

Steve Eliason proposes the following substitute bill:

Correctional Health Amendments

2025 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Steve Eliason

Senate Sponsor: Scott D. Sandall

LONG TITLE

General Description:

This bill addresses correctional health care.

Highlighted Provisions:

This bill:

- defines terms;
- requires the Department of Health and Human Services (department) to contract with a telehealth psychiatric consultation provider to provide consultation services to staff responsible for inmates' psychiatric care;
- requires the department to convene a working group to study the department's needs regarding an electronic health record system for inmate health care and, if the current electronic health record system does not meet the department's needs, requires the department to contract for a new system;
- requires the department to contract with psychiatrists to meet staffing needs for correctional health services, except under certain circumstances;
- requires the department to provide an annual report to the Health and Human Services Interim Committee concerning the provision of comprehensive health care to inmates;
- provides that money appropriated to the department to pay for unanticipated high-cost correctional health care expenses is non-lapsing;
- requires the department, in consultation with the Department of Corrections, to prepare and implement a plan for providing substance use disorder treatment to all inmates who suffer from a substance use disorder, and requires the Department of Corrections to cooperate with the department in providing medication assisted treatment pursuant to that plan;
- requires the department to assess certain inmates for the appropriateness of involuntary commitment, assisted outpatient treatment, or assertive community treatment, to pursue

one of those options if appropriate, and to report any resulting court order or assignment to treatment to the Board of Pardons and Parole;

- requires the Board of Pardons and Parole to require an inmate to comply with a court order of involuntary commitment or assisted outpatient treatment, or an assignment to assertive community treatment, as a condition of parole; and
- makes technical and conforming changes.

Money Appropriated in this Bill:

This bill appropriates \$13,000,000 in operating and capital budgets for fiscal year 2026, all of which is from the various sources as detailed in this bill.

Other Special Clauses:

None

Utah Code Sections Affected:

AMENDS:

- 26B-1-235**, as renumbered and amended by Laws of Utah 2023, Chapter 305
- 26B-1-410**, as renumbered and amended by Laws of Utah 2023, Chapter 305
- 63A-17-307**, as last amended by Laws of Utah 2023, Chapter 489
- 63I-2-264**, as last amended by Laws of Utah 2024, Third Special Session, Chapter 5
- 64-13-25.1**, as enacted by Laws of Utah 2024, Chapter 266
- 77-27-5**, as last amended by Laws of Utah 2024, Chapters 145, 187 and 208

ENACTS:

- 26B-4-901**, Utah Code Annotated 1953
- 26B-4-903**, Utah Code Annotated 1953
- 26B-4-904**, Utah Code Annotated 1953
- 26B-4-905**, Utah Code Annotated 1953
- 26B-4-906**, Utah Code Annotated 1953
- 26B-4-907**, Utah Code Annotated 1953

RENUMBERS AND AMENDS:

- 26B-4-902**, (Renumbered from 26B-4-325, as last amended by Laws of Utah 2024, Chapter 266)

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

Section 1. Section **26B-1-235** is amended to read:

26B-1-235 . Request for proposal required for non-state supplied services.

[(1) As used in this section:]

[~~(a) "AED" means the same as that term is defined in Section 26B-4-325.]~~

[~~(b) "Office" means the Office of Emergency Medical Services and Preparedness within the department.]~~

[~~(c) "Sudden cardiac arrest" means the same as that term is defined in Section 26B-4-325.]~~

[~~(2)~~] (1) Funds provided to the department through Sections 51-9-201 and 59-14-204 to be used to provide services, shall be awarded to non-governmental entities based on a competitive process consistent with Title 63G, Chapter 6a, Utah Procurement Code.

[~~(3)~~] (2) Beginning July 1, 2010, and not more than every five years thereafter, the department shall issue requests for proposals for new or renewing contracts to award funding for programs under Subsection (1).

Section 2. Section **26B-1-410** is amended to read:

26B-1-410 . Primary Care Grant Committee.

(1) As used in this section:

(a) "Committee" means the Primary Care Grant Committee created in Subsection (2).

(b) "Program" means the Primary Care Grant Program described in Sections 26B-4-310 and 26B-4-313.

(2) There is created the Primary Care Grant Committee.

