

Senator Kathleen A. Riebe proposes the following substitute bill:

MOBILE CRISIS OUTREACH TEAM EXPANSION

2021 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Kathleen A. Riebe

House Sponsor: Andrew Stoddard

LONG TITLE

General Description:

This bill creates additional mobile crisis outreach teams.

Highlighted Provisions:

This bill:

- ▶ requires the Division of Substance Abuse and Mental Health to create and monitor additional mobile crisis outreach teams; and
- ▶ exempts local substance abuse authorities and local mental health authorities from providing matching funds for mobile crisis outreach teams.

Money Appropriated in this Bill:

This bill appropriates in fiscal year 2022:

- ▶ to the Department of Human Services -- Division of Substance Abuse and Mental Health, as an ongoing appropriation:
 - from the General Fund, \$4,200,000.

Other Special Clauses:

None

Utah Code Sections Affected:

AMENDS:

17-43-201, as last amended by Laws of Utah 2018, Chapter 68



26 [17-43-301](#), as last amended by Laws of Utah 2020, Chapter 303

27 [62A-15-116](#), as last amended by Laws of Utah 2020, Chapter 303

28

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

30 Section 1. Section [17-43-201](#) is amended to read:

31 **[17-43-201. Local substance abuse authorities -- Responsibilities.](#)**

32 (1) (a) (i) In each county operating under a county executive-council form of
33 government under Section [17-52a-203](#), the county legislative body is the local substance abuse
34 authority, provided however that any contract for plan services shall be administered by the
35 county executive.

36 (ii) In each county operating under a council-manager form of government under
37 Section [17-52a-204](#), the county manager is the local substance abuse authority.

38 (iii) In each county other than a county described in Subsection (1)(a)(i) or (ii), the
39 county legislative body is the local substance abuse authority.

40 (b) Within legislative appropriations and county matching funds required by this
41 section, and under the direction of the division, each local substance abuse authority shall:

42 (i) develop substance abuse prevention and treatment services plans;

43 (ii) provide substance abuse services to residents of the county; and

44 (iii) cooperate with efforts of the Division of Substance Abuse and Mental Health to
45 promote integrated programs that address an individual's substance abuse, mental health, and
46 physical healthcare needs, as described in Section [62A-15-103](#).

47 (c) Within legislative appropriations and county matching funds required by this
48 section, each local substance abuse authority shall cooperate with the efforts of the Department
49 of Human Services to promote a system of care, as defined in Section [62A-1-104](#), for minors
50 with or at risk for complex emotional and behavioral needs, as described in Section [62A-1-111](#).

51 (2) (a) By executing an interlocal agreement under Title 11, Chapter 13, Interlocal
52 Cooperation Act, two or more counties may join to:

53 (i) provide substance abuse prevention and treatment services; or

54 (ii) create a united local health department that provides substance abuse treatment
55 services, mental health services, and local health department services in accordance with
56 Subsection (3).

57 (b) The legislative bodies of counties joining to provide services may establish
58 acceptable ways of apportioning the cost of substance abuse services.

59 (c) Each agreement for joint substance abuse services shall:

60 (i) (A) designate the treasurer of one of the participating counties or another person as
61 the treasurer for the combined substance abuse authorities and as the custodian of money
62 available for the joint services; and

63 (B) provide that the designated treasurer, or other disbursing officer authorized by the
64 treasurer, may make payments from the money for the joint services upon audit of the
65 appropriate auditing officer or officers representing the participating counties;

66 (ii) provide for the appointment of an independent auditor or a county auditor of one of
67 the participating counties as the designated auditing officer for the combined substance abuse
68 authorities;

69 (iii) (A) provide for the appointment of the county or district attorney of one of the
70 participating counties as the designated legal officer for the combined substance abuse
71 authorities; and

72 (B) authorize the designated legal officer to request and receive the assistance of the
73 county or district attorneys of the other participating counties in defending or prosecuting
74 actions within their counties relating to the combined substance abuse authorities; and

75 (iv) provide for the adoption of management, clinical, financial, procurement,
76 personnel, and administrative policies as already established by one of the participating
77 counties or as approved by the legislative body of each participating county or interlocal board.

