

HB0398S01 compared with HB0398

~~text~~ shows text that was in HB0398 but was deleted in HB0398S01.

Inserted text shows text that was not in HB0398 but was inserted into HB0398S01.

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Representative Brad M. Daw proposes the following substitute bill:

SUBSTANCE USE AND HEALTH CARE AMENDMENTS

2019 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Brad M. Daw

Senate Sponsor: _____

LONG TITLE

General Description:

This bill modifies and enacts provisions relating to substance use, mental health treatment, and health care.

Highlighted Provisions:

This bill:

- ▶ defines terms;
- ▶ modifies provisions requiring a county jail and the Department of Corrections to report certain information to the Commission on Criminal and Juvenile Justice regarding an inmate's death;
- ▶ provides a refundable tax credit for certain practitioners who provide substance use disorder treatment in a secure facility;
- ▶ modifies provisions relating to licensing of a practitioner who dispenses certain

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opiate agonists;

- ▶ creates a telehealth substance use treatment pilot program to be conducted in a county jail;
- ▶ requires the Commission on Criminal and Juvenile Justice to convene a committee to study certain health care and other services provided to inmates in a correctional facility; and
- ▶ makes technical changes.

Money Appropriated in this Bill:

None

Other Special Clauses:

~~{ None }~~ This bill provides a special effective date.

Utah Code Sections Affected:

AMENDS:

17-22-32, as enacted by Laws of Utah 2018, Chapter 437

58-1-111, as enacted by Laws of Utah 2016, Chapter 407

59-10-1111, as enacted by Laws of Utah 2016, Chapter 407

63I-1-262, as last amended by Laws of Utah 2018, Chapters 74, 220, 281, and 347

64-13-45, as enacted by Laws of Utah 2018, Chapter 437

ENACTS:

58-17b-309.7, Utah Code Annotated 1953

62A-15-117, Utah Code Annotated 1953

63M-7-211, Utah Code Annotated 1953

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

Section 1. Section **17-22-32** is amended to read:

17-22-32. County jail reporting requirements.

(1) As used in this section:

(a) (i) "In-custody death" means an inmate death that occurs while the inmate is in the custody of a county jail.

(ii) "In-custody death" includes an inmate death that occurs while the inmate is:

(A) being transported for medical care; or

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(B) receiving medical care outside of a county jail.

(b) "Inmate" means an individual who is processed or booked into custody or housed in a county jail in the state.

(c) "Opiate" means the same as that term is defined in Section 58-37-2.

(2) [~~So that the state may oversee the inmate health care system, a~~] A county jail shall submit a report to the Commission on Criminal and Juvenile Justice, created in Section 63M-7-201, before ~~[August 1]~~ June 15 of each year that includes:

(a) the number of in-custody deaths that occurred during the preceding calendar year;

(b) the known, or discoverable on reasonable inquiry, causes and contributing factors of each of the in-custody deaths described in Subsection (2)(a);

(c) the county jail's policy for notifying an inmate's next of kin after the inmate's in-custody death;

(d) the county jail policies, procedures, and protocols:

(i) for treatment of an inmate experiencing withdrawal from alcohol or substance use, including use of opiates; [~~and~~]

(ii) [~~relating~~] that relate to the county jail's provision, or lack of provision, of medications used to treat, mitigate, or address an inmate's symptoms of withdrawal, including methadone and all forms of buprenorphine and naltrexone; and

(iii) that relate to screening, assessment, and treatment of an inmate for a substance use or mental health disorder; and

(e) any report the county jail provides or is required to provide under federal law or regulation relating to inmate deaths.

(3) The Commission on Criminal and Juvenile Justice shall:

(a) compile the information from the reports described in Subsection (2);

(b) omit or redact any identifying information of an inmate in the compilation to the extent omission or redaction is necessary to comply with state and federal law; and

(c) submit the compilation to the Law Enforcement and Criminal Justice Interim Committee and the [~~Utah Substance Use and Mental Health Advisory Council~~] committee created in Section 63M-7-211 before November 1 of each year.

