

Steve Eliason proposes the following substitute bill:

**Behavioral and Mental Health Amendments**

2026 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Steve Eliason**

Senate Sponsor: Evan J. Vickers

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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 adding 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-5-331 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 118,  
66           277, 340, and 470

67           **26B-5-332 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 46, 118  
68           **26B-5-351 (Effective 05/06/26)**, as renumbered and amended by Laws of Utah 2023,  
69           Chapter 308

70           **26B-5-611 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245,  
71           250

72           **26B-5-703 (Effective 05/06/26) (Repealed 07/01/29)**, as enacted by Laws of Utah 2024,  
73           Chapter 245

74           **26B-5-704 (Effective 05/06/26) (Repealed 07/01/29)**, as enacted by Laws of Utah 2024,  
75           Chapter 245

76           **26B-5-705 (Effective 05/06/26) (Repealed 07/01/29)**, as enacted by Laws of Utah 2024,  
77           Chapter 245

78           **26B-5-801 (Effective 05/06/26) (Repealed 01/01/33)**, as last amended by Laws of Utah  
79           2025, First Special Session, Chapter 9

80           **26B-5-802 (Effective 05/06/26) (Repealed 01/01/33)**, as renumbered and amended by  
81           Laws of Utah 2024, Chapter 245

82           **26B-5-803 (Effective 05/06/26) (Repealed 01/01/33)**, as renumbered and amended by  
83           Laws of Utah 2024, Chapter 245

84           **32B-2-306 (Effective 05/06/26) (Partially Repealed 01/01/33)**, as last amended by Laws  
85           of Utah 2024, Chapters 245, 385

86           **32B-2-402 (Effective 05/06/26) (Partially Repealed 01/01/33)**, as last amended by Laws  
87           of Utah 2025, First Special Session, Chapter 16

88           **32B-2-404 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245,  
89           385

90           **32B-2-405 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245,  
91           385

92           **32B-7-305 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapter 245

93           **63C-18-202 (Effective 05/06/26) (Repealed 12/31/26)**, as last amended by Laws of Utah  
94           2024, Chapter 245

95           **63C-18-203 (Effective 05/06/26) (Repealed 12/31/26)**, as last amended by Laws of Utah  
96           2025, Chapter 277

97 **63I-1-226 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 47, 277  
 98 and 366

99 **63I-1-232 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Third Special  
 100 Session, Chapter 5

101 **63I-1-263 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapters 391,  
 102 512

103 **64-13-45 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapters 245, 341

104 ENACTS:

105 **26B-4-1103 (Effective 05/06/26)**, Utah Code Annotated 1953

106 **26B-4-1104 (Effective 05/06/26)**, Utah Code Annotated 1953

107 **26B-5-122 (Effective 05/06/26)**, Utah Code Annotated 1953

108 **26B-5-384 (Effective 05/06/26)**, Utah Code Annotated 1953

109 **26B-8-233 (Effective 05/06/26)**, Utah Code Annotated 1953

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

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

113 **17-72-408 (Effective 05/06/26). County jail reporting requirements.**

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

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

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

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

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

123 (i) the Bureau of Indian Affairs;

124 (ii) a state prison;

125 (iii) a federal prison;

126 (iv) the United States Immigration and Customs Enforcement; and

127 (v) any other entity with which a county jail has entered a contract to house inmates  
 128 on the entity's behalf;

129 (e) the number of prisoners that are denied pretrial release and held in the custody of the  
 130 county jail while the prisoner awaited final disposition of the prisoner's criminal

- 131 charges;
- 132 (f) for each prisoner booked into the county jail:
- 133 (i) the name of the agency that arrested the prisoner;
- 134 (ii) the date and time the prisoner was booked into and released from the custody of
- 135 the county jail;
- 136 (iii) if the prisoner was released from the custody of the county jail, the reason the
- 137 inmate was released from the custody of the county jail;
- 138 (iv) if the prisoner was released from the custody of the county jail on a financial
- 139 condition, whether the financial condition was set by a county sheriff or a court;
- 140 (v) the number of days the prisoner was held in the custody of the county jail before
- 141 disposition of the prisoner's criminal charges;
- 142 (vi) whether the prisoner was released from the custody of the county jail before final
- 143 disposition of the prisoner's criminal charges; and
- 144 (vii) the prisoner's state identification number;
- 145 (g) the number of in-custody deaths that occurred at the county jail;
- 146 (h) for each in-custody death:
- 147 (i) the deceased's name, gender, race, ethnicity, age, and known or suspected medical
- 148 diagnosis or disability, if any;
- 149 (ii) the date, time, and location of death;
- 150 (iii) the law enforcement agency that detained, arrested, or was in the process of
- 151 arresting the deceased; and
- 152 (iv) a brief description of the circumstances surrounding the death;
- 153 (i) the known, or discoverable on reasonable inquiry, causes and contributing factors of
- 154 each of the in-custody deaths described in Subsection (2)(g);
- 155 (j) the county jail's policy for notifying an inmate's next of kin after the prisoner's
- 156 in-custody death;
- 157 (k) the county jail policies, procedures, and protocols:
- 158 (i) for treatment of a prisoner experiencing withdrawal from alcohol or substance use,
- 159 including use of opiates;
- 160 (ii) that relate to the county jail's provision, or lack of provision, of medications used
- 161 to treat, mitigate, or address a prisoner's symptoms of withdrawal, including
- 162 methadone and all forms of buprenorphine and naltrexone; and
- 163 (iii) that relate to screening, assessment, and treatment of a prisoner for a substance
- 164 use or mental health disorder, including the policies, procedures, and protocols

- 165 that implement the requirements described in Section 17-72-501;
- 166 (l)(i) the number of prisoners whose screening described in Section 17-72-501
- 167 indicated the presence of a substance use disorder; and
- 168 (ii) of the prisoners whose screening indicated the presence of a substance use
- 169 disorder, the number of prisoners who received medication under a medication
- 170 assisted treatment plan; and
- 171 (m) any report the county jail provides or is required to provide under federal law or
- 172 regulation relating to prisoner deaths.
- 173 (2)(a) Subsection (1) does not apply to a county jail if the county jail:
- 174 (i) collects and stores the data described in Subsection (1); and
- 175 (ii) enters into a memorandum of understanding with the commission that allows the
- 176 commission to access the data described in Subsection (1).
- 177 (b) The memorandum of understanding described in Subsection (2)(a)(ii) shall include a
- 178 provision to protect any information related to an ongoing investigation and comply
- 179 with all applicable federal and state laws.
- 180 (c) If the commission accesses data from a county jail in accordance with Subsection
- 181 (2)(a), the commission may not release a report prepared from that data, unless:
- 182 (i) the commission provides the report for review to:
- 183 (A) the county jail; and
- 184 (B) any arresting agency that is named in the report; and
- 185 (ii)(A) the county jail approves the report for release;
- 186 (B) the county jail reviews the report and prepares a response to the report to be
- 187 published with the report; or
- 188 (C) the county jail fails to provide a response to the report within four weeks after
- 189 the day on which the commission provides the report to the county jail.
- 190 (3) The commission shall:
- 191 (a) compile the information from the reports described in Subsection (1);
- 192 (b) omit or redact any identifying information of an inmate in the compilation to the
- 193 extent omission or redaction is necessary to comply with state and federal law;
- 194 (c) submit the compilation to the Law Enforcement and Criminal Justice Interim
- 195 Committee and the [~~Utah Substance Use and Mental Health Advisory Committee~~]
- 196 Utah Behavioral Health Commission before November 1 of each year; and
- 197 (d) submit the compilation to the protection and advocacy agency designated by the
- 198 governor before November 1 of each year.

199 (4) The commission may not provide access to or use a county jail's policies, procedures, or  
200 protocols submitted under this section in a manner or for a purpose not described in this  
201 section.

202 (5) Upon request, a county jail shall make a report, including only the names and causes of  
203 death of deceased inmates and the facility in which the deceased inmates were being  
204 held in custody, available to the public.

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

206 **26B-1-325 (Effective 05/06/26). Governor's Suicide Prevention Fund.**

207 (1) There is created an expendable special revenue fund known as the Governor's Suicide  
208 Prevention Fund.

209 (2) The fund shall consist of donations, gifts, grants, and bequests of real property or  
210 personal property made to the fund.

211 (3) A donor to the fund may designate a specific purpose for the use of the donor's  
212 donation, if the designated purpose is described in Subsection (4).

213 (4)(a) Subject to Subsection (3), money in the fund shall be used for the following  
214 activities:

215 (i) efforts to directly improve mental health crisis response;

216 (ii) efforts that directly reduce risk factors associated with suicide; and

217 (iii) efforts that directly enhance known protective factors associated with suicide  
218 reduction.

219 (b) Efforts described in Subsections (4)(a)(ii) and (iii) include the components of the  
220 state suicide prevention program described in Subsection [26B-5-611(3)]

221 26B-5-611(4).

222 (5) The Office of Substance Use and Mental Health shall establish a grant application and  
223 review process for the expenditure of money from the fund.

224 (6) The grant application and review process shall describe:

225 (a) requirements to complete a grant application;

226 (b) requirements to receive funding;

227 (c) criteria for the approval of a grant application;

228 (d) standards for evaluating the effectiveness of a project proposed in a grant  
229 application; and

230 (e) support offered by the office to complete a grant application.

231 (7) The Office of Substance Use and Mental Health shall:

232 (a) review a grant application for completeness;

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

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

253 **26B-1-425 (Effective 05/06/26) (Repealed 07/01/27). Utah Health Workforce**  
254 **Advisory Council -- Creation and membership.**

- 255 (1) There is created within the department the Utah Health Workforce Advisory Council.
- 256 (2) The council shall be comprised of at least 14 but not more than 19 members.
- 257 (3) The following are members of the council:
- 258 (a) the executive director or that individual's designee;
- 259 (b) the executive director of the Department of Workforce Services or that individual's  
260 designee;
- 261 (c) the commissioner of higher education of the Utah System of Higher Education or  
262 that individual's designee;
- 263 (d) the state superintendent of the State Board of Education or that individual's designee;
- 264 (e) the executive director of the Department of Commerce or that individual's designee;
- 265 (f) the director of the Division of Multicultural Affairs or that individual's designee;
- 266 (g) the ~~[director]~~ chair of the ~~[Utah Substance Use and Mental Health Advisory~~

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

- 301 (c) the Department of Workforce Services;
- 302 (d) the Department of Commerce;
- 303 (e) the Utah Medical Education Council; and
- 304 (f) any other entity the council deems appropriate upon the entity's request.
- 305 (9)(a) The Utah Medical Education Council created in Section 26B-4-706 is a
- 306 subcommittee of the council.
- 307 (b) The council may establish subcommittees to support the work of the council.
- 308 (c) A member of the council shall chair a subcommittee created by the council.
- 309 (d) Except for the Utah Medical Education Council, the chair of the subcommittee may
- 310 appoint any individual to the subcommittee.
- 311 (10) For any report created by the council that pertains to any duty described in Subsection
- 312 (7), the council shall:
- 313 (a) provide the report to:
- 314 (i) the department; and
- 315 (ii) any appropriate legislative committee; and
- 316 (b) post the report on the council's website.
- 317 (11) The executive director shall:
- 318 (a) ensure the council has adequate staff to support the council and any subcommittee
- 319 created by the council; and
- 320 (b) provide any available information upon the council's request if:
- 321 (i) that information is necessary for the council to fulfill a duty described in
- 322 Subsection (7); and
- 323 (ii) the department has access to the information.
- 324 (12) A member of the council or a subcommittee created by the council may not receive
- 325 compensation or benefits for the member's service but may receive per diem and travel
- 326 expenses as allowed in:
- 327 (a) Section 63A-3-106;
- 328 (b) Section 63A-3-107; and
- 329 (c) rules made by the Division of Finance according to Sections 63A-3-106 and
- 330 63A-3-107.
- 331 Section 4. Section **26B-1-427** is amended to read:
- 332 **26B-1-427 (Effective 05/06/26). Alcohol Abuse Tracking Committee --Tracking**
- 333 **effects of abuse of alcoholic products.**
- 334 (1) There is created a committee within the department known as the Alcohol Abuse

- 335 Tracking Committee that consists of:
- 336 (a) the executive director or the executive director's designee;
- 337 (b) the commissioner of the Department of Public Safety or the commissioner's designee;
- 338 (c) the director of the Department of Alcoholic Beverage Services or that director's
- 339 designee;
- 340 (d) the executive director of the Department of Workforce Services or that executive
- 341 director's designee;
- 342 (e) the chair of the [~~Utah Substance Use and Mental Health Advisory Committee~~] Utah
- 343 Behavioral Health Commission or the chair's designee;
- 344 (f) the state court administrator or the state court administrator's designee; and
- 345 (g) the director of the Division of Technology Services or that director's designee.
- 346 (2) The executive director or the executive director's designee shall chair the committee.
- 347 (3)(a) Four members of the committee constitute a quorum.
- 348 (b) A vote of the majority of the committee members present when a quorum is present
- 349 is an action of the committee.
- 350 (4) The committee shall meet at the call of the chair.
- 351 (5) The committee may adopt additional procedures or requirements for:
- 352 (a) voting, when there is a tie of the committee members;
- 353 (b) how meetings are to be called; and
- 354 (c) the frequency of meetings.
- 355 (6) The committee shall establish a process to collect for each calendar year the following
- 356 information:
- 357 (a) the number of individuals statewide who are convicted of, plead guilty to, plead no
- 358 contest to, plead guilty in a similar manner to, or resolve by diversion or its
- 359 equivalent to a violation related to underage drinking of alcohol;
- 360 (b) the number of individuals statewide who are convicted of, plead guilty to, plead no
- 361 contest to, plead guilty in a similar manner to, or resolve by diversion or its
- 362 equivalent to a violation related to driving under the influence of alcohol;
- 363 (c) the number of violations statewide of Title 32B, Alcoholic Beverage Control Act,
- 364 related to over-serving or over-consumption of an alcoholic product;
- 365 (d) the cost of social services provided by the state related to abuse of alcohol, including
- 366 services provided by the Division of Child and Family Services;
- 367 (e) the location where the alcoholic products that result in the violations or costs
- 368 described in Subsections (6)(a) through (d) are obtained; and

369 (f) any information the committee determines can be collected and relates to the abuse of  
370 alcoholic products.

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

372 **26B-1-428 (Effective 05/06/26) (Repealed 07/01/30). Youth Electronic Cigarette,**  
373 **Marijuana, and Other Drug Prevention Committee and Program -- Creation --**  
374 **Membership -- Duties.**

375 (1) As used in this section:

376 (a) "Committee" means the Youth Electronic Cigarette, Marijuana, and Other Drug  
377 Prevention Committee created in Section 26B-1-204.

378 (b) "Program" means the Youth Electronic Cigarette, Marijuana, and Other Drug  
379 Prevention Program created in this section.

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

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

383 (i) establish guidelines for the use of funds appropriated to the program under  
384 Subsection 59-14-807(3)(a)(vi);

385 (ii) ensure that guidelines developed under Subsection (2)(b)(i) are evidence-based  
386 and appropriate for the population targeted by the program; and

387 (iii) subject to appropriations from the Legislature under Subsection  
388 59-14-807(3)(a)(vi), fund statewide initiatives to prevent use of electronic  
389 cigarettes, nicotine products, marijuana, and other drugs by youth.

390 (3)(a) The committee shall:

391 (i) advise the department on:

392 (A) preventing use of electronic cigarettes, marijuana, and other drugs by youth in  
393 the state;

394 (B) developing the guidelines described in Subsection (2)(b)(i); and

395 (C) implementing the provisions of the program; and

396 (ii) meet quarterly or more frequently as determined necessary by the department's  
397 designee under Subsection (3)(c)(ii).

398 (b) The executive director shall:

399 (i) appoint members of the committee; and

400 (ii) consult with the [~~Utah Substance Use and Mental Health Advisory Committee~~]  
401 Utah Behavioral Health Commission created in Section [~~26B-5-801~~] 26B-5-702  
402 when making the appointments under Subsection (3)(b)(i).