78 (d) An agreement for joint substance abuse services may provide for joint operation of
79 services and facilities or for operation of services and facilities under contract by one
80 participating local substance abuse authority for other participating local substance abuse
81 authorities.

82 (3) A county governing body may elect to combine the local substance abuse authority
83 with the local mental health authority created in Part 3, Local Mental Health Authorities, and
84 the local health department created in Title 26A, Chapter 1, Part 1, Local Health Department
85 Act, to create a united local health department under Section [26A-1-105.5](#). A local substance
86 abuse authority that joins a united local health department shall comply with this part.

87 (4) (a) Each local substance abuse authority is accountable to the department, the

88 Department of Health, and the state with regard to the use of state and federal funds received
89 from those departments for substance abuse services, regardless of whether the services are
90 provided by a private contract provider.

91 (b) Each local substance abuse authority shall comply, and require compliance by its
92 contract provider, with all directives issued by the department and the Department of Health
93 regarding the use and expenditure of state and federal funds received from those departments
94 for the purpose of providing substance abuse programs and services. The department and
95 Department of Health shall ensure that those directives are not duplicative or conflicting, and
96 shall consult and coordinate with local substance abuse authorities with regard to programs and
97 services.

98 (5) Each local substance abuse authority shall:

99 (a) review and evaluate substance abuse prevention and treatment needs and services,
100 including substance abuse needs and services for individuals incarcerated in a county jail or
101 other county correctional facility;

102 (b) annually prepare and submit to the division a plan approved by the county
103 legislative body for funding and service delivery that includes:

104 (i) provisions for services, either directly by the substance abuse authority or by
105 contract, for adults, youth, and children, including those incarcerated in a county jail or other
106 county correctional facility; and

107 (ii) primary prevention, targeted prevention, early intervention, and treatment services;

108 (c) establish and maintain, either directly or by contract, programs licensed under Title
109 62A, Chapter 2, Licensure of Programs and Facilities;

110 (d) appoint directly or by contract a full or part time director for substance abuse
111 programs, and prescribe the director's duties;

112 (e) provide input and comment on new and revised rules established by the division;

113 (f) establish and require contract providers to establish administrative, clinical,
114 procurement, personnel, financial, and management policies regarding substance abuse services
115 and facilities, in accordance with the rules of the division, and state and federal law;

116 (g) establish mechanisms allowing for direct citizen input;

117 (h) annually contract with the division to provide substance abuse programs and
118 services in accordance with the provisions of Title 62A, Chapter 15, Substance Abuse and

119 Mental Health Act;

120 (i) comply with all applicable state and federal statutes, policies, audit requirements,
121 contract requirements, and any directives resulting from those audits and contract requirements;

122 (j) promote or establish programs for the prevention of substance abuse within the
123 community setting through community-based prevention programs;

124 (k) except as described in Subsection (11), provide funding equal to at least 20% of the
125 state funds that it receives to fund services described in the plan;

126 (l) comply with the requirements and procedures of Title 11, Chapter 13, Interlocal
127 Cooperation Act, Title 17B, Chapter 1, Part 6, Fiscal Procedures for Local Districts, and Title
128 51, Chapter 2a, Accounting Reports from Political Subdivisions, Interlocal Organizations, and
129 Other Local Entities Act;

130 (m) for persons convicted of driving under the influence in violation of Section
131 [41-6a-502](#) or [41-6a-517](#), conduct the following as defined in Section [41-6a-501](#):

132 (i) a screening;

133 (ii) an assessment;

134 (iii) an educational series; and

135 (iv) substance abuse treatment; and

136 (n) utilize proceeds of the accounts described in Subsection [62A-15-503\(1\)](#) to
137 supplement the cost of providing the services described in Subsection (5)(m).

