

Steve Eliason proposes the following substitute bill:

Behavioral and Mental Health Amendments

2026 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Steve Eliason

Senate Sponsor:

LONG TITLE

General Description:

This bill addresses behavioral and mental health.

Highlighted Provisions:

This bill:

▸ changes the entity that administers and reports on the Governor's Suicide Prevention Fund from the governor to the Office of Substance Use and Mental Health (office);

▸ requires the Office of Licensing within the Department of Health and Human Services (department) to make rules related to a behavioral health receiving center's communication with prosecutors and law enforcement regarding a justice involved individual's participation in the behavioral health receiving center's treatment program;

▸ requires the department to provide a list of mental health and substance use disorder screening tools used in jails;

▸ requires the department to create a standard form for justice involved individuals to consent to disclosure of a mental health disorder or substance use disorder to certain persons, including health care providers, first responders, courts, local health authorities, county pretrial and parole services; and the Division of Adult Probation and Parole;

▸ permits first responders to provide an electronic list of local mental health services to certain individuals under certain circumstances;

▸ creates a community-based peer support specialist program;

▸ amends provisions related to individuals eligible for admission to the Utah State Hospital;

▸ amends provisions related to involuntary commitment and court ordered assisted outpatient treatment for mental illness;

▸ requires the department to maintain a database of involuntary commitments;

▸ amends the duties of the Behavioral Health Commission (commission), including to add certain duties that were previously assigned to the Utah Substance Use and Mental

29 Health Advisory Committee;

30 ▸ changes the name of the Utah Substance Use and Mental Health Advisory Committee to
31 the Utah Behavioral health Policy Review Committee and amends the committee's
32 duties and other related provisions;

33 ▸ requires the commission's Legislative Policy Committee to form a working group to
34 investigate and make recommendations to the Legislature regarding a statewide central
35 authority for coordinating behavioral health initiatives;

36 ▸ creates a family outreach specialist within the department to:

37 • engage with the family of an individual who has recently died by suicide or overdose;
38 and

39 • assist the medical examiner with suicide intervention, prevention, and postvention;

40 ▸ makes changes to responsibilities related to the Underage Drinking Prevention Media and
41 Education Campaign Restricted Account;

42 ▸ amends the duties and membership of the Behavioral Health Crisis Response Committee;

43 ▸ requires chief law enforcement officers or executive officers of each law enforcement
44 agency to report to the State Commission on Criminal and Juvenile Justice on peace
45 officers' compliance with training requirements related to crisis intervention responses;

46 ▸ defines terms; and

47 ▸ makes technical and conforming changes.

48 **Money Appropriated in this Bill:**

49 None

50 **Other Special Clauses:**

51 None

52 **Utah Code Sections Affected:**

53 AMENDS:

54 **17-72-408 (Effective 05/06/26)**, as renumbered and amended by Laws of Utah 2025,
55 First Special Session, Chapter 13

56 **26B-1-325 (Effective 05/06/26)**, as last amended by Laws of Utah 2023, Chapter 33 and
57 renumbered and amended by Laws of Utah 2023, Chapter 305

58 **26B-1-425 (Effective 05/06/26) (Repealed 07/01/27)**, as last amended by Laws of Utah
59 2024, Chapter 245

60 **26B-1-427 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapter 494

61 **26B-1-428 (Effective 05/06/26) (Repealed 07/01/30)**, as last amended by Laws of Utah
62 2025, Chapter 366

63 **26B-2-135 (Effective 05/06/26)**, as enacted by Laws of Utah 2025, Chapter 499
64 **26B-5-121 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, First Special
65 Session, Chapter 16
66 **26B-5-306 (Effective 05/06/26)**, as last amended by Laws of Utah 2023, Chapter 184 and
67 renumbered and amended by Laws of Utah 2023, Chapter 308
68 **26B-5-326 (Effective 05/06/26)**, as renumbered and amended by Laws of Utah 2023,
69 Chapter 308
70 **26B-5-331 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 118,
71 277, 340, and 470
72 **26B-5-332 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 46, 118
73 **26B-5-351 (Effective 05/06/26)**, as renumbered and amended by Laws of Utah 2023,
74 Chapter 308
75 **26B-5-372 (Effective 05/06/26)**, as renumbered and amended by Laws of Utah 2023,
76 Chapter 308
77 **26B-5-611 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245,
78 250
79 **26B-5-703 (Effective 05/06/26) (Repealed 07/01/29)**, as enacted by Laws of Utah 2024,
80 Chapter 245
81 **26B-5-704 (Effective 05/06/26) (Repealed 07/01/29)**, as enacted by Laws of Utah 2024,
82 Chapter 245
83 **26B-5-705 (Effective 05/06/26) (Repealed 07/01/29)**, as enacted by Laws of Utah 2024,
84 Chapter 245
85 **26B-5-801 (Effective 05/06/26) (Repealed 01/01/33)**, as last amended by Laws of Utah
86 2025, First Special Session, Chapter 9
87 **26B-5-802 (Effective 05/06/26) (Repealed 01/01/33)**, as renumbered and amended by
88 Laws of Utah 2024, Chapter 245
89 **26B-5-803 (Effective 05/06/26) (Repealed 01/01/33)**, as renumbered and amended by
90 Laws of Utah 2024, Chapter 245
91 **32B-2-306 (Effective 05/06/26) (Partially Repealed 01/01/33)**, as last amended by Laws
92 of Utah 2024, Chapters 245, 385
93 **32B-2-402 (Effective 05/06/26) (Partially Repealed 01/01/33)**, as last amended by Laws
94 of Utah 2025, First Special Session, Chapter 16
95 **32B-2-404 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245,
96 385

97 **32B-2-405 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245,
98 385

99 **32B-7-305 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapter 245

100 **53-6-202 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapter 112

101 **63C-18-202 (Effective 05/06/26) (Repealed 12/31/26)**, as last amended by Laws of Utah
102 2024, Chapter 245

103 **63C-18-203 (Effective 05/06/26) (Repealed 12/31/26)**, as last amended by Laws of Utah
104 2025, Chapter 277

105 **63I-1-226 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 47, 277
106 and 366

107 **63I-1-232 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Third Special
108 Session, Chapter 5

109 **63I-1-263 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 391,
110 512

111 **64-13-45 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245, 341

112 **77-18-106 (Effective 05/06/26)**, as last amended by Laws of Utah 2023, Chapter 330

113 ENACTS:

114 **26B-4-1103 (Effective 05/06/26)**, Utah Code Annotated 1953

115 **26B-4-1104 (Effective 05/06/26)**, Utah Code Annotated 1953

116 **26B-5-122 (Effective 05/06/26)**, Utah Code Annotated 1953

117 **26B-5-384 (Effective 05/06/26)**, Utah Code Annotated 1953

118 **26B-8-233 (Effective 05/06/26)**, Utah Code Annotated 1953

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

121 Section 1. Section **17-72-408** is amended to read:

122 **17-72-408 (Effective 05/06/26). County jail reporting requirements.**

123 (1) Each county jail shall submit a report to the commission before June 15 of each year
124 that includes, for the preceding calendar year:

125 (a) the average daily prisoner population each month;

126 (b) the number of prisoners in the county jail on the last day of each month who identify
127 as each race or ethnicity included in the Standards for Transmitting Race and
128 Ethnicity published by the United States Federal Bureau of Investigation;

129 (c) the number of prisoners booked into the county jail;

130 (d) the number of prisoners held in the county jail each month on behalf of each of the

- 131 following entities:
- 132 (i) the Bureau of Indian Affairs;
- 133 (ii) a state prison;
- 134 (iii) a federal prison;
- 135 (iv) the United States Immigration and Customs Enforcement; and
- 136 (v) any other entity with which a county jail has entered a contract to house inmates
- 137 on the entity's behalf;
- 138 (e) the number of prisoners that are denied pretrial release and held in the custody of the
- 139 county jail while the prisoner awaited final disposition of the prisoner's criminal
- 140 charges;
- 141 (f) for each prisoner booked into the county jail:
- 142 (i) the name of the agency that arrested the prisoner;
- 143 (ii) the date and time the prisoner was booked into and released from the custody of
- 144 the county jail;
- 145 (iii) if the prisoner was released from the custody of the county jail, the reason the
- 146 inmate was released from the custody of the county jail;
- 147 (iv) if the prisoner was released from the custody of the county jail on a financial
- 148 condition, whether the financial condition was set by a county sheriff or a court;
- 149 (v) the number of days the prisoner was held in the custody of the county jail before
- 150 disposition of the prisoner's criminal charges;
- 151 (vi) whether the prisoner was released from the custody of the county jail before final
- 152 disposition of the prisoner's criminal charges; and
- 153 (vii) the prisoner's state identification number;
- 154 (g) the number of in-custody deaths that occurred at the county jail;
- 155 (h) for each in-custody death:
- 156 (i) the deceased's name, gender, race, ethnicity, age, and known or suspected medical
- 157 diagnosis or disability, if any;
- 158 (ii) the date, time, and location of death;
- 159 (iii) the law enforcement agency that detained, arrested, or was in the process of
- 160 arresting the deceased; and
- 161 (iv) a brief description of the circumstances surrounding the death;
- 162 (i) the known, or discoverable on reasonable inquiry, causes and contributing factors of
- 163 each of the in-custody deaths described in Subsection (2)(g);
- 164 (j) the county jail's policy for notifying an inmate's next of kin after the prisoner's

- 165 in-custody death;
- 166 (k) the county jail policies, procedures, and protocols:
- 167 (i) for treatment of a prisoner experiencing withdrawal from alcohol or substance use,
- 168 including use of opiates;
- 169 (ii) that relate to the county jail's provision, or lack of provision, of medications used
- 170 to treat, mitigate, or address a prisoner's symptoms of withdrawal, including
- 171 methadone and all forms of buprenorphine and naltrexone; and
- 172 (iii) that relate to screening, assessment, and treatment of a prisoner for a substance
- 173 use or mental health disorder, including the policies, procedures, and protocols
- 174 that implement the requirements described in Section 17-72-501;
- 175 (l)(i) the number of prisoners whose screening described in Section 17-72-501
- 176 indicated the presence of a substance use disorder; and
- 177 (ii) of the prisoners whose screening indicated the presence of a substance use
- 178 disorder, the number of prisoners who received medication under a medication
- 179 assisted treatment plan; and
- 180 (m) any report the county jail provides or is required to provide under federal law or
- 181 regulation relating to prisoner deaths.
- 182 (2)(a) Subsection (1) does not apply to a county jail if the county jail:
- 183 (i) collects and stores the data described in Subsection (1); and
- 184 (ii) enters into a memorandum of understanding with the commission that allows the
- 185 commission to access the data described in Subsection (1).
- 186 (b) The memorandum of understanding described in Subsection (2)(a)(ii) shall include a
- 187 provision to protect any information related to an ongoing investigation and comply
- 188 with all applicable federal and state laws.
- 189 (c) If the commission accesses data from a county jail in accordance with Subsection
- 190 (2)(a), the commission may not release a report prepared from that data, unless:
- 191 (i) the commission provides the report for review to:
- 192 (A) the county jail; and
- 193 (B) any arresting agency that is named in the report; and
- 194 (ii)(A) the county jail approves the report for release;
- 195 (B) the county jail reviews the report and prepares a response to the report to be
- 196 published with the report; or
- 197 (C) the county jail fails to provide a response to the report within four weeks after
- 198 the day on which the commission provides the report to the county jail.

- 199 (3) The commission shall:
- 200 (a) compile the information from the reports described in Subsection (1);
- 201 (b) omit or redact any identifying information of an inmate in the compilation to the
- 202 extent omission or redaction is necessary to comply with state and federal law;
- 203 (c) submit the compilation to the Law Enforcement and Criminal Justice Interim
- 204 Committee and the [~~Utah Substance Use and Mental Health Advisory Committee~~]
- 205 Utah Behavioral Health Commission before November 1 of each year; and
- 206 (d) submit the compilation to the protection and advocacy agency designated by the
- 207 governor before November 1 of each year.
- 208 (4) The commission may not provide access to or use a county jail's policies, procedures, or
- 209 protocols submitted under this section in a manner or for a purpose not described in this
- 210 section.
- 211 (5) Upon request, a county jail shall make a report, including only the names and causes of
- 212 death of deceased inmates and the facility in which the deceased inmates were being
- 213 held in custody, available to the public.

214 Section 2. Section **26B-1-325** is amended to read:

215 **26B-1-325 (Effective 05/06/26). Governor's Suicide Prevention Fund.**

- 216 (1) There is created an expendable special revenue fund known as the Governor's Suicide
- 217 Prevention Fund.
- 218 (2) The fund shall consist of donations, gifts, grants, and bequests of real property or
- 219 personal property made to the fund.
- 220 (3) A donor to the fund may designate a specific purpose for the use of the donor's
- 221 donation, if the designated purpose is described in Subsection (4).
- 222 (4)(a) Subject to Subsection (3), money in the fund shall be used for the following
- 223 activities:
- 224 (i) efforts to directly improve mental health crisis response;
- 225 (ii) efforts that directly reduce risk factors associated with suicide; and
- 226 (iii) efforts that directly enhance known protective factors associated with suicide
- 227 reduction.
- 228 (b) Efforts described in Subsections (4)(a)(ii) and (iii) include the components of the
- 229 state suicide prevention program described in Subsection [~~26B-5-611(3)~~]
- 230 26B-5-611(4).
- 231 (5) The Office of Substance Use and Mental Health shall establish a grant application and
- 232 review process for the expenditure of money from the fund.

- 233 (6) The grant application and review process shall describe:
- 234 (a) requirements to complete a grant application;
- 235 (b) requirements to receive funding;
- 236 (c) criteria for the approval of a grant application;
- 237 (d) standards for evaluating the effectiveness of a project proposed in a grant
- 238 application; and
- 239 (e) support offered by the office to complete a grant application.
- 240 (7) The Office of Substance Use and Mental Health shall:
- 241 (a) review a grant application for completeness;
- 242 (b) make a recommendation to the governor or the governor's designee regarding a grant
- 243 application;
- 244 (c) send a grant application to the governor or the governor's designee for evaluation and
- 245 approval or rejection;
- 246 (d) inform a grant applicant of the governor or the governor's designee's determination
- 247 regarding the grant application; and
- 248 (e) direct the fund administrator to release funding for grant applications approved by
- 249 the governor or the governor's designee.
- 250 (8) The state treasurer shall invest the money in the fund under Title 51, Chapter 7, State
- 251 Money Management Act, except that all interest or other earnings derived from money
- 252 in the fund shall be deposited into the fund.
- 253 (9) Money in the fund may not be used for the Office of the Governor's administrative
- 254 expenses that are normally provided for by legislative appropriation.
- 255 (10) ~~The [governor or the governor's designee may authorize the expenditure of fund money]~~
- 256 Office of Substance Use and Mental Health shall administer the fund in accordance with
- 257 this section.
- 258 (11) ~~The [governor]~~ Office of Substance Use and Mental Health shall make an annual report
- 259 to the Legislature regarding the status of the fund, including a report on the contributions
- 260 received, expenditures made, and programs and services funded.

261 Section 3. Section **26B-1-425** is amended to read:

262 **26B-1-425 (Effective 05/06/26) (Repealed 07/01/27). Utah Health Workforce**

263 **Advisory Council -- Creation and membership.**

- 264 (1) There is created within the department the Utah Health Workforce Advisory Council.
- 265 (2) The council shall be comprised of at least 14 but not more than 19 members.
- 266 (3) The following are members of the council:

- 267 (a) the executive director or that individual's designee;
- 268 (b) the executive director of the Department of Workforce Services or that individual's
- 269 designee;
- 270 (c) the commissioner of higher education of the Utah System of Higher Education or
- 271 that individual's designee;
- 272 (d) the state superintendent of the State Board of Education or that individual's designee;
- 273 (e) the executive director of the Department of Commerce or that individual's designee;
- 274 (f) the director of the Division of Multicultural Affairs or that individual's designee;
- 275 (g) the [director] chair of the [~~Utah Substance Use and Mental Health Advisory~~
- 276 ~~Committee~~] Utah Behavioral Health Commission or that individual's designee;
- 277 (h) the chair of the Utah Indian Health Advisory Board; and
- 278 (i) the chair of the Utah Medical Education Council created in Section 26B-4-706.
- 279 (4) The executive director shall appoint at least five but not more than ten additional
- 280 members that represent diverse perspectives regarding Utah's health workforce as
- 281 defined in Section 26B-4-705.
- 282 (5)(a) A member appointed by the executive director under Subsection (4) shall serve a
- 283 four-year term.
- 284 (b) Notwithstanding Subsection (5)(a) for the initial appointments of members described
- 285 in Subsection (4) the executive director shall appoint at least three but not more than
- 286 five members to a two-year appointment to ensure that approximately half of the
- 287 members appointed by the executive director rotate every two years.
- 288 (6) The executive director or the executive director's designee shall chair the council.
- 289 (7)(a) As used in this Subsection (7), "health workforce" means the same as that term is
- 290 defined in Section 26B-4-705.
- 291 (b) The council shall:
- 292 (i) meet at least once each quarter;
- 293 (ii) study and provide recommendations to an entity described in Subsection (8)
- 294 regarding:
- 295 (A) health workforce supply;
- 296 (B) health workforce employment trends and demand;
- 297 (C) options for training and educating the health workforce;
- 298 (D) the implementation or improvement of strategies that entities in the state are
- 299 using or may use to address health workforce needs including shortages,
- 300 recruitment, retention, and other Utah health workforce priorities as determined

- 301 by the council;
- 302 (iii) provide guidance to an entity described in Subsection (8) regarding health
303 workforce related matters;
- 304 (iv) review and comment on legislation relevant to Utah's health workforce; and
305 (v) advise the Utah Board of Higher Education and the Legislature on the status and
306 needs of the health workforce who are in training.
- 307 (8) The council shall provide information described in Subsections (7)(b)(ii) and (iii) to:
- 308 (a) the Legislature;
- 309 (b) the department;
- 310 (c) the Department of Workforce Services;
- 311 (d) the Department of Commerce;
- 312 (e) the Utah Medical Education Council; and
313 (f) any other entity the council deems appropriate upon the entity's request.
- 314 (9)(a) The Utah Medical Education Council created in Section 26B-4-706 is a
315 subcommittee of the council.
- 316 (b) The council may establish subcommittees to support the work of the council.
317 (c) A member of the council shall chair a subcommittee created by the council.
318 (d) Except for the Utah Medical Education Council, the chair of the subcommittee may
319 appoint any individual to the subcommittee.
- 320 (10) For any report created by the council that pertains to any duty described in Subsection
321 (7), the council shall:
- 322 (a) provide the report to:
- 323 (i) the department; and
324 (ii) any appropriate legislative committee; and
325 (b) post the report on the council's website.
- 326 (11) The executive director shall:
- 327 (a) ensure the council has adequate staff to support the council and any subcommittee
328 created by the council; and
329 (b) provide any available information upon the council's request if:
- 330 (i) that information is necessary for the council to fulfill a duty described in
331 Subsection (7); and
332 (ii) the department has access to the information.
- 333 (12) A member of the council or a subcommittee created by the council may not receive
334 compensation or benefits for the member's service but may receive per diem and travel

335 expenses as allowed in:

336 (a) Section 63A-3-106;

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

338 (c) rules made by the Division of Finance according to Sections 63A-3-106 and
339 63A-3-107.

