

Steve Eliason proposes the following substitute bill:

**Behavioral and Mental Health Amendments**

2026 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Steve Eliason**

Senate Sponsor:

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**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 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 Health Advisory Committee;

- 29           ▸ changes the name of the Utah Substance Use and Mental Health Advisory Committee to  
30 the Utah Behavioral health Policy Review Committee and amends the committee's  
31 duties and other related provisions;
- 32           ▸ requires the commission's Legislative Policy Committee to form a working group to  
33 investigate and make recommendations to the Legislature regarding a statewide central  
34 authority for coordinating behavioral health initiatives;
- 35           ▸ creates a family outreach specialist within the department to:
- 36                 • engage with the family of an individual who has recently died by suicide or overdose;  
37 and
- 38                 • assist the medical examiner with suicide intervention, prevention, and postvention;
- 39           ▸ makes changes to responsibilities related to the Underage Drinking Prevention Media and  
40 Education Campaign Restricted Account;
- 41           ▸ amends the duties and membership of the Behavioral Health Crisis Response Committee;
- 42           ▸ defines terms; and
- 43           ▸ makes technical and conforming changes.

44 **Money Appropriated in this Bill:**

45           This bill appropriates \$26,950,700 in operating and capital budgets for fiscal year 2027, all  
46 of which is from the General Fund.

47           This bill appropriates \$88,000,000 in capital project funds for fiscal year 2027, all of which is  
48 from the General Fund.

49 **Other Special Clauses:**

50           None

51 **Utah Code Sections Affected:**

52 AMENDS:

53           **17-72-408 (Effective 05/06/26)**, as renumbered and amended by Laws of Utah 2025,  
54 First Special Session, Chapter 13

55           **26B-1-325 (Effective 05/06/26)**, as last amended by Laws of Utah 2023, Chapter 33 and  
56 renumbered and amended by Laws of Utah 2023, Chapter 305

57           **26B-1-425 (Effective 05/06/26) (Repealed 07/01/27)**, as last amended by Laws of Utah  
58 2024, Chapter 245

59           **26B-1-427 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapter 494

60           **26B-1-428 (Effective 05/06/26) (Repealed 07/01/30)**, as last amended by Laws of Utah  
61 2025, Chapter 366

62           **26B-2-135 (Effective 05/06/26)**, as enacted by Laws of Utah 2025, Chapter 499

63           **26B-5-121 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, First Special  
64           Session, Chapter 16

65           **26B-5-326 (Effective 05/06/26)**, as renumbered and amended by Laws of Utah 2023,  
66           Chapter 308

67           **26B-5-331 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 118,  
68           277, 340, and 470

69           **26B-5-332 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 46, 118

70           **26B-5-351 (Effective 05/06/26)**, as renumbered and amended by Laws of Utah 2023,  
71           Chapter 308

72           **26B-5-372 (Effective 05/06/26)**, as renumbered and amended by Laws of Utah 2023,  
73           Chapter 308

74           **26B-5-611 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245,  
75           250

76           **26B-5-703 (Effective 05/06/26) (Repealed 07/01/29)**, as enacted by Laws of Utah 2024,  
77           Chapter 245

78           **26B-5-704 (Effective 05/06/26) (Repealed 07/01/29)**, as enacted by Laws of Utah 2024,  
79           Chapter 245

80           **26B-5-705 (Effective 05/06/26) (Repealed 07/01/29)**, as enacted by Laws of Utah 2024,  
81           Chapter 245

82           **26B-5-801 (Effective 05/06/26) (Repealed 01/01/33)**, as last amended by Laws of Utah  
83           2025, First Special Session, Chapter 9

84           **26B-5-802 (Effective 05/06/26) (Repealed 01/01/33)**, as renumbered and amended by  
85           Laws of Utah 2024, Chapter 245

86           **26B-5-803 (Effective 05/06/26) (Repealed 01/01/33)**, as renumbered and amended by  
87           Laws of Utah 2024, Chapter 245

88           **32B-2-306 (Effective 05/06/26) (Partially Repealed 01/01/33)**, as last amended by Laws  
89           of Utah 2024, Chapters 245, 385

90           **32B-2-402 (Effective 05/06/26) (Partially Repealed 01/01/33)**, as last amended by Laws  
91           of Utah 2025, First Special Session, Chapter 16

92           **32B-2-404 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245,  
93           385

94           **32B-2-405 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245,  
95           385

96           **32B-7-305 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapter 245

97 **63C-18-202 (Effective 05/06/26) (Repealed 12/31/26)**, as last amended by Laws of Utah  
 98 2024, Chapter 245

99 **63C-18-203 (Effective 05/06/26) (Repealed 12/31/26)**, as last amended by Laws of Utah  
 100 2025, Chapter 277

101 **63I-1-226 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 47, 277  
 102 and 366

103 **63I-1-232 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Third Special  
 104 Session, Chapter 5

105 **63I-1-263 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 391,  
 106 512

107 **64-13-45 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245, 341

108 **77-18-106 (Effective 05/06/26)**, as last amended by Laws of Utah 2023, Chapter 330

109 ENACTS:

110 **26B-4-1103 (Effective 05/06/26)**, Utah Code Annotated 1953

111 **26B-4-1104 (Effective 05/06/26)**, Utah Code Annotated 1953

112 **26B-5-122 (Effective 05/06/26)**, Utah Code Annotated 1953

113 **26B-5-384 (Effective 05/06/26)**, Utah Code Annotated 1953

114 **26B-8-233 (Effective 05/06/26)**, Utah Code Annotated 1953

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

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

118 **17-72-408 (Effective 05/06/26). County jail reporting requirements.**

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

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

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

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

126 (d) the number of prisoners held in the county jail each month on behalf of each of the  
 127 following entities:

128 (i) the Bureau of Indian Affairs;

129 (ii) a state prison;

130 (iii) a federal prison;

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

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

- 199 (c) submit the compilation to the Law Enforcement and Criminal Justice Interim  
 200 Committee and the [~~Utah Substance Use and Mental Health Advisory Committee~~]  
 201 Utah Behavioral Health Commission before November 1 of each year; and  
 202 (d) submit the compilation to the protection and advocacy agency designated by the  
 203 governor before November 1 of each year.
- 204 (4) The commission may not provide access to or use a county jail's policies, procedures, or  
 205 protocols submitted under this section in a manner or for a purpose not described in this  
 206 section.
- 207 (5) Upon request, a county jail shall make a report, including only the names and causes of  
 208 death of deceased inmates and the facility in which the deceased inmates were being  
 209 held in custody, available to the public.

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

211 **26B-1-325 (Effective 05/06/26). Governor's Suicide Prevention Fund.**

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

- 233 (d) standards for evaluating the effectiveness of a project proposed in a grant  
 234 application; and
- 235 (e) support offered by the office to complete a grant application.
- 236 (7) The Office of Substance Use and Mental Health shall:
- 237 (a) review a grant application for completeness;
- 238 (b) make a recommendation to the governor or the governor's designee regarding a grant  
 239 application;
- 240 (c) send a grant application to the governor or the governor's designee for evaluation and  
 241 approval or rejection;
- 242 (d) inform a grant applicant of the governor or the governor's designee's determination  
 243 regarding the grant application; and
- 244 (e) direct the fund administrator to release funding for grant applications approved by  
 245 the governor or the governor's designee.
- 246 (8) The state treasurer shall invest the money in the fund under Title 51, Chapter 7, State  
 247 Money Management Act, except that all interest or other earnings derived from money  
 248 in the fund shall be deposited into the fund.
- 249 (9) Money in the fund may not be used for the Office of the Governor's administrative  
 250 expenses that are normally provided for by legislative appropriation.
- 251 (10) ~~The [governor or the governor's designee may authorize the expenditure of fund money]~~  
 252 Office of Substance Use and Mental Health shall administer the fund in accordance with  
 253 this section.
- 254 (11) ~~The [governor]~~ Office of Substance Use and Mental Health shall make an annual report  
 255 to the Legislature regarding the status of the fund, including a report on the contributions  
 256 received, expenditures made, and programs and services funded.
- 257 Section 3. Section **26B-1-425** is amended to read:
- 258 **26B-1-425 (Effective 05/06/26) (Repealed 07/01/27). Utah Health Workforce**  
 259 **Advisory Council -- Creation and membership.**
- 260 (1) There is created within the department the Utah Health Workforce Advisory Council.
- 261 (2) The council shall be comprised of at least 14 but not more than 19 members.
- 262 (3) The following are members of the council:
- 263 (a) the executive director or that individual's designee;
- 264 (b) the executive director of the Department of Workforce Services or that individual's  
 265 designee;
- 266 (c) the commissioner of higher education of the Utah System of Higher Education or

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

- 301 (v) advise the Utah Board of Higher Education and the Legislature on the status and  
302 needs of the health workforce who are in training.
- 303 (8) The council shall provide information described in Subsections (7)(b)(ii) and (iii) to:  
304 (a) the Legislature;  
305 (b) the department;  
306 (c) the Department of Workforce Services;  
307 (d) the Department of Commerce;  
308 (e) the Utah Medical Education Council; and  
309 (f) any other entity the council deems appropriate upon the entity's request.
- 310 (9)(a) The Utah Medical Education Council created in Section 26B-4-706 is a  
311 subcommittee of the council.  
312 (b) The council may establish subcommittees to support the work of the council.  
313 (c) A member of the council shall chair a subcommittee created by the council.  
314 (d) Except for the Utah Medical Education Council, the chair of the subcommittee may  
315 appoint any individual to the subcommittee.
- 316 (10) For any report created by the council that pertains to any duty described in Subsection  
317 (7), the council shall:  
318 (a) provide the report to:  
319 (i) the department; and  
320 (ii) any appropriate legislative committee; and  
321 (b) post the report on the council's website.
- 322 (11) The executive director shall:  
323 (a) ensure the council has adequate staff to support the council and any subcommittee  
324 created by the council; and  
325 (b) provide any available information upon the council's request if:  
326 (i) that information is necessary for the council to fulfill a duty described in  
327 Subsection (7); and  
328 (ii) the department has access to the information.
- 329 (12) A member of the council or a subcommittee created by the council may not receive  
330 compensation or benefits for the member's service but may receive per diem and travel  
331 expenses as allowed in:  
332 (a) Section 63A-3-106;  
333 (b) Section 63A-3-107; and  
334 (c) rules made by the Division of Finance according to Sections 63A-3-106 and

335 63A-3-107.

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

337 **26B-1-427 (Effective 05/06/26). Alcohol Abuse Tracking Committee --Tracking**  
 338 **effects of abuse of alcoholic products.**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

359 (c) the frequency of meetings.

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

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

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

368 (c) the number of violations statewide of Title 32B, Alcoholic Beverage Control Act,

- 369 related to over-serving or over-consumption of an alcoholic product;
- 370 (d) the cost of social services provided by the state related to abuse of alcohol, including
- 371 services provided by the Division of Child and Family Services;
- 372 (e) the location where the alcoholic products that result in the violations or costs
- 373 described in Subsections (6)(a) through (d) are obtained; and
- 374 (f) any information the committee determines can be collected and relates to the abuse of
- 375 alcoholic products.

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

377 **26B-1-428 (Effective 05/06/26) (Repealed 07/01/30). Youth Electronic Cigarette,**

378 **Marijuana, and Other Drug Prevention Committee and Program -- Creation --**

379 **Membership -- Duties.**

380 (1) As used in this section:

- 381 (a) "Committee" means the Youth Electronic Cigarette, Marijuana, and Other Drug
- 382 Prevention Committee created in Section 26B-1-204.
- 383 (b) "Program" means the Youth Electronic Cigarette, Marijuana, and Other Drug
- 384 Prevention Program created in this section.

385 (2)(a) There is created within the department the Youth Electronic Cigarette, Marijuana,

386 and Other Drug Prevention Program.

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

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

395 (3)(a) The committee shall:

- 396 (i) advise the department on:
- 397 (A) preventing use of electronic cigarettes, marijuana, and other drugs by youth in
- 398 the state;
- 399 (B) developing the guidelines described in Subsection (2)(b)(i); and
- 400 (C) implementing the provisions of the program; and
- 401 (ii) meet quarterly or more frequently as determined necessary by the department's
- 402 designee under Subsection (3)(c)(ii).

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

437 other drugs; and  
 438 (ii) any collaborative efforts and partnerships established by the program with public  
 439 and private entities to prevent youth use of electronic cigarettes, marijuana, and  
 440 other drugs.

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

442 **26B-2-135 (Effective 05/06/26). Licensing behavioral health receiving centers.**

443 (1) As used in this section:

444 (a) "Diversion" means referral to a licensed center by a law enforcement agency, a law  
 445 enforcement officer, or by court order, including:

446 (i) under the terms of a diversion agreement described in Section 77-2-5;

447 (ii) voluntary referral as described in Section 26B-5-121;

448 (iii) as an alternative to penalties for a violation of probation or parole; or

449 (iv) any other court ordered or law enforcement facilitated alternative to criminal  
 450 penalties.

451 (b) "Diversion contact" means the prosecuting attorney that is a party to a diversion  
 452 agreement or the law enforcement agency or officer that facilitates the diversion.

453 (c) "Justice involved individual" means an individual who enters a treatment program  
 454 through diversion.

455 (d) "Licensed center" means a behavioral health receiving center licensed under this part.

456 (e) "Local mental health authority" means a local mental health authority described in  
 457 Section 17-77-301.

458 (f) "Responsible law enforcement agency" means the law enforcement agency that  
 459 employs a law enforcement officer that facilitates an individual's connection with a  
 460 licensed center as described in Section 26B-5-121.

461 (g) "Treatment program" means a licensed center's program for providing mental health  
 462 services to an individual experiencing a mental health crisis.

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

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

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

469 [(3)] (c) shall deposit any fees collected under Subsection [(2)] (2)(b) into the General  
 470 Fund as a dedicated credit to be used solely to pay for or offset the office's costs

- 471 incurred in performing the duties under this section.
- 472 (d) shall make rules that:
- 473 (i) identify circumstances under which a licensed center shall notify a responsible law
- 474 enforcement agency or diversion contacts of a justice involved individual's status
- 475 in a treatment program, including to provide notification:
- 476 (A) of treatment recommendations for the justice involved individual;
- 477 (B) if the justice involved individual is actively participating in the treatment
- 478 program;
- 479 (C) if the justice involved individual is resisting participation in the treatment
- 480 program;
- 481 (D) if applicable, if the justice involved individual violates the terms of diversion
- 482 agreement related to the justice involved individual's participation in the
- 483 treatment program;
- 484 (E) within 24 hours after the justice involved individual leaves the treatment
- 485 program, if the justice involved individual leaves the treatment program against
- 486 the licensed center's advice; and
- 487 (F) if applicable, of the name of the health care provider to whom the licensed
- 488 center referred the justice involved individual for further treatment; and
- 489 (ii) require a licensed center to adopt a policy to implement the notification
- 490 requirements described in Subsection (2)(d)(i).
- 491 (3)(a) Rules the office makes in accordance with Subsection (2)(d) may not require the
- 492 licensed center to notify a responsible law enforcement agency or diversion contact
- 493 of the status of a justice involved individual after the licensed center has referred the
- 494 justice involved individual to another health care provider.
- 495 (b) The office shall make the rules described in this Subsection (2) in coordination with
- 496 licensed centers, local mental health authorities, law enforcement agencies, and
- 497 diversion contacts.
- 498 Section 7. Section **26B-4-1103** is enacted to read:
- 499 **26B-4-1103 (Effective 05/06/26). Mental health and substance use disorder**
- 500 **screening -- Study -- Recommendations -- Report.**
- 501 (1) As used in this section:
- 502 (a) "Commission" means the State Commission on Criminal and Juvenile Justice created
- 503 in Section 63M-7-201.
- 504 (b) "Screening tool" means the evidence-based screening tool to screen an inmate for

- 505 substance use disorders described in Subsection 17-72-501(2)(e).
- 506 (2)(a) In collaboration with the commission, the department shall provide a list of
- 507 screening tools.
- 508 (b) The department shall ensure that a recommended screening tool described in
- 509 Subsection (2)(a) is:
- 510 (i) evidence-based, standardized, and validated; and
- 511 (ii) able to screen for substance use and mental health disorders and risk of substance
- 512 use and mental health disorders.

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

514 **26B-4-1104 (Effective 05/06/26). Mental health and substance use disorder**

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

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

- 539           (ii) first responders;
- 540           (iii) the courts;
- 541           (iv) the Division of Adult Probation and Parole;
- 542           (v) county pretrial and probation services;
- 543           (vi) local mental health authorities; or
- 544           (vii) other persons the department, in consultation with the commission, identifies in
- 545                 rules made in accordance with Subsection (5).

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

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

553 (4) The department shall make the form available for use by health care providers, first

554 responders, courts, and the Division of Adult Probation and Parole.