(3) The committee shall:

(a) review grant applications forwarded to the committee by the department under Subsection 26B-4-312(1);

(b) recommend, to the executive director, grant applications to award under Subsection 26B-4-310(1);

(c) evaluate:

(i) the need for primary health care as defined in Section 26B-4-325 in different areas of the state;

(ii) how the program is addressing those needs; and

(iii) the overall effectiveness and efficiency of the program;

(d) review annual reports from primary care grant recipients;

(e) meet as necessary to carry out its duties, or upon a call by the committee chair or by a majority of committee members; and

(f) make rules, with the concurrence of the department, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, that govern the committee, including the committee's grant selection criteria.

(4) The committee shall consist of:

(a) as chair, the executive director or an individual designated by the executive director;
and

(b) six members appointed by the governor to serve up to two consecutive, two-year terms of office, including:

(i) four licensed health care professionals; and

(ii) two community advocates who are familiar with a medically underserved population as defined in Section ~~[26B-4-325]~~ 26B-4-301 and with health care systems, where at least one is familiar with a rural medically underserved population.

(5) The executive director may remove a committee member:

(a) if the member is unable or unwilling to carry out the member's assigned responsibilities; or

(b) for a rational reason.

(6) A committee member may not receive compensation or benefits for the member's service, except a committee member who is not an employee of the department may receive per diem and travel expenses in accordance with:

(a) Section 63A-3-106;

(b) Section 63A-3-107; and

(c) rules made by the Division of Finance in accordance with Sections 63A-3-106 and 63A-3-107.

Section 3. Section **26B-4-901** is enacted to read:

Part 9. Inmate Health

26B-4-901 . Definitions.

As used in this part:

(1) "Assertive community treatment team" means the same as that term is defined in Section 26B-5-601.

(2) "Correctional facility" means a facility operated to house inmates in a secure or nonsecure setting:

(a) by the Department of Corrections; or

(b) under a contract with the Department of Corrections.

(3) "Health care facility" means the same as that term is defined in Section 26B-2-201.

(4) "Inmate" means an individual who is:

(a) committed to the custody of the Department of Corrections; and

(b) housed at a correctional facility or at a county jail at the request of the Department of

Corrections.

- (5) "Medical monitoring technology" means a device, application, or other technology that can be used to improve health outcomes and the experience of care for patients, including evidence-based clinically evaluated software and devices that can be used to monitor and treat diseases and disorders.
- (6) "Medication assisted treatment" means the use of a medication, such as buprenorphine, methadone, or naltrexone, to treat substance use withdrawal symptoms or an opioid use disorder.
- (7) "Substance use disorder" means the same as that term is defined in the current edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association.
- (8) "Telehealth psychiatric consultation" means the same as that term is defined in Section 26B-1-328.
- (9) "Terminally ill" means the same as that term is defined in Section 31A-36-102.
- (10) "Unanticipated high-cost correctional health care" means inmate health care costs that:
- (a) the department is obligated to pay;
 - (b) were not and could not reasonably have been foreseen when creating the department's correctional health budget for the relevant fiscal year; and
 - (c) exceed \$100,000 for a single inmate.

Section 4. Section **26B-4-902**, which is renumbered from Section 26B-4-325 is renumbered and amended to read:

[26B-4-325] 26B-4-902 . Medical care for inmates -- Reporting of statistics.

[As used in this section:]

- [~~(1) "Correctional facility" means a facility operated to house inmates in a secure or nonsecure setting;~~
- ~~[(a) by the Department of Corrections; or]~~
 - ~~[(b) under a contract with the Department of Corrections.]~~
- [~~(2) "Health care facility" means the same as that term is defined in Section 26B-2-201.~~]
- [~~(3) "Inmate" means an individual who is:~~
- ~~[(a) committed to the custody of the Department of Corrections; and]~~
 - ~~[(b) housed at a correctional facility or at a county jail at the request of the Department of Corrections.]~~
- [~~(4) "Medical monitoring technology" means a device, application, or other technology that can be used to improve health outcomes and the experience of care for patients;~~

including evidence-based clinically evaluated software and devices that can be used to monitor and treat diseases and disorders.]

[(5) "Terminally ill" means the same as that term is defined in Section 31A-36-102.]

