1	COURT OF APPEALS
2	STATE OF NEW YORK
3	MATTER OF TALBOT V.,
4	Appellant,
5	
6	-against- NO. 53
7	KINGSBORO PSYCHIATRIC CENTER,
	Respondent.
9	20 Eagle Street Albany, New Yorl May 18, 2022
10	Before:
11	CHIEF JUDGE JANET DIFIORE ASSOCIATE JUDGE JENNY RIVERA
12	ASSOCIATE JUDGE MICHAEL J. GARCIA
13	ASSOCIATE JUDGE ROWAN D. WILSON ASSOCIATE JUDGE MADELINE SINGAS
14	ASSOCIATE JUDGE ANTHONY CANNATARO ASSOCIATE JUDGE SHIRLEY TROUTMAN
15	
16	Appearances:
17	ARTHUR A. BAER, ESQ.
	MENTAL HYGIENE LEGAL SERVICE Attorney for Appellant
18	600 Old Country Road Room 224
19	Garden City, NY 11530
20	PHILIP J. LEVITZ
21	OFFICE OF THE NEW YORK STATE ATTORNEY GENERAL Attorney for Respondent
22	The Capitol Albany, NY 12224
23	
24	Amanda M. Olive
25	Official Court Transcriber



1 CHIEF JUDGE DIFIORE: The next appeal on this 2 afternoon's calendar is appeal number 53 in the Matter of 3 Talbot V. versus Kingsboro Psychiatric Center. 4 Counsel, hold on until your colleagues have an 5 opportunity to clear out. 6 Good afternoon, Counsel. 7 MR. BAER: Good afternoon, Your Honor, Arthur Baer on behalf of Talbot V. I would like to request two 8 9 minutes for rebuttal, Your Honor. 10 CHIEF JUDGE DIFIORE: You may have two minutes, 11 sir. 12 MR. BAER: Okay. 13 The primary issue before this court is whether 14 the Office of Mental Health may abrogate the plain language 15 of the statute. When - - - which one considered the 16 legislative history was unequivocally enacted to protect 17 the due process rights of patients. And referred to the 18 clinical record as the record that should be provided which 19 is now codified as 33.13. 20 And - - - the - - -2.1 JUDGE RIVERA: Well, Counsel, let me interrupt 22 you. Good afternoon, I'm on the screen. 23 So is the accompanying data required under the 24 statute. Is that what you mean, what's listed as the

25

clinical record?

MR. BAER: That - - - that's correct.

2.2

JUDGE RIVERA: That that's what we should assume that means?

MR. BAER: That's exactly right, Your Honor. And I - - - the legislation was - - - the language was first enacted in 1964 as part of the - - - as based on the Association of the Bar of the City of New York's essentially landmark study on mental illness and due process which made several recommendations. The first of which was to create the Mental Health Information Service. In fact, in the report, called the Mental Health Review Service. That they assemble and provide data to the courts, make recommendations with respect to whether it should be a hearing, a counsel appointed, and witnesses - - additional witnesses provided under the - - - 35 of the judiciary law. And - - - and what the disposition should be.

So it was absolutely clear, the memorandum of the Administrative Board of the Judicial Conference at that time stated the following in support of the 1964 essentially seminal legislation. The committee, that is the committee of the Association of the Bar, for the study of commitment procedures also recommended that machinery be set up to ensure that in the event of judicial hearings, all pertinent data with respect to the patient's case can



be presented to the court so they can make informed judgment on the case.

2.1

2.2

And to achieve the latter act, the committee recommended the establishment, and it's called the Mental Health Review Service which would operate under the supervision of the courts. It's main function would be to assemble, provide the court having jurisdiction of the case, pertinent and relevant - - relevant data on - - on each patient's case, the need for hospitalization, the right to discharge, and furnish the court with pertinent information.