- 403 (c) The committee shall include, at a minimum:
- 404 (i) the executive director of a local health department as defined in Section 26A-1-102,
- 405 or the local health department executive director's designee;
- 406 (ii) one designee from the department;
- 407 (iii) one representative from the Department of Public Safety;
- 408 (iv) one representative from the behavioral health community; and
- 409 (v) one representative from the education community.
- 410 (d) A member of the committee may not receive compensation or benefits for the
- 411 member's service on the committee, but may receive per diem and travel expenses in
- 412 accordance with:
- 413 (i) Section 63A-3-106;
- 414 (ii) Section 63A-3-107; and
- 415 (iii) rules made by the Division of Finance under Sections 63A-3-106 and 63A-3-107.
- 416 (e) The department shall provide staff support to the committee.
- 417 (4) On or before October 31 of each year, the department shall report to:
- 418 (a) the Health and Human Services Interim Committee regarding:
- 419 (i) the use of funds appropriated to the program;
- 420 (ii) the impact and results of the program, including the effectiveness of each
- 421 program funded under Subsection (2)(b)(iii), during the previous fiscal year;
- 422 (iii) a summary of the impacts and results on reducing youth use of electronic
- 423 cigarettes and nicotine products by entities represented by members of the
- 424 committee, including those entities who receive funding through the Electronic
- 425 Cigarette Substance and Nicotine Product Proceeds Restricted Account created in
- 426 Section 59-14-807; and
- 427 (iv) any recommendations for legislation; and
- 428 (b) the [~~Utah Substance Use and Mental Health Advisory Committee~~] Utah Behavioral
- 429 Health Commission created in Section [~~26B-5-801~~] 26B-5-702, regarding:
- 430 (i) the effectiveness of each program funded under Subsection (2)(b)(iii) in
- 431 preventing youth use of electronic cigarettes, nicotine products, marijuana, and
- 432 other drugs; and
- 433 (ii) any collaborative efforts and partnerships established by the program with public
- 434 and private entities to prevent youth use of electronic cigarettes, marijuana, and
- 435 other drugs.
- 436 Section 6. Section **26B-2-135** is amended to read:

437 **26B-2-135 (Effective 05/06/26). Licensing behavioral health receiving centers.**438 (1) As used in this section:439 (a) "Diversion" means referral to a licensed center by a law enforcement agency, a law  
440 enforcement officer, or by court order:441 (i) under the terms of a diversion agreement described in Section 77-2-5;442 (ii) as a voluntary referral as described in Section 26B-5-121;443 (iii) as an alternative to penalties for a violation of probation or parole; or444 (iv) by any other court ordered or law enforcement facilitated alternative to criminal  
445 penalties.446 (b) "Diversion contact" means the prosecuting attorney that is a party to a diversion  
447 agreement or the law enforcement agency or officer that facilitates the diversion.448 (c) "Justice involved individual" means an individual who enters a treatment program  
449 through diversion.450 (d) "Licensed center" means a behavioral health receiving center licensed under this part.451 (e) "Local mental health authority" means a local mental health authority described in  
452 Section 17-77-301.453 (f) "Responsible law enforcement agency" means the law enforcement agency that  
454 employs a law enforcement officer that facilitates an individual's connection with a  
455 licensed center as described in Section 26B-5-121.456 (g) "Treatment program" means a licensed center's program for providing mental health  
457 services to an individual experiencing a mental health crisis.458 (2) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, and  
459 Section 63J-1-504, the office:460 [(1)] (a) shall ~~adopt~~ make and enforce rules to establish the process for initial and  
461 renewal applications to operate a behavioral health receiving center;462 [(2)] (b) may assess and collect application and renewal fees for behavioral health  
463 receiving center licenses; ~~and~~464 [(3)] (c) shall deposit any fees collected under Subsection [(2)] (2)(b) into the General  
465 Fund as a dedicated credit to be used solely to pay for or offset the office's costs  
466 incurred in performing the duties under this section[-] ; and

467 (d) shall make rules that:

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

- 471 (A) of treatment recommendations for the justice involved individual;  
 472 (B) if the justice involved individual is actively participating in the treatment  
 473 program;  
 474 (C) if the justice involved individual is resisting participation in the treatment  
 475 program;  
 476 (D) if applicable, if the justice involved individual violates the terms of a  
 477 diversion agreement related to the justice involved individual's participation in  
 478 the treatment program;  
 479 (E) within 24 hours after the justice involved individual leaves the treatment  
 480 program, if the justice involved individual leaves the treatment program against  
 481 the licensed center's advice; and  
 482 (F) if applicable, of the name of the health care provider to whom the licensed  
 483 center referred the justice involved individual for further treatment; and  
 484 (ii) require a licensed center to adopt a policy to implement the notification  
 485 requirements described in Subsection (2)(d)(i).

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

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

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

494 **26B-4-1103 (Effective 05/06/26). Mental health and substance use disorder**  
 495 **screening -- Study -- Recommendations -- Report.**

496 (1) As used in this section:

- 497 (a) "Commission" means the State Commission on Criminal and Juvenile Justice created  
 498 in Section 63M-7-201.  
 499 (b) "Screening tool" means the evidence-based screening tool to screen an inmate for  
 500 substance use disorders described in Subsection 17-72-501(2)(e).

501 (2)(a) In collaboration with the commission, the department shall provide a list of  
 502 screening tools.

503 (b) The department shall ensure that a recommended screening tool described in  
 504 Subsection (2)(a) is:

- 505 (i) evidence-based, standardized, and validated; and  
506 (ii) able to screen for substance use and mental health disorders and risk of substance  
507 use and mental health disorders.

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

509 **26B-4-1104 (Effective 05/06/26). Mental health and substance use disorder**  
510 **disclosure -- Standard form --Consent -- Sharing.**

511 (1) As used in this section:

- 512 (a) "Board of Pardons and Parole" means the Board of Pardons and Parole created in  
513 Section 77-27-2.
- 514 (b) "Commission" means the State Commission on Criminal and Juvenile Justice created  
515 in Section 63M-7-201.
- 516 (c) "County pretrial and probation services" means county-provided probation services  
517 as described in Section 17-72-601.
- 518 (d) "Defendant" means an individual who has been charged with a criminal offense, or  
519 been convicted of, or entered into a plea disposition for, criminal conduct.
- 520 (e) "Department of Corrections" means the Department of Corrections created in Section  
521 64-13-2.
- 522 (f) "Division of Adult Probation and Parole" means the Division of Adult Probation and  
523 Parole created in Section 64-14-202.
- 524 (g) "First responder" means the same as that term is defined in Section 26B-5-121.
- 525 (h) "Health care provider" means the same as that term is defined in Section 78B-3-403.
- 526 (i) "HIPAA" means the Health Insurance Portability and Accountability Act of 1996,  
527 Pub. L. No. 104-191, 110 Stat. 1936, as amended.
- 528 (j) "Parolee" means an individual on parole under the supervision of the Division of  
529 Adult Probation and Parole.
- 530 (k) "Probationer" means an individual on probation under the supervision of the  
531 Division of Adult Probation and Parole or county pretrial and probation services.

532 (2) Before December 31, 2026, the department shall create a standard form that:

- 533 (a) is compliant with HIPAA and 42 C.F.R. Part 2; and  
534 (b) a defendant, an inmate, a parolee, or a probationer may use to consent to the  
535 disclosure of the individual's mental health disorder or substance use disorder  
536 diagnosis to:  
537 (i) health care providers;  
538 (ii) first responders;

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

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

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

554    (4) The department shall make the form available for use by health care providers, first  
555            responders, courts, the Board of Pardons and Parole, the Department of Corrections, and  
556            the Division of Adult Probation and Parole.

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

- 559            (a) develop and implement standards and processes that comply with applicable state  
560            and federal laws and regulations for creating a release waiver that allows and  
561            individual's records to be used and disclosed in civil, criminal, administrative, or  
562            legislative proceedings;  
563            (b) define and restrict a person's access to the information disclosed in the form, which  
564            shall be based on:  
565            (i) the person's need to access the information to provide treatment or services to an  
566            individual;  
567            (ii) the person's contact with the individual;  
568            (iii) the individual's consent; and  
569            (iv) applicable law; and  
570            (c) identify additional persons for inclusion on the disclosure form as described in  
571            Subsection (2)(b)(ix).

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

- 573           **26B-5-121 (Effective 05/06/26). Voluntary referrals to substance use and mental**  
574 **health services by first responders -- Immunity from liability -- Reporting -- Rulemaking.**
- 575 (1) As used in this section:
- 576       (a) "First responder" means:
- 577           (i) a law enforcement officer, as that term is defined in Section 53-13-103;
- 578           (ii) emergency medical service personnel, as that term is defined in Section 53-2d-101;
- 579           (iii) an emergency medical technician, as that term is defined in Section 53-2e-101;
- 580           (iv) an advanced emergency medical technician, as that term is defined in Section
- 581                 53-2e-101;
- 582           (v) a firefighter, as that term is defined in Section 53H-11-306; or
- 583           (vi) a dispatcher, as that term is defined in Section 53-6-102.
- 584       (b) "Local services list" means a comprehensive list of local substance use or mental
- 585           health services, as described in Subsections 17-77-201(5)(b)(iii) and 17-77-301(5)(c).
- 586 (2) As and when appropriate, a first responder is encouraged to offer a referral to substance
- 587           use or mental health services to an individual who experiences an intentional or
- 588           accidental overdose.
- 589 (3) If an individual expresses interest in substance use or mental health services, a first
- 590           responder may, as appropriate:
- 591       (a) facilitate a real-time connection with an appropriate local service provider;
- 592       (b) contact the statewide 988 crisis line for assistance; or
- 593       (c) if the individual does not wish to speak with a service provider at that time, provide
- 594           the individual with a physical copy or electronic copy of a local services list.
- 595 (4)(a) This section does not create a duty for a first responder to offer or provide a
- 596           referral to substance use or mental health services.
- 597       (b) A first responder and an employer of a first responder are not liable under this
- 598           section for a first responder's action or failure to act in regards to offering or
- 599           providing a referral to substance use or mental health services as described in this
- 600           section.
- 601       (c) This section does not affect any privilege or immunity from liability, exemption from
- 602           law, ordinance, or rule, or any other benefit that applies to a first responder or an
- 603           employer of a first responder.
- 604 (5)(a) If a first responder offers a referral to substance use or mental health services as
- 605           described in this section, the first responder's employer shall report annually to the
- 606           division the total number of individuals who accepted a referral from all first

607 responders employed by the employer.

608 (b) The division shall make rules, in accordance with Title 63G, Chapter 3, Utah  
609 Administrative Rulemaking Act, specifying how the reports required by Subsection  
610 (5)(a) shall be submitted.

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

612 **26B-5-122 (Effective 05/06/26). Community-based peer support services grant**  
613 **program.**

614 (1) As used in this section:

615 (a) "Commission" means the Utah Behavioral Health Commission created in Section  
616 26B-5-702.

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

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

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

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

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

632 Section 11. Section **26B-5-331** is amended to read:

633 **26B-5-331 (Effective 05/06/26). Temporary commitment -- Requirements and**  
634 **procedures -- Rights.**

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

637 (a) a written application that:

638 (i) is completed by a responsible individual who has reason to know, stating a belief  
639 that the adult, due to mental illness, is likely to pose substantial danger to self or  
640 others if not restrained and stating the personal knowledge of the adult's condition

- 641 or circumstances that lead to the individual's belief; and
- 642 (ii) includes a certification by a licensed physician, licensed physician assistant,  
643 licensed nurse practitioner, or designated examiner stating that the physician,  
644 physician assistant, nurse practitioner, or designated examiner has examined the  
645 adult within a three-day period immediately preceding the certification, and that  
646 the physician, physician assistant, nurse practitioner, or designated examiner is of  
647 the opinion that, due to mental illness, the adult poses a substantial danger to self  
648 or others; or
- 649 (b) a peace officer or a mental health officer:
- 650 (i) observing an adult's conduct that gives the peace officer or mental health officer  
651 probable cause to believe that:
- 652 (A) the adult has a mental illness; and  
653 (B) because of the adult's mental illness and conduct, the adult poses a substantial  
654 danger to self or others; and
- 655 (ii) completing a temporary commitment application that:
- 656 (A) is on a form prescribed by the division;  
657 (B) states the peace officer's or mental health officer's belief that the adult poses a  
658 substantial danger to self or others;  
659 (C) states the specific nature of the danger;  
660 (D) provides a summary of the observations upon which the statement of danger is  
661 based; and  
662 (E) provides a statement of the facts that called the adult to the peace officer's or  
663 mental health officer's attention.
- 664 (2) If at any time a patient committed under this section no longer meets the commitment  
665 criteria described in Subsection (1), the local mental health authority's designee shall:
- 666 (a) document the change and release the patient; and  
667 (b) if the patient was admitted under Subsection (1)(b), notify the local mental health  
668 authority of the patient's release if deemed appropriate by a licensed health care  
669 provider or if the patient consents to the information being shared.
- 670 (3) A patient committed under this section may be held for a maximum of 72 hours after  
671 commitment, excluding Saturdays, Sundays, and state holidays, unless:
- 672 (a) as described in Section 26B-5-332, an application for involuntary commitment is  
673 commenced, which may be accompanied by an order of detention described in  
674 Subsection 26B-5-332(4); or

- 675 (b) the patient makes a voluntary application for admission.
- 676 (4) Upon a written application described in Subsection (1)(a) or the observation and belief  
677 described in Subsection (1)(b)(i), the adult shall be:
- 678 (a) taken into a peace officer's protective custody, by reasonable means, if necessary for  
679 public safety; and
- 680 (b) transported for temporary commitment to a facility designated by the local mental  
681 health authority, by means of:
- 682 (i) an ambulance, if the adult meets any of the criteria described in Section 53-2d-405;
- 683 (ii) an ambulance, if a peace officer is not necessary for public safety, and  
684 transportation arrangements are made by a physician, physician assistant, nurse  
685 practitioner, designated examiner, or mental health officer;
- 686 (iii) the city, town, or municipal law enforcement authority with jurisdiction over the  
687 location where the adult is present, if the adult is not transported by ambulance;
- 688 (iv) the county sheriff, if the designated facility is outside of the jurisdiction of the  
689 law enforcement authority described in Subsection (4)(b)(iii) and the adult is not  
690 transported by ambulance; or
- 691 (v) nonemergency secured behavioral health transport as that term is defined in  
692 Section 53-2d-101.
- 693 (5) Notwithstanding Subsection (4):
- 694 (a) an individual shall be transported by ambulance to an appropriate medical facility for  
695 treatment if the individual requires physical medical attention;
- 696 (b) if an officer has probable cause to believe, based on the officer's experience and  
697 de-escalation training that taking an individual into protective custody or transporting  
698 an individual for temporary commitment would increase the risk of substantial  
699 danger to the individual or others, a peace officer may exercise discretion to not take  
700 the individual into custody or transport the individual, as permitted by policies and  
701 procedures established by the officer's law enforcement agency and any applicable  
702 federal or state statute, or case law; and
- 703 (c) if an officer exercises discretion under Subsection (4)(b) to not take an individual  
704 into protective custody or transport an individual, the officer shall document in the  
705 officer's report the details and circumstances that led to the officer's decision.
- 706 (6)(a) The local mental health authority or the local mental health authority's designee  
707 shall inform an adult patient committed under this section of the reason for  
708 commitment.

- 709 (b) An adult patient committed under this section has the right to:
- 710 (i) within three hours after arrival at the local mental health authority, make a
- 711 telephone call, at the expense of the local mental health authority, to an individual
- 712 of the patient's choice; and
- 713 (ii) see and communicate with an attorney.
- 714 (7)(a) Title 63G, Chapter 7, Governmental Immunity Act of Utah, applies to this section.
- 715 (b) This section does not create a special duty of care.
- 716 (8)(a) A local mental health authority or the local mental health authority's designee
- 717 shall provide discharge instructions to each individual committed under this section
- 718 at or before the time the individual is discharged from the local mental health
- 719 authority's custody, regardless of whether the individual is discharged by being
- 720 released, taken into a peace officer's protective custody, transported to a medical
- 721 facility or other facility, or other circumstances.
- 722 (b) Discharge instructions provided under Subsection (8)(a) shall include:
- 723 (i) a safety plan for the individual based on the individual's mental illness or mental
- 724 or emotional state, if applicable;
- 725 (ii) notification to the individual's primary care provider, if applicable;
- 726 (iii) if the individual is discharged without food, housing, or economic security, a
- 727 referral to appropriate services, if such services exist in the individual's
- 728 community;
- 729 (iv) the phone number to call or text for a crisis services hotline, and information
- 730 about the availability of peer support services;
- 731 (v) a copy of any psychiatric advance directive, if applicable;
- 732 (vi) information about how to establish a psychiatric advance directive if one has not
- 733 been completed;
- 734 (vii) as applicable, information about medications that were changed or discontinued
- 735 during the commitment;
- 736 (viii) information about how to contact the local mental health authority if needed;
- 737 and
- 738 (ix) information about how to request a copy of the individual's medical record and
- 739 how to access the electronic patient portal for the individual's medical record.
- 740 (c) If an individual's medications were changed, or if an individual was prescribed new
- 741 medications while committed under this section, discharge instructions provided
- 742 under Subsection (8)(a) shall include a clinically appropriate supply of medications,

- 743 as determined by a licensed health care provider, to allow the individual time to  
 744 access another health care provider or follow-up appointment.
- 745 (d) Discharge instructions shall be provided in paper or electronic format based on the  
 746 individual's preference.
- 747 (e) If an individual refuses to accept discharge instructions, the local mental health  
 748 authority or the local mental health authority's designee shall document the refusal in  
 749 the individual's medical record.
- 750 (f) If an individual's discharge instructions include referrals to services under Subsection  
 751 (8)(b)(iii), the local mental health authority or the local mental health authority's  
 752 designee shall document those referrals in the individual's medical record.
- 753 (g) The local mental health authority shall attempt to follow up with a discharged  
 754 individual at least 48 hours after discharge, when appropriate, and may use peer  
 755 support professionals when performing follow-up care or developing a continuing  
 756 care plan.

