

# Update on *Olmstead* Litigation

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## FINAL REPORT

May 2023

*Prepared under the:*

**Substance Abuse and Mental Health Services Administration  
State Program Improvement Technical Assistance Project**

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***SAMHSA***

Substance Abuse and Mental Health  
Services Administration

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# Table of Contents

<b>Introduction</b> .....	<b>1</b>
<b>Major Topics in <i>Olmstead</i> Inquiries/Lawsuits</b> .....	<b>2</b>
Insufficient Support for Transition .....	2
Psychiatric Hospitals .....	2
Adult Homes/Board and Care Homes .....	3
Nursing Homes .....	4
Segregated Non-Residential Services .....	4
Social Services .....	4
Employment Supports.....	4
Public Education .....	5
Inadequacy of Community-Based Services for Children and Youth .....	5
Differential Treatment in Justice Systems.....	5
Post-Release Services.....	6
Pre-Release Services .....	6
Involuntary Confinement .....	6
Community Crisis Interventions.....	6
Risk of Institutionalization .....	6
Institutional Closure Cases .....	7
Summary of Topics.....	8
<b>Case Summaries</b> .....	<b>9</b>
Pre-Filing.....	9
Active .....	12
Ongoing Monitoring .....	16
Closed .....	22
<b>Attachment: August 2018 Docket of Cases</b> .....	<b>24</b>

# Update on *Olmstead* Litigation

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## Introduction

This report examines the most recent litigation involving community integration of people with mental illness, as required by the [Americans with Disabilities Act](#) (ADA), the ADA Title II [Integration Regulation](#), and the [1999 U.S. Supreme Court case \*Olmstead v. L.C.\*](#), which affirmed that unnecessary institutionalization of people who could benefit from community-based services was a form of discrimination prohibited by the ADA. The U.S. Department of Justice (DOJ) has issued a [Statement of the Department of Justice on Enforcement of the Integration Mandate of Title II of the Americans with Disabilities Act and \*Olmstead v. L.C.\*](#), last updated in 2020.

Under previous state technical assistance contracts, the [National Disability Rights Network](#) (NDRN) prepared the Docket of Cases Related to Enforcement of the ADA Title II “Integration Regulation,” which was updated multiple times, most recently on August 23, 2018. To continue the identification of past and current issues facing states and territories working to promote community integration, JBS International, with the assistance of Advocates for Human Potential, Inc., and NDRN, prepared this document, focusing on new cases and updates to the litigation included in the 2018 docket. (We have submitted a copy of the 2018 document with this report for reference.)

To identify relevant legal actions that have taken place *after* the 2018 docket was completed, NDRN conducted Westlaw searches and inquired with state Protection and Advocacy organizations. Additionally, AHP and NDRN identified cases pertaining to individuals with serious mental illness (SMI) or children and youth with serious emotional disturbance (SED) in the DOJ Civil Rights Division’s [Olmstead: Community Integration for Everyone](#) website. We also identified additional cases that involved SMI or SED, along with *Olmstead* or the Title II Integration Regulation in the following compilations of cases:

- DOJ Civil Rights Division, [Disability Rights Cases](#)
- DOJ Civil Rights Division, [Educational Opportunities Cases/Disability](#)
- DOJ Special Litigation Section, [Disability Rights Docket](#)
- University of Michigan Civil Rights Litigation Clearinghouse, [Disability Rights](#)
- Bazelon Center for Mental Health Law, [Our Cases](#)
- U.S. Department of Health and Human Services Office for Civil Rights (OCR), [OCR Olmstead Enforcement Success Stories](#)

With regards to one issue—segregated employment services—we included information about cases not involving SMI or SED. Supporting people with SMI or SED to work has long been an important policy goal for SAMHSA, and prior versions of the docket included information about cases involving segregated employment services for people with intellectual or developmental disabilities. Although no action has been brought exclusively seeking integrated employment services for people with SMI or SED, we feel that states should be aware that providing segregated employment services is a potential *Olmstead* issue.

This report begins with an analysis of the primary issues identified in these updates, which include insufficient transition services for people from unnecessarily restrictive settings (e.g., psychiatric hospitals, adult homes, psychiatric residential treatment facilities, correctional facilities, segregated schools, segregated employment settings, and nursing homes); the provision of non-residential services; issues relevant to specific populations (e.g., children and people involved in the criminal justice system); institutional closure cases alleging a right to institutional care; and cases in which an absence of services in the community creates a risk of institutionalization. This analysis identifies the states and territories involved (i.e., Alabama, Alaska, California, Colorado, Connecticut, Georgia, the District of Columbia, Illinois, Kansas, Louisiana, Maine, Massachusetts, Michigan, Mississippi, Nevada, New Hampshire, New Mexico, New York, North Carolina, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Washington, and West Virginia), describes the alleged compliance issue, and provides the most recent status of the inquiry or lawsuit. The analysis concludes with a summary table of issues and states.

Following the analysis by issue, we have presented short summaries of the individual cases, which include keywords, state or territory involved, status, summary, and latest action. The summaries also provide general information about the people covered by the legal action. However, because the actions typically identify only a small number of class members (e.g., six individuals out of thousands of affected individuals), it is not possible to draw more specific information about the demographics or diagnoses of the people at the center of these legal actions.

## Major Topics in *Olmstead* Inquiries/Lawsuits

### Insufficient Support for Transition

**States: California, Connecticut, Georgia, Illinois, Kansas, Kentucky, Louisiana, Missouri, New Hampshire, New York, North Carolina, South Carolina**

A central focus of *Olmstead* was that institutional placements limit the opportunities for persons with disabilities to participate in community life, including interacting with people who do not have disabilities. The court held that “unjustified isolation”—keeping people in institutional settings when they could benefit from less restrictive settings—is a form of discrimination prohibited by the ADA. States have faced legal action related to the sufficiency of transition services for individuals with SMI or SED being served in psychiatric hospitals, adult care homes, or nursing homes, as well as a lack of community-based services. The remedies sought have typically been improved discharge planning, expansion of community-based services, and reductions in admissions.

### **Psychiatric Hospitals**

The original *Olmstead* case dealt with the unnecessary institutionalization of two women in a psychiatric hospital, who remained there even though they could have been served in the community. Even after more than 2 decades, states continue to face legal action over unnecessary segregation of people with psychiatric disabilities in hospitals, primarily due to insufficient services to help people transition to community-based services. Notably, **Georgia**, where the *Olmstead* case originated, is still subject to monitoring of a 2010 settlement agreement. (See *United States v. Georgia* in case summaries and 2018 docket.) In 2019, **South Carolina** settled with Protection and Advocacy for People with Disabilities, Inc., and individual plaintiffs, agreeing to create transition teams, teach independent living skills, improve inpatient transition policies, and expand community-based crisis services, Assertive Community Treatment (ACT), housing, and peer support. (See *W.L. v. Binkley* in case summaries.)

