

**WHY WE OPPOSE S.2973 (formerly S.1115) establishing
Involuntary Outpatient Commitment/Assisted Outpatient Treatment in MA**

Involuntary Outpatient Commitment (IOC) (or Assisted Outpatient Treatment (AOT)) would be hugely expensive, diverting funds from proven [voluntary mental health services](#).

IOC would require a significant and costly infrastructure. This includes clinicians to design and implement orders, and staff to monitor and enforce them. It will also necessitate full judicial hearings with rights to public counsel, independent experts, written decisions, and appeals. Each time an order expires the state will be obliged to devote the resources again to extend orders.

All jurisdictions using IOC have devoted substantial resources toward implementation.

- In Maryland, which recently enacted IOC, the law requires a care coordination team—a psychiatrist, a case manager, and a certified peer specialist—and the bill carried a [\\$3 million fiscal note](#). The state estimated that each of 23 counties would need to spend [\\$250K to \\$5M annually on associated costs](#). The MD Department of Legislative Services projected an increased cost to the state’s public defender program of [more than \\$3M](#).
- Similarly, the cost of implementing Laura’s Law (California’s AOT program) was over [\\$5M a year for 120 patients in Orange County, CA](#).
- Berks County, Pennsylvania just opted out of implementing involuntary outpatient commitment for 2026 due to projected implementation burdens. The county Mental Health and Developmental Disabilities Administrator noted that IOC would require additional judicial hearings, an assessment team, staffing and timelines, all new burdens without dedicated funding. The county decided to rely instead on existing mobile and community-based services.

This bill is opposed by a coalition of organizations representing thousands of MA residents:

Arise for Social Justice, Springfield A Tribe Called Black Center for Public Representation Committee for Public Counsel Services Disability Law Center Disability Policy Consortium Jane Doe Inc.	Kiva Centers Mass. Advocating for Change Together Mass. Assoc. for Mental Health Mass. Psychiatric Rehabilitation Collaborative Mental Health Legal Advisors Committee Metro Boston Recovery Learning Community National Coalition for Mental Health Recovery	National Empowerment Center NE Recovery Learning Community Prisoner Legal Services Roots Up SE Recovery Learning Community Wildflower Alliance Wild Ivy Social Justice Network
---	---	--