HEALTH AND HUMAN SERVICES RECODIFICATION -
HEALTH CARE DELIVERY AND REPEALS
2023 GENERAL SESSION
STATE OF UTAH
Chief Sponsor: Jacob L. Anderegg
House Sponsor: Raymond P. Ward
LONG TITLE
Committee Note:
The Health and Human Services Interim Committee recommended this bill.
Legislative Vote: 14 voting for 0 voting against 4 absent
General Description:
This bill recodifies and repeals portions of the Utah Health Code and Utah Human
Services Code.
Highlighted Provisions:
This bill:
 recodifies provisions regarding health care delivery and access;
 repeals certain sections in the Utah Health Code and Utah Human Services Code
that are no longer needed following the recodification; and
 makes technical and corresponding changes.
Money Appropriated in this Bill:
None
Other Special Clauses:
This bill provides revisor instructions.
Utah Code Sections Affected:
AMENDS:
26B-4-101, as enacted by Laws of Utah 2022, Chapter 255



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     RENUMBERS AND AMENDS:
29
            26B-4-102, (Renumbered from 26-8a-105, as last amended by Laws of Utah 2019,
30
     Chapter 265)
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            26B-4-103, (Renumbered from 26-8a-106, as last amended by Laws of Utah 2017,
32
     Chapter 326)
33
            26B-4-104, (Renumbered from 26-8a-201, as enacted by Laws of Utah 1999, Chapter
34
     141)
35
            26B-4-105, (Renumbered from 26-8a-202, as enacted by Laws of Utah 1999, Chapter
36
     141)
37
            26B-4-106, (Renumbered from 26-8a-203, as last amended by Laws of Utah 2022,
38
     Chapter 387)
39
            26B-4-107, (Renumbered from 26-8a-207, as last amended by Laws of Utah 2020,
40
     Chapters 215 and 230)
41
            26B-4-108, (Renumbered from 26-8a-208, as last amended by Laws of Utah 2022,
42
     Chapter 255)
43
            26B-4-109, (Renumbered from 26-8a-210, as enacted by Laws of Utah 2020, Chapter
44
     215)
45
            26B-4-110, (Renumbered from 26-8a-212, as enacted by Laws of Utah 2022, Chapter
46
     404)
47
            26B-4-111, (Renumbered from 26-8a-250, as enacted by Laws of Utah 2000, Chapter
48
     305)
49
            26B-4-112. (Renumbered from 26-8a-252, as enacted by Laws of Utah 2000, Chapter
50
     305)
51
            26B-4-113, (Renumbered from 26-8a-253, as last amended by Laws of Utah 2011,
52
     Chapter 297)
53
            26B-4-114, (Renumbered from 26-8a-254, as enacted by Laws of Utah 2000, Chapter
54
     305)
            26B-4-115, (Renumbered from 26-8a-301, as last amended by Laws of Utah 2021,
55
56
     Chapter 237)
57
            26B-4-116, (Renumbered from 26-8a-302, as last amended by Laws of Utah 2022,
58
     Chapters 255 and 460)
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59
            26B-4-117, (Renumbered from 26-8a-303, as last amended by Laws of Utah 2019,
60
     Chapter 265)
            26B-4-118, (Renumbered from 26-8a-304, as last amended by Laws of Utah 2019,
61
62
     Chapter 265)
             26B-4-119, (Renumbered from 26-8a-305, as enacted by Laws of Utah 1999, Chapter
63
64
      141)
65
            26B-4-120, (Renumbered from 26-8a-306, as last amended by Laws of Utah 2021,
66
     Chapter 237)
67
            26B-4-121, (Renumbered from 26-8a-307, as last amended by Laws of Utah 2021,
68
     Chapter 208)
69
            26B-4-122, (Renumbered from 26-8a-308, as last amended by Laws of Utah 2017,
70
     Chapter 326)
71
             26B-4-123, (Renumbered from 26-8a-309, as enacted by Laws of Utah 1999, Chapter
72
     141)
73
            26B-4-124, (Renumbered from 26-8a-310, as last amended by Laws of Utah 2022,
74
     Chapters 255, 335, and 415)
75
             26B-4-125, (Renumbered from 26-8a-310.5, as enacted by Laws of Utah 2021, Chapter
76
     237)
77
            26B-4-126, (Renumbered from 26-8a-501, as last amended by Laws of Utah 2017,
78
     Chapter 326)
79
            26B-4-127, (Renumbered from 26-8a-502, as last amended by Laws of Utah 2021,
80
     Chapter 237)
81
             26B-4-128, (Renumbered from 26-8a-502.1, as enacted by Laws of Utah 2022, Chapter
82
     457)
83
            26B-4-129, (Renumbered from 26-8a-503, as last amended by Laws of Utah 2019,
84
     Chapter 346)
85
            26B-4-130, (Renumbered from 26-8a-504, as last amended by Laws of Utah 2008,
86
     Chapter 382)
87
             26B-4-131, (Renumbered from 26-8a-505, as enacted by Laws of Utah 1999, Chapter
88
     141)
89
             26B-4-132, (Renumbered from 26-8a-506, as last amended by Laws of Utah 2017,
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90
      Chapter 326)
 91
              26B-4-133, (Renumbered from 26-8a-507, as enacted by Laws of Utah 1999, Chapter
 92
       141)
 93
             26B-4-134, (Renumbered from 26-8a-601, as last amended by Laws of Utah 2021,
 94
      Chapter 237)
 95
             26B-4-135, (Renumbered from 26-8a-602, as enacted by Laws of Utah 2019, Chapter
 96
      262)
 97
             26B-4-136, (Renumbered from 26-8a-603, as enacted by Laws of Utah 2022, Chapter
 98
      347)
 99
             26B-4-137, (Renumbered from 26-8c-102, as enacted by Laws of Utah 2016, Chapter
100
      97)
101
             26B-4-150, (Renumbered from 26-8a-401, as last amended by Laws of Utah 2021,
102
      Chapter 265)
103
             26B-4-151, (Renumbered from 26-8a-402, as last amended by Laws of Utah 2021,
104
      Chapter 265)
105
             26B-4-152, (Renumbered from 26-8a-403, as last amended by Laws of Utah 2006,
106
      Chapter 209)
107
             26B-4-153, (Renumbered from 26-8a-404, as last amended by Laws of Utah 2022,
108
      Chapter 351)
109
              26B-4-154, (Renumbered from 26-8a-405, as last amended by Laws of Utah 2019,
110
      Chapter 390)
111
              26B-4-155, (Renumbered from 26-8a-405.1, as last amended by Laws of Utah 2021,
112
      Chapter 265)
113
             26B-4-156, (Renumbered from 26-8a-405.2, as last amended by Laws of Utah 2011,
114
      Chapter 297)
115
             26B-4-157, (Renumbered from 26-8a-405.3, as last amended by Laws of Utah 2021,
116
      Chapter 355)
             26B-4-158, (Renumbered from 26-8a-405.4, as last amended by Laws of Utah 2021,
117
118
      Chapter 265)
119
             26B-4-159, (Renumbered from 26-8a-405.5, as last amended by Laws of Utah 2021,
120
      Chapter 265)
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121
             26B-4-160, (Renumbered from 26-8a-406, as last amended by Laws of Utah 2011,
122
      Chapter 297)
             26B-4-161, (Renumbered from 26-8a-407, as last amended by Laws of Utah 2008,
123
124
      Chapter 382)
125
             26B-4-162, (Renumbered from 26-8a-408, as last amended by Laws of Utah 2017,
126
      Chapter 326)
127
             26B-4-163, (Renumbered from 26-8a-409, as last amended by Laws of Utah 2017,
128
      Chapter 326)
129
             26B-4-164, (Renumbered from 26-8a-410, as last amended by Laws of Utah 2011,
130
      Chapter 297)
131
             26B-4-165, (Renumbered from 26-8a-411, as last amended by Laws of Utah 2003,
132
      Chapter 213)
133
             26B-4-166, (Renumbered from 26-8a-412, as enacted by Laws of Utah 1999, Chapter
134
      141)
135
             26B-4-167, (Renumbered from 26-8a-413, as last amended by Laws of Utah 2022,
136
      Chapter 274)
137
             26B-4-168, (Renumbered from 26-8a-414, as last amended by Laws of Utah 2008,
138
      Chapter 382)
139
              26B-4-169, (Renumbered from 26-8a-415, as enacted by Laws of Utah 1999, Chapter
140
      141)
141
             26B-4-170, (Renumbered from 26-8a-416, as last amended by Laws of Utah 2022,
142
      Chapter 351)
143
              26B-4-201, (Renumbered from 26-61a-102, as last amended by Laws of Utah 2022,
144
      Chapters 290 and 452)
145
             26B-4-202, (Renumbered from 26-61a-103, as last amended by Laws of Utah 2022,
146
      Chapters 290 and 415)
147
             26B-4-203, (Renumbered from 26-61a-104, as last amended by Laws of Utah 2022,
148
      Chapters 277 and 452)
149
              26B-4-204, (Renumbered from 26-61a-106, as last amended by Laws of Utah 2022,
150
      Chapters 415 and 452)
151
              26B-4-205, (Renumbered from 26-61a-107, as last amended by Laws of Utah 2021,
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152	Chapter 337)
153	26B-4-206, (Renumbered from 26-61a-108, as enacted by Laws of Utah 2018, Third
154	Special Session, Chapter 1)
155	26B-4-207, (Renumbered from 26-61a-111, as last amended by Laws of Utah 2022,
156	Chapters 174, 256, and 290)
157	26B-4-208, (Renumbered from 26-61a-112, as enacted by Laws of Utah 2018, Third
158	Special Session, Chapter 1)
159	26B-4-209, (Renumbered from 26-61a-113, as last amended by Laws of Utah 2020,
160	Chapters 12 and 354)
161	26B-4-210, (Renumbered from 26-61a-114, as enacted by Laws of Utah 2018, Third
162	Special Session, Chapter 1)
163	26B-4-211, (Renumbered from 26-61a-115, as enacted by Laws of Utah 2019, First
164	Special Session, Chapter 5)
165	26B-4-212, (Renumbered from 26-61-103, as enacted by Laws of Utah 2017, Chapter
166	398)
167	26B-4-213, (Renumbered from 26-61a-201, as last amended by Laws of Utah 2022,
168	Chapters 198, 290, and 452)
169	26B-4-214, (Renumbered from 26-61a-202, as last amended by Laws of Utah 2022,
170	Chapters 290 and 452)
171	26B-4-215, (Renumbered from 26-61a-203, as last amended by Laws of Utah 2019,
172	First Special Session, Chapter 5)
173	26B-4-216, (Renumbered from 26-61a-204, as last amended by Laws of Utah 2022,
174	Chapters 198 and 290)
175	26B-4-217, (Renumbered from 26-61a-401, as last amended by Laws of Utah 2022,
176	Chapters 290 and 415)
177	26B-4-218, (Renumbered from 26-61a-402, as renumbered and amended by Laws of
178	Utah 2018, Third Special Session, Chapter 1)
179	26B-4-219, (Renumbered from 26-61a-403, as last amended by Laws of Utah 2022,
180	Chapters 415 and 452)
181	26B-4-220, (Renumbered from 26-61a-701, as enacted by Laws of Utah 2018, Third
182	Special Session, Chapter 1)

183 26B-4-221, (Renumbered from 26-61a-702, as last amended by Laws of Utah 2022, 184 Chapter 452) 26B-4-222, (Renumbered from 26-61a-703, as last amended by Laws of Utah 2022, 185 186 Chapter 97) 187 26B-4-223, (Renumbered from 26-61a-116, as enacted by Laws of Utah 2022, Chapter 188 452) 189 26B-4-224, (Renumbered from 26-61a-301, as last amended by Laws of Utah 2022, 190 Chapter 290) 191 26B-4-225, (Renumbered from 26-61a-302, as last amended by Laws of Utah 2019, 192 First Special Session, Chapter 5) 193 26B-4-226, (Renumbered from 26-61a-303, as last amended by Laws of Utah 2022, 194 Chapters 290 and 415) 195 26B-4-227, (Renumbered from 26-61a-304, as last amended by Laws of Utah 2019, 196 First Special Session, Chapter 5) 197 26B-4-228, (Renumbered from 26-61a-305, as last amended by Laws of Utah 2022, 198 Chapter 290) 199 26B-4-229, (Renumbered from 26-61a-501, as last amended by Laws of Utah 2022, 200 Chapters 290 and 415) 201 26B-4-230, (Renumbered from 26-61a-502, as last amended by Laws of Utah 2022, 202 Chapter 290) 203 26B-4-231, (Renumbered from 26-61a-503, as last amended by Laws of Utah 2022, 204 Chapter 415) 205 26B-4-232, (Renumbered from 26-61a-504, as last amended by Laws of Utah 2021, 206 Chapter 350) 26B-4-233. (Renumbered from 26-61a-505, as last amended by Laws of Utah 2022. 207 208 Chapter 452 and last amended by Coordination Clause, Laws of Utah 2022, Chapter 209 290) 210 26B-4-234, (Renumbered from 26-61a-506, as last amended by Laws of Utah 2022, 211 Chapter 415) 212 26B-4-235, (Renumbered from 26-61a-507, as last amended by Laws of Utah 2020, 213 Chapter 12)

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214
             26B-4-236, (Renumbered from 26-61a-601, as last amended by Laws of Utah 2021,
215
       Chapter 337)
216
             26B-4-237, (Renumbered from 26-61a-602, as last amended by Laws of Utah 2020,
217
       Chapter 354)
218
             26B-4-238, (Renumbered from 26-61a-603, as last amended by Laws of Utah 2020,
219
       Chapter 12)
220
             26B-4-239, (Renumbered from 26-61a-604, as last amended by Laws of Utah 2022,
221
       Chapters 290 and 452)
222
             26B-4-240, (Renumbered from 26-61a-605, as last amended by Laws of Utah 2022,
223
       Chapter 415)
224
             26B-4-241, (Renumbered from 26-61a-606, as last amended by Laws of Utah 2022,
225
       Chapters 290 and 415)
226
             26B-4-242, (Renumbered from 26-61a-607, as last amended by Laws of Utah 2022,
227
       Chapter 452)
228
             26B-4-301, (Renumbered from 26-10b-101, as last amended by Laws of Utah 2022,
229
       Chapter 255)
230
              26B-4-302, (Renumbered from 26-8b-201, as enacted by Laws of Utah 2009, Chapter
231
       22)
232
             26B-4-303, (Renumbered from 26-8b-202, as enacted by Laws of Utah 2009, Chapter
233
       22)
234
             26B-4-304, (Renumbered from 26-8b-301, as last amended by Laws of Utah 2013,
235
       Chapter 98)
236
              26B-4-305, (Renumbered from 26-8b-302, as enacted by Laws of Utah 2009, Chapter
237
       22)
238
             26B-4-306, (Renumbered from 26-8b-303, as last amended by Laws of Utah 2013,
239
       Chapter 98)
240
              26B-4-307, (Renumbered from 26-8b-401, as enacted by Laws of Utah 2009, Chapter
241
       22)
242
             26B-4-308, (Renumbered from 26-8b-402, as enacted by Laws of Utah 2013, Chapter
243
       98)
244
              26B-4-309, (Renumbered from 26-8b-501, as enacted by Laws of Utah 2013, Chapter
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       98)
246
             26B-4-310, (Renumbered from 26-10b-102, as last amended by Laws of Utah 2014,
247
       Chapter 384)
248
             26B-4-311, (Renumbered from 26-10b-103, as last amended by Laws of Utah 2014,
249
       Chapter 384)
250
             26B-4-312, (Renumbered from 26-10b-104, as last amended by Laws of Utah 2014,
251
       Chapter 384)
252
             26B-4-313, (Renumbered from 26-10b-107, as enacted by Laws of Utah 2014, Chapter
253
       384)
254
             26B-4-314, (Renumbered from 26-9-1, as enacted by Laws of Utah 1981, Chapter 126)
255
             26B-4-315, (Renumbered from 26-9-2, as enacted by Laws of Utah 1981, Chapter 126)
256
             26B-4-316, (Renumbered from 26-9-3, as last amended by Laws of Utah 2001, Chapter
257
       95)
258
             26B-4-317, (Renumbered from 26-9-5, as enacted by Laws of Utah 2012, Chapter 408)
259
              26B-4-318, (Renumbered from 26-10-2, as last amended by Laws of Utah 2011,
260
       Chapters 147, 366 and last amended by Coordination Clause, Laws of Utah 2011,
261
       Chapter 366)
             26B-4-319, (Renumbered from 26-10-6, as last amended by Laws of Utah 2022,
262
263
       Chapter 255)
264
             26B-4-320, (Renumbered from 26-10-7, as enacted by Laws of Utah 1981, Chapter
265
       126)
266
             26B-4-321, (Renumbered from 26-10-9, as last amended by Laws of Utah 2022,
267
       Chapter 430)
268
              26B-4-322, (Renumbered from 26-10-11, as last amended by Laws of Utah 2021,
269
       Chapter 50)
270
             26B-4-323, (Renumbered from 26-10-13, as enacted by Laws of Utah 2017, Chapter
271
       351)
272
             26B-4-401, (Renumbered from 26-53-102, as last amended by Laws of Utah 2013,
273
       Chapter 18)
274
             26B-4-402, (Renumbered from 26-10-5, as last amended by Laws of Utah 2016,
275
       Chapter 144)
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276
              26B-4-403, (Renumbered from 26-53-201, as enacted by Laws of Utah 2011, Chapter
277
       97)
278
             26B-4-404, (Renumbered from 26-53-301, as enacted by Laws of Utah 2011, Chapter
279
       97)
280
             26B-4-405, (Renumbered from 26-53-401, as last amended by Laws of Utah 2014,
281
       Chapter 165)
282
             26B-4-406, (Renumbered from 26-41-103, as last amended by Laws of Utah 2019,
283
       Chapter 236)
284
             26B-4-407, (Renumbered from 26-41-104, as last amended by Laws of Utah 2019,
285
       Chapter 236)
286
             26B-4-408, (Renumbered from 26-41-104.1, as enacted by Laws of Utah 2019, Chapter
287
       236)
288
             26B-4-409, (Renumbered from 26-41-105, as last amended by Laws of Utah 2020,
289
       Chapter 372)
290
             26B-4-410, (Renumbered from 26-41-106, as last amended by Laws of Utah 2019,
291
       Chapter 236)
292
             26B-4-411, (Renumbered from 26-41-107, as last amended by Laws of Utah 2019,
293
       Chapter 236)
294
             26B-4-501, (Renumbered from 26-64-102, as last amended by Laws of Utah 2022,
295
       Chapter 415)
296
             26B-4-502, (Renumbered from 26-21b-201, as last amended by Laws of Utah 2010,
297
       Chapter 140)
298
              26B-4-503, (Renumbered from 26-64-103, as enacted by Laws of Utah 2018, Chapter
299
       295)
300
             26B-4-504, (Renumbered from 26-64-104, as enacted by Laws of Utah 2018, Chapter
301
       295)
302
             26B-4-505, (Renumbered from 26-64-105, as enacted by Laws of Utah 2018, Chapter
303
       295)
304
             26B-4-506, (Renumbered from 26-64-106, as enacted by Laws of Utah 2018, Chapter
305
       295)
306
              26B-4-507, (Renumbered from 26-64-107, as enacted by Laws of Utah 2018, Chapter
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307
      295)
308
             26B-4-508, (Renumbered from 26-55-103, as enacted by Laws of Utah 2014, Chapter
309
       130)
310
             26B-4-509, (Renumbered from 26-55-104, as last amended by Laws of Utah 2017,
311
      Chapters 181 and 392)
312
             26B-4-510, (Renumbered from 26-55-105, as last amended by Laws of Utah 2022,
313
      Chapter 415)
314
             26B-4-511, (Renumbered from 26-55-106, as last amended by Laws of Utah 2017,
315
      Chapter 392)
316
             26B-4-512, (Renumbered from 26-55-107, as enacted by Laws of Utah 2016, Chapter
317
      202 and last amended by Coordination Clause, Laws of Utah 2016, Chapter 207)
318
             26B-4-513, (Renumbered from 26-55-108, as last amended by Laws of Utah 2022,
319
      Chapter 415)
320
             26B-4-514, (Renumbered from 26-55-109, as enacted by Laws of Utah 2018, Chapter
321
       145)
322
             26B-4-601, (Renumbered from 26-67-102, as last amended by Laws of Utah 2022,
323
      Chapter 255)
324
             26B-4-602, (Renumbered from 26-67-201, as enacted by Laws of Utah 2020, Chapter
325
       169)
326
             26B-4-603, (Renumbered from 26-67-203, as enacted by Laws of Utah 2020, Chapter
327
       169)
328
             26B-4-604, (Renumbered from 26-67-204, as last amended by Laws of Utah 2020,
329
      Fifth Special Session, Chapter 4)
330
             26B-4-701, (Renumbered from 26-46a-102, as last amended by Laws of Utah 2018,
331
      Chapter 330)
332
             26B-4-702, (Renumbered from 26-46-102, as last amended by Laws of Utah 2020,
333
      Chapter 56)
334
             26B-4-703, (Renumbered from 26-46a-103, as enacted by Laws of Utah 2015, Chapter
335
       136)
336
             26B-4-704, (Renumbered from 26-60-103, as last amended by Laws of Utah 2021,
337
      Chapter 64)
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338	26B-4-705, (Renumbered from 26-69-301, as enacted by Laws of Utah 2022, Chapter
339	224)
340	26B-4-706, (Renumbered from 26-69-402, as renumbered and amended by Laws of
341	Utah 2022, Chapter 224)
342	26B-4-707, (Renumbered from 26-69-403, as renumbered and amended by Laws of
343	Utah 2022, Chapter 224)
344	26B-4-708, (Renumbered from 26-69-404, as renumbered and amended by Laws of
345	Utah 2022, Chapter 224)
346	26B-4-709, (Renumbered from 26-69-405, as last amended by Laws of Utah 2022,
347	Chapter 415 and renumbered and amended by Laws of Utah 2022, Chapter 224 and
348	last amended by Coordination Clause, Laws of Utah 2022, Chapter 415)
349	26B-4-710, (Renumbered from 26-69-406, as renumbered and amended by Laws of
350	Utah 2022, Chapter 224)
351	26B-4-711, (Renumbered from 26-69-407, as enacted by Laws of Utah 2022, Chapter
352	154 and last amended by Coordination Clause, Laws of Utah 2022, Chapter 154)
353	26B-4-712, (Renumbered from 26-69-408, as enacted by Laws of Utah 2022, Chapter
354	154 and last amended by Coordination Clause, Laws of Utah 2022, Chapter 154)
355	26B-4-801, (Renumbered from 26-49-102, as last amended by Laws of Utah 2022,
356	Chapter 255)
357	26B-4-802, (Renumbered from 26-49-103, as last amended by Laws of Utah 2021,
358	Chapter 188)
359	26B-4-803, (Renumbered from 26-49-201, as last amended by Laws of Utah 2021,
360	Chapter 188)
361	26B-4-804, (Renumbered from 26-49-202, as last amended by Laws of Utah 2021,
362	Chapter 188)
363	26B-4-805, (Renumbered from 26-49-203, as last amended by Laws of Utah 2021,
364	Chapter 188)
365	26B-4-806, (Renumbered from 26-49-204, as last amended by Laws of Utah 2021,
366	Chapter 188)
367	26B-4-807, (Renumbered from 26-49-205, as last amended by Laws of Utah 2022,
368	Chapter 415)

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369
              26B-4-808, (Renumbered from 26-49-301, as enacted by Laws of Utah 2008, Chapter
370
       242)
371
              26B-4-809, (Renumbered from 26-49-401, as enacted by Laws of Utah 2008, Chapter
372
       242)
373
              26B-4-810, (Renumbered from 26-49-501, as enacted by Laws of Utah 2008, Chapter
374
       242)
375
              26B-4-811, (Renumbered from 26-49-601, as enacted by Laws of Utah 2008, Chapter
376
       242)
377
              26B-4-812, (Renumbered from 26-49-701, as last amended by Laws of Utah 2011,
378
       Chapter 297)
379
       REPEALS:
380
              26-1-2, as last amended by Laws of Utah 2022, Chapter 255
381
              26-1-7.5, as last amended by Laws of Utah 2011, Chapter 297
382
              26-2-1, as last amended by Laws of Utah 1995, Chapter 202
              26-2-2, as last amended by Laws of Utah 2022, Chapter 415
383
384
              26-4-1, as enacted by Laws of Utah 1981, Chapter 126
385
              26-5-2, as enacted by Laws of Utah 1981, Chapter 126
386
              26-5-3, as last amended by Laws of Utah 2004, Chapter 197
387
              26-5-4, as enacted by Laws of Utah 1981, Chapter 126
388
              26-6-1, as enacted by Laws of Utah 1981, Chapter 126
389
              26-6-12, as enacted by Laws of Utah 1981, Chapter 126
390
              26-6-13, as enacted by Laws of Utah 1981, Chapter 126
391
              26-6-14, as enacted by Laws of Utah 1981, Chapter 126
392
              26-6b-2, as last amended by Laws of Utah 2006, Chapter 185
393
              26-8a-101, as enacted by Laws of Utah 1999, Chapter 141
394
              26-8a-102, as last amended by Laws of Utah 2022, Chapters 255, 351, and 404
395
              26-8a-104, as last amended by Laws of Utah 2021, Chapters 237 and 265
396
              26-8a-204, as enacted by Laws of Utah 1999, Chapter 141
397
              26-8a-205, as enacted by Laws of Utah 1999, Chapter 141
398
              26-8a-206, as last amended by Laws of Utah 2021, Chapter 208
399
              26-8a-211, as enacted by Laws of Utah 2020, Chapter 215
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400	26-8b-101, as enacted by Laws of Utah 2009, Chapter 22
401	26-8b-102, as last amended by Laws of Utah 2015, Chapter 411
402	26-8b-601, as enacted by Laws of Utah 2013, Chapter 99
403	26-8c-101, as enacted by Laws of Utah 2016, Chapter 97
404	26-8d-101, as enacted by Laws of Utah 2018, Chapter 104
405	26-9f-101, as last amended by Laws of Utah 2004, Chapter 33
406	26-9f-102, as last amended by Laws of Utah 2008, Chapter 46
407	26-9f-104, as last amended by Laws of Utah 2018, Chapter 125
408	26-10-1, as last amended by Laws of Utah 2019, Chapter 124
409	26-15-1, as last amended by Laws of Utah 2020, Chapter 311
410	26-15-5.1 , as enacted by Laws of Utah 2014, Chapter 327
411	26-15-12, as last amended by Laws of Utah 1994, Chapter 281
412	26-15a-101 , as enacted by Laws of Utah 1998, Chapter 345
413	26-15a-103 , as enacted by Laws of Utah 1998, Chapter 345
414	26-15a-107 , as enacted by Laws of Utah 1998, Chapter 345
415	26-15b-101 , as enacted by Laws of Utah 2020, Chapter 189
416	26-15b-102 , as last amended by Laws of Utah 2020, Fifth Special Session, Chapter 4
417	26-15b-103 , as enacted by Laws of Utah 2020, Chapter 189
418	26-15b-104 , as enacted by Laws of Utah 2020, Chapter 189
419	26-15c-101 , as enacted by Laws of Utah 2021, Chapter 417
420	26-15c-102 , as enacted by Laws of Utah 2021, Chapter 417
421	26-15c-103 , as enacted by Laws of Utah 2021, Chapter 417
422	26-15c-104 , as enacted by Laws of Utah 2021, Chapter 417
423	26-18-1, as enacted by Laws of Utah 1981, Chapter 126
424	26-18-2, as last amended by Laws of Utah 2019, Chapter 393
425	26-18-402.5 , as last amended by Laws of Utah 2022, Chapter 40
426	26-18-501 , as last amended by Laws of Utah 2019, Chapter 393
427	26-18-601 , as enacted by Laws of Utah 2011, Chapter 362
428	26-18-602 , as last amended by Laws of Utah 2015, Chapter 135
429	26-18-701 , as enacted by Laws of Utah 2022, Chapter 334
430	26-18-702 , as enacted by Laws of Utah 2022, Chapter 334

431	26-18a-1, as last amended by Laws of Utah 2010, Chapter 278
432	26-18a-3, as last amended by Laws of Utah 2013, Chapter 167
433	26-19-101, as renumbered and amended by Laws of Utah 2018, Chapter 443
434	26-20-1, as last amended by Laws of Utah 2007, Chapter 48
435	26-21-1, as last amended by Laws of Utah 1997, Chapter 209
436	26-21-4, as last amended by Laws of Utah 2010, Chapter 286
437	26-21-5, as last amended by Laws of Utah 2016, Chapter 74
438	26-21-100 , as enacted by Laws of Utah 2012, Chapter 328
439	26-21-203 , as enacted by Laws of Utah 2012, Chapter 328
440	26-21-205 , as enacted by Laws of Utah 2012, Chapter 328
441	26-21-206 , as enacted by Laws of Utah 2012, Chapter 328
442	26-21-207 , as enacted by Laws of Utah 2012, Chapter 328
443	26-21-208 , as enacted by Laws of Utah 2012, Chapter 328
444	26-21-210 , as enacted by Laws of Utah 2012, Chapter 328
445	26-21-301 , as last amended by Laws of Utah 2018, Chapter 220
446	26-21-302 , as last amended by Laws of Utah 2018, Chapter 220
447	26-21-304 , as enacted by Laws of Utah 2016, Chapter 141
448	26-21a-201, as enacted by Laws of Utah 1991, Chapter 126
449	26-21b-101, as enacted by Laws of Utah 2009, Chapter 266
450	26-21b-102, as last amended by Laws of Utah 2010, Chapter 140
451	26-21b-301, as enacted by Laws of Utah 2009, Chapter 266
452	26-21c-101 , as enacted by Laws of Utah 2020, Chapter 406
453	26-21c-102, as enacted by Laws of Utah 2020, Chapter 406
454	26-21c-104, as enacted by Laws of Utah 2020, Chapter 406
455	26-23a-1, as last amended by Laws of Utah 1996, Chapter 23
456	26-23a-3, as enacted by Laws of Utah 1988, Chapter 238
457	26-23b-101 , as enacted by Laws of Utah 2002, Chapter 155
458	26-25-2, as last amended by Laws of Utah 2008, Chapter 382
459	26-25-3, as last amended by Laws of Utah 1996, Chapter 201
460	26-25-4, as last amended by Laws of Utah 2003, Chapter 242
461	26-25-5, as last amended by Laws of Utah 2011, Chapter 297

462	26-26-1 , as enacted by Laws of Utah 1981, Chapter 126
463	26-26-2, as enacted by Laws of Utah 1981, Chapter 126
464	26-26-4, as last amended by Laws of Utah 1989, Chapter 80
465	26-26-5, as enacted by Laws of Utah 1981, Chapter 126
466	26-26-6, as enacted by Laws of Utah 1981, Chapter 126
467	26-26-7, as last amended by Laws of Utah 1989, Chapter 80
468	26-28-101 , as enacted by Laws of Utah 2007, Chapter 60
469	26-31-101 , as enacted by Laws of Utah 2011, Chapter 90
470	26-31-102 , as enacted by Laws of Utah 2011, Chapter 90
471	26-31-202 , as enacted by Laws of Utah 2011, Chapter 90
472	26-33a-101, as enacted by Laws of Utah 1990, Chapter 305
473	26-33a-103, as last amended by Laws of Utah 2022, Chapter 255
474	26-34-1, as enacted by Laws of Utah 1989, Chapter 276
475	26-34-2, as last amended by Laws of Utah 2020, Chapter 353
476	26-35a-101 , as enacted by Laws of Utah 2004, Chapter 284
477	26-36b-101 , as enacted by Laws of Utah 2016, Chapter 279
478	26-36c-101 , as enacted by Laws of Utah 2018, Chapter 468
479	26-36d-101, as repealed and reenacted by Laws of Utah 2019, Chapter 455
480	26-37a-101 , as enacted by Laws of Utah 2015, Chapter 440
481	26-38-1, as enacted by Laws of Utah 1994, Chapter 281
482	26-38-2, as last amended by Laws of Utah 2020, Chapter 347
483	26-38-3.5 , as enacted by Laws of Utah 1995, Chapter 125
484	26-38-6, as last amended by Laws of Utah 2007, Chapter 44
485	26-38-7, as last amended by Laws of Utah 2012, Chapter 171
486	26-38-8, as last amended by Laws of Utah 2010, Chapter 218
487	26-38-9, as last amended by Laws of Utah 2008, Chapter 382
488	26-39-101 , as enacted by Laws of Utah 1997, Chapter 196
489	26-39-203, as last amended by Laws of Utah 2016, Chapter 74
490	26-40-101 , as enacted by Laws of Utah 1998, Chapter 360
491	26-41-101 , as last amended by Laws of Utah 2019, Chapter 236
492	26-41-102 , as last amended by Laws of Utah 2020, Chapter 372

493	26-43-101, as enacted by Laws of Utah 1998, Chapter 73
494	26-43-103, as last amended by Laws of Utah 2008, Chapter 382
495	26-46-101, as last amended by Laws of Utah 2020, Chapter 56
496	26-46a-101 , as enacted by Laws of Utah 2015, Chapter 136
497	26-47-101, as enacted by Laws of Utah 2005, Chapter 273
498	26-47-102, as last amended by Laws of Utah 2013, Chapter 167
499	26-47-103, as last amended by Laws of Utah 2017, Chapter 181
500	26-49-101, as enacted by Laws of Utah 2008, Chapter 242
501	26-50-101, as enacted by Laws of Utah 2008, Chapter 325
502	26-50-102, as enacted by Laws of Utah 2008, Chapter 325
503	26-51-101 , as enacted by Laws of Utah 2008, Chapter 38
504	26-51-202, as enacted by Laws of Utah 2008, Chapter 38
505	26-53-101, as enacted by Laws of Utah 2011, Chapter 97
506	26-54-101, as last amended by Laws of Utah 2019, Chapter 405
507	26-55-101, as last amended by Laws of Utah 2016, Chapters 202, 207, and 208
508	26-55-102, as last amended by Laws of Utah 2017, Chapter 392
509	26-57-101, as last amended by Laws of Utah 2021, First Special Session, Chapter 12
510	26-57-102, as last amended by Laws of Utah 2021, First Special Session, Chapter 12
511	26-57-104, as enacted by Laws of Utah 2020, Chapter 347
512	26-58-101, as enacted by Laws of Utah 2016, Chapter 71
513	26-60-101, as enacted by Laws of Utah 2017, Chapter 241
514	26-60-102, as last amended by Laws of Utah 2020, Chapter 119
515	26-60-104, as last amended by Laws of Utah 2022, Chapters 255 and 415
516	26-60-105, as last amended by Laws of Utah 2019, Chapter 249
517	26-61-101, as enacted by Laws of Utah 2017, Chapter 398
518	26-61-102, as last amended by Laws of Utah 2022, Chapter 452
519	26-61-202, as last amended by Laws of Utah 2022, Chapter 415
520	26-61a-101, as renumbered and amended by Laws of Utah 2018, Third Special Session,
521	Chapter 1
522	26-62-101 , as last amended by Laws of Utah 2020, Chapter 347
523	26-64-101 , as enacted by Laws of Utah 2018, Chapter 295

524	26-66-101, as enacted by Laws of Utah 2019, Chapter 34
525	26-66-102, as enacted by Laws of Utah 2019, Chapter 34
526	26-66-201, as enacted by Laws of Utah 2019, Chapter 34
527	26-66-203, as enacted by Laws of Utah 2019, Chapter 34
528	26-67-101, as enacted by Laws of Utah 2020, Chapter 169
529	26-68-101, as enacted by Laws of Utah 2021, Chapter 182
530	26-69-101, as enacted by Laws of Utah 2022, Chapter 224
531	26-69-202, as enacted by Laws of Utah 2022, Chapter 224
532	26-69-203, as enacted by Laws of Utah 2022, Chapter 224
533	26-69-401, as renumbered and amended by Laws of Utah 2022, Chapter 224
534	26-70-101, as enacted by Laws of Utah 2022, Chapter 327
535	26A-1-101, as renumbered and amended by Laws of Utah 1991, Chapter 269
536	26B-1-201.1, as last amended by Laws of Utah 2022, Chapter 255
537	26B-1a-101, as enacted by Laws of Utah 2022, Chapter 245
538	26B-1a-102, as enacted by Laws of Utah 2022, Chapter 245
539	26B-1a-103, as enacted by Laws of Utah 2022, Chapter 245 and last amended by
540	Coordination Clause, Laws of Utah 2022, Chapter 245
541	26B-1a-107, as enacted by Laws of Utah 2022, Chapter 245
542	62A-1-104, as last amended by Laws of Utah 2022, Chapter 255
543	62A-1-123, as enacted by Laws of Utah 2022, Chapter 36
544	62A-1-201, as enacted by Laws of Utah 2014, Chapter 37
545	62A-2-101, as last amended by Laws of Utah 2022, Chapters 334 and 468
546	62A-3-101, as last amended by Laws of Utah 2005, Chapter 107
547	62A-4a-101.5, as enacted by Laws of Utah 2022, Chapter 334
548	62A-4a-210, as enacted by Laws of Utah 2014, Chapter 67
549	62A-5-206.8, as enacted by Laws of Utah 2018, Chapter 404
550	62A-5-401, as enacted by Laws of Utah 1991, Chapter 207
551	62A-5-403, as last amended by Laws of Utah 1996, Chapters 179 and 318
552	62A-5a-101, as enacted by Laws of Utah 1991, Chapter 207
553	62A-5a-102, as last amended by Laws of Utah 2019, Chapter 187
554	62A-5a-104, as last amended by Laws of Utah 2013, Chapters 167 and 413

333	62A-5a-105, as last amended by Laws of Otan 2019, Chapter 187
556	62A-5b-101, as last amended by Laws of Utah 2019, Chapter 190
557	62A-6-101, as last amended by Laws of Utah 2011, Chapter 366
558	62A-11-103, as last amended by Laws of Utah 2012, Chapter 41
559	62A-11-301, as last amended by Laws of Utah 2000, Chapter 161
560	62A-11-601, as enacted by Laws of Utah 2007, Chapter 338
561	62A-11-701, as enacted by Laws of Utah 2008, Chapter 73
562	62A-11-702, as enacted by Laws of Utah 2008, Chapter 73
563	62A-14-101, as enacted by Laws of Utah 1999, Chapter 69
564	62A-15-101, as last amended by Laws of Utah 2009, Chapter 75
565	62A-15-102, as last amended by Laws of Utah 2022, Chapter 255
566	62A-15-201, as renumbered and amended by Laws of Utah 2002, Fifth Special Session,
567	Chapter 8
568	62A-15-645, as renumbered and amended by Laws of Utah 2002, Fifth Special Session,
569	Chapter 8
570	62A-15-1001, as renumbered and amended by Laws of Utah 2002, Fifth Special
571	Session, Chapter 8
572	62A-15-1100, as enacted by Laws of Utah 2018, Chapter 414
573	62A-15-1301, as last amended by Laws of Utah 2020, Chapter 303
574	62A-15-1303, as last amended by Laws of Utah 2020, Chapter 303
575	62A-15-1401, as last amended by Laws of Utah 2020, Chapter 303
576	62A-15-1501, as last amended by Laws of Utah 2021, Chapter 277
577	62A-15-1601, as last amended by Laws of Utah 2021, Chapter 278
578	62A-15-1701, as enacted by Laws of Utah 2020, Chapter 358
579	62A-15-1801, as enacted by Laws of Utah 2020, Chapter 304
580	62A-16-101, as enacted by Laws of Utah 2010, Chapter 239
581	62A-17-101, as enacted by Laws of Utah 2013, Chapter 24
582	62A-18-101, as enacted by Laws of Utah 2019, Chapter 139
583	62A-18-102, as enacted by Laws of Utah 2019, Chapter 139
584	62A-18-103, as enacted by Laws of Utah 2019, Chapter 139
585	62A-18-104, as enacted by Laws of Utah 2019, Chapter 139

	Section 1. Section 26B-4-101 is amended to read:
	CHAPTER 4. HEALTH CARE - DELIVERY AND ACCESS
	Part 1. Utah Emergency Medical Services System
	26B-4-101. Definitions.
	[Reserved]
	As used in this part:
	(1) (a) "911 ambulance or paramedic services" means:
	(i) either:
	(A) 911 ambulance service;
	(B) 911 paramedic service; or
	(C) both 911 ambulance and paramedic service; and
	(ii) a response to a 911 call received by a designated dispatch center that receives 911
01	E911 calls.
	(b) "911 ambulance or paramedic services" does not mean a seven or 10 digit
e	lephone call received directly by an ambulance provider licensed under this part.
	(2) "Ambulance" means a ground, air, or water vehicle that:
	(a) transports patients and is used to provide emergency medical services; and
	(b) is required to obtain a permit under Section 26-8a-304 to operate in the state.
	(3) "Ambulance provider" means an emergency medical service provider that:
	(a) transports and provides emergency medical care to patients; and
	(b) is required to obtain a license under Part 4, Ambulance and Paramedic Providers.
	(4) (a) "Behavioral emergency services" means delivering a behavioral health
in	tervention to a patient in an emergency context within a scope and in accordance with
gı	uidelines established by the department.
	(b) "Behavioral emergency services" does not include engaging in the:
	(i) practice of mental health therapy as defined in Section 58-60-102;
	(ii) practice of psychology as defined in Section 58-61-102;
	(iii) practice of clinical social work as defined in Section 58-60-202;
	(iv) practice of certified social work as defined in Section 58-60-202;

617	(v) practice of marriage and family therapy as defined in Section 58-60-302;
618	(vi) practice of clinical mental health counseling as defined in Section 58-60-402; or
619	(vii) practice as a substance use disorder counselor as defined in Section 58-60-502.
620	(5) "Committee" means the State Emergency Medical Services Committee created by
621	Section 26B-1-204.
622	(6) "Community paramedicine" means medical care:
623	(a) provided by emergency medical service personnel; and
624	(b) provided to a patient who is not:
625	(i) in need of ambulance transportation; or
626	(ii) located in a health care facility as defined in Section 26B-2-201.
627	(7) "Direct medical observation" means in-person observation of a patient by a
628	physician, registered nurse, physician's assistant, or individual licensed under Section 26B-4-
629	<u>116.</u>
630	(8) "Emergency medical condition" means:
631	(a) a medical condition that manifests itself by symptoms of sufficient severity,
632	including severe pain, that a prudent layperson, who possesses an average knowledge of health
633	and medicine, could reasonably expect the absence of immediate medical attention to result in:
634	(i) placing the individual's health in serious jeopardy;
635	(ii) serious impairment to bodily functions; or
636	(iii) serious dysfunction of any bodily organ or part; or
637	(b) a medical condition that in the opinion of a physician or the physician's designee
638	requires direct medical observation during transport or may require the intervention of an
639	individual licensed under Section 26B-4-116 during transport.
640	(9) (a) "Emergency medical service personnel" means an individual who provides
641	emergency medical services or behavioral emergency services to a patient and is required to be
642	licensed or certified under Section 26B-4-116.
643	(b) "Emergency medical service personnel" includes a paramedic, medical director of a
644	licensed emergency medical service provider, emergency medical service instructor, behavioral
645	emergency services technician, other categories established by the committee, and a certified
646	emergency medical dispatcher.
647	(10) "Emergency medical service providers" means:

648	(a) licensed ambulance providers and paramedic providers;
649	(b) a facility or provider that is required to be designated under Subsection 26B-4-
650	117(1)(a); and
651	(c) emergency medical service personnel.
652	(11) "Emergency medical services" means:
653	(a) medical services;
654	(b) transportation services;
655	(c) behavioral emergency services; or
656	(d) any combination of the services described in Subsections (11)(a) through (c).
657	(12) "Emergency medical service vehicle" means a land, air, or water vehicle that is:
658	(a) maintained and used for the transportation of emergency medical personnel,
659	equipment, and supplies to the scene of a medical emergency; and
660	(b) required to be permitted under Section 26B-4-118.
661	(13) "Governing body":
662	(a) means the same as that term is defined in Section 11-42-102; and
663	(b) for purposes of a "special service district" under Section 11-42-102, means a
664	special service district that has been delegated the authority to select a provider under this part
665	by the special service district's legislative body or administrative control board.
666	(14) "Interested party" means:
667	(a) a licensed or designated emergency medical services provider that provides
668	emergency medical services within or in an area that abuts an exclusive geographic service area
669	that is the subject of an application submitted pursuant to Sections 26B-4-150 through 26B-4-
670	<u>170;</u>
671	(b) any municipality, county, or fire district that lies within or abuts a geographic
672	service area that is the subject of an application submitted pursuant to Sections 26B-4-150
673	<u>through 26B-4-170; or</u>
674	(c) the department when acting in the interest of the public.
675	(15) "Level of service" means the level at which an ambulance provider type of service
676	is licensed as:
677	(a) emergency medical technician;
678	(b) advanced emergency medical technician; or

679	(c) paramedic.
680	(16) "Medical control" means a person who provides medical supervision to an
681	emergency medical service provider.
682	(17) "Non-911 service" means transport of a patient that is not 911 transport under
683	Subsection (1).
684	(18) "Nonemergency secured behavioral health transport" means an entity that:
685	(a) provides nonemergency secure transportation services for an individual who:
686	(i) is not required to be transported by an ambulance under Section 26B-4-119; and
687	(ii) requires behavioral health observation during transport between any of the
688	following facilities:
689	(A) a licensed acute care hospital;
690	(B) an emergency patient receiving facility;
691	(C) a licensed mental health facility; and
692	(D) the office of a licensed health care provider; and
693	(b) is required to be designated under Section 26B-4-117.
694	(19) "Paramedic provider" means an entity that:
695	(a) employs emergency medical service personnel; and
696	(b) is required to obtain a license under Sections 26B-4-150 through 26B-4-170.
697	(20) "Patient" means an individual who, as the result of illness, injury, or a behavioral
698	emergency condition, meets any of the criteria in Section 26B-4-119.
699	(21) "Political subdivision" means:
700	(a) a city, town, or metro township;
701	(b) a county;
702	(c) a special service district created under Title 17D, Chapter 1, Special Service
703	District Act, for the purpose of providing fire protection services under Subsection
704	<u>17D-1-201(9);</u>
705	(d) a local district created under Title 17B, Limited Purpose Local Government Entities
706	- Local Districts, for the purpose of providing fire protection, paramedic, and emergency
707	services;
708	(e) areas coming together as described in Subsection 26B-4-156(2)(b)(ii); or
709	(f) an interlocal entity under Title 11, Chapter 13, Interlocal Cooperation Act.

710	(22) "Trauma" means an injury requiring immediate medical or surgical intervention.
711	(23) "Trauma system" means a single, statewide system that:
712	(a) organizes and coordinates the delivery of trauma care within defined geographic
713	areas from the time of injury through transport and rehabilitative care; and
714	(b) is inclusive of all prehospital providers, hospitals, and rehabilitative facilities in
715	delivering care for trauma patients, regardless of severity.
716	(24) "Triage" means the sorting of patients in terms of disposition, destination, or
717	priority. For prehospital trauma victims, triage requires a determination of injury severity to
718	assess the appropriate level of care according to established patient care protocols.
719	(25) "Triage, treatment, transportation, and transfer guidelines" means written
720	procedures that:
721	(a) direct the care of patients; and
722	(b) are adopted by the medical staff of an emergency patient receiving facility, trauma
723	center, or an emergency medical service provider.
724	(26) "Type of service" means the category at which an ambulance provider is licensed
725	<u>as:</u>
726	(a) ground ambulance transport;
727	(b) ground ambulance interfacility transport; or
728	(c) both ground ambulance transport and ground ambulance interfacility transport.
729	Section 2. Section 26B-4-102, which is renumbered from Section 26-8a-105 is
730	renumbered and amended to read:
731	[26-8a-105]. <u>26B-4-102.</u> Department powers.
732	The department shall:
733	(1) coordinate the emergency medical services within the state;
734	(2) administer this [chapter] part and the rules established pursuant to it;
735	(3) establish a voluntary task force representing a diversity of emergency medical
736	service providers to advise the department and the committee on rules;
737	(4) establish an emergency medical service personnel peer review board to advise the
738	department concerning discipline of emergency medical service personnel under this [chapter]
739	part; [and]
740	(5) adopt rules in accordance with Title 63G, Chapter 3, Utah Administrative

741	Rulemaking Act, to:
742	(a) license ambulance providers and paramedic providers;
743	(b) permit ambulances, emergency medical response vehicles, and nonemergency
744	secured behavioral health transport vehicles, including approving an emergency vehicle
745	operator's course in accordance with Section [26-8a-304] <u>26B-4-118</u> ;
746	(c) establish:
747	(i) the qualifications for membership of the peer review board created by this section;
748	(ii) a process for placing restrictions on a license while an investigation is pending;
749	(iii) the process for the investigation and recommendation by the peer review board;
750	and
751	(iv) the process for determining the status of a license while a peer review board
752	investigation is pending;
753	(d) establish application, submission, and procedural requirements for licenses,
754	designations, and permits; and
755	(e) establish and implement the programs, plans, and responsibilities as specified in
756	other sections of this [chapter.] part;
757	(6) develop and implement, in cooperation with state, federal, and local agencies
758	empowered to oversee disaster response activities, plans to provide emergency medical
759	services during times of disaster or emergency;
760	(7) establish a pediatric quality improvement resource program; and
761	(8) develop and implement a statewide program to provide support and counseling for
762	personnel who have been exposed to one or more stressful incidents in the course of providing
763	emergency services which shall include:
764	(a) ongoing training for agencies providing emergency services and counseling
765	program volunteers;
766	(b) critical incident stress debriefing for personnel at no cost to the emergency
767	provider; and
768	(c) advising the department on training requirements for licensure as a behavioral
769	emergency services technician.
770	Section 3. Section 26B-4-103, which is renumbered from Section 26-8a-106 is

771

renumbered and amended to read:

772	[26-8a-106].	26B-4-103. Waiver of rules and education and licensing
773	requirements.	
774	(1) Upon applicat	ion, the department, or the committee with the concurrence of the
775	department, may waive th	e requirements of a rule the department, or the committee with the
776	concurrence of the departs	ment, has adopted if:
777	(a) the person app	lying for the waiver satisfactorily demonstrates that:
778	(i) the waiver is n	ecessary for a pilot project to be undertaken by the applicant;
779	(ii) in the particul	ar situation, the requirement serves no beneficial public purpose; or
780	(iii) circumstance	s warrant that waiver of the requirement outweighs the public benefit
781	to be gained by adherence	to the rule; and
782	(b) for a waiver gr	ranted under Subsection (1)(a)(ii) or (iii):
783	(i) the committee	or department extends the waiver to similarly situated persons upon
784	application; or	
785	(ii) the departmen	t, or the committee with the concurrence of the department, amends
786	the rule to be consistent w	ith the waiver.
787	(2) A waiver of ed	ducation or licensing requirements may be granted to a veteran, as
788	defined in Section 68-3-12	2.5, if the veteran:
789	(a) provides to the	e committee or department documentation showing military education
790	and training in the field in	which licensure is sought; and
791	(b) successfully pa	asses any examination required.
792	(3) No waiver ma	y be granted under this section that is inconsistent with the provisions
793	of this [chapter] part.	
794	Section 4. Section	26B-4-104, which is renumbered from Section 26-8a-201 is
795	renumbered and amended	to read:
796	[26-8a-201].	26B-4-104. Public awareness efforts.
797	The department m	ay:
798	(1) develop progra	ams to inform the public of the emergency medical service system;
799	and	
800	(2) develop and d	isseminate emergency medical training programs for the public,
801	which emphasize the prev	ention and treatment of injuries and illnesses.
802	Section 5. Section	26B-4-105 , which is renumbered from Section 26-8a-202 is

803	renumbered	and	amended	to	read
005	TCHUIHUCICU	and	annonacu	$\iota \upsilon$	Toau

[26-8a-	-202 1.	26B-4-105.	Emergency	medical	communications.

Consistent with federal law, the department is the lead agency for coordinating the statewide emergency medical service communication systems under which emergency medical personnel, dispatch centers, and treatment facilities provide medical control and coordination between emergency medical service providers.

Section 6. Section **26B-4-106**, which is renumbered from Section 26-8a-203 is renumbered and amended to read:

[26-8a-203]. 26B-4-106. Data collection.

- (1) The committee shall specify the information that shall be collected for the emergency medical services data system established pursuant to Subsection (2).
- (2) (a) The department shall establish an emergency medical services data system, which shall provide for the collection of information, as defined by the committee, relating to the treatment and care of patients who use or have used the emergency medical services system.
- (b) The committee shall coordinate with the Health Data Authority created in Chapter [33a] 8, Part 5, Utah Health Data Authority [Act], to create a report of data collected by the Health Data Committee under Section [26-33a-106.1] 26B-8-504 regarding:
 - (i) appropriate analytical methods;
- 822 (ii) the total amount of air ambulance flight charges in the state for a one-year period; 823 and
 - (iii) of the total number of flights in a one-year period under Subsection (2)(b)(ii):
 - (A) the number of flights for which a patient had no personal responsibility for paying part of the flight charges;
 - (B) the number of flights for which a patient had personal responsibility to pay all or part of the flight charges;
 - (C) the range of flight charges for which patients had personal responsibility under Subsection (2)(b)(iii)(B), including the median amount for paid patient personal responsibility; and
- 832 (D) the name of any air ambulance provider that received a median paid amount for 833 patient responsibility in excess of the median amount for all paid patient personal responsibility

834	during the reporting year.
835	(c) The department may share, with the Department of Public Safety, information from
836	the emergency medical services data system that:
837	(i) relates to traffic incidents;
838	(ii) is for the improvement of traffic safety;
839	(iii) may not be used for the prosecution of criminal matters; and
840	(iv) may not include any personally identifiable information.
841	(3) (a) On or before October 1, the department shall make the information in Subsection
842	(2)(b) public and send the information in Subsection (2)(b) to public safety dispatchers and first
843	responders in the state.
844	(b) Before making the information in Subsection (2)(b) public, the committee shall
845	provide the air ambulance providers named in the report with the opportunity to respond to the
846	accuracy of the information in the report under Section $[\frac{26-33a-107}{26B-8-506}]$
847	(4) Persons providing emergency medical services:
848	(a) shall provide information to the department for the emergency medical services
849	data system established pursuant to Subsection (2)(a);
850	(b) are not required to provide information to the department under Subsection (2)(b);
851	and
852	(c) may provide information to the department under Subsection (2)(b) or (3)(b).
853	Section 7. Section 26B-4-107, which is renumbered from Section 26-8a-207 is
854	renumbered and amended to read:
855	[26-8a-207]. <u>26B-4-107.</u> Emergency Medical Services Grant Program.
856	(1) Funds appropriated to the department for the Emergency Medical Services Grant
857	Program shall be used for improvement of delivery of emergency medical services and
858	administrative costs as described in Subsection (2)(a).
859	(2) From the total amount of funds appropriated to the department under Subsection
860	(1), the department shall use:
861	(a) an amount equal to 50% of the funds:
862	(i) to provide staff support; and
863	(ii) for other expenses incurred in:
864	(A) administration of grant funds; and

(B) other department administrative costs under this [chapter] part; and

- (b) an amount equal to 50% of the funds to provide emergency medical services grants in accordance with Subsection (3).
- (3) (a) A recipient of a grant under this section shall actively provide emergency medical services within the state.
- (b) (i) From the total amount of funds used to provide grants under Subsection (3), the department shall distribute an amount equal to 21% as per capita block grants for use specifically related to the provision of emergency medical services to nonprofit prehospital emergency medical services providers that are either licensed or designated and to emergency medical services that are the primary emergency medical services for a service area.
- (ii) The department shall determine the grant amounts by prorating available funds on a per capita basis by county as described in department rule.
- (c) Subject to Subsections (3)(d) through (f), the committee shall use the remaining grant funds to award competitive grants to licensed emergency medical services providers that provide emergency medical services within counties of the third through sixth class, in accordance with rules made by the committee.
 - (d) A grant awarded under Subsection (3)(c) shall be used:
 - (i) for the purchase of equipment, subject to Subsection (3)(e); or
- (ii) for the recruitment, training, or retention of licensed emergency medical services providers.
- (e) A recipient of a grant under Subsection (3)(c) may not use more than \$100,000 in grant proceeds for the purchase of vehicles.
- (f) A grant awarded for the purpose described in Subsection (3)(d)(ii) is ongoing for a period of up to three years.
- (g) (i) If, after providing grants under Subsections (3)(c) through (f), any grant funds are unallocated at the end of the fiscal year, the committee shall distribute the unallocated grant funds as per capita block grants as described in Subsection (3)(b).
- (ii) Any grant funds distributed as per capita grants under Subsection (3)(g)(i) are in addition to the amount described in Subsection (3)(b).
- Section 8. Section **26B-4-108**, which is renumbered from Section 26-8a-208 is renumbered and amended to read:

896	[26-8a-208]. <u>26B-4-108.</u> Fees for training equipment rental, testing, and
897	quality assurance reviews.
898	(1) The department may charge fees, established [pursuant to] in accordance with
899	Section 26B-1-209:
900	(a) for the use of department-owned training equipment;
901	(b) to administer tests and conduct quality assurance reviews; and
902	(c) to process an application for a designation, permit, or license.
903	(2) (a) Fees collected under Subsections (1)(a) and (b) shall be separate dedicated
904	credits.
905	(b) Fees under Subsection (1)(a) may be used to purchase training equipment.
906	(c) Fees under Subsection (1)(b) may be used to administer tests and conduct quality
907	assurance reviews.
908	Section 9. Section 26B-4-109, which is renumbered from Section 26-8a-210 is
909	renumbered and amended to read:
910	[26-8a-210]. <u>26B-4-109.</u> Regional Emergency Medical Services Liaisons
911	Qualifications Duties.
912	(1) As used in this section:
913	(a) "Liaison" means a regional emergency medical services liaison hired under this
914	section.
915	(b) "Rural county" means a county of the third, fourth, fifth, or sixth class.
916	(2) The department shall hire five individuals to serve as regional emergency medical
917	services liaisons to:
918	(a) serve the needs of rural counties in providing emergency medical services in
919	accordance with this [chapter] part;
920	(b) act as a liaison between the department and individuals or entities responsible for
921	emergency medical services in rural counties, including:
922	(i) emergency medical services providers;
923	(ii) local officials; and
924	(iii) local health departments or agencies;
925	(c) provide support and training to emergency medical services providers in rural
926	counties;

927	(d) assist rural counties in utilizing state and federal grant programs for financing
928	emergency medical services; and
929	(e) serve as emergency medical service personnel to assist licensed providers with
930	ambulance staffing needs within rural counties.
931	(3) Each liaison hired under Subsection (2):
932	(a) shall reside in a rural county; and
933	(b) shall be licensed as:
934	(i) an advanced emergency medical technician as defined in Section [26-8c-102]
935	<u>26B-4-137</u> ; or
936	(ii) a paramedic as defined in Section [26-8c-102] <u>26B-4-137</u> .
937	(4) The department shall provide each liaison with a vehicle and other equipment in
938	accordance with rules established by the department.
939	Section 10. Section 26B-4-110, which is renumbered from Section 26-8a-212 is
940	renumbered and amended to read:
941	[26-8a-212]. <u>26B-4-110.</u> Community paramedicine program.
942	(1) A ground ambulance provider or a designated quick response provider, as
943	designated in accordance with Section [26-8a-303] <u>26B-4-117</u> , may develop and implement a
944	community paramedicine program.
945	(2) (a) Before providing services, a community paramedicine program shall:
946	(i) implement training requirements as determined by the committee; and
947	(ii) submit a written community paramedicine operational plan to the department that
948	meets requirements established by the committee.
949	(b) A community paramedicine program shall report data, as determined by the
950	committee, related to community paramedicine to the department.
951	(3) A service provided as part of a community paramedicine program may not be billed
952	to an individual or a health benefit plan as defined in Section 31A-1-301 unless:
953	(a) the service is provided in partnership with a health care facility as defined in
954	Section [26-21-2] <u>26B-2-201</u> ; and
955	(b) the partnering health care facility is the person that bills the individual or health
956	benefit plan.
957	(4) Nothing in this section affects any billing authorized under Section [26-8a-403]

958	<u>26B-4-152</u> .	
959	(5) In accordance with Title 63G	, Chapter 3, Utah Administrative Rulemaking Act, the
960	committee shall make rules to implemen	t this section.
961	Section 11. Section 26B-4-111, v	which is renumbered from Section 26-8a-250 is
962	renumbered and amended to read:	
963	$[\frac{26-8a-250}{2}].$ $26B-4-111$	Establishment of statewide trauma system.
964	The department shall establish an	d actively supervise a statewide trauma system to:
965	(1) promote optimal care for trau	ma patients;
966	(2) alleviate unnecessary death a	nd disability from trauma and emergency illness;
967	(3) inform health care providers	about trauma system capabilities;
968	(4) encourage the efficient and e	ffective continuum of patient care, including
969	prevention, prehospital care, hospital car	e, and rehabilitative care; and
970	(5) minimize the overall cost of	rauma care.
971	Section 12. Section 26B-4-112, v	which is renumbered from Section 26-8a-252 is
972	renumbered and amended to read:	
973	$[\frac{26-8a-252}{2}].$ $\underline{26B-4-112}$	Statewide trauma system Department duties.
974	In connection with the statewide	trauma system established in Section [26-8a-250]
975	26B-4-111, the department shall:	
976	(1) establish a statewide trauma	system plan that:
977	(a) identifies statewide trauma ca	are needs, objectives, and priorities;
978	(b) identifies the equipment, faci	lities, personnel training, and other things necessary to
979	create and maintain a statewide trauma s	ystem; and
980	(c) organizes and coordinates tra	uma care within defined geographic areas;
981	(2) support the statewide trauma	system by:
982	(a) facilitating the coordination of	f prehospital, acute care, and rehabilitation services
983	and providers through state regulation an	d oversight;
984	(b) facilitating the ongoing evaluation	ation and refinement of the statewide trauma system;
985	(c) providing educational program	ms;
986	(d) encouraging cooperation between	veen community organizations, health care facilities,
987	public health officials, emergency medic	al service providers, and rehabilitation facilities for the
988	development of a statewide trauma system	n;

989	(e) implementing a quality assurance program using information from the statewide
990	trauma registry established pursuant to Section [26-8a-253] <u>26B-4-113</u> ;
991	(f) establishing trauma center designation requirements in accordance with Section
992	$\left[\frac{26-8a-254}{26B-4-114}\right]$; and
993	(g) developing standards so that:
994	(i) trauma centers are categorized according to their capability to provide care;
995	(ii) trauma victims are triaged at the initial point of patient contact; and
996	(iii) trauma patients are sent to appropriate health care facilities.
997	Section 13. Section 26B-4-113, which is renumbered from Section 26-8a-253 is
998	renumbered and amended to read:
999	[26-8a-253]. <u>26B-4-113.</u> Statewide trauma system Registry and quality
1000	assurance program.
1001	(1) The department shall:
1002	(a) establish and fund a statewide trauma registry to collect and analyze information on
1003	the incidence, severity, causes, and outcomes of trauma;
1004	(b) establish, by rule, the data elements, the medical care providers that shall report,
1005	and the time frame and format for reporting;
1006	(c) use the data collected to:
1007	(i) improve the availability and delivery of prehospital and hospital trauma care;
1008	(ii) assess trauma care delivery, patient care outcomes, and compliance with the
1009	requirements of this [chapter] part and applicable department rules; and
1010	(iii) regularly produce and disseminate reports to data providers, state government, and
1011	the public; and
1012	(d) support data collection and abstraction by providing:
1013	(i) a data collection system and technical assistance to each hospital that submits data;
1014	and
1015	(ii) funding or, at the discretion of the department, personnel for collection and
1016	abstraction for each hospital not designated as a trauma center under the standards established
1017	pursuant to Section [26-8a-254] <u>26B-4-114</u> .
1018	(2) (a) Each hospital shall submit trauma data in accordance with rules established
1019	under Subsection (1).

