

Social Services Program Amendments

2025 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: James A. Dunnigan

Senate Sponsor: Evan J. Vickers

LONG TITLE

General Description:

This bill amends the provisions related to social services programs.

Highlighted Provisions:

This bill:

- amends provisions related to the Medicaid ACA Fund;
- amends provisions related to substance use and mental health program licensure;
- amends provisions related to certified community health workers;
- amends provisions regarding atypical anti-psychotic, psychotropic drugs, and the Medicaid preferred drug list;
- amends provisions related to case management; and
- makes technical and conforming changes.

Money Appropriated in this Bill:

This bill appropriates \$1,100,000 in operating and capital budgets for fiscal year 2026, all of which is from the General Fund.

Other Special Clauses:

This bill provides a special effective date.

Utah Code Sections Affected:

AMENDS:

26B-1-315 (Effective 05/07/25), as last amended by Laws of Utah 2024, Chapter 439

26B-2-101 (Effective 05/07/25), as last amended by Laws of Utah 2024, Chapters 240, 267, 307, and 438

26B-3-105 (Effective 07/01/25), as renumbered and amended by Laws of Utah 2023, Chapter 306

26B-3-217 (Effective 05/07/25), as last amended by Laws of Utah 2024, Chapter 284

26B-5-101 (Effective 05/07/25), as last amended by Laws of Utah 2024, Chapters 240, 420

26B-5-102 (Effective 05/07/25), as last amended by Laws of Utah 2024, Chapters 250, 420

26B-5-301 (Effective 05/07/25), as renumbered and amended by Laws of Utah 2023, Chapter 308

26B-5-801 (Effective 05/07/25), as renumbered and amended by Laws of Utah 2024, Chapter 245

53-21-101 (Effective 05/07/25), as last amended by Laws of Utah 2024, Chapter 345

63M-7-204 (Effective 05/07/25), as last amended by Laws of Utah 2024, Chapter 345

ENACTS:

26B-2-110 (Effective 05/07/25), Utah Code Annotated 1953

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

Section 1. Section **26B-1-315** is amended to read:

26B-1-315 (Effective 05/07/25). Medicaid ACA Fund.

(1) There is created an expendable special revenue fund known as the "Medicaid ACA Fund."

(2) The fund consists of:

(a) assessments collected under Chapter 3, Part 5, Inpatient Hospital Assessment;

(b) intergovernmental transfers under Section 26B-3-508;

(c) savings attributable to the health coverage improvement program, as defined in Section 26B-3-501, as determined by the department;

(d) savings attributable to the enhancement waiver program, as defined in Section 26B-3-501, as determined by the department;

(e) savings attributable to the Medicaid waiver expansion, as defined in Section 26B-3-501, as determined by the department;

~~[(f) savings attributable to the inclusion of psychotropic drugs on the preferred drug list under Subsection 26B-3-105(3) as determined by the department;]~~

~~[(g)]~~ (f) revenues collected from the sales tax described in Subsection 59-12-103(11);

~~[(h)]~~ (g) gifts, grants, donations, or any other conveyance of money that may be made to the fund from private sources;

~~[(i)]~~ (h) interest earned on money in the fund; and

~~[(j)]~~ (i) additional amounts as appropriated by the Legislature.

(3)(a) The fund shall earn interest.

(b) All interest earned on fund money shall be deposited into the fund.

(4)(a) A state agency administering the provisions of Chapter 3, Part 5, Inpatient Hospital Assessment, may use money from the fund to pay the costs, not otherwise paid for with federal funds or other revenue sources, of:

(i) the health coverage improvement program as defined in Section 26B-3-501;

(ii) the enhancement waiver program as defined in Section 26B-3-501;

(iii) a Medicaid waiver expansion as defined in Section 26B-3-501; and

(iv) the outpatient upper payment limit supplemental payments under Section 26B-3-511.

(b) A state agency administering the provisions of Chapter 3, Part 5, Inpatient Hospital Assessment, may not use:

(i) funds described in Subsection (2)(b) to pay the cost of private outpatient upper payment limit supplemental payments; or

(ii) money in the fund for any purpose not described in Subsection (4)(a).

Section 2. Section **26B-2-101** is amended to read:

26B-2-101 (Effective 05/07/25). Definitions.

As used in this part:

(1) "Adoption services" means the same as that term is defined in Section 80-2-801.

(2) "Adult day care" means nonresidential care and supervision:

(a) for three or more adults for at least four but less than 24 hours a day; and

(b) that meets the needs of functionally impaired adults through a comprehensive program that provides a variety of health, social, recreational, and related support services in a protective setting.

(3) "Applicant" means a person that applies for an initial license or a license renewal under this part.

(4)(a) "Associated with the licensee" means that an individual is:

(i) affiliated with a licensee as an owner, director, member of the governing body, employee, agent, provider of care, department contractor, or volunteer; or

(ii) applying to become affiliated with a licensee in a capacity described in Subsection (4)(a)(i).

(b) "Associated with the licensee" does not include:

(i) service on the following bodies, unless that service includes direct access to a child or a vulnerable adult:

- 96 (A) a local mental health authority described in Section 17-43-301;
97 (B) a local substance abuse authority described in Section 17-43-201; or
98 (C) a board of an organization operating under a contract to provide mental health
99 or substance use programs, or services for the local mental health authority or
100 substance abuse authority; or
101 (ii) a guest or visitor whose access to a child or a vulnerable adult is directly
102 supervised at all times.
- 103 (5)(a) "Boarding school" means a private school that:
104 (i) uses a regionally accredited education program;
105 (ii) provides a residence to the school's students:
106 (A) for the purpose of enabling the school's students to attend classes at the
107 school; and
108 (B) as an ancillary service to educating the students at the school;
109 (iii) has the primary purpose of providing the school's students with an education, as
110 defined in Subsection (5)(b)(i); and
111 (iv)(A) does not provide the treatment or services described in Subsection [(40)(a)]
112 (41)(a); or
113 (B) provides the treatment or services described in Subsection [(40)(a)] (41)(a) on
114 a limited basis, as described in Subsection (5)(b)(ii).
- 115 (b)(i) For purposes of Subsection (5)(a)(iii), "education" means a course of study for
116 one or more grades from kindergarten through grade 12.
117 (ii) For purposes of Subsection (5)(a)(iv)(B), a private school provides the treatment
118 or services described in Subsection [(40)(a)] (41)(a) on a limited basis if:
119 (A) the treatment or services described in Subsection [(40)(a)] (41)(a) are provided
120 only as an incidental service to a student; and
121 (B) the school does not:
122 (I) specifically solicit a student for the purpose of providing the treatment or
123 services described in Subsection [(40)(a)] (41)(a); or
124 (II) have a primary purpose of providing the treatment or services described in
125 Subsection [(40)(a)] (41)(a).
- 126 (c) "Boarding school" does not include a therapeutic school.
- 127 (6) "Certification" means a less restrictive level of licensure issued by the department.
128 (7) "Child" means an individual under 18 years old.
129 (8) "Child placing" means receiving, accepting, or providing custody or care for any child,

temporarily or permanently, for the purpose of:

- (a) finding a person to adopt the child;
- (b) placing the child in a home for adoption; or
- (c) foster home placement.

(9) "Child-placing agency" means a person that engages in child placing.

(10) "Client" means an individual who receives or has received services from a licensee.

(11)(a) "Congregate care program" means any of the following that provide services to a child:

- (i) an outdoor youth program;
- (ii) a residential support program;
- (iii) a residential treatment program; or
- (iv) a therapeutic school.

(b) "Congregate care program" does not include a human services program that:

- (i) is licensed to serve adults; and
- (ii) is approved by the office to service a child for a limited time.

(12) "Day treatment" means specialized treatment that is provided to:

- (a) a client less than 24 hours a day; and
- (b) four or more persons who:
 - (i) are unrelated to the owner or provider; and
 - (ii) have emotional, psychological, developmental, physical, or behavioral dysfunctions, impairments, or chemical dependencies.

(13) "Department contractor" means an individual who:

- (a) provides services under a contract with the department; and
- (b) due to the contract with the department, has or will likely have direct access to a child or vulnerable adult.

(14) "Direct access" means that an individual has, or likely will have:

- (a) contact with or access to a child or vulnerable adult that provides the individual with an opportunity for personal communication or touch; or
- (b) an opportunity to view medical, financial, or other confidential personal identifying information of the child, the child's parents or legal guardians, or the vulnerable adult.

(15) "Directly supervised" means that an individual is being supervised under the uninterrupted visual and auditory surveillance of another individual who has a current background check approval issued by the office.

(16) "Director" means the director of the office.

- (17) "Domestic violence" means the same as that term is defined in Section 77-36-1.
- (18) "Domestic violence treatment program" means a nonresidential program designed to provide psychological treatment and educational services to perpetrators and victims of domestic violence.
- (19) "Elder adult" means a person 65 years old or older.
- (20) "Emergency safety intervention" means a tactic used to protect staff or a client from being physically injured, utilized by an appropriately trained direct care staff and only performed in accordance with a nationally or regionally recognized curriculum in the least restrictive manner to restore staff or client safety.
- (21) "Foster home" means a residence that is licensed or certified by the office for the full-time substitute care of a child.
- (22) "Health benefit plan" means the same as that term is defined in Section 31A-22-634.
- (23) "Health care provider" means the same as that term is defined in Section 78B-3-403.
- (24) "Health insurer" means the same as that term is defined in Section 31A-22-615.5.
- (25)(a) "Human services program" means:
- (i) a foster home;
 - (ii) a therapeutic school;
 - (iii) a youth program;
 - (iv) an outdoor youth program;
 - (v) a residential treatment program;
 - (vi) a residential support program;
 - (vii) a resource family home;
 - (viii) a recovery residence; or
 - (ix) a facility or program that provides:
 - (A) adult day care;
 - (B) day treatment;
 - (C) outpatient treatment;
 - (D) domestic violence treatment;
 - (E) child-placing services;
 - (F) social detoxification; or
 - (G) any other human services that are required by contract with the department to be licensed with the department.
- (b) "Human services program" does not include:
- (i) a boarding school;

(ii) a residential, vocational and life skills program, as defined in Section 13-53-102;

or

(iii) a short-term relief care provider.