**New Hampshire** is subject to ongoing monitoring in a case involving transitioning individuals from psychiatric hospitals. (See *Amanda D. v. Hassan* in case summaries and 2018 docket.) The settlement agreement requires the state to improve transition planning, create a team to address barriers to discharge, and expand community-based services necessary to ensure effective transition into the community. Although the state has made significant progress toward providing services (e.g., housing, crisis teams, ACT, and supported employment), the most recent report by the court-appointed expert reviewer found that New Hampshire has not yet met its obligations.

DOJ's 2012 Settlement Agreement with **North Carolina** (see case summaries and 2018 docket) requires the state to provide person-centered transition and discharge planning and provide transition services to help individuals move from state psychiatric hospitals into permanent supported housing.

Ongoing litigation against **Alameda County, California** focuses on *Olmstead* issues involving both psychiatric hospitals and the county jail. (See *Disability Rights California v. County of Alameda* in case summaries.) As to the *Olmstead* component, DOJ sent a letter to the county on April 22, 2021, documenting repeated and excessively long hospitalizations that isolated adults with SMI from family life. The plaintiffs also allege that the lack of transition services places them at risk of re-hospitalization. In another case, Disability Rights California alleges that **San Benito County** is segregating people in emergency departments due to a lack of capacity to transition them to more appropriate settings. (See *Disability Rights California v. San Benito County* in case summaries.)

Most recently, DOJ has opened a civil rights investigation into **Kentucky's** mental health service system (see case summaries) to determine whether the state unnecessarily segregates adults with SMI in psychiatric hospitals.

### **Adult Homes/Board and Care Homes**

In numerous states, facilities called “adult homes,” “board and care homes,” or similar became de facto institutions for adults with SMI. Generally, licensing requirements are minimal, and large numbers of people with SMI may be housed together, with few services to increase independence and few opportunities to interact with the community at large. Requiring people to reside with large numbers of other people with disabilities, rather than transitioning them to more independent, integrated settings, where appropriate, may violate Title II of the ADA.

A court-monitored settlement agreement has been in effect in **New York** since 2013. (See *Doe v. Zucker* and *Oceanview v. Zucker* in case summaries and *United States v. New York* and *Disability Advocates, Inc. v. New York* in 2018 docket.) The state agreed to provide supportive housing and care coordination, according to a 2013 settlement agreement, but regulations based on this agreement have recently been challenged, as described below under the discussion of institutional closure cases.

The DOJ's 2012 Settlement Agreement in *United States v. North Carolina* (see case summaries and 2018 docket) benefits individuals residing in adult care homes or at risk of admission to adult care homes upon discharge from state psychiatric hospitals or from unstable community housing. Under a recent modification, the settlement agreement extends until 2025. It requires **North Carolina** to provide in-reach counseling and person-centered transition and diversion planning to help people transition out of, or avoid admission to, adult care homes. The agreement also requires the state to provide community-based mental health services, including ACT, permanent supported housing, supported employment, peer supports, crisis services, and tenancy supports.

Most recently, DOJ opened a statewide disability rights investigation into South Carolina's use of adult care homes (see case summaries) to determine whether the state is unnecessarily institutionalizing adults with SMI.

### **Nursing Homes**

Like state psychiatric hospitals, nursing homes represent an unnecessarily restrictive setting for many individuals with SMI. **Illinois** continues to implement the *Williams v. Pritzker* consent decree originally entered in 2010 (as *Williams v. Quinn*), which requires the state to provide transition supports and community-based services for individuals with mental illness who reside in privately owned institutions for mental disease. (See case summaries and 2018 docket.) In *State of Connecticut Office of Protection and Advocacy for Persons with Disabilities v. Connecticut* (see case summaries and 2018 docket), **Connecticut** agreed to provide services (e.g., ACT, supportive housing, and crisis services) to individuals with SMI to accelerate their discharge from, and to prevent their future admission to, nursing homes. **Kansas** and **Louisiana** are also implementing settlement agreements related to transitioning people with mental illness from nursing homes. (See *U.S. DOJ Letter of Findings to Louisiana* and *Topeka Independent Living Resource Center v. Kansas Department of Aging and Disability Services* in case summaries.) DOJ is currently conducting a disability rights investigation into **Missouri's** use of skilled nursing facilities (see case summaries) to determine whether the state unnecessarily institutionalizes people with SMI in nursing facilities and whether the state's administration of its guardianship program contributes to that unnecessary institutionalization.

### **Segregated Non-Residential Services**

**States: Georgia, Massachusetts, New York, Oregon, Rhode Island**

While *Olmstead* litigation initially focused on where people with disabilities resided, it has since clearly been established that the integration mandate applies also to the provision of other publicly funded services (e.g., social services, employment supports, and public education). Segregating people with SMI or SED from people who do not have disabilities as a condition of receiving services can be considered a violation of the ADA.

### **Social Services**

Requiring people with mental illness or other disabilities to access publicly available services only at sites designated for people with disabilities has been found to be a form of segregation under the *Olmstead* precedent. In *Lovely H. v. Eggleston* (see case summaries), plaintiffs with mental illness and other disabilities sued **New York City** because the city required people with disabilities to use one of three designated "hubs" to access public benefits (e.g., public assistance, food stamps, and Medicaid) rather than the closest welfare office. After the trial court found a likely ADA violation, the case settled; as of 2022, the court was still monitoring the city's compliance with the settlement agreement.

### **Employment Supports**

*Olmstead* also applies to publicly funded employment supports, which many states provide to individuals with SMI and SED. The cases of *Lane v. Brown* (**Oregon**) and *United States v. Rhode Island and City of Providence* (see case summaries and 2018 docket), which involved sheltered workshops for persons with intellectual and developmental disabilities (IDD), established that *Olmstead* does apply to employment services. No *Olmstead* cases solely involving employment and people with mental illness were identified in the current review; however, some cases have included supported employment as part of a comprehensive remedy for unnecessary institutionalization. (See, e.g., *United States v. North Carolina* in case summaries and 2018 docket.)



### Public Education

Students with SED in **Massachusetts** challenged the policy of Springfield’s public schools to require them to attend a designated school rather than the school they otherwise would have attended if they did not have a disability. The case was dismissed on procedural grounds. (See *S.S. v. Springfield* in case summaries and 2018 docket.) A statewide lawsuit on behalf of students with behavior-related or emotional disabilities continues against **Georgia**. (See *United States v. Georgia Network for Educational and Therapeutic Support* in case summaries.)

### Inadequacy of Community-Based Services for Children and Youth

**States: Alabama, Alaska, Colorado, District of Columbia, Maine, Michigan, Nevada, New Hampshire, New Mexico, North Carolina, Pennsylvania, Washington, West Virginia**

Inadequacy of mental health services available in a child’s home and other community settings can have dire consequences (e.g., family separation and out-of-state placements). Courts have found that such inadequacy can constitute an *Olmstead* issue. During 2022, DOJ individually informed **Alabama, Alaska, Maine, and Nevada** (see pre-filing section of case summaries) that the inadequacy of community-based behavioral health services in each state resulted in unnecessary institutionalization in psychiatric hospitals, residential treatment facilities, and/or juvenile detention. Also in 2022 (January 14), DOJ filed a statement of interest in *A.A. v. Bimestefer*, a **Colorado** case, raising similar claims. In 2021, a settlement was reached in *K.B. v. Michigan Department of Health and Human Services* (see case summaries).

