

1                   **MENTAL AND BEHAVIORAL HEALTH AMENDMENTS**

2                                   2013 GENERAL SESSION

3                                   STATE OF UTAH

4                                   **Chief Sponsor: Dean Sanpei**

5                                   Senate Sponsor: Allen M. Christensen

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7                   **LONG TITLE**

8                   **General Description:**

9                   This bill modifies Title 17, Chapter 43, Local Human Services Act, and Title 62A,  
10 Chapter 15, Substance Abuse and Mental Health Act, by promoting integration of  
11 mental, behavioral, and physical healthcare.

12                   **Highlighted Provisions:**

13                   This bill:

14                   ▶ requires the Division of Substance Abuse and Mental Health to promote integrated  
15 programs that address an individual's substance abuse, mental health, and physical  
16 healthcare needs;

17                   ▶ requires local substance abuse and mental health authorities to cooperate with the  
18 Division of Substance Abuse and Mental Health in promoting the aforementioned  
19 programs;

20                   ▶ requires the Division of Substance Abuse and Mental Health to evaluate the  
21 effectiveness of integrated health programs;

22                   ▶ requires the Division of Substance Abuse and Mental Health to review and approve  
23 each local substance abuse and mental health authority's plan to ensure that services  
24 result in improved overall health and functioning;

25                   ▶ repeals language referring to the state board of substance abuse and mental health;  
26 and

27                   ▶ makes technical changes.

28                   **Money Appropriated in this Bill:**

29                   None

30 **Other Special Clauses:**

31 None

32 **Utah Code Sections Affected:**

33 AMENDS:

34 **17-43-201**, as last amended by Laws of Utah 2009, Chapter 75

35 **17-43-301**, as last amended by Laws of Utah 2009, Chapter 75

36 **17-43-305**, as renumbered and amended by Laws of Utah 2003, Chapter 22

37 **62A-15-103**, as last amended by Laws of Utah 2012, Chapter 242

38 **62A-15-612**, as last amended by Laws of Utah 2003, Chapter 16

39 REPEALS:

40 **62A-15-606**, as renumbered and amended by Laws of Utah 2002, Fifth Special Session,

41 Chapter 8



43 *Be it enacted by the Legislature of the state of Utah:*

44 Section 1. Section **17-43-201** is amended to read:

45 **17-43-201. Local substance abuse authorities -- Responsibilities.**

46 (1) (a) (i) In each county operating under a county executive-council form of  
47 government under Section 17-52-504, the county legislative body is the local substance abuse  
48 authority, provided however that any contract for plan services shall be administered by the  
49 county executive.

50 (ii) In each county operating under a council-manager form of government under  
51 Section 17-52-505, the county manager is the local substance abuse authority.

52 (iii) In each county other than a county described in Subsection (1)(a)(i) or (ii), the  
53 county legislative body is the local substance abuse authority.

54 (b) Within legislative appropriations and county matching funds required by this  
55 section, and under the direction of the division, each local substance abuse authority shall:

56 (i) develop substance abuse prevention and treatment services plans; ~~and~~

57 (ii) provide substance abuse services to residents of the county[-]; and

58           (iii) cooperate with efforts of the Division of Substance Abuse and Mental Health to  
59 promote integrated programs that address an individual's substance abuse, mental health, and  
60 physical healthcare needs, as described in Section 62A-15-103.

61           (2) (a) By executing an interlocal agreement under Title 11, Chapter 13, Interlocal  
62 Cooperation Act, two or more counties may join to provide substance abuse prevention and  
63 treatment services.

64           (b) The legislative bodies of counties joining to provide services may establish  
65 acceptable ways of apportioning the cost of substance abuse services.

66           (c) Each agreement for joint substance abuse services shall:

67           (i) (A) designate the treasurer of one of the participating counties or another person as  
68 the treasurer for the combined substance abuse authorities and as the custodian of money  
69 available for the joint services; and

70           (B) provide that the designated treasurer, or other disbursing officer authorized by the  
71 treasurer, may make payments from the money for the joint services upon audit of the  
72 appropriate auditing officer or officers representing the participating counties;

73           (ii) provide for the appointment of an independent auditor or a county auditor of one of  
74 the participating counties as the designated auditing officer for the combined substance abuse  
75 authorities;

76           (iii) (A) provide for the appointment of the county or district attorney of one of the  
77 participating counties as the designated legal officer for the combined substance abuse  
78 authorities; and

79           (B) authorize the designated legal officer to request and receive the assistance of the  
80 county or district attorneys of the other participating counties in defending or prosecuting  
81 actions within their counties relating to the combined substance abuse authorities; and

82           (iv) provide for the adoption of management, clinical, financial, procurement,  
83 personnel, and administrative policies as already established by one of the participating  
84 counties or as approved by the legislative body of each participating county or interlocal board.