555 (5) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the

556 department, in consultation with the commission, shall make rules to:

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

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

567         **26B-5-121 (Effective 05/06/26). Voluntary referrals to substance use and mental**

568 **health services by first responders -- Immunity from liability -- Reporting -- Rulemaking.**

569 (1) As used in this section:

570 (a) "First responder" means:

- 571           (i) a law enforcement officer, as that term is defined in Section 53-13-103;
- 572           (ii) emergency medical service personnel, as that term is defined in Section 53-2d-101;

- 573 (iii) an emergency medical technician, as that term is defined in Section 53-2e-101;  
574 (iv) an advanced emergency medical technician, as that term is defined in Section  
575 53-2e-101;  
576 (v) a firefighter, as that term is defined in Section 53H-11-306; or  
577 (vi) a dispatcher, as that term is defined in Section 53-6-102.
- 578 (b) "Local services list" means a comprehensive list of local substance use or mental  
579 health services, as described in Subsections 17-77-201(5)(b)(iii) and 17-77-301(5)(c).
- 580 (2) As and when appropriate, a first responder is encouraged to offer a referral to substance  
581 use or mental health services to an individual who experiences an intentional or  
582 accidental overdose.
- 583 (3) If an individual expresses interest in substance use or mental health services, a first  
584 responder may, as appropriate:
- 585 (a) facilitate a real-time connection with an appropriate local service provider;  
586 (b) contact the statewide 988 crisis line for assistance; or  
587 (c) if the individual does not wish to speak with a service provider at that time, provide  
588 the individual with a physical copy or electronic copy of a local services list.
- 589 (4)(a) This section does not create a duty for a first responder to offer or provide a  
590 referral to substance use or mental health services.
- 591 (b) A first responder and an employer of a first responder are not liable under this  
592 section for a first responder's action or failure to act in regards to offering or  
593 providing a referral to substance use or mental health services as described in this  
594 section.
- 595 (c) This section does not affect any privilege or immunity from liability, exemption from  
596 law, ordinance, or rule, or any other benefit that applies to a first responder or an  
597 employer of a first responder.
- 598 (5)(a) If a first responder offers a referral to substance use or mental health services as  
599 described in this section, the first responder's employer shall report annually to the  
600 division the total number of individuals who accepted a referral from all first  
601 responders employed by the employer.
- 602 (b) The division shall make rules, in accordance with Title 63G, Chapter 3, Utah  
603 Administrative Rulemaking Act, specifying how the reports required by Subsection  
604 (5)(a) shall be submitted.
- 605 Section 10. Section **26B-5-122** is enacted to read:  
606 **26B-5-122 (Effective 05/06/26). Community-based peer support services grant**

607 **program.**

608 (1) As used in this section:

609 (a) "Commission" means the Utah Behavioral Health Commission created in Section  
610 26B-5-702.

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

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

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

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

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

626 Section 11. Section **26B-5-326** is amended to read:

627 **26B-5-326 (Effective 05/06/26). Allocation of state hospital beds -- Formula.**

628 (1) As used in this section:

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

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

634 (2)(a) The division shall establish by rule a formula to separately allocate to local mental  
635 health authorities adult beds for persons who meet the requirements of Subsection [   
636 ~~26B-5-306(2)(a)~~] 26B-5-306(3)(a). Beginning on May 10, 2011, and ending on June  
637 30, 2011, 152 beds shall be allocated to local mental health authorities under this  
638 section.

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

640 (i) on July 1, 2011, to restore the number of beds allocated to 212 beds as funding

- 641                   permits; and
- 642                   (ii) on July 1, 2011, and every three years after July 1, 2011, according to the state's
- 643                   population.
- 644                   (c) All population figures utilized shall reflect the most recent available population
- 645                   estimates from the Utah Population Committee.
- 646 (3) The formula established under Subsection (2) shall provide for allocation of beds based
- 647                   on:
- 648                   (a) the percentage of the state's adult population located within a mental health
- 649                   catchment area; and
- 650                   (b) a differential to compensate for the additional demand for hospital beds in mental
- 651                   health catchment areas that are located in urban areas.
- 652 (4) A local mental health authority may sell or loan its allocation of beds to another local
- 653                   mental health authority.
- 654 (5) The division shall allocate adult beds at the state hospital to local mental health
- 655                   authorities for their use in accordance with the formula established under this section. If
- 656                   a local mental health authority is unable to access a bed allocated to it under the formula
- 657                   established under Subsection (2), the division shall provide that local mental health
- 658                   authority with funding equal to the reasonable, average daily cost of an acute care bed
- 659                   purchased by the local mental health authority.
- 660 (6) The board shall periodically review and make changes in the formula established under
- 661                   Subsection (2) as necessary to accurately reflect changes in population.

662                   Section 12. Section **26B-5-331** is amended to read:

663                   **26B-5-331 (Effective 05/06/26). Temporary commitment -- Requirements and**

664                   **procedures -- Rights.**

- 665 (1) An adult shall be temporarily, involuntarily committed to a local mental health authority
- 666                   upon:
- 667                   (a) a written application that:
- 668                   (i) is completed by a responsible individual who has reason to know, stating a belief
- 669                   that the adult, due to mental illness, is likely to pose substantial danger to self or
- 670                   others if not restrained and stating the personal knowledge of the adult's condition
- 671                   or circumstances that lead to the individual's belief; and
- 672                   (ii) includes a certification by a licensed physician, licensed physician assistant,
- 673                   licensed nurse practitioner, or designated examiner stating that the physician,
- 674                   physician assistant, nurse practitioner, or designated examiner has examined the

- 675 adult within a three-day period immediately preceding the certification, and that  
676 the physician, physician assistant, nurse practitioner, or designated examiner is of  
677 the opinion that, due to mental illness, the adult poses a substantial danger to self  
678 or others; or
- 679 (b) a peace officer or a mental health officer:
- 680 (i) observing an adult's conduct that gives the peace officer or mental health officer  
681 probable cause to believe that:
- 682 (A) the adult has a mental illness; and  
683 (B) because of the adult's mental illness and conduct, the adult poses a substantial  
684 danger to self or others; and
- 685 (ii) completing a temporary commitment application that:
- 686 (A) is on a form prescribed by the division;  
687 (B) states the peace officer's or mental health officer's belief that the adult poses a  
688 substantial danger to self or others;  
689 (C) states the specific nature of the danger;  
690 (D) provides a summary of the observations upon which the statement of danger is  
691 based; and  
692 (E) provides a statement of the facts that called the adult to the peace officer's or  
693 mental health officer's attention.
- 694 (2) If at any time a patient committed under this section no longer meets the commitment  
695 criteria described in Subsection (1), the local mental health authority's designee shall:
- 696 (a) document the change and release the patient; and  
697 (b) if the patient was admitted under Subsection (1)(b), notify the local mental health  
698 authority of the patient's release if deemed appropriate by a licensed health care  
699 provider or if the patient consents to the information being shared.
- 700 (3) A patient committed under this section may be held for a maximum of 72 hours after  
701 commitment, excluding Saturdays, Sundays, and state holidays, unless:
- 702 (a) as described in Section 26B-5-332, an application for involuntary commitment is  
703 commenced, which may be accompanied by an order of detention described in  
704 Subsection 26B-5-332(4); or  
705 (b) the patient makes a voluntary application for admission.
- 706 (4) Upon a written application described in Subsection (1)(a) or the observation and belief  
707 described in Subsection (1)(b)(i), the adult shall be:
- 708 (a) taken into a peace officer's protective custody, by reasonable means, if necessary for

- 709 public safety; and
- 710 (b) transported for temporary commitment to a facility designated by the local mental  
711 health authority, by means of:
- 712 (i) an ambulance, if the adult meets any of the criteria described in Section 53-2d-405;
- 713 (ii) an ambulance, if a peace officer is not necessary for public safety, and  
714 transportation arrangements are made by a physician, physician assistant, nurse  
715 practitioner, designated examiner, or mental health officer;
- 716 (iii) the city, town, or municipal law enforcement authority with jurisdiction over the  
717 location where the adult is present, if the adult is not transported by ambulance;
- 718 (iv) the county sheriff, if the designated facility is outside of the jurisdiction of the  
719 law enforcement authority described in Subsection (4)(b)(iii) and the adult is not  
720 transported by ambulance; or
- 721 (v) nonemergency secured behavioral health transport as that term is defined in  
722 Section 53-2d-101.
- 723 (5) Notwithstanding Subsection (4):
- 724 (a) an individual shall be transported by ambulance to an appropriate medical facility for  
725 treatment if the individual requires physical medical attention;
- 726 (b) if an officer has probable cause to believe, based on the officer's experience and  
727 de-escalation training that taking an individual into protective custody or transporting  
728 an individual for temporary commitment would increase the risk of substantial  
729 danger to the individual or others, a peace officer may exercise discretion to not take  
730 the individual into custody or transport the individual, as permitted by policies and  
731 procedures established by the officer's law enforcement agency and any applicable  
732 federal or state statute, or case law; and
- 733 (c) if an officer exercises discretion under Subsection (4)(b) to not take an individual  
734 into protective custody or transport an individual, the officer shall document in the  
735 officer's report the details and circumstances that led to the officer's decision.
- 736 (6)(a) The local mental health authority or the local mental health authority's designee  
737 shall inform an adult patient committed under this section of the reason for  
738 commitment.
- 739 (b) An adult patient committed under this section has the right to:
- 740 (i) within three hours after arrival at the local mental health authority, make a  
741 telephone call, at the expense of the local mental health authority, to an individual  
742 of the patient's choice; and

- 743 (ii) see and communicate with an attorney.
- 744 (7)(a) Title 63G, Chapter 7, Governmental Immunity Act of Utah, applies to this section.
- 745 (b) This section does not create a special duty of care.
- 746 (8)(a) A local mental health authority or the local mental health authority's designee  
747 shall provide discharge instructions to each individual committed under this section  
748 at or before the time the individual is discharged from the local mental health  
749 authority's custody, regardless of whether the individual is discharged by being  
750 released, taken into a peace officer's protective custody, transported to a medical  
751 facility or other facility, or other circumstances.
- 752 (b) Discharge instructions provided under Subsection (8)(a) shall include:
- 753 (i) a safety plan for the individual based on the individual's mental illness or mental  
754 or emotional state, if applicable;
- 755 (ii) notification to the individual's primary care provider, if applicable;
- 756 (iii) if the individual is discharged without food, housing, or economic security, a  
757 referral to appropriate services, if such services exist in the individual's  
758 community;
- 759 (iv) the phone number to call or text for a crisis services hotline, and information  
760 about the availability of peer support services;
- 761 (v) a copy of any psychiatric advance directive, if applicable;
- 762 (vi) information about how to establish a psychiatric advance directive if one has not  
763 been completed;
- 764 (vii) as applicable, information about medications that were changed or discontinued  
765 during the commitment;
- 766 (viii) information about how to contact the local mental health authority if needed;  
767 and
- 768 (ix) information about how to request a copy of the individual's medical record and  
769 how to access the electronic patient portal for the individual's medical record.
- 770 (c) If an individual's medications were changed, or if an individual was prescribed new  
771 medications while committed under this section, discharge instructions provided  
772 under Subsection (8)(a) shall include a clinically appropriate supply of medications,  
773 as determined by a licensed health care provider, to allow the individual time to  
774 access another health care provider or follow-up appointment.
- 775 (d) Discharge instructions shall be provided in paper or electronic format based on the  
776 individual's preference.

- 777 (e) If an individual refuses to accept discharge instructions, the local mental health  
778 authority or the local mental health authority's designee shall document the refusal in  
779 the individual's medical record.
- 780 (f) If an individual's discharge instructions include referrals to services under Subsection  
781 (8)(b)(iii), the local mental health authority or the local mental health authority's  
782 designee shall document those referrals in the individual's medical record.
- 783 (g) The local mental health authority shall attempt to follow up with a discharged  
784 individual at least 48 hours after discharge, when appropriate, and may use peer  
785 support professionals when performing follow-up care or developing a continuing  
786 care plan.

787 Section 13. Section **26B-5-332** is amended to read:

788 **26B-5-332 (Effective 05/06/26). Involuntary commitment under court order --**  
789 **Examination -- Hearing -- Power of court -- Findings required -- Costs.**

790 (1) A responsible individual who has credible knowledge of an adult's mental illness and  
791 the condition or circumstances that have led to the adult's need to be involuntarily  
792 committed may initiate an involuntary commitment court proceeding by filing, in the  
793 court in the county where the proposed patient resides or is found, a written application  
794 that includes:

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

797 (i) name;

798 (ii) date of birth; and

799 (iii) social security number;

800 (b)(i) a certificate of a licensed physician or a designated examiner stating that within  
801 the seven-day period immediately preceding the certification, the physician or  
802 designated examiner examined the proposed patient and is of the opinion that the  
803 proposed patient has a mental illness and should be involuntarily committed; or  
804 (ii) a written statement by the applicant that:

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

808 (B) is sworn to under oath; and

809 (C) states the facts upon which the application is based; and

810 (c) a statement whether the proposed patient has previously been under an assisted

- 811 outpatient treatment order, if known by the applicant.
- 812 (2) Before issuing a judicial order, the court:
- 813 (a) shall require the applicant to consult with the appropriate local mental health
- 814 authority at or before the hearing; and
- 815 (b) may direct a mental health professional from the local mental health authority to
- 816 interview the applicant and the proposed patient to determine the existing facts and
- 817 report the existing facts to the court.
- 818 (3) The court may issue an order, directed to a mental health officer or peace officer, to
- 819 immediately place a proposed patient in the custody of a local mental health authority or
- 820 in a temporary emergency facility, as described in Section 26B-5-334, to be detained for
- 821 the purpose of examination if:
- 822 (a) the court finds from the application, any other statements under oath, or any reports
- 823 from a mental health professional that there is a reasonable basis to believe that the
- 824 proposed patient has a mental illness that poses a danger to self or others and requires
- 825 involuntary commitment pending examination and hearing; or
- 826 (b) the proposed patient refuses to submit to an interview with a mental health
- 827 professional as directed by the court or to go to a treatment facility voluntarily.
- 828 (4)(a) The court shall provide notice of commencement of proceedings for involuntary
- 829 commitment, setting forth the allegations of the application and any reported facts,
- 830 together with a copy of any official order of detention, to a proposed patient before,
- 831 or upon, placement of the proposed patient in the custody of a local mental health
- 832 authority or, with respect to any proposed patient presently in the custody of a local
- 833 mental health authority whose status is being changed from voluntary to involuntary,
- 834 upon the filing of an application for that purpose with the court.
- 835 (b) The place of detention shall maintain a copy of the order of detention.
- 836 (5)(a) The court shall provide notice of commencement of proceedings for involuntary
- 837 commitment as soon as practicable to the applicant, any legal guardian, any
- 838 immediate adult family members, legal counsel for the parties involved, the local
- 839 mental health authority or the local mental health authority's designee, and any other
- 840 persons whom the proposed patient or the court designates.
- 841 (b) Except as provided in Subsection (5)(c), the notice under Subsection (5)(a) shall
- 842 advise the persons that a hearing may be held within the time provided by law.
- 843 (c) If the proposed patient refuses to permit release of information necessary for
- 844 provisions of notice under this subsection, the court shall determine the extent of

- 845 notice.
- 846 (6) Proceedings for commitment of an individual under 18 years old to a local mental health  
847 authority may be commenced in accordance with Part 4, Commitment of Persons Under  
848 Age 18.
- 849 (7)(a) The court may, in the court's discretion, transfer the case to any other district court  
850 within this state, if the transfer will not be adverse to the interest of the proposed  
851 patient.
- 852 (b) If a case is transferred under Subsection (7)(a), the parties to the case may be  
853 transferred and the local mental health authority may be substituted in accordance  
854 with Utah Rules of Civil Procedure, Rule 25.
- 855 (8) Within 24 hours, excluding Saturdays, Sundays, and legal holidays, of the issuance of a  
856 judicial order, or after commitment of a proposed patient to a local mental health  
857 authority or the local mental health authority's designee under court order for detention  
858 or examination, the court shall appoint two designated examiners:
- 859 (a) who did not sign the civil commitment application nor the civil commitment  
860 certification under Subsection (1);
- 861 (b) one of whom is:
- 862 (i) a licensed physician; or
- 863 (ii) a psychiatric mental health nurse practitioner or a psychiatric mental health  
864 clinical nurse specialist who:
- 865 (A) is nationally certified;
- 866 (B) is doctorally trained; and
- 867 (C) has at least two years of inpatient mental health experience, regardless of the  
868 license the individual held at the time of that experience; and
- 869 (c) one of whom may be designated by the proposed patient or the proposed patient's  
870 counsel, if that designated examiner is reasonably available.
- 871 (9) The court shall schedule a hearing to be held within 10 calendar days after the day on  
872 which the designated examiners are appointed.
- 873 (10)(a) The designated examiners shall conduct the examinations separately.
- 874 (b) The designated examiners shall conduct the examinations:
- 875 (i) through telehealth unless the designated examiner determines that:
- 876 (A) a telehealth examination would not be sufficient to properly assess the  
877 proposed patient;
- 878 (B) a telehealth examination would have a harmful effect on the proposed patient's