757 Section 12. Section **26B-5-332** is amended to read:

758 **26B-5-332 (Effective 05/06/26). Involuntary commitment under court order --**  
 759 **Examination -- Hearing -- Power of court -- Findings required -- Costs.**

- 760 (1) A responsible individual who has credible knowledge of an adult's mental illness and  
 761 the condition or circumstances that have led to the adult's need to be involuntarily  
 762 committed may initiate an involuntary commitment court proceeding by filing, in the  
 763 court in the county where the proposed patient resides or is found, a written application  
 764 that includes:
- 765 (a) unless the court finds that the information is not reasonably available, the proposed  
 766 patient's:
- 767 (i) name;
- 768 (ii) date of birth; and
- 769 (iii) social security number;
- 770 (b)(i) a certificate of a licensed physician or a designated examiner stating that within  
 771 the seven-day period immediately preceding the certification, the physician or  
 772 designated examiner examined the proposed patient and is of the opinion that the  
 773 proposed patient has a mental illness and should be involuntarily committed; or
- 774 (ii) a written statement by the applicant that:
- 775 (A) the proposed patient has been requested to, but has refused to, submit to an  
 776 examination of mental condition by a licensed physician or designated

- 777                   examiner;
- 778                   (B) is sworn to under oath; and
- 779                   (C) states the facts upon which the application is based; and
- 780           (c) a statement whether the proposed patient has previously been under an assisted
- 781           outpatient treatment order, if known by the applicant.
- 782   (2) Before issuing a judicial order, the court:
- 783           (a) shall require the applicant to consult with the appropriate local mental health
- 784           authority at or before the hearing; and
- 785           (b) may direct a mental health professional from the local mental health authority to
- 786           interview the applicant and the proposed patient to determine the existing facts and
- 787           report the existing facts to the court.
- 788   (3) The court may issue an order, directed to a mental health officer or peace officer, to
- 789           immediately place a proposed patient in the custody of a local mental health authority or
- 790           in a temporary emergency facility, as described in Section 26B-5-334, to be detained for
- 791           the purpose of examination if:
- 792           (a) the court finds from the application, any other statements under oath, or any reports
- 793           from a mental health professional that there is a reasonable basis to believe that the
- 794           proposed patient has a mental illness that poses a danger to self or others and requires
- 795           involuntary commitment pending examination and hearing; or
- 796           (b) the proposed patient refuses to submit to an interview with a mental health
- 797           professional as directed by the court or to go to a treatment facility voluntarily.
- 798   (4)(a) The court shall provide notice of commencement of proceedings for involuntary
- 799           commitment, setting forth the allegations of the application and any reported facts,
- 800           together with a copy of any official order of detention, to a proposed patient before,
- 801           or upon, placement of the proposed patient in the custody of a local mental health
- 802           authority or, with respect to any proposed patient presently in the custody of a local
- 803           mental health authority whose status is being changed from voluntary to involuntary,
- 804           upon the filing of an application for that purpose with the court.
- 805           (b) The place of detention shall maintain a copy of the order of detention.
- 806   (5)(a) The court shall provide notice of commencement of proceedings for involuntary
- 807           commitment as soon as practicable to the applicant, any legal guardian, any
- 808           immediate adult family members, legal counsel for the parties involved, the local
- 809           mental health authority or the local mental health authority's designee, and any other
- 810           persons whom the proposed patient or the court designates.

- 811 (b) Except as provided in Subsection (5)(c), the notice under Subsection (5)(a) shall  
812 advise the persons that a hearing may be held within the time provided by law.
- 813 (c) If the proposed patient refuses to permit release of information necessary for  
814 provisions of notice under this subsection, the court shall determine the extent of  
815 notice.
- 816 (6) Proceedings for commitment of an individual under 18 years old to a local mental health  
817 authority may be commenced in accordance with Part 4, Commitment of Persons Under  
818 Age 18.
- 819 (7)(a) The court may, in the court's discretion, transfer the case to any other district court  
820 within this state, if the transfer will not be adverse to the interest of the proposed  
821 patient.
- 822 (b) If a case is transferred under Subsection (7)(a), the parties to the case may be  
823 transferred and the local mental health authority may be substituted in accordance  
824 with Utah Rules of Civil Procedure, Rule 25.
- 825 (8) Within 24 hours, excluding Saturdays, Sundays, and legal holidays, of the issuance of a  
826 judicial order, or after commitment of a proposed patient to a local mental health  
827 authority or the local mental health authority's designee under court order for detention  
828 or examination, the court shall appoint two designated examiners:
- 829 (a) who did not sign the civil commitment application nor the civil commitment  
830 certification under Subsection (1);
- 831 (b) one of whom is:
- 832 (i) a licensed physician; or
- 833 (ii) a psychiatric mental health nurse practitioner or a psychiatric mental health  
834 clinical nurse specialist who:
- 835 (A) is nationally certified;
- 836 (B) is doctorally trained; and
- 837 (C) has at least two years of inpatient mental health experience, regardless of the  
838 license the individual held at the time of that experience; and
- 839 (c) one of whom may be designated by the proposed patient or the proposed patient's  
840 counsel, if that designated examiner is reasonably available.
- 841 (9) The court shall schedule a hearing to be held within 10 calendar days after the day on  
842 which the designated examiners are appointed.
- 843 (10)(a) The designated examiners shall conduct the examinations separately.
- 844 (b) The designated examiners shall conduct the examinations:

- 845 (i) through telehealth unless the designated examiner determines that:
- 846 (A) a telehealth examination would not be sufficient to properly assess the
- 847 proposed patient;
- 848 (B) a telehealth examination would have a harmful effect on the proposed patient's
- 849 health; or
- 850 (C) an in-person examination can be conducted as effectively, conveniently, and
- 851 timely as an examination through telehealth; and
- 852 (ii) if the designated examiner determines, [~~pursuant to~~] in accordance with
- 853 Subsection (10)(b)(i), that the examination should be conducted in person, at the
- 854 home of the proposed patient, at a hospital or other medical facility, or at any
- 855 other suitable place that is not likely to have a harmful effect on the proposed
- 856 patient's health.
- 857 (c) The designated examiners shall inform the proposed patient, if not represented by an
- 858 attorney:
- 859 (i) that the proposed patient does not have to say anything;
- 860 (ii) of the nature and reasons for the examination;
- 861 (iii) that the examination was ordered by the court;
- 862 (iv) that any information volunteered could form part of the basis for the proposed
- 863 patient's involuntary commitment;
- 864 (v) that findings resulting from the examination will be made available to the court;
- 865 and
- 866 (vi) that the designated examiner may, under court order, obtain the proposed
- 867 patient's mental health records.
- 868 (d) Within 24 hours of examining the proposed patient, a designated examiner shall
- 869 report to the court, orally or in writing, whether the proposed patient is mentally ill,
- 870 has agreed to voluntary commitment, as described in Section 26B-5-360, or has
- 871 acceptable programs available to the proposed patient without court proceedings.
- 872 (e) If a designated examiner reports orally under Subsection (10)(d), the designated
- 873 examiner shall immediately send a written report to the clerk of the court.
- 874 (11) If a designated examiner is unable to complete an examination on the first attempt
- 875 because the proposed patient refuses to submit to the examination, the court shall fix a
- 876 reasonable compensation to be paid to the examiner.
- 877 (12) If the local mental health authority, the local mental health authority's designee, or a
- 878 medical examiner determines before the court hearing that the conditions justifying the

- 879 findings leading to a commitment hearing no longer exist, the local mental health  
880 authority, the local mental health authority's designee, or the medical examiner shall  
881 immediately report the determination to the court.
- 882 (13)(a) The court shall terminate the proceedings and dismiss the application before the  
883 hearing if both designated examiners inform the court that the proposed patient does  
884 not meet the criteria in Subsection (16).
- 885 (b) The court may terminate the proceedings and dismiss the application at any time,  
886 including before the hearing, if the designated examiners or the local mental health  
887 authority or the local mental health authority's designee informs the court that the  
888 proposed patient:
- 889 (i) has agreed to voluntary commitment, as described in Section 26B-5-360;  
890 (ii) has acceptable options for treatment programs that are available without court  
891 proceedings; or  
892 (iii) meets the criteria for assisted outpatient treatment described in Section  
893 26B-5-351.
- 894 (14)(a) Before the hearing, the court shall provide the proposed patient an opportunity to  
895 be represented by counsel, and if neither the proposed patient nor others provide  
896 counsel, the court shall appoint counsel and allow counsel sufficient time to consult  
897 with the proposed patient before the hearing.
- 898 (b) In the case of an indigent proposed patient, the county in which the proposed patient  
899 resides or is found shall make payment of reasonable attorney fees for counsel, as  
900 determined by the court.
- 901 (15)(a)(i) The court shall afford the proposed patient, the applicant, and any other  
902 person to whom notice is required to be given an opportunity to appear at the  
903 hearing, to testify, and to present and cross-examine witnesses.
- 904 (ii) The court may, in the court's discretion, receive the testimony of any other person.  
905 (iii) The court may allow a waiver of the proposed patient's right to appear for good  
906 cause, which cause shall be set forth in the record, or an informed waiver by the  
907 patient, which shall be included in the record.
- 908 (b) The court is authorized to exclude any person not necessary for the conduct of the  
909 proceedings and may, upon motion of counsel, require the testimony of each  
910 designated examiner to be given out of the presence of any other designated  
911 examiners.
- 912 (c) The court shall:

- 913 (i) conduct the hearing in as informal a manner as may be consistent with orderly  
914 procedure; and
- 915 (ii) while preserving the due process rights of the proposed patient:
- 916 (A) conduct the hearing remotely, in accordance with Utah Rules of Civil  
917 Procedure, Rule 87, unless the court finds good cause under Rule 87 not to  
918 conduct the hearing remotely; or
- 919 (B) if the court finds good cause under Rule 87 not to conduct the hearing  
920 remotely, conduct the hearing in a physical setting that is not likely to have a  
921 harmful effect on the mental health of the proposed patient.
- 922 (d) The court shall consider any relevant historical and material information that is  
923 offered, subject to the rules of evidence, including reliable hearsay under Utah Rules  
924 of Evidence, Rule 1102.
- 925 (e)(i) A local mental health authority or the local mental health authority's designee  
926 or the physician in charge of the proposed patient's care shall, at the time of the  
927 hearing, provide the court with the following information:
- 928 (A) the detention order;
- 929 (B) admission notes;
- 930 (C) the diagnosis;
- 931 (D) any doctors' orders;
- 932 (E) progress notes;
- 933 (F) nursing notes;
- 934 (G) medication records pertaining to the current commitment; and
- 935 (H) whether the proposed patient has previously been civilly committed or under  
936 an order for assisted outpatient treatment.
- 937 (ii) The local mental health authority or the local mental health authority's designee  
938 or the physician in charge of the proposed patient's care shall also supply the  
939 information described in Subsection (15)(e)(i) to the proposed patient's counsel at  
940 the time of the hearing, and at any time prior to the hearing upon request by the  
941 proposed patient's counsel.
- 942 (16)(a) The court shall order commitment of an adult proposed patient to a local mental  
943 health authority if, upon completion of the hearing and consideration of the  
944 information presented, the court finds by clear and convincing evidence that:
- 945 (i)(A) the proposed patient has a mental illness;
- 946 (B) because of the proposed patient's mental illness the proposed patient poses a

- 947 substantial danger to self or others;
- 948 (C) the proposed patient lacks the ability to engage in a rational decision-making  
949 process regarding the acceptance of mental treatment as demonstrated by  
950 evidence of inability to weigh the possible risks of accepting or rejecting  
951 treatment;
- 952 (D) there is no appropriate less-restrictive alternative to a court order of  
953 commitment; and
- 954 (E) the local mental health authority can provide the proposed patient with  
955 treatment that is adequate and appropriate to the proposed patient's conditions  
956 and needs; or
- 957 (ii)(A) the proposed patient has been charged with a criminal offense;
- 958 (B) with respect to the charged offense, the proposed patient is found incompetent  
959 to proceed as a result of a mental illness;
- 960 (C) the proposed patient has a mental illness;
- 961 (D) the proposed patient has a persistent unawareness of their mental illness and  
962 the negative consequences of that illness, or within the preceding six months  
963 has been requested or ordered to undergo mental health treatment but has  
964 unreasonably refused to undergo that treatment;
- 965 (E) there is no appropriate less-restrictive alternative to a court order of  
966 commitment; and
- 967 (F) the local mental health authority can provide the proposed patient with  
968 treatment that is adequate and appropriate to the proposed patient's conditions  
969 and needs.
- 970 (b)(i) If, at the hearing, the court determines that the proposed patient has a mental  
971 illness but does not meet the other criteria described in Subsection (16)(a), the  
972 court may consider whether the proposed patient meets the criteria for assisted  
973 outpatient treatment under Section 26B-5-351.
- 974 (ii) The court may order the proposed patient to receive assisted outpatient treatment  
975 in accordance with Section 26B-5-351 if, at the hearing, the court finds the  
976 proposed patient meets the criteria for assisted outpatient treatment under Section  
977 26B-5-351.
- 978 (iii) If the court determines that neither the criteria for commitment under Subsection  
979 (16)(a) nor the criteria for assisted outpatient treatment under Section 26B-5-351  
980 are met, the court shall dismiss the proceedings after the hearing.

- 981 (17)(a)(i) The court shall notify the appropriate mental health authority and the  
982 division no later than two business days after the day on which the court enters an  
983 order of commitment, including an order to extend the patient's treatment period.
- 984 [(i)] (ii) The order of commitment shall designate the period for which the patient  
985 shall be treated.
- 986 [(ii)] (iii) If the patient is not under an order of commitment at the time of the hearing,  
987 the patient's treatment period may not exceed six months without a review hearing.
- 988 [(iii)] (iv) Upon a review hearing, to be commenced before the expiration of the  
989 previous order of commitment, an order for commitment may be for an  
990 indeterminate period, if the court finds by clear and convincing evidence that the  
991 criteria described in Subsection (16) will last for an indeterminate period.
- 992 (b)(i) The court shall maintain a current list of all patients under the court's order of  
993 commitment and review the list to determine those patients who have been under  
994 an order of commitment for the court designated period.
- 995 (ii) At least two weeks before the expiration of the designated period of any order of  
996 commitment still in effect, the court that entered the original order of commitment  
997 shall inform the appropriate local mental health authority or the local mental  
998 health authority's designee of the expiration.
- 999 (iii) Upon receipt of the information described in Subsection (17)(b)(ii), the local  
1000 mental health authority or the local mental health authority's designee shall  
1001 immediately reexamine the reasons upon which the order of commitment was  
1002 based.
- 1003 (iv) If, after reexamination under Subsection (17)(b)(iii), the local mental health  
1004 authority or the local mental health authority's designee determines that the  
1005 conditions justifying commitment no longer exist, the local mental health  
1006 authority or the local mental health authority's designee shall discharge the patient  
1007 from involuntary commitment and immediately report the discharge to the court  
1008 and the division.
- 1009 (v) If, after reexamination under Subsection (17)(b)(iii), the local mental health  
1010 authority or the local mental health authority's designee determines that the  
1011 conditions justifying commitment continue to exist, the court shall immediately  
1012 appoint two designated examiners and proceed under Subsections (8) through (14).
- 1013 (c)(i) The local mental health authority or the local mental health authority's designee  
1014 responsible for the care of a patient under an order of commitment for an

- 1015 indeterminate period shall, at six-month intervals, reexamine the reasons upon  
1016 which the order of indeterminate commitment was based.
- 1017 (ii) If the local mental health authority or the local mental health authority's designee  
1018 determines that the conditions justifying commitment no longer exist, the local  
1019 mental health authority or the local mental health authority's designee shall  
1020 discharge the patient from the local mental health authority's or the local mental  
1021 health authority designee's custody and immediately report the discharge to the  
1022 court and the division.
- 1023 (iii) If the local mental health authority or the local mental health authority's designee  
1024 determines that the conditions justifying commitment continue to exist, the local  
1025 mental health authority or the local mental health authority's designee shall send a  
1026 written report of the findings to the court.
- 1027 (iv) The local mental health authority or the local mental health authority's designee  
1028 shall notify the patient and the patient's counsel of record in writing that the  
1029 involuntary commitment will be continued under Subsection (17)(c)(iii), the  
1030 reasons for the decision to continue, and that the patient has the right to a review  
1031 hearing by making a request to the court.
- 1032 (v) Upon receiving a request under Subsection (17)(c)(iv), the court shall  
1033 immediately appoint two designated examiners and proceed under Subsections (8)  
1034 through (14).
- 1035 (18)(a) Any patient committed as a result of an original hearing or a patient's legally  
1036 designated representative who is aggrieved by the findings, conclusions, and order of  
1037 the court entered in the original hearing has the right to a new hearing upon filing a  
1038 petition with the court within 30 days after the day on which the court entered the  
1039 order.
- 1040 (b) The petition shall allege error or mistake in the findings, in which case the court shall  
1041 appoint three impartial designated examiners previously unrelated to the case to  
1042 conduct an additional examination of the patient.
- 1043 (c) Except as provided in Subsection (18)(b), the court shall, in all other respects,  
1044 conduct the new hearing in the manner otherwise permitted.
- 1045 (19) The county in which the proposed patient resides or is found shall pay the costs of all  
1046 proceedings under this section.
- 1047 (20)(a) A local mental health authority or the local mental health authority's designee  
1048 shall provide discharge instructions to each individual committed under this section

- 1049 at or before the time the individual is discharged from the local mental health  
1050 authority's custody, regardless of the circumstances under which the individual is  
1051 discharged.
- 1052 (b) Discharge instructions provided under Subsection (20)(a) shall include:
- 1053 (i) a safety plan for the individual based on the individual's mental illness or mental  
1054 or emotional state, if applicable;
  - 1055 (ii) notification to the individual's primary care provider, if applicable;
  - 1056 (iii) if the individual is discharged without food, housing, or economic security, a  
1057 referral to appropriate services, if such services exist in the individual's  
1058 community;
  - 1059 (iv) the phone number to call or text for a crisis services hotline, and information  
1060 about the availability of peer support services;
  - 1061 (v) a copy of any psychiatric advance directive, if applicable;
  - 1062 (vi) information about how to establish a psychiatric advance directive if one has not  
1063 been completed;
  - 1064 (vii) as applicable, information about medications that were changed or discontinued  
1065 during the commitment;
  - 1066 (viii) information about how to contact the local mental health authority or  
1067 established provider as appropriate; and
  - 1068 (ix) information about how to request a copy of the individual's medical record and  
1069 how to access the electronic patient portal for the individual's medical record.
- 1070 (c) If an individual's medications were changed, or if an individual was prescribed new  
1071 medications while committed under this section, discharge instructions provided  
1072 under Subsection (20)(a) shall include a clinically appropriate supply of medications,  
1073 as determined by a licensed health care provider, to allow the individual time to  
1074 access another health care provider or follow-up appointment.
- 1075 (d) Discharge instructions shall be provided in paper or electronic format based on the  
1076 individual's preference.
- 1077 (e) If an individual refuses to accept discharge instructions, the local mental health  
1078 authority shall document the refusal in the individual's medical record.
- 1079 (f) If an individual's discharge instructions include referrals to services under Subsection  
1080 (20)(b)(iii), the local mental health authority shall document those referrals in the  
1081 individual's medical record.
- 1082 (g) The local mental health authority shall attempt to follow up with a discharged

1083 individual at least 48 hours after discharge, when appropriate, and may use peer  
1084 support professionals when performing follow-up care or developing a continuing  
1085 care plan.

