

Introduced: 2/18/80
Referred: Health, Education &
Social Services and Finance

1 IN THE HOUSE

BY MEEKINS AND BEIRNE

2 HOUSE BILL NO. 830

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 ELEVENTH LEGISLATURE - SECOND SESSION

5 A BILL

6 For an Act entitled: "An Act relating to alcohol and drug abuse; combining
7 and changing the membership of the advisory boards on
8 alcoholism and drug abuse; changing the responsibili-
9 ties of the office of alcoholism; amending the alco-
10 holism grant-in-aid program; and repealing a require-
11 ment for mandatory discharge of an alcoholic from
12 involuntary commitment."

13 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

14 * Section 1. AS 04.05.010(a) is amended to read:

15 (a) There is established an Alcoholic Beverage Control Board within
16 the Department of Revenue consisting of five members appointed for
17 overlapping three-year terms. The board is vested with the duties,
18 powers, and responsibilities involved in the control of alcoholic
19 beverages, including the adoption of [PROMULGATION OF RULES AND] regu-
20 lations and the hearing of appeals from the action of officers and
21 employees charged with enforcing the alcoholic beverage control laws [,
22 RULES,] and regulations. The governor shall appoint the board subject
23 to confirmation by the legislature. With the exception of membership
24 on the Advisory Board on Alcoholism and Drug Abuse, a [NO] member of the
25 board may not hold any other state or federal office, either elective or
26 appointive. Two members of the board shall be actively engaged in the
27 alcoholic beverage industry, except that no member may be an officer,
28 agent, or employee of a wholesale alcoholic beverage enterprise. No
29 three members of the board may be engaged in the same business, occu-

1 pation or profession. Three members constitute a quorum for the conduct
2 of business. The board shall meet at least once each year in each of
3 the four judicial districts to study, reconsider and modify existing
4 agency [RULES AND] regulations in the light of current local problems.

5 * Sec. 2. AS 47.30.475(b) is amended to read:

6 (b) Money available under this section shall be awarded by the
7 department to applicants on the basis of community need, but only if the
8 award is consistent with the annual implementation plan developed under
9 sec. 1513(b)(2) of P.L. 93-641 by the health systems agency for the
10 health system area in which the applicant is located and the state
11 health plan developed by the Statewide Health Coordinating Council under
12 sec. 1524(c)(2)(A) of P.L. 93-641, and only after consideration of
13 comment and advice of the Advisory Board on Alcoholism and Drug Abuse.
14 In awarding grants, the department shall further consider the amount of
15 money that is available for all applications and whether an application
16 would contribute to the wise development of a comprehensive program of
17 alcoholic rehabilitation and prevention.

18 * Sec. 3. AS 47.30.475(c) is amended to read:

19 (c) Grants shall be awarded in a ratio of 75 percent state money
20 to 25 percent community money, except that in communities found to be
21 rural areas by the department [DESIGNATED AS POVERTY AREAS] the ratio
22 shall be 90 percent state money to 10 percent community money [,] for
23 the costs of providing staff and limited improvement, renovation or new
24 construction of facilities for alcoholic detoxification, rehabilitation
25 or "half-way house" care. The department may waive all or part of the
26 the requirement that state money be matched by community money if the
27 office finds that community money is unavailable and waiver of the
28 requirement is in the best interests of the state. No grant for im-
29 proving, renovating or constructing may exceed \$50,000 except when there

1 is a lack of applicants for available money and then only with the
2 approval of the Advisory Board on Alcoholism and Drug Abuse. The de-
3 partment is not required to award all money available under this pro-
4 gram, or the full percentages specified in this subsection, when another
5 source of money is available or could reasonably be made available to
6 the applicant.

7 * Sec. 4. AS 47.37.020 is amended to read:

8 Sec. 47.37.020. OFFICE OF ALCOHOLISM AND DRUG ABUSE. An office of
9 alcoholism and drug abuse is established in the department. The office
10 shall be headed by a coordinator appointed by the commissioner. The
11 coordinator shall be a qualified professional who has training and
12 experience in the organization and administration of treatment services
13 for persons with medical-social problems. The coordinator is in the
14 classified service.