So it's absolutely clear that this legislation was referring to the clinical record. And how do we know that? Because the legislation, when enacted in 1964, that is section 72.3 of the legislation, specifically referred to section 20 of the Mental Hygiene Law. Mental - - - section 20 of the Mental Hygiene Law, 1964, this is chapter 738 of the mental - - of the Laws of New York, except - - Chapter 20 was on a - - section 20 was amended to require for the first time that - - to include the documents re - - or the record required by the the Commissioner, that is the Commissioner of Health and Mental Hygiene.

And that - - and that specific - - - those specific - - - section 20 at that time says - - - said the



case record instead of the patient's record. But it then referred to the commissioner's regulation. Section 21 of the commissioner's regulation was also called case records. These are records that are required by statute and regulations that be provided by hospitals.

2.1

2.2

Case records should squarely be kept, and should contain the following. So it's both the statute and the regulation. And the records that required to be - - - were required to be provide - - - kept, were the original admission paper, the patient's history, the reports of examination, the statistical data, and the records that - - - of the course, and treatment, or training, and changes in the condition of the patient, the mental and physical condition of every patient should be recorded at least once every month during the first year, and every three months in subsequent years. That was the statutory reference when the - - that statutory language was enacted.

That - - - those section 20 and section 24, which was a confidentiality provision, and the regulations were essentially recodified in 1972 as - - - as section 15.13, which was renumbered in 1977 as section 33.13. So the legislative history is clear that there was a reference to the clinical record.

And further, the - - you know, it was to - - - to ensure due process. In 1964, hearings would be held - -



- were being held - - - there was proceedings being held without hearings. And that's why these recommendations were required. And there was no - - - no periodic retention hearing so that people became forgotten and lost. And they saved the program.

2.1

2.2

The Mental Hygiene Information Service, which became Mental Health Legal Service in 1985, didn't have unfettered access to records until 1977, thirteen years subsequent to the passage of this language and the statute. So that it was clear the intention of the legislature wasn't that the - - - the unfettered access of Mental Hygiene Legal Services were, it's going to supply due process. It was a requirement of the statute, which was originally 72.3, which became 31.31(b) which was then recodified as 9.31(b), that was the language that was required before - - before the, you know, the unfettered access was required.

CHIEF JUDGE DIFIORE: Thank you, Counsel.
Counsel?

MR. LEVITZ: Thank you, Your Honors. Philip Levitz for Kingsboro State Hospital.

Talbot V.'s appeal fails for two independent reasons. First, OMH regulations reasonably interpret article 9 not to require state hospitals to copy patients' entire medical charts for MHLS before every admission and



retention hearing when MHLS requires - - -

2.1

JUDGE RIVERA: Counsel, let me interrupt you.  $\label{eq:counsel} {\tt I'm --- I'm} \ \ {\tt on the screen}.$ 

Their argument is not, as I understand what he was just saying, their argument is that the - - - the patient's record, that clinical record, these notes, and otherwise that they want to copy of, fits within accompanying data provided by the statute separate from whatever else in addition the commissioner's regulations might require. That is to say, as I understand their argument, it - - - the commissioner cannot somehow cut - - reduce, excuse me, the amount of data that's available that the statute provides for.

Can you address - - - he's gone through this long - - - your adversary's gone through this long historical discussion showing the evolution of the statute to show that accompanying data has always meant to refer to the clinical record. Can you address why he is wrong?

MR. LEVITZ: He's wrong - - - first of all, that entire history is found nowhere in any of the briefs that MHLS filed in - - at this stage, in the court, or anywhere else in this proceeding at any stage, and, thus, is - - is waived.

But more fundamentally, there's absolutely nothing that he cited that indicates anything about what



the relevant provision means now. So let's talk about what the provision means now. And let me start this way, by saying article 9 does not require that state hospitals copy patients' full medical charts, okay? To the contrary, as this court explained in Daniels, the article 9 provision at issue, section 9.31(b) is a notice provision, okay? That's language from - - - from this court's decision in Daniels. It's - - -

JUDGE RIVERA: Yeah, but we said we left this question open. So why don't - - again, why don't you address - - - you said, but that's not - - - put aside the history, you say that's just not what the statute means.

Tell me why it doesn't mean what he says.