[(6)] (1) The department shall:

(a) for each health care facility owned or operated by the Department of Corrections, assist the Department of Corrections in complying with Section 64-13-39;

(b) in coordination with the Department of Corrections, and as the Department of Correction's agent:

(i) create policies and procedures for providing comprehensive health care to inmates;

(ii) provide inmates with comprehensive health care; and

(iii) develop standard population indicators and performance measures relating to the health of inmates;[and]

(c) collaborate with the Department of Corrections to comply with Section 64-13-25.1[-] ;
and

(d) contract with a telehealth psychiatric consultation provider to provide consultation services to staff responsible for inmates' psychiatric care.

[(7)] (2) In providing the comprehensive health care described in Subsection [(6)(b)(ii)]

(1)(b)(ii), the department may not, without entering into an agreement with the

Department of Corrections, provide, operate, or manage any treatment plans for inmates that are:

(a) required to be provided, operated, or managed by the Department of Corrections in accordance with Section 64-13-6; and

(b) not related to the comprehensive health care provided by the department.

[(8)] (3) Beginning July 1, 2023, and ending June 30, 2024, the department shall:

(a) evaluate and study the use of medical monitoring technology and create a plan for a pilot program that identifies:

(i) the types of medical monitoring technology that will be used during the pilot program; and

(ii) eligibility for participation in the pilot program; and

(b) make the indicators and performance measures described in Subsection [(6)(b)(iii)] (1)(b)(iii) available to the public through the Department of Corrections and the department websites.

[(9)] (4) Beginning July 1, 2024, and ending June 30, 2029, the department shall implement the pilot program.

- 199 ~~[(10)]~~ (5) The department shall submit to the Health and Human Services Interim
200 Committee and the Law Enforcement and Criminal Justice Interim Committee:
201 (a) a report on or before October 1 of each year regarding the costs and benefits of the
202 pilot program;
203 (b) a report that summarizes the indicators and performance measures described in
204 Subsection ~~[(6)(b)(iii)]~~ (1)(b)(iii) on or before October 1, 2024; and
205 (c) an updated report before October 1 of each year that compares the indicators and
206 population measures of the most recent year to the initial report described in
207 Subsection ~~[(10)(b)]~~ (5)(b).

208 ~~[(11)]~~ (6) An inmate receiving comprehensive health care from the department remains in
209 the custody of the Department of Corrections.

210 Section 5. Section **26B-4-903** is enacted to read:

211 **26B-4-903 . Electronic health record system.**

- 212 (1) On or before June 30, 2025, the department shall convene a working group to study and
213 develop recommendations regarding the electronic health record system used in
214 connection with providing inmates with comprehensive health care, including:
215 (a) identification of the department's electronic health record system requirements;
216 (b) an analysis of what features of an electronic health record system are needed to
217 maximize the implementation, effectiveness, and efficiency of the waiver described
218 in Section 26B-3-217; and
219 (c) a determination of whether the department's current electronic health record system
220 meets the requirements and includes the features identified under Subsections (1)(a)
221 and (b).
222 (2) The working group described in Subsection (1) shall include department staff as
223 determined by the director.
224 (3) If the working group determines that the department's current electronic health record
225 system does not meet the department's requirements identified pursuant to Subsection
226 (1)(a) or does not include the features identified under Subsection (1)(b), the department
227 shall contract for an electronic health record system, in accordance with Title 63G,
228 Chapter 6a, Utah Procurement Code, that meets the requirements and has the features
229 identified pursuant to Subsections (1)(a) and (b).

230 Section 6. Section **26B-4-904** is enacted to read:

231 **26B-4-904 . Staffing -- Reporting.**

- 232 (1)(a) Except as provided in Subsection (1)(b), the department shall contract with

psychiatrists to ensure that all correctional psychiatric positions are filled.

(b) If all correctional psychiatric positions are filled by internal staff for six continuous months:

(i) the department shall submit a certification of that fact to the Health and Human Services Interim Committee; and

(ii) the department is exempt from the requirement in Subsection (1)(a) for a period of 24 months from the date the certification is submitted to the Health and Human Services Interim Committee.

(2) On or before September 1 each year, the department shall provide a report to the Health and Human Services Interim Committee that includes, for the fiscal year immediately preceding the report:

(a) a description of the staff positions responsible for providing comprehensive health care to inmates, including an identification of any staff position that was open for more than half of the preceding fiscal year;

(b) the average time after admission for an inmate to receive:

(i) an initial health assessment;

(ii) a mental health evaluation; and

(iii) an oral examination by a dentist;

(c) the number of inmates who did not receive an initial health assessment within seven days after admission;

(d) the number of inmates who did not receive a mental health evaluation within 30 days after admission;

(e) the number of inmates who did not receive an oral examination by a dentist within 30 days after admission;

(f) the average time for an inmate to have a face-to-face encounter with department staff after the inmate submits a health care request; and

(g) the number of inmates who did not have a face-to-face encounter with department staff within 24 hours after the inmate submitted a health care request.