85           (d) An agreement for joint substance abuse services may provide for joint operation of

86 services and facilities or for operation of services and facilities under contract by one  
87 participating local substance abuse authority for other participating local substance abuse  
88 authorities.

89 (3) (a) Each local substance abuse authority is accountable to the department, the  
90 Department of Health, and the state with regard to the use of state and federal funds received  
91 from those departments for substance abuse services, regardless of whether the services are  
92 provided by a private contract provider.

93 (b) Each local substance abuse authority shall comply, and require compliance by its  
94 contract provider, with all directives issued by the department and the Department of Health  
95 regarding the use and expenditure of state and federal funds received from those departments  
96 for the purpose of providing substance abuse programs and services. The department and  
97 Department of Health shall ensure that those directives are not duplicative or conflicting, and  
98 shall consult and coordinate with local substance abuse authorities with regard to programs and  
99 services.

100 (4) Each local substance abuse authority shall:

101 (a) review and evaluate substance abuse prevention and treatment needs and services,  
102 including substance abuse needs and services for individuals incarcerated in a county jail or  
103 other county correctional facility;

104 (b) annually prepare and submit to the division a plan approved by the county  
105 legislative body for funding and service delivery that includes:

106 (i) provisions for services, either directly by the substance abuse authority or by  
107 contract, for adults, youth, and children, including those incarcerated in a county jail or other  
108 county correctional facility; and

109 (ii) primary prevention, targeted prevention, early intervention, and treatment services;

110 (c) establish and maintain, either directly or by contract, programs licensed under Title  
111 62A, Chapter 2, Licensure of Programs and Facilities;

112 (d) appoint directly or by contract a full or part time director for substance abuse  
113 programs, and prescribe the director's duties;

- 114 (e) provide input and comment on new and revised rules established by the division;
- 115 (f) establish and require contract providers to establish administrative, clinical,  
116 procurement, personnel, financial, and management policies regarding substance abuse services  
117 and facilities, in accordance with the rules of the division, and state and federal law;
- 118 (g) establish mechanisms allowing for direct citizen input;
- 119 (h) annually contract with the division to provide substance abuse programs and  
120 services in accordance with the provisions of Title 62A, Chapter 15, Substance Abuse and  
121 Mental Health Act;
- 122 (i) comply with all applicable state and federal statutes, policies, audit requirements,  
123 contract requirements, and any directives resulting from those audits and contract requirements;
- 124 (j) promote or establish programs for the prevention of substance abuse within the  
125 community setting through community-based prevention programs;
- 126 (k) provide funding equal to at least 20% of the state funds that it receives to fund  
127 services described in the plan;
- 128 (l) comply with the requirements and procedures of Title 11, Chapter 13, Interlocal  
129 Cooperation Act, Title 17B, Chapter 1, Part 6, Fiscal Procedures for Local Districts, and Title  
130 51, Chapter 2a, Accounting Reports from Political Subdivisions, Interlocal Organizations, and  
131 Other Local Entities Act;
- 132 (m) for persons convicted of driving under the influence in violation of Section  
133 41-6a-502 or 41-6a-517, conduct the following as defined in Section 41-6a-501:
  - 134 (i) a screening;
  - 135 (ii) an assessment;
  - 136 (iii) an educational series; and
  - 137 (iv) substance abuse treatment; and
- 138 (n) utilize proceeds of the accounts described in Subsection 62A-15-503(1) to  
139 supplement the cost of providing the services described in Subsection (4)(m).
- 140 (5) Before disbursing any public funds, each local substance abuse authority shall  
141 require that each entity that receives any public funds from the local substance abuse authority

142 agrees in writing that:

143 (a) the entity's financial records and other records relevant to the entity's performance  
144 of the services provided to the local substance abuse authority shall be subject to examination  
145 by:

146 (i) the division;

147 (ii) the local substance abuse authority director;

148 (iii) (A) the county treasurer and county or district attorney; or

149 (B) if two or more counties jointly provide substance abuse services under an  
150 agreement under Subsection (2), the designated treasurer and the designated legal officer;

151 (iv) the county legislative body; and

152 (v) in a county with a county executive that is separate from the county legislative  
153 body, the county executive;

154 (b) the county auditor may examine and audit the entity's financial and other records  
155 relevant to the entity's performance of the services provided to the local substance abuse  
156 authority; and

157 (c) the entity will comply with the provisions of Subsection (3)(b).