1086 (21) If any provision of Subsection (16)(a)(ii) or the application of any provision of  
1087 Subsection (16)(a)(ii) to any person or circumstance is held invalid by a court with  
1088 jurisdiction, the remainder of Subsection (16)(a)(ii) shall be given effect without the  
1089 invalid provision or application. The provisions of Subsection (16)(a)(ii) are severable.

1090 Section 13. Section **26B-5-351** is amended to read:

1091 **26B-5-351 (Effective 05/06/26). Assisted outpatient treatment proceedings.**

1092 (1) A responsible individual who has credible knowledge of an adult's mental illness and  
1093 the condition or circumstances that have led to the adult's need for assisted outpatient  
1094 treatment may file, in the court in the county where the proposed patient resides or is  
1095 found, a written application that includes:

1096 (a) unless the court finds that the information is not reasonably available, the proposed  
1097 patient's:

1098 (i) name;

1099 (ii) date of birth; and

1100 (iii) social security number; and

1101 (b)(i) a certificate of a licensed physician or a designated examiner stating that within  
1102 the seven-day period immediately preceding the certification, the physician or  
1103 designated examiner examined the proposed patient and is of the opinion that the  
1104 proposed patient has a mental illness and should be involuntarily committed; or

1105 (ii) a written statement by the applicant that:

1106 (A) the proposed patient has been requested to, but has refused to, submit to an  
1107 examination of mental condition by a licensed physician or designated  
1108 examiner;

1109 (B) is sworn to under oath; and

1110 (C) states the facts upon which the application is based.

1111 (2)(a) Subject to Subsection (2)(b), before issuing a judicial order, the court may require  
1112 the applicant to consult with the appropriate local mental health authority, and the  
1113 court may direct a mental health professional from that local mental health authority  
1114 to interview the applicant and the proposed patient to determine the existing facts and  
1115 report them to the court.

1116 (b) The consultation described in Subsection (2)(a):

- 1117 (i) may take place at or before the hearing; and  
1118 (ii) is required if the local mental health authority appears at the hearing.
- 1119 (3) If the proposed patient refuses to submit to an interview described in Subsection (2)(a)  
1120 or an examination described in Subsection (8), the court may issue an order, directed to  
1121 a mental health officer or peace officer, to immediately place the proposed patient into  
1122 the custody of a local mental health authority or in a temporary emergency facility, as  
1123 provided in Section 26B-5-334, to be detained for the purpose of examination.
- 1124 (4) Notice of commencement of proceedings for assisted outpatient treatment, setting forth  
1125 the allegations of the application and any reported facts, together with a copy of any  
1126 official order of detention, shall:
- 1127 (a) be provided by the court to a proposed patient before, or upon, placement into the  
1128 custody of a local mental health authority or, with respect to any proposed patient  
1129 presently in the custody of a local mental health authority;
- 1130 (b) be maintained at the proposed patient's place of detention, if any;
- 1131 (c) be provided by the court as soon as practicable to the applicant, any legal guardian,  
1132 any immediate adult family members, legal counsel for the parties involved, the local  
1133 mental health authority or its designee, and any other person whom the proposed  
1134 patient or the court shall designate; and
- 1135 (d) advise that a hearing may be held within the time provided by law.
- 1136 (5) The court may, in its discretion, transfer the case to any other court within this state,  
1137 provided that the transfer will not be adverse to the interest of the proposed patient.
- 1138 (6) Within 24 hours, excluding Saturdays, Sundays, and legal holidays, of the issuance of a  
1139 judicial order, or after commitment of a proposed patient to a local mental health  
1140 authority or its designee under court order for detention in order to complete an  
1141 examination, the court shall appoint two designated examiners:
- 1142 (a) who did not sign the assisted outpatient treatment application nor the certification  
1143 described in Subsection (1);
- 1144 (b) one of whom is a licensed physician; and
- 1145 (c) one of whom may be designated by the proposed patient or the proposed patient's  
1146 counsel, if that designated examiner is reasonably available.
- 1147 (7) The court shall schedule a hearing to be held within 10 calendar days of the day on  
1148 which the designated examiners are appointed.
- 1149 (8)(a) The designated examiners shall:
- 1150 [~~(a)~~] (i) conduct their examinations separately;

1151            [~~(b)~~] (ii) conduct the examinations at the home of the proposed patient, at a hospital or  
 1152            other medical facility, or at any other suitable place that is not likely to have a  
 1153            harmful effect on the proposed patient's health;

1154            [~~(c)~~] (iii) inform the proposed patient, if not represented by an attorney:

1155            [(i)] (A) that the proposed patient does not have to say anything;

1156            [(ii)] (B) of the nature and reasons for the examination;

1157            [(iii)] (C) that the examination was ordered by the court;

1158            [(iv)] (D) that any information volunteered could form part of the basis for the  
 1159            proposed patient to be ordered to receive assisted outpatient treatment; and

1160            [(v)] (E) that findings resulting from the examination will be made available to the  
 1161            court; and

1162            [~~(d)~~] (iv) within 24 hours of examining the proposed patient, report to the court, orally  
 1163            or in writing, whether the proposed patient is mentally ill.

1164            (b) If the designated examiner reports orally under Subsection (8)(a)(iv), the designated  
 1165            examiner shall immediately send a written report to the clerk of the court.

1166            (9) If a designated examiner is unable to complete an examination on the first attempt  
 1167            because the proposed patient refuses to submit to the examination, the court shall fix a  
 1168            reasonable compensation to be paid to the examiner.

1169            (10) If the local mental health authority, its designee, or a medical examiner determines  
 1170            before the court hearing that the conditions justifying the findings leading to an assisted  
 1171            outpatient treatment hearing no longer exist, the local mental health authority, its  
 1172            designee, or the medical examiner shall immediately report that determination to the  
 1173            court.

1174            (11) The court may terminate the proceedings and dismiss the application at any time,  
 1175            including prior to the hearing, if the designated examiners or the local mental health  
 1176            authority or its designee informs the court that the proposed patient does not meet the  
 1177            criteria in Subsection (14).

1178            (12) Before the hearing, an opportunity to be represented by counsel shall be afforded to the  
 1179            proposed patient, and if neither the proposed patient nor others provide counsel, the  
 1180            court shall appoint counsel and allow counsel sufficient time to consult with the  
 1181            proposed patient before the hearing. In the case of an indigent proposed patient, the  
 1182            payment of reasonable attorney fees for counsel, as determined by the court, shall be  
 1183            made by the county in which the proposed patient resides or is found.

1184            (13)(a) All persons to whom notice is required to be given shall be afforded an

- 1185 opportunity to appear at the hearing, to testify, and to present and cross-examine  
1186 witnesses. The court may, in its discretion, receive the testimony of any other  
1187 individual. The court may allow a waiver of the proposed patient's right to appear for  
1188 good cause, which cause shall be set forth in the record, or an informed waiver by the  
1189 patient, which shall be included in the record.
- 1190 (b) The court is authorized to exclude all individuals not necessary for the conduct of the  
1191 proceedings and may, upon motion of counsel, require the testimony of each  
1192 examiner to be given out of the presence of any other examiners.
- 1193 (c) The hearing shall be conducted in as informal a manner as may be consistent with  
1194 orderly procedure, and in a physical setting that is not likely to have a harmful effect  
1195 on the mental health of the proposed patient.
- 1196 (d) The court shall consider all relevant historical and material information that is  
1197 offered, subject to the rules of evidence, including reliable hearsay under Rule 1102,  
1198 Utah Rules of Evidence.
- 1199 (e)(i) A local mental health authority or its designee, or the physician in charge of the  
1200 proposed patient's care shall, at the time of the hearing, provide the court with the  
1201 following information:
- 1202 (A) the detention order, if any;
  - 1203 (B) admission notes, if any;
  - 1204 (C) the diagnosis, if any;
  - 1205 (D) doctor's orders, if any;
  - 1206 (E) progress notes, if any;
  - 1207 (F) nursing notes, if any; and
  - 1208 (G) medication records, if any.
- 1209 (ii) The information described in Subsection (13)(e)(i) shall also be provided to the  
1210 proposed patient's counsel:
- 1211 (A) at the time of the hearing; and
  - 1212 (B) at any time prior to the hearing, upon request.
- 1213 (14) The court shall order a proposed patient to assisted outpatient treatment if, upon  
1214 completion of the hearing and consideration of the information presented, the court finds  
1215 by clear and convincing evidence that:
- 1216 (a) the proposed patient has a mental illness;
  - 1217 (b) there is no appropriate less-restrictive alternative to a court order for assisted  
1218 outpatient treatment; and

- 1219 (c)(i) the proposed patient lacks the ability to engage in a rational decision-making  
1220 process regarding the acceptance of mental health treatment, as demonstrated by  
1221 evidence of inability to weigh the possible risks of accepting or rejecting  
1222 treatment; or
- 1223 (ii) the proposed patient needs assisted outpatient treatment in order to prevent  
1224 relapse or deterioration that is likely to result in the proposed patient posing a  
1225 substantial danger to self or others.
- 1226 (15) The court may order the applicant or a close relative of the patient to be the patient's  
1227 personal representative, as described in 45 C.F.R. Sec. 164.502(g), for purposes of the  
1228 patient's mental health treatment.
- 1229 (16) In the absence of the findings described in Subsection (14), the court, after the hearing,  
1230 shall dismiss the proceedings.
- 1231 (17)(a) The court shall notify the appropriate mental health authority and the division no  
1232 later than two business days after the day on which the court enters an assisted  
1233 outpatient treatment order, including an order extending the duration of an assisted  
1234 outpatient treatment order.
- 1235 [(a)] (b) The assisted outpatient treatment order shall designate the period for which the  
1236 patient shall be treated, which may not exceed 12 months without a review hearing.
- 1237 [(b)] (c) At a review hearing, the court may extend the duration of an assisted outpatient  
1238 treatment order by up to 12 months, if:
- 1239 (i) the court finds by clear and convincing evidence that the patient meets the  
1240 conditions described in Subsection (14); or
- 1241 (ii)(A) the patient does not appear at the review hearing;  
1242 (B) notice of the review hearing was provided to the patient's last known address  
1243 by the applicant described in Subsection (1) or by a local mental health  
1244 authority; and  
1245 (C) the patient has appeared in court or signed an informed waiver within the  
1246 previous 18 months.
- 1247 [(e)] (d) The court shall maintain a current list of all patients under its order of assisted  
1248 outpatient treatment.
- 1249 [(d)] (e) At least two weeks prior to the expiration of the designated period of any  
1250 assisted outpatient treatment order still in effect, the court that entered the original  
1251 order shall inform the appropriate local mental health authority or its designee.
- 1252 (18) Costs of all proceedings under this section shall be paid by the county in which the

1253 proposed patient resides or is found.

1254 (19) A court may not hold an individual in contempt for failure to comply with an assisted  
1255 outpatient treatment order.

1256 (20) As provided in Section 31A-22-651, a health insurance provider may not deny an  
1257 insured the benefits of the insured's policy solely because the health care that the insured  
1258 receives is provided under a court order for assisted outpatient treatment.

1259 Section 14. Section **26B-5-384** is enacted to read:

1260 **26B-5-384** (Effective 05/06/26). **Statewide commitment database -- Restricted use**  
1261 **and access.**

1262 (1) As used in this section:

1263 (a) "Committed individual" means an individual who has been committed under Section  
1264 26B-5-331, 26B-5-332, or 26B-5-351.

1265 (b) "Committee" means the Health and Human Services Interim Committee.

1266 (2) The department shall establish by December 31, 2026, and shall maintain, a database of  
1267 individuals committed under Sections 26B-5-331, 26B-5-332, and 26B-5-351.

1268 (3) The database shall include:

1269 (a) the name and identifying information of a committed individual;

1270 (b) the type of commitment and statute authorizing the commitment;

1271 (c) the status of the committed individual; and

1272 (d) any other information the department deems necessary to carry out the requirements  
1273 of this section.

1274 (4) The department shall make rules in accordance with Title 63G, Chapter 3, Utah  
1275 Administrative Rulemaking Act, to:

1276 (a) implement this section;

1277 (b) ensure the privacy of committed individuals, including by:

1278 (i) establishing and restricting the permissible uses of the information in the database;

1279 (ii) defining and restricting access to the database, including by identifying persons  
1280 who may have access to the database;

1281 (iii) ensuring the system contains tools for:

1282 (A) logging;

1283 (B) data loss prevention;

1284 (C) identity management; and

1285 (D) access management, including role-based access; and

1286 (c) permit local mental health authorities to access civil commitments within the local

- 1287 mental health authority's authority area.
- 1288 (5) At or before the committee's November 2026 meeting, the department shall report to the
- 1289 committee on the department's rules made in accordance with Subsection (4)(b) to
- 1290 ensure the privacy of committed individuals.
- 1291 Section 15. Section **26B-5-611** is amended to read:
- 1292 **26B-5-611 (Effective 05/06/26). Suicide prevention -- Reporting requirements.**
- 1293 (1) As used in this section:
- 1294 (a) "Bureau" means the Bureau of Criminal Identification created in Section 53-10-201
- 1295 within the Department of Public Safety.
- 1296 (b) "Coalition" means the Statewide Suicide Prevention [~~Coalition~~] Committee created
- 1297 under Subsection (3).
- 1298 (c) "Commission" means the Utah Behavioral Health Commission created in Section
- 1299 26B-5-702.
- 1300 (d) "Coordinator" means the state suicide prevention coordinator appointed under
- 1301 Subsection (2).
- 1302 (e) "Fund" means the Governor's Suicide Prevention Fund created in Section 26B-1-325.
- 1303 (f) "Intervention" means an effort to prevent a person from attempting suicide.
- 1304 (g) "Legal intervention" means an incident in which an individual is shot by another
- 1305 individual who has legal authority to use deadly force.
- 1306 (h) "Postvention" means intervention after a suicide attempt or a suicide death to reduce
- 1307 risk and promote healing.
- 1308 (i) "Shooter" means an individual who uses a gun in an act that results in the death of the
- 1309 actor or another individual, whether the act was a suicide, homicide, legal
- 1310 intervention, act of self-defense, or accident.
- 1311 (2) The [~~division~~] office shall appoint a state suicide prevention coordinator to[~~, under the~~
- 1312 ~~direction of the commission,~~] administer a state suicide prevention program composed
- 1313 of suicide prevention, intervention, and postvention programs, services, and efforts.
- 1314 (3) The coordinator shall:
- 1315 (a) establish a Statewide Suicide Prevention Committee with membership from public
- 1316 and private organizations and Utah citizens; and
- 1317 (b) appoint a chair and co-chair from among the membership of the coalition to lead the
- 1318 coalition.
- 1319 (4) The state suicide prevention program may include the following components:
- 1320 (a) delivery of resources, tools, and training to community-based coalitions;

- 1321 (b) evidence-based suicide risk assessment tools and training;
- 1322 (c) town hall meetings for building community-based suicide prevention strategies;
- 1323 (d) suicide prevention gatekeeper training;
- 1324 (e) training to identify warning signs and to manage an at-risk individual's crisis;
- 1325 (f) evidence-based intervention training;
- 1326 (g) intervention skills training;
- 1327 (h) postvention training; or
- 1328 (i) a public education campaign to improve public awareness about warning signs of
- 1329 suicide and suicide prevention resources.
- 1330 (5) The coordinator shall coordinate with the following to gather statistics, among other
- 1331 duties:
- 1332 (a) local mental health and substance abuse authorities;
- 1333 (b) the State Board of Education, including the public education suicide prevention
- 1334 coordinator described in Section 53G-9-702;
- 1335 (c) applicable divisions and offices within the department;
- 1336 (d) health care providers, including emergency rooms;
- 1337 (e) federal agencies, including the Federal Bureau of Investigation;
- 1338 (f) other unbiased sources; and
- 1339 (g) other public health suicide prevention efforts.
- 1340 (6) The coordinator shall, in consultation with the bureau, implement and manage the
- 1341 operation of the firearm safety program described in Subsection 26B-5-102(3).
- 1342 (7) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
- 1343 division shall make rules:
- 1344 (a) governing the implementation of the state suicide prevention program, consistent
- 1345 with this section; and
- 1346 (b) in conjunction with the bureau, defining the criteria for employers to apply for grants
- 1347 under the Suicide Prevention Education Program described in Section 26B-5-110,
- 1348 which shall include:
- 1349 (i) attendance at the suicide prevention education course described in Subsection
- 1350 26B-5-102(3); and
- 1351 (ii) distribution of the firearm safety brochures or packets created in Subsection
- 1352 26B-5-102(3), but does not require the distribution of a cable-style gun lock with a
- 1353 firearm if the firearm already has a trigger lock or comparable safety mechanism.
- 1354 (8) As funding by the Legislature allows, the coordinator shall award grants, not to exceed a

1355 total of \$100,000 per fiscal year, to suicide prevention programs that focus on the needs  
1356 of children who have been served by the Division of Juvenile Justice and Youth Services.

1357 Section 16. Section **26B-5-703** is amended to read:

1358 **26B-5-703 (Effective 05/06/26) (Repealed 07/01/29). Purpose -- Duties --**

1359 **Reporting.**

1360 (1) The purpose of the commission is to be the central authority for coordinating behavioral  
1361 health initiatives between state and local governments, health systems, and other  
1362 interested persons, to ensure that Utah's behavioral health systems are comprehensive,  
1363 aligned, effective, and efficient.