138 (6) Before disbursing any public funds, each local substance abuse authority shall
139 require that each entity that receives any public funds from the local substance abuse authority
140 agrees in writing that:

141 (a) the entity's financial records and other records relevant to the entity's performance
142 of the services provided to the local substance abuse authority shall be subject to examination
143 by:

144 (i) the division;

145 (ii) the local substance abuse authority director;

146 (iii) (A) the county treasurer and county or district attorney; or

147 (B) if two or more counties jointly provide substance abuse services under an
148 agreement under Subsection (2), the designated treasurer and the designated legal officer;

149 (iv) the county legislative body; and

150 (v) in a county with a county executive that is separate from the county legislative
151 body, the county executive;

152 (b) the county auditor may examine and audit the entity's financial and other records
153 relevant to the entity's performance of the services provided to the local substance abuse
154 authority; and

155 (c) the entity will comply with the provisions of Subsection (4)(b).

156 (7) A local substance abuse authority may receive property, grants, gifts, supplies,
157 materials, contributions, and any benefit derived therefrom, for substance abuse services. If
158 those gifts are conditioned upon their use for a specified service or program, they shall be so
159 used.

160 (8) (a) As used in this section, "public funds" means the same as that term is defined in
161 Section [17-43-203](#).

162 (b) Public funds received for the provision of services pursuant to the local substance
163 abuse plan may not be used for any other purpose except those authorized in the contract
164 between the local substance abuse authority and the provider for the provision of plan services.

165 (9) Subject to the requirements of the federal Substance Abuse Prevention and
166 Treatment Block Grant, Pub. L. No. 102-321, a local substance abuse authority shall ensure
167 that all substance abuse treatment programs that receive public funds:

168 (a) accept and provide priority for admission to a pregnant woman or a pregnant minor;
169 and

170 (b) if admission of a pregnant woman or a pregnant minor is not possible within 24
171 hours of the time that a request for admission is made, provide a comprehensive referral for
172 interim services that:

173 (i) are accessible to the pregnant woman or pregnant minor;

174 (ii) are best suited to provide services to the pregnant woman or pregnant minor;

175 (iii) may include:

176 (A) counseling;

177 (B) case management; or

178 (C) a support group; and

179 (iv) shall include a referral for:

180 (A) prenatal care; and

181 (B) counseling on the effects of alcohol and drug use during pregnancy.

182 (10) If a substance abuse treatment program described in Subsection (9) is not able to
183 accept and admit a pregnant woman or pregnant minor under Subsection (9) within 48 hours of
184 the time that request for admission is made, the local substance abuse authority shall contact
185 the Division of Substance Abuse and Mental Health for assistance in providing services to the
186 pregnant woman or pregnant minor.

187 (11) Subsection (5)(k) does not apply to state funds a local substance abuse authority
188 receives for a mobile crisis outreach team created under Section [62A-15-116](#).

189 Section 2. Section **17-43-301** is amended to read:

190 **17-43-301. Local mental health authorities -- Responsibilities.**

191 (1) As used in this section:

192 (a) "Assisted outpatient treatment" means the same as that term is defined in Section
193 [62A-15-602](#).

194 (b) "Crisis worker" means the same as that term is defined in Section [62A-15-1301](#).

195 (c) "Local mental health crisis line" means the same as that term is defined in Section
196 [62A-15-1301](#).

197 (d) "Mental health therapist" means the same as that term is defined in Section
198 [58-60-102](#).

199 (e) "Public funds" means the same as that term is defined in Section [17-43-303](#).

200 (f) "Statewide mental health crisis line" means the same as that term is defined in
201 Section [62A-15-1301](#).

202 (2) (a) (i) In each county operating under a county executive-council form of
203 government under Section [17-52a-203](#), the county legislative body is the local mental health
204 authority, provided however that any contract for plan services shall be administered by the
205 county executive.

206 (ii) In each county operating under a council-manager form of government under
207 Section [17-52a-204](#), the county manager is the local mental health authority.

208 (iii) In each county other than a county described in Subsection (2)(a)(i) or (ii), the
209 county legislative body is the local mental health authority.