158 (6) A local substance abuse authority may receive property, grants, gifts, supplies,  
159 materials, contributions, and any benefit derived therefrom, for substance abuse services. If  
160 those gifts are conditioned upon their use for a specified service or program, they shall be so  
161 used.

162 (7) (a) As used in this section, "public funds" means the same as that term is defined in  
163 Section 17-43-203.

164 (b) Public funds received for the provision of services pursuant to the local substance  
165 abuse plan may not be used for any other purpose except those authorized in the contract  
166 between the local substance abuse authority and the provider for the provision of plan services.

167 (8) Subject to the requirements of the federal Substance Abuse Prevention and  
168 Treatment Block Grant, Public Law 102-321, a local substance abuse authority shall ensure  
169 that all substance abuse treatment programs that receive public funds:

170 (a) accept and provide priority for admission to a pregnant woman or a pregnant minor;  
171 and

172 (b) if admission of a pregnant woman or a pregnant minor is not possible within 24  
173 hours of the time that a request for admission is made, provide a comprehensive referral for  
174 interim services that:

175 (i) are accessible to the pregnant woman or pregnant minor;  
176 (ii) are best suited to provide services to the pregnant woman or pregnant minor;  
177 (iii) may include:

178 (A) counseling;

179 (B) case management; or

180 (C) a support group; and

181 (iv) shall include a referral for:

182 (A) prenatal care; and

183 (B) counseling on the effects of alcohol and drug use during pregnancy.

184 (9) If a substance abuse treatment program described in Subsection (8) is not able to  
185 accept and admit a pregnant woman or pregnant minor under Subsection (8) within 48 hours of  
186 the time that request for admission is made, the local substance abuse authority shall contact  
187 the Division of Substance Abuse and Mental Health for assistance in providing services to the  
188 pregnant woman or pregnant minor.

189 Section 2. Section **17-43-301** is amended to read:

190 **17-43-301. Local mental health authorities -- Responsibilities.**

191 (1) (a) (i) In each county operating under a county executive-council form of  
192 government under Section 17-52-504, the county legislative body is the local mental health  
193 authority, provided however that any contract for plan services shall be administered by the  
194 county executive.

195 (ii) In each county operating under a council-manager form of government under  
196 Section 17-52-505, the county manager is the local mental health authority.

197 (iii) In each county other than a county described in Subsection (1)(a)(i) or (ii), the

198 county legislative body is the local mental health authority.

199 (b) Within legislative appropriations and county matching funds required by this  
200 section, under the direction of the division, each local mental health authority shall:

201 (i) provide mental health services to persons within the county[-]; and

202 (ii) cooperate with efforts of the Division of Substance Abuse and Mental Health to  
203 promote integrated programs that address an individual's substance abuse, mental health, and  
204 physical healthcare needs, as described in Section 62A-15-103.

205 (2) (a) By executing an interlocal agreement under Title 11, Chapter 13, Interlocal  
206 Cooperation Act, two or more counties may join to provide mental health prevention and  
207 treatment services.

208 (b) The legislative bodies of counties joining to provide services may establish  
209 acceptable ways of apportioning the cost of mental health services.

210 (c) Each agreement for joint mental health services shall:

211 (i) (A) designate the treasurer of one of the participating counties or another person as  
212 the treasurer for the combined mental health authorities and as the custodian of money  
213 available for the joint services; and

214 (B) provide that the designated treasurer, or other disbursing officer authorized by the  
215 treasurer, may make payments from the money available for the joint services upon audit of the  
216 appropriate auditing officer or officers representing the participating counties;

217 (ii) provide for the appointment of an independent auditor or a county auditor of one of  
218 the participating counties as the designated auditing officer for the combined mental health  
219 authorities;

220 (iii) (A) provide for the appointment of the county or district attorney of one of the  
221 participating counties as the designated legal officer for the combined mental health  
222 authorities; and

223 (B) authorize the designated legal officer to request and receive the assistance of the  
224 county or district attorneys of the other participating counties in defending or prosecuting  
225 actions within their counties relating to the combined mental health authorities; and



226 (iv) provide for the adoption of management, clinical, financial, procurement,  
227 personnel, and administrative policies as already established by one of the participating  
228 counties or as approved by the legislative body of each participating county or interlocal board.