Section 7. Section **26B-4-905** is enacted to read:

26B-4-905 . Nonlapsing funds.

(1) Funds appropriated by the Legislature to the department for the purpose of paying for unanticipated high-cost correctional health care:

(a) are nonlapsing; and

(b) may only be used to pay for health care costs that meet the definition of

unanticipated high-cost correctional health care.

- (2) In any year that the department uses funds for the purpose described in Subsection (1), the department shall provide a report to the Social Services Appropriations Subcommittee and the Health and Human Services Interim Committee that includes:
- (a) the amount expended; and
 - (b) the balance of unexpended funds appropriated to the department for unanticipated high-cost correctional health care.

Section 8. Section **26B-4-906** is enacted to read:

26B-4-906 . Treatment for substance use disorder.

- (1) The department, in consultation with the Department of Corrections, shall prepare and implement a plan to provide, in accordance with current medical standards, substance use disorder treatment to all inmates who suffer from a substance use disorder.
- (2) The plan described in Subsection (1) shall include the use of medication assisted treatment as medically necessary.
- (3) The department shall consult and may contract with addiction specialists at the Huntsman Mental Health Institute to prepare and implement the plan described in Subsection (1).
- (4) The department shall provide an annual report on the preparation and implementation of the plan described in Subsection (1) to the Health and Human Services Interim Committee on or before the date of the committee's August interim meeting.

Section 9. Section **26B-4-907** is enacted to read:

26B-4-907 . Assessment for commitment, assisted outpatient treatment, or assertive community treatment.

- (1) At any time six or more months before an inmate is to be released from a correctional facility, the department shall have the inmate assessed by a licensed physician or designated examiner if the inmate:
- (a) is a habitual offender as that term is defined in Subsection 77-18-102(10)(a); and
 - (b) meets the definition of mental illness described in Subsection 76-2-305(1)(c).
- (2) A licensed physician or designated examiner who conducts an assessment under Subsection (1) shall examine the inmate and prepare a report that includes the physician's or examiner's determination regarding whether the inmate:
- (a) meets the criteria for involuntary commitment;
 - (b) meets the criteria for assisted outpatient treatment; or
 - (c) would benefit from assignment to a forensic assertive community treatment team.

- 301 (3) Based on the report prepared pursuant to Subsection (2), the department shall, as
302 appropriate:
- 303 (a) initiate an involuntary commitment court proceeding;
304 (b) file a written application for assisted outpatient treatment; or
305 (c) seek to have the inmate assigned to a forensic assertive community treatment team.
- 306 (4) If, prior to the inmate's release on parole, a court enters an order of involuntary
307 commitment or assisted outpatient treatment, or the inmate is assigned to a forensic
308 assertive community treatment team:
- 309 (a) the Division of Correctional Health Services shall provide notice to the Board of
310 Pardons and Parole of the court order or assignment; and
- 311 (b) the Board of Pardons and Parole shall order the inmate to comply with the court
312 order or the conditions of the assignment to a forensic assertive community treatment
313 team as a condition of parole.
- 314 (5) A court order for involuntary commitment or assisted outpatient treatment regarding an
315 inmate remains in place until a court vacates or amends the order, regardless of whether
316 the inmate's sentence is terminated or expires.
- 317 (6) A forensic assertive community treatment team shall prioritize an offender ordered to
318 participate in assertive community treatment as a condition of parole.

