#### Representative Brad M. Daw proposes the following substitute bill:

1	SUBSTANCE USE AND HEALTH CARE AMENDMENTS
2	2019 GENERAL SESSION
3	STATE OF UTAH
4	Chief Sponsor: Brad M. Daw
5	Senate Sponsor:
6 7	LONG TITLE
8	General Description:
9	This bill modifies and enacts provisions relating to substance use, mental health
10	treatment, and health care.
11	Highlighted Provisions:
12	This bill:
13	<ul> <li>defines terms;</li> </ul>
14	<ul> <li>modifies provisions requiring a county jail and the Department of Corrections to</li> </ul>
15	report certain information to the Commission on Criminal and Juvenile Justice
16	regarding an inmate's death;
17	<ul> <li>modifies provisions relating to licensing of a practitioner who dispenses certain</li> </ul>
18	opiate agonists;
19	<ul> <li>requires the Commission on Criminal and Juvenile Justice to convene a committee</li> </ul>
20	to study certain health care and other services provided to inmates in a correctional
21	facility; and
22	<ul> <li>makes technical changes.</li> </ul>
23	Money Appropriated in this Bill:
24	None
25	Other Special Clauses:

# 

26	None
27	Utah Code Sections Affected:
28	AMENDS:
29	17-22-32, as enacted by Laws of Utah 2018, Chapter 437
30	64-13-45, as enacted by Laws of Utah 2018, Chapter 437
31	ENACTS:
32	58-17b-309.7, Utah Code Annotated 1953
33	63M-7-211, Utah Code Annotated 1953
34	
35	Be it enacted by the Legislature of the state of Utah:
36	Section 1. Section 17-22-32 is amended to read:
37	17-22-32. County jail reporting requirements.
38	(1) As used in this section:
39	(a) (i) "In-custody death" means an inmate death that occurs while the inmate is in the
40	custody of a county jail.
41	(ii) "In-custody death" includes an inmate death that occurs while the inmate is:
42	(A) being transported for medical care; or
43	(B) receiving medical care outside of a county jail.
44	(b) "Inmate" means an individual who is processed or booked into custody or housed in
45	a county jail in the state.
46	(c) "Opiate" means the same as that term is defined in Section 58-37-2.
47	(2) [So that the state may oversee the inmate health care system, a] $\underline{A}$ county jail shall
48	submit a report to the Commission on Criminal and Juvenile Justice, created in Section
49	63M-7-201, before [August 1] June 15 of each year that includes:
50	(a) the number of in-custody deaths that occurred during the preceding calendar year;
51	(b) the known, or discoverable on reasonable inquiry, causes and contributing factors
52	of each of the in-custody deaths described in Subsection (2)(a);
53	(c) the county jail's policy for notifying an inmate's next of kin after the inmate's
54	in-custody death;
55	(d) the county jail policies, procedures, and protocols:
56	(i) for treatment of an inmate experiencing withdrawal from alcohol or substance use,

### 03-08-19 9:16 AM

57	including use of opiates; [and]
58	(ii) [relating] that relate to the county jail's provision, or lack of provision, of
59	medications used to treat, mitigate, or address an inmate's symptoms of withdrawal, including
60	methadone and all forms of buprenorphine and naltrexone; and
61	(iii) that relate to screening, assessment, and treatment of an inmate for a substance use
62	or mental health disorder; and
63	(e) any report the county jail provides or is required to provide under federal law or
64	regulation relating to inmate deaths.
65	(3) The Commission on Criminal and Juvenile Justice shall:
66	(a) compile the information from the reports described in Subsection (2);
67	(b) omit or redact any identifying information of an inmate in the compilation to the
68	extent omission or redaction is necessary to comply with state and federal law; and
69	(c) submit the compilation to the Law Enforcement and Criminal Justice Interim
70	Committee and the [Utah Substance Use and Mental Health Advisory Council] committee
71	created in Section 63M-7-211 before November 1 of each year.
72	(4) The Commission on Criminal and Juvenile Justice may not provide access to or use
73	a county jail's policies, procedures, or protocols submitted under this section in a manner or for
74	a purpose not described in this section.
75	Section 2. Section <b>58-17b-309.7</b> is enacted to read:
76	58-17b-309.7. Exemptions from licensure Opioid treatment program.
77	(1) As used in this section:
78	(a) "Dispense" means to prepare, package, or label for subsequent use.
79	(b) "Nurse practitioner" means an individual who is licensed to practice as an advanced
80	practice registered nurse under Chapter 31b, Nurse Practice Act.
81	(c) "Opioid treatment program" means a program or practitioner that is:
82	(i) engaged in opioid treatment of an individual using an opiate agonist medication;
83	(ii) registered under 21 U.S.C. Sec. 823(g)(1);
84	(iii) licensed by the Office of Licensing, within the Department of Human Services,
85	created in Section 62A-2-103; and
86	(iv) certified by the Substance Abuse and Mental Health Services Administration in
07	

87 accordance with 42 C.F.R. 8.11.

