitals or treatment providers shall provide treatment services with the patient’s consent or allow access to the patient by treatment provider staff or the patient’s private mental health provider for purposes of providing treatment with the patient’s consent. Treatment services may be provided without patient consent or the consent of his parent or guardian when treatment is limited to diagnosis or evaluation or when treatment is necessary to prevent immediate and serious physical harm to the person or others pursuant to Wyo. Stat. Ann. § 25-10-109(f).

(c) Designated hospital staff or treatment provider staff shall have access to ongoing psychiatric consultation services provided by the Wyoming State Hospital for purposes of prescribing and monitoring psychotropic medications.

(d) Designated hospital staff or treatment provider staff may also consult with the Wyoming State Hospital staff in advance of the following anticipated extended hospital stays:

- (i) An anticipated extension of an emergency detention beyond 72 hours;
- (ii) An anticipated extended detention beyond 14 days;
- (iii) An anticipation of an Involuntary Hospitalization order.

(e) If the patient's symptoms resolve so that emergency detention or involuntary hospitalization are no longer required prior to the patient's transfer to the Wyoming State Hospital, the designated hospital or treatment provider shall file the appropriate documentation evidencing the reason for the patient's release as required by Wyo. Stat. Ann. § 25-10-116(b). If a hearing is requested, the designated hospital or treatment provider must appear to explain and support its decision that the patient no longer meets the criteria for emergency detention or involuntary hospitalization.

(f) If conditions justifying hospitalization continue to exist, the designated hospital or treatment provider shall send the court notice of the determination for continued hospitalization, including a detailed statement of the factual basis for the determination. Notice of the determination shall also be sent to the patient and the person responsible for the patient's care and custody. As required by Wyo. Stat. Ann. § 25-10-116(c) the notice shall include:

- (i) The patient's right to contest the determination;
- (ii) The patient's right to a hearing; and
- (iii) The patient's right to counsel.

#### **Section 4. Contracts or Agreements with Designated Hospitals.**

(a) Pursuant to Wyo. Stat. Ann. § 25-10-104, the Department may enter into a contract or agreement with a designated hospital for the provision of inpatient psychiatric treatment if the designated hospital meets one of the following qualifications:

- (i) A hospital which meets the "special provisions applying to psychiatric hospitals," pursuant to 42 C.F.R. § 482.60;
- (ii) A general hospital with a specific inpatient psychiatric unit;
- (iii) A hospital without a specific inpatient psychiatric unit with psychiatric services available, to include a psychiatrist as a member of the medical staff of the hospital;
- (iv) Other licensed treatment facilities which have psychiatrists available for consultation such as residential crisis stabilization centers; or
- (v) A Wyoming hospital that does not have specific psychiatric services, but admits a patient on an emergency basis when no other appropriate level of care is available.

(b) To enter into a contract or agreement with the Department, the hospital or facility must submit a letter of intent to the Wyoming State Hospital. Enclosed with the letter of intent must be the following documents:

- (i) A copy of the hospital's or facility's license issued by the state survey agency;
- and

(ii) A copy of the hospital or facility's most recent JCAHO or CARF accreditation certificate or Centers for Medicare and Medicaid (CMS) certification.

(c) Once verification of all documents has been completed by the Wyoming State Hospital, notification of acceptance or rejection will be provided to the hospital. If the hospital is accepted, a contract or agreement outlining the hospital's or facility's responsibilities with regard to accepting patients and providing treatment for persons with mental illnesses, as defined in Wyo. Stat. Ann. § 25-10-110, will be initiated by the Division.

(d) Contract or agreement extensions or the development of new contracts or agreements will be completed biennially pending receipt by the Wyoming State Hospital of the documents listed in Section 4(b)(i) and (ii).

(e) The contract or agreement shall require compliance with these rules.

#### **Section 5. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

#### **Section 6. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

#### **Section 7. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

## CHAPTER 8

### **Emergency Rules and Regulations for Designated Hospitals Standards for Reimbursement of Designated Hospitals ~~or Other~~ and Treatment Providers**

#### **Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to the Involuntary Commitment Act (“the Act”), codified at ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-101, ~~et seq.~~ through -305, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101, ~~et seq.~~ through -115.

#### **Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish standards for the reimbursement of designated hospitals or other treatment providers and to establish standards to ~~control~~ manage costs billed to the Department pursuant to Wyo. Stat. Ann. §§ 25-10-112.

(b) The Department may issue manuals, or bulletins, ~~or both~~ to interpret the provisions of these rules, which. ~~Such manuals and bulletins shall be consistent with and~~ reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

#### **Section 3. Filing of Claims.**

(a) Designated hospitals or ~~other~~ treatment providers filing claims with the Department or responsible county under Wyo. Stat. Ann. § 25-10-112 for services provided pursuant to Wyo. Stat. Ann. § 25-10-109, Wyo. Stat. Ann. § 25-10-110 or Wyo. Stat. Ann. § 25-10-110.1 shall provide documentation to the Department or the responsible county detailing the services rendered ~~to patients for which payment is being~~ and the payment requested. This documentation shall include, but is not limited to:

(i) All relevant and requested medical records directly related to the services for which payment is being requested;

(ii) An itemized billing statement (for services provided by designated hospitals) for ~~which payment is requested, to include, as applicable~~ services, including:

(1) A universal billing form;

(2) A CMS 1500.