1020	(b) A hospital designated as a trauma center shall submit data as part of the ongoing		
1021	quality assurance program established in Section [26-8a-252] <u>26B-4-112</u> .		
1022	(3) The department shall assess:		
1023	(a) the effectiveness of the data collected pursuant to Subsection (1); and		
1024	(b) the impact of the statewide trauma system on the provision of trauma care.		
1025	(4) Data collected under this section shall be subject to Chapter [3] 8, Part 4, Health		
1026	Statistics.		
1027	(5) No person may be held civilly liable for having provided data to the department in		
1028	accordance with this section.		
1029	Section 14. Section 26B-4-114, which is renumbered from Section 26-8a-254 is		
1030	renumbered and amended to read:		
1031	[26-8a-254]. <u>26B-4-114.</u> Statewide trauma system Trauma center		
1032	designations and guidelines.		
1033	(1) The department, after seeking the advice of the trauma system advisory committee.		
1034	shall establish by rule:		
1035	(a) trauma center designation requirements; and		
1036	(b) model state guidelines for triage, treatment, transportation, and transfer of trauma		
1037	patients to the most appropriate health care facility.		
1038	(2) The department shall designate as a trauma center each hospital that:		
1039	(a) voluntarily requests a trauma center designation; and		
1040	(b) meets the applicable requirements established pursuant to Subsection (1).		
1041	Section 15. Section 26B-4-115, which is renumbered from Section 26-8a-301 is		
1042	renumbered and amended to read:		
1043	[26-8a-301]. <u>26B-4-115.</u> Certificates, Designations, Permits, and Licenses		
1044	General requirement.		
1045	(1) Except as provided in Section [26-8a-308 or 26-8b-201] <u>26B-4-104 or 26B-4-122</u> :		
1046	(a) an individual may not provide emergency medical services without a license or		
1047	certification issued under Section [26-8a-302] <u>26B-4-116</u> ;		
1048	(b) a facility or provider may not hold itself out as a designated emergency medical		
1049	service provider or nonemergency secured behavioral health transport provider without a		
1050	designation issued under Section [26-8a-303] 26B-4-117 ;		

1051	(c) a vehicle may not operate as an ambulance, emergency response vehicle, or
1052	nonemergency secured behavioral health transport vehicle without a permit issued under
1053	Section [26-8a-304] <u>26B-4-118</u> ; and
1054	(d) an entity may not respond as an ambulance or paramedic provider without the
1055	appropriate license issued under [Part 4, Ambulance and Paramedic Providers] Sections 26B-4
1056	150 through 26B-4-170 for ambulance and paramedic providers.
1057	(2) Section [26-8a-502] <u>26B-4-127</u> applies to violations of this section.
1058	Section 16. Section 26B-4-116, which is renumbered from Section 26-8a-302 is
1059	renumbered and amended to read:
1060	[26-8a-302]. <u>26B-4-116.</u> Licensure of emergency medical service
1061	personnel.
1062	(1) To promote the availability of comprehensive emergency medical services
1063	throughout the state, the committee shall establish:
1064	(a) initial and ongoing licensure and training requirements for emergency medical
1065	service personnel in the following categories:
1066	(i) paramedic;
1067	(ii) advanced emergency medical services technician;
1068	(iii) emergency medical services technician;
1069	(iv) behavioral emergency services technician; and
1070	(v) advanced behavioral emergency services technician;
1071	(b) a method to monitor the certification status and continuing medical education hours
1072	for emergency medical dispatchers; and
1073	(c) guidelines for giving credit for out-of-state training and experience.
1074	(2) The department shall, based on the requirements established in Subsection (1):
1075	(a) develop, conduct, and authorize training and testing for emergency medical service
1076	personnel;
1077	(b) issue a license and license renewals to emergency medical service personnel other
1078	than emergency medical dispatchers; and
1079	(c) verify the certification of emergency medical dispatchers.
1080	(3) The department shall coordinate with local mental health authorities described in
1081	Section 17-43-301 to develop and authorize initial and ongoing licensure and training

1082	requirements for licensure as a:
1083	(a) behavioral emergency services technician; and
1084	(b) advanced behavioral emergency services technician.
1085	(4) As provided in Section [26-8a-502] <u>26B-4-127</u> , an individual issued a license or
1086	certified under this section may only provide emergency medical services to the extent allowed
1087	by the license or certification.
1088	(5) An individual may not be issued or retain a license under this section unless the
1089	individual obtains and retains background clearance under Section [26-8a-310] <u>26B-4-124</u> .
1090	(6) An individual may not be issued or retain a certification under this section unless
1091	the individual obtains and retains background clearance in accordance with Section
1092	[26-8a-310.5] <u>26B-4-125</u> .
1093	Section 17. Section 26B-4-117, which is renumbered from Section 26-8a-303 is
1094	renumbered and amended to read:
1095	[26-8a-303]. <u>26B-4-117.</u> Designation of emergency medical service
1096	providers and nonemergency secured behavioral health transport providers.
1097	(1) To ensure quality emergency medical services, the committee shall establish
1098	designation requirements for:
1099	(a) emergency medical service providers in the following categories:
1100	(i) quick response provider;
1101	(ii) resource hospital for emergency medical providers;
1102	(iii) emergency medical service dispatch center;
1103	(iv) emergency patient receiving facilities; and
1104	(v) other types of emergency medical service providers as the committee considers
1105	necessary; and
1106	(b) nonemergency secured behavioral health transport providers.
1107	(2) The department shall, based on the requirements in Subsection (1), issue
1108	designations to emergency medical service providers and nonemergency secured behavioral
1109	health transport providers listed in Subsection (1).
1110	(3) As provided in Section $\left[\frac{26-8a-502}{26B-4-127}\right]$, an entity issued a designation under
1111	Subsection (2) may only function and hold itself out in accordance with its designation.
1112	Section 18. Section 26B-4-118, which is renumbered from Section 26-8a-304 is

1113	renumbered and amended to	read:
1114	[26-8a-304].	26B-4-118. Permits for emergency medical service vehicles
1115	and nonemergency secured	l behavioral health transport vehicles.
1116	(1) (a) To ensure that	t emergency medical service vehicles and nonemergency secured
1117	behavioral health transport v	rehicles are adequately staffed, safe, maintained, properly
1118	equipped, and safely operate	d, the committee shall establish permit requirements at levels it
1119	considers appropriate in the	following categories:
1120	(i) ambulance;	
1121	(ii) emergency medi-	cal response vehicle; and
1122	(iii) nonemergency s	ecured behavioral health transport vehicle.
1123	(b) The permit requi	rements under Subsections (1)(a)(i) and (ii) shall include a
1124	requirement that beginning of	on or after January 31, 2014, every operator of an ambulance or
1125	emergency medical response	vehicle annually provide proof of the successful completion of an
1126	emergency vehicle operator's	s course approved by the department for all ambulances and
1127	emergency medical response	vehicle operators.
1128	(2) The department s	shall, based on the requirements established in Subsection (1),
1129	issue permits to emergency r	medical service vehicles and nonemergency secured behavioral
1130	health transport vehicles.	
1131	Section 19. Section 2	26B-4-119 , which is renumbered from Section 26-8a-305 is
1132	renumbered and amended to	read:
1133	[26-8a-305].	26B-4-119. Ambulance license required for emergency
1134	medical transport.	
1135	Except as provided in	a Section [26-8a-308] <u>26B-4-122</u> , only an ambulance operating
1136	under a permit issued under	Section $[26-8a-304]$ $26B-4-118$ may transport an individual who:
1137	(1) is in an emergence	cy medical condition;
1138	(2) is medically or m	nentally unstable, requiring direct medical observation during
1139	transport;	
1140	(3) is physically inca	pacitated because of illness or injury and in need of immediate
1141	transport by emergency med	ical service personnel;
1142	(4) is likely to requir	re medical attention during transport;

(5) is being maintained on any type of emergency medical electronic monitoring;

(6) is receiving or has recently received medications that could cause a sudden change in medical condition that might require emergency medical services;

- (7) requires IV administration or maintenance, oxygen that is not patient-operated, or other emergency medical services during transport;
- (8) needs to be immobilized during transport to a hospital, an emergency patient receiving facility, or mental health facility due to a mental or physical condition, unless the individual is in the custody of a peace officer and the primary purpose of the restraint is to prevent escape;
- (9) needs to be immobilized due to a fracture, possible fracture, or other medical condition; or
- (10) otherwise requires or has the potential to require a level of medical care that the committee establishes as requiring direct medical observation.
- Section 20. Section **26B-4-120**, which is renumbered from Section 26-8a-306 is renumbered and amended to read:

[26-8a-306]. 26B-4-120. Medical control.

- (1) The committee shall establish requirements for the coordination of emergency medical services rendered by emergency medical service providers, including the coordination between prehospital providers, hospitals, emergency patient receiving facilities, and other appropriate destinations.
- (2) The committee shall establish requirements for the medical supervision of emergency medical service providers to assure adequate physician oversight of emergency medical services and quality improvement.
- Section 21. Section **26B-4-121**, which is renumbered from Section 26-8a-307 is renumbered and amended to read:

[26-8a-307]. 26B-4-121. Patient destination.

- (1) If an individual being transported by a ground or air ambulance is in a critical or unstable medical condition, the ground or air ambulance shall transport the patient to the trauma center or closest emergency patient receiving facility appropriate to adequately treat the patient.
- 1173 (2) If the patient's condition is not critical or unstable as determined by medical control, the ground or air ambulance may transport the patient to the:

1175	(a) hospital, emergency patient receiving facility, licensed mental health facility, or
1176	other medical provider chosen by the patient and approved by medical control as appropriate
1177	for the patient's condition and needs; or
1178	(b) nearest hospital, emergency patient receiving facility, licensed mental health
1179	facility, or other medical provider approved by medical control as appropriate for the patient's
1180	condition and needs if the patient expresses no preference.
1181	Section 22. Section 26B-4-122, which is renumbered from Section 26-8a-308 is
1182	renumbered and amended to read:
1183	[26-8a-308]. <u>26B-4-122.</u> Exemptions.
1184	(1) The following persons may provide emergency medical services to a patient
1185	without being licensed under this [chapter] part:
1186	(a) out-of-state emergency medical service personnel and providers in time of disaster;
1187	(b) an individual who gratuitously acts as a Good Samaritan;
1188	(c) a family member;
1189	(d) a private business if emergency medical services are provided only to employees at
1190	the place of business and during transport;
1191	(e) an agency of the United States government if compliance with this [chapter] part
1192	would be inconsistent with federal law; and
1193	(f) police, fire, and other public service personnel if:
1194	(i) emergency medical services are rendered in the normal course of the person's duties;
1195	and
1196	(ii) medical control, after being apprised of the circumstances, directs immediate
1197	transport.
1198	(2) An ambulance or emergency response vehicle may operate without a permit issued
1199	under Section $\left[\frac{26-8a-304}{26B-4-118}\right]$ in time of disaster.
1200	(3) Nothing in this [chapter] part or Title 58, Occupations and Professions, may be
1201	construed as requiring a license for an individual to administer cardiopulmonary resuscitation
1202	or to use a fully automated external defibrillator under Section [26-8b-201] <u>26B-4-302</u> .
1203	(4) Nothing in this [chapter] part may be construed as requiring a license, permit, or
1204	designation for an acute care hospital, medical clinic, physician's office, or other fixed medical

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facility that:

1206	(a) is staffed by a physician, physician's assistant, nurse practitioner, or registered	
1207	nurse; and	
1208	(b) treats an individual who has presented himself or was transported to the hospital,	
1209	clinic, office, or facility.	
1210	Section 23. Section 26B-4-123 , which is renumbered from Section 26-8a-309 is	
1211	renumbered and amended to read:	
1212	[26-8a-309]. <u>26B-4-123.</u> Out-of-state vehicles.	
1213	(1) An ambulance or emergency response vehicle from another state may not pick up a	
1214	patient in Utah to transport that patient to another location in Utah or to another state without a	
1215	permit issued under Section [26-8a-304] 26B-2-318 and, in the case of an ambulance, a license	
1216	issued under [Part 4, Ambulance and Paramedic Providers] this part for ambulance and	
1217	paramedic providers.	
1218	(2) Notwithstanding Subsection (1), an ambulance or emergency response vehicle from	
1219	another state may, without a permit or license:	
1220	(a) transport a patient into Utah; and	
1221	(b) provide assistance in time of disaster.	
1222	(3) The department may enter into agreements with ambulance and paramedic	
1223	providers and their respective licensing agencies from other states to assure the expeditious	
1224	delivery of emergency medical services beyond what may be reasonably provided by licensed	
1225	ambulance and paramedic providers, including the transportation of patients between states.	
1226	Section 24. Section 26B-4-124, which is renumbered from Section 26-8a-310 is	
1227	renumbered and amended to read:	
1228	[26-8a-310]. <u>26B-4-124.</u> Background clearance for emergency medical	
1229	service personnel.	
1230	(1) Subject to Section [26-8a-310.5] <u>26B-4-125</u> , the department shall determine	
1231	whether to grant background clearance for an individual seeking licensure or certification under	
1232	Section [26-8a-302] <u>26B-4-116</u> from whom the department receives:	
1233	(a) the individual's social security number, fingerprints, and other personal	
1234	identification information specified by the department under Subsection (4); and	
1235	(b) any fees established by the department under Subsection (10).	
1236	(2) The department shall determine whether to deny or revoke background clearance	

for individuals for whom the department has previously granted background clearance.

- (3) The department shall determine whether to grant, deny, or revoke background clearance for an individual based on an initial and ongoing evaluation of information the department obtains under Subsections (5) and (11), which, at a minimum, shall include an initial criminal background check of state, regional, and national databases using the individual's fingerprints.
- (4) The department shall make rules, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, that specify:
- (a) the criteria the department will use under Subsection (3) to determine whether to grant, deny, or revoke background clearance; and
- (b) the other personal identification information an individual seeking licensure or certification under Section [26-8a-302] 26B-4-116 must submit under Subsection (1).
- (5) To determine whether to grant, deny, or revoke background clearance, the department may access and evaluate any of the following:
- (a) Department of Public Safety arrest, conviction, and disposition records described in Title 53, Chapter 10, Criminal Investigations and Technical Services Act, including information in state, regional, and national records files;
- (b) adjudications by a juvenile court of committing an act that if committed by an adult would be a felony or misdemeanor, if:
 - (i) the applicant is under 28 years old; or
- 1257 (ii) the applicant:

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- (A) is over 28 years old; and
 - (B) has been convicted of, has pleaded no contest to, or is currently subject to a plea in abeyance or diversion agreement for a felony or misdemeanor;
 - (c) juvenile court arrest, adjudication, and disposition records, other than those under Subsection (5)(b), as allowed under Section 78A-6-209;
 - (d) child abuse or neglect findings described in Section 80-3-404;
 - (e) the department's Licensing Information System described in Section 80-2-1002;
- 1265 (f) the department's database of reports of vulnerable adult abuse, neglect, or exploitation, described in Section [62A-3-311.1] 26B-6-210;
- (g) Division of Professional Licensing records of licensing and certification under Title

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- (h) records in other federal criminal background databases available to the state; and
- 1270 (i) any other records of arrests, warrants for arrest, convictions, pleas in abeyance, 1271 pending diversion agreements, or dispositions.
 - (6) Except for the Department of Public Safety, an agency may not charge the department for information accessed under Subsection (5).
 - (7) When evaluating information under Subsection (3), the department shall classify a crime committed in another state according to the closest matching crime under Utah law, regardless of how the crime is classified in the state where the crime was committed.
 - (8) The department shall adopt measures to protect the security of information the department accesses under Subsection (5), which shall include limiting access by department employees to those responsible for acquiring, evaluating, or otherwise processing the information.
 - (9) The department may disclose personal identification information the department receives under Subsection (1) to the department to verify that the subject of the information is not identified as a perpetrator or offender in the information sources described in Subsections (5)(d) through (f).
 - (10) The department may charge fees, in accordance with Section 63J-1-504, to pay for:
 - (a) the cost of obtaining, storing, and evaluating information needed under Subsection (3), both initially and on an ongoing basis, to determine whether to grant, deny, or revoke background clearance; and
 - (b) other department costs related to granting, denying, or revoking background clearance.
 - (11) The Criminal Investigations and Technical Services Division within the Department of Public Safety shall:
 - (a) retain, separate from other division records, personal information under Subsection(1), including any fingerprints sent to it by the department; and
 - (b) notify the department upon receiving notice that an individual for whom personal information has been retained is the subject of:
- (i) a warrant for arrest;

1299	(ii) an arrest;
1300	(iii) a conviction, including a plea in abeyance; or
1301	(iv) a pending diversion agreement.
1302	(12) The department shall use the Direct Access Clearance System database created
1303	under Section [26-21-209] <u>26B-2-241</u> to manage information about the background clearance
1304	status of each individual for whom the department is required to make a determination under
1305	Subsection (1).
1306	(13) Clearance granted for an individual licensed or certified under Section
1307	[26-8a-302] 26B-4-123 is valid until two years after the day on which the individual is no
1308	longer licensed or certified in Utah as emergency medical service personnel.
1309	Section 25. Section 26B-4-125, which is renumbered from Section 26-8a-310.5 is
1310	renumbered and amended to read:
1311	[26-8a-310.5]. <u>26B-4-125.</u> Background check requirements for emergency
1312	medical dispatchers.
1313	An emergency medical dispatcher seeking certification under Section [26-8a-302] 26B-
1314	4-116 shall undergo the background clearance process described in Section [26-8a-310] 26B-4-
1315	124 unless the emergency medical dispatcher can demonstrate that the emergency medical
1316	dispatcher has received and currently holds an approved Department of Public Safety
1317	background clearance.
1318	Section 26. Section 26B-4-126, which is renumbered from Section 26-8a-501 is
1319	renumbered and amended to read:
1320	[26-8a-501]. <u>26B-4-126.</u> Discrimination prohibited.
1321	(1) No person licensed or designated pursuant to this [chapter] part may discriminate in
1322	the provision of emergency medical services on the basis of race, sex, color, creed, or prior
1323	inquiry as to ability to pay.
1324	(2) This [chapter] part does not authorize or require medical assistance or
1325	transportation over the objection of an individual on religious grounds.
1326	Section 27. Section 26B-4-127, which is renumbered from Section 26-8a-502 is
1327	renumbered and amended to read:
1328	$[\frac{26-8a-502}{2}].$ 26B-4-127. Illegal activity.
1329	(1) Except as provided in Section [26-8a-308 or 26-8b-201] <u>26B-4-104 or 26B-4-122</u> ,

1330 a person may not:

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- (a) practice or engage in the practice, represent that the person is practicing or engaging in the practice, or attempt to practice or engage in the practice of any activity that requires a license, certification, or designation under this [chapter] part unless that person is licensed, certified, or designated under this [chapter] part; or
- (b) offer an emergency medical service that requires a license, certification, or designation under this [chapter] part unless the person is licensed, certified, or designated under this [chapter] part.
- (2) A person may not advertise or represent that the person holds a license, certification, or designation required under this [chapter] part, unless that person holds the license, certification, or designation under this [chapter] part.
- (3) A person may not employ or permit any employee to perform any service for which a license or certification is required by this [chapter] part, unless the person performing the service possesses the required license or certification under this [chapter] part.
- (4) A person may not wear, display, sell, reproduce, or otherwise use any Utah Emergency Medical Services insignia without authorization from the department.
- (5) A person may not reproduce or otherwise use materials developed by the department for licensure or certification testing or examination without authorization from the department.
- (6) A person may not willfully summon an ambulance or emergency response vehicle or report that one is needed when the person knows that the ambulance or emergency response vehicle is not needed.
 - (7) A person who violates this section is subject to Section [26-23-6] <u>26B-1-224</u>.
- Section 28. Section **26B-4-128**, which is renumbered from Section 26-8a-502.1 is renumbered and amended to read:

1355 [26-8a-502.1]. 26B-4-128. Prohibition on the use of "911".

- 1356 (1) As used in this section:
- 1357 (a) "Emergency services" means services provided by a person in response to an emergency.
 - (b) "Emergency services" includes:
- 1360 (i) fire protection services;

1361	(ii) paramedic services;
1362	(iii) law enforcement services;
1363	(iv) 911 ambulance or paramedic services[, as defined in Section 26-8a-102]; and
1364	(v) any other emergency services.
1365	(2) A person may not use "911" or other similar sequence of numbers in the person's
1366	name with the purpose to deceive the public that the person operates or represents emergency
1367	services, unless the person is authorized to provide emergency services.
1368	(3) A violation of Subsection (2) is:
1369	(a) a class C misdemeanor; and
1370	(b) subject to a fine of up to \$500 per violation.
1371	Section 29. Section 26B-4-129, which is renumbered from Section 26-8a-503 is
1372	renumbered and amended to read:
1373	[26-8a-503]. <u>26B-4-129.</u> Discipline of emergency medical services
1374	personnel.
1375	(1) The department may refuse to issue a license or renewal, or revoke, suspend,
1376	restrict, or place on probation an individual's license if:
1377	(a) the individual does not meet the qualifications for licensure under Section
1378	[26-8a-302] <u>26B-4-116</u> ;
1379	(b) the individual has engaged in conduct, as defined by committee rule, that:
1380	(i) is unprofessional;
1381	(ii) is adverse to the public health, safety, morals, or welfare; or
1382	(iii) would adversely affect public trust in the emergency medical service system;
1383	(c) the individual has violated Section $[\frac{26-8a-502}{26B-4-127}]$ or other provision of this
1384	[chapter] part;
1385	(d) the individual has violated Section 58-1-509;
1386	(e) a court of competent jurisdiction has determined the individual to be mentally
1387	incompetent for any reason; or
1388	(f) the individual is unable to provide emergency medical services with reasonable skill
1389	and safety because of illness, drunkenness, use of drugs, narcotics, chemicals, or any other type
1390	of material, or as a result of any other mental or physical condition, when the individual's
1391	condition demonstrates a clear and unjustifiable threat or potential threat to oneself, coworkers,

or the public health, safety, or welfare that cannot be reasonably mitigated.

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- (2) (a) An action to revoke, suspend, restrict, or place a license on probation shall be done in:
- (i) consultation with the peer review board created in Section [26-8a-105] <u>26B-4-102</u>; and
 - (ii) accordance with Title 63G, Chapter 4, Administrative Procedures Act.
 - (b) Notwithstanding Subsection (2)(a), the department may issue a cease and desist order under Section [26-8a-507] 26B-4-133 to immediately suspend an individual's license pending an administrative proceeding to be held within 30 days if there is evidence to show that the individual poses a clear, immediate, and unjustifiable threat or potential threat to the public health, safety, or welfare.
 - (3) An individual whose license has been suspended, revoked, or restricted may apply for reinstatement of the license at reasonable intervals and upon compliance with any conditions imposed upon the license by statute, committee rule, or the terms of the suspension, revocation, or restriction.
 - (4) In addition to taking disciplinary action under Subsection (1), the department may impose sanctions in accordance with Section [26-23-6] 26B-1-224.
 - Section 30. Section **26B-4-130**, which is renumbered from Section 26-8a-504 is renumbered and amended to read:

1411 [26-8a-504]. 26B-4-130. Discipline of designated and licensed providers.

- (1) The department may refuse to issue a license or designation or a renewal, or revoke, suspend, restrict, or place on probation, an emergency medical service provider's license or designation if the provider has:
 - (a) failed to abide by terms of the license or designation;
- (b) violated statute or rule;
- (c) failed to provide services at the level or in the exclusive geographic service area required by the license or designation;
- 1419 (d) failed to submit a renewal application in a timely fashion as required by department 1420 rule;
- (e) failed to follow operational standards established by the committee; or
- (f) committed an act in the performance of a professional duty that endangered the

public or constituted gross negligence.

- (2) (a) An action to revoke, suspend, restrict, or place a license or designation on probation shall be done in accordance with Title 63G, Chapter 4, Administrative Procedures Act.
- (b) Notwithstanding Subsection (2)(a), the department may issue a cease and desist order under Section [26-8a-507] 26B-4-133 to immediately suspend a license or designation pending an administrative proceeding to be held within 30 days if there is evidence to show that the provider or facility poses a clear, immediate, and unjustifiable threat or potential threat to the public health, safety, or welfare.
- (3) In addition to taking disciplinary action under Subsection (1), the department may impose sanctions in accordance with Section [26-23-6] 26B-1-224.
- Section 31. Section **26B-4-131**, which is renumbered from Section 26-8a-505 is renumbered and amended to read:
 - [26-8a-505]. <u>26B-4-131.</u> Service interruption or cessation -- Receivership -- Default coverage -- Notice.
 - (1) Acting in the public interest, the department may petition the district court where an ambulance or paramedic provider operates or the district court with jurisdiction in Salt Lake County to appoint the department or an independent receiver to continue the operations of a provider upon any one of the following conditions:
 - (a) the provider ceases or intends to cease operations;
 - (b) the provider becomes insolvent;
 - (c) the department has initiated proceedings to revoke the provider's license and has determined that the lives, health, safety, or welfare of the population served within the provider's exclusive geographic service area are endangered because of the provider's action or inaction pending a full hearing on the license revocation; or
 - (d) the department has revoked the provider's license and has been unable to adequately arrange for another provider to take over the provider's exclusive geographic service area.
 - (2) If a licensed or designated provider ceases operations or is otherwise unable to provide services, the department may arrange for another licensed provider to provide services on a temporary basis until a license is issued.
 - (3) A licensed provider shall give the department 30 days notice of its intent to cease

1454	operations.	
1455	Section 32. Section 26B-4-132, which is renumbered from Section 26-8a-506 is	
1456	renumbered and amended to read:	
1457	[26-8a-506]. <u>26B-4-132.</u> Investigations for enforcement of part.	
1458	(1) The department may, for the purpose of ascertaining compliance with the	
1459	provisions of this [chapter] part, enter and inspect on a routine basis the business premises and	
1460	equipment of a person:	
1461	(a) with a designation, permit, or license; or	
1462	(b) who holds himself out to the general public as providing a service for which a	
1463	designation, permit, or license is required under Section [26-8a-301] 26B-4-115.	
1464	(2) Before conducting an inspection under Subsection (1), the department shall, after	
1465	identifying the person in charge:	
1466	(a) give proper identification;	
1467	(b) describe the nature and purpose of the inspection; and	
1468	(c) if necessary, explain the authority of the department to conduct the inspection.	
1469	(3) In conducting an inspection under Subsection (1), the department may, after	
1470	meeting the requirements of Subsection (2):	
1471	(a) inspect records, equipment, and vehicles; and	
1472	(b) interview personnel.	
1473	(4) An inspection conducted under Subsection (1) shall be during regular operational	
1474	hours.	
1475	Section 33. Section 26B-4-133, which is renumbered from Section 26-8a-507 is	
1476	renumbered and amended to read:	
1477	[26-8a-507]. 26B-4-133. Cease and desist orders.	
1478	The department may issue a cease and desist order to any person who:	
1479	(1) may be disciplined under Section [26-8a-503 or 26-8a-504] <u>26B-4-129 or</u>	
1480	<u>26B-4-130</u> ; or	
1481	(2) otherwise violates this [chapter] part or any rules adopted under this [chapter] part.	
1482	Section 34. Section 26B-4-134, which is renumbered from Section 26-8a-601 is	
1483	renumbered and amended to read:	
1484	[26-8a-601]. <u>26B-4-134.</u> Persons and activities exempt from civil liability.	

(1) (a) Except as provided in Subsection (1)(b), a licensed physician, physician's assistant, or licensed registered nurse who, gratuitously and in good faith, gives oral or written instructions to any of the following is not liable for any civil damages as a result of issuing the instructions:

- (i) an individual licensed or certified under Section [26-8a-302] 26B-4-116;
- (ii) an individual who uses a fully automated external defibrillator, as defined in Section [26-8b-102] 26B-4-301; or
 - (iii) an individual who administers CPR, as defined in Section [26-8b-102] 26B-4-301.
- (b) The liability protection described in Subsection (1)(a) does not apply if the instructions given were the result of gross negligence or willful misconduct.
- (2) An individual licensed or certified under Section [26-8a-302] 26B-4-116, during either training or after licensure or certification, a licensed physician, a physician assistant, or a registered nurse who, gratuitously and in good faith, provides emergency medical instructions or renders emergency medical care authorized by this [chapter] part is not liable for any civil damages as a result of any act or omission in providing the emergency medical instructions or medical care, unless the act or omission is the result of gross negligence or willful misconduct.
- (3) An individual licensed or certified under Section [26-8a-302] 26B-4-116 is not subject to civil liability for failure to obtain consent in rendering emergency medical services authorized by this [chapter] part to any individual who is unable to give his consent, regardless of the individual's age, where there is no other person present legally authorized to consent to emergency medical care, provided that the licensed individual acted in good faith.
- (4) A principal, agent, contractor, employee, or representative of an agency, organization, institution, corporation, or entity of state or local government that sponsors, authorizes, supports, finances, or supervises any functions of an individual licensed or certified under Section [26-8a-302] 26B-4-116 is not liable for any civil damages for any act or omission in connection with the sponsorship, authorization, support, finance, or supervision of the licensed or certified individual where the act or omission occurs in connection with the licensed or certified individual's training or occurs outside a hospital where the life of a patient is in immediate danger, unless the act or omission is inconsistent with the training of the licensed or certified individual, and unless the act or omission is the result of gross negligence or willful misconduct.

1516 (5) A physician or physician assistant who gratuitously and in good faith arranges for, 1517 requests, recommends, or initiates the transfer of a patient from a hospital to a critical care unit 1518 in another hospital is not liable for any civil damages as a result of such transfer where: 1519 (a) sound medical judgment indicates that the patient's medical condition is beyond the 1520 care capability of the transferring hospital or the medical community in which that hospital is 1521 located; and 1522 (b) the physician or physician assistant has secured an agreement from the receiving 1523 facility to accept and render necessary treatment to the patient. 1524 (6) An individual who is a registered member of the National Ski Patrol System (NSPS) 1525 or a member of a ski patrol who has completed a course in winter emergency care offered by 1526 the NSPS combined with CPR for medical technicians offered by the American Red Cross or 1527 American Heart Association, or an equivalent course of instruction, and who in good faith 1528 renders emergency care in the course of ski patrol duties is not liable for civil damages as a 1529 result of any act or omission in rendering the emergency care, unless the act or omission is the 1530 result of gross negligence or willful misconduct. 1531 (7) An emergency medical service provider who, in good faith, transports an individual against his will but at the direction of a law enforcement officer pursuant to Section 1532 1533 [62A-15-629] 26B-5-331 is not liable for civil damages for transporting the individual. 1534 Section 35. Section 26B-4-135, which is renumbered from Section 26-8a-602 is 1535 renumbered and amended to read: 1536 [26-8a-602]. 26B-4-135. Notification of air ambulance policies and 1537 charges. 1538 (1) For any patient who is in need of air medical transport provider services, an 1539 emergency medical service provider shall: 1540 (a) provide the patient or the patient's representative with the information described in 1541 Subsection [26-8a-107] 26B-1-405(7)(a) before contacting an air medical transport provider:

- and
- (b) if multiple air medical transport providers are capable of providing the patient with services, provide the patient or the patient's representative an opportunity to choose the air medical transport provider.
 - (2) Subsection (1) does not apply if the patient:

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1547	(a) is unconscious and the patient's representative is not physically present with the
1548	patient; or
1549	(b) is unable, due to a medical condition, to make an informed decision about the
1550	choice of an air medical transport provider, and the patient's representative is not physically
1551	present with the patient.
1552	Section 36. Section 26B-4-136, which is renumbered from Section 26-8a-603 is
1553	renumbered and amended to read:
1554	[26-8a-603]. <u>26B-4-136.</u> Volunteer Emergency Medical Service Personnel
1555	Health Insurance Program Creation Administration Eligibility Benefits
1556	Rulemaking Advisory board.
1557	(1) As used in this section:
1558	(a) "Health benefit plan" means the same as that term is defined in Section 31A-1-301.
1559	(b) "Local government entity" means a political subdivision that:
1560	(i) is licensed as a ground ambulance provider under Part 4, Ambulance and Paramedic
1561	Providers; and
1562	(ii) as of January 1, 2022, does not offer health insurance benefits to volunteer
1563	emergency medical service personnel.
1564	(c) "PEHP" means the Public Employees' Benefit and Insurance Program created in
1565	Section 49-20-103.
1566	(d) "Political subdivision" means a county, a municipality, a limited purpose
1567	government entity described in Title 17B, Limited Purpose Local Government Entities - Local
1568	Districts, or Title 17D, Limited Purpose Local Government Entities - Other Entities, or an
1569	entity created by an interlocal agreement under Title 11, Chapter 13, Interlocal Cooperation
1570	Act.
1571	(e) "Qualifying association" means an association that represents two or more political
1572	subdivisions in the state.
1573	(2) The Volunteer Emergency Medical Service Personnel Health Insurance Program
1574	shall promote recruitment and retention of volunteer emergency medical service personnel by
1575	making health insurance available to volunteer emergency medical service personnel.
1576	(3) The department shall contract with a qualifying association to create, implement,

and administer the Volunteer Emergency Medical Service Personnel Health Insurance Program

1578	described in this section.
1579	(4) Participation in the program is limited to emergency medical service personnel
1580	who:
1581	(a) are licensed under Section [26-8a-302] <u>26B-4-116</u> and are able to perform all
1582	necessary functions associated with the license;
1583	(b) provide emergency medical services under the direction of a local governmental
1584	entity:
1585	(i) by responding to 20% of calls for emergency medical services in a rolling
1586	twelve-month period;
1587	(ii) within a county of the third, fourth, fifth, or sixth class; and
1588	(iii) as a volunteer under the Fair Labor Standards Act, in accordance with 29 C.F.R.
1589	Sec. 553.106;
1590	(c) are not eligible for a health benefit plan through an employer or a spouse's
1591	employer;
1592	(d) are not eligible for medical coverage under a government sponsored healthcare
1593	program; and
1594	(e) reside in the state.
1595	(5) (a) A participant in the program is eligible to participate in PEHP in accordance
1596	with Subsection (5)(b) and Subsection 49-20-201(3).
1597	(b) Benefits available to program participants under PEHP are limited to health
1598	insurance that:
1599	(i) covers the program participant and the program participant's eligible dependents on
1600	a July 1 plan year;
1601	(ii) accepts enrollment during an open enrollment period or for a special enrollment
1602	event, including the initial eligibility of a program participant;
1603	(iii) if the program participant is no longer eligible for benefits, terminates on the last
1604	day of the last month for which the individual is a participant in the Volunteer Emergency
1605	Medical Service Personnel Health Insurance Program; and
1606	(iv) is not subject to continuation rights under state or federal law.
1607	(6) (a) The department may make rules in accordance with Title 63G, Chapter 3, Utah

Administrative Rulemaking Act, to define additional criteria regarding benefit design and

1609	eligibility for the program.
1610	(b) The department shall convene an advisory board:
1611	(i) to advise the department on making rules under Subsection (6)(a); and
1612	(ii) that includes representation from at least the following entities:
1613	(A) the qualifying association that receives the contract under Subsection (3); and
1614	(B) PEHP.
1615	(7) For purposes of this section, the qualifying association that receives the contract
1616	under Subsection (3) shall be considered the public agency for whom the program participant is
1617	volunteering under 29 C.F.R. Sec. 553.101.
1618	Section 37. Section 26B-4-137, which is renumbered from Section 26-8c-102 is
1619	renumbered and amended to read:
1620	[26-8c-102]. <u>26B-4-137.</u> EMS Personnel Licensure Interstate Compact.
1621	EMS PERSONNEL LICENSURE INTERSTATE COMPACT
1622	SECTION 1. PURPOSE
1623	In order to protect the public through verification of competency and ensure
1624	accountability for patient care related activities all states license emergency medical services
1625	(EMS) personnel, such as emergency medical technicians (EMTs), advanced EMTs and
1626	paramedics. This Compact is intended to facilitate the day to day movement of EMS personnel
1627	across state boundaries in the performance of their EMS duties as assigned by an appropriate
1628	authority and authorize state EMS offices to afford immediate legal recognition to EMS
1629	personnel licensed in a member state. This Compact recognizes that states have a vested
1630	interest in protecting the public's health and safety through their licensing and regulation of
1631	EMS personnel and that such state regulation shared among the member states will best protect
1632	public health and safety. This Compact is designed to achieve the following purposes and
1633	objectives:
1634	1. Increase public access to EMS personnel;
1635	2. Enhance the states' ability to protect the public's health and safety, especially patient
1636	safety;
1637	3. Encourage the cooperation of member states in the areas of EMS personnel licensure
1638	and regulation;

4. Support licensing of military members who are separating from an active duty tour

1640 and their spouses; 1641 5. Facilitate the exchange of information between member states regarding EMS 1642 personnel licensure, adverse action and significant investigatory information; 6. Promote compliance with the laws governing EMS personnel practice in each 1643 1644 member state; and 1645 7. Invest all member states with the authority to hold EMS personnel accountable 1646 through the mutual recognition of member state licenses. 1647 **SECTION 2. DEFINITIONS** 1648 In this compact: 1649 A. "Advanced Emergency Medical Technician (AEMT)" means: an individual licensed 1650 with cognitive knowledge and a scope of practice that corresponds to that level in the National 1651 EMS Education Standards and National EMS Scope of Practice Model. 1652 B. "Adverse Action" means: any administrative, civil, equitable or criminal action 1653 permitted by a state's laws which may be imposed against licensed EMS personnel by a state 1654 EMS authority or state court, including, but not limited to, actions against an individual's 1655 license such as revocation, suspension, probation, consent agreement, monitoring or other 1656 limitation or encumbrance on the individual's practice, letters of reprimand or admonition, 1657 fines, criminal convictions and state court judgments enforcing adverse actions by the state 1658 EMS authority. 1659 C. "Alternative program" means: a voluntary, non-disciplinary substance abuse recovery program approved by a state EMS authority. 1660 1661 D. "Certification" means: the successful verification of entry-level cognitive and psychomotor competency using a reliable, validated, and legally defensible examination. 1662 1663 E. "Commission" means: the national administrative body of which all states that have 1664 enacted the compact are members. 1665 F. "Emergency Medical Technician (EMT)" means: an individual licensed with cognitive knowledge and a scope of practice that corresponds to that level in the National EMS 1666 1667 Education Standards and National EMS Scope of Practice Model.

H. "License" means: the authorization by a state for an individual to practice as an

G. "Home State" means: a member state where an individual is licensed to practice

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emergency medical services.

1671 EMT, AEMT, paramedic, or a level in between EMT and paramedic.

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- 1672 I. "Medical Director" means: a physician licensed in a member state who is 1673 accountable for the care delivered by EMS personnel.
 - J. "Member State" means: a state that has enacted this compact.
- 1675 K. "Privilege to Practice" means: an individual's authority to deliver emergency 1676 medical services in remote states as authorized under this compact.
- L. "Paramedic" means: an individual licensed with cognitive knowledge and a scope of practice that corresponds to that level in the National EMS Education Standards and National 1679 EMS Scope of Practice Model.
 - M. "Remote State" means: a member state in which an individual is not licensed.
 - N. "Restricted" means: the outcome of an adverse action that limits a license or the privilege to practice.
 - O. "Rule" means: a written statement by the interstate Commission promulgated pursuant to Section 12 of this compact that is of general applicability; implements, interprets, or prescribes a policy or provision of the compact; or is an organizational, procedural, or practice requirement of the Commission and has the force and effect of statutory law in a member state and includes the amendment, repeal, or suspension of an existing rule.
 - P. "Scope of Practice" means: defined parameters of various duties or services that may be provided by an individual with specific credentials. Whether regulated by rule, statute, or court decision, it tends to represent the limits of services an individual may perform.
 - Q. "Significant Investigatory Information" means:
 - 1. investigative information that a state EMS authority, after a preliminary inquiry that includes notification and an opportunity to respond if required by state law, has reason to believe, if proved true, would result in the imposition of an adverse action on a license or privilege to practice; or
 - 2. investigative information that indicates that the individual represents an immediate threat to public health and safety regardless of whether the individual has been notified and had an opportunity to respond.
- 1699 R. "State" means: means any state, commonwealth, district, or territory of the United 1700 States.
- 1701 S. "State EMS Authority" means: the board, office, or other agency with the legislative

mandate to license EMS personnel.

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1703 SECTION 3. HOME STATE LICENSURE

- 1704 A. Any member state in which an individual holds a current license shall be deemed a home state for purposes of this compact.
 - B. Any member state may require an individual to obtain and retain a license to be authorized to practice in the member state under circumstances not authorized by the privilege to practice under the terms of this compact.
 - C. A home state's license authorizes an individual to practice in a remote state under the privilege to practice only if the home state:
- 1711 1. Currently requires the use of the National Registry of Emergency Medical
 1712 Technicians (NREMT) examination as a condition of issuing initial licenses at the EMT and
 1713 paramedic levels;
- 1714 2. Has a mechanism in place for receiving and investigating complaints about individuals;
 - 3. Notifies the Commission, in compliance with the terms herein, of any adverse action or significant investigatory information regarding an individual;
 - 4. No later than five years after activation of the Compact, requires a criminal background check of all applicants for initial licensure, including the use of the results of fingerprint or other biometric data checks compliant with the requirements of the Federal Bureau of Investigation with the exception of federal employees who have suitability determination in accordance with 5 C.F.R. Sec. 731.202 and submit documentation of such as promulgated in the rules of the Commission; and
 - 5. Complies with the rules of the Commission.

SECTION 4. COMPACT PRIVILEGE TO PRACTICE

- A. Member states shall recognize the privilege to practice of an individual licensed in another member state that is in conformance with Section 3.
- B. To exercise the privilege to practice under the terms and provisions of this compact, an individual must:
 - 1. Be at least 18 years of age;
- 2. Possess a current unrestricted license in a member state as an EMT, AEMT, paramedic, or state recognized and licensed level with a scope of practice and authority

between EMT and paramedic; and

- 1734 3. Practice under the supervision of a medical director.
 - C. An individual providing patient care in a remote state under the privilege to practice shall function within the scope of practice authorized by the home state unless and until modified by an appropriate authority in the remote state as may be defined in the rules of the commission.
 - D. Except as provided in Section 4 subsection C, an individual practicing in a remote state will be subject to the remote state's authority and laws. A remote state may, in accordance with due process and that state's laws, restrict, suspend, or revoke an individual's privilege to practice in the remote state and may take any other necessary actions to protect the health and safety of its citizens. If a remote state takes action it shall promptly notify the home state and the Commission.
 - E. If an individual's license in any home state is restricted or suspended, the individual shall not be eligible to practice in a remote state under the privilege to practice until the individual's home state license is restored.
 - F. If an individual's privilege to practice in any remote state is restricted, suspended, or revoked the individual shall not be eligible to practice in any remote state until the individual's privilege to practice is restored.

SECTION 5. CONDITIONS OF PRACTICE IN A REMOTE STATE

An individual may practice in a remote state under a privilege to practice only in the performance of the individual's EMS duties as assigned by an appropriate authority, as defined in the rules of the Commission, and under the following circumstances:

- 1. The individual originates a patient transport in a home state and transports the patient to a remote state;
- 2. The individual originates in the home state and enters a remote state to pick up a patient and provide care and transport of the patient to the home state;
- 3. The individual enters a remote state to provide patient care and/or transport within that remote state;
- 4. The individual enters a remote state to pick up a patient and provide care and transport to a third member state;
 - 5. Other conditions as determined by rules promulgated by the commission.

1764	SECTION 6. RELATIONSHIP TO EMERGENCY
1765	MANAGEMENT ASSISTANCE COMPACT

Upon a member state's governor's declaration of a state of emergency or disaster that activates the Emergency Management Assistance Compact (EMAC), all relevant terms and provisions of EMAC shall apply and to the extent any terms or provisions of this Compact conflicts with EMAC, the terms of EMAC shall prevail with respect to any individual practicing in the remote state in response to such declaration.

SECTION 7. VETERANS, SERVICE MEMBERS SEPARATING FROM ACTIVE DUTY MILITARY, AND THEIR SPOUSES

- A. Member states shall consider a veteran, active military service member, and member of the National Guard and Reserves separating from an active duty tour, and a spouse thereof, who holds a current valid and unrestricted NREMT certification at or above the level of the state license being sought as satisfying the minimum training and examination requirements for such licensure.
- B. Member states shall expedite the processing of licensure applications submitted by veterans, active military service members, and members of the National Guard and Reserves separating from an active duty tour, and their spouses.
- C. All individuals functioning with a privilege to practice under this Section remain subject to the Adverse Actions provisions of Section VIII.

SECTION 8. ADVERSE ACTIONS

- A. A home state shall have exclusive power to impose adverse action against an individual's license issued by the home state.
- B. If an individual's license in any home state is restricted or suspended, the individual shall not be eligible to practice in a remote state under the privilege to practice until the individual's home state license is restored.
- 1. All home state adverse action orders shall include a statement that the individual's compact privileges are inactive. The order may allow the individual to practice in remote states with prior written authorization from both the home state and remote state's EMS authority.
- 2. An individual currently subject to adverse action in the home state shall not practice in any remote state without prior written authorization from both the home state and remote state's EMS authority.

C. A member state shall report adverse actions and any occurrences that the individual's compact privileges are restricted, suspended, or revoked to the Commission in accordance with the rules of the Commission.

- D. A remote state may take adverse action on an individual's privilege to practice within that state.
- E. Any member state may take adverse action against an individual's privilege to practice in that state based on the factual findings of another member state, so long as each state follows its own procedures for imposing such adverse action.
- F. A home state's EMS authority shall investigate and take appropriate action with respect to reported conduct in a remote state as it would if such conduct had occurred within the home state. In such cases, the home state's law shall control in determining the appropriate adverse action.
- G. Nothing in this Compact shall override a member state's decision that participation in an alternative program may be used in lieu of adverse action and that such participation shall remain non-public if required by the member state's laws. Member states must require individuals who enter any alternative programs to agree not to practice in any other member state during the term of the alternative program without prior authorization from such other member state.

SECTION 9. ADDITIONAL POWERS INVESTED IN A MEMBER STATE'S EMS AUTHORITY

A member state's EMS authority, in addition to any other powers granted under state law, is authorized under this compact to:

- 1. Issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses and the production of evidence. Subpoenas issued by a member state's EMS authority for the attendance and testimony of witnesses, and/or the production of evidence from another member state, shall be enforced in the remote state by any court of competent jurisdiction, according to that court's practice and procedure in considering subpoenas issued in its own proceedings. The issuing state EMS authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the state where the witnesses and/or evidence are located; and
 - 2. Issue cease and desist orders to restrict, suspend, or revoke an individual's privilege

to practice in the state.

SECTION 10. ESTABLISHMENT OF THE INTERSTATE COMMISSION FOR EMS PERSONNEL PRACTICE

A. The Compact states hereby create and establish a joint public agency known as the Interstate Commission for EMS Personnel Practice.

- 1. The Commission is a body politic and an instrumentality of the Compact states.
- 2. Venue is proper and judicial proceedings by or against the Commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the Commission is located. The Commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative dispute resolution proceedings.
 - 3. Nothing in this Compact shall be construed to be a waiver of sovereign immunity.
 - B. Membership, Voting, and Meetings
- 1. Each member state shall have and be limited to one (1) delegate. The responsible official of the state EMS authority or his designee shall be the delegate to this Compact for each member state. Any delegate may be removed or suspended from office as provided by the law of the state from which the delegate is appointed. Any vacancy occurring in the Commission shall be filled in accordance with the laws of the member state in which the vacancy exists. In the event that more than one board, office, or other agency with the legislative mandate to license EMS personnel at and above the level of EMT exists, the Governor of the state will determine which entity will be responsible for assigning the delegate.
- 2. Each delegate shall be entitled to one (1) vote with regard to the promulgation of rules and creation of bylaws and shall otherwise have an opportunity to participate in the business and affairs of the Commission. A delegate shall vote in person or by such other means as provided in the bylaws. The bylaws may provide for delegates' participation in meetings by telephone or other means of communication.
- 3. The Commission shall meet at least once during each calendar year. Additional meetings shall be held as set forth in the bylaws.
- 4. All meetings shall be open to the public, and public notice of meetings shall be given in the same manner as required under the rulemaking provisions in Section XII.
- 5. The Commission may convene in a closed, non-public meeting if the Commission must discuss:

- a. Non-compliance of a member state with its obligations under the Compact;
- b. The employment, compensation, discipline or other personnel matters, practices or procedures related to specific employees or other matters related to the Commission's internal personnel practices and procedures;
 - c. Current, threatened, or reasonably anticipated litigation;

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- d. Negotiation of contracts for the purchase or sale of goods, services, or real estate;
- e. Accusing any person of a crime or formally censuring any person;
- f. Disclosure of trade secrets or commercial or financial information that is privileged or confidential;
 - g. Disclosure of information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;
 - h. Disclosure of investigatory records compiled for law enforcement purposes;
 - i. Disclosure of information related to any investigatory reports prepared by or on behalf of or for use of the Commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to the compact; or
 - j. Matters specifically exempted from disclosure by federal or member state statute.
 - 6. If a meeting, or portion of a meeting, is closed pursuant to this provision, the Commission's legal counsel or designee shall certify that the meeting may be closed and shall reference each relevant exempting provision. The Commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, and the reasons therefore, including a description of the views expressed. All documents considered in connection with an action shall be identified in such minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release by a majority vote of the Commission or order of a court of competent jurisdiction.
 - C. The Commission shall, by a majority vote of the delegates, prescribe bylaws and/or rules to govern its conduct as may be necessary or appropriate to carry out the purposes and exercise the powers of the compact, including but not limited to:
 - 1. Establishing the fiscal year of the Commission;
 - 2. Providing reasonable standards and procedures:
 - a. for the establishment and meetings of other committees; and
- b. governing any general or specific delegation of any authority or function of the

1888 Commission;

 3. Providing reasonable procedures for calling and conducting meetings of the Commission, ensuring reasonable advance notice of all meetings, and providing an opportunity for attendance of such meetings by interested parties, with enumerated exceptions designed to protect the public's interest, the privacy of individuals, and proprietary information, including trade secrets. The Commission may meet in closed session only after a majority of the membership votes to close a meeting in whole or in part. As soon as practicable, the Commission must make public a copy of the vote to close the meeting revealing the vote of each member with no proxy votes allowed;

- 4. Establishing the titles, duties and authority, and reasonable procedures for the election of the officers of the Commission;
- 5. Providing reasonable standards and procedures for the establishment of the personnel policies and programs of the Commission. Notwithstanding any civil service or other similar laws of any member state, the bylaws shall exclusively govern the personnel policies and programs of the Commission;
- 6. Promulgating a code of ethics to address permissible and prohibited activities of Commission members and employees;
- 7. Providing a mechanism for winding up the operations of the Commission and the equitable disposition of any surplus funds that may exist after the termination of the Compact after the payment and/or reserving of all of its debts and obligations;
- 8. The Commission shall publish its bylaws and file a copy thereof, and a copy of any amendment thereto, with the appropriate agency or officer in each of the member states, if any.
 - 9. The Commission shall maintain its financial records in accordance with the bylaws.
- 10. The Commission shall meet and take such actions as are consistent with the provisions of this Compact and the bylaws.
 - D. The Commission shall have the following powers:
- 1. The authority to promulgate uniform rules to facilitate and coordinate implementation and administration of this Compact. The rules shall have the force and effect of law and shall be binding in all member states;
- 2. To bring and prosecute legal proceedings or actions in the name of the Commission, provided that the standing of any state EMS authority or other regulatory body responsible for

1919 EMS personnel licensure to sue or be sued under applicable law shall not be affected;

- 3. To purchase and maintain insurance and bonds;
- 4. To borrow, accept, or contract for services of personnel, including, but not limited to, employees of a member state;
 - 5. To hire employees, elect or appoint officers, fix compensation, define duties, grant such individuals appropriate authority to carry out the purposes of the compact, and to establish the Commission's personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters:
 - 6. To accept any and all appropriate donations and grants of money, equipment, supplies, materials and services, and to receive, utilize and dispose of the same; provided that at all times the Commission shall strive to avoid any appearance of impropriety and/or conflict of interest;
 - 7. To lease, purchase, accept appropriate gifts or donations of, or otherwise to own, hold, improve or use, any property, real, personal or mixed; provided that at all times the Commission shall strive to avoid any appearance of impropriety;
 - 8. To sell convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property real, personal, or mixed;
 - 9. To establish a budget and make expenditures;
 - 10. To borrow money;

- 11. To appoint committees, including advisory committees comprised of members, state regulators, state legislators or their representatives, and consumer representatives, and such other interested persons as may be designated in this compact and the bylaws;
- 12. To provide and receive information from, and to cooperate with, law enforcement agencies;
 - 13. To adopt and use an official seal; and
- 14. To perform such other functions as may be necessary or appropriate to achieve the purposes of this Compact consistent with the state regulation of EMS personnel licensure and practice.
 - E. Financing of the Commission
- 1948 1. The Commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.

2. The Commission may accept any and all appropriate revenue sources, donations, and grants of money, equipment, supplies, materials, and services.

- 3. The Commission may levy on and collect an annual assessment from each member state or impose fees on other parties to cover the cost of the operations and activities of the Commission and its staff, which must be in a total amount sufficient to cover its annual budget as approved each year for which revenue is not provided by other sources. The aggregate annual assessment amount shall be allocated based upon a formula to be determined by the Commission, which shall promulgate a rule binding upon all member states.
- 4. The Commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the Commission pledge the credit of any of the member states, except by and with the authority of the member state.
- 5. The Commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the Commission shall be subject to the audit and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the Commission shall be audited yearly by a certified or licensed public accountant, and the report of the audit shall be included in and become part of the annual report of the Commission.
 - F. Qualified Immunity, Defense, and Indemnification
- 1. The members, officers, executive director, employees and representatives of the Commission shall be immune from suit and liability, either personally or in their official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error or omission that occurred, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties or responsibilities; provided that nothing in this paragraph shall be construed to protect any such person from suit and/or liability for any damage, loss, injury, or liability caused by the intentional or willful or wanton misconduct of that person.
- 2. The Commission shall defend any member, officer, executive director, employee or representative of the Commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that the person against whom the claim is made had

a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities; provided that nothing herein shall be construed to prohibit that person from retaining his or her own counsel; and provided further, that the actual or alleged act, error, or omission did not result from that person's intentional or willful or wanton misconduct.

3. The Commission shall indemnify and hold harmless any member, officer, executive director, employee, or representative of the Commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that such person had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities, provided that the actual or alleged act, error, or omission did not result from the intentional or willful or wanton misconduct of that person.

SECTION 11. COORDINATED DATABASE

- A. The Commission shall provide for the development and maintenance of a coordinated database and reporting system containing licensure, adverse action, and significant investigatory information on all licensed individuals in member states.
- B. Notwithstanding any other provision of state law to the contrary, a member state shall submit a uniform data set to the coordinated database on all individuals to whom this compact is applicable as required by the rules of the Commission, including:
 - 1. Identifying information;
- 2. Licensure data;

- 3. Significant investigatory information;
- 4. Adverse actions against an individual's license;
- 5. An indicator that an individual's privilege to practice is restricted, suspended or revoked;
 - 6. Non-confidential information related to alternative program participation;
 - 7. Any denial of application for licensure, and the reason(s) for such denial; and
 - 8. Other information that may facilitate the administration of this Compact, as determined by the rules of the Commission.
 - C. The coordinated database administrator shall promptly notify all member states of any adverse action taken against, or significant investigative information on, any individual in a member state.

D. Member states contributing information to the coordinated database may designate information that may not be shared with the public without the express permission of the contributing state.

E. Any information submitted to the coordinated database that is subsequently required to be expunged by the laws of the member state contributing the information shall be removed

SECTION 12. RULEMAKING

- A. The Commission shall exercise its rulemaking powers pursuant to the criteria set forth in this Section and the rules adopted thereunder. Rules and amendments shall become binding as of the date specified in each rule or amendment.
- B. If a majority of the legislatures of the member states rejects a rule, by enactment of a statute or resolution in the same manner used to adopt the Compact, then such rule shall have no further force and effect in any member state.
- C. Rules or amendments to the rules shall be adopted at a regular or special meeting of the Commission.
- D. Prior to promulgation and adoption of a final rule or rules by the Commission, and at least sixty (60) days in advance of the meeting at which the rule will be considered and voted upon, the Commission shall file a Notice of Proposed Rulemaking:
 - 1. On the website of the Commission; and

from the coordinated database.

- 2. On the website of each member state EMS authority or the publication in which each state would otherwise publish proposed rules.
 - E. The Notice of Proposed Rulemaking shall include:
- 1. The proposed time, date, and location of the meeting in which the rule will be considered and voted upon;
 - 2. The text of the proposed rule or amendment and the reason for the proposed rule;
 - 3. A request for comments on the proposed rule from any interested person; and
- 4. The manner in which interested persons may submit notice to the Commission of their intention to attend the public hearing and any written comments.
- F. Prior to adoption of a proposed rule, the Commission shall allow persons to submit written data, facts, opinions, and arguments, which shall be made available to the public.
 - G. The Commission shall grant an opportunity for a public hearing before it adopts a

rule or amendment if a hearing is requested by:

- 1. At least twenty-five (25) persons;
 - 2. A governmental subdivision or agency; or
- 3. An association having at least twenty-five (25) members.
 - H. If a hearing is held on the proposed rule or amendment, the Commission shall publish the place, time, and date of the scheduled public hearing.
 - 1. All persons wishing to be heard at the hearing shall notify the executive director of the Commission or other designated member in writing of their desire to appear and testify at the hearing not less than five (5) business days before the scheduled date of the hearing.
 - 2. Hearings shall be conducted in a manner providing each person who wishes to comment a fair and reasonable opportunity to comment orally or in writing.
 - 3. No transcript of the hearing is required, unless a written request for a transcript is made, in which case the person requesting the transcript shall bear the cost of producing the transcript. A recording may be made in lieu of a transcript under the same terms and conditions as a transcript. This subsection shall not preclude the Commission from making a transcript or recording of the hearing if it so chooses.
 - 4. Nothing in this section shall be construed as requiring a separate hearing on each rule. Rules may be grouped for the convenience of the Commission at hearings required by this section.
 - I. Following the scheduled hearing date, or by the close of business on the scheduled hearing date if the hearing was not held, the Commission shall consider all written and oral comments received.
 - J. The Commission shall, by majority vote of all members, take final action on the proposed rule and shall determine the effective date of the rule, if any, based on the rulemaking record and the full text of the rule.
 - K. If no written notice of intent to attend the public hearing by interested parties is received, the Commission may proceed with promulgation of the proposed rule without a public hearing.
 - L. Upon determination that an emergency exists, the Commission may consider and adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided that the usual rulemaking procedures provided in the Compact and in this section shall be

retroactively applied to the rule as soon as reasonably possible, in no event later than ninety (90) days after the effective date of the rule. For the purposes of this provision, an emergency rule is one that must be adopted immediately in order to:

- 1. Meet an imminent threat to public health, safety, or welfare;
- 2. Prevent a loss of Commission or member state funds;
- 3. Meet a deadline for the promulgation of an administrative rule that is established by federal law or rule; or
 - 4. Protect public health and safety.
- M. The Commission or an authorized committee of the Commission may direct revisions to a previously adopted rule or amendment for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revisions shall be posted on the website of the Commission. The revision shall be subject to challenge by any person for a period of thirty (30) days after posting. The revision may be challenged only on grounds that the revision results in a material change to a rule. A challenge shall be made in writing, and delivered to the chair of the Commission prior to the end of the notice period. If no challenge is made, the revision will take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the Commission.