(26) "Indian child" means the same as that term is defined in 25 U.S.C. Sec. 1903.

(27) "Indian country" means the same as that term is defined in 18 U.S.C. Sec. 1151.

(28) "Indian tribe" means the same as that term is defined in 25 U.S.C. Sec. 1903.

(29) "Intermediate secure treatment" means 24-hour specialized residential treatment or care for an individual who:

(a) cannot live independently or in a less restrictive environment; and

(b) requires, without the individual's consent or control, the use of locked doors to care for the individual.

(30) "Licensee" means an individual or a human services program licensed by the office.

(31) "Local government" means a city, town, or county.

(32) "Mental health treatment program" means a program that:

(a) is a structured intervention; and

(b) is used to improve mental health, prevent mental disorders, and treat mental health conditions.

~~[(32)]~~ (33) "Minor" means child.

~~[(33)]~~ (34) "Office" means the Office of Licensing within the department.

~~[(34)]~~ (35) "Outdoor youth program" means a program that provides:

(a) services to a child that has:

(i) a chemical dependency; or

(ii) a dysfunction or impairment that is emotional, psychological, developmental, physical, or behavioral;

(b) a 24-hour outdoor group living environment; and

(c)(i) regular therapy, including group, individual, or supportive family therapy; or

(ii) informal therapy or similar services, including wilderness therapy, adventure therapy, or outdoor behavioral healthcare.

~~[(35)]~~ (36) "Outpatient treatment" means individual, family, or group therapy or counseling designed to improve and enhance social or psychological functioning for those whose physical and emotional status allows them to continue functioning in their usual living environment.

~~[(36)]~~ (37) "Practice group" or "group practice" means two or more health care providers legally organized as a partnership, professional corporation, or similar association, for

232 which:

233 (a) substantially all of the services of the health care providers who are members of the
234 group are provided through the group and are billed in the name of the group and
235 amounts received are treated as receipts of the group; and

236 (b) the overhead expenses of and the income from the practice are distributed in
237 accordance with methods previously determined by members of the group.

238 [(37)] (38) "Private-placement child" means a child whose parent or guardian enters into a
239 contract with a congregate care program for the child to receive services.

240 [(38)] (39)(a) "Recovery residence" means a home, residence, or facility that meets at
241 least two of the following requirements:

242 (i) provides a supervised living environment for individuals recovering from a
243 substance use disorder;

244 (ii) provides a living environment in which more than half of the individuals in the
245 residence are recovering from a substance use disorder;

246 (iii) provides or arranges for residents to receive services related to the resident's
247 recovery from a substance use disorder, either on or off site;

248 (iv) is held out as a living environment in which individuals recovering from
249 substance abuse disorders live together to encourage continued sobriety; or

250 (v)(A) receives public funding; or

251 (B) is run as a business venture, either for-profit or not-for-profit.

252 (b) "Recovery residence" does not mean:

253 (i) a residential treatment program;

254 (ii) residential support program; or

255 (iii) a home, residence, or facility, in which:

256 (A) residents, by a majority vote of the residents, establish, implement, and
257 enforce policies governing the living environment, including the manner in
258 which applications for residence are approved and the manner in which
259 residents are expelled;

260 (B) residents equitably share rent and housing-related expenses; and

261 (C) a landlord, owner, or operator does not receive compensation, other than fair
262 market rental income, for establishing, implementing, or enforcing policies
263 governing the living environment.

264 [(39)] (40) "Regular business hours" means:

265 (a) the hours during which services of any kind are provided to a client; or

(b) the hours during which a client is present at the facility of a licensee.

~~[(40)]~~ (41)(a) "Residential support program" means a program that arranges for or provides the necessities of life as a protective service to individuals or families who have a disability or who are experiencing a dislocation or emergency that prevents them from providing these services for themselves or their families.

(b) "Residential support program" includes a program that provides a supervised living environment for individuals with dysfunctions or impairments that are:

- (i) emotional;
- (ii) psychological;
- (iii) developmental; or
- (iv) behavioral.

(c) Treatment is not a necessary component of a residential support program.

(d) "Residential support program" does not include:

- (i) a recovery residence; or
- (ii) a program that provides residential services that are performed:
 - (A) exclusively under contract with the department and provided to individuals through the Division of Services for People with Disabilities; or
 - (B) in a facility that serves fewer than four individuals.

~~[(41)]~~ (42)(a) "Residential treatment" means a 24-hour group living environment for four or more individuals unrelated to the owner or provider that offers room or board and specialized treatment, behavior modification, rehabilitation, discipline, emotional growth, or habilitation services for persons with emotional, psychological, developmental, or behavioral dysfunctions, impairments, or chemical dependencies.

(b) "Residential treatment" does not include a:

- (i) boarding school;
- (ii) foster home; or
- (iii) recovery residence.

~~[(42)]~~ (43) "Residential treatment program" means a program or facility that provides:

- (a) residential treatment; or
- (b) intermediate secure treatment.

~~[(43)]~~ (44) "Seclusion" means the involuntary confinement of an individual in a room or an area:

- (a) away from the individual's peers; and
- (b) in a manner that physically prevents the individual from leaving the room or area.

300 ~~[(44)]~~ (45) "Short-term relief care provider" means an individual who:

- 301 (a) provides short-term and temporary relief care to a foster parent:
- 302 (i) for less than six consecutive nights; and
- 303 (ii) in the short-term relief care provider's home;
- 304 (b) is an immediate family member or relative, as those terms are defined in Section
- 305 80-3-102, of the foster parent;
- 306 (c) is direct access qualified, as that term is defined in Section 26B-2-120;
- 307 (d) has been approved to provide short-term relief care by the department;
- 308 (e) is not reimbursed by the department for the temporary relief care provided; and
- 309 (f) is not an immediate family member or relative, as those terms are defined in Section
- 310 80-3-102, of the foster child.

311 ~~[(45)]~~ (46) "Social detoxification" means short-term residential services for persons who are

312 experiencing or have recently experienced drug or alcohol intoxication, that are provided

313 outside of a health care facility licensed under Part 2, Health Care Facility Licensing and

314 Inspection, and that include:

- 315 (a) room and board for persons who are unrelated to the owner or manager of the facility;
- 316 (b) specialized rehabilitation to acquire sobriety; and
- 317 (c) aftercare services.

318 ~~[(46)]~~ (47) "Substance abuse disorder" or "substance use disorder" mean the same as

319 "substance use disorder" is defined in Section 26B-5-501.

320 ~~[(47)]~~ (48) "Substance abuse treatment program" or "substance use disorder treatment

321 program" means a program:

- 322 (a) designed to provide:
- 323 (i) specialized drug or alcohol treatment;
- 324 (ii) rehabilitation; or
- 325 (iii) habilitation services; and
- 326 (b) that provides the treatment or services described in Subsection ~~[(47)(a)]~~ (48)(a) to
- 327 persons with:
- 328 (i) a diagnosed substance use disorder; or
- 329 (ii) chemical dependency disorder.

330 ~~[(48)]~~ (49) "Therapeutic school" means a residential group living facility:

- 331 (a) for four or more individuals that are not related to:
- 332 (i) the owner of the facility; or
- 333 (ii) the primary service provider of the facility;

(b) that serves students who have a history of failing to function:

(i) at home;

(ii) in a public school; or

(iii) in a nonresidential private school; and

(c) that offers:

(i) room and board; and

(ii) an academic education integrated with:

(A) specialized structure and supervision; or

(B) services or treatment related to:

(I) a disability;

(II) emotional development;

(III) behavioral development;

(IV) familial development; or

(V) social development.

~~[(49)]~~ (50) "Unrelated persons" means persons other than parents, legal guardians, grandparents, brothers, sisters, uncles, or aunts.

~~[(50)]~~ (51) "Vulnerable adult" means an elder adult or an adult who has a temporary or permanent mental or physical impairment that substantially affects the person's ability to:

(a) provide personal protection;

(b) provide necessities such as food, shelter, clothing, or mental or other health care;

(c) obtain services necessary for health, safety, or welfare;

(d) carry out the activities of daily living;

(e) manage the adult's own resources; or

(f) comprehend the nature and consequences of remaining in a situation of abuse, neglect, or exploitation.

~~[(51)]~~ (52)(a) "Youth program" means a program designed to provide behavioral, substance use, or mental health services to minors that:

(i) serves adjudicated or nonadjudicated youth;

(ii) charges a fee for the program's services;

(iii) may provide host homes or other arrangements for overnight accommodation of the youth;

(iv) may provide all or part of the program's services in the outdoors;

(v) may limit or censor access to parents or guardians; and

(vi) prohibits or restricts a minor's ability to leave the program at any time of the

minor's own free will.

- (b) "Youth program" does not include recreational programs such as Boy Scouts, Girl Scouts, 4-H, and other such organizations.

[(52)] (53)(a) "Youth transportation company" means any person that transports a child for payment to or from a congregate care program in Utah.

- (b) "Youth transportation company" does not include:

- (i) a relative of the child;
- (ii) a state agency; or
- (iii) a congregate care program's employee who transports the child from the congregate care program that employs the employee and returns the child to the same congregate care program.