(iii) The emergency detention notice, Form 3-81 and, if applicable, the continued emergency detention court order, if applicable;

(iv) The involuntary hospitalization court order, if applicable, and any ~~any~~ papers showing the patient's release from involuntary hospitalization, Form 14-81;

(v) A certification, signed by the designated hospital representative or treatment provider, indicating that the patient has no public or private health insurance and that there are no other governmental benefit programs from which it can recover the costs of treatment;

~~(vi) An affidavit from the patient or the legal representative of the patient providing the patient's financial condition to document the patient's inability to pay for treatment. The format for the affidavit and the certification shall be developed by the Department; Documentation of all efforts made to recover costs of treatment from public and private health insurance, from the patient, and from government benefit programs prior to seeking payment from the Department;~~

~~(b) Claims for payment to the Department must be submitted within~~ The Department may not pay claims submitted more than one (1) year of the service date to be considered for payment;

~~(c) The Department may not pay~~ €claims for medical treatment for those conditions that are not directly related to the emergency detention or involuntary hospitalization. ~~shall not be paid by the Department.~~

#### **Section 4. Payment of Claims.**

(a) Payment made by the Department pursuant to Wyo. Stat. Ann. § 25-10-112, for services provided by a designated hospital or other treatment provider under Wyo. Stat. Ann. § 25-10-109 and Wyo. Stat. Ann. § 25-10-110, shall not exceed:

(i) The current rate for similar services as determined by Medicaid; ~~or~~

(ii) A fixed, all-inclusive per diem rate as determined by the Department; or

(iii) Payments arranged through mental health or substance abuse contracts with the Behavioral Health Division, if applicable.

~~(b) The Department,~~ In considering a claim for payment, the Department shall determine if the costs submitted by the designated hospital or ~~other~~ treatment provider are reasonably related

to the care furnished to the patient and if the care furnished to the patient was medically necessary for the specific treatment of the patient's mental illness.

(c) After a designated hospital ~~or other treatment provider~~ has submitted all documentation as required in Section 4(b), the Department shall pay each claim within 45 days of receipt of the claim pursuant to Wyo. Stat. Ann. § 16-6-602.

#### **Section 5. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

#### **Section 6. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals ~~and/or~~ bulletins, which are inconsistent with this Chapter.

#### **Section 7. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**CHAPTER 9**  
**Convalescent Leave from Involuntary Hospitalization**

**Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish definitions applicable to Chapter 10, Standards for Convalescent Leave, pursuant to Wyo. Stat. Ann. § 25-10-127.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules, which reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

**Section 3. General Provisions.**

(a) Terminology. Except as otherwise specified, the terminology used in these rules is the standard terminology used in the industry, and has the standard meaning used in accounting, healthcare, Medicaid and Medicare.

(b) The incorporation by reference of any external standard is intended to be the incorporation of that standard as it is in effect on the effective date of this Chapter of these rules and regulations.

**Section 4. Definitions.**

The following definitions shall apply in the interpretation and enforcement of Chapters 9 and 10 of these rules:

(a) “Appropriate Parties” means the patient’s guardian, if applicable, the patient’s care giver, if applicable, the patient’s family, if applicable, the community treatment provider, and the county attorney involved in the involuntary hospitalization procedures for the patient.

(b) “Community Treatment Provider” means a community mental health center or other mental health treatment service provider chosen by the patient.

(c) “Convalescent Leave” means the placement of a patient who was involuntarily hospitalized under Wyo. Stat. Ann. § 25-10-110 and treated at the Wyoming State Hospital or designated hospital, into a community on a conditional status, for purposes of continued recovery.



(d) “Designated Hospital” means a psychiatric treatment hospital that provides care to an individual detained under Wyo. Stat. Ann. § 25-10-109, Wyo. Stat. Ann. § 25-10-110, or Wyo. Stat. Ann. § 25-10-110.1, which is under an agreement with the Department and bills the Department or the responsible county for the costs of care under the Act.

(e) “Involuntary hospitalization” means the hospitalization of a person against their will under Wyo. Stat. Ann. § 25-10-110, at the Wyoming State Hospital or at a designated hospital under contract or agreement with the Department to provide inpatient psychiatric treatment.

(f) “Treating Medical Provider” means a physician, psychiatrist, advanced practice registered nurse, physician assistants, or other medical staff licensed in the State of Wyoming and employed by the Wyoming State Hospital or designated hospital.

(g) “Treatment Team” means staff of the Wyoming State Hospital or designated hospital representing the various disciplines needed to treat and promote the recovery of the patient. Treatment teams include, but are not limited to, the treating physician and a case manager.

#### **Section 5. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

#### **Section 6. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

#### **Section 7. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**CHAPTER 9**  
**Rules and Regulations for Convalescent Leave from Involuntary Hospitalization**  
**General Provisions**

**Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at ~~W.S.Wyo. Stat. Ann. §§ 25-10-101 through -127,~~ and the Wyoming Administrative Procedure Act at ~~W.S.Wyo. Stat. Ann. §§ 16-3-101, *et seq.* through -115.~~

**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish definitions applicable to Chapter 10, Standards for Convalescent Leave, pursuant to ~~W.S.Wyo. Stat. Ann. § 25-10-127.~~

(b) The Department may issue manuals, or bulletins, ~~or both~~ to interpret the provisions of this rule, which. ~~Such manuals and bulletins shall be consistent with and~~ reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

**Section 3. General Provisions.**

(a) Terminology. Except as otherwise specified, the terminology used in these rules is the standard terminology used in the industry, and has the standard meaning used in accounting, healthcare, Medicaid and Medicare.