Remember, this is not about what the commissioner may say.

MR. LEVITZ: Well - - -

JUDGE RIVERA: The argument is different. It's about what accompanying data under the statute means. Tell me what that means.

MR. LEVITZ: So what accompanying data means in the statute is simple. It's the medical certificates that are required to accompany the applications for admission or retention. And we know that in the statute because the word accompany is actually used repeatedly in section 9.27, 9.27(a), and 9.27(e) to refer to the medical certificates accompanying the application for admission.



1	JUDGE RIVERA: Yes, but the application yo			
2	can't have an application without the certificates. So it			
3	strikes me that the certificates are part of the			
4	application itself.			
5	MR. LEVITZ: Well			
6	JUDGE RIVERA: There's no right? You			
7	you cannot proceed without the certificates; is that not			
8	correct?			
9	MR. LEVITZ: The certificates are always			
0	associated with the application. But again, the word that			
1	the statute itself uses is accompany. And so it's clear			
2	that what the drafters of the statute intended is that the			
3	accompanying data is the medical certificate.			
4	JUDGE RIVERA: Then why didn't it just say that?			
5	Why create all this challenge if if it doesn't mean			
6	something broader than what you suggest?			
7	MR. LEVITZ: I I mean, I			

JUDGE RIVERA: Why wouldn't it just say, and the certificates; why wouldn't it just say that?

MR. LEVITZ: I mean, think it does effectively say that in 9.27(a) and (e). But in any event, absolutely nothing in the statute says that it's anything more than the certificate. But what the statute does say in 9.01 is what the - - - what the record is, is you know, the application for the admission and retention, and the

accompanying data required by this article, so the certificates, and the regulations of the commissioner. So again, built into the definition in 9.01 is this ability for the commissioner to define by regulation what the accompanying data is.

And that's crucial here. And I think it goes to

2.2

And that's crucial here. And I think it goes to something that Your Honor was getting at initially, which is actually what the commissioner thinks is crucial and is owed great deference here because the statute itself embodies this view that the commissioner has to define what the accompanying data is, okay? And so the commissioner -

JUDGE WILSON: Well, it doesn't - - -

MR. LEVITZ: - - - had done so - - -

JUDGE WILSON: - - - it doesn't actually - - 
the - - - the language doesn't actually read that way,

right? It says the accompanying data and whatever

additional data or information the commissioner wants. It

doesn't suggest - - - that and part doesn't suggest the

commissioner can contract the meaning of whatever the data

is, right?

MR. LEVITZ: I agree the commissioner can't contract from what the statute requires. But it can decide to add to that or not. And in this particular case, the commissioner has decided not to add to what the statute



itself requires. And article 9 - - - and again, it's not what's required by any provision of the Mental Hygiene Law in 9.01. What 9.01 says is it - - - it's - - - the accompanying data is what's required by article 9, by this article, and by the regulations of the commissioner.

2.1

2.2

All that's required by this article as accompanying data is the medical certificates. And the commissioner has expressly issued a regulation through notice and comment saying that's all that's required at this time is the - - is the medical certificates and accompanying data simply means the medical certificates, nothing else is required.

Now that makes good sense. And let me explain why. And it goes back to this idea that the court recognized in Daniels which is that this whole provision is at - - in 9.31 is a notice provision. It's providing notice of a hearing to MHLS of a request to a - - for a hearing to MHLS and to the court. And so what's required to be provided is what's necessary to put them on notice of the hearing and the basis for the hospital's case for admission or retention.