- 879 health; or
- 880 (C) an in-person examination can be conducted as effectively, conveniently, and
- 881 timely as an examination through telehealth; and
- 882 (ii) if the designated examiner determines, pursuant to Subsection (10)(b)(i), that the
- 883 examination should be conducted in person, at the home of the proposed patient,
- 884 at a hospital or other medical facility, or at any other suitable place that is not
- 885 likely to have a harmful effect on the proposed patient's health.
- 886 (c) The designated examiners shall inform the proposed patient, if not represented by an
- 887 attorney:
- 888 (i) that the proposed patient does not have to say anything;
- 889 (ii) of the nature and reasons for the examination;
- 890 (iii) that the examination was ordered by the court;
- 891 (iv) that any information volunteered could form part of the basis for the proposed
- 892 patient's involuntary commitment;
- 893 (v) that findings resulting from the examination will be made available to the court;
- 894 and
- 895 (vi) that the designated examiner may, under court order, obtain the proposed
- 896 patient's mental health records.
- 897 (d) Within 24 hours of examining the proposed patient, a designated examiner shall
- 898 report to the court, orally or in writing, whether the proposed patient is mentally ill,
- 899 has agreed to voluntary commitment, as described in Section 26B-5-360, or has
- 900 acceptable programs available to the proposed patient without court proceedings.
- 901 (e) If a designated examiner reports orally under Subsection (10)(d), the designated
- 902 examiner shall immediately send a written report to the clerk of the court.
- 903 (11) If a designated examiner is unable to complete an examination on the first attempt
- 904 because the proposed patient refuses to submit to the examination, the court shall fix a
- 905 reasonable compensation to be paid to the examiner.
- 906 (12) If the local mental health authority, the local mental health authority's designee, or a
- 907 medical examiner determines before the court hearing that the conditions justifying the
- 908 findings leading to a commitment hearing no longer exist, the local mental health
- 909 authority, the local mental health authority's designee, or the medical examiner shall
- 910 immediately report the determination to the court.
- 911 (13)(a) The court shall terminate the proceedings and dismiss the application before the
- 912 hearing if both designated examiners inform the court that the proposed patient does

- 913 not meet the criteria in Subsection (16).
- 914 (b) The court may terminate the proceedings and dismiss the application at any time,  
915 including before the hearing, if the designated examiners or the local mental health  
916 authority or the local mental health authority's designee informs the court that the  
917 proposed patient:
- 918 (i) has agreed to voluntary commitment, as described in Section 26B-5-360;  
919 (ii) has acceptable options for treatment programs that are available without court  
920 proceedings; or  
921 (iii) meets the criteria for assisted outpatient treatment described in Section  
922 26B-5-351.
- 923 (14)(a) Before the hearing, the court shall provide the proposed patient an opportunity to  
924 be represented by counsel, and if neither the proposed patient nor others provide  
925 counsel, the court shall appoint counsel and allow counsel sufficient time to consult  
926 with the proposed patient before the hearing.
- 927 (b) In the case of an indigent proposed patient, the county in which the proposed patient  
928 resides or is found shall make payment of reasonable attorney fees for counsel, as  
929 determined by the court.
- 930 (15)(a)(i) The court shall afford the proposed patient, the applicant, and any other  
931 person to whom notice is required to be given an opportunity to appear at the  
932 hearing, to testify, and to present and cross-examine witnesses.
- 933 (ii) The court may, in the court's discretion, receive the testimony of any other person.  
934 (iii) The court may allow a waiver of the proposed patient's right to appear for good  
935 cause, which cause shall be set forth in the record, or an informed waiver by the  
936 patient, which shall be included in the record.
- 937 (b) The court is authorized to exclude any person not necessary for the conduct of the  
938 proceedings and may, upon motion of counsel, require the testimony of each  
939 designated examiner to be given out of the presence of any other designated  
940 examiners.
- 941 (c) The court shall:
- 942 (i) conduct the hearing in as informal a manner as may be consistent with orderly  
943 procedure; and  
944 (ii) while preserving the due process rights of the proposed patient:  
945 (A) conduct the hearing remotely, in accordance with Utah Rules of Civil  
946 Procedure, Rule 87, unless the court finds good cause under Rule 87 not to

- 947                   conduct the hearing remotely; or
- 948                   (B) if the court finds good cause under Rule 87 not to conduct the hearing
- 949                   remotely, conduct the hearing in a physical setting that is not likely to have a
- 950                   harmful effect on the mental health of the proposed patient.
- 951           (d) The court shall consider any relevant historical and material information that is
- 952           offered, subject to the rules of evidence, including reliable hearsay under Utah Rules
- 953           of Evidence, Rule 1102.
- 954           (e)(i) A local mental health authority or the local mental health authority's designee
- 955           or the physician in charge of the proposed patient's care shall, at the time of the
- 956           hearing, provide the court with the following information:
- 957                   (A) the detention order;
- 958                   (B) admission notes;
- 959                   (C) the diagnosis;
- 960                   (D) any doctors' orders;
- 961                   (E) progress notes;
- 962                   (F) nursing notes;
- 963                   (G) medication records pertaining to the current commitment; and
- 964                   (H) whether the proposed patient has previously been civilly committed or under
- 965                   an order for assisted outpatient treatment.
- 966           (ii) The local mental health authority or the local mental health authority's designee
- 967           or the physician in charge of the proposed patient's care shall also supply the
- 968           information described in Subsection (15)(e)(i) to the proposed patient's counsel at
- 969           the time of the hearing, and at any time prior to the hearing upon request by the
- 970           proposed patient's counsel.
- 971           (16)(a) The court shall order commitment of an adult proposed patient to a local mental
- 972           health authority if, upon completion of the hearing and consideration of the
- 973           information presented, the court finds by clear and convincing evidence that:
- 974                   (i)(A) the proposed patient has a mental illness;
- 975                           (B) because of the proposed patient's mental illness the proposed patient poses a
- 976                           substantial danger to self or others;
- 977                           (C) the proposed patient lacks the ability to engage in a rational decision-making
- 978                           process regarding the acceptance of mental treatment as demonstrated by
- 979                           evidence of inability to weigh the possible risks of accepting or rejecting
- 980                           treatment;

- 981 (D) there is no appropriate less-restrictive alternative to a court order of  
982 commitment; and
- 983 (E) the local mental health authority can provide the proposed patient with  
984 treatment that is adequate and appropriate to the proposed patient's conditions  
985 and needs; or
- 986 (ii)(A) the proposed patient has been charged with a criminal offense;
- 987 (B) with respect to the charged offense, the proposed patient is found incompetent  
988 to proceed as a result of a mental illness;
- 989 (C) the proposed patient has a mental illness;
- 990 (D) the proposed patient has a persistent unawareness of their mental illness and  
991 the negative consequences of that illness, or within the preceding six months  
992 has been requested or ordered to undergo mental health treatment but has  
993 unreasonably refused to undergo that treatment;
- 994 (E) there is no appropriate less-restrictive alternative to a court order of  
995 commitment; and
- 996 (F) the local mental health authority can provide the proposed patient with  
997 treatment that is adequate and appropriate to the proposed patient's conditions  
998 and needs.
- 999 (b)(i) If, at the hearing, the court determines that the proposed patient has a mental  
1000 illness but does not meet the other criteria described in Subsection (16)(a), the  
1001 court may consider whether the proposed patient meets the criteria for assisted  
1002 outpatient treatment under Section 26B-5-351.
- 1003 (ii) The court may order the proposed patient to receive assisted outpatient treatment  
1004 in accordance with Section 26B-5-351 if, at the hearing, the court finds the  
1005 proposed patient meets the criteria for assisted outpatient treatment under Section  
1006 26B-5-351.
- 1007 (iii) If the court determines that neither the criteria for commitment under Subsection  
1008 (16)(a) nor the criteria for assisted outpatient treatment under Section 26B-5-351  
1009 are met, the court shall dismiss the proceedings after the hearing.
- 1010 (17)(a)(i) The court shall immediately notify the appropriate local mental health  
1011 authority and the division upon entry of an order of commitment, including an  
1012 order to extend the patient's treatment period.
- 1013 [(†)] (ii) The order of commitment shall designate the period for which the patient  
1014 shall be treated.

- 1015            [(iii)] (iii) If the patient is not under an order of commitment at the time of the hearing,  
1016            the patient's treatment period may not exceed six months without a review hearing.
- 1017            [(iii)] (iv) Upon a review hearing, to be commenced before the expiration of the  
1018            previous order of commitment, an order for commitment may be for an  
1019            indeterminate period, if the court finds by clear and convincing evidence that the  
1020            criteria described in Subsection (16) will last for an indeterminate period.
- 1021            (b)(i) The court shall maintain a current list of all patients under the court's order of  
1022            commitment and review the list to determine those patients who have been under  
1023            an order of commitment for the court designated period.
- 1024            (ii) At least two weeks before the expiration of the designated period of any order of  
1025            commitment still in effect, the court that entered the original order of commitment  
1026            shall inform the appropriate local mental health authority or the local mental  
1027            health authority's designee of the expiration.
- 1028            (iii) Upon receipt of the information described in Subsection (17)(b)(ii), the local  
1029            mental health authority or the local mental health authority's designee shall  
1030            immediately reexamine the reasons upon which the order of commitment was  
1031            based.
- 1032            (iv) If, after reexamination under Subsection (17)(b)(iii), the local mental health  
1033            authority or the local mental health authority's designee determines that the  
1034            conditions justifying commitment no longer exist, the local mental health  
1035            authority or the local mental health authority's designee shall discharge the patient  
1036            from involuntary commitment and immediately report the discharge to the court  
1037            and the division.
- 1038            (v) If, after reexamination under Subsection (17)(b)(iii), the local mental health  
1039            authority or the local mental health authority's designee determines that the  
1040            conditions justifying commitment continue to exist, the court shall immediately  
1041            appoint two designated examiners and proceed under Subsections (8) through (14).
- 1042            (c)(i) The local mental health authority or the local mental health authority's designee  
1043            responsible for the care of a patient under an order of commitment for an  
1044            indeterminate period shall, at six-month intervals, reexamine the reasons upon  
1045            which the order of indeterminate commitment was based.
- 1046            (ii) If the local mental health authority or the local mental health authority's designee  
1047            determines that the conditions justifying commitment no longer exist, the local  
1048            mental health authority or the local mental health authority's designee shall

- 1049 discharge the patient from the local mental health authority's or the local mental  
1050 health authority designee's custody and immediately report the discharge to the  
1051 court and the division.
- 1052 (iii) If the local mental health authority or the local mental health authority's designee  
1053 determines that the conditions justifying commitment continue to exist, the local  
1054 mental health authority or the local mental health authority's designee shall send a  
1055 written report of the findings to the court.
- 1056 (iv) The local mental health authority or the local mental health authority's designee  
1057 shall notify the patient and the patient's counsel of record in writing that the  
1058 involuntary commitment will be continued under Subsection (17)(c)(iii), the  
1059 reasons for the decision to continue, and that the patient has the right to a review  
1060 hearing by making a request to the court.
- 1061 (v) Upon receiving a request under Subsection (17)(c)(iv), the court shall  
1062 immediately appoint two designated examiners and proceed under Subsections (8)  
1063 through (14).
- 1064 (18)(a) Any patient committed as a result of an original hearing or a patient's legally  
1065 designated representative who is aggrieved by the findings, conclusions, and order of  
1066 the court entered in the original hearing has the right to a new hearing upon filing a  
1067 petition with the court within 30 days after the day on which the court entered the  
1068 order.
- 1069 (b) The petition shall allege error or mistake in the findings, in which case the court shall  
1070 appoint three impartial designated examiners previously unrelated to the case to  
1071 conduct an additional examination of the patient.
- 1072 (c) Except as provided in Subsection (18)(b), the court shall, in all other respects,  
1073 conduct the new hearing in the manner otherwise permitted.
- 1074 (19) The county in which the proposed patient resides or is found shall pay the costs of all  
1075 proceedings under this section.
- 1076 (20)(a) A local mental health authority or the local mental health authority's designee  
1077 shall provide discharge instructions to each individual committed under this section  
1078 at or before the time the individual is discharged from the local mental health  
1079 authority's custody, regardless of the circumstances under which the individual is  
1080 discharged.
- 1081 (b) Discharge instructions provided under Subsection (20)(a) shall include:  
1082 (i) a safety plan for the individual based on the individual's mental illness or mental

- 1083 or emotional state, if applicable;
- 1084 (ii) notification to the individual's primary care provider, if applicable;
- 1085 (iii) if the individual is discharged without food, housing, or economic security, a  
1086 referral to appropriate services, if such services exist in the individual's  
1087 community;
- 1088 (iv) the phone number to call or text for a crisis services hotline, and information  
1089 about the availability of peer support services;
- 1090 (v) a copy of any psychiatric advance directive, if applicable;
- 1091 (vi) information about how to establish a psychiatric advance directive if one has not  
1092 been completed;
- 1093 (vii) as applicable, information about medications that were changed or discontinued  
1094 during the commitment;
- 1095 (viii) information about how to contact the local mental health authority or  
1096 established provider as appropriate; and
- 1097 (ix) information about how to request a copy of the individual's medical record and  
1098 how to access the electronic patient portal for the individual's medical record.
- 1099 (c) If an individual's medications were changed, or if an individual was prescribed new  
1100 medications while committed under this section, discharge instructions provided  
1101 under Subsection (20)(a) shall include a clinically appropriate supply of medications,  
1102 as determined by a licensed health care provider, to allow the individual time to  
1103 access another health care provider or follow-up appointment.
- 1104 (d) Discharge instructions shall be provided in paper or electronic format based on the  
1105 individual's preference.
- 1106 (e) If an individual refuses to accept discharge instructions, the local mental health  
1107 authority shall document the refusal in the individual's medical record.
- 1108 (f) If an individual's discharge instructions include referrals to services under Subsection  
1109 (20)(b)(iii), the local mental health authority shall document those referrals in the  
1110 individual's medical record.
- 1111 (g) The local mental health authority shall attempt to follow up with a discharged  
1112 individual at least 48 hours after discharge, when appropriate, and may use peer  
1113 support professionals when performing follow-up care or developing a continuing  
1114 care plan.
- 1115 (21) If any provision of Subsection (16)(a)(ii) or the application of any provision of  
1116 Subsection (16)(a)(ii) to any person or circumstance is held invalid by a court with

1117 jurisdiction, the remainder of Subsection (16)(a)(ii) shall be given effect without the  
1118 invalid provision or application. The provisions of Subsection (16)(a)(ii) are severable.

1119 Section 14. Section **26B-5-351** is amended to read:

1120 **26B-5-351 (Effective 05/06/26). Assisted outpatient treatment proceedings.**

1121 (1) A responsible individual who has credible knowledge of an adult's mental illness and  
1122 the condition or circumstances that have led to the adult's need for assisted outpatient  
1123 treatment may file, in the court in the county where the proposed patient resides or is  
1124 found, a written application that includes:

1125 (a) unless the court finds that the information is not reasonably available, the proposed  
1126 patient's:

1127 (i) name;

1128 (ii) date of birth; and

1129 (iii) social security number; and

1130 (b)(i) a certificate of a licensed physician or a designated examiner stating that within  
1131 the seven-day period immediately preceding the certification, the physician or  
1132 designated examiner examined the proposed patient and is of the opinion that the  
1133 proposed patient has a mental illness and should be involuntarily committed; or

1134 (ii) a written statement by the applicant that:

1135 (A) the proposed patient has been requested to, but has refused to, submit to an  
1136 examination of mental condition by a licensed physician or designated  
1137 examiner;

1138 (B) is sworn to under oath; and

1139 (C) states the facts upon which the application is based.

1140 (2)(a) Subject to Subsection (2)(b), before issuing a judicial order, the court may require  
1141 the applicant to consult with the appropriate local mental health authority, and the  
1142 court may direct a mental health professional from that local mental health authority  
1143 to interview the applicant and the proposed patient to determine the existing facts and  
1144 report them to the court.

1145 (b) The consultation described in Subsection (2)(a):

1146 (i) may take place at or before the hearing; and

1147 (ii) is required if the local mental health authority appears at the hearing.