340 Section 4. Section **26B-1-427** is amended to read:

341 **26B-1-427 (Effective 05/06/26). Alcohol Abuse Tracking Committee --Tracking**
342 **effects of abuse of alcoholic products.**

343 (1) There is created a committee within the department known as the Alcohol Abuse
344 Tracking Committee that consists of:

345 (a) the executive director or the executive director's designee;

346 (b) the commissioner of the Department of Public Safety or the commissioner's designee;

347 (c) the director of the Department of Alcoholic Beverage Services or that director's
348 designee;

349 (d) the executive director of the Department of Workforce Services or that executive
350 director's designee;

351 (e) the chair of the [~~Utah Substance Use and Mental Health Advisory Committee~~] Utah
352 Behavioral Health Commission or the chair's designee;

353 (f) the state court administrator or the state court administrator's designee; and

354 (g) the director of the Division of Technology Services or that director's designee.

355 (2) The executive director or the executive director's designee shall chair the committee.

356 (3)(a) Four members of the committee constitute a quorum.

357 (b) A vote of the majority of the committee members present when a quorum is present
358 is an action of the committee.

359 (4) The committee shall meet at the call of the chair.

360 (5) The committee may adopt additional procedures or requirements for:

361 (a) voting, when there is a tie of the committee members;

362 (b) how meetings are to be called; and

363 (c) the frequency of meetings.

364 (6) The committee shall establish a process to collect for each calendar year the following
365 information:

366 (a) the number of individuals statewide who are convicted of, plead guilty to, plead no
367 contest to, plead guilty in a similar manner to, or resolve by diversion or its
368 equivalent to a violation related to underage drinking of alcohol;

- 369 (b) the number of individuals statewide who are convicted of, plead guilty to, plead no
 370 contest to, plead guilty in a similar manner to, or resolve by diversion or its
 371 equivalent to a violation related to driving under the influence of alcohol;
 372 (c) the number of violations statewide of Title 32B, Alcoholic Beverage Control Act,
 373 related to over-serving or over-consumption of an alcoholic product;
 374 (d) the cost of social services provided by the state related to abuse of alcohol, including
 375 services provided by the Division of Child and Family Services;
 376 (e) the location where the alcoholic products that result in the violations or costs
 377 described in Subsections (6)(a) through (d) are obtained; and
 378 (f) any information the committee determines can be collected and relates to the abuse of
 379 alcoholic products.

380 Section 5. Section **26B-1-428** is amended to read:

381 **26B-1-428 (Effective 05/06/26) (Repealed 07/01/30). Youth Electronic Cigarette,**
 382 **Marijuana, and Other Drug Prevention Committee and Program -- Creation --**
 383 **Membership -- Duties.**

384 (1) As used in this section:

- 385 (a) "Committee" means the Youth Electronic Cigarette, Marijuana, and Other Drug
 386 Prevention Committee created in Section 26B-1-204.
 387 (b) "Program" means the Youth Electronic Cigarette, Marijuana, and Other Drug
 388 Prevention Program created in this section.

389 (2)(a) There is created within the department the Youth Electronic Cigarette, Marijuana,
 390 and Other Drug Prevention Program.

391 (b) In consultation with the committee, the department shall:

- 392 (i) establish guidelines for the use of funds appropriated to the program under
 393 Subsection 59-14-807(3)(a)(vi);
 394 (ii) ensure that guidelines developed under Subsection (2)(b)(i) are evidence-based
 395 and appropriate for the population targeted by the program; and
 396 (iii) subject to appropriations from the Legislature under Subsection
 397 59-14-807(3)(a)(vi), fund statewide initiatives to prevent use of electronic
 398 cigarettes, nicotine products, marijuana, and other drugs by youth.

399 (3)(a) The committee shall:

400 (i) advise the department on:

- 401 (A) preventing use of electronic cigarettes, marijuana, and other drugs by youth in
 402 the state;

- 403 (B) developing the guidelines described in Subsection (2)(b)(i); and
404 (C) implementing the provisions of the program; and
405 (ii) meet quarterly or more frequently as determined necessary by the department's
406 designee under Subsection (3)(c)(ii).
- 407 (b) The executive director shall:
- 408 (i) appoint members of the committee; and
409 (ii) consult with the [~~Utah Substance Use and Mental Health Advisory Committee~~]
410 Utah Behavioral Health Commission created in Section [~~26B-5-801~~] 26B-5-702
411 when making the appointments under Subsection (3)(b)(i).
- 412 (c) The committee shall include, at a minimum:
- 413 (i) the executive director of a local health department as defined in Section 26A-1-102,
414 or the local health department executive director's designee;
415 (ii) one designee from the department;
416 (iii) one representative from the Department of Public Safety;
417 (iv) one representative from the behavioral health community; and
418 (v) one representative from the education community.
- 419 (d) A member of the committee may not receive compensation or benefits for the
420 member's service on the committee, but may receive per diem and travel expenses in
421 accordance with:
- 422 (i) Section 63A-3-106;
423 (ii) Section 63A-3-107; and
424 (iii) rules made by the Division of Finance under Sections 63A-3-106 and 63A-3-107.
- 425 (e) The department shall provide staff support to the committee.
- 426 (4) On or before October 31 of each year, the department shall report to:
- 427 (a) the Health and Human Services Interim Committee regarding:
- 428 (i) the use of funds appropriated to the program;
429 (ii) the impact and results of the program, including the effectiveness of each
430 program funded under Subsection (2)(b)(iii), during the previous fiscal year;
431 (iii) a summary of the impacts and results on reducing youth use of electronic
432 cigarettes and nicotine products by entities represented by members of the
433 committee, including those entities who receive funding through the Electronic
434 Cigarette Substance and Nicotine Product Proceeds Restricted Account created in
435 Section 59-14-807; and
436 (iv) any recommendations for legislation; and

- 437 (b) the [~~Utah Substance Use and Mental Health Advisory Committee~~] Utah Behavioral
 438 Health Commission created in Section [~~26B-5-801~~] 26B-5-702, regarding:
 439 (i) the effectiveness of each program funded under Subsection (2)(b)(iii) in
 440 preventing youth use of electronic cigarettes, nicotine products, marijuana, and
 441 other drugs; and
 442 (ii) any collaborative efforts and partnerships established by the program with public
 443 and private entities to prevent youth use of electronic cigarettes, marijuana, and
 444 other drugs.

445 Section 6. Section **26B-2-135** is amended to read:

446 **26B-2-135 (Effective 05/06/26). Licensing behavioral health receiving centers.**

447 (1) As used in this section:

- 448 (a) "Diversion" means referral to a licensed center by a law enforcement agency, a law
 449 enforcement officer, or by court order, including:
 450 (i) under the terms of a diversion agreement described in Section 77-2-5;
 451 (ii) voluntary referral as described in Section 26B-5-121;
 452 (iii) as an alternative to penalties for a violation of probation or parole; or
 453 (iv) any other court ordered or law enforcement facilitated alternative to criminal
 454 penalties.
 455 (b) "Diversion contact" means the prosecuting attorney that is a party to a diversion
 456 agreement or the law enforcement agency or officer that facilitates the diversion.
 457 (c) "Justice involved individual" means an individual who enters a treatment program
 458 through diversion.
 459 (d) "Licensed center" means a behavioral health receiving center licensed under this part.
 460 (e) "Local mental health authority" means a local mental health authority described in
 461 Section 17-77-301.
 462 (f) "Responsible law enforcement agency" means the law enforcement agency that
 463 employs a law enforcement officer that facilitates an individual's connection with a
 464 licensed center as described in Section 26B-5-121.
 465 (g) "Treatment program" means a licensed center's program for providing mental health
 466 services to an individual experiencing a mental health crisis.

467 (2) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, and
 468 Section 63J-1-504, the office:

- 469 [(1)] (a) shall [~~adopt~~] make and enforce rules to establish the process for initial and
 470 renewal applications to operate a behavioral health receiving center;

471 [(2)] (b) may assess and collect application and renewal fees for behavioral health
472 receiving center licenses; and

473 [(3)] (c) shall deposit any fees collected under Subsection [(2)] (2)(b) into the General
474 Fund as a dedicated credit to be used solely to pay for or offset the office's costs
475 incurred in performing the duties under this section.

476 (d) shall make rules that:

477 (i) identify circumstances under which a licensed center shall notify a responsible law
478 enforcement agency or diversion contacts of a justice involved individual's status
479 in a treatment program, including to provide notification:

480 (A) of treatment recommendations for the justice involved individual;
481 (B) if the justice involved individual is actively participating in the treatment
482 program;

483 (C) if the justice involved individual is resisting participation in the treatment
484 program;

485 (D) if applicable, if the justice involved individual violates the terms of diversion
486 agreement related to the justice involved individual's participation in the
487 treatment program;

488 (E) within 24 hours after the justice involved individual leaves the treatment
489 program, if the justice involved individual leaves the treatment program against
490 the licensed center's advice; and

491 (F) if applicable, of the name of the health care provider to whom the licensed
492 center referred the justice involved individual for further treatment; and

493 (ii) require a licensed center to adopt a policy to implement the notification
494 requirements described in Subsection (2)(d)(i).

495 (3)(a) Rules the office makes in accordance with Subsection (2)(d) may not require the
496 licensed center to notify a responsible law enforcement agency or diversion contact
497 of the status of a justice involved individual after the licensed center has referred the
498 justice involved individual to another health care provider.

499 (b) The office shall make the rules described in this Subsection (2) in coordination with
500 licensed centers, local mental health authorities, law enforcement agencies, and
501 diversion contacts.

502 Section 7. Section **26B-4-1103** is enacted to read:

503 **26B-4-1103 (Effective 05/06/26). Mental health and substance use disorder**
504 **screening -- Study -- Recommendations -- Report.**

- 505 (1) As used in this section:
- 506 (a) "Commission" means the State Commission on Criminal and Juvenile Justice created
- 507 in Section 63M-7-201.
- 508 (b) "Screening tool" means the evidence-based screening tool to screen an inmate for
- 509 substance use disorders described in Subsection 17-72-501(2)(e).
- 510 (2)(a) In collaboration with the commission, the department shall provide a list of
- 511 screening tools.
- 512 (b) The department shall ensure that a recommended screening tool described in
- 513 Subsection (2)(a) is:
- 514 (i) evidence-based, standardized, and validated; and
- 515 (ii) able to screen for substance use and mental health disorders and risk of substance
- 516 use and mental health disorders.

517 Section 8. Section **26B-4-1104** is enacted to read:

518 **26B-4-1104 (Effective 05/06/26). Mental health and substance use disorder**

519 **disclosure -- Standard form --Consent -- Sharing.**

- 520 (1) As used in this section:
- 521 (a) "Commission" means the State Commission on Criminal and Juvenile Justice created
- 522 in Section 63M-7-201.
- 523 (b) "County pretrial and probation services" means a county-provided probation services
- 524 as described in Section 17-72-601.
- 525 (c) "Defendant" means an individual who has been charged with a criminal offense, or
- 526 been convicted of, or entered into a plea disposition for, criminal conduct.
- 527 (d) "Division of Adult Probation and Parole" means the Division of Adult Probation and
- 528 Parole created in Section 64-14-202.
- 529 (e) "First responder" means the same as that term is defined in Section 26B-5-121.
- 530 (f) "Health care provider" means the same as that term is defined in Section 78B-3-403.
- 531 (g) "HIPAA" means the Health Insurance Portability and Accountability Act of 1996,
- 532 Pub. L. No. 104-191, 110 Stat. 1936, as amended.
- 533 (h) "Parolee" means an individual on parole under the supervision of the Division of
- 534 Adult Probation and Parole.
- 535 (i) "Probationer" means an individual on probation under the supervision of the Division
- 536 of Adult Probation and Parole or county pretrial and probation services.
- 537 (2) Before December 31, 2026, the department shall create a standard form that:
- 538 (a) is compliant with HIPAA and 42 C.F.R. Part 2; and

539 (b) a defendant, an inmate, a parolee, or a probationer may use to consent to the
540 disclosure of the individual's mental health disorder or substance use disorder
541 diagnosis to:
542 (i) health care providers;
543 (ii) first responders;
544 (iii) the courts;
545 (iv) the Division of Adult Probation and Parole;
546 (v) county pretrial and probation services;
547 (vi) local mental health authorities; or
548 (vii) other persons the department, in consultation with the commission, identifies in
549 rules made in accordance with Subsection (5).

550 (3) The form described in Subsection (2) shall:

551 (a) include fields for the inmate's name, date of birth, signature, and date of signature;
552 (b) identify each person described in Subsection (2)(b) to whom the individual's
553 diagnosis information will be disclosed;
554 (c) describe the circumstances under which the individual's diagnosis information will
555 be disclosed; and
556 (d) identify the duration of time that the consent to disclosure is valid.

557 (4) The department shall make the form available for use by health care providers, first
558 responders, courts, and the Division of Adult Probation and Parole.

559 (5) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
560 department, in consultation with the commission, shall make rules to:

561 (a) define and restrict a person's access to the information disclosed in the form, which
562 shall be based on:
563 (i) the person's need to access the information to provide treatment or services to an
564 individual;
565 (ii) the person's contact with the individual;
566 (iii) the individual's consent; and
567 (iv) applicable law; and
568 (b) identify additional persons for inclusion on the disclosure form as described in
569 Subsection (2)(b)(vi).

570 Section 9. Section **26B-5-121** is amended to read:

571 **26B-5-121 (Effective 05/06/26). Voluntary referrals to substance use and mental**
572 **health services by first responders -- Immunity from liability -- Reporting -- Rulemaking.**

- 573 (1) As used in this section:
- 574 (a) "First responder" means:
- 575 (i) a law enforcement officer, as that term is defined in Section 53-13-103;
- 576 (ii) emergency medical service personnel, as that term is defined in Section 53-2d-101;
- 577 (iii) an emergency medical technician, as that term is defined in Section 53-2e-101;
- 578 (iv) an advanced emergency medical technician, as that term is defined in Section
- 579 53-2e-101;
- 580 (v) a firefighter, as that term is defined in Section 53H-11-306; or
- 581 (vi) a dispatcher, as that term is defined in Section 53-6-102.
- 582 (b) "Local services list" means a comprehensive list of local substance use or mental
- 583 health services, as described in Subsections 17-77-201(5)(b)(iii) and 17-77-301(5)(c).
- 584 (2) As and when appropriate, a first responder is encouraged to offer a referral to substance
- 585 use or mental health services to an individual who experiences an intentional or
- 586 accidental overdose.
- 587 (3) If an individual expresses interest in substance use or mental health services, a first
- 588 responder may, as appropriate:
- 589 (a) facilitate a real-time connection with an appropriate local service provider;
- 590 (b) contact the statewide 988 crisis line for assistance; or
- 591 (c) if the individual does not wish to speak with a service provider at that time, provide
- 592 the individual with a physical copy or electronic copy of a local services list.
- 593 (4)(a) This section does not create a duty for a first responder to offer or provide a
- 594 referral to substance use or mental health services.
- 595 (b) A first responder and an employer of a first responder are not liable under this
- 596 section for a first responder's action or failure to act in regards to offering or
- 597 providing a referral to substance use or mental health services as described in this
- 598 section.
- 599 (c) This section does not affect any privilege or immunity from liability, exemption from
- 600 law, ordinance, or rule, or any other benefit that applies to a first responder or an
- 601 employer of a first responder.
- 602 (5)(a) If a first responder offers a referral to substance use or mental health services as
- 603 described in this section, the first responder's employer shall report annually to the
- 604 division the total number of individuals who accepted a referral from all first
- 605 responders employed by the employer.
- 606 (b) The division shall make rules, in accordance with Title 63G, Chapter 3, Utah

607 Administrative Rulemaking Act, specifying how the reports required by Subsection
608 (5)(a) shall be submitted.

609 Section 10. Section **26B-5-122** is enacted to read:

610 **26B-5-122 (Effective 05/06/26). Community-based peer support services grant**
611 **program.**

612 (1) As used in this section:

613 (a) "Commission" means the Utah Behavioral Health Commission created in Section
614 26B-5-702.

615 (b) "Peer support services" means non-clinical, low-barrier, community-based support to
616 individuals recovering from mental health or substance use disorders, delivered by
617 individuals with similar lived experiences.

618 (c) "Recovery support organization" means a community-based organization that
619 provides peer support services.

620 (2) Subject to appropriations from the Legislature for this purpose, in consultation with the
621 commission and in accordance with the requirements of this section, the division shall
622 award grants to recovery support organizations to provide peer support services.

623 (3) The division shall prioritize the award of a grant described in Subsection (2) based on
624 the extent to which providing the grant to the applicant will increase the provision of
625 peer support services in areas with frequent mental health or behavioral health provider
626 shortages.

627 (4) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
628 division, in consultation with the commission, shall make rules, for the application and
629 award of a grant described in Subsection (2).

630 Section 11. Section **26B-5-306** is amended to read:

631 **26B-5-306 (Effective 05/06/26). Objectives of state hospital and other facilities --**
632 **Individuals who may be admitted to state hospital.**

633 (1)(a) As used in this section "neurological disorder" means the same as that term is
634 defined in the current edition of the Diagnostic and Statistical Manual of Mental
635 Disorders published by the American Psychiatric Association.

636 (b) "Neurological disorder" includes a neurocognitive disorder as that term is defined in
637 the current edition of the Diagnostic and Statistical Manual of Mental Disorders
638 published by the American Psychiatric Association.

639 (2) The objectives of the state hospital and other mental health facilities [~~shall be~~] are to:

640 (a) care for all [~~persons~~] individuals within this state who are subject to the provisions of

641 this chapter; and

642 (b) ~~[to]~~furnish ~~[them]~~ the individuals with the proper attendance, medical treatment,
643 seclusion, rest, restraint, amusement, occupation, and support that is conducive to [
644 ~~their]~~ the individuals' physical and mental well-being.

645 ~~[(2)]~~ (3) Only the following ~~[persons]~~ individuals may be admitted to the state hospital:

646 (a) ~~[persons]~~ an individual who is 18 years old ~~[and]~~ or older who ~~[meet]~~ meets the criteria
647 necessary for commitment under this part and who ~~[have]~~ has a severe mental [
648 ~~disorders]~~ disorder or severe neurological disorder for whom no appropriate, less
649 restrictive treatment alternative is available;

650 (b) ~~[persons]~~ an individual who is under 18 years old who ~~[meet]~~ meets the criteria
651 necessary for commitment under Part 4, Commitment of Persons under Age 18, and
652 for whom no less restrictive alternative is available;

653 (c) ~~[persons]~~ an individual who is adjudicated and found to be guilty with a mental
654 condition under Title 77, Chapter 16a, Commitment and Treatment of Individuals
655 with a Mental Condition;

656 (d) ~~[persons]~~ an individual who is adjudicated and found to be not guilty by reason of
657 insanity who ~~[are]~~ is under a subsequent commitment order because ~~[they have]~~ the
658 individual has a mental illness and ~~[are]~~ is a danger to ~~[themselves]~~ self or others,
659 under Section 77-16a-302;

660 (e) ~~[persons]~~ an individual who is found incompetent to proceed under Section 77-15-6;

661 (f) ~~[persons who require]~~ an individual who requires an examination under Title 77, Utah
662 Code of Criminal Procedure; and

663 (g) ~~[persons]~~ an individual who is in the custody of the Department of Corrections,
664 admitted in accordance with Section 26B-5-372, giving priority to those ~~[persons]~~
665 individuals with severe mental disorders.

666 Section 12. Section **26B-5-326** is amended to read:

667 **26B-5-326 (Effective 05/06/26). Allocation of state hospital beds -- Formula.**

668 (1) As used in this section:

669 (a) "Adult beds" means the total number of patient beds located in the adult general
670 psychiatric unit and the geriatric unit at the state hospital, as determined by the
671 superintendent of the state hospital.