88	(d) "Physician" means an individual licensed to practice as a physician or osteopath in
89	this state under Chapter 67, Utah Medical Practice Act, or Chapter 68, Utah Osteopathic
90	Medical Practice Act.
91	(e) "Physician assistant" means an individual who is licensed to practice as a physician
92	assistant under Chapter 70a, Physician Assistant Act.
93	(f) "Practitioner" means a nurse practitioner, physician's assistant, or a registered nurse.
94	(g) "Registered nurse" means the same as that term is defined in Section 78B-3-403.
95	(2) A practitioner may dispense methadone at an opioid treatment program regardless
96	of whether the practitioner is licensed to dispense methadone under this chapter if the
97	practitioner:
98	(a) is operating under the direction of a pharmacist;
99	(b) dispenses the methadone under the direction of a pharmacist; and
100	(c) acts in accordance with division rule.
101	(3) The division shall, in consultation with pharmacies, physicians, and practitioners
102	who work in an opioid treatment program, make rules in accordance with Title 63G, Chapter 3,
103	Utah Administrative Rulemaking Act, to establish guidelines under which a practitioner may
104	dispense methadone to a patient in an opioid treatment program under this section.
105	Section 3. Section 63M-7-211 is enacted to read:
106	<u>63M-7-211.</u> Inmate health care study Creation Membership Duties
107	Reporting.
108	(1) As used in this section:
109	(a) "Commission" means the Commission on Criminal and Juvenile Justice created in
110	Section 63M-7-201.
111	(b) "Correctional facility" means:
112	(i) a facility operated by or contracted with the Department of Corrections to house a
113	criminal offender in either a secure or nonsecure setting; or
114	(ii) a county jail.
115	(2) The commission shall create a committee to study:
116	(a) treatment provided to inmates in a county jail for substance use or mental health
117	disorders, including withdrawal from alcohol or other drugs;
118	(b) contraception provided to female inmates in correctional facilities;

# 03-08-19 9:16 AM

119	(c) health care and treatment of pregnant inmates in correctional facilities;
120	(d) body cavity searches of arrestees or inmates in correctional facilities; and
121	(e) continuation of medication and mental health treatment for inmates who are
122	transferred from a county jail to the Department of Corrections.
123	(3) The committee shall consist of:
124	(a) a representative from the Division of Substance Abuse and Mental Health within
125	the Department of Human Services;
126	(b) a representative from a local substance abuse and mental health authority from:
127	(i) a county of the first class, as classified in Section 17-50-501; and
128	(ii) a county of the second, third, fourth, fifth, or sixth class, as classified in Section
129	<u>17-50-501;</u>
130	(c) a representative from the Department of Health;
131	(d) a representative from the Utah Sheriff's Association;
132	(e) a representative from the Statewide Association of Prosecutors of Utah;
133	(f) a representative from the Utah Association of Counties;
134	(g) a representative from the Utah Association of Criminal Defense Lawyers;
135	(h) a physician actively engaged in correctional health care in a county jail from:
136	(i) a county of the first class, as classified in Section 17-50-501; and
137	(ii) a county of the second, third, fourth, fifth, or sixth class, as classified in Section
138	<u>17-50-501;</u>
139	(i) a psychiatric service provider actively engaged in correctional health care;
140	(j) a district attorney or a county attorney actively engaged in the practice of civil or
141	constitutional law from:
142	(i) a county of the first class, as classified in Section 17-50-501; and
143	(ii) a county of the second, third, fourth, fifth, or sixth class, as classified in Section
144	<u>17-50-501;</u>
145	(k) a representative from a community-based substance use treatment provider in the
146	state;
147	(1) a physician from a community-based health care facility that specializes in women's
148	health;
149	(m) a representative from the Department of Corrections;