Section 3. Section **26B-2-110** is enacted to read:

26B-2-110 (Effective 05/07/25). Adult substance use and mental health providers.

- (1) As used in this section:

- (a) "Deemed site" means a site:

- (i) operated by a licensee; and
- (ii) that is approved by the department in accordance with Subsection (2).

- (b) "Good standing" means:

- (i) that a licensee has not had a violation that is considered by the department as moderate, high, or extreme noncompliance in the previous 24 months; and
- (ii) does not have outstanding fees or civil money penalties owed to the department.

- (c) "Licensee" means a substance abuse treatment program or mental health treatment program.

- (2)(a) The department may approve a site operated by a licensee as a deemed site if:

- (i) the licensee meets the requirements of Subsection (2)(b); and
- (ii) at the time of licensure or renewal, the licensee is in good standing.

- (b) A deemed site:

- (i) may not serve an individual that is not at least 18 years old;
- (ii) shall be accredited by a national accrediting organization that is recognized by the department through rule; and
- (iii) shall provide the department with documentation from the accrediting organization that includes:

(A) inspection reports;

(B) findings;

- 402 (C) plans of correction issued by the accrediting organization; and
403 (D) progress reports on any plan of correction required by the accrediting
404 organization.
- 405 (3)(a) A licensee may opt-out of on-site renewal inspections conducted by the
406 department for a deemed site.
- 407 (b) Notwithstanding Subsection (3)(a), the department may investigate complaints or
408 incidents involving the deemed site.
- 409 (c) A licensee is still subject to all renewal licensing fees for a deemed site.
- 410 (4) The department shall revoke a licensee's deemed site status if:
- 411 (a) a compliance or incident investigation of the deemed site results in a moderate, high,
412 or extreme noncompliance violation;
- 413 (b) the licensee does not submit accreditation documentation described in Subsection
414 (2)(b)(iii) for the deemed site; or
- 415 (c) documentation from the accrediting organization shows any findings that equate to a
416 moderate, high, or extreme noncompliance violation in a state licensing finding for
417 the deemed site.
- 418 (5)(a) If a licensee has multiple sites, the department shall consider whether a site
419 becomes a deemed site through a separate evaluation described in Subsection (2).
- 420 (b) The revocation of deemed status for a site does not cause the revocation of deemed
421 status for another of a licensee's deemed sites unless the conditions listed in
422 Subsection (4) apply to each site that is subject to losing the site's deemed site status.
- 423 (6) Information received by the department from a licensee pertaining to that licensee's
424 accreditation by a voluntary accrediting organization, shall be private data except for a
425 summary prepared by the department related to licensure standards.
- 426 (7) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
427 office shall make rules to implement and enforce this section.

428 Section 4. Section **26B-3-105** is amended to read:

429 **26B-3-105 (Effective 07/01/25). Medicaid drug program -- Preferred drug list.**

- 430 (1) As used in this section:
- 431 (a) "Immunosuppressive drug" means a drug that:
- 432 (i) is used in immunosuppressive therapy to inhibit or prevent activity of the immune
433 system to aid the body in preventing the rejection of transplanted organs and
434 tissue; and
- 435 (ii) does not include drugs used for the treatment of autoimmune disease or diseases

- 436 that are most likely of autoimmune origin.
- 437 (b) "Psychotropic drug" means the following classes of drugs:
- 438 (i) anti-depressant;
- 439 (ii) anti-convulsant/mood stabilizer;
- 440 (iii) anti-anxiety; and
- 441 (iv) attention deficit hyperactivity disorder stimulant.
- 442 (c) "Stabilized" means a health care provider has documented in the patient's medical
- 443 chart that a patient has achieved a stable or steadfast medical state within the past 90
- 444 days.
- 445 (2) A Medicaid drug program developed by the department under Subsection
- 446 26B-3-104(2)(f):
- 447 (a) shall, notwithstanding Subsection 26B-3-104(1)(b), be based on clinical and
- 448 cost-related factors which include medical necessity as determined by a provider in
- 449 accordance with administrative rules established by the Drug Utilization Review
- 450 Board;
- 451 (b) may include therapeutic categories of drugs that may be exempted from the drug
- 452 program;
- 453 (c) notwithstanding Section 58-17b-606, may include placing some drugs~~[, except the~~
- 454 ~~drugs described in Subsection (2);]~~ on a preferred drug list:
- 455 (i) to the extent determined appropriate by the department; and
- 456 (ii) in the manner described in Subsection [(3)] (4) for [psychotropic] atypical
- 457 anti-psychotic drugs;
- 458 (d) notwithstanding the requirements of Sections 26B-3-302 through 26B-3-309
- 459 regarding the Drug Utilization Review Board, and except as provided in Subsection [
- 460 (3)] (4), shall immediately implement the prior authorization requirements for a
- 461 nonpreferred drug that is in the same therapeutic class as a drug that is:
- 462 (i) on the preferred drug list on the date that this act takes effect; or
- 463 (ii) added to the preferred drug list after this act takes effect; and
- 464 (e) except as prohibited by Subsections 58-17b-606(4) and (5), shall establish the prior
- 465 authorization requirements ~~[established under Subsections (1)(c) and (d)]~~ which shall
- 466 permit a health care provider or the health care provider's agent to obtain a prior
- 467 authorization override of the preferred drug list through the department's pharmacy
- 468 prior authorization review process, and which shall:
- 469 (i) provide either telephone or fax approval or denial of the request within 24 hours of

- 470 the receipt of a request that is submitted during normal business hours of Monday
471 through Friday from 8 a.m. to 5 p.m.;
- 472 (ii) provide for the dispensing of a limited supply of a requested drug as determined
473 appropriate by the department in an emergency situation, if the request for an
474 override is received outside of the department's normal business hours; and
- 475 (iii) require the health care provider to provide the department with documentation of
476 the medical need for the preferred drug list override in accordance with criteria
477 established by the department in consultation with the Pharmacy and Therapeutics
478 Committee.

479 ~~[(2)]~~ (3) ~~[(a) As used in this Subsection (2):]~~

480 ~~[(i) "Immunosuppressive drug":]~~

481 ~~[(A) means a drug that is used in immunosuppressive therapy to inhibit or prevent
482 activity of the immune system to aid the body in preventing the rejection of
483 transplanted organs and tissue; and]~~

484 ~~[(B) does not include drugs used for the treatment of autoimmune disease or
485 diseases that are most likely of autoimmune origin.]~~

486 ~~[(ii) "Stabilized" means a health care provider has documented in the patient's
487 medical chart that a patient has achieved a stable or steadfast medical state within
488 the past 90 days using a particular psychotropic drug.]~~

489 ~~[(b)]~~ (a) A preferred drug list developed under the provisions of this section may not
490 include an immunosuppressive drug.

491 ~~[(e)]~~ (i) ~~[(i)]~~ The state Medicaid program shall reimburse for a prescription for an
492 immunosuppressive drug as written by the health care provider for a patient who
493 has undergone an organ transplant.

494 (ii) For purposes of Subsection 58-17b-606(4), and with respect to patients who have
495 undergone an organ transplant, the prescription for a particular
496 immunosuppressive drug as written by a health care provider meets the criteria of
497 demonstrating to the department a medical necessity for dispensing the prescribed
498 immunosuppressive drug.

499 ~~[(d)]~~ (iii) Notwithstanding the requirements of Sections 26B-3-302 through 26B-3-309
500 regarding the Drug Utilization Review Board, the state Medicaid drug program
501 may not require the use of step therapy for immunosuppressive drugs without the
502 written or oral consent of the health care provider and the patient.

503 ~~[(e) The department may include a sedative hypnotic on a preferred drug list in~~

504 accordance with Subsection (2)(f).]

- 505 [(f) The department shall grant a prior authorization for a sedative hypnotic that is not on
506 the preferred drug list under Subsection (2)(e), if the health care provider has
507 documentation related to one of the following conditions for the Medicaid client:]
508 [(i) a trial and failure of at least one preferred agent in the drug class, including the
509 name of the preferred drug that was tried, the length of therapy, and the reason for
510 the discontinuation;]
511 [(ii) detailed evidence of a potential drug interaction between current medication and
512 the preferred drug;]
513 [(iii) detailed evidence of a condition or contraindication that prevents the use of the
514 preferred drug;]
515 [(iv) objective clinical evidence that a patient is at high risk of adverse events due to
516 a therapeutic interchange with a preferred drug;]
517 [(v) the patient is a new or previous Medicaid client with an existing diagnosis
518 previously stabilized with a nonpreferred drug; or]
519 [(vi) other valid reasons as determined by the department.]
520 [(g) A prior authorization granted under Subsection (2)(f) is valid for one year from the
521 date the department grants the prior authorization and shall be renewed in accordance
522 with Subsection (2)(f).]

523 [(3)] (4)[(a) As used in this Subsection (3), "psychotropic drug" means the following
524 classes of drugs:]

- 525 [(i) atypical anti-psychotic;]
526 [(ii) anti-depressant;]
527 [(iii) anti-convulsant/mood stabilizer;]
528 [(iv) anti-anxiety; and]
529 [(v) attention deficit hyperactivity disorder stimulant.]

530 [(b)] (a)(i) The department shall [develop a preferred drug list for psychotropic drugs]
531 include atypical anti-psychotic drugs on the preferred drug list.

532 (ii) [Except as provided in Subsection (3)(d), a preferred drug list for psychotropic
533 drugs developed under this section] The department shall allow a health care
534 provider to override the preferred drug list for an atypical anti-psychotic drug by
535 writing "dispense as written" on the prescription for the [psychotropic] atypical
536 anti-psychotic drug.