Similarly, in *Kevin S. v. Jacobson* (see case summaries), the court found that **New Mexico** did not provide adequate community behavioral health services for youth statewide. As a result, youth were inappropriately placed in congregate and out-of-state settings; as of 2022, the court was monitoring the settlement agreement. In another ongoing case, *M.J. v. District of Columbia* (see case summaries), the plaintiffs allege that a lack of intensive community-based services has led to inappropriate institutionalization and places other children at risk of institutionalization. Other ongoing lawsuits include *S.R. v. Pennsylvania Department of Human Services* and *G.K. v. Sununu* in **New Hampshire**. (See case summaries.)

Earlier, in *T.R. v. Dreyfus* (see case summaries), the court found that lack of community-based mental health services for children often led to institutional placements, child welfare involvement, juvenile detention, or academic failure. The parties negotiated a settlement agreement under which **Washington** would provide home- and community-based direct services, crisis intervention services, and intensive care coordination; the court ruled that the agreement had been fulfilled in 2021. **North Carolina** also met the requirements of a 2016 settlement agreement, while **West Virginia** is still implementing a 2019 settlement agreement. (See *Disability Rights North Carolina v. Brajer* and *United States v. West Virginia* in case summaries.)

### Differential Treatment in Justice Systems

**States: California, Colorado, Michigan, New York, Oklahoma**

Some legal actions suggested that adults and juveniles with mental illness face unjustified isolation or other negative consequences because of their disability. Numerous lawsuits brought by, or on behalf of, people who are currently incarcerated have cited the ADA and *Olmstead* decision, but such cases may be decided on other grounds, including other federal statutes or the [Eighth Amendment prohibition on cruel and unusual punishment](#).

### **Post-Release Services**

Potential *Olmstead* issues arise when a jail or prison denies opportunities to people with disabilities, which affects their future ability to assimilate into the community after release. For example, a current case against **New York** alleges that inadequacy of housing and community-based services has led to prisoners with mental illness being held past their release dates and subjects them to the risk of institutionalization. (See *M.G. v. Cuomo* in case summaries.) The case is ongoing.

### **Pre-Release Services**

*Olmstead* might also have implications for transition services provided prior to release. In an ongoing matter, DOJ found that **Alameda County, California**, denied detainees with SMI access to transition services (e.g., assistance with employment, housing, education, and outpatient substance use disorder [SUD] treatment), limiting their ability to successfully integrate into the community after release. (See *Disability Rights California v. County of Alameda* in case summaries.) In an earlier case, a group of plaintiffs had alleged that **Colorado** provided insufficient resources for adults with mental illness and SUDs (e.g., discharge planning, housing, and treatment) to successfully transition back into the community. (See *G.G. v. Hickenlooper* in case summaries.) However, the plaintiffs voluntarily withdrew their complaint.

### **Involuntary Confinement**

People who had been found not guilty by reason of insanity (NGRI) cited *Olmstead* in an ongoing case in **Michigan**. The plaintiffs had been receiving treatment in the community but were involuntarily re-hospitalized after they tested positive for using cannabis, which they had been doing under the state's medical cannabis program. They argue they could continue to be served effectively in the community and were being held in an unnecessarily restrictive setting. (See *Pelichet v. Lyon* in case summaries.)

### **Community Crisis Interventions**

The adequacy of community crisis response might constitute an *Olmstead* issue. In November 2022, DOJ announced it was investigating **Oklahoma, Oklahoma City**, and the Oklahoma City Police Department to determine whether an absence of community-based mental health services and police actions placed people with mental illness at an increased risk of involuntary hospitalization and criminal justice involvement. (See *Investigation of Oklahoma's Mental Health Service System and Oklahoma City's and Oklahoma Police Department's Response to Mental Health Crises* in case summaries.)

### **Risk of Institutionalization**

**States: Colorado, District of Columbia, Kentucky, Maine, Mississippi, Missouri, New Hampshire, New Mexico, Nevada, New York, Oklahoma, South Carolina, Washington**

Although the original *Olmstead* case dealt with plaintiffs who resided in institutions due to a lack of community-based services, courts consistently have held that individuals who are at risk of institutionalization due to a lack of community-based services are entitled to relief under the ADA and *Olmstead*.

For example, in *United States v. Mississippi* (see case summaries and 2018 docket), the court found that **Mississippi** violated the ADA because people who were at serious risk of state hospital admission did not have access to needed community-based mental health services that could prevent hospitalizations. The court reviewed community-based programs (e.g., ACT, supported employment, permanent supportive housing, mobile crisis teams), finding that people who needed these services could not access them. As a result, they cycled in and out of state hospitals. The court continues to monitor compliance.

Several of the cases described above also deal not with people who currently reside in institutions, but with people with mental illness who are at risk of institutional care due to an absence of community-based mental health services. Among those cases are:

- *A.A. v. Bimestefer* (inadequacy of community-based mental health services for children, **Colorado**)
- *DOJ Letter of Findings to State of Maine* (inadequacy of community-based mental health services for children, **Maine**)
- *Kevin S. v. Jacobson* (insufficient placement of youth with mental health disabilities in home-like environments, **New Mexico**)
- *Amanda D. v. Hassan* (insufficient community-based services for individuals with mental illness, **New Hampshire**)
- *New York v. Cuomo* (lack of resources for persons with mental illness exiting prison, **New York**)
- *M.J. v. District of Columbia* (lack of intensive services for children with mental health disabilities, **District of Columbia**)
- *T.R. v. Dreyfus* (lack of community-based mental health resources for children, **Washington**)
- *United States v. Mississippi* (lack of community-based mental health services, **Mississippi**)
- *Investigation of the State of Alaska's Behavioral Health System for Children* (lack of community-based services)
- *Disability Rights California v. County of Alameda* (lack of community-based supports for adults with SMI)
- *United States v. Georgia* (improvement of crisis services)
- *DOJ Letter of Findings to Louisiana* (lack of community-based services for adults with SMI)
- *Investigation of Nevada's Use of Institutions to Serve Children with Behavioral Health Disabilities* (lack of community-based services for children)
- *Disability Rights North Carolina v. Brajer* (lack of Medicaid community-based services for children with behavioral disabilities)
- *United States v. West Virginia* (lack of in-home and community-based services for children with mental illness)

## Institutional Closure Cases

### State: New York

In some cases, people with disabilities, or their representatives, have argued that closing institutions is itself discriminatory to current residents who benefit from institutional levels of care. *Olmstead* noted that federal regulations do not require “that community-based treatment be imposed on patients who do not desire it.” However, it did not hold the obverse (i.e., that people have the right to institutional care), as that was not an issue in *Olmstead*.