(4) The Commission on Criminal and Juvenile Justice may not provide access to or use a county jail's policies, procedures, or protocols submitted under this section in a manner or for

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a purpose not described in this section.

Section 2. Section **58-1-111** is amended to read:

58-1-111. Tax credit certificate -- Mental health nurse practitioners --

Underserved populations.

(1) As used in this section:

(a) "Average of 20 hours or more per week" means that the quotient calculated when dividing the claimant's total hours providing licensed services, in-custody mental health therapy, or in-custody substance use disorder treatment in the state during the taxable year by the number of weeks in which the claimant is licensed in the state during the taxable year is greater than or equal to 20.

~~[(a)]~~ (b) "Average of 30 hours or more per week" means that the quotient calculated when dividing the claimant's total hours providing licensed services, in-custody mental health therapy, or in-custody substance use disorder treatment in the state during the taxable year by the number of weeks in which the claimant is licensed in the state during the taxable year is greater than or equal to 30.

(c) "In-custody mental health therapy" means the provision of behavioral health treatment within the scope of practice of a mental health therapist in a secure facility in the state.

(d) "In-custody substance use disorder treatment" means the provision of behavioral health treatment within the scope of practice of a substance use disorder counselor in a secure facility in the state.

~~[(b)]~~ (e) "Licensed services" means the provision of behavioral health treatment in the state ~~and~~ within the scope of practice of:

(i) a psychiatrist~~;~~;

(ii) a psychiatric mental health nurse practitioner~~;~~; or

(iii) a volunteer health practitioner.

(f) "Medication-assisted treatment" means treatment of a substance use disorder that includes the use of a drug that is approved by the federal Food and Drug Administration for the treatment of a substance use disorder in conjunction with behavioral health therapy.

(g) "Mental health therapist" means an individual who is licensed under Chapter 60, Mental Health Professional Practice Act, for the practice of mental health therapy, as defined in

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Section 58-60-102.

~~[(c)]~~ (h) "Psychiatric mental health nurse practitioner" means an individual who:

(i) is licensed under Chapter 31b, Nurse Practice Act, for the practice of advanced practice registered nursing, as ~~[that term is]~~ defined in Section 58-31b-102; and

(ii) holds a certification recognized by the American Nurses Credentialing Center of the American Association of Colleges of Nursing as a psychiatric mental health nurse practitioner.

~~[(d)]~~ (i) "Psychiatrist" means an individual who:

(i) is licensed as a physician under:

(A) Chapter 67, Utah Medical Practice Act;

(B) Chapter 67b, Interstate Medical Licensure Compact; or

(C) Chapter 68, Utah Osteopathic Medical Practice Act; and

(ii) is board eligible for a psychiatry specialization recognized by the American Board of Medical Specialists or the American Osteopathic Association's Bureau of Osteopathic Specialists.

(j) "Secure facility" means:

(i) a county jail;

(ii) a secure correctional facility as defined in Section 64-13-1; or

(iii) the Utah State Hospital, created in Section 62A-15-601.

(k) "Substance use disorder counselor" means an individual who is licensed under Chapter 60, Mental Health Professional Practice Act, to practice as a licensed advanced substance use disorder counselor, as defined in Section 58-60-502.

~~[(e)]~~ (l) "Underserved population" means:

(i) an individual located in a county of the third, fourth, fifth, or sixth class, as ~~[designated]~~ classified in Section 17-50-501; or

(ii) a Native American Indian.

~~[(f)]~~ (m) "Volunteer retired psychiatrist" means an individual:

(i) described in Subsection (1)~~[(d)]~~(i) who, during the calendar year, did not receive payment for providing licensed services; or

(ii) (A) licensed under Chapter 81, Retired Volunteer Health Practitioner Act; and

(B) previously or currently board certified in psychiatry.