(b) The incorporation by reference of any external standard is intended to be the incorporation of that standard as it is in effect on the effective date of this Chapter of these rules and regulations.

**Section 4. Definitions.**

The following definitions shall apply in the interpretation and enforcement of Chapters 9 and 10 of these rules: ~~Where the context in which words are used in these rules indicates that such is the intent, words in the singular shall include the plural and vice versa. Throughout these rules gender pronouns are used interchangeably, except where the context dictates otherwise. The drafters have attempted to utilize each gender pronoun in equal numbers, in random distribution. Words in each gender shall include individuals of the other gender.~~

(a) “Appropriate Parties” means the patient’s guardian, if applicable, the patient’s care giver, if applicable, the patient’s family, if applicable, the community treatment provider, and the county attorney involved in the involuntary hospitalization procedures for the patient.

(b) “Community Treatment Provider” means a community mental health center or other mental health treatment service provider chosen by the patient.

(c) “Convalescent Leave” means the placement of a patient who was involuntarily hospitalized under ~~W.S.~~ Wyo. Stat. Ann. § 25-10-110 and treated at the Wyoming State Hospital, into a community on a conditional status, for purposes of continued recovery.

~~(d) “Department” means the Wyoming Department of Health.~~

~~(e)~~ (ed) “Designated Hospital” means a ~~holding hospital or psychiatric treatment hospital~~ psychiatric treatment hospital that provides care to an individual detained under Wyo. Stat. Ann. § 25-10-109, Wyo. Stat. Ann. § 25-10-110, or Wyo. Stat. Ann. § 25-10-110, which is under an agreement with the Department and bills the Department or the responsible county for the costs of care under the Act.

~~(f) “Holding Hospital” means any hospital that provides care to an individual detained under W.S. § 25-10-109 and which bills the Department or the responsible county for the costs of that care under W.S. § 25-10-112.~~

(ge) “Involuntary hospitalization” means the hospitalization of a person against their will under W.S. § 25-10-110, at the Wyoming State Hospital or at a psychiatric treatment hospital under contract with the Department to provide inpatient psychiatric treatment.

~~(h) “Patient” means a person who is involuntarily hospitalized under W.S. § 25-10-110, at the Wyoming State Hospital.~~

(if) “Treating Medical Provider” means a physician, psychiatrist, advanced practice registered nurse, physician assistants, or other medical staff licensed in the State of Wyoming and employed by the Wyoming State Hospital or designated hospital.

(jg) “Treatment Team” means staff of the Wyoming State Hospital or designated hospital representing the various disciplines needed to treat and promote the recovery of the patient. Treatment teams include, but are not limited to, the treating physician and a case manager.

~~(k) “Wyoming State Hospital” means the state healthcare facility serving persons with mental illness located in Evanston, Wyoming.~~

**Section 5. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

**Section 6. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

**Section 57. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**CHAPTER 10**  
**Standards for Convalescent Leave**

**Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127 and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities for releasing a patient on convalescent status pursuant to Wyo. Stat. Ann. § 25-10-127.

(b) The Department may issue manuals or bulletins to interpret the provisions of these rules, which reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

**Section 3. Conditions Necessary for Convalescent Leave.**

(a) Convalescent Leave may be utilized by the State Hospital or designated hospitals when:

(i) The patient:

(A) Was previously involuntarily hospitalized and demonstrated an inability to follow past discharge plans, or has demonstrated a history of noncompliance with outpatient treatment;

(B) Will need additional assistance and support to adequately comply with the required plan of treatment on an outpatient or nonhospital basis; or

(C) Will likely need and will benefit from community-based services and support to avoid decompensation and additional involuntary hospitalizations, and those services and support are available in the community the patient wishes to return to, or in the community best suited to provide such aftercare of the patient.

(ii) When the treating medical provider, after consultation with the treatment team and appropriate parties, believes it is in the best medical interest of the patient.

(b) Wyoming State Hospital patients who have active or pending criminal charges may not be placed on convalescent leave.

**Section 4. Process to Initiate Convalescent Leave.**

(a) Request for Convalescent Leave.

(i) Treatment team. Members of the patient's treatment team and any designated gatekeeper must meet to discuss the potential benefits of Convalescent Leave. Although all members of the treatment team do not need to agree to the leave, all members of the team must be a part of the decision-making process. If the members of the treatment team do not arrive at a consensus for the use of Convalescent Leave, the patient's treating medical provider leading the treatment team will make the final decision. If a decision is made to pursue Convalescent Leave, the request must be documented and include the applicable conditions contained in Section 3(a) as justification for the request. If the patient's treatment team is located at a designated hospital, the treatment team shall consult with the Wyoming State Hospital on all convalescent leave orders and treatment plans.

(ii) Patient and Appropriate Parties. After a request for Convalescent Leave is made by the treatment team, one or more members of the treatment team shall provide written, email, or fax notice to and consult with the patient and appropriate relevant parties, including, when applicable, the guardian, parent, gatekeeper, and community treatment provider. A member of the treatment team shall document this process.