In **New York**, DOJ filed a statement of interest in what might be the first institutional closure lawsuit involving SMI. The plaintiffs argue that New York’s limitation of the placement of adults with SMI in adult homes, in compliance with an earlier *Olmstead* action, violates the rights of residents or prospective residents. (See *Residents and Families United to Save Our Adult Homes, et al. v. Zucker* in case summaries.) The plaintiffs further contend that *Olmstead* requires the state to provide institutional care unless the affected person requests a community placement.

DOJ’s [statement of interest](#) (May 31, 2022) points out:

[T]he Supreme Court in *Olmstead* was considering the circumstances in which the ADA requires community placement of institutionalized persons with disabilities, and ... it does not logically follow that the ADA requires institutionalization if ... *Olmstead* criteria are not met (p. 15).

DOJ's position relies on prior cases in which federal courts have found that *Olmstead* could not be relied upon to prevent the closure of state institutions for people with IDD. (See, e.g., *Illinois League of Advocates for Developmentally Disabled v. Illinois Dep't of Human Services*, 803 F.3d 872 (7th Cir. 2015) and *Richard C. v. Houstoun*, (W.D. Pa. Sept. 29, 1999), cited in *Residents and Families United to Save Our Adult Homes, et al. v. Zucker* in case summaries.)

## Summary of Topics

Table 1 below presents a summary of the *Olmstead* related inquiries and lawsuits, by topic and subtopic. Because some cases are included in more than one topic area, a total number of cases for all topics has not been included.

**Table 1:** Major Topics in *Olmstead* Inquiries/ Lawsuits and States Involved

Topic	Number of Cases	States Involved
<b>Insufficient Support for Transition</b>		
Psychiatric Hospitals	5	CA, GA, NH, SC, MS
Adult Homes/ Board and Care Homes	4	NY (2), NC, SC
Nursing Homes	3	CT, KS, LA, MO
<b>Subtotal</b>	<b>12</b>	
<b>Segregated Non-Residential Services</b>		
Social Services	1	NY
Employment Supports	2	OR, RI
Public Education	2	MA, GA
<b>Subtotal</b>	<b>5</b>	
<b>Inadequacy of Community-Based Services for Children and Youth</b>	13	AL, AK, CO, DC, ME, MI, NV, NC, NH, NM, PA, WA, WV
<b>Differential Treatment in Justice Systems</b>		
Post-Release Services	2	NV, NY
Pre-Release Services	2	CA, CO
Involuntary Confinement	1	MI
Community Crisis Interventions	1	OK
<b>Subtotal</b>	<b>6</b>	
<b>Risk of Institutionalization</b>	15	AK, CA, CO, DC, GA, LA, ME, MS, NV, NH, NM, NY, NC, WA, WV
<b>Institutional Closure</b>	1	NY

## Case Summaries

Following are summaries of 24 cases discussed in the analysis above. Case status is classified as one of the following: pre-filing (an investigation is ongoing but no lawsuit has been filed); active (a lawsuit has been filed, but no settlement or judgment has been reached); ongoing monitoring (the state has not yet fulfilled the terms of a settlement or judgment); or closed (the state prevailed in court or has fully complied with any settlement or judgment). Table 2 summarizes the number of cases, by status, and the states involved.

**Table 2:** Cases by Status and States Involved

Status	Number of Cases	States Involved
Pre-Filing	8	AL, AK, KY, ME, MO, NV, OK, SC
Active	11	CA, CO, DC, GA, MI, NH, NY (4 related cases), PA
Ongoing Monitoring	15	CA, CT, IL, GA, KS, LA, MI, MS, NC, NH, NM, NY, RI, SC, WV
Closed	5	CO, MA, NC, OR, WA
<b>Total</b>	<b>39</b>	

### Pre-Filing

#### Civil Rights Investigation into Kentucky's Mental Health Service System

**Keywords:** Criminal justice, risk of institutionalization, psychiatric hospitals, transition

**State:** Kentucky

**Status:** Pre-filing

**Summary:** DOJ is investigating whether the Commonwealth of Kentucky, by failing to provide adequate community-based services, is subjecting people with SMI who live in the Louisville metropolitan area to unnecessary risk of institutionalization and law enforcement encounters, as well as whether the state is unnecessarily segregating individuals with SMI in psychiatric hospitals.

**Latest Action:** Investigation is ongoing.

#### Disability Rights Investigation into Missouri's Use of Skilled Nursing Facilities

**Keywords:** Nursing homes, transition, risk of institutionalization

**State:** Missouri

**Status:** Pre-filing

**Summary:** DOJ is investigating whether the State of Missouri unnecessarily institutionalizes adults with SMI in skilled nursing facilities, and whether the absence of services such as supported housing, Assertive Community Treatment, crisis services, and peer support services places adults with SMI at risk of institutionalization. DOJ is also investigating whether the state's guardianship program contributes to unnecessary institutionalization.

**Latest Action:** Investigation is ongoing.

### [DOJ Letter of Findings to Alabama](#)

**Keywords:** Children, foster care

**State:** Alabama

**Status:** Pre-filing; DOJ is working to reach a settlement with Alabama to resolve the issues in the letter of findings.

**Summary:** In October 2022, DOJ CRD sent a letter notifying Alabama of DOJ’s finding that the state illegally discriminates against children in foster care who have emotional and behavioral disabilities. DOJ concluded that Alabama has relegated hundreds of students with disabilities to segregated and inferior educational programs, in violation of the ADA Title II integration mandate. A DOJ investigation found that children in foster care who are placed in Alabama’s psychiatric residential treatment facilities are often automatically enrolled in segregated on-site schools, without an appropriate educational assessment and regardless of their academic abilities. These unnecessary placements, which can extend for long periods of time and sever children’s ties to their home schools, teachers, social activities, and peers. Children in these highly segregated placements also often lack access to grade-appropriate curricula, adequate instruction, facilities (e.g., libraries, science labs, and gyms), and activities (e.g., sports and extracurriculars). DOJ concluded that, in most cases, these children could be appropriately served in general education settings, where they would receive the many documented academic and social benefits of inclusion.

**Latest Action:** The parties are in settlement negotiations.

### [DOJ Letter of Findings to State of Maine](#)

**Keywords:** Children, education

**State:** Maine

**Status:** Pre-filing; letter of findings was sent June 22, 2022.

**Summary:** DOJ CRT/Disability Rights Section found that Maine is violating Title II of the ADA by unnecessarily segregating children with mental and developmental disabilities. Following an investigation into Maine’s behavioral health care system for children, DOJ found that Maine provides children with insufficient behavioral health services in their homes and communities. As a result, Maine children may enter institutional settings, including psychiatric hospitals, residential treatment facilities, or juvenile detention.