And what's required to do that is the application and the medical certificates that provide the basis for the

JUDGE RIVERA: So then Counsel, the reason MHLS



1	has access, not the copies, but has access is another
2	provision of the statute; is that that's your
3	position, correct?
4	MR. LEVITZ: Absolutely. There's a totally
5	separate provision of the the statute in article
6	_
7	JUDGE RIVERA: So they they can go and loo
8	at the full record at any time they want before the
9	hearing; correct, that's your view?
10	MR. LEVITZ: Absolutely.
11	JUDGE RIVERA: They can even make copies on your
12	copy machines, correct?
13	MR. LEVITZ: Absolutely. They can do that
14	JUDGE RIVERA: All right. Would you take the
15	same but let me ask you this. Would if you -
16	- I understand part of the issue is your that
17	that this is not digitized, right? Are you the only
18	facility that doesn't have them digitized, or is this
19	common
20	MR. LEVITZ: No.
21	JUDGE RIVERA: a common problem?
22	MR. LEVITZ: It is an it is an issue at
23	multiple facilities. The OMH has basically been
24	making great efforts in recent years and at great expense
25	to transition the facilities across the state towards

medical - - - I'm sorry, towards electronic medical 1 2 That process is not yet complete. It's not 3 complete at Kingsboro Hospital, and it's not complete at 4 other hospitals. It's a process that's ongoing. 5 But yes, Your Honor is correct, that a lot of the 6 burden here is associated with the fact that at Kingsboro, 7 these records - - - these medical charts are physical 8 documents, and they have to be physically copied. And as a 9 result of that, it makes great sense for MHLS, which as 10 Your Honor rightly pointed out, has access at any and all times under the statute to these charts to be able to go 11 12 in, make a copy of any portion that is - - -13

JUDGE RIVERA: And - - - and do you let MHLS know in advance what you're going to rely on?

MR. LEVITZ: The - - -

14

15

16

17

18

19

20

21

22

23

24

25

JUDGE RIVERA: For the - - - to support the continued retention?

MR. LEVITZ: I mean, that's the purpose of this notice provision. Again, is you provide the application, the application attaches the basis for the admission or the retention. For retention applications, there's a whole clinical summary from the examining clinician there at the hospital who explains this is the basis for retaining this person.

JUDGE RIVERA: But you will go beyond that. Are



2 is brought to the hearing and often attempted to be 3 admitted at the hearing; is that not correct? MR. LEVITZ: 4 That is - - - that is often the 5 And what's going on there is the clinical record -6 - - I'm sorry, the clinical chart is being used as evidence 7 at the hearing. And any party can introduce the clinical 8 chart, or any portion of the clinical chart, as evidence at 9 the hearing. The hospital can do that, or MHLS can do 10 that. So MHLS can go look at it before and make copies of 11 any parts that it wants to introduce at the hearing, and 12 introduce it at the hearing, or the hospital's counsel can 13 do that. 14 True. But it's your burden, JUDGE RIVERA: 15 It's the hospital burden? 16 MR. LEVITZ: It's the hospital's burden to prove 17 its case, absolutely. Not to - - -18 JUDGE RIVERA: Yes. To prove the need for the 19 retention; it's your burden? 20 MR. LEVITZ: Right. And so the hospital will go 21 in and present the evidence that it feels it necessary to -22 - - to offer that proof. And it does so. 23 Let me also make sure I mention, Your Honors,

--- is it incorrect --- I thought that the whole record

1

24

25



that there's a totally independent basis that the appeal

here fails which we haven't talked about which is that it's

moot. There's no dispute here that Talbot V. is no longer 1 2 - - - no longer retained at a state facility. He was 3 discharged to a nursing home some time ago. And the 4 mootness exception simply doesn't apply here because this 5 is not an issue that will evade review. 6 And the reason for that is Talbot V., himself, 7 demonstrates. Talbot V., himself, was in a state facility 8 continuous - - - essentially, continuously for about a 9 decade. He could have raised this issue at any time in the 10 course of his period of retention at any of the prior admission or retention hearings that he had. He didn't do 11 12 that. And eventually, this issue was mooted for him. 13 But that's not true of any other, you know, 14 patient who can bring the same - - - raise the same issue 15 and have it addressed in a future case. 16 So there are two independent reasons that the 17 appeal here fails. And I see I'm out of time. 18 CHIEF JUDGE DIFIORE: Thank you, Counsel.

MR. LEVITZ: Thank you, Your Honors.