319 Section 10. Section **63A-17-307** is amended to read:

320 **63A-17-307 . State pay plans -- Applicability of section -- Exemptions -- Duties of**
321 **director.**

- 322 (1)(a) This section, and the rules made by the division under this section, apply to each
323 career and noncareer employee not specifically exempted under Subsection (2).
- 324 (b) If not exempted under Subsection (2), an employee is considered to be in classified
325 service.
- 326 (2) The following employees are exempt from this section:
- 327 (a) members of the Legislature and legislative employees;
- 328 (b) members of the judiciary and judicial employees;
- 329 (c) elected members of the executive branch and employees designated as schedule AC
330 as provided under Subsection 63A-17-301(1)(c);
- 331 (d) employees of the State Board of Education;
- 332 (e) officers, faculty, and other employees of state institutions of higher education;
- 333 (f) employees in a position that is specified by statute to be exempt from this Subsection
334 (2);

- (g) employees in the Office of the Attorney General;
- (h) department heads and other persons appointed by the governor under statute;
- (i) schedule AS employees as provided under Subsection 63A-17-301(1)(m);
- (j) department deputy directors, division directors, and other employees designated as schedule AD as provided under Subsection 63A-17-301(1)(d);
- (k) employees that determine and execute policy designated as schedule AR as provided under Subsection 63A-17-301(1)(l);
- (l) teaching staff, educational interpreters, and educators designated as schedule AH as provided under Subsection 63A-17-301(1)(g);
- (m) temporary employees described in Subsection 63A-17-301(1)(r);
- (n) patients and inmates designated as schedule AU as provided under Subsection 63A-17-301(1)(o) who are employed by state institutions; and
- (o) members of state and local boards and councils and other employees designated as schedule AQ as provided under Subsection 63A-17-301(1)(k).

(3)(a) The director shall prepare, maintain, and revise a position classification plan for each employee position not exempted under Subsection (2) to provide equal pay for equal work.

(b) Classification of positions shall be based upon similarity of duties performed and responsibilities assumed, so that the same job requirements and the same salary range, subject to Section 63A-17-112, may be applied equitably to each position in the same class.

(c) The director shall allocate or reallocate the position of each employee in classified service to one of the classes in the classification plan.

(d)(i) The division shall conduct periodic studies and interviews to provide that the classification plan remains reasonably current and reflects the duties and responsibilities assigned to and performed by employees.

(ii) The director shall determine the need for studies and interviews after considering factors such as changes in duties and responsibilities of positions or agency reorganizations.

(e) In accordance with Subsections (3)(a) and (b), and in consultation with the Department of Health and Human Services and the Department of Corrections, the director may create a classification plan for employee positions responsible for providing comprehensive health care and clinical interventions to inmates in a correctional facility, as those terms are defined in Section 26B-4-901, that accounts

369 for the specific challenges of providing health care in a correctional facility.

370 (4)(a) With the approval of the executive director and the governor, the director shall
371 develop and adopt pay plans for each position in classified service.

372 (b) The director shall design each pay plan to achieve, to the degree that funds permit,
373 comparability of state salary ranges to the market using data obtained from private
374 enterprise and other public employment for similar work.

375 (c) The director shall adhere to the following in developing each pay plan:

376 (i) each pay plan shall consist of sufficient salary ranges to:

377 (A) permit adequate salary differential among the various classes of positions in
378 the classification plan; and

379 (B) reflect the normal growth and productivity potential of employees in that class.

380 (ii) The director shall issue rules for the administration of pay plans.

381 (d) The establishing of a salary range is a nondelegable activity and is not appealable
382 under the grievance procedures of Part 6, Grievance Provisions, Title 67, Chapter
383 19a, Grievance Procedures, or otherwise.

384 (e) The director shall make rules, accordance with Title 63G, Chapter 3, Utah
385 Administrative Rulemaking Act, providing for:

386 (i) agency approved salary adjustments within approved salary ranges, including an
387 administrative salary adjustment; and

388 (ii) structure adjustments that modify salary ranges, including a cost of living
389 adjustment or market comparability adjustment.

390 (5)(a) On or before October 31 of each year, the director shall submit an annual
391 compensation plan to the executive director and the governor for consideration in the
392 executive budget and to the State Employee Benefits Advisory Commission created
393 in Section 63C-31-102.

394 (b) The plan described in Subsection (5)(a) may include recommendations, including:

395 (i) salary increases that generally affect employees, including a general increase or
396 merit increase;

397 (ii) salary increases that address compensation issues unique to an agency or
398 occupation;

399 (iii) structure adjustments, including a cost of living adjustment or market
400 comparability adjustment; or

401 (iv) changes to employee benefits.

402 (c)(i)(A) Subject to Subsection (5)(c)(i)(B) or (C), the director shall incorporate

the results of a salary survey of a reasonable cross section of comparable positions in private and public employment in the state into the annual compensation plan.