1364 (2) To fulfill the commission's purpose, the commission shall:

1365 (a) establish a shared vision across public and private sectors for improving Utah's  
1366 behavioral health systems;

1367 (b) make recommendations, including policy recommendations, and advise the  
1368 governor, executive branch agencies, and the Legislature on matters pertaining to  
1369 behavioral health;

1370 (c) provide feedback on proposed bills, rules, policies, and budgets relating to behavioral  
1371 health;

1372 (d) encourage participation in the commission's work by individuals and populations  
1373 directly impacted by behavioral health issues, including family members of  
1374 individuals with behavioral health issues;

1375 (e) engage private sector payers, providers, and business and employer groups in the  
1376 commission's work;

1377 (f) continually review and revise the master plan as appropriate;

1378 (g) identify priorities and lead efforts to implement and advance those priorities by  
1379 coordinating and collaborating closely with public and private persons throughout the  
1380 state;

1381 (h) identify areas where innovation is necessary to improve behavioral health access and  
1382 care;

1383 (i) cooperate with the Utah System of Higher Education, the State Board of Education,  
1384 the Division of Professional Licensing, the Utah Health Workforce Advisory  
1385 Council, and the department to oversee the creation and implementation of  
1386 behavioral health workforce initiatives for the state;

1387 (j) collaborate with the Utah State Hospital, the Department of Corrections, county jails,  
1388 and the department;

- 1389           (k) regarding the interaction between an individual with a mental illness or an  
 1390               intellectual disability and the civil commitment system, criminal justice system, or  
 1391               juvenile justice system:
- 1392               (i) promote communication between and coordination among all agencies interacting  
 1393               with the individual;
- 1394               (ii) study, evaluate, and recommend changes to laws and procedures;
- 1395               (iii) identify and promote the implementation of specific policies and programs to  
 1396               deal fairly and efficiently with the individual; and
- 1397               (iv) promote judicial education;
- 1398           (l) study the long-term need for adult patient staffed beds at the state hospital, including:
- 1399               (i) the total number of staffed beds currently in use at the state hospital;
- 1400               (ii) the current staffed bed capacity at the state hospital;
- 1401               (iii) the projected total number of staffed beds needed in the adult general psychiatric  
 1402               unit of the state hospital over the next three, five, and 10 years based on:
- 1403               (A) the state's current and projected population growth;
- 1404               (B) current access to mental health resources in the community; and
- 1405               (C) any other factors the committee finds relevant to projecting the total number  
 1406               of staffed beds; and
- 1407               (iv) the cost associated with the projected total number of staffed beds described in Su  
 1408               bsection (2)(l)(iii);
- 1409           ~~(k)~~ (m) oversee coordination for the funding, implementation, and evaluation of suicide  
 1410               prevention efforts described in Section 26B-5-611;
- 1411           ~~(l)~~ (n) develop methods or models for implementing and coherently communicating  
 1412               cross-sector strategies;
- 1413           ~~(m)~~ (o) hold the state's behavioral health systems accountable for clear, measurable  
 1414               outcomes; and
- 1415           ~~(n)~~ (p) maintain independence from the department and the governor such that the  
 1416               commission and its committees are able to provide independent advice and  
 1417               recommendations, especially regarding proposed bills and policy considerations.
- 1418           (3) The commission may delegate responsibilities to the commission's committees and  
 1419               subcommittees as the commission deems appropriate.
- 1420           ~~(3)~~ (4)(a) The commission shall meet at least quarterly, but may meet at other times as  
 1421               scheduled by the chair.
- 1422               (b) The chair of the commission shall set the agenda for each commission meeting with

1423 input from commission members and staff.

1424 (c) Notice of the time and place of a commission meeting shall be given to each member  
1425 and to the public in compliance with Title 52, Chapter 4, Open and Public Meetings  
1426 Act.

1427 (d) A commission meeting is open to the public unless the meeting or a portion of a  
1428 meeting is closed by the commission pursuant to Section 52-4-204 or Section  
1429 52-4-205.

1430 ~~[(4)]~~ (5) On or before December 31, 2024, the commission shall provide a report to the  
1431 Legislature that includes:

1432 (a) recommendations for behavioral health measures and targets to be included in the  
1433 next update to the master plan;

1434 (b) recommendations for consolidating into the commission other commissions,  
1435 committees, subcommittees, task forces, working groups, or other bodies pertaining  
1436 to behavioral health;

1437 (c) recommendations on the next steps for reviewing and potentially redefining state law  
1438 and program options regarding county-based behavioral health services; and

1439 (d) recommendations on key budget priorities and key legislative policies for the 2025  
1440 General Session and thereafter.

1441 ~~[(5)]~~ (6)(a) Beginning in 2025, by no later than September 30 of each year, the  
1442 commission shall provide a report to the Health and Human Services Interim  
1443 Committee that describes the commission's work during the preceding year and  
1444 includes, in accordance with Section 26B-5-705, any legislative recommendations  
1445 from the commission.

1446 (b) Before the commission submits a legislative recommendation to the Health and  
1447 Human Services Interim Committee or the Legislature, the Legislative Policy  
1448 Committee created in Section 26B-5-705 shall review the recommendation.

1449 ~~[(6)]~~ (7) Neither the commission nor a committee of the commission may obtain any  
1450 individual's health or medical information, whether identifiable or deidentified, without  
1451 first obtaining the consent of the individual or the individual's legal representative.

1452 Section 17. Section **26B-5-704** is amended to read:

1453 **26B-5-704 (Effective 05/06/26) (Repealed 07/01/29). Committees -- Creation --**  
1454 **Duties.**

1455 (1) Each committee created under this part or formed by the commission in accordance  
1456 with this section serves under the direction of the commission.

- 1457 (2) In addition to the committees created under this part or formed by the commission, the  
 1458 following are committees of the commission and shall serve under the direction of the  
 1459 commission to assist the commission in performing the commission's duties:
- 1460 (a) the Behavioral Health Crisis Response Committee created in Section 63C-18-202;
  - 1461 (b) the Utah [~~Substance Use and Mental Health Advisory~~] Behavioral Health Policy  
 1462 Review Committee created in Section 26B-5-801; and
  - 1463 (c) the Statewide Suicide Prevention Committee created under Section 26B-5-611.
- 1464 (3)(a) In addition to the committees described in Subsection (2) or created under this  
 1465 part, the commission may form committees to support the commission in fulfilling  
 1466 the commission's duties.
- 1467 (b) When forming a committee, the commission shall, except as provided in Subsection  
 1468 (4):
    - 1469 (i) appoint members to the committee who represent a range of views and expertise;
    - 1470 and
    - 1471 (ii) adopt procedures and directives for the committee.
  - 1472 (c) Unless otherwise provided for in statute, a member of a committee may not receive  
 1473 compensation or benefits for the member's service on the committee, but may receive  
 1474 per diem and travel expenses in accordance with:
    - 1475 (i) Section 63A-3-106;
    - 1476 (ii) Section 63A-3-107; and
    - 1477 (iii) rules made by the Division of Finance under Sections 63A-3-106 and 63A-3-107.
  - 1478 (d) Compensation and expenses of a committee member who is a legislator are governed  
 1479 by Section 36-2-2 and Legislative Joint Rules, Title 5, Legislative Compensation and  
 1480 Expenses.
- 1481 (4) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the  
 1482 department may make rules, in consultation with the commission, to establish the  
 1483 membership, procedures, and directives of a committee the commission forms.
- 1484 Section 18. Section **26B-5-705** is amended to read:
- 1485 **26B-5-705 (Effective 05/06/26) (Repealed 07/01/29). Legislative Policy**  
 1486 **Committee -- Creation -- Duties -- Staff.**
- 1487 (1) As used in this section, "committee" means the Legislative Policy Committee created in  
 1488 Subsection (2).
  - 1489 (2) Under the commission, there is created the Legislative Policy Committee.
  - 1490 (3)(a) The committee is composed of five legislators, appointed as follows:

- 1491 (i) the speaker of the House of Representatives shall appoint one member of the  
 1492 House of Representatives;
- 1493 (ii) the minority leader of the House of Representatives shall appoint one member of  
 1494 the House of Representatives;
- 1495 (iii) the president of the Senate shall appoint one member of the Senate;
- 1496 (iv) the minority leader of the Senate shall appoint one member of the Senate; and
- 1497 (v) the speaker of the House of Representatives and the president of the Senate shall  
 1498 jointly appoint one legislator.
- 1499 (b) The speaker, president, and minority leaders:
- 1500 (i) shall make the appointments described in Subsection (3)(a) after consulting with  
 1501 the chairs of the Health and Human Services Interim Committee and the chairs of  
 1502 the Social Services Appropriations Subcommittee; and
- 1503 (ii) are encouraged but not required to appoint to the committee legislators who are  
 1504 members of one or more of the following:
- 1505 (A) the Health and Human Services Interim Committee; or
- 1506 (B) the Social Services Appropriations Subcommittee.
- 1507 (4) The speaker of the House of Representatives and the president of the Senate shall each  
 1508 designate one of their appointees as a co-chair of the committee.
- 1509 (5) The individual who appoints a member of the committee may change the appointment  
 1510 at any time.
- 1511 (6) The committee shall:
- 1512 (a) assist the commission and any of the commission's other committees with developing  
 1513 policy and legislative recommendations; and
- 1514 (b) review any legislative recommendation proposed by the commission before the  
 1515 legislative recommendation is provided to the Health and Human Services Interim  
 1516 Committee or the Legislature.
- 1517 (7)(a) As used in this Subsection (7), "working group" means the working group the  
 1518 committee convenes as described in Subsection (7)(b).
- 1519 (b) The committee shall convene a working group to investigate, study, and make  
 1520 recommendations to the Legislature regarding the entity in the best position to serve  
 1521 as the central authority for coordinating behavioral health initiatives between state  
 1522 and local governments, health systems, and other interested persons to ensure that  
 1523 Utah's behavioral health systems are comprehensive, aligned, effective, and efficient.
- 1524 (c) In carrying out the duties described in Subsection (7)(b), the working group shall

1525 consider:  
 1526 (i) an entity's ability to gather and analyze data; and  
 1527 (ii) the most effective duties and governance structure for the central authority.  
 1528 (d) The working group shall make the recommendations described in Subsection (7)(b)  
 1529 to the Health and Human Services Interim Committee on or before the date of the  
 1530 committee's November 2026 interim meeting.

1531 ~~[(7)]~~ (8) The committee may:

- 1532 (a) submit its own proposed legislation to the commission for consideration; and
- 1533 (b) provide other services as requested by the commission.

1534 ~~[(8)]~~ (9)(a) A majority of the members of the committee constitutes a quorum.

1535 (b) The action of a majority of a quorum constitutes the action of the committee.

1536 ~~[(9)]~~ (10) The Office of Legislative Research and General Counsel shall provide staff  
 1537 support to the committee.

1538 Section 19. Section **26B-5-801** is amended to read:

1539 **Part 8. Utah Behavioral Health Policy Review Committee**

1540 **26B-5-801 (Effective 05/06/26) (Repealed 01/01/33). Definitions -- Creation of**  
 1541 **committee -- Membership -- Terms.**

1542 (1)(a) As used in this part, "committee" means the Utah ~~[Substance Use and Mental~~  
 1543 ~~Health Advisory]~~ Behavioral Health Policy Review Committee created in this section.

1544 (b) There is created within the department the Utah ~~[Substance Use and Mental Health~~  
 1545 ~~Advisory]~~ Behavioral Health Policy Review Committee, which serves under the  
 1546 direction of the Utah Behavioral Health Commission created in Section 26B-5-702.

1547 ~~[(2) The committee shall be comprised of the following voting members:]~~

1548 ~~[(a) the attorney general or the attorney general's designee;]~~

1549 ~~[(b) one elected county official appointed by the Utah Association of Counties;]~~

1550 ~~[(c) the commissioner of public safety or the commissioner's designee;]~~

1551 ~~[(d) the director of the Division of Integrated Healthcare or the director's designee;]~~

1552 ~~[(e) the state superintendent of public instruction or the superintendent's designee;]~~

1553 ~~[(f) the executive director of the Department of Health and Human Services or the~~  
 1554 ~~executive director's designee;]~~

1555 ~~[(g) the executive director of the State Commission on Criminal and Juvenile Justice or~~  
 1556 ~~the executive director's designee;]~~

1557 ~~[(h) the executive director of the Department of Corrections or the executive director's~~  
 1558 ~~designee;]~~

- 1559            [~~(i) the director of the Division of Juvenile Justice and Youth Services or the director's~~  
1560            ~~designee;]~~
- 1561            [~~(j) the director of the Division of Child and Family Services or the director's designee;]~~
- 1562            [~~(k) the chair of the Board of Pardons and Parole or the chair's designee;]~~
- 1563            [~~(l) the director of the Office of Multicultural Affairs or the director's designee;]~~
- 1564            [~~(m) the director of the Division of Indian Affairs or the director's designee;]~~
- 1565            [~~(n) the state court administrator or the state court administrator's designee;]~~
- 1566            [~~(o) one district court judge who presides over a drug court and who is appointed by the~~  
1567            ~~chief justice of the Utah Supreme Court;]~~
- 1568            [~~(p) one district court judge who presides over a mental health court and who is~~  
1569            ~~appointed by the chief justice of the Utah Supreme Court;]~~
- 1570            [~~(q) one juvenile court judge who presides over a drug court and who is appointed by the~~  
1571            ~~chief justice of the Utah Supreme Court;]~~
- 1572            [~~(r) one prosecutor appointed by the Statewide Association of Prosecutors;]~~
- 1573            [~~(s) the chair or co-chair of each subcommittee established by the committee;]~~
- 1574            [~~(t) the chair or co-chair of the Statewide Suicide Prevention Committee created under~~  
1575            ~~Subsection 26B-5-611(3);]~~
- 1576            [~~(u) one representative appointed by the Utah League of Cities and Towns to serve a~~  
1577            ~~four-year term;]~~
- 1578            [~~(v) the chair of the Utah Victim Services Commission or the chair's designee;]~~
- 1579            [~~(w) the superintendent of the Utah State Hospital or the superintendent's designee;]~~
- 1580            [~~(x) the following members appointed by the governor to serve four-year terms:]~~
- 1581            [~~(i) one resident of the state who has been personally affected by a substance use or~~  
1582            ~~mental health disorder; and]~~
- 1583            [~~(ii) one citizen representative; and]~~
- 1584            [~~(y) in addition to the voting members described in Subsections (2)(a) through (x), the~~  
1585            ~~following voting members appointed by a majority of the members described in~~  
1586            ~~Subsections (2)(a) through (x) to serve four-year terms:]~~
- 1587            [~~(i) one resident of the state who represents a statewide advocacy organization for~~  
1588            ~~recovery from substance use disorders;]~~
- 1589            [~~(ii) one resident of the state who represents a statewide advocacy organization for~~  
1590            ~~recovery from mental illness;]~~
- 1591            [~~(iii) one resident of the state who represents a statewide advocacy organization for~~  
1592            ~~protection of rights of individuals with a disability;]~~

- 1593           ~~[(iv) one resident of the state who represents prevention professionals;]~~  
 1594           ~~[(v) one resident of the state who represents treatment professionals;]~~  
 1595           ~~[(vi) one resident of the state who represents the physical health care field;]~~  
 1596           ~~[(vii) one resident of the state who is a criminal defense attorney;]~~  
 1597           ~~[(viii) one resident of the state who is a military servicemember or military veteran~~  
 1598                   ~~under Section 53H-11-202;]~~  
 1599           ~~[(ix) one resident of the state who represents local law enforcement agencies;]~~  
 1600           ~~[(x) one representative of private service providers that serve youth with substance~~  
 1601                   ~~use disorders or mental health disorders; and]~~  
 1602           ~~[(xi) one resident of the state who is certified by the Division of Integrated~~  
 1603                   ~~Healthcare as a peer support specialist as described in Subsection~~  
 1604                   ~~26B-5-102(2)(gg).]~~

1605   ~~[(3) An individual other than an individual described in Subsection (2) may not be~~  
 1606           ~~appointed as a voting member of the committee.]~~

1607   ~~(2) The department, in consultation with the Behavioral Health Commission, shall make~~  
 1608           ~~rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to~~  
 1609           ~~establish the members of the committee.~~

1610           Section 20. Section **26B-5-802** is amended to read:

1611           **26B-5-802 (Effective 05/06/26) (Repealed 01/01/33). Chair -- Vacancies --**  
 1612   **Quorum -- Expenses.**

1613   (1) The Utah [~~Substance Use and Mental Health Advisory~~] Behavioral Health Policy Review  
 1614           Committee shall annually select one of [its] the committee's members to serve as chair  
 1615           and [~~one of its~~] two of the committee's members to serve as [~~vice chair~~] vice chairs.

1616   (2) When a vacancy occurs in the membership for any reason, the replacement shall be  
 1617           appointed for the unexpired term in the same manner as the position was originally filled.

1618   (3) A majority of the members of the committee constitutes a quorum.

1619   (4) A member may not receive compensation or benefits for the member's service, but may  
 1620           receive per diem and travel expenses as allowed in:

1621           (a) Section 63A-3-106;

1622           (b) Section 63A-3-107; and

1623           (c) rules made by the Division of Finance according to Sections 63A-3-106 and  
 1624                   63A-3-107.

1625   (5) The committee may establish subcommittees as needed to assist in accomplishing [its]  
 1626           the committee's duties under Section 26B-5-803.