**Latest Action:** Ongoing; parties are in settlement negotiations.

### [Investigation of Nevada’s Use of Institutions to Serve Children with Behavioral Health Disabilities](#)

**Keywords:** Children, education, risk of institutionalization

**State:** Nevada

**Status:** Pre-filing; letter of findings was sent October 4, 2022.

**Summary:** DOJ CRT/Disability Rights Section found that Nevada’s system of care for children with behavioral health disabilities is inadequate. As a result, children who require community-based services



are at risk of institutionalization, resulting in unnecessary hospitalizations and placements into residential treatment facilities.

**Latest Action:** Investigation is ongoing.

### [Investigation of Oklahoma’s Mental Health Service System and Oklahoma City’s and Oklahoma Police Department’s Response to Mental Health Crises](#)

**Keywords:** Criminal justice

**State:** Oklahoma

**Status:** Pre-filing; Investigation is ongoing.

**Summary:** In November 2022, DOJ CRD, Special Litigation Section, opened an investigation into the State of Oklahoma, Oklahoma City and Oklahoma City Police Department. DOJ is investigating whether Oklahoma provides insufficient community-based mental health services for people in Oklahoma County, leading to unnecessary admissions to psychiatric facilities and police contact, in violation of the ADA Title II integration mandate and the Violent Crime Control and Law Enforcement Act of 1994. If DOJ finds a violation of the ADA or the Violent Crime Control Act, it will identify actions to remedy the violations and seek voluntary compliance by the state. If voluntary compliance does not occur, DOJ could pursue litigation.

**Latest Action:** In November 2022, DOJ sent a letter to the Governor of Oklahoma announcing the start of the investigation.

### [Investigation of the State of Alaska's Behavioral Health System for Children](#)

**Keywords:** Children, education, risk of institutionalization

**State:** Alaska

**Status:** Pre-filing; letter of findings was sent December 15, 2022.

**Summary:** DOJ CRT/Disability Rights Section found that Alaska is violating Title II of the ADA by unnecessarily segregating children with behavioral health disabilities in psychiatric hospitals and psychiatric residential facilities, many in other states. DOJ found that Alaska fails to provide sufficient community-based services and supports.

**Latest Action:** Investigation is ongoing.

### [Statewide Disability Rights Investigation into South Carolina’s Use of Adult Care Homes](#)

**Keywords:** Adult homes, risk of institutionalization, transition

**State:** South Carolina

**Status:** Pre-filing

**Summary:** DOJ is investigating whether the State of South Carolina is unnecessarily institutionalizing adults with SMI in adult care homes, as well as placing adults with SMI at risk of institutionalization.

**Latest Action:** Investigation is ongoing.

## Active

### [A.A. v. Bimestefer](#)

**Keywords:** Children, risk of institutionalization

**State:** Colorado

**Status:** Active

**Summary:** An action was filed on behalf of children with mental health disabilities, who allege they have experienced a revolving door of institutionalization because the defendant does not arrange and provide for medically necessary care. Specifically, the plaintiffs allege that they are currently segregated, or at risk of segregation, in institutions because the state does not provide them with intensive home- and community-based services, in violation of Title II of the ADA.

**Latest Action:** On February 8, 2023, the court granted plaintiffs an extension to file an amended complaint.

### [Disability Rights California v. County of Alameda](#)

**Keywords:** Psychiatric hospitals, transition

**State:** California

**Status:** Active; amended complaint was filed on February 23, 2021.

**Summary:** Disability Rights California filed suit under the ADA alleging Alameda Health System and others violated the law by keeping individuals with mental illness in psychiatric facilities for longer than medically necessary and by not providing individuals released from the hospital with help obtaining community supports, causing repeat institutionalization. On October 13, 2020, Alameda Health System filed a motion to dismiss the case. The court granted the motion, holding that the plaintiffs had not plausibly alleged that the absence of individualized treatment plans created a risk of unnecessary institutionalization. The court noted that to establish such a risk, the plaintiffs would have had to allege the absence of a specific service in the community. The court also found that insufficiency of treatment and discharge plans did not constitute disability discrimination, because it was a question of standard of care, rather than whether the services were provided in the most integrated setting.

**Latest Action:** The court dismissed the case but gave plaintiffs the right to amend their argument and re-file the case if they desired. Plaintiffs filed an amended complaint in February 2021.

### [Doe v. Zucker](#)

**Keywords:** Adult homes, institutional closure, transition

**State:** New York

**Status:** Active

**Summary:** This case challenges (in federal court) a New York state regulation limiting admission of individuals with SMI into segregated settings, called adult homes, by alleging that the regulation violates



the Fair Housing Act (FHA) and the ADA. The state issued the regulation to comply with a settlement it signed with DOJ in 2013 to resolve the case of *United States v. New York*. DOJ filed a statement of interest in *Doe v. Zucker*, explaining that New York's regulation does not violate the FHA.

**Latest Action:** Court issued order staying case pending outcome of *Oceanview v. Zucker* (below) in state court.

### [G.K. ex rel. Cooper v. Sununu](#)

**Keywords:** Children, foster care, group homes

**State:** New Hampshire

**Status:** Active

**Summary:** This is a suit on behalf of children in foster care who have mental illness, alleging that New Hampshire is violating the ADA integration mandate by placing them in congregate settings and group homes instead of a therapeutic family setting. The state filed a motion to dismiss the claim, arguing that foster children are not segregated from children without disabilities in the custody of the Department of Children and Family Services. The court denied the motion to dismiss, finding that individuals do not need to be completely segregated to have an *Olmstead* claim.

**Latest Action:** The court denied the State's motion to dismiss the ADA claim, September 2021.

### [Georgia Advocacy Office v. Georgia](#)

**Keywords:** Education

**State:** Georgia

**Status:** Active

**Summary:** DOJ filed a lawsuit against Georgia for violations of the ADA integration mandate, alleging thousands of public school students with behavior-related or emotional disabilities are segregated from their general education peers and provided unequal educational opportunities. DOJ further alleged that the vast majority of these students could be served in general education classrooms with mental health and therapeutic educational services and supports provided in integrated settings. In 2020, the court denied Georgia's motion to dismiss, and discovery commenced. In 2021, the court denied a subsequent motion by Georgia for judgment on the pleadings.

**Latest Action:** Litigation continues; fact discovery closed on March 10, 2023, and the parties are currently conducting expert discovery.

### [M.G. v. Cuomo](#)

**Keywords:** Criminal justice, risk of institutionalization

**State:** New York

**Status:** Active; in 2021, the court found plaintiffs had standing under the ADA, and defendants did not provide sufficient community-based services.

**Summary:** Plaintiffs filed under the ADA and other federal statutes on behalf of a class of people with SMI, alleging defendants unnecessarily segregated or placed individuals at serious risk of institutionalization upon their release from prison because defendants did not provide the community-based mental health, housing, and supportive services that plaintiffs needed. Defendants' motion to dismiss the *Olmstead* claims was denied, and the court held that the plaintiffs had standing to proceed.

**Latest Action:** In discovery and ongoing.

### [M.J. v. District of Columbia](#)

**Keywords:** Children

**State:** District of Columbia

**Status:** Active

**Summary:** Plaintiffs alleged violation of the ADA and other laws, claiming that the District of Columbia did not provide medically necessary intensive community-based services for children with mental health disabilities.