(B) The salary survey for a law enforcement officer, as defined in Section 53-13-103, a correctional officer, as defined in Section 53-13-104, or a dispatcher, as defined in Section 53-6-102, shall at minimum include the three largest political subdivisions in the state that employ, respectively, comparable positions.

(C) The salary survey for an examiner or supervisor described in Title 7, Chapter 1, Part 2, Department of Financial Institutions, shall at minimum include the Federal Deposit Insurance Corporation, Federal Reserve, and National Credit Union Administration.

(ii) The director may cooperate with or participate in any survey conducted by other public and private employers.

(iii) The director shall obtain information for the purpose of constructing the survey from the Division of Workforce Information and Payment Services and shall include employer name, number of persons employed by the employer, employer contact information and job titles, county code, and salary if available.

(iv) The division shall acquire and protect the needed records in compliance with the provisions of Section 35A-4-312.

(d) The director may incorporate any other relevant information in the plan described in Subsection (5)(a), including information on staff turnover, recruitment data, or external market trends.

(e) The director shall:

(i) establish criteria to assure the adequacy and accuracy of data used to make recommendations described in this Subsection (5); and

(ii) when preparing recommendations use accepted methodologies and techniques similar to and consistent with those used in the private sector.

(f)(i) Upon request and subject to Subsection (5)(f)(ii), the division shall make available foundational information used by the division or director in the drafting of a plan described in Subsection (5)(a), including:

(A) demographic and labor market information;

(B) information on employee turnover;

(C) salary information;

- 437 (D) information on recruitment; and
438 (E) geographic data.
- 439 (ii) The division may not provide under Subsection (5)(f)(i) information or other data
440 that is proprietary or otherwise protected under the terms of a contract or by law.
- 441 (g) The governor shall:
- 442 (i) consider salary and structure adjustments recommended under Subsection (5)(b)
443 in preparing the executive budget and shall recommend the method of distributing
444 the adjustments;
- 445 (ii) submit compensation recommendations to the Legislature; and
- 446 (iii) support the recommendation with schedules indicating the cost to individual
447 departments and the source of funds.
- 448 (h) If funding is approved by the Legislature in a general appropriations act, the
449 adjustments take effect on the July 1 following the enactment unless otherwise
450 indicated.
- 451 (6)(a) The director shall make rules, in accordance with Title 63G, Chapter 3, Utah
452 Administrative Rulemaking Act, for the granting of incentive awards, including
453 awards for cost saving actions, awards for commendable actions by an employee, or a
454 market-based award to attract or retain employees.
- 455 (b) An agency may not grant a market-based award unless the award is previously
456 approved by the division.
- 457 (c) In accordance with Subsection (6)(b), an agency requesting the division's approval of
458 a market-based award shall submit a request and documentation, subject to
459 Subsection (6)(d), to the division.
- 460 (d) In the documentation required in Subsection (6)(c), the requesting agency shall
461 identify for the division:
- 462 (i) any benefit the market-based award would provide for the agency, including:
- 463 (A) budgetary advantages; or
464 (B) recruitment advantages;
- 465 (ii) a mission critical need to attract or retain unique or hard to find skills in the
466 market; or
- 467 (iii) any other advantage the agency would gain through the utilization of a
468 market-based award.
- 469 (7)(a) The director shall regularly evaluate the total compensation program of state
470 employees in the classified service.

(b) The division shall determine if employee benefits are comparable to those offered by other private and public employers using information from:

(i) a study conducted by a third-party consultant; or

(ii) the most recent edition of a nationally recognized benefits survey.

Section 11. Section **63I-2-264** is amended to read:

63I-2-264 . Repeal dates: Title 64.

Section ~~[64-13-25.1(4)]~~ 64-13-25.1(5), regarding reporting on continuation or discontinuation of a medication assisted treatment plan, is repealed July 1, 2026.

Section 12. Section **64-13-25.1** is amended to read:

64-13-25.1 . Medication assisted treatment plan.

(1) As used in this section, "medication assisted treatment plan" means a prescription plan to use a medication, such as buprenorphine, methadone, or naltrexone, to treat substance use withdrawal symptoms or an opioid use disorder.

(2) In collaboration with the Department of Health and Human Services the department may cooperate with medical personnel to continue a medication assisted treatment plan for an inmate who had an active medication assisted treatment plan within the last six months before being committed to the custody of the department.