19

20

21

2.2

23

24

25

CHIEF JUDGE DIFIORE: Counsel, why don't we resolve this appeal on mootness grounds?

MR. BAER: Pardon me, Your Honor?

CHIEF JUDGE DIFIORE: On mootness?

MR. BAER: Oh, because it's not moot, Your Honor. It's an exception to mootness. That it's technically moot,



but it's an exception to mootness is that it's issue that - of statewide importance. It's capable and it has the
re - - it's capable repetition and evading review of the
- - the hearings are from sixty days to two years, and is
unlikely to be resolved during the time of appeal. It's
been here, this is the second time, and it should be
addressed.

2.1

2.2

I'd like to get back to some of the arguments and some of the questions raised, and some of the arguments that I didn't get a chance to make initially.

First, though, with respect to the legislative history, I just refer the court to the - - - chapter 738 of 1964, chapter 251 of 1972, chapter 978 of 9 - - - 1977, so the court can refer to the legislative history itself.

JUDGE GARCIA: Is that - - - is that material cited in any of your briefs, Counsel?

MR. BAER: The legislative history, I don't believe it is, Your Honor. It's something I read when I prepared for it, understanding that there's no exact definition as it currently stands. But I wanted to look at it and see where the language came from. And I found it.

And it is a proper exercise of this court to actually look at the legislative history. But the plain - - - the plain language of the statute is clear. It says record of patient, and that's what it means.

But I mean, I would like to first of all say that

-- as I said earlier, that the State's argument

nullifies the language of the statue, that is it conflates

and papers, and admission papers, retention papers,

transfer papers with accompanying data. And that just

nullifies completely the accompanying data. Essentially,

what they say they should provide is only the accompanying

data.

It's discriminatory - - -

2.1

2.2

JUDGE RIVERA: Yeah, but let me - - - Counsel, let me interrupt you there because they raise an interesting issue. They say the record is defined as accompanying data required by this article, which would be article 9, and you were referring to article 33.

MR. BAER: Well - - -

JUDGE RIVERA: So how do you address that regarding the plain text?

MR. BAER: Well let me - - - let me explain, Your Honor. That was the original language. That was - - - that language was first enacted in 1972. And it referred to essentially this article, and this article then - - - that same language of - - - of - - - what became 9.31(b) included both - - - was included both for those who are being confined with - - because of issues of mental illness, those who were developmentally disabled, and those

1 with respect to people being - - - the confined with 2 respect to alcoholism. And there's only one regulation, so 3 you create subclasses of persons with disabilities. 4 this only applies to persons who have mental disabilities, 5 but none of the others. 6 But that language in 9.01 was 31.01 then. It - -7 - it's 15.01 currently. And it's also part of the general 8 statutory definition of Mental Hygiene Law 1.03, 1.03(46) 9 which says, applies throughout the chapter. The chapter is 10 chapter 27, laws of New York, which is in the Mental

So that - - - and adding ambiguity because of the phrasing of it, is because of the way the legislation was promulgated over time. But the actual reference was the reference to the statutes that the facility - - - that required the facilities to keep medical records, and the regulations that require the facilities to keep medical records. And that became 33.13, Your Honor.

CHIEF JUDGE DIFIORE: Thank you, Counsel.

MR. BAER: Well - - - okay.

(Court is adjourned)

2.2

11

12

13

14

15

16

17

18

19

20

2.1

Hygiene Law.

23

24

25



Matter

		CERTIFICATION	
2			
3	I, A	manda M. Oliver, certify that the foregoing	
4	transcript of proceedings in the Court of Appeals of Matte		
5	of Talbot V. v. Kingsboro Psychiatric Center, No. 53 was		
6	prepared using the required transcription equipment and is		
7	a true and accurate record of the proceedings.		
8			
9		hance of mo diver	
10	Signature: M. Oliver		
11			
12			
13	Agency Name:	eScribers	
14			
15	Address of Agency:	7227 North 16th Street	
16		Suite 207	
17		Phoenix, AZ 85020	
18			
19	Date:	May 26, 2022	
20			
21			
22			
23			
24			



25