SECTION 13. OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT

A. Oversight

- 1. The executive, legislative, and judicial branches of state government in each member state shall enforce this compact and take all actions necessary and appropriate to effectuate the compact's purposes and intent. The provisions of this compact and the rules promulgated hereunder shall have standing as statutory law.
- 2. All courts shall take judicial notice of the compact and the rules in any judicial or administrative proceeding in a member state pertaining to the subject matter of this compact which may affect the powers, responsibilities or actions of the Commission.
- 3. The Commission shall be entitled to receive service of process in any such proceeding, and shall have standing to intervene in such a proceeding for all purposes. Failure to provide service of process to the Commission shall render a judgment or order void as to the Commission, this Compact, or promulgated rules.

B. Default, Technical Assistance, and Termination

- 1. If the Commission determines that a member state has defaulted in the performance of its obligations or responsibilities under this compact or the promulgated rules, the Commission shall:
 - a. Provide written notice to the defaulting state and other member states of the nature of the default, the proposed means of curing the default and/or any other action to be taken by the Commission; and
 - b. Provide remedial training and specific technical assistance regarding the default.
 - 2. If a state in default fails to cure the default, the defaulting state may be terminated from the Compact upon an affirmative vote of a majority of the member states, and all rights, privileges and benefits conferred by this compact may be terminated on the effective date of termination. A cure of the default does not relieve the offending state of obligations or liabilities incurred during the period of default.
 - 3. Termination of membership in the compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate shall be given by the Commission to the governor, the majority and minority leaders of the defaulting state's legislature, and each of the member states.
 - 4. A state that has been terminated is responsible for all assessments, obligations, and liabilities incurred through the effective date of termination, including obligations that extend beyond the effective date of termination.
 - 5. The Commission shall not bear any costs related to a state that is found to be in default or that has been terminated from the compact, unless agreed upon in writing between the Commission and the defaulting state.
 - 6. The defaulting state may appeal the action of the Commission by petitioning the U.S. District Court for the District of Columbia or the federal district where the Commission has its principal offices. The prevailing member shall be awarded all costs of such litigation, including reasonable attorney's fees.
 - C. Dispute Resolution
- 1. Upon request by a member state, the Commission shall attempt to resolve disputes related to the compact that arise among member states and between member and non-member states.

2. The Commission shall promulgate a rule providing for both mediation and binding 2136 2137 dispute resolution for disputes as appropriate. 2138 D. Enforcement 2139 1. The Commission, in the reasonable exercise of its discretion, shall enforce the 2140 provisions and rules of this compact. 2141 2. By majority vote, the Commission may initiate legal action in the United States 2142 District Court for the District of Columbia or the federal district where the Commission has its 2143 principal offices against a member state in default to enforce compliance with the provisions of 2144 the compact and its promulgated rules and bylaws. The relief sought may include both 2145 injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing 2146 member shall be awarded all costs of such litigation, including reasonable attorney's fees. 2147 3. The remedies herein shall not be the exclusive remedies of the Commission. The 2148 Commission may pursue any other remedies available under federal or state law. 2149 SECTION 14. DATE OF IMPLEMENTATION OF THE INTERSTATE 2150 COMMISSION FOR EMS PERSONNEL PRACTICE AND 2151 ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The compact shall come into effect on the date on which the compact statute is 2152 2153 enacted into law in the tenth member state. The provisions, which become effective at that 2154 time, shall be limited to the powers granted to the Commission relating to assembly and the 2155 promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers 2156 necessary to the implementation and administration of the compact. 2157 B. Any state that joins the compact subsequent to the Commission's initial adoption of 2158 the rules shall be subject to the rules as they exist on the date on which the compact becomes law in that state. Any rule that has been previously adopted by the Commission shall have the 2159 2160 full force and effect of law on the day the compact becomes law in that state. 2161 C. Any member state may withdraw from this compact by enacting a statute repealing the same. 2162 2163 1. A member state's withdrawal shall not take effect until six (6) months after

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2. Withdrawal shall not affect the continuing requirement of the withdrawing state's

EMS authority to comply with the investigative and adverse action reporting requirements of

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enactment of the repealing statute.

this act prior to the effective date of withdrawal.

- D. Nothing contained in this compact shall be construed to invalidate or prevent any EMS personnel licensure agreement or other cooperative arrangement between a member state and a non-member state that does not conflict with the provisions of this compact.
- E. This Compact may be amended by the member states. No amendment to this Compact shall become effective and binding upon any member state until it is enacted into the laws of all member states.

SECTION 15. CONSTRUCTION AND SEVERABILITY

This Compact shall be liberally construed so as to effectuate the purposes thereof. If this compact shall be held contrary to the constitution of any state member thereto, the compact shall remain in full force and effect as to the remaining member states. Nothing in this compact supersedes state law or rules related to licensure of EMS agencies.

Section 38. Section **26B-4-150**, which is renumbered from Section 26-8a-401 is renumbered and amended to read:

[26-8a-401]. <u>26B-4-150.</u> State regulation of emergency medical services market -- License term.

- (1) To ensure emergency medical service quality and minimize unnecessary duplication, the department shall regulate the emergency medical services market by creating and operating a statewide system that:
- (a) consists of exclusive geographic service areas as provided in Section [26-8a-402] 26B-4-151; and
 - (b) establishes maximum rates as provided in Section [26-8a-403] <u>26B-4-152</u>.
 - (2) A license issued or renewed under this part is valid for four years.
- Section 39. Section **26B-4-151**, which is renumbered from Section 26-8a-402 is renumbered and amended to read:

[26-8a-402]. **26B-4-151.** Exclusive geographic service areas.

(1) Each ground ambulance provider license issued under this part shall be for an exclusive geographic service area as described in the license. Only the licensed ground ambulance provider may respond to an ambulance request that originates within the provider's exclusive geographic service area, except as provided in Subsection (5) and Section [26-8a-416] 26B-4-170.

(2) Each paramedic provider license issued under this part shall be for an exclusive geographic service area as described in the license. Only the licensed paramedic provider may respond to a paramedic request that originates within the exclusive geographic service area, except as provided in Subsection (6) and Section [26-8a-416] 26B-4-170.

- (3) Nothing in this section may be construed as either requiring or prohibiting that the formation of boundaries in a given location be the same for a licensed paramedic provider and a licensed ambulance provider.
- (4) (a) A licensed ground ambulance or paramedic provider may, as necessary, enter into a mutual aid agreement to allow another licensed provider to give assistance in times of unusual demand, as that term is defined by the committee in rule.
- (b) A mutual aid agreement shall include a formal written plan detailing the type of assistance and the circumstances under which it would be given.
- (c) The parties to a mutual aid agreement shall submit a copy of the agreement to the department.
- (d) Notwithstanding this Subsection (4), a licensed provider may not subcontract with another entity to provide services in the licensed provider's exclusive geographic service area.
- (5) Notwithstanding Subsection (1), a licensed ground ambulance provider may respond to an ambulance request that originates from the exclusive geographic area of another provider:
 - (a) pursuant to a mutual aid agreement;

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- (b) to render assistance on a case-by-case basis to that provider; and
- (c) as necessary to meet needs in time of disaster or other major emergency.
- (6) Notwithstanding Subsection (2), a licensed paramedic provider may respond to a paramedic request that originates from the exclusive geographic area of another provider:
 - (a) pursuant to a mutual aid agreement;
 - (b) to render assistance on a case-by-case basis to that provider; and
- (c) as necessary to meet needs in time of disaster or other major emergency.
- 2225 (7) The department may, upon the renewal of a license, align the boundaries of an exclusive geographic area with the boundaries of a political subdivision:
 - (a) if the alignment is practical and in the public interest;
- (b) if each licensed provider that would be affected by the alignment agrees to the

2229	alignment; and
2230	(c) taking into consideration the requirements of:
2231	(i) Section 11-48-103; and
2232	(ii) Section [26-8a-408] <u>26B-4-162</u> .
2233	Section 40. Section 26B-4-152, which is renumbered from Section 26-8a-403 is
2234	renumbered and amended to read:
2235	[26-8a-403]. 26B-4-152. Establishment of maximum rates.
2236	(1) The department shall, after receiving recommendations under Subsection (2),
2237	establish maximum rates for ground ambulance providers and paramedic providers that are just
2238	and reasonable.
2239	(2) The committee may make recommendations to the department on the maximum
2240	rates that should be set under Subsection (1).
2241	(3) (a) The department shall prohibit ground ambulance providers and paramedic
2242	providers from charging fees for transporting a patient when the provider does not transport the
2243	patient.
2244	(b) The provisions of Subsection (3)(a) do not apply to ambulance providers or
2245	paramedic providers in a geographic service area which contains a town as defined in
2246	Subsection 10-2-301(2)(f).
2247	Section 41. Section 26B-4-153, which is renumbered from Section 26-8a-404 is
2248	renumbered and amended to read:
2249	[26-8a-404]. <u>26B-4-153.</u> Ground ambulance and paramedic licenses
2250	Application and department review.
2251	(1) Except as provided in Section [26-8a-413] 26B-4-167, an applicant for a ground
2252	ambulance or paramedic license shall apply to the department for a license only by:
2253	(a) submitting a completed application;
2254	(b) providing information in the format required by the department; and
2255	(c) paying the required fees, including the cost of the hearing officer.
2256	(2) The department shall make rules establishing minimum qualifications and
2257	requirements for:
2258	(a) personnel;
2259	(b) capital reserves;

2260	(c) equipment;
2261	(d) a business plan;
2262	(e) operational procedures;
2263	(f) medical direction agreements;
2264	(g) management and control; and
2265	(h) other matters that may be relevant to an applicant's ability to provide ground
2266	ambulance or paramedic service.
2267	(3) An application for a license to provide ground ambulance service or paramedic
2268	service shall be for all ground ambulance services or paramedic services arising within the
2269	geographic service area, except that an applicant may apply for a license for less than all
2270	ground ambulance services or all paramedic services arising within an exclusive geographic
2271	area if it can demonstrate how the remainder of that area will be served.
2272	(4) (a) A ground ambulance service licensee may apply to the department for a license
2273	to provide a higher level of service as defined by department rule if the application includes:
2274	(i) a copy of the new treatment protocols for the higher level of service approved by the
2275	off-line medical director;
2276	(ii) an assessment of field performance by the applicant's off-line director; and
2277	(iii) an updated plan of operation demonstrating the ability of the applicant to provide
2278	the higher level of service.
2279	(b) If the department determines that the applicant has demonstrated the ability to
2280	provide the higher level of service in accordance with Subsection (4)(a), the department shall
2281	issue a revised license reflecting the higher level of service and the requirements of Section
2282	[26-8a-408] <u>26B-4-162</u> do not apply.
2283	(c) A revised license issued under Subsection (4)(b):
2284	(i) may only affect the level of service that the licensee may provide; and
2285	(ii) may not affect any other terms, conditions, or limitations of the original license.
2286	(5) Upon receiving a completed application and the required fees, the department shall
2287	review the application and determine whether the application meets the minimum
2288	qualifications and requirements for licensure.
2289	(6) The department may deny an application if it finds that it contains any materially

false or misleading information, is incomplete, or if the application demonstrates that the

2291	applicant fails to meet the minimum qualifications and requirements for licensure under
2292	Subsection (2).
2293	(7) If the department denies an application, it shall notify the applicant in writing
2294	setting forth the grounds for the denial. A denial may be appealed under Title 63G, Chapter 4,
2295	Administrative Procedures Act.
2296	Section 42. Section 26B-4-154, which is renumbered from Section 26-8a-405 is
2297	renumbered and amended to read:
2298	[26-8a-405]. <u>26B-4-154.</u> Ground ambulance and paramedic licenses
2299	Agency notice of approval.
2300	(1) Beginning January 1, 2004, if the department determines that the application meets
2301	the minimum requirements for licensure under Section [26-8a-404] <u>26B-4-153</u> , the department
2302	shall issue a notice of the approved application to the applicant.
2303	(2) A current license holder responding to a request for proposal under Section
2304	[26-8a-405.2] <u>26B-4-156</u> is considered an approved applicant for purposes of Section
2305	[26-8a-405.2] 26B-4-156 if the current license holder, prior to responding to the request for
2306	proposal, submits the following to the department:
2307	(a) the information described in Subsections [26-8a-404] 26B-4-153(4)(a)(i) through
2308	(iii); and
2309	(b) (i) if the license holder is a private entity, a financial statement, a pro forma budget
2310	and necessary letters of credit demonstrating a financial ability to expand service to a new
2311	service area; or
2312	(ii) if the license holder is a governmental entity, a letter from the governmental entity's
2313	governing body demonstrating the governing body's willingness to financially support the
2314	application.
2315	Section 43. Section 26B-4-155 , which is renumbered from Section 26-8a-405.1 is
2316	renumbered and amended to read:
2317	[26-8a-405.1]. <u>26B-4-155.</u> Selection of provider by political subdivision.
2318	(1) (a) Only an applicant approved under Section [26-8a-405] <u>26B-4-154</u> may respond
2319	to a request for a proposal issued in accordance with Section [26-8a-405.2] <u>26B-4-156</u> or
2320	Section [26-8a-405.4] <u>26B-4-158</u> by a political subdivision.

(b) A response to a request for proposal is subject to the maximum rates established by

2322	the department under Section $\left[\frac{26-8a-403}{26B-4-152}\right]$.
2323	(c) A political subdivision may award a contract to an applicant in response to a
2324	request for proposal:
2325	(i) in accordance with Section [26-8a-405.2] <u>26B-4-156</u> ; and
2326	(ii) subject to Subsections (2) and (3).
2327	(2) (a) The department shall issue a license to an applicant selected by a political
2328	subdivision under Subsection (1) unless the department finds that issuing a license to that
2329	applicant would jeopardize the health, safety, and welfare of the citizens of the geographic
2330	service area.
2331	(b) A license issued under this Subsection (2):
2332	(i) is for the exclusive geographic service area approved by the department in
2333	accordance with Subsection [26-8a-405.2] <u>26B-4-156(2);</u>
2334	(ii) is valid for four years;
2335	(iii) is not subject to a request for license from another applicant under the provisions
2336	of Sections [26-8a-406 through 26-8a-409] <u>26B-4-160 through 26B-4-163</u> during the four-year
2337	term, unless the applicant's license is revoked under Section [26-8a-504] <u>26B-4-130</u> ;
2338	(iv) is subject to revocation or revision under Subsection (3)(d); and
2339	(v) is subject to supervision by the department under Sections [26-8a-503 and
2340	26-8a-504] <u>26B-4-129</u> and <u>26B-4-130</u> .
2341	(3) Notwithstanding Subsection (2)(b), a political subdivision may terminate a contract
2342	described in Subsection (1)(c), with or without cause, if:
2343	(a) the contract:
2344	(i) is entered into on or after May 5, 2021; and
2345	(ii) allows an applicant to provide 911 ambulance services;
2346	(b) the political subdivision provides written notice to the applicant described in
2347	Subsection (3)(a)(ii) and the department:
2348	(i) at least 18 months before the day on which the contract is terminated; or
2349	(ii) within a period of time shorter than 18 months before the day on which the contract
2350	is terminated, if otherwise agreed to by the applicant and the department;

(c) the political subdivision selects another applicant to provide 911 ambulance

services for the political subdivision in accordance with Section [26-8a-405.2] 26B-4-156;

2333	(d) the department:
2354	(i) revokes the license of the applicant described in Subsection (3)(a)(ii), or issues a
2355	new or revised license for the applicant described in Subsection (3)(a)(ii):
2356	(A) in order to remove the area that is subject to the contract from the applicant's
2357	exclusive geographic service area; and
2358	(B) to take effect the day on which the contract is terminated; and
2359	(ii) issues a new or revised license for the applicant described in Subsection (3)(c):
2360	(A) in order to allow the applicant to provide 911 ambulance services for the area
2361	described in Subsection (3)(d)(i)(A); and
2362	(B) to take effect the day on which the contract is terminated; and
2363	(e) the termination does not create an orphaned area.
2364	(4) Except as provided in Subsection [26-8a-405.3] <u>26B-4-157</u> (4)(a), the provisions of
2365	Sections [26-8a-406 through 26-8a-409] <u>26B-4-160 through 26B-4-163</u> do not apply to a
2366	license issued under this section.
2367	Section 44. Section 26B-4-156, which is renumbered from Section 26-8a-405.2 is
2368	renumbered and amended to read:
2369	[26-8a-405.2]. <u>26B-4-156.</u> Selection of provider Request for competitive
2370	sealed proposal Public convenience and necessity.
2371	(1) (a) A political subdivision may contract with an applicant approved under Section
2372	[26-8a-404] <u>26B-4-153</u> to provide services for the geographic service area that is approved by
2373	the department in accordance with Subsection (2), if:
2374	(i) the political subdivision complies with the provisions of this section and Section
2375	[26-8a-405.3] <u>26B-4-157</u> if the contract is for 911 ambulance or paramedic services; or
2376	(ii) the political subdivision complies with Sections [26-8a-405.3 and 26-8a-405.4]
2377	26B-4-157 and 26B-4-158, if the contract is for non-911 services.
2378	(b) (i) The provisions of this section and Sections [26-8a-405.1, 26-8a-405.3, and
2379	26-8a-405.4] <u>26B-4-155</u> , <u>26B-4-157</u> , and <u>26B-4-158</u> do not require a political subdivision to
2380	issue a request for proposal for ambulance or paramedic services or non-911 services.
2381	(ii) If a political subdivision does not contract with an applicant in accordance with this
2382	section and Section [26-8a-405.3] <u>26B-4-157</u> , the provisions of Sections [26-8a-406 through
2383	26-8a-409] <u>26B-4-160 through 26B-4-163</u> apply to the issuance of a license for ambulance or

paramedic services in the geographic service area that is within the boundaries of the political subdivision.

- (iii) If a political subdivision does not contract with an applicant in accordance with this section, Section [26-8a-405.3] 26B-4-157 and Section [26-8a-405.4] 26B-4-158, a license for the non-911 services in the geographic service area that is within the boundaries of the political subdivision may be issued:
- (A) under the public convenience and necessity provisions of Sections [26-8a-406 through 26-8a-409] 26B-4-160 through 26B-4-163; or
- 2392 (B) by a request for proposal issued by the department under Section [26-8a-405.5] 2393 26B-4-159.
 - (c) (i) [For purposes of] As used in this Subsection (1)(c):

- (A) "Fire district" means a local district under Title 17B, Limited Purpose Local Government Entities Local Districts, that:
 - (I) is located in a county of the first or second class; and
 - (II) provides fire protection, paramedic, and emergency services.
- (B) "Participating municipality" means a city or town whose area is partly or entirely included within a county service area or fire district.
- (C) "Participating county" means a county whose unincorporated area is partly or entirely included within a fire district.
- (ii) A participating municipality or participating county may as provided in this section and Section [26-8a-405.3] 26B-4-157, contract with a provider for 911 ambulance or paramedic service.
- (iii) If the participating municipality or participating county contracts with a provider for services under this section and Section [26-8a-405.3] 26B-4-157:
- (A) the fire district is not obligated to provide the services that are included in the contract between the participating municipality or the participating county and the provider;
- (B) the fire district may impose taxes and obligations within the fire district in the same manner as if the participating municipality or participating county were receiving all services offered by the fire district; and
- 2413 (C) the participating municipality's and participating county's obligations to the fire 2414 district are not diminished.

2415	(2) (a) The political subdivision shall submit the request for proposal and the exclusive
2416	geographic service area to be included in a request for proposal issued under Subsections
2417	(1)(a)(i) or (ii) to the department for approval prior to issuing the request for proposal. The
2418	department shall approve the request for proposal and the exclusive geographic service area:
2419	(i) unless the geographic service area creates an orphaned area; and
2420	(ii) in accordance with Subsections (2)(b) and (c).
2421	(b) The exclusive geographic service area may:
2422	(i) include the entire geographic service area that is within the political subdivision's
2423	boundaries;
2424	(ii) include islands within or adjacent to other peripheral areas not included in the
2425	political subdivision that governs the geographic service area; or
2426	(iii) exclude portions of the geographic service area within the political subdivision's
2427	boundaries if another political subdivision or licensed provider agrees to include the excluded
2428	area within their license.
2429	(c) The proposed geographic service area for 911 ambulance or paramedic service shall
2430	demonstrate that non-911 ambulance or paramedic service will be provided in the geographic
2431	service area, either by the current provider, the applicant, or some other method acceptable to
2432	the department. The department may consider the effect of the proposed geographic service
2433	area on the costs to the non-911 provider and that provider's ability to provide only non-911
2434	services in the proposed area.
2435	Section 45. Section 26B-4-157, which is renumbered from Section 26-8a-405.3 is
2436	renumbered and amended to read:
2437	[26-8a-405.3]. <u>26B-4-157.</u> Use of competitive sealed proposals Procedure
2438	Appeal rights.
2439	(1) (a) Competitive sealed proposals for paramedic or 911 ambulance services under
2440	Section [26-8a-405.2] <u>26B-4-156</u> , or for non-911 services under Section [26-8a-405.4]
2441	<u>26B-4-158</u> , shall be solicited through a request for proposal and the provisions of this section.
2442	(b) The governing body of the political subdivision shall approve the request for
2443	proposal prior to the notice of the request for proposals under Subsection (1)(c).

(i) by posting the notice for at least 20 days in at least five public places in the county;

(c) Notice of the request for proposals shall be published:

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2446 and

2447 (ii) by posting the notice on the Utah Public Notice Website, created in Section 2448 63A-16-601, for at least 20 days.

- (2) (a) Proposals shall be opened so as to avoid disclosure of contents to competing offerors during the process of negotiations.
- (b) (i) Subsequent to the published notice, and prior to selecting an applicant, the political subdivision shall hold a presubmission conference with interested applicants for the purpose of assuring full understanding of, and responsiveness to, solicitation requirements.
- (ii) A political subdivision shall allow at least 90 days from the presubmission conference for the proposers to submit proposals.
- (c) Subsequent to the presubmission conference, the political subdivision may issue addenda to the request for proposals. An addenda to a request for proposal shall be finalized and posted by the political subdivision at least 45 days before the day on which the proposal must be submitted.
- (d) Offerors to the request for proposals shall be accorded fair and equal treatment with respect to any opportunity for discussion and revisions of proposals, and revisions may be permitted after submission and before a contract is awarded for the purpose of obtaining best and final offers.
- (e) In conducting discussions, there shall be no disclosures of any information derived from proposals submitted by competing offerors.
- (3) (a) (i) A political subdivision may select an applicant approved by the department under Section [26-8a-404] 26B-4-153 to provide 911 ambulance or paramedic services by contract to the most responsible offeror as defined in Section 63G-6a-103.
- (ii) An award under Subsection (3)(a)(i) shall be made to the responsible offeror whose proposal is determined in writing to be the most advantageous to the political subdivision, taking into consideration price and the evaluation factors set forth in the request for proposal.
- (b) The applicants who are approved under Section [26-8a-405] 26B-4-154 and who are selected under this section may be the political subdivision issuing the request for competitive sealed proposals, or any other public entity or entities, any private person or entity, or any combination thereof.
 - (c) A political subdivision may reject all of the competitive proposals.

2477	(4) In seeking competitive sealed proposals and awarding contracts under this section,
2478	a political subdivision:
2479	(a) shall apply the public convenience and necessity factors listed in Subsections
2480	[26-8a-408] <u>26B-4-162</u> (2) through (6);
2481	(b) shall require the applicant responding to the proposal to disclose how the applicant
2482	will meet performance standards in the request for proposal;
2483	(c) may not require or restrict an applicant to a certain method of meeting the
2484	performance standards, including:
2485	(i) requiring ambulance medical personnel to also be a firefighter; or
2486	(ii) mandating that offerors use fire stations or dispatch services of the political
2487	subdivision;
2488	(d) shall require an applicant to submit the proposal:
2489	(i) based on full cost accounting in accordance with generally accepted accounting
2490	principals; and
2491	(ii) if the applicant is a governmental entity, in addition to the requirements of
2492	Subsection (4)(e)(i), in accordance with generally accepted government auditing standards and
2493	in compliance with the State of Utah Legal Compliance Audit Guide; and
2494	(e) shall set forth in the request for proposal:
2495	(i) the method for determining full cost accounting in accordance with generally
2496	accepted accounting principles, and require an applicant to submit the proposal based on such
2497	full cost accounting principles;
2498	(ii) guidelines established to further competition and provider accountability; and
2499	(iii) a list of the factors that will be considered by the political subdivision in the award
2500	of the contract, including by percentage, the relative weight of the factors established under this
2501	Subsection (4)(e), which may include such things as:
2502	(A) response times;
2503	(B) staging locations;
2504	(C) experience;
2505	(D) quality of care; and
2506	(E) cost, consistent with the cost accounting method in Subsection (4)(e)(i).
2507	(5) (a) Notwithstanding any provision of Title 63G, Chapter 6a, Utah Procurement

2508	Code, to the contrary, the provisions of Title 63G, Chapter 6a, Utah Procurement Code, apply
2509	to the procurement process required by this section, except as provided in Subsection (5)(c).
2510	(b) A procurement appeals panel described in Section 63G-6a-1702 shall have
2511	jurisdiction to review and determine an appeal of an offeror under this section.
2512	(c) (i) An offeror may appeal the solicitation or award as provided by the political
2513	subdivision's procedures. After all political subdivision appeal rights are exhausted, the offeror
2514	may appeal under the provisions of Subsections (5)(a) and (b).
2515	(ii) A procurement appeals panel described in Section 63G-6a-1702 shall determine
2516	whether the solicitation or award was made in accordance with the procedures set forth in this
2517	section and Section [26-8a-405.2] <u>26B-4-156</u> .
2518	(d) The determination of an issue of fact by the appeals board shall be final and
2519	conclusive unless arbitrary and capricious or clearly erroneous as provided in Section
2520	63G-6a-1705.
2521	Section 46. Section 26B-4-158, which is renumbered from Section 26-8a-405.4 is
2522	renumbered and amended to read:
2523	[26-8a-405.4]. <u>26B-4-158.</u> Non-911 provider Finding of meritorious
2524	complaint Request for proposals.
2525	(1) (a) This section applies to a non-911 provider license under this [chapter] part.
2526	(b) The department shall, in accordance with Subsections (3) and (4):
2527	(i) receive a complaint about a non-911 provider;
2528	(ii) determine whether the complaint has merit;
2529	(iii) issue a finding of:
2530	(A) a meritorious complaint; or
2531	(B) a non-meritorious complaint; and
2532	(iv) forward a finding of a meritorious complaint to the governing body of the political
2533	subdivision:
2534	(A) in which the non-911 provider is licensed; or
2535	(B) that provides the non-911 services, if different from Subsection (1)(b)(iv)(A).
2536	(2) (a) A political subdivision that receives a finding of a meritorious complaint from
2537	the department:
2538	(i) shall take corrective action that the political subdivision determines is appropriate;

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2539	and
2540	(ii) shall, if the political subdivision determines corrective action will not resolve the
2541	complaint or is not appropriate:
2542	(A) issue a request for proposal for non-911 service in the geographic service area if
2543	the political subdivision will not respond to the request for proposal; or
2544	(B) (I) make a finding that a request for proposal for non-911 services is appropriate
2545	and the political subdivision intends to respond to a request for proposal; and
2546	(II) submit the political subdivision's findings to the department with a request that the
2547	department issue a request for proposal in accordance with Section [26-8a-405.5] <u>26B-4-159</u> .
2548	(b) (i) If Subsection (2)(a)(ii)(A) applies, the political subdivision shall issue the
2549	request for proposal in accordance with Sections [26-8a-405.1 through 26-8a-405.3] 26B-4-155
2550	<u>through 26B-4-157</u> .
2551	(ii) If Subsection (2)(a)(ii)(B) applies, the department shall issue a request for proposal
2552	for non-911 services in accordance with Section [26-8a-405.5] <u>26B-4-159</u> .
2553	(3) The department shall make a determination under Subsection (1)(b) if:
2554	(a) the department receives a written complaint from any of the following in the
2555	geographic service area:
2556	(i) a hospital;
2557	(ii) a health care facility;
2558	(iii) a political subdivision; or
2559	(iv) an individual; and
2560	(b) the department determines, in accordance with Subsection (1)(b), that the complaint
2561	has merit.
2562	(4) (a) If the department receives a complaint under Subsection (1)(b), the department
2563	shall request a written response from the non-911 provider concerning the complaint.
2564	(b) The department shall make a determination under Subsection (1)(b) based on:
2565	(i) the written response from the non-911 provider; and
2566	(ii) other information that the department may have concerning the quality of service of
2567	the non-911 provider.
2568	(c) (i) The department's determination under Subsection (1)(b) is not subject to an

adjudicative proceeding under Title 63G, Chapter 4, Administrative Procedures Act.

2570	(ii) The department shall adopt administrative rules in accordance with Title 63G,
2571	Chapter 3, Utah Administrative Rulemaking Act, to implement the provisions of Subsection
2572	(1)(b).
2573	Section 47. Section 26B-4-159, which is renumbered from Section 26-8a-405.5 is
2574	renumbered and amended to read:
2575	[26-8a-405.5]. <u>26B-4-159.</u> Use of competitive sealed proposals Procedure
2576	Appeal rights.
2577	(1) (a) The department shall issue a request for proposal for non-911 services in a
2578	geographic service area if the department receives a request from a political subdivision under
2579	Subsection [26-8a-405.4] <u>26B-4-158(2)(a)(ii)(B)</u> to issue a request for proposal for non-911
2580	services.
2581	(b) Competitive sealed proposals for non-911 services under Subsection (1)(a) shall be
2582	solicited through a request for proposal and the provisions of this section.
2583	(c) (i) Notice of the request for proposals shall be published:
2584	(A) at least once a week for three consecutive weeks in a newspaper of general
2585	circulation published in the county; or
2586	(B) if there is no such newspaper, then notice shall be posted for at least 20 days in at
2587	least five public places in the county; and
2588	(ii) in accordance with Section 45-1-101 for at least 20 days.
2589	(2) (a) Proposals shall be opened so as to avoid disclosure of contents to competing
2590	offerors during the process of negotiations.
2591	(b) (i) Subsequent to the published notice, and prior to selecting an applicant, the
2592	department shall hold a presubmission conference with interested applicants for the purpose of
2593	assuring full understanding of, and responsiveness to, solicitation requirements.
2594	(ii) The department shall allow at least 90 days from the presubmission conference for
2595	the proposers to submit proposals.
2596	(c) Subsequent to the presubmission conference, the department may issue addenda to
2597	the request for proposals. An addenda to a request for proposal shall be finalized and posted by
2598	the department at least 45 days before the day on which the proposal must be submitted.

respect to any opportunity for discussion and revisions of proposals, and revisions may be

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(d) Offerors to the request for proposals shall be accorded fair and equal treatment with

permitted after submission and before a contract is awarded for the purpose of obtaining best and final offers.

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- (e) In conducting discussions, there shall be no disclosures of any information derived from proposals submitted by competing offerors.
- (3) (a) (i) The department may select an applicant approved by the department under Section [26-8a-404] 26B-4-153 to provide non-911 services by contract to the most responsible offeror as defined in Section 63G-6a-103.
- (ii) An award under Subsection (3)(a)(i) shall be made to the responsible offeror whose proposal is determined in writing to be the most advantageous to the public, taking into consideration price and the evaluation factors set forth in the request for proposal.
- (b) The applicants who are approved under Section [26-8a-405] 26B-4-154 and who are selected under this section may be the political subdivision responding to the request for competitive sealed proposals, or any other public entity or entities, any private person or entity, or any combination thereof.
 - (c) The department may reject all of the competitive proposals.
- (4) In seeking competitive sealed proposals and awarding contracts under this section, the department:
- (a) shall consider the public convenience and necessity factors listed in Subsections [26-8a-408] 26B-4-162(2) through (6);
- (b) shall require the applicant responding to the proposal to disclose how the applicant will meet performance standards in the request for proposal;
- (c) may not require or restrict an applicant to a certain method of meeting the performance standards, including:
 - (i) requiring ambulance medical personnel to also be a firefighter; or
- (ii) mandating that offerors use fire stations or dispatch services of the political subdivision;
 - (d) shall require an applicant to submit the proposal:
- 2628 (i) based on full cost accounting in accordance with generally accepted accounting principals; and
- 2630 (ii) if the applicant is a governmental entity, in addition to the requirements of
 2631 Subsection (4)(e)(i), in accordance with generally accepted government auditing standards and

2032	in compliance with the State of Otan Legal Compliance Audit Guide; and
2633	(e) shall set forth in the request for proposal:
2634	(i) the method for determining full cost accounting in accordance with generally
2635	accepted accounting principles, and require an applicant to submit the proposal based on such
2636	full cost accounting principles;
2637	(ii) guidelines established to further competition and provider accountability; and
2638	(iii) a list of the factors that will be considered by the department in the award of the
2639	contract, including by percentage, the relative weight of the factors established under this
2640	Subsection (4)(e), which may include:
2641	(A) response times;
2642	(B) staging locations;
2643	(C) experience;
2644	(D) quality of care; and
2645	(E) cost, consistent with the cost accounting method in Subsection (4)(e)(i).
2646	(5) A license issued under this section:
2647	(a) is for the exclusive geographic service area approved by the department;
2648	(b) is valid for four years;
2649	(c) is not subject to a request for license from another applicant under the provisions of
2650	Sections [26-8a-406 through 26-8a-409] <u>26B-4-160 through 26B-4-163</u> during the four-year
2651	term, unless the applicant's license is revoked under Section [26-8a-504] <u>26B-4-130</u> ;
2652	(d) is subject to supervision by the department under Sections [26-8a-503 and
2653	26-8a-504] <u>26B-4-129 and 26B-4-130</u> ; and
2654	(e) except as provided in Subsection (4)(a), is not subject to the provisions of Sections
2655	[26-8a-406 through 26-8a-409] <u>26B-4-160 through 26B-4-163</u> .
2656	Section 48. Section 26B-4-160, which is renumbered from Section 26-8a-406 is
2657	renumbered and amended to read:
2658	[26-8a-406]. <u>26B-4-160.</u> Ground ambulance and paramedic licenses
2659	Parties.
2660	(1) When an applicant approved under Section [26-8a-404] <u>26B-4-153</u> seeks licensure
2661	under the provisions of Sections [26-8a-406 through 26-8a-409] <u>26B-4-160 through</u>
2662	26B-4-163 the department shall:

2663	(a) issue a notice of agency action to the applicant to commence an informal
2664	administrative proceeding;
2665	(b) provide notice of the application to all interested parties; and
2666	(c) publish notice of the application, at the applicant's expense:
2667	(i) once a week for four consecutive weeks, in a newspaper of general circulation in the
2668	geographic service area that is the subject of the application; and
2669	(ii) in accordance with Section 45-1-101 for four weeks.
2670	(2) An interested party has 30 days to object to an application.
2671	(3) If an interested party objects, the presiding officer shall join the interested party as
2672	an indispensable party to the proceeding.
2673	(4) The department may join the proceeding as a party to represent the public interest.
2674	(5) Others who may be affected by the grant of a license to the applicant may join the
2675	proceeding, if the presiding officer determines that they meet the requirement of legal standing.
2676	Section 49. Section 26B-4-161, which is renumbered from Section 26-8a-407 is
2677	renumbered and amended to read:
2678	[26-8a-407]. <u>26B-4-161.</u> Ground ambulance and paramedic licenses
2679	Proceedings.
2680	(1) The presiding officer shall:
2681	(a) commence an informal adjudicative proceeding within 120 days of receiving a
2682	completed application;
2683	(b) meet with the applicant and objecting interested parties and provide no less than
2684	120 days for a negotiated resolution, consistent with the criteria in Section [26-8a-408]
2685	<u>26B-4-162</u> ;
2686	(c) set aside a separate time during the proceedings to accept public comment on the
2687	application; and
2688	(d) present a written decision to the executive director if a resolution has been reached
2689	that satisfies the criteria in Section $\left[\frac{26-8a-408}{26B-4-162}\right]$
2690	(2) At any time during an informal adjudicative proceeding under Subsection (1), any
2691	party may request conversion of the informal adjudicative proceeding to a formal adjudicative
2692	proceeding in accordance with Section 63G-4-202.
2693	(3) Upon conversion to a formal adjudicative proceeding, a hearing officer shall be

assigned to the application as provided in Section [26-8a-409] <u>26B-4-163</u>. The hearing office shall:

- (a) set aside a separate time during the proceedings to accept public comment on the application;
 - (b) apply the criteria established in Section [26-8a-408] 26B-4-162; and
- 2699 (c) present a recommended decision to the executive director in writing.
- 2700 (4) The executive director may, as set forth in a final written order, accept, modify, reject, or remand the decision of a presiding or hearing officer after:
 - (a) reviewing the record;

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- (b) giving due deference to the officer's decision; and
- 2704 (c) determining whether the criteria in Section [26-8a-408] <u>26B-4-162</u> have been satisfied.
- Section 50. Section **26B-4-162**, which is renumbered from Section 26-8a-408 is renumbered and amended to read:
- 2708 [26-8a-408]. <u>26B-4-162.</u> Criteria for determining public convenience and necessity.
 - (1) The criteria for determining public convenience and necessity is set forth in Subsections (2) through (6).
 - (2) Access to emergency medical services shall be maintained or improved. The officer shall consider the impact on existing services, including the impact on response times, call volumes, populations and exclusive geographic service areas served, and the ability of surrounding licensed providers to service their exclusive geographic service areas. The issuance or amendment of a license may not create an orphaned area.
 - (3) The quality of service in the area shall be maintained or improved. The officer shall consider the:
 - (a) staffing and equipment standards of the current licensed provider and the applicant;
 - (b) training and licensure levels of the current licensed provider's staff and the applicant's staff;
- 2722 (c) continuing medical education provided by the current licensed provider and the applicant;
- (d) levels of care as defined by department rule;

2725	(e) plan of medical control; and
2726	(f) the negative or beneficial impact on the regional emergency medical service system
2727	to provide service to the public.
2728	(4) The cost to the public shall be justified. The officer shall consider:
2729	(a) the financial solvency of the applicant;
2730	(b) the applicant's ability to provide services within the rates established under Section
2731	[26-8a-403] <u>26B-4-152</u> ;
2732	(c) the applicant's ability to comply with cost reporting requirements;
2733	(d) the cost efficiency of the applicant; and
2734	(e) the cost effect of the application on the public, interested parties, and the emergency
2735	medical services system.
2736	(5) Local desires concerning cost, quality, and access shall be considered. The officer
2737	shall assess and consider:
2738	(a) the existing provider's record of providing services and the applicant's record and
2739	ability to provide similar or improved services;
2740	(b) locally established emergency medical services goals, including those established in
2741	Subsection (7);
2742	(c) comment by local governments on the applicant's business and operations plans;
2743	(d) comment by interested parties that are providers on the impact of the application on
2744	the parties' ability to provide emergency medical services;
2745	(e) comment by interested parties that are local governments on the impact of the
2746	application on the citizens it represents; and
2747	(f) public comment on any aspect of the application or proposed license.
2748	(6) Other related criteria:
2749	(a) the officer considers necessary; or
2750	(b) established by department rule.
2751	(7) Local governments shall establish cost, quality, and access goals for the ground
2752	ambulance and paramedic services that serve their areas.
2753	(8) In a formal adjudicative proceeding, the applicant bears the burden of establishing
2754	that public convenience and necessity require the approval of the application for all or part of

the exclusive geographic service area requested.

2756	Section 51. Section 26B-4-163, which is renumbered from Section 26-8a-409 is
2757	renumbered and amended to read:
2758	[26-8a-409]. <u>26B-4-163.</u> Ground ambulance and paramedic licenses
2759	Hearing and presiding officers.
2760	(1) The department shall set training standards for hearing officers and presiding
2761	officers.
2762	(2) At a minimum, a presiding officer shall:
2763	(a) be familiar with the theory and application of public convenience and necessity; and
2764	(b) have a working knowledge of the emergency medical service system in the state.
2765	(3) In addition to the requirements in Subsection (2), a hearing officer shall also be
2766	licensed to practice law in the state.
2767	(4) The department shall provide training for hearing officer and presiding officer
2768	candidates in the theory and application of public convenience and necessity and on the
2769	emergency medical system in the state.
2770	(5) The department shall maintain a roster of no less than five individuals who meet
2771	the minimum qualifications for both presiding and hearing officers and the standards set by the
2772	department.
2773	(6) The parties may mutually select an officer from the roster if the officer is available.
2774	(7) If the parties cannot agree upon an officer under Subsection (4), the department
2775	shall randomly select an officer from the roster or from a smaller group of the roster agreed
2776	upon by the applicant and the objecting interested parties.
2777	Section 52. Section 26B-4-164, which is renumbered from Section 26-8a-410 is
2778	renumbered and amended to read:
2779	[26-8a-410]. 26B-4-164. Local approvals.
2780	(1) Licensed ambulance providers and paramedic providers shall meet all local zoning
2781	and business licensing standards generally applicable to businesses operating within the
2782	jurisdiction.
2783	(2) Publicly subsidized providers shall demonstrate approval of the taxing authority

(2) Publicly subsidized providers shall demonstrate approval of the taxing authority that will provide the subsidy.

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(3) A publicly operated service shall demonstrate that the governing body has approved the provision of services to the entire exclusive geographic service area that is the subject of

2787	the license, including those	e areas that may lie outside the territorial or jurisdictional boundaries
2788	of the governing body.	
2789	Section 53. Section	n 26B-4-165 , which is renumbered from Section 26-8a-411 is
2790	renumbered and amended	to read:
2791	[26-8a-411].	26B-4-165. Limitation on repetitive applications.
2792	A person who has	previously applied for a license under Sections [26-8a-406 through
2793	26-8a-409] <u>26B-4-160 thro</u>	ough 26B-4-163 may not apply for a license for the same service that
2794	covers any exclusive geogr	raphic service area that was the subject of the prior application
2795	unless:	
2796	(1) one year has pa	assed from the date of the issuance of a final decision under Section
2797	$\left[\frac{26-8a-407}{26B-4-161}\right]$; or	:
2798	(2) all interested p	arties and the department agree that a new application is in the public
2799	interest.	
2800	Section 54. Section	n 26B-4-166 , which is renumbered from Section 26-8a-412 is
2801	renumbered and amended	to read:
2802	[26-8a-412].	<u>26B-4-166.</u> License for air ambulance providers.
2803	(1) An applicant for	or an air ambulance provider shall apply to the department for a
2804	license only by:	
2805	(a) submitting a co	omplete application;
2806	(b) providing infor	rmation in the format required by the department; and
2807	(c) paying the requ	nired fees.
2808	(2) The departmen	at may make rules establishing minimum qualifications and
2809	requirements for:	
2810	(a) personnel;	
2811	(b) capital reserve	s;
2812	(c) equipment;	
2813	(d) business plan;	
2814	(e) operational pro	
2815	•	al and medical direction agreements;
2816		nd control qualifications and requirements; and
2817	(h) other matters t	hat may be relevant to an applicant's ability to provide air ambulance

2818 services. 2819 (3) Upon receiving a completed application and the required fees, the department shall 2820 review the application and determine whether the application meets the minimum requirements 2821 for licensure. 2822 (4) The department may deny an application for an air ambulance if: 2823 (a) the department finds that the application contains any materially false or misleading 2824 information or is incomplete; 2825 (b) the application demonstrates that the applicant fails to meet the minimum 2826 requirements for licensure; or 2827 (c) the department finds after inspection that the applicant does not meet the minimum 2828 requirements for licensure. 2829 (5) If the department denies an application under this section, it shall notify the 2830 applicant in writing setting forth the grounds for the denial. 2831 Section 55. Section 26B-4-167, which is renumbered from Section 26-8a-413 is renumbered and amended to read: 2832 26B-4-167. License renewals. 2833 [26-8a-413]. 2834 (1) A licensed provider desiring to renew its license shall meet the renewal 2835 requirements established by department rule. 2836 (2) The department shall issue a renewal license for a ground ambulance provider or a 2837 paramedic provider upon the licensee's application for a renewal and without a public hearing 2838 if: 2839 (a) the applicant was licensed under the provisions of Sections [26-8a-406 through 26-8a-409] 26B-4-160 through 26B-4-163; and 2840 2841 (b) there has been: 2842 (i) no change in controlling interest in the ownership of the licensee as defined in 2843 Section [26-8a-415] 26B-4-169; 2844 (ii) no serious, substantiated public complaints filed with the department against the 2845 licensee during the term of the previous license: 2846 (iii) no material or substantial change in the basis upon which the license was

(iv) no reasoned objection from the committee or the department; and

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originally granted;

(v) no change to the license type.

- 2850 (3) (a) (i) The provisions of this Subsection (3) apply to a provider licensed under the provisions of Sections [26-8a-405.1 and 26-8a-405.2] 26B-4-155 and 26B-4-156.
 - (ii) A provider may renew its license if the provisions of Subsections (1) and (2) and this Subsection (3) are met.
 - (b) (i) The department shall issue a renewal license to a provider upon the provider's application for renewal for one additional four-year term if the political subdivision certifies to the department that the provider has met all of the specifications of the original bid.
 - (ii) If the political subdivision does not certify to the department that the provider has met all of the specifications of the original bid, the department may not issue a renewal license and the political subdivision shall enter into a public bid process under Sections [26-8a-405.1] and 26-8a-405.2] 26B-4-155 and 26B-4-156.
 - (c) (i) The department shall issue an additional renewal license to a provider who has already been issued a one-time renewal license under the provisions of Subsection (3)(b)(i) if the department and the political subdivision do not receive, prior to the expiration of the provider's license, written notice from an approved applicant informing the political subdivision of the approved applicant's desire to submit a bid for ambulance or paramedic service.
 - (ii) If the department and the political subdivision receive the notice in accordance with Subsection (3)(c)(i), the department may not issue a renewal license and the political subdivision shall enter into a public bid process under Sections [26-8a-405.1 and 26-8a-405.2] 26B-4-155 and 26B-4-156.
 - (4) The department shall issue a renewal license for an air ambulance provider upon the licensee's application for renewal and completion of the renewal requirements established by department rule.
 - Section 56. Section **26B-4-168**, which is renumbered from Section 26-8a-414 is renumbered and amended to read:

[26-8a-414]. <u>26B-4-168.</u> Annexations.

- 2877 (1) A municipality shall comply with the provisions of this section if the municipality is licensed under this [chapter] part and desires to provide service to an area that is:
 - (a) included in a petition for annexation under Title 10, Chapter 2, Part 4, Annexation;

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(b) currently serviced by another provider licensed under this [chapter] part.

- (2) (a) (i) At least 45 days prior to approving a petition for annexation, the municipality shall certify to the department that by the time of the approval of the annexation the municipality can meet or exceed the current level of service provided by the existing licensee for the annexed area by meeting the requirements of Subsections (2)(b)(ii)(A) through (D); and
- (ii) no later than three business days after the municipality files a petition for annexation in accordance with Section 10-2-403, provide written notice of the petition for annexation to:
- (A) the existing licensee providing service to the area included in the petition of annexation; and
 - (B) the department.
- (b) (i) After receiving a certification under Subsection (2)(a), but prior to the municipality approving a petition for annexation, the department may audit the municipality only to verify the requirements of Subsections (2)(b)(ii)(A) through (D).
- (ii) If the department elects to conduct an audit, the department shall make a finding that the municipality can meet or exceed the current level of service provided by the existing licensee for the annexed area if the department finds that the municipality has or will have by the time of the approval of the annexation:
 - (A) adequate trained personnel to deliver basic and advanced life support services;
 - (B) adequate apparatus and equipment to deliver emergency medical services;
 - (C) adequate funding for personnel and equipment; and
 - (D) appropriate medical controls, such as a medical director and base hospital.
- (iii) The department shall submit the results of the audit in writing to the municipal legislative body.
- (3) (a) If the department audit finds that the municipality meets the requirements of Subsection (2)(b)(ii), the department shall issue an amended license to the municipality and all other affected licensees to reflect the municipality's new boundaries after the department receives notice of the approval of the petition for annexation from the municipality in accordance with Section 10-2-425.
 - (b) (i) Notwithstanding the provisions of Subsection 63G-4-102(2)(k), if the

department audit finds that the municipality fails to meet the requirements of Subsection (2)(b)(ii), the municipality may request an adjudicative proceeding under the provisions of Title 63G, Chapter 4, Administrative Procedures Act. The municipality may approve the petition for annexation while an adjudicative proceeding requested under this Subsection (3)(b)(i) is pending.

- (ii) The department shall conduct an adjudicative proceeding when requested under Subsection (3)(b)(i).
- (iii) Notwithstanding the provisions of Sections [26-8a-404 through 26-8a-409] 26B-4-153 through 26B-4-163, in any adjudicative proceeding held under the provisions of Subsection (3)(b)(i), the department bears the burden of establishing that the municipality cannot, by the time of the approval of the annexation, meet the requirements of Subsection (2)(b)(ii).
- (c) If, at the time of the approval of the annexation, an adjudicative proceeding is pending under the provisions of Subsection (3)(b)(i), the department shall issue amended licenses if the municipality prevails in the adjudicative proceeding.
- Section 57. Section **26B-4-169**, which is renumbered from Section 26-8a-415 is renumbered and amended to read:

[26-8a-415]. 26B-4-169. Changes in ownership.

- (1) A licensed provider whose ownership or controlling ownership interest has changed shall submit information to the department, as required by department rule:
- (a) to establish whether the new owner or new controlling party meets minimum requirements for licensure; and
- (b) except as provided in Subsection (2), to commence an administrative proceeding to determine whether the new owner meets the requirement of public convenience and necessity under Section [26-8a-408] 26B-4-162.
 - (2) An administrative proceeding is not required under Subsection (1)(b) if:
- (a) the change in ownership interest is among existing owners of a closely held corporation and the change does not result in a change in the management of the licensee or in the name of the licensee;
- 2940 (b) the change in ownership in a closely held corporation results in the introduction of new owners, provided that:

(i) the new owners are limited to individuals who would be entitled to the equity in the closely held corporation by the laws of intestate succession had the transferor died intestate at the time of the transfer;

- (ii) the majority owners on January 1, 1999, have been disclosed to the department by October 1, 1999, and the majority owners on January 1, 1999, retain a majority interest in the closely held corporation; and
 - (iii) the name of the licensed provider remains the same;
- (c) the change in ownership is the result of one or more owners transferring their interests to a trust, limited liability company, partnership, or closely held corporation so long as the transferors retain control over the receiving entity;
- (d) the change in ownership is the result of a distribution of an estate or a trust upon the death of the testator or the trustor and the recipients are limited to individuals who would be entitled to the interest by the laws of intestate succession had the transferor died intestate at the time of the transfer; or
- (e) other similar changes that the department establishes, by rule, as having no significant impact on the cost, quality, or access to emergency medical services.
- Section 58. Section **26B-4-170**, which is renumbered from Section 26-8a-416 is renumbered and amended to read:

[26-8a-416]. <u>26B-4-170.</u> Overlapping licenses.

(1) As used in this section:

- (a) "Overlap" means two ground ambulance interfacility transport providers that are licensed at the same level of service in all or part of a single geographic service area.
- (b) "Overlay" means two ground ambulance interfacility transport providers that are licensed at a different level of service in all or part of a single geographic service area.
- (2) Notwithstanding the exclusive geographic service requirement of Section [26-8a-402] 26B-4-151, the department shall recognize overlap and overlay ground ambulance interfacility transport licenses that existed on or before May 4, 2022.
- (3) The department may, without an adjudicative proceeding but with at least 30 days notice to providers in the same geographic service area, amend an existing overlay ground ambulance interfacility transport license solely to convert an overlay into an overlap if the existing ground ambulance interfacility transport licensed provider meets the requirements

29/3	described in Subsection $[\frac{26-8a-404}{26B-4-153}]$ (4).
2974	(4) An amendment of a license under this section may not alter:
2975	(a) other terms of the original license, including the applicable geographic service area
2976	or
2977	(b) the license of other providers that provide interfacility transport services in the
2978	geographic service area.
2979	(5) Notwithstanding Subsection (2), any license for an overlap area terminates upon:
2980	(a) relinquishment by the provider; or
2981	(b) revocation by the department.
2982	Section 59. Section 26B-4-201, which is renumbered from Section 26-61a-102 is
2983	renumbered and amended to read:
2984	Part 2. Cannabinoid Research and Medical Cannabis
2985	$[\frac{26-61a-102}{2}]$. $\underline{26B-4-201}$. Definitions.
2986	As used in this [chapter] part:
2987	(1) "Active tetrahydrocannabinol" means THC, any THC analog, and
2988	tetrahydrocannabinolic acid.
2989	(2) "Cannabis Research Review Board" means the Cannabis Research Review Board
2990	created in Section 26-61-201.
2991	(3) "Cannabis" means marijuana.
2992	(4) "Cannabis cultivation facility" means the same as that term is defined in Section
2993	4-41a-102.
2994	(5) "Cannabis processing facility" means the same as that term is defined in Section
2995	4-41a-102.
2996	(6) "Cannabis product" means a product that:
2997	(a) is intended for human use; and
2998	(b) contains cannabis or any tetrahydrocannabinol or THC analog in a total
2999	concentration of 0.3% or greater on a dry weight basis.
3000	(7) "Cannabis production establishment" means the same as that term is defined in
3001	Section 4-41a-102.
3002	(8) "Cannabis production establishment agent" means the same as that term is defined
3003	in Section 4-41a-102.

(9) "Cannabis production establishment agent registration card" means the same as that term is defined in Section 4-41a-102.

- (10) "Community location" means a public or private elementary or secondary school, a church, a public library, a public playground, or a public park.
- (11) "Conditional medical cannabis card" means an electronic medical cannabis card that the department issues in accordance with Subsection [26-61a-201] 26B-4-213(1)(b) to allow an applicant for a medical cannabis card to access medical cannabis during the department's review of the application.
- (12) "Controlled substance database" means the controlled substance database created in Section 58-37f-201.
 - (13) "Department" means the Department of Health.
 - (14) "Designated caregiver" means:
 - (a) an individual:

- (i) whom an individual with a medical cannabis patient card or a medical cannabis guardian card designates as the patient's caregiver; and
 - (ii) who registers with the department under Section [26-61a-202] 26B-4-214; or
- (b) (i) a facility that an individual designates as a designated caregiver in accordance with Subsection [26-61a-202] 26B-4-214(1)(b); or
- (ii) an assigned employee of the facility described in Subsection [26-61a-202] 26B-4-214(1)(b)(ii).
- (15) "Directions of use" means recommended routes of administration for a medical cannabis treatment and suggested usage guidelines.
- (16) "Dosing guidelines" means a quantity range and frequency of administration for a recommended treatment of medical cannabis.
- (17) "Financial institution" means a bank, trust company, savings institution, or credit union, chartered and supervised under state or federal law.
- (18) "Home delivery medical cannabis pharmacy" means a medical cannabis pharmacy that the department authorizes, as part of the pharmacy's license, to deliver medical cannabis shipments to a medical cannabis cardholder's home address to fulfill electronic orders that the state central patient portal facilitates.
- (19) "Inventory control system" means the system described in Section 4-41a-103.

3035	(20) "Legal dosage limit" means an amount that:
3036	(a) is sufficient to provide 30 days of treatment based on the dosing guidelines that the
3037	relevant recommending medical provider or the state central patient portal or pharmacy
3038	medical provider, in accordance with Subsection [26-61a-502] <u>26B-4-230</u> (4) or (5),
3039	recommends; and
3040	(b) may not exceed:
3041	(i) for unprocessed cannabis in a medicinal dosage form, 113 grams by weight; and
3042	(ii) for a cannabis product in a medicinal dosage form, a quantity that contains, in total,
3043	greater than 20 grams of active tetrahydrocannabinol.
3044	(21) "Legal use termination date" means a date on the label of a container of
3045	unprocessed cannabis flower:
3046	(a) that is 60 days after the date of purchase of the cannabis; and
3047	(b) after which, the cannabis is no longer in a medicinal dosage form outside of the
3048	primary residence of the relevant medical cannabis patient cardholder.
3049	(22) "Limited medical provider" means an individual who:
3050	(a) meets the recommending qualifications; and
3051	(b) has no more than 15 patients with a valid medical cannabis patient card or
3052	provisional patient card as a result of the individual's recommendation, in accordance with
3053	Subsection [26-61a-106] <u>26B-4-204(1)(b)</u> .
3054	(23) "Marijuana" means the same as that term is defined in Section 58-37-2.
3055	(24) "Medical cannabis" means cannabis in a medicinal dosage form or a cannabis
3056	product in a medicinal dosage form.
3057	(25) "Medical cannabis card" means a medical cannabis patient card, a medical
3058	cannabis guardian card, a medical cannabis caregiver card, or a conditional medical cannabis
3059	card.
3060	(26) "Medical cannabis cardholder" means:
3061	(a) a holder of a medical cannabis card; or
3062	(b) a facility or assigned employee, described in Subsection(14)(b), only:
3063	(i) within the scope of the facility's or assigned employee's performance of the role of a
3064	medical cannabis patient cardholder's caregiver designation under Subsection [26-61a-202]

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26B-4-214(1)(b); and

3066	(ii) while in possession of documentation that establishes:
3067	(A) a caregiver designation described in Subsection [26-61a-202] 26B-4-214(1)(b);
3068	(B) the identity of the individual presenting the documentation; and
3069	(C) the relation of the individual presenting the documentation to the caregiver
3070	designation.
3071	(27) "Medical cannabis caregiver card" means an electronic document that a cardholder
3072	may print or store on an electronic device or a physical card or document that:
3073	(a) the department issues to an individual whom a medical cannabis patient cardholder
3074	or a medical cannabis guardian cardholder designates as a designated caregiver; and
3075	(b) is connected to the electronic verification system.
3076	(28) "Medical cannabis courier" means a courier that:
3077	(a) the department licenses in accordance with Section [26-61a-604] 26B-4-239 ; and
3078	(b) contracts with a home delivery medical cannabis pharmacy to deliver medical
3079	cannabis shipments to fulfill electronic orders that the state central patient portal facilitates.
3080	(29) "Medical cannabis courier agent" means an individual who:
3081	(a) is an employee of a medical cannabis courier; and
3082	(b) who holds a valid medical cannabis courier agent registration card.
3083	(30) (a) "Medical cannabis device" means a device that an individual uses to ingest or
3084	inhale cannabis in a medicinal dosage form or a cannabis product in a medicinal dosage form.
3085	(b) "Medical cannabis device" does not include a device that:
3086	(i) facilitates cannabis combustion; or
3087	(ii) an individual uses to ingest substances other than cannabis.
3088	(31) "Medical cannabis guardian card" means an electronic document that a cardholder
3089	may print or store on an electronic device or a physical card or document that:
3090	(a) the department issues to the parent or legal guardian of a minor with a qualifying
3091	condition; and
3092	(b) is connected to the electronic verification system.
3093	(32) "Medical cannabis patient card" means an electronic document that a cardholder
3094	may print or store on an electronic device or a physical card or document that:
3095	(a) the department issues to an individual with a qualifying condition; and
3096	(b) is connected to the electronic verification system

3097	(33) "Medical cannabis pharmacy" means a person that:
3098	(a) (i) acquires or intends to acquire medical cannabis or a cannabis product in a
3099	medicinal dosage form from a cannabis processing facility or another medical cannabis
3100	pharmacy or a medical cannabis device; or
3101	(ii) possesses medical cannabis or a medical cannabis device; and
3102	(b) sells or intends to sell medical cannabis or a medical cannabis device to a medical
3103	cannabis cardholder.
3104	(34) "Medical cannabis pharmacy agent" means an individual who:
3105	(a) is an employee of a medical cannabis pharmacy; and
3106	(b) who holds a valid medical cannabis pharmacy agent registration card.
3107	(35) "Medical cannabis pharmacy agent registration card" means a registration card
3108	issued by the department that authorizes an individual to act as a medical cannabis pharmacy
3109	agent.
3110	(36) "Medical cannabis shipment" means a shipment of medical cannabis or a medical
3111	cannabis product that a home delivery medical cannabis pharmacy or a medical cannabis
3112	courier delivers to a medical cannabis cardholder's home address to fulfill an electronic medical
3113	cannabis order that the state central patient portal facilitates.
3114	(37) "Medical cannabis treatment" means cannabis in a medicinal dosage form, a
3115	cannabis product in a medicinal dosage form, or a medical cannabis device.
3116	(38) (a) "Medicinal dosage form" means:
3117	(i) for processed medical cannabis or a medical cannabis product, the following with a
3118	specific and consistent cannabinoid content:
3119	(A) a tablet;
3120	(B) a capsule;
3121	(C) a concentrated liquid or viscous oil;
3122	(D) a liquid suspension that, after December 1, 2022, does not exceed 30 ml;
3123	(E) a topical preparation;
3124	(F) a transdermal preparation;
3125	(G) a sublingual preparation;
3126	(H) a gelatinous cube, gelatinous rectangular cuboid, or lozenge in a cube or
3127	rectangular cuboid shape;

3128	(I) a resin or wax; or
3129	(J) an aerosol; or
3130	(ii) for unprocessed cannabis flower, a container described in Section 4-41a-602 that:
3131	(A) contains cannabis flowers in a quantity that varies by no more than 10% from the
3132	stated weight at the time of packaging;
3133	(B) at any time the medical cannabis cardholder transports or possesses the container in
3134	public, is contained within an opaque bag or box that the medical cannabis pharmacy provides;
3135	and
3136	(C) is labeled with the container's content and weight, the date of purchase, the legal
3137	use termination date, and after December 31, 2020, a barcode that provides information
3138	connected to an inventory control system; and
3139	(iii) a form measured in grams, milligrams, or milliliters.
3140	(b) "Medicinal dosage form" includes a portion of unprocessed cannabis flower that:
3141	(i) the medical cannabis cardholder has recently removed from the container described
3142	in Subsection (38)(a)(ii) for use; and
3143	(ii) does not exceed the quantity described in Subsection (38)(a)(ii).
3144	(c) "Medicinal dosage form" does not include:
3145	(i) any unprocessed cannabis flower outside of the container described in Subsection
3146	(38)(a)(ii), except as provided in Subsection (38)(b);
3147	(ii) any unprocessed cannabis flower in a container described in Subsection (38)(a)(ii)
3148	after the legal use termination date;
3149	(iii) a process of vaporizing and inhaling concentrated cannabis by placing the cannabis
3150	on a nail or other metal object that is heated by a flame, including a blowtorch; or
3151	(iv) a liquid suspension that is branded as a beverage.
3152	(39) "Nonresident patient" means an individual who:
3153	(a) is not a resident of Utah or has been a resident of Utah for less than 45 days;
3154	(b) has a currently valid medical cannabis card or the equivalent of a medical cannabis
3155	card under the laws of another state, district, territory, commonwealth, or insular possession of
3156	the United States; and
3157	(c) has been diagnosed with a qualifying condition as described in Section
3158	[26-61a-104] <u>26B-4-203</u> .