210 (b) Within legislative appropriations and county matching funds required by this
211 section, under the direction of the division, each local mental health authority shall:

212 (i) provide mental health services to individuals within the county; and
213 (ii) cooperate with efforts of the Division of Substance Abuse and Mental Health to
214 promote integrated programs that address an individual's substance abuse, mental health, and
215 physical healthcare needs, as described in Section [62A-15-103](#).

216 (c) Within legislative appropriations and county matching funds required by this
217 section, each local mental health authority shall cooperate with the efforts of the Department of
218 Human Services to promote a system of care, as defined in Section [62A-1-104](#), for minors with
219 or at risk for complex emotional and behavioral needs, as described in Section [62A-1-111](#).

220 (3) (a) By executing an interlocal agreement under Title 11, Chapter 13, Interlocal
221 Cooperation Act, two or more counties may join to:

222 (i) provide mental health prevention and treatment services; or
223 (ii) create a united local health department that combines substance abuse treatment
224 services, mental health services, and local health department services in accordance with
225 Subsection (4).

226 (b) The legislative bodies of counties joining to provide services may establish
227 acceptable ways of apportioning the cost of mental health services.

228 (c) Each agreement for joint mental health services shall:

229 (i) (A) designate the treasurer of one of the participating counties or another person as
230 the treasurer for the combined mental health authorities and as the custodian of money
231 available for the joint services; and

232 (B) provide that the designated treasurer, or other disbursing officer authorized by the
233 treasurer, may make payments from the money available for the joint services upon audit of the
234 appropriate auditing officer or officers representing the participating counties;

235 (ii) provide for the appointment of an independent auditor or a county auditor of one of
236 the participating counties as the designated auditing officer for the combined mental health
237 authorities;

238 (iii) (A) provide for the appointment of the county or district attorney of one of the
239 participating counties as the designated legal officer for the combined mental health
240 authorities; and

241 (B) authorize the designated legal officer to request and receive the assistance of the
242 county or district attorneys of the other participating counties in defending or prosecuting

243 actions within their counties relating to the combined mental health authorities; and
244 (iv) provide for the adoption of management, clinical, financial, procurement,
245 personnel, and administrative policies as already established by one of the participating
246 counties or as approved by the legislative body of each participating county or interlocal board.

247 (d) An agreement for joint mental health services may provide for:

248 (i) joint operation of services and facilities or for operation of services and facilities
249 under contract by one participating local mental health authority for other participating local
250 mental health authorities; and

251 (ii) allocation of appointments of members of the mental health advisory council
252 between or among participating counties.

253 (4) A county governing body may elect to combine the local mental health authority
254 with the local substance abuse authority created in Part 2, Local Substance Abuse Authorities,
255 and the local health department created in Title 26A, Chapter 1, Part 1, Local Health
256 Department Act, to create a united local health department under Section 26A-1-105.5. A local
257 mental health authority that joins with a united local health department shall comply with this
258 part.

259 (5) (a) Each local mental health authority is accountable to the department, the
260 Department of Health, and the state with regard to the use of state and federal funds received
261 from those departments for mental health services, regardless of whether the services are
262 provided by a private contract provider.

263 (b) Each local mental health authority shall comply, and require compliance by its
264 contract provider, with all directives issued by the department and the Department of Health
265 regarding the use and expenditure of state and federal funds received from those departments
266 for the purpose of providing mental health programs and services. The department and
267 Department of Health shall ensure that those directives are not duplicative or conflicting, and
268 shall consult and coordinate with local mental health authorities with regard to programs and
269 services.

270 (6) (a) Each local mental health authority shall:

271 (i) review and evaluate mental health needs and services, including mental health needs
272 and services for:

273 (A) an individual incarcerated in a county jail or other county correctional facility; and

274 (B) an individual who is a resident of the county and who is court ordered to receive
275 assisted outpatient treatment under Section 62A-15-630.5;

276 (ii) in accordance with Subsection (6)(b), annually prepare and submit to the division a
277 plan approved by the county legislative body for mental health funding and service delivery,
278 either directly by the local mental health authority or by contract;

279 (iii) establish and maintain, either directly or by contract, programs licensed under Title
280 62A, Chapter 2, Licensure of Programs and Facilities;