15 * Sec. 5. AS 47.37.050(a) is amended to read:

16 (a) An interdepartmental coordinating committee is created, com-
17 posed of the coordinator, [AND] the commissioners of health and social
18 services, education, transportation and public facilities [HIGHWAYS],
19 labor and public safety, and the director of the Alcoholic Beverage
20 Control Board. The committee shall meet at least twice annually at the
21 call of the commissioner of health and social services who is its
22 chairman. The committee shall provide for the coordination and exchange
23 of information on all programs relating to alcoholism, and act as a
24 permanent liaison among state departments engaged in activities affect-
25 ing alcoholics and intoxicated persons. The committee shall assist the
26 commissioner of health and social services and the coordinator in formu-
27 lating a comprehensive plan for prevention of alcoholism and for treat-
28 ment of alcoholics and intoxicated persons.

29 * Sec. 6. AS 47.37.060 is amended to read:

1 Sec. 47.37.060. ADVISORY BOARD ON ALCOHOLISM AND DRUG ABUSE.

2 There is established in the Department of Health and Social Services an
3 Advisory Board on Alcoholism and Drug Abuse. This board shall function
4 as a standing committee of the Statewide Health Coordinating Council
5 established under AS 18.07.011.

6 * Sec. 7. AS 47.37.070 is amended to read:

7 Sec. 47.37.070. COMPOSITION. The [ADVISORY] board [ON ALCOHOLISM]
8 consists of a member of the Alcoholic Beverage Control Board selected
9 by its members and nine members appointed by the governor.

10 * Sec. 8. AS 47.37.080 is repealed and re-enacted to read:

11 Sec. 47.37.080. QUALIFICATIONS OF APPOINTED BOARD MEMBERS. (a)
12 Of the nine appointed members of the board

13 (1) two shall be persons who are licensed to practice
14 medicine in the state, one of whom shall be certified in psychiatry;

15 (2) one shall be a practicing attorney who has been admitted
16 to the practice of law by the state supreme court;

17 (3) six shall be persons who have evidenced an interest in
18 the problems of alcoholism or drug abuse and who have knowledge of the
19 social problems associated with alcoholism or drug abuse.

20 (b) Of the nine members qualified under (a) of this section

21 (1) three shall be residents of the northern health systems
22 area established under 42 U.S.C. 300;

23 (2) three shall be residents of the southcentral health
24 systems area established under 42 U.S.C. 300;

25 (3) three shall be residents of the southeastern health
26 systems area established under 42 U.S.C. 300.

27 * Sec. 9. AS 47.37.090 is repealed and re-enacted to read:

28 Sec. 47.37.090. TERM OF OFFICE. (a) The term of a board member
29 is four years, except the chairman of the Alcoholic Beverage Control

1 Broad who serves ex officio.

2 (b) A vacancy occurring in the appointive membership of the board
3 shall be filled by appointment of the governor for the unexpired portion
4 of the vacated term.

5 (c) Appointed board members serve at the pleasure of the governor.

6 * Sec. 10. AS 47.37.100 is amended to read:

7 Sec. 47.37.100. COMPENSATION, PER DIEM, OR EXPENSES. Members of
8 the [ADVISORY] board [ON ALCOHOLISM] are not entitled to a salary, but
9 are entitled to per diem, reimbursement for travel and other expenses
10 authorized by law for other boards.

11 * Sec. 11. AS 47.37.110 is amended to read:

12 Sec. 47.37.110. DUTIES. The board shall act in an advisory capa-
13 city to the commissioner and the Statewide Health Coordinating Council
14 established under AS 18.07.011 in the following matters:

15 (1) special problems affecting mental health which alcoholism
16 and drug abuse may present;

17 (2) educational and research activities conducted by the
18 office in respect to the problems presented by alcoholism and drug
19 abuse;

20 (3) social problems which affect rehabilitation of alcoholics
21 and drug abusers;

22 (4) legal processes which affect the treatment and rehabili-
23 tation of alcoholics and drug abusers;

24 (5) a program of public relations concerning the problem of
25 alcoholism and drug abuse conducted by a department of the state govern-
26 ment or by an organized group; [WHOSE PURPOSE IS THE REHABILITATION OF
27 ALCOHOLICS]

28 (6) the preparation, review, and approval of local, regional
29 and statewide plans for the prevention, treatment, and control of alcohol

1 and drug abuse.