537 (iii) A health care provider may not override Section 58-17b-606 by writing

- "dispense as written" on a prescription.
- ~~[(e)]~~ (b) The department, and a Medicaid accountable care organization that is responsible for providing behavioral health, shall~~[:]~~
- ~~[(i)]~~ establish a system to:
- ~~[(A)]~~ (i) track health care provider prescribing patterns for ~~[psychotropic]~~ atypical anti-psychotic drugs;
- ~~[(B)]~~ (ii) educate health care providers who are not complying with the preferred drug list; and
- ~~[(C)]~~ (iii) implement peer to peer education for health care providers whose prescribing practices continue to not comply with the preferred drug list~~[:and]~~ .
- ~~[(ii)]~~ determine whether health care provider compliance with the preferred drug list is at least:
- ~~[(A)]~~ 55% of prescriptions by July 1, 2017;
- ~~[(B)]~~ 65% of prescriptions by July 1, 2018; and
- ~~[(C)]~~ 75% of prescriptions by July 1, 2019.]
- ~~[(d)]~~ Beginning October 1, 2019, the department shall eliminate the dispense as written override for the preferred drug list, and shall implement a prior authorization system for psychotropic drugs, in accordance with Subsection (2)(f), if by July 1, 2019, the department has not realized annual savings from implementing the preferred drug list for psychotropic drugs of at least \$750,000 General Fund savings.]
- (5) For enrollees that begin a psychotropic drug treatment on or after July 1, 2025, the department shall pay for a psychotropic drug that is not on the preferred drug list if the department, based on patient claims history or health care provider attestation, has evidence of:
- (a) an enrollee's trial and failure of a psychotropic drug on the preferred drug list that is equivalent or similar to the drug that is not on the preferred drug list in the last 365 days; or
- (b) the enrollee being stabilized on the psychotropic drug that is not on the preferred drug list at the time of enrollment.
- Section 5. Section **26B-3-217** is amended to read:
- 26B-3-217 (Effective 05/07/25). Medicaid waiver for coverage of qualified inmates leaving prison or jail.**
- (1) As used in this section:
- (a) "Certified community health worker" means an individual who has obtained the

certification described in Section 26B-2-504.

(b) "Correctional facility" means:

(i) a county jail;

(ii) a prison, penitentiary, or other institution operated by or under contract with the Department of Corrections for the confinement of an offender, as defined in Section 64-13-1; or

(iii) a facility for secure confinement of minors operated by the Division of Juvenile Justice and Youth Services.

~~[(b)]~~ (c) "Limited Medicaid benefit" means:

(i) reentry case management services;

(ii) physical and behavioral health clinical services;

(iii) medications and medication administration;

(iv) medication-assisted treatment, including all United States Food and Drug Administration approved medications, including coverage for counseling; ~~and~~

~~(v)~~ services provided by a certified community health worker; and

~~[(v)]~~ (vi) other services as determined by rule made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

~~[(e)]~~ (d) "Qualified inmate" means an individual who:

(i) is incarcerated in a correctional facility; and

(ii) is ineligible for Medicaid as a result of incarceration but would otherwise qualify for Medicaid.

(2) Subject to appropriation, before July 1, 2024, the division shall apply for a Medicaid waiver, or amend an existing Medicaid waiver application, with CMS to offer a program to provide a limited Medicaid benefit to a qualified inmate for up to 90 days immediately before the day on which the qualified inmate is released from a correctional facility.

(3)(a) Savings to state and local funds that result from the use of federal funds provided under this section shall be used in accordance with a reinvestment plan as mandated by CMS.

(b) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the department shall make rules for a participating county to establish a reinvestment plan described in Subsection (3)(a).

(4) If the waiver or amended waiver described in Subsection (2) is approved, the department shall report to the Health and Human Services Interim Committee each year

before November 30 while the waiver is in effect regarding:

- (a) the number of qualified inmates served under the program;
- (b) the cost of the program; and
- (c) the effectiveness of the program, including:
 - (i) any reduction in the number of emergency room visits or hospitalizations by inmates after release from a correctional facility;
 - (ii) any reduction in the number of inmates undergoing inpatient treatment after release from a correctional facility;
 - (iii) any reduction in overdose rates and deaths of inmates after release from a correctional facility; and
 - (iv) any other costs or benefits as a result of the program.

(5) Before July 1, 2024, the department shall amend the Medicaid waiver related to housing support services to include an individual that was a qualified inmate within the previous 12 months.

(6) The department may elect to not apply for a Medicaid waiver or limit services described in this section based on appropriation.

Section 6. Section **26B-5-101** is amended to read:

26B-5-101 (Effective 05/07/25). Chapter definitions.

As used in this chapter:

- (1) "Criminal risk factors" means a person's characteristics and behaviors that:
 - (a) affect the person's risk of engaging in criminal behavior; and
 - (b) are diminished when addressed by effective treatment, supervision, and other support resources, resulting in reduced risk of criminal behavior.
- (2) "Director" means the director appointed under Section 26B-5-103.
- (3) "Division" means the Division of Integrated Healthcare created in Section 26B-1-1202.
- (4) "Local mental health authority" means a county legislative body.
- (5) "Local substance abuse authority" means a county legislative body.
- (6) "Mental health crisis" means:
 - (a) a mental health condition that manifests in an individual by symptoms of sufficient severity that a prudent layperson who possesses an average knowledge of mental health issues could reasonably expect the absence of immediate attention or intervention to result in:
 - (i) serious danger to the individual's health or well-being; or
 - (ii) a danger to the health or well-being of others; or

(b) a mental health condition that, in the opinion of a mental health therapist or the therapist's designee, requires direct professional observation or intervention.

(7) "Mental health crisis response training" means community-based training that educates laypersons and professionals on the warning signs of a mental health crisis and how to respond.

(8) "Mental health crisis services" means an array of services provided to an individual who experiences a mental health crisis, which may include:

(a) direct mental health services;

(b) on-site intervention provided by a mobile crisis outreach team;

(c) the provision of safety and care plans;

(d) prolonged mental health services for up to 90 days after the day on which an individual experiences a mental health crisis;

(e) referrals to other community resources;

(f) local mental health crisis lines; and

(g) the statewide mental health crisis line.

(9) "Mental health therapist" means the same as that term is defined in Section 58-60-102.

(10) "Mobile crisis outreach team" or "MCOT" means a mobile team of medical and mental health professionals that, in coordination with local law enforcement and emergency medical service personnel, provides mental health crisis services.

(11) "Office" means the Office of Substance Use and Mental Health created in Section 26B-5-102.

(12)(a) "Public funds" means federal money received from the department, and state money appropriated by the Legislature to the department, a county governing body, or a local substance abuse authority, or a local mental health authority for the purposes of providing substance abuse or mental health programs or services.

(b) "Public funds" include federal and state money that has been transferred by a local substance abuse authority or a local mental health authority to a private provider under an annual or otherwise ongoing contract to provide comprehensive substance abuse or mental health programs or services for the local substance abuse authority or local mental health authority. The money maintains the nature of "public funds" while in the possession of the private entity that has an annual or otherwise ongoing contract with a local substance abuse authority or a local mental health authority to provide comprehensive substance use or mental health programs or services for the local substance abuse authority or local mental health authority.

(c) Public funds received for the provision of services under substance use or mental health service plans may not be used for any other purpose except those authorized in the contract between the local mental health or substance abuse authority and provider for the provision of plan services.

(13) "Severe mental disorder" means schizophrenia, major depression, bipolar disorders, delusional disorders, psychotic disorders, and other mental disorders as defined by the division.

(14) "Stabilization services" means in-home services provided to a child with, or who is at risk for, complex emotional and behavioral needs, including teaching the child's parent or guardian skills to improve family functioning.

(15) "Statewide mental health crisis line" means the same as that term is defined in Section 26B-5-610.

(16) "System of care" means a broad, flexible array of services and supports that:

(a) serve a child with or who is at risk for complex emotional and behavioral needs;

(b) are community based;

(c) are informed about trauma;

(d) build meaningful partnerships with families and children;

(e) integrate service planning, service coordination, and management across state and local entities;

(f) include individualized case planning;

(g) provide management and policy infrastructure that supports a coordinated network of interdepartmental service providers, contractors, and service providers who are outside of the department; and

(h) are guided by the type and variety of services needed by a child with or who is at risk for complex emotional and behavioral needs and by the child's family.

~~[(17) "Targeted case management" means a service that assists Medicaid recipients in a target group to gain access to needed medical, social, educational, and other services.]~~

Section 7. Section **26B-5-102** is amended to read:

26B-5-102 (Effective 05/07/25). Division of Integrated Healthcare -- Office of Substance Use and Mental Health -- Creation -- Responsibilities.

(1)(a) The Division of Integrated Healthcare shall exercise responsibility over the policymaking functions, regulatory and enforcement powers, rights, duties, and responsibilities outlined in state law that were previously vested in the Division of Substance Abuse and Mental Health within the department, under the administration

708 and general supervision of the executive director.

709 (b) The division is the substance abuse authority and the mental health authority for this
710 state.

711 (c) There is created the Office of Substance Use and Mental Health within the division.

712 (d) The office shall exercise the responsibilities, powers, rights, duties, and
713 responsibilities assigned to the office by the executive director.