3159	(40) "Payment provider" means an entity that contracts with a cannabis production
3160	establishment or medical cannabis pharmacy to facilitate transfers of funds between the
3161	establishment or pharmacy and other businesses or individuals.
3162	(41) "Pharmacy medical provider" means the medical provider required to be on site at
3163	a medical cannabis pharmacy under Section [26-61a-403] <u>26B-4-219</u> .
3164	(42) "Provisional patient card" means a card that:
3165	(a) the department issues to a minor with a qualifying condition for whom:
3166	(i) a recommending medical provider has recommended a medical cannabis treatment;
3167	and
3168	(ii) the department issues a medical cannabis guardian card to the minor's parent or
3169	legal guardian; and
3170	(b) is connected to the electronic verification system.
3171	(43) "Qualified medical provider" means an individual:
3172	(a) who meets the recommending qualifications; and
3173	(b) whom the department registers to recommend treatment with cannabis in a
3174	medicinal dosage form under Section [26-61a-106] <u>26B-4-204</u> .
3175	(44) "Qualified Patient Enterprise Fund" means the enterprise fund created in Section
3176	[26-61a-109] <u>26B-1-310</u> .
3177	(45) "Qualifying condition" means a condition described in Section [26-61a-104] <u>26B-</u>
3178	<u>4-203</u> .
3179	(46) "Recommend" or "recommendation" means, for a recommending medical
3180	provider, the act of suggesting the use of medical cannabis treatment, which:
3181	(a) certifies the patient's eligibility for a medical cannabis card; and
3182	(b) may include, at the recommending medical provider's discretion, directions of use,
3183	with or without dosing guidelines.
3184	(47) "Recommending medical provider" means a qualified medical provider or a
3185	limited medical provider.
3186	(48) "Recommending qualifications" means that an individual:
3187	(a) (i) has the authority to write a prescription;
3188	(ii) is licensed to prescribe a controlled substance under Title 58, Chapter 37, Utah
3189	Controlled Substances Act: and

3190	(iii) possesses the authority, in accordance with the individual's scope of practice, to
3191	prescribe a Schedule II controlled substance; and
3192	(b) is licensed as:
3193	(i) a podiatrist under Title 58, Chapter 5a, Podiatric Physician Licensing Act;
3194	(ii) an advanced practice registered nurse under Title 58, Chapter 31b, Nurse Practice
3195	Act;
3196	(iii) a physician under Title 58, Chapter 67, Utah Medical Practice Act, or Title 58,
3197	Chapter 68, Utah Osteopathic Medical Practice Act; or
3198	(iv) a physician assistant under Title 58, Chapter 70a, Utah Physician Assistant Act.
3199	(49) "State central patient portal" means the website the department creates, in
3200	accordance with Section [26-61a-601] 26B-4-236, to facilitate patient safety, education, and are
3201	electronic medical cannabis order.
3202	(50) "State central patient portal medical provider" means a physician or pharmacist
3203	that the department employs in relation to the state central patient portal to consult with
3204	medical cannabis cardholders in accordance with Section [26-61a-602] <u>26B-4-237</u> .
3205	(51) "State electronic verification system" means the system described in Section
3206	$[\frac{26-61a-103}{26B-4-202}]$
3207	(52) "Tetrahydrocannabinol" or "THC" means a substance derived from cannabis or a
3208	synthetic equivalent as described in Subsection 58-37-4(2)(a)(iii)(AA).
3209	(53) "THC analog" means the same as that term is defined in Section 4-41-102.
3210	(54) "Valid form of photo identification" means any of the following forms of
3211	identification that is either current or has expired within the previous six months:
3212	(a) a valid state-issued driver license or identification card;
3213	(b) a valid United States federal-issued photo identification, including:
3214	(i) a United States passport;
3215	(ii) a United States passport card;
3216	(iii) a United States military identification card; or
3217	(iv) a permanent resident card or alien registration receipt card; or
3218	(c) a passport that another country issued.
3219	Section 60. Section 26B-4-202, which is renumbered from Section 26-61a-103 is
3220	renumbered and amended to read:

3221	$\left[\frac{26-61a-103}{26B-4-202}\right]$. Electronic verification system.
3222	(1) The Department of Agriculture and Food, the department, the Department of Public
3223	Safety, and the Division of Technology Services shall:
3224	(a) enter into a memorandum of understanding in order to determine the function and
3225	operation of the state electronic verification system in accordance with Subsection (2);
3226	(b) coordinate with the Division of Purchasing, under Title 63G, Chapter 6a, Utah
3227	Procurement Code, to develop a request for proposals for a third-party provider to develop and
3228	maintain the state electronic verification system in coordination with the Division of
3229	Technology Services; and
3230	(c) select a third-party provider who:
3231	(i) meets the requirements contained in the request for proposals issued under
3232	Subsection (1)(b); and
3233	(ii) may not have any commercial or ownership interest in a cannabis production
3234	establishment or a medical cannabis pharmacy.
3235	(2) The Department of Agriculture and Food, the department, the Department of Public
3236	Safety, and the Division of Technology Services shall ensure that, on or before March 1, 2020,
3237	the state electronic verification system described in Subsection (1):
3238	(a) allows an individual to apply for a medical cannabis patient card or, if applicable, a
3239	medical cannabis guardian card, provided that the card may not become active until:
3240	(i) the relevant qualified medical provider completes the associated medical cannabis
3241	recommendation; or
3242	(ii) for a medical cannabis card related to a limited medical provider's
3243	recommendation, the medical cannabis pharmacy completes the recording described in
3244	Subsection (2)(d);
3245	(b) allows an individual to apply to renew a medical cannabis patient card or a medical
3246	cannabis guardian card in accordance with Section [26-61a-201] <u>26B-4-213</u> ;
3247	(c) allows a qualified medical provider, or an employee described in Subsection (3)
3248	acting on behalf of the qualified medical provider, to:
3249	(i) access dispensing and card status information regarding a patient:
3250	(A) with whom the qualified medical provider has a provider-patient relationship; and
3251	(B) for whom the qualified medical provider has recommended or is considering

recommending a medical cannabis card;

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- (ii) electronically recommend, after an initial face-to-face visit with a patient described in Subsection [26-61a-201] 26B-4-213(4)(a)(iii), treatment with cannabis in a medicinal dosage form or a cannabis product in a medicinal dosage form and optionally recommend dosing guidelines; and
- (iii) electronically renew a recommendation to a medical cannabis patient cardholder or medical cannabis guardian cardholder:
- (A) using telehealth services, for the qualified medical provider who originally recommended a medical cannabis treatment during a face-to-face visit with the patient; or
- (B) during a face-to-face visit with the patient, for a qualified medical provider who did not originally recommend the medical cannabis treatment during a face-to-face visit.
- (d) beginning on the earlier of September 1, 2021, or the date on which the electronic verification system is functionally capable of facility medical cannabis pharmacy recording, allows a medical cannabis pharmacy medical provider or medical cannabis pharmacy agent, in accordance with Subsection [26-61a-501] 26B-4-229(10)(a), to:
- (i) access the electronic verification system to review the history within the system of a patient with whom the provider or agent is interacting, limited to read-only access for medical cannabis pharmacy agents unless the medical cannabis pharmacy's pharmacist in charge authorizes add and edit access;
- (ii) record a patient's recommendation from a limited medical provider, including any directions of use, dosing guidelines, or caregiver indications from the limited medical provider; and
- (iii) record a limited medical provider's renewal of the provider's previous recommendation;
 - (e) connects with:
- (i) an inventory control system that a medical cannabis pharmacy uses to track in real time and archive purchases of any cannabis in a medicinal dosage form, cannabis product in a medicinal dosage form, or a medical cannabis device, including:
 - (A) the time and date of each purchase;
- 3281 (B) the quantity and type of cannabis, cannabis product, or medical cannabis device purchased;

3283	(C) any cannabis production establishment, any medical cannabis pharmacy, or any
3284	medical cannabis courier associated with the cannabis, cannabis product, or medical cannabis
3285	device; and
3286	(D) the personally identifiable information of the medical cannabis cardholder who
3287	made the purchase; and
3288	(ii) any commercially available inventory control system that a cannabis production
3289	establishment utilizes in accordance with Section 4-41a-103 to use data that the Department of
3290	Agriculture and Food requires by rule, in accordance with Title 63G, Chapter 3, Utah
3291	Administrative Rulemaking Act, from the inventory tracking system that a licensee uses to
3292	track and confirm compliance;
3293	(f) provides access to:
3294	(i) the department to the extent necessary to carry out the department's functions and
3295	responsibilities under this [chapter] part;
3296	(ii) the Department of Agriculture and Food to the extent necessary to carry out the
3297	functions and responsibilities of the Department of Agriculture and Food under Title 4, Chapter
3298	41a, Cannabis Production Establishments; and
3299	(iii) the Division of Professional Licensing to the extent necessary to carry out the
3300	functions and responsibilities related to the participation of the following in the
3301	recommendation and dispensing of medical cannabis:
3302	(A) a podiatrist licensed under Title 58, Chapter 5a, Podiatric Physician Licensing Act;
3303	(B) a pharmacist licensed under Title 58, Chapter 17b, Pharmacy Practice Act;
3304	(C) an advanced practice registered nurse licensed under Title 58, Chapter 31b, Nurse
3305	Practice Act;
3306	(D) a physician licensed under Title 58, Chapter 67, Utah Medical Practice Act, or
3307	Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; or
3308	(E) a physician assistant licensed under Title 58, Chapter 70a, Utah Physician Assistant
3309	Act;
3310	(g) provides access to and interaction with the state central patient portal;
3311	(h) communicates dispensing information from a record that a medical cannabis
3312	pharmacy submits to the state electronic verification system under Subsection [26-61a-502]
3313	26B-4-230(6)(a)(ii) to the controlled substance database;

3314	(i) provides access to state or local law enforcement:
3315	(i) during a law enforcement encounter, without a warrant, using the individual's driver
3316	license or state ID, only for the purpose of determining if the individual subject to the law
3317	enforcement encounter has a valid medical cannabis card; or
3318	(ii) after obtaining a warrant; and
3319	(j) creates a record each time a person accesses the system that identifies the person
3320	who accesses the system and the individual whose records the person accesses.
3321	(3) (a) Beginning on the earlier of September 1, 2021, or the date on which the
3322	electronic verification system is functionally capable of allowing employee access under this
3323	Subsection (3), an employee of a qualified medical provider may access the electronic
3324	verification system for a purpose described in Subsection (2)(c) on behalf of the qualified
3325	medical provider if:
3326	(i) the qualified medical provider has designated the employee as an individual
3327	authorized to access the electronic verification system on behalf of the qualified medical
3328	provider;
3329	(ii) the qualified medical provider provides written notice to the department of the
3330	employee's identity and the designation described in Subsection (3)(a)(i); and
3331	(iii) the department grants to the employee access to the electronic verification system.
3332	(b) An employee of a business that employs a qualified medical provider may access
3333	the electronic verification system for a purpose described in Subsection (2)(c) on behalf of the
3334	qualified medical provider if:
3335	(i) the qualified medical provider has designated the employee as an individual
3336	authorized to access the electronic verification system on behalf of the qualified medical
3337	provider;
3338	(ii) the qualified medical provider and the employing business jointly provide written
3339	notice to the department of the employee's identity and the designation described in Subsection
3340	(3)(b)(i); and
3341	(iii) the department grants to the employee access to the electronic verification system.
3342	(4) (a) As used in this Subsection (4), "prescribing provider" means:
3343	(i) a podiatrist licensed under Title 58, Chapter 5a, Podiatric Physician Licensing Act;

(ii) an advanced practice registered nurse licensed under Title 58, Chapter 31b, Nurse

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3345	Practice Act;
3346	(iii) a physician licensed under Title 58, Chapter 67, Utah Medical Practice Act, or
3347	Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; or
3348	(iv) a physician assistant licensed under Title 58, Chapter 70a, Utah Physician
3349	Assistant Act.
3350	(b) Beginning on the earlier of September 1, 2021, or the date on which the electronic
3351	verification system is functionally capable of allowing provider access under this Subsection
3352	(4), a prescribing provider may access information in the electronic verification system
3353	regarding a patient the prescribing provider treats.
3354	(5) The department may release limited data that the system collects for the purpose of:
3355	(a) conducting medical and other department approved research;
3356	(b) providing the report required by Section [26-61a-703] 26B-4-222; and
3357	(c) other official department purposes.
3358	(6) The department shall make rules, in accordance with Title 63G, Chapter 3, Utah
3359	Administrative Rulemaking Act, to establish:
3360	(a) the limitations on access to the data in the state electronic verification system as
3361	described in this section; and
3362	(b) standards and procedures to ensure accurate identification of an individual
3363	requesting information or receiving information in this section.
3364	(7) (a) Any person who knowingly and intentionally releases any information in the
3365	state electronic verification system in violation of this section is guilty of a third degree felony.
3366	(b) Any person who negligently or recklessly releases any information in the state
3367	electronic verification system in violation of this section is guilty of a class C misdemeanor.
3368	(8) (a) Any person who obtains or attempts to obtain information from the state
3369	electronic verification system by misrepresentation or fraud is guilty of a third degree felony.
3370	(b) Any person who obtains or attempts to obtain information from the state electronic
3371	verification system for a purpose other than a purpose this [chapter] part authorizes is guilty of
3372	a third degree felony.
3373	(9) (a) Except as provided in Subsection (9)(e), a person may not knowingly and
3374	intentionally use, release, publish, or otherwise make available to any other person information

obtained from the state electronic verification system for any purpose other than a purpose

3376	specified in this section.
3377	(b) Each separate violation of this Subsection (9) is:
3378	(i) a third degree felony; and
3379	(ii) subject to a civil penalty not to exceed \$5,000.
3380	(c) The department shall determine a civil violation of this Subsection (9) in
3381	accordance with Title 63G, Chapter 4, Administrative Procedures Act.
3382	(d) Civil penalties assessed under this Subsection (9) shall be deposited into the
3383	General Fund.
3384	(e) This Subsection (9) does not prohibit a person who obtains information from the
3385	state electronic verification system under Subsection (2)(a), (c), or (f) from:
3386	(i) including the information in the person's medical chart or file for access by a person
3387	authorized to review the medical chart or file;
3388	(ii) providing the information to a person in accordance with the requirements of the
3389	Health Insurance Portability and Accountability Act of 1996; or
3390	(iii) discussing or sharing that information about the patient with the patient.
3391	Section 61. Section 26B-4-203, which is renumbered from Section 26-61a-104 is
3392	renumbered and amended to read:
3393	[26-61a-104]. 26B-4-203. Qualifying condition.
3394	(1) By designating a particular condition under Subsection (2) for which the use of
3395	medical cannabis to treat symptoms is decriminalized, the Legislature does not conclusively
3396	state that:
3397	(a) current scientific evidence clearly supports the efficacy of a medical cannabis
3398	treatment for the condition; or
3399	(b) a medical cannabis treatment will treat, cure, or positively affect the condition.
3400	(2) For the purposes of this [chapter] part, each of the following conditions is a
3401	qualifying condition:
3402	(a) HIV or acquired immune deficiency syndrome;
3403	(b) Alzheimer's disease;
3404	(c) amyotrophic lateral sclerosis;
3405	(d) cancer;
3406	(e) cachexia;

3407	(f) persistent nausea that is not significantly responsive to traditional treatment, except
3408	for nausea related to:
3409	(i) pregnancy;
3410	(ii) cannabis-induced cyclical vomiting syndrome; or
3411	(iii) cannabinoid hyperemesis syndrome;
3412	(g) Crohn's disease or ulcerative colitis;
3413	(h) epilepsy or debilitating seizures;
3414	(i) multiple sclerosis or persistent and debilitating muscle spasms;
3415	(j) post-traumatic stress disorder that is being treated and monitored by a licensed
3416	mental health therapist, as that term is defined in Section 58-60-102, and that:
3417	(i) has been diagnosed by a healthcare provider or mental health provider employed or
3418	contracted by the United States Veterans Administration, evidenced by copies of medical
3419	records from the United States Veterans Administration that are included as part of the
3420	qualified medical provider's pre-treatment assessment and medical record documentation; or
3421	(ii) has been diagnosed or confirmed, through face-to-face or telehealth evaluation of
3422	the patient, by a provider who is:
3423	(A) a licensed board-eligible or board-certified psychiatrist;
3424	(B) a licensed psychologist with a master's-level degree;
3425	(C) a licensed clinical social worker with a master's-level degree; or
3426	(D) a licensed advanced practice registered nurse who is qualified to practice within
3427	the psychiatric mental health nursing specialty and who has completed the clinical practice
3428	requirements in psychiatric mental health nursing, including in psychotherapy, in accordance
3429	with Subsection 58-31b-302(5)(g);
3430	(k) autism;
3431	(l) a terminal illness when the patient's remaining life expectancy is less than six
3432	months;
3433	(m) a condition resulting in the individual receiving hospice care;
3434	(n) a rare condition or disease that:
3435	(i) affects less than 200,000 individuals in the United States, as defined in Section 526
3436	of the Federal Food, Drug, and Cosmetic Act; and
3437	(ii) is not adequately managed despite treatment attempts using:

3438	(A) conventional medications other than opioids or opiates; or
3439	(B) physical interventions;
3440	(o) pain lasting longer than two weeks that is not adequately managed, in the qualified
3441	medical provider's opinion, despite treatment attempts using:
3442	(i) conventional medications other than opioids or opiates; or
3443	(ii) physical interventions;
3444	(p) pain that is expected to last for two weeks or longer for an acute condition,
3445	including a surgical procedure, for which a medical professional may generally prescribe
3446	opioids for a limited duration, subject to Subsection [26-61a-201] 26B-4-213(5)(c); and
3447	(q) a condition that the Compassionate Use Board approves under Section
3448	[26-61a-105] <u>26B-1-421</u> , on an individual, case-by-case basis.
3449	Section 62. Section 26B-4-204, which is renumbered from Section 26-61a-106 is
3450	renumbered and amended to read:
3451	[26-61a-106]. <u>26B-4-204.</u> Qualified medical provider registration
3452	Continuing education Treatment recommendation Limited medical provider.
3453	(1) (a) (i) Except as provided in Subsection (1)(b), an individual may not recommend a
3454	medical cannabis treatment unless the department registers the individual as a qualified
3455	medical provider in accordance with this section.
3456	(ii) Notwithstanding Subsection (1)(a)(i), a qualified medical provider who is podiatrist
3457	licensed under Title 58, Chapter 5a, Podiatric Physician Licensing Act, may not recommend a
3458	medical cannabis treatment except within the course and scope of a practice of podiatry, as that
3459	term is defined in Section 58-5a-102.
3460	(b) Beginning on the earlier of September 1, 2021, or the date on which the department
3461	gives notice that the electronic verification system is functionally capable as described in
3462	Subsection [26-61a-103] 26B-4-202(2)(d), an individual who meets the recommending
3463	qualifications may recommend a medical cannabis treatment as a limited medical provider
3464	without registering under Subsection (1)(a) if:
3465	(i) the individual recommends the use of medical cannabis to the patient through an
3466	order described in Subsection (1)(c) after:
3467	(A) a face-to-face visit for an initial recommendation or the renewal of a

recommendation for a patient for whom the limited medical provider did not make the patient's

3469 original recommendation; or

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(B) a visit using telehealth services for a renewal of a recommendation for a patient for whom the limited medical provider made the patient's original recommendation; and

- (ii) the individual's recommendation or renewal would not cause the total number of the individual's patients who have a valid medical cannabis patient card or provisional patient card resulting from the individual's recommendation to exceed 15.
- (c) The individual described in Subsection (1)(b) shall communicate the individual's recommendation through an order for the medical cannabis pharmacy to record the individual's recommendation or renewal in the state electronic verification system under the individual's recommendation that:
- (i) (A) that the individual or the individual's employee sends electronically to a medical cannabis pharmacy; or
- (B) that the individual gives to the patient in writing for the patient to deliver to a medical cannabis pharmacy; and
 - (ii) may include:
 - (A) directions of use or dosing guidelines; and
- (B) an indication of a need for a caregiver in accordance with Subsection [26-61a-201] 26B-4-213(3)(c).
 - (d) If the limited medical provider gives the patient a written recommendation to deliver to a medical cannabis pharmacy under Subsection (1)(c)(i)(B), the limited medical provider shall ensure that the document includes all of the information that is included on a prescription the provider would issue for a controlled substance, including:
 - (i) the date of issuance;
 - (ii) the provider's name, address and contact information, controlled substance license information, and signature; and
 - (iii) the patient's name, address and contact information, age, and diagnosed qualifying condition.
 - (e) In considering making a recommendation as a limited medical provider, an individual may consult information that the department makes available on the department's website for recommending providers.
 - (2) (a) The department shall, within 15 days after the day on which the department

3500	receives an application from an individual, register and issue a qualified medical provider
3501	registration card to the individual if the individual:
3502	(i) provides to the department the individual's name and address;
3503	(ii) provides to the department a report detailing the individual's completion of the
3504	applicable continuing education requirement described in Subsection (3);
3505	(iii) provides to the department evidence that the individual meets the recommending
3506	qualifications;
3507	(iv) for an applicant on or after November 1, 2021, provides to the department the
3508	information described in Subsection (10)(a); and
3509	(v) pays the department a fee in an amount that:
3510	(A) the department sets, in accordance with Section 63J-1-504; and
3511	(B) does not exceed \$300 for an initial registration.
3512	(b) The department may not register an individual as a qualified medical provider if the
3513	individual is:
3514	(i) a pharmacy medical provider; or
3515	(ii) an owner, officer, director, board member, employee, or agent of a cannabis
3516	production establishment, a medical cannabis pharmacy, or a medical cannabis courier.
3517	(3) (a) An individual shall complete the continuing education described in this
3518	Subsection (3) in the following amounts:
3519	(i) for an individual as a condition precedent to registration, four hours; and
3520	(ii) for a qualified medical provider as a condition precedent to renewal, four hours
3521	every two years.
3522	(b) In accordance with Subsection (3)(a), a qualified medical provider shall:
3523	(i) complete continuing education:
3524	(A) regarding the topics described in Subsection (3)(d); and
3525	(B) offered by the department under Subsection (3)(c) or an accredited or approved
3526	continuing education provider that the department recognizes as offering continuing education
3527	appropriate for the recommendation of cannabis to patients; and
3528	(ii) make a continuing education report to the department in accordance with a process
3529	that the department establishes by rule, in accordance with Title 63G, Chapter 3, Utah
3530	Administrative Rulemaking Act, and in collaboration with the Division of Professional

3531	Licensing and:
3532	(A) for a podiatrist licensed under Title 58, Chapter 5a, Podiatric Physician Licensing
3533	Act, the Podiatric Physician Board;
3534	(B) for an advanced practice registered nurse licensed under Title 58, Chapter 31b,
3535	Nurse Practice Act, the Board of Nursing;
3536	(C) for a qualified medical provider licensed under Title 58, Chapter 67, Utah Medical
3537	Practice Act, the Physicians Licensing Board;
3538	(D) for a qualified medical provider licensed under Title 58, Chapter 68, Utah
3539	Osteopathic Medical Practice Act, the Osteopathic Physician and Surgeon's Licensing Board;
3540	and
3541	(E) for a physician assistant licensed under Title 58, Chapter 70a, Utah Physician
3542	Assistant Act, the Physician Assistant Licensing Board.
3543	(c) The department may, in consultation with the Division of Professional Licensing,
3544	develop the continuing education described in this Subsection (3).
3545	(d) The continuing education described in this Subsection (3) may discuss:
3546	(i) the provisions of this [chapter] part;
3547	(ii) general information about medical cannabis under federal and state law;
3548	(iii) the latest scientific research on the endocannabinoid system and medical cannabis,
3549	including risks and benefits;
3550	(iv) recommendations for medical cannabis as it relates to the continuing care of a
3551	patient in pain management, risk management, potential addiction, or palliative care; and
3552	(v) best practices for recommending the form and dosage of medical cannabis products
3553	based on the qualifying condition underlying a medical cannabis recommendation.
3554	(4) (a) Except as provided in Subsection (4)(b), a qualified medical provider may not
3555	recommend a medical cannabis treatment to more than 275 of the qualified medical provider's
3556	patients at the same time, as determined by the number of medical cannabis cards under the
3557	qualified medical provider's name in the state electronic verification system.
3558	(b) A qualified medical provider may recommend a medical cannabis treatment to up to
3559	600 of the qualified medical provider's patients at any given time, as determined by the number
3560	of medical cannabis cards under the qualified medical provider's name in the state electronic
3561	verification system, if:

(i) the appropriate American medical board has certified the qualified medical provider in the specialty of anesthesiology, gastroenterology, neurology, oncology, pain, hospice and palliative medicine, physical medicine and rehabilitation, rheumatology, endocrinology, or psychiatry; or

- (ii) a licensed business employs or contracts with the qualified medical provider for the specific purpose of providing hospice and palliative care.
- (5) A recommending medical provider may recommend medical cannabis to an individual under this [chapter] part only in the course of a provider-patient relationship after the recommending medical provider has completed and documented in the patient's medical record a thorough assessment of the patient's condition and medical history based on the appropriate standard of care for the patient's condition.
- (6) (a) Except as provided in Subsection (6)(b), an individual may not advertise that the individual recommends a medical cannabis treatment.
- (b) Notwithstanding Subsection (6)(a) and subject to Section [26-61a-116] 26B-4-223, a qualified medical provider or clinic or office that employs a qualified medical provider may advertise the following:
 - (i) a green cross;

- (ii) the provider's or clinic's name and logo;
- (iii) a qualifying condition that the individual treats;
- (iv) that the individual is registered as a qualified medical provider and recommends medical cannabis; or
 - (v) a scientific study regarding medical cannabis use.
- (7) (a) A qualified medical provider registration card expires two years after the day on which the department issues the card.
- (b) The department shall renew a qualified medical provider's registration card if the provider:
 - (i) applies for renewal;
- (ii) is eligible for a qualified medical provider registration card under this section, including maintaining an unrestricted license under the recommending qualifications;
- 3591 (iii) certifies to the department in a renewal application that the information in Subsection (2)(a) is accurate or updates the information;

3593	(iv) submits a report detailing the completion of the continuing education requirement
3594	described in Subsection (3); and
3595	(v) pays the department a fee in an amount that:
3596	(A) the department sets, in accordance with Section 63J-1-504; and
3597	(B) does not exceed \$50 for a registration renewal.
3598	(8) The department may revoke the registration of a qualified medical provider who
3599	fails to maintain compliance with the requirements of this section.
3600	(9) A recommending medical provider may not receive any compensation or benefit for
3601	the qualified medical provider's medical cannabis treatment recommendation from:
3602	(a) a cannabis production establishment or an owner, officer, director, board member,
3603	employee, or agent of a cannabis production establishment;
3604	(b) a medical cannabis pharmacy or an owner, officer, director, board member,
3605	employee, or agent of a medical cannabis pharmacy; or
3606	(c) a recommending medical provider or pharmacy medical provider.
3607	(10) (a) On or before November 1, 2021, a qualified medical provider shall report to
3608	the department, in a manner designated by the department:
3609	(i) if applicable, that the qualified medical provider or the entity that employs the
3610	qualified medical provider represents online or on printed material that the qualified medical
3611	provider is a qualified medical provider or offers medical cannabis recommendations to
3612	patients; and
3613	(ii) the fee amount that the qualified medical provider or the entity that employs the
3614	qualified medical provider charges a patient for a medical cannabis recommendation, either as
3615	an actual cash rate or, if the provider or entity bills insurance, an average cash rate.
3616	(b) The department shall:
3617	(i) ensure that the following information related to qualified medical providers and
3618	entities described in Subsection (10)(a)(i) is available on the department's website or on the
3619	health care price transparency tool under Subsection (10)(b)(ii):
3620	(A) the name of the qualified medical provider and, if applicable, the name of the
3621	entity that employs the qualified medical provider;

(B) the address of the qualified medical provider's office or, if applicable, the entity

that employs the qualified medical provider; and

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3624	(C) the fee amount described in Subsection (10)(a)(ii); and
3625	(ii) share data collected under this Subsection (10) with the state auditor for use in the
3626	health care price transparency tool described in Section 67-3-11.
3627	Section 63. Section 26B-4-205, which is renumbered from Section 26-61a-107 is
3628	renumbered and amended to read:
3629	[26-61a-107]. <u>26B-4-205.</u> Standard of care Physicians and pharmacists
3630	not liable No private right of action.
3631	(1) An individual described in Subsection (2) is not subject to the following solely for
3632	violating a federal law or regulation that would otherwise prohibit recommending, prescribing,
3633	or dispensing medical cannabis, a medical cannabis product, or a cannabis-based drug that the
3634	United States Food and Drug Administration has not approved:
3635	(a) civil or criminal liability; or
3636	(b) licensure sanctions under Title 58, Chapter 17b, Pharmacy Practice Act, Title 58,
3637	Chapter 31b, Nurse Practice Act, Title 58, Chapter 67, Utah Medical Practice Act, Title 58,
3638	Chapter 68, Utah Osteopathic Medical Practice Act, or Title 58, Chapter 70a, Utah Physician
3639	Assistant Act.
3640	(2) The limitations of liability described in Subsection (1) apply to:
3641	(a) a podiatrist licensed under Title 58, Chapter 5a, Podiatric Physician Licensing Act,
3642	an advanced practice registered nurse licensed under Title 58, Chapter 31b, Nurse Practice Act,
3643	a physician licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Title 58,
3644	Chapter 68, Utah Osteopathic Medical Practice Act, or a physician assistant licensed under
3645	Title 58, Chapter 70a, Utah Physician Assistant Act:
3646	(i) (A) whom the department has registered as a qualified medical provider; or
3647	(B) who makes a recommendation as a limited medical provider; and
3648	(ii) who recommends treatment with cannabis in a medicinal dosage form or a cannabis
3649	product in a medicinal dosage form to a patient in accordance with this [chapter] part; and
3650	(b) a pharmacist licensed under Title 58, Chapter 17b, Pharmacy Practice Act:
3651	(i) whom the department has registered as a pharmacy medical provider; and
3652	(ii) who dispenses, in a medical cannabis pharmacy, treatment with cannabis in a
3653	medicinal dosage form or a cannabis product in a medicinal dosage form to a medical cannabis
3654	cardholder in accordance with this [chapter] part.

3655	(3) Nothing in this section or [chapter] part reduces or in any way negates the duty of
3656	an individual described in Subsection (2) to use reasonable and ordinary care in the treatment
3657	of a patient:
3658	(a) who may have a qualifying condition; and
3659	(b) (i) for whom the individual described in Subsection (2)(a)(i) or (ii) has
3660	recommended or might consider recommending a treatment with cannabis or a cannabis
3661	product; or
3662	(ii) with whom the pharmacist described in Subsection (2)(b) has interacted in the
3663	dosing or dispensing of cannabis or a cannabis product.
3664	(4) (a) As used in this Subsection (4), "healthcare facility" means [the same as that
3665	term] health care facility as is defined in Section [26-21-2] 26B-2-201.
3666	(b) A healthcare facility may adopt restrictions on the possession, use, and storage of
3667	medical cannabis on the premises of the healthcare facility by a medical cannabis cardholder
3668	who resides at or is actively receiving treatment or care at the healthcare facility.
3669	(c) An employee or agent of a healthcare facility described in this Subsection (4) is not
3670	subject to civil or criminal liability for carrying out employment duties, including:
3671	(i) providing or supervising care to a medical cannabis cardholder; or
3672	(ii) in accordance with a caregiver designation under Section [26-61a-202] <u>26B-4-214</u>
3673	for a medical cannabis cardholder residing at the healthcare facility, purchasing, transporting,
3674	or possessing medical cannabis for the relevant patient and in accordance with the designation.
3675	(d) Nothing in this section requires a healthcare facility to adopt a restriction under
3676	Subsection (4)(b).
3677	Section 64. Section 26B-4-206, which is renumbered from Section 26-61a-108 is
3678	renumbered and amended to read:
3679	$[\frac{26-61a-108}{26B-4-206}]$. Agreement with a tribe.
3680	(1) As used in this section, "tribe" means a federally recognized Indian tribe or Indian
3681	band.
3682	(2) (a) In accordance with this section, the governor may enter into an agreement with a

tribe to allow for the operation of a medical cannabis pharmacy on tribal land located within

(b) An agreement described in Subsection (2)(a) may not exempt any person from the

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the state.

3686	requirements of this [chapter] part.
3687	(c) The governor shall ensure that an agreement described in Subsection (2)(a):
3688	(i) is in writing;
3689	(ii) is signed by:
3690	(A) the governor; and
3691	(B) the governing body of the tribe that the tribe designates and has the authority to
3692	bind the tribe to the terms of the agreement;
3693	(iii) states the effective date of the agreement;
3694	(iv) provides that the governor shall renegotiate the agreement if the agreement is or
3695	becomes inconsistent with a state statute; and
3696	(v) includes any accommodation that the tribe makes:
3697	(A) to which the tribe agrees; and
3698	(B) that is reasonably related to the agreement.
3699	(d) Before executing an agreement under this Subsection (2), the governor shall consult
3700	with the department.
3701	(e) At least 30 days before the execution of an agreement described in this Subsection
3702	(2), the governor or the governor's designee shall provide a copy of the agreement in the form
3703	in which the agreement will be executed to:
3704	(i) the chairs of the Native American Legislative Liaison Committee; and
3705	(ii) the Office of Legislative Research and General Counsel.
3706	Section 65. Section 26B-4-207, which is renumbered from Section 26-61a-111 is
3707	renumbered and amended to read:
3708	[26-61a-111]. <u>26B-4-207.</u> Nondiscrimination for medical care or
3709	government employment Notice to prospective and current public employees No
3710	effect on private employers.
3711	(1) For purposes of medical care, including an organ or tissue transplant, a patient's
3712	use, in accordance with this [chapter] part, of cannabis in a medicinal dosage form or a
3713	cannabis product in a medicinal dosage form:
3714	(a) is considered the equivalent of the authorized use of any other medication used at
3715	the discretion of a physician; and
3716	(b) does not constitute the use of an illicit substance or otherwise disqualify an

individual from needed medical care.

- (2) (a) Notwithstanding any other provision of law and except as provided in Subsection (2)(b), the state or any political subdivision shall treat:
- (i) an employee's use of medical cannabis in accordance with this [chapter] part or Section 58-37-3.7 in the same way the state or political subdivision treats employee use of any prescribed controlled substance; and
- (ii) an employee's status as a medical cannabis cardholder or an employee's medical cannabis recommendation from a qualified medical provider or limited provider in the same way the state or political subdivision treats an employee's prescriptions for any prescribed controlled substance.
- (b) A state or political subdivision employee who has a valid medical cannabis card is not subject to retaliatory action, as that term is defined in Section 67-19a-101, for failing a drug test due to marijuana or tetrahydrocannabinol without evidence that the employee was impaired or otherwise adversely affected in the employee's job performance due to the use of medical cannabis.
 - (c) Subsections (2)(a) and (b) do not apply:
- (i) where the application of Subsection (2)(a) or (b) would jeopardize federal funding, a federal security clearance, or any other federal background determination required for the employee's position;
- (ii) if the employee's position is dependent on a license or peace officer certification that is subject to federal regulations, including 18 U.S.C. Sec. 922(g)(3); or
- (iii) if an employee described in Subsections 34A-2-102(1)(h)(ii) through (vi) uses medical cannabis during the 12 hours immediately preceding the employee's shift or during the employee's shift.
- (3) (a) (i) A state employer or a political subdivision employer shall take the action described in Subsection (3)(a)(ii) before:
- (A) giving to a current employee an assignment or duty that arises from or directly relates to an obligation under this [chapter] part; or
- (B) hiring a prospective employee whose assignments or duties would include an assignment or duty that arises from or directly relates to an obligation under this [chapter] part.
 - (ii) The employer described in Subsection (3)(a)(i) shall give the employee or

prospective employee described in Subsection (3)(a)(i) a written notice that notifies the employee or prospective employee:

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- (A) that the employee's or prospective employee's job duties may require the employee or prospective employee to engage in conduct which is in violation of the criminal laws of the United States; and
- (B) that in accepting a job or undertaking a duty described in Subsection (3)(a)(i), although the employee or prospective employee is entitled to the protections of Title 67, Chapter 21, Utah Protection of Public Employees Act, the employee may not object or refuse to carry out an assignment or duty that may be a violation of the criminal laws of the United States with respect to the manufacture, sale, or distribution of cannabis.
- (b) The Division of Human Resource Management shall create, revise, and publish the form of the notice described in Subsection (3)(a).
- (c) Notwithstanding Subsection 67-21-3(3), an employee who has signed the notice described in Subsection (3)(a) may not:
- (i) claim in good faith that the employee's actions violate or potentially violate the laws of the United States with respect to the manufacture, sale, or distribution of cannabis; or
- (ii) refuse to carry out a directive that the employee reasonably believes violates the criminal laws of the United States with respect to the manufacture, sale, or distribution of cannabis.
- (d) An employer may not take retaliatory action as defined in Section 67-19a-101 against a current employee who refuses to sign the notice described in Subsection (3)(a).
- (4) Nothing in this section requires a private employer to accommodate the use of medical cannabis or affects the ability of a private employer to have policies restricting the use of medical cannabis by applicants or employees.
- Section 66. Section **26B-4-208**, which is renumbered from Section 26-61a-112 is renumbered and amended to read:

[26-61a-112]. <u>26B-4-208.</u> No insurance requirement.

Nothing in this [chapter] <u>part</u> requires an insurer, a third-party administrator, or an employer to pay or reimburse for cannabis, a cannabis product, or a medical cannabis device.

Section 67. Section **26B-4-209**, which is renumbered from Section 26-61a-113 is renumbered and amended to read:

3779	[26-61a-113]. <u>26B-4-209.</u> No effect on use of hemp extract Cannabidiol -
3780	Approved drugs.
3781	(1) Nothing in this [chapter] part prohibits an individual from purchasing, selling,
3782	possessing, or using a cannabinoid product in accordance with Section 4-41-402.
3783	(2) Nothing in this [chapter] part restricts or otherwise affects the prescription,
3784	distribution, or dispensing of a product that the United States Food and Drug Administration
3785	has approved.
3786	Section 68. Section 26B-4-210, which is renumbered from Section 26-61a-114 is
3787	renumbered and amended to read:
3788	[26-61a-114]. <u>26B-4-210.</u> Severability clause.
3789	(1) If any provision of this title or Laws of Utah 2018, Third Special Session, Chapter
3790	or the application of any provision of this title or Laws of Utah 2018, Third Special Session,
3791	Chapter 1 to any person or circumstance is held invalid by a final decision of a court of
3792	competent jurisdiction, the remaining provisions of this title and Laws of Utah 2018, Third
3793	Special Session, Chapter 1 remain effective without the invalidated provision or application.
3794	(2) The provisions of this title and Laws of Utah 2018, Third Special Session, Chapter
3795	1 are severable.
3796	Section 69. Section 26B-4-211, which is renumbered from Section 26-61a-115 is
3797	renumbered and amended to read:
3798	[26-61a-115]. <u>26B-4-211.</u> Analogous to prescribed controlled substances.
3799	When an employee, officer, or agent of the state or a political subdivision makes a
3800	finding, determination, or otherwise considers an individual's possession or use of cannabis, a
3801	cannabis product, or a medical cannabis device, the employee, officer, or agent may not
3802	consider the individual's possession or use any differently than the lawful possession or use of
3803	any prescribed controlled substance, if the individual's possession or use complies with:
3804	(1) this [chapter] part;
3805	(2) Title 4, Chapter 41a, Cannabis Production Establishments; or
3806	(3) Subsection 58-37-3.7(2) or (3).
3807	Section 70. Section 26B-4-212 , which is renumbered from Section 26-61-103 is
3808	renumbered and amended to read:

<u>26B-4-212.</u> Institutional review board -- Approved study of

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[26-61-103].

3810	cannabis, a cannabinoid product, or an expanded cannabinoid product.
3811	(1) As used in this section:
3812	(a) "Approved study" means a medical research study:
3813	(i) the purpose of which is to investigate the medical benefits and risks of cannabinoid
3814	products; and
3815	(ii) that is approved by an IRB.
3816	(b) "Board" means the Cannabis Research Review Board created in Section 26B-1-
3817	<u>420.</u>
3818	(c) "Cannabinoid product" means the same as that term is defined in Section 58-37-3.6
3819	(d) "Cannabis" means the same as that term is defined in Section 58-37-3.6.
3820	(e) "Expanded cannabinoid product" means the same as that term is defined in Section
3821	<u>58-37-3.6.</u>
3822	(f) "Institutional review board" or "IRB" means an institutional review board that is
3823	registered for human subject research by the United States Department of Health and Human
3824	Services.
3825	[(1)] (2) A person conducting an approved study may, for the purposes of the study:
3826	(a) process a cannabinoid product or an expanded cannabinoid product;
3827	(b) possess a cannabinoid product or an expanded cannabinoid product; and
3828	(c) administer a cannabinoid product, or an expanded cannabinoid product to an
3829	individual in accordance with the approved study.
3830	[(2)] (3) A person conducting an approved study may:
3831	(a) import cannabis, a cannabinoid product, or an expanded cannabinoid product from
3832	another state if:
3833	(i) the importation complies with federal law; and
3834	(ii) the person uses the cannabis, cannabinoid product, or expanded cannabinoid
3835	product in accordance with the approved study; or
3836	(b) obtain cannabis, a cannabinoid product, or an expanded cannabinoid product from
3837	the National Institute on Drug Abuse.
3838	[(3)] (4) A person conducting an approved study may distribute cannabis, a
3839	cannabinoid product, or an expanded cannabinoid product outside the state if:
3840	(a) the distribution complies with federal law; and

3841	(b) the distribution is for the purposes of, and in accordance with, the approved study
3842	Section 71. Section 26B-4-213, which is renumbered from Section 26-61a-201 is
3843	renumbered and amended to read:
3844	[26-61a-201]. <u>26B-4-213.</u> Medical cannabis patient card Medical
3845	cannabis guardian card Conditional medical cannabis card Application Fees
3846	Studies.
3847	(1) (a) The department shall, within 15 days after the day on which an individual who
3848	satisfies the eligibility criteria in this section or Section [26-61a-202] <u>26B-4-214</u> submits an
3849	application in accordance with this section or Section [26-61a-202] <u>26B-4-214</u> :
3850	(i) issue a medical cannabis patient card to an individual described in Subsection
3851	(2)(a);
3852	(ii) issue a medical cannabis guardian card to an individual described in Subsection
3853	(2)(b);
3854	(iii) issue a provisional patient card to a minor described in Subsection (2)(c); and
3855	(iv) issue a medical cannabis caregiver card to an individual described in Subsection
3856	[26-61a-202] <u>26B-4-214</u> (4).
3857	(b) (i) Beginning on the earlier of September 1, 2021, or the date on which the
3858	electronic verification system is functionally capable of facilitating a conditional medical
3859	cannabis card under this Subsection (1)(b), upon the entry of a recommending medical
3860	provider's medical cannabis recommendation for a patient in the state electronic verification
3861	system, either by the provider or the provider's employee or by a medical cannabis pharmacy
3862	medical provider or medical cannabis pharmacy in accordance with Subsection [26-61a-501]
3863	26B-4-229(10)(a), the department shall issue to the patient an electronic conditional medical
3864	cannabis card, in accordance with this Subsection (1)(b).
3865	(ii) A conditional medical cannabis card is valid for the lesser of:
3866	(A) 60 days; or
3867	(B) the day on which the department completes the department's review and issues a
3868	medical cannabis card under Subsection (1)(a), denies the patient's medical cannabis card
3869	application, or revokes the conditional medical cannabis card under Subsection (8).
3870	(iii) The department may issue a conditional medical cannabis card to an individual
3871	applying for a medical cannabis patient card for which approval of the Compassionate Use

3872 Board is not required. 3873 (iv) An individual described in Subsection (1)(b)(iii) has the rights, restrictions, and 3874 obligations under law applicable to a holder of the medical cannabis card for which the 3875 individual applies and for which the department issues the conditional medical cannabis card. 3876 (2) (a) An individual is eligible for a medical cannabis patient card if: 3877 (i) (A) the individual is at least 21 years old; or (B) the individual is 18, 19, or 20 years old, the individual petitions the Compassionate 3878 3879 Use Board under Section [26-61a-105] 26B-1-421, and the Compassionate Use Board 3880 recommends department approval of the petition; 3881 (ii) the individual is a Utah resident; 3882 (iii) the individual's recommending medical provider recommends treatment with 3883 medical cannabis in accordance with Subsection (4): 3884 (iv) the individual signs an acknowledgment stating that the individual received the 3885 information described in Subsection (9); and 3886 (v) the individual pays to the department a fee in an amount that, subject to Subsection 3887 [26-61a-109] 26B-1-310(5), the department sets in accordance with Section 63J-1-504. (b) (i) An individual is eligible for a medical cannabis guardian card if the individual: 3888 3889 (A) is at least 18 years old; 3890 (B) is a Utah resident; 3891 (C) is the parent or legal guardian of a minor for whom the minor's qualified medical 3892 provider recommends a medical cannabis treatment, the individual petitions the Compassionate Use Board under Section [26-61a-105] 26B-1-421, and the Compassionate Use Board 3893 3894 recommends department approval of the petition; 3895 (D) the individual signs an acknowledgment stating that the individual received the 3896 information described in Subsection (9); 3897 (E) pays to the department a fee in an amount that, subject to Subsection [26-61a-109] 3898 26B-1-310(5), the department sets in accordance with Section 63J-1-504, plus the cost of the 3899 criminal background check described in Section [26-61a-203] 26B-4-215; and 3900 (F) the individual has not been convicted of a misdemeanor or felony drug distribution

offense under either state or federal law, unless the individual completed any imposed sentence

six months or more before the day on which the individual applies for a medical cannabis

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- (ii) The department shall notify the Department of Public Safety of each individual that the department registers for a medical cannabis guardian card.
 - (c) (i) A minor is eligible for a provisional patient card if:
 - (A) the minor has a qualifying condition;
- (B) the minor's qualified medical provider recommends a medical cannabis treatment to address the minor's qualifying condition;
- (C) one of the minor's parents or legal guardians petitions the Compassionate Use Board under Section 26-61a-105, and the Compassionate Use Board recommends department approval of the petition; and
- (D) the minor's parent or legal guardian is eligible for a medical cannabis guardian card under Subsection (2)(b) or designates a caregiver under Subsection (2)(d) who is eligible for a medical cannabis caregiver card under Section [26-61a-202] 26B-4-214.
- (ii) The department shall automatically issue a provisional patient card to the minor described in Subsection (2)(c)(i) at the same time the department issues a medical cannabis guardian card to the minor's parent or legal guardian.
- (d) Beginning on the earlier of September 1, 2021, or the date on which the electronic verification system is functionally capable of servicing the designation, if the parent or legal guardian of a minor described in Subsections (2)(c)(i)(A) through (C) does not qualify for a medical cannabis guardian card under Subsection (2)(b), the parent or legal guardian may designate up to two caregivers in accordance with Subsection [26-61a-202] 26B-4-214(1)(c) to ensure that the minor has adequate and safe access to the recommended medical cannabis treatment.
- (3) (a) An individual who is eligible for a medical cannabis card described in Subsection (2)(a) or (b) shall submit an application for a medical cannabis card to the department:
- 3929 (i) through an electronic application connected to the state electronic verification system;
 - (ii) with the recommending medical provider; and
- 3932 (iii) with information including:
- 3933 (A) the applicant's name, gender, age, and address;

(B) the number of the applicant's valid form of photo identification;

- (C) for a medical cannabis guardian card, the name, gender, and age of the minor receiving a medical cannabis treatment under the cardholder's medical cannabis guardian card; and
- (D) for a provisional patient card, the name of the minor's parent or legal guardian who holds the associated medical cannabis guardian card.
- (b) The department shall ensure that a medical cannabis card the department issues under this section contains the information described in Subsection (3)(a)(iii).
- (c) (i) If a recommending medical provider determines that, because of age, illness, or disability, a medical cannabis patient cardholder requires assistance in administering the medical cannabis treatment that the recommending medical provider recommends, the recommending medical provider may indicate the cardholder's need in the state electronic verification system, either directly or, for a limited medical provider, through the order described in Subsections [26-61a-106] 26B-4-204(1)(c) and (d).
- (ii) If a recommending medical provider makes the indication described in Subsection (3)(c)(i):
- (A) the department shall add a label to the relevant medical cannabis patient card indicating the cardholder's need for assistance;
- (B) any adult who is 18 years old or older and who is physically present with the cardholder at the time the cardholder needs to use the recommended medical cannabis treatment may handle the medical cannabis treatment and any associated medical cannabis device as needed to assist the cardholder in administering the recommended medical cannabis treatment; and
- (C) an individual of any age who is physically present with the cardholder in the event of an emergency medical condition, as that term is defined in Section 31A-1-301, may handle the medical cannabis treatment and any associated medical cannabis device as needed to assist the cardholder in administering the recommended medical cannabis treatment.
 - (iii) A non-cardholding individual acting under Subsection (3)(c)(ii)(B) or (C) may not:
 - (A) ingest or inhale medical cannabis;
- 3963 (B) possess, transport, or handle medical cannabis or a medical cannabis device outside 3964 of the immediate area where the cardholder is present or with an intent other than to provide

3965	assistance	to	the	cardholder;	or

- (C) possess, transport, or handle medical cannabis or a medical cannabis device when the cardholder is not in the process of being dosed with medical cannabis.
- (4) To recommend a medical cannabis treatment to a patient or to renew a recommendation, a recommending medical provider shall:
- (a) before recommending or renewing a recommendation for medical cannabis in a medicinal dosage form or a cannabis product in a medicinal dosage form:
- (i) verify the patient's and, for a minor patient, the minor patient's parent or legal guardian's valid form of identification described in Subsection (3)(a);
- (ii) review any record related to the patient and, for a minor patient, the patient's parent or legal guardian in:
 - (A) for a qualified medical provider, the state electronic verification system; and
 - (B) the controlled substance database created in Section 58-37f-201; and
- (iii) consider the recommendation in light of the patient's qualifying condition, history of substance use or opioid use disorder, and history of medical cannabis and controlled substance use during an initial face-to-face visit with the patient; and
 - (b) state in the recommending medical provider's recommendation that the patient:
 - (i) suffers from a qualifying condition, including the type of qualifying condition; and
- (ii) may benefit from treatment with cannabis in a medicinal dosage form or a cannabis product in a medicinal dosage form.
- (5) (a) Except as provided in Subsection (5)(b) or (c), a medical cannabis card that the department issues under this section is valid for the lesser of:
 - (i) an amount of time that the recommending medical provider determines; or
- (ii) (A) six months for the first issuance, and, except as provided in Subsection (5)(a)(ii)(B), for a renewal; or
- (B) for a renewal, one year if, after at least one year following the issuance of the original medical cannabis card, the recommending medical provider determines that the patient has been stabilized on the medical cannabis treatment and a one-year renewal period is justified.
- (b) (i) A medical cannabis card that the department issues in relation to a terminal illness described in Section [26-61a-104] 26B-4-203 expires after one year.

(ii) The recommending medical provider may revoke a recommendation that the provider made in relation to a terminal illness described in Section 26-61a-104 if the medical cannabis cardholder no longer has the terminal illness.

- (c) A medical cannabis card that the department issues in relation to acute pain as described in Section [26-61a-104] 26B-4-203 expires 30 days after the day on which the department first issues a conditional or full medical cannabis card.
- (6) (a) A medical cannabis patient card or a medical cannabis guardian card is renewable if:
- (i) at the time of renewal, the cardholder meets the requirements of Subsection (2)(a) or (b); or
- (ii) the cardholder received the medical cannabis card through the recommendation of the Compassionate Use Board under Section [26-61a-105] 26B-1-421.
- (b) The recommending medical provider who made the underlying recommendation for the card of a cardholder described in Subsection (6)(a) may renew the cardholder's card through phone or video conference with the cardholder, at the recommending medical provider's discretion.
- (c) Before having access to a renewed card, a cardholder under Subsection (2)(a) or (b) shall pay to the department a renewal fee in an amount that:
- (i) subject to Subsection [26-61a-109] 26B-1-310(5), the department sets in accordance with Section 63J-1-504; and
- (ii) may not exceed the cost of the relatively lower administrative burden of renewal in comparison to the original application process.
- (d) If a minor meets the requirements of Subsection (2)(c), the minor's provisional patient card renews automatically at the time the minor's parent or legal guardian renews the parent or legal guardian's associated medical cannabis guardian card.
- (7) (a) A cardholder under this section shall carry the cardholder's valid medical cannabis card with the patient's name.
- (b) (i) A medical cannabis patient cardholder or a provisional patient cardholder may purchase, in accordance with this [chapter] part and the recommendation underlying the card, cannabis in a medicinal dosage form, a cannabis product in a medicinal dosage form, or a medical cannabis device.

(ii) A cardholder under this section may possess or transport, in accordance with this [chapter] part and the recommendation underlying the card, cannabis in a medicinal dosage form, a cannabis product in a medicinal dosage form, or a medical cannabis device.

- (iii) To address the qualifying condition underlying the medical cannabis treatment recommendation:
- (A) a medical cannabis patient cardholder or a provisional patient cardholder may use cannabis in a medicinal dosage form, a medical cannabis product in a medicinal dosage form, or a medical cannabis device; and
- (B) a medical cannabis guardian cardholder may assist the associated provisional patient cardholder with the use of cannabis in a medicinal dosage form, a medical cannabis product in a medicinal dosage form, or a medical cannabis device.
- (8) The department may revoke a medical cannabis card that the department issues under this section if the cardholder:
 - (a) violates this [chapter] part; or

- (b) is convicted under state or federal law of, after March 17, 2021, a drug distribution offense.
- (9) The department shall establish by rule, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, a process to provide information regarding the following to an individual receiving a medical cannabis card:
 - (a) risks associated with medical cannabis treatment;
- (b) the fact that a condition's listing as a qualifying condition does not suggest that medical cannabis treatment is an effective treatment or cure for that condition, as described in Subsection [26-61a-104] 26B-4-203(1); and
 - (c) other relevant warnings and safety information that the department determines.
- (10) The department may establish procedures by rule, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to implement the application and issuance provisions of this section.
- (11) (a) On or before September 1, 2021, the department shall establish by rule, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, a process to allow an individual from another state to register with the department in order to purchase medical cannabis or a medical cannabis device from a medical cannabis pharmacy while the individual

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- 4059 (b) The department may only provide the registration process described in Subsection 4060 (11)(a):
 - (i) to a nonresident patient; and
 - (ii) for no more than two visitation periods per calendar year of up to 21 calendar days per visitation period.
 - (12) (a) A person may submit to the department a request to conduct a research study using medical cannabis cardholder data that the state electronic verification system contains.
 - (b) The department shall review a request described in Subsection (12)(a) to determine whether an institutional review board, as that term is defined in Section [26-61-102] <u>26B-4-</u>201, could approve the research study.
 - (c) At the time an individual applies for a medical cannabis card, the department shall notify the individual:
 - (i) of how the individual's information will be used as a cardholder;
 - (ii) that by applying for a medical cannabis card, unless the individual withdraws consent under Subsection (12)(d), the individual consents to the use of the individual's information for external research; and
 - (iii) that the individual may withdraw consent for the use of the individual's information for external research at any time, including at the time of application.
 - (d) An applicant may, through the medical cannabis card application, and a medical cannabis cardholder may, through the state central patient portal, withdraw the applicant's or cardholder's consent to participate in external research at any time.
 - (e) The department may release, for the purposes of a study described in this Subsection (12), information about a cardholder under this section who consents to participate under Subsection (12)(c).
 - (f) If an individual withdraws consent under Subsection (12)(d), the withdrawal of consent:
 - (i) applies to external research that is initiated after the withdrawal of consent; and
 - (ii) does not apply to research that was initiated before the withdrawal of consent.
 - (g) The department may establish standards for a medical research study's validity, by rule made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

4089	(13) The department shall record the issuance or revocation of a medical cannabis card
4090	under this section in the controlled substance database.
4091	Section 72. Section 26B-4-214, which is renumbered from Section 26-61a-202 is
4092	renumbered and amended to read:
4093	[26-61a-202]. <u>26B-4-214.</u> Medical cannabis caregiver card Registration
4094	Renewal Revocation.
4095	(1) (a) A cardholder described in Section 26-61a-201 may designate, through the state
4096	central patient portal, up to two individuals, or an individual and a facility in accordance with
4097	Subsection (1)(b), to serve as a designated caregiver for the cardholder.
4098	(b) (i) Beginning on the earlier of September 1, 2021, or the date on which the
4099	electronic verification system is functionally capable of servicing the designation, a cardholder
4100	described in Section 26-61a-201 may designate one of the following types of facilities as one of
4101	the caregivers described in Subsection (1)(a):
4102	(A) for a patient or resident, an assisted living facility, as that term is defined in Section
4103	26-21-2;
4104	(B) for a patient or resident, a nursing care facility, as that term is defined in Section
4105	26-21-2; or
4106	(C) for a patient, a general acute hospital, as that term is defined in Section 26-21-2.
4107	(ii) A facility may:
4108	(A) assign one or more employees to assist patients with medical cannabis treatment
4109	under the caregiver designation described in this Subsection (1)(b); and
4110	(B) receive a medical cannabis shipment from a medical cannabis pharmacy or a
4111	medical cannabis courier on behalf of the medical cannabis cardholder within the facility who
4112	designated the facility as a caregiver.
4113	(iii) The department shall make rules to regulate the practice of facilities and facility
4114	employees serving as designated caregivers under this Subsection (1)(b).
4115	(c) A parent or legal guardian described in Subsection 26-61a-201(2)(d), in
4116	consultation with the minor and the minor's qualified medical provider, may designate, through
4117	the state central patient portal, up to two individuals to serve as a designated caregiver for the
4118	minor, if the department determines that the parent or legal guardian is not eligible for a

medical cannabis guardian card under Section 26-61a-201.

(d) (i) Beginning on the earlier of September 1, 2022, or the date on which the electronic verification system is functionally capable of facilitating a conditional medical cannabis caregiver card under this Subsection (1)(d), upon the entry of a caregiver designation under Subsection (1) by a patient with a terminal illness described in Section 26-61a-104, the department shall issue to the designated caregiver an electronic conditional medical cannabis caregiver card, in accordance with this Subsection (1)(d).