(3) The department shall cooperate with the Department of Health and Human Services and relevant medical personnel in providing medication assisted treatment in accordance with the substance use disorder plan described in Subsection 26B-4-906(1).

~~[(3)]~~ (4) A medication used for a medication assisted treatment plan under Subsection (2):

(a) shall be an oral, short-acting medication unless the chief administrative officer or other medical personnel who is familiar with the inmate's medication assisted treatment plan determines that a long-acting, non-oral medication will provide a greater benefit to the individual receiving treatment;

(b) may be administered to an inmate under the direction of the chief administrative officer of the correctional facility;

(c) may, as funding permits, be paid for by the department or the Department of Health and Human Services; and

(d) may be left or stored at a correctional facility at the discretion of the chief administrative officer of the correctional facility.

~~[(4)]~~ (5) Before November 30 each year, the Department of Health and Human Services shall provide a report to the Health and Human Services Interim Committee that details, for each category, the number of individuals in the custody of the department who, in

the preceding 12 months:

- (a) had an active medication assisted treatment plan within the six months preceding commitment to the custody of the department;
- (b) continued a medication assisted treatment plan following commitment to the custody of the department; and
- (c) discontinued a medication assisted treatment plan prior to, at the time of, or after commitment to the custody of the department and, as available, the type of medication discontinued and the reason for the discontinuation.

Section 13. Section **77-27-5** is amended to read:

77-27-5 . Board of Pardons and Parole authority.

- (1)(a) Subject to this chapter and other laws of the state, and except for a conviction for treason or impeachment, the board shall determine by majority decision when and under what conditions an offender's conviction may be pardoned or commuted.
- (b) The board shall determine by majority decision when and under what conditions an offender committed to serve a sentence at a penal or correctional facility, which is under the jurisdiction of the department, may:
 - (i) be released upon parole;
 - (ii) have a fine or forfeiture remitted;
 - (iii) have the offender's criminal accounts receivable remitted in accordance with Section 77-32b-105 or 77-32b-106;
 - (iv) have the offender's payment schedule modified in accordance with Section 77-32b-103; or
 - (v) have the offender's sentence terminated.
- (c) The board shall prioritize public safety when making a determination under Subsection (1)(a) or (1)(b).
- (d)(i) The board may sit together or in panels to conduct hearings.
 - (ii) The chair shall appoint members to the panels in any combination and in accordance with rules made by the board in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.
 - (iii) The chair may participate on any panel and when doing so is chair of the panel.
 - (iv) The chair of the board may designate the chair for any other panel.
- (e)(i) Except after a hearing before the board, or the board's appointed examiner, in an open session, the board may not:
 - (A) remit a fine or forfeiture for an offender or the offender's criminal accounts

- 539 receivable;
- 540 (B) release the offender on parole; or
- 541 (C) commute, pardon, or terminate an offender's sentence.
- 542 (ii) An action taken under this Subsection (1) other than by a majority of the board
- 543 shall be affirmed by a majority of the board.
- 544 (f) A commutation or pardon may be granted only after a full hearing before the board.
- 545 (2)(a) In the case of a hearing, timely prior notice of the time and location of the hearing
- 546 shall be given to the offender.
- 547 (b) The county or district attorney's office responsible for prosecution of the case, the
- 548 sentencing court, and law enforcement officials responsible for the defendant's arrest
- 549 and conviction shall be notified of any board hearings through the board's website.
- 550 (c) Whenever possible, the victim or the victim's representative, if designated, shall be
- 551 notified of original hearings and any hearing after that if notification is requested and
- 552 current contact information has been provided to the board.
- 553 (d)(i) Notice to the victim or the victim's representative shall include information
- 554 provided in Section 77-27-9.5, and any related rules made by the board under that
- 555 section.
- 556 (ii) The information under Subsection (2)(d)(i) shall be provided in terms that are
- 557 reasonable for the lay person to understand.
- 558 (3)(a) A decision by the board is final and not subject for judicial review if the decision
- 559 is regarding:
- 560 (i) a pardon, parole, commutation, or termination of an offender's sentence;
- 561 (ii) the modification of an offender's payment schedule for restitution; or
- 562 (iii) the remission of an offender's criminal accounts receivable or a fine or forfeiture.
- 563 (b) Deliberative processes are not public and the board is exempt from Title 52, Chapter
- 564 4, Open and Public Meetings Act, when the board is engaged in the board's
- 565 deliberative process.
- 566 (c) Pursuant to Subsection 63G-2-103(25)(b)(xi), records of the deliberative process are
- 567 exempt from Title 63G, Chapter 2, Government Records Access and Management
- 568 Act.
- 569 (d) Unless it will interfere with a constitutional right, deliberative processes are not
- 570 subject to disclosure, including discovery.
- 571 (e) Nothing in this section prevents the obtaining or enforcement of a civil judgment.
- 572 (4)(a) This chapter may not be construed as a denial of or limitation of the governor's