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(2) (a) An individual who seeks to obtain a state income tax credit under Subsections 59-10-1111(2) through ~~[(4)]~~ (6) shall file an application with the division with respect to each taxable year in which the individual seeks a state income tax credit.

(b) An individual may qualify for a tax credit certificate under this section for no more than 10 taxable years for each tax credit.

(3) The application for a tax credit certificate under Subsection 59-10-1111(2) shall require the individual to provide the following to the division:

(a) the date on which the individual obtained a license and the specialization described in Subsection (1)~~[(c)(ii)]~~(h)(ii) or ~~[(d)(ii)]~~ (i)(ii);

(b) (i) an attestation that the individual was licensed on or after January 1, 2017, to provide licensed services; or

(ii) if the individual was licensed to provide licensed services prior to January 1, 2017, an attestation:

(A) that the individual did not provide licensed services for the two calendar years before the date the individual initially applied for the income tax credit under this subsection; and

(B) the date on which the individual resumed providing licensed services in the state; and

(c) other information as required by the division by administrative rule adopted in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

(4) An application for a tax credit certificate under Subsection 59-10-1111(3) shall require the individual to attest to the division:

(a) that the individual averaged 30 or more hours per week during the taxable year providing licensed services;

(b) that the individual devoted 25% or more of the individual's total hours of licensed services in the taxable year to an underserved population;

(c) the type of underserved population for which the individual provided services during the taxable year; and

(d) other information as required by the division by administrative rule adopted in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

(5) An application for a tax credit certificate under Subsection 59-10-1111(4) shall

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require the individual to attest to the division:

(a) whether the individual is licensed under Subsection (1)~~(f)~~(m)(i) or (ii);

(b) that the individual did not receive payment during the calendar year for providing licensed services;

(c) that during the calendar year, the individual provided at least 300 hours of licensed services to an underserved population, the homeless population, or veterans without receiving payment for providing the licensed services;

(d) a description of the type of population described in Subsection (5)(c) for which the individual provided licensed services; and

(e) other information as required by the division by administrative rule adopted in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

(6) An application for a tax credit certificate under Subsection 59-10-1111(5) shall require the individual to attest to the division:

(a) that the individual averaged 30 hours or more per week during the taxable year providing in-custody mental health therapy;

(b) a list of each secure facility in which the individual provided in-custody mental health therapy during the taxable year; and

(c) other information as required by the division by administrative rule adopted in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

(7) An application for a tax credit certificate under Subsection 59-10-1111(6) shall require the individual to attest to the division:

(a) that the individual averaged 20 hours or more per week during the taxable year providing in-custody substance use disorder treatment;

(b) if used, a description of the type of medication-assisted treatment used by the individual in providing the in-custody substance use disorder treatment;

(c) a list of each secure facility in which the individual provided the substance use disorder treatment during the taxable year; and

(d) other information as required by the division by administrative rule adopted in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

~~(6)~~ (8) (a) The division shall issue a tax credit certificate in accordance with this subsection.

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(b) The tax credit certificate may state that an individual is entitled to:

(i) a tax credit under Subsection 59-10-1111(2) if the individual meets the requirements of Subsection (3);

(ii) a tax credit under Subsection 59-10-1111(3) if the individual meets the requirements of Subsection (4);

(iii) a tax credit under Subsection 59-10-1111(4) if the individual meets the requirements of Subsection (5); ~~or~~

(iv) a tax credit under Subsection 59-10-1111(5) if the individual meets the requirements of Subsection (6);

(v) a tax credit under Subsection 59-10-1111(6) if the individual meets the requirements of Subsection (7); or

~~(iv)~~ (vi) a tax credit under Subsections 59-10-1111(2) and (3) if the individual meets the requirements of Subsections (3) and (4).

~~(7)~~ (9) (a) The division may issue a tax credit certificate to an individual under Subsection 59-10-1111(2) for no more than 10 taxable years after the date on which the individual resumed services under Subsection (3)(b)(ii).