714 (2) The division shall:

715 (a)[(f)] educate the general public regarding the nature and consequences of
716 substance use by promoting school and community-based prevention programs;

717 [(f)] (b) render support and assistance to public schools through approved school-based
718 substance abuse education programs aimed at prevention of substance use;

719 [(f)] (c) promote or establish programs for the prevention of substance use within the
720 community setting through community-based prevention programs;

721 [(f)] (d) cooperate with and assist treatment centers, recovery residences, and other
722 organizations that provide services to individuals recovering from a substance use
723 disorder, by identifying and disseminating information about effective practices and
724 programs;

725 [(f)] (e) promote integrated programs that address an individual's substance use, mental
726 health, and physical health;

727 [(f)] (f) establish and promote an evidence-based continuum of screening, assessment,
728 prevention, treatment, and recovery support services in the community for
729 individuals with a substance use disorder or mental illness;

730 [(f)] (g) evaluate the effectiveness of programs described in this Subsection (2);

731 [(f)] (h) consider the impact of the programs described in this Subsection (2) on:

732 [(A)] (i) emergency department utilization;

733 [(B)] (ii) jail and prison populations;

734 [(C)] (iii) the homeless population; and

735 [(D)] (iv) the child welfare system; [and]

736 [(f)] (i) promote or establish programs for education and certification of instructors to
737 educate individuals convicted of driving under the influence of alcohol or drugs or
738 driving with any measurable controlled substance in the body;

739 [(f)] (j)[(f)] collect and disseminate information pertaining to mental health;

740 [(f)] (k) provide direction over the state hospital including approval of the state hospital's
741 budget, administrative policy, and coordination of services with local service plans;

742 ~~[(iii)]~~ (l) make rules in accordance with Title 63G, Chapter 3, Utah Administrative
743 Rulemaking Act, to educate families concerning mental illness and promote family
744 involvement, when appropriate, and with patient consent, in the treatment program of
745 a family member;

746 ~~[(iv)]~~ (m) make rules in accordance with Title 63G, Chapter 3, Utah Administrative
747 Rulemaking Act, to direct that an individual receiving services through a local mental
748 health authority or the Utah State Hospital be informed about and, if desired by the
749 individual, provided assistance in the completion of a declaration for mental health
750 treatment in accordance with Section 26B-5-313; ~~[and]~~

751 ~~[(v)]~~ (n) ~~[to the extent authorized and in accordance with statute,]~~ make rules in
752 accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, that:

753 ~~[(A)]~~ (i) ~~[create a certification for targeted case management]~~ certify an adult as a case
754 manager, qualified to provide case management services within the state;

755 ~~[(B)]~~ (ii) establish training and certification requirements;

756 ~~[(C)]~~ (iii) specify the types of services each certificate holder is qualified to provide;

757 ~~[(D)]~~ (iv) specify the type of supervision under which a certificate holder is required
758 to operate; and

759 ~~[(E)]~~ (v) specify continuing education and other requirements for maintaining or
760 renewing certification;

761 ~~[(e)]~~ (o)~~[(f)]~~ consult and coordinate with local substance abuse authorities and local
762 mental health authorities regarding programs and services;

763 ~~[(ii)]~~ (p) provide consultation and other assistance to public and private agencies and
764 groups working on substance use and mental health issues;

765 ~~[(iii)]~~ (q) promote and establish cooperative relationships with courts, hospitals, clinics,
766 medical and social agencies, public health authorities, law enforcement agencies,
767 education and research organizations, and other related groups;

768 ~~[(iv)]~~ (r) promote or conduct research on substance use and mental health issues, and
769 submit to the governor and the Legislature recommendations for changes in policy
770 and legislation;

771 ~~[(v)]~~ (s) receive, distribute, and provide direction over public funds for substance use and
772 mental health services;

773 ~~[(vi)]~~ (t) monitor and evaluate programs provided by local substance abuse authorities
774 and local mental health authorities;

775 ~~[(vii)]~~ (u) examine expenditures of local, state, and federal funds;

- 776 ~~[(viii)]~~ (v) monitor the expenditure of public funds by:
- 777 ~~[(A)]~~ (i) local substance abuse authorities;
- 778 ~~[(B)]~~ (ii) local mental health authorities; and
- 779 ~~[(C)]~~ (iii) in counties where they exist, a private contract provider that has an annual
- 780 or otherwise ongoing contract to provide comprehensive substance abuse or
- 781 mental health programs or services for the local substance abuse authority or local
- 782 mental health authority;
- 783 ~~[(ix)]~~ (w) contract with local substance abuse authorities and local mental health
- 784 authorities to provide a comprehensive continuum of services that include
- 785 community-based services for individuals involved in the criminal justice system, in
- 786 accordance with division policy, contract provisions, and the local plan;
- 787 (x) contract with private and public entities for special statewide or nonclinical services,
- 788 or services for individuals involved in the criminal justice system, according to
- 789 division rules;
- 790 ~~[(xi)]~~ (y) review and approve each local substance abuse authority's plan and each local
- 791 mental health authority's plan in order to ensure:
- 792 ~~[(A)]~~ (i) a statewide comprehensive continuum of substance use services;
- 793 ~~[(B)]~~ (ii) a statewide comprehensive continuum of mental health services;
- 794 ~~[(C)]~~ (iii) services result in improved overall health and functioning;
- 795 ~~[(D)]~~ (iv) a statewide comprehensive continuum of community-based services
- 796 designed to reduce criminal risk factors for individuals who are determined to
- 797 have substance use or mental illness conditions or both, and who are involved in
- 798 the criminal justice system;
- 799 ~~[(E)]~~ (v) compliance, where appropriate, with the certification requirements in
- 800 Subsection ~~[(2)(h)]~~ (2)(gg); and
- 801 ~~[(F)]~~ (vi) appropriate expenditure of public funds;
- 802 ~~[(xii)]~~ (z) review and make recommendations regarding each local substance abuse
- 803 authority's contract with the local substance abuse authority's provider of substance
- 804 use programs and services and each local mental health authority's contract with the
- 805 local mental health authority's provider of mental health programs and services to
- 806 ensure compliance with state and federal law and policy;
- 807 ~~[(xiii)]~~ (aa) monitor and ensure compliance with division rules and contract
- 808 requirements; ~~[and]~~
- 809 ~~[(xiv)]~~ (bb) withhold funds from local substance abuse authorities, local mental health

authorities, and public and private providers for contract noncompliance, failure to comply with division directives regarding the use of public funds, or for misuse of public funds or money;

~~[(d)]~~ (cc) ensure that the requirements of this part are met and applied uniformly by local substance abuse authorities and local mental health authorities across the state;

~~[(e)]~~ (dd) require each local substance abuse authority and each local mental health authority, in accordance with Subsections 17-43-201(5)(b) and 17-43-301(6)(a)(ii), to submit a plan to the division on or before May 15 of each year;

~~[(f)]~~ (ee) conduct an annual program audit and review of each local substance abuse authority and each local substance abuse authority's contract provider, and each local mental health authority and each local mental health authority's contract provider, including:

(i) a review and determination regarding whether:

(A) public funds allocated to the local substance abuse authority or the local mental health authorities are consistent with services rendered by the authority or the authority's contract provider, and with outcomes reported by the authority's contract provider; and

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

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

~~[(g)]~~ (ff) define "prevention" by rule as required under Title 32B, Chapter 2, Part 4, Alcoholic Beverage and Substance Abuse Enforcement and Treatment Restricted Account Act;

~~[(h)]~~

~~[(i)]~~ (gg) train and certify an adult as a peer support specialist, qualified to provide peer supports services to an individual with:

~~[(A)]~~ (i) a substance use disorder;

~~[(B)]~~ (ii) a mental health disorder; ~~[(or)]~~

~~[(C)]~~ (iii) a substance use disorder and a mental health disorder;

~~[(ii)]~~ (iv) certify a person to carry out, as needed, the division's duty to train and certify an adult as a peer support specialist;

~~[(iii)]~~ (v) make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, that:

- (A) establish training and certification requirements for a peer support specialist;
(B) specify the types of services a peer support specialist is qualified to provide;
(C) specify the type of supervision under which a peer support specialist is required to operate; and
(D) specify continuing education and other requirements for maintaining or renewing certification as a peer support specialist; and

~~[(iv)]~~ (vi) make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, that:

- (A) establish the requirements for a person to be certified to carry out, as needed, the division's duty to train and certify an adult as a peer support specialist; and
(B) specify how the division shall provide oversight of a person certified to train and certify a peer support specialist;

~~[(i)]~~ (hh) collaborate with the State Commission on Criminal and Juvenile Justice to analyze and provide recommendations to the Legislature regarding:
(i) pretrial services and the resources needed to reduce recidivism;
(ii) county jail and county behavioral health early-assessment resources needed for an individual convicted of a class A or class B misdemeanor; and
(iii) the replacement of federal dollars associated with drug interdiction law enforcement task forces that are reduced;

~~[(j)]~~ (ii) establish performance goals and outcome measurements for a mental health or substance use treatment program that is licensed under Chapter 2, Part 1, Human Services Programs and Facilities, and contracts with the department, including goals and measurements related to employment and reducing recidivism of individuals receiving mental health or substance use treatment who are involved with the criminal justice system;

~~[(k)]~~ (jj) annually, on or before November 30, submit a written report to the Judiciary Interim Committee, the Health and Human Services Interim Committee, and the Law Enforcement and Criminal Justice Interim Committee, that includes:

- (i) a description of the performance goals and outcome measurements described in Subsection ~~[(2)(j)]~~ (2)(ii); and
(ii) information on the effectiveness of the goals and measurements in ensuring appropriate and adequate mental health or substance use treatment is provided in a treatment program described in Subsection ~~[(2)(j)]~~ (2)(ii);

~~[(t)]~~ (kk) collaborate with the Administrative Office of the Courts, the Department of