(iii) Wyoming State Hospital or designated hospital staff shall assist patients being released on convalescent leave in applying for Medicaid and securing Social Security benefits, if applicable.

(b) Convalescent Leave Plan.

(i) Using input from the patient and all appropriate parties, the treatment team shall develop a written Convalescent Leave Plan.

(ii) The Convalescent Leave Plan shall include:

(A) The roles and responsibilities of the patient and other appropriate parties and any areas for which the treating facility, Wyoming State Hospital, or designated hospital will retain responsibility while the patient is on Convalescent Leave;

(B) The community treatment services, medication, and supports to be provided, the entity responsible for providing them, and how they will be paid;

(C) Provisions for quarterly reports from the community treatment provider, or any designated gatekeeper, to the Department on the status and progress made by the patient. If more than one community treatment provider is selected by the patient to provide outpatient services and supports, the plan shall specify the community treatment provider or gatekeeper responsible for providing quarterly reports;

(D) The conditions under which Convalescent Leave will be revoked;

(E) The preferred location for detention and the method of detention of the patient if Convalescent Leave is revoked.

(iii) The Convalescent Leave Plan will be provided to the patient, the patient's treatment team, any designated gatekeeper, and other appropriate parties for signature. Signature shall constitute acknowledgment of the plan, and the role of each entity in achieving the goals of the Convalescent Leave.

(iv) The Convalescent Leave Plan, signed by the patient, the patient's treatment team and other appropriate parties, may act as the initial report to the court, or a separate report to the court outlining additional information may be drafted and submitted by the treating medical provider.

(v) The treatment team shall provide copies of the signed Convalescent Leave plan to the patient and the appropriate parties in a manner to ensure receipt of the copy prior to the beginning of convalescent leave.

(c) Notice for Convalescent Leave.

(i) The Wyoming State Hospital or designated hospital will file all notices for Convalescent Leave with the Court, and provide notice to the county attorney office that initiated involuntary hospitalization proceedings, any designated gatekeeper, and other interested parties. Notice shall consist of a copy of the notice for convalescent leave along with copies of the initial commitment documents, the signed Convalescent Leave Plan, and any other relevant information or documents, including any separate reports or documents in support of the Convalescent Leave.

(ii) The Wyoming State Hospital shall develop and utilize uniform forms for Convalescent Leave Plans.

### **Section 5. Return to Involuntary Hospitalization from Convalescent Leave.**

(a) If the hospital reasonably believes that it is in the best interest of the patient, the patient shall be returned to the hospital from which the patient was given convalescent leave. The hospital from which the patient was given convalescent leave may return the patient to its care, subject to notice and hearing as provided by Wyo. Stat. Ann. §§ 25-10-116 and 127.

(b) Any member of the patient's treatment team, the patient, any designated gatekeeper, or other appropriate parties may request that the hospital from which the patient was given convalescent leave return the patient to its care to comply with the Convalescent Leave Plan. The hospital shall review requests under subsection (b) to determine whether return from Convalescent Leave pursuant to subsection (a) is in the best interests of the patient.

(c) If the patient is not able or is unwilling to return to the hospital, or if the hospital from which the patient was given convalescent leave refuses to return the patient to its care for a violation of the Convalescent Leave Plan, the party seeking the patient's return may request a hearing before the court that ordered the patient's involuntary hospitalization.

(d) The Wyoming State Hospital shall arrange transportation for a patient returning to the Wyoming State Hospital.

(e) The Wyoming State Hospital shall pay for the detention and transportation expenses to detain and return the patient to the hospital, pursuant to Wyo. Stat. Ann. § 25-10-127.

(f) The hospital from which the patient was given convalescent leave shall file a Notice of Return from Convalescent Leave with the court, and will provide copies to the appropriate parties, notifying the parties that the patient is being or will be returned to the hospital.

(g) Upon the patient's return to the hospital from which the patient was given convalescent leave, the patient shall be notified of his/her rights, including the right to contest his return to the hospital, the right to a hearing, and the right to counsel.

(h) If the patient is returned to the Wyoming State Hospital or designated hospital, the Convalescent Leave is revoked.

### **Section 6. One Year Follow Up.**

(a) Prior to the end of one (1) year on convalescent leave, and not less than annually thereafter, the patient's treatment team shall consult with the patient, any designated gatekeeper, and other appropriate parties to reconsider and reexamine the facts relating to the original involuntary hospitalization of the patient.

(b) If the patient's treatment team and the community treatment provider determine that involuntary hospitalization is no longer anticipated for the patient, the community treatment provider and any designated gatekeeper, in collaboration with the Wyoming State Hospital or designated hospital, shall submit a 14-81 form to the Court for the discharge of the patient, following the procedures set forth in Wyo. Stat. Ann. § 25-10-116(b). With the participation of the patient, the patient's guardian, the patient's caregiver, the patient's family, if applicable, and the community treatment provider, the Wyoming State Hospital or designated hospital shall prepare a discharge plan.

(c) If a patient on Convalescent Leave is returned to the Wyoming State Hospital, designated hospital, or treatment provider and later re-placed on Convalescent Leave status, the one year follow up shall be based on the date of the most recent Convalescent Leave.