(b) The division may issue a tax credit certificate to an individual under Subsections 59-10-1111(3) ~~and (4)~~ through (6) for no more than 10 taxable years.

~~(8)~~ (10) The division shall provide a copy of a tax credit certificate issued under this section to the individual and the State Tax Commission.

Section 3. Section **58-17b-309.7** is enacted to read:

58-17b-309.7. Exemptions from licensure -- Opioid treatment program.

(1) As used in this section:

(a) "Dispense" means to prepare, package, or label for subsequent use.

(b) "Nurse practitioner" means an individual who is licensed to practice as an advanced practice registered nurse under Chapter 31b, Nurse Practice Act.

(c) "Opioid treatment program" means a program or practitioner that is:

(i) engaged in opioid treatment of an individual using an opiate agonist medication;

(ii) registered under 21 U.S.C. Sec. 823(g)(1);

(iii) licensed by the Office of Licensing, within the Department of Human Services, created in Section 62A-2-103; and

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(iv) certified by the Substance Abuse and Mental Health Services Administration in accordance with 42 C.F.R. 8.11.

(d) "Physician" means an individual licensed to practice as a physician or osteopath in this state under Chapter 67, Utah Medical Practice Act, or Chapter 68, Utah Osteopathic Medical Practice Act.

(e) "Physician assistant" means an individual who is licensed to practice as a physician assistant under Chapter 70a, Physician Assistant Act.

(f) "Practitioner" means a nurse practitioner, physician's assistant, or a registered nurse.

(g) "Registered nurse" means the same as that term is defined in Section 78B-3-403.

(2) A practitioner may dispense methadone at an opioid treatment program regardless of whether the practitioner is licensed to dispense methadone under this chapter if:

~~(a)~~ the practitioner:

(a) is operating under the direction of a physician;

(b) dispenses the methadone under the direction of a pharmacist; and

~~(b)~~ (c) acts in accordance with division rule.

(3) The division shall, in consultation with pharmacies, physicians, and practitioners who work in an opioid treatment program, make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to establish guidelines under which a practitioner may dispense methadone to a patient in an opioid treatment program under this section.

Section 4. Section **59-10-1111** is amended to read:

59-10-1111. Refundable tax credit for mental health practitioners and volunteer retired psychiatrists.

(1) As used in this section:

(a) "Mental health therapist" means the same as that term is defined in Section 58-1-111.

~~(a)~~ (b) "Psychiatric mental health nurse practitioner" means the same as that term is defined in Section 58-1-111.

~~(b)~~ (c) "Psychiatrist" means the same as that term is defined in Section 58-1-111.

(d) "Substance use disorder counselor" means the same as that term is defined in Section 58-1-111.

~~(c)~~ (e) "Tax credit certificate" means a certificate issued by the Division of

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Occupational and Professional Licensing under Section 58-1-111 certifying that the claimant is entitled to a tax credit under this section.

~~[(d)]~~ (f) "Volunteer retired psychiatrist" means the same as that term is defined in Section 58-1-111.

(2) A claimant who is a psychiatrist or a psychiatric mental health nurse practitioner and who submits a tax credit certificate issued by the Division of Occupational and Professional Licensing under Subsection 58-1-111(3), may claim a refundable tax credit:

- (a) as provided in this section; and
- (b) in the amount of \$10,000.

(3) A claimant who is a psychiatrist or a psychiatric mental health nurse practitioner and who submits a tax credit certificate under Subsection 58-1-111(4) may claim a refundable tax credit:

- (a) as provided in this section; and
- (b) in the amount of \$10,000.

(4) A claimant who is a volunteer retired psychiatrist and who submits a tax credit certificate under Subsection 58-1-111(5) may claim a refundable tax credit:

- (a) as provided in this section; and
- (b) in the amount of \$10,000.

(5) A claimant who is a mental health therapist and who submits a tax credit certificate under Subsection 58-1-111(6) may claim a refundable tax credit:

- (a) as provided in this section; and
- (b) in the amount of \$10,000.