672 (b) "Mental health catchment area" means a county or group of counties governed by a
673 local mental health authority.

674 (2)(a) The division shall establish by rule a formula to separately allocate to local mental

675 health authorities adult beds for persons who meet the requirements of Subsection [
 676 26B-5-306(2)(a)] 26B-5-306(3)(a). Beginning on May 10, 2011, and ending on June
 677 30, 2011, 152 beds shall be allocated to local mental health authorities under this
 678 section.

679 (b) The number of beds shall be reviewed and adjusted as necessary:

680 (i) on July 1, 2011, to restore the number of beds allocated to 212 beds as funding
 681 permits; and

682 (ii) on July 1, 2011, and every three years after July 1, 2011, according to the state's
 683 population.

684 (c) All population figures utilized shall reflect the most recent available population
 685 estimates from the Utah Population Committee.

686 (3) The formula established under Subsection (2) shall provide for allocation of beds based
 687 on:

688 (a) the percentage of the state's adult population located within a mental health
 689 catchment area; and

690 (b) a differential to compensate for the additional demand for hospital beds in mental
 691 health catchment areas that are located in urban areas.

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

694 (5) The division shall allocate adult beds at the state hospital to local mental health
 695 authorities for their use in accordance with the formula established under this section. If
 696 a local mental health authority is unable to access a bed allocated to it under the formula
 697 established under Subsection (2), the division shall provide that local mental health
 698 authority with funding equal to the reasonable, average daily cost of an acute care bed
 699 purchased by the local mental health authority.

700 (6) The board shall periodically review and make changes in the formula established under
 701 Subsection (2) as necessary to accurately reflect changes in population.

702 Section 13. Section **26B-5-331** is amended to read:

703 **26B-5-331 (Effective 05/06/26). Temporary commitment -- Requirements and**
 704 **procedures -- Rights.**

705 (1) An adult shall be temporarily, involuntarily committed to a local mental health authority
 706 upon:

707 (a) a written application that:

708 (i) is completed by a responsible individual who has reason to know, stating a belief

- 709 that the adult, due to mental illness, is likely to pose substantial danger to self or
710 others if not restrained and stating the personal knowledge of the adult's condition
711 or circumstances that lead to the individual's belief; and
- 712 (ii) includes a certification by a licensed physician, licensed physician assistant,
713 licensed nurse practitioner, or designated examiner stating that the physician,
714 physician assistant, nurse practitioner, or designated examiner has examined the
715 adult within a three-day period immediately preceding the certification, and that
716 the physician, physician assistant, nurse practitioner, or designated examiner is of
717 the opinion that, due to mental illness, the adult poses a substantial danger to self
718 or others; or
- 719 (b) a peace officer or a mental health officer:
- 720 (i) observing an adult's conduct that gives the peace officer or mental health officer
721 probable cause to believe that:
- 722 (A) the adult has a mental illness; and
723 (B) because of the adult's mental illness and conduct, the adult poses a substantial
724 danger to self or others; and
- 725 (ii) completing a temporary commitment application that:
- 726 (A) is on a form prescribed by the division;
727 (B) states the peace officer's or mental health officer's belief that the adult poses a
728 substantial danger to self or others;
729 (C) states the specific nature of the danger;
730 (D) provides a summary of the observations upon which the statement of danger is
731 based; and
732 (E) provides a statement of the facts that called the adult to the peace officer's or
733 mental health officer's attention.
- 734 (2) If at any time a patient committed under this section no longer meets the commitment
735 criteria described in Subsection (1), the local mental health authority's designee shall:
- 736 (a) document the change and release the patient; and
737 (b) if the patient was admitted under Subsection (1)(b), notify the local mental health
738 authority of the patient's release if deemed appropriate by a licensed health care
739 provider or if the patient consents to the information being shared.
- 740 (3) A patient committed under this section may be held for a maximum of 72 hours after
741 commitment, excluding Saturdays, Sundays, and state holidays, unless:
- 742 (a) as described in Section 26B-5-332, an application for involuntary commitment is

- 743 commenced, which may be accompanied by an order of detention described in
744 Subsection 26B-5-332(4); or
- 745 (b) the patient makes a voluntary application for admission.
- 746 (4) Upon a written application described in Subsection (1)(a) or the observation and belief
747 described in Subsection (1)(b)(i), the adult shall be:
- 748 (a) taken into a peace officer's protective custody, by reasonable means, if necessary for
749 public safety; and
- 750 (b) transported for temporary commitment to a facility designated by the local mental
751 health authority, by means of:
- 752 (i) an ambulance, if the adult meets any of the criteria described in Section 53-2d-405;
753 (ii) an ambulance, if a peace officer is not necessary for public safety, and
754 transportation arrangements are made by a physician, physician assistant, nurse
755 practitioner, designated examiner, or mental health officer;
- 756 (iii) the city, town, or municipal law enforcement authority with jurisdiction over the
757 location where the adult is present, if the adult is not transported by ambulance;
- 758 (iv) the county sheriff, if the designated facility is outside of the jurisdiction of the
759 law enforcement authority described in Subsection (4)(b)(iii) and the adult is not
760 transported by ambulance; or
- 761 (v) nonemergency secured behavioral health transport as that term is defined in
762 Section 53-2d-101.
- 763 (5) Notwithstanding Subsection (4):
- 764 (a) an individual shall be transported by ambulance to an appropriate medical facility for
765 treatment if the individual requires physical medical attention;
- 766 (b) if an officer has probable cause to believe, based on the officer's experience and
767 de-escalation training that taking an individual into protective custody or transporting
768 an individual for temporary commitment would increase the risk of substantial
769 danger to the individual or others, a peace officer may exercise discretion to not take
770 the individual into custody or transport the individual, as permitted by policies and
771 procedures established by the officer's law enforcement agency and any applicable
772 federal or state statute, or case law; and
- 773 (c) if an officer exercises discretion under Subsection (4)(b) to not take an individual
774 into protective custody or transport an individual, the officer shall document in the
775 officer's report the details and circumstances that led to the officer's decision.
- 776 (6)(a) The local mental health authority or the local mental health authority's designee

- 777 shall inform an adult patient committed under this section of the reason for
778 commitment.
- 779 (b) An adult patient committed under this section has the right to:
- 780 (i) within three hours after arrival at the local mental health authority, make a
781 telephone call, at the expense of the local mental health authority, to an individual
782 of the patient's choice; and
- 783 (ii) see and communicate with an attorney.
- 784 (7)(a) Title 63G, Chapter 7, Governmental Immunity Act of Utah, applies to this section.
- 785 (b) This section does not create a special duty of care.
- 786 (8)(a) A local mental health authority or the local mental health authority's designee
787 shall provide discharge instructions to each individual committed under this section
788 at or before the time the individual is discharged from the local mental health
789 authority's custody, regardless of whether the individual is discharged by being
790 released, taken into a peace officer's protective custody, transported to a medical
791 facility or other facility, or other circumstances.
- 792 (b) Discharge instructions provided under Subsection (8)(a) shall include:
- 793 (i) a safety plan for the individual based on the individual's mental illness or mental
794 or emotional state, if applicable;
- 795 (ii) notification to the individual's primary care provider, if applicable;
- 796 (iii) if the individual is discharged without food, housing, or economic security, a
797 referral to appropriate services, if such services exist in the individual's
798 community;
- 799 (iv) the phone number to call or text for a crisis services hotline, and information
800 about the availability of peer support services;
- 801 (v) a copy of any psychiatric advance directive, if applicable;
- 802 (vi) information about how to establish a psychiatric advance directive if one has not
803 been completed;
- 804 (vii) as applicable, information about medications that were changed or discontinued
805 during the commitment;
- 806 (viii) information about how to contact the local mental health authority if needed;
807 and
- 808 (ix) information about how to request a copy of the individual's medical record and
809 how to access the electronic patient portal for the individual's medical record.
- 810 (c) If an individual's medications were changed, or if an individual was prescribed new

- 811 medications while committed under this section, discharge instructions provided
 812 under Subsection (8)(a) shall include a clinically appropriate supply of medications,
 813 as determined by a licensed health care provider, to allow the individual time to
 814 access another health care provider or follow-up appointment.
- 815 (d) Discharge instructions shall be provided in paper or electronic format based on the
 816 individual's preference.
- 817 (e) If an individual refuses to accept discharge instructions, the local mental health
 818 authority or the local mental health authority's designee shall document the refusal in
 819 the individual's medical record.
- 820 (f) If an individual's discharge instructions include referrals to services under Subsection
 821 (8)(b)(iii), the local mental health authority or the local mental health authority's
 822 designee shall document those referrals in the individual's medical record.
- 823 (g) The local mental health authority shall attempt to follow up with a discharged
 824 individual at least 48 hours after discharge, when appropriate, and may use peer
 825 support professionals when performing follow-up care or developing a continuing
 826 care plan.

827 Section 14. Section **26B-5-332** is amended to read:

828 **26B-5-332 (Effective 05/06/26). Involuntary commitment under court --**
 829 **Examination -- Hearing -- Power of court -- Findings required -- Costs.**

- 830 (1) A responsible individual who has credible knowledge of an adult's mental illness and
 831 the condition or circumstances that have led to the adult's need to be involuntarily
 832 committed may initiate an involuntary commitment court proceeding by filing, in the
 833 court in the county where the proposed patient resides or is found, a written application
 834 that includes:
- 835 (a) unless the court finds that the information is not reasonably available, the proposed
 836 patient's:
- 837 (i) name;
- 838 (ii) date of birth; and
- 839 (iii) social security number;
- 840 (b)(i) a certificate of a licensed physician or a designated examiner stating that within
 841 the seven-day period immediately preceding the certification, the physician or
 842 designated examiner examined the proposed patient and is of the opinion that the
 843 proposed patient has a mental illness and should be involuntarily committed; or
 844 (ii) a written statement by the applicant that:

- 845 (A) the proposed patient has been requested to, but has refused to, submit to an
846 examination of mental condition by a licensed physician or designated
847 examiner;
- 848 (B) is sworn to under oath; and
- 849 (C) states the facts upon which the application is based; and
- 850 (c) a statement whether the proposed patient has previously been under an assisted
851 outpatient treatment order, if known by the applicant.
- 852 (2) Before issuing a judicial order, the court:
- 853 (a) shall require the applicant to consult with the appropriate local mental health
854 authority at or before the hearing; and
- 855 (b) may direct a mental health professional from the local mental health authority to
856 interview the applicant and the proposed patient to determine the existing facts and
857 report the existing facts to the court.
- 858 (3) The court may issue an order, directed to a mental health officer or peace officer, to
859 immediately place a proposed patient in the custody of a local mental health authority or
860 in a temporary emergency facility, as described in Section 26B-5-334, to be detained for
861 the purpose of examination if:
- 862 (a) the court finds from the application, any other statements under oath, or any reports
863 from a mental health professional that there is a reasonable basis to believe that the
864 proposed patient has a mental illness that poses a danger to self or others and requires
865 involuntary commitment pending examination and hearing; or
- 866 (b) the proposed patient refuses to submit to an interview with a mental health
867 professional as directed by the court or to go to a treatment facility voluntarily.
- 868 (4)(a) The court shall provide notice of commencement of proceedings for involuntary
869 commitment, setting forth the allegations of the application and any reported facts,
870 together with a copy of any official order of detention, to a proposed patient before,
871 or upon, placement of the proposed patient in the custody of a local mental health
872 authority or, with respect to any proposed patient presently in the custody of a local
873 mental health authority whose status is being changed from voluntary to involuntary,
874 upon the filing of an application for that purpose with the court.
- 875 (b) The place of detention shall maintain a copy of the order of detention.
- 876 (5)(a) The court shall provide notice of commencement of proceedings for involuntary
877 commitment as soon as practicable to the applicant, any legal guardian, any
878 immediate adult family members, legal counsel for the parties involved, the local

- 879 mental health authority or the local mental health authority's designee, and any other
880 persons whom the proposed patient or the court designates.
- 881 (b) Except as provided in Subsection (5)(c), the notice under Subsection (5)(a) shall
882 advise the persons that a hearing may be held within the time provided by law.
- 883 (c) If the proposed patient refuses to permit release of information necessary for
884 provisions of notice under this subsection, the court shall determine the extent of
885 notice.
- 886 (6) Proceedings for commitment of an individual under 18 years old to a local mental health
887 authority may be commenced in accordance with Part 4, Commitment of Persons Under
888 Age 18.
- 889 (7)(a) The court may, in the court's discretion, transfer the case to any other district court
890 within this state, if the transfer will not be adverse to the interest of the proposed
891 patient.
- 892 (b) If a case is transferred under Subsection (7)(a), the parties to the case may be
893 transferred and the local mental health authority may be substituted in accordance
894 with Utah Rules of Civil Procedure, Rule 25.
- 895 (8) Within 24 hours, excluding Saturdays, Sundays, and legal holidays, of the issuance of a
896 judicial order, or after commitment of a proposed patient to a local mental health
897 authority or the local mental health authority's designee under court order for detention
898 or examination, the court shall appoint two designated examiners:
- 899 (a) who did not sign the civil commitment application nor the civil commitment
900 certification under Subsection (1);
- 901 (b) one of whom is:
- 902 (i) a licensed physician; or
- 903 (ii) a psychiatric mental health nurse practitioner or a psychiatric mental health
904 clinical nurse specialist who:
- 905 (A) is nationally certified;
- 906 (B) is doctorally trained; and
- 907 (C) has at least two years of inpatient mental health experience, regardless of the
908 license the individual held at the time of that experience; and
- 909 (c) one of whom may be designated by the proposed patient or the proposed patient's
910 counsel, if that designated examiner is reasonably available.
- 911 (9) The court shall schedule a hearing to be held within 10 calendar days after the day on
912 which the designated examiners are appointed.

- 913 (10)(a) The designated examiners shall conduct the examinations separately.
- 914 (b) The designated examiners shall conduct the examinations:
- 915 (i) through telehealth unless the designated examiner determines that:
- 916 (A) a telehealth examination would not be sufficient to properly assess the
- 917 proposed patient;
- 918 (B) a telehealth examination would have a harmful effect on the proposed patient's
- 919 health; or
- 920 (C) an in-person examination can be conducted as effectively, conveniently, and
- 921 timely as an examination through telehealth; and
- 922 (ii) if the designated examiner determines, pursuant to Subsection (10)(b)(i), that the
- 923 examination should be conducted in person, at the home of the proposed patient,
- 924 at a hospital or other medical facility, or at any other suitable place that is not
- 925 likely to have a harmful effect on the proposed patient's health.
- 926 (c) The designated examiners shall inform the proposed patient, if not represented by an
- 927 attorney:
- 928 (i) that the proposed patient does not have to say anything;
- 929 (ii) of the nature and reasons for the examination;
- 930 (iii) that the examination was ordered by the court;
- 931 (iv) that any information volunteered could form part of the basis for the proposed
- 932 patient's involuntary commitment;
- 933 (v) that findings resulting from the examination will be made available to the court;
- 934 and
- 935 (vi) that the designated examiner may, under court order, obtain the proposed
- 936 patient's mental health records.
- 937 (d) Within 24 hours of examining the proposed patient, a designated examiner shall
- 938 report to the court, orally or in writing, whether the proposed patient is mentally ill,
- 939 has agreed to voluntary commitment, as described in Section 26B-5-360, or has
- 940 acceptable programs available to the proposed patient without court proceedings.
- 941 (e) If a designated examiner reports orally under Subsection (10)(d), the designated
- 942 examiner shall immediately send a written report to the clerk of the court.
- 943 (11) If a designated examiner is unable to complete an examination on the first attempt
- 944 because the proposed patient refuses to submit to the examination, the court shall fix a
- 945 reasonable compensation to be paid to the examiner.
- 946 (12) If the local mental health authority, the local mental health authority's designee, or a

947 medical examiner determines before the court hearing that the conditions justifying the
948 findings leading to a commitment hearing no longer exist, the local mental health
949 authority, the local mental health authority's designee, or the medical examiner shall
950 immediately report the determination to the court.

951 (13)(a) The court shall terminate the proceedings and dismiss the application before the
952 hearing if both designated examiners inform the court that the proposed patient does
953 not meet the criteria in Subsection (16).

954 (b) The court may terminate the proceedings and dismiss the application at any time,
955 including before the hearing, if the designated examiners or the local mental health
956 authority or the local mental health authority's designee informs the court that the
957 proposed patient:

958 (i) has agreed to voluntary commitment, as described in Section 26B-5-360;

959 (ii) has acceptable options for treatment programs that are available without court
960 proceedings; or

961 (iii) meets the criteria for assisted outpatient treatment described in Section
962 26B-5-351.

963 (14)(a) Before the hearing, the court shall provide the proposed patient an opportunity to
964 be represented by counsel, and if neither the proposed patient nor others provide
965 counsel, the court shall appoint counsel and allow counsel sufficient time to consult
966 with the proposed patient before the hearing.

967 (b) In the case of an indigent proposed patient, the county in which the proposed patient
968 resides or is found shall make payment of reasonable attorney fees for counsel, as
969 determined by the court.

970 (15)(a)(i) The court shall afford the proposed patient, the applicant, and any other
971 person to whom notice is required to be given an opportunity to appear at the
972 hearing, to testify, and to present and cross-examine witnesses.

973 (ii) The court may, in the court's discretion, receive the testimony of any other person.

974 (iii) The court may allow a waiver of the proposed patient's right to appear for good
975 cause, which cause shall be set forth in the record, or an informed waiver by the
976 patient, which shall be included in the record.

977 (b) The court is authorized to exclude any person not necessary for the conduct of the
978 proceedings and may, upon motion of counsel, require the testimony of each
979 designated examiner to be given out of the presence of any other designated
980 examiners.