**Latest Action:** Case reassigned to a new judge February 24, 2023.

### [Oceanview v. Zucker](#)

**Keywords:** Adult homes, institutional closure, transition

**State:** New York

**Status:** Active

**Summary:** Oceanview challenges a New York regulation limiting admission of individuals with SMI into segregated settings, called adult homes, by alleging that the regulation violates the FHA and the ADA. The state issued the regulation in conjunction with the United States' settlement in *United States v. New York*, consistent with its Office of Mental Health's determination that adult homes "are not clinically appropriate settings" for individuals with SMI, "nor are they conducive to the rehabilitation or recovery of such persons." The United States filed a statement of interest explaining that the regulation does not violate the FHA.

**Latest Action:** Hearing set for March 30, 2023.

### [Pelichet v. Lyon](#)

**Keywords:** Criminal justice

**State:** Michigan

**Status:** Active

**Summary:** Individuals with a mental health diagnosis, who had been found NGRI, sued the Commissioner of the Michigan Department of Health and Human Services, alleging violations of the

ADA integration mandate and of the 4th and 14th Amendments of the U.S. Constitution for administering the mental health system in a manner that unnecessarily segregates.

Plaintiffs have been found by treatment professionals to be appropriate for outpatient treatment in the community. In fact, plaintiffs had been living and receiving services in the community until case managers found they had used marijuana and, as a result, involuntarily re-hospitalized them. Plaintiffs were not offered a hearing and were sent to a hospital that did not provide SUD treatment. They also allege that the Commissioner allows state hospital management to enter contracts that place conditions on the recommendations that their treatment professionals can make to the court regarding a patient.

Plaintiffs seek a jury trial and compensatory damages for injuries from unnecessary institutionalization, as well as a permanent injunction stopping defendants from unnecessarily institutionalizing individuals found NGRI, entering into contracts that place limits or conditions on the recommendations that a state hospital treatment professional can make to a court regarding a patient, and involuntarily re-admitting individuals who were found NGRI and living in the community, without a prior hearing.

**Latest Action:** Court ruled on a procedural issue on February 23, 2023.

### [Residents and Families United to Save Our Adult Homes, et al. v. Zucker](#)

**Keywords:** Adult homes, institutional closure, transition

**State:** New York

**Status:** Active

**Summary:** DOJ filed a statement of interest in a lawsuit filed in New York state court to support a New York regulation limiting admission of adults with SMI into adult care homes. The regulation was enacted to comply with the settlement of a previous *Olmstead* lawsuit (*United States v. New York*), in which DOJ argued that adult care homes are segregated settings.

**Latest Action:** DOJ filed a statement of interest in February 2022.

### [S.R. v. Pennsylvania Department of Human Services \(DHS\)](#)

**Keywords:** Children, foster care

**State:** Pennsylvania

**Status:** Active

**Summary:** Children and youth who are adjudicated dependent, diagnosed with mental disabilities, and living in institutions sued DHS for not providing discharge planning and services to help them move to the community. These plaintiffs claim that DHS is violating Medicaid law and the ADA integration mandate by not making reasonable modifications to allow children with behavioral disabilities to participate in foster care, group homes, and permanency programs equal to those afforded to others in the child welfare system.

**Latest Action:** Jury selection was set for June 2022.

## Ongoing Monitoring

### [Amanda D. v. Hassan](#)

**Keywords:** Risk of institutionalization

**State:** New Hampshire

**Status:** Ongoing monitoring; implementation of settlement continues.

**Summary:** After an investigation, DOJ found that (1) the state lacked community-based services that would allow individuals with mental illness to avoid institutionalization and (2) many individuals who could live in the community resided in institutions or stayed much longer than they needed to because adequate support was not available upon discharge. A settlement was reached, with positive improvements noted, including implementing a Quality Service Review Program and contracting with the Dartmouth Hitchcock Medical Center to conduct fidelity reviews.

**Latest Action:** Monitoring reports are filed on a regular basis; the process was interrupted/slowed by COVID-19.

### [Disability Rights California v. San Benito County](#)

**Keywords:** Emergency departments, transition

**State:** California

**Status:** Ongoing monitoring

**Summary:** This case challenges the practice of keeping people in mental health crisis in county emergency rooms for days and weeks without treatment, while individuals wait for a bed to open in the psychiatric wing of the hospital or other location. The parties settled the case, with the county agreeing to build out its crisis services, both mobile and residential, to provide community alternatives to hospitalization.

**Latest Action:** Disability Rights California is monitoring to make sure the County complies with the agreement.

### [DOJ Letter of Findings to Louisiana](#)

**Keywords:** Nursing homes, transition

**State:** Louisiana

**Status:** Ongoing monitoring; settlement agreement

**Summary:** In 2016, DOJ notified Louisiana that the state was in violation of the ADA for causing individuals with mental illness to be unnecessarily institutionalized and for not providing mental health services and supports in the most integrated settings. DOJ found that people with SMI in Louisiana often must enter nursing facilities to receive necessary mental health services. DOJ recommended that the state improve its capacity for ACT, community psychiatric support and treatment, peer support services, supportive employment, mobile crisis services, and permanent supportive housing.

In 2018, DOJ and the state signed a settlement, with the following goals: (1) divert individuals with SMI away from inappropriate nursing facility placements by requiring comprehensive evaluations and services designed to enable them to live in community-based settings, and (2) identify people with SMI who have been admitted to nursing facilities but are able to and would like to transition to the community, and provide them with transition and discharge planning and community-based services sufficient to meet their needs.

**Latest Action:** Louisiana is implementing the settlement and monitoring reports are posted regularly.

### [K.B. v Michigan Department of Health and Human Services](#)

**Keywords:** Children, juvenile justice, foster care

**State:** Michigan

**Status:** Ongoing monitoring; state is implementing the settlement.

**Summary:** Medicaid-eligible children with intensive mental health care needs, who are at risk of avoidable psychiatric hospitalizations or commitment to the juvenile delinquency system, sued the Michigan Department of Health and Human Services for not providing needed mental health services in the community, as required by Medicaid Early and Periodic Screening, Diagnostic, and Treatment; ADA; and Section 504 of the Rehabilitation Act integration mandates.

**Latest Action:** The parties settled in December 2021, with the State agreeing to spend \$91 million to provide appropriate community-based services and supports for youth with mental health care needs in foster care.

### [Kevin S. v. Jacobson](#)

**Keywords:** Children, foster care, Indian Child Welfare Act (ICWA)

**State:** New Mexico

**Status:** Ongoing monitoring; order of settlement remains in effect.

**Summary:** Plaintiffs alleged they faced trauma related to domestic violence, sexual abuse, SUD, neglect, incarceration, and caregiver separation while in the custody of the Children, Youth, and Families Department (CYFD) and experienced mental and behavioral issues as a result of their trauma. CYFD frequently moved plaintiffs to different foster care placements and did not provide timely or adequate mental and behavioral health services to address plaintiffs' trauma, which they are entitled to under the Medicaid Act. The settlement agreement requires the state to improve services and outcomes for children in state custody by developing practices and procedures to comply with ICWA; ensuring proper resources, training, and consistent procedures for providing care to children in state custody; and providing due process to the class.