Corrections, the Department of Workforce Services, and the Board of Pardons and Parole to collect data on recidivism in accordance with the metrics and requirements described in Section 63M-7-102;

~~[(m)]~~ (ll) at the division's discretion, use the data described in Subsection ~~[(2)(l)]~~ (2)(kk) to make decisions regarding the use of funds allocated to the division to provide treatment;

~~[(n)]~~ (mm) annually, on or before August 31, submit the data collected under Subsection ~~[(2)(l)]~~ (2)(kk) and any recommendations to improve the data collection to the State Commission on Criminal and Juvenile Justice to be included in the report described in Subsection 63M-7-204(1)(x);

~~[(o)]~~ (nn) publish the following on the division's website:

(i) the performance goals and outcome measurements described in Subsection ~~[(2)(j)]~~ (2)(ii); and

(ii) a description of the services provided and the contact information for the mental health and substance use treatment programs described in Subsection ~~[(2)(j)]~~ (2)(ii) and residential, vocational and life skills programs, as defined in Section 13-53-102; and

~~[(p)]~~ (oo) consult and coordinate with the Division of Child and Family Services to develop and manage the operation of a program designed to reduce substance use during pregnancy and by parents of a newborn child that includes:

(i) providing education and resources to health care providers and individuals in the state regarding prevention of substance use during pregnancy;

(ii) providing training to health care providers in the state regarding screening of a pregnant woman or pregnant minor to identify a substance use disorder; and

(iii) providing referrals to pregnant women, pregnant minors, or parents of a newborn child in need of substance use treatment services to a facility that has the capacity to provide the treatment services.

(3) In addition to the responsibilities described in Subsection (2), the division shall, within funds appropriated by the Legislature for this purpose, implement and manage the operation of a firearm safety and suicide prevention program, in consultation with the Bureau of Criminal Identification created in Section 53-10-201, including:

(a) coordinating with local mental health and substance abuse authorities, a nonprofit behavioral health advocacy group, and a representative from a Utah-based nonprofit organization with expertise in the field of firearm use and safety that represents

- 912 firearm owners, to:
- 913 (i) produce and periodically review and update a firearm safety brochure and other
- 914 educational materials with information about the safe handling and use of firearms
- 915 that includes:
- 916 (A) information on safe handling, storage, and use of firearms in a home
- 917 environment;
- 918 (B) information about at-risk individuals and individuals who are legally
- 919 prohibited from possessing firearms;
- 920 (C) information about suicide prevention awareness; and
- 921 (D) information about the availability of firearm safety packets;
- 922 (ii) procure cable-style gun locks for distribution under this section;
- 923 (iii) produce a firearm safety packet that includes the firearm safety brochure and the
- 924 cable-style gun lock described in this Subsection (3); and
- 925 (iv) create a suicide prevention education course that:
- 926 (A) provides information for distribution regarding firearm safety education;
- 927 (B) incorporates current information on how to recognize suicidal behaviors and
- 928 identify individuals who may be suicidal; and
- 929 (C) provides information regarding crisis intervention resources;
- 930 (b) distributing, free of charge, the firearm safety packet to the following persons, who
- 931 shall make the firearm safety packet available free of charge:
- 932 (i) health care providers, including emergency rooms;
- 933 (ii) mobile crisis outreach teams;
- 934 (iii) mental health practitioners;
- 935 (iv) other public health suicide prevention organizations;
- 936 (v) entities that teach firearm safety courses;
- 937 (vi) school districts for use in the seminar, described in Section 53G-9-702, for
- 938 parents of students in the school district; and
- 939 (vii) firearm dealers to be distributed in accordance with Section 76-10-526;
- 940 (c) creating and administering a rebate program that includes a rebate that offers
- 941 between \$10 and \$200 off the purchase price of a firearm safe from a participating
- 942 firearms dealer or a person engaged in the business of selling firearm safes in Utah,
- 943 by a Utah resident; and
- 944 (d) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act,
- 945 making rules that establish procedures for:

- 946 (i) producing and distributing the suicide prevention education course and the firearm
947 safety brochures and packets;
- 948 (ii) procuring the cable-style gun locks for distribution; and
- 949 (iii) administering the rebate program.
- 950 (4)(a) The division may refuse to contract with and may pursue legal remedies against
951 any local substance abuse authority or local mental health authority that fails, or has
952 failed, to expend public funds in accordance with state law, division policy, contract
953 provisions, or directives issued in accordance with state law.
- 954 (b) The division may withhold funds from a local substance abuse authority or local
955 mental health authority if the authority's contract provider of substance use or mental
956 health programs or services fails to comply with state and federal law or policy.
- 957 (5)(a) Before reissuing or renewing a contract with any local substance abuse authority
958 or local mental health authority, the division shall review and determine whether the
959 local substance abuse authority or local mental health authority is complying with the
960 oversight and management responsibilities described in Sections 17-43-201,
961 17-43-203, 17-43-303, and 17-43-309.
- 962 (b) Nothing in this Subsection (5) may be used as a defense to the responsibility and
963 liability described in Section 17-43-303 and to the responsibility and liability
964 described in Section 17-43-203.
- 965 (6) In carrying out the division's duties and responsibilities, the division may not duplicate
966 treatment or educational facilities that exist in other divisions or departments of the state,
967 but shall work in conjunction with those divisions and departments in rendering the
968 treatment or educational services that those divisions and departments are competent and
969 able to provide.
- 970 (7) The division may accept in the name of and on behalf of the state donations, gifts,
971 devises, or bequests of real or personal property or services to be used as specified by
972 the donor.
- 973 (8) The division shall annually review with each local substance abuse authority and each
974 local mental health authority the authority's statutory and contract responsibilities
975 regarding:
- 976 (a) use of public funds;
- 977 (b) oversight of public funds; and
- 978 (c) governance of substance use disorder and mental health programs and services.
- 979 (9) The Legislature may refuse to appropriate funds to the division upon the division's

failure to comply with the provisions of this part.

(10) If a local substance abuse authority contacts the division under Subsection 17-43-201

(10) for assistance in providing treatment services to a pregnant woman or pregnant minor, the division shall:

(a) refer the pregnant woman or pregnant minor to a treatment facility that has the capacity to provide the treatment services; or

(b) otherwise ensure that treatment services are made available to the pregnant woman or pregnant minor.

(11) The division shall employ a school-based mental health specialist to be housed at the State Board of Education who shall work with the State Board of Education to:

(a) provide coordination between a local education agency and local mental health authority;

(b) recommend evidence-based and evidence informed mental health screenings and intervention assessments for a local education agency; and

(c) coordinate with the local community, including local departments of health, to enhance and expand mental health related resources for a local education agency.

Section 8. Section **26B-5-301** is amended to read:

26B-5-301 (Effective 05/07/25). Definitions.

As used in this part, Part 4, Commitment of Persons Under Age 18, and Part 5, Essential Treatment and Intervention:

(1) "Adult" means an individual 18 years old or older.

(2) "Approved treatment facility or program" means a mental health or substance use treatment provider that meets the goals and measurements described in Subsection [~~26B-5-102(2)(j)~~] 26B-5-102(2)(ii).

(3) "Assisted outpatient treatment" means involuntary outpatient mental health treatment ordered under Section 26B-5-351.

(4) "Attending physician" means a physician licensed to practice medicine in this state who has primary responsibility for the care and treatment of the declarant.

(5) "Attorney-in-fact" means an adult properly appointed under this part to make mental health treatment decisions for a declarant under a declaration for mental health treatment.

(6) "Commitment to the custody of a local mental health authority" means that an adult is committed to the custody of the local mental health authority that governs the mental health catchment area where the adult resides or is found.

(7) "Community mental health center" means an entity that provides treatment and services

to a resident of a designated geographical area, that operates by or under contract with a local mental health authority, and that complies with state standards for community mental health centers.

(8) "Designated examiner" means:

(a) a licensed physician, preferably a psychiatrist, who is designated by the division as specially qualified by training or experience in the diagnosis of mental or related illness; or

(b) a licensed mental health professional designated by the division as specially qualified by training and who has at least five years' continual experience in the treatment of mental illness.

(9) "Designee" means a physician who has responsibility for medical functions including admission and discharge, an employee of a local mental health authority, or an employee of a person that has contracted with a local mental health authority to provide mental health services under Section 17-43-304.

(10) "Essential treatment" and "essential treatment and intervention" mean court-ordered treatment at a local substance abuse authority or an approved treatment facility or program for the treatment of an adult's substance use disorder.

(11) "Harmful sexual conduct" means the following conduct upon an individual without the individual's consent, including the nonconsensual circumstances described in Subsections 76-5-406(2)(a) through (l):

(a) sexual intercourse;

(b) penetration, however slight, of the genital or anal opening of the individual;

(c) any sexual act involving the genitals or anus of the actor or the individual and the mouth or anus of either individual, regardless of the gender of either participant; or

(d) any sexual act causing substantial emotional injury or bodily pain.

(12) "Informed waiver" means the patient was informed of a right and, after being informed of that right and the patient's right to waive the right, expressly communicated his or her intention to waive that right.

(13) "Incapable" means that, in the opinion of the court in a guardianship proceeding under Title 75, Utah Uniform Probate Code, or in the opinion of two physicians, a person's ability to receive and evaluate information effectively or communicate decisions is impaired to such an extent that the person currently lacks the capacity to make mental health treatment decisions.

(14) "Institution" means a hospital or a health facility licensed under Section 26B-2-206.