1627 Section 21. Section **26B-5-803** is amended to read:

1628 **26B-5-803 (Effective 05/06/26) (Repealed 01/01/33). Duties of committee.**

1629 (1) Under the direction of the Utah Behavioral Health Commission created in Section  
1630 26B-5-702, the Utah [~~Substance Use and Mental Health Advisory~~] Behavioral Health  
1631 Policy Review Committee shall:

1632 [~~(a) provide leadership and generate unity for Utah's ongoing efforts to reduce and~~  
1633 ~~eliminate the impact of substance use and mental health disorders in Utah through a~~  
1634 ~~comprehensive and evidence-based prevention, treatment, and justice strategy;]~~

1635 [~~(b) recommend and coordinate the creation, dissemination, and implementation of~~  
1636 ~~statewide policies to address substance use and mental health disorders;]~~

1637 [~~(c) facilitate planning for a balanced continuum of substance use and mental health~~  
1638 ~~disorder prevention, treatment, and justice services;]~~

1639 [~~(d) promote collaboration and mutually beneficial public and private partnerships;]~~

1640 [~~(e)~~] (a) coordinate recommendations made by any subcommittee created under Section  
1641 26B-5-802;

1642 [~~(f)~~] (b) analyze and provide an objective assessment of all proposed legislation  
1643 concerning substance use, mental health, forensic mental health, and related issues;  
1644 and

1645 (c) advise the commission on behavioral health policy, proposed legislation, and  
1646 procedures.

1647 [~~(g) comply with Section 32B-2-306;]~~

1648 [~~(h) advise the Department of Health and Human Services regarding the state hospital~~  
1649 ~~admissions policy for individuals in the custody of the Department of Corrections;]~~

1650 [(i) regarding the interaction between an individual with a mental illness or an  
1651 intellectual disability and the civil commitment system, criminal justice system, or  
1652 juvenile justice system;]

1653 [(i) promote communication between and coordination among all agencies interacting  
1654 with the individual;]

1655 [(ii) study, evaluate, and recommend changes to laws and procedures;]

1656 [(iii) identify and promote the implementation of specific policies and programs to  
1657 deal fairly and efficiently with the individual; and]

1658 [(iv) promote judicial education;]

1659 [(j) study the long-term need for adult patient staffed beds at the state hospital, including:]

1660 [(i) the total number of staffed beds currently in use at the state hospital;]

- 1661           ~~[(ii) the current staffed bed capacity at the state hospital;]~~  
 1662           ~~[(iii) the projected total number of staffed beds needed in the adult general~~  
 1663           ~~psychiatric unit of the state hospital over the next three, five, and 10 years based~~  
 1664           ~~on;]~~  
 1665           ~~[(A) the state's current and projected population growth;]~~  
 1666           ~~[(B) current access to mental health resources in the community; and]~~  
 1667           ~~[(C) any other factors the committee finds relevant to projecting the total number~~  
 1668           ~~of staffed beds; and]~~  
 1669           ~~[(iv) the cost associated with the projected total number of staffed beds described in~~  
 1670           ~~Subsection (1)(j)(iii); and]~~  
 1671           ~~[(k) each year report on whether the pay of the state hospital's employees is adequate~~  
 1672           ~~based on market conditions.]~~  
 1673           (2) The committee shall meet quarterly or more frequently as determined necessary by the  
 1674           chair.  
 1675           (3) The committee shall report~~[:]~~ any recommendations annually to the commission, the  
 1676           governor, and the Legislature.  
 1677           ~~[(a) with the assistance and staff support from the state hospital, regarding the items~~  
 1678           ~~described in Subsections (1)(j) and (k), including any recommendations, to the Utah~~  
 1679           ~~Behavioral Health Commission on or before July 31 of each year; and]~~  
 1680           ~~[(b) any other recommendations annually to the commission, the governor, the~~  
 1681           ~~Legislature, and the Judicial Council.]~~  
 1682           Section 22. Section **26B-8-233** is enacted to read:  
 1683           **26B-8-233 (Effective 05/06/26). Family outreach specialist.**  
 1684           (1) With funds appropriated by the Legislature for this purpose, the department shall  
 1685           provide compensation, at a standard rate determined by the department, to a family  
 1686           outreach specialist.  
 1687           (2) The family outreach specialist shall:  
 1688           (a) engage with relatives or the legal guardian of an individual who has recently died by  
 1689           suicide or overdose to better understand the circumstances that precede a suicide or  
 1690           drug-related death, including by:  
 1691           (i) contacting next of kin;  
 1692           (ii) collecting information in an interview;  
 1693           (iii) assessing next of kin; and  
 1694           (iv) providing targeted bereavement care; and

- 1695 (b) assist the medical examiner with suicide intervention, prevention, and postvention,  
 1696 including:  
 1697 (i) mortality surveillance;  
 1698 (ii) research coordination;  
 1699 (iii) data management and analysis; and  
 1700 (iv) epidemiological surveillance.

1701 Section 23. Section **32B-2-306** is amended to read:

1702 **32B-2-306 (Effective 05/06/26) (Partially Repealed 01/01/33). Underage drinking**  
 1703 **prevention media and education campaign.**

1704 (1) As used in this section[;], "restricted account" means the Underage Drinking Prevention  
 1705 Media and Education Campaign Restricted Account created in this section.

1706 [(a) "Advisory committee" means the Utah Substance Use and Mental Health Advisory  
 1707 Committee created in Section 26B-5-801.]

1708 [(b) "Restricted account" means the Underage Drinking Prevention Media and  
 1709 Education Campaign Restricted Account created in this section.]

1710 (2)(a) There is created a restricted account within the General Fund known as the  
 1711 "Underage Drinking Prevention Media and Education Campaign Restricted Account."

1712 (b) The restricted account consists of:  
 1713 (i) deposits made under Subsection (3); and  
 1714 (ii) interest earned on the restricted account.

1715 (3) The department shall deposit 0.6% of the total gross revenue from sales of liquor with  
 1716 the state treasurer, as determined by the total gross revenue collected for the fiscal year  
 1717 two years preceding the fiscal year for which the deposit is made, to be credited to the  
 1718 restricted account and to be used by the department as provided in Subsection (5).

1719 (4)[(a) ~~Before January 1, 2033, the advisory committee shall:~~]

1720 [(i) ~~provide ongoing oversight of a media and education campaign funded under this~~  
 1721 ~~section;~~]

1722 [(ii) ~~create an underage drinking prevention workgroup consistent with guidelines~~  
 1723 ~~proposed by the advisory committee related to the membership and duties of the~~  
 1724 ~~underage drinking prevention workgroup;~~]

1725 [(iii) ~~create guidelines for how money appropriated for a media and education~~  
 1726 ~~campaign can be used;~~]

1727 [(iv) ~~include in the guidelines established pursuant to this Subsection (4) that a media~~  
 1728 ~~and education campaign funded under this section is carefully researched and~~

1729                    developed, and appropriate for target groups; and]

1730                    [(v) approve plans submitted by the department in accordance with Subsection (5).]

1731                    [(b) ~~On or after January 1, 2033, the~~] The department shall:

1732                    [(i)] (a) provide ongoing oversight of a media and education campaign funded under this

1733                    section;

1734                    [(ii)] (b) create guidelines for how money appropriated for a media and education

1735                    campaign can be used; and

1736                    [(iii)] (c) include in the guidelines [~~established pursuant to this Subsection (4)~~] that a

1737                    media and education campaign funded under this section is carefully researched and

1738                    developed, and appropriate for target groups.

1739                    (5)(a) Subject to appropriation from the Legislature, the department shall expend money

1740                    from the restricted account to direct and fund one or more media and education

1741                    campaigns designed to reduce underage drinking [~~in cooperation with the advisory~~

1742                    ~~committee, subject to the advisory committee being in effect under Section 63I-1-232].~~

1743                    (b)[(i) ~~Before January 1, 2033, the department shall:~~]

1744                                       [(A) ~~in cooperation with the underage drinking prevention workgroup created~~

1745                                       ~~under Subsection (4), prepare and submit a plan to the advisory committee~~

1746                                       ~~detailing the intended use of the money appropriated under this section;]~~

1747                                       [(B) ~~upon approval of the plan by the advisory committee, conduct the media and~~

1748                                       ~~education campaign in accordance with the guidelines made by the advisory~~

1749                                       ~~committee; and]~~

1750                                       [(C) ~~submit to the advisory committee annually by no later than October 1, a~~

1751                                       ~~written report detailing the use of the money for the media and education~~

1752                                       ~~campaigns conducted under this Subsection (5) and the impact and results of~~

1753                                       ~~the use of the money during the prior fiscal year ending June 30.]~~

1754                    [(ii) ~~On or after January 1, 2033, the~~] The department shall:

1755                                       [(A)] (i) prepare a plan detailing the intended use of the money appropriated under

1756                                       this section; [~~and]~~

1757                                       [(B)] (ii) conduct the media and education campaign in accordance with the

1758                                       guidelines created by the department under Subsection (4)(b)[~~;~~] ; and

1759                                       (iii) coordinate and maintain ongoing communications and collaboration with public

1760                                       entities and private organizations to reduce underage drinking.

1761                    (c) The department shall annually, no later than October 1 for the fiscal year ending on

1762                    June 30 of that calendar year, report to the Utah Behavioral Health Commission on:

- 1763            (i) the media and education campaign, including the campaign's impact; and  
 1764            (ii) the results of the efforts to reduce underage drinking.

1765            Section 24. Section **32B-2-402** is amended to read:

1766            **32B-2-402 (Effective 05/06/26) (Partially Repealed 01/01/33). Definitions --**

1767            **Calculations.**

1768            (1) As used in this part:

1769            (a) "Account" means the Alcoholic Beverage and Substance Abuse Enforcement and  
 1770            Treatment Restricted Account created in Section 32B-2-403.

1771            [~~(b)~~] "~~Advisory committee~~" means the ~~Utah Substance Use and Mental Health Advisory~~  
 1772            ~~Committee created in Section 26B-5-801.~~]

1773            [(~~e~~)] (b) "Alcohol-related offense" means:

1774            (i) a violation of:

1775            (A) Section 41-6a-502; or

1776            (B) an ordinance that complies with the requirements of:

1777            (I) Subsection 41-6a-510(1); or

1778            (II) Section 76-5-207; or

1779            (ii) an offense involving the illegal:

1780            (A) sale of an alcoholic product;

1781            (B) consumption of an alcoholic product;

1782            (C) distribution of an alcoholic product;

1783            (D) transportation of an alcoholic product; or

1784            (E) possession of an alcoholic product.

1785            [(~~d~~)] (c) "Annual conviction time period" means the time period that:

1786            (i) begins on July 1 and ends on June 30; and

1787            (ii) immediately precedes the fiscal year for which an appropriation under this part is  
 1788            made.

1789            (d) "Commission" means the Utah Behavioral Health Commission created in Section  
 1790            26B-5-702.

1791            (e) "Municipality" means a city or town.

1792            (f)(i) "Prevention" is as defined by rule, in accordance with Title 63G, Chapter 3,  
 1793            Utah Administrative Rulemaking Act, by the Division of Integrated Healthcare  
 1794            within the Department of Health and Human Services.

1795            (ii) In defining the term "prevention," the Division of Substance Abuse and Mental  
 1796            Health shall:

- 1797 (A) include only evidence-based or evidence-informed programs; and  
1798 (B) provide for coordination with local substance abuse authorities designated to  
1799 provide substance abuse services in accordance with Section 17-77-201.
- 1800 (2) For purposes of Subsection 32B-2-404(1)(b)(iii), the number of premises located within  
1801 the limits of a municipality or county:  
1802 (a) is the number determined by the department to be so located;  
1803 (b) includes the aggregate number of premises of the following:  
1804 (i) a state store;  
1805 (ii) a package agency; and  
1806 (iii) a retail licensee; and  
1807 (c) for a county, consists only of the number located within an unincorporated area of  
1808 the county.
- 1809 (3) The department shall determine:  
1810 (a) a population figure according to the most current population estimate prepared by the  
1811 Utah Population Committee;  
1812 (b) a county's population for the 25% distribution to municipalities and counties under  
1813 Subsection 32B-2-404(1)(b)(i) only with reference to the population in the  
1814 unincorporated areas of the county; and  
1815 (c) a county's population for the 25% distribution to counties under Subsection  
1816 32B-2-404(1)(b)(iv) only with reference to the total population in the county,  
1817 including that of a municipality.
- 1818 (4)(a) A conviction occurs in the municipality or county that actually prosecutes the  
1819 offense to judgment.  
1820 (b) If a conviction is based upon a guilty plea, the conviction is considered to occur in  
1821 the municipality or county that, except for the guilty plea, would have prosecuted the  
1822 offense.
- 1823 Section 25. Section **32B-2-404** is amended to read:  
1824 **32B-2-404 (Effective 05/06/26). Alcoholic Beverage and Substance Abuse**  
1825 **Enforcement and Treatment Restricted Account distribution.**
- 1826 (1)(a) The money deposited into the account under Section 32B-2-403 shall be  
1827 distributed to municipalities and counties:  
1828 (i) to the extent appropriated by the Legislature, except that the Legislature shall  
1829 appropriate each fiscal year an amount equal to at least the amount deposited in  
1830 the account in accordance with Section 59-15-109; and

- 1831 (ii) as provided in this Subsection (1).
- 1832 (b) The amount appropriated from the account shall be distributed as follows:
- 1833 (i) 25% to municipalities and counties on the basis of the percentage of the state
- 1834 population residing in each municipality and county;
- 1835 (ii) 30% to municipalities and counties on the basis of each municipality's and
- 1836 county's percentage of the statewide convictions for all alcohol-related offenses;
- 1837 (iii) 20% to municipalities and counties on the basis of the percentage of the
- 1838 following in the state that are located in each municipality and county:
- 1839 (A) state stores;
- 1840 (B) package agencies;
- 1841 (C) retail licensees; and
- 1842 (D) off-premise beer retailers; and
- 1843 (iv) 25% to the counties for confinement and treatment purposes authorized by this
- 1844 part on the basis of the percentage of the state population located in each county.
- 1845 (c)(i) Except as provided in Subsection (1)(c)(ii), if a municipality does not have a
- 1846 law enforcement agency:
- 1847 (A) the municipality may not receive money under this part; and
- 1848 (B) the State Tax Commission:
- 1849 (I) may not distribute the money the municipality would receive but for the
- 1850 municipality not having a law enforcement agency to that municipality; and
- 1851 (II) shall distribute the money that the municipality would have received but
- 1852 for it not having a law enforcement agency to the county in which the
- 1853 municipality is located for use by the county in accordance with this part.
- 1854 (ii) If the [~~advisory committee, before January 1, 2033~~] commission, before July 1,
- 1855 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029, finds that a
- 1856 municipality described in Subsection (1)(c)(i) demonstrates that the municipality
- 1857 can use the money that the municipality is otherwise eligible to receive in
- 1858 accordance with this part, the [~~advisory committee, before January 1, 2033~~]
- 1859 commission, before July 1, 2029, or the department, on or after [~~January 1, 2033~~]
- 1860 July 1, 2029, may direct the State Tax Commission to distribute the money to the
- 1861 municipality.
- 1862 (2) To determine the distribution required by Subsection (1)(b)(ii), the State Tax
- 1863 Commission shall annually:
- 1864 (a) for an annual conviction time period:

- 1865 (i) multiply by two the total number of convictions in the state obtained during the  
1866 annual conviction time period for violation of:  
1867 (A) Section 41-6a-502; or  
1868 (B) an ordinance that complies with the requirements of Subsection 41-6a-510(1)  
1869 or Section 76-5-207; and  
1870 (ii) add to the number calculated under Subsection (2)(a)(i) the number of  
1871 convictions obtained during the annual conviction time period for the  
1872 alcohol-related offenses other than the alcohol-related offenses described in  
1873 Subsection (2)(a)(i);
- 1874 (b) divide an amount equal to 30% of the appropriation for that fiscal year by the sum  
1875 obtained in Subsection (2)(a); and  
1876 (c) multiply the amount calculated under Subsection (2)(b), by the number of  
1877 convictions obtained in each municipality and county during the annual conviction  
1878 time period for alcohol-related offenses.
- 1879 (3) By not later than September 1 each year:
- 1880 (a) the state court administrator shall certify to the State Tax Commission the number of  
1881 convictions obtained for alcohol-related offenses in each municipality or county in  
1882 the state during the annual conviction time period; and  
1883 (b) the ~~[advisory committee, before January 1, 2033]~~ commission, before July 1, 2029, or  
1884 the department, on or after ~~[January 1, 2033]~~ July 1, 2029, shall notify the State Tax  
1885 Commission of any municipality that does not have a law enforcement agency.
- 1886 (4) By not later than December 1 of each year, the ~~[advisory committee, before January 1,~~  
1887 ~~2033]~~ commission, before July 1, 2029, or the department, on or after ~~[January 1, 2033]~~  
1888 July 1, 2029, shall notify the State Tax Commission for the fiscal year of appropriation  
1889 of:
- 1890 (a) a municipality that may receive a distribution under Subsection (1)(c)(ii);  
1891 (b) a county that may receive a distribution allocated to a municipality described in  
1892 Subsection (1)(c)(i);  
1893 (c) a municipality or county that may not receive a distribution because the ~~[advisory~~  
1894 ~~committee, before January 1, 2033]~~ commission, before July 1, 2029, or the  
1895 department, on or after ~~[January 1, 2033]~~ July 1, 2029, has suspended the payment  
1896 under Subsection 32B-2-405(2)(a); and  
1897 (d) a municipality or county that receives a distribution because the suspension of  
1898 payment has been cancelled under Subsection 32B-2-405(2).