### **Section 7. Two Year Discharge Process.**

(a) After two (2) years on Convalescent Leave, the community treatment provider, in collaboration with the Wyoming State Hospital or designated hospital, and any designated gatekeeper, shall submit a 14-81 form to the court, seeking the discharge of the patient, pursuant to Wyo. Stat. Ann. § 25-10-116(b). The 14-81 form should note the client's success during the two year Convalescent Leave period, and include a discharge plan prepared by the Wyoming State Hospital or designated hospital in conjunction with the patient, the patient's guardian, if applicable, the patient's caregiver, if applicable, the patient's family, if applicable, and the community treatment provider and any designated gatekeeper.

(b) If the patient is returned from Convalescent Leave to the Wyoming State Hospital, designated hospital, or treatment provider and re-placed on Convalescent Leave status, the



required discharge after two (2) years of Convalescent Leave shall be based on the date of the most recent Convalescent Leave.

**Section 8. Responsibilities of the Wyoming State Hospital or Designated Hospital While Patient is on Convalescent Leave.**

(a) While the patient is on Convalescent Leave, the Wyoming State Hospital or designated hospital shall periodically review, with the community provider and any designated gatekeeper, the treatment progress of the patient as documented in the quarterly report submitted by the community treatment provider.

(b) Neither the physicians nor the caseworkers at the Wyoming State Hospital or designated hospital shall provide direct care or treatment of the patient while the patient is on Convalescent Leave unless otherwise documented in the treatment plan, although they shall be available for consultation with community treatment providers. This provision recognizes the patient's best interests in being placed in his or her local community, which may be a great distance from the Wyoming State Hospital or designated hospital. bin

**Section 9. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

**Section 10. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter 8-3.

**Section 11. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**Chapter 11**  
**Directed Outpatient Commitment**  
**(Wyo. Stat. Ann. § 25-10-110.1)**

**Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127 and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. § 16-3-101 through -115.

**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities of Wyoming Department of Health treatment providers for the treatment of patients court-ordered to Directed Outpatient Commitment as provided in Wyo. Stat. Ann. § 25-10-110.1.

(b) The Department may issue manuals or bulletins to interpret the provisions of this rule, which reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

**Section 3. Directed Outpatient Commitment Treatment Provider Requirements**

(a) If an individual is determined mentally ill under the Act (Wyo. Stat. Ann. §§ 25-10-109 through -110.1) and is ordered by a court for directed outpatient commitment to a treatment provider as defined in Chapter 6 of these rules, the treatment provider shall comply with the court order and admit the patient unless it demonstrates to the court that it cannot comply with the court order for directed outpatient commitment.

(b) The treatment provider shall prepare a treatment plan, as required by the court order, in consultation with any gatekeeper designated by the Department. In preparing the treatment plan, the treatment provider shall consult with the county attorney, any relevant healthcare providers, and the patient or the person responsible for the care and custody of the patient. The treatment plan may not exceed two (2) years.

(c) The treatment provider shall issue a report to the court, the county attorney, and any gatekeeper designated by the Department every six (6) months. The report shall contain the patient’s status in the directed outpatient commitment treatment plan, any past non-compliance with the treatment plan by the patient, and any barriers to the patient’s continued maintenance in the community setting.

**Section 4. Payment of Treatment Providers for Directed Outpatient Commitment**

Services provided by a treatment provider, pursuant to Wyo. Stat. Ann. § 25-10-110.1, shall be reported under mental health and substance abuse treatment contracts and agreements between treatment providers and the Department.

**Section 5. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

**Section 6. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

**Section 7. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**Chapter 11**  
**Directed Outpatient Commitment**  
**(Wyo. Stat. Ann. § 25-10-110.1)**

**Section 1. Authority.**

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**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities of Wyoming Department of Health treatment providers for the treatment of patients court-ordered to Directed Outpatient Commitment as provided in Wyo. Stat. Ann. § 25-10-110.1.

(b) The Department may issue manuals or bulletins to interpret the provisions of this rule, which reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

**Section 3. Directed Outpatient Commitment Treatment Provider Requirements**

(a) If an individual is determined mentally ill under the Act (Wyo. Stat. Ann. §§ 25-10-109 through -110.1) and is ordered by a court for directed outpatient commitment to a treatment provider as defined in Chapter 6 of these rules, the treatment provider shall comply with the court order and admit the patient unless it demonstrates to the court that it cannot comply with the court order for directed outpatient commitment.

(b) The treatment provider shall prepare a treatment plan, as required by the court order, in consultation with any gatekeeper designated by the Department. In preparing the treatment plan, the treatment provider shall consult with the county attorney, any relevant healthcare providers, and the patient or the person responsible for the care and custody of the patient. The treatment plan may not exceed two (2) years.

(c) The treatment provider shall issue a report to the court, the county attorney, and any gatekeeper designated by the Department every six (6) months. The report shall contain the patient’s status in the directed outpatient commitment treatment plan, any past non-compliance with the treatment plan by the patient, and any barriers to the patient’s continued maintenance in the community setting.

**Section 4. Payment of Treatment Providers for Directed Outpatient Commitment**

Services provided by a treatment provider, pursuant to Wyo. Stat. Ann. § 25-10-110.1, shall be reported under mental health and substance abuse treatment contracts and agreements between treatment providers and the Department.