- (15) "Local substance abuse authority" means the same as that term is defined in Section 26B-5-101 and described in Section 17-43-201.
- (16) "Mental health facility" means the Utah State Hospital or other facility that provides mental health services under contract with the division, a local mental health authority, a person that contracts with a local mental health authority, or a person that provides acute inpatient psychiatric services to a patient.
- (17) "Mental health officer" means an individual who is designated by a local mental health authority as qualified by training and experience in the recognition and identification of mental illness, to:
- (a) apply for and provide certification for a temporary commitment; or
 - (b) assist in the arrangement of transportation to a designated mental health facility.
- (18) "Mental illness" means:
- (a) a psychiatric disorder that substantially impairs an individual's mental, emotional, behavioral, or related functioning; or
 - (b) the same as that term is defined in:
 - (i) the current edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association; or
 - (ii) the current edition of the International Statistical Classification of Diseases and Related Health Problems.
- (19) "Mental health treatment" means convulsive treatment, treatment with psychoactive medication, or admission to and retention in a facility for a period not to exceed 17 days.
- (20) "Patient" means an individual who is:
- (a) under commitment to the custody or to the treatment services of a local mental health authority; or
 - (b) undergoing essential treatment and intervention.
- (21) "Physician" means an individual who is:
- (a) licensed as a physician under Title 58, Chapter 67, Utah Medical Practice Act; or
 - (b) licensed as a physician under Title 58, Chapter 68, Utah Osteopathic Medical Practice Act.
- (22) "Serious bodily injury" means bodily injury that involves a substantial risk of death, unconsciousness, extreme physical pain, protracted and obvious disfigurement, or protracted loss or impairment of the function of a bodily member, organ, or mental faculty.
- (23) "State hospital" means the Utah State Hospital established in Section 26B-5-302.

(24) "Substantial danger" means that due to mental illness, an individual is at serious risk of:

- (a) suicide;
- (b) serious bodily self-injury;
- (c) serious bodily injury because the individual is incapable of providing the basic necessities of life, including food, clothing, or shelter;
- (d) causing or attempting to cause serious bodily injury to another individual;
- (e) engaging in harmful sexual conduct; or
- (f) if not treated, suffering severe and abnormal mental, emotional, or physical distress that:
 - (i) is associated with significant impairment of judgment, reason, or behavior; and
 - (ii) causes a substantial deterioration of the individual's previous ability to function independently.

(25) "Treatment" means psychotherapy, medication, including the administration of psychotropic medication, or other medical treatments that are generally accepted medical or psychosocial interventions for the purpose of restoring the patient to an optimal level of functioning in the least restrictive environment.

Section 9. Section **26B-5-801** is amended to read:

26B-5-801 (Effective 05/07/25). Definitions -- Creation of committee --

Membership -- Terms.

- (1)(a) As used in this part, "committee" means the Utah Substance Use and Mental Health Advisory Committee created in this section.
- (b) There is created within the department the Utah Substance Use and Mental Health Advisory Committee, which serves under the direction of the Utah Behavioral Health Commission created in Section 26B-5-702.
- (2) The committee shall be comprised of the following voting members:
 - (a) the attorney general or the attorney general's designee;
 - (b) one elected county official appointed by the Utah Association of Counties;
 - (c) the commissioner of public safety or the commissioner's designee;
 - (d) the director of the Division of Integrated Healthcare or the director's designee;
 - (e) the state superintendent of public instruction or the superintendent's designee;
 - (f) the executive director of the Department of Health and Human Services or the executive director's designee;
 - (g) the executive director of the State Commission on Criminal and Juvenile Justice or the executive director's designee;

- 1116 (h) the executive director of the Department of Corrections or the executive director's
 1117 designee;
- 1118 (i) the director of the Division of Juvenile Justice and Youth Services or the director's
 1119 designee;
- 1120 (j) the director of the Division of Child and Family Services or the director's designee;
- 1121 (k) the chair of the Board of Pardons and Parole or the chair's designee;
- 1122 (l) the director of the Office of Multicultural Affairs or the director's designee;
- 1123 (m) the director of the Division of Indian Affairs or the director's designee;
- 1124 ~~[(nn)]~~ (n) the state court administrator or the state court administrator's designee;
- 1125 ~~[(oo)]~~ (o) one district court judge who presides over a drug court and who is appointed
 1126 by the chief justice of the Utah Supreme Court;
- 1127 ~~[(pp)]~~ (p) one district court judge who presides over a mental health court and who is
 1128 appointed by the chief justice of the Utah Supreme Court;
- 1129 ~~[(qq)]~~ (q) one juvenile court judge who presides over a drug court and who is appointed
 1130 by the chief justice of the Utah Supreme Court;
- 1131 ~~[(rr)]~~ (r) one prosecutor appointed by the Statewide Association of Prosecutors;
- 1132 ~~[(ss)]~~ (s) the chair or co-chair of each subcommittee established by the committee;
- 1133 ~~[(tt)]~~ (t) the chair or co-chair of the Statewide Suicide Prevention Committee created
 1134 under Subsection 26B-5-611(3);
- 1135 ~~[(uu)]~~ (u) one representative appointed by the Utah League of Cities and Towns to serve
 1136 a four-year term;
- 1137 ~~[(vv)]~~ (v) the chair of the Utah Victim Services Commission or the chair's designee;
- 1138 ~~[(ww)]~~ (w) the superintendent of the Utah State Hospital or the superintendent's designee;
- 1139 ~~[(xx)]~~ (x) the following members appointed by the governor to serve four-year terms:
- 1140 (i) one resident of the state who has been personally affected by a substance use or
 1141 mental health disorder; and
- 1142 (ii) one citizen representative; and
- 1143 ~~[(yy)]~~ (y) in addition to the voting members described in Subsections (2)(a) through (x),
 1144 the following voting members appointed by a majority of the members described in
 1145 Subsections (2)(a) through (x) to serve four-year terms:
- 1146 (i) one resident of the state who represents a statewide advocacy organization for
 1147 recovery from substance use disorders;
- 1148 (ii) one resident of the state who represents a statewide advocacy organization for
 1149 recovery from mental illness;

- (iii) one resident of the state who represents a statewide advocacy organization for protection of rights of individuals with a disability;
- (iv) one resident of the state who represents prevention professionals;
- (v) one resident of the state who represents treatment professionals;
- (vi) one resident of the state who represents the physical health care field;
- (vii) one resident of the state who is a criminal defense attorney;
- (viii) one resident of the state who is a military servicemember or military veteran under Section 53B-8-102;
- (ix) one resident of the state who represents local law enforcement agencies;
- (x) one representative of private service providers that serve youth with substance use disorders or mental health disorders; and
- (xi) one resident of the state who is certified by the Division of Integrated Healthcare as a peer support specialist as described in Subsection [~~26B-5-102(2)(h)~~]
26B-5-102(2)(gg).

- (3) An individual other than an individual described in Subsection (2) may not be appointed as a voting member of the committee.

Section 10. Section **53-21-101** is amended to read:

53-21-101 (Effective 05/07/25). Definitions.

As used in this chapter:

- (1) "Crime scene investigator technician" means an individual employed by a law enforcement agency to collect and analyze evidence from crime scenes and crime-related incidents.
- (2) "Designated mental health resources liaison" means a non-leadership human resources or other administrative employee designated by a first responder agency who receives and processes a request for mental health resources on behalf of the first responder agency under this chapter.
- (3) "First responder" means:
 - (a) a law enforcement officer, as defined in Section 53-13-103;
 - (b) an emergency medical technician, as defined in Section 53-2e-101;
 - (c) an advanced emergency medical technician, as defined in Section 53-2e-101;
 - (d) a paramedic, as defined in Section 53-2e-101;
 - (e) a firefighter, as defined in Section 34A-3-113;
 - (f) a dispatcher, as defined in Section 53-6-102;
 - (g) a correctional officer, as defined in Section 53-13-104;

- 1184 (h) a special function officer, as defined in Section 53-13-105, employed by a local
1185 sheriff;
- 1186 (i) a search and rescue worker under the supervision of a local sheriff;
- 1187 (j) a forensic interviewer or victim advocate employed by a children's justice center
1188 established in accordance with Section 67-5b-102;
- 1189 (k) a credentialed criminal justice system victim advocate as defined in Section
1190 77-38-403 who responds to incidents with a law enforcement officer;
- 1191 (l) a crime scene investigator technician;
- 1192 (m) a wildland firefighter;
- 1193 (n) an investigator or prosecutor of cases involving sexual crimes against children; or
- 1194 (o) a civilian employee of a first responder agency who has been authorized to view or
1195 otherwise access information concerning crimes, accidents, or other traumatic events.
- 1196 (4) "First responder agency" means:
- 1197 (a) a special district, municipality, interlocal entity, or other political subdivision that
1198 employs a first responder to provide fire protection, paramedic, law enforcement, or
1199 emergency services; or
- 1200 (b) a certified private law enforcement agency as defined in Section 53-19-102.
- 1201 (5)(a) "Mental health resources" means:
- 1202 (i) an assessment to determine appropriate mental health treatment that is performed
1203 by a mental health therapist;
- 1204 (ii) outpatient mental health treatment provided by a mental health therapist; or
- 1205 (iii) peer support services provided by a peer support specialist who is qualified to
1206 provide peer support services under Subsection [~~26B-5-102(2)(h)~~]
1207 26B-5-102(2)(gg).
- 1208 (b) "Mental health resources" includes, at a minimum, the following services:
- 1209 (i) regular periodic screenings for all employees within the first responder agency;
- 1210 (ii) assessments and availability to mental health services for personnel directly
1211 involved in a critical incident within 48 hours of the incident; and
- 1212 (iii) regular and continuing access to the mental health program for:
- 1213 (A) spouses and children of first responders;
- 1214 (B) first responders who have retired or separated from the agency; and
- 1215 (C) spouses of first responders who have retired or separated from the agency.
- 1216 (6) "Mental health therapist" means the same as that term is defined in Section 58-60-102.
- 1217 (7) "Plan" means a plan to implement or expand a program that provides mental health

resources to first responders for which the division awards a grant under this chapter.