- 981 (c) The court shall:
- 982 (i) conduct the hearing in as informal a manner as may be consistent with orderly
- 983 procedure; and
- 984 (ii) while preserving the due process rights of the proposed patient:
- 985 (A) conduct the hearing remotely, in accordance with Utah Rules of Civil
- 986 Procedure, Rule 87, unless the court finds good cause under Rule 87 not to
- 987 conduct the hearing remotely; or
- 988 (B) if the court finds good cause under Rule 87 not to conduct the hearing
- 989 remotely, conduct the hearing in a physical setting that is not likely to have a
- 990 harmful effect on the mental health of the proposed patient.
- 991 (d) The court shall consider any relevant historical and material information that is
- 992 offered, subject to the rules of evidence, including reliable hearsay under Utah Rules
- 993 of Evidence, Rule 1102.
- 994 (e)(i) A local mental health authority or the local mental health authority's designee
- 995 or the physician in charge of the proposed patient's care shall, at the time of the
- 996 hearing, provide the court with the following information:
- 997 (A) the detention order;
- 998 (B) admission notes;
- 999 (C) the diagnosis;
- 1000 (D) any doctors' orders;
- 1001 (E) progress notes;
- 1002 (F) nursing notes;
- 1003 (G) medication records pertaining to the current commitment; and
- 1004 (H) whether the proposed patient has previously been civilly committed or under
- 1005 an order for assisted outpatient treatment.
- 1006 (ii) The local mental health authority or the local mental health authority's designee
- 1007 or the physician in charge of the proposed patient's care shall also supply the
- 1008 information described in Subsection (15)(e)(i) to the proposed patient's counsel at
- 1009 the time of the hearing, and at any time prior to the hearing upon request by the
- 1010 proposed patient's counsel.
- 1011 (16)(a) The court shall order commitment of an adult proposed patient to a local mental
- 1012 health authority if, upon completion of the hearing and consideration of the
- 1013 information presented, the court finds by clear and convincing evidence that:
- 1014 (i)(A) the proposed patient has a mental illness;

- 1015 (B) because of the proposed patient's mental illness the proposed patient poses a
1016 substantial danger to self or others;
- 1017 (C) the proposed patient lacks the ability to engage in a rational decision-making
1018 process regarding the acceptance of mental treatment as demonstrated by
1019 evidence of inability to weigh the possible risks of accepting or rejecting
1020 treatment;
- 1021 (D) there is no appropriate less-restrictive alternative to a court order of
1022 commitment; and
- 1023 (E) the local mental health authority can provide the proposed patient with
1024 treatment that is adequate and appropriate to the proposed patient's conditions
1025 and needs; or
- 1026 (ii)(A) the proposed patient has been charged with a criminal offense;
- 1027 (B) with respect to the charged offense, the proposed patient is found incompetent
1028 to proceed as a result of a mental illness;
- 1029 (C) the proposed patient has a mental illness;
- 1030 (D) the proposed patient has a persistent unawareness of their mental illness and
1031 the negative consequences of that illness, or within the preceding six months
1032 has been requested or ordered to undergo mental health treatment but has
1033 unreasonably refused to undergo that treatment;
- 1034 (E) there is no appropriate less-restrictive alternative to a court order of
1035 commitment; and
- 1036 (F) the local mental health authority can provide the proposed patient with
1037 treatment that is adequate and appropriate to the proposed patient's conditions
1038 and needs.
- 1039 (b)(i) If, at the hearing, the court determines that the proposed patient has a mental
1040 illness but does not meet the other criteria described in Subsection (16)(a), the
1041 court may consider whether the proposed patient meets the criteria for assisted
1042 outpatient treatment under Section 26B-5-351.
- 1043 (ii) The court may order the proposed patient to receive assisted outpatient treatment
1044 in accordance with Section 26B-5-351 if, at the hearing, the court finds the
1045 proposed patient meets the criteria for assisted outpatient treatment under Section
1046 26B-5-351.
- 1047 (iii) If the court determines that neither the criteria for commitment under Subsection
1048 (16)(a) nor the criteria for assisted outpatient treatment under Section 26B-5-351

1049 are met, the court shall dismiss the proceedings after the hearing.

1050 (17)(a)(i) The court shall immediately notify the appropriate local mental health
1051 authority and the division upon entry of an order of commitment, including an
1052 order to extend the patient's treatment period.

1053 [~~(i)~~] (ii) The order of commitment shall designate the period for which the patient
1054 shall be treated.

1055 [~~(ii)~~] (iii) If the patient is not under an order of commitment at the time of the hearing,
1056 the patient's treatment period may not exceed six months without a review hearing.

1057 [~~(iii)~~] (iv) Upon a review hearing, to be commenced before the expiration of the
1058 previous order of commitment, an order for commitment may be for an
1059 indeterminate period, if the court finds by clear and convincing evidence that the
1060 criteria described in Subsection (16) will last for an indeterminate period.

1061 (b)(i) The court shall maintain a current list of all patients under the court's order of
1062 commitment and review the list to determine those patients who have been under
1063 an order of commitment for the court designated period.

1064 (ii) At least two weeks before the expiration of the designated period of any order of
1065 commitment still in effect, the court that entered the original order of commitment
1066 shall inform the appropriate local mental health authority or the local mental
1067 health authority's designee of the expiration.

1068 (iii) Upon receipt of the information described in Subsection (17)(b)(ii), the local
1069 mental health authority or the local mental health authority's designee shall
1070 immediately reexamine the reasons upon which the order of commitment was
1071 based.

1072 (iv) If, after reexamination under Subsection (17)(b)(iii), the local mental health
1073 authority or the local mental health authority's designee determines that the
1074 conditions justifying commitment no longer exist, the local mental health
1075 authority or the local mental health authority's designee shall discharge the patient
1076 from involuntary commitment and immediately report the discharge to the court
1077 and the division.

1078 (v) If, after reexamination under Subsection (17)(b)(iii), the local mental health
1079 authority or the local mental health authority's designee determines that the
1080 conditions justifying commitment continue to exist, the court shall immediately
1081 appoint two designated examiners and proceed under Subsections (8) through (14).

1082 (c)(i) The local mental health authority or the local mental health authority's designee

- 1083 responsible for the care of a patient under an order of commitment for an
1084 indeterminate period shall, at six-month intervals, reexamine the reasons upon
1085 which the order of indeterminate commitment was based.
- 1086 (ii) If the local mental health authority or the local mental health authority's designee
1087 determines that the conditions justifying commitment no longer exist, the local
1088 mental health authority or the local mental health authority's designee shall
1089 discharge the patient from the local mental health authority's or the local mental
1090 health authority designee's custody and immediately report the discharge to the
1091 court and the division.
- 1092 (iii) If the local mental health authority or the local mental health authority's designee
1093 determines that the conditions justifying commitment continue to exist, the local
1094 mental health authority or the local mental health authority's designee shall send a
1095 written report of the findings to the court.
- 1096 (iv) The local mental health authority or the local mental health authority's designee
1097 shall notify the patient and the patient's counsel of record in writing that the
1098 involuntary commitment will be continued under Subsection (17)(c)(iii), the
1099 reasons for the decision to continue, and that the patient has the right to a review
1100 hearing by making a request to the court.
- 1101 (v) Upon receiving a request under Subsection (17)(c)(iv), the court shall
1102 immediately appoint two designated examiners and proceed under Subsections (8)
1103 through (14).
- 1104 (18)(a) Any patient committed as a result of an original hearing or a patient's legally
1105 designated representative who is aggrieved by the findings, conclusions, and order of
1106 the court entered in the original hearing has the right to a new hearing upon filing a
1107 petition with the court within 30 days after the day on which the court entered the
1108 order.
- 1109 (b) The petition shall allege error or mistake in the findings, in which case the court shall
1110 appoint three impartial designated examiners previously unrelated to the case to
1111 conduct an additional examination of the patient.
- 1112 (c) Except as provided in Subsection (18)(b), the court shall, in all other respects,
1113 conduct the new hearing in the manner otherwise permitted.
- 1114 (19) The county in which the proposed patient resides or is found shall pay the costs of all
1115 proceedings under this section.
- 1116 (20)(a) A local mental health authority or the local mental health authority's designee

- 1117 shall provide discharge instructions to each individual committed under this section
1118 at or before the time the individual is discharged from the local mental health
1119 authority's custody, regardless of the circumstances under which the individual is
1120 discharged.
- (b) Discharge instructions provided under Subsection (20)(a) shall include:
- 1122 (i) a safety plan for the individual based on the individual's mental illness or mental
1123 or emotional state, if applicable;
 - 1124 (ii) notification to the individual's primary care provider, if applicable;
 - 1125 (iii) if the individual is discharged without food, housing, or economic security, a
1126 referral to appropriate services, if such services exist in the individual's
1127 community;
 - 1128 (iv) the phone number to call or text for a crisis services hotline, and information
1129 about the availability of peer support services;
 - 1130 (v) a copy of any psychiatric advance directive, if applicable;
 - 1131 (vi) information about how to establish a psychiatric advance directive if one has not
1132 been completed;
 - 1133 (vii) as applicable, information about medications that were changed or discontinued
1134 during the commitment;
 - 1135 (viii) information about how to contact the local mental health authority or
1136 established provider as appropriate; and
 - 1137 (ix) information about how to request a copy of the individual's medical record and
1138 how to access the electronic patient portal for the individual's medical record.
- (c) If an individual's medications were changed, or if an individual was prescribed new
1139 medications while committed under this section, discharge instructions provided
1140 under Subsection (20)(a) shall include a clinically appropriate supply of medications,
1141 as determined by a licensed health care provider, to allow the individual time to
1142 access another health care provider or follow-up appointment.
- (d) Discharge instructions shall be provided in paper or electronic format based on the
1145 individual's preference.
- (e) If an individual refuses to accept discharge instructions, the local mental health
1147 authority shall document the refusal in the individual's medical record.
- (f) If an individual's discharge instructions include referrals to services under Subsection
1148 (20)(b)(iii), the local mental health authority shall document those referrals in the
1149 individual's medical record.
1150

1151 (g) The local mental health authority shall attempt to follow up with a discharged
1152 individual at least 48 hours after discharge, when appropriate, and may use peer
1153 support professionals when performing follow-up care or developing a continuing
1154 care plan.

1155 (21) If any provision of Subsection (16)(a)(ii) or the application of any provision of
1156 Subsection (16)(a)(ii) to any person or circumstance is held invalid by a court with
1157 jurisdiction, the remainder of Subsection (16)(a)(ii) shall be given effect without the
1158 invalid provision or application. The provisions of Subsection (16)(a)(ii) are severable.

1159 Section 15. Section **26B-5-351** is amended to read:

1160 **26B-5-351 (Effective 05/06/26). Assisted outpatient treatment proceedings.**

1161 (1) A responsible individual who has credible knowledge of an adult's mental illness and
1162 the condition or circumstances that have led to the adult's need for assisted outpatient
1163 treatment may file, in the court in the county where the proposed patient resides or is
1164 found, a written application that includes:

1165 (a) unless the court finds that the information is not reasonably available, the proposed
1166 patient's:

1167 (i) name;

1168 (ii) date of birth; and

1169 (iii) social security number; and

1170 (b)(i) a certificate of a licensed physician or a designated examiner stating that within
1171 the seven-day period immediately preceding the certification, the physician or
1172 designated examiner examined the proposed patient and is of the opinion that the
1173 proposed patient has a mental illness and should be involuntarily committed; or

1174 (ii) a written statement by the applicant that:

1175 (A) the proposed patient has been requested to, but has refused to, submit to an
1176 examination of mental condition by a licensed physician or designated
1177 examiner;

1178 (B) is sworn to under oath; and

1179 (C) states the facts upon which the application is based.

1180 (2)(a) Subject to Subsection (2)(b), before issuing a judicial order, the court may require
1181 the applicant to consult with the appropriate local mental health authority, and the
1182 court may direct a mental health professional from that local mental health authority
1183 to interview the applicant and the proposed patient to determine the existing facts and
1184 report them to the court.

- 1185 (b) The consultation described in Subsection (2)(a):
1186 (i) may take place at or before the hearing; and
1187 (ii) is required if the local mental health authority appears at the hearing.
- 1188 (3) If the proposed patient refuses to submit to an interview described in Subsection (2)(a)
1189 or an examination described in Subsection (8), the court may issue an order, directed to
1190 a mental health officer or peace officer, to immediately place the proposed patient into
1191 the custody of a local mental health authority or in a temporary emergency facility, as
1192 provided in Section 26B-5-334, to be detained for the purpose of examination.
- 1193 (4) Notice of commencement of proceedings for assisted outpatient treatment, setting forth
1194 the allegations of the application and any reported facts, together with a copy of any
1195 official order of detention, shall:
- 1196 (a) be provided by the court to a proposed patient before, or upon, placement into the
1197 custody of a local mental health authority or, with respect to any proposed patient
1198 presently in the custody of a local mental health authority;
- 1199 (b) be maintained at the proposed patient's place of detention, if any;
- 1200 (c) be provided by the court as soon as practicable to the applicant, any legal guardian,
1201 any immediate adult family members, legal counsel for the parties involved, the local
1202 mental health authority or its designee, and any other person whom the proposed
1203 patient or the court shall designate; and
- 1204 (d) advise that a hearing may be held within the time provided by law.
- 1205 (5) The court may, in its discretion, transfer the case to any other court within this state,
1206 provided that the transfer will not be adverse to the interest of the proposed patient.
- 1207 (6) Within 24 hours, excluding Saturdays, Sundays, and legal holidays, of the issuance of a
1208 judicial order, or after commitment of a proposed patient to a local mental health
1209 authority or its designee under court order for detention in order to complete an
1210 examination, the court shall appoint two designated examiners:
- 1211 (a) who did not sign the assisted outpatient treatment application nor the certification
1212 described in Subsection (1);
- 1213 (b) one of whom is a licensed physician; and
- 1214 (c) one of whom may be designated by the proposed patient or the proposed patient's
1215 counsel, if that designated examiner is reasonably available.
- 1216 (7) The court shall schedule a hearing to be held within 10 calendar days of the day on
1217 which the designated examiners are appointed.
- 1218 (8) The designated examiners shall:

- 1219 (a) conduct their examinations separately;
- 1220 (b) conduct the examinations at the home of the proposed patient, at a hospital or other
1221 medical facility, or at any other suitable place that is not likely to have a harmful
1222 effect on the proposed patient's health;
- 1223 (c) inform the proposed patient, if not represented by an attorney:
- 1224 (i) that the proposed patient does not have to say anything;
- 1225 (ii) of the nature and reasons for the examination;
- 1226 (iii) that the examination was ordered by the court;
- 1227 (iv) that any information volunteered could form part of the basis for the proposed
1228 patient to be ordered to receive assisted outpatient treatment; and
- 1229 (v) that findings resulting from the examination will be made available to the court;
1230 and
- 1231 (d) within 24 hours of examining the proposed patient, report to the court, orally or in
1232 writing, whether the proposed patient is mentally ill.
- 1233 (e) If the designated examiner reports orally under Subsection (8)(d), the designated
1234 examiner shall immediately send a written report to the clerk of the court.
- 1235 (9) If a designated examiner is unable to complete an examination on the first attempt
1236 because the proposed patient refuses to submit to the examination, the court shall fix a
1237 reasonable compensation to be paid to the examiner.
- 1238 (10) If the local mental health authority, its designee, or a medical examiner determines
1239 before the court hearing that the conditions justifying the findings leading to an assisted
1240 outpatient treatment hearing no longer exist, the local mental health authority, its
1241 designee, or the medical examiner shall immediately report that determination to the
1242 court.
- 1243 (11) The court may terminate the proceedings and dismiss the application at any time,
1244 including prior to the hearing, if the designated examiners or the local mental health
1245 authority or its designee informs the court that the proposed patient does not meet the
1246 criteria in Subsection (14).
- 1247 (12) Before the hearing, an opportunity to be represented by counsel shall be afforded to the
1248 proposed patient, and if neither the proposed patient nor others provide counsel, the
1249 court shall appoint counsel and allow counsel sufficient time to consult with the
1250 proposed patient before the hearing. In the case of an indigent proposed patient, the
1251 payment of reasonable attorney fees for counsel, as determined by the court, shall be
1252 made by the county in which the proposed patient resides or is found.

- 1253 (13)(a) All persons to whom notice is required to be given shall be afforded an
1254 opportunity to appear at the hearing, to testify, and to present and cross-examine
1255 witnesses. The court may, in its discretion, receive the testimony of any other
1256 individual. The court may allow a waiver of the proposed patient's right to appear for
1257 good cause, which cause shall be set forth in the record, or an informed waiver by the
1258 patient, which shall be included in the record.
- 1259 (b) The court is authorized to exclude all individuals not necessary for the conduct of the
1260 proceedings and may, upon motion of counsel, require the testimony of each
1261 examiner to be given out of the presence of any other examiners.
- 1262 (c) The hearing shall be conducted in as informal a manner as may be consistent with
1263 orderly procedure, and in a physical setting that is not likely to have a harmful effect
1264 on the mental health of the proposed patient.
- 1265 (d) The court shall consider all relevant historical and material information that is
1266 offered, subject to the rules of evidence, including reliable hearsay under Rule 1102,
1267 Utah Rules of Evidence.
- 1268 (e)(i) A local mental health authority or its designee, or the physician in charge of the
1269 proposed patient's care shall, at the time of the hearing, provide the court with the
1270 following information:
- 1271 (A) the detention order, if any;
 - 1272 (B) admission notes, if any;
 - 1273 (C) the diagnosis, if any;
 - 1274 (D) doctor's orders, if any;
 - 1275 (E) progress notes, if any;
 - 1276 (F) nursing notes, if any; and
 - 1277 (G) medication records, if any.
- 1278 (ii) The information described in Subsection (13)(e)(i) shall also be provided to the
1279 proposed patient's counsel:
- 1280 (A) at the time of the hearing; and
 - 1281 (B) at any time prior to the hearing, upon request.
- 1282 (14) The court shall order a proposed patient to assisted outpatient treatment if, upon
1283 completion of the hearing and consideration of the information presented, the court finds
1284 by clear and convincing evidence that:
- 1285 (a) the proposed patient has a mental illness;
 - 1286 (b) there is no appropriate less-restrictive alternative to a court order for assisted

- 1287 outpatient treatment; and
- 1288 (c)(i) the proposed patient lacks the ability to engage in a rational decision-making
- 1289 process regarding the acceptance of mental health treatment, as demonstrated by
- 1290 evidence of inability to weigh the possible risks of accepting or rejecting
- 1291 treatment; or
- 1292 (ii) the proposed patient needs assisted outpatient treatment in order to prevent
- 1293 relapse or deterioration that is likely to result in the proposed patient posing a
- 1294 substantial danger to self or others.
- 1295 (15) The court may order the applicant or a close relative of the patient to be the patient's
- 1296 personal representative, as described in 45 C.F.R. Sec. 164.502(g), for purposes of the
- 1297 patient's mental health treatment.
- 1298 (16) In the absence of the findings described in Subsection (14), the court, after the hearing,
- 1299 shall dismiss the proceedings.
- 1300 (17)(a) The court shall immediately notify the appropriate mental health authority and
- 1301 the division upon entry of an assisted outpatient treatment order, including an order
- 1302 extending the duration of an assisted outpatient treatment order.
- 1303 ~~(a)~~ (b) The assisted outpatient treatment order shall designate the period for which the
- 1304 patient shall be treated, which may not exceed 12 months without a review hearing.
- 1305 ~~(b)~~ (c) At a review hearing, the court may extend the duration of an assisted outpatient
- 1306 treatment order by up to 12 months, if:
- 1307 (i) the court finds by clear and convincing evidence that the patient meets the
- 1308 conditions described in Subsection (14); or
- 1309 (ii)(A) the patient does not appear at the review hearing;
- 1310 (B) notice of the review hearing was provided to the patient's last known address
- 1311 by the applicant described in Subsection (1) or by a local mental health
- 1312 authority; and
- 1313 (C) the patient has appeared in court or signed an informed waiver within the
- 1314 previous 18 months.
- 1315 ~~(e)~~ (d) The court shall maintain a current list of all patients under its order of assisted
- 1316 outpatient treatment.
- 1317 ~~(d)~~ (e) At least two weeks prior to the expiration of the designated period of any
- 1318 assisted outpatient treatment order still in effect, the court that entered the original
- 1319 order shall inform the appropriate local mental health authority or its designee.
- 1320 (18) Costs of all proceedings under this section shall be paid by the county in which the

1321 proposed patient resides or is found.

1322 (19) A court may not hold an individual in contempt for failure to comply with an assisted
1323 outpatient treatment order.

1324 (20) As provided in Section 31A-22-651, a health insurance provider may not deny an
1325 insured the benefits of the insured's policy solely because the health care that the insured
1326 receives is provided under a court order for assisted outpatient treatment.

1327 Section 16. Section **26B-5-372** is amended to read:

1328 **26B-5-372 (Effective 05/06/26). Admission of person in custody of Department of**
1329 **Corrections to state hospital -- Retransfer of person to Department of Corrections.**

1330 (1) The executive director of the Department of Corrections may request the director to
1331 admit a person who is in the custody of the Department of Corrections to the state
1332 hospital, if the clinical director within the Department of Corrections finds that the
1333 inmate has mentally deteriorated to the point that admission to the state hospital is
1334 necessary to ensure adequate mental health treatment. In determining whether that
1335 inmate should be placed in the state hospital, the director of the division shall consider:

1336 (a) the mental health treatment needs of the inmate;

1337 (b) the treatment programs available at the state hospital; and

1338 (c) whether the inmate meets the requirements of Subsection [26B-5-306(2)]

1339 26B-5-306(3).