- (ii) A conditional medical cannabis caregiver card is valid for the lesser of:
- (A) 60 days; or

- (B) the day on which the department completes the department's review and issues a medical cannabis caregiver card under Subsection (1)(a), denies the patient's medical cannabis caregiver card application, or revokes the conditional medical cannabis caregiver card under Subsection (8).
- (iii) The department may issue a conditional medical cannabis card to an individual applying for a medical cannabis patient card for which approval of the Compassionate Use Board is not required.
- (iv) An individual described in Subsection (1)(b)(iii) has the rights, restrictions, and obligations under law applicable to a holder of the medical cannabis card for which the individual applies and for which the department issues the conditional medical cannabis card.
- (2) An individual that the department registers as a designated caregiver under this section and a facility described in Subsection (1)(b):
- (a) for an individual designated caregiver, may carry a valid medical cannabis caregiver card;
- (b) in accordance with this [chapter] part, may purchase, possess, transport, or assist the patient in the use of cannabis in a medicinal dosage form, a cannabis product in a medicinal dosage form, or a medical cannabis device on behalf of the designating medical cannabis cardholder;
- (c) may not charge a fee to an individual to act as the individual's designated caregiver or for a service that the designated caregiver provides in relation to the role as a designated caregiver; and
- (d) may accept reimbursement from the designating medical cannabis cardholder for direct costs the designated caregiver incurs for assisting with the designating cardholder's

4151	medicinal use of cannabis.
4152	(3) (a) The department shall:
4153	(i) within 15 days after the day on which an individual submits an application in
4154	compliance with this section, issue a medical cannabis card to the applicant if the applicant:
4155	(A) is designated as a caregiver under Subsection (1);
4156	(B) is eligible for a medical cannabis caregiver card under Subsection (4); and
4157	(C) complies with this section; and
4158	(ii) notify the Department of Public Safety of each individual that the department
4159	registers as a designated caregiver.
4160	(b) The department shall ensure that a medical cannabis caregiver card contains the
4161	information described in Subsections (5)(b) and (3)(c)(i).
4162	(c) If a cardholder described in Section 26-61a-201 designates an individual as a
4163	caregiver who already holds a medical cannabis caregiver card, the individual with the medical
4164	cannabis caregiver card:
4165	(i) shall report to the department the information required of applicants under
4166	Subsection (5)(b) regarding the new designation;
4167	(ii) if the individual makes the report described in Subsection (3)(c)(i), is not required
4168	to file an application for another medical cannabis caregiver card;
4169	(iii) may receive an additional medical cannabis caregiver card in relation to each
4170	additional medical cannabis patient who designates the caregiver; and
4171	(iv) is not subject to an additional background check.
4172	(4) An individual is eligible for a medical cannabis caregiver card if the individual:
4173	(a) is at least 21 years old;
4174	(b) is a Utah resident;
4175	(c) pays to the department a fee in an amount that, subject to Subsection
4176	26-61a-109(5), the department sets in accordance with Section 63J-1-504, plus the cost of the
4177	criminal background check described in Section 26-61a-203;
4178	(d) signs an acknowledgment stating that the applicant received the information
4179	described in Subsection 26-61a-201(9); and
4180	(e) has not been convicted of a misdemeanor or felony drug distribution offense that is
4181	a felony under either state or federal law, unless the individual completes any imposed sentence

4182	two or more years before the day on which the individual submits the application.
4183	(5) An eligible applicant for a medical cannabis caregiver card shall:
4184	(a) submit an application for a medical cannabis caregiver card to the department
4185	through an electronic application connected to the state electronic verification system; and
4186	(b) submit the following information in the application described in Subsection (5)(a):
4187	(i) the applicant's name, gender, age, and address;
4188	(ii) the name, gender, age, and address of the cardholder described in Section
4189	26-61a-201 who designated the applicant;
4190	(iii) if a medical cannabis guardian cardholder designated the caregiver, the name,
4191	gender, and age of the minor receiving a medical cannabis treatment in relation to the medical
4192	cannabis guardian cardholder; and
4193	(iv) any additional information that the department requests to assist in matching the
4194	application with the designating medical cannabis patient.
4195	(6) Except as provided in Subsection (6)(b), a medical cannabis caregiver card that the
4196	department issues under this section is valid for the lesser of:
4197	(a) an amount of time that the cardholder described in Section 26-61a-201 who
4198	designated the caregiver determines; or
4199	(b) the amount of time remaining before the card of the cardholder described in Section
4200	26-61a-201 expires.
4201	(7) (a) If a designated caregiver meets the requirements of Subsection (4), the
4202	designated caregiver's medical cannabis caregiver card renews automatically at the time the
4203	cardholder described in Section 26-61a-201 who designated the caregiver:
4204	(i) renews the cardholder's card; and
4205	(ii) renews the caregiver's designation, in accordance with Subsection (7)(b).
4206	(b) The department shall provide a method in the card renewal process to allow a
4207	cardholder described in Section 26-61a-201 who has designated a caregiver to:
4208	(i) signify that the cardholder renews the caregiver's designation;
4209	(ii) remove a caregiver's designation; or
4210	(iii) designate a new caregiver.
4211	(8) The department may revoke a medical cannabis caregiver card if the designated

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caregiver:

4213	(a) violates this [chapter] <u>part</u> ; or
4214	(b) is convicted under state or federal law of:
4215	(i) a felony drug distribution offense; or
4216	(ii) after December 3, 2018, a misdemeanor drug distribution offense.
4217	(9) The department shall record the issuance or revocation of a medical cannabis card
4218	under this section in the controlled substance database.
4219	Section 73. Section 26B-4-215, which is renumbered from Section 26-61a-203 is
4220	renumbered and amended to read:
4221	[26-61a-203]. <u>26B-4-215.</u> Designated caregiver Guardian Criminal
4222	background check.
4223	(1) Except for an applicant reapplying for a medical cannabis card within less than one
4224	year after the expiration of the applicant's previous medical cannabis card, each applicant for a
4225	medical cannabis guardian card under Section [26-61a-201] <u>26B-4-213</u> or a medical cannabis
4226	caregiver card under Section [26-61a-202] <u>26B-4-214</u> shall:
4227	(a) submit to the department, at the time of application:
4228	(i) a fingerprint card in a form acceptable to the Department of Public Safety; and
4229	(ii) a signed waiver in accordance with Subsection 53-10-108(4) acknowledging the
4230	registration of the applicant's fingerprints in the Federal Bureau of Investigation Next
4231	Generation Identification System's Rap Back Service; and
4232	(b) consent to a fingerprint background check by:
4233	(i) the Bureau of Criminal Identification; and
4234	(ii) the Federal Bureau of Investigation.
4235	(2) The Bureau of Criminal Identification shall:
4236	(a) check the fingerprints the applicant submits under Subsection (1)(a) against the
4237	applicable state, regional, and national criminal records databases, including the Federal
4238	Bureau of Investigation Next Generation Identification System;
4239	(b) report the results of the background check to the department;
4240	(c) maintain a separate file of fingerprints that applicants submit under Subsection
4241	(1)(a) for search by future submissions to the local and regional criminal records databases,
4242	including latent prints;
4243	(d) request that the fingerprints be retained in the Federal Bureau of Investigation Next

4244	Generation Identification System's Rap Back Service for search by future submissions to	
4245	national criminal records databases, including the Next Generation Identification System and	
4246	latent prints; and	
4247	(e) establish a privacy risk mitigation strategy to ensure that the department only	
4248	receives notifications for an individual with whom the department maintains an authorizing	
4249	relationship.	
4250	(3) The department shall:	
4251	(a) assess an applicant who submits fingerprints under Subsection (1)(a) a fee in an	
4252	amount that the department sets in accordance with Section 63J-1-504 for the services that the	
4253	Bureau of Criminal Identification or another authorized agency provides under this section; and	
4254	(b) remit the fee described in Subsection (3)(a) to the Bureau of Criminal	
4255	Identification.	
4256	Section 74. Section 26B-4-216, which is renumbered from Section 26-61a-204 is	
4257	renumbered and amended to read:	
4258	[26-61a-204]. <u>26B-4-216.</u> Medical cannabis card Patient and designated	
4259	caregiver requirements Rebuttable presumption.	
4260	(1) (a) A medical cannabis cardholder who possesses medical cannabis that the	
4261	cardholder purchased under this [chapter] part:	
4262	(i) shall carry:	
4263	(A) at all times the cardholder's medical cannabis card; and	
4264	(B) with the medical cannabis, a label that identifies that the medical cannabis was sold	
4265	from a licensed medical cannabis pharmacy and includes an identification number that links the	
4266	medical cannabis to the inventory control system;	
4267	(ii) may possess up to the legal dosage limit of:	
4268	(A) unprocessed cannabis in medicinal dosage form; and	
4269	(B) a cannabis product in medicinal dosage form;	
4270	(iii) may not possess more medical cannabis than described in Subsection (1)(a)(ii);	
4271	(iv) may only possess the medical cannabis in the container in which the cardholder	
4272	received the medical cannabis from the medical cannabis pharmacy; and	
4273	(v) may not alter or remove any label described in Section 4-41a-602 from the	
4274	container described in Subsection (1)(a)(iv).	

4275	(b) Except as provided in Subsection (1)(c) or (e), a medical cannabis cardholder who
4276	possesses medical cannabis in violation of Subsection (1)(a) is:
4277	(i) guilty of an infraction; and
4278	(ii) subject to a \$100 fine.
4279	(c) A medical cannabis cardholder or a nonresident patient who possesses medical
4280	cannabis in an amount that is greater than the legal dosage limit and equal to or less than twice
4281	the legal dosage limit is:
4282	(i) for a first offense:
4283	(A) guilty of an infraction; and
4284	(B) subject to a fine of up to \$100; and
4285	(ii) for a second or subsequent offense:
4286	(A) guilty of a class B misdemeanor; and
4287	(B) subject to a fine of \$1,000.
4288	(d) An individual who is guilty of a violation described in Subsection (1)(b) or (c) is
4289	not guilty of a violation of Title 58, Chapter 37, Utah Controlled Substances Act, for the
4290	conduct underlying the penalty described in Subsection (1)(b) or (c).
4291	(e) A nonresident patient who possesses medical cannabis that is not in a medicinal
4292	dosage form is:
4293	(i) for a first offense:
4294	(A) guilty of an infraction; and
4295	(B) subject to a fine of up to \$100; and
4296	(ii) for a second or subsequent offense, is subject to the penalties described in Title 58,
4297	Chapter 37, Utah Controlled Substances Act.
4298	(f) A medical cannabis cardholder or a nonresident patient who possesses medical
4299	cannabis in an amount that is greater than twice the legal dosage limit is subject to the penalties
4300	described in Title 58, Chapter 37, Utah Controlled Substances Act.
4301	(2) (a) As used in this Subsection (2), "emergency medical condition" means the same
4302	as that term is defined in Section 31A-1-301.
4303	(b) Except as described in Subsection (2)(c), a medical cannabis patient cardholder, a
4304	provisional patient cardholder, or a nonresident patient may not use, in public view, medical

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cannabis or a cannabis product.

4306 (c) In the event of an emergency medical condition, an individual described in 4307 Subsection (2)(b) may use, and the holder of a medical cannabis guardian card or a medical 4308 cannabis caregiver card may administer to the cardholder's charge, in public view, cannabis in a 4309 medicinal dosage form or a cannabis product in a medicinal dosage form. 4310 (d) An individual described in Subsection (2)(b) who violates Subsection (2)(b) is: 4311 (i) for a first offense: (A) guilty of an infraction; and 4312 4313 (B) subject to a fine of up to \$100; and 4314 (ii) for a second or subsequent offense: 4315 (A) guilty of a class B misdemeanor; and 4316 (B) subject to a fine of \$1,000. 4317 (3) If a medical cannabis cardholder carrying the cardholder's card possesses cannabis 4318 in a medicinal dosage form or a cannabis product in compliance with Subsection (1), or a medical cannabis device that corresponds with the cannabis or cannabis product: 4319 4320 (a) there is a rebuttable presumption that the cardholder possesses the cannabis, 4321 cannabis product, or medical cannabis device legally; and (b) there is no probable cause, based solely on the cardholder's possession of the 4322 4323 cannabis in medicinal dosage form, cannabis product in medicinal dosage form, or medical 4324 cannabis device, to believe that the cardholder is engaging in illegal activity. 4325 (4) (a) If a law enforcement officer stops an individual who possesses cannabis in a 4326 medicinal dosage form, a cannabis product in a medicinal dosage form, or a medical cannabis 4327 device, and the individual represents to the law enforcement officer that the individual holds a 4328 valid medical cannabis card, but the individual does not have the medical cannabis card in the 4329 individual's possession at the time of the stop by the law enforcement officer, the law 4330 enforcement officer shall attempt to access the state electronic verification system to determine 4331 whether the individual holds a valid medical cannabis card. (b) If the law enforcement officer is able to verify that the individual described in 4332 4333 Subsection (4)(a) is a valid medical cannabis cardholder, the law enforcement officer: 4334 (i) may not arrest or take the individual into custody for the sole reason that the

individual is in possession of cannabis in a medicinal dosage form, a cannabis product in a

medicinal dosage form, or a medical cannabis device; and

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4337	(ii) may not seize the cannabis, cannabis product, or medical cannabis device.
4338	Section 75. Section 26B-4-217, which is renumbered from Section 26-61a-401 is
4339	renumbered and amended to read:
4340	[26-61a-401]. <u>26B-4-217.</u> Medical cannabis pharmacy agent
4341	Registration.
4342	(1) An individual may not serve as a medical cannabis pharmacy agent of a medical
4343	cannabis pharmacy unless the department registers the individual as a medical cannabis
4344	pharmacy agent.
4345	(2) A recommending medical provider may not act as a medical cannabis pharmacy
4346	agent, have a financial or voting interest of 2% or greater in a medical cannabis pharmacy, or
4347	have the power to direct or cause the management or control of a medical cannabis pharmacy.
4348	(3) (a) The department shall, within 15 days after the day on which the department
4349	receives a complete application from a medical cannabis pharmacy on behalf of a prospective
4350	medical cannabis pharmacy agent, register and issue a medical cannabis pharmacy agent
4351	registration card to the prospective agent if the medical cannabis pharmacy:
4352	(i) provides to the department:
4353	(A) the prospective agent's name and address;
4354	(B) the name and location of the licensed medical cannabis pharmacy where the
4355	prospective agent seeks to act as the medical cannabis pharmacy agent; and
4356	(C) the submission required under Subsection (3)(b); and
4357	(ii) pays a fee to the department in an amount that, subject to Subsection [26-61a-109]
4358	26B-1-310(5), the department sets in accordance with Section 63J-1-504.
4359	(b) Except for an applicant reapplying for a medical cannabis pharmacy agent
4360	registration card within less than one year after the expiration of the applicant's previous
4361	medical cannabis pharmacy agent registration card, each prospective agent described in
4362	Subsection (3)(a) shall:
4363	(i) submit to the department:
4364	(A) a fingerprint card in a form acceptable to the Department of Public Safety; and
4365	(B) a signed waiver in accordance with Subsection 53-10-108(4) acknowledging the
4366	registration of the prospective agent's fingerprints in the Federal Bureau of Investigation Next
4367	Generation Identification System's Rap Back Service: and

4368	(ii) consent to a fingerprint background check by:
4369	(A) the Bureau of Criminal Identification; and
4370	(B) the Federal Bureau of Investigation.
4371	(c) The Bureau of Criminal Identification shall:
4372	(i) check the fingerprints the prospective agent submits under Subsection (3)(b) against
4373	the applicable state, regional, and national criminal records databases, including the Federal
4374	Bureau of Investigation Next Generation Identification System;
4375	(ii) report the results of the background check to the department;
4376	(iii) maintain a separate file of fingerprints that prospective agents submit under
4377	Subsection (3)(b) for search by future submissions to the local and regional criminal records
4378	databases, including latent prints;
4379	(iv) request that the fingerprints be retained in the Federal Bureau of Investigation Next
4380	Generation Identification System's Rap Back Service for search by future submissions to
4381	national criminal records databases, including the Next Generation Identification System and
4382	latent prints; and
4383	(v) establish a privacy risk mitigation strategy to ensure that the department only
4384	receives notifications for an individual with whom the department maintains an authorizing
4385	relationship.
4386	(d) The department shall:
4387	(i) assess an individual who submits fingerprints under Subsection (3)(b) a fee in an
4388	amount that the department sets in accordance with Section 63J-1-504 for the services that the
4389	Bureau of Criminal Identification or another authorized agency provides under this section; and
4390	(ii) remit the fee described in Subsection (3)(d)(i) to the Bureau of Criminal
4391	Identification.
4392	(4) The department shall designate, on an individual's medical cannabis pharmacy
4393	agent registration card the name of the medical cannabis pharmacy where the individual is
4394	registered as an agent.
4395	(5) A medical cannabis pharmacy agent shall comply with a certification standard that
4396	the department develops in collaboration with the Division of Professional Licensing and the

Board of Pharmacy, or a third-party certification standard that the department designates by

rule, in collaboration with the Division of Professional Licensing and the Board of Pharmacy

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4399	and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.
4400	(6) The department shall ensure that the certification standard described in Subsection
4401	(5) includes training in:
4402	(a) Utah medical cannabis law; and
4403	(b) medical cannabis pharmacy best practices.
4404	(7) The department may revoke the medical cannabis pharmacy agent registration card
4405	of, or refuse to issue a medical cannabis pharmacy agent registration card to, an individual
4406	who:
4407	(a) violates the requirements of this [chapter] part; or
4408	(b) is convicted under state or federal law of:
4409	(i) a felony within the preceding 10 years; or
4410	(ii) after December 3, 2018, a misdemeanor for drug distribution.
4411	(8) (a) A medical cannabis pharmacy agent registration card expires two years after the
4412	day on which the department issues or renews the card.
4413	(b) A medical cannabis pharmacy agent may renew the agent's registration card if the
4414	agent:
4415	(i) is eligible for a medical cannabis pharmacy agent registration card under this
4416	section;
4417	(ii) certifies to the department in a renewal application that the information in
4418	Subsection (3)(a) is accurate or updates the information; and
4419	(iii) pays to the department a renewal fee in an amount that:
4420	(A) subject to Subsection [26-61a-109] 26B-1-310(5), the department sets in
4421	accordance with Section 63J-1-504; and
4422	(B) may not exceed the cost of the relatively lower administrative burden of renewal in
4423	comparison to the original application process.
4424	(9) (a) As a condition precedent to registration and renewal of a medical cannabis
4425	pharmacy agent registration card, a medical cannabis pharmacy agent shall:
4426	(i) complete at least one hour of continuing education regarding patient privacy and
4427	federal health information privacy laws that is offered by the department under Subsection
4428	(9)(b) or an accredited or approved continuing education provider that the department

recognizes as offering continuing education appropriate for the medical cannabis pharmacy

4430 practice; and

- (ii) make a continuing education report to the department in accordance with a process that the department establishes by rule, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, and in collaboration with the Division of Professional Licensing and the Board of Pharmacy.
- (b) The department may, in consultation with the Division of Professional Licensing, develop the continuing education described in this Subsection (9).
- (c) The pharmacist-in-charge described in Section [26-61a-403] 26B-4-219 shall ensure that each medical cannabis pharmacy agent working in the medical cannabis pharmacy who has access to the state electronic verification system is in compliance with this Subsection (9).
- Section 76. Section **26B-4-218**, which is renumbered from Section 26-61a-402 is renumbered and amended to read:
- [26-61a-402]. <u>26B-4-218.</u> Medical cannabis pharmacy agent registration card -- Rebuttable presumption.
- (1) A medical cannabis pharmacy agent shall carry the individual's medical cannabis pharmacy agent registration card with the individual at all times when:
 - (a) the individual is on the premises of a medical cannabis pharmacy; and
- (b) the individual is transporting cannabis in a medicinal dosage form, a cannabis product in a medicinal dosage form, or a medical cannabis device between a cannabis production establishment and a medical cannabis pharmacy.
- (2) If an individual handling, at a medical cannabis pharmacy, cannabis in a medicinal dosage form, a cannabis product in a medicinal dosage form, or a medical cannabis device or transporting cannabis in a medicinal dosage form, a cannabis product in a medicinal dosage form, or a medical cannabis device, possesses the cannabis, cannabis product, or medical cannabis device in compliance with Subsection (1):
- (a) there is a rebuttable presumption that the individual possesses the cannabis, cannabis product, or medical cannabis device legally; and
- (b) there is no probable cause, based solely on the individual's possession of the cannabis in medicinal dosage form, cannabis product in medicinal dosage form, or medical cannabis device in compliance with Subsection (1), that the individual is engaging in illegal

4401	activity.
4462	(3) (a) A medical cannabis pharmacy agent who fails to carry the agent's medical
4463	cannabis pharmacy agent registration card in accordance with Subsection (1) is:
4464	(i) for a first or second offense in a two-year period:
4465	(A) guilty of an infraction; and
4466	(B) is subject to a \$100 fine; or
4467	(ii) for a third or subsequent offense in a two-year period:
4468	(A) guilty of a class C misdemeanor; and
4469	(B) subject to a \$750 fine.
4470	(b) (i) The prosecuting entity shall notify the department and the relevant medical
4471	cannabis pharmacy of each conviction under Subsection (3)(a).
4472	(ii) For each violation described in Subsection (3)(a)(ii), the department may assess the
4473	relevant medical cannabis pharmacy a fine of up to \$5,000, in accordance with a fine schedule
4474	that the department establishes by rule in accordance with Title 63G, Chapter 3, Utah
4475	Administrative Rulemaking Act.
4476	(c) An individual who is guilty of a violation described in Subsection (3)(a) is not
4477	guilty of a violation of Title 58, Chapter 37, Utah Controlled Substances Act, for the conduct
4478	underlying the violation described in Subsection (3)(a).
4479	Section 77. Section 26B-4-219, which is renumbered from Section 26-61a-403 is
4480	renumbered and amended to read:
4481	[26-61a-403]. <u>26B-4-219.</u> Pharmacy medical providers Registration
4482	Continuing education.
4483	(1) (a) A medical cannabis pharmacy:
4484	(i) shall employ a pharmacist who is licensed under Title 58, Chapter 17b, Pharmacy
4485	Practice Act, as a pharmacy medical provider;
4486	(ii) may employ a physician who has the authority to write a prescription and is
4487	licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Title 58, Chapter 68, Utah
4488	Osteopathic Medical Practice Act, as a pharmacy medical provider;
4489	(iii) shall ensure that a pharmacy medical provider described in Subsection (1)(a)(i)
4490	works onsite during all business hours; and
4491	(iv) shall designate one pharmacy medical provider described in Subsection (1)(a)(i) as

the pharmacist-in-charge to oversee the operation of and generally supervise the medical cannabis pharmacy.

- (b) An individual may not serve as a pharmacy medical provider unless the department registers the individual as a pharmacy medical provider in accordance with Subsection (2).
- (2) (a) The department shall, within 15 days after the day on which the department receives an application from a medical cannabis pharmacy on behalf of a prospective pharmacy medical provider, register and issue a pharmacy medical provider registration card to the prospective pharmacy medical provider if the medical cannabis pharmacy:
 - (i) provides to the department:

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- (A) the prospective pharmacy medical provider's name and address;
- (B) the name and location of the licensed medical cannabis pharmacy where the prospective pharmacy medical provider seeks to act as a pharmacy medical provider;
- (C) a report detailing the completion of the continuing education requirement described in Subsection (3); and
- (D) evidence that the prospective pharmacy medical provider is a pharmacist who is licensed under Title 58, Chapter 17b, Pharmacy Practice Act, or a physician who has the authority to write a prescription and is licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; and
- (ii) pays a fee to the department in an amount that, subject to Subsection [26-61a-109] 26B-1-310(5), the department sets in accordance with Section 63J-1-504.
- (b) The department may not register a recommending medical provider or a state central patient portal medical provider as a pharmacy medical provider.
- (3) (a) A pharmacy medical provider shall complete the continuing education described in this Subsection (3) in the following amounts:
 - (i) as a condition precedent to registration, four hours; and
 - (ii) as a condition precedent to renewal of the registration, four hours every two years.
 - (b) In accordance with Subsection (3)(a), the pharmacy medical provider shall:
- 4519 (i) complete continuing education:
- 4520 (A) regarding the topics described in Subsection (3)(d); and
- 4521 (B) offered by the department under Subsection (3)(c) or an accredited or approved continuing education provider that the department recognizes as offering continuing education

4523	appropriate for the medical cannabis pharmacy practice; and
4524	(ii) make a continuing education report to the department in accordance with a process
4525	that the department establishes by rule, in accordance with Title 63G, Chapter 3, Utah
4526	Administrative Rulemaking Act, and in collaboration with the Division of Professional
4527	Licensing and:
4528	(A) for a pharmacy medical provider who is licensed under Title 58, Chapter 17b,
4529	Pharmacy Practice Act, the Board of Pharmacy;
4530	(B) for a pharmacy medical provider licensed under Title 58, Chapter 67, Utah Medical
4531	Practice Act, the Physicians Licensing Board; and
4532	(C) for a pharmacy medical provider licensed under Title 58, Chapter 68, Utah
4533	Osteopathic Medical Practice Act, the Osteopathic Physician and Surgeon's Licensing Board.
4534	(c) The department may, in consultation with the Division of Professional Licensing,
4535	develop the continuing education described in this Subsection (3).
4536	(d) The continuing education described in this Subsection (3) may discuss:
4537	(i) the provisions of this [chapter] part;
4538	(ii) general information about medical cannabis under federal and state law;
4539	(iii) the latest scientific research on the endocannabinoid system and medical cannabis,
4540	including risks and benefits;
4541	(iv) recommendations for medical cannabis as it relates to the continuing care of a
4542	patient in pain management, risk management, potential addiction, and palliative care; or
4543	(v) best practices for recommending the form and dosage of a medical cannabis
4544	product based on the qualifying condition underlying a medical cannabis recommendation.
4545	(4) (a) A pharmacy medical provider registration card expires two years after the day
4546	on which the department issues or renews the card.
4547	(b) A pharmacy medical provider may renew the provider's registration card if the
4548	provider:
4549	(i) is eligible for a pharmacy medical provider registration card under this section;
4550	(ii) certifies to the department in a renewal application that the information in
4551	Subsection (2)(a) is accurate or updates the information;
4552	(iii) submits a report detailing the completion of the continuing education requirement
4553	described in Subsection (3); and

4554	(iv) pays to the department a renewal fee in an amount that:
4555	(A) subject to Subsection $\left[\frac{26-61a-109}{26B-1-310}\right]$ 26B-1-310(5), the department sets in
4556	accordance with Section 63J-1-504; and
4557	(B) may not exceed the cost of the relatively lower administrative burden of renewal in
4558	comparison to the original application process.
4559	(5) (a) Except as provided in Subsection (5)(b), a person may not advertise that the
4560	person or another person dispenses medical cannabis.
4561	(b) Notwithstanding Subsection (5)(a) and subject to Section [26-61a-116] 26B-4-223,
4562	a registered pharmacy medical provider may advertise the following:
4563	(i) a green cross;
4564	(ii) that the person is registered as a pharmacy medical provider and dispenses medical
4565	cannabis; or
4566	(iii) a scientific study regarding medical cannabis use.
4567	Section 78. Section 26B-4-220, which is renumbered from Section 26-61a-701 is
4568	renumbered and amended to read:
4569	[26-61a-701]. <u>26B-4-220.</u> Enforcement Misdemeanor.
4570	(1) Except as provided in Title 4, Chapter 41a, Cannabis Production Establishments,
4571	and Sections [26-61a-502, 26-61a-605, and 26-61a-607] <u>26B-4-230, 26B-4-240, and 26B-4-</u>
4572	242, it is unlawful for a medical cannabis cardholder to sell or otherwise give to another
4573	medical cannabis cardholder cannabis in a medicinal dosage form, a cannabis product in a
4574	medicinal dosage form, a medical cannabis device, or any cannabis residue remaining in or
4575	from a medical cannabis device.
4576	(2) (a) Except as provided in Subsection (2)(b), a medical cannabis cardholder who
4577	violates Subsection (1) is:
4578	(i) guilty of a class B misdemeanor; and
4579	(ii) subject to a \$1,000 fine.
4580	(b) An individual is not guilty under Subsection (2)(a) if the individual:
4581	(i) (A) is a designated caregiver; and
4582	(B) gives the product described in Subsection (1) to the medical cannabis cardholder
4583	who designated the individual as a designated caregiver; or
4584	(ii) (A) is a medical cannabis guardian cardholder; and

4585	(B) gives the product described in Subsection (1) to the relevant provisional patient
4586	cardholder.
4587	(c) An individual who is guilty of a violation described in Subsection (2)(a) is not
4588	guilty of a violation of Title 58, Chapter 37, Utah Controlled Substances Act, for the conduct
4589	underlying the violation described in Subsection (2)(a).
4590	Section 79. Section 26B-4-221, which is renumbered from Section 26-61a-702 is
4591	renumbered and amended to read:
4592	[26-61a-702]. <u>26B-4-221.</u> Enforcement Fine Citation.
4593	(1) (a) The department may, for a medical cannabis pharmacy's or a medical cannabis
4594	courier's violation of this [chapter] part or an applicable administrative rule:
4595	(i) revoke the medical cannabis pharmacy or medical cannabis courier license;
4596	(ii) refuse to renew the medical cannabis pharmacy or medical cannabis courier
4597	license; or
4598	(iii) assess the medical cannabis pharmacy or medical cannabis courier an
4599	administrative penalty.
4600	(b) The department may, for a medical cannabis pharmacy agent's or medical cannabis
4601	courier agent's violation of this [chapter] part:
4602	(i) revoke the medical cannabis pharmacy agent or medical cannabis courier agent
4603	registration card;
4604	(ii) refuse to renew the medical cannabis pharmacy agent or medical cannabis courier
4605	agent registration card; or
4606	(iii) assess the medical cannabis pharmacy agent or medical cannabis courier agent an
4607	administrative penalty.
4608	(2) The department shall deposit an administrative penalty imposed under this section
4609	into the General Fund.
4610	(3) For a person subject to an uncontested citation, a stipulated settlement, or a finding
4611	of a violation in an adjudicative proceeding under this section, the department may:
4612	(a) for a fine amount not already specified in law, assess the person a fine of up to
4613	\$5,000 per violation, in accordance with a fine schedule that the department establishes by rule
4614	in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act; or
4615	(b) order the person to cease and desist from the action that creates a violation.

4616	(4) The department may not revoke a medical cannabis pharmacy's license or a medical
4617	cannabis courier's license without first directing the medical cannabis pharmacy or the medical
4618	cannabis courier to appear before an adjudicative proceeding conducted under Title 63G,
4619	Chapter 4, Administrative Procedures Act.
4620	(5) If, within 20 calendar days after the day on which the department issues a citation
4621	for a violation of this chapter, the person that is the subject of the citation fails to request a
4622	hearing to contest the citation, the citation becomes the department's final order.
4623	(6) The department may, for a person who fails to comply with a citation under this
4624	section:
4625	(a) refuse to issue or renew the person's license or agent registration card; or
4626	(b) suspend, revoke, or place on probation the person's license or agent registration
4627	card.
4628	(7) (a) Except where a criminal penalty is expressly provided for a specific violation of
4629	this [chapter] part, if an individual violates a provision of this [chapter] part, the individual is:
4630	(i) guilty of an infraction; and
4631	(ii) subject to a \$100 fine.
4632	(b) An individual who is guilty of a violation described in Subsection (7)(a) is not
4633	guilty of a violation of Title 58, Chapter 37, Utah Controlled Substances Act, for the conduct
4634	underlying the violation described in Subsection (7)(a).
4635	Section 80. Section 26B-4-222, which is renumbered from Section 26-61a-703 is
4636	renumbered and amended to read:
4637	[26-61a-703]. <u>26B-4-222.</u> Report.
4638	(1) By the November interim meeting each year beginning in 2020, the department
4639	shall report to the Health and Human Services Interim Committee on:
4640	(a) the number of applications and renewal applications filed for medical cannabis
4641	cards;
4642	(b) the number of qualifying patients and designated caregivers;
4643	(c) the nature of the debilitating medical conditions of the qualifying patients;
4644	(d) the age and county of residence of cardholders;
4645	(e) the number of medical cannabis cards revoked;
4646	(f) the number of practitioners providing recommendations for qualifying patients;

4647	(g) the number of license applications and renewal license applications received;
4648	(h) the number of licenses the department has issued in each county;
4649	(i) the number of licenses the department has revoked;
4650	(j) the quantity of medical cannabis shipments that the state central patient portal
4651	facilitates;
4652	(k) the number of overall purchases of medical cannabis and medical cannabis products
4653	from each medical cannabis pharmacy;
4654	(l) the expenses incurred and revenues generated from the medical cannabis program;
4655	and
4656	(m) an analysis of product availability in medical cannabis pharmacies.
4657	(2) The department may not include personally identifying information in the report
4658	described in this section.
4659	(3) During the 2022 legislative interim, the department shall report to the working
4660	group described in Section 36-12-8.2 as requested by the working group.
4661	Section 81. Section 26B-4-223, which is renumbered from Section 26-61a-116 is
4662	renumbered and amended to read:
4663	[26-61a-116]. <u>26B-4-223.</u> Advertising.
4664	(1) Except as provided in this [chapter] part, a person may not advertise regarding the
4665	recommendation, sale, dispensing, or transportation of medical cannabis.
4666	(2) Notwithstanding any authorization to advertise regarding medical cannabis under
4667	this [chapter] part, the person advertising may not advertise:
4668	(a) using promotional discounts or incentives;
4669	(b) a particular medical cannabis product, medical cannabis device, or medicinal
4670	dosage form; or
4671	(c) an assurance regarding an outcome related to medical cannabis treatment.
4672	(3) Notwithstanding Subsection (1):
4673	(a) a nonprofit organization that offers financial assistance for medical cannabis
4674	treatment to low-income patients may advertise the organization's assistance if the
4675	advertisement does not relate to a specific medical cannabis pharmacy or a specific medical
4676	cannabis product; and
4677	(b) a medical cannabis pharmacy may provide information regarding subsidies for the

cost of medical cannabis treatment to patients who affirmatively accept receipt of the subsidy information.

- (4) To ensure that the name and logo of a licensee under this [chapter] part have a medical rather than a recreational disposition, the name and logo of the licensee:
 - (a) may include terms and images associated with:
- 4685 "relief," "treatment," and "patient;" or
 - (ii) the plant form of cannabis, including "leaf," "flower," and "bloom";
- 4687 (b) may not include:

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- 4688 (i) any term, statement, design representation, picture, or illustration that is associated with a recreational disposition or that appeals to children;
 - (ii) an emphasis on a psychoactive ingredient;
- 4691 (iii) a specific cannabis strain; or
- 4692 (iv) terms related to recreational marijuana, including "weed," "pot," "reefer," "grass,"
- 4693 "hash," "ganga," "Mary Jane," "high," "buzz," "haze," "stoned," "joint," "bud," "smoke,"
- "euphoria," "dank," "doobie," "kush," "frost," "cookies," "rec," "bake," "blunt," "combust,"
- 4695 "bong," "budtender," "dab," "blaze," "toke," or "420."
- 4696 (5) The department shall define standards for advertising authorized under this chapter, 4697 including names and logos in accordance with Subsection (4), to ensure a medical rather than 4698 recreational disposition.
 - Section 82. Section **26B-4-224**, which is renumbered from Section 26-61a-301 is renumbered and amended to read:
- 4701 [26-61a-301]. 26B-4-224. Medical cannabis pharmacy -- License -- 4702 Eligibility.
 - (1) A person may not operate as a medical cannabis pharmacy without a license that the department issues under this part.
- 4705 (2) (a) (i) Subject to Subsections (4) and (5) and to Section [26-61a-305] 26B-4-228, 4706 the department shall issue a license to operate a medical cannabis pharmacy in accordance with 4707 Title 63G, Chapter 6a, Utah Procurement Code.
- 4708 (ii) The department may not issue a license to operate a medical cannabis pharmacy to

an applicant who is not eligible for a license under this section.

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- (b) An applicant is eligible for a license under this section if the applicant submits to the department:
- (i) subject to Subsection (2)(c), a proposed name and address where the applicant will operate the medical cannabis pharmacy;
 - (ii) the name and address of an individual who:
- 4715 (A) for a publicly traded company, has a financial or voting interest of 2% or greater in the proposed medical cannabis pharmacy;
 - (B) for a privately held company, a financial or voting interest in the proposed medical cannabis pharmacy; or
 - (C) has the power to direct or cause the management or control of a proposed medical cannabis pharmacy;
 - (iii) a statement that the applicant will obtain and maintain a performance bond that a surety authorized to transact surety business in the state issues in an amount of at least \$100,000 for each application that the applicant submits to the department;
 - (iv) an operating plan that:
 - (A) complies with Section [26-61a-304] 26B-4-227;
 - (B) includes operating procedures to comply with the operating requirements for a medical cannabis pharmacy described in this [chapter] part and with a relevant municipal or county law that is consistent with Section [26-61a-507] 26B-4-235; and
 - (C) the department approves;
- 4730 (v) an application fee in an amount that, subject to Subsection [26-61a-109] <u>26B-1-4731</u> 310(5), the department sets in accordance with Section 63J-1-504; and
- (vi) a description of any investigation or adverse action taken by any licensing
 jurisdiction, government agency, law enforcement agency, or court in any state for any
 violation or detrimental conduct in relation to any of the applicant's cannabis-related operations
 or businesses.
 - (c) (i) A person may not locate a medical cannabis pharmacy:
- 4737 (A) within 200 feet of a community location; or
- 4738 (B) in or within 600 feet of a district that the relevant municipality or county has zoned as primarily residential.

(ii) The proximity requirements described in Subsection (2)(c)(i) shall be measured from the nearest entrance to the medical cannabis pharmacy establishment by following the shortest route of ordinary pedestrian travel to the property boundary of the community location or residential area.

- (iii) The department may grant a waiver to reduce the proximity requirements in Subsection (2)(c)(i) by up to 20% if the department determines that it is not reasonably feasible for the applicant to site the proposed medical cannabis pharmacy without the waiver.
- (iv) An applicant for a license under this section shall provide evidence of compliance with the proximity requirements described in Subsection (2)(c)(i).
- (d) The department may not issue a license to an eligible applicant that the department has selected to receive a license until the selected eligible applicant obtains the performance bond described in Subsection (2)(b)(iii).
- (e) If the department receives more than one application for a medical cannabis pharmacy within the same city or town, the department shall consult with the local land use authority before approving any of the applications pertaining to that city or town.
- (3) If the department selects an applicant for a medical cannabis pharmacy license under this section, the department shall:
- (a) charge the applicant an initial license fee in an amount that, subject to Subsection [26-61a-109] 26B-1-310(5), the department sets in accordance with Section 63J-1-504;
- (b) notify the Department of Public Safety of the license approval and the names of each individual described in Subsection (2)(b)(ii); and
- (c) charge the licensee a fee in an amount that, subject to Subsection [26-61a-109] <u>26B-1-310(5)</u>, the department sets in accordance with Section 63J-1-504, for any change in location, ownership, or company structure.
- (4) The department may not issue a license to operate a medical cannabis pharmacy to an applicant if an individual described in Subsection (2)(b)(ii):
 - (a) has been convicted under state or federal law of:
- 4767 (i) a felony; or

- 4768 (ii) after December 3, 2018, a misdemeanor for drug distribution;
- (b) is younger than 21 years old; or
- 4770 (c) after September 23, 2019, until January 1, 2023, is actively serving as a legislator.

(5) (a) If an applicant for a medical cannabis pharmacy license under this section holds a license under Title 4, Chapter 41, Hemp and Cannabinoid Act, the department may not give preference to the applicant based on the applicant's status as a holder of the license.

- (b) If an applicant for a medical cannabis pharmacy license under this section holds a license to operate a cannabis cultivation facility under Title 4, Chapter 41a, Cannabis Production Establishments, the department:
- (i) shall consult with the Department of Agriculture and Food regarding the applicant; and
- (ii) may give consideration to the applicant based on the applicant's status as a holder of a license to operate a cannabis cultivation facility if:
- (A) the applicant demonstrates that a decrease in costs to patients is more likely to result from the applicant's vertical integration than from a more competitive marketplace; and
- (B) the department finds multiple other factors, in addition to the existing license, that support granting the new license.
 - (6) (a) The department may revoke a license under this part:
- (i) if the medical cannabis pharmacy does not begin operations within one year after the day on which the department issues an announcement of the department's intent to award a license to the medical cannabis pharmacy;
- (ii) after the third the same violation of this [chapter] part in any of the licensee's licensed cannabis production establishments or medical cannabis pharmacies;
- (iii) if an individual described in Subsection (2)(b)(ii) is convicted, while the license is active, under state or federal law of:
 - (A) a felony; or

- (B) after December 3, 2018, a misdemeanor for drug distribution;
- (iv) if the licensee fails to provide the information described in Subsection (2)(b)(vi) at the time of application, or fails to supplement the information described in Subsection (2)(b)(vi) with any investigation or adverse action that occurs after the submission of the application within 14 calendar days after the licensee receives notice of the investigation or adverse action;
- (v) if the medical cannabis pharmacy demonstrates a willful or reckless disregard for the requirements of this [chapter] part or the rules the department makes in accordance with

4802 this [chapter] part; or

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(vi) if, after a change of ownership described in Subsection (11)(c), the department determines that the medical cannabis pharmacy no longer meets the minimum standards for licensure and operation of the medical cannabis pharmacy described in this [chapter] part.

- (b) The department shall rescind a notice of an intent to issue a license under this part to an applicant or revoke a license issued under this part if the associated medical cannabis pharmacy does not begin operation on or before June 1, 2021.
- (7) (a) A person who receives a medical cannabis pharmacy license under this [chapter] part, if the municipality or county where the licensed medical cannabis pharmacy will be located requires a local land use permit, shall submit to the department a copy of the licensee's approved application for the land use permit within 120 days after the day on which the department issues the license.
- (b) If a licensee fails to submit to the department a copy the licensee's approved land use permit application in accordance with Subsection (7)(a), the department may revoke the licensee's license.
- (8) The department shall deposit the proceeds of a fee imposed by this section into the Qualified Patient Enterprise Fund.
- (9) The department shall begin accepting applications under this part on or before March 1, 2020.
- (10) (a) The department's authority to issue a license under this section is plenary and is not subject to review.
- (b) Notwithstanding Subsection (2), the decision of the department to award a license to an applicant is not subject to:
 - (i) Title 63G, Chapter 6a, Part 16, Protests; or
 - (ii) Title 63G, Chapter 6a, Part 17, Procurement Appeals Board.
 - (11) (a) A medical cannabis pharmacy license is not transferrable or assignable.
- 4828 (b) A medical cannabis pharmacy shall report in writing to the department no later than
 4829 10 business days before the date of any change of ownership of the medical cannabis
 4830 pharmacy.
 - (c) If the ownership of a medical cannabis pharmacy changes by 50% or more:
- 4832 (i) concurrent with the report described in Subsection (11)(b), the medical cannabis

4833	pharmacy shall submit a new application described in Subsection (2)(b), subject to Subsection
4834	(2)(c);
4835	(ii) within 30 days of the submission of the application, the department shall:
4836	(A) conduct an application review; and
4837	(B) award a license to the medical cannabis pharmacy for the remainder of the term of
4838	the medical cannabis pharmacy's license before the ownership change if the medical cannabis
4839	pharmacy meets the minimum standards for licensure and operation of the medical cannabis
4840	pharmacy described in this [chapter] part; and
4841	(iii) if the department approves the license application, notwithstanding Subsection (3),
4842	the medical cannabis pharmacy shall pay a license fee that the department sets in accordance
4843	with Section 63J-1-504 in an amount that covers the board's cost of conducting the application
4844	review.
4845	Section 83. Section 26B-4-225, which is renumbered from Section 26-61a-302 is
4846	renumbered and amended to read:
4847	[26-61a-302]. <u>26B-4-225.</u> Medical cannabis pharmacy owners and
4848	directors Criminal background checks.
4849	(1) Each applicant to whom the department issues a notice of intent to award a license
4850	to operate as a medical cannabis pharmacy shall submit, before the department may award the
4851	license, from each individual who has a financial or voting interest of 2% or greater in the
4852	applicant or who has the power to direct or cause the management or control of the applicant:
4853	(a) a fingerprint card in a form acceptable to the Department of Public Safety;
4854	(b) a signed waiver in accordance with Subsection 53-10-108(4) acknowledging the
4855	registration of the individual's fingerprints in the Federal Bureau of Investigation Next
4856	Generation Identification System's Rap Back Service; and
4857	(c) consent to a fingerprint background check by:
4858	(i) the Bureau of Criminal Identification; and
4859	(ii) the Federal Bureau of Investigation.
4860	(2) The Bureau of Criminal Identification shall:
4861	(a) check the fingerprints the applicant submits under Subsection (1) against the
4862	applicable state, regional, and national criminal records databases, including the Federal
4863	Bureau of Investigation Next Generation Identification System;

4864	(b) report the results of the background check to the department;
4865	(c) maintain a separate file of fingerprints that applicants submit under Subsection (1)
4866	for search by future submissions to the local and regional criminal records databases, including
4867	latent prints;
4868	(d) request that the fingerprints be retained in the Federal Bureau of Investigation Next
4869	Generation Identification System's Rap Back Service for search by future submissions to
4870	national criminal records databases, including the Next Generation Identification System and
4871	latent prints; and
4872	(e) establish a privacy risk mitigation strategy to ensure that the department only
4873	receives notifications for an individual with whom the department maintains an authorizing
4874	relationship.
4875	(3) The department shall:
4876	(a) assess an individual who submits fingerprints under Subsection (1) a fee in an
4877	amount that the department sets in accordance with Section 63J-1-504 for the services that the
4878	Bureau of Criminal Identification or another authorized agency provides under this section; and
4879	(b) remit the fee described in Subsection (3)(a) to the Bureau of Criminal
4880	Identification.
4881	Section 84. Section 26B-4-226, which is renumbered from Section 26-61a-303 is
4882	renumbered and amended to read:
4883	[26-61a-303]. <u>26B-4-226.</u> Renewal.
4884	(1) The department shall renew a license under this part every year if, at the time of
4885	renewal:
4886	(a) the licensee meets the requirements of Section [26-61a-301] <u>26B-4-224</u> ;
4887	(b) the licensee pays the department a license renewal fee in an amount that, subject to
4888	Subsection [26-61a-109] 26B-1-310(5), the department sets in accordance with Section
4889	63J-1-504; and
4890	(c) if the medical cannabis pharmacy changes the operating plan described in Section
4891	$[\underline{26-61a-304}]$ $\underline{26B-4-227}$ that the department approved under Subsection $[\underline{26-61a-301}]$ $\underline{26B-4-}$
4892	224(2)(b)(iv), the department approves the new operating plan.
4893	(2) (a) If a licensed medical cannabis pharmacy abandons the medical cannabis

pharmacy's license, the department shall publish notice of an available license:

4895 (i) in a newspaper of general circulation for the geographic area in which the medical 4896 cannabis pharmacy license is available; or 4897 (ii) on the Utah Public Notice Website established in Section 63A-16-601. 4898 (b) The department may establish criteria, in collaboration with the Division of 4899 Professional Licensing and the Board of Pharmacy and in accordance with Title 63G, Chapter 4900 3, Utah Administrative Rulemaking Act, to identify the medical cannabis pharmacy actions that 4901 constitute abandonment of a medical cannabis pharmacy license. 4902 (3) If the department has not completed the necessary processes to make a 4903 determination on a license renewal under Subsections (1)(a) and (c) before the expiration of a 4904 license, the department may issue a conditional medical cannabis pharmacy license to a 4905 licensed medical cannabis pharmacy that has applied for license renewal under this section and 4906 paid the fee described in Subsection (1)(b). 4907 Section 85. Section 26B-4-227, which is renumbered from Section 26-61a-304 is 4908 renumbered and amended to read: 4909 [26-61a-304]. 26B-4-227. Operating plan. 4910 A person applying for a medical cannabis pharmacy license shall submit to the 4911 department a proposed operation plan for the medical cannabis pharmacy that complies with 4912 this section and that includes: 4913 (1) a description of the physical characteristics of the proposed facility, including a

- floor plan and an architectural elevation;
 - (2) a description of the credentials and experience of:
 - (a) each officer, director, or owner of the proposed medical cannabis pharmacy, and
 - (b) any highly skilled or experienced prospective employee;
- 4918 (3) the medical cannabis pharmacy's employee training standards;
- 4919 (4) a security plan;

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- (5) a description of the medical cannabis pharmacy's inventory control system. including a plan to make the inventory control system compatible with the state electronic verification system;
- (6) storage protocols, both short- and long-term, to ensure that cannabis is stored in a manner that is sanitary and preserves the integrity of the cannabis; and
 - (7) a description of the proposed medical cannabis pharmacy's strategic plan for

4926 opening the medical cannabis pharmacy, including gauging appropriate timing based on: 4927 (a) the supply of medical cannabis and medical cannabis products, in consultation with 4928 the Department of Agriculture and Food; and 4929 (b) the quantity and condition of the population of medical cannabis cardholders, in 4930 consultation with the department. 4931 Section 86. Section 26B-4-228, which is renumbered from Section 26-61a-305 is 4932 renumbered and amended to read: 4933 [26-61a-305]. 26B-4-228. Maximum number of licenses -- Home delivery 4934 medical cannabis pharmacies. 4935 (1) (a) Except as provided in Subsections (1)(b) or (d), if a sufficient number of 4936 applicants apply, the department shall issue up to 15 medical cannabis pharmacy licenses in 4937 accordance with this section. 4938 (b) If an insufficient number of qualified applicants apply for the available number of 4939 medical cannabis pharmacy licenses, the department shall issue a medical cannabis pharmacy 4940 license to each qualified applicant. 4941 (c) The department may issue the licenses described in Subsection (1)(a) in accordance 4942 with this Subsection (1)(c). 4943 (i) Using one procurement process, the department may issue eight licenses to an initial 4944 group of medical cannabis pharmacies and six licenses to a second group of medical cannabis 4945 pharmacies. 4946 (ii) If the department issues licenses in two phases in accordance with Subsection 4947 (1)(c)(i), the department shall: 4948 (A) divide the state into no less than four geographic regions; 4949 (B) issue at least one license in each geographic region during each phase of issuing 4950 licenses; and 4951 (C) complete the process of issuing medical cannabis pharmacy licenses no later than 4952 July 1, 2020. 4953 (iii) In issuing a 15th license under Subsection (1), the department shall ensure that the 4954 license recipient will locate the medical cannabis pharmacy within Dagget, Duchesne, Uintah,

(d) (i) The department may issue licenses to operate a medical cannabis pharmacy in

Carbon, Sevier, Emery, Grand, or San Juan County.

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addition to the licenses described in Subsection (1)(a) if the department determines, in consultation with the Department of Agriculture and Food and after an annual or more frequent analysis of the current and anticipated market for medical cannabis, that each additional license is necessary to provide an adequate supply, quality, or variety of medical cannabis to medical cannabis cardholders.

(ii) The department shall:

- (A) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, make rules to establish criteria and processes for the consultation, analysis, and application for a license described in Subsection (1)(d)(i); and
- (B) report to the Executive Appropriations Committee of the Legislature before each time the department issues an additional license under Subsection (1)(d)(i) regarding the results of the consultation and analysis described in Subsection (1)(d)(i) and the application of the criteria described in Subsection (1)(d)(ii)(A).
- (2) (a) If there are more qualified applicants than there are available licenses for medical cannabis pharmacies, the department shall:
- (i) evaluate each applicant and award the license to the applicant that best demonstrates:
- (A) experience with establishing and successfully operating a business that involves complying with a regulatory environment, tracking inventory, and training, evaluating, and monitoring employees;
- (B) an operating plan that will best ensure the safety and security of patrons and the community;
 - (C) positive connections to the local community;
- (D) the suitability of the proposed location and the location's accessibility for qualifying patients;
- (E) the extent to which the applicant can increase efficiency and reduce the cost of medical cannabis for patients; and
- (F) a strategic plan described in Subsection [26-61a-304] <u>26B-4-227</u>(7) that has a comparatively high likelihood of success; and
- 4986 (ii) ensure a geographic dispersal among licensees that is sufficient to reasonably
 4987 maximize access to the largest number of medical cannabis cardholders.

4988 (b) In making the evaluation described in Subsection (2)(a), the department may give 4989 increased consideration to applicants who indicate a willingness to: 4990 (i) operate as a home delivery medical cannabis pharmacy that accepts electronic 4991 medical cannabis orders that the state central patient portal facilitates; and 4992 (ii) accept payments through: 4993 (A) a payment provider that the Division of Finance approves, in consultation with the 4994 state treasurer, in accordance with Section [26-61a-603] 26B-4-238; or 4995 (B) a financial institution in accordance with Subsection [26-61a-603] 26B-4-238(4). 4996 (3) The department may conduct a face-to-face interview with an applicant for a 4997 license that the department evaluates under Subsection (2). 4998 (4) (a) The department may designate a medical cannabis pharmacy as a home delivery 4999 medical cannabis pharmacy if the department determines that the medical cannabis pharmacy's 5000 operating plan demonstrates the functional and technical ability to: 5001 (i) safely conduct transactions for medical cannabis shipments; 5002 (ii) accept electronic medical cannabis orders that the state central patient portal 5003 facilitates; and 5004 (iii) accept payments through: 5005 (A) a payment provider that the Division of Finance approves, in consultation with the 5006 state treasurer, in accordance with Section [26-61a-603] 26B-4-238; or 5007 (B) a financial institution in accordance with Subsection [26-61a-603] 26B-4-238(4). 5008 (b) An applicant seeking a designation as a home delivery medical cannabis pharmacy 5009 shall identify in the applicant's operating plan any information relevant to the department's 5010 evaluation described in Subsection (4)(a), including: 5011 (i) the name and contact information of the payment provider; 5012 (ii) the nature of the relationship between the prospective licensee and the payment 5013 provider; 5014 (iii) the processes of the following to safely and reliably conduct transactions for 5015 medical cannabis shipments: 5016 (A) the prospective licensee; and 5017 (B) the electronic payment provider or the financial institution described in Subsection

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(4)(a)(iii); and

(iv) the ability of the licensee to comply with the department's rules regarding the
secure transportation and delivery of medical cannabis or medical cannabis product to a
medical cannabis cardholder.
(c) Notwithstanding any county or municipal ordinance, a medical cannabis pharmacy
that the department designates as a home delivery medical cannabis pharmacy may deliver
medical cannabis shipments in accordance with this [chapter] part.
Section 87. Section 26B-4-229, which is renumbered from Section 26-61a-501 is
renumbered and amended to read:
[26-61a-501]. <u>26B-4-229.</u> Operating requirements General.
(1) (a) A medical cannabis pharmacy shall operate:
(i) at the physical address provided to the department under Section [26-61a-301] 26B
<u>4-224</u> ; and
(ii) in accordance with the operating plan provided to the department under Section
$[\frac{26-61a-301}{26B-4-224}]$ and, if applicable, Section $[\frac{26-61a-304}{26B-4-227}]$.
(b) A medical cannabis pharmacy shall notify the department before a change in the
medical cannabis pharmacy's physical address or operating plan.
(2) An individual may not enter a medical cannabis pharmacy unless the individual:
(a) is at least 18 years old or is an emancipated minor under Section 80-7-105; and
(b) except as provided in Subsection (4):
(i) possesses a valid:
(A) medical cannabis pharmacy agent registration card;
(B) pharmacy medical provider registration card; or
(C) medical cannabis card;
(ii) is an employee of the department or the Department of Agriculture and Food
performing an inspection under Section [26-61a-504] <u>26B-4-232</u> ; or
(iii) is another individual as the department provides.
(3) A medical cannabis pharmacy may not employ an individual who is younger than
21 years old.
(4) Notwithstanding Subsection (2)(a), a medical cannabis pharmacy may authorize an
individual who is not a medical cannabis pharmacy agent or pharmacy medical provider to
access the medical cannabis pharmacy if the medical cannabis pharmacy tracks and monitors

5050 the individual at all times while the individual is at the medical cannabis pharmacy and 5051 maintains a record of the individual's access. 5052 (5) A medical cannabis pharmacy shall operate in a facility that has: 5053 (a) a single, secure public entrance; 5054 (b) a security system with a backup power source that: 5055 (i) detects and records entry into the medical cannabis pharmacy; and 5056 (ii) provides notice of an unauthorized entry to law enforcement when the medical 5057 cannabis pharmacy is closed; and 5058 (c) a lock on each area where the medical cannabis pharmacy stores cannabis or a 5059 cannabis product. 5060 (6) A medical cannabis pharmacy shall post, both clearly and conspicuously in the 5061 medical cannabis pharmacy, the limit on the purchase of cannabis described in Subsection [26-61a-502] 26B-4-230(2). 5062 (7) Except for an emergency situation described in Subsection [26-61a-201] 26B-4-5063 5064 213(3)(c), a medical cannabis pharmacy may not allow any individual to consume cannabis on 5065 the property or premises of the medical cannabis pharmacy. 5066 (8) A medical cannabis pharmacy may not sell cannabis or a cannabis product without 5067 first indicating on the cannabis or cannabis product label the name of the medical cannabis 5068 pharmacy. 5069 (9) (a) Each medical cannabis pharmacy shall retain in the pharmacy's records the 5070 following information regarding each recommendation underlying a transaction: 5071 (i) the recommending medical provider's name, address, and telephone number; 5072 (ii) the patient's name and address: 5073 (iii) the date of issuance; 5074 (iv) directions of use and dosing guidelines or an indication that the recommending 5075 medical provider did not recommend specific directions of use or dosing guidelines; and 5076 (v) if the patient did not complete the transaction, the name of the medical cannabis

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cardholder who completed the transaction.

container indicating the following minimum information:

(b) (i) Except as provided in Subsection (9)(b)(iii), a medical cannabis pharmacy may

not sell medical cannabis unless the medical cannabis has a label securely affixed to the

5081	(A) the name, address, and telephone number of the medical cannabis pharmacy;
5082	(B) the unique identification number that the medical cannabis pharmacy assigns;
5083	(C) the date of the sale;
5084	(D) the name of the patient;
5085	(E) the name of the recommending medical provider who recommended the medical
5086	cannabis treatment;
5087	(F) directions for use and cautionary statements, if any;
5088	(G) the amount dispensed and the cannabinoid content;
5089	(H) the suggested use date;
5090	(I) for unprocessed cannabis flower, the legal use termination date; and
5091	(J) any other requirements that the department determines, in consultation with the
5092	Division of Professional Licensing and the Board of Pharmacy.
5093	(ii) A medical cannabis pharmacy is exempt from the requirement to provide the
5094	following information under Subsection (9)(b)(i) if the information is already provided on the
5095	product label that a cannabis production establishment affixes:
5096	(A) a unique identification number;
5097	(B) directions for use and cautionary statements;
5098	(C) amount and cannabinoid content; and
5099	(D) a suggested use date.
5100	(iii) If the size of a medical cannabis container does not allow sufficient space to
5101	include the labeling requirements described in Subsection (9)(b)(i), the medical cannabis
5102	pharmacy may provide the following information described in Subsection (9)(b)(i) on a
5103	supplemental label attached to the container or an informational enclosure that accompanies the
5104	container:
5105	(A) the cannabinoid content;
5106	(B) the suggested use date; and
5107	(C) any other requirements that the department determines.
5108	(iv) A medical cannabis pharmacy may sell medical cannabis to another medical
5109	cannabis pharmacy without a label described in Subsection (9)(b)(i).
5110	(10) A pharmacy medical provider or medical cannabis pharmacy agent shall:
5111	(a) upon receipt of an order from a limited medical provider in accordance with

Subsections [26-61a-106] 26B-4-204(1)(b) through (d):

(i) for a written order or an electronic order under circumstances that the department determines, contact the limited medical provider or the limited medical provider's office to verify the validity of the recommendation; and

- (ii) for an order that the pharmacy medical provider or medical cannabis pharmacy agent verifies under Subsection (10)(a)(i) or an electronic order that is not subject to verification under Subsection (10)(a)(i), enter the limited medical provider's recommendation or renewal, including any associated directions of use, dosing guidelines, or caregiver indication, in the state electronic verification system;
- (b) in processing an order for a holder of a conditional medical cannabis card described in Subsection [26-61a-201] 26B-4-213(1)(b) that appears irregular or suspicious in the judgment of the pharmacy medical provider or medical cannabis pharmacy agent, contact the recommending medical provider or the recommending medical provider's office to verify the validity of the recommendation before processing the cardholder's order;
- (c) unless the medical cannabis cardholder has had a consultation under Subsection [26-61a-502] 26B-4-230(4) or (5), verbally offer to a medical cannabis cardholder at the time of a purchase of cannabis, a cannabis product, or a medical cannabis device, personal counseling with the pharmacy medical provider; and
- (d) provide a telephone number or website by which the cardholder may contact a pharmacy medical provider for counseling.
- (11) (a) A medical cannabis pharmacy may create a medical cannabis disposal program that allows an individual to deposit unused or excess medical cannabis, cannabis residue from a medical cannabis device, or medical cannabis product in a locked box or other secure receptacle within the medical cannabis pharmacy.
- (b) A medical cannabis pharmacy with a disposal program described in Subsection (11)(a) shall ensure that only a medical cannabis pharmacy agent or pharmacy medical provider can access deposited medical cannabis or medical cannabis products.
- (c) A medical cannabis pharmacy shall dispose of any deposited medical cannabis or medical cannabis products by:
- (i) rendering the deposited medical cannabis or medical cannabis products unusable and unrecognizable before transporting deposited medical cannabis or medical cannabis

5143	products from the medical cannabis pharmacy; and
5144	(ii) disposing of the deposited medical cannabis or medical cannabis products in
5145	accordance with:
5146	(A) federal and state law, rules, and regulations related to hazardous waste;
5147	(B) the Resource Conservation and Recovery Act, 42 U.S.C. Sec. 6991 et seq.;
5148	(C) Title 19, Chapter 6, Part 5, Solid Waste Management Act; and
5149	(D) other regulations that the department makes in accordance with Title 63G, Chapter
5150	3, Utah Administrative Rulemaking Act.
5151	(12) The department shall establish by rule, in accordance with Title 63G, Chapter 3,
5152	Utah Administrative Rulemaking Act, protocols for a recall of cannabis and cannabis products
5153	by a medical cannabis pharmacy.
5154	Section 88. Section 26B-4-230, which is renumbered from Section 26-61a-502 is
5155	renumbered and amended to read:
5156	[26-61a-502]. <u>26B-4-230.</u> Dispensing Amount a medical cannabis
5157	pharmacy may dispense Reporting Form of cannabis or cannabis product.
5158	(1) (a) A medical cannabis pharmacy may not sell a product other than, subject to this
5159	[chapter] <u>part</u> :
5160	(i) cannabis in a medicinal dosage form that the medical cannabis pharmacy acquired
5161	from another medical cannabis pharmacy or a cannabis processing facility that is licensed
5162	under Section 4-41a-201;
5163	(ii) a cannabis product in a medicinal dosage form that the medical cannabis pharmacy
5164	acquired from another medical cannabis pharmacy or a cannabis processing facility that is
5165	licensed under Section 4-41a-201;
5166	(iii) a medical cannabis device; or
5167	(iv) educational material related to the medical use of cannabis.
5168	(b) A medical cannabis pharmacy may only sell an item listed in Subsection (1)(a) to
5169	an individual with:
5170	(i) (A) a medical cannabis card;
5171	(B) a department registration described in [Section 26-61a-201] Subsection 26B-4-
5172	<u>213</u> (10); and
5173	(ii) a corresponding valid form of photo identification.