1148 (3) If the proposed patient refuses to submit to an interview described in Subsection (2)(a)  
1149 or an examination described in Subsection (8), the court may issue an order, directed to  
1150 a mental health officer or peace officer, to immediately place the proposed patient into

- 1151 the custody of a local mental health authority or in a temporary emergency facility, as  
1152 provided in Section 26B-5-334, to be detained for the purpose of examination.
- 1153 (4) Notice of commencement of proceedings for assisted outpatient treatment, setting forth  
1154 the allegations of the application and any reported facts, together with a copy of any  
1155 official order of detention, shall:
- 1156 (a) be provided by the court to a proposed patient before, or upon, placement into the  
1157 custody of a local mental health authority or, with respect to any proposed patient  
1158 presently in the custody of a local mental health authority;
- 1159 (b) be maintained at the proposed patient's place of detention, if any;
- 1160 (c) be provided by the court as soon as practicable to the applicant, any legal guardian,  
1161 any immediate adult family members, legal counsel for the parties involved, the local  
1162 mental health authority or its designee, and any other person whom the proposed  
1163 patient or the court shall designate; and
- 1164 (d) advise that a hearing may be held within the time provided by law.
- 1165 (5) The court may, in its discretion, transfer the case to any other court within this state,  
1166 provided that the transfer will not be adverse to the interest of the proposed patient.
- 1167 (6) Within 24 hours, excluding Saturdays, Sundays, and legal holidays, of the issuance of a  
1168 judicial order, or after commitment of a proposed patient to a local mental health  
1169 authority or its designee under court order for detention in order to complete an  
1170 examination, the court shall appoint two designated examiners:
- 1171 (a) who did not sign the assisted outpatient treatment application nor the certification  
1172 described in Subsection (1);
- 1173 (b) one of whom is a licensed physician; and
- 1174 (c) one of whom may be designated by the proposed patient or the proposed patient's  
1175 counsel, if that designated examiner is reasonably available.
- 1176 (7) The court shall schedule a hearing to be held within 10 calendar days of the day on  
1177 which the designated examiners are appointed.
- 1178 (8) The designated examiners shall:
- 1179 (a) conduct their examinations separately;
- 1180 (b) conduct the examinations at the home of the proposed patient, at a hospital or other  
1181 medical facility, or at any other suitable place that is not likely to have a harmful  
1182 effect on the proposed patient's health;
- 1183 (c) inform the proposed patient, if not represented by an attorney:
- 1184 (i) that the proposed patient does not have to say anything;

- 1185 (ii) of the nature and reasons for the examination;
- 1186 (iii) that the examination was ordered by the court;
- 1187 (iv) that any information volunteered could form part of the basis for the proposed
- 1188 patient to be ordered to receive assisted outpatient treatment; and
- 1189 (v) that findings resulting from the examination will be made available to the court;
- 1190 and
- 1191 (d) within 24 hours of examining the proposed patient, report to the court, orally or in
- 1192 writing, whether the proposed patient is mentally ill.
- 1193 (e) If the designated examiner reports orally under Subsection (8)(d), the designated
- 1194 examiner shall immediately send a written report to the clerk of the court.
- 1195 (9) If a designated examiner is unable to complete an examination on the first attempt
- 1196 because the proposed patient refuses to submit to the examination, the court shall fix a
- 1197 reasonable compensation to be paid to the examiner.
- 1198 (10) If the local mental health authority, its designee, or a medical examiner determines
- 1199 before the court hearing that the conditions justifying the findings leading to an assisted
- 1200 outpatient treatment hearing no longer exist, the local mental health authority, its
- 1201 designee, or the medical examiner shall immediately report that determination to the
- 1202 court.
- 1203 (11) The court may terminate the proceedings and dismiss the application at any time,
- 1204 including prior to the hearing, if the designated examiners or the local mental health
- 1205 authority or its designee informs the court that the proposed patient does not meet the
- 1206 criteria in Subsection (14).
- 1207 (12) Before the hearing, an opportunity to be represented by counsel shall be afforded to the
- 1208 proposed patient, and if neither the proposed patient nor others provide counsel, the
- 1209 court shall appoint counsel and allow counsel sufficient time to consult with the
- 1210 proposed patient before the hearing. In the case of an indigent proposed patient, the
- 1211 payment of reasonable attorney fees for counsel, as determined by the court, shall be
- 1212 made by the county in which the proposed patient resides or is found.
- 1213 (13)(a) All persons to whom notice is required to be given shall be afforded an
- 1214 opportunity to appear at the hearing, to testify, and to present and cross-examine
- 1215 witnesses. The court may, in its discretion, receive the testimony of any other
- 1216 individual. The court may allow a waiver of the proposed patient's right to appear for
- 1217 good cause, which cause shall be set forth in the record, or an informed waiver by the
- 1218 patient, which shall be included in the record.

- 1219 (b) The court is authorized to exclude all individuals not necessary for the conduct of the  
1220 proceedings and may, upon motion of counsel, require the testimony of each  
1221 examiner to be given out of the presence of any other examiners.
- 1222 (c) The hearing shall be conducted in as informal a manner as may be consistent with  
1223 orderly procedure, and in a physical setting that is not likely to have a harmful effect  
1224 on the mental health of the proposed patient.
- 1225 (d) The court shall consider all relevant historical and material information that is  
1226 offered, subject to the rules of evidence, including reliable hearsay under Rule 1102,  
1227 Utah Rules of Evidence.
- 1228 (e)(i) A local mental health authority or its designee, or the physician in charge of the  
1229 proposed patient's care shall, at the time of the hearing, provide the court with the  
1230 following information:
- 1231 (A) the detention order, if any;  
1232 (B) admission notes, if any;  
1233 (C) the diagnosis, if any;  
1234 (D) doctor's orders, if any;  
1235 (E) progress notes, if any;  
1236 (F) nursing notes, if any; and  
1237 (G) medication records, if any.
- 1238 (ii) The information described in Subsection (13)(e)(i) shall also be provided to the  
1239 proposed patient's counsel:
- 1240 (A) at the time of the hearing; and  
1241 (B) at any time prior to the hearing, upon request.
- 1242 (14) The court shall order a proposed patient to assisted outpatient treatment if, upon  
1243 completion of the hearing and consideration of the information presented, the court finds  
1244 by clear and convincing evidence that:
- 1245 (a) the proposed patient has a mental illness;  
1246 (b) there is no appropriate less-restrictive alternative to a court order for assisted  
1247 outpatient treatment; and
- 1248 (c)(i) the proposed patient lacks the ability to engage in a rational decision-making  
1249 process regarding the acceptance of mental health treatment, as demonstrated by  
1250 evidence of inability to weigh the possible risks of accepting or rejecting  
1251 treatment; or  
1252 (ii) the proposed patient needs assisted outpatient treatment in order to prevent

- 1253 relapse or deterioration that is likely to result in the proposed patient posing a  
1254 substantial danger to self or others.
- 1255 (15) The court may order the applicant or a close relative of the patient to be the patient's  
1256 personal representative, as described in 45 C.F.R. Sec. 164.502(g), for purposes of the  
1257 patient's mental health treatment.
- 1258 (16) In the absence of the findings described in Subsection (14), the court, after the hearing,  
1259 shall dismiss the proceedings.
- 1260 (17)(a) The court shall immediately notify the appropriate mental health authority and  
1261 the division upon entry of an assisted outpatient treatment order, including an order  
1262 extending the duration of an assisted outpatient treatment order.
- 1263 ~~[(a)]~~ (b) The assisted outpatient treatment order shall designate the period for which the  
1264 patient shall be treated, which may not exceed 12 months without a review hearing.
- 1265 ~~[(b)]~~ (c) At a review hearing, the court may extend the duration of an assisted outpatient  
1266 treatment order by up to 12 months, if:
- 1267 (i) the court finds by clear and convincing evidence that the patient meets the  
1268 conditions described in Subsection (14); or
- 1269 (ii)(A) the patient does not appear at the review hearing;
- 1270 (B) notice of the review hearing was provided to the patient's last known address  
1271 by the applicant described in Subsection (1) or by a local mental health  
1272 authority; and
- 1273 (C) the patient has appeared in court or signed an informed waiver within the  
1274 previous 18 months.
- 1275 ~~[(c)]~~ (d) The court shall maintain a current list of all patients under its order of assisted  
1276 outpatient treatment.
- 1277 ~~[(d)]~~ (e) At least two weeks prior to the expiration of the designated period of any  
1278 assisted outpatient treatment order still in effect, the court that entered the original  
1279 order shall inform the appropriate local mental health authority or its designee.
- 1280 (18) Costs of all proceedings under this section shall be paid by the county in which the  
1281 proposed patient resides or is found.
- 1282 (19) A court may not hold an individual in contempt for failure to comply with an assisted  
1283 outpatient treatment order.
- 1284 (20) As provided in Section 31A-22-651, a health insurance provider may not deny an  
1285 insured the benefits of the insured's policy solely because the health care that the insured  
1286 receives is provided under a court order for assisted outpatient treatment.

1287 Section 15. Section **26B-5-372** is amended to read:

1288 **26B-5-372 (Effective 05/06/26). Admission of person in custody of Department of**  
1289 **Corrections to state hospital -- Retransfer of person to Department of Corrections.**

1290 (1) The executive director of the Department of Corrections may request the director to  
1291 admit a person who is in the custody of the Department of Corrections to the state  
1292 hospital, if the clinical director within the Department of Corrections finds that the  
1293 inmate has mentally deteriorated to the point that admission to the state hospital is  
1294 necessary to ensure adequate mental health treatment. In determining whether that  
1295 inmate should be placed in the state hospital, the director of the division shall consider:

1296 (a) the mental health treatment needs of the inmate;

1297 (b) the treatment programs available at the state hospital; and

1298 (c) whether the inmate meets the requirements of Subsection [~~26B-5-306(2)~~]

1299 26B-5-306(3).

1300 (2) If the director denies the admission of an inmate as requested by the clinical director  
1301 within the Department of Corrections, the Board of Pardons and Parole shall determine  
1302 whether the inmate will be admitted to the state hospital. The Board of Pardons and  
1303 Parole shall consider:

1304 (a) the mental health treatment needs of the inmate;

1305 (b) the treatment programs available at the state hospital; and

1306 (c) whether the inmate meets the requirements of Subsection [~~26B-5-306(2)~~]

1307 26B-5-306(3).

1308 (3) The state hospital shall receive any person in the custody of the Department of  
1309 Corrections when ordered by either the director or the Board of Pardons and Parole,  
1310 pursuant to Subsection (1) or (2). Any person so transferred to the state hospital shall  
1311 remain in the custody of the Department of Corrections, and the state hospital shall act  
1312 solely as the agent of the Department of Corrections.

1313 (4) Inmates transferred to the state hospital pursuant to this section shall be transferred back  
1314 to the Department of Corrections through negotiations between the director and the  
1315 director of the Department of Corrections. If agreement between the director and the  
1316 director of the Department of Corrections cannot be reached, the Board of Pardons and  
1317 Parole shall have final authority in determining whether a person will be transferred  
1318 back to the Department of Corrections. In making that determination, that board shall  
1319 consider:

1320 (a) the mental health treatment needs of the inmate;

- 1321 (b) the treatment programs available at the state hospital;
- 1322 (c) whether the person continues to meet the requirements of Subsection [26B-5-306(2)]
- 1323 26B-5-306(3);
- 1324 (d) the ability of the state hospital to provide adequate treatment to the person, as well as
- 1325 safety and security to the public; and
- 1326 (e) whether, in the opinion of the director, in consultation with the clinical director of the
- 1327 state hospital, the person's treatment needs have been met.

1328 Section 16. Section **26B-5-384** is enacted to read:

1329 **26B-5-384 (Effective 05/06/26). Statewide commitment database -- Restricted use**

1330 **and access.**

- 1331 (1) As used in this section, "committed individual" means an individual who has been
- 1332 committed under Section 26B-5-331 or 26B-5-332.
- 1333 (2) The department shall establish by December 31, 2026, and shall maintain, a database of
- 1334 individuals committed under Sections 26B-5-331 and 26B-5-332.
- 1335 (3) The database shall include:
- 1336 (a) the name and identifying information of a committed individual;
- 1337 (b) the type of commitment and statute authorizing the commitment;
- 1338 (c) the status of the committed individual; and
- 1339 (d) any other information the department deems necessary to carry out the requirements
- 1340 of this section.
- 1341 (4) The department shall make rules in accordance with Title 63G, Chapter 3, Utah
- 1342 Administrative Rulemaking Act, to:
- 1343 (a) implement this section; and
- 1344 (b) ensure the privacy of committed individuals, including by:
- 1345 (i) establishing and restricting the permissible uses of the information in the database;
- 1346 and
- 1347 (ii) defining and restricting access to the database, including by identifying persons
- 1348 who may have access to the database.

1349 Section 17. Section **26B-5-611** is amended to read:

1350 **26B-5-611 (Effective 05/06/26). Suicide prevention -- Reporting requirements.**

- 1351 (1) As used in this section:
- 1352 (a) "Bureau" means the Bureau of Criminal Identification created in Section 53-10-201
- 1353 within the Department of Public Safety.
- 1354 (b) "Coalition" means the Statewide Suicide Prevention [~~Coalition~~] Committee created

- 1355 under Subsection (3).
- 1356 (c) "Commission" means the Utah Behavioral Health Commission created in Section  
1357 26B-5-702.
- 1358 (d) "Coordinator" means the state suicide prevention coordinator appointed under  
1359 Subsection (2).
- 1360 (e) "Fund" means the Governor's Suicide Prevention Fund created in Section 26B-1-325.
- 1361 (f) "Intervention" means an effort to prevent a person from attempting suicide.
- 1362 (g) "Legal intervention" means an incident in which an individual is shot by another  
1363 individual who has legal authority to use deadly force.
- 1364 (h) "Postvention" means intervention after a suicide attempt or a suicide death to reduce  
1365 risk and promote healing.
- 1366 (i) "Shooter" means an individual who uses a gun in an act that results in the death of the  
1367 actor or another individual, whether the act was a suicide, homicide, legal  
1368 intervention, act of self-defense, or accident.
- 1369 (2) The ~~[division]~~ office shall appoint a state suicide prevention coordinator to~~[, under the~~  
1370 ~~direction of the commission,]~~ administer a state suicide prevention program composed  
1371 of suicide prevention, intervention, and postvention programs, services, and efforts.
- 1372 (3) The coordinator shall:
- 1373 (a) establish a Statewide Suicide Prevention Committee with membership from public  
1374 and private organizations and Utah citizens; and
- 1375 (b) appoint a chair and co-chair from among the membership of the coalition to lead the  
1376 coalition.
- 1377 (4) The state suicide prevention program may include the following components:
- 1378 (a) delivery of resources, tools, and training to community-based coalitions;
- 1379 (b) evidence-based suicide risk assessment tools and training;
- 1380 (c) town hall meetings for building community-based suicide prevention strategies;
- 1381 (d) suicide prevention gatekeeper training;
- 1382 (e) training to identify warning signs and to manage an at-risk individual's crisis;
- 1383 (f) evidence-based intervention training;
- 1384 (g) intervention skills training;
- 1385 (h) postvention training; or
- 1386 (i) a public education campaign to improve public awareness about warning signs of  
1387 suicide and suicide prevention resources.
- 1388 (5) The coordinator shall coordinate with the following to gather statistics, among other

- 1389 duties:
- 1390 (a) local mental health and substance abuse authorities;
- 1391 (b) the State Board of Education, including the public education suicide prevention
- 1392 coordinator described in Section 53G-9-702;
- 1393 (c) applicable divisions and offices within the department;
- 1394 (d) health care providers, including emergency rooms;
- 1395 (e) federal agencies, including the Federal Bureau of Investigation;
- 1396 (f) other unbiased sources; and
- 1397 (g) other public health suicide prevention efforts.
- 1398 (6) The coordinator shall, in consultation with the bureau, implement and manage the
- 1399 operation of the firearm safety program described in Subsection 26B-5-102(3).
- 1400 (7) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
- 1401 division shall make rules:
- 1402 (a) governing the implementation of the state suicide prevention program, consistent
- 1403 with this section; and
- 1404 (b) in conjunction with the bureau, defining the criteria for employers to apply for grants
- 1405 under the Suicide Prevention Education Program described in Section 26B-5-110,
- 1406 which shall include:
- 1407 (i) attendance at the suicide prevention education course described in Subsection
- 1408 26B-5-102(3); and
- 1409 (ii) distribution of the firearm safety brochures or packets created in Subsection
- 1410 26B-5-102(3), but does not require the distribution of a cable-style gun lock with a
- 1411 firearm if the firearm already has a trigger lock or comparable safety mechanism.
- 1412 (8) As funding by the Legislature allows, the coordinator shall award grants, not to exceed a
- 1413 total of \$100,000 per fiscal year, to suicide prevention programs that focus on the needs
- 1414 of children who have been served by the Division of Juvenile Justice and Youth Services.
- 1415 Section 18. Section **26B-5-703** is amended to read:
- 1416 **26B-5-703 (Effective 05/06/26) (Repealed 07/01/29). Purpose -- Duties --**
- 1417 **Reporting.**
- 1418 (1) The purpose of the commission is to be the central authority for coordinating behavioral
- 1419 health initiatives between state and local governments, health systems, and other
- 1420 interested persons, to ensure that Utah's behavioral health systems are comprehensive,
- 1421 aligned, effective, and efficient.
- 1422 (2) To fulfill the commission's purpose, the commission shall:

- 1423 (a) establish a shared vision across public and private sectors for improving Utah's  
1424 behavioral health systems;
- 1425 (b) make recommendations, including policy recommendations, and advise the  
1426 governor, executive branch agencies, and the Legislature on matters pertaining to  
1427 behavioral health;
- 1428 (c) provide feedback on proposed bills, rules, policies, and budgets relating to behavioral  
1429 health;
- 1430 (d) encourage participation in the commission's work by individuals and populations  
1431 directly impacted by behavioral health issues, including family members of  
1432 individuals with behavioral health issues;
- 1433 (e) engage private sector payers, providers, and business and employer groups in the  
1434 commission's work;
- 1435 (f) continually review and revise the master plan as appropriate;
- 1436 (g) identify priorities and lead efforts to implement and advance those priorities by  
1437 coordinating and collaborating closely with public and private persons throughout the  
1438 state;
- 1439 (h) identify areas where innovation is necessary to improve behavioral health access and  
1440 care;
- 1441 (i) cooperate with the Utah System of Higher Education, the State Board of Education,  
1442 the Division of Professional Licensing, the Utah Health Workforce Advisory  
1443 Council, and the department to oversee the creation and implementation of  
1444 behavioral health workforce initiatives for the state;
- 1445 (j) collaborate with the Utah State Hospital, the Department of Corrections, county jails,  
1446 and the department;
- 1447 (k) regarding the interaction between an individual with a mental illness or an  
1448 intellectual disability and the civil commitment system, criminal justice system, or  
1449 juvenile justice system:
- 1450 (i) promote communication between and coordination among all agencies interacting  
1451 with the individual;
- 1452 (ii) study, evaluate, and recommend changes to laws and procedures;
- 1453 (iii) identify and promote the implementation of specific policies and programs to  
1454 deal fairly and efficiently with the individual; and
- 1455 (iv) promote judicial education;
- 1456 (l) study the long-term need for adult patient staffed beds at the state hospital, including:

- 1457 (i) the total number of staffed beds currently in use at the state hospital;  
 1458 (ii) the current staffed bed capacity at the state hospital;  
 1459 (iii) the projected total number of staffed beds needed in the adult general psychiatric  
 1460 unit of the state hospital over the next three, five, and 10 years based on:  
 1461 (A) the state's current and projected population growth;  
 1462 (B) current access to mental health resources in the community; and  
 1463 (C) any other factors the committee finds relevant to projecting the total number  
 1464 of staffed beds; and  
 1465 (iv) the cost associated with the projected total number of staffed beds described in Su  
 1466 bsection (2)(I)(iii);  
 1467 [~~(k)~~] (m) oversee coordination for the funding, implementation, and evaluation of suicide  
 1468 prevention efforts described in Section 26B-5-611;  
 1469 [~~(l)~~] (n) develop methods or models for implementing and coherently communicating  
 1470 cross-sector strategies;  
 1471 [~~(m)~~] (o) hold the state's behavioral health systems accountable for clear, measurable  
 1472 outcomes; and  
 1473 [~~(n)~~] (p) maintain independence from the department and the governor such that the  
 1474 commission and its committees are able to provide independent advice and  
 1475 recommendations, especially regarding proposed bills and policy considerations.  
 1476 (3) The commission may delegate responsibilities to the commission's committees and  
 1477 subcommittees as the committee deems appropriate.  
 1478 [~~(3)~~] (4)(a) The commission shall meet at least quarterly, but may meet at other times as  
 1479 scheduled by the chair.  
 1480 (b) The chair of the commission shall set the agenda for each commission meeting with  
 1481 input from commission members and staff.  
 1482 (c) Notice of the time and place of a commission meeting shall be given to each member  
 1483 and to the public in compliance with Title 52, Chapter 4, Open and Public Meetings  
 1484 Act.  
 1485 (d) A commission meeting is open to the public unless the meeting or a portion of a  
 1486 meeting is closed by the commission pursuant to Section 52-4-204 or Section  
 1487 52-4-205.  
 1488 [~~(4)~~] (5) On or before December 31, 2024, the commission shall provide a report to the  
 1489 Legislature that includes:  
 1490 (a) recommendations for behavioral health measures and targets to be included in the

- 1491 next update to the master plan;
- 1492 (b) recommendations for consolidating into the commission other commissions,  
1493 committees, subcommittees, task forces, working groups, or other bodies pertaining  
1494 to behavioral health;
- 1495 (c) recommendations on the next steps for reviewing and potentially redefining state law  
1496 and program options regarding county-based behavioral health services; and
- 1497 (d) recommendations on key budget priorities and key legislative policies for the 2025  
1498 General Session and thereafter.

1499 [(5)] (6)(a) Beginning in 2025, by no later than September 30 of each year, the  
1500 commission shall provide a report to the Health and Human Services Interim  
1501 Committee that describes the commission's work during the preceding year and  
1502 includes, in accordance with Section 26B-5-705, any legislative recommendations  
1503 from the commission.

- 1504 (b) Before the commission submits a legislative recommendation to the Health and  
1505 Human Services Interim Committee or the Legislature, the Legislative Policy  
1506 Committee created in Section 26B-5-705 shall review the recommendation.

1507 [(6)] (7) Neither the commission nor a committee of the commission may obtain any  
1508 individual's health or medical information, whether identifiable or deidentified, without  
1509 first obtaining the consent of the individual or the individual's legal representative.

1510 Section 19. Section **26B-5-704** is amended to read:

1511 **26B-5-704 (Effective 05/06/26) (Repealed 07/01/29). Committees -- Creation --**  
1512 **Duties.**

- 1513 (1) Each committee created under this part or formed by the commission in accordance  
1514 with this section serves under the direction of the commission.
- 1515 (2) In addition to the committees created under this part or formed by the commission, the  
1516 following are committees of the commission and shall serve under the direction of the  
1517 commission to assist the commission in performing the commission's duties:
- 1518 (a) the Behavioral Health Crisis Response Committee created in Section 63C-18-202;  
1519 (b) the Utah [~~Substance Use and Mental Health Advisory~~] Behavioral Health Policy  
1520 Review Committee created in Section 26B-5-801; and
- 1521 (c) the Statewide Suicide Prevention Committee created under Section 26B-5-611.
- 1522 (3)(a) In addition to the committees described in Subsection (2) or created under this  
1523 part, the commission may form committees to support the commission in fulfilling  
1524 the commission's duties.

- 1525 (b) When forming a committee, the commission shall, except as provided in Subsection  
 1526 (4):
- 1527 (i) appoint members to the committee who represent a range of views and expertise;  
 1528 and
- 1529 (ii) adopt procedures and directives for the committee.
- 1530 (c) Unless otherwise provided for in statute, a member of a committee may not receive  
 1531 compensation or benefits for the member's service on the committee, but may receive  
 1532 per diem and travel expenses in accordance with:
- 1533 (i) Section 63A-3-106;  
 1534 (ii) Section 63A-3-107; and  
 1535 (iii) rules made by the Division of Finance under Sections 63A-3-106 and 63A-3-107.
- 1536 (d) Compensation and expenses of a committee member who is a legislator are governed  
 1537 by Section 36-2-2 and Legislative Joint Rules, Title 5, Legislative Compensation and  
 1538 Expenses.

1539 (4) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the  
 1540 department may make rules, in consultation with the commission, to establish the  
 1541 membership, procedures, and directives of a committee the commission forms.

1542 Section 20. Section **26B-5-705** is amended to read:

1543 **26B-5-705 (Effective 05/06/26) (Repealed 07/01/29). Legislative Policy**

1544 **Committee -- Creation -- Duties -- Staff.**

- 1545 (1) As used in this section, "committee" means the Legislative Policy Committee created in  
 1546 Subsection (2).
- 1547 (2) Under the commission, there is created the Legislative Policy Committee.
- 1548 (3)(a) The committee is composed of five legislators, appointed as follows:
- 1549 (i) the speaker of the House of Representatives shall appoint one member of the  
 1550 House of Representatives;
- 1551 (ii) the minority leader of the House of Representatives shall appoint one member of  
 1552 the House of Representatives;
- 1553 (iii) the president of the Senate shall appoint one member of the Senate;
- 1554 (iv) the minority leader of the Senate shall appoint one member of the Senate; and  
 1555 (v) the speaker of the House of Representatives and the president of the Senate shall  
 1556 jointly appoint one legislator.
- 1557 (b) The speaker, president, and minority leaders:
- 1558 (i) shall make the appointments described in Subsection (3)(a) after consulting with

1559 the chairs of the Health and Human Services Interim Committee and the chairs of  
1560 the Social Services Appropriations Subcommittee; and

1561 (ii) are encouraged but not required to appoint to the committee legislators who are  
1562 members of one or more of the following:

1563 (A) the Health and Human Services Interim Committee; or

1564 (B) the Social Services Appropriations Subcommittee.

1565 (4) The speaker of the House of Representatives and the president of the Senate shall each  
1566 designate one of their appointees as a co-chair of the committee.

1567 (5) The individual who appoints a member of the committee may change the appointment  
1568 at any time.

1569 (6) The committee shall:

1570 (a) assist the commission and any of the commission's other committees with developing  
1571 policy and legislative recommendations; and

1572 (b) review any legislative recommendation proposed by the commission before the  
1573 legislative recommendation is provided to the Health and Human Services Interim  
1574 Committee or the Legislature.

1575 (7)(a) As used in this Subsection (7), "working group" means the working group the  
1576 committee convenes as described in Subsection (7)(b).

1577 (b) The committee shall convene a working group to investigate, study, and make  
1578 recommendations to the Legislature regarding the entity in the best position to serve  
1579 as the central authority for coordinating behavioral health initiatives between state  
1580 and local governments, health systems, and other interested persons to ensure that  
1581 Utah's behavioral health systems are comprehensive, aligned, effective, and efficient.

1582 (c) In carrying out the duties described in Subsection (7)(b), the working group shall  
1583 consider:

1584 (i) an entity's ability to gather and analyze data; and

1585 (ii) the most effective duties and governance structure for the central authority.

1586 (d) The working group shall make the recommendations described in Subsection (7)(b)  
1587 to the Health and Human Services Interim Committee on or before the date of the  
1588 committee's November 2026 interim meeting.

1589 [(7)] (8) The committee may:

1590 (a) submit its own proposed legislation to the commission for consideration; and

1591 (b) provide other services as requested by the commission.

1592 [(8)] (9)(a) A majority of the members of the committee constitutes a quorum.

1593 (b) The action of a majority of a quorum constitutes the action of the committee.  
 1594 [(9)] (10) The Office of Legislative Research and General Counsel shall provide staff  
 1595 support to the committee.

1596 Section 21. Section **26B-5-801** is amended to read:

1597 **Part 8. Utah Behavioral Health Policy Review Committee**

1598 **26B-5-801 (Effective 05/06/26) (Repealed 01/01/33). Definitions -- Creation of**  
 1599 **committee -- Membership -- Terms.**

1600 (1)(a) As used in this part, "committee" means the Utah [~~Substance Use and Mental~~  
 1601 ~~Health Advisory~~] Behavioral Health Policy Review Committee created in this section.

1602 (b) There is created within the department the Utah [~~Substance Use and Mental Health~~  
 1603 ~~Advisory~~] Behavioral Health Policy Review Committee, which serves under the  
 1604 direction of the Utah Behavioral Health Commission created in Section 26B-5-702.

1605 [(2) The committee shall be comprised of the following voting members:]

1606 [(a) the attorney general or the attorney general's designee;]

1607 [(b) one elected county official appointed by the Utah Association of Counties;]

1608 [(c) the commissioner of public safety or the commissioner's designee;]

1609 [(d) the director of the Division of Integrated Healthcare or the director's designee;]

1610 [(e) the state superintendent of public instruction or the superintendent's designee;]

1611 [(f) the executive director of the Department of Health and Human Services or the  
 1612 executive director's designee;]

1613 [(g) the executive director of the State Commission on Criminal and Juvenile Justice or  
 1614 the executive director's designee;]

1615 [(h) the executive director of the Department of Corrections or the executive director's  
 1616 designee;]

1617 [(i) the director of the Division of Juvenile Justice and Youth Services or the director's  
 1618 designee;]

1619 [(j) the director of the Division of Child and Family Services or the director's designee;]

1620 [(k) the chair of the Board of Pardons and Parole or the chair's designee;]

1621 [(l) the director of the Office of Multicultural Affairs or the director's designee;]

1622 [(m) the director of the Division of Indian Affairs or the director's designee;]

1623 [(n) the state court administrator or the state court administrator's designee;]

1624 [(o) one district court judge who presides over a drug court and who is appointed by the  
 1625 chief justice of the Utah Supreme Court;]

1626 [(p) one district court judge who presides over a mental health court and who is

- 1627 appointed by the chief justice of the Utah Supreme Court;]
- 1628 [(q) one juvenile court judge who presides over a drug court and who is appointed by the
- 1629 chief justice of the Utah Supreme Court;]
- 1630 [(r) one prosecutor appointed by the Statewide Association of Prosecutors;]
- 1631 [(s) the chair or co-chair of each subcommittee established by the committee;]
- 1632 [(t) the chair or co-chair of the Statewide Suicide Prevention Committee created under
- 1633 Subsection 26B-5-611(3);]
- 1634 [(u) one representative appointed by the Utah League of Cities and Towns to serve a
- 1635 four-year term;]
- 1636 [(v) the chair of the Utah Victim Services Commission or the chair's designee;]
- 1637 [(w) the superintendent of the Utah State Hospital or the superintendent's designee;]
- 1638 [(x) the following members appointed by the governor to serve four-year terms:]
- 1639 [(i) one resident of the state who has been personally affected by a substance use or
- 1640 mental health disorder; and]
- 1641 [(ii) one citizen representative; and]
- 1642 [(y) in addition to the voting members described in Subsections (2)(a) through (x), the
- 1643 following voting members appointed by a majority of the members described in
- 1644 Subsections (2)(a) through (x) to serve four-year terms:]
- 1645 [(i) one resident of the state who represents a statewide advocacy organization for
- 1646 recovery from substance use disorders;]
- 1647 [(ii) one resident of the state who represents a statewide advocacy organization for
- 1648 recovery from mental illness;]
- 1649 [(iii) one resident of the state who represents a statewide advocacy organization for
- 1650 protection of rights of individuals with a disability;]
- 1651 [(iv) one resident of the state who represents prevention professionals;]
- 1652 [(v) one resident of the state who represents treatment professionals;]
- 1653 [(vi) one resident of the state who represents the physical health care field;]
- 1654 [(vii) one resident of the state who is a criminal defense attorney;]
- 1655 [(viii) one resident of the state who is a military servicemember or military veteran
- 1656 under Section 53H-11-202;]
- 1657 [(ix) one resident of the state who represents local law enforcement agencies;]
- 1658 [(x) one representative of private service providers that serve youth with substance
- 1659 use disorders or mental health disorders; and]
- 1660 [(xi) one resident of the state who is certified by the Division of Integrated

1661 Healthcare as a peer support specialist as described in Subsection  
 1662 26B-5-102(2)(gg).]

1663 [~~(3) An individual other than an individual described in Subsection (2) may not be~~  
 1664 ~~appointed as a voting member of the committee.]~~

1665 (2) The department, in consultation with the Behavioral Health Commission, shall make  
 1666 rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to  
 1667 establish the members of the committee.

1668 Section 22. Section **26B-5-802** is amended to read:

1669 **26B-5-802 (Effective 05/06/26) (Repealed 01/01/33). Chair -- Vacancies --**  
 1670 **Quorum -- Expenses.**

1671 (1) The Utah [~~Substance Use and Mental Health Advisory~~] Behavioral Health Policy Review  
 1672 Committee shall annually select one of [its] the committee's members to serve as chair  
 1673 and [one of its] two of the committee's members to serve as [vice chair] vice chairs.

1674 (2) When a vacancy occurs in the membership for any reason, the replacement shall be  
 1675 appointed for the unexpired term in the same manner as the position was originally filled.

1676 (3) A majority of the members of the committee constitutes a quorum.

1677 (4) A member may not receive compensation or benefits for the member's service, but may  
 1678 receive per diem and travel expenses as allowed in:

1679 (a) Section 63A-3-106;

1680 (b) Section 63A-3-107; and

1681 (c) rules made by the Division of Finance according to Sections 63A-3-106 and  
 1682 63A-3-107.

1683 (5) The committee may establish subcommittees as needed to assist in accomplishing [its]  
 1684 the committee's duties under Section 26B-5-803.