281 (iv) appoint, directly or by contract, a full-time or part-time director for mental health
282 programs and prescribe the director's duties;

283 (v) provide input and comment on new and revised rules established by the division;

284 (vi) establish and require contract providers to establish administrative, clinical,
285 personnel, financial, procurement, and management policies regarding mental health services
286 and facilities, in accordance with the rules of the division, and state and federal law;

287 (vii) establish mechanisms allowing for direct citizen input;

288 (viii) annually contract with the division to provide mental health programs and
289 services in accordance with the provisions of Title 62A, Chapter 15, Substance Abuse and
290 Mental Health Act;

291 (ix) comply with all applicable state and federal statutes, policies, audit requirements,
292 contract requirements, and any directives resulting from those audits and contract requirements;

293 (x) except as described in Subsection (12), provide funding equal to at least 20% of the
294 state funds that it receives to fund services described in the plan;

295 (xi) comply with the requirements and procedures of Title 11, Chapter 13, Interlocal
296 Cooperation Act, Title 17B, Chapter 1, Part 6, Fiscal Procedures for Local Districts, and Title
297 51, Chapter 2a, Accounting Reports from Political Subdivisions, Interlocal Organizations, and
298 Other Local Entities Act; and

299 (xii) take and retain physical custody of minors committed to the physical custody of
300 local mental health authorities by a judicial proceeding under Title 62A, Chapter 15, Part 7,
301 Commitment of Persons Under Age 18 to Division of Substance Abuse and Mental Health.

302 (b) Each plan under Subsection (6)(a)(ii) shall include services for adults, youth, and
303 children, which shall include:

304 (i) inpatient care and services;

- 305 (ii) residential care and services;
- 306 (iii) outpatient care and services;
- 307 (iv) 24-hour crisis care and services;
- 308 (v) psychotropic medication management;
- 309 (vi) psychosocial rehabilitation, including vocational training and skills development;
- 310 (vii) case management;
- 311 (viii) community supports, including in-home services, housing, family support
- 312 services, and respite services;
- 313 (ix) consultation and education services, including case consultation, collaboration
- 314 with other county service agencies, public education, and public information; and
- 315 (x) services to persons incarcerated in a county jail or other county correctional facility.
- 316 (7) (a) If a local mental health authority provides for a local mental health crisis line
- 317 under the plan for 24-hour crisis care and services described in Subsection (6)(b)(iv), the local
- 318 mental health authority shall:
- 319 (i) collaborate with the statewide mental health crisis line described in Section
- 320 [62A-15-1302](#);
- 321 (ii) ensure that each individual who answers calls to the local mental health crisis line:
- 322 (A) is a mental health therapist or a crisis worker; and
- 323 (B) meets the standards of care and practice established by the Division of Substance
- 324 Abuse and Mental Health, in accordance with Section [62A-15-1302](#); and
- 325 (iii) ensure that when necessary, based on the local mental health crisis line's capacity,
- 326 calls are immediately routed to the statewide mental health crisis line to ensure that when an
- 327 individual calls the local mental health crisis line, regardless of the time, date, or number of
- 328 individuals trying to simultaneously access the local mental health crisis line, a mental health
- 329 therapist or a crisis worker answers the call without the caller first:
- 330 (A) waiting on hold; or
- 331 (B) being screened by an individual other than a mental health therapist or crisis
- 332 worker.
- 333 (b) If a local mental health authority does not provide for a local mental health crisis
- 334 line under the plan for 24-hour crisis care and services described in Subsection (6)(b)(iv), the
- 335 local mental health authority shall use the statewide mental health crisis line as a local crisis

336 line resource.