229 (d) An agreement for joint mental health services may provide for:

230 (i) joint operation of services and facilities or for operation of services and facilities  
231 under contract by one participating local mental health authority for other participating local  
232 mental health authorities; and

233 (ii) allocation of appointments of members of the mental health advisory council  
234 between or among participating counties.

235 (3) (a) Each local mental health authority is accountable to the department, the  
236 Department of Health, and the state with regard to the use of state and federal funds received  
237 from those departments for mental health services, regardless of whether the services are  
238 provided by a private contract provider.

239 (b) Each local mental health authority shall comply, and require compliance by its  
240 contract provider, with all directives issued by the department and the Department of Health  
241 regarding the use and expenditure of state and federal funds received from those departments  
242 for the purpose of providing mental health programs and services. The department and  
243 Department of Health shall ensure that those directives are not duplicative or conflicting, and  
244 shall consult and coordinate with local mental health authorities with regard to programs and  
245 services.

246 (4) (a) Each local mental health authority shall:

247 (i) review and evaluate mental health needs and services, including mental health needs  
248 and services for persons incarcerated in a county jail or other county correctional facility;

249 (ii) as provided in Subsection (4)(b), annually prepare and submit to the division a plan  
250 approved by the county legislative body for mental health funding and service delivery, either  
251 directly by the local mental health authority or by contract;

252 (iii) establish and maintain, either directly or by contract, programs licensed under Title  
253 62A, Chapter 2, Licensure of Programs and Facilities;

254 (iv) appoint, directly or by contract, a full-time or part-time director for mental health  
255 programs and prescribe the director's duties;

256 (v) provide input and comment on new and revised rules established by the division;

257 (vi) establish and require contract providers to establish administrative, clinical,  
258 personnel, financial, procurement, and management policies regarding mental health services  
259 and facilities, in accordance with the rules of the division, and state and federal law;

260 (vii) establish mechanisms allowing for direct citizen input;

261 (viii) annually contract with the division to provide mental health programs and  
262 services in accordance with the provisions of Title 62A, Chapter 15, Substance Abuse and  
263 Mental Health Act;

264 (ix) comply with all applicable state and federal statutes, policies, audit requirements,  
265 contract requirements, and any directives resulting from those audits and contract requirements;

266 (x) provide funding equal to at least 20% of the state funds that it receives to fund  
267 services described in the plan;

268 (xi) comply with the requirements and procedures of Title 11, Chapter 13, Interlocal  
269 Cooperation Act, Title 17B, Chapter 1, Part 6, Fiscal Procedures for Local Districts, and Title  
270 51, Chapter 2a, Accounting Reports from Political Subdivisions, Interlocal Organizations, and  
271 Other Local Entities Act; and

272 (xii) take and retain physical custody of minors committed to the physical custody of  
273 local mental health authorities by a judicial proceeding under Title 62A, Chapter 15, Part 7,  
274 Commitment of Persons Under Age 18 to Division of Substance Abuse and Mental Health.

275 (b) Each plan under Subsection (4)(a)(ii) shall include services for adults, youth, and  
276 children, which shall include:

277 (i) inpatient care and services;

278 (ii) residential care and services;

279 (iii) outpatient care and services;

280 (iv) 24-hour crisis care and services;

281 (v) psychotropic medication management;