1340 (2) If the director denies the admission of an inmate as requested by the clinical director
1341 within the Department of Corrections, the Board of Pardons and Parole shall determine
1342 whether the inmate will be admitted to the state hospital. The Board of Pardons and
1343 Parole shall consider:

1344 (a) the mental health treatment needs of the inmate;

1345 (b) the treatment programs available at the state hospital; and

1346 (c) whether the inmate meets the requirements of Subsection [26B-5-306(2)]

1347 26B-5-306(3).

1348 (3) The state hospital shall receive any person in the custody of the Department of
1349 Corrections when ordered by either the director or the Board of Pardons and Parole,
1350 pursuant to Subsection (1) or (2). Any person so transferred to the state hospital shall
1351 remain in the custody of the Department of Corrections, and the state hospital shall act
1352 solely as the agent of the Department of Corrections.

1353 (4) Inmates transferred to the state hospital pursuant to this section shall be transferred back
1354 to the Department of Corrections through negotiations between the director and the

1355 director of the Department of Corrections. If agreement between the director and the
 1356 director of the Department of Corrections cannot be reached, the Board of Pardons and
 1357 Parole shall have final authority in determining whether a person will be transferred
 1358 back to the Department of Corrections. In making that determination, that board shall
 1359 consider:

- 1360 (a) the mental health treatment needs of the inmate;
- 1361 (b) the treatment programs available at the state hospital;
- 1362 (c) whether the person continues to meet the requirements of Subsection [~~26B-5-306(2)~~
 1363 26B-5-306(3)];
- 1364 (d) the ability of the state hospital to provide adequate treatment to the person, as well as
 1365 safety and security to the public; and
- 1366 (e) whether, in the opinion of the director, in consultation with the clinical director of the
 1367 state hospital, the person's treatment needs have been met.

1368 Section 17. Section **26B-5-384** is enacted to read:

1369 **26B-5-384 (Effective 05/06/26). Statewide commitment database -- Restricted use**
 1370 **and access.**

- 1371 (1) As used in this section, "committed individual" means an individual who has been
 1372 committed under Section 26B-5-331 or 26B-5-332.
- 1373 (2) The department shall establish by December 31, 2026, and shall maintain, a database of
 1374 individuals committed under Sections 26B-5-331 and 26B-5-332.
- 1375 (3) The database shall include:
 - 1376 (a) the name and identifying information of a committed individual;
 - 1377 (b) the type of commitment and statute authorizing the commitment;
 - 1378 (c) the status of the committed individual; and
 - 1379 (d) any other information the department deems necessary to carry out the requirements
 1380 of this section.
- 1381 (4) The department shall make rules in accordance with Title 63G, Chapter 3, Utah
 1382 Administrative Rulemaking Act, to:
 - 1383 (a) implement this section; and
 - 1384 (b) ensure the privacy of committed individuals, including by:
 - 1385 (i) establishing and restricting the permissible uses of the information in the database;
 1386 and
 - 1387 (ii) defining and restricting access to the database, including by identifying persons
 1388 who may have access to the database.

- 1389 Section 18. Section **26B-5-611** is amended to read:
- 1390 **26B-5-611 (Effective 05/06/26). Suicide prevention -- Reporting requirements.**
- 1391 (1) As used in this section:
- 1392 (a) "Bureau" means the Bureau of Criminal Identification created in Section 53-10-201
- 1393 within the Department of Public Safety.
- 1394 (b) "Coalition" means the Statewide Suicide Prevention [~~Coalition~~] Committee created
- 1395 under Subsection (3).
- 1396 (c) "Commission" means the Utah Behavioral Health Commission created in Section
- 1397 26B-5-702.
- 1398 (d) "Coordinator" means the state suicide prevention coordinator appointed under
- 1399 Subsection (2).
- 1400 (e) "Fund" means the Governor's Suicide Prevention Fund created in Section 26B-1-325.
- 1401 (f) "Intervention" means an effort to prevent a person from attempting suicide.
- 1402 (g) "Legal intervention" means an incident in which an individual is shot by another
- 1403 individual who has legal authority to use deadly force.
- 1404 (h) "Postvention" means intervention after a suicide attempt or a suicide death to reduce
- 1405 risk and promote healing.
- 1406 (i) "Shooter" means an individual who uses a gun in an act that results in the death of the
- 1407 actor or another individual, whether the act was a suicide, homicide, legal
- 1408 intervention, act of self-defense, or accident.
- 1409 (2) The [~~division~~] office shall appoint a state suicide prevention coordinator to[~~, under the~~
- 1410 ~~direction of the commission,~~] administer a state suicide prevention program composed
- 1411 of suicide prevention, intervention, and postvention programs, services, and efforts.
- 1412 (3) The coordinator shall:
- 1413 (a) establish a Statewide Suicide Prevention Committee with membership from public
- 1414 and private organizations and Utah citizens; and
- 1415 (b) appoint a chair and co-chair from among the membership of the coalition to lead the
- 1416 coalition.
- 1417 (4) The state suicide prevention program may include the following components:
- 1418 (a) delivery of resources, tools, and training to community-based coalitions;
- 1419 (b) evidence-based suicide risk assessment tools and training;
- 1420 (c) town hall meetings for building community-based suicide prevention strategies;
- 1421 (d) suicide prevention gatekeeper training;
- 1422 (e) training to identify warning signs and to manage an at-risk individual's crisis;

- 1423 (f) evidence-based intervention training;
- 1424 (g) intervention skills training;
- 1425 (h) postvention training; or
- 1426 (i) a public education campaign to improve public awareness about warning signs of
- 1427 suicide and suicide prevention resources.
- 1428 (5) The coordinator shall coordinate with the following to gather statistics, among other
- 1429 duties:
- 1430 (a) local mental health and substance abuse authorities;
- 1431 (b) the State Board of Education, including the public education suicide prevention
- 1432 coordinator described in Section 53G-9-702;
- 1433 (c) applicable divisions and offices within the department;
- 1434 (d) health care providers, including emergency rooms;
- 1435 (e) federal agencies, including the Federal Bureau of Investigation;
- 1436 (f) other unbiased sources; and
- 1437 (g) other public health suicide prevention efforts.
- 1438 (6) The coordinator shall, in consultation with the bureau, implement and manage the
- 1439 operation of the firearm safety program described in Subsection 26B-5-102(3).
- 1440 (7) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
- 1441 division shall make rules:
- 1442 (a) governing the implementation of the state suicide prevention program, consistent
- 1443 with this section; and
- 1444 (b) in conjunction with the bureau, defining the criteria for employers to apply for grants
- 1445 under the Suicide Prevention Education Program described in Section 26B-5-110,
- 1446 which shall include:
- 1447 (i) attendance at the suicide prevention education course described in Subsection
- 1448 26B-5-102(3); and
- 1449 (ii) distribution of the firearm safety brochures or packets created in Subsection
- 1450 26B-5-102(3), but does not require the distribution of a cable-style gun lock with a
- 1451 firearm if the firearm already has a trigger lock or comparable safety mechanism.
- 1452 (8) As funding by the Legislature allows, the coordinator shall award grants, not to exceed a
- 1453 total of \$100,000 per fiscal year, to suicide prevention programs that focus on the needs
- 1454 of children who have been served by the Division of Juvenile Justice and Youth Services.
- 1455 Section 19. Section **26B-5-703** is amended to read:
- 1456 **26B-5-703 (Effective 05/06/26) (Repealed 07/01/29). Purpose -- Duties --**

1457 **Reporting.**

- 1458 (1) The purpose of the commission is to be the central authority for coordinating behavioral
1459 health initiatives between state and local governments, health systems, and other
1460 interested persons, to ensure that Utah's behavioral health systems are comprehensive,
1461 aligned, effective, and efficient.
- 1462 (2) To fulfill the commission's purpose, the commission shall:
- 1463 (a) establish a shared vision across public and private sectors for improving Utah's
1464 behavioral health systems;
 - 1465 (b) make recommendations, including policy recommendations, and advise the
1466 governor, executive branch agencies, and the Legislature on matters pertaining to
1467 behavioral health;
 - 1468 (c) provide feedback on proposed bills, rules, policies, and budgets relating to behavioral
1469 health;
 - 1470 (d) encourage participation in the commission's work by individuals and populations
1471 directly impacted by behavioral health issues, including family members of
1472 individuals with behavioral health issues;
 - 1473 (e) engage private sector payers, providers, and business and employer groups in the
1474 commission's work;
 - 1475 (f) continually review and revise the master plan as appropriate;
 - 1476 (g) identify priorities and lead efforts to implement and advance those priorities by
1477 coordinating and collaborating closely with public and private persons throughout the
1478 state;
 - 1479 (h) identify areas where innovation is necessary to improve behavioral health access and
1480 care;
 - 1481 (i) cooperate with the Utah System of Higher Education, the State Board of Education,
1482 the Division of Professional Licensing, the Utah Health Workforce Advisory
1483 Council, and the department to oversee the creation and implementation of
1484 behavioral health workforce initiatives for the state;
 - 1485 (j) collaborate with the Utah State Hospital, the Department of Corrections, county jails,
1486 and the department;
 - 1487 (k) regarding the interaction between an individual with a mental illness or an
1488 intellectual disability and the civil commitment system, criminal justice system, or
1489 juvenile justice system:
 - 1490 (i) promote communication between and coordination among all agencies interacting

- 1491 with the individual;
- 1492 (ii) study, evaluate, and recommend changes to laws and procedures;
- 1493 (iii) identify and promote the implementation of specific policies and programs to
- 1494 deal fairly and efficiently with the individual; and
- 1495 (iv) promote judicial education;
- 1496 (l) study the long-term need for adult patient staffed beds at the state hospital, including:
- 1497 (i) the total number of staffed beds currently in use at the state hospital;
- 1498 (ii) the current staffed bed capacity at the state hospital;
- 1499 (iii) the projected total number of staffed beds needed in the adult general psychiatric
- 1500 unit of the state hospital over the next three, five, and 10 years based on:
- 1501 (A) the state's current and projected population growth;
- 1502 (B) current access to mental health resources in the community; and
- 1503 (C) any other factors the committee finds relevant to projecting the total number
- 1504 of staffed beds; and
- 1505 (iv) the cost associated with the projected total number of staffed beds described in Su
- 1506 bsection (2)(l)(iii);
- 1507 (m) each year report on whether the pay of the state hospital's employees is adequate
- 1508 based on market conditions;
- 1509 ~~[(k)]~~ (n) oversee coordination for the funding, implementation, and evaluation of suicide
- 1510 prevention efforts described in Section 26B-5-611;
- 1511 ~~[(t)]~~ (o) develop methods or models for implementing and coherently communicating
- 1512 cross-sector strategies;
- 1513 ~~[(m)]~~ (p) hold the state's behavioral health systems accountable for clear, measurable
- 1514 outcomes; and
- 1515 ~~[(n)]~~ (q) maintain independence from the department and the governor such that the
- 1516 commission and its committees are able to provide independent advice and
- 1517 recommendations, especially regarding proposed bills and policy considerations.
- 1518 (3) The commission may delegate responsibilities to the commission's committees and
- 1519 subcommittees as the committee deems appropriate.
- 1520 ~~[(3)]~~ (4)(a) The commission shall meet at least quarterly, but may meet at other times as
- 1521 scheduled by the chair.
- 1522 (b) The chair of the commission shall set the agenda for each commission meeting with
- 1523 input from commission members and staff.
- 1524 (c) Notice of the time and place of a commission meeting shall be given to each member

1525 and to the public in compliance with Title 52, Chapter 4, Open and Public Meetings
1526 Act.

1527 (d) A commission meeting is open to the public unless the meeting or a portion of a
1528 meeting is closed by the commission pursuant to Section 52-4-204 or Section
1529 52-4-205.

1530 [(4)] (5) On or before December 31, 2024, the commission shall provide a report to the
1531 Legislature that includes:

1532 (a) recommendations for behavioral health measures and targets to be included in the
1533 next update to the master plan;

1534 (b) recommendations for consolidating into the commission other commissions,
1535 committees, subcommittees, task forces, working groups, or other bodies pertaining
1536 to behavioral health;

1537 (c) recommendations on the next steps for reviewing and potentially redefining state law
1538 and program options regarding county-based behavioral health services; and

1539 (d) recommendations on key budget priorities and key legislative policies for the 2025
1540 General Session and thereafter.

1541 [(5)] (6)(a) Beginning in 2025, by no later than September 30 of each year, the
1542 commission shall provide a report to the Health and Human Services Interim
1543 Committee that describes the commission's work during the preceding year and
1544 includes, in accordance with Section 26B-5-705, any legislative recommendations
1545 from the commission.

1546 (b) Before the commission submits a legislative recommendation to the Health and
1547 Human Services Interim Committee or the Legislature, the Legislative Policy
1548 Committee created in Section 26B-5-705 shall review the recommendation.

1549 [(6)] (7) Neither the commission nor a committee of the commission may obtain any
1550 individual's health or medical information, whether identifiable or deidentified, without
1551 first obtaining the consent of the individual or the individual's legal representative.

1552 Section 20. Section **26B-5-704** is amended to read:

1553 **26B-5-704 (Effective 05/06/26) (Repealed 07/01/29). Committees -- Creation --**
1554 **Duties.**

1555 (1) Each committee created under this part or formed by the commission in accordance
1556 with this section serves under the direction of the commission.

1557 (2) In addition to the committees created under this part or formed by the commission, the
1558 following are committees of the commission and shall serve under the direction of the

- 1559 commission to assist the commission in performing the commission's duties:
- 1560 (a) the Behavioral Health Crisis Response Committee created in Section 63C-18-202;
- 1561 (b) the Utah [~~Substance Use and Mental Health Advisory~~] Behavioral Health Policy
- 1562 Review Committee created in Section 26B-5-801; and
- 1563 (c) the Statewide Suicide Prevention Committee created under Section 26B-5-611.
- 1564 (3)(a) In addition to the committees described in Subsection (2) or created under this
- 1565 part, the commission may form committees to support the commission in fulfilling
- 1566 the commission's duties.
- 1567 (b) When forming a committee, the commission shall, except as provided in Subsection
- 1568 (4):
- 1569 (i) appoint members to the committee who represent a range of views and expertise;
- 1570 and
- 1571 (ii) adopt procedures and directives for the committee.
- 1572 (c) Unless otherwise provided for in statute, a member of a committee may not receive
- 1573 compensation or benefits for the member's service on the committee, but may receive
- 1574 per diem and travel expenses in accordance with:
- 1575 (i) Section 63A-3-106;
- 1576 (ii) Section 63A-3-107; and
- 1577 (iii) rules made by the Division of Finance under Sections 63A-3-106 and 63A-3-107.
- 1578 (d) Compensation and expenses of a committee member who is a legislator are governed
- 1579 by Section 36-2-2 and Legislative Joint Rules, Title 5, Legislative Compensation and
- 1580 Expenses.
- 1581 (4) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
- 1582 department may make rules, in consultation with the commission, to establish the
- 1583 membership, procedures, and directives of a committee the commission forms.
- 1584 Section 21. Section **26B-5-705** is amended to read:
- 1585 **26B-5-705 (Effective 05/06/26) (Repealed 07/01/29). Legislative Policy**
- 1586 **Committee -- Creation -- Duties -- Staff.**
- 1587 (1) As used in this section, "committee" means the Legislative Policy Committee created in
- 1588 Subsection (2).
- 1589 (2) Under the commission, there is created the Legislative Policy Committee.
- 1590 (3)(a) The committee is composed of five legislators, appointed as follows:
- 1591 (i) the speaker of the House of Representatives shall appoint one member of the
- 1592 House of Representatives;

- 1593 (ii) the minority leader of the House of Representatives shall appoint one member of
1594 the House of Representatives;
- 1595 (iii) the president of the Senate shall appoint one member of the Senate;
- 1596 (iv) the minority leader of the Senate shall appoint one member of the Senate; and
- 1597 (v) the speaker of the House of Representatives and the president of the Senate shall
1598 jointly appoint one legislator.
- 1599 (b) The speaker, president, and minority leaders:
- 1600 (i) shall make the appointments described in Subsection (3)(a) after consulting with
1601 the chairs of the Health and Human Services Interim Committee and the chairs of
1602 the Social Services Appropriations Subcommittee; and
- 1603 (ii) are encouraged but not required to appoint to the committee legislators who are
1604 members of one or more of the following:
- 1605 (A) the Health and Human Services Interim Committee; or
- 1606 (B) the Social Services Appropriations Subcommittee.
- 1607 (4) The speaker of the House of Representatives and the president of the Senate shall each
1608 designate one of their appointees as a co-chair of the committee.
- 1609 (5) The individual who appoints a member of the committee may change the appointment
1610 at any time.
- 1611 (6) The committee shall:
- 1612 (a) assist the commission and any of the commission's other committees with developing
1613 policy and legislative recommendations; and
- 1614 (b) review any legislative recommendation proposed by the commission before the
1615 legislative recommendation is provided to the Health and Human Services Interim
1616 Committee or the Legislature.
- 1617 (7)(a) As used in this Subsection (7), "working group" means the working group the
1618 committee convenes as described in Subsection (7)(b).
- 1619 (b) The committee shall convene a working group to investigate, study, and make
1620 recommendations to the Legislature regarding the entity in the best position to serve
1621 as the central authority for coordinating behavioral health initiatives between state
1622 and local governments, health systems, and other interested persons to ensure that
1623 Utah's behavioral health systems are comprehensive, aligned, effective, and efficient.
- 1624 (c) In carrying out the duties described in Subsection (7)(b), the working group shall
1625 consider:
- 1626 (i) an entity's ability to gather and analyze data; and

1627 (ii) the most effective duties and governance structure for the central authority.
 1628 (d) The working group shall make the recommendations described in Subsection (7)(b)
 1629 to the Health and Human Services Interim Committee on or before the date of the
 1630 committee's November 2026 interim meeting.

1631 [(7)] (8) The committee may:

1632 (a) submit its own proposed legislation to the commission for consideration; and
 1633 (b) provide other services as requested by the commission.

1634 [(8)] (9)(a) A majority of the members of the committee constitutes a quorum.

1635 (b) The action of a majority of a quorum constitutes the action of the committee.

1636 [(9)] (10) The Office of Legislative Research and General Counsel shall provide staff
 1637 support to the committee.

1638 Section 22. Section **26B-5-801** is amended to read:

1639 **Part 8. Utah Behavioral Health Policy Review Committee**

1640 **26B-5-801 (Effective 05/06/26) (Repealed 01/01/33). Definitions -- Creation of**
 1641 **committee -- Membership -- Terms.**

1642 (1)(a) As used in this part, "committee" means the Utah [~~Substance Use and Mental~~
 1643 ~~Health Advisory]~~ Behavioral Health Policy Review Committee created in this section.

1644 (b) There is created within the department the Utah [~~Substance Use and Mental Health~~
 1645 ~~Advisory]~~ Behavioral Health Policy Review Committee, which serves under the
 1646 direction of the Utah Behavioral Health Commission created in Section 26B-5-702.