(6) A claimant who is a substance use disorder counselor and who submits a tax credit certificate under Subsection 58-1-111(7) may claim a refundable tax credit:

- (a) as provided in this section; and
- (b) in the amount of \$10,000.

~~[(5)]~~ (7) A claimant may claim a tax credit under Subsections (2) through ~~[(4)]~~ (6) for no more than 10 taxable years for each tax credit.

~~[(6)]~~ (8) (a) In accordance with any rules prescribed by the commission under Subsection ~~[(6)]~~ (8)(b), the commission shall make a refund to a claimant who claims a tax credit under this section if the amount of the tax credit exceeds the claimant's tax liability for

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the taxable year.

(b) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the commission may make rules providing procedures for making a refund to a claimant as required by Subsection [~~(6)~~] (8)(a).

Section 5. Section **62A-15-117** is enacted to read:

62A-15-117. Telehealth substance use treatment pilot program.

(1) As used in this section:

(a) "Grant" means a grant awarded by the division under this section to a county jail to develop and implement a project.

(b) "Project" means a telehealth pilot project for which the division awards a grant.

(c) "Rural county" means a county of the second, third, fourth, fifth, or sixth class, as classified in Section 17-50-501.

(d) "Telehealth services" means mental health care services or substance use disorder treatment provided remotely through the use of telecommunications technology.

(2) (a) On or before July 1, 2019, the division shall issue a project proposal request in accordance with this section to award a grant to one or more county jails to develop and implement a project.

(b) An application for a project described in this Subsection (2) shall be submitted jointly by:

(i) a rural county jail;

(ii) a local substance abuse and mental health authority; and

(iii) a provider of telehealth services.

(c) The division shall award all grants under this section before December 31, 2019.

(d) A project shall run for two years.

(3) The purpose of a project is to:

(a) determine how telehealth services can be used in the state to:

(i) increase access to mental health and substance use treatment services to an inmate in a county jail located in a rural area of the state;

(ii) reduce the number of deaths in a county jail due to suicide or withdrawal symptoms;

(iii) reduce the number of overdose deaths of inmates with a substance use disorder

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after release from a county jail; and

(iv) reduce the cost associated with providing mental health and substance use treatment to an inmate in a rural county jail; and

(b) identify methods of using telehealth services to provide mental health and substance use treatment services to an inmate in a rural county jail.

(4) An application for a grant under this section shall:

(a) identify the inmate population to which the county jail will provide telehealth services;

(b) identify the type of telehealth services that the county jail will provide;

(c) explain how the inmate population described in Subsection (4)(a) will benefit from the provision of telehealth services;

(d) provide details regarding:

(i) how the county jail plans to provide telehealth services;

(ii) how the proposed project will ensure that consideration is given to the capacity and availability of the county jail and community health care resources;

(iii) how the county jail, telehealth service provider, and local mental health and substance abuse authority will coordinate to ensure timely and effective provision of telehealth services;

(iv) the projected costs of the proposed project;

(v) the sustainability of the proposed project; and

(vi) the methods the proposed project will use to:

(A) protect the privacy of each county jail inmate who participates in the proposed project;

(B) collect nonidentifying data relating to the proposed project; and

(C) provide transparency on the costs and operation of the proposed project; and

(e) provide other information requested by the division to ensure that the proposed project satisfies the criteria described in Subsection (5).

(5) In evaluating an application for the grant, the division shall consider:

(a) the extent to which the proposed project will fulfill the purposes described in Subsection (3);

(b) the extent to which the inmate population to be served by the proposed project is

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likely to benefit from the proposed project;

(c) the cost of the proposed project;

(d) the viability and innovation of the proposed project; and

(e) the extent to which the proposed project will yield useful data to evaluate the effectiveness of the proposed project.

(6) Before June 30, 2020, the division shall report to the Law Enforcement and Criminal Justice Interim Committee regarding:

(a) each county jail that is part of a project; and

(b) the details and duration of each project.