5174	(c) Notwithstanding Subsection (1)(a), a medical cannabis pharmacy may not sell a
5175	cannabis-based drug that the United States Food and Drug Administration has approved.
5176	(d) Notwithstanding Subsection (1)(b), a medical cannabis pharmacy may not sell a
5177	medical cannabis device to an individual described in Subsection [26-61a-201] <u>26B-4-</u>
5178	$\underline{213}(2)(a)(i)(B)$ or to a minor described in Subsection $[\underline{26-61a-201}]$ $\underline{26B-4-213}(2)(c)$ unless the
5179	individual or minor has the approval of the Compassionate Use Board in accordance with
5180	Subsection [26-61a-105] <u>26B-1-421</u> (5).
5181	(2) A medical cannabis pharmacy:
5182	(a) may dispense to a medical cannabis cardholder, in any one 28-day period, up to the
5183	legal dosage limit of:
5184	(i) unprocessed cannabis that:
5185	(A) is in a medicinal dosage form; and
5186	(B) carries a label clearly displaying the amount of tetrahydrocannabinol and
5187	cannabidiol in the cannabis; and
5188	(ii) a cannabis product that is in a medicinal dosage form; and
5189	(b) may not dispense:
5190	(i) more medical cannabis than described in Subsection (2)(a); or
5191	(ii) to an individual whose recommending medical provider did not recommend
5192	directions of use and dosing guidelines, until the individual consults with the pharmacy
5193	medical provider in accordance with Subsection (4), any medical cannabis.
5194	(3) An individual with a medical cannabis card:
5195	(a) may purchase, in any one 28-day period, up to the legal dosage limit of:
5196	(i) unprocessed cannabis in a medicinal dosage form; and
5197	(ii) a cannabis product in a medicinal dosage form;
5198	(b) may not purchase:
5199	(i) more medical cannabis than described in Subsection (3)(a); or
5200	(ii) if the relevant recommending medical provider did not recommend directions of
5201	use and dosing guidelines, until the individual consults with the pharmacy medical provider in
5202	accordance with Subsection (4), any medical cannabis; and
5203	(c) may not use a route of administration that the relevant recommending medical
5204	provider or the pharmacy medical provider, in accordance with Subsection (4) or (5), has not

5205	recommended
<i>32</i> 0 <i>3</i>	recommended

- (4) If a recommending medical provider recommends treatment with medical cannabis but wishes for the pharmacy medical provider to determine directions of use and dosing guidelines:
- (a) the recommending medical provider shall provide to the pharmacy medical provider, either through the state electronic verification system or through a medical cannabis pharmacy's recording of a recommendation under the order of a limited medical provider, any of the following information that the recommending medical provider feels would be needed to provide appropriate directions of use and dosing guidelines:
 - (i) information regarding the qualifying condition underlying the recommendation;
 - (ii) information regarding prior treatment attempts with medical cannabis; and
 - (iii) portions of the patient's current medication list; and
- (b) before the relevant medical cannabis cardholder may obtain medical cannabis, the pharmacy medical provider shall:
- (i) review pertinent medical records, including the recommending medical provider documentation described in Subsection (4)(a); and
- (ii) unless the pertinent medical records show directions of use and dosing guidelines from a state central patient portal medical provider in accordance with Subsection (5), after completing the review described in Subsection (4)(b)(i) and consulting with the recommending medical provider as needed, determine the best course of treatment through consultation with the cardholder regarding:
- (A) the patient's qualifying condition underlying the recommendation from the recommending medical provider;
 - (B) indications for available treatments;
 - (C) directions of use and dosing guidelines; and
- (D) potential adverse reactions.
 - (5) (a) A state central patient portal medical provider may provide the consultation and make the determination described in Subsection (4)(b) for a medical cannabis patient cardholder regarding an electronic order that the state central patient portal facilitates.
 - (b) The state central patient portal medical provider described in Subsection (5)(a) shall document the directions of use and dosing guidelines, determined under Subsection (5)(a)

5236 in the pertinent medical records.

- (6) (a) A medical cannabis pharmacy shall:
- (i) (A) access the state electronic verification system before dispensing cannabis or a cannabis product to a medical cannabis cardholder in order to determine if the cardholder or, where applicable, the associated patient has met the maximum amount of medical cannabis described in Subsection (2); and
- (B) if the verification in Subsection (6)(a)(i) indicates that the individual has met the maximum amount described in Subsection (2), decline the sale, and notify the recommending medical provider who made the underlying recommendation;
- (ii) submit a record to the state electronic verification system each time the medical cannabis pharmacy dispenses medical cannabis to a medical cannabis cardholder;
- (iii) ensure that the pharmacy medical provider who is a licensed pharmacist reviews each medical cannabis transaction before dispensing the medical cannabis to the cardholder in accordance with pharmacy practice standards;
 - (iv) package any medical cannabis that is in a container that:
- (A) complies with Subsection 4-41a-602(1)(b) or, if applicable, provisions related to a container for unprocessed cannabis flower in the definition of "medicinal dosage form" in Section [26-61a-102] 26B-4-201;
 - (B) is tamper-resistant and tamper-evident; and
- (C) provides an opaque bag or box for the medical cannabis cardholder's use in transporting the container in public; and
- (v) for a product that is a cube that is designed for ingestion through chewing or holding in the mouth for slow dissolution, include a separate, off-label warning about the risks of over-consumption.
- (b) A medical cannabis cardholder transporting or possessing the container described in Subsection (6)(a)(iv) in public shall keep the container within the opaque bag or box that the medical cannabis pharmacist provides.
- (7) (a) Except as provided in Subsection (7)(b), a medical cannabis pharmacy may not sell medical cannabis in the form of a cigarette or a medical cannabis device that is intentionally designed or constructed to resemble a cigarette.
 - (b) A medical cannabis pharmacy may sell a medical cannabis device that warms

cannabis material into a vapor without the use of a flame and that delivers cannabis to an individual's respiratory system.

- (8) (a) A medical cannabis pharmacy may not give, at no cost, a product that the medical cannabis pharmacy is allowed to sell under Subsection (1)(a)(i), (ii), or (iii).
- (b) A medical cannabis pharmacy may give, at no cost, educational material related to the medical use of cannabis.
- (9) The department may impose a uniform fee on each medical cannabis transaction in a medical cannabis pharmacy in an amount that, subject to Subsection [26-61a-109] 26B-1-310(5), the department sets in accordance with Section 63J-1-504.
- (10) A medical cannabis pharmacy may purchase and store medical cannabis devices regardless of whether the seller has a cannabis-related license under this title or Title 4, Chapter 41a, Cannabis Production Establishments.
- Section 89. Section **26B-4-231**, which is renumbered from Section 26-61a-503 is renumbered and amended to read:

[26-61a-503]. 26B-4-231. Partial filling.

- (1) As used in this section, "partially fill" means to provide less than the full amount of cannabis or cannabis product that the recommending medical provider recommends, if the recommending medical provider recommended specific dosing parameters.
- (2) A pharmacy medical provider may partially fill a recommendation for a medical cannabis treatment at the request of the recommending medical provider who issued the medical cannabis treatment recommendation or the medical cannabis cardholder.
- (3) The department shall make rules, in collaboration with the Division of Professional Licensing and the Board of Pharmacy and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, specifying how to record the date, quantity supplied, and quantity remaining of a partially filled medical cannabis treatment recommendation.
- (4) A pharmacy medical provider who is a pharmacist may, upon the request of a medical cannabis cardholder, determine different dosing parameters, subject to the dosing limits in Subsection [26-61a-502] 26B-4-230(2), to fill the quantity remaining of a partially filled medical cannabis treatment recommendation if:
- (a) the pharmacy medical provider determined dosing parameters for the partial fill under Subsection [26-61a-502] 26B-4-230(4) or (5); and

5298	(b) the medical cannabis cardholder reports that:
5299	(i) the partial fill did not substantially affect the qualifying condition underlying the
5300	medical cannabis recommendation; or
5301	(ii) the patient experienced an adverse reaction to the partial fill or was otherwise
5302	unable to successfully use the partial fill.
5303	Section 90. Section 26B-4-232, which is renumbered from Section 26-61a-504 is
5304	renumbered and amended to read:
5305	[26-61a-504]. <u>26B-4-232.</u> Inspections.
5306	(1) Each medical cannabis pharmacy shall maintain the pharmacy's medical cannabis
5307	treatment recommendation files and other records in accordance with this [chapter] part,
5308	department rules, and the federal Health Insurance Portability and Accountability Act of 1996
5309	Pub. L. No. 104-191, 110 Stat. 1936, as amended.
5310	(2) The department or the Department of Agriculture and Food may inspect the
5311	records, facility, and inventory of a medical cannabis pharmacy at any time during business
5312	hours in order to determine if the medical cannabis pharmacy complies with this [chapter] par
5313	and Title 4, Chapter 41a, Cannabis Production Establishments.
5314	(3) An inspection under this section may include:
5315	(a) inspection of a site, facility, vehicle, book, record, paper, document, data, or other
5316	physical or electronic information, or any combination of the above;
5317	(b) questioning of any relevant individual;
5318	(c) inspection of equipment, an instrument, a tool, or machinery, including a container
5319	or label;
5320	(d) random sampling of medical cannabis by the Department of Agriculture and Food
5321	in accordance with rules described in Section 4-41a-701; or
5322	(e) seizure of medical cannabis, medical cannabis devices, or educational material as
5323	evidence in a department investigation or inspection or in instances of compliance failure.
5324	(4) In making an inspection under this section, the department or the Department of
5325	Agriculture and Food may freely access any area and review and make copies of a book,
5326	record, paper, document, data, or other physical or electronic information, including financial
5327	data, sales data, shipping data, pricing data, and employee data.

(5) Failure to provide the department, the Department of Agriculture and Food, or the

5329	authorized agents of the department or the Department of Agriculture and Food immediate
5330	access to records and facilities during business hours in accordance with this section may result
5331	in:
5332	(a) the imposition of a civil monetary penalty that the department sets in accordance
5333	with Title 63G, Chapter 3, Utah Administrative Rulemaking Act;
5334	(b) license or registration suspension or revocation; or
5335	(c) an immediate cessation of operations under a cease and desist order that the
5336	department issues.
5337	(6) Notwithstanding any other provision of law, the department may temporarily store
5338	in any department facility the items the department seizes under Subsection (3)(e) until the
5339	department:
5340	(a) determines that sufficient compliance justifies the return of the seized items; or
5341	(b) disposes of the items in the same manner as a cannabis production establishment in
5342	accordance with Section 4-41a-405.
5343	Section 91. Section 26B-4-233, which is renumbered from Section 26-61a-505 is
5344	renumbered and amended to read:
5345	[26-61a-505]. <u>26B-4-233.</u> Advertising.
5346	(1) Except as provided in this section, a person may not advertise in any medium
5347	regarding a medical cannabis pharmacy or the dispensing of medical cannabis within the state.
5348	(2) Subject to Section 26-61a-116, a medical cannabis pharmacy may:
5349	(a) advertise an employment opportunity at the medical cannabis pharmacy;
5350	(b) notwithstanding any municipal or county ordinance prohibiting signage, use
5351	signage on the outside of the medical cannabis pharmacy that:
5352	(i) includes only:
5353	(A) in accordance with Subsection $[\frac{26-61a-116}{26-61a-116}]$ $\underline{26B-4-223}(4)$, the medical cannabis
5354	pharmacy's name, logo, and hours of operation; and
5355	(B) a green cross; and
5356	(ii) complies with local ordinances regulating signage;
5357	(c) advertise in any medium:
5358	(i) the pharmacy's name and logo;
5359	(ii) the location and hours of operation of the medical cannabis pharmacy;

5360	(111) a service available at the medical cannabis pharmacy;
5361	(iv) personnel affiliated with the medical cannabis pharmacy;
5362	(v) whether the medical cannabis pharmacy is licensed as a home delivery medical
5363	cannabis pharmacy;
5364	(vi) best practices that the medical cannabis pharmacy upholds; and
5365	(vii) educational material related to the medical use of cannabis, as defined by the
5366	department;
5367	(d) hold an educational event for the public or medical providers in accordance with
5368	Subsection (3) and the rules described in Subsection (4); and
5369	(e) maintain on the medical cannabis pharmacy's website non-promotional information
5370	regarding the medical cannabis pharmacy's inventory.
5371	(3) A medical cannabis pharmacy may not include in an educational event described in
5372	Subsection (2)(d):
5373	(a) any topic that conflicts with this chapter or Title 4, Chapter 41a, Cannabis
5374	Production Establishments;
5375	(b) any gift items or merchandise other than educational materials, as those terms are
5376	defined by the department;
5377	(c) any marketing for a specific product from the medical cannabis pharmacy or any
5378	other statement, claim, or information that would violate the federal Food, Drug, and Cosmetic
5379	Act, 21 U.S.C. Sec. 301, et seq.; or
5380	(d) a presenter other than the following:
5381	(i) a pharmacist licensed under Title 58, Chapter 17b, Pharmacy Practice Act;
5382	(ii) an advanced practice registered nurse licensed under Title 58, Chapter 31b, Nurse
5383	Practice Act;
5384	(iii) a physician licensed under Title 58, Chapter 67, Utah Medical Practice Act, or
5385	Title 58, Chapter 68, Utah Osteopathic Medical Practice Act;
5386	(iv) a physician assistant licensed under Title 58, Chapter 70a, Utah Physician
5387	Assistant Act;
5388	(v) a medical practitioner, similar to the practitioners described in this Subsection
5389	(3)(d)(v), who is licensed in another state or country;
5390	(vi) a state employee; or

5391	(vii) if the presentation relates to a cannabis topic other than medical treatment or
5392	medical conditions, an individual whom the department approves based on the individual's
5393	background and credentials in the presented topic.
5394	(4) The department shall make rules, in accordance with Title 63G, Chapter 3, Utah
5395	Administrative Rulemaking Act, to define:
5396	(a) the educational material described in Subsection (2)(c)(vii); and
5397	(b) the elements of and restrictions on the educational event described in Subsection
5398	(3), including:
5399	(i) a minimum age of 21 years old for attendees; and
5400	(ii) an exception to the minimum age for a medical cannabis patient cardholder who is
5401	at least 18 years old.
5402	Section 92. Section 26B-4-234, which is renumbered from Section 26-61a-506 is
5403	renumbered and amended to read:
5404	[26-61a-506]. $26B-4-234$. Medical cannabis transportation.
5405	(1) Only the following individuals may transport medical cannabis under this [chapter]
5406	<u>part</u> :
5407	(a) a registered medical cannabis pharmacy agent;
5408	(b) a registered medical cannabis courier agent;
5409	(c) a registered pharmacy medical provider; or
5410	(d) a medical cannabis cardholder who is transporting a medical cannabis treatment
5411	that the cardholder is authorized to transport.
5412	(2) Except for an individual with a valid medical cannabis card under this [chapter]
5413	part who is transporting a medical cannabis treatment that the cardholder is authorized to
5414	transport, an individual described in Subsection (1) shall possess a transportation manifest that:
5415	(a) includes a unique identifier that links the cannabis or cannabis product to a relevant
5416	inventory control system;
5417	(b) includes origin and destination information for the medical cannabis that the
5418	individual is transporting; and
5419	(c) identifies the departure and arrival times and locations of the individual
5420	transporting the medical cannabis.
5421	(3) (a) In addition to the requirements in Subsections (1) and (2), the department may

5422	establish by rule, in collaboration with the Division of Professional Licensing and the Board of
5423	Pharmacy and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act,
5424	requirements for transporting medical cannabis to ensure that the medical cannabis remains
5425	safe for human consumption.
5426	(b) The transportation described in Subsection (1)(a) is limited to transportation
5427	between a medical cannabis pharmacy and:
5428	(i) another medical cannabis pharmacy; or
5429	(ii) for a medical cannabis shipment, a medical cannabis cardholder's home address.
5430	(4) (a) It is unlawful for an individual described in Subsection (1) to make a transport
5431	described in this section with a manifest that does not meet the requirements of this section.
5432	(b) Except as provided in Subsection (4)(d), an individual who violates Subsection
5433	(4)(a) is:
5434	(i) guilty of an infraction; and
5435	(ii) subject to a \$100 fine.
5436	(c) An individual who is guilty of a violation described in Subsection (4)(b) is not
5437	guilty of a violation of Title 58, Chapter 37, Utah Controlled Substances Act, for the conduct
5438	underlying the violation described in Subsection (4)(b).
5439	(d) If the individual described in Subsection (4)(a) is transporting more medical
5440	cannabis than the manifest identifies, except for a de minimis administrative error:
5441	(i) this [chapter] part does not apply; and
5442	(ii) the individual is subject to penalties under Title 58, Chapter 37, Utah Controlled
5443	Substances Act.
5444	(5) An individual other than an individual described in Subsection (1) may transport a
5445	medical cannabis device within the state if the transport does not also contain medical
5446	cannabis.
5447	Section 93. Section 26B-4-235, which is renumbered from Section 26-61a-507 is
5448	renumbered and amended to read:
5449	[26-61a-507]. <u>26B-4-235.</u> Local control.
5450	(1) The operation of a medical cannabis pharmacy:
5451	(a) shall be a permitted use:
5452	(i) in any zone, overlay, or district within the municipality or county except for a

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5453	primarily residential zone; and
5454	(ii) on land that the municipality or county has not zoned; and
5455	(b) is subject to the land use regulations, as defined in Sections [10-9a-103] <u>26B-7-506</u>
5456	and 17-27a-103, that apply in the underlying zone.
5457	(2) A municipality or county may not:
5458	(a) on the sole basis that the applicant or medical cannabis pharmacy violates federal
5459	law regarding the legal status of cannabis, deny or revoke:
5460	(i) a land use permit, as that term is defined in Sections 10-9a-103 and 17-27a-103, to
5461	operate a medical cannabis pharmacy; or
5462	(ii) a business license to operate a medical cannabis pharmacy;
5463	(b) require a certain distance between a medical cannabis pharmacy and:
5464	(i) another medical cannabis pharmacy;
5465	(ii) a cannabis production establishment;
5466	(iii) a retail tobacco specialty business, as that term is defined in Section 26-62-103; or
5467	(iv) an outlet, as that term is defined in Section 32B-1-202; or
5468	(c) in accordance with Subsections 10-9a-509(1) and 17-27a-508(1), enforce a land use
5469	regulation against a medical cannabis pharmacy that was not in effect on the day on which the
5470	medical cannabis pharmacy submitted a complete land use application.
5471	(3) (a) A municipality or county may enact an ordinance that:
5472	(i) is not in conflict with this [chapter] part; and
5473	(ii) governs the time, place, or manner of medical cannabis pharmacy operations in the
5474	municipality or county.
5475	(b) An ordinance that a municipality or county enacts under Subsection (3)(a) may not
5476	restrict the hours of operation from 7 a.m. to 10 p.m.
5477	(4) An applicant for a land use permit to operate a medical cannabis pharmacy shall
5478	comply with the land use requirements and application process described in:
5479	(a) Title 10, Chapter 9a, Municipal Land Use, Development, and Management Act,
5480	including Section 10-9a-528; and
5481	(b) Title 17, Chapter 27a, County Land Use, Development, and Management Act,
5482	including Section 17-27a-525.

Section 94. Section 26B-4-236, which is renumbered from Section 26-61a-601 is

5484	renumbered and amended to read:
5485	[26-61a-601]. <u>26B-4-236.</u> State central patient portal Department duties.
5486	(1) On or before July 1, 2020, the department shall establish or contract to establish, in
5487	accordance with Title 63G, Chapter 6a, Utah Procurement Code, a state central patient portal as
5488	described in this section.
5489	(2) The state central patient portal shall:
5490	(a) authenticate each user to ensure the user is a valid medical cannabis patient
5491	cardholder;
5492	(b) allow a medical cannabis patient cardholder to:
5493	(i) obtain and download the cardholder's medical cannabis card;
5494	(ii) review the cardholder's medical cannabis purchase history; and
5495	(iii) manage the cardholder's personal information, including withdrawing consent for
5496	the use of the cardholder's information for a study described in Subsection [$\frac{26-61a-201}{26B-4-201}$]
5497	<u>213</u> (12);
5498	(c) if the cardholder's recommending medical provider recommended the use of
5499	medical cannabis without providing directions of use and dosing guidelines and the cardholder
5500	has not yet received the counseling or consultation required in Subsection 26-61a-502(4):
5501	(i) alert the cardholder of the outstanding need for consultation; and
5502	(ii) provide the cardholder with access to the contact information for each state central
5503	patient portal medical provider and each pharmacy medical provider;
5504	(d) except as provided in Subsection (2)(e), facilitate an electronic medical cannabis
5505	order:
5506	(i) to a home delivery medical cannabis pharmacy for a medical cannabis shipment; or
5507	(ii) to a medical cannabis pharmacy for a medical cannabis cardholder to obtain in
5508	person from the pharmacy;
5509	(e) prohibit a patient from completing an electronic medical cannabis order described
5510	in Subsection (2)(d) if the purchase would exceed the limitations described in Subsection
5511	[26-61a-502] <u>26B-4-230(</u> 2)(a) or (b);
5512	(f) provide educational information to medical cannabis patient cardholders regarding
5513	the state's medical cannabis laws and regulatory programs and other relevant information
5514	regarding medical cannabis; and

5515	(g) allow the patient to designate up to two caregivers who may receive a medical
5516	cannabis caregiver card to purchase and transport medical cannabis on behalf of the patient in
5517	accordance with this [chapter] part.
5518	(3) The department may make rules in accordance with Title 63G, Chapter 3, Utah
5519	Administrative Rulemaking Act, to implement the state central patient portal.
5520	Section 95. Section 26B-4-237, which is renumbered from Section 26-61a-602 is
5521	renumbered and amended to read:
5522	[26-61a-602]. <u>26B-4-237.</u> State central patient portal medical provider.
5523	(1) In relation to the state central patient portal:
5524	(a) the department may only employ, as a state central patient portal medical provider:
5525	(i) a pharmacist who is licensed under Title 58, Chapter 17b, Pharmacy Practice Act; or
5526	(ii) a physician licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Title
5527	58, Chapter 68, Utah Osteopathic Medical Practice Act; and
5528	(b) if the department employs a state central patient portal medical provider, the
5529	department shall ensure that a state central patient portal medical provider is available during
5530	normal business hours.
5531	(2) A state central patient portal medical provider may:
5532	(a) provide consultations to medical cannabis cardholders and qualified medical
5533	providers; and
5534	(b) determine dosing parameters in accordance with Subsection [26-61a-502] <u>26B-4-</u>
5535	<u>230</u> (5).
5536	Section 96. Section 26B-4-238, which is renumbered from Section 26-61a-603 is
5537	renumbered and amended to read:
5538	[26-61a-603]. <u>26B-4-238.</u> Payment provider for electronic medical
5539	cannabis transactions.
5540	(1) A cannabis production establishment, a medical cannabis pharmacy, or a
5541	prospective home delivery medical cannabis pharmacy seeking to use a payment provider shall
5542	submit to the Division of Finance and the state treasurer information regarding the payment
5543	provider the prospective licensee will use to conduct financial transactions related to medical
5544	cannabis, including:
5545	(a) the name and contact information of the payment provider;

5546	(b) the nature of the relationship between the establishment, pharmacy, or prospective
5547	pharmacy and the payment provider; and
5548	(c) for a prospective home delivery medical cannabis pharmacy, the processes the
5549	prospective licensee and the payment provider have in place to safely and reliably conduct
5550	financial transactions for medical cannabis shipments.
5551	(2) The Division of Finance shall, in consultation with the state treasurer:
5552	(a) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act,
5553	make rules to establish standards for identifying payment providers that demonstrate the
5554	functional and technical ability to safely conduct financial transactions related to medical
5555	cannabis, including medical cannabis shipments;
5556	(b) review submissions the Division of Finance and the state treasurer receive under
5557	Subsection (1);
5558	(c) approve a payment provider that meets the standards described in Subsection (2)(a);
5559	and
5560	(d) establish a list of approved payment providers.
5561	(3) Any licensed cannabis production establishment, licensed medical cannabis
5562	pharmacy, or medical cannabis courier may use a payment provider that the Division of
5563	Finance approves, in consultation with the state treasurer, to conduct transactions related to the
5564	establishment's, pharmacy's, or courier's respective medical cannabis business.
5565	(4) If Congress passes legislation that allows a cannabis-related business to facilitate
5566	payments through or deposit funds in a financial institution, a cannabis production
5567	establishment or a medical cannabis pharmacy may facilitate payments through or deposit
5568	funds in a financial institution in addition to or instead of a payment provider that the Division
5569	of Finance approves, in consultation with the state treasurer, under this section.
5570	Section 97. Section 26B-4-239, which is renumbered from Section 26-61a-604 is
5571	renumbered and amended to read:
5572	[26-61a-604]. <u>26B-4-239.</u> Home delivery of medical cannabis shipments
5573	Medical cannabis couriers License.

(1) The department shall make rules, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to ensure the safety, security, and efficiency of a home delivery medical cannabis pharmacy's fulfillment of electronic medical cannabis orders that the

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state central patient portal facilitates, including rules regarding the safe and controlled delivery of medical cannabis shipments.

- (2) A person may not operate as a medical cannabis courier without a license that the department issues under this section.
- (3) (a) Subject to Subsections (5) and (6), the department shall issue a license to operate as a medical cannabis courier to an applicant who is eligible for a license under this section.
- (b) An applicant is eligible for a license under this section if the applicant submits to the department:
 - (i) the name and address of an individual who:
- (A) has a financial or voting interest of 2% or greater in the proposed medical cannabis pharmacy; or
- (B) has the power to direct or cause the management or control of a proposed cannabis production establishment;
- (ii) an operating plan that includes operating procedures to comply with the operating requirements for a medical cannabis courier described in this [chapter] part; and
- (iii) an application fee in an amount that, subject to Subsection [26-61a-109] 26B-1-310(5), the department sets in accordance with Section 63J-1-504.
- (4) If the department determines that an applicant is eligible for a license under this section, the department shall:
- (a) charge the applicant an initial license fee in an amount that, subject to Subsection 26-61a-109(5), the department sets in accordance with Section 63J-1-504; and
- (b) notify the Department of Public Safety of the license approval and the names of each individual described in Subsection (3)(b)(ii).
- (5) The department may not issue a license to operate as a medical cannabis courier to an applicant if an individual described in Subsection (3)(b)(ii):
 - (a) has been convicted under state or federal law of:
- 5604 (i) a felony; or

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- 5605 (ii) after September 23, 2019, a misdemeanor for drug distribution; or
- 5606 (b) is younger than 21 years old.
- (6) The department may revoke a license under this part if:

5608	(a) the medical cannabis courier does not begin operations within one year after the day			
5609	on which the department issues the initial license;			
5610	(b) the medical cannabis courier makes the same violation of this [chapter] part three			
5611	times;			
5612	(c) an individual described in Subsection (3)(b)(ii) is convicted, while the license is			
5613	active, under state or federal law of:			
5614	(i) a felony; or			
5615	(ii) after September 23, 2019, a misdemeanor for drug distribution; or			
5616	(d) after a change of ownership described in Subsection (15)(c), the department			
5617	determines that the medical cannabis courier no longer meets the minimum standards for			
5618	licensure and operation of the medical cannabis courier described in this [chapter] part.			
5619	(7) The department shall deposit the proceeds of a fee imposed by this section in the			
5620	Qualified Patient Enterprise Fund.			
5621	(8) The department shall begin accepting applications under this section on or before			
5622	July 1, 2020.			
5623	(9) The department's authority to issue a license under this section is plenary and is not			
5624	subject to review.			
5625	(10) Each applicant for a license as a medical cannabis courier shall submit, at the time			
5626	of application, from each individual who has a financial or voting interest of 2% or greater in			
5627	the applicant or who has the power to direct or cause the management or control of the			
5628	applicant:			
5629	(a) a fingerprint card in a form acceptable to the Department of Public Safety;			
5630	(b) a signed waiver in accordance with Subsection 53-10-108(4) acknowledging the			
5631	registration of the individual's fingerprints in the Federal Bureau of Investigation Next			
5632	Generation Identification System's Rap Back Service; and			
5633	(c) consent to a fingerprint background check by:			
5634	(i) the Bureau of Criminal Identification; and			
5635	(ii) the Federal Bureau of Investigation.			
5636	(11) The Bureau of Criminal Identification shall:			
5637	(a) check the fingerprints the applicant submits under Subsection (10) against the			
5638	applicable state, regional, and national criminal records databases, including the Federal			

Bureau of Investigation Next Generation Identification System;

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- (b) report the results of the background check to the department;
- 5641 (c) maintain a separate file of fingerprints that applicants submit under Subsection (10) 5642 for search by future submissions to the local and regional criminal records databases, including 5643 latent prints;
 - (d) request that the fingerprints be retained in the Federal Bureau of Investigation Next Generation Identification System's Rap Back Service for search by future submissions to national criminal records databases, including the Next Generation Identification System and latent prints; and
 - (e) establish a privacy risk mitigation strategy to ensure that the department only receives notifications for an individual with whom the department maintains an authorizing relationship.
 - (12) The department shall:
 - (a) assess an individual who submits fingerprints under Subsection (10) a fee in an amount that the department sets in accordance with Section 63J-1-504 for the services that the Bureau of Criminal Identification or another authorized agency provides under this section; and
 - (b) remit the fee described in Subsection (12)(a) to the Bureau of Criminal Identification.
 - (13) The department shall renew a license under this section every year if, at the time of renewal:
 - (a) the licensee meets the requirements of this section; and
 - (b) the licensee pays the department a license renewal fee in an amount that, subject to Subsection [26-61a-109] 26B-1-310(5), the department sets in accordance with Section 63J-1-504.
 - (14) A person applying for a medical cannabis courier license shall submit to the department a proposed operating plan that complies with this section and that includes:
 - (a) a description of the physical characteristics of any proposed facilities, including a floor plan and an architectural elevation, and delivery vehicles;
 - (b) a description of the credentials and experience of each officer, director, or owner of the proposed medical cannabis courier;
 - (c) the medical cannabis courier's employee training standards;

5670	(d) a security plan; and			
5671	(e) storage and delivery protocols, both short and long term, to ensure that medical			
5672	cannabis shipments are stored and delivered in a manner that is sanitary and preserves the			
5673	integrity of the cannabis.			
5674	(15) (a) A medical cannabis courier license is not transferrable or assignable.			
5675	(b) A medical cannabis courier shall report in writing to the department no later than			
5676	10 business days before the date of any change of ownership of the medical cannabis courier.			
5677	(c) If the ownership of a medical cannabis courier changes by 50% or more:			
5678	(i) concurrent with the report described in Subsection (15)(b), the medical cannabis			
5679	courier shall submit a new application described in Subsection (3)(b);			
5680	(ii) within 30 days of the submission of the application, the department shall:			
5681	(A) conduct an application review; and			
5682	(B) award a license to the medical cannabis courier for the remainder of the term of the			
5683	medical cannabis courier's license before the ownership change if the medical cannabis courier			
5684	meets the minimum standards for licensure and operation of the medical cannabis courier			
5685	described in this [chapter] part; and			
5686	(iii) if the department approves the license application, notwithstanding Subsection (4),			
5687	the medical cannabis courier shall pay a license fee that the department sets in accordance with			
5688	Section 63J-1-504 in an amount that covers the board's cost of conducting the application			
5689	review.			
5690	(16) (a) Except as provided in Subsection (15)(b), a person may not advertise regarding			
5691	the transportation of medical cannabis.			
5692	(b) Notwithstanding Subsection (15)(a) and subject to Section [26-61a-116] 26B-4-			
5693	223, a licensed home delivery medical cannabis pharmacy or a licensed medical cannabis			
5694	courier may advertise:			
5695	(i) a green cross;			
5696	(ii) the pharmacy's or courier's name and logo; and			
5697	(iii) that the pharmacy or courier is licensed to transport medical cannabis shipments.			
5698	Section 98. Section 26B-4-240, which is renumbered from Section 26-61a-605 is			
5699	renumbered and amended to read:			
5700	[26-61a-605]. <u>26B-4-240.</u> Medical cannabis shipment transportation.			

(1) The department shall ensure that each home delivery medical cannabis pharmacy is capable of delivering, directly or through a medical cannabis courier, medical cannabis shipments in a secure manner.

- (2) (a) A home delivery medical cannabis pharmacy may contract with a licensed medical cannabis courier to deliver medical cannabis shipments to fulfill electronic medical cannabis orders that the state central patient portal facilitates.
- (b) If a home delivery medical cannabis pharmacy enters into a contract described in Subsection (2)(a), the pharmacy shall:
- (i) impose security and personnel requirements on the medical cannabis courier sufficient to ensure the security and safety of medical cannabis shipments; and
 - (ii) provide regular oversight of the medical cannabis courier.
- (3) Except for an individual with a valid medical cannabis card who transports a shipment the individual receives, an individual may not transport a medical cannabis shipment unless the individual is:
 - (a) a registered pharmacy medical provider;

- (b) a registered medical cannabis pharmacy agent; or
- (c) a registered agent of the medical cannabis courier described in Subsection (2).
- (4) An individual transporting a medical cannabis shipment under Subsection (3) shall possess a physical or electronic transportation manifest that:
- (a) includes a unique identifier that links the medical cannabis shipment to a relevant inventory control system;
- (b) includes origin and destination information for the medical cannabis shipment the individual is transporting; and
- (c) indicates the departure and estimated arrival times and locations of the individual transporting the medical cannabis shipment.
- (5) In addition to the requirements in Subsections (3) and (4), the department may establish by rule, in collaboration with the Division of Professional Licensing and the Board of Pharmacy and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, requirements for transporting medical cannabis shipments that are related to safety for human consumption of cannabis or a cannabis product.
- (6) (a) It is unlawful for an individual to transport a medical cannabis shipment with a

5732	manifest that does not meet the requirements of Subsection (4).			
5733	(b) Except as provided in Subsection (6)(d), an individual who violates Subsection			
5734	(6)(a) is:			
5735	(i) guilty of an infraction; and			
5736	(ii) subject to a \$100 fine.			
5737	(c) An individual who is guilty of a violation described in Subsection (6)(b) is not			
5738	guilty of a violation of Title 58, Chapter 37, Utah Controlled Substances Act, for the conduct			
5739	underlying the violation described in Subsection (6)(b).			
5740	(d) If the individual described in Subsection (6)(a) is transporting more cannabis,			
5741	cannabis product, or medical cannabis devices than the manifest identifies, except for a de			
5742	minimis administrative error:			
5743	(i) this [chapter] part does not apply; and			
5744	(ii) the individual is subject to penalties under Title 58, Chapter 37, Utah Controlled			
5745	Substances Act.			
5746	Section 99. Section 26B-4-241 , which is renumbered from Section 26-61a-606 is			
5747	renumbered and amended to read:			
5748	[26-61a-606]. <u>26B-4-241.</u> Medical cannabis courier agent Background			
5749	check Registration card Rebuttable presumption.			
5750	(1) An individual may not serve as a medical cannabis courier agent unless:			
5751	(a) the individual is an employee of a licensed medical cannabis courier; and			
5752	(b) the department registers the individual as a medical cannabis courier agent.			
5753	(2) (a) The department shall, within 15 days after the day on which the department			
5754	receives a complete application from a medical cannabis courier on behalf of a medical			
5755	cannabis courier agent, register and issue a medical cannabis courier agent registration card to			
5756	the prospective agent if the medical cannabis courier:			
5757	(i) provides to the department:			
5758	(A) the prospective agent's name and address;			
5759	(B) the name and address of the medical cannabis courier;			
5760	(C) the name and address of each home delivery medical cannabis pharmacy with			
5761	which the medical cannabis courier contracts to deliver medical cannabis shipments; and			
5762	(D) the submission required under Subsection (2)(b);			

5763	(ii) as reported under Subsection (2)(c), has not been convicted under state or federal			
5764	law of:			
5765	(A) a felony; or			
5766	(B) after December 3, 2018, a misdemeanor for drug distribution; and			
5767	(iii) pays the department a fee in an amount that, subject to Subsection [26-61a-109]			
5768	26B-1-310(5), the department sets in accordance with Section 63J-1-504.			
5769	(b) Except for an applicant reapplying for a medical cannabis courier agent registration			
5770	card within less than one year after the expiration of the applicant's previous medical cannabis			
5771	courier agent registration card, each prospective agent described in Subsection (2)(a) shall:			
5772	(i) submit to the department:			
5773	(A) a fingerprint card in a form acceptable to the Department of Public Safety; and			
5774	(B) a signed waiver in accordance with Subsection 53-10-108(4) acknowledging the			
5775	registration of the prospective agent's fingerprints in the Federal Bureau of Investigation Next			
5776	Generation Identification System's Rap Back Service; and			
5777	(ii) consent to a fingerprint background check by:			
5778	(A) the Bureau of Criminal Identification; and			
5779	(B) the Federal Bureau of Investigation.			
5780	(c) The Bureau of Criminal Identification shall:			
5781	(i) check the fingerprints the prospective agent submits under Subsection (2)(b) against			
5782	the applicable state, regional, and national criminal records databases, including the Federal			
5783	Bureau of Investigation Next Generation Identification System;			
5784	(ii) report the results of the background check to the department;			
5785	(iii) maintain a separate file of fingerprints that prospective agents submit under			
5786	Subsection (2)(b) for search by future submissions to the local and regional criminal records			
5787	databases, including latent prints;			
5788	(iv) request that the fingerprints be retained in the Federal Bureau of Investigation Next			
5789	Generation Identification System's Rap Back Service for search by future submissions to			
5790	national criminal records databases, including the Next Generation Identification System and			
5791	latent prints; and			
5792	(v) establish a privacy risk mitigation strategy to ensure that the department only			
5793	receives notifications for an individual with whom the department maintains an authorizing			

5794 relationship.

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- 5795 (d) The department shall:
 - (i) assess an individual who submits fingerprints under Subsection (2)(b) a fee in an amount that the department sets in accordance with Section 63J-1-504 for the services that the Bureau of Criminal Identification or another authorized agency provides under this section; and
 - (ii) remit the fee described in Subsection (2)(d)(i) to the Bureau of Criminal Identification.
 - (3) The department shall designate on an individual's medical cannabis courier agent registration card the name of the medical cannabis pharmacy where the individual is registered as an agent and each home delivery medical cannabis courier for which the medical cannabis courier delivers medical cannabis shipments.
 - (4) (a) A medical cannabis courier agent shall comply with a certification standard that the department develops, in collaboration with the Division of Professional Licensing and the Board of Pharmacy, or a third-party certification standard that the department designates by rule in collaboration with the Division of Professional Licensing and the Board of Pharmacy and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.
 - (b) The department shall ensure that the certification standard described in Subsection (4)(a) includes training in:
 - (i) Utah medical cannabis law;
 - (ii) the medical cannabis shipment process; and
 - (iii) medical cannabis courier agent best practices.
 - (5) (a) A medical cannabis courier agent registration card expires two years after the day on which the department issues or renews the card.
 - (b) A medical cannabis courier agent may renew the agent's registration card if the agent:
 - (i) is eligible for a medical cannabis courier agent registration card under this section;
 - (ii) certifies to the department in a renewal application that the information in Subsection (2)(a) is accurate or updates the information; and
 - (iii) pays to the department a renewal fee in an amount that:
- 5823 (A) subject to Subsection [26-61a-109] 26B-1-310(5), the department sets in accordance with Section 63J-1-504; and

5825	(B) may not exceed the cost of the relatively lower administrative burden of renewal in			
5826	comparison to the original application process.			
5827	(6) The department may revoke or refuse to issue or renew the medical cannabis			
5828	courier agent registration card of an individual who:			
5829	(a) violates the requirements of this [chapter] part; or			
5830	(b) is convicted under state or federal law of:			
5831	(i) a felony within the preceding 10 years; or			
5832	(ii) after December 3, 2018, a misdemeanor for drug distribution.			
5833	(7) A medical cannabis courier agent whom the department has registered under this			
5834	section shall carry the agent's medical cannabis courier agent registration card with the agent at			
5835	all times when:			
5836	(a) the agent is on the premises of the medical cannabis courier, a medical cannabis			
5837	pharmacy, or a medical cannabis cardholder's home address; and			
5838	(b) the agent is handling a medical cannabis shipment.			
5839	(8) If a medical cannabis courier agent handling a medical cannabis shipment possesses			
5840	the shipment in compliance with Subsection (7):			
5841	(a) there is a rebuttable presumption that the agent possesses the shipment legally; and			
5842	(b) there is no probable cause, based solely on the agent's possession of the medical			
5843	cannabis shipment that the agent is engaging in illegal activity.			
5844	(9) (a) A medical cannabis courier agent who violates Subsection (7) is:			
5845	(i) guilty of an infraction; and			
5846	(ii) subject to a \$100 fine.			
5847	(b) An individual who is guilty of a violation described in Subsection (9)(a) is not			
5848	guilty of a violation of Title 58, Chapter 37, Utah Controlled Substances Act, for the conduct			
5849	underlying the violation described in Subsection (9)(a).			
5850	Section 100. Section 26B-4-242, which is renumbered from Section 26-61a-607 is			
5851	renumbered and amended to read:			
5852	[26-61a-607]. <u>26B-4-242.</u> Home delivery of medical cannabis shipments.			
5853	(1) An individual may not receive and a medical cannabis pharmacy agent or a medical			
5854	cannabis courier agent may not deliver a medical cannabis shipment from a home delivery			
5855	medical cannabis pharmacy unless:			

5856	(a) the individual receiving the shipment presents:			
5857	(i) a valid form of photo identification; and			
5858	(ii) (A) a valid medical cannabis card under the same name that appears on the valid			
5859	form of photo identification; or			
5860	(B) for a facility that a medical cannabis cardholder has designated as a caregiver under			
5861	Subsection [26-61a-202] 26B-4-214(1)(b), evidence of the facility caregiver designation; and			
5862	(b) the delivery occurs at:			
5863	(i) the medical cannabis cardholder's home address that is on file in the state electronic			
5864	verification system; or			
5865	(ii) the facility that the medical cannabis cardholder has designated as a caregiver under			
5866	Subsection [26-61a-202] <u>26B-4-214(1)(b)</u> .			
5867	(2) Before a medical cannabis pharmacy agent or a medical cannabis courier agent			
5868	distributes a medical cannabis shipment to a medical cannabis cardholder, the agent shall:			
5869	(a) verify the shipment information using the state electronic verification system;			
5870	(b) ensure that the individual satisfies the identification requirements in Subsection (1);			
5871	(c) verify that payment is complete; and			
5872	(d) record the completion of the shipment transaction in a manner such that the			
5873	delivery of the shipment will later be recorded within a reasonable period in the electronic			
5874	verification system.			
5875	(3) The medical cannabis courier shall:			
5876	(a) (i) store each medical cannabis shipment in a secure manner until the recipient			
5877	medical cannabis cardholder receives the shipment or the medical cannabis courier returns the			
5878	shipment to the home delivery medical cannabis pharmacy in accordance with Subsection (4);			
5879	and			
5880	(ii) ensure that only a medical cannabis courier agent is able to access the medical			
5881	cannabis shipment until the recipient medical cannabis cardholder receives the shipment;			
5882	(b) return any undelivered medical cannabis shipment to the home delivery medical			
5883	cannabis pharmacy, in accordance with Subsection (4), after the medical cannabis courier has			
5884	possessed the shipment for 10 business days; and			
5885	(c) return any medical cannabis shipment to the home delivery medical cannabis			
5886	pharmacy, in accordance with Subsection (4), if a medical cannabis cardholder refuses to			

5887	accept the shipment.			
5888	(4) (a) If a medical cannabis courier or home delivery medical cannabis pharmacy			
5889	agent returns an undelivered medical cannabis shipment that remains unopened, the home			
5890	delivery medical cannabis pharmacy may repackage or otherwise reuse the shipment.			
5891	(b) If a medical cannabis courier or home delivery medical cannabis pharmacy agent			
5892	returns an undelivered or refused medical cannabis shipment under Subsection (3) that appears			
5893	to be opened in any way, the home delivery medical cannabis pharmacy shall dispose of the			
5894	shipment by:			
5895	(i) rendering the shipment unusable and unrecognizable before transporting the			
5896	shipment from the home delivery medical cannabis pharmacy; and			
5897	(ii) disposing of the shipment in accordance with:			
5898	(A) federal and state laws, rules, and regulations related to hazardous waste;			
5899	(B) the Resource Conservation and Recovery Act, 42 U.S.C. Sec. 6991 et seq.;			
5900	(C) Title 19, Chapter 6, Part 5, Solid Waste Management Act; and			
5901	(D) other regulations that the department makes in accordance with Title 63G, Chapter			
5902	3, Utah Administrative Rulemaking Act.			
5903	Section 101. Section 26B-4-301, which is renumbered from Section 26-10b-101 is			
5904	renumbered and amended to read:			
5905	Part 3. Health Care Access			
5906	[26-10b-101]. <u>26B-4-301.</u> Definitions.			
5907	As used in this [chapter] part:			
5908	(1) "Account" means the Automatic External Defibrillator Restricted Account, created			
5909	<u>in Section 26B-1-307.</u>			
5910	(2) "Automatic external defibrillator" or "AED" means an automated or automatic			
5911	computerized medical device that:			
5912	(a) has received pre-market notification approval from the United States Food and			
5913	Drug Administration, pursuant to 21 U.S.C. Sec. 360(k);			
5914	(b) is capable of recognizing the presence or absence of ventricular fibrillation or rapid			
5915	ventricular tachycardia;			
5916	(c) is capable of determining, without intervention by an operator, whether			

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defibrillation should be performed; and

5918	(d) upon determining that defibrillation should be performed, automatically charges,			
5919	enabling delivery of, or automatically delivers, an electrical impulse through the chest wall and			
5920	to a person's heart.			
5921	(3) "Bureau" means the Bureau of Emergency Medical Services within the department.			
5922	(4) "Cardiopulmonary resuscitation" or "CPR" means artificial ventilation or external			
5923	chest compression applied to a person who is unresponsive and not breathing.			
5924	[(1)] (5) "Committee" means the Primary Care Grant Committee described in Section			
5925	[26-10b-106] <u>26B-1-410</u> .			
5926	[(2)] <u>(6)</u> "Community based organization":			
5927	(a) means a private entity; and			
5928	(b) includes for profit and not for profit entities.			
5929	[(3)] (7) "Cultural competence" means a set of congruent behaviors, attitudes, and			
5930	policies that come together in a system, agency, or profession and enables that system, agency,			
5931	or profession to work effectively in cross-cultural situations.			
5932	[(4) "Executive director" means the executive director of the department.]			
5933	(8) "Emergency medical dispatch center" means a public safety answering point, as			
5934	defined in Section 63H-7a-103, that is designated as an emergency medical dispatch center by			
5935	the bureau.			
5936	[(5)] (9) "Health literacy" means the degree to which an individual has the capacity to			
5937	obtain, process, and understand health information and services needed to make appropriate			
5938	health decisions.			
5939	[69] (10) "Institutional capacity" means the ability of a community based organization			
5940	to implement public and private contracts.			
5941	$[\frac{(7)}{2}]$ "Medically underserved population" means the population of an urban or			
5942	rural area or a population group that the committee determines has a shortage of primary health			
5943	care.			
5944	[(8)] <u>(12)</u> "Primary care grant" means a grant awarded by the department under			
5945	Subsection [26-10b-102] <u>26B-4-310(1)</u> .			
5946	$\left[\frac{(9)}{(13)}\right]$ (a) "Primary health care" means:			
5947	(i) basic and general health care services given when a person seeks assistance to			
5948	screen for or to prevent illness and disease, or for simple and common illnesses and injuries;			

5949	and		
5950	(ii) care given for the management of chronic diseases.		
5951	(b) "Primary health care" includes:		
5952	(i) services of physicians, nurses, physician's assistants, and dentists licensed to		
5953	practice in this state under Title 58, Occupations and Professions;		
5954	(ii) diagnostic and radiologic services;		
5955	(iii) preventive health services including perinatal services, well-child services, and		
5956	other services that seek to prevent disease or its consequences;		
5957	(iv) emergency medical services;		
5958	(v) preventive dental services; and		
5959	(vi) pharmaceutical services.		
5960	[(10) "Program" means the primary care grant program created under this chapter.]		
5961	(14) "Sudden cardiac arrest" means a life-threatening condition that results when a		
5962	person's heart stops or fails to produce a pulse.		
5963	Section 102. Section 26B-4-302, which is renumbered from Section 26-8b-201 is		
5964	renumbered and amended to read:		
5965	[26-8b-201]. <u>26B-4-302.</u> Authority to administer CPR or use an AED.		
5966	(1) A person may administer CPR on another person without a license, certificate, or		
5967	other governmental authorization if the person reasonably believes that the other person is in		
5968	sudden cardiac arrest.		
5969	(2) A person may use an AED on another person without a license, certificate, or other		
5970	governmental authorization if the person reasonably believes that the other person is in sudden		
5971	cardiac arrest.		
5972	Section 103. Section 26B-4-303, which is renumbered from Section 26-8b-202 is		
5973	renumbered and amended to read:		
5974	[26-8b-202]. 26B-4-303. Immunity.		
5975	(1) Except as provided in Subsection (3), the following persons are not subject to civil		
5976	liability for any act or omission relating to preparing to care for, responding to care for, or		
5977	providing care to, another person who reasonably appears to be in sudden cardiac arrest:		
5978	(a) a person authorized, under Section [26-8b-201] <u>26B-4-302</u> , to administer CPR,		
5979	who:		

5980	(i) gratuitously and in good faith attempts to administer or administers CPR to another		
5981	person; or		
5982	(ii) fails to administer CPR to another person;		
5983	(b) a person authorized, under Section [26-8b-201] 26B-4-302 , to use an AED who:		
5984	(i) gratuitously and in good faith attempts to use or uses an AED; or		
5985	(ii) fails to use an AED;		
5986	(c) a person that teaches or provides a training course in administering CPR or using an		
5987	AED;		
5988	(d) a person that acquires an AED;		
5989	(e) a person that owns, manages, or is otherwise responsible for the premises or		
5990	conveyance where an AED is located;		
5991	(f) a person who retrieves an AED in response to a perceived or potential sudden		
5992	cardiac arrest;		
5993	(g) a person that authorizes, directs, or supervises the installation or provision of an		
5994	AED;		
5995	(h) a person involved with, or responsible for, the design, management, or operation of		
5996	a CPR or AED program;		
5997	(i) a person involved with, or responsible for, reporting, receiving, recording, updating,		
5998	giving, or distributing information relating to the ownership or location of an AED under [Part		
5999	3, Automatic External Defibrillator Databases] Sections 26B-4-304 through 26B-4-306; or		
6000	(j) a physician who gratuitously and in good faith:		
6001	(i) provides medical oversight for a public AED program; or		
6002	(ii) issues a prescription for a person to acquire or use an AED.		
6003	(2) This section does not relieve a manufacturer, designer, developer, marketer, or		
6004	commercial distributor of an AED, or an accessory for an AED, of any liability.		
6005	(3) The liability protection described in Subsection (1) does not apply to an act or		
6006	omission that constitutes gross negligence or willful misconduct.		
6007	Section 104. Section 26B-4-304, which is renumbered from Section 26-8b-301 is		
6008	renumbered and amended to read:		
6009	[26-8b-301]. <u>26B-4-304.</u> Reporting location of automatic external		
6010	defibrillators.		

6011	(1) In accordance with Subsection (2) and except as provided in Subsection (3):			
6012	(a) a person who owns or leases an AED shall report the person's name, address, and			
6013	telephone number, and the exact location of the AED, in writing or by a web-based AED			
6014	registration form, if available, to the emergency medical dispatch center that provides			
6015	emergency dispatch services for the location where the AED is installed, if the person:			
6016	(i) installs the AED;			
6017	(ii) causes the AED to be installed; or			
6018	(iii) allows the AED to be installed; and			
6019	(b) a person who owns or leases an AED that is removed from a location where it is			
6020	installed shall report the person's name, address, and telephone number, and the exact location			
6021	from which the AED is removed, in writing or by a web-based AED registration form, if			
6022	available, to the emergency medical dispatch center that provides emergency dispatch services			
6023	for the location from which the AED is removed, if the person:			
6024	(i) removes the AED;			
6025	(ii) causes the AED to be removed; or			
6026	(iii) allows the AED to be removed.			
6027	(2) A report required under Subsection (1) shall be made within 14 days after the day			
6028	on which the AED is installed or removed.			
6029	(3) Subsection (1) does not apply to an AED:			
6030	(a) at a private residence; or			
6031	(b) in a vehicle or other mobile or temporary location.			
6032	(4) A person who owns or leases an AED that is installed in, or removed from, a			
6033	private residence may voluntarily report the location of, or removal of, the AED to the			
6034	emergency medical dispatch center that provides emergency dispatch services for the location			
6035	where the private residence is located.			
6036	(5) The department may not impose a penalty on a person for failing to comply with			
6037	the requirements of this section.			
6038	Section 105. Section 26B-4-305, which is renumbered from Section 26-8b-302 is			
6039	renumbered and amended to read:			

A person in the business of selling or leasing an AED shall, at the time the person

<u>26B-4-305.</u> Distributors to notify of reporting requirements.

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[26-8b-302].

6042	provides, sells, or leases an AED to another person, notify the other person, in writing, of the			
6043	reporting requirements described in Section [26-8b-301] <u>26B-4-304</u> .			
6044	Section 106. Section 26B-4-306, which is renumbered from Section 26-8b-303 is			
6045	renumbered and amended to read:			
6046	[26-8b-303].	26B-4-306. Duties of emergency medical dispatch centers.		
6047	An emergency medical dispatch center shall:			
6048	(1) implement a system to receive and manage the information reported to the			
6049	emergency medical dispatch center under Section [26-8b-301] <u>26B-4-304</u> ;			
6050	(2) record in the sy	estem described in Subsection (1), all information received under		
6051	Section [26-8b-301] <u>26B-4</u>	-304 within 14 days after the day on which the information is		
6052	received;			
6053	(3) inform a person who calls to report a potential incident of sudden cardiac arrest of			
6054	the location of an AED located at the address of the potential sudden cardiac arrest;			
6055	(4) provide verbal instructions to a person described in Subsection (3) to:			
6056	(a) help a person determine if a patient is in cardiac arrest; and			
6057	(b) if needed:			
6058	(i) provide direction to start CPR;			
6059	(ii) offer instructio	ns on how to perform CPR; or		
6060	(iii) offer instructions on how to use an AED, if one is available; and			
6061	(5) provide the information contained in the system described in Subsection (1), upon			
6062	request, to the bureau.			
6063	Section 107. Section 26B-4-307, which is renumbered from Section 26-8b-401 is			
6064	renumbered and amended to read:			
6065	[26-8b-401].	26B-4-307. Education and training.		
6066	(1) The bureau sha	ll work in cooperation with federal, state, and local agencies and		
6067	schools, to encourage individuals to complete courses on the administration of CPR and the use			
6068	of an AED.			
6069	(2) A person who owns or leases an AED shall encourage each person who is likely to			
6070	use the AED to complete c	ourses on the administration of CPR and the use of an AED.		
6071	Section 108. Section 26B-4-308, which is renumbered from Section 26-8b-402 is			
6072	renumbered and amended to read:			

00/3	[20-80-402]. AEDs for demonstration purposes.	
6074	(1) Any AED used solely for demonstration or training purposes, which is not	
6075	operational for emergency use is, except for the provisions of this section, exempt from the	
6076	provisions of this [chapter] part.	
6077	(2) The owner of an AED described in Subsection (1) shall clearly mark on the exterior	r
6078	of the AED that the AED is for demonstration or training use only.	
6079	Section 109. Section 26B-4-309, which is renumbered from Section 26-8b-501 is	
6080	renumbered and amended to read:	
6081	[26-8b-501]. <u>26B-4-309.</u> Tampering with an AED prohibited Penalties.	
6082	A person is guilty of a class C misdemeanor if the person removes, tampers with, or	
6083	otherwise disturbs an AED, AED cabinet or enclosure, or AED sign, unless:	
6084	(1) the person is authorized by the AED owner for the purpose of:	
6085	(a) inspecting the AED or AED cabinet or enclosure; or	
6086	(b) performing maintenance or repairs on the AED, the AED cabinet or enclosure, a	
6087	wall or structure that the AED cabinet or enclosure is directly attached to, or an AED sign;	
6088	(2) the person is responding to, or providing care to, a potential sudden cardiac arrest	
6089	patient; or	
6090	(3) the person acts in good faith with the intent to support, and not to violate, the	
6091	recognized purposes of the AED.	
6092	Section 110. Section 26B-4-310 , which is renumbered from Section 26-10b-102 is	
6093	renumbered and amended to read:	
6094	[26-10b-102]. <u>26B-4-310.</u> Department to award grants Applications.	
6095	(1) Within appropriations specified by the Legislature for this purpose, the department	ţ
6096	may, in accordance with the recommendation of the committee, award a grant to a public or	
6097	nonprofit entity to provide primary health care to a medically underserved population.	
6098	(2) When awarding a grant under Subsection (1), the department shall, in accordance	
6099	with the committee's recommendation, consider:	
6100	(a) the content of a grant application submitted to the department;	
6101	(b) whether an application is submitted in the manner and form prescribed by the	
6102	department; and	
6103	(c) the criteria established in Section [26-10b-103] 26B-4-311 .	

6104	(3) The application for a grant under Subsection (2)(a) shall contain:
6105	(a) a requested award amount;
6106	(b) a budget; and
6107	(c) a narrative plan of the manner in which the applicant intends to provide the primary
6108	health care described in Subsection (1).
6109	Section 111. Section 26B-4-311, which is renumbered from Section 26-10b-103 is
6110	renumbered and amended to read:
6111	[26-10b-103]. <u>26B-4-311.</u> Content of grant applications.
6112	An applicant for a grant under [this chapter] Section 26B-4-310 shall include, in an
6113	application:
6114	(1) a statement of specific, measurable objectives, and the methods the applicant will
6115	use to assess the achievement of those objectives;
6116	(2) the precise boundaries of the area the applicant will serve, including a description
6117	of the medically underserved population the applicant will serve using the grant;
6118	(3) the results of a need assessment that demonstrates that the population the applicant
6119	will serve has a need for the services provided by the applicant;
6120	(4) a description of the personnel responsible for carrying out the activities of the grant
6121	along with a statement justifying the use of any grant funds for the personnel;
6122	(5) evidence that demonstrates the applicant's existing financial and professional
6123	assistance and any attempts by the applicant to obtain financial and professional assistance;
6124	(6) a list of services the applicant will provide;
6125	(7) the schedule of fees, if any, the applicant will charge;
6126	(8) the estimated number of individuals the applicant will serve with the grant award;
6127	and
6128	(9) any other information required by the department in consultation with the
6129	committee.
6130	Section 112. Section 26B-4-312, which is renumbered from Section 26-10b-104 is
6131	renumbered and amended to read:
6132	[26-10b-104]. <u>26B-4-312.</u> Process and criteria for awarding primary care
6133	grants.
6134	(1) The department shall review and rank applications based on the criteria in this

section and transmit the applications to the committee for review.

- (2) The committee shall, after reviewing the applications transferred to the committee under Subsection (1), make recommendations to the executive director.
- (3) The executive director shall, in accordance with the committee's recommendations, decide which applications to award grants under Subsection [26-10b-102] 26B-4-310(1).
- (4) The department shall establish rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, governing the application form, the process, and the criteria the department will use in reviewing, ranking, and awarding grants and contracts under this chapter.
- (5) When reviewing, ranking, and awarding a primary care grant under Subsection [26-10b-102] 26B-4-310(1), the department shall consider the extent to which an applicant:
- (a) demonstrates that the area or a population group the applicant will serve under the application has a shortage of primary health care and that the primary health care will be located so that it provides assistance to the greatest number of individuals in the population group;
- (b) utilizes other sources of funding, including private funding, to provide primary health care;
 - (c) demonstrates the ability and expertise to serve a medically underserved population;
 - (d) agrees to submit a report to the committee annually; and
- 6154 (e) meets other criteria determined by the department in consultation with the committee.
 - (6) The department may use up to 5% of the funds appropriated by the Legislature to the primary care grant program [under this chapter] to pay the costs of administering the program.
 - Section 113. Section **26B-4-313**, which is renumbered from Section 26-10b-107 is renumbered and amended to read:

[26-10b-107]. <u>26B-4-313.</u> Community education and outreach contracts.