1647 [(2) The committee shall be comprised of the following voting members:]

1648 [(a) the attorney general or the attorney general's designee;]

1649 [(b) one elected county official appointed by the Utah Association of Counties;]

1650 [(c) the commissioner of public safety or the commissioner's designee;]

1651 [(d) the director of the Division of Integrated Healthcare or the director's designee;]

1652 [(e) the state superintendent of public instruction or the superintendent's designee;]

1653 [(f) the executive director of the Department of Health and Human Services or the
 1654 executive director's designee;]

1655 [(g) the executive director of the State Commission on Criminal and Juvenile Justice or
 1656 the executive director's designee;]

1657 [(h) the executive director of the Department of Corrections or the executive director's
 1658 designee;]

1659 [(i) the director of the Division of Juvenile Justice and Youth Services or the director's
 1660 designee;]

- 1661 [~~(j) the director of the Division of Child and Family Services or the director's designee;~~]
 1662 [~~(k) the chair of the Board of Pardons and Parole or the chair's designee;~~]
 1663 [~~(l) the director of the Office of Multicultural Affairs or the director's designee;~~]
 1664 [~~(m) the director of the Division of Indian Affairs or the director's designee;~~]
 1665 [~~(n) the state court administrator or the state court administrator's designee;~~]
 1666 [~~(o) one district court judge who presides over a drug court and who is appointed by the~~
 1667 ~~chief justice of the Utah Supreme Court;~~]
 1668 [~~(p) one district court judge who presides over a mental health court and who is~~
 1669 ~~appointed by the chief justice of the Utah Supreme Court;~~]
 1670 [~~(q) one juvenile court judge who presides over a drug court and who is appointed by the~~
 1671 ~~chief justice of the Utah Supreme Court;~~]
 1672 [~~(r) one prosecutor appointed by the Statewide Association of Prosecutors;~~]
 1673 [~~(s) the chair or co-chair of each subcommittee established by the committee;~~]
 1674 [~~(t) the chair or co-chair of the Statewide Suicide Prevention Committee created under~~
 1675 ~~Subsection 26B-5-611(3);~~]
 1676 [~~(u) one representative appointed by the Utah League of Cities and Towns to serve a~~
 1677 ~~four-year term;~~]
 1678 [~~(v) the chair of the Utah Victim Services Commission or the chair's designee;~~]
 1679 [~~(w) the superintendent of the Utah State Hospital or the superintendent's designee;~~]
 1680 [~~(x) the following members appointed by the governor to serve four-year terms:~~]
 1681 [~~(i) one resident of the state who has been personally affected by a substance use or~~
 1682 ~~mental health disorder; and]~~
 1683 [~~(ii) one citizen representative; and]~~
 1684 [~~(y) in addition to the voting members described in Subsections (2)(a) through (x), the~~
 1685 ~~following voting members appointed by a majority of the members described in~~
 1686 ~~Subsections (2)(a) through (x) to serve four-year terms:~~]
 1687 [~~(i) one resident of the state who represents a statewide advocacy organization for~~
 1688 ~~recovery from substance use disorders;~~]
 1689 [~~(ii) one resident of the state who represents a statewide advocacy organization for~~
 1690 ~~recovery from mental illness;~~]
 1691 [~~(iii) one resident of the state who represents a statewide advocacy organization for~~
 1692 ~~protection of rights of individuals with a disability;~~]
 1693 [~~(iv) one resident of the state who represents prevention professionals;~~]
 1694 [~~(v) one resident of the state who represents treatment professionals;~~]

- 1695 ~~[(vi) one resident of the state who represents the physical health care field;]~~
 1696 ~~[(vii) one resident of the state who is a criminal defense attorney;]~~
 1697 ~~[(viii) one resident of the state who is a military servicemember or military veteran~~
 1698 ~~under Section 53H-11-202;]~~
 1699 ~~[(ix) one resident of the state who represents local law enforcement agencies;]~~
 1700 ~~[(x) one representative of private service providers that serve youth with substance~~
 1701 ~~use disorders or mental health disorders; and]~~
 1702 ~~[(xi) one resident of the state who is certified by the Division of Integrated~~
 1703 ~~Healthcare as a peer support specialist as described in Subsection~~
 1704 ~~26B-5-102(2)(gg).]~~

1705 ~~[(3) An individual other than an individual described in Subsection (2) may not be~~
 1706 ~~appointed as a voting member of the committee.]~~

1707 (2) The department, in consultation with the Behavioral Health Commission, shall make
 1708 rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to
 1709 establish the members of the committee.

1710 Section 23. Section **26B-5-802** is amended to read:

1711 **26B-5-802 (Effective 05/06/26) (Repealed 01/01/33). Chair -- Vacancies --**
 1712 **Quorum -- Expenses.**

1713 (1) The Utah ~~[Substance Use and Mental Health Advisory]~~ Behavioral Health Policy Review
 1714 Committee shall annually select one of [its] the committee's members to serve as chair
 1715 and ~~[one of its]~~ two of the committee's members to serve as ~~[vice chair]~~ vice chairs.

1716 (2) When a vacancy occurs in the membership for any reason, the replacement shall be
 1717 appointed for the unexpired term in the same manner as the position was originally filled.

1718 (3) A majority of the members of the committee constitutes a quorum.

1719 (4) A member may not receive compensation or benefits for the member's service, but may
 1720 receive per diem and travel expenses as allowed in:

1721 (a) Section 63A-3-106;

1722 (b) Section 63A-3-107; and

1723 (c) rules made by the Division of Finance according to Sections 63A-3-106 and
 1724 63A-3-107.

1725 (5) The committee may establish subcommittees as needed to assist in accomplishing [its]
 1726 the committee's duties under Section 26B-5-803.

1727 Section 24. Section **26B-5-803** is amended to read:

1728 **26B-5-803 (Effective 05/06/26) (Repealed 01/01/33). Duties of committee.**

- 1729 (1) Under the direction of the Utah Behavioral Health Commission created in Section
 1730 26B-5-702, the Utah [~~Substance Use and Mental Health Advisory~~] Behavioral Health
 1731 Policy Review Committee shall:
- 1732 [(a) ~~provide leadership and generate unity for Utah's ongoing efforts to reduce and~~
 1733 ~~eliminate the impact of substance use and mental health disorders in Utah through a~~
 1734 ~~comprehensive and evidence-based prevention, treatment, and justice strategy;]~~
- 1735 [(b) ~~recommend and coordinate the creation, dissemination, and implementation of~~
 1736 ~~statewide policies to address substance use and mental health disorders;]~~
- 1737 [(e) ~~facilitate planning for a balanced continuum of substance use and mental health~~
 1738 ~~disorder prevention, treatment, and justice services;]~~
- 1739 [(d) ~~promote collaboration and mutually beneficial public and private partnerships;]~~
- 1740 [(e)] (a) coordinate recommendations made by any subcommittee created under Section
 1741 26B-5-802;
- 1742 [(f)] (b) analyze and provide an objective assessment of all proposed legislation
 1743 concerning substance use, mental health, forensic mental health, and related issues;
 1744 and
- 1745 (c) advise the commission on behavioral health policy, proposed legislation, and
 1746 procedures.
- 1747 [(g) ~~comply with Section 32B-2-306;]~~
- 1748 [(h) ~~advise the Department of Health and Human Services regarding the state hospital~~
 1749 ~~admissions policy for individuals in the custody of the Department of Corrections;]~~
- 1750 [(i) ~~regarding the interaction between an individual with a mental illness or an~~
 1751 ~~intellectual disability and the civil commitment system, criminal justice system, or~~
 1752 ~~juvenile justice system;]~~
- 1753 [(i) ~~promote communication between and coordination among all agencies interacting~~
 1754 ~~with the individual;]~~
- 1755 [(ii) ~~study, evaluate, and recommend changes to laws and procedures;]~~
- 1756 [(iii) ~~identify and promote the implementation of specific policies and programs to~~
 1757 ~~deal fairly and efficiently with the individual; and]~~
- 1758 [(iv) ~~promote judicial education;]~~
- 1759 [(j) ~~study the long-term need for adult patient staffed beds at the state hospital, including:]~~
- 1760 [(i) ~~the total number of staffed beds currently in use at the state hospital;]~~
- 1761 [(ii) ~~the current staffed bed capacity at the state hospital;]~~
- 1762 [(iii) ~~the projected total number of staffed beds needed in the adult general~~

1763 psychiatric unit of the state hospital over the next three, five, and 10 years based
 1764 on:]
 1765 [~~(A) the state's current and projected population growth;~~]
 1766 [~~(B) current access to mental health resources in the community; and]~~
 1767 [~~(C) any other factors the committee finds relevant to projecting the total number~~
 1768 ~~of staffed beds; and]~~
 1769 [(iv) the cost associated with the projected total number of staffed beds described in
 1770 Subsection (1)(j)(iii); and]
 1771 [(k) each year report on whether the pay of the state hospital's employees is adequate
 1772 based on market conditions.]

1773 (2) The committee shall meet quarterly or more frequently as determined necessary by the
 1774 chair.

1775 (3) The committee shall report~~[:]~~ any recommendations annually to the commission, the
 1776 governor, and the Legislature.

1777 [~~(a) with the assistance and staff support from the state hospital, regarding the items~~
 1778 ~~described in Subsections (1)(j) and (k), including any recommendations, to the Utah~~
 1779 ~~Behavioral Health Commission on or before July 31 of each year; and]~~

1780 [~~(b) any other recommendations annually to the commission, the governor, the~~
 1781 ~~Legislature, and the Judicial Council.]~~

1782 Section 25. Section **26B-8-233** is enacted to read:

1783 **26B-8-233 (Effective 05/06/26). Family outreach specialist.**

1784 (1) With funds appropriated by the Legislature for this purpose, the department shall
 1785 provide compensation, at a standard rate determined by the department, to a family
 1786 outreach specialist.

1787 (2) The family outreach specialist shall:

1788 (a) engage with relatives or the legal guardian of an individual who has recently died by
 1789 suicide or overdose to better understand the circumstances that precede a suicide or
 1790 drug-related death, including by:

1791 (i) contacting next of kin;

1792 (ii) collecting information in an interview;

1793 (iii) assessing next of kin; and

1794 (iv) providing targeted bereavement care; and

1795 (b) assist the medical examiner with suicide intervention, prevention, and postvention,
 1796 including:

- 1797 (i) mortality surveillance;
 1798 (ii) research coordination;
 1799 (iii) data management and analysis; and
 1800 (iv) epidemiological surveillance.

1801 Section 26. Section **32B-2-306** is amended to read:

1802 **32B-2-306 (Effective 05/06/26) (Partially Repealed 01/01/33). Underage drinking**
 1803 **prevention media and education campaign.**

1804 (1) As used in this section[;], "restricted account" means the Underage Drinking Prevention
 1805 Media and Education Campaign Restricted Account created in this section.

1806 [(a) "Advisory committee" means the Utah Substance Use and Mental Health Advisory
 1807 Committee created in Section 26B-5-801.]

1808 [(b) "Restricted account" means the Underage Drinking Prevention Media and
 1809 Education Campaign Restricted Account created in this section.]

1810 (2)(a) There is created a restricted account within the General Fund known as the
 1811 "Underage Drinking Prevention Media and Education Campaign Restricted Account."

1812 (b) The restricted account consists of:
 1813 (i) deposits made under Subsection (3); and
 1814 (ii) interest earned on the restricted account.

1815 (3) The department shall deposit 0.6% of the total gross revenue from sales of liquor with
 1816 the state treasurer, as determined by the total gross revenue collected for the fiscal year
 1817 two years preceding the fiscal year for which the deposit is made, to be credited to the
 1818 restricted account and to be used by the department as provided in Subsection (5).

1819 (4)[(a) ~~Before January 1, 2033, the advisory committee shall:~~]

1820 [(i) ~~provide ongoing oversight of a media and education campaign funded under this~~
 1821 ~~section;~~]

1822 [(ii) ~~create an underage drinking prevention workgroup consistent with guidelines~~
 1823 ~~proposed by the advisory committee related to the membership and duties of the~~
 1824 ~~underage drinking prevention workgroup;~~]

1825 [(iii) ~~create guidelines for how money appropriated for a media and education~~
 1826 ~~campaign can be used;~~]

1827 [(iv) ~~include in the guidelines established pursuant to this Subsection (4) that a media~~
 1828 ~~and education campaign funded under this section is carefully researched and~~
 1829 ~~developed, and appropriate for target groups; and]~~

1830 [(v) ~~approve plans submitted by the department in accordance with Subsection (5).]~~]

- 1831 ~~[(b) On or after January 1, 2033, the]~~ The department shall:
- 1832 ~~[(i)]~~ (a) provide ongoing oversight of a media and education campaign funded under this
- 1833 section;
- 1834 ~~[(ii)]~~ (b) create guidelines for how money appropriated for a media and education
- 1835 campaign can be used; and
- 1836 ~~[(iii)]~~ (c) include in the guidelines ~~[established pursuant to this Subsection (4)]~~ that a
- 1837 media and education campaign funded under this section is carefully researched and
- 1838 developed, and appropriate for target groups.
- 1839 (5)(a) Subject to appropriation from the Legislature, the department shall expend money
- 1840 from the restricted account to direct and fund one or more media and education
- 1841 campaigns designed to reduce underage drinking ~~[in cooperation with the advisory~~
- 1842 ~~committee, subject to the advisory committee being in effect under Section 63I-1-232].~~
- 1843 (b)~~[(i) Before January 1, 2033, the department shall:]~~
- 1844 ~~[(A) in cooperation with the underage drinking prevention workgroup created~~
- 1845 ~~under Subsection (4), prepare and submit a plan to the advisory committee~~
- 1846 ~~detailing the intended use of the money appropriated under this section;]~~
- 1847 ~~[(B) upon approval of the plan by the advisory committee, conduct the media and~~
- 1848 ~~education campaign in accordance with the guidelines made by the advisory~~
- 1849 ~~committee; and]~~
- 1850 ~~[(C) submit to the advisory committee annually by no later than October 1, a~~
- 1851 ~~written report detailing the use of the money for the media and education~~
- 1852 ~~campaigns conducted under this Subsection (5) and the impact and results of~~
- 1853 ~~the use of the money during the prior fiscal year ending June 30.]~~
- 1854 ~~[(ii) On or after January 1, 2033, the]~~ The department shall:
- 1855 ~~[(A)]~~ (i) prepare a plan detailing the intended use of the money appropriated under
- 1856 this section; ~~[and]~~
- 1857 ~~[(B)]~~ (ii) conduct the media and education campaign in accordance with the
- 1858 guidelines created by the department under Subsection (4)(b)~~[-]~~ ; and
- 1859 (iii) coordinate and maintain ongoing communications and collaboration with public
- 1860 entities and private organizations to reduce underage drinking.
- 1861 (c) The department shall annually, no later than October 1 for the fiscal year ending on
- 1862 June 30 of that calendar year, report to the Utah Behavioral Health Commission on:
- 1863 (i) the media and education campaign, including the campaign's impact; and
- 1864 (ii) the results of the efforts to reduce underage drinking.

1865 Section 27. Section **32B-2-402** is amended to read:

1866 **32B-2-402 (Effective 05/06/26) (Partially Repealed 01/01/33). Definitions --**

1867 **Calculations.**

1868 (1) As used in this part:

1869 (a) "Account" means the Alcoholic Beverage and Substance Abuse Enforcement and
1870 Treatment Restricted Account created in Section 32B-2-403.

1871 ~~[(b) "Advisory committee" means the Utah Substance Use and Mental Health Advisory
1872 Committee created in Section 26B-5-801.]~~

1873 ~~[(e)]~~ (b) "Alcohol-related offense" means:

1874 (i) a violation of:

1875 (A) Section 41-6a-502; or

1876 (B) an ordinance that complies with the requirements of:

1877 (I) Subsection 41-6a-510(1); or

1878 (II) Section 76-5-207; or

1879 (ii) an offense involving the illegal:

1880 (A) sale of an alcoholic product;

1881 (B) consumption of an alcoholic product;

1882 (C) distribution of an alcoholic product;

1883 (D) transportation of an alcoholic product; or

1884 (E) possession of an alcoholic product.

1885 ~~[(d)]~~ (c) "Annual conviction time period" means the time period that:

1886 (i) begins on July 1 and ends on June 30; and

1887 (ii) immediately precedes the fiscal year for which an appropriation under this part is
1888 made.

1889 (d) "Commission" means the Utah Behavioral Health Commission created in Section
1890 26B-5-702.

1891 (e) "Municipality" means a city or town.

1892 (f)(i) "Prevention" is as defined by rule, in accordance with Title 63G, Chapter 3,
1893 Utah Administrative Rulemaking Act, by the Division of Integrated Healthcare
1894 within the Department of Health and Human Services.

1895 (ii) In defining the term "prevention," the Division of Substance Abuse and Mental
1896 Health shall:

1897 (A) include only evidence-based or evidence-informed programs; and

1898 (B) provide for coordination with local substance abuse authorities designated to

- 1899 provide substance abuse services in accordance with Section 17-77-201.
- 1900 (2) For purposes of Subsection 32B-2-404(1)(b)(iii), the number of premises located within
- 1901 the limits of a municipality or county:
- 1902 (a) is the number determined by the department to be so located;
- 1903 (b) includes the aggregate number of premises of the following:
- 1904 (i) a state store;
- 1905 (ii) a package agency; and
- 1906 (iii) a retail licensee; and
- 1907 (c) for a county, consists only of the number located within an unincorporated area of
- 1908 the county.
- 1909 (3) The department shall determine:
- 1910 (a) a population figure according to the most current population estimate prepared by the
- 1911 Utah Population Committee;
- 1912 (b) a county's population for the 25% distribution to municipalities and counties under
- 1913 Subsection 32B-2-404(1)(b)(i) only with reference to the population in the
- 1914 unincorporated areas of the county; and
- 1915 (c) a county's population for the 25% distribution to counties under Subsection
- 1916 32B-2-404(1)(b)(iv) only with reference to the total population in the county,
- 1917 including that of a municipality.
- 1918 (4)(a) A conviction occurs in the municipality or county that actually prosecutes the
- 1919 offense to judgment.
- 1920 (b) If a conviction is based upon a guilty plea, the conviction is considered to occur in
- 1921 the municipality or county that, except for the guilty plea, would have prosecuted the
- 1922 offense.
- 1923 Section 28. Section **32B-2-404** is amended to read:
- 1924 **32B-2-404 (Effective 05/06/26). Alcoholic Beverage and Substance Abuse**
- 1925 **Enforcement and Treatment Restricted Account distribution.**
- 1926 (1)(a) The money deposited into the account under Section 32B-2-403 shall be
- 1927 distributed to municipalities and counties:
- 1928 (i) to the extent appropriated by the Legislature, except that the Legislature shall
- 1929 appropriate each fiscal year an amount equal to at least the amount deposited in
- 1930 the account in accordance with Section 59-15-109; and
- 1931 (ii) as provided in this Subsection (1).
- 1932 (b) The amount appropriated from the account shall be distributed as follows:

- 1933 (i) 25% to municipalities and counties on the basis of the percentage of the state
 1934 population residing in each municipality and county;
- 1935 (ii) 30% to municipalities and counties on the basis of each municipality's and
 1936 county's percentage of the statewide convictions for all alcohol-related offenses;
- 1937 (iii) 20% to municipalities and counties on the basis of the percentage of the
 1938 following in the state that are located in each municipality and county:
- 1939 (A) state stores;
- 1940 (B) package agencies;
- 1941 (C) retail licensees; and
- 1942 (D) off-premise beer retailers; and
- 1943 (iv) 25% to the counties for confinement and treatment purposes authorized by this
 1944 part on the basis of the percentage of the state population located in each county.
- 1945 (c)(i) Except as provided in Subsection (1)(c)(ii), if a municipality does not have a
 1946 law enforcement agency:
- 1947 (A) the municipality may not receive money under this part; and
- 1948 (B) the State Tax Commission:
- 1949 (I) may not distribute the money the municipality would receive but for the
 1950 municipality not having a law enforcement agency to that municipality; and
- 1951 (II) shall distribute the money that the municipality would have received but
 1952 for it not having a law enforcement agency to the county in which the
 1953 municipality is located for use by the county in accordance with this part.
- 1954 (ii) If the [~~advisory committee, before January 1, 2033~~] commission, before July 1,
 1955 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029, finds that a
 1956 municipality described in Subsection (1)(c)(i) demonstrates that the municipality
 1957 can use the money that the municipality is otherwise eligible to receive in
 1958 accordance with this part, the [~~advisory committee, before January 1, 2033~~]
 1959 commission, before July 1, 2029, or the department, on or after [~~January 1, 2033~~]
 1960 July 1, 2029, may direct the State Tax Commission to distribute the money to the
 1961 municipality.
- 1962 (2) To determine the distribution required by Subsection (1)(b)(ii), the State Tax
 1963 Commission shall annually:
- 1964 (a) for an annual conviction time period:
- 1965 (i) multiply by two the total number of convictions in the state obtained during the
 1966 annual conviction time period for violation of:

- 1967 (A) Section 41-6a-502; or
- 1968 (B) an ordinance that complies with the requirements of Subsection 41-6a-510(1)
- 1969 or Section 76-5-207; and
- 1970 (ii) add to the number calculated under Subsection (2)(a)(i) the number of
- 1971 convictions obtained during the annual conviction time period for the
- 1972 alcohol-related offenses other than the alcohol-related offenses described in
- 1973 Subsection (2)(a)(i);
- 1974 (b) divide an amount equal to 30% of the appropriation for that fiscal year by the sum
- 1975 obtained in Subsection (2)(a); and
- 1976 (c) multiply the amount calculated under Subsection (2)(b), by the number of
- 1977 convictions obtained in each municipality and county during the annual conviction
- 1978 time period for alcohol-related offenses.
- 1979 (3) By not later than September 1 each year:
- 1980 (a) the state court administrator shall certify to the State Tax Commission the number of
- 1981 convictions obtained for alcohol-related offenses in each municipality or county in
- 1982 the state during the annual conviction time period; and
- 1983 (b) the ~~[advisory committee, before January 1, 2033]~~ commission, before July 1, 2029, or
- 1984 the department, on or after ~~[January 1, 2033]~~ July 1, 2029, shall notify the State Tax
- 1985 Commission of any municipality that does not have a law enforcement agency.
- 1986 (4) By not later than December 1 of each year, the ~~[advisory committee, before January 1,~~
- 1987 ~~2033]~~ commission, before July 1, 2029, or the department, on or after ~~[January 1, 2033]~~
- 1988 July 1, 2029, shall notify the State Tax Commission for the fiscal year of appropriation
- 1989 of:
- 1990 (a) a municipality that may receive a distribution under Subsection (1)(c)(ii);
- 1991 (b) a county that may receive a distribution allocated to a municipality described in
- 1992 Subsection (1)(c)(i);
- 1993 (c) a municipality or county that may not receive a distribution because the ~~[advisory~~
- 1994 ~~committee, before January 1, 2033]~~ commission, before July 1, 2029, or the
- 1995 department, on or after ~~[January 1, 2033]~~ July 1, 2029, has suspended the payment
- 1996 under Subsection 32B-2-405(2)(a); and
- 1997 (d) a municipality or county that receives a distribution because the suspension of
- 1998 payment has been cancelled under Subsection 32B-2-405(2).
- 1999 (5)(a) By not later than January 1 of the fiscal year of appropriation, the State Tax
- 2000 Commission shall annually distribute to each municipality and county the portion of

2001 the appropriation that the municipality or county is eligible to receive under this part,
 2002 except for any municipality or county that the [~~advisory committee, before January 1,~~
 2003 ~~2033~~] commission, before July 1, 2029, or the department, on or after [~~January 1, 2033~~]
 2004 July 1, 2029, notifies the State Tax Commission in accordance with Subsection (4)
 2005 may not receive a distribution in that fiscal year.

2006 (b)(i) The [~~advisory committee, before January 1, 2033~~] commission, before July 1,
 2007 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029, shall prepare
 2008 forms for use by a municipality or county in applying for a distribution under this
 2009 part.

2010 (ii) A form described in this Subsection (5) may require the submission of
 2011 information the [~~advisory committee, before January 1, 2033~~] commission, before
 2012 July 1, 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029,
 2013 considers necessary to enable the State Tax Commission to comply with this part.

2014 Section 29. Section **32B-2-405** is amended to read:

2015 **32B-2-405 (Effective 05/06/26). Reporting by municipalities and counties --**
 2016 **Grants.**

2017 (1) A municipality or county that receives money under this part during a fiscal year shall
 2018 by no later than October 1 following the fiscal year:

2019 (a) report to the [~~advisory committee, before January 1, 2033~~] committee, before July 1,
 2020 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029:

2021 (i) the programs or projects of the municipality or county that receive money under
 2022 this part;

2023 (ii) if the money for programs or projects were exclusively used as required by
 2024 Subsection 32B-2-403(2);

2025 (iii) indicators of whether the programs or projects that receive money under this part
 2026 are effective; and

2027 (iv) if money received under this part was not expended by the municipality or
 2028 county; and

2029 (b) provide the [~~advisory committee, before January 1, 2033~~] committee, before July 1,
 2030 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029, a statement signed
 2031 by the chief executive officer of the county or municipality attesting that the money
 2032 received under this part was used in addition to money appropriated or otherwise
 2033 available for the county's or municipality's law enforcement and was not used to
 2034 supplant that money.

- 2035 (2) The ~~[advisory committee, before January 1, 2033]~~ committee, before July 1, 2029, may,
2036 by a majority vote, or the department, on or after ~~[January 1, 2033]~~ July 1, 2029, may:
- 2037 (a) suspend future payments under Subsection 32B-2-404(4) to a municipality or county
2038 that:
- 2039 (i) does not file a report that meets the requirements of Subsection (1); or
2040 (ii) the ~~[advisory committee, before January 1, 2033]~~ committee, before July 1, 2029,
2041 or the department, on or after ~~[January 1, 2033]~~ July 1, 2029, finds does not use the
2042 money as required by Subsection 32B-2-403(2) on the basis of the report filed by
2043 the municipality or county under Subsection (1); and
- 2044 (b) cancel a suspension under Subsection (2)(a).
- 2045 (3) The State Tax Commission shall notify the ~~[advisory committee, before January 1, 2033]~~
2046 committee, before July 1, 2029, or the department, on or after ~~[January 1, 2033]~~ July 1,
2047 2029, of the balance of any undistributed money after the annual distribution under
2048 Subsection 32B-2-404(5).
- 2049 (4)(a) Subject to the requirements of this Subsection (4), the ~~[advisory committee, before~~
2050 ~~January 1, 2033]~~ committee, before July 1, 2029, or the department, on or after [
2051 ~~January 1, 2033]~~ July 1, 2029, shall award the balance of undistributed money under
2052 Subsection (3):
- 2053 (i) as prioritized by majority vote of the ~~[advisory committee, before January 1, 2033]~~
2054 committee, before July 1, 2029, or by the department, on or after ~~[January 1, 2033]~~
2055 July 1, 2029; and
- 2056 (ii) as grants to:
- 2057 (A) a county;
2058 (B) a municipality;
2059 (C) the department;
2060 (D) the Department of Health and Human Services;
2061 (E) the Department of Public Safety; or
2062 (F) the State Board of Education.
- 2063 (b) By not later than May 30 of the fiscal year of the appropriation, the ~~[advisory~~
2064 ~~committee, before January 1, 2033]~~ committee, before July 1, 2029, or the
2065 department, on or after ~~[January 1, 2033]~~ July 1, 2029, shall notify the State Tax
2066 Commission of grants awarded under this Subsection (4).
- 2067 (c) The State Tax Commission shall make payments of a grant:
- 2068 (i) upon receiving notice as provided under Subsection (4)(b); and

2069 (ii) by not later than June 30 of the fiscal year of the appropriation.

2070 (d) An entity that receives a grant under this Subsection (4) shall use the grant money
2071 exclusively for programs or projects described in Subsection 32B-2-403(2).

2072 Section 30. Section **32B-7-305** is amended to read:

2073 **32B-7-305 (Effective 05/06/26). Tracking of enforcement actions -- Costs of**
2074 **enforcement actions.**

2075 (1) The Department of Public Safety shall administer a program to reimburse a municipal
2076 or county law enforcement agency:

2077 (a) for the actual costs of an alcohol-related compliance check investigation conducted
2078 pursuant to Section 77-39-101 on the premises of an off-premise beer retailer;

2079 (b) for administrative costs associated with reporting the compliance check investigation
2080 described in Subsection (1)(a);

2081 (c) if the municipal or county law enforcement agency completes and submits to the
2082 Department of Public Safety a report within 90 days after the day on which the
2083 compliance check investigation described in Subsection (1)(a) occurs in a format
2084 required by the Department of Public Safety; and

2085 (d) in the order that the municipal or county law enforcement agency submits the report
2086 required by Subsection (1)(c) until the amount allocated by the Department of Public
2087 Safety to reimburse a municipal or county law enforcement agency is spent.

2088 (2) By no later than October 1 of each year, the Department of Public Safety shall report to
2089 the [~~Utah Substance Use and Mental Health Advisory Committee~~] Utah Behavioral
2090 Health Commission on the compliance check investigations:

2091 (a) funded during the previous fiscal year; and

2092 (b) reimbursed under Subsection (1).

2093 Section 31. Section **53-6-202** is amended to read:

2094 **53-6-202 (Effective 05/06/26). Basic training course -- Completion required --**
2095 **Annual training -- Prohibition from exercising powers -- Reinstatement.**

2096 (1)(a) The director shall:

2097 (i)(A) suggest and prepare subject material; and

2098 (B) schedule instructors for basic training courses; or

2099 (ii) review the material and instructor choices submitted by a certified academy.

2100 (b) The subject material, instructors, and schedules shall be approved or disapproved by
2101 a majority vote of the council.

2102 (2) The materials shall be reviewed and approved by the council on or before July 1st of

- 2103 each year and may from time to time be changed or amended by majority vote of the
2104 council.
- 2105 (3) The basic training in a certified academy:
- 2106 (a) shall be appropriate for the basic training of peace officers in the techniques of law
2107 enforcement in the discretion of the director;
- 2108 (b) may not include the use of chokeholds, carotid restraints, or any act that impedes the
2109 breathing or circulation of blood likely to produce a loss of consciousness, as a valid
2110 method of restraint; and
- 2111 (c) shall include instruction on identifying, responding to, and reporting a criminal
2112 offense that is motivated by a personal attribute as that term is defined in Section
2113 76-3-203.14.
- 2114 (4)(a) All peace officers shall satisfactorily complete the basic training course or the
2115 waiver process provided for in this chapter as well as annual certified training of not
2116 less than 40 hours as the director, with the advice and consent of the council, directs.
- 2117 (b) A peace officer who fails to satisfactorily complete the annual training described in
2118 Subsection (4)(a) shall automatically be prohibited from exercising peace officer
2119 powers until any deficiency is made up.
- 2120 (c) The annual training described in Subsection (4)(a) shall include training focused on
2121 arrest control and de-escalation training.
- 2122 (5)(a) Beginning July 1, 2024, all peace officers who are currently employed shall
2123 participate in a training at least every three years focused on the following:
- 2124 (i) mental health and other crisis intervention responses;
- 2125 (ii) intervention responses for mental illnesses, autism spectrum disorder, and other
2126 neurological and developmental disorders; and
- 2127 (iii) responses to sexual traumas and investigations of sexual assault and sexual abuse
2128 in accordance with Section 53-10-908.
- 2129 (b) Any training in which a peace officer participates as described in Subsection (5)(a)
2130 shall count toward the peace officer's 40-hour required annual training described in
2131 Subsection (4)(a) for the year in which the peace officer participated in the training.
- 2132 (6)(a) The director or the director's designee, in coordination with the council, shall
2133 promulgate the standards for the trainings described in Subsection (4).
- 2134 (b) The chief law enforcement officer or executive officer of the peace officer's
2135 employing agency shall determine if a peace officer has complied with the standards
2136 established under Subsection (6)(a).

2137 (c) The chief law enforcement officer or executive officer of each law enforcement
 2138 agency shall annually report to the State Commission on Criminal and Juvenile
 2139 Justice created in Section 63M-7-201 on peace officers' compliance with the training
 2140 requirements described in Subsection (5)(a).

2141 Section 32. Section **63C-18-202** is amended to read:

2142 **63C-18-202 (Effective 05/06/26) (Repealed 12/31/26). Committee established --**
 2143 **Members.**

2144 (1) As used in this section, "department" means the Department of Health and Human
 2145 Services created in Section 26B-1-201.

2146 ~~[(+)]~~ (2) Under the Utah Behavioral Health Commission created in Section 26B-5-702, there
 2147 is created the Behavioral Health Crisis Response Committee~~[-, composed of the~~
 2148 ~~following members:]~~ .

2149 ~~[(a) the executive director of the Huntsman Mental Health Institute;]~~

2150 ~~[(b) the governor or the governor's designee;]~~

2151 ~~[(c) the director of the Office of Substance Use and Mental Health;]~~

2152 ~~[(d) one representative of the Office of the Attorney General, appointed by the attorney~~
 2153 ~~general;]~~

2154 ~~[(e) the executive director of the Department of Health and Human Services or the~~
 2155 ~~executive director's designee;]~~

2156 ~~[(f) one member of the public, appointed by the chair of the committee and approved by~~
 2157 ~~the committee;]~~

2158 ~~[(g) two individuals who are mental or behavioral health clinicians licensed to practice~~
 2159 ~~in the state, appointed by the chair of the committee and approved by the committee,~~
 2160 ~~at least one of whom is an individual who:]~~

2161 ~~[(i) is licensed as a physician under:]~~

2162 ~~[(A) Title 58, Chapter 67, Utah Medical Practice Act;]~~

2163 ~~[(B) Title 58, Chapter 67b, Interstate Medical Licensure Compact; or]~~

2164 ~~[(C) Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; and]~~

2165 ~~[(ii) is board eligible for a psychiatry specialization recognized by the American~~
 2166 ~~Board of Medical Specialists or the American Osteopathic Association's Bureau of~~
 2167 ~~Osteopathic Specialists;]~~

2168 ~~[(h) one individual who represents a county of the first or second class, appointed by the~~
 2169 ~~Utah Association of Counties;]~~

2170 ~~[(i) one individual who represents a county of the third, fourth, or fifth class, appointed~~

- 2171 by the Utah Association of Counties;]
- 2172 [(j) one individual who represents the Utah Hospital Association, appointed by the chair
2173 of the committee;]
- 2174 [(k) one individual who represents law enforcement, appointed by the chair of the
2175 committee;]
- 2176 [(l) one individual who has lived with a mental health disorder, appointed by the chair of
2177 the committee;]
- 2178 [(m) one individual who represents an integrated health care system that:]
2179 [(i) is not affiliated with the chair of the committee; and]
2180 [(ii) provides inpatient behavioral health services and emergency room services to
2181 individuals in the state;]
- 2182 [(n) one individual who represents a Medicaid accountable care organization, as defined
2183 in Section 26B-3-219, with a statewide membership base;]
- 2184 [(o) one individual who represents 911 call centers and public safety answering points,
2185 appointed by the chair of the committee;]
- 2186 [(p) one individual who represents Emergency Medical Services, appointed by the chair
2187 of the committee;]
- 2188 [(q) one individual who represents the mobile wireless service provider industry,
2189 appointed by the chair of the committee;]
- 2190 [(r) one individual who represents rural telecommunications providers, appointed by the
2191 chair of the committee;]
- 2192 [(s) one individual who represents voice over internet protocol and land line providers,
2193 appointed by the chair of the committee; and]
- 2194 [(t) one individual who represents the Utah League of Cities and Towns, appointed by
2195 the Utah League of Cities and Towns.]
- 2196 (3) The department, in consultation with the Utah Behavioral Health Commission, shall
2197 make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking
2198 Act, to establish the membership of the committee.
- 2199 [(2)] (4)(a) [Except as provided in Subsection (2)(d), the executive director of the
2200 Huntsman Mental Health Institute is the chair of the committee.] The committee shall
2201 annually select one of the committee's members to serve as chair and two of the
2202 committee's members to serve as vice chairs.
- 2203 [(b) The chair of the committee shall appoint a member of the committee to serve as the
2204 vice chair of the committee, with the approval of the committee.]