- 1899 (5)(a) By not later than January 1 of the fiscal year of appropriation, the State Tax  
 1900 Commission shall annually distribute to each municipality and county the portion of  
 1901 the appropriation that the municipality or county is eligible to receive under this part,  
 1902 except for any municipality or county that the [~~advisory committee, before January 1,~~  
 1903 ~~2033~~] commission, before July 1, 2029, or the department, on or after [~~January 1, 2033~~]  
 1904 July 1, 2029, notifies the State Tax Commission in accordance with Subsection (4)  
 1905 may not receive a distribution in that fiscal year.
- 1906 (b)(i) The [~~advisory committee, before January 1, 2033~~] commission, before July 1,  
 1907 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029, shall prepare  
 1908 forms for use by a municipality or county in applying for a distribution under this  
 1909 part.
- 1910 (ii) A form described in this Subsection (5) may require the submission of  
 1911 information the [~~advisory committee, before January 1, 2033~~] commission, before  
 1912 July 1, 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029,  
 1913 considers necessary to enable the State Tax Commission to comply with this part.
- 1914 Section 26. Section **32B-2-405** is amended to read:  
 1915 **32B-2-405 (Effective 05/06/26). Reporting by municipalities and counties --**  
 1916 **Grants.**
- 1917 (1) A municipality or county that receives money under this part during a fiscal year shall  
 1918 by no later than October 1 following the fiscal year:
- 1919 (a) report to the [~~advisory committee, before January 1, 2033~~] committee, before July 1,  
 1920 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029:
- 1921 (i) the programs or projects of the municipality or county that receive money under  
 1922 this part;
- 1923 (ii) if the money for programs or projects were exclusively used as required by  
 1924 Subsection 32B-2-403(2);
- 1925 (iii) indicators of whether the programs or projects that receive money under this part  
 1926 are effective; and
- 1927 (iv) if money received under this part was not expended by the municipality or  
 1928 county; and
- 1929 (b) provide the [~~advisory committee, before January 1, 2033~~] committee, before July 1,  
 1930 2029, or the department, on or after [~~January 1, 2033~~] July 1, 2029, a statement signed  
 1931 by the chief executive officer of the county or municipality attesting that the money  
 1932 received under this part was used in addition to money appropriated or otherwise

- 1933 available for the county's or municipality's law enforcement and was not used to  
1934 supplant that money.
- 1935 (2) The ~~[advisory committee, before January 1, 2033]~~ committee, before July 1, 2029, may,  
1936 by a majority vote, or the department, on or after ~~[January 1, 2033]~~ July 1, 2029, may:
- 1937 (a) suspend future payments under Subsection 32B-2-404(4) to a municipality or county  
1938 that:
- 1939 (i) does not file a report that meets the requirements of Subsection (1); or  
1940 (ii) the ~~[advisory committee, before January 1, 2033]~~ committee, before July 1, 2029,  
1941 or the department, on or after ~~[January 1, 2033]~~ July 1, 2029, finds does not use the  
1942 money as required by Subsection 32B-2-403(2) on the basis of the report filed by  
1943 the municipality or county under Subsection (1); and
- 1944 (b) cancel a suspension under Subsection (2)(a).
- 1945 (3) The State Tax Commission shall notify the ~~[advisory committee, before January 1, 2033]~~  
1946 committee, before July 1, 2029, or the department, on or after ~~[January 1, 2033]~~ July 1,  
1947 2029, of the balance of any undistributed money after the annual distribution under  
1948 Subsection 32B-2-404(5).
- 1949 (4)(a) Subject to the requirements of this Subsection (4), the ~~[advisory committee, before~~  
1950 January 1, 2033] committee, before July 1, 2029, or the department, on or after [  
1951 January 1, 2033] July 1, 2029, shall award the balance of undistributed money under  
1952 Subsection (3):
- 1953 (i) as prioritized by majority vote of the ~~[advisory committee, before January 1, 2033]~~  
1954 committee, before July 1, 2029, or by the department, on or after ~~[January 1, 2033]~~  
1955 July 1, 2029; and
- 1956 (ii) as grants to:
- 1957 (A) a county;
- 1958 (B) a municipality;
- 1959 (C) the department;
- 1960 (D) the Department of Health and Human Services;
- 1961 (E) the Department of Public Safety; or
- 1962 (F) the State Board of Education.
- 1963 (b) By not later than May 30 of the fiscal year of the appropriation, the ~~[advisory~~  
1964 committee, before January 1, 2033] committee, before July 1, 2029, or the  
1965 department, on or after ~~[January 1, 2033]~~ July 1, 2029, shall notify the State Tax  
1966 Commission of grants awarded under this Subsection (4).

- 1967 (c) The State Tax Commission shall make payments of a grant:
- 1968 (i) upon receiving notice as provided under Subsection (4)(b); and
- 1969 (ii) by not later than June 30 of the fiscal year of the appropriation.
- 1970 (d) An entity that receives a grant under this Subsection (4) shall use the grant money
- 1971 exclusively for programs or projects described in Subsection 32B-2-403(2).
- 1972 Section 27. Section **32B-7-305** is amended to read:
- 1973 **32B-7-305 (Effective 05/06/26). Tracking of enforcement actions -- Costs of**
- 1974 **enforcement actions.**
- 1975 (1) The Department of Public Safety shall administer a program to reimburse a municipal
- 1976 or county law enforcement agency:
- 1977 (a) for the actual costs of an alcohol-related compliance check investigation conducted [
- 1978 ~~pursuant to~~] in accordance with Section 77-39-101 on the premises of an off-premise
- 1979 beer retailer;
- 1980 (b) for administrative costs associated with reporting the compliance check investigation
- 1981 described in Subsection (1)(a);
- 1982 (c) if the municipal or county law enforcement agency completes and submits to the
- 1983 Department of Public Safety a report within 90 days after the day on which the
- 1984 compliance check investigation described in Subsection (1)(a) occurs in a format
- 1985 required by the Department of Public Safety; and
- 1986 (d) in the order that the municipal or county law enforcement agency submits the report
- 1987 required by Subsection (1)(c) until the amount allocated by the Department of Public
- 1988 Safety to reimburse a municipal or county law enforcement agency is spent.
- 1989 (2) By no later than October 1 of each year, the Department of Public Safety shall report to
- 1990 the [~~Utah Substance Use and Mental Health Advisory Committee~~] Utah Behavioral
- 1991 Health Commission on the compliance check investigations:
- 1992 (a) funded during the previous fiscal year; and
- 1993 (b) reimbursed under Subsection (1).
- 1994 Section 28. Section **63C-18-202** is amended to read:
- 1995 **63C-18-202 (Effective 05/06/26) (Repealed 12/31/26). Committee established --**
- 1996 **Members.**
- 1997 (1) As used in this section, "department" means the Department of Health and Human
- 1998 Services created in Section 26B-1-201.
- 1999 [(+)] (2) Under the Utah Behavioral Health Commission created in Section 26B-5-702, there
- 2000 is created the Behavioral Health Crisis Response Committee[~~, composed of the~~

2001 following members:] .

2002 [(a) the executive director of the Huntsman Mental Health Institute;]

2003 [(b) the governor or the governor's designee;]

2004 [(c) the director of the Office of Substance Use and Mental Health;]

2005 [(d) one representative of the Office of the Attorney General, appointed by the attorney

2006 general;]

2007 [(e) the executive director of the Department of Health and Human Services or the

2008 executive director's designee;]

2009 [(f) one member of the public, appointed by the chair of the committee and approved by

2010 the committee;]

2011 [(g) two individuals who are mental or behavioral health clinicians licensed to practice

2012 in the state, appointed by the chair of the committee and approved by the committee,

2013 at least one of whom is an individual who:]

2014 [(i) is licensed as a physician under:]

2015 [(A) Title 58, Chapter 67, Utah Medical Practice Act;]

2016 [(B) Title 58, Chapter 67b, Interstate Medical Licensure Compact; or]

2017 [(C) Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; and]

2018 [(ii) is board eligible for a psychiatry specialization recognized by the American

2019 Board of Medical Specialists or the American Osteopathic Association's Bureau of

2020 Osteopathic Specialists;]

2021 [(h) one individual who represents a county of the first or second class, appointed by the

2022 Utah Association of Counties;]

2023 [(i) one individual who represents a county of the third, fourth, or fifth class, appointed

2024 by the Utah Association of Counties;]

2025 [(j) one individual who represents the Utah Hospital Association, appointed by the chair

2026 of the committee;]

2027 [(k) one individual who represents law enforcement, appointed by the chair of the

2028 committee;]

2029 [(l) one individual who has lived with a mental health disorder, appointed by the chair of

2030 the committee;]

2031 [(m) one individual who represents an integrated health care system that:]

2032 [(i) is not affiliated with the chair of the committee; and]

2033 [(ii) provides inpatient behavioral health services and emergency room services to

2034 individuals in the state;]

- 2035 ~~[(n) one individual who represents a Medicaid-accountable care organization, as defined~~  
 2036 ~~in Section 26B-3-219, with a statewide membership base;]~~
- 2037 ~~[(o) one individual who represents 911 call centers and public safety answering points,~~  
 2038 ~~appointed by the chair of the committee;]~~
- 2039 ~~[(p) one individual who represents Emergency Medical Services, appointed by the chair~~  
 2040 ~~of the committee;]~~
- 2041 ~~[(q) one individual who represents the mobile wireless service provider industry,~~  
 2042 ~~appointed by the chair of the committee;]~~
- 2043 ~~[(r) one individual who represents rural telecommunications providers, appointed by the~~  
 2044 ~~chair of the committee;]~~
- 2045 ~~[(s) one individual who represents voice over internet protocol and land line providers,~~  
 2046 ~~appointed by the chair of the committee; and]~~
- 2047 ~~[(t) one individual who represents the Utah League of Cities and Towns, appointed by~~  
 2048 ~~the Utah League of Cities and Towns.]~~
- 2049 (3) The department, in consultation with the Utah Behavioral Health Commission, shall  
 2050 make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking  
 2051 Act, to establish the membership of the committee.
- 2052 ~~[(2)] (4)(a) [Except as provided in Subsection (2)(d), the executive director of the~~  
 2053 ~~Huntsman Mental Health Institute is the chair of the committee.] The committee shall~~  
 2054 annually select one of the committee's members to serve as chair and two of the  
 2055 committee's members to serve as vice chairs.
- 2056 ~~[(b) The chair of the committee shall appoint a member of the committee to serve as the~~  
 2057 ~~vice chair of the committee, with the approval of the committee.]~~
- 2058 ~~[(e)] (b) The chair of the committee shall set the agenda for each committee meeting.~~
- 2059 ~~[(d) If the executive director of the Huntsman Mental Health Institute is not available to~~  
 2060 ~~serve as the chair of the committee, the committee shall elect a chair from among the~~  
 2061 ~~committee's members.]~~
- 2062 ~~[(3)] (5)(a) A majority of the members of the committee constitutes a quorum.~~
- 2063 (b) The action of a majority of a quorum constitutes the action of the committee.
- 2064 ~~[(4)] (6) A member may not receive compensation, benefits, per diem, or travel expenses for~~  
 2065 ~~the member's service on the committee.~~
- 2066 ~~[(5)] (7) The [Office of the Attorney General] Office of Substance Use and Mental Health~~  
 2067 ~~shall provide staff support to the committee.~~
- 2068 Section 29. Section **63C-18-203** is amended to read:

- 2069 **63C-18-203 (Effective 05/06/26) (Repealed 12/31/26). Committee duties.**
- 2070 [~~(1) Under the direction of the Utah Behavioral Health Commission created in Section~~
- 2071 ~~26B-5-702, the committee shall:]~~
- 2072 [~~(a) identify a method to integrate existing local mental health crisis lines to ensure each~~
- 2073 ~~individual who accesses a local mental health crisis line is connected to a qualified~~
- 2074 ~~mental or behavioral health professional, regardless of the time, date, or number of~~
- 2075 ~~individuals trying to simultaneously access the local mental health crisis line;]~~
- 2076 [~~(b) study how to establish and implement a statewide mental health crisis line and a~~
- 2077 ~~statewide warm line, including identifying:]~~
- 2078 [~~(i) a statewide phone number or other means for an individual to easily access the~~
- 2079 ~~statewide mental health crisis line, including a short code for text messaging and a~~
- 2080 ~~three-digit number for calls;]~~
- 2081 [~~(ii) a statewide phone number or other means for an individual to easily access the~~
- 2082 ~~statewide warm line, including a short code for text messaging and a three-digit~~
- 2083 ~~number for calls;]~~
- 2084 [~~(iii) a supply of:]~~
- 2085 [~~(A) qualified mental or behavioral health professionals to staff the statewide~~
- 2086 ~~mental health crisis line; and]~~
- 2087 [~~(B) qualified mental or behavioral health professionals or certified peer support~~
- 2088 ~~specialists to staff the statewide warm line; and]~~
- 2089 [~~(iv) a funding mechanism to operate and maintain the statewide mental health crisis~~
- 2090 ~~line and the statewide warm line;]~~
- 2091 [~~(c) coordinate with local mental health authorities in fulfilling the committee's duties~~
- 2092 ~~described in Subsections (1)(a) and (b);]~~
- 2093 [~~(d) recommend standards for the certifications described in Section 26B-5-610; and]~~
- 2094 [~~(e) coordinate services provided by local mental health crisis lines and mobile crisis~~
- 2095 ~~outreach teams, as defined in Section 62A-15-1401.]~~
- 2096 [~~(2) (1) The committee shall study and make recommendations regarding:~~
- 2097 ~~[(a) crisis line practices and needs, including:]~~
- 2098 ~~[(i) quality and timeliness of service;]~~
- 2099 ~~[(ii) service volume projections;]~~
- 2100 ~~[(iii) a statewide assessment of crisis line staffing needs, including required~~
- 2101 ~~certifications; and]~~
- 2102 ~~[(iv) a statewide assessment of technology needs;]~~

- 2103           ~~[(b) primary duties performed by crisis line workers;]~~
- 2104           ~~[(e) coordination or redistribution of secondary duties performed by crisis line workers,~~
- 2105           ~~including responding to non-emergency calls;]~~
- 2106           ~~[(d)]~~ (a) operating the statewide 988 hotline:
- 2107                 (i) in accordance with federal law;
- 2108                 (ii) to ensure the efficient and effective routing of calls to an appropriate crisis center;
- 2109                 and
- 2110                 (iii) to directly respond to calls with trained personnel and the provision of acute
- 2111                 mental health, crisis outreach, and stabilization services;
- 2112           ~~[(e)]~~ (b) opportunities to increase operational and technological efficiencies and
- 2113                 effectiveness between 988 and 911, utilizing current technology;
- 2114           ~~[(f)]~~ (c) needs for interoperability partnerships and policies related to 911 call transfers
- 2115                 and public safety responses;
- 2116           ~~[(g)]~~ (d) standards for statewide mobile crisis outreach teams, including:
- 2117                 (i) current models and projected needs;
- 2118                 (ii) quality and timeliness of service;
- 2119                 (iii) hospital and jail diversions; and
- 2120                 (iv) staffing and certification;
- 2121           ~~[(h)]~~ (e) resource centers, including:
- 2122                 (i) current models and projected needs; and
- 2123                 (ii) quality and timeliness of service;
- 2124           ~~[(i)]~~ (f) policy considerations related to whether the state should:
- 2125                 (i) manage, operate, and pay for a complete behavioral health system; or
- 2126                 (ii) create partnerships with private industry; and
- 2127           ~~[(j)]~~ (g) sustainable funding source alternatives, including:
- 2128                 (i) charging a 988 fee, including a recommendation on the fee amount;
- 2129                 (ii) General Fund appropriations;
- 2130                 (iii) other government funding options;
- 2131                 (iv) private funding sources;
- 2132                 (v) grants;
- 2133                 (vi) insurance partnerships, including coverage for support and treatment after initial
- 2134                 call and triage; and
- 2135                 (vii) other funding resources.
- 2136           (2) The committee shall monitor the effectiveness, quality, volume, and efficiency of the

2137 statewide 988 crisis line.

2138 (3) The committee shall monitor crisis services throughout the state and make  
2139 recommendations for strategies for the expansion and continuous improvement of  
2140 quality standards for crisis services.

2141 [~~3~~] (4) The committee may conduct other business related to the committee's duties  
2142 described in this section.

2143 [~~4~~] (5) The committee shall consult with the Office of Substance Use and Mental Health  
2144 and make recommendations to the Utah Behavioral Health Commission regarding:

2145 (a) the standards and operation of the statewide mental health crisis line and the  
2146 statewide warm line, in accordance with Section 26B-5-610; and

2147 (b) the incorporation of the statewide mental health crisis line and the statewide warm  
2148 line into behavioral health systems throughout the state.

2149 Section 30. Section **63I-1-226** is amended to read:

2150 **63I-1-226 (Effective 05/06/26). Repeal dates: Titles 26 through 26B.**

2151 (1) Subsection 26B-1-204(2)(g), regarding the Youth Electronic Cigarette, Marijuana, and  
2152 Other Drug Prevention Committee, is repealed July 1, 2030.

2153 (2) Subsection 26B-1-204(2)(h), regarding the Primary Care Grant Committee, is repealed  
2154 July 1, 2035.

2155 (3) Section 26B-1-315, Medicaid ACA Fund, is repealed July 1, 2034.

2156 (4) Section 26B-1-318, Brain and Spinal Cord Injury Fund, is repealed July 1, 2029.

2157 (5) Section 26B-1-402, Rare Disease Advisory Council Grant Program -- Creation --  
2158 Reporting, is repealed July 1, 2026.

2159 (6) Section 26B-1-409, Utah Digital Health Service Commission -- Creation -- Membership  
2160 -- Duties, is repealed July 1, 2025.

2161 (7) Section 26B-1-410, Primary Care Grant Committee, is repealed July 1, 2035.

