

HB0516S01 compared with HB0516

~~deleted text~~ shows text that was in HB0516 but was deleted in HB0516S01.

inserted text shows text that was not in HB0516 but was inserted into HB0516S01.

DISCLAIMER: This document is provided to assist you in your comparison of the two bills. Sometimes this automated comparison will NOT be completely accurate. Therefore, you need to read the actual bills. This automatically generated document could contain inaccuracies caused by: limitations of the compare program; bad input data; or other causes.

Representative Marsha Judkins proposes the following substitute bill:

MENTAL HEALTH TREATMENT STUDY

2023 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Marsha Judkins

Senate Sponsor: _____

LONG TITLE

General Description:

This bill requires a study of mental health treatment and supports.

Highlighted Provisions:

This bill:

- ▶ defines terms;
- ▶ requires the Office of Substance Use and Mental Health (office) to conduct a study on the delivery and accessibility of mental health treatment and supports in the state;
- ▶ describes the requirements of the study; and
- ▶ requires the office to present a report on the results of the study to the Health and Human Services Interim Committee by December 31, 2024.

Money Appropriated in this Bill:

HB0516S01 compared with HB0516

None

Other Special Clauses:

None

Utah Code Sections Affected:

ENACTS:

62A-15-125, Utah Code Annotated 1953

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

Section 1. Section **62A-15-125** is enacted to read:

62A-15-125. Mental health treatment study.

(1) As used in this section ~~(, "office")~~:

(a) "Aggregate data" means data that:

(i) are totaled and reported at the group, cohort, class, course, institution, region, or state level, with at least 10 individuals in the level; and

(ii) do not reveal particular individuals.

(b) "Deidentified data" means data that:

(i) cannot reasonably be linked to an identifiable individual; and

(ii) are possessed by an entity that:

(A) takes administrative and technical measures to ensure that the data cannot be associated with a particular individual;

(B) makes a public commitment to maintain and use data in deidentified form and not attempt to reidentify data; and

(C) enters into legally enforceable contractual obligation that prohibits a recipient of the data from attempting to reidentify the data.

(c) "Office" means the Office of Substance Use and Mental Health.

(2) (a) Before July 1, 2024, the office shall conduct a study on the delivery and accessibility of mental health treatment and supports in the state.

(b) In conducting the study, the office shall, while observing privacy best practices and applicable state and federal laws and rules:

(i) collect aggregate data or otherwise deidentified data regarding:

(A) the number of individuals with a mental illness, and the number of individuals with

HB0516S01 compared with HB0516

a serious and persistent mental illness, who receive mental health treatment or supports in the state;

(B) the number of individuals with a mental illness, and the number of individuals with a serious and persistent mental illness, who are civilly committed; and

(C) the number of individuals with a mental illness, and the number of individuals with a serious and persistent mental illness, who are not receiving, but would benefit from, mental health treatment or supports;

(ii) determine the projected growth for each of the populations described in Subsection (2)(b)(i) over the next three, five, and 10 years, and the likely impact of that projected growth on the mental health treatment and supports available in the state;

(iii) identify:

(A) resources and funding available for mental health treatment and supports in the state, including federal funding provided after January 1, 2020, to the state or a state agency;

(B) delivery models for mental health treatment and supports that prevent or delay crisis intervention, hospitalization, or incarceration;

(C) barriers to access to mental health treatment and supports for the populations described in Subsection (2)(b)(i);

(D) any impact of the federal funding described in Subsection (2)(b)(iii)(A) on the availability of mental health treatment or supports in the state; and

(E) funding or service delivery gaps related to mental health treatment and supports in the state;

(iv) examine models, policies, or legislation enacted throughout the United States related to mental health treatment and supports and the effectiveness of the models, policies, or legislation in improving access to, delivery, and outcomes of mental health treatment and supports; and

(v) seek input from and actively engage with the public and community partners, including stakeholders representing the populations described in Subsection (2)(b)(i), health care providers, and other professionals.

(c) For data that is not or cannot feasibly be converted to aggregate data or deidentified data, the office shall seek express consent from each affected individual prior to including that data in the study or the report under Subsection (4).

HB0516S01 compared with HB0516

(3) The department may, subject to Title 63G, Chapter 6a, Utah Procurement Code, contract with another state agency, a private entity, or a research institution to assist the department with the study described in Subsection (2).

(4) Before December 31, 2024, the office shall submit to the Health and Human Services Interim Committee a final written report regarding the study described in Subsection (2) that includes:

(a) a comprehensive, multi-year plan with goals, objectives, and measurable outcomes to address any gaps identified in the study under Subsection (2)(b)(iii)(E) and the current and future mental health treatment and supports needs in the state;

(b) references to all sources of information and data used in the final written report and in the study; and

(c) recommendations to improve the delivery and accessibility of mental health treatment and supports to the populations described in Subsection (2)(b)(i).