1685 Section 23. Section **26B-5-803** is amended to read:

1686 **26B-5-803 (Effective 05/06/26) (Repealed 01/01/33). Duties of committee.**

1687 (1) Under the direction of the Utah Behavioral Health Commission created in Section  
 1688 26B-5-702, the Utah [~~Substance Use and Mental Health Advisory~~] Behavioral Health  
 1689 Policy Review Committee shall:

1690 [~~(a) provide leadership and generate unity for Utah's ongoing efforts to reduce and~~  
 1691 ~~eliminate the impact of substance use and mental health disorders in Utah through a~~  
 1692 ~~comprehensive and evidence-based prevention, treatment, and justice strategy;]~~

1693 [~~(b) recommend and coordinate the creation, dissemination, and implementation of~~  
 1694 ~~statewide policies to address substance use and mental health disorders;]~~

- 1695 ~~[(e) facilitate planning for a balanced continuum of substance use and mental health~~  
 1696 ~~disorder prevention, treatment, and justice services;]~~
- 1697 ~~[(d) promote collaboration and mutually beneficial public and private partnerships;]~~
- 1698 ~~[(e)] (a) coordinate recommendations made by any subcommittee created under Section~~  
 1699 ~~26B-5-802;~~
- 1700 ~~[(f)] (b) analyze and provide an objective assessment of all proposed legislation~~  
 1701 ~~concerning substance use, mental health, forensic mental health, and related issues;~~  
 1702 ~~and~~
- 1703 ~~(c) advise the commission on behavioral health policy, proposed legislation, and~~  
 1704 ~~procedures.~~
- 1705 ~~[(g) comply with Section 32B-2-306;]~~
- 1706 ~~[(h) advise the Department of Health and Human Services regarding the state hospital~~  
 1707 ~~admissions policy for individuals in the custody of the Department of Corrections;]~~
- 1708 ~~[(i) regarding the interaction between an individual with a mental illness or an~~  
 1709 ~~intellectual disability and the civil commitment system, criminal justice system, or~~  
 1710 ~~juvenile justice system;]~~
- 1711 ~~[(i) promote communication between and coordination among all agencies interacting~~  
 1712 ~~with the individual;]~~
- 1713 ~~[(ii) study, evaluate, and recommend changes to laws and procedures;]~~
- 1714 ~~[(iii) identify and promote the implementation of specific policies and programs to~~  
 1715 ~~deal fairly and efficiently with the individual; and]~~
- 1716 ~~[(iv) promote judicial education;]~~
- 1717 ~~[(j) study the long-term need for adult patient staffed beds at the state hospital, including:]~~  
 1718 ~~[(i) the total number of staffed beds currently in use at the state hospital;]~~  
 1719 ~~[(ii) the current staffed bed capacity at the state hospital;]~~  
 1720 ~~[(iii) the projected total number of staffed beds needed in the adult general~~  
 1721 ~~psychiatric unit of the state hospital over the next three, five, and 10 years based~~  
 1722 ~~on:]~~
- 1723 ~~[(A) the state's current and projected population growth;]~~
- 1724 ~~[(B) current access to mental health resources in the community; and]~~
- 1725 ~~[(C) any other factors the committee finds relevant to projecting the total number~~  
 1726 ~~of staffed beds; and]~~
- 1727 ~~[(iv) the cost associated with the projected total number of staffed beds described in~~  
 1728 ~~Subsection (1)(j)(iii); and]~~

- 1729           ~~[(k) each year report on whether the pay of the state hospital's employees is adequate~~  
 1730           ~~based on market conditions.]~~
- 1731           (2) The committee shall meet quarterly or more frequently as determined necessary by the  
 1732           chair.
- 1733           (3) The committee shall report~~[:]~~ any recommendations annually to the commission, the  
 1734           governor, and the Legislature.
- 1735           ~~[(a) with the assistance and staff support from the state hospital, regarding the items~~  
 1736           ~~described in Subsections (1)(j) and (k), including any recommendations, to the Utah~~  
 1737           ~~Behavioral Health Commission on or before July 31 of each year; and]~~
- 1738           ~~[(b) any other recommendations annually to the commission, the governor, the~~  
 1739           ~~Legislature, and the Judicial Council.]~~

1740           Section 24. Section **26B-8-233** is enacted to read:

1741           **26B-8-233 (Effective 05/06/26). Family outreach specialist.**

- 1742           (1) With funds appropriated by the Legislature for this purpose, the department shall  
 1743           provide compensation, at a standard rate determined by the department, to a family  
 1744           outreach specialist.
- 1745           (2) The family outreach specialist shall:
- 1746           ~~(a) engage with relatives or the legal guardian of an individual who has recently died by~~  
 1747           ~~suicide or overdose to better understand the circumstances that precede a suicide or~~  
 1748           ~~drug-related death, including by:~~
- 1749           ~~(i) contacting next of kin;~~  
 1750           ~~(ii) collecting information in an interview;~~  
 1751           ~~(iii) assessing next of kin; and~~  
 1752           ~~(iv) providing targeted bereavement care; and~~
- 1753           ~~(b) assist the medical examiner with suicide intervention, prevention, and postvention,~~  
 1754           ~~including:~~
- 1755           ~~(i) mortality surveillance;~~  
 1756           ~~(ii) research coordination;~~  
 1757           ~~(iii) data management and analysis; and~~  
 1758           ~~(iv) epidemiological surveillance.~~

1759           Section 25. Section **32B-2-306** is amended to read:

1760           **32B-2-306 (Effective 05/06/26) (Partially Repealed 01/01/33). Underage drinking**  
 1761           **prevention media and education campaign.**

- 1762           (1) As used in this section~~[:]~~, "restricted account" means the Underage Drinking Prevention

- 1763 Media and Education Campaign Restricted Account created in this section.
- 1764 [(a) "Advisory committee" means the Utah Substance Use and Mental Health Advisory
- 1765 Committee created in Section 26B-5-801.]
- 1766 [(b) "Restricted account" means the Underage Drinking Prevention Media and
- 1767 Education Campaign Restricted Account created in this section.]
- 1768 (2)(a) There is created a restricted account within the General Fund known as the
- 1769 "Underage Drinking Prevention Media and Education Campaign Restricted Account."
- 1770 (b) The restricted account consists of:
- 1771 (i) deposits made under Subsection (3); and
- 1772 (ii) interest earned on the restricted account.
- 1773 (3) The department shall deposit 0.6% of the total gross revenue from sales of liquor with
- 1774 the state treasurer, as determined by the total gross revenue collected for the fiscal year
- 1775 two years preceding the fiscal year for which the deposit is made, to be credited to the
- 1776 restricted account and to be used by the department as provided in Subsection (5).
- 1777 (4)[(a) ~~Before January 1, 2033, the advisory committee shall:~~
- 1778 ~~[(i) provide ongoing oversight of a media and education campaign funded under this~~
- 1779 ~~section;]~~
- 1780 ~~[(ii) create an underage drinking prevention workgroup consistent with guidelines~~
- 1781 ~~proposed by the advisory committee related to the membership and duties of the~~
- 1782 ~~underage drinking prevention workgroup;]~~
- 1783 ~~[(iii) create guidelines for how money appropriated for a media and education~~
- 1784 ~~campaign can be used;]~~
- 1785 ~~[(iv) include in the guidelines established pursuant to this Subsection (4) that a media~~
- 1786 ~~and education campaign funded under this section is carefully researched and~~
- 1787 ~~developed, and appropriate for target groups; and]~~
- 1788 ~~[(v) approve plans submitted by the department in accordance with Subsection (5).]~~
- 1789 [(b) ~~On or after January 1, 2033, the~~ The department shall:
- 1790 [(i) (a) provide ongoing oversight of a media and education campaign funded under this
- 1791 section;
- 1792 [(ii) (b) create guidelines for how money appropriated for a media and education
- 1793 campaign can be used; and
- 1794 [(iii) (c) include in the guidelines [~~established pursuant to this Subsection (4)~~]that a
- 1795 media and education campaign funded under this section is carefully researched and
- 1796 developed, and appropriate for target groups.

1797 (5)(a) Subject to appropriation from the Legislature, the department shall expend money  
 1798 from the restricted account to direct and fund one or more media and education  
 1799 campaigns designed to reduce underage drinking[ ~~in cooperation with the advisory~~  
 1800 ~~committee, subject to the advisory committee being in effect under Section 63I-1-232].~~

1801 (b)[(i) ~~Before January 1, 2033, the department shall:]~~

1802 [~~(A) in cooperation with the underage drinking prevention workgroup created~~  
 1803 ~~under Subsection (4), prepare and submit a plan to the advisory committee~~  
 1804 ~~detailing the intended use of the money appropriated under this section;]~~

1805 [~~(B) upon approval of the plan by the advisory committee, conduct the media and~~  
 1806 ~~education campaign in accordance with the guidelines made by the advisory~~  
 1807 ~~committee; and]~~

1808 [~~(C) submit to the advisory committee annually by no later than October 1, a~~  
 1809 ~~written report detailing the use of the money for the media and education~~  
 1810 ~~campaigns conducted under this Subsection (5) and the impact and results of~~  
 1811 ~~the use of the money during the prior fiscal year ending June 30.]~~

1812 [(ii) ~~On or after January 1, 2033, the] The department shall:~~

1813 [(A)] (i) prepare a plan detailing the intended use of the money appropriated under  
 1814 this section; [and]

1815 [(B)] (ii) conduct the media and education campaign in accordance with the  
 1816 guidelines created by the department under Subsection (4)(b)[~~;~~] ; and

1817 (iii) coordinate and maintain ongoing communications and collaboration with public  
 1818 entities and private organizations to reduce underage drinking.

1819 (c) The department shall annually, no later than October 1 for the fiscal year ending on  
 1820 June 30 of that calendar year, report to the Utah Behavioral Health Commission on:

1821 (i) the media and education campaign, including the campaign's impact; and

1822 (ii) the results of the efforts to reduce underage drinking.

1823 Section 26. Section **32B-2-402** is amended to read:

1824 **32B-2-402 (Effective 05/06/26) (Partially Repealed 01/01/33). Definitions --**

1825 **Calculations.**

1826 (1) As used in this part:

1827 (a) "Account" means the Alcoholic Beverage and Substance Abuse Enforcement and  
 1828 Treatment Restricted Account created in Section 32B-2-403.

1829 [(b) "Advisory committee" means the Utah Substance Use and Mental Health Advisory  
 1830 Committee created in Section 26B-5-801.]

- 1831 [(e)] (b) "Alcohol-related offense" means:
- 1832 (i) a violation of:
- 1833 (A) Section 41-6a-502; or
- 1834 (B) an ordinance that complies with the requirements of:
- 1835 (I) Subsection 41-6a-510(1); or
- 1836 (II) Section 76-5-207; or
- 1837 (ii) an offense involving the illegal:
- 1838 (A) sale of an alcoholic product;
- 1839 (B) consumption of an alcoholic product;
- 1840 (C) distribution of an alcoholic product;
- 1841 (D) transportation of an alcoholic product; or
- 1842 (E) possession of an alcoholic product.
- 1843 [(d)] (c) "Annual conviction time period" means the time period that:
- 1844 (i) begins on July 1 and ends on June 30; and
- 1845 (ii) immediately precedes the fiscal year for which an appropriation under this part is
- 1846 made.
- 1847 (d) "Commission" means the Utah Behavioral Health Commission created in Section
- 1848 26B-5-702.
- 1849 (e) "Municipality" means a city or town.
- 1850 (f)(i) "Prevention" is as defined by rule, in accordance with Title 63G, Chapter 3,
- 1851 Utah Administrative Rulemaking Act, by the Division of Integrated Healthcare
- 1852 within the Department of Health and Human Services.
- 1853 (ii) In defining the term "prevention," the Division of Substance Abuse and Mental
- 1854 Health shall:
- 1855 (A) include only evidence-based or evidence-informed programs; and
- 1856 (B) provide for coordination with local substance abuse authorities designated to
- 1857 provide substance abuse services in accordance with Section 17-77-201.
- 1858 (2) For purposes of Subsection 32B-2-404(1)(b)(iii), the number of premises located within
- 1859 the limits of a municipality or county:
- 1860 (a) is the number determined by the department to be so located;
- 1861 (b) includes the aggregate number of premises of the following:
- 1862 (i) a state store;
- 1863 (ii) a package agency; and
- 1864 (iii) a retail licensee; and

- 1865 (c) for a county, consists only of the number located within an unincorporated area of  
 1866 the county.
- 1867 (3) The department shall determine:
- 1868 (a) a population figure according to the most current population estimate prepared by the  
 1869 Utah Population Committee;
- 1870 (b) a county's population for the 25% distribution to municipalities and counties under  
 1871 Subsection 32B-2-404(1)(b)(i) only with reference to the population in the  
 1872 unincorporated areas of the county; and
- 1873 (c) a county's population for the 25% distribution to counties under Subsection  
 1874 32B-2-404(1)(b)(iv) only with reference to the total population in the county,  
 1875 including that of a municipality.
- 1876 (4)(a) A conviction occurs in the municipality or county that actually prosecutes the  
 1877 offense to judgment.
- 1878 (b) If a conviction is based upon a guilty plea, the conviction is considered to occur in  
 1879 the municipality or county that, except for the guilty plea, would have prosecuted the  
 1880 offense.

1881 Section 27. Section **32B-2-404** is amended to read:

1882 **32B-2-404 (Effective 05/06/26). Alcoholic Beverage and Substance Abuse**  
 1883 **Enforcement and Treatment Restricted Account distribution.**

- 1884 (1)(a) The money deposited into the account under Section 32B-2-403 shall be  
 1885 distributed to municipalities and counties:
- 1886 (i) to the extent appropriated by the Legislature, except that the Legislature shall  
 1887 appropriate each fiscal year an amount equal to at least the amount deposited in  
 1888 the account in accordance with Section 59-15-109; and
- 1889 (ii) as provided in this Subsection (1).
- 1890 (b) The amount appropriated from the account shall be distributed as follows:
- 1891 (i) 25% to municipalities and counties on the basis of the percentage of the state  
 1892 population residing in each municipality and county;
- 1893 (ii) 30% to municipalities and counties on the basis of each municipality's and  
 1894 county's percentage of the statewide convictions for all alcohol-related offenses;
- 1895 (iii) 20% to municipalities and counties on the basis of the percentage of the  
 1896 following in the state that are located in each municipality and county:
- 1897 (A) state stores;
- 1898 (B) package agencies;

- 1899 (C) retail licensees; and
- 1900 (D) off-premise beer retailers; and
- 1901 (iv) 25% to the counties for confinement and treatment purposes authorized by this
- 1902 part on the basis of the percentage of the state population located in each county.
- 1903 (c)(i) Except as provided in Subsection (1)(c)(ii), if a municipality does not have a
- 1904 law enforcement agency:
- 1905 (A) the municipality may not receive money under this part; and
- 1906 (B) the State Tax Commission:
- 1907 (I) may not distribute the money the municipality would receive but for the
- 1908 municipality not having a law enforcement agency to that municipality; and
- 1909 (II) shall distribute the money that the municipality would have received but
- 1910 for it not having a law enforcement agency to the county in which the
- 1911 municipality is located for use by the county in accordance with this part.
- 1912 (ii) If the [~~advisory committee, before January 1, 2033~~] commission, before July 1,
- 1913 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029, finds that a
- 1914 municipality described in Subsection (1)(c)(i) demonstrates that the municipality
- 1915 can use the money that the municipality is otherwise eligible to receive in
- 1916 accordance with this part, the [~~advisory committee, before January 1, 2033~~]
- 1917 commission, before July 1, 2029, or the department, on or after [~~January 1, 2033~~]
- 1918 July 1, 2029, may direct the State Tax Commission to distribute the money to the
- 1919 municipality.
- 1920 (2) To determine the distribution required by Subsection (1)(b)(ii), the State Tax
- 1921 Commission shall annually:
- 1922 (a) for an annual conviction time period:
- 1923 (i) multiply by two the total number of convictions in the state obtained during the
- 1924 annual conviction time period for violation of:
- 1925 (A) Section 41-6a-502; or
- 1926 (B) an ordinance that complies with the requirements of Subsection 41-6a-510(1)
- 1927 or Section 76-5-207; and
- 1928 (ii) add to the number calculated under Subsection (2)(a)(i) the number of
- 1929 convictions obtained during the annual conviction time period for the
- 1930 alcohol-related offenses other than the alcohol-related offenses described in
- 1931 Subsection (2)(a)(i);
- 1932 (b) divide an amount equal to 30% of the appropriation for that fiscal year by the sum

- 1933           obtained in Subsection (2)(a); and
- 1934           (c) multiply the amount calculated under Subsection (2)(b), by the number of
- 1935           convictions obtained in each municipality and county during the annual conviction
- 1936           time period for alcohol-related offenses.
- 1937           (3) By not later than September 1 each year:
- 1938           (a) the state court administrator shall certify to the State Tax Commission the number of
- 1939           convictions obtained for alcohol-related offenses in each municipality or county in
- 1940           the state during the annual conviction time period; and
- 1941           (b) the [~~advisory committee, before January 1, 2033~~] commission, before July 1, 2029, or
- 1942           the department, on or after [~~January 1, 2033~~] July 1, 2029, shall notify the State Tax
- 1943           Commission of any municipality that does not have a law enforcement agency.
- 1944           (4) By not later than December 1 of each year, the [~~advisory committee, before January 1,~~
- 1945           ~~2033~~] commission, before July 1, 2029, or the department, on or after [~~January 1, 2033~~]
- 1946           July 1, 2029, shall notify the State Tax Commission for the fiscal year of appropriation
- 1947           of:
- 1948           (a) a municipality that may receive a distribution under Subsection (1)(c)(ii);
- 1949           (b) a county that may receive a distribution allocated to a municipality described in
- 1950           Subsection (1)(c)(i);
- 1951           (c) a municipality or county that may not receive a distribution because the [~~advisory~~
- 1952           ~~committee, before January 1, 2033~~] commission, before July 1, 2029, or the
- 1953           department, on or after [~~January 1, 2033~~] July 1, 2029, has suspended the payment
- 1954           under Subsection 32B-2-405(2)(a); and
- 1955           (d) a municipality or county that receives a distribution because the suspension of
- 1956           payment has been cancelled under Subsection 32B-2-405(2).
- 1957           (5)(a) By not later than January 1 of the fiscal year of appropriation, the State Tax
- 1958           Commission shall annually distribute to each municipality and county the portion of
- 1959           the appropriation that the municipality or county is eligible to receive under this part,
- 1960           except for any municipality or county that the [~~advisory committee, before January 1,~~
- 1961           ~~2033~~] commission, before July 1, 2029, or the department, on or after [~~January 1, 2033~~]
- 1962           July 1, 2029, notifies the State Tax Commission in accordance with Subsection (4)
- 1963           may not receive a distribution in that fiscal year.
- 1964           (b)(i) The [~~advisory committee, before January 1, 2033~~] commission, before July 1,
- 1965           2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029, shall prepare
- 1966           forms for use by a municipality or county in applying for a distribution under this