(7) Before June 30, 2022, the division shall report to the Law Enforcement and Criminal Justice Interim Committee regarding:

(a) the outcomes of each project;

(b) data gathered in relation to each project;

(c) knowledge gained relating to the provision of telehealth services in county jails;

(d) recommendations for the future use of telehealth services in county jails; and

(e) obstacles encountered in the provision of telehealth services in county jails.

Section 6. Section **63I-1-262** is amended to read:

63I-1-262. Repeal dates, Title 62A.

(1) Subsections 62A-1-120(8)(g), (h), and (i) are repealed July 1, 2023.

(2) Section 62A-3-209 is repealed July 1, 2023.

(3) Section 62A-4a-202.9 is repealed December 31, 2019.

(4) Section 62A-4a-213 is repealed July 1, 2019.

(5) Section 62A-15-114 is repealed December 31, 2021.

~~[(6) Subsection 62A-15-1101(7) is repealed July 1, 2018.]~~

(6) Section 62A-15-117 is repealed December 31, 2022.

Section 7. Section **63M-7-211** is enacted to read:

63M-7-211. Inmate health care study -- Creation -- Membership -- Duties --

Reporting.

(1) As used in this section:

(a) "Commission" means the Commission on Criminal and Juvenile Justice created in Section 63M-7-201.

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(b) "Correctional facility" means:

(i) a facility operated by or contracted with the Department of Corrections to house a criminal offender in either a secure or nonsecure setting; or

(ii) a county jail.

(2) The commission shall create a committee to study:

(a) treatment provided to inmates in a county jail for substance use or mental health disorders, including withdrawal from alcohol or other drugs;

(b) contraception provided to female inmates in correctional facilities;

(c) health care and treatment of pregnant inmates in correctional facilities;~~f and~~

(d) body cavity searches of arrestees or inmates in correctional facilities~~f, j~~; and

(e) continuation of medication and mental health treatment for inmates who are transferred from a county jail to the Department of Corrections.

(3) The committee shall consist of:

(a) a representative from the Division of Substance Abuse and Mental Health within the Department of Human Services;

(b) a representative from a local substance abuse and mental health authority from:

(i) a county of the first class, as classified in Section 17-50-501; and

(ii) a county of the second, third, fourth, fifth, or sixth class, as classified in Section 17-50-501;

(c) a representative from the Department of Health;

(d) a representative from the Utah Sheriff's Association;

(e) a representative from the Statewide Association of Prosecutors of Utah;

(f) a representative from the Utah Association of Counties;

(g) a representative from the Utah Association of Criminal Defense Lawyers;

(h) a physician actively engaged in correctional health care in a county jail from:

(i) a county of the first class, as classified in Section 17-50-501; and

(ii) a county of the second, third, fourth, fifth, or sixth class, as classified in Section 17-50-501;

(i) a psychiatric service provider actively engaged in correctional health care;

(j) a district attorney or a county attorney actively engaged in the practice of civil or constitutional law from:

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- (i) a county of the first class, as classified in Section 17-50-501; and
- (ii) a county of the second, third, fourth, fifth, or sixth class, as classified in Section 17-50-501;
- (k) a representative from a community-based substance use treatment provider in the state;
- (l) a physician from a community-based health care facility that specializes in women's health;
- (m) a representative from the Department of Corrections;
- (n) a representative from an organization with the expertise in civil rights or civil liberties of incarcerated individuals; and
- (~~fm~~o) other stakeholders, as determined by the commission.
- (4) ~~The committee shall:~~
 - ~~(a) survey~~ Before June 15 of each year, a correctional facility shall submit to the committee a copy of the correctional facility's existing policies, procedures, and protocols for:
 - (~~fi~~a) treatment of an inmate in a county jail experiencing a substance use or mental health disorder, including withdrawal from alcohol or other drugs;
 - (~~fi~~b) providing contraception to a female inmate in a correctional facility;
 - (~~fi~~c) providing health care and treatment for a pregnant inmate in a correctional facility, including any restraints required during a pregnant inmate's labor and delivery; ~~and~~
 - (~~fi~~d) a body cavity search of an arrestee or inmate in a correctional facility; ~~and~~
 - (e) providing medication and mental health treatment for inmates who are transferred from a county jail to the Department of Corrections; and
 - (5) The committee shall:
 - (a) survey the policies, procedures, and protocols submitted by a correctional facility under Subsection (4);
 - (b) based on the results of the survey under Subsection (~~4~~5)(a), create model policies, procedures, and protocols relating to the items described in ~~Subsections~~ Subsection (4)~~(a)(i) through (iv)~~ that take the following into consideration:
 - (i) the needs and limitations of correctional health care, particularly in rural areas of the state;