282 (vi) psychosocial rehabilitation, including vocational training and skills development;  
283 (vii) case management;  
284 (viii) community supports, including in-home services, housing, family support  
285 services, and respite services;  
286 (ix) consultation and education services, including case consultation, collaboration  
287 with other county service agencies, public education, and public information; and  
288 (x) services to persons incarcerated in a county jail or other county correctional facility.  
289 (5) Before disbursing any public funds, each local mental health authority shall require  
290 that each entity that receives any public funds from a local mental health authority agrees in  
291 writing that:  
292 (a) the entity's financial records and other records relevant to the entity's performance  
293 of the services provided to the mental health authority shall be subject to examination by:  
294 (i) the division;  
295 (ii) the local mental health authority director;  
296 (iii) (A) the county treasurer and county or district attorney; or  
297 (B) if two or more counties jointly provide mental health services under an agreement  
298 under Subsection (2), the designated treasurer and the designated legal officer;  
299 (iv) the county legislative body; and  
300 (v) in a county with a county executive that is separate from the county legislative  
301 body, the county executive;  
302 (b) the county auditor may examine and audit the entity's financial and other records  
303 relevant to the entity's performance of the services provided to the local mental health  
304 authority; and  
305 (c) the entity will comply with the provisions of Subsection (3)(b).  
306 (6) A local mental health authority may receive property, grants, gifts, supplies,  
307 materials, contributions, and any benefit derived therefrom, for mental health services. If those  
308 gifts are conditioned upon their use for a specified service or program, they shall be so used.  
309 (7) (a) As used in this section, "public funds" means the same as that term is defined in

310 Section 17-43-303.

311 (b) Public funds received for the provision of services pursuant to the local mental  
312 health plan may not be used for any other purpose except those authorized in the contract  
313 between the local mental health authority and the provider for the provision of plan services.

314 Section 3. Section **17-43-305** is amended to read:

315 **17-43-305. Responsibility for cost of services provided by local mental health**  
316 **authority.**

317 If a local mental health authority, through its designated provider, provides any service  
318 described in Subsection 17-43-301[~~(3)~~](4)(b) to a person who resides within the jurisdiction of  
319 another local mental health authority, the local mental health authority in whose jurisdiction the  
320 person resides is responsible for the cost of that service if its designated provider has  
321 authorized the provision of that service.

322 Section 4. Section **62A-15-103** is amended to read:

323 **62A-15-103. Division -- Creation -- Responsibilities.**

324 (1) There is created the Division of Substance Abuse and Mental Health within the  
325 department, under the administration and general supervision of the executive director. The  
326 division is the substance abuse authority and the mental health authority for this state.

327 (2) The division shall:

328 (a) (i) educate the general public regarding the nature and consequences of substance  
329 abuse by promoting school and community-based prevention programs;

330 (ii) render support and assistance to public schools through approved school-based  
331 substance abuse education programs aimed at prevention of substance abuse;

332 (iii) promote or establish programs for the prevention of substance abuse within the  
333 community setting through community-based prevention programs;

334 (iv) cooperate and assist other organizations and private treatment centers for substance  
335 abusers, by providing them with essential materials for furthering programs of prevention and  
336 rehabilitation of actual and potential substance abusers; [~~and~~]

337 (v) promote integrated programs that address an individual's substance abuse, mental

338 health, and physical healthcare needs;  
339 (vi) evaluate the effectiveness of programs described in Subsection (2);  
340 (vii) consider the impact of the programs described in Subsection (2) on:  
341 (A) emergency department utilization;  
342 (B) jail and prison populations;  
343 (C) the homeless population; and  
344 (D) the child welfare system; and  
345 [~~(v)~~] (viii) promote or establish programs for education and certification of instructors  
346 to educate persons convicted of driving under the influence of alcohol or drugs or driving with  
347 any measurable controlled substance in the body;  
348 (b) (i) collect and disseminate information pertaining to mental health;  
349 (ii) provide direction over the state hospital including approval of its budget,  
350 administrative policy, and coordination of services with local service plans;  
351 (iii) promulgate rules in accordance with Title 63G, Chapter 3, Utah Administrative  
352 Rulemaking Act, to educate families concerning mental illness and promote family  
353 involvement, when appropriate, and with patient consent, in the treatment program of a family  
354 member; and  
355 (iv) promulgate rules in accordance with Title 63G, Chapter 3, Utah Administrative  
356 Rulemaking Act, to direct that all individuals receiving services through local mental health  
357 authorities or the Utah State Hospital be informed about and, if desired, provided assistance in  
358 completion of a declaration for mental health treatment in accordance with Section  
359 62A-15-1002;  
360 (c) (i) consult and coordinate with local substance abuse authorities and local mental  
361 health authorities regarding programs and services;  
362 (ii) provide consultation and other assistance to public and private agencies and groups  
363 working on substance abuse and mental health issues;  
364 (iii) promote and establish cooperative relationships with courts, hospitals, clinics,  
365 medical and social agencies, public health authorities, law enforcement agencies, education and