**Section 5. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

**Section 6. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

**Section 7. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**CHAPTER 10**  
**Rules and Regulations for Convalescent Leave**  
**from Involuntary Hospitalization**  
**Standards for Convalescent Leave**

**Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at ~~W.S.~~ Wyo. Stat. Ann. §§ 25-10-101 through -127 and the Wyoming Administrative Procedure Act at ~~W.S.~~ Wyo. Stat. Ann. §§ 16-3-101, *et seq.* through -115.

**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities for releasing a patient on convalescent status pursuant to ~~W.S.~~ Wyo. Stat. Ann. § 25-10-127.

(b) The Department may issue manuals, or bulletins, ~~or both~~ to interpret the provisions of this rule, which. ~~Such manuals and bulletins shall be consistent with and~~ reflect the policies contained in this rule and regulation. The provisions contained in manuals or bulletins shall be subordinate to the provisions of this rule and regulation.

**Section 3. Conditions Necessary for Convalescent Leave.**

(a) Convalescent Leave may be utilized by the State Hospital or designated hospitals when:

(i) The patient:

(A) ~~has~~ Was previously ~~been~~ involuntarily hospitalized and ~~has~~ demonstrated an inability to follow past discharge plans or has demonstrated a history of noncompliance with outpatient treatment;

(ii) ~~The patient will~~ need additional assistance and support to adequately comply with the required plan of treatment on an outpatient or nonhospital basis; or

(iii) ~~The patient will~~ likely need and will benefit from community-based services and support to avoid decompensation and additional involuntary hospitalizations, and those services and support are available in the community the patient wishes to return to, or in the community best suited to provide such aftercare of the patient.

(ii) When the treating medical provider, after consultation with the treatment team and appropriate parties, believes it is in the best medical interest of the patient.

~~(b) Convalescent Leave may only be considered when at least one of the above requirements are met, and when the treating medical provider, after consultation with the treatment team and appropriate parties, believes it is in the best medical interests of the patient.~~

~~(eb) No person placed at the Wyoming State Hospital with active or pending legal charges will be eligible for Convalescent Leave. Wyoming State Hospital patients who have active or pending criminal charges may not be placed on convalescent leave.~~

#### **Section 4. Process to Initiate Convalescent Leave.**

(a) Request for Convalescent Leave.

(i) Treatment team. Members of the patient's treatment team and any designated gatekeeper must meet to discuss the potential benefits of Convalescent Leave. Although all members of the treatment team do not need to agree to the leave, all members of the team must be a part of the decision-making process. If the members of the treatment team do not arrive at a consensus for the use of Convalescent Leave, the patient's treating medical provider leading the treatment team will make the final decision. If a decision is made to pursue Convalescent Leave, the request must be documented and include the applicable conditions contained in Section 3(a) as justification for the request. If the patient's treatment team is located at a designated hospital, the treatment team shall consult with the Wyoming State Hospital on all convalescent leave orders and treatment plans.

(ii) Patient and Appropriate Parties. After a request for Convalescent Leave is made by the treatment team, one or more members of the treatment team shall provide written, email, or fax notice to and consult with the patient and appropriate relevant parties, including, when applicable, the guardian, parent, gatekeeper and community treatment provider. ~~Members of the treatment team shall document the date of notice to and consultation with the above parties, noting the participants of the consultation and any concerns or support expressed by these parties. A~~ member of the treatment team shall document this process.

(iii) Wyoming State Hospital or designated hospital staff shall assist patients being released on convalescent leave in applying for Medicaid and securing Social Security benefits, if applicable.

(b) Convalescent Leave Plan.

(i) ~~Once the treatment team has obtained input from the patient and all appropriate parties, a written Convalescent Leave Plan will be developed by the patient's treatment team, with the documented input of the patient and the community treatment provider. Using input from the patient and all appropriate parties, the treatment team shall develop a written Convalescent Leave Plan.~~

(ii) The Convalescent Leave Plan shall include:

(A) The roles and responsibilities of the patient and ~~the~~ other appropriate parties and any areas for which the treating facility, Wyoming State Hospital, or designated hospital will retain responsibility while the patient is on Convalescent Leave;

(B) The community treatment services, medication, and supports to be provided, the entity responsible for providing them ~~the services, medication, and supports~~ and how they will be paid. ~~Wyoming State Hospital staff will assist patients in applying for Medicaid and securing Social Security benefits, if applicable. Community treatment providers will bill third party pay sources prior to billing the patient for services provided;~~

(C) Provisions for quarterly reports from the community treatment provider, or any designated gatekeeper, to the ~~Wyoming State Hospital~~ Department on the status and progress made by the patient. If more than one community treatment provider is selected by the patient to provide outpatient services and supports, the plan shall specify the community treatment provider responsible for coordinating care and providing quarterly reports;

(D) The conditions under which Convalescent Leave will be revoked;

(E) The preferred location for detention and the method of detention of the patient if Convalescent Leave is revoked.

(iii) The Convalescent Leave Plan will be provided to the patient, the patient's treatment team, any designated gatekeeper, and other appropriate parties for signature, ~~thereby acknowledging its terms and the role of each entity in achieving the goals of the Convalescent Leave. Signature shall constitute acknowledgment of the plan, and the role of each entity in achieving the goals of the Convalescent Leave.~~

(iv) The Convalescent Leave Plan, signed by the patient, the patient's treatment team and other appropriate parties, may act as the initial report to the court ~~having jurisdiction over the location in which the case originated in support of Convalescent Leave,~~ or a separate report to



the court outlining additional information may be drafted and submitted by the treating medical provider.