- 2205 ~~[(e)]~~ (b) The chair of the committee shall set the agenda for each committee meeting.
- 2206 ~~[(d)]~~ If the executive director of the Huntsman Mental Health Institute is not available to
- 2207 serve as the chair of the committee, the committee shall elect a chair from among the
- 2208 committee's members.]
- 2209 ~~[(3)]~~ (5)(a) A majority of the members of the committee constitutes a quorum.
- 2210 (b) The action of a majority of a quorum constitutes the action of the committee.
- 2211 ~~[(4)]~~ (6) A member may not receive compensation, benefits, per diem, or travel expenses for
- 2212 the member's service on the committee.
- 2213 ~~[(5)]~~ (7) The ~~[Office of the Attorney General]~~ Office of Substance Use and Mental Health
- 2214 shall provide staff support to the committee.
- 2215 Section 33. Section **63C-18-203** is amended to read:
- 2216 **63C-18-203 (Effective 05/06/26) (Repealed 12/31/26). Committee duties.**
- 2217 ~~[(1)]~~ Under the direction of the Utah Behavioral Health Commission created in Section
- 2218 ~~26B-5-702, the committee shall:]~~
- 2219 ~~[(a)]~~ identify a method to integrate existing local mental health crisis lines to ensure each
- 2220 individual who accesses a local mental health crisis line is connected to a qualified
- 2221 mental or behavioral health professional, regardless of the time, date, or number of
- 2222 individuals trying to simultaneously access the local mental health crisis line;]
- 2223 ~~[(b)]~~ study how to establish and implement a statewide mental health crisis line and a
- 2224 statewide warm line, including identifying:]
- 2225 ~~[(i)]~~ a statewide phone number or other means for an individual to easily access the
- 2226 statewide mental health crisis line, including a short code for text messaging and a
- 2227 three-digit number for calls;]
- 2228 ~~[(ii)]~~ a statewide phone number or other means for an individual to easily access the
- 2229 statewide warm line, including a short code for text messaging and a three-digit
- 2230 number for calls;]
- 2231 ~~[(iii)]~~ a supply of:]
- 2232 ~~[(A)]~~ qualified mental or behavioral health professionals to staff the statewide
- 2233 mental health crisis line; and]
- 2234 ~~[(B)]~~ qualified mental or behavioral health professionals or certified peer support
- 2235 specialists to staff the statewide warm line; and]
- 2236 ~~[(iv)]~~ a funding mechanism to operate and maintain the statewide mental health crisis
- 2237 line and the statewide warm line;]
- 2238 ~~[(e)]~~ coordinate with local mental health authorities in fulfilling the committee's duties

- 2239 described in Subsections (1)(a) and (b);]
- 2240 [(d) recommend standards for the certifications described in Section 26B-5-610; and]
- 2241 [(e) coordinate services provided by local mental health crisis lines and mobile crisis
- 2242 outreach teams, as defined in Section 62A-15-1401.]
- 2243 [(2)] (1) The committee shall study and make recommendations regarding:
- 2244 [(a) crisis line practices and needs, including:]
- 2245 [(i) quality and timeliness of service;]
- 2246 [(ii) service volume projections;]
- 2247 [(iii) a statewide assessment of crisis line staffing needs, including required
- 2248 certifications; and]
- 2249 [(iv) a statewide assessment of technology needs;]
- 2250 [(b) primary duties performed by crisis line workers;]
- 2251 [(c) coordination or redistribution of secondary duties performed by crisis line workers,
- 2252 including responding to non-emergency calls;]
- 2253 [(d)] (a) operating the statewide 988 hotline:
- 2254 (i) in accordance with federal law;
- 2255 (ii) to ensure the efficient and effective routing of calls to an appropriate crisis center;
- 2256 and
- 2257 (iii) to directly respond to calls with trained personnel and the provision of acute
- 2258 mental health, crisis outreach, and stabilization services;
- 2259 [(e)] (b) opportunities to increase operational and technological efficiencies and
- 2260 effectiveness between 988 and 911, utilizing current technology;
- 2261 [(f)] (c) needs for interoperability partnerships and policies related to 911 call transfers
- 2262 and public safety responses;
- 2263 [(g)] (d) standards for statewide mobile crisis outreach teams, including:
- 2264 (i) current models and projected needs;
- 2265 (ii) quality and timeliness of service;
- 2266 (iii) hospital and jail diversions; and
- 2267 (iv) staffing and certification;
- 2268 [(h)] (e) resource centers, including:
- 2269 (i) current models and projected needs; and
- 2270 (ii) quality and timeliness of service;
- 2271 [(i)] (f) policy considerations related to whether the state should:
- 2272 (i) manage, operate, and pay for a complete behavioral health system; or

- 2273 (ii) create partnerships with private industry; and
 2274 [~~(j)~~] (g) sustainable funding source alternatives, including:
 2275 (i) charging a 988 fee, including a recommendation on the fee amount;
 2276 (ii) General Fund appropriations;
 2277 (iii) other government funding options;
 2278 (iv) private funding sources;
 2279 (v) grants;
 2280 (vi) insurance partnerships, including coverage for support and treatment after initial
 2281 call and triage; and
 2282 (vii) other funding resources.
- 2283 (2) The committee shall monitor the effectiveness, quality, volume, and efficiency of the
 2284 statewide 988 crisis line.
- 2285 (3) The committee shall monitor crisis services throughout the state and make
 2286 recommendations for strategies for the expansion and continuous improvement of
 2287 quality standards for crisis services.
- 2288 [~~(3)~~] (4) The committee may conduct other business related to the committee's duties
 2289 described in this section.
- 2290 [~~(4)~~] (5) The committee shall consult with the Office of Substance Use and Mental Health
 2291 and make recommendations to the Utah Behavioral Health Commission regarding:
 2292 (a) the standards and operation of the statewide mental health crisis line and the
 2293 statewide warm line, in accordance with Section 26B-5-610; and
 2294 (b) the incorporation of the statewide mental health crisis line and the statewide warm
 2295 line into behavioral health systems throughout the state.
- 2296 Section 34. Section **63I-1-226** is amended to read:
 2297 **63I-1-226 (Effective 05/06/26). Repeal dates: Titles 26 through 26B.**
- 2298 (1) Subsection 26B-1-204(2)(g), regarding the Youth Electronic Cigarette, Marijuana, and
 2299 Other Drug Prevention Committee, is repealed July 1, 2030.
- 2300 (2) Subsection 26B-1-204(2)(h), regarding the Primary Care Grant Committee, is repealed
 2301 July 1, 2035.
- 2302 (3) Section 26B-1-315, Medicaid ACA Fund, is repealed July 1, 2034.
- 2303 (4) Section 26B-1-318, Brain and Spinal Cord Injury Fund, is repealed July 1, 2029.
- 2304 (5) Section 26B-1-402, Rare Disease Advisory Council Grant Program -- Creation --
 2305 Reporting, is repealed July 1, 2026.
- 2306 (6) Section 26B-1-409, Utah Digital Health Service Commission -- Creation -- Membership

- 2307 -- Duties, is repealed July 1, 2025.
- 2308 (7) Section 26B-1-410, Primary Care Grant Committee, is repealed July 1, 2035.
- 2309 (8) Section 26B-1-417, Brain and Spinal Cord Injury Advisory Committee -- Membership
- 2310 -- Duties, is repealed July 1, 2029.
- 2311 (9) Section 26B-1-422, Early Childhood Utah Advisory Council -- Creation --
- 2312 Compensation -- Duties, is repealed July 1, 2029.
- 2313 (10) Section 26B-1-425, Utah Health Workforce Advisory Council -- Creation and
- 2314 membership, is repealed July 1, 2027.
- 2315 (11) Section 26B-1-428, Youth Electronic Cigarette, Marijuana, and Other Drug Prevention
- 2316 Committee and Program -- Creation -- Membership -- Duties, is repealed July 1, 2030.
- 2317 (12) Section 26B-1-430, Coordinating Council for Persons with Disabilities -- Policy
- 2318 regarding services to individuals with disabilities -- Creation -- Membership --
- 2319 Expenses, is repealed July 1, 2027.
- 2320 (13) Section 26B-1-432, Newborn Hearing Screening Committee, is repealed July 1, 2026.
- 2321 (14) Section 26B-2-407, Drinking water quality in child care centers, is repealed July 1,
- 2322 2027.
- 2323 (15) Subsection 26B-3-107(9), regarding reimbursement for dental hygienists, is repealed
- 2324 July 1, 2028.
- 2325 (16) Section 26B-3-136, Children's Health Care Coverage Program, is repealed July 1, 2025.
- 2326 (17) Section 26B-3-137, Reimbursement for diabetes prevention program, is repealed June
- 2327 30, 2027.
- 2328 (18) Subsection 26B-3-213(2)(b), regarding consultation with the Behavioral Health Crisis
- 2329 Response Committee, is repealed December 31, 2026.
- 2330 (19) Section 26B-3-302, DUR Board -- Creation and membership -- Expenses, is repealed
- 2331 July 1, 2027.
- 2332 (20) Section 26B-3-303, DUR Board -- Responsibilities, is repealed July 1, 2027.
- 2333 (21) Section 26B-3-304, Confidentiality of records, is repealed July 1, 2027.
- 2334 (22) Section 26B-3-305, Drug prior approval program, is repealed July 1, 2027.
- 2335 (23) Section 26B-3-306, Advisory committees, is repealed July 1, 2027.
- 2336 (24) Section 26B-3-307, Retrospective and prospective DUR, is repealed July 1, 2027.
- 2337 (25) Section 26B-3-308, Penalties, is repealed July 1, 2027.
- 2338 (26) Section 26B-3-309, Immunity, is repealed July 1, 2027.
- 2339 (27) Title 26B, Chapter 3, Part 5, Inpatient Hospital Assessment, is repealed July 1, 2034.
- 2340 (28) Title 26B, Chapter 3, Part 6, Medicaid Expansion Hospital Assessment, is repealed

- 2341 July 1, 2034.
- 2342 (29) Title 26B, Chapter 3, Part 7, Hospital Provider Assessment, is repealed July 1, 2028.
- 2343 (30) Section 26B-3-910, Alternative eligibility -- Report -- Alternative Eligibility
- 2344 Expendable Revenue Fund, is repealed July 1, 2028.
- 2345 (31) Section 26B-4-710, Rural residency training program, is repealed July 1, 2025.
- 2346 (32) Subsection 26B-5-112(1)(b), regarding consultation with the Behavioral Health Crisis
- 2347 Response Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2348 (33) Subsection 26B-5-112(5)(b), regarding consultation with the Behavioral Health Crisis
- 2349 Response Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2350 (34) Section 26B-5-112.5, Mobile Crisis Outreach Team Grant Program, is repealed
- 2351 December 31, 2026.
- 2352 (35) Section 26B-5-114, Behavioral Health Receiving Center Grant Program, is repealed
- 2353 December 31, 2026.
- 2354 (36) Section 26B-5-118, Collaborative care grant program, is repealed December 31, 2024.
- 2355 (37) Section 26B-5-120, Virtual crisis outreach team grant program, is repealed December
- 2356 31, 2026.
- 2357 (38) Subsection 26B-5-609(1)(a), regarding the Behavioral Health Crisis Response
- 2358 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2359 (39) Subsection 26B-5-609(3)(b), regarding the Behavioral Health Crisis Response
- 2360 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2361 (40) Subsection 26B-5-610(1)(b), regarding the Behavioral Health Crisis Response
- 2362 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2363 (41) Subsection 26B-5-610(2)(b)(ii), regarding the Behavioral Health Crisis Response
- 2364 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2365 (42) Section 26B-5-612, Integrated behavioral health care grant programs, is repealed
- 2366 December 31, 2025.
- 2367 (43) Title 26B, Chapter 5, Part 7, Utah Behavioral Health Commission, is repealed July 1,
- 2368 2029.
- 2369 (44) Subsection 26B-5-704(2)(a), regarding the Behavioral Health Crisis Response
- 2370 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2371 (45) Title 26B, Chapter 5, Part 8, Utah [~~Substance Use and Mental Health Advisory~~] Utah
- 2372 Behavioral Health Policy Review Committee, is repealed [~~January 1, 2033~~] July 1, 2029.
- 2373 (46) Section 26B-7-119, Hepatitis C Outreach Pilot Program, is repealed July 1, 2028.
- 2374 (47) Section 26B-7-122, Communication Habits to reduce Adolescent Threats Pilot

- 2375 Program, is repealed July 1, 2029.
- 2376 (48) Section 26B-7-123, Report on CHAT campaign, is repealed July 1, 2029.
- 2377 (49) Title 26B, Chapter 8, Part 5, Utah Health Data Authority, is repealed July 1, 2026.
- 2378 Section 35. Section **63I-1-232** is amended to read:
- 2379 **63I-1-232 (Effective 05/06/26). Repeal dates: Title 32B.**
- 2380 [~~(1) Subsection 32B-2-306(1)(a), regarding the Utah Substance Use and Mental Health~~
- 2381 ~~Advisory Committee, is repealed January 1, 2033.]~~
- 2382 [~~(2) Subsection 32B-2-306(4)(a), regarding a duty of the Utah Substance Use and Mental~~
- 2383 ~~Health Advisory Committee, is repealed January 1, 2033.]~~
- 2384 [~~(3) Subsection 32B-2-306(5)(b), regarding a submission to the Utah Substance Use and~~
- 2385 ~~Mental Health Advisory Committee, is repealed January 1, 2033.]~~
- 2386 [~~(4) Subsection 32B-2-402(1)(b), regarding the Utah Substance Use and Mental Health~~
- 2387 ~~Advisory Committee, is repealed January 1, 2033.] Subsection 32B-2-402(1)(d),~~
- 2388 regarding the Behavioral Health Commission, is repealed July 1, 2029.
- 2389 Section 36. Section **63I-1-263** is amended to read:
- 2390 **63I-1-263 (Effective 05/06/26). Repeal dates: Titles 63A to 63O.**
- 2391 (1) Title 63C, Chapter 4a, Constitutional and Federalism Defense Act, is repealed July 1,
- 2392 2028.
- 2393 (2) Title 63C, Chapter 18, Behavioral Health Crisis Response Committee, is repealed [
- 2394 ~~December 31, 2026] July 1, 2029.~~
- 2395 (3) Title 63C, Chapter 25, State Finance Review Commission, is repealed July 1, 2027.
- 2396 (4) Title 63C, Chapter 27, Cybersecurity Commission, is repealed July 1, 2032.
- 2397 (5) Title 63C, Chapter 28, Ethnic Studies Commission, is repealed July 1, 2026.
- 2398 (6) Title 63C, Chapter 31, State Employee Benefits Advisory Commission, is repealed July
- 2399 1, 2028.
- 2400 (7) Section 63G-6a-805, Purchase from community rehabilitation programs, is repealed
- 2401 July 1, 2026.
- 2402 (8) Title 63G, Chapter 21, Agreements to Provide State Services, is repealed July 1, 2028.
- 2403 (9) Title 63H, Chapter 4, Heber Valley Historic Railroad Authority, is repealed July 1, 2029.
- 2404 (10) Subsection 63J-1-602.2(16), related to the Communication Habits to reduce
- 2405 Adolescent Threats (CHAT) Pilot Program, is repealed July 1, 2029.
- 2406 (11) Subsection 63J-1-602.2(26), regarding the Utah Seismic Safety Commission, is
- 2407 repealed January 1, 2025.
- 2408 (12) Section 63L-11-204, Canyon resource management plan, is repealed July 1, 2027.

- 2409 (13) Title 63L, Chapter 11, Part 4, Resource Development Coordinating Committee, is
2410 repealed July 1, 2027.
- 2411 (14) Title 63M, Chapter 7, Part 7, Domestic Violence Offender Treatment Board, is
2412 repealed July 1, 2027.
- 2413 (15) Section 63M-7-902, Creation -- Membership -- Terms -- Vacancies -- Expenses, is
2414 repealed July 1, 2029.
- 2415 (16) Title 63M, Chapter 11, Utah Commission on Aging, is repealed July 1, 2026.
- 2416 (17) Title 63N, Chapter 2, Part 2, Enterprise Zone Act, is repealed July 1, 2028.
- 2417 (18) Subsection 63N-2-511(1)(b), regarding the Board of Tourism Development, is
2418 repealed July 1, 2030.
- 2419 (19) Section 63N-2-512, Hotel Impact Mitigation Fund, is repealed July 1, 2028.
- 2420 (20) Title 63N, Chapter 3, Part 9, Strategic Innovation Grant Pilot Program, is repealed July
2421 1, 2027.
- 2422 (21) Title 63N, Chapter 3, Part 11, Manufacturing Modernization Grant Program, is
2423 repealed July 1, 2028.
- 2424 (22) Title 63N, Chapter 4, Part 4, Rural Employment Expansion Program, is repealed July
2425 1, 2028.
- 2426 (23) Section 63N-4-804, Rural Opportunity Advisory Committee, is repealed July 1, 2027.
- 2427 (24) Subsection 63N-4-805(5)(b), regarding the Rural Employment Expansion Program, is
2428 repealed July 1, 2028.
- 2429 (25) Subsection 63N-7-101(1), regarding the Board of Tourism Development, is repealed
2430 July 1, 2030.
- 2431 (26) Subsection 63N-7-102(3)(c), regarding a requirement for the Utah Office of Tourism
2432 to receive approval from the Board of Tourism Development, is repealed July 1, 2030.
- 2433 (27) Title 63N, Chapter 7, Part 2, Board of Tourism Development, is repealed July 1, 2030.
2434 Section 37. Section **64-13-45** is amended to read:
2435 **64-13-45 (Effective 05/06/26). Department reporting requirements.**
- 2436 (1) As used in this section:
- 2437 (a) "Biological sex at birth" means the same as that term is defined in Section 26B-8-101.
- 2438 (b)(i) "In-custody death" means an inmate death that occurs while the inmate is in the
2439 custody of the department.
- 2440 (ii) "In-custody death" includes an inmate death that occurs while the inmate is:
- 2441 (A) being transported for medical care; or
- 2442 (B) receiving medical care outside of a correctional facility, other than a county

- 2443 jail.
- 2444 (c) "Inmate" means an individual who is processed or booked into custody or housed in
2445 the department or a correctional facility other than a county jail.
- 2446 (d) "Opiate" means the same as that term is defined in Section 58-37-2.
- 2447 (e) "Transgender inmate" means the same as that term is defined in Section 64-13-7.
- 2448 (2) The department shall submit a report to the Commission on Criminal and Juvenile
2449 Justice created in Section 63M-7-201 before June 15 of each year that includes:
- 2450 (a) the number of in-custody deaths that occurred during the preceding calendar year,
2451 including:
- 2452 (i) the known, or discoverable on reasonable inquiry, causes and contributing factors
2453 of each of the in-custody deaths described in Subsection (2)(a); and
- 2454 (ii) the department's policy for notifying an inmate's next of kin after the inmate's
2455 in-custody death;
- 2456 (b) the department policies, procedures, and protocols:
- 2457 (i) for treatment of an inmate experiencing withdrawal from alcohol or substance use,
2458 including use of opiates;
- 2459 (ii) that relate to the department's provision, or lack of provision, of medications used
2460 to treat, mitigate, or address an inmate's symptoms of withdrawal, including
2461 methadone and all forms of buprenorphine and naltrexone; and
- 2462 (iii) that relate to screening, assessment, and treatment of an inmate for a substance
2463 use disorder or mental health disorder;
- 2464 (c) the number of inmates who gave birth and were restrained in accordance with
2465 Section 64-13-46, including:
- 2466 (i) the types of restraints used; and
- 2467 (ii) whether the use of restraints was to prevent escape or to ensure the safety of the
2468 inmate, medical or corrections staff, or the public;
- 2469 (d) the number of transgender inmates that are assigned to a living area with inmates
2470 whose biological sex at birth do not correspond with the transgender inmate's
2471 biological sex at birth in accordance with Section 64-13-7, including:
- 2472 (i) the results of the individualized security analysis conducted for each transgender
2473 inmate in accordance with Subsection 64-13-7(5)(a); and
- 2474 (ii) a detailed explanation regarding how the security conditions described in
2475 Subsection 64-13-7(5)(b) are met for each transgender inmate;
- 2476 (e) the number of transgender inmates that were:

- 2477 (i) assigned to a living area with inmates whose biological sex at birth do not
 2478 correspond with the transgender inmate's biological sex at birth; and
 2479 (ii) removed and assigned to a living area with inmates whose biological sex at birth
 2480 corresponds with the transgender inmate's biological sex at birth in accordance
 2481 with Subsection 64-13-7(6); and
 2482 (f) any report the department provides or is required to provide under federal law or
 2483 regulation relating to inmate deaths.
- 2484 (3) The Commission on Criminal and Juvenile Justice shall:
- 2485 (a) compile the information from the reports described in Subsection (2);
 2486 (b) omit or redact any identifying information of an inmate in the compilation to the
 2487 extent omission or redaction is necessary to comply with state and federal law ; and
 2488 (c) submit the compilation to the Law Enforcement and Criminal Justice Interim
 2489 Committee and the [~~Utah Substance Use and Mental Health Advisory Committee~~]
 2490 Utah Behavioral Health Commission before November 1 of each year.
- 2491 (4) The Commission on Criminal and Juvenile Justice may not provide access to or use the
 2492 department's policies, procedures, or protocols submitted under this section in a manner
 2493 or for a purpose not described in this section.

2494 Section 38. Section **77-18-106** is amended to read:

2495 **77-18-106 (Effective 05/06/26). Treatment at the Utah State Hospital --**

2496 **Condition of probation or stay of sentence.**

2497 The court may order as a condition of probation, or a stay of sentence, that the defendant
 2498 be voluntarily admitted to the custody of the Office of Substance Use and Mental Health for
 2499 treatment at the Utah State Hospital only if the superintendent of the Utah State Hospital, or
 2500 the superintendent's designee, certifies to the court that:

- 2501 (1) the defendant is appropriate for, and can benefit from, treatment at the Utah State
 2502 Hospital;
 2503 (2) there is space at the Utah State Hospital for treatment of the defendant; and
 2504 (3) individuals described in Subsection [~~26B-5-306(2)(g)~~] 26B-5-306(3)(g) are receiving
 2505 priority for treatment over the defendant.

2506 Section 39. **Effective Date.**

2507 This bill takes effect on May 6, 2026.