366 research organizations, and other related groups;

367       (iv) promote or conduct research on substance abuse and mental health issues, and

368 submit to the governor and the Legislature recommendations for changes in policy and

369 legislation;

370       (v) receive, distribute, and provide direction over public funds for substance abuse and

371 mental health services;

372       (vi) monitor and evaluate programs provided by local substance abuse authorities and

373 local mental health authorities;

374       (vii) examine expenditures of any local, state, and federal funds;

375       (viii) monitor the expenditure of public funds by:

376       (A) local substance abuse authorities;

377       (B) local mental health authorities; and

378       (C) in counties where they exist, the private contract provider that has an annual or

379 otherwise ongoing contract to provide comprehensive substance abuse or mental health

380 programs or services for the local substance abuse authority or local mental health authorities;

381       (ix) contract with local substance abuse authorities and local mental health authorities

382 to provide a comprehensive continuum of services in accordance with division policy, contract

383 provisions, and the local plan;

384       (x) contract with private and public entities for special statewide or nonclinical services

385 according to division rules;

386       (xi) review and approve each local substance abuse authority's plan and each local

387 mental health authority's plan in order to ensure:

388       (A) a statewide comprehensive continuum of substance abuse services;

389       (B) a statewide comprehensive continuum of mental health services; [~~and~~]

390       (C) services result in improved overall health and functioning; and

391       [~~(C)~~] (D) appropriate expenditure of public funds;

392       (xii) review and make recommendations regarding each local substance abuse

393 authority's contract with its provider of substance abuse programs and services and each local

394 mental health authority's contract with its provider of mental health programs and services to  
395 ensure compliance with state and federal law and policy;

396 (xiii) monitor and ensure compliance with division rules and contract requirements;  
397 and

398 (xiv) withhold funds from local substance abuse authorities, local mental health  
399 authorities, and public and private providers for contract noncompliance, failure to comply  
400 with division directives regarding the use of public funds, or for misuse of public funds or  
401 money;

402 (d) assure that the requirements of this part are met and applied uniformly by local  
403 substance abuse authorities and local mental health authorities across the state;

404 (e) require each local substance abuse authority and each local mental health authority  
405 to submit its plan to the division by May 1 of each year;

406 (f) conduct an annual program audit and review of each local substance abuse authority  
407 in the state and its contract provider and each local mental health authority in the state and its  
408 contract provider, including:

409 (i) a review and determination regarding whether:

410 (A) public funds allocated to local substance abuse authorities and local mental health  
411 authorities are consistent with services rendered and outcomes reported by them or their  
412 contract providers; and

413 (B) each local substance abuse authority and each local mental health authority is  
414 exercising sufficient oversight and control over public funds allocated for substance abuse and  
415 mental health programs and services; and

416 (ii) items determined by the division to be necessary and appropriate;

417 (g) by July 1 of each year, provide to the Health and Human Services Interim  
418 Committee and the Social Services Appropriations Subcommittee a written report that  
419 includes:

420 (i) the annual audit and review;

421 (ii) the financial expenditures of each local substance abuse authority and its contract

422 provider and each local mental health authority and its contract provider;

423 (iii) the status of the compliance of each local authority and its contract provider with  
424 its plan, state statutes, and the provisions of the contract awarded; and

425 (iv) whether audit guidelines established under Section 62A-15-110 and Subsection  
426 67-3-1(10) provide the division with sufficient criteria and assurances of appropriate  
427 expenditures of public funds; and

428 (h) if requested by the Health and Human Services Interim Committee or the Social  
429 Services Appropriations Subcommittee, provide an oral report as requested.

430 (3) (a) The division may refuse to contract with and may pursue its legal remedies  
431 against any local substance abuse authority or local mental health authority that fails, or has  
432 failed, to expend public funds in accordance with state law, division policy, contract  
433 provisions, or directives issued in accordance with state law.

434 (b) The division may withhold funds from a local substance abuse authority or local  
435 mental health authority if the authority's contract with its provider of substance abuse or mental  
436 health programs or services fails to comply with state and federal law or policy.