2162 (8) Section 26B-1-417, Brain and Spinal Cord Injury Advisory Committee -- Membership  
2163 -- Duties, is repealed July 1, 2029.

2164 (9) Section 26B-1-422, Early Childhood Utah Advisory Council -- Creation --  
2165 Compensation -- Duties, is repealed July 1, 2029.

2166 (10) Section 26B-1-425, Utah Health Workforce Advisory Council -- Creation and  
2167 membership, is repealed July 1, 2027.

2168 (11) Section 26B-1-428, Youth Electronic Cigarette, Marijuana, and Other Drug Prevention  
2169 Committee and Program -- Creation -- Membership -- Duties, is repealed July 1, 2030.

2170 (12) Section 26B-1-430, Coordinating Council for Persons with Disabilities -- Policy

- 2171 regarding services to individuals with disabilities -- Creation -- Membership --  
2172 Expenses, is repealed July 1, 2027.
- 2173 (13) Section 26B-1-432, Newborn Hearing Screening Committee, is repealed July 1, 2026.
- 2174 (14) Section 26B-2-407, Drinking water quality in child care centers, is repealed July 1,  
2175 2027.
- 2176 (15) Subsection 26B-3-107(9), regarding reimbursement for dental hygienists, is repealed  
2177 July 1, 2028.
- 2178 (16) Section 26B-3-136, Children's Health Care Coverage Program, is repealed July 1, 2025.
- 2179 (17) Section 26B-3-137, Reimbursement for diabetes prevention program, is repealed June  
2180 30, 2027.
- 2181 (18) Subsection 26B-3-213(2)(b), regarding consultation with the Behavioral Health Crisis  
2182 Response Committee, is repealed December 31, 2026.
- 2183 (19) Section 26B-3-302, DUR Board -- Creation and membership -- Expenses, is repealed  
2184 July 1, 2027.
- 2185 (20) Section 26B-3-303, DUR Board -- Responsibilities, is repealed July 1, 2027.
- 2186 (21) Section 26B-3-304, Confidentiality of records, is repealed July 1, 2027.
- 2187 (22) Section 26B-3-305, Drug prior approval program, is repealed July 1, 2027.
- 2188 (23) Section 26B-3-306, Advisory committees, is repealed July 1, 2027.
- 2189 (24) Section 26B-3-307, Retrospective and prospective DUR, is repealed July 1, 2027.
- 2190 (25) Section 26B-3-308, Penalties, is repealed July 1, 2027.
- 2191 (26) Section 26B-3-309, Immunity, is repealed July 1, 2027.
- 2192 (27) Title 26B, Chapter 3, Part 5, Inpatient Hospital Assessment, is repealed July 1, 2034.
- 2193 (28) Title 26B, Chapter 3, Part 6, Medicaid Expansion Hospital Assessment, is repealed  
2194 July 1, 2034.
- 2195 (29) Title 26B, Chapter 3, Part 7, Hospital Provider Assessment, is repealed July 1, 2028.
- 2196 (30) Section 26B-3-910, Alternative eligibility -- Report -- Alternative Eligibility  
2197 Expendable Revenue Fund, is repealed July 1, 2028.
- 2198 (31) Section 26B-4-710, Rural residency training program, is repealed July 1, 2025.
- 2199 (32) Subsection 26B-5-112(1)(b), regarding consultation with the Behavioral Health Crisis  
2200 Response Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2201 (33) Subsection 26B-5-112(5)(b), regarding consultation with the Behavioral Health Crisis  
2202 Response Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2203 (34) Section 26B-5-112.5, Mobile Crisis Outreach Team Grant Program, is repealed  
2204 December 31, 2026.

- 2205 (35) Section 26B-5-114, Behavioral Health Receiving Center Grant Program, is repealed  
 2206 December 31, 2026.
- 2207 (36) Section 26B-5-118, Collaborative care grant program, is repealed December 31, 2024.
- 2208 (37) Section 26B-5-120, Virtual crisis outreach team grant program, is repealed December  
 2209 31, 2026.
- 2210 (38) Subsection 26B-5-609(1)(a), regarding the Behavioral Health Crisis Response  
 2211 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2212 (39) Subsection 26B-5-609(3)(b), regarding the Behavioral Health Crisis Response  
 2213 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2214 (40) Subsection 26B-5-610(1)(b), regarding the Behavioral Health Crisis Response  
 2215 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2216 (41) Subsection 26B-5-610(2)(b)(ii), regarding the Behavioral Health Crisis Response  
 2217 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2218 (42) Section 26B-5-612, Integrated behavioral health care grant programs, is repealed  
 2219 December 31, 2025.
- 2220 (43) Title 26B, Chapter 5, Part 7, Utah Behavioral Health Commission, is repealed July 1,  
 2221 2029.
- 2222 (44) Subsection 26B-5-704(2)(a), regarding the Behavioral Health Crisis Response  
 2223 Committee, is repealed [~~December 31, 2026~~] July 1, 2029.
- 2224 (45) Title 26B, Chapter 5, Part 8, Utah [~~Substance Use and Mental Health Advisory~~]  
 2225 Behavioral Health Policy Review Committee, is repealed [~~January 1, 2033~~] July 1, 2029.
- 2226 (46) Section 26B-7-119, Hepatitis C Outreach Pilot Program, is repealed July 1, 2028.
- 2227 (47) Section 26B-7-122, Communication Habits to reduce Adolescent Threats Pilot  
 2228 Program, is repealed July 1, 2029.
- 2229 (48) Section 26B-7-123, Report on CHAT campaign, is repealed July 1, 2029.
- 2230 (49) Title 26B, Chapter 8, Part 5, Utah Health Data Authority, is repealed July 1, 2026.
- 2231 Section 31. Section **63I-1-232** is amended to read:  
 2232 **63I-1-232 (Effective 05/06/26). Repeal dates: Title 32B.**
- 2233 [~~(1) Subsection 32B-2-306(1)(a), regarding the Utah Substance Use and Mental Health~~  
 2234 ~~Advisory Committee, is repealed January 1, 2033.]~~
- 2235 [~~(2) Subsection 32B-2-306(4)(a), regarding a duty of the Utah Substance Use and Mental~~  
 2236 ~~Health Advisory Committee, is repealed January 1, 2033.]~~
- 2237 [~~(3) Subsection 32B-2-306(5)(b), regarding a submission to the Utah Substance Use and~~  
 2238 ~~Mental Health Advisory Committee, is repealed January 1, 2033.]~~

- 2239 [~~(4) Subsection 32B-2-402(1)(b), regarding the Utah Substance Use and Mental Health~~  
 2240 ~~Advisory Committee, is repealed January 1, 2033.~~] Subsection 32B-2-402(1)(d),  
 2241 regarding the Behavioral Health Commission, is repealed July 1, 2029.
- 2242 Section 32. Section **63I-1-263** is amended to read:
- 2243 **63I-1-263 (Effective 05/06/26). Repeal dates: Titles 63A to 63O.**
- 2244 (1) Title 63C, Chapter 4a, Constitutional and Federalism Defense Act, is repealed July 1,  
 2245 2028.
- 2246 (2) Title 63C, Chapter 18, Behavioral Health Crisis Response Committee, is repealed [  
 2247 ~~December 31, 2026]~~ July 1, 2029.
- 2248 (3) Title 63C, Chapter 25, State Finance Review Commission, is repealed July 1, 2027.
- 2249 (4) Title 63C, Chapter 27, Cybersecurity Commission, is repealed July 1, 2032.
- 2250 (5) Title 63C, Chapter 28, Ethnic Studies Commission, is repealed July 1, 2026.
- 2251 (6) Title 63C, Chapter 31, State Employee Benefits Advisory Commission, is repealed July  
 2252 1, 2028.
- 2253 (7) Section 63G-6a-805, Purchase from community rehabilitation programs, is repealed  
 2254 July 1, 2026.
- 2255 (8) Title 63G, Chapter 21, Agreements to Provide State Services, is repealed July 1, 2028.
- 2256 (9) Title 63H, Chapter 4, Heber Valley Historic Railroad Authority, is repealed July 1, 2029.
- 2257 (10) Subsection 63J-1-602.2(16), related to the Communication Habits to reduce  
 2258 Adolescent Threats (CHAT) Pilot Program, is repealed July 1, 2029.
- 2259 (11) Subsection 63J-1-602.2(26), regarding the Utah Seismic Safety Commission, is  
 2260 repealed January 1, 2025.
- 2261 (12) Section 63L-11-204, Canyon resource management plan, is repealed July 1, 2027.
- 2262 (13) Title 63L, Chapter 11, Part 4, Resource Development Coordinating Committee, is  
 2263 repealed July 1, 2027.
- 2264 (14) Title 63M, Chapter 7, Part 7, Domestic Violence Offender Treatment Board, is  
 2265 repealed July 1, 2027.
- 2266 (15) Section 63M-7-902, Creation -- Membership -- Terms -- Vacancies -- Expenses, is  
 2267 repealed July 1, 2029.
- 2268 (16) Title 63M, Chapter 11, Utah Commission on Aging, is repealed July 1, 2026.
- 2269 (17) Title 63N, Chapter 2, Part 2, Enterprise Zone Act, is repealed July 1, 2028.
- 2270 (18) Subsection 63N-2-511(1)(b), regarding the Board of Tourism Development, is  
 2271 repealed July 1, 2030.
- 2272 (19) Section 63N-2-512, Hotel Impact Mitigation Fund, is repealed July 1, 2028.

- 2273 (20) Title 63N, Chapter 3, Part 9, Strategic Innovation Grant Pilot Program, is repealed July  
2274 1, 2027.
- 2275 (21) Title 63N, Chapter 3, Part 11, Manufacturing Modernization Grant Program, is  
2276 repealed July 1, 2028.
- 2277 (22) Title 63N, Chapter 4, Part 4, Rural Employment Expansion Program, is repealed July  
2278 1, 2028.
- 2279 (23) Section 63N-4-804, Rural Opportunity Advisory Committee, is repealed July 1, 2027.
- 2280 (24) Subsection 63N-4-805(5)(b), regarding the Rural Employment Expansion Program, is  
2281 repealed July 1, 2028.
- 2282 (25) Subsection 63N-7-101(1), regarding the Board of Tourism Development, is repealed  
2283 July 1, 2030.
- 2284 (26) Subsection 63N-7-102(3)(c), regarding a requirement for the Utah Office of Tourism  
2285 to receive approval from the Board of Tourism Development, is repealed July 1, 2030.
- 2286 (27) Title 63N, Chapter 7, Part 2, Board of Tourism Development, is repealed July 1, 2030.  
2287 Section 33. Section **64-13-45** is amended to read:  
2288 **64-13-45 (Effective 05/06/26). Department reporting requirements.**
- 2289 (1) As used in this section:
- 2290 (a) "Biological sex at birth" means the same as that term is defined in Section 26B-8-101.
- 2291 (b)(i) "In-custody death" means an inmate death that occurs while the inmate is in the  
2292 custody of the department.
- 2293 (ii) "In-custody death" includes an inmate death that occurs while the inmate is:  
2294 (A) being transported for medical care; or  
2295 (B) receiving medical care outside of a correctional facility, other than a county  
2296 jail.
- 2297 (c) "Inmate" means an individual who is processed or booked into custody or housed in  
2298 the department or a correctional facility other than a county jail.
- 2299 (d) "Opiate" means the same as that term is defined in Section 58-37-2.
- 2300 (e) "Transgender inmate" means the same as that term is defined in Section 64-13-7.
- 2301 (2) The department shall submit a report to the Commission on Criminal and Juvenile  
2302 Justice created in Section 63M-7-201 before June 15 of each year that includes:  
2303 (a) the number of in-custody deaths that occurred during the preceding calendar year,  
2304 including:  
2305 (i) the known, or discoverable on reasonable inquiry, causes and contributing factors  
2306 of each of the in-custody deaths described in this Subsection (2)(a); and

- 2307 (ii) the department's policy for notifying an inmate's next of kin after the inmate's  
2308 in-custody death;
- 2309 (b) the department policies, procedures, and protocols:
- 2310 (i) for treatment of an inmate experiencing withdrawal from alcohol or substance use,  
2311 including use of opiates;
- 2312 (ii) that relate to the department's provision, or lack of provision, of medications used  
2313 to treat, mitigate, or address an inmate's symptoms of withdrawal, including  
2314 methadone and all forms of buprenorphine and naltrexone; and
- 2315 (iii) that relate to screening, assessment, and treatment of an inmate for a substance  
2316 use disorder or mental health disorder;
- 2317 (c) the number of inmates who gave birth and were restrained in accordance with  
2318 Section 64-13-46, including:
- 2319 (i) the types of restraints used; and
- 2320 (ii) whether the use of restraints was to prevent escape or to ensure the safety of the  
2321 inmate, medical or corrections staff, or the public;
- 2322 (d) the number of transgender inmates that are assigned to a living area with inmates  
2323 whose biological sex at birth do not correspond with the transgender inmate's  
2324 biological sex at birth in accordance with Section 64-13-7, including:
- 2325 (i) the results of the individualized security analysis conducted for each transgender  
2326 inmate in accordance with Subsection 64-13-7(5)(a); and
- 2327 (ii) a detailed explanation regarding how the security conditions described in  
2328 Subsection 64-13-7(5)(b) are met for each transgender inmate;
- 2329 (e) the number of transgender inmates that were:
- 2330 (i) assigned to a living area with inmates whose biological sex at birth do not  
2331 correspond with the transgender inmate's biological sex at birth; and
- 2332 (ii) removed and assigned to a living area with inmates whose biological sex at birth  
2333 corresponds with the transgender inmate's biological sex at birth in accordance  
2334 with Subsection 64-13-7(6); and
- 2335 (f) any report the department provides or is required to provide under federal law or  
2336 regulation relating to inmate deaths.
- 2337 (3) The Commission on Criminal and Juvenile Justice shall:
- 2338 (a) compile the information from the reports described in Subsection (2);
- 2339 (b) omit or redact any identifying information of an inmate in the compilation to the  
2340 extent omission or redaction is necessary to comply with state and federal law[-]; and

2341 (c) submit the compilation to the Law Enforcement and Criminal Justice Interim  
 2342 Committee and the [~~Utah Substance Use and Mental Health Advisory Committee~~]  
 2343 Utah Behavioral Health Commission before November 1 of each year.

2344 (4) The Commission on Criminal and Juvenile Justice may not provide access to or use the  
 2345 department's policies, procedures, or protocols submitted under this section in a manner  
 2346 or for a purpose not described in this section.

2347 Section 34. **FY 2027 Appropriations.**

2348 The following sums of money are appropriated for the fiscal year beginning July 1,  
 2349 2026, and ending June 30, 2027. These are additions to amounts previously appropriated for  
 2350 fiscal year 2027.

2351 Subsection 34(a). **Operating and Capital Budgets**

2352 Under the terms and conditions of Title 63J, Chapter 1, Budgetary Procedures Act, the  
 2353 Legislature appropriates the following sums of money from the funds or accounts indicated for  
 2354 the use and support of the government of the state of Utah.

2355 ITEM 1 To Department of Health and Human Services - Clinical Services  
 2356 From General Fund 299,700

2357 Schedule of Programs:  
 2358 Medical Examiner 299,700

2359 The Legislature intends that the Department of  
 2360 Health and Human Services use the appropriation in this  
 2361 item to fund a family outreach specialist at the Office of  
 2362 the Medical Examiner.

2363 ITEM 2 To Department of Health and Human Services - Integrated Health Care Services  
 2364 From General Fund 17,550,500  
 2365 From General Fund, One-time 9,100,500

2366 Schedule of Programs:  
 2367 Non-Medicaid Behavioral Health Treatment and  
 2368 Crisis Response 24,151,000  
 2369 State Hospital 2,500,000

2370 The Legislature intends that the Department of  
 2371 Health and Human Services use:  
 2372 (1) \$2,500,000 ongoing appropriation for the  
 2373 establishment and maintenance of 30 adult patient beds at  
 2374 the Utah State Hospital.

- 2375 (2) \$1,600,000 one-time appropriation and  
 2376 \$1,600,000 ongoing appropriation for two new Mobile  
 2377 Crisis Outreach Teams.
- 2378 (3) \$6,900,000 on-time appropriation and  
 2379 \$2,400,000 ongoing appropriation for up to two new  
 2380 rural behavioral health receiving centers.
- 2381 (4) \$10,000,000 ongoing appropriation for the  
 2382 community-based peer support services grant program  
 2383 created in Section 26B-5-122.
- 2384 (5) \$600,000 one-time appropriation for up to  
 2385 five pilot projects in rural areas to fund innovative and  
 2386 more humane ways to transport individuals experiencing  
 2387 a behavioral health crisis between medical settings.
- 2388 (6) \$100,000 ongoing appropriation for suicide  
 2389 prevention training under Section 26B-5-611.
- 2390 (7) \$850,000 ongoing appropriation for Utah's  
 2391 statewide Live On suicide prevention campaign.
- 2392 (8) \$100,000 ongoing to increase Medicaid rates  
 2393 for collaborative care codes.

2394 Subsection 34(b). **Capital Project Funds**

2395 The Legislature has reviewed the following capital project funds. The Legislature  
 2396 authorizes the State Division of Finance to transfer amounts between funds and accounts as  
 2397 indicated.

2398 ITEM 3 To Capital Budget - DFCM Capital Projects Fund

2399 From General Fund, One-time

88,000,000

2400 Schedule of Programs:

2401 DFCM Capital Projects Fund

88,000,000

2402 The Legislature intends the Division of Facilities  
 2403 Construction and Management to use the appropriation in  
 2404 this item to build 30 adult patient beds at the Utah State  
 2405 Hospital.

2406 Section 35. **Effective Date.**

2407 This bill takes effect on May 6, 2026.