(1) The department may, as funding permits, contract with community based organizations for the purpose of developing culturally and linguistically appropriate programs and services for low income and medically underserved populations to accomplish one or more of the following:

6166	(a) to educate individuals:
6167	(i) to use private and public health care coverage programs, products, services, and
6168	resources in a timely, effective, and responsible manner;
6169	(ii) to pursue preventive health care, health screenings, and disease management; and
6170	(iii) to locate health care programs and services;
6171	(b) to assist individuals to develop:
6172	(i) personal health management;
6173	(ii) self-sufficiency in daily care; and
6174	(iii) life and disease management skills;
6175	(c) to support translation of health materials and information;
6176	(d) to facilitate an individual's access to primary care and providers, including mental
6177	health services; and
6178	(e) to measure and report empirical results of the pilot project.
6179	(2) When awarding a contract for community based services under Subsection (1), the
6180	department shall consider the extent to which the applicant:
6181	(a) demonstrates that the area or a population group to be served under the application
6182	is a medically underserved population and that the services will be located to provide
6183	assistance to the greatest number of individuals residing in the area or included in the
6184	population group;
6185	(b) utilizes other sources of funding, including private funding, to provide the services
6186	described in Subsection (1);
6187	(c) demonstrates the ability and expertise to serve medically underserved populations,
6188	including individuals with limited English-speaking ability, single heads of households, the
6189	elderly, individuals with low income, and individuals with a chronic disease;
6190	(d) meets other criteria determined by the department; and
6191	(e) demonstrates the ability to empirically measure and report the results of all contract
6192	supported activities.
6193	(3) The department may only award a contract under Subsection (1):
6194	(a) in accordance with Title 63G, Chapter 6a, Utah Procurement Code;
6195	(b) that contains the information described in Section [26-10b-103] <u>26B-4-311</u> ,
6196	relating to grants; and

6197	(c) that complies with Subsections (4) and (5).
6198	(4) An applicant under this chapter shall demonstrate to the department that the
6199	applicant will not deny services to a person because of the person's inability to pay for the
6200	services.
6201	(5) Subsection (4) does not preclude an applicant from seeking payment from the
6202	person receiving services, a third party, or a government agency if:
6203	(a) the applicant is authorized to charge for the services; and
6204	(b) the person, third party, or government agency is under legal obligation to pay for
6205	the services.
6206	(6) The department shall maximize the use of federal matching funds received for
6207	services under Subsection (1) to fund additional contracts under Subsection (1).
6208	Section 114. Section 26B-4-314, which is renumbered from Section 26-9-1 is
6209	renumbered and amended to read:
6210	[26-9-1]. <u>26B-4-314.</u> Assistance to rural communities by department.
6211	The department shall assist rural communities in dealing with primary health care needs
6212	relating to recruiting health professionals, planning, and technical assistance. The department
6213	shall assist the communities, at their request, at any stage of development of new or expanded
6214	primary health care services and shall work with them to improve primary health care by
6215	providing information to increase the effectiveness of their systems, to decrease duplication
6216	and fragmentation of services, and to maximize community use of private gifts, and local, state,
6217	and federal grants and contracts.
6218	Section 115. Section 26B-4-315, which is renumbered from Section 26-9-2 is
6219	renumbered and amended to read:
6220	[26-9-2]. <u>26B-4-315.</u> Responsibility of department for coordinating rural
6221	health programs.
6222	The department shall be the lead agency responsible for coordinating rural health
6223	programs and shall insure that resources available for rural health are efficiently and effectively
6224	used.
6225	Section 116. Section 26B-4-316 , which is renumbered from Section 26-9-3 is

26B-4-316. Rural health development initiatives.

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6227

renumbered and amended to read:

 $[\frac{26-9-3}{2}]$.

6228	(1) (a) The University of Utah Health Science Center shall use any appropriations it
6229	receives for developing area health education centers to establish and maintain an area health
6230	education center program in accordance with this section.
6231	(b) Implementation and execution of the area health education center program is
6232	contingent upon appropriations from the Legislature.
6233	(2) (a) The area health education center program shall consist of a central program
6234	office at the University of Utah Health Science Center. The program office shall establish and
6235	operate a statewide, decentralized, regional program with emphasis on addressing rural health
6236	professions workforce education and training needs.
6237	(b) The area health education center program shall have five regional centers serving
6238	the following geographic areas:
6239	(i) the northern center serving Box Elder, Cache, Rich, Weber, and Morgan counties;
6240	(ii) the crossroads center serving Salt Lake, Wasatch, Summit, Tooele, Utah, and Davis
6241	counties;
6242	(iii) the central center serving Juab, Millard, Piute, Sanpete, Sevier, and Wayne
6243	counties;
6244	(iv) the eastern center serving Carbon, Daggett, Duchesne, Emery, Grand, San Juan,
6245	and Uintah counties; and
6246	(v) the southwest center serving Beaver, Garfield, Iron, Kane, and Washington
6247	counties.
6248	(3) The area health education center program shall attempt to acquire funding from
6249	state, local, federal, and private sources.
6250	(4) Each area health education center shall provide community-based health
6251	professions education programming for the geographic area described in Subsection (2)(b) of
6252	this section.
6253	Section 117. Section 26B-4-317, which is renumbered from Section 26-9-5 is
6254	renumbered and amended to read:
6255	[26-9-5]. <u>26B-4-317.</u> Rural County Health Care Special Service District
6256	Retirement Grant Program.
6257	(1) As used in this section:

(a) "Participating employer" means an employer that was required to participate in the

6259 Utah State Retirement System under Section 49-12-201, 49-12-202, 49-13-201, or 49-13-202.

- (b) "Retirement liability" means an obligation in excess of \$750,000 owed to the Utah State Retirement Office by a rural county health care special service district as a participating employer.
- (c) "Rural county health care special service district" means a special service district formed to provide health care in a third, fourth, fifth, or sixth class county as defined in Section 17-50-501.
- (2) Because there is a compelling statewide public purpose in promoting health care in Utah's rural counties, and particularly in ensuring the continued existence and financial viability of hospital services provided by rural county health care special service districts, there is created a grant program to assist rural county health care special service districts in meeting a retirement liability.
- (3) (a) Subject to legislative appropriation and this Subsection (3), the department shall make grants to rural county health care special service districts.
 - (b) To qualify for a grant, a rural county health care special service district shall:
 - (i) file a grant application with the department detailing:
 - (A) the name of the rural county health care special service district;
 - (B) the estimated total amount of the retirement liability;
- (C) the grant amount that the rural county health care special service district is requesting; and
- (D) the amount of matching funds to be provided by the rural county health care special service district to help fund the retirement liability as required by Subsection (3)(d); and
 - (ii) commit to provide matching funds as required by Subsection (3)(d).
- (c) The department shall review each grant application and, subject to legislative appropriation, award grants to each rural health care special service district that qualifies for a grant under Subsection (3)(b).
- (d) The department may not award a grant to a rural county health care special service district unless the rural county health care special service district commits to provide matching funds to the grant equal to at least 40% of the amount of the grant.
- Section 118. Section **26B-4-318**, which is renumbered from Section 26-10-2 is renumbered and amended to read:

6290	[26-10-2]. <u>26B-4-318.</u> Maternal and child health provided by department.
6291	The department shall, as funding permits, provide for maternal and child health services
6292	and services for children with a disability if the individual needs the services and the individual
6293	cannot reasonably obtain the services from other sources.
6294	Section 119. Section 26B-4-319, which is renumbered from Section 26-10-6 is
6295	renumbered and amended to read:
6296	$[\frac{26-10-6}{2}]$. 26B-4-319. Testing of newborn infants.
6297	(1) Except in the case where parents object on the grounds that they are members of a
6298	specified, well-recognized religious organization whose teachings are contrary to the tests
6299	required by this section, a newborn infant shall be tested for:
6300	(a) phenylketonuria (PKU);
6301	(b) other heritable disorders which may result in an intellectual or physical disability or
6302	death and for which:
6303	(i) a preventive measure or treatment is available; and
6304	(ii) there exists a reliable laboratory diagnostic test method;
6305	(c) (i) an infant born in a hospital with 100 or more live births annually, hearing loss;
6306	and
6307	(ii) an infant born in a setting other than a hospital with 100 or more live births
6308	annually, hearing loss; and
6309	(d) critical congenital heart defects using pulse oximetry.
6310	(2) In accordance with Section 26B-1-209, the department may charge fees for:
6311	(a) materials supplied by the department to conduct tests required under Subsection (1);
6312	(b) tests required under Subsection (1) conducted by the department;
6313	(c) laboratory analyses by the department of tests conducted under Subsection (1); and
6314	(d) the administrative cost of follow-up contacts with the parents or guardians of tested
6315	infants.
6316	(3) Tests for hearing loss described in Subsection (1) shall be based on one or more
6317	methods approved by the Newborn Hearing Screening Committee, including:
6318	(a) auditory brainstem response;
6319	(b) automated auditory brainstem response; and
6320	(c) evoked otoacoustic emissions.

6321	(4) Results of tests for hearing loss described in Subsection (1) shall be reported to:
6322	(a) the department; and
6323	(b) when results of tests for hearing loss under Subsection (1) suggest that additional
6324	diagnostic procedures or medical interventions are necessary:
6325	(i) a parent or guardian of the infant;
6326	(ii) an early intervention program administered by the department in accordance with
6327	Part C of the Individuals with Disabilities Education Act, 20 U.S.C. Sec. 1431 et seq.; and
6328	(iii) the Utah Schools for the Deaf and the Blind, created in Section 53E-8-201.
6329	[(5) (a) There is established the Newborn Hearing Screening Committee.]
6330	[(b) The committee shall advise the department on:]
6331	[(i) the validity and cost of newborn infant hearing loss testing procedures; and]
6332	[(ii) rules promulgated by the department to implement this section.]
6333	[(c) The committee shall be composed of at least 11 members appointed by the
6334	executive director, including:
6335	[(i) one representative of the health insurance industry;]
6336	[(ii) one pediatrician;]
6337	[(iii) one family practitioner;]
6338	[(iv) one ear, nose, and throat specialist nominated by the Utah Medical Association;]
6339	[(v) two audiologists nominated by the Utah Speech-Language-Hearing Association;]
6340	[(vi) one representative of hospital neonatal nurseries;]
6341	[(vii) one representative of the Early Intervention Baby Watch Program administered
6342	by the department;]
6343	[(viii) one public health nurse;]
6344	[(ix) one consumer; and]
6345	[(x) the executive director or the executive director's designee.]
6346	[(d) Of the initial members of the committee, the executive director shall appoint as
6347	nearly as possible half to two-year terms and half to four-year terms. Thereafter, appointments
6348	shall be for four-year terms except:]
6349	[(i) for those members who have been appointed to complete an unexpired term; and]
6350	[(ii) as necessary to ensure that as nearly as possible the terms of half the appointments
6351	expire every two years.]

6352	(e) A majority of the members constitute a quorum, and a vote of the majority of the
6353	members present constitutes an action of the committee.
6354	[(f) The committee shall appoint a chairman from the committee's membership.]
6355	[(g) The committee shall meet at least quarterly.]
6356	[(h) A member may not receive compensation or benefits for the member's service, but
6357	may receive per diem and travel expenses in accordance with:
6358	[(i) Section 63A-3-106;]
6359	[(ii) Section 63A-3-107; and]
6360	[(iii) rules made by the Division of Finance pursuant to Sections 63A-3-106 and
6361	63A-3-107.]
6362	[(i) The department shall provide staff for the committee.]
6363	[(6)] (5) Before implementing the test required by Subsection (1)(d), the department
6364	shall conduct a pilot program for testing newborns for critical congenital heart defects using
6365	pulse oximetry. The pilot program shall include the development of:
6366	(a) appropriate oxygen saturation levels that would indicate a need for further medical
6367	follow-up; and
6368	(b) the best methods for implementing the pulse oximetry screening in newborn care
6369	units.
6370	Section 120. Section 26B-4-320, which is renumbered from Section 26-10-7 is
6371	renumbered and amended to read:
6372	[26-10-7]. <u>26B-4-320.</u> Dental health programs Appointment of director.
6373	The department shall establish and promote programs to protect and improve the dental
6374	health of the public. The executive director shall appoint a director of the dental health program
6375	who shall be a dentist licensed in the state with at least one year of training in an accredited
6376	school of public health or not less than two years of experience in public health dentistry.
6377	Section 121. Section 26B-4-321, which is renumbered from Section 26-10-9 is
6378	renumbered and amended to read:
6379	[26-10-9]. <u>26B-4-321.</u> Immunizations Consent of minor to treatment.
6380	(1) This section:
6381	(a) is not intended to interfere with the integrity of the family or to minimize the rights
6382	of parents or children; and

6383	(b) applies to a minor, who at the time care is sought is:
6384	(i) married or has been married;
6385	(ii) emancipated as provided for in Section 80-7-105;
6386	(iii) a parent with custody of a minor child; or
6387	(iv) pregnant.
6388	(2) (a) A minor described in Subsections (1)(b)(i) and (ii) may consent to:
6389	(i) vaccinations against epidemic infections and communicable diseases as defined in
6390	Section [26-6-2] <u>26B-7-201</u> ; and
6391	(ii) examinations and vaccinations required to attend school as provided in Title 53G,
6392	Public Education System Local Administration.
6393	(b) A minor described in Subsections (1)(b)(iii) and (iv) may consent to the
6394	vaccinations described in Subsections (2)(a)(i) and (ii), and the vaccine for human
6395	papillomavirus only if:
6396	(i) the minor represents to the health care provider that the minor is an abandoned
6397	minor as defined in Section 76-5-109.3; and
6398	(ii) the health care provider makes a notation in the minor's chart that the minor
6399	represented to the health care provider that the minor is an abandoned minor under Section
6400	76-5-109.3.
6401	(c) Nothing in Subsection (2)(a) or (b) requires a health care provider to immunize a
6402	minor.
6403	(3) The consent of the minor pursuant to this section:
6404	(a) is not subject to later disaffirmance because of the minority of the person receiving
6405	the medical services;
6406	(b) is not voidable because of minority at the time the medical services were provided;
6407	(c) has the same legal effect upon the minor and the same legal obligations with regard
6408	to the giving of consent as consent given by a person of full age and capacity; and
6409	(d) does not require the consent of any other person or persons to authorize the medical
6410	services described in Subsections (2)(a) and (b).
6411	(4) A health care provider who provides medical services to a minor in accordance
6412	with the provisions of this section is not subject to civil or criminal liability for providing the

services described in Subsections (2)(a) and (b) without obtaining the consent of another

6414	person prior to rendering the medical services.
6415	(5) This section does not remove the requirement for parental consent or notice when
6416	required by Section 76-7-304 or 76-7-304.5.
6417	(6) The parents, parent, or legal guardian of a minor who receives medical services
6418	pursuant to Subsections (2)(a) and (b) are not liable for the payment for those services unless
6419	the parents, parent, or legal guardian consented to the medical services.
6420	Section 122. Section 26B-4-322, which is renumbered from Section 26-10-11 is
6421	renumbered and amended to read:
6422	[26-10-11]. <u>26B-4-322.</u> Children's Hearing Aid Program Rulemaking.
6423	(1) The department shall offer a program to provide hearing aids to children who
6424	qualify under this section.
6425	(2) The department shall provide hearing aids to a child who:
6426	(a) is younger than six years old;
6427	(b) is a resident of Utah;
6428	(c) has been diagnosed with hearing loss by:
6429	(i) an audiologist with pediatric expertise; and
6430	(ii) a physician or physician assistant;
6431	(d) provides documentation from an audiologist with pediatric expertise certifying that
6432	the child needs hearing aids;
6433	(e) has obtained medical clearance by a medical provider for hearing aid fitting;
6434	(f) does not qualify to receive a contribution that equals the full cost of a hearing aid
6435	from the state's Medicaid program or the Utah Children's Health Insurance Program; and
6436	(g) meets the financial need qualification criteria established by the department by rule
6437	made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, for
6438	participation in the program.
6439	[(3) (a) There is established the Children's Hearing Aid Advisory Committee.]
6440	[(b) The committee shall be composed of five members appointed by the executive
6441	director, and shall include:]
6442	[(i) one audiologist with pediatric expertise;]
6443	[(ii) one speech language pathologist;]
6444	(iii) one teacher certified under Title 53E. Public Education System State

6445	Administration, as a teacher of the deaf or a listening and spoken language therapist;]
6446	[(iv) one ear, nose, and throat specialist; and]
6447	[(v) one parent whose child:]
6448	[(A) is six years old or older; and]
6449	[(B) has hearing loss.]
6450	[(c) A majority of the members constitutes a quorum.]
6451	[(d) A vote of the majority of the members, with a quorum present, constitutes an
6452	action of the committee.]
6453	[(e) The committee shall elect a chair from its members.]
6454	[(f) The committee shall:]
6455	[(i) meet at least quarterly;]
6456	[(ii) recommend to the department medical criteria and procedures for selecting
6457	children who may qualify for assistance from the account; and]
6458	[(iii) review rules developed by the department.]
6459	[(g) A member may not receive compensation or benefits for the member's service, but
6460	may receive per diem and travel expenses in accordance with Sections 63A-3-106 and
6461	63A-3-107 and rules made by the Division of Finance, pursuant to Sections 63A-3-106 and
6462	63A-3-107.]
6463	[(h) The department shall provide staff to the committee.]
6464	[(4) (a) There is created within the General Fund a restricted account known as the
6465	"Children's Hearing Aid Program Restricted Account."]
6466	[(b) The Children's Hearing Aid Program Restricted Account shall consist of:]
6467	[(i) amounts appropriated to the account by the Legislature; and]
6468	[(ii) gifts, grants, devises, donations, and bequests of real property, personal property,
6469	or services, from any source, or any other conveyance that may be made to the account from
6470	private sources.]
6471	[(c) Upon appropriation, all actual and necessary operating expenses for the committee
6472	described in Subsection (3) shall be paid by the account.]
6473	[(d) Upon appropriation, no more than 9% of the account money may be used for the
6474	department's expenses.]
6475	(e) If this account is repealed in accordance with Section 63I-1-226, any remaining

assets in the account shall be deposited into the General Fund.

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6477	[(5)] (3) (a) For each child who receives a hearing aid under Subsection (2), the
6478	department shall maintain a record of the cost of providing services to the child under this
6479	section.
6480	(b) No more than six months after services are provided to a child under this section,
6481	the department shall send a letter to the family of the child who received services that includes
6482	information regarding:
6483	(i) the total amount paid by the department to provide services to the child under this
6484	section; and
6485	(ii) the process by which the family may donate all or part of the amount paid to
6486	provide services to the child to fund the Children's Hearing Aid Program.
6487	(c) All donations made under Subsection [(6)] (4)(c) shall be deposited into the
6488	Children's Hearing Aid Program Restricted Account created in [Subsection (4)(a)] Section
6489	<u>26B-1-333</u> .
6490	[(6)] (4) The department shall make rules, in accordance with Title 63G, Chapter 3,
6491	Utah Administrative Rulemaking Act, to establish procedures for:
6492	(a) identifying the children who are financially eligible to receive services under the
6493	program;
6494	(b) reviewing and paying for services provided to a child under the program; and
6495	(c) an individual to donate to the program all or part of the cost of providing services to
6496	a child under this section, without regard to whether the donation is made in response to the

renumbered and amended to read:

letter described in Subsection [(5)] (3)(b).

[26-10-13]. 26B-4-323. Reporting results of a test for hearing loss.

- (1) As used in this section, "health care provider" means the same as that term is defined in Section 78B-3-403.
- (2) Except as provided in Subsection (3), a health care provider shall report results of a test for hearing loss to the Utah Schools for the Deaf and the Blind if:

Section 123. Section 26B-4-323, which is renumbered from Section 26-10-13 is

6505 (a) the results suggest that additional diagnostic procedures or medical interventions 6506 are necessary; and

6507	(b) the individual tested for hearing loss is under the age of 22.
6508	(3) A health care provider may not make the report of an individual's results described
6509	in Subsection (2) if the health care provider receives a request to not make the report from:
6510	(a) the individual, if the individual is not a minor; or
6511	(b) the individual's parent or guardian, if the individual is a minor.
6512	Section 124. Section 26B-4-401, which is renumbered from Section 26-53-102 is
6513	renumbered and amended to read:
6514	Part 4. School Health
6515	[26-53-102]. <u>26B-4-401.</u> Definitions.
6516	As used in this [chapter] part:
6517	(1) "Agent" means a coach, teacher, employee, representative, or volunteer.
6518	(2) (a) "Amateur sports organization" means, except as provided in Subsection (2)(b):
6519	(i) a sports team;
6520	(ii) a public or private school;
6521	(iii) a public or private sports league;
6522	(iv) a public or private sports camp; or
6523	(v) any other public or private organization that organizes, manages, or sponsors a
6524	sporting event for its members, enrollees, or attendees.
6525	(b) "Amateur sports organization" does not include a professional:
6526	(i) team;
6527	(ii) league; or
6528	(iii) sporting event.
6529	(3) "Anaphylaxis" means a potentially life-threatening hypersensitivity to a substance.
6530	(a) Symptoms of anaphylaxis may include shortness of breath, wheezing, difficulty
6531	breathing, difficulty talking or swallowing, hives, itching, swelling, shock, or asthma.
6532	(b) Causes of anaphylaxis may include insect sting, food allergy, drug reaction, and
6533	exercise.
6534	(4) "Asthma action plan" means a written plan:
6535	(a) developed with a school nurse, a student's parent or guardian, and the student's
6536	health care provider to help control the student's asthma; and
6537	(b) signed by the student's:

6538	(i) parent or guardian; and
6539	(ii) health care provider.
6540	(5) "Asthma emergency" means an episode of respiratory distress that may include
6541	symptoms such as wheezing, shortness of breath, coughing, chest tightness, or breathing
6542	difficulty.
6543	[(3)] (6) "Child" means an individual who is under the age of 18.
6544	(7) "Epinephrine auto-injector" means a portable, disposable drug delivery device that
6545	contains a measured, single dose of epinephrine that is used to treat a person suffering a
6546	potentially fatal anaphylactic reaction.
6547	(8) "Health care provider" means an individual who is licensed as:
6548	(a) a physician under Title 58, Chapter 67, Utah Medical Practice Act;
6549	(b) a physician under Title 58, Chapter 68, Utah Osteopathic Medical Practice Act;
6550	(c) an advanced practice registered nurse under Section 58-31b-302; or
6551	(d) a physician assistant under Title 58, Chapter 70a, Utah Physician Assistant Act.
6552	(9) "Pharmacist" means the same as that term is defined in Section 58-17b-102.
6553	(10) "Pharmacy intern" means the same as that term is defined in Section 58-17b-102.
6554	(11) "Physician" means the same as that term is defined in Section 58-67-102.
6555	(12) "Qualified adult" means a person who:
6556	(a) is 18 years of age or older; and
6557	(b) (i) for purposes of administering an epinephrine auto-injector, has successfully
6558	completed the training program established in Section 26B-4-407; and
6559	(ii) for purposes of administering stock albuterol, has successfully completed the
6560	training program established in Section 26B-4-408.
6561	(13) "Qualified epinephrine auto-injector entity":
6562	(a) means a facility or organization that employs, contracts with, or has a similar
6563	relationship with a qualified adult who is likely to have contact with another person who may
6564	experience anaphylaxis; and
6565	(b) includes:
6566	(i) recreation camps;
6567	(ii) an education facility, school, or university;
6568	(iii) a day care facility;

6569	(iv) youth sports leagues;
6570	(v) amusement parks;
6571	(vi) food establishments;
6572	(vii) places of employment; and
6573	(viii) recreation areas.
6574	$[\frac{(4)}{(14)}]$ "Qualified health care provider" means a health care provider who:
6575	(a) is licensed under Title 58, Occupations and Professions; and
6576	(b) may evaluate and manage a concussion within the health care provider's scope of
6577	practice.
6578	(15) "Qualified stock albuterol entity" means a public or private school that employs,
6579	contracts with, or has a similar relationship with a qualified adult who is likely to have contact
6580	with another person who may experience an asthma emergency.
6581	[(5)] (16) (a) "Sporting event" means any of the following athletic activities that is
6582	organized, managed, or sponsored by an organization:
6583	(i) a game;
6584	(ii) a practice;
6585	(iii) a sports camp;
6586	(iv) a physical education class;
6587	(v) a competition; or
6588	(vi) a tryout.
6589	(b) "Sporting event" does not include:
6590	(i) the issuance of a lift ticket or pass by a ski resort, the use of the ticket or pass, or a
6591	ski or snowboarding class or school at a ski resort, unless the skiing or snowboarding is part of
6592	a camp, team, or competition that is organized, managed, or sponsored by the ski resort;
6593	(ii) as applied to a government entity, merely making available a field, facility, or other
6594	location owned, leased, or controlled by the government entity to an amateur sports
6595	organization or a child, regardless of whether the government entity charges a fee for the use;
6596	or
6597	(iii) free play or recess taking place during school hours.
6598	(17) "Stock albuterol" means a prescription inhaled medication:
6599	(a) used to treat asthma; and

6600	(b) that may be delivered through a device, including:
6601	(i) an inhaler; or
6602	(ii) a nebulizer with a mouthpiece or mask.
6603	(iii) free play or recess taking place during school hours.
6604	[(6)] (18) "Traumatic head injury" means an injury to the head arising from blunt
6605	trauma, an acceleration force, or a deceleration force, with one of the following observed or
6606	self-reported conditions attributable to the injury:
6607	(a) transient confusion, disorientation, or impaired consciousness;
6608	(b) dysfunction of memory;
6609	(c) loss of consciousness; or
6610	(d) signs of other neurological or neuropsychological dysfunction, including:
6611	(i) seizures;
6612	(ii) irritability;
6613	(iii) lethargy;
6614	(iv) vomiting;
6615	(v) headache;
6616	(vi) dizziness; or
6617	(vii) fatigue.
6618	Section 125. Section 26B-4-402, which is renumbered from Section 26-10-5 is
6619	renumbered and amended to read:
6620	[26-10-5]. 26B-4-402. Plan for school health services.
6621	The department shall establish a plan for school health services for pupils in elementary
6622	and secondary schools. The department shall cooperate with the State Board of Education and
6623	local health departments in developing such plan and shall coordinate activities between these
6624	agencies. The plan may provide for the delivery of health services by and through intermediate
6625	and local school districts and local health departments.
6626	Section 126. Section 26B-4-403, which is renumbered from Section 26-53-201 is
6627	renumbered and amended to read:
6628	[26-53-201]. <u>26B-4-403.</u> Adoption and enforcement of concussion and
6629	head injury policy Notice of policy to parent or guardian.
6630	Each amateur sports organization shall:

6631	(1) adopt and enforce a concussion and head injury policy that:
6632	(a) is consistent with the requirements of Section [26-53-301] <u>26B-4-404</u> ; and
6633	(b) describes the nature and risk of:
6634	(i) a concussion or a traumatic head injury; and
6635	(ii) continuing to participate in a sporting event after sustaining a concussion or a
6636	traumatic head injury;
6637	(2) ensure that each agent of the amateur sports organization is familiar with, and has a
6638	copy of, the concussion and head injury policy; and
6639	(3) before permitting a child to participate in a sporting event of the amateur sports
6640	organization:
6641	(a) provide a written copy of the concussion and head injury policy to a parent or legal
6642	guardian of a child; and
6643	(b) obtain the signature of a parent or legal guardian of the child, acknowledging that
6644	the parent or legal guardian has read, understands, and agrees to abide by, the concussion and
6645	head injury policy.
6646	Section 127. Section 26B-4-404, which is renumbered from Section 26-53-301 is
6647	renumbered and amended to read:
6648	[26-53-301]. <u>26B-4-404.</u> Removal of child suspected of sustaining
6649	concussion or a traumatic head injury Medical clearance required before return to
6650	participation.
6651	(1) An amateur sports organization, and each agent of the amateur sports organization,
6652	shall:
6653	(a) immediately remove a child from participating in a sporting event of the amateur
6654	sports organization if the child is suspected of sustaining a concussion or a traumatic head
6655	injury; and
6656	(b) prohibit the child described in Subsection (1)(a) from participating in a sporting
6657	event of the amateur sports organization until the child:
6658	(i) is evaluated by a qualified health care provider who is trained in the evaluation and
6659	management of a concussion; and
6660	(ii) provides the amateur sports organization with a written statement from the
6661	qualified health care provider described in Subsection (1)(b)(i) stating that:

6662 (A) the qualified health care provider has, within three years before the day on which 6663 the written statement is made, successfully completed a continuing education course in the 6664 evaluation and management of a concussion; and 6665 (B) the child is cleared to resume participation in the sporting event of the amateur sports organization. 6666 6667 (2) This section does not create a new cause of action. 6668 Section 128. Section 26B-4-405, which is renumbered from Section 26-53-401 is 6669 renumbered and amended to read: 6670 [26-53-401]. 26B-4-405. School nurses evaluating student injuries. 6671 (1) A school nurse may assess a child who is suspected of sustaining a concussion or a 6672 traumatic head injury during school hours on school property regardless of whether the nurse 6673 has received specialized training in the evaluation and management of a concussion. 6674 (2) A school nurse who does not meet the requirements of Subsections [26-53-301] 6675 26B-4-404(1)(b)(i) and (1)(b)(ii)(A), but who assesses a child who is suspected of sustaining a 6676 concussion or traumatic head injury under Subsection (1): 6677 (a) shall refer the child to a qualified health care provider who is trained in the evaluation and management of a concussion; and 6678 6679 (b) may not provide a written statement permitting the child to resume participation in 6680 free play or physical education class under Subsection [26-53-301] 26B-4-404(1)(b)(ii). 6681 (3) A school nurse shall undergo training in the evaluation and management of a 6682 concussion, as funding allows. Section 129. Section **26B-4-406**, which is renumbered from Section 26-41-103 is 6683 renumbered and amended to read: 6684 6685 [26-41-103]. 26B-4-406. Voluntary participation. 6686 (1) [This chapter does] Sections 26B-4-406 through 26B-4-411 do not create a duty or 6687 standard of care for: 6688 (a) a person to be trained in the use and storage of epinephrine auto-injectors or stock 6689 albuterol; or 6690 (b) except as provided in Subsection (5), a qualified epinephrine auto-injector entity to store epinephrine auto-injectors or a qualified stock albuterol entity to store stock albuterol on 6691

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its premises.

(2) Except as provided in Subsections (3) and (5), a decision by a person to successfully complete a training program under Section [26-41-104 or 26-41-104.1] 26B-4-407 or 26B-4-408 and to make emergency epinephrine auto-injectors or stock albuterol available under the provisions of this chapter is voluntary.

- (3) A school, school board, or school official may not prohibit or dissuade a teacher or other school employee at a primary or secondary school in the state, either public or private, from:
- 6700 (a) completing a training program under Section [26-41-104 or 26-41-104.1] <u>26B-4-6701</u> 407 or 26B-4-408;
- 6702 (b) possessing or storing an epinephrine auto-injector or stock albuterol on school property if:
 - (i) the teacher or school employee is a qualified adult; and
 - (ii) the possession and storage is in accordance with the training received under Section [26-41-104 or 26-41-104.1] 26B-4-407 or 26B-4-408; or
 - (c) administering an epinephrine auto-injector or stock albuterol to any person, if:
 - (i) the teacher or school employee is a qualified adult; and
 - (ii) the administration is in accordance with the training received under Section [26-41-104 or 26-41-104.1] 26B-4-407 or 26B-4-408.
 - (4) A school, school board, or school official may encourage a teacher or other school employee to volunteer to become a qualified adult.
 - (5) (a) Each primary or secondary school in the state, both public and private, shall make an emergency epinephrine auto-injector available to any teacher or other school employee who:
 - (i) is employed at the school; and
 - (ii) is a qualified adult.

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- (b) This section does not require a school described in Subsection (5)(a) to keep more than one emergency epinephrine auto-injector on the school premises, so long as it may be quickly accessed by a teacher or other school employee, who is a qualified adult, in the event of an emergency.
- 6722 (6) (a) Each primary or secondary school in the state, both public and private, may 6723 make stock albuterol available to any school employee who:

6724	(i) is employed at the school; and
6725	(ii) is a qualified adult.
6726	(b) A qualified adult may administer stock albuterol to a student who:
6727	(i) has a diagnosis of asthma by a health care provider;
6728	(ii) has a current asthma action plan on file with the school; and
6729	(iii) is showing symptoms of an asthma emergency as described in the student's asthma
6730	action plan.
6731	(c) This Subsection (6) may not be interpreted to relieve a student's parent or guardian
6732	of providing a student's medication or create an expectation that a school will have stock
6733	albuterol available.
6734	(7) No school, school board, or school official shall retaliate or otherwise take adverse
6735	action against a teacher or other school employee for:
6736	(a) volunteering under Subsection (2);
6737	(b) engaging in conduct described in Subsection (3); or
6738	(c) failing or refusing to become a qualified adult.
6739	Section 130. Section 26B-4-407, which is renumbered from Section 26-41-104 is
6740	renumbered and amended to read:
6741	[26-41-104]. <u>26B-4-407.</u> Training in use and storage of epinephrine
6742	auto-injector.
6743	(1) (a) Each primary and secondary school in the state, both public and private, shall
6744	make initial and annual refresher training, regarding the storage and emergency use of an
6745	epinephrine auto-injector, available to any teacher or other school employee who volunteers to
6746	become a qualified adult.
6747	(b) The training described in Subsection (1)(a) may be provided by the school nurse, or
6748	other person qualified to provide such training, designated by the school district physician, the
6749	medical director of the local health department, or the local emergency medical services
6750	director.
6751	(2) A person who provides training under Subsection (1) or (6) shall include in the
6752	training:
6753	(a) techniques for recognizing symptoms of anaphylaxis;
6754	(b) standards and procedures for the storage and emergency use of epinephrine

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6755	auto-injectors;
6756	(c) emergency follow-up procedures, including calling the emergency 911 number and
6757	contacting, if possible, the student's parent and physician; and
6758	(d) written materials covering the information required under this Subsection (2).
6759	(3) A qualified adult shall retain for reference the written materials prepared in
6760	accordance with Subsection (2)(d).
6761	(4) A public school shall permit a student to possess an epinephrine auto-injector or
6762	possess and self-administer an epinephrine auto-injector if:
6763	(a) the student's parent or guardian signs a statement:
6764	(i) authorizing the student to possess or possess and self-administer an epinephrine
6765	auto-injector; and
6766	(ii) acknowledging that the student is responsible for, and capable of, possessing or
6767	possessing and self-administering an epinephrine auto-injector; and
6768	(b) the student's health care provider provides a written statement that states that:
6769	(i) it is medically appropriate for the student to possess or possess and self-administer
6770	an epinephrine auto-injector; and
6771	(ii) the student should be in possession of the epinephrine auto-injector at all times.
6772	(5) The department, in cooperation with the state superintendent of public instruction,
6773	shall design forms to be used by public and private schools for the parental and health care
6774	providers statements described in Subsection (4).
6775	(6) (a) The department:
6776	(i) shall approve educational programs conducted by other persons, to train:
6777	(A) people under Subsection (6)(b) of this section, regarding the proper use and storage
6778	of emergency epinephrine auto-injectors; and
6779	(B) a qualified epinephrine auto-injector entity regarding the proper storage and
6780	emergency use of epinephrine auto-injectors; and
6781	(ii) may, as funding is available, conduct educational programs to train people
6782	regarding the use of and storage of emergency epinephrine auto-injectors.

(b) A person who volunteers to receive training as a qualified adult to administer an

epinephrine auto-injector under the provisions of this Subsection (6) shall demonstrate a need

for the training to the department, which may be based upon occupational, volunteer, or family

0/80	circumstances, and snan include:
6787	(i) camp counselors;
6788	(ii) scout leaders;
6789	(iii) forest rangers;
6790	(iv) tour guides; and
6791	(v) other persons who have or reasonably expect to have contact with at least one other
6792	person as a result of the person's occupational or volunteer status.
6793	Section 131. Section 26B-4-408, which is renumbered from Section 26-41-104.1 is
6794	renumbered and amended to read:
6795	[26-41-104.1]. <u>26B-4-408.</u> Training in use and storage of stock albuterol.
6796	(1) (a) Each primary and secondary school in the state, both public and private, shall
6797	make initial and annual refresher training regarding the storage and emergency use of stock
6798	albuterol available to a teacher or school employee who volunteers to become a qualified adult.
6799	(b) The training described in Subsection (1)(a) shall be provided by the department.
6800	(2) A person who provides training under Subsection (1) or (6) shall include in the
6801	training:
6802	(a) techniques for recognizing symptoms of an asthma emergency;
6803	(b) standards and procedures for the storage and emergency use of stock albuterol;
6804	(c) emergency follow-up procedures, and contacting, if possible, the student's parent;
6805	and
6806	(d) written materials covering the information required under this Subsection (2).
6807	(3) A qualified adult shall retain for reference the written materials prepared in
6808	accordance with Subsection (2)(d).
6809	(4) (a) A public or private school shall permit a student to possess and self-administer
6810	asthma medication if:
6811	(i) the student's parent or guardian signs a statement:
6812	(A) authorizing the student to self-administer asthma medication; and
6813	(B) acknowledging that the student is responsible for, and capable of,
6814	self-administering the asthma medication; and
6815	(ii) the student's health care provider provides a written statement that states:
6816	(A) it is medically appropriate for the student to self-administer asthma medication and

6817	be in possession of asthma medication at all times; and
6818	(B) the name of the asthma medication prescribed or authorized for the student's use.
6819	(b) Section 53G-8-205 does not apply to the possession and self-administration of
6820	asthma medication in accordance with this section.
6821	(5) The department, in cooperation with the state superintendent of public instruction,
6822	shall design forms to be used by public and private schools for the parental and health care
6823	provider statements described in Subsection (4).
6824	(6) The department:
6825	(a) shall approve educational programs conducted by other persons to train:
6826	(i) people under Subsection (6)(b), regarding the proper use and storage of stock
6827	albuterol; and
6828	(ii) a qualified stock albuterol entity regarding the proper storage and emergency use of
6829	stock albuterol; and
6830	(b) may conduct educational programs to train people regarding the use of and storage
6831	of stock albuterol.
6832	Section 132. Section 26B-4-409, which is renumbered from Section 26-41-105 is
6833	renumbered and amended to read:
6834	[26-41-105]. <u>26B-4-409.</u> Authority to obtain and use an epinephrine
6835	auto-injector or stock albuterol.
6836	(1) A qualified adult who is a teacher or other school employee at a public or private
6837	primary or secondary school in the state, or a school nurse, may obtain from the school district
6838	physician, the medical director of the local health department, or the local emergency medical
6839	services director a prescription for:
6840	(a) epinephrine auto-injectors for use in accordance with this [chapter] part; or
6841	(b) stock albuterol for use in accordance with this [chapter] part.
6842	(2) (a) A qualified adult may obtain an epinephrine auto-injector for use in accordance
6843	with this [chapter] part that is dispensed by:
6844	(i) a pharmacist as provided under Section 58-17b-1004; or

(ii) a pharmacy intern as provided under Section 58-17b-1004.

[chapter] part that is dispensed by:

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(b) A qualified adult may obtain stock albuterol for use in accordance with this

6848	(i) a pharmacist as provided under Section 58-17b-1004; or
6849	(ii) a pharmacy intern as provided under Section 58-17b-1004.
6850	(3) A qualified adult:
6851	(a) may immediately administer an epinephrine auto-injector to a person exhibiting
6852	potentially life-threatening symptoms of anaphylaxis when a physician is not immediately
6853	available; and
6854	(b) shall initiate emergency medical services or other appropriate medical follow-up in
6855	accordance with the training materials retained under Section 26-41-104 after administering an
6856	epinephrine auto-injector.
6857	(4) If a school nurse is not immediately available, a qualified adult:
6858	(a) may immediately administer stock albuterol to an individual who:
6859	(i) has a diagnosis of asthma by a health care provider;
6860	(ii) has a current asthma action plan on file with the school; and
6861	(iii) is showing symptoms of an asthma emergency as described in the student's asthma
6862	action plan; and
6863	(b) shall initiate appropriate medical follow-up in accordance with the training
6864	materials retained under Section [$\frac{26-41-104.1}{26B-4-408}$] after administering stock albuterol.
6865	(5) (a) A qualified entity that complies with Subsection (5)(b) or (c), may obtain a
6866	supply of epinephrine auto-injectors or stock albuterol, respectively, from a pharmacist under
6867	Section 58-17b-1004, or a pharmacy intern under Section 58-17b-1004 for:
6868	(i) storing:
6869	(A) the epinephrine auto-injectors on the qualified epinephrine auto-injector entity's
6870	premises; and
6871	(B) stock albuterol on the qualified stock albuterol entity's premises; and
6872	(ii) use by a qualified adult in accordance with Subsection (3) or (4).
6873	(b) A qualified epinephrine auto-injector entity shall:
6874	(i) designate an individual to complete an initial and annual refresher training program
6875	regarding the proper storage and emergency use of an epinephrine auto-injector available to a
6876	qualified adult; and
6877	(ii) store epinephrine auto-injectors in accordance with the standards established by the
6878	department in Section [26-41-107] <u>26B-4-411</u> .

08/9	(c) A quantied stock abuteror entity snarr.
6880	(i) designate an individual to complete an initial and annual refresher training program
6881	regarding the proper storage and emergency use of stock albuterol available to a qualified
6882	adult; and
6883	(ii) store stock albuterol in accordance with the standards established by the department
6884	in Section [26-41-107] <u>26B-4-411</u> .
6885	Section 133. Section 26B-4-410, which is renumbered from Section 26-41-106 is
6886	renumbered and amended to read:
6887	[26-41-106]. <u>26B-4-410.</u> Immunity from liability.
6888	(1) The following, if acting in good faith, are not liable in any civil or criminal action
6889	for any act taken or not taken under the authority of this chapter with respect to an anaphylactic
6890	reaction or asthma emergency:
6891	(a) a qualified adult;
6892	(b) a physician, pharmacist, or any other person or entity authorized to prescribe or
6893	dispense prescription drugs;
6894	(c) a person who conducts training described in Section [26-41-104 or 26-41-104.1]
6895	<u>26B-4-407 or 26B-4-408</u>
6896	(d) a qualified epinephrine auto-injector entity; and
6897	(e) a qualified stock albuterol entity.
6898	(2) Section 53G-9-502 does not apply to the administration of an epinephrine
6899	auto-injector or stock albuterol in accordance with this [chapter] part.
6900	(3) This section does not eliminate, limit, or reduce any other immunity from liability
6901	or defense against liability that may be available under state law.
6902	Section 134. Section 26B-4-411 , which is renumbered from Section 26-41-107 is
6903	renumbered and amended to read:
6904	[26-41-107]. 26B-4-411. Administrative rulemaking authority.
6905	The department shall adopt rules in accordance with Title 63G, Chapter 3, Utah
6906	Administrative Rulemaking Act, to:
6907	(1) establish and approve training programs in accordance with Sections [26-41-104
6908	and 26-41-104.1] 26B-4-407 and 26B-4-408;
6909	(2) establish a procedure for determining who is eligible for training as a qualified

6910	adult under Subsection [$\frac{26-41-104}{26B-4-407}$] $\frac{26B-4-407}{26B-4-407}$ (6)(b)(v); and
6911	(3) establish standards for storage of:
6912	(a) emergency auto-injectors by a qualified epinephrine auto-injector entity under
6913	Section [26-41-104] <u>26B-4-407</u> ; and
6914	(b) stock albuterol by a qualified stock albuterol entity under Section [26-41-104.1]
6915	<u>26B-4-408</u> .
6916	Section 135. Section 26B-4-501, which is renumbered from Section 26-64-102 is
6917	renumbered and amended to read:
6918	Part 5. Treatment Access
6919	[26-64-102]. <u>26B-4-501.</u> Definitions.
6920	As used in this [chapter] part:
6921	(1) "Controlled substance" means the same as that term is defined in Title 58, Chapter
6922	37, Utah Controlled Substances Act.
6923	(2) "Critical access hospital" means a critical access hospital that meets the criteria of
6924	42 U.S.C. Sec. 1395i-4(c)(2) (1998).
6925	(3) "Designated facility" means:
6926	(a) a freestanding urgent care center;
6927	(b) a general acute hospital; or
6928	(c) a critical access hospital.
6929	[(1)] (4) "Dispense" means the same as that term is defined in Section 58-17b-102.
6930	[(2)] (5) "Division" means the Division of Professional Licensing created in Section
6931	58-1-103.
6932	[(3) "Local health department" means:]
6933	[(a) a local health department, as defined in Section 26A-1-102; or]
6934	[(b) a multicounty local health department, as defined in Section 26A-1-102.]
6935	(6) "Emergency contraception" means the use of a substance, approved by the United
6936	States Food and Drug Administration, to prevent pregnancy after sexual intercourse.
6937	(7) "Freestanding urgent care center" means the same as that term is defined in Section
6938	<u>59-12-801.</u>
6939	(8) "General acute hospital" means the same as that term is defined in Section 26B-2-
6940	<u>201.</u>

6941	(9) "Health care facility" means a hospital, a hospice inpatient residence, a nursing
6942	facility, a dialysis treatment facility, an assisted living residence, an entity that provides home-
6943	and community-based services, a hospice or home health care agency, or another facility that
6944	provides or contracts to provide health care services, which facility is licensed under Chapter 2,
6945	Part 2, Health Care Facility Licensing and Inspection.
6946	(10) "Health care provider" means:
6947	(a) a physician, as defined in Section 58-67-102;
6948	(b) an advanced practice registered nurse, as defined in Section 58-31b-102;
6949	(c) a physician assistant, as defined in Section 58-70a-102; or
6950	(d) an individual licensed to engage in the practice of dentistry, as defined in Section
6951	<u>58-69-102.</u>
6952	(11) "Increased risk" means risk exceeding the risk typically experienced by an
6953	individual who is not using, and is not likely to use, an opiate.
6954	(12) "Opiate" means the same as that term is defined in Section 58-37-2.
6955	(13) "Opiate antagonist" means naloxone hydrochloride or any similarly acting drug
6956	that is not a controlled substance and that is approved by the federal Food and Drug
6957	Administration for the diagnosis or treatment of an opiate-related drug overdose.
6958	(14) "Opiate-related drug overdose event" means an acute condition, including a
6959	decreased level of consciousness or respiratory depression resulting from the consumption or
6960	use of a controlled substance, or another substance with which a controlled substance was
6961	combined, and that a person would reasonably believe to require medical assistance.
6962	(15) "Overdose outreach provider" means:
6963	(a) a law enforcement agency;
6964	(b) a fire department;
6965	(c) an emergency medical service provider, as defined in Section 26B-4-101;
6966	(d) emergency medical service personnel, as defined in Section 26B-4-101;
6967	(e) an organization providing treatment or recovery services for drug or alcohol use;
6968	(f) an organization providing support services for an individual, or a family of an
6969	individual, with a substance use disorder;
6970	(g) an organization providing substance use or mental health services under contract
6971	with a local substance abuse authority as defined in Section 26B-5-101, or a local mental

6972	health authority, as defined in Section 26B-5-101;
6973	(h) an organization providing services to the homeless;
6974	(i) a local health department;
6975	(j) an individual licensed to practice pharmacy under Title 58, Chapter 17b, Pharmacy
6976	Practice Act; or
6977	(k) an individual.
6978	[(4)] (16) "Patient counseling" means the same as that term is defined in Section
6979	58-17b-102.
6980	[(5)] (17) "Pharmacist" means the same as that term is defined in Section 58-17b-102.
6981	[6] (18) "Pharmacy intern" means the same as that term is defined in Section
6982	58-17b-102.
6983	$[\frac{(7)}{2}]$ "Physician" means the same as that term is defined in Section 58-67-102.
6984	(20) "Practitioner" means:
6985	(a) a physician; or
6986	(b) any other person who is permitted by law to prescribe emergency contraception.
6987	[(8)] (21) "Prescribe" means the same as that term is defined in Section 58-17b-102.
6988	[(9)] (22) (a) "Self-administered hormonal contraceptive" means a self-administered
6989	hormonal contraceptive that is approved by the United States Food and Drug Administration to
6990	prevent pregnancy.
6991	(b) "Self-administered hormonal contraceptive" includes an oral hormonal
6992	contraceptive, a hormonal vaginal ring, and a hormonal contraceptive patch.
6993	(c) "Self-administered hormonal contraceptive" does not include any drug intended to
6994	induce an abortion, as that term is defined in Section 76-7-301.
6995	(23) "Sexual assault" means any criminal conduct described in Title 76, Chapter 5, Part
6996	4, Sexual Offenses, that may result in a pregnancy.
6997	(24) "Victim of sexual assault" means any person who presents to receive, or receives,
6998	medical care in consequence of being subjected to sexual assault.
6999	Section 136. Section 26B-4-502, which is renumbered from Section 26-21b-201 is
7000	renumbered and amended to read:
7001	[26-21b-201]. <u>26B-4-502.</u> Emergency contraception services for a victim of
7002	sexual assault.

(1) Except as provided in Subsection (2), a designated facility shall provide the following services to a victim of sexual assault:

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- (a) provide the victim with written and oral medical information regarding emergency contraception that is unbiased, accurate, and generally accepted by the medical community as being scientifically valid;
- (b) orally inform the victim of sexual assault that the victim may obtain emergency contraception at the designated facility;
 - (c) offer a complete regimen of emergency contraception to a victim of sexual assault;
- (d) provide, at the designated facility, emergency contraception to the victim of sexual assault upon her request;
- (e) maintain a protocol, prepared by a physician, for the administration of emergency contraception at the designated facility to a victim of sexual assault; and
- (f) develop and implement a written policy to ensure that a person is present at the designated facility, or on-call, who:
- (i) has authority to dispense or prescribe emergency contraception, independently, or under the protocol described in Subsection (1)(e), to a victim of sexual assault; and
 - (ii) is trained to comply with the requirements of this section.
- 7020 (2) A freestanding urgent care center is exempt from the requirements of Subsection 7021 (1) if:
 - (a) there is a general acute hospital or a critical access hospital within 30 miles of the freestanding urgent care center; and
 - (b) an employee of the freestanding urgent care center provides the victim with:
 - (i) written and oral medical information regarding emergency contraception that is unbiased, accurate, and generally accepted by the medical community as being scientifically valid; and
 - (ii) the name and address of the general acute hospital or critical access hospital described in Subsection (2)(a).
 - (3) A practitioner shall comply with Subsection (4) with regard to a person who is a victim of sexual assault, if the person presents to receive medical care, or receives medical care, from the practitioner at a location that is not a designated facility.
- 7033 (4) A practitioner described in Subsection (3) shall:

7034	(a) provide the victim with written and oral medical information regarding emergency
7035	contraception that is unbiased, accurate, and generally accepted by the medical community as
7036	being scientifically valid; and
7037	(b) (i) (A) orally inform the victim of sexual assault that the victim may obtain
7038	emergency contraception at the facility where the practitioner is located; and
7039	(B) provide emergency contraception to the victim of sexual assault, if she requests
7040	emergency contraception; or
7041	(ii) inform the victim of sexual assault of the nearest location where she may obtain
7042	emergency contraception.
7043	(5) (a) The department may make rules, in accordance with Title 63G, Chapter 3, Utah
7044	Administrative Rulemaking Act, to enforce the provisions of this section.
7045	(b) The department shall, in an expeditious manner, investigate any complaint received
7046	by the department regarding the failure of a health care facility to comply with a requirement of
7047	this section.
7048	(c) If the department finds a violation of this section or any rules adopted under this
7049	section, the department may take one or more of the actions described in Section 26-21-11.
7050	Section 137. Section 26B-4-503, which is renumbered from Section 26-64-103 is
7051	renumbered and amended to read:
7052	[26-64-103]. <u>26B-4-503.</u> Voluntary participation.
7053	[This chapter does] Sections 26B-4-504 through 26B-4-507 do not create a duty or
7054	standard of care for a person to prescribe or dispense a self-administered hormonal
7055	contraceptive.
7056	Section 138. Section 26B-4-504, which is renumbered from Section 26-64-104 is
7057	renumbered and amended to read:
7058	[26-64-104]. <u>26B-4-504.</u> Authorization to dispense self-administered
7059	hormonal contraceptives.
7060	Notwithstanding Title 58, Chapter 17b, Pharmacy Practice Act, a person licensed under
7061	Title 58, Chapter 17b, Pharmacy Practice Act, to dispense a self-administered hormonal
7062	contraceptive may dispense the self-administered hormonal contraceptive:
7063	(1) to a patient who is 18 years old or older;
7064	(2) pursuant to a standing prescription drug order made in accordance with Section

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7065	[26-64-105] <u>26B-4-505</u> ;
7066	(3) without any other prescription drug order from a person licensed to prescribe a
7067	self-administered hormonal contraceptive; and
7068	(4) in accordance with the dispensing guidelines in Section [26-64-106] <u>26B-4-506</u> .
7069	Section 139. Section 26B-4-505, which is renumbered from Section 26-64-105 is
7070	renumbered and amended to read:
7071	[26-64-105]. <u>26B-4-505.</u> Standing prescription drug orders for a
7072	self-administered hormonal contraceptive.
7073	A physician who is licensed to prescribe a self-administered hormonal contraceptive,
7074	including a physician acting in the physician's capacity as an employee of the department, or a
7075	medical director of a local health department, may issue a standing prescription drug order
7076	authorizing the dispensing of the self-administered hormonal contraceptive under Section
7077	$\left[\frac{26-64-104}{26B-4-504}\right]$ in accordance with a protocol that:
7078	(1) requires the physician to specify the persons, by professional license number,
7079	authorized to dispense the self-administered hormonal contraceptive;
7080	(2) requires the physician to review at least annually the dispensing practices of those
7081	authorized by the physician to dispense the self-administered hormonal contraceptive;
7082	(3) requires those authorized by the physician to dispense the self-administered
7083	hormonal contraceptive to make and retain a record of each person to whom the
7084	self-administered hormonal contraceptive is dispensed, including:
7085	(a) the name of the person;
7086	(b) the drug dispensed; and
7087	(c) other relevant information; and
7088	(4) is approved by the department by administrative rule made in accordance with Title
7089	63G, Chapter 3, Utah Administrative Rulemaking Act.
7090	Section 140. Section 26B-4-506, which is renumbered from Section 26-64-106 is
7091	renumbered and amended to read:
7092	[26-64-106]. <u>26B-4-506.</u> Guidelines for dispensing a self-administered
7093	hormonal contraceptive.
7094	(1) A pharmacist or pharmacist intern who dispenses a self-administered hormonal

contraceptive under [this chapter] Section 26B-4-504:

7096	(a) shall obtain a completed self-screening risk assessment questionnaire, that has been
7097	approved by the division in collaboration with the Board of Pharmacy and the Physicians
7098	Licensing Board, from the patient before dispensing the self-administered hormonal
7099	contraceptive;
7100	(b) if the results of the evaluation in Subsection (1)(a) indicate that it is unsafe to
7101	dispense a self-administered hormonal contraceptive to a patient:
7102	(i) may not dispense a self-administered hormonal contraceptive to the patient; and
7103	(ii) shall refer the patient to a primary care or women's health care practitioner;
7104	(c) may not continue to dispense a self-administered hormonal contraceptive to a
7105	patient for more than 24 months after the date of the initial prescription without evidence that
7106	the patient has consulted with a primary care or women's health care practitioner during the
7107	preceding 24 months; and
7108	(d) shall provide the patient with:
7109	(i) written information regarding:
7110	(A) the importance of seeing the patient's primary care practitioner or women's health
7111	care practitioner to obtain recommended tests and screening; and
7112	(B) the effectiveness and availability of long-acting reversible contraceptives as an
7113	alternative to self-administered hormonal contraceptives; and
7114	(ii) a copy of the record of the encounter with the patient that includes:
7115	(A) the patient's completed self-assessment tool; and
7116	(B) a description of the contraceptives dispensed, or the basis for not dispensing a
7117	contraceptive.
7118	(2) If a pharmacist dispenses a self-administered hormonal contraceptive to a patient,
7119	the pharmacist shall, at a minimum, provide patient counseling to the patient regarding:
7120	(a) the appropriate administration and storage of the self-administered hormonal
7121	contraceptive;
7122	(b) potential side effects and risks of the self-administered hormonal contraceptive;
7123	(c) the need for backup contraception;
7124	(d) when to seek emergency medical attention; and

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(e) the risk of contracting a sexually transmitted infection or disease, and ways to

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reduce the risk of contraction.

12/	(3) The division, in collaboration with the Board of Pharmacy and the Physicians
7128	Licensing Board, shall make rules in accordance with Title 63G, Chapter 3, Utah
7129	Administrative Rulemaking Act, establishing the self-screening risk assessment questionnaire
7130	described in Subsection (1)(a).
7131	Section 141. Section 26B-4-507, which is renumbered from Section 26-64-107 is
7132	renumbered and amended to read:
7133	[26-64-107]. <u>26B-4-507.</u> Limited civil liability.
7134	A physician who issues a standing prescription drug order in accordance with Section
7135	[26-64-105] 26B-4-505 is not liable for any civil damages for acts or omissions resulting from
7136	the dispensing of a self-administered hormonal contraceptive under [this chapter] Sections
7137	26B-4-504 through 26B-4-506.
7138	Section 142. Section 26B-4-508 , which is renumbered from Section 26-55-103 is
7139	renumbered and amended to read:
7140	[26-55-103]. <u>26B-4-508.</u> Voluntary participation.
7141	[This chapter does] Sections 26B-4-509 through 26B-4-514 do not create a duty or
7142	standard of care for a person to prescribe or administer an opiate antagonist.
7143	Section 143. Section 26B-4-509, which is renumbered from Section 26-55-104 is
7144	renumbered and amended to read:
7145	$[\frac{26-55-104}{2}]$. $\underline{26B-4-509}$. Prescribing, dispensing, and administering an
7146	opiate antagonist Immunity from liability.
7147	(1) (a) (i) For purposes of Subsection (1)(a)(ii), "a person other than a health care
7148	facility or health care provider" includes the following, regardless of whether the person has
7149	received funds from the department through the Opiate Overdose Outreach Pilot Program
7150	created in Section [$\frac{26-55-107}{26B-4-512}$:
7151	(A) a person described in Subsections [26-55-107] 26B-4-512(1)(a)(i)(A) through
7152	(1)(a)(i)(F); or
7153	(B) an organization, defined by department rule made under Subsection [26-55-107]
7154	26B-4-512(7)(e), that is in a position to assist an individual who is at increased risk of
7155	experiencing an opiate-related drug overdose event.
7156	(ii) Except as provided in Subsection (1)(b), the following persons are not liable for
7157	any civil damages for acts or omissions made as a result of administering an opiate antagonist

when the person acts in good faith to administer the opiate antagonist to an individual whom the person believes to be experiencing an opiate-related drug overdose event:

(A) an overdose outreach provider; or

(B) a person other than a health care facility or health care provider.