power to grant respite or reprieves in all cases of convictions for offenses against the state, except treason or conviction on impeachment.

(b) Notwithstanding Subsection (4)(a), respites or reprieves may not extend beyond the next session of the board.

(c) At the next session of the board, the board:

(i) shall continue or terminate the respite or reprieve; or

(ii) may commute the punishment or pardon the offense as provided.

(d) In the case of conviction for treason, the governor may suspend execution of the sentence until the case is reported to the Legislature at the Legislature's next session.

(e) The Legislature shall pardon or commute the sentence or direct the sentence's execution.

(5)(a) In determining when, where, and under what conditions an offender serving a sentence may be paroled or pardoned, have a fine or forfeiture remitted, have the offender's criminal accounts receivable remitted, or have the offender's sentence commuted or terminated, the board shall:

(i) consider whether the offender has made restitution ordered by the court under Section 77-38b-205, or is prepared to pay restitution as a condition of any parole, pardon, remission of a criminal accounts receivable or a fine or forfeiture, or a commutation or termination of the offender's sentence;

(ii) except as provided in Subsection (5)(b), develop and use a list of criteria for making determinations under this Subsection (5);

(iii) consider information provided by the department regarding an offender's individual case action plan;~~and~~

(iv) review an offender's status within 60 days after the day on which the board receives notice from the department that the offender has completed all of the offender's case action plan components that relate to activities that can be accomplished while the offender is imprisoned~~[-]~~ ; and

(v) as applicable, comply with the requirements described in Section 26B-4-907.

(b) The board shall determine whether to remit an offender's criminal accounts receivable under this Subsection (5) in accordance with Section 77-32b-105 or 77-32b-106.

(6) In determining whether parole may be terminated, the board shall consider:

(a) the offense committed by the parolee; and

(b) the parole period under Section 76-3-202, and in accordance with Section 77-27-13.

(7) For an offender placed on parole after December 31, 2018, the board shall terminate parole in accordance with the adult sentencing and supervision length guidelines, as defined in Section 63M-7-401.1, to the extent the guidelines are consistent with the requirements of the law.

(8) The board may not rely solely on an algorithm or a risk assessment tool score in determining whether parole should be granted or terminated for an offender.

(9) The board may intervene as a limited-purpose party in a judicial or administrative proceeding, including a criminal action, to seek:

(a) correction of an order that has or will impact the board's jurisdiction; or

(b) clarification regarding an order that may impact the board's jurisdiction.

(10) A motion to intervene brought under Subsection [(8)(a)] (9)(a) shall be raised within 60 days after the day on which a court enters the order that impacts the board's jurisdiction.

Section 14. **FY 2026 Appropriations.**

The following sums of money are appropriated for the fiscal year beginning July 1, 2025, and ending June 30, 2026. These are additions to amounts previously appropriated for fiscal year 2026.

Subsection 14(a). **Operating and Capital Budgets**

Under the terms and conditions of Title 63J, Chapter 1, Budgetary Procedures Act, the Legislature appropriates the following sums of money from the funds or accounts indicated for the use and support of the government of the state of Utah.

ITEM 1 To Department of Health and Human Services - Correctional Health Services

From General Fund, One-time 13,000,000

Schedule of Programs:

Correctional Health Services 13,000,000

The Legislature intends that the Department of Health and Human Services use the appropriations provided under this section to pay for unanticipated high-cost correctional health care as described in Section 26B-4-905 and to pay for an electronic health record system as described in Section 26B-4-903.

ITEM 2 To Department of Health and Human Services - Integrated Health Care Services

From General Fund, One-time (13,000,000)

From General Fund Restricted - Medicaid Bud

Stabilization Restricted Account, One-time 13,000,000

641 Section 15. **Effective Date.**

642 This bill takes effect on May 7, 2025.