(8) "Retired" means the status of an individual who has become eligible, applies for, and may receive an allowance under Title 49, Utah State Retirement and Insurance Benefit Act.

(9) "Separated" means the status of an individual who has separated from employment as a first responder from a first responder agency as a result of a critical incident involving the first responder.

(10) "Small first responder agency" means a first responder agency that:

(a) has 10 or fewer employees;

(b) is primarily staffed by volunteers; or

(c) is located in:

(i) a county of the third, fourth, fifth, or sixth class;

(ii) a city of the third, fourth, fifth, or sixth class; or

(iii) a town.

Section 11. Section **63M-7-204** is amended to read:

63M-7-204 (Effective 05/07/25). Duties of commission.

(1) The commission shall:

(a) promote the commission's purposes as enumerated in Section 63M-7-201;

(b) promote the communication and coordination of all criminal and juvenile justice agencies;

(c) study, evaluate, and report on the status of crime in the state and on the effectiveness of criminal justice policies, procedures, and programs that are directed toward the reduction of crime in the state;

(d) study, evaluate, and report on programs initiated by state and local agencies to address reducing recidivism, including changes in penalties and sentencing guidelines intended to reduce recidivism, costs savings associated with the reduction in the number of inmates, and evaluation of expenses and resources needed to meet goals regarding the use of treatment as an alternative to incarceration, as resources allow;

(e) study, evaluate, and report on policies, procedures, and programs of other jurisdictions which have effectively reduced crime;

(f) identify and promote the implementation of specific policies and programs the commission determines will significantly reduce crime in Utah;

(g) provide analysis and recommendations on all criminal and juvenile justice

1252 legislation, state budget, and facility requests, including program and fiscal impact on
1253 all components of the criminal and juvenile justice system;

1254 (h) provide analysis, accountability, recommendations, and supervision for state and
1255 federal criminal justice grant money;

1256 (i) provide public information on the criminal and juvenile justice system and give
1257 technical assistance to agencies or local units of government on methods to promote
1258 public awareness;

1259 (j) promote research and program evaluation as an integral part of the criminal and
1260 juvenile justice system;

1261 (k) provide a comprehensive criminal justice plan annually;

1262 (l) review agency forecasts regarding future demands on the criminal and juvenile
1263 justice systems, including specific projections for secure bed space;

1264 (m) promote the development of criminal and juvenile justice information systems that
1265 are consistent with common standards for data storage and are capable of
1266 appropriately sharing information with other criminal justice information systems by:

1267 (i) developing and maintaining common data standards for use by all state criminal
1268 justice agencies;

1269 (ii) annually performing audits of criminal history record information maintained by
1270 state criminal justice agencies to assess their accuracy, completeness, and
1271 adherence to standards;

1272 (iii) defining and developing state and local programs and projects associated with
1273 the improvement of information management for law enforcement and the
1274 administration of justice; and

1275 (iv) establishing general policies concerning criminal and juvenile justice information
1276 systems and making rules as necessary to carry out the duties under Subsection
1277 (1)(k) and this Subsection (1)(m);

1278 (n) allocate and administer grants, from money made available, for approved education
1279 programs to help prevent the sexual exploitation of children;

1280 (o) allocate and administer grants for law enforcement operations and programs related
1281 to reducing illegal drug activity and related criminal activity;

1282 (p) request, receive, and evaluate data and recommendations collected and reported by
1283 agencies and contractors related to policies recommended by the commission
1284 regarding recidivism reduction, including the data described in Section 13-53-111
1285 and Subsection [26B-5-102(2)(l)] 26B-5-102(2)(kk);

- (q) establish and administer a performance incentive grant program that allocates funds appropriated by the Legislature to programs and practices implemented by counties that reduce recidivism and reduce the number of offenders per capita who are incarcerated;
- (r) oversee or designate an entity to oversee the implementation of juvenile justice reforms;
- (s) make rules and administer the juvenile holding room standards and juvenile jail standards to align with the Juvenile Justice and Delinquency Prevention Act requirements pursuant to 42 U.S.C. Sec. 5633;
- (t) allocate and administer grants, from money made available, for pilot qualifying education programs;
- (u) request, receive, and evaluate the aggregate data collected from prosecutorial agencies and the Administrative Office of the Courts, in accordance with Sections 63M-7-216 and 78A-2-109.5;
- (v) report annually to the Law Enforcement and Criminal Justice Interim Committee on the progress made on each of the following goals of the Justice Reinvestment Initiative:
- (i) ensuring oversight and accountability;
 - (ii) supporting local corrections systems;
 - (iii) improving and expanding reentry and treatment services; and
 - (iv) strengthening probation and parole supervision;
- (w) compile a report of findings based on the data and recommendations provided under Section 13-53-111 and Subsection ~~[26B-5-102(2)(n)]~~ 26B-5-102(2)(mm) that:
- (i) separates the data provided under Section 13-53-111 by each residential, vocational and life skills program; and
 - (ii) separates the data provided under Subsection ~~[26B-5-102(2)(n)]~~ 26B-5-102(2)(mm) by each mental health or substance use treatment program;
- (x) publish the report described in Subsection (1)(w) on the commission's website and annually provide the report to the Judiciary Interim Committee, the Health and Human Services Interim Committee, the Law Enforcement and Criminal Justice Interim Committee, and the related appropriations subcommittees;
- (y) receive, compile, and publish on the commission's website the data provided under:
- (i) Section 53-25-202;
 - (ii) Section 53-25-301; and

- 1320 (iii) Section 53-25-401;
- 1321 (z) review, research, advise, and make recommendations to the three branches of
- 1322 government regarding evidence-based sex offense management policies and
- 1323 practices, including supervision standards, treatment standards, and the sex offender
- 1324 registry;
- 1325 (aa) receive and evaluate a referral from the Department of Public Safety received under
- 1326 Section 53-21-104.3 involving a denial of mental health resources to an eligible
- 1327 individual, including, if appropriate in the commission's discretion, deny the relevant
- 1328 entity from receiving any grant of state funds under Section 63M-7-218 for a
- 1329 specified period of time; and
- 1330 (bb) accept public comment.
- 1331 (2)(a) The commission may designate an entity to perform the duties described in this
- 1332 part.
- 1333 (b) If the commission designates an entity under Subsection (2)(a), the commission shall
- 1334 ensure that the membership of the designated entity includes representation from
- 1335 relevant stakeholder groups from the parts of the justice system implicated in the
- 1336 policy area.
- 1337 (3) in fulfilling the commission's duties under Subsection (1), the commission may seek
- 1338 input and request assistance from groups with knowledge and expertise in criminal
- 1339 justice, including other boards and commissions affiliated or housed within the
- 1340 commission.

1341 **Section 12. FY 2026 Appropriations.**

1342 The following sums of money are appropriated for the fiscal year beginning July 1,

1343 2025, and ending June 30, 2026. These are additions to amounts previously appropriated for

1344 fiscal year 2026.

1345 **Subsection 12(a). Operating and Capital Budgets**

1346 Under the terms and conditions of Title 63J, Chapter 1, Budgetary Procedures Act, the

1347 Legislature appropriates the following sums of money from the funds or accounts indicated for

1348 the use and support of the government of the state of Utah.

1349 **ITEM 1** To Department of Workforce Services - Office of Homeless Services

1350 From General Fund 100,000

1351 From General Fund, One-time (100,000)

1352 The Legislature intends that this funding be used

1353 to fund the item "Healthcare and Housing: Medical

1354 Respite & End-of-Life Care for Homeless".

1355 ITEM 2 To Department of Health and Human Services - Operations

1356 From General Fund, One-time 200,000

1357 Schedule of Programs:

1358 Finance & Administration 200,000

1359 Under the provisions of Utah Code Annotated

1360 Title 63G, Chapter 6b, State Grants, the Legislature

1361 intends that the Department of Health and Human

1362 Services provide a direct award grant of \$200,000 to

1363 Valley Behavioral Health in fiscal year 2026 to expand

1364 services in Tooele County. The Legislature intends that

1365 the funding be distributed in one lump sum payment.

1366 ITEM 3 To Department of Health and Human Services - Integrated Health Care Services

1367 From General Fund 1,200,000

1368 From General Fund, One-time (300,000)

1369 Schedule of Programs:

1370 Medicaid Long Term Care Services 300,000

1371 Non-Medicaid Behavioral Health Treatment and

1372 Crisis Response 600,000

1373 Under the provisions of Utah Code Annotated

1374 Title 63G, Chapter 6b, State Grants, the Legislature

1375 intends that the Department of Health and Human

1376 Services provide a direct award grant of \$150,000

1377 ongoing and \$450,000 one-time to Odyssey House to

1378 serve individuals exiting inpatient substance use disorder

1379 treatment, jail, or unstable housing. The Legislature

1380 intends that the \$600,000 funding in fiscal 2026 be

1381 distributed in one lump sum payment.

1382 The Legislature intends that \$300,000 in fiscal

1383 year 2026 be used to fund the item "Skilled Nursing

1384 Facility Behavioral Health". Beginning in fiscal year

1385 2027, the Legislature intends that \$1,050,000 ongoing go

1386 to this purpose.

1387 Section 13. **Effective date.**

- 1388 (1) Except as provided in Subsection (2), this bill takes effect on May 7, 2025.
- 1389 (2) The actions affecting Section 26B-3-105 (Effective 07/01/25) take effect on July 1,
- 1390 2025.