



2025-2026 General Assembly

HOUSE BILL 1104: Improve Involuntary Commitment Process and Enhance Public Safety, Sec. 11: Modify Outpatient Commitment

Analysis of: S.L. 2026-38, Sec. 11

Date: August 17, 2026

Prepared by: Legislative Analysis
Division Staff

Section 11 of S.L. 2026-38 (House Bill 1104) makes several changes to the outpatient involuntary commitment (IVC) process.

- The following items are added to the list of required findings necessary to support an outpatient commitment recommendation after the first examination:
 - The respondent is reasonably determined to be capable of surviving safely in the community, without posing a danger to others, when engaged in treatment for the respondent's mental health.
 - The respondent has a history of declining or nonadherence to prescribed treatment, which may be evidenced by the occurrence of one or more of the following in the relevant past:
 - A demonstrated history of prior violent convictions.
 - Repeated violations of civil protective orders.
 - Repeated incarcerations.
 - Repeated involuntary inpatient psychiatric hospitalizations.
 - The respondent is scheduled to be discharged from an inpatient hospital setting or released from a county jail or state prison. An individual residing in a non-institutional setting that meets all other criteria set forth previously may be subject to outpatient commitment within the court's discretion.
- The outpatient treatment provider must examine the respondent and develop an initial outpatient treatment plan. The plan must include specific services to be provided, the recommended frequency of participation in services, the name of the provider, the arrangements made for the initial contact with each provider, and any other relevant information. The plan will be admitted into evidence and incorporated into the outpatient commitment order.
- The outpatient commitment order must show the provider responsible for care and the Local management Entity/Manages Care Organization (LME/MCO) or an alternative as determined by the Department of Health and Human Services (DHHS).
- The initial outpatient commitment timeframe is increased from a maximum of 90 days to a maximum of 180 days.
- The court must obtain the availability and consent of the provider to accept the respondent as a client before ordering outpatient commitment.

Kara McCraw
Director



Legislative Analysis
Division
919-733-2578

House Bill 1104

Page 2

- If the respondent fails to comply with any part of the treatment plan, the provider must document efforts to solicit compliance and report these efforts to the LME/MCO, who then reports to the court with a request for supplemental hearing.
- The LME/MCO must maintain a list of all individuals on outpatient commitment and ensure the individual's care manager is aware of the treatment plan. DHHS will have access to the lists of individuals subject to outpatient orders and must keep this information confidential.
- Grant the LME/MCO, or an alternative, the authority to request the respondent be taken into custody for the purpose of an examination if the respondent fails to comply but does not clearly refuse to comply.
- The LME/MCO, or an alternative, must notify the clerk of superior court if the respondent moves to another state or unknown location.
- Create an additional option for the court when it determines during a supplemental hearing that the respondent has failed to comply with the outpatient commitment order. The court will be able to issue an order for inpatient commitment upon a finding by clear, cogent, and convincing evidence that the respondent is dangerous to himself or to others. A finding of noncompliance with an outpatient commitment order creates a rebuttable presumption that the respondent is dangerous to self or to others.
- If a patient under outpatient commitment in one county moves to another county, the court must designate the LME/MCO, or an alternative, that will be responsible for the monitoring and supervision of the respondent in the respondent's new county of residence. The clerk must provide a copy of the court's order to the LME/MCO or alternative in the new county of residence.
- Increase the outpatient commitment period from 90 days to 180 days when a respondent is transferred from inpatient to outpatient commitment at a supplemental hearing.
- Grant DHHS access to all relevant data, court orders, records or other relevant information related to its duties. DHHS is required to keep all information confidential.

This section becomes effective December 1, 2026, and applies to proceedings that occur on or after that date.