337 (8) Before disbursing any public funds, each local mental health authority shall require
338 that each entity that receives any public funds from a local mental health authority agrees in
339 writing that:

340 (a) the entity's financial records and other records relevant to the entity's performance
341 of the services provided to the mental health authority shall be subject to examination by:

342 (i) the division;

343 (ii) the local mental health authority director;

344 (iii) (A) the county treasurer and county or district attorney; or

345 (B) if two or more counties jointly provide mental health services under an agreement
346 under Subsection (3), the designated treasurer and the designated legal officer;

347 (iv) the county legislative body; and

348 (v) in a county with a county executive that is separate from the county legislative
349 body, the county executive;

350 (b) the county auditor may examine and audit the entity's financial and other records
351 relevant to the entity's performance of the services provided to the local mental health
352 authority; and

353 (c) the entity will comply with the provisions of Subsection (5)(b).

354 (9) A local mental health authority may receive property, grants, gifts, supplies,
355 materials, contributions, and any benefit derived therefrom, for mental health services. If those
356 gifts are conditioned upon their use for a specified service or program, they shall be so used.

357 (10) Public funds received for the provision of services pursuant to the local mental
358 health plan may not be used for any other purpose except those authorized in the contract
359 between the local mental health authority and the provider for the provision of plan services.

360 (11) A local mental health authority shall provide assisted outpatient treatment
361 services, as described in Section [62A-15-630.4](#), to a resident of the county who has been
362 ordered under Section [62A-15-630.5](#) to receive assisted outpatient treatment.

363 (12) Subsection (6)(a)(x) does not apply to state funds a local mental health authority
364 receives for a mobile crisis outreach team created under Section [62A-15-116](#).

365 Section 3. Section **62A-15-116** is amended to read:

366 **62A-15-116. Mobile crisis outreach team expansion.**

367 (1) In consultation with the Behavioral Health Crisis Response Commission,
368 established in Section [63C-18-202](#), the division shall [~~award grants for the development of:~~
369 work with counties to have at least 14 operating mobile crisis outreach teams throughout the
370 state on or before July 1, 2022.

371 [~~(a) five mobile crisis outreach teams:~~

372 [~~(i) in counties of the second, third, fourth, fifth, or sixth class; or]~~

373 [~~(ii) in counties of the first class, if no more than two mobile crisis outreach teams are~~
374 ~~operating or have been awarded a grant to operate in the county; and]~~

375 [~~(b) at least three mobile crisis outreach teams in counties of the third, fourth, fifth, or~~
376 ~~sixth class.]~~

377 (2) A mobile crisis outreach team [~~awarded a grant under]~~ described in Subsection (1)
378 shall provide mental health crisis services 24 hours per day, 7 days per week, and every day of
379 the year.

380 [~~(3) The division shall prioritize the award of a grant described in Subsection (1) to~~
381 ~~entities, based on:]~~

382 [~~(a) the number of individuals the proposed mobile crisis outreach team will serve;~~
383 ~~and]~~

384 [~~(b) the percentage of matching funds the entity will provide to develop the proposed~~
385 ~~mobile crisis outreach team:]~~

386 [~~(4) An entity does not need to have resources already in place to be awarded a grant~~
387 ~~described in Subsection (1).:]~~

388 [~~(5)~~] (3) In consultation with the Behavioral Health Crisis Response Commission,
389 established in Section [63C-18-202](#), the division shall make rules, in accordance with Title 63G,
390 Chapter 3, Utah Administrative Rulemaking Act, for the [~~application and award of the grants]~~
391 creation of the mobile crisis outreach teams described in Subsection (1).

392 **Section 4. Appropriation.**

393 The following sums of money are appropriated for the fiscal year beginning July 1,
394 2021, and ending June 30, 2022. These are additions to amounts previously appropriated for
395 fiscal year 2022. Under the terms and conditions of Title 63J, Chapter 1, Budgetary Procedure
396 Act, the Legislature appropriates the following sums of money from the funds or accounts
397 indicated for the use and support of the government of the state of Utah.

398 ITEM 1

399 To Department of Human Services -- Division of Substance Abuse and Mental Health

400 From General Fund \$4,200,000

401 Schedule of Programs:

402 Community Mental Health Services \$4,200,000

403 The Legislature intends that the Division of Substance Abuse and Mental Health

404 expend appropriations provided under this item for the creation of mobile crisis outreach teams

405 described in Section [62A-15-116](#).