- 1967 part.
- 1968 (ii) A form described in this Subsection (5) may require the submission of
- 1969 information the ~~[advisory committee, before January 1, 2033]~~ commission, before
- 1970 July 1, 2029, or the department, on or after ~~[January 1, 2033]~~ July 1, 2029,
- 1971 considers necessary to enable the State Tax Commission to comply with this part.
- 1972 Section 28. Section **32B-2-405** is amended to read:
- 1973 **32B-2-405 (Effective 05/06/26). Reporting by municipalities and counties --**
- 1974 **Grants.**
- 1975 (1) A municipality or county that receives money under this part during a fiscal year shall
- 1976 by no later than October 1 following the fiscal year:
- 1977 (a) report to the ~~[advisory committee, before January 1, 2033]~~ committee, before July 1,
- 1978 2029, or the department, on or after ~~[January 1, 2033]~~ July 1, 2029:
- 1979 (i) the programs or projects of the municipality or county that receive money under
- 1980 this part;
- 1981 (ii) if the money for programs or projects were exclusively used as required by
- 1982 Subsection 32B-2-403(2);
- 1983 (iii) indicators of whether the programs or projects that receive money under this part
- 1984 are effective; and
- 1985 (iv) if money received under this part was not expended by the municipality or
- 1986 county; and
- 1987 (b) provide the ~~[advisory committee, before January 1, 2033]~~ committee, before July 1,
- 1988 2029, or the department, on or after ~~[January 1, 2033]~~ July 1, 2029, a statement signed
- 1989 by the chief executive officer of the county or municipality attesting that the money
- 1990 received under this part was used in addition to money appropriated or otherwise
- 1991 available for the county's or municipality's law enforcement and was not used to
- 1992 supplant that money.
- 1993 (2) The ~~[advisory committee, before January 1, 2033]~~ committee, before July 1, 2029, may,
- 1994 by a majority vote, or the department, on or after ~~[January 1, 2033]~~ July 1, 2029, may:
- 1995 (a) suspend future payments under Subsection 32B-2-404(4) to a municipality or county
- 1996 that:
- 1997 (i) does not file a report that meets the requirements of Subsection (1); or
- 1998 (ii) the ~~[advisory committee, before January 1, 2033]~~ committee, before July 1, 2029,
- 1999 or the department, on or after ~~[January 1, 2033]~~ July 1, 2029, finds does not use the
- 2000 money as required by Subsection 32B-2-403(2) on the basis of the report filed by

- 2001 the municipality or county under Subsection (1); and
- 2002 (b) cancel a suspension under Subsection (2)(a).
- 2003 (3) The State Tax Commission shall notify the [~~advisory committee, before January 1, 2033]~~
- 2004 ~~committee, before July 1, 2029~~, or the department, on or after [~~January 1, 2033]~~ July 1,
- 2005 2029, of the balance of any undistributed money after the annual distribution under
- 2006 Subsection 32B-2-404(5).
- 2007 (4)(a) Subject to the requirements of this Subsection (4), the [~~advisory committee, before~~
- 2008 ~~January 1, 2033]~~ committee, before July 1, 2029, or the department, on or after [~~January 1, 2033]~~
- 2009 July 1, 2029, shall award the balance of undistributed money under
- 2010 Subsection (3):
- 2011 (i) as prioritized by majority vote of the [~~advisory committee, before January 1, 2033]~~
- 2012 ~~committee, before July 1, 2029~~, or by the department, on or after [~~January 1, 2033]~~
- 2013 July 1, 2029; and
- 2014 (ii) as grants to:
- 2015 (A) a county;
- 2016 (B) a municipality;
- 2017 (C) the department;
- 2018 (D) the Department of Health and Human Services;
- 2019 (E) the Department of Public Safety; or
- 2020 (F) the State Board of Education.
- 2021 (b) By not later than May 30 of the fiscal year of the appropriation, the [~~advisory~~
- 2022 ~~committee, before January 1, 2033]~~ committee, before July 1, 2029, or the
- 2023 department, on or after [~~January 1, 2033]~~ July 1, 2029, shall notify the State Tax
- 2024 Commission of grants awarded under this Subsection (4).
- 2025 (c) The State Tax Commission shall make payments of a grant:
- 2026 (i) upon receiving notice as provided under Subsection (4)(b); and
- 2027 (ii) by not later than June 30 of the fiscal year of the appropriation.
- 2028 (d) An entity that receives a grant under this Subsection (4) shall use the grant money
- 2029 exclusively for programs or projects described in Subsection 32B-2-403(2).
- 2030 Section 29. Section **32B-7-305** is amended to read:
- 2031 **32B-7-305 (Effective 05/06/26). Tracking of enforcement actions -- Costs of**
- 2032 **enforcement actions.**
- 2033 (1) The Department of Public Safety shall administer a program to reimburse a municipal
- 2034 or county law enforcement agency:

- 2035 (a) for the actual costs of an alcohol-related compliance check investigation conducted  
 2036 pursuant to Section 77-39-101 on the premises of an off-premise beer retailer;  
 2037 (b) for administrative costs associated with reporting the compliance check investigation  
 2038 described in Subsection (1)(a);  
 2039 (c) if the municipal or county law enforcement agency completes and submits to the  
 2040 Department of Public Safety a report within 90 days after the day on which the  
 2041 compliance check investigation described in Subsection (1)(a) occurs in a format  
 2042 required by the Department of Public Safety; and  
 2043 (d) in the order that the municipal or county law enforcement agency submits the report  
 2044 required by Subsection (1)(c) until the amount allocated by the Department of Public  
 2045 Safety to reimburse a municipal or county law enforcement agency is spent.
- 2046 (2) By no later than October 1 of each year, the Department of Public Safety shall report to  
 2047 the ~~[Utah Substance Use and Mental Health Advisory Committee]~~ Utah Behavioral  
 2048 Health Commission on the compliance check investigations:  
 2049 (a) funded during the previous fiscal year; and  
 2050 (b) reimbursed under Subsection (1).

2051 Section 30. Section **63C-18-202** is amended to read:

2052 **63C-18-202 (Effective 05/06/26) (Repealed 12/31/26). Committee established --**

2053 **Members.**

- 2054 (1) As used in this section, "department" means the Department of Health and Human  
 2055 Services created in Section 26B-1-201.
- 2056 ~~[(4)]~~ (2) Under the Utah Behavioral Health Commission created in Section 26B-5-702, there  
 2057 is created the Behavioral Health Crisis Response Committee~~[-, composed of the~~  
 2058 ~~following members:]~~ .  
 2059 [(a) the executive director of the Huntsman Mental Health Institute;]  
 2060 [(b) the governor or the governor's designee;]  
 2061 [(c) the director of the Office of Substance Use and Mental Health;]  
 2062 [(d) one representative of the Office of the Attorney General, appointed by the attorney  
 2063 general;]  
 2064 [(e) the executive director of the Department of Health and Human Services or the  
 2065 executive director's designee;]  
 2066 [(f) one member of the public, appointed by the chair of the committee and approved by  
 2067 the committee;]  
 2068 [(g) two individuals who are mental or behavioral health clinicians licensed to practice

- 2069 in the state, appointed by the chair of the committee and approved by the committee,  
2070 at least one of whom is an individual who:]
- 2071 [(i) is licensed as a physician under:]
- 2072 [(A) Title 58, Chapter 67, Utah Medical Practice Act;]
- 2073 [(B) Title 58, Chapter 67b, Interstate Medical Licensure Compact; or]
- 2074 [(C) Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; and]
- 2075 [(ii) is board eligible for a psychiatry specialization recognized by the American  
2076 Board of Medical Specialists or the American Osteopathic Association's Bureau of  
2077 Osteopathic Specialists;]
- 2078 [(h) one individual who represents a county of the first or second class, appointed by the  
2079 Utah Association of Counties;]
- 2080 [(i) one individual who represents a county of the third, fourth, or fifth class, appointed  
2081 by the Utah Association of Counties;]
- 2082 [(j) one individual who represents the Utah Hospital Association, appointed by the chair  
2083 of the committee;]
- 2084 [(k) one individual who represents law enforcement, appointed by the chair of the  
2085 committee;]
- 2086 [(l) one individual who has lived with a mental health disorder, appointed by the chair of  
2087 the committee;]
- 2088 [(m) one individual who represents an integrated health care system that:]
- 2089 [(i) is not affiliated with the chair of the committee; and]
- 2090 [(ii) provides inpatient behavioral health services and emergency room services to  
2091 individuals in the state;]
- 2092 [(n) one individual who represents a Medicaid accountable care organization, as defined  
2093 in Section 26B-3-219, with a statewide membership base;]
- 2094 [(o) one individual who represents 911 call centers and public safety answering points,  
2095 appointed by the chair of the committee;]
- 2096 [(p) one individual who represents Emergency Medical Services, appointed by the chair  
2097 of the committee;]
- 2098 [(q) one individual who represents the mobile wireless service provider industry,  
2099 appointed by the chair of the committee;]
- 2100 [(r) one individual who represents rural telecommunications providers, appointed by the  
2101 chair of the committee;]
- 2102 [(s) one individual who represents voice over internet protocol and land line providers,

2103 appointed by the chair of the committee; and]

2104 [~~(t) one individual who represents the Utah League of Cities and Towns, appointed by~~

2105 ~~the Utah League of Cities and Towns.]~~

2106 (3) The department, in consultation with the Utah Behavioral Health Commission, shall

2107 make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking

2108 Act, to establish the membership of the committee.

2109 [(2)] (4)(a) [~~Except as provided in Subsection (2)(d), the executive director of the~~

2110 ~~Huntsman Mental Health Institute is the chair of the committee.] The committee shall~~

2111 annually select one of the committee's members to serve as chair and two of the

2112 committee's members to serve as vice chairs.

2113 [(b) ~~The chair of the committee shall appoint a member of the committee to serve as the~~

2114 ~~vice chair of the committee, with the approval of the committee.]~~

2115 [(e)] (b) The chair of the committee shall set the agenda for each committee meeting.

2116 [(d) ~~If the executive director of the Huntsman Mental Health Institute is not available to~~

2117 ~~serve as the chair of the committee, the committee shall elect a chair from among the~~

2118 ~~committee's members.]~~

2119 [(3)] (5)(a) A majority of the members of the committee constitutes a quorum.

2120 (b) The action of a majority of a quorum constitutes the action of the committee.

2121 [(4)] (6) A member may not receive compensation, benefits, per diem, or travel expenses for

2122 the member's service on the committee.

2123 [(5)] (7) The [~~Office of the Attorney General~~] Office of Substance Use and Mental Health

2124 shall provide staff support to the committee.

2125 Section 31. Section **63C-18-203** is amended to read:

2126 **63C-18-203 (Effective 05/06/26) (Repealed 12/31/26). Committee duties.**

2127 [(1) ~~Under the direction of the Utah Behavioral Health Commission created in Section~~

2128 ~~26B-5-702, the committee shall:]~~

2129 [(a) ~~identify a method to integrate existing local mental health crisis lines to ensure each~~

2130 ~~individual who accesses a local mental health crisis line is connected to a qualified~~

2131 ~~mental or behavioral health professional, regardless of the time, date, or number of~~

2132 ~~individuals trying to simultaneously access the local mental health crisis line;]~~

2133 [(b) ~~study how to establish and implement a statewide mental health crisis line and a~~

2134 ~~statewide warm line, including identifying:]~~

2135 [(i) ~~a statewide phone number or other means for an individual to easily access the~~

2136 ~~statewide mental health crisis line, including a short code for text messaging and a~~

- 2137 three-digit number for calls;]
- 2138 [(ii) a statewide phone number or other means for an individual to easily access the
- 2139 statewide warm line, including a short code for text messaging and a three-digit
- 2140 number for calls;]
- 2141 [(iii) a supply of:]
- 2142 [(A) qualified mental or behavioral health professionals to staff the statewide
- 2143 mental health crisis line; and]
- 2144 [(B) qualified mental or behavioral health professionals or certified peer support
- 2145 specialists to staff the statewide warm line; and]
- 2146 [(iv) a funding mechanism to operate and maintain the statewide mental health crisis
- 2147 line and the statewide warm line;]
- 2148 [(e) coordinate with local mental health authorities in fulfilling the committee's duties
- 2149 described in Subsections (1)(a) and (b);]
- 2150 [(d) recommend standards for the certifications described in Section 26B-5-610; and]
- 2151 [(e) coordinate services provided by local mental health crisis lines and mobile crisis
- 2152 outreach teams, as defined in Section 62A-15-1401.]
- 2153 [(2)] (1) The committee shall study and make recommendations regarding:
- 2154 [(a) crisis line practices and needs, including:]
- 2155 [(i) quality and timeliness of service;]
- 2156 [(ii) service volume projections;]
- 2157 [(iii) a statewide assessment of crisis line staffing needs, including required
- 2158 certifications; and]
- 2159 [(iv) a statewide assessment of technology needs;]
- 2160 [(b) primary duties performed by crisis line workers;]
- 2161 [(e) coordination or redistribution of secondary duties performed by crisis line workers,
- 2162 including responding to non-emergency calls;]
- 2163 [(d)] (a) operating the statewide 988 hotline:
- 2164 (i) in accordance with federal law;
- 2165 (ii) to ensure the efficient and effective routing of calls to an appropriate crisis center;
- 2166 and
- 2167 (iii) to directly respond to calls with trained personnel and the provision of acute
- 2168 mental health, crisis outreach, and stabilization services;
- 2169 [(e)] (b) opportunities to increase operational and technological efficiencies and
- 2170 effectiveness between 988 and 911, utilizing current technology;

- 2171           ~~[(f)]~~ (c) needs for interoperability partnerships and policies related to 911 call transfers  
 2172                   and public safety responses;
- 2173           ~~[(g)]~~ (d) standards for statewide mobile crisis outreach teams, including:  
 2174                   (i) current models and projected needs;  
 2175                   (ii) quality and timeliness of service;  
 2176                   (iii) hospital and jail diversions; and  
 2177                   (iv) staffing and certification;
- 2178           ~~[(h)]~~ (e) resource centers, including:  
 2179                   (i) current models and projected needs; and  
 2180                   (ii) quality and timeliness of service;
- 2181           ~~[(i)]~~ (f) policy considerations related to whether the state should:  
 2182                   (i) manage, operate, and pay for a complete behavioral health system; or  
 2183                   (ii) create partnerships with private industry; and
- 2184           ~~[(j)]~~ (g) sustainable funding source alternatives, including:  
 2185                   (i) charging a 988 fee, including a recommendation on the fee amount;  
 2186                   (ii) General Fund appropriations;  
 2187                   (iii) other government funding options;  
 2188                   (iv) private funding sources;  
 2189                   (v) grants;  
 2190                   (vi) insurance partnerships, including coverage for support and treatment after initial  
 2191                               call and triage; and  
 2192                   (vii) other funding resources.
- 2193           (2) The committee shall monitor the effectiveness, quality, volume, and efficiency of the  
 2194                   statewide 988 crisis line.
- 2195           (3) The committee shall monitor crisis services throughout the state and make  
 2196                   recommendations for strategies for the expansion and continuous improvement of  
 2197                   quality standards for crisis services.
- 2198           ~~[(3)]~~ (4) The committee may conduct other business related to the committee's duties  
 2199                   described in this section.
- 2200           ~~[(4)]~~ (5) The committee shall consult with the Office of Substance Use and Mental Health  
 2201                   and make recommendations to the Utah Behavioral Health Commission regarding:  
 2202                   (a) the standards and operation of the statewide mental health crisis line and the  
 2203                               statewide warm line, in accordance with Section 26B-5-610; and  
 2204                   (b) the incorporation of the statewide mental health crisis line and the statewide warm

- 2205 line into behavioral health systems throughout the state.
- 2206 Section 32. Section **63I-1-226** is amended to read:
- 2207 **63I-1-226 (Effective 05/06/26). Repeal dates: Titles 26 through 26B.**
- 2208 (1) Subsection 26B-1-204(2)(g), regarding the Youth Electronic Cigarette, Marijuana, and  
2209 Other Drug Prevention Committee, is repealed July 1, 2030.
- 2210 (2) Subsection 26B-1-204(2)(h), regarding the Primary Care Grant Committee, is repealed  
2211 July 1, 2035.
- 2212 (3) Section 26B-1-315, Medicaid ACA Fund, is repealed July 1, 2034.
- 2213 (4) Section 26B-1-318, Brain and Spinal Cord Injury Fund, is repealed July 1, 2029.
- 2214 (5) Section 26B-1-402, Rare Disease Advisory Council Grant Program -- Creation --  
2215 Reporting, is repealed July 1, 2026.
- 2216 (6) Section 26B-1-409, Utah Digital Health Service Commission -- Creation -- Membership  
2217 -- Duties, is repealed July 1, 2025.
- 2218 (7) Section 26B-1-410, Primary Care Grant Committee, is repealed July 1, 2035.
- 2219 (8) Section 26B-1-417, Brain and Spinal Cord Injury Advisory Committee -- Membership  
2220 -- Duties, is repealed July 1, 2029.
- 2221 (9) Section 26B-1-422, Early Childhood Utah Advisory Council -- Creation --  
2222 Compensation -- Duties, is repealed July 1, 2029.
- 2223 (10) Section 26B-1-425, Utah Health Workforce Advisory Council -- Creation and  
2224 membership, is repealed July 1, 2027.
- 2225 (11) Section 26B-1-428, Youth Electronic Cigarette, Marijuana, and Other Drug Prevention  
2226 Committee and Program -- Creation -- Membership -- Duties, is repealed July 1, 2030.
- 2227 (12) Section 26B-1-430, Coordinating Council for Persons with Disabilities -- Policy  
2228 regarding services to individuals with disabilities -- Creation -- Membership --  
2229 Expenses, is repealed July 1, 2027.
- 2230 (13) Section 26B-1-432, Newborn Hearing Screening Committee, is repealed July 1, 2026.
- 2231 (14) Section 26B-2-407, Drinking water quality in child care centers, is repealed July 1,  
2232 2027.
- 2233 (15) Subsection 26B-3-107(9), regarding reimbursement for dental hygienists, is repealed  
2234 July 1, 2028.
- 2235 (16) Section 26B-3-136, Children's Health Care Coverage Program, is repealed July 1, 2025.
- 2236 (17) Section 26B-3-137, Reimbursement for diabetes prevention program, is repealed June  
2237 30, 2027.
- 2238 (18) Subsection 26B-3-213(2)(b), regarding consultation with the Behavioral Health Crisis