~~(v) Copies of the signed Convalescent Leave plan shall be provided to the patient and the appropriate parties in a manner to ensure receipt of the copy prior to the patient's release. The treatment team shall provide copies of the signed Convalescent Leave plan to the patient and the appropriate parties in a manner to ensure receipt of the copy prior to the beginning of convalescent leave.~~

(c) Application Notice for Convalescent Leave.

~~(i) Upon completion of the Convalescent Leave plan, the Wyoming State Hospital will notify the Attorney General's Office of the request for Convalescent Leave. Notification to the Attorney General's Office may be by email or by fax, and must include copies of the initial commitment documents for the patient's involuntary commitment, the signed Convalescent Leave Plan, and any other relevant information or documents, including any separate reports that are drafted in support of the Convalescent Leave.~~

~~(ii) The Attorney General's Office Wyoming State Hospital or designated hospital will file an all application notices for approval of the Convalescent Leave as soon as possible upon receipt of all required information as set forth in Section 4(e)(i). A copy of the application will be sent to the county attorney who initiated involuntary hospitalization procedures, the attorney that originally represented the patient and the community treatment provider. with the Court and provide notice to the county attorney office that initiated involuntary hospitalization proceedings, any designated gatekeeper, and other interested parties. Notice shall consist of a copy of the notice for convalescent leave and copies of the initial commitment documents, the signed Convalescent Leave Plan, and any other relevant information or documents, including any separate reports or documents in support of the Convalescent Leave.~~

~~(iii) If no objection is filed by the county attorney or the court within fourteen (14) days of receipt of the application, the patient may be released on Convalescent Leave subject to being returned to the hospital for noncompliance.~~

~~(iv) If an objection to Convalescent Leave is filed by either the county attorney or the court, a hearing shall be scheduled by the court. At the hearing, the parties may appear to testify in support of or against the Convalescent Leave.~~

(vii) The Wyoming State Hospital shall develop and utilize uniform forms for Convalescent Leave Plans.

## Section 5. Return to Involuntary Hospitalization from Convalescent Leave.

(a) ~~If the requirements of the Convalescent Leave Plan are not followed by hospital~~ reasonably believes that it is in the best interest of the patient, the patient will~~shall~~ be returned to the Wyoming State Hospital. the hospital from which the patient was given convalescent leave. ~~The Wyoming State Hospital shall alone have the discretion to~~ hospital from which the patient was given convalescent leave may return the patient to its care, recognizing that the client retains the right to question this decision at a hearing subject to notice and hearing as provided by Wyo. Stat. Ann. §§ 25-10-116 and 127.

(b) Any member of the patient's treatment team, the patient, any designated gatekeeper, ~~or the other~~ appropriate parties may request that the Wyoming State Hospital hospital from which the patient was given convalescent leave return the patient to its care. ~~Requests to return the patient to the Wyoming State Hospital must be based on the inability of the patient or unwillingness of the patient to comply with the Convalescent Leave Plan. The Wyoming State Hospital however, must reasonably believe that a return from Convalescent Leave is in the best interests of the patient, before a return from Convalescent Leave is appropriate.~~ hospital shall review requests under subsection (b) to determine whether return from Convalescent Leave pursuant to subsection (a) is in the best interest of the patient.

(c) ~~If the patient is not able or is unwilling to return to the hospital, or if the Wyoming State Hospital hospital from which the patient was given convalescent leave refuses to return the patient to its care for a violation of the Convalescent Leave Plan, the party seeking the patient's return may request a hearing before the court that ordered the patient's involuntary hospitalization. The action shall be a continuation of the involuntary hospitalization proceeding, and the request for hearing shall be under the same docket number as the involuntary hospitalization proceeding. At this hearing, the court must determine that return to the Wyoming State Hospital from Convalescent Leave is in the best interests of the patient.~~

(d) ~~Transportation for a patient returning to the The Wyoming State Hospital shall be arranged by the Wyoming State Hospital~~ arrange transportation for a patient returning to the Wyoming State Hospital.

(e) The Wyoming State Hospital shall pay for the detention and transportation expenses to detain and return the patient to the hospital, pursuant to ~~W.S~~Wyo Stat. Ann. § 25-10-127.

(f) ~~The Wyoming Attorney General's Office~~ hospital from which the patient was given convalescent leave shall file a Notice of Return from Convalescent Leave with the court, and will provide copies to the appropriate parties, notifying the parties that the patient is being or will be returned to the Wyoming State Hospital hospital.

(g) Upon the patient's return to the ~~Wyoming State Hospital~~ hospital from which the patient was given convalescent leave, the patient shall be notified of his/her rights, including the right to contest his return to the ~~Wyoming State Hospital~~ hospital, the right to ~~an administrative~~ a hearing, and the right to counsel.

(h) If the patient is returned to the Wyoming State Hospital, the Convalescent Leave is revoked.

### **Section 6. One Year Follow Up.**

(a) Prior to the end of one (1) year on convalescent leave, and not less than annually thereafter, patient's one year anniversary on Convalescent Leave status, the patient's treatment team shall consult with the patient, any designated gatekeeper, and ~~each of the other~~ other appropriate parties to reconsider and reexamine the facts relating to the involuntary hospitalization of the patient.