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- (ii) evidence-based practices;
- (iii) tools and protocols for substance use screening and assessment;
- (iv) the transition of an inmate from treatment or health care in a correctional facility to community-based treatment or health care; and
- (v) the needs of different correctional facility populations;
- (c) develop training recommendations for correctional officers relating to:
 - (i) suicide prevention and behavioral health; and
 - (ii) body cavity searches; and
 - (d) develop practices and policies for correctional officers and law enforcement to administer a substance use screening to an inmate for alcohol or other drugs.

(6) Neither the commission, the committee, nor a member of the committee may provide access to or use a correctional facility's policies, procedures, or protocols submitted under this section in a manner or for a purpose not described in this section.

(57) Before November 30 of each year, the commission shall present a report of the committee's recommendations to the Law Enforcement and Criminal Justice Interim Committee.

Section 8. Section **64-13-45** is amended to read:

64-13-45. Department reporting requirements.

- (1) As used in this section:
 - (a) (i) "In-custody death" means an inmate death that occurs while the inmate is in the custody of the department.
 - (ii) "In-custody death" includes an inmate death that occurs while the inmate is:
 - (A) being transported for medical care; or
 - (B) receiving medical care outside of a correctional facility, other than a county jail.
 - (b) "Inmate" means an individual who is processed or booked into custody or housed in the department or a correctional facility other than a county jail.
 - (c) "Opiate" means the same as that term is defined in Section 58-37-2.
- (2) ~~[So that the state may oversee the inmate health care system, the]~~ The department shall submit a report to the Commission on Criminal and Juvenile Justice, created in Section 63M-7-201, before ~~[August 1]~~ June 15 of each year that includes:
 - (a) the number of in-custody deaths that occurred during the preceding calendar year;

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(b) the known, or discoverable on reasonable inquiry, causes and contributing factors of each of the in-custody deaths described in Subsection (2)(a);

(c) the department's policy for notifying an inmate's next of kin after the inmate's in-custody death;

(d) the department policies, procedures, and protocols:

(i) for treatment of an inmate experiencing withdrawal from alcohol or substance use, including use of opiates; ~~and~~

(ii) ~~relating~~ that relate to the department's provision, or lack of provision, of medications used to treat, mitigate, or address an inmate's symptoms of withdrawal, including methadone and all forms of buprenorphine and naltrexone; and

(iii) that relate to screening, assessment, and treatment of an inmate for a substance use disorder or mental health disorder; and

(e) any report the department provides or is required to provide under federal law or regulation relating to inmate deaths.

(3) The Commission on Criminal and Juvenile Justice shall:

(a) compile the information from the reports described in Subsection (2);

(b) omit or redact any identifying information of an inmate in the compilation to the extent omission or redaction is necessary to comply with state and federal law; and

(c) submit the compilation to the Law Enforcement and Criminal Justice Interim Committee and the ~~Utah Substance Use and Mental Health Advisory Council~~ committee created in Section 63M-7-211 before November 1 of each year.

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

Section 9. Effective date.

The amendments to Sections 58-1-111 and 59-10-1111 take effect for a taxable year beginning on or after January 1, 2020.