- 2239 Response Committee, is repealed December 31, 2026.
- 2240 (19) Section 26B-3-302, DUR Board -- Creation and membership -- Expenses, is repealed  
2241 July 1, 2027.
- 2242 (20) Section 26B-3-303, DUR Board -- Responsibilities, is repealed July 1, 2027.
- 2243 (21) Section 26B-3-304, Confidentiality of records, is repealed July 1, 2027.
- 2244 (22) Section 26B-3-305, Drug prior approval program, is repealed July 1, 2027.
- 2245 (23) Section 26B-3-306, Advisory committees, is repealed July 1, 2027.
- 2246 (24) Section 26B-3-307, Retrospective and prospective DUR, is repealed July 1, 2027.
- 2247 (25) Section 26B-3-308, Penalties, is repealed July 1, 2027.
- 2248 (26) Section 26B-3-309, Immunity, is repealed July 1, 2027.
- 2249 (27) Title 26B, Chapter 3, Part 5, Inpatient Hospital Assessment, is repealed July 1, 2034.
- 2250 (28) Title 26B, Chapter 3, Part 6, Medicaid Expansion Hospital Assessment, is repealed  
2251 July 1, 2034.
- 2252 (29) Title 26B, Chapter 3, Part 7, Hospital Provider Assessment, is repealed July 1, 2028.
- 2253 (30) Section 26B-3-910, Alternative eligibility -- Report -- Alternative Eligibility  
2254 Expendable Revenue Fund, is repealed July 1, 2028.
- 2255 (31) Section 26B-4-710, Rural residency training program, is repealed July 1, 2025.
- 2256 (32) Subsection 26B-5-112(1)(b), regarding consultation with the Behavioral Health Crisis  
2257 Response Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2258 (33) Subsection 26B-5-112(5)(b), regarding consultation with the Behavioral Health Crisis  
2259 Response Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2260 (34) Section 26B-5-112.5, Mobile Crisis Outreach Team Grant Program, is repealed  
2261 December 31, 2026.
- 2262 (35) Section 26B-5-114, Behavioral Health Receiving Center Grant Program, is repealed  
2263 December 31, 2026.
- 2264 (36) Section 26B-5-118, Collaborative care grant program, is repealed December 31, 2024.
- 2265 (37) Section 26B-5-120, Virtual crisis outreach team grant program, is repealed December  
2266 31, 2026.
- 2267 (38) Subsection 26B-5-609(1)(a), regarding the Behavioral Health Crisis Response  
2268 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2269 (39) Subsection 26B-5-609(3)(b), regarding the Behavioral Health Crisis Response  
2270 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2271 (40) Subsection 26B-5-610(1)(b), regarding the Behavioral Health Crisis Response  
2272 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.

- 2273 (41) Subsection 26B-5-610(2)(b)(ii), regarding the Behavioral Health Crisis Response  
 2274 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2275 (42) Section 26B-5-612, Integrated behavioral health care grant programs, is repealed  
 2276 December 31, 2025.
- 2277 (43) Title 26B, Chapter 5, Part 7, Utah Behavioral Health Commission, is repealed July 1,  
 2278 2029.
- 2279 (44) Subsection 26B-5-704(2)(a), regarding the Behavioral Health Crisis Response  
 2280 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2281 (45) Title 26B, Chapter 5, Part 8, Utah [~~Substance Use and Mental Health Advisory~~] Utah  
 2282 Behavioral Health Policy Review Committee, is repealed [~~January 1, 2033~~] July 1, 2029.
- 2283 (46) Section 26B-7-119, Hepatitis C Outreach Pilot Program, is repealed July 1, 2028.
- 2284 (47) Section 26B-7-122, Communication Habits to reduce Adolescent Threats Pilot  
 2285 Program, is repealed July 1, 2029.
- 2286 (48) Section 26B-7-123, Report on CHAT campaign, is repealed July 1, 2029.
- 2287 (49) Title 26B, Chapter 8, Part 5, Utah Health Data Authority, is repealed July 1, 2026.
- 2288 Section 33. Section **63I-1-232** is amended to read:
- 2289 **63I-1-232 (Effective 05/06/26). Repeal dates: Title 32B.**
- 2290 [~~(1) Subsection 32B-2-306(1)(a), regarding the Utah Substance Use and Mental Health~~  
 2291 ~~Advisory Committee, is repealed January 1, 2033.~~]
- 2292 [~~(2) Subsection 32B-2-306(4)(a), regarding a duty of the Utah Substance Use and Mental~~  
 2293 ~~Health Advisory Committee, is repealed January 1, 2033.~~]
- 2294 [~~(3) Subsection 32B-2-306(5)(b), regarding a submission to the Utah Substance Use and~~  
 2295 ~~Mental Health Advisory Committee, is repealed January 1, 2033.~~]
- 2296 [~~(4) Subsection 32B-2-402(1)(b), regarding the Utah Substance Use and Mental Health~~  
 2297 ~~Advisory Committee, is repealed January 1, 2033.~~] Subsection 32B-2-402(1)(d),  
 2298 regarding the Behavioral Health Commission, is repealed July 1, 2029.
- 2299 Section 34. Section **63I-1-263** is amended to read:
- 2300 **63I-1-263 (Effective 05/06/26). Repeal dates: Titles 63A to 63O.**
- 2301 (1) Title 63C, Chapter 4a, Constitutional and Federalism Defense Act, is repealed July 1,  
 2302 2028.
- 2303 (2) Title 63C, Chapter 18, Behavioral Health Crisis Response Committee, is repealed [  
 2304 ~~December 31, 2026~~] July 1, 2029.
- 2305 (3) Title 63C, Chapter 25, State Finance Review Commission, is repealed July 1, 2027.
- 2306 (4) Title 63C, Chapter 27, Cybersecurity Commission, is repealed July 1, 2032.

- 2307 (5) Title 63C, Chapter 28, Ethnic Studies Commission, is repealed July 1, 2026.
- 2308 (6) Title 63C, Chapter 31, State Employee Benefits Advisory Commission, is repealed July  
2309 1, 2028.
- 2310 (7) Section 63G-6a-805, Purchase from community rehabilitation programs, is repealed  
2311 July 1, 2026.
- 2312 (8) Title 63G, Chapter 21, Agreements to Provide State Services, is repealed July 1, 2028.
- 2313 (9) Title 63H, Chapter 4, Heber Valley Historic Railroad Authority, is repealed July 1, 2029.
- 2314 (10) Subsection 63J-1-602.2(16), related to the Communication Habits to reduce  
2315 Adolescent Threats (CHAT) Pilot Program, is repealed July 1, 2029.
- 2316 (11) Subsection 63J-1-602.2(26), regarding the Utah Seismic Safety Commission, is  
2317 repealed January 1, 2025.
- 2318 (12) Section 63L-11-204, Canyon resource management plan, is repealed July 1, 2027.
- 2319 (13) Title 63L, Chapter 11, Part 4, Resource Development Coordinating Committee, is  
2320 repealed July 1, 2027.
- 2321 (14) Title 63M, Chapter 7, Part 7, Domestic Violence Offender Treatment Board, is  
2322 repealed July 1, 2027.
- 2323 (15) Section 63M-7-902, Creation -- Membership -- Terms -- Vacancies -- Expenses, is  
2324 repealed July 1, 2029.
- 2325 (16) Title 63M, Chapter 11, Utah Commission on Aging, is repealed July 1, 2026.
- 2326 (17) Title 63N, Chapter 2, Part 2, Enterprise Zone Act, is repealed July 1, 2028.
- 2327 (18) Subsection 63N-2-511(1)(b), regarding the Board of Tourism Development, is  
2328 repealed July 1, 2030.
- 2329 (19) Section 63N-2-512, Hotel Impact Mitigation Fund, is repealed July 1, 2028.
- 2330 (20) Title 63N, Chapter 3, Part 9, Strategic Innovation Grant Pilot Program, is repealed July  
2331 1, 2027.
- 2332 (21) Title 63N, Chapter 3, Part 11, Manufacturing Modernization Grant Program, is  
2333 repealed July 1, 2028.
- 2334 (22) Title 63N, Chapter 4, Part 4, Rural Employment Expansion Program, is repealed July  
2335 1, 2028.
- 2336 (23) Section 63N-4-804, Rural Opportunity Advisory Committee, is repealed July 1, 2027.
- 2337 (24) Subsection 63N-4-805(5)(b), regarding the Rural Employment Expansion Program, is  
2338 repealed July 1, 2028.
- 2339 (25) Subsection 63N-7-101(1), regarding the Board of Tourism Development, is repealed  
2340 July 1, 2030.

- 2341 (26) Subsection 63N-7-102(3)(c), regarding a requirement for the Utah Office of Tourism  
2342 to receive approval from the Board of Tourism Development, is repealed July 1, 2030.
- 2343 (27) Title 63N, Chapter 7, Part 2, Board of Tourism Development, is repealed July 1, 2030.  
2344 Section 35. Section **64-13-45** is amended to read:  
2345 **64-13-45 (Effective 05/06/26). Department reporting requirements.**
- 2346 (1) As used in this section:
- 2347 (a) "Biological sex at birth" means the same as that term is defined in Section 26B-8-101.  
2348 (b)(i) "In-custody death" means an inmate death that occurs while the inmate is in the  
2349 custody of the department.  
2350 (ii) "In-custody death" includes an inmate death that occurs while the inmate is:  
2351 (A) being transported for medical care; or  
2352 (B) receiving medical care outside of a correctional facility, other than a county  
2353 jail.  
2354 (c) "Inmate" means an individual who is processed or booked into custody or housed in  
2355 the department or a correctional facility other than a county jail.  
2356 (d) "Opiate" means the same as that term is defined in Section 58-37-2.  
2357 (e) "Transgender inmate" means the same as that term is defined in Section 64-13-7.
- 2358 (2) The department shall submit a report to the Commission on Criminal and Juvenile  
2359 Justice created in Section 63M-7-201 before June 15 of each year that includes:
- 2360 (a) the number of in-custody deaths that occurred during the preceding calendar year,  
2361 including:  
2362 (i) the known, or discoverable on reasonable inquiry, causes and contributing factors  
2363 of each of the in-custody deaths described in Subsection (2)(a); and  
2364 (ii) the department's policy for notifying an inmate's next of kin after the inmate's  
2365 in-custody death;
- 2366 (b) the department policies, procedures, and protocols:  
2367 (i) for treatment of an inmate experiencing withdrawal from alcohol or substance use,  
2368 including use of opiates;  
2369 (ii) that relate to the department's provision, or lack of provision, of medications used  
2370 to treat, mitigate, or address an inmate's symptoms of withdrawal, including  
2371 methadone and all forms of buprenorphine and naltrexone; and  
2372 (iii) that relate to screening, assessment, and treatment of an inmate for a substance  
2373 use disorder or mental health disorder;
- 2374 (c) the number of inmates who gave birth and were restrained in accordance with

- 2375 Section 64-13-46, including:
- 2376 (i) the types of restraints used; and
- 2377 (ii) whether the use of restraints was to prevent escape or to ensure the safety of the
- 2378 inmate, medical or corrections staff, or the public;
- 2379 (d) the number of transgender inmates that are assigned to a living area with inmates
- 2380 whose biological sex at birth do not correspond with the transgender inmate's
- 2381 biological sex at birth in accordance with Section 64-13-7, including:
- 2382 (i) the results of the individualized security analysis conducted for each transgender
- 2383 inmate in accordance with Subsection 64-13-7(5)(a); and
- 2384 (ii) a detailed explanation regarding how the security conditions described in
- 2385 Subsection 64-13-7(5)(b) are met for each transgender inmate;
- 2386 (e) the number of transgender inmates that were:
- 2387 (i) assigned to a living area with inmates whose biological sex at birth do not
- 2388 correspond with the transgender inmate's biological sex at birth; and
- 2389 (ii) removed and assigned to a living area with inmates whose biological sex at birth
- 2390 corresponds with the transgender inmate's biological sex at birth in accordance
- 2391 with Subsection 64-13-7(6); and
- 2392 (f) any report the department provides or is required to provide under federal law or
- 2393 regulation relating to inmate deaths.
- 2394 (3) The Commission on Criminal and Juvenile Justice shall:
- 2395 (a) compile the information from the reports described in Subsection (2);
- 2396 (b) omit or redact any identifying information of an inmate in the compilation to the
- 2397 extent omission or redaction is necessary to comply with state and federal law ; and
- 2398 (c) submit the compilation to the Law Enforcement and Criminal Justice Interim
- 2399 Committee and the [~~Utah Substance Use and Mental Health Advisory Committee~~]
- 2400 Utah Behavioral Health Commission before November 1 of each year.
- 2401 (4) The Commission on Criminal and Juvenile Justice may not provide access to or use the
- 2402 department's policies, procedures, or protocols submitted under this section in a manner
- 2403 or for a purpose not described in this section.

2404 Section 36. Section **77-18-106** is amended to read:

2405 **77-18-106 (Effective 05/06/26). Treatment at the Utah State Hospital --**

2406 **Condition of probation or stay of sentence.**

2407 The court may order as a condition of probation, or a stay of sentence, that the defendant

2408 be voluntarily admitted to the custody of the Office of Substance Use and Mental Health for

2409 treatment at the Utah State Hospital only if the superintendent of the Utah State Hospital, or  
 2410 the superintendent's designee, certifies to the court that:

- 2411 (1) the defendant is appropriate for, and can benefit from, treatment at the Utah State
- 2412 Hospital;
- 2413 (2) there is space at the Utah State Hospital for treatment of the defendant; and
- 2414 (3) individuals described in Subsection [~~26B-5-306(2)(g)~~] 26B-5-306(3)(g) are receiving
- 2415 priority for treatment over the defendant.

2416 Section 37. **FY 2027 Appropriations.**

2417 The following sums of money are appropriated for the fiscal year beginning July 1,  
 2418 2026, and ending June 30, 2027. These are additions to amounts previously appropriated for  
 2419 fiscal year 2027.

2420 Subsection 37(a). **Operating and Capital Budgets**

2421 Under the terms and conditions of Title 63J, Chapter 1, Budgetary Procedures Act, the  
 2422 Legislature appropriates the following sums of money from the funds or accounts indicated for  
 2423 the use and support of the government of the state of Utah.

2424	ITEM 1	To Department of Health and Human Services - Clinical Services	
2425		From General Fund	299,700
2426		Schedule of Programs:	
2427		Medical Examiner	299,700

2428 The Legislature intends that the Department of  
 2429 Health and Human Services use the appropriation in this  
 2430 item to fund a family outreach specialist at the Office of  
 2431 the Medical Examiner.

2432	ITEM 2	To Department of Health and Human Services - Integrated Health Care Services	
2433		From General Fund	17,550,500
2434		From General Fund, One-time	9,100,500
2435		Schedule of Programs:	
2436		Non-Medicaid Behavioral Health Treatment and	
2437		Crisis Response	24,151,000
2438		State Hospital	2,500,000

2439 The Legislature intends that the Department of  
 2440 Health and Human Services use:  
 2441 (1) \$2,500,000 ongoing appropriation for the  
 2442 establishment and maintenance of 30 adult patient beds at

- 2443 the Utah State Hospital.
- 2444 (2) \$1,600,000 one-time appropriation and
- 2445 \$1,600,000 ongoing appropriation for two new Mobile
- 2446 Crisis Outreach Teams.
- 2447 (3) \$6,900,000 on-time appropriation and
- 2448 \$2,400,000 ongoing appropriation for up to two new
- 2449 rural behavioral health receiving centers.
- 2450 (4) \$10,000,000 ongoing appropriation for the
- 2451 community-based peer support services grant program
- 2452 created in Section 26B-5-122.
- 2453 (5) \$600,000 one-time appropriation for up to
- 2454 five pilot projects in rural areas to fund innovative and
- 2455 more humane ways to transport individuals experiencing
- 2456 a behavioral health crisis between medical settings.
- 2457 (6) \$100,000 ongoing appropriation for suicide
- 2458 prevention training under Section 26B-5-611.
- 2459 (7) \$850,000 ongoing appropriation for Utah's
- 2460 statewide Live On suicide prevention campaign.
- 2461 (8) \$100,000 ongoing to increase Medicaid rates
- 2462 for collaborative care codes.

2463 Subsection 37(b). **Capital Project Funds**

2464 The Legislature has reviewed the following capital project funds. The Legislature

2465 authorizes the State Division of Finance to transfer amounts between funds and accounts as

2466 indicated.

2467 ITEM 3 To Capital Budget - DFCM Capital Projects Fund

2468 From General Fund, One-time

88,000,000

2469 Schedule of Programs:

2470 DFCM Capital Projects Fund

88,000,000

2471 The Legislature intends the Division of Facilities

2472 Construction and Management to use the appropriaiton in

2473 this item to build 30 adult patient beds at the Utah State

2474 Hospital.

2475 Section 38. **Effective Date.**

2476 This bill takes effect on May 6, 2026.