(b) If the patient's treatment team and the community treatment provider determine that involuntary hospitalization is no longer anticipated for the patient, the community treatment provider and any designated gatekeeper, in collaboration with the Wyoming State Hospital or designated hospital, shall submit a 14-81 form to the Court for the discharge of the patient, following the procedures set forth in W.S.Wyo. Stat. Ann. § 25-10-116(b). With the participation of the patient, the patient's guardian, if applicable, the patient's caregiver, if applicable, the patient's family, if applicable, and the community treatment provider, the Wyoming State Hospital shall prepare a discharge plan.

(c) If ~~the a patient is~~ on Convalescent Leave ~~but~~ is later returned to the Wyoming State Hospital or designated hospital and then placed on Convalescent Leave status, the one year follow up shall be based on the date of the most recent Convalescent Leave.

### **Section 7. Two Year Discharge Process.**

(a) ~~At the patient's two year anniversary~~ After two (2) years on Convalescent Leave, the community treatment provider, in collaboration with the Wyoming State Hospital or designated hospital, and any designated gatekeeper, shall submit a 14-81 form to the court, seeking the discharge of the patient, pursuant to W.S. Wyo. Stat. Ann. § 25-10-116(b). The 14-81 form should note the client's success during the two year Convalescent Leave period, and include a discharge plan prepared by the Wyoming State Hospital in conjunction with the patient, the patient's guardian, if applicable, the patient's caregiver, if applicable, the patient's family, if applicable, and the community treatment provider and any designated gatekeeper.

(b) If the patient is returned from Convalescent Leave to the Wyoming State Hospital ~~or~~, designated hospital, or treatment provider and ~~subsequently again re-~~placed on Convalescent Leave status, the required discharge after two (2) years of Convalescent Leave shall be based on the date of the most recent Convalescent Leave.

**Section 8. Responsibilities of the Wyoming State Hospital or Designated Hospital While Patient is on Convalescent Leave.**

(a) While the patient is on Convalescent Leave, the Wyoming State Hospital or designated hospital shall periodically review, with the community provider and any designated gatekeeper, the treatment progress of the patient as documented in the quarterly report submitted by the community treatment provider.

(b) Neither the physicians nor the caseworkers at the Wyoming State Hospital or designated hospital ~~will have on-going responsibilities for the~~ shall provide direct care or treatment of the patient while the patient is on Convalescent Leave unless otherwise documented in the treatment plan, although they ~~will~~shall be available for consultation with community treatment providers. This provision recognizes the ~~client's~~patient's best interests in being placed in his or her local community, which may be a great distance from the Wyoming State Hospital or designated hospital. ~~The responsibility for the medical and/or mental health of the patient will follow the patient into the community setting as set forth in the Convalescent Leave Plan.~~

**Section 9. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

**Section 10. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

**Section 11. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

~~**Section 9. Superseding Effect.**~~

~~When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals and/or bulletins, which are inconsistent with this Chapter.~~

~~Section 10. **Severability.**~~

~~If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.~~

## **Chapter 12**

### **Exchange of Information under Title 25**

#### **Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127 and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

#### **Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities for the treatment of patients court-ordered to emergency detention, involuntary hospitalization, or Directed Outpatient Commitment as provided in Wyo. Stat. Ann. §§ 25-10-101 through -127.

#### **Section 3. Exchange of Patient Information under Title 25**

(a) When an individual is determined mentally ill under Wyo. Stat. Ann. §§ 25-10-109 through -110.1, protected health information regarding the individual’s condition, diagnoses, history, and detention or hospitalization may be exchanged between relevant healthcare providers, treatment providers, the county attorney, the examiner, any gatekeeper designated by the Department, and the court as necessary to carry out the purposes of this Act. Any exchange of protected health information under the Act shall comply with requirements under all applicable state and federal law.

#### **Section 4. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

#### **Section 5. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

#### **Section 6. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**Chapter 12**  
**Exchange of Information under Title 25**

**Section 1. Authority.**

This Chapter is promulgated by the Department of Health (“the Department”) pursuant to Hospitalization of Mentally Ill Persons (“the Act”) codified at Wyo. Stat. Ann. §§ 25-10-101 through -127, and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. §§ 16-3-101 through -115.

**Section 2. Purpose and Applicability.**

(a) These rules have been adopted to establish and implement the procedures and corresponding responsibilities for the treatment of patients court-ordered to emergency detention, involuntary hospitalization, or Directed Outpatient Commitment as provided in Wyo. Stat. Ann. §§ 25-10-101 through -127.

**Section 3. Exchange of Patient Information under Title 25**

(a) When an individual is determined mentally ill under Wyo. Stat. Ann. §§ 25-10-109 through -110.1, protected health information regarding the individual’s condition, diagnoses, history, and detention or hospitalization may be exchanged between relevant healthcare providers, treatment providers, the county attorney, the examiner, any gatekeeper designated by the Department, and the court, as necessary to carry out the purposes of this Act. Any exchange of protected health information under the Act shall comply with requirements under all applicable state and federal law.

**Section 4. Implementation of Chapter.**

(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any provision is more or less important than any other provision.

(b) The text of this Chapter shall control the titles of its various provisions.

**Section 5. Superseding Effect.**

When promulgated, this Chapter supersedes all prior rules or policy statements issued by the Department, including manuals or bulletins, which are inconsistent with this Chapter.

**Section 6. Severability.**

If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.