2 * Sec. 12. AS 47.37.120 is amended to read:

3 Sec. 47.37.120. [ALCOHOLISM] PROGRAM COORDINATOR. The [ALCO-
4 HOLISM] program coordinator shall carry out the development and imple-
5 mentation of a comprehensive program dealing with the treatment of,
6 research on and education concerning alcoholic problems as they affect
7 the state.

8 * Sec. 13. AS 47.37.130(c) is amended to read:

9 (c) The office shall insure that [PROVIDE] adequate and appropri-
10 ate treatment is provided to [FOR] alcoholics and intoxicated persons
11 admitted under AS 47.37.160 - 47.37.190 within the limits of available
12 state and federal funds.

13 * Sec. 14. AS 47.37.160(c) is amended to read:

14 (c) When a patient receiving inpatient care leaves an approved
15 public treatment facility, he shall be encouraged to consent to appro-
16 priate outpatient or intermediate treatment. If it appears to the admin-
17 istrator in charge of the treatment facility that the patient is an
18 alcoholic who requires help, the administrator [OFFICE] shall arrange
19 for assistance in obtaining supportive services and residential facili-
20 ties.

21 * Sec. 15. AS 47.37.190(a) is amended to read:

22 (a) After a hearing initiated by petition of his spouse or guardi-
23 an, a relative, the certifying physician, or the administrator in charge
24 of an approved public treatment facility, a person may be committed to
25 the custody of a private or public facility [THE OFFICE] by the superior
26 court. The petition shall allege that the person is an alcoholic who
27 habitually lacks self-control in using alcoholic beverages and that he
28 (1) has threatened, attempted to inflict, or inflicted physical harm on
29 another and that unless committed is likely to inflict physical harm on

1 another; or (2) is incapacitated by alcohol. A refusal to undergo treat-
2 ment does not constitute evidence of lack of judgment as to the need for
3 treatment. The petition shall be accompanied by a certificate of a
4 licensed physician who has examined the person within two days before
5 submission of the petition, unless the person whose commitment is sought
6 has refused to submit to a medical examination, in which case the fact
7 of refusal shall be alleged in the petition. The certificate shall set
8 out the physician's findings in support of the allegations of the peti-
9 tion.

10 * Sec. 16. AS 47.37.200(a) is amended to read:

11 (a) At the hearing required under AS 47.37.190(b), the court or
12 the jury, if requested under AS 47.37.190(c), shall hear all relevant
13 testimony, including, if possible, the testimony of at least one
14 licensed physician who has examined the person whose commitment is
15 sought. The person whose commitment is sought shall be present unless
16 the court believes that his presence is likely to be injurious to him,
17 in which case the court shall appoint a guardian ad litem to represent
18 him throughout the proceeding. The court may examine the person in open
19 court, or if advisable, examine him out of court. If the person has
20 refused to be examined by a licensed physician, he shall be given an
21 opportunity to request examination by a court-appointed licensed physi-
22 cian. If he fails to request a medical examination and there is suffi-
23 cient evidence to believe that the allegations of the petition are true,
24 or if the court believes that more medical evidence is necessary, the
25 court may issue a temporary order committing him to a private or public
26 facility [THE OFFICE] for a period of not more than five days for pur-
27 poses of a diagnostic examination.

28 * Sec. 17. AS 47.37.200(b) is amended to read:

29 (b) If after hearing all relevant evidence, including the results

1 of any diagnostic examination by the private or public facility
2 [OFFICE], the court or the jury finds that grounds for involuntary
3 commitment have been clearly established, the court shall issue an order
4 of commitment to the private or public facility [OFFICE]. No court may
5 order the commitment of a person unless it determines that a private or
6 public facility [THE OFFICE] is able to provide adequate and appropriate
7 treatment for him.