**Latest Action:** Stipulated order of settlement was issued March 2020.

### [Lovely H. v. Eggleston](#)

**Keywords:** Social services

**State:** New York

**Status:** Ongoing monitoring; pursuant to the court’s jurisdiction until settlement provisions are complete

**Summary:** In 2005, plaintiffs filed suit under the ADA, alleging that the New York Human Resources Administration discriminated against them by involuntarily transferring their public benefits cases from their neighborhood welfare center to one of three “hub” centers that were exclusively designated for people with disabilities. The plaintiffs further claimed that these “hub” centers segregated people with disabilities and did not provide reasonable accommodations to those whose disability made it difficult to travel. A settlement was reached in 2015, requiring the implementation of a broad set of policies and practices for class members.

**Latest Action:** In June 2022, parties agreed to amend the settlement to conclude at 108 instead of 84 months.

### [State of Connecticut Office of Protection and Advocacy for Persons With Disabilities v. Connecticut](#)

**Keywords:** Nursing homes, transition

**State:** Connecticut

**Status:** Ongoing monitoring as to newly discovered class members

**Summary:** In 2006, plaintiff filed suit under the ADA on behalf of persons with mental illness, claiming that the defendants were violating the law by warehousing and segregating people with mental illness in three nursing facilities that were either locked or severely restricted. A settlement was reached in 2014, requiring the state to ensure that all class members who were eligible for and desired community-based services in a community-based setting were afforded those services. The state paid \$1.3 million in attorney’s fees to plaintiffs.

**Latest Action:** In 2018, newly identified class members were found, extending the court’s jurisdiction, which is ongoing as of April 2019.

### [Topeka Independent Living Resource Center v. Kansas Department of Aging and Disability Services](#)

**Keywords:** Nursing homes, transition

**State:** Kansas

**Status:** Ongoing monitoring; Kansas is in the second year of the 8-year settlement implementation period.

**Summary:** In 2021, The Topeka Independent Living Resource Center and Disability Rights Center of Kansas (DRC), acting on behalf of their constituents with mental illness, reached an agreement with the State of Kansas to expand services and provide more community residential options for individuals living in, or at risk of being admitted to, nursing facilities for mental health (NFMHs). Under the agreement, the Kansas Department of Aging and Disability Services and the Kansas Department of Health and

Environment will provide supports and services to allow people with mental health disabilities to avoid institutionalization and live in community-based, integrated settings.

Kansas is the only state in the country to establish nursing facilities exclusively for people with mental illness, and more than 600 people, many of whom are over age 50, live in the 10 NFMHs. In 2019, DRC issued a report exposing both the significant problems that exist in NFMHs as well as the lack of available integrated, community-based services, which results in the unnecessary segregation of people in these institutions in violation of the ADA integration mandate.

Under the settlement agreement, over the following 8 years, the state will develop and expand a wide range of mental health services for NFMH residents, as well as implement integrated community services throughout Kansas. The reforms will include the creation of mobile crisis and ACT teams, supported employment programs, peer support services, and several hundred supported housing units.

**Latest Action:** The Kansas Federal District Court approved the settlement.

### [United States v. Georgia](#)

**Keywords:** Psychiatric hospitals, transition

**State:** Georgia

**Status:** Ongoing monitoring; court maintains jurisdiction, and independent reviewer continues to monitor the state's progress.

**Summary:** A DOJ investigation in 2009 found that Georgia's seven state-operated psychiatric hospitals violated the law by (1) inadequately protecting patients from harm and (2) not placing discharged patients "in the most integrated setting," as required by *Olmstead*. In 2010, the parties settled, with Georgia agreeing to provide a wider range of community-based mental health services and peer supports. By September 2015, the independent monitor reported that not all the goals set by the settlement agreement had been met by the 5-year deadline. In 2016, the court approved the parties' second remedial agreement, which extended and augmented the 2010 settlement. The 2016 agreement prompts the state to improve community services to better meet the needs of people with developmental disabilities, especially those in crisis and/or decline.

**Latest Action:** The independent reviewer filed a report with the court on June 20, 2022.

### [United States v. Mississippi](#)

**Keywords:** Risk of institutionalization

**State:** Mississippi

**Status:** Ongoing monitoring; state in partial compliance

**Summary:** In August 2016, DOJ filed suit under the ADA, alleging that Mississippi was denying qualified adults with mental illness the benefits of the state's mental health services. The court found that Mississippi was operating a system that unlawfully discriminated against persons with mental illness and placed them at risk of institutionalization. The court appointed a special master to monitor compliance.

**Latest Action:** As of March 2023, the monitor found partial compliance.

### [United States v. North Carolina](#)

**Keywords:** Adult care homes, transition

**State:** North Carolina

**Status:** Ongoing monitoring of court-enforced settlement agreement

**Summary:** In 2010, DOJ CRT investigated services for individuals with mental health disabilities in North Carolina, finding that the state unnecessarily placed them in “adult care homes” rather than community-based settings and placed others at serious risk of entering an adult care home. Ultimately, among other remedies, North Carolina was required to put transition programs in place to move individuals out of adult care homes and to divert individuals from those placements, where possible.

**Latest Action:** On January 9, 2017, the United States moved to enforce the supported housing and supported employment provisions of the agreement, which the court granted on September 21, 2017. The parties have subsequently modified the agreement several times to extend its term.

### [United States v. Rhode Island and City of Providence \(2013\) and United States v. Rhode Island \(2014\)](#)

**Keywords:** Employment supports, social services

**State:** Rhode Island

**Status:** Settlement agreement with the City of Providence closed due to substantial compliance in 2019, and ongoing consent decree with the State of Rhode Island entered in 2014.

**Summary:** In 2013, the DOJ Civil Rights Division (DOJ CRT) entered into a court-enforceable settlement agreement with the City of Providence and the State of Rhode Island for violation of the ADA, alleging defendants segregated high school students and adults with IDD in a single sheltered workshop and adult day program, where those individuals completed rote tasks and were paid well below minimum wage. In 2014, DOJ CRT entered into a consent decree with the State of Rhode Island regarding similar segregation in sheltered workshops and adult day programs statewide. In both matters, the defendants agreed to cease operating these workshops and to provide integrated employment and day services for each individual, transition youth to integrated settings, and ensure sufficient provider capacity so that agencies responsible for serving people with IDD have the resources to deliver person-centered, integrated services.

**Latest Action:** In August 2021, the United States moved to hold Rhode Island in contempt for failing to comply with the consent decree. In October 2021, the United States withdrew its contempt motion after the court entered an Action Plan, outlining specific steps to be taken by Rhode Island over 3 years.