437 (4) Before reissuing or renewing a contract with any local substance abuse authority or  
438 local mental health authority, the division shall review and determine whether the local  
439 substance abuse authority or local mental health authority is complying with its oversight and  
440 management responsibilities described in Sections 17-43-201, 17-43-203, 17-43-303, and  
441 17-43-309. Nothing in this Subsection (4) may be used as a defense to the responsibility and  
442 liability described in Section 17-43-303 and to the responsibility and liability described in  
443 Section 17-43-203.

444 (5) In carrying out its duties and responsibilities, the division may not duplicate  
445 treatment or educational facilities that exist in other divisions or departments of the state, but  
446 shall work in conjunction with those divisions and departments in rendering the treatment or  
447 educational services that those divisions and departments are competent and able to provide.

448 (6) (a) The division may accept in the name of and on behalf of the state donations,  
449 gifts, devises, or bequests of real or personal property or services to be used as specified by the



450 donor.

451 (b) Those donations, gifts, devises, or bequests shall be used by the division in  
452 performing its powers and duties. Any money so obtained shall be considered private funds  
453 and shall be deposited into an interest-bearing restricted special revenue fund to be used by the  
454 division for substance abuse or mental health services. The state treasurer may invest the fund  
455 and all interest shall remain with the fund.

456 (7) The division shall annually review with each local substance abuse authority and  
457 each local mental health authority the authority's statutory and contract responsibilities  
458 regarding:

- 459 (a) the use of public funds;
- 460 (b) oversight responsibilities regarding public funds; and
- 461 (c) governance of substance abuse and mental health programs and services.

462 (8) The Legislature may refuse to appropriate funds to the division upon the division's  
463 failure to comply with the provisions of this part.

464 (9) If a local substance abuse authority contacts the division under Subsection  
465 17-43-201(9) for assistance in providing treatment services to a pregnant woman or pregnant  
466 minor, the division shall:

- 467 (a) refer the pregnant woman or pregnant minor to a treatment facility that has the  
468 capacity to provide the treatment services; or
- 469 (b) otherwise ensure that treatment services are made available to the pregnant woman  
470 or pregnant minor.

471 Section 5. Section **62A-15-612** is amended to read:

472 **62A-15-612. Allocation of pediatric state hospital beds -- Formula.**

473 (1) As used in this section:

474 [~~(b)~~] (a) "Mental health catchment area" means a county or group of counties governed  
475 by a local mental health authority.

476 [~~(a)~~] (b) "Pediatric beds" means the total number of patient beds located in the  
477 children's unit and the youth units at the state hospital, as determined by the superintendent of

478 the state hospital.

479 (2) ~~[The board shall establish by rule a formula to separately allocate to local mental~~  
480 ~~health authorities pediatric beds for persons who meet the requirements of Subsection~~  
481 ~~62A-15-610(2)(b).]~~ On July 1, 1996, 72 pediatric beds shall be allocated to local mental health  
482 authorities under this section. ~~[That number shall be reviewed and adjusted]~~ The division shall  
483 review and adjust the number of pediatric beds as necessary every three years according to the  
484 state's population of persons under 18 years of age. All population figures utilized shall reflect  
485 the most recent available population estimates from the Governor's Office of Planning and  
486 Budget.

487 (3) ~~[The formula established under Subsection (2) becomes effective on July 1, 1996,~~  
488 ~~and shall provide for]~~ The allocation of beds shall be based on the percentage of the state's  
489 population of persons under the age of 18 located within a mental health catchment area. Each  
490 community mental health center shall be allocated at least one bed.

491 (4) A local mental health authority may sell or loan its allocation of beds to another  
492 local mental health authority.

493 (5) The division shall allocate 72 pediatric beds at the state hospital to local mental  
494 health authorities for their use in accordance with the formula established under this section. If  
495 a local mental health authority is unable to access a bed allocated to it under that formula, the  
496 division shall provide that local mental health authority with funding equal to the reasonable,  
497 average daily cost of an acute care bed purchased by the local mental health authority.

498 ~~[(6) The board shall periodically review and make changes in the formula established~~  
499 ~~under Subsection (2) as necessary to accurately reflect changes in the state's population.]~~

500 **Section 6. Repealer.**

501 This bill repeals:

502 **Section 62A-15-606, Board -- Rulemaking authority -- Administration by division.**