8 * Sec. 18. AS 47.37.200(c) is amended to read:

9 (c) A person committed under AS 47.37.190 - 47.37.200 shall remain
10 in the custody of a private or public facility [THE OFFICE] for treat-
11 ment for a period of up to 30 days. At the end of the 30-day period, he
12 shall be discharged automatically unless the private or public facility
13 [OFFICE], before the expiration of the period, obtains a court order for
14 his recommitment upon the grounds set out in AS 47.37.190(a) for a
15 further period of up to 90 days. If a person has been committed because
16 he is an alcoholic likely to inflict physical harm on another, the
17 private or public facility [OFFICE] shall apply for recommitment if
18 after examination it is determined that the likelihood still exists.

19 * Sec. 19. AS 47.37.200(d) is amended to read:

20 (d) A person recommitted under (c) of this section who has not
21 been discharged by the private or public facility [OFFICE] before the
22 end of the 90-day period shall be discharged at the expiration of that
23 period unless the private or public facility [OFFICE], before expiration
24 of the period, obtains a court order on the grounds set out in AS 47.-
25 37.190(a) for recommitment for a further period not to exceed 90 days.
26 If a person has been committed because he is an alcoholic likely to
27 inflict physical harm on another, the private or public facility
28 [OFFICE] shall apply for recommitment if after examination it is deter-
29 mined that the likelihood still exists. No more than two recommitment

1 orders may be permitted under (c) and (d) of this section.

2 * Sec. 20. AS 47.37.200(f) is amended to read:

3 (f) A private or public facility [THE OFFICE] shall provide ade-
4 quate and appropriate treatment for a person in its custody. A public
5 facility [THE OFFICE] may transfer a person in its custody from one
6 approved public treatment facility to another if the transfer is
7 medically advisable.

8 * Sec. 21. AS 47.37.230(a) is amended to read:

9 (a) Cities [THE OFFICE AND CITIES] and boroughs may establish
10 emergency service patrols. An emergency service patrol consists of
11 persons trained to give assistance in public places to persons who are
12 intoxicated. Members of an emergency service patrol shall be capable of
13 providing first aid in emergency situations and shall be capable of
14 transporting intoxicated persons to their homes and to and from public
15 treatment facilities.

16 * Sec. 22. AS 47.37.240(a) is amended to read:

17 (a) A patient in an approved treatment facility, or the person
18 obligated to provide for the cost of treatment of a person committed
19 under this chapter, is liable to the public or private facility [OFFICE]
20 for the cost of maintenance and treatment of the patient in accordance
21 with rates established by the coordinator.

22 * Sec. 23. AS 47.37.270(2) is amended to read:

23 (2) "approved private treatment facility" or "private
24 facility" means a private agency meeting the standards prescribed in
25 AS 47.37.140(a) and approved under AS 47.37.140(c);

26 * Sec. 24. AS 47.37.270(3) is amended to read:

27 (3) "approved public treatment facility" or "public facility"
28 means a treatment agency operating under the direction and control of
29 the office or providing treatment under this chapter through a contract

1 with the office under AS 47.37.130(g) or through a grant awarded under
2 AS 47.30.475, and meeting the standards prescribed in AS 47.37.140(a)
3 and approved under AS 47.37.140(c);

4 * Sec. 25. AS 47.37.270(11) is amended to read:

5 (11) "office" means the office of alcoholism and drug abuse
6 within the Department of Health and Social Services;

7 * Sec. 26. AS 47.37.270 is amended by adding a new paragraph to read:

8 (13) "board" means the Advisory Board on Alcoholism and Drug
9 Abuse established under AS 47.37.060.

10 * Sec. 27. AS 44.29.100 - 44.29.140 and AS 47.37.200(g) are repealed.

11 * Sec. 28. The terms of the present members of the Advisory Board on
12 Alcoholism and the Advisory Board on Drug Abuse terminate on the effective
13 date of this Act. Appointments to the Advisory Board on Alcoholism and Drug
14 Abuse shall be made in accordance with this Act. A person presently serving
15 on either of those boards who meets the qualifications of this Act may be
16 appointed to the Advisory Board on Alcoholism and Drug Abuse.

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