150	(n) a representative from an organization with expertise in civil rights or civil liberties
151	of incarcerated individuals; and
152	(o) other stakeholders, as determined by the commission.
153	(4) Before June 15 of each year, a correctional facility shall submit to the committee a
154	copy of the correctional facility's existing policies, procedures, and protocols for:
155	(a) treatment of an inmate in a county jail experiencing a substance use or mental
156	health disorder, including withdrawal from alcohol or other drugs;
157	(b) providing contraception to a female inmate in a correctional facility;
158	(c) providing health care and treatment for a pregnant inmate in a correctional facility,
159	including any restraints required during a pregnant inmate's labor and delivery;
160	(d) a body cavity search of an arrestee or inmate in a correctional facility; and
161	(e) providing medication and mental health treatment for inmates who are transferred
162	from a county jail to the Department of Corrections; and
163	(5) The committee shall:
164	(a) survey the policies, procedures, and protocols submitted by a correctional facility
165	under Subsection (4);
166	(b) based on the results of the survey under Subsection (5)(a), create model policies,
167	procedures, and protocols relating to the items described in Subsection (4) that take the
168	following into consideration:
169	(i) the needs and limitations of correctional health care, particularly in rural areas of the
170	state;
171	(ii) evidence-based practices;
172	(iii) tools and protocols for substance use screening and assessment;
173	(iv) the transition of an inmate from treatment or health care in a correctional facility to
174	community-based treatment or health care; and
175	(v) the needs of different correctional facility populations;
176	(c) develop training recommendations for correctional officers relating to:
177	(i) suicide prevention and behavioral health; and
178	(ii) body cavity searches; and
179	(d) develop practices and policies for correctional officers and law enforcement to
180	administer a substance use screening to an inmate for alcohol or other drugs.

#### 03-08-19 9:16 AM

181	(6) Neither the commission, the committee, nor a member of the committee may
182	provide access to or use a correctional facility's policies, procedures, or protocols submitted
183	under this section in a manner or for a purpose not described in this section.
184	(7) Before November 30 of each year, the commission shall present a report of the
185	committee's recommendations to the Law Enforcement and Criminal Justice Interim
186	Committee.
187	Section 4. Section 64-13-45 is amended to read:
188	64-13-45. Department reporting requirements.
189	(1) As used in this section:
190	(a) (i) "In-custody death" means an inmate death that occurs while the inmate is in the
191	custody of the department.
192	(ii) "In-custody death" includes an inmate death that occurs while the inmate is:
193	(A) being transported for medical care; or
194	(B) receiving medical care outside of a correctional facility, other than a county jail.
195	(b) "Inmate" means an individual who is processed or booked into custody or housed in
196	the department or a correctional facility other than a county jail.
197	(c) "Opiate" means the same as that term is defined in Section $58-37-2$ .
198	(2) [So that the state may oversee the inmate health care system, the] The department
199	shall submit a report to the Commission on Criminal and Juvenile Justice, created in Section
200	63M-7-201, before [August 1] June 15 of each year that includes:
201	(a) the number of in-custody deaths that occurred during the preceding calendar year;
202	(b) the known, or discoverable on reasonable inquiry, causes and contributing factors
203	of each of the in-custody deaths described in Subsection (2)(a);
204	(c) the department's policy for notifying an inmate's next of kin after the inmate's
205	in-custody death;
206	(d) the department policies, procedures, and protocols:
207	(i) for treatment of an inmate experiencing withdrawal from alcohol or substance use,
208	including use of opiates; [and]
209	(ii) [relating] that relate to the department's provision, or lack of provision, of
210	medications used to treat, mitigate, or address an inmate's symptoms of withdrawal, including
211	methadone and all forms of buprenorphine and naltrexone; and

212	(iii) that relate to screening, assessment, and treatment of an inmate for a substance use
213	disorder or mental health disorder; and
214	(e) any report the department provides or is required to provide under federal law or
215	regulation relating to inmate deaths.
216	(3) The Commission on Criminal and Juvenile Justice shall:
217	(a) compile the information from the reports described in Subsection (2);
218	(b) omit or redact any identifying information of an inmate in the compilation to the
219	extent omission or redaction is necessary to comply with state and federal law; and
220	(c) submit the compilation to the Law Enforcement and Criminal Justice Interim
221	Committee and the Utah Substance Use and Mental Health Advisory Council before November
222	1 of each year.
223	(4) The Commission on Criminal and Juvenile Justice may not provide access to or use
224	the department's policies, procedures, or protocols submitted under this section in a manner or
225	for a purpose not described in this section.