### [United States v. West Virginia](#)

**Keywords:** Children

**State:** West Virginia

**Status:** Ongoing monitoring; state is implementing the agreement.



**Summary:** In June 2015, the United States notified West Virginia that it had reasonable cause to conclude that the state had violated the ADA by unnecessarily institutionalizing children with mental illness in residential treatment facilities. In May 2019, DOJ announced a settlement agreement that resolved DOJ's investigation. The agreement focuses on identifying children in need of in-home and community-based mental health services, increasing capacity to provide in-home and community-based services for children and families anywhere in the state, and reducing the state's reliance on institutional placements. The agreement also requires the state to develop an implementation plan, with public input, which will guide its efforts to create mental health services that are sustainable, statewide, and available to children and families when needed.

**Latest Action:** West Virginia is implementing the settlement agreement and monitoring reports are regularly posted.

### [W.L. v. Binkley](#)

**Keywords:** psychiatric hospitals, transition

**State:** South Carolina

**Status:** Ongoing monitoring; settlement agreement being implemented

**Summary:** Disability Rights South Carolina and individuals residing at the state psychiatric hospital brought this action in 2017 seeking an injunction against unnecessarily institutionalizing individuals with mental illness. Plaintiffs alleged the state did not provide them with the community services and supports that would have allowed them to be discharged from the hospital. In a settlement approved by the U.S. District Court of South Carolina in February 2019, the state agreed to the following:

- The development of a strategic *Olmstead* plan;
- Streamlining of the hospital discharge process;
- Implementation of new Transition Specialist and Discharge Initiative programs;
- Rapid expansion of Community Crisis Response Intervention (CCRI) services, including mobile crisis units, with a goal of statewide CCRI after-hours response services by September 2019;
- Expansion of crisis stabilization programs across the state;
- Expansion of Intensive Community Treatment (ICT) and, where possible, ACT programs across the state;
- Expansion of community housing programs statewide; and
- Pilot programs expanding operating hours at regional Community Mental Health Centers.

**Latest Action:** Case was dismissed after settlement, March 14, 2019.

### [Williams v. Pritzker](#)

**Keywords:** Nursing homes, transition

**State:** Illinois

**Status:** Ongoing monitoring; consent decree being implemented

**Summary:** In 2010, the State of Illinois entered a consent decree with a class of plaintiffs comprising adults with SMI who were living in privately owned institutions for mental disease (IMDs) and who could, with appropriate services, live in more integrated settings, including permanent supportive housing.

Between FY2017 and FY2020, the number of transitions to community care steadily declined, and the state did not meet targets in any of those years. **Latest Action:** The court monitor submitted a report detailing partial compliance with the consent decree on January 18, 2022.

## Closed

### [Disability Rights NC v. Brajer](#)

**Keywords:** Children

**State:** North Carolina

**Status:** Closed; the state is implementing a settlement agreement.

**Summary:** Case was filed on October 14, 2016, in the Federal District Court in the interests of Medicaid-eligible children under the age of 21, who have both complex behavioral and developmental disabilities and are unnecessarily institutionalized because North Carolina's Department of Health and Human Services' did not provide appropriate Medicaid community-based services, including comprehensive assessments; home- and community-based behavioral support services provided by trained professionals; and psychiatric and other clinical, crisis, and case management services. Without these Medicaid supports, children are unnecessarily placed in psychiatric hospitals, sometimes out of the state. On November 9, 2016, the parties settled, with the state agreeing to provide community-based services and resolve plaintiff concerns.

**Latest Action:** The State has made substantial progress complying with the agreement, and the parties agreed to dismiss the case.

### [G.G. v. Hickenlooper](#)

**Keywords:** Criminal justice, risk of institutionalization

**State:** Colorado

**Status:** Closed; plaintiffs voluntarily dismissed complaint.

**Summary:** Plaintiffs sought a permanent injunction to require defendant state entities to ensure housing, treatment, and other services for three classes of individuals: (1) adults with mental illness who met the level of care for Medicaid long-term care and community-based services; (2) adult patients at state mental health institutes who needed discharge planning; and (3) adults who were institutionalized, including those who were experiencing homelessness or in need of SUD care. Defendants filed an unopposed motion to dismiss, which alleged the complaint was too vague to require a responsive pleading.

**Latest Action:** Case was closed in 2016.

### [Lane v. Kitzhaber \(later Brown\)](#)

**Keywords:** Employment supports, social services

**State:** Oregon

**Status:** Closed; settlement was reached in 2015, and over \$5 million in attorneys' fees was granted to plaintiffs in 2016.

**Summary:** Plaintiffs claimed that state agencies operated employment services programs, including sheltered workshops, that unnecessarily segregated participants with IDD and put others at serious risk of segregation. The defendants argued that the ADA's integration mandate did not apply to state employment services. In 2012, the federal district court held that the integration mandate applies to employment services. DOJ CRT intervened on behalf of the United States and included a claim that Oregon was placing youth with IDD at serious risk of segregation. The lawsuits were resolved with a court-enforced settlement requiring Oregon to provide competitive wages over the agreement's term. The agreement also required at least 7,000 people—including more than 4,900 youth exiting school—to receive supported employment services aimed at enabling them to secure and maintain integrated, competitive employment opportunities.

**Latest Action:** In August 2022, the District Court found that Oregon fulfilled the [terms of its settlement agreement](#).

### [S.S. v. Springfield](#)

**Keywords:** Education

**State:** Massachusetts

**Status:** Closed; in August 2019, the First Circuit Court of Appeals affirmed lower court and mediator findings that the plaintiffs did not exhaust administrative remedies and lacked standing to sue.

**Summary:** In 2014, a class action lawsuit under the ADA was filed by a student with mental disabilities and his mother requesting injunctive and declaratory relief and requiring defendants to provide school-based behavioral health services for students with SED in neighborhood schools. In 2015, the plaintiffs' motion to certify a class (consisting of all students with a mental disability enrolled in Springfield Public Day School) was denied for failure to exhaust administrative remedies.

**Latest Action:** Case closed.

### [T.R. v. Dreyfus](#)

**Keywords:** Children, risk of institutionalization

**State:** Washington

**Status:** Closed; terms of settlement agreement were met, as of September 2021.

**Summary:** The plaintiffs alleged violation of the ADA under *Olmstead*, claiming that children with psychiatric disorders were often untreated or undertreated, with adverse consequences (e.g., involvement in the child welfare system, juvenile detention, and academic failure). Because available services in the community were so limited, children often had to go to institutions to receive care. The parties reached an extensive settlement wherein Washington agreed to create a new care coordination program and to increase the number of children who could access services.

**Latest Action:** Case was dismissed, with attorney's fees awarded to plaintiffs.

## Attachment: August 2018 Docket of Cases

[https://www.ndrn.org/wp-content/uploads/2019/03/Docket\\_of\\_Olmstead\\_Cases\\_updated\\_8\\_23\\_18.pdf](https://www.ndrn.org/wp-content/uploads/2019/03/Docket_of_Olmstead_Cases_updated_8_23_18.pdf)