7162 (b) A health care provider:

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- (i) is not immune from liability under Subsection (1)(a) when the health care provider is acting within the scope of the health care provider's responsibilities or duty of care; and
- (ii) is immune from liability under Subsection (1)(a) if the health care provider is under no legal duty to respond and otherwise complies with Subsection (1)(a).
- (2) Notwithstanding Sections 58-1-501, 58-17b-501, and 58-17b-502, a health care provider who is licensed to prescribe an opiate antagonist may prescribe, including by a standing prescription drug order issued in accordance with Subsection [26-55-105] 26B-4-510(2), or dispense an opiate antagonist:
- (a) (i) to an individual who is at increased risk of experiencing an opiate-related drug overdose event;
- (ii) for an individual described in Subsection (2)(a)(i), to a family member, friend, or other person, including a person described in Subsections [$\frac{26-55-107}{26B-4-512}$] $\frac{26B-4-512}{26B-4-512}$ (1)(a)(i)(A) through (1)(a)(i)(F), that is in a position to assist the individual; or
 - (iii) to an overdose outreach provider for:
- (A) furnishing the opiate antagonist to an individual described in Subsection (2)(a)(i) or (ii), as provided in Section [26-55-106] 26B-4-511; or
 - (B) administering to an individual experiencing an opiate-related drug overdose event;
 - (b) without a prescriber-patient relationship; and
- (c) without liability for any civil damages for acts or omissions made as a result of prescribing or dispensing the opiate antagonist in good faith.
- (3) A health care provider who dispenses an opiate antagonist to an individual or an overdose outreach provider under Subsection (2)(a) shall provide education to the individual or overdose provider that includes written instruction on how to:
 - (a) recognize an opiate-related drug overdose event; and
- 7187 (b) respond appropriately to an opiate-related drug overdose event, including how to:
- 7188 (i) administer an opiate antagonist; and

7189	(ii) ensure that an individual to whom an opiate antagonist has been administered
7190	receives, as soon as possible, additional medical care and a medical evaluation.
7191	Section 144. Section 26B-4-510, which is renumbered from Section 26-55-105 is
7192	renumbered and amended to read:
7193	[26-55-105]. <u>26B-4-510.</u> Standing prescription drug orders for an opiate
7194	antagonist.
7195	(1) Notwithstanding Title 58, Chapter 17b, Pharmacy Practice Act, a person licensed
7196	under Title 58, Chapter 17b, Pharmacy Practice Act, to dispense an opiate antagonist may
7197	dispense the opiate antagonist:
7198	(a) pursuant to a standing prescription drug order made in accordance with Subsection
7199	(2); and
7200	(b) without any other prescription drug order from a person licensed to prescribe an
7201	opiate antagonist.
7202	(2) A physician who is licensed to prescribe an opiate antagonist, including a physician
7203	acting in the physician's capacity as an employee of the department, or a medical director of a
7204	local health department, as defined in Section [26A-1-102] 26B-4-512, may issue a standing
7205	prescription drug order authorizing the dispensing of the opiate antagonist under Subsection (1)
7206	in accordance with a protocol that:
7207	(a) limits dispensing of the opiate antagonist to:
7208	(i) an individual who is at increased risk of experiencing an opiate-related drug
7209	overdose event;
7210	(ii) a family member of, friend of, or other person, including a person described in
7211	Subsections 26-55-107(1)(a)(i)(A) through (1)(a)(i)(F), that is in a position to assist an
7212	individual who is at increased risk of experiencing an opiate-related drug overdose event; or
7213	(iii) an overdose outreach provider for:
7214	(A) furnishing to an individual who is at increased risk of experiencing an
7215	opiate-related drug overdose event, or to a family member of, friend of, or other individual who
7216	is in a position to assist an individual who is at increased risk of experiencing an opiate-related
7217	drug overdose event, as provided in Section [26-55-106] 26B-4-511; or
7218	(B) administering to an individual experiencing an opiate-related drug overdose event;

(b) requires the physician to specify the persons, by professional license number,

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7220	authorized to dispense the opiate antagonist;
7221	(c) requires the physician to review at least annually the dispensing practices of those
7222	authorized by the physician to dispense the opiate antagonist;
7223	(d) requires those authorized by the physician to dispense the opiate antagonist to make
7224	and retain a record of each person to whom the opiate antagonist is dispensed, which shall
7225	include:
7226	(i) the name of the person;
7227	(ii) the drug dispensed; and
7228	(iii) other relevant information; and
7229	(e) is approved by the Division of Professional Licensing within the Department of
7230	Commerce by administrative rule made in accordance with Title 63G, Chapter 3, Utah
7231	Administrative Rulemaking Act.
7232	Section 145. Section 26B-4-511, which is renumbered from Section 26-55-106 is
7233	renumbered and amended to read:
7234	[26-55-106]. <u>26B-4-511.</u> Overdose outreach providers.
7235	Notwithstanding Sections 58-1-501, 58-17b-501, and 58-17b-502:
7236	(1) an overdose outreach provider may:
7237	(a) obtain an opiate antagonist dispensed on prescription by:
7238	(i) a health care provider, in accordance with Subsections [26-55-104] <u>26B-4-509</u> (2)
7239	and (3); or
7240	(ii) a pharmacist or pharmacy intern, as otherwise authorized by Title 58, Chapter 17b,
7241	Pharmacy Practice Act;
7242	(b) store the opiate antagonist; and
7243	(c) furnish the opiate antagonist:
7244	(i) (A) to an individual who is at increased risk of experiencing an opiate-related drug
7245	overdose event; or
7246	(B) to a family member, friend, overdose outreach provider, or other individual who is
7247	in a position to assist an individual who is at increased risk of experiencing an opiate-related

furnishing the opiate antagonist in good faith; and

drug overdose event; and

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(ii) without liability for any civil damages for acts or omissions made as a result of

7251	(2) when furnishing an opiate antagonist under Subsection (1), an overdose outreach
7252	provider:
7253	(a) shall also furnish to the recipient of the opiate antagonist:
7254	(i) the written instruction under Subsection [26-55-104] 26B-4-504(3) received by the
7255	overdose outreach provider from the health care provider at the time the opiate antagonist was
7256	dispensed to the overdose outreach provider; or
7257	(ii) if the opiate antagonist was dispensed to the overdose outreach provider by a
7258	pharmacist or pharmacy intern, any written patient counseling under Section 58-17b-613
7259	received by the overdose outreach provider at the time of dispensing; and
7260	(b) may provide additional instruction on how to recognize and respond appropriately
7261	to an opiate-related drug overdose event.
7262	Section 146. Section 26B-4-512, which is renumbered from Section 26-55-107 is
7263	renumbered and amended to read:
7264	[26-55-107]. <u>26B-4-512.</u> Opiate Overdose Outreach Pilot Program
7265	Grants Annual reporting by grantees Rulemaking Annual reporting by
7266	department.
7267	(1) As used in this section:
7268	(a) "Persons that are in a position to assist an individual who is at increased risk of
7269	experiencing an opiate-related drug overdose event":
7270	(i) means the following organizations:
7271	(A) a law enforcement agency;
7272	(B) the department or a local health department, as defined in Section 26A-1-102;
7273	(C) an organization that provides drug or alcohol treatment services;
7274	(D) an organization that provides services to the homeless;
7275	(E) an organization that provides training on the proper administration of an opiate
7276	antagonist in response to an opiate-related drug overdose event;
7277	(F) a school; or
7278	(G) except as provided in Subsection (1)(a)(ii), any other organization, as defined by
7279	department rule made under Subsection (7)(e), that is in a position to assist an individual who
7280	is at increased risk of experiencing an opiate-related drug overdose event; and
7281	(ii) does not mean:

1282	(A) a person neensed under True 38, Chapter 170, Pharmacy Practice Act;
7283	(B) a health care facility; or
7284	(C) an individual.
7285	(b) "School" means:
7286	(i) a public school:
7287	(A) for elementary or secondary education, including a charter school; or
7288	(B) for other purposes;
7289	(ii) a private school:
7290	(A) for elementary or secondary education; or
7291	(B) accredited for other purposes, including higher education or specialty training; or
7292	(iii) an institution within the state system of higher education, as described in Section
7293	53B-1-102.
7294	(2) There is created within the department the "Opiate Overdose Outreach Pilot
7295	Program."
7296	(3) The department may use funds appropriated for the program to:
7297	(a) provide grants under Subsection (4);
7298	(b) promote public awareness of the signs, symptoms, and risks of opioid misuse and
7299	overdose;
7300	(c) increase the availability of educational materials and other resources designed to
7301	assist individuals at increased risk of opioid overdose, their families, and others in a position to
7302	help prevent or respond to an overdose event;
7303	(d) increase public awareness of, access to, and use of opiate antagonist;
7304	(e) update the department's Utah Clinical Guidelines on Prescribing Opioids and
7305	promote its use by prescribers and dispensers of opioids;
7306	(f) develop a directory of substance misuse treatment programs and promote its
7307	dissemination to and use by opioid prescribers, dispensers, and others in a position to assist
7308	individuals at increased risk of opioid overdose;
7309	(g) coordinate a multi-agency coalition to address opioid misuse and overdose; and
7310	(h) maintain department data collection efforts designed to guide the development of
7311	opioid overdose interventions and track their effectiveness.
7312	(4) No later than September 1, 2016, and with available funding, the department shall

7313 grant funds through the program to persons that are in a position to assist an individual who is at increased risk of experiencing an opiate-related drug overdose event. 7314 7315 (5) Funds granted by the program: 7316 (a) may be used by a grantee to: 7317 (i) pay for the purchase by the grantee of an opiate antagonist; or 7318 (ii) pay for the grantee's cost of providing training on the proper administration of an opiate antagonist in response to an opiate-related drug overdose event; and 7319 7320 (b) may not be used: 7321 (i) to pay for costs associated with the storage or dispensing of an opiate antagonist; or 7322 (ii) for any other purposes. 7323 (6) Grantees shall report annually to the department on the use of granted funds in 7324 accordance with department rules made under Subsection (7)(d). 7325 (7) No later than July 1, 2016, the department shall, in accordance with Title 63G, 7326 Chapter 3, Utah Administrative Rulemaking Act, make rules specifying: 7327 (a) how to apply for a grant from the program; 7328 (b) the criteria used by the department to determine whether a grant request is approved, including criteria providing that: 7329 7330 (i) grants are awarded to areas of the state, including rural areas, that would benefit 7331 most from the grant; and 7332 (ii) no more than 15% of the total amount granted by the program is used to pay for 7333 grantees' costs of providing training on the proper administration of an opiate antagonist in 7334 response to an opiate-related drug overdose event; 7335 (c) the criteria used by the department to determine the amount of a grant; 7336 (d) the information a grantee shall report annually to the department under Subsection 7337 (6), including: 7338 (i) the amount of opiate antagonist purchased and dispensed by the grantee during the 7339 reporting period; 7340 (ii) the number of individuals to whom the opiate antagonist was dispensed by the

(iii) the number of lives known to have been saved during the reporting period as a

result of opiate antagonist dispensed by the grantee; and

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grantee;

(iv) the manner in which the grantee shall record, preserve, and make available for
audit by the department the information described in Subsections (7)(d)(i) through (7)(d)(iii);
and
(e) as required by Subsection (1)(a)(i)(G), any other organization that is in a position to
assist an individual who is at increased risk of experiencing an opiate-related drug overdose
event.
Section 147. Section 26B-4-513, which is renumbered from Section 26-55-108 is
renumbered and amended to read:
[26-55-108]. 26B-4-513. Coprescription guidelines.
(1) As used in this section:
(a) "Controlled substance prescriber" means the same as that term is defined in Section
58-37-6.5.
(b) "Coprescribe" means to issue a prescription for an opiate antagonist with a
prescription for an opiate.
(2) The department shall, in consultation with the Physicians Licensing Board created
in Section 58-67-201, the Osteopathic Physician and Surgeon's Licensing Board created in
Section 58-68-201, and the Division of Professional Licensing created in Section 58-1-103,
establish by rule, made in accordance with Title 63G, Chapter 3, Utah Administrative
Rulemaking Act, scientifically based guidelines for controlled substance prescribers to
coprescribe an opiate antagonist to a patient.
Section 148. Section 26B-4-514 , which is renumbered from Section 26-55-109 is
renumbered and amended to read:
[26-55-109]. 26B-4-514. Opiate abuse prevention pamphlet.
(1) As funding is available, the department shall produce and distribute, in conjunction
with the Division of Substance Abuse and Mental Health, a pamphlet about opiates that
includes information regarding:
(a) the risk of dependency and addiction;
(b) methods for proper storage and disposal;
(c) alternative options for pain management;
(d) the benefits of and ways to obtain naloxone; and
(e) resources if the patient believes that the patient has a substance abuse disorder.

1315	(2) The pamphlet described in Subsection (1) shall be:
7376	(a) evaluated periodically for effectiveness at conveying necessary information and
7377	revised accordingly;
7378	(b) written in simple and understandable language; and
7379	(c) available in English and other languages that the department determines to be
7380	appropriate and necessary.
7381	Section 149. Section 26B-4-601, which is renumbered from Section 26-67-102 is
7382	renumbered and amended to read:
7383	Part 6. Adult Autism Treatment Program
7384	[26-67-102]. <u>26B-4-601.</u> Definitions.
7385	As used in this [chapter] part:
7386	(1) "Adult Autism Treatment Account" means the Adult Autism Treatment Account
7387	created in Section [26-67-205] <u>26B-1-322</u> .
7388	(2) "Advisory committee" means the Adult Autism Treatment Program Advisory
7389	Committee created in Section [26B-1-204] <u>26B-1-424</u> .
7390	(3) "Applied behavior analysis" means the same as that term is defined in Section
7391	31A-22-642.
7392	(4) "Autism spectrum disorder" means the same as that term is defined in Section
7393	31A-22-642.
7394	(5) "Program" means the Adult Autism Treatment Program created in Section
7395	[26-67-201] $26B-4-602$.
7396	(6) "Qualified individual" means an individual who:
7397	(a) is at least 22 years old;
7398	(b) is a resident of the state;
7399	(c) has been diagnosed by a qualified professional as having:
7400	(i) an autism spectrum disorder; or
7401	(ii) another neurodevelopmental disorder requiring significant supports through
7402	treatment using applied behavior analysis; and
7403	(d) needs significant supports for a condition described in Subsection (6)(c), as
7404	demonstrated by formal assessments of the individual's:
7405	(i) cognitive ability:

7406	(ii) adaptive ability;
7407	(iii) behavior; and
7408	(iv) communication ability.
7409	(7) "Qualified provider" means a provider that is qualified under Section [26-67-202]
7410	26B-4-603 to provide services for the program.
7411	Section 150. Section 26B-4-602, which is renumbered from Section 26-67-201 is
7412	renumbered and amended to read:
7413	[26-67-201]. <u>26B-4-602.</u> Adult Autism Treatment Program Creation
7414	Requirements Reporting.
7415	(1) There is created within the department the Adult Autism Treatment Program.
7416	(2) (a) The program shall be administered by the department in collaboration with the
7417	advisory committee.
7418	(b) The program shall be funded only with money from the Adult Autism Treatment
7419	Account.
7420	(3) (a) An individual may apply for a grant from the program by submitting to a
7421	qualified provider the information specified by the department under Subsection [26-67-204]
7422	<u>26B-4-604(5)</u> .
7423	(b) As funding permits, the department shall award a grant from the program on behalf
7424	of an applicant in accordance with criteria established by the department, in collaboration with
7425	the advisory committee, by rule made in accordance with Title 63G, Chapter 3, Utah
7426	Administrative Rulemaking Act.
7427	(c) A grant shall:
7428	(i) be for a specific amount;
7429	(ii) cover a specific period, not to exceed five years; and
7430	(iii) be disbursed incrementally, if appropriate.
7431	(d) The department shall transmit a grant awarded on behalf of an applicant to a
7432	qualified provider designated by the applicant.
7433	(4) A qualified provider that receives a grant for the treatment of a qualified individual
7434	shall:
7435	(a) use the grant only for treatment of the qualified individual;
7436	(b) submit any reports that are required by the department; and

7437	(c) notify the department within seven days if:
7438	(i) the qualified individual:
7439	(A) has not received treatment from the qualified provider for 10 consecutive days;
7440	(B) is no longer receiving treatment from the qualified provider; or
7441	(C) is no longer a qualified individual; or
7442	(ii) the qualified provider is no longer a qualified provider.
7443	(5) A qualified provider that receives a grant for the treatment of a qualified individual
7444	shall refund any amount to the department on a prorated basis for each day that:
7445	(a) the qualified provider is no longer a qualified provider;
7446	(b) the individual is no longer a qualified individual; or
7447	(c) the qualified provider does not provide services to a qualified individual.
7448	Section 151. Section 26B-4-603, which is renumbered from Section 26-67-203 is
7449	renumbered and amended to read:
7450	[26-67-203]. <u>26B-4-603.</u> Provider qualifications.
7451	The department shall designate a provider as a qualified provider if the provider:
7452	(1) is able to treat a qualified individual's condition through:
7453	(a) one or more evidence-based treatments, including applied behavior analysis;
7454	(b) individualized, client-centered treatment;
7455	(c) any method that engages the qualified individual's family members in the treatment
7456	process; and
7457	(d) measured development of the qualified individual's pre-vocational, vocational, and
7458	daily-living skills; and
7459	(2) provides treatment to a qualified individual through:
7460	(a) a behavior analyst licensed under Title 58, Chapter 61, Part 7, Behavior Analyst
7461	Licensing Act; or
7462	(b) a psychologist who is licensed under Title 58, Chapter 61, Psychologist Licensing
7463	Act.
7464	Section 152. Section 26B-4-604, which is renumbered from Section 26-67-204 is
7465	renumbered and amended to read:
7466	[26-67-204]. <u>26B-4-604.</u> Department rulemaking.
7467	The department, in collaboration with the advisory committee, shall make rules in

7468	accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to:
7469	(1) specify assessment tools and outcomes that a qualified provider may use to
7470	determine the types of supports that a qualified individual needs;
7471	(2) define evidence-based treatments that a qualified individual may pay for with grant
7472	funding;
7473	(3) establish criteria for awarding a grant under this [chapter] part;
7474	(4) specify the information that an individual shall submit to demonstrate that the
7475	individual is a qualified individual;
7476	(5) specify the information a provider shall submit to demonstrate that the provider is a
7477	qualified provider; and
7478	(6) specify the content and timing of reports required from a qualified provider,
7479	including a report on actual and projected treatment outcomes for a qualified individual.
7480	Section 153. Section 26B-4-701, which is renumbered from Section 26-46a-102 is
7481	renumbered and amended to read:
7482	Part 7. Health Care Workforce
7483	[26-46a-102]. 26B-4-701. Definitions.
7484	As used in this [chapter] part:
7485	(1) "Accredited clinical education program" means a clinical education program for a
7486	health care profession that is accredited by the Accreditation Council on Graduate Medical
7487	Education.
7488	(2) "Accredited clinical training program" means a clinical training program that is
7489	accredited by an entity recognized within medical education circles as an accrediting body for
7490	medical education, advanced practice nursing education, physician assistance education, doctor
7491	of pharmacy education, dental education, or registered nursing education.
7492	(3) "Centers for Medicare and Medicaid Services" means the Centers for Medicare and
7493	Medicaid Services within the United States Department of Health and Human Services.
7494	(4) "Health care professionals in training" means medical students and residents,
7495	advance practice nursing students, physician assistant students, doctor of pharmacy students,
7496	dental students, and registered nursing students.
7497	(5) "Health sector" means any place of employment where the primary function is the

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delivery of health care services.

7499	(6) (a) "Health workforce" means the individuals, collectively and by profession, who
7500	deliver health care services or assist in the delivery of health care services.
7501	(b) "Health workforce" includes any health care professional who does not work in the
7502	health sector and any non-health care professional who works in the health sector.
7503	[(1)] (7) "Hospital" means a general acute hospital, as defined in [Title 26, Chapter 21,
7504	Health Care Facility Licensing and Inspection Act.] Section 26B-2-201.
7505	[(2)] <u>(8)</u> "Physician" means a person:
7506	(a) licensed as a physician under Title 58, Chapter 67, Utah Medical Practice Act; or
7507	(b) licensed as a physician under Title 58, Chapter 68, Utah Osteopathic Medical
7508	Practice Act.
7509	[(3)] (9) "Rural county" means a county with a population of less than 50,000, as
7510	determined by:
7511	(a) the most recent official census or census estimate of the United States Bureau of the
7512	Census; or
7513	(b) the most recent population estimate for the county from the Utah Population
7514	Committee, if a population figure for the county is not available under Subsection (3)(a).
7515	[(4)] (10) "Rural hospital" means a hospital located within a rural county.
7516	(11) "UMEC" means the Utah Medical Education Council created in Section 26B-4-
7517	<u>706.</u>
7518	Section 154. Section 26B-4-702, which is renumbered from Section 26-46-102 is
7519	renumbered and amended to read:
7520	[26-46-102]. <u>26B-4-702.</u> Creation of Utah Health Care Workforce
7521	Financial Assistance Program Duties of department.
7522	(1) As used in this section:
7523	(a) "Eligible professional" means a geriatric professional or a health care professional
7524	who is eligible to participate in the program.
7525	(b) "Geriatric professional" means a person who:
7526	(i) is a licensed:
7527	(A) health care professional;
7528	(B) social worker;
7529	(C) occupational therapist;

7530	(D) pharmacist;
7531	(E) physical therapist; or
7532	(F) psychologist; and
7533	(ii) is determined by the department to have adequate advanced training in geriatrics to
7534	prepare the person to provide specialized geriatric care within the scope of the person's
7535	profession.
7536	(b) "Health care professional" means:
7537	(i) a licensed:
7538	(A) physician;
7539	(B) physician assistant;
7540	(C) nurse;
7541	(D) dentist; or
7542	(E) mental health therapist; or
7543	(ii) another licensed health care professional designated by the department by rule.
7544	(d) "Program" means the Utah Health Care Workforce Financial Assistance Program
7545	created in this section.
7546	(e) "Underserved area" means an area designated by the department as underserved by
7547	health care professionals, based upon the results of a needs assessment developed by the
7548	department in consultation with the Utah Health Care Workforce Financial Assistance Program
7549	Advisory Committee created under Section 26B-1-419.
7550	[(1)] (2) There is created within the department the Utah Health Care Workforce
7551	Financial Assistance Program to provide, within funding appropriated by the Legislature for the
7552	following purposes:
7553	(a) professional education scholarships and loan repayment assistance to health care
7554	professionals who locate or continue to practice in underserved areas; and
7555	(b) loan repayment assistance to geriatric professionals who locate or continue to
7556	practice in underserved areas.
7557	[(2)] (3) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking
7558	Act, the department shall make rules governing the administration of the program, including
7559	rules that address:
7560	(a) application procedures;

7561	(b) eligibility criteria;
7562	(c) selection criteria;
7563	(d) service conditions, which at a minimum shall include professional service in an
7564	underserved area for a minimum period of time by any person receiving a scholarship or loan
7565	repayment assistance;
7566	(e) penalties for failure to comply with service conditions or other terms of a
7567	scholarship or loan repayment contract;
7568	(f) criteria for modifying or waiving service conditions or penalties in case of extreme
7569	hardship or other good cause; and
7570	(g) administration of contracts entered into before the effective date of this act,
7571	between the department and scholarship or loan repayment recipients, as authorized by law.
7572	[(3)] (4) The department may provide education loan repayment assistance to an
7573	eligible professional if the eligible professional:
7574	(a) agrees to practice in an underserved area for the duration of the eligible
7575	professional's participation in the program; and
7576	(b) submits a written commitment from the health care facility employing the eligible
7577	professional that the health care facility will provide education loan repayment assistance to the
7578	eligible professional in an amount equal to 20% of the total award amount provided to the
7579	eligible professional.
7580	[(4)] (5) The department shall seek and consider the recommendations of the Utah
7581	Health Care Workforce Financial Assistance Program Advisory Committee created under
7582	Section $[\frac{26-46-103}{26B-1-419}]$ as it develops and modifies rules to administer the program.
7583	[(5)] <u>(6)</u> Funding for the program:
7584	(a) shall be a line item within the appropriations act;
7585	(b) shall be nonlapsing unless designated otherwise by the Legislature; and
7586	(c) may be used to cover administrative costs of the program, including reimbursement
7587	expenses of the Utah Health Care Workforce Financial Assistance Program Advisory
7588	Committee created under Section [26-46-103] <u>26B-1-419</u> .
7589	[(6)] (7) Refunds for loan repayment assistance, penalties for breach of contract, and
7590	other payments to the program are dedicated credits to the program.

 $[\frac{7}{2}]$ (8) The department shall prepare an annual report on the revenues, expenditures,

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7592	and outcomes of the program.
7593	Section 155. Section 26B-4-703, which is renumbered from Section 26-46a-103 is
7594	renumbered and amended to read:
7595	[26-46a-103]. <u>26B-4-703.</u> Rural Physician Loan Repayment Program
7596	Purpose Repayment limit Funding Reporting Rulemaking Advisory
7597	committee.
7598	(1) There is created within the department the Rural Physician Loan Repayment
7599	Program to provide, within funding appropriated by the Legislature for this purpose, education
7600	loan repayment assistance to physicians in accordance with Subsection (2).
7601	(2) The department may enter into an education loan repayment assistance contract
7602	with a physician if:
7603	(a) the physician:
7604	(i) locates or continues to practice in a rural county; and
7605	(ii) has a written commitment from a rural hospital that the hospital will provide
7606	education loan repayment assistance to the physician;
7607	(b) the assistance provided by the program does not exceed the assistance provided by
7608	the rural hospital; and
7609	(c) the physician is otherwise eligible for assistance under administrative rules adopted
7610	under Subsection (6).
7611	(3) Funding for the program:
7612	(a) shall be a line item within an appropriations act;
7613	(b) may be used to pay for the per diem and travel expenses of the Rural Physician
7614	Loan Repayment Program Advisory Committee under Subsection [26-46a-104] 26B-1-423(5);
7615	and
7616	(c) may be used to pay for department expenses incurred in the administration of the
7617	program:
7618	(i) including administrative support provided to the Rural Physician Loan Repayment
7619	Program Advisory Committee created under Subsection [26-46a-104] 26B-1-423(7); and
7620	(ii) in an amount not exceeding 10% of funding for the program.

(4) Refunds of loan repayment assistance, penalties for breach of contract, and other

payments to the program are dedicated credits to the program.

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7623	(5) The department shall prepare an annual report of the program's revenues,
7624	expenditures, and outcomes.
7625	(6) (a) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act
7626	the department shall make rules governing the administration of the program, including rules
7627	that address:
7628	(i) application procedures;
7629	(ii) eligibility criteria;
7630	(iii) verification of the amount provided by a rural hospital to a physician for
7631	repayment of the physician's education loans;
7632	(iv) service conditions, which at a minimum shall include professional service by the
7633	physician in the rural hospital providing loan repayment assistance to the physician;
7634	(v) selection criteria and assistance amounts;
7635	(vi) penalties for failure to comply with service conditions or other terms of a loan
7636	repayment assistance contract; and
7637	(vii) criteria for modifying or waiving service conditions or penalties in the case of
7638	extreme hardship or for other good cause.
7639	(b) The department shall seek and consider the recommendations of the Rural
7640	Physician Loan Repayment Program Advisory Committee created [under Section 26-46a-104]
7641	in Section 26B-1-423 as it develops and modifies rules to administer the program.
7642	Section 156. Section 26B-4-704, which is renumbered from Section 26-60-103 is
7643	renumbered and amended to read:
7644	[26-60-103]. <u>26B-4-704.</u> Scope of telehealth practice Enforcement.
7645	(1) As used in this section:
7646	(a) "Asynchronous store and forward transfer" means the transmission of a patient's
7647	health care information from an originating site to a provider at a distant site.
7648	(b) "Distant site" means the physical location of a provider delivering telemedicine
7649	services.
7650	(c) "Originating site" means the physical location of a patient receiving telemedicine
7651	services.
7652	(d) "Patient" means an individual seeking telemedicine services.
7653	(e) (i) "Patient-generated medical history" means medical data about a patient that the

7654	patient creates, records, or gathers.
7655	(ii) "Patient-generated medical history" does not include a patient's medical record that
7656	a healthcare professional creates and the patient personally delivers to a different healthcare
7657	professional.
7658	(f) "Provider" means an individual who is:
7659	(i) licensed under Chapter 2, Part 2, Health Care Facility Licensing and Inspection;
7660	(ii) licensed under Title 58, Occupations and Professions, to provide health care; or
7661	(iii) licensed under Chapter 2, Part 1, Human Services Programs and Facilities.
7662	(g) "Synchronous interaction" means real-time communication through interactive
7663	technology that enables a provider at a distant site and a patient at an originating site to interact
7664	simultaneously through two-way audio and video transmission.
7665	(h) "Telehealth services" means the transmission of health-related services or
7666	information through the use of electronic communication or information technology.
7667	(i) "Telemedicine services" means telehealth services:
7668	(i) including:
7669	(A) clinical care;
7670	(B) health education;
7671	(C) health administration;
7672	(D) home health;
7673	(E) facilitation of self-managed care and caregiver support; or
7674	(F) remote patient monitoring occurring incidentally to general supervision; and
7675	(ii) provided by a provider to a patient through a method of communication that:
7676	(A) uses asynchronous store and forward transfer or synchronous interaction; and
7677	(B) meets industry security and privacy standards, including compliance with the
7678	federal Health Insurance Portability and Accountability Act of 1996, Pub. L. No. 104-191, 110
7679	Stat. 1936, as amended, and the federal Health Information Technology for Economic and
7680	Clinical Health Act, Pub. L. No. 111-5, 123 Stat. 226, 467, as amended.
7681	[(1)] (2) A provider offering telehealth services shall:
7682	(a) at all times:
7683	(i) act within the scope of the provider's license under Title 58, Occupations and
7684	Professions, in accordance with the provisions of this chapter and all other applicable laws and

7685 rules; and

- (ii) be held to the same standards of practice as those applicable in traditional health care settings;
- (b) if the provider does not already have a provider-patient relationship with the patient, establish a provider-patient relationship during the patient encounter in a manner consistent with the standards of practice, determined by the Division of Professional Licensing in rule made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, including providing the provider's licensure and credentials to the patient;
- (c) before providing treatment or prescribing a prescription drug, establish a diagnosis and identify underlying conditions and contraindications to a recommended treatment after:
- (i) obtaining from the patient or another provider the patient's relevant clinical history; and
 - (ii) documenting the patient's relevant clinical history and current symptoms;
- (d) be available to a patient who receives telehealth services from the provider for subsequent care related to the initial telemedicine services, in accordance with community standards of practice;
- (e) be familiar with available medical resources, including emergency resources near the originating site, in order to make appropriate patient referrals when medically indicated;
- (f) in accordance with any applicable state and federal laws, rules, and regulations, generate, maintain, and make available to each patient receiving telehealth services the patient's medical records; and
- (g) if the patient has a designated health care provider who is not the telemedicine provider:
- (i) consult with the patient regarding whether to provide the patient's designated health care provider a medical record or other report containing an explanation of the treatment provided to the patient and the telemedicine provider's evaluation, analysis, or diagnosis of the patient's condition;
- (ii) collect from the patient the contact information of the patient's designated health care provider; and
- (iii) within two weeks after the day on which the telemedicine provides services to the patient, and to the extent allowed under HIPAA as that term is defined in

7716	Section [26-18-17] <u>26B-3-126</u> , provide the medical record or report to the patient's designated
7717	health care provider, unless the patient indicates that the patient does not want the telemedicine
7718	provider to send the medical record or report to the patient's designated health care provider.
7719	[(2)] (3) Subsection $[(1)]$ (2)(g) does not apply to prescriptions for eyeglasses or
7720	contacts.
7721	[(3)] (4) Except as specifically provided in Title 58, Chapter 83, Online Prescribing,
7722	Dispensing, and Facilitation Licensing Act, and unless a provider has established a
7723	provider-patient relationship with a patient, a provider offering telemedicine services may not
7724	diagnose a patient, provide treatment, or prescribe a prescription drug based solely on one of
7725	the following:
7726	(a) an online questionnaire;
7727	(b) an email message; or
7728	(c) a patient-generated medical history.
7729	[(4)] <u>(5)</u> A provider may not offer telehealth services if:
7730	(a) the provider is not in compliance with applicable laws, rules, and regulations
7731	regarding the provider's licensed practice; or
7732	(b) the provider's license under Title 58, Occupations and Professions, is not active and
7733	in good standing.
7734	(6) (a) The Division of Professional Licensing created in Section 58-1-103 is
7735	authorized to enforce the provisions of this section as it relates to providers licensed under Title
7736	58, Occupations and Professions.
7737	(b) The department is authorized to enforce the provisions of:
7738	(i) this section as it relates to providers licensed under this title; and
7739	(ii) this section as it relates to providers licensed under Chapter 2, Part 1, Human
7740	Services Programs and Facilities.
7741	Section 157. Section 26B-4-705, which is renumbered from Section 26-69-301 is
7742	renumbered and amended to read:
7743	[26-69-301]. <u>26B-4-705.</u> Utah Health Workforce Information Center.
7744	(1) As used in this section:
7745	(a) "Council" means the Utah Health Workforce Advisory Council created in Section
7746	26B-1-425.

7747	(b) "Health sector" means any place of employment where the primary function is the
7748	delivery of health care services.
7749	(c) (i) "Health workforce" means the individuals, collectively and by profession, who
7750	deliver health care services or assist in the delivery of health care services.
7751	(ii) "Health workforce" includes any health care professional who does not work in the
7752	health sector and any non-health care professional who works in the health sector.
7753	[(1)] (2) There is created within the department the Utah Health Workforce
7754	Information Center.
7755	[(2)] (3) The information center shall:
7756	(a) under the guidance of the council, work with the Department of Commerce to
7757	collect data described in Section 58-1-112;
7758	(b) analyze data from any available source regarding Utah's health workforce including
7759	data collected by the Department of Commerce under Section 58-1-112;
7760	(c) send a report to the council regarding any analysis of health workforce data;
7761	(d) conduct research on Utah's health workforce as directed by the council;
7762	(e) notwithstanding the provisions of Subsection 35A-4-312(3), receive information
7763	obtained by the Department of Workforce Services under the provisions of Section 35A-4-312
7764	for purposes consistent with the information center's duties, including identifying changes in
7765	Utah's health workforce numbers, types, and geographic distribution;
7766	(f) project the demand for individuals to enter health care professions, including the
7767	nursing profession in accordance with Section 53B-26-202;
7768	(g) subject to Section $[\frac{26-3-7}{26B-8-406}]$, share data with any appropriate person as
7769	determined by the information center; and
7770	(h) conduct research and provide analysis for any state agency as approved by the
7771	executive director or the executive director's designee.
7772	[(3)] (4) Notwithstanding any other provision of state law, the information center is
7773	authorized to obtain data from any state agency if:
7774	(a) the council and the information center deem receiving the data necessary to perform
7775	a duty listed under Subsection [$\frac{(2)}{(3)}$] or [$\frac{26-69-202(1)}{(26-69-202(1))}$] $\frac{26B-1-425(7)}{(26-69-202(1))}$; and
7776	(b) the information center's access to the data will not:
7777	(i) violate any federal statute or federal regulation; or

7778	(ii) violate a condition a state agency must follow:
7779	(A) to participate in a federal program; or
7780	(B) to receive federal funds.
7781	Section 158. Section 26B-4-706, which is renumbered from Section 26-69-402 is
7782	renumbered and amended to read:
7783	[26-69-402]. <u>26B-4-706.</u> Utah Medical Education Council.
7784	(1) (a) There is created the Utah Medical Education Council, which is a subcommittee
7785	of the Utah Health Workforce Advisory Council.
7786	(b) The membership of UMEC shall consist of the following appointed by the
7787	governor:
7788	(i) the dean of the school of medicine at the University of Utah;
7789	(ii) an individual who represents graduate medical education at the University of Utah;
7790	(iii) an individual from each institution, other than the University of Utah, that
7791	sponsors an accredited clinical education program;
7792	(iv) an individual from the health care insurance industry; and
7793	(v) (A) three members of the general public who are not employed by or affiliated with
7794	any institution that offers, sponsors, or finances health care or medical education; and
7795	(B) if the number of individuals appointed under Subsection (1)(b)(iii) is more than
7796	two, the governor may appoint an additional member of the public under this Subsection
7797	(1)(b)(v) for each individual the governor appoints under Subsection (1)(b)(iii) beyond two.
7798	(2) Except as provided in Subsections (1)(b)(i) and (ii), no two council members may
7799	be employed by or affiliated with the same:
7800	(a) institution of higher education;
7801	(b) state agency outside of higher education; or
7802	(c) private entity.
7803	(3) The dean of the school of medicine at the University of Utah:
7804	(a) shall chair UMEC;
7805	(b) may not be counted in determining the existence of a quorum; and
7806	(c) may only cast a vote on a matter before the council if the vote of the other council
7807	members results in a tied vote.
7808	(4) UMEC shall annually elect a vice chair from UMEC's members.

7809	(5) (a) Consistent with Subsection (6)(b), a majority of the members constitute a	
7810	quorum.	
7811	(b) The action of a majority of a quorum is the action of UMEC.	
7812	(6) (a) Except as provided in Subsection (6)(b), members are appointed to four-year	
7813	terms of office.	
7814	(b) Notwithstanding Subsection (6)(a), the governor shall, at the time of the initial	
7815	appointment, adjust the length of terms to ensure that the terms of council members are	
7816	staggered so that approximately half of the members are appointed every two years.	
7817	(c) If a vacancy occurs in the membership for any reason, the replacement shall be	
7818	appointed by the governor for the unexpired term in the same manner as the original	
7819	appointment was made.	
7820	(7) A member may not receive compensation or benefits for the member's service, but	
7821	may receive per diem and travel expenses in accordance with:	
7822	(a) Section 63A-3-106;	
7823	(b) Section 63A-3-107; and	
7824	(c) rules made by the Division of Finance pursuant to Sections 63A-3-106 and	
7825	63A-3-107.	
7826	(8) The council shall provide staff for UMEC.	
7827	Section 159. Section 26B-4-707, which is renumbered from Section 26-69-403 is	
7828	renumbered and amended to read:	
7829	[26-69-403]. <u>26B-4-707.</u> Medical Education Program.	
7830	(1) There is created a Medical Education Program to be administered by UMEC in	
7831	cooperation with the Division of Finance.	
7832	(2) The program shall be funded from money received for graduate medical education	
7833	from:	
7834	(a) the federal Centers for Medicare and Medicaid Services or other federal agency;	
7835	(b) state appropriations; and	
7836	(c) donation or private contributions.	
7837	(3) All funding for this program shall be nonlapsing.	
7838	(4) Program money may only be expended if:	
7839	(a) approved by UMEC; and	

7840	(b) used for graduate medical education in accordance with Subsection [26-69-404]
7841	<u>26B-4-708</u> (4).
7842	Section 160. Section 26B-4-708, which is renumbered from Section 26-69-404 is
7843	renumbered and amended to read:
7844	[26-69-404]. <u>26B-4-708.</u> Duties of UMEC.
7845	UMEC shall:
7846	(1) seek private and public contributions for the program;
7847	(2) determine the method for reimbursing institutions that sponsor health care
7848	professionals in training;
7849	(3) determine the number and type of positions for health care professionals in training
7850	for which program money may be used;
7851	(4) distribute program money for graduate medical education in a manner that:
7852	(a) prepares postgraduate medical residents, as defined by the accreditation council on
7853	graduate medical education, for inpatient, outpatient, hospital, community, and geographically
7854	diverse settings;
7855	(b) encourages the coordination of interdisciplinary clinical training among health care
7856	professionals in training;
7857	(c) promotes stable funding for the clinical training of health care professionals in
7858	training; and
7859	(d) only funds accredited clinical training programs; and
7860	(5) advise on the implementation of the program.
7861	Section 161. Section 26B-4-709, which is renumbered from Section 26-69-405 is
7862	renumbered and amended to read:
7863	[26-69-405]. <u>26B-4-709.</u> Powers of UMEC.
7864	The UMEC may:
7865	(1) appoint advisory committees of broad representation on interdisciplinary clinical
7866	education, workforce mix planning and projections, funding mechanisms, and other topics as is
7867	necessary;
7868	(2) use federal money for necessary administrative expenses to carry out UMEC's
7869	duties and powers as permitted by federal law;
7870	(3) distribute program money in accordance with Subsection [26-69-404] 26B-4-

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<u>08</u> (4); and	
7872	(4) as is necessary to carry out UMEC's duties under Section [26-69-404] 26B-4-708,
7873	adopt rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.
7874	Section 162. Section 26B-4-710, which is renumbered from Section 26-69-406 is
7875	renumbered and amended to read:
7876	[26-69-406]. 26B-4-710. Rural residency training program.
7877	(1) As used in this section:
7878	(a) "Physician" means:
7879	(i) an individual licensed to practice medicine under Title 58, Chapter 67, Utah Medical
7880	Practice Act or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; and
7881	(ii) an individual licensed to practice dentistry under Title 58, Chapter 69, Dentist and
7882	Dental Hygienist Practice Act.
7883	(b) "Rural residency training program" means an accredited clinical training program
7884	that places a physician into a rural county for a part or all of the physician's clinical training.
7885	(2) Subject to appropriations from the Legislature, UMEC shall establish a pilot
7886	program to place physicians into rural residency training programs.
7887	Section 163. Section 26B-4-711, which is renumbered from Section 26-69-407 is
7888	renumbered and amended to read:
7889	[26-69-407]. <u>26B-4-711.</u> Residency grant program.
7890	(1) As used in this section:
7891	(a) "D.O. program" means an osteopathic medical program that prepares a graduate to
7892	obtain licensure as a doctor of osteopathic medicine upon completing a state's licensing
7893	requirements.
7894	(b) "M.D. program" means a medical education program that prepares a graduate to
7895	obtain licensure as a doctor of medicine upon completing a state's licensing requirements.
7896	(c) "Residency program" means a program that provides training for graduates of a
7897	D.O. program or an M.D. program.
7898	(2) UMEC shall develop a grant program where a sponsoring institution in Utah may
7899	apply for a grant to establish a new residency program or expand a current residency program.
7900	(3) An applicant for a grant shall:

(a) provide the proposed specialty area for each grant funded residency position;

7902	(b) identify where the grant funded residency position will provide care;
7903	(c) (i) provide proof that the residency program is accredited by the Accreditation
7904	Council for Graduate Medical Education; or
7905	(ii) identify what actions need to occur for the proposed residency program to become
7906	accredited by the Accreditation Council for Graduate Medical Education;
7907	(d) identify how a grant funded residency position will be funded once the residency
7908	program exhausts the grant money;
7909	(e) agree to implement selection processes for a residency position that treat applicants
7910	from D.O. programs and applicants from M.D. programs equally;
7911	(f) agree to provide information identified by UMEC that relates to post-residency
7912	employment outcomes for individuals who work in grant funded residency positions; and
7913	(g) provide any other information related to the grant application UMEC deems
7914	necessary.
7915	(4) UMEC shall prioritize awarding grants to new or existing residency programs that
7916	will:
7917	(a) address a workforce shortage, occurring in Utah, for a specialty; or
7918	(b) serve an underserved population, including a rural population.
7919	(5) Before November 1, 2023, and each November 1 thereafter, UMEC shall provide a
7920	written report to the Higher Education Appropriations Subcommittee describing:
7921	(a) which sponsoring institutions received a grant;
7922	(b) the number of residency positions created; and
7923	(c) for each residency position created:
7924	(i) the type of specialty;
7925	(ii) where the residency position provides care; and
7926	(iii) an estimated date of when a grant funded residency position will no longer need
7927	grant funding.
7928	Section 164. Section 26B-4-712, which is renumbered from Section 26-69-408 is
7929	renumbered and amended to read:
7930	[26-69-408]. <u>26B-4-712.</u> Forensic psychiatrist fellowship grant.
7931	(1) As used in this section, "forensic psychiatry" means the provision of services by an
7932	individual who:

7933	(a) is a licensed physician;
7934	(b) is board certified for a psychiatry specialization recognized by the American Board
7935	of Medical Specialists or the American Osteopathic Association's Bureau of Osteopathic
7936	Specialists; and
7937	(c) uses scientific and clinical expertise in legal contexts involving the mental health of
7938	individuals.
7939	(2) UMEC shall establish a grant program that will facilitate the creation of a single
7940	forensic psychiatrist fellowship program.
7941	(3) An applicant for the grant shall:
7942	(a) demonstrate how the applicant is best suited for developing a forensic psychiatry
7943	fellowship program, including:
7944	(i) a description of resources that would be available to the program; and
7945	(ii) any resources or staff that need to be acquired for the program;
7946	(b) identify what needs to occur for the proposed residency program to become
7947	accredited by the Accreditation Council for Graduate Medical Education;
7948	(c) provide an estimate of how many individuals would be trained in the program at
7949	any one time;
7950	(d) provide any information related to the grant application UMEC deems necessary for
7951	awarding the grant; and
7952	(e) if awarded the grant, agree to:
7953	(i) enter into a contract with the Department of Corrections that the applicant will
7954	provide for the provision of forensic psychiatry services to an individual:
7955	(A) who needs psychiatric services; and
7956	(B) is under the Department of Corrections' jurisdiction;
7957	(ii) ensure that any individual hired to provide forensic psychiatry services will comply
7958	with all relevant:
7959	(A) national licensing requirements; and
7960	(B) state licensing requirements under Title 58, Occupations and Professions.
7961	Section 165. Section 26B-4-801, which is renumbered from Section 26-49-102 is
7962	renumbered and amended to read:

Part 8. Uniform Emergency Volunteer Health Practitioners Act

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7964	$[\frac{26-49-102}{2}]$.	26B-4-801. Definitions.
7965	As used in this [ch	apter] <u>part</u> :
7966	(1) "Disaster relie	f organization" means an entity that:
7967	(a) provides emerg	gency or disaster relief services that include health or veterinary
7968	services provided by volume	nteer health practitioners;
7969	(b) is designated of	or recognized as a provider of the services described in Subsection
7970	(1)(a) under a disaster resp	oonse and recovery plan adopted by:
7971	(i) an agency of th	e federal government;
7972	(ii) the departmen	t; or
7973	(iii) a local health	department; and
7974	(c) regularly plans	and conducts its activities in coordination with:
7975	(i) an agency of the	e federal government;
7976	(ii) the departmen	t; or
7977	(iii) a local health	department.
7978	(2) "Emergency" i	means:
7979	(a) a state of emer	gency declared by:
7980	(i) the president of	f the United States;
7981	(ii) the governor is	n accordance with Title 53, Chapter 2a, Part 2, Disaster Response and
7982	Recovery Act; and	
7983	(iii) the chief exec	eutive officer of a political subdivision in accordance with Title 53,
7984	Chapter 2a, Part 2, Disaste	er Response and Recovery Act, for a local emergency; or
7985	(b) a public health	emergency declared by:
7986	(i) the executive d	irector through a public health order in accordance with Title 26,
7987	Utah Health Code; or	
7988	(ii) a local health	department for a location under the local health department's
7989	jurisdiction.	
7990	(3) "Emergency M	Ianagement Assistance Compact" means the interstate compact
7991	approved by Congress by	Public [Law] <u>L.</u> No. 104-321, 110 Stat. 3877 and adopted by Utah in
7992	Title 53, Chapter 2a, Part	4, Emergency Management Assistance Compact.
7993	(4) "Entity" means	s a person other than an individual.
7994	(5) "Health facility	y" means an entity licensed under the laws of this or another state to

7995 provide health or veterinary services.

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- 7996 (6) "Health practitioner" means an individual licensed under Utah law or another state to provide health or veterinary services.
 - (7) "Health services" means the provision of treatment, care, advice, guidance, other services, or supplies related to the health or death of individuals or human populations, to the extent necessary to respond to an emergency, including:
 - (a) the following, concerning the physical or mental condition or functional status of an individual or affecting the structure or function of the body:
 - (i) preventive, diagnostic, therapeutic, rehabilitative, maintenance, or palliative care; or
- 8004 (ii) counseling, assessment, procedures, or other services;
 - (b) selling or dispensing a drug, a device, equipment, or another item to an individual in accordance with a prescription; and
 - (c) funeral, cremation, cemetery, or other mortuary services.
 - (8) "Host entity":
 - (a) means an entity operating in Utah that:
 - (i) uses volunteer health practitioners to respond to an emergency; and
 - (ii) is responsible during an emergency, for actually delivering health services to individuals or human populations, or veterinary services to animals or animal populations; and
 - (b) may include disaster relief organizations, hospitals, clinics, emergency shelters, health care provider offices, or any other place where volunteer health practitioners may provide health or veterinary services.
 - (9) (a) "License" means authorization by a state to engage in health or veterinary services that are unlawful without authorization.
 - (b) "License" includes authorization under this title to an individual to provide health or veterinary services based upon a national or state certification issued by a public or private entity.
 - (10) "Local emergency" means the same as that term is defined in Section 53-2a-203.
- 8022 (11) "Local health department" means the same as that term is defined in Section 8023 26A-1-102.
- 8024 (12) "Public health emergency" means the same as that term is defined in Section 8025 [26-23b-102] 26B-7-301.

8026	(13) "Scope of practice" means the extent of the authorization to provide health or
8027	veterinary services granted to a health practitioner by a license issued to the practitioner in the
8028	state in which the principal part of the practitioner's services are rendered, including any
8029	conditions imposed by the licensing authority.
8030	(14) "State" means:
8031	(a) a state of the United States;
8032	(b) the District of Columbia;
8033	(c) Puerto Rico;
8034	(d) the United States Virgin Islands; or
8035	(e) any territory or insular possession subject to the jurisdiction of the United States.
8036	(15) "Veterinary services" shall have the meaning provided for in Subsection
8037	58-28-102(11).
8038	(16) (a) "Volunteer health practitioner" means a health practitioner who provides health
8039	or veterinary services, whether or not the practitioner receives compensation for those services.
8040	(b) "Volunteer health practitioner" does not include a practitioner who receives
8041	compensation under a preexisting employment relationship with a host entity or affiliate that
8042	requires the practitioner to provide health services in Utah, unless the practitioner is:
8043	(i) not a Utah resident; and
8044	(ii) employed by a disaster relief organization providing services in Utah during an
8045	emergency.
8046	Section 166. Section 26B-4-802, which is renumbered from Section 26-49-103 is
8047	renumbered and amended to read:
8048	[26-49-103]. <u>26B-4-802.</u> Applicability to volunteer health practitioners.
8049	This [chapter] part applies to volunteer health practitioners who:
8050	(1) are registered with a registration system that complies with Section [26-49-202]
8051	<u>26B-4-804</u> ; and
8052	(2) provide health or veterinary services in Utah for a host entity during an emergency.
8053	Section 167. Section 26B-4-803, which is renumbered from Section 26-49-201 is
8054	renumbered and amended to read:
8055	[26-49-201]. <u>26B-4-803.</u> Regulation of services during emergency.
8056	(1) During an emergency, the [Department of Health] department or a local health

8057	department may limit, restrict, or otherwise regulate:
8058	(a) the duration of practice by volunteer health practitioners;
8059	(b) the geographical areas in which volunteer health practitioners may practice;
8060	(c) the types of volunteer health practitioners who may practice; and
8061	(d) any other matters necessary to coordinate effectively the provision of health or
8062	veterinary services during the emergency.
8063	(2) An order issued under Subsection (1) takes effect immediately, without prior notice
8064	or comment, and is not a rule within the meaning of Title 63G, Chapter 3, Utah Administrative
8065	Rulemaking Act, or an adjudication within the meaning of Title 63G, Chapter 4,
8066	Administrative Procedures Act.
8067	(3) A host entity that uses volunteer health practitioners to provide health or veterinary
8068	services in Utah shall:
8069	(a) to the extent practicable and in order to provide for the efficient and effective use of
8070	volunteer health practitioners, consult and coordinate its activities with:
8071	(i) the [Department of Health] department;
8072	(ii) local health departments; or
8073	(iii) the Department of Agriculture and Food; [or] and
8074	[(iv) the Department of Human Services; and]
8075	(b) comply with all state and federal laws relating to the management of emergency
8076	health or veterinary services.
8077	Section 168. Section 26B-4-804, which is renumbered from Section 26-49-202 is
8078	renumbered and amended to read:
8079	[26-49-202]. <u>26B-4-804.</u> Volunteer health practitioner registration
8080	systems.
8081	(1) To qualify as a volunteer health practitioner registration system, the registration
8082	system shall:
8083	(a) accept applications for the registration of volunteer health practitioners before or
8084	during an emergency;
8085	(b) include information about the licensure and good standing of health practitioners
8086	that is accessible by authorized persons;
8087	(c) be capable of confirming the accuracy of information concerning whether a health

practitioner is licensed and in good standing before health services or veterinary services are provided under this chapter; and

- (d) meet one of the following conditions:
- (i) be an emergency system for advance registration of volunteer health practitioners established by a state and funded through the United States Department of Health and Human Services under Section 319I of the Public Health Services Act, 42 U.S.C. Sec. 247d-7b, as amended;
- (ii) be a local unit consisting of trained and equipped emergency response, public health, and medical personnel formed under Section 2801 of the Public Health Services Act, 42 U.S.C. Sec. 300hh as amended;
- 8098 (iii) be operated by a:

- 8099 (A) disaster relief organization;
- 8100 (B) licensing board;
 - (C) national or regional association of licensing boards or health practitioners;
 - (D) health facility that provides comprehensive inpatient and outpatient healthcare services, including tertiary care; or
 - (E) governmental entity; or
 - (iv) be designated by the [Department of Health] department as a registration system for purposes of this chapter.
 - (2) (a) Subject to Subsection (2)(b), during an emergency, the [Department of Health] department, a person authorized to act on behalf of the [Department of Health] department, or a host entity shall confirm whether a volunteer health practitioner in Utah is registered with a registration system that complies with Subsection (1).
 - (b) The confirmation authorized under this Subsection (2) is limited to obtaining the identity of the practitioner from the system and determining whether the system indicates that the practitioner is licensed and in good standing.
 - (3) Upon request of a person authorized under Subsection (2), or a similarly authorized person in another state, a registration system located in Utah shall notify the person of the identity of a volunteer health practitioner and whether or not the volunteer health practitioner is licensed and in good standing.
 - (4) A host entity is not required to use the services of a volunteer health practitioner

8119	even if the volunteer health practitioner is registered with a registration system that indicates
8120	that the practitioner is licensed and in good standing.
8121	Section 169. Section 26B-4-805, which is renumbered from Section 26-49-203 is
8122	renumbered and amended to read:
8123	[26-49-203]. <u>26B-4-805.</u> Recognition of volunteer health practitioners
8124	licensed in other states.
8125	(1) During an emergency, a volunteer health practitioner registered with a registration
8126	system that complies with Section [26-49-202] 26B-4-804 and licensed and in good standing in
8127	the state upon which the practitioner's registration is based:
8128	(a) may practice in Utah to the extent authorized by this chapter as if the practitioner
8129	were licensed in Utah; and
8130	(b) is exempt from:
8131	(i) licensure in Utah; or
8132	(ii) operating under modified scope of practice provisions in accordance with
8133	Subsections 58-1-307(4) and (5).
8134	(2) A volunteer health practitioner qualified under Subsection (1) is not entitled to the
8135	protections of this chapter if the practitioner is licensed in more than one state and any license
8136	of the practitioner:
8137	(a) is suspended, revoked, or subject to an agency order limiting or restricting practice
8138	privileges; or
8139	(b) has been voluntarily terminated under threat of sanction.
8140	Section 170. Section 26B-4-806 , which is renumbered from Section 26-49-204 is
8141	renumbered and amended to read:
8142	[26-49-204]. <u>26B-4-806.</u> No effect on credentialing and privileging.
8143	(1) For purposes of this section:
8144	(a) "Credentialing" means obtaining, verifying, and assessing the qualifications of a
8145	health practitioner to provide treatment, care, or services.
8146	(b) "Privileging" means the authorizing by an appropriate authority of a health
8147	practitioner to provide specific treatment, care, or services at a health facility subject to limits
8148	based on factors that include license, education, training, experience, competence, health status
8149	and specialized skill.

8150 (2) This [chapter] part does not affect credentialing or privileging standards of a health 8151 facility, and does not preclude a health facility from waiving or modifying those standards 8152 during an emergency. 8153 Section 171. Section 26B-4-807, which is renumbered from Section 26-49-205 is 8154 renumbered and amended to read: 8155 $[\frac{26-49-205}{}]$. 26B-4-807. Provision of volunteer health or veterinary 8156 services -- Administrative sanctions -- Authority of Division of Professional Licensing. 8157 (1) Subject to Subsections (2) and (3), a volunteer health practitioner shall comply with the scope of practice for a similarly licensed practitioner established by the licensing 8158 8159 provisions, practice acts, or other Utah laws. 8160 (2) Except as otherwise provided in Subsection (3), this [chapter] part does not 8161 authorize a volunteer health practitioner to provide services that are outside the volunteer 8162 health practitioner's scope of practice, even if a similarly licensed practitioner in Utah would be permitted to provide the services. 8163 8164 (3) (a) In accordance with this section and Section 58-1-405, the Division of Professional Licensing may issue an order modifying or restricting the health or veterinary 8165 8166 services that volunteer health practitioners may provide pursuant to this [chapter] part. 8167 (b) An order under this subsection takes effect immediately, without prior notice or 8168 comment, and is not a rule within the meaning of Title 63G, Chapter 3, Utah Administrative Rulemaking Act, or a directive within the meaning of Title 63G, Chapter 4. Administrative 8169 8170 Procedures Act. (4) A host entity may restrict the health or veterinary services that a volunteer health 8171 8172 practitioner may provide under this [chapter] part. 8173 (5) (a) A volunteer health practitioner does not engage in unauthorized practice unless 8174 the volunteer health practitioner has reason to know of any limitation, modification, or 8175 restriction under this chapter, Title 58, Chapter 1, Division of Occupational and Professional 8176 Licensing Act, or that a similarly licensed practitioner in Utah would not be permitted to 8177 provide the services.

(b) A volunteer health practitioner has reason to know of a limitation, modification, or

restriction, or that a similarly licensed practitioner in Utah would not be permitted to provide a

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service, if:

8181	(i) the volunteer health practitioner knows the limitation, modification, or restriction
8182	exists or that a similarly licensed practitioner in Utah would not be permitted to provide the
8183	service; or
8184	(ii) from all the facts and circumstances known to the volunteer health practitioner at
8185	the relevant time, a reasonable person would conclude that:
8186	(A) the limitation, modification, or restriction exists; or
8187	(B) a similarly licensed practitioner in Utah would not be permitted to provide the
8188	service.
8189	(6) In addition to the authority granted by law of Utah other than this chapter to
8190	regulate the conduct of volunteer health practitioners, the Division of Professional Licensing
8191	Act or other disciplinary authority in Utah:
8192	(a) may impose administrative sanctions upon a volunteer health practitioner licensed
8193	in Utah for conduct outside of Utah in response to an out-of-state emergency;
8194	(b) may impose administrative sanctions upon a volunteer health practitioner not
8195	licensed in Utah for conduct in Utah in response to an in-state emergency; and
8196	(c) shall report any administrative sanctions imposed upon a volunteer health
8197	practitioner licensed in another state to the appropriate licensing board or other disciplinary
8198	authority in any other state in which the volunteer health practitioner is known to be licensed.
8199	(7) In determining whether or not to impose administrative sanctions under Subsection
8200	(6), the Division of Professional Licensing Act or other disciplinary authority shall consider the
8201	circumstances in which the conduct took place, including:
8202	(a) any exigent circumstances; and
8203	(b) the volunteer health practitioner's scope of practice, education, training, experience,
8204	and specialized skill.
8205	Section 172. Section 26B-4-808, which is renumbered from Section 26-49-301 is
8206	renumbered and amended to read:
8207	[26-49-301]. 26B-4-808. Relation to other laws.
8208	(1) (a) This [chapter] part does not limit rights, privileges, or immunities provided to

volunteer health practitioners by laws other than this [chapter] part. 8210 (b) Except as otherwise provided in Subsection (2), this [chapter] part does not affect 8211

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requirements for the use of health practitioners pursuant to Title 53, Chapter 2a, Part 4,

8212	Emergency Management Assistance Compact.
8213	(2) An authorized representative of a party state may incorporate volunteer health
8214	practitioners into the emergency forces of Utah even if those volunteer health practitioners are
8215	not officers or employees of Utah, a political subdivision of Utah, or a municipality or other
8216	local government within Utah.
8217	Section 173. Section 26B-4-809, which is renumbered from Section 26-49-401 is
8218	renumbered and amended to read:
8219	[26-49-401]. <u>26B-4-809.</u> Regulatory authority.
8220	(1) The [Department of Health] department shall make rules by following the
8221	procedures and requirements of Title 63G, Chapter 3, Utah Administrative Rulemaking Act.
8222	(2) Before adopting rules under Subsection (1), the [Department of Health] department
8223	shall consult and consider:
8224	(a) the recommendations of the entity established to coordinate the implementation of
8225	the Emergency Management Assistance Compact; and
8226	(b) rules adopted by similarly empowered agencies in other states in order to promote
8227	uniformity of application of this [chapter] part and make the emergency response systems in
8228	the various states reasonably compatible.
8229	Section 174. Section 26B-4-810, which is renumbered from Section 26-49-501 is
8230	renumbered and amended to read:
8231	[26-49-501]. <u>26B-4-810.</u> Limitations on civil liability for volunteer health
8232	practitioners.
8233	Volunteer health practitioners who provide health or veterinary services pursuant to this
8234	chapter are immune from liability and civil damages as set forth in Section 58-13-2.
8235	Section 175. Section 26B-4-811, which is renumbered from Section 26-49-601 is
8236	renumbered and amended to read:
8237	[26-49-601]. <u>26B-4-811.</u> Workers' compensation coverage.
8238	(1) For purposes of this section, "injury" means a physical or mental injury or disease
8239	for which an employee of Utah who is injured or contracts the disease in the course of the
8240	employee's employment would be entitled to benefits under Title 34A, Chapter 2, Workers'
8241	Compensation Act.
8242	(2) A volunteer health practitioner is considered a state employee for purposes of

8243	receiving workers' compensation medical benefits under Title 34A, Chapter 2, Workers'
8244	Compensation Act, and Chapter 3, Utah Occupational Disease Act.
8245	(3) The state shall provide workers' compensation benefits for a volunteer health
8246	practitioner under:
8247	(a) Title 34A, Chapter 2, Workers' Compensation Act; and
8248	(b) Title 34A, Chapter 3, Utah Occupational Disease Act.
8249	(4) (a) In accordance with Section 34A-2-105, the workers' compensation benefits
8250	described in Subsection (3) are the exclusive remedy against the state or an officer, agent, or
8251	employee of the state, for all injuries and occupational diseases resulting from the volunteer
8252	health practitioner's services for the state.
8253	(b) For purposes of Subsection (4)(a), the state is considered the employer of the
8254	volunteer health practitioner.
8255	(5) To compute the workers' compensation benefits for a volunteer health practitioner
8256	described in Subsection (3), the average weekly wage of the volunteer health practitioner shall
8257	be the state's average weekly wage at the time of the emergency that is the basis for the
8258	volunteer health practitioner's workers' compensation claim.
8259	(6) (a) The Labor Commission shall:
8260	(i) adopt rules, enter into agreements with other states, or take other measures to
8261	facilitate the receipt of benefits for injury or death by volunteer health practitioners who reside
8262	in other states; and
8263	(ii) consult with and consider the practices for filing, processing, and paying claims by
8264	agencies with similar authority in other states to promote uniformity of application of this
8265	chapter with other states that enact similar legislation.
8266	(b) The Labor Commission may waive or modify requirements for filing, processing,
8267	and paying claims that unreasonably burden the volunteer health practitioners.
8268	Section 176. Section 26B-4-812, which is renumbered from Section 26-49-701 is
8269	renumbered and amended to read:
8270	[26-49-701]. <u>26B-4-812.</u> Uniformity of application and construction.
8271	In applying and construing this [chapter] part, consideration shall be given to the need

to promote uniformity of the law with respect to its subject matter among states that enact it.

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Section 177. Repealer.

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8274
               This bill repeals:
8275
               Section 26-1-2, Definitions.
8276
               Section 26-1-7.5, Health advisory council.
8277
               Section 26-2-1, Short title.
               Section 26-2-2, Definitions.
8278
8279
               Section 26-4-1, Short title.
8280
               Section 26-5-2, Establishment of prevention programs by department.
8281
               Section 26-5-3, System for detecting and monitoring diseases established by
8282
        department.
8283
               Section 26-5-4, Programs of community and professional education established by
8284
        department.
8285
               Section 26-6-1. Short title.
8286
               Section 26-6-12, Rabies or other animal disease -- Investigation following order of
8287
        quarantine.
8288
               Section 26-6-13, Rabies or other animal disease -- Authority of peace officer to kill
8289
        or capture animals.
8290
               Section 26-6-14, Rabies or other animal disease -- Quarantine defined.
8291
               Section 26-6b-2, Definitions.
8292
               Section 26-8a-101, Title.
8293
               Section 26-8a-102, Definitions.
8294
               Section 26-8a-104, Committee advisory duties.
8295
               Section 26-8a-204, Disaster coordination plan.
8296
               Section 26-8a-205, Pediatric quality improvement program.
8297
               Section 26-8a-206, Personnel stress management program.
8298
               Section 26-8a-211, Report.
8299
               Section 26-8b-101, Title.
8300
               Section 26-8b-102, Definitions.
               Section 26-8b-601, Title.
8301
8302
               Section 26-8c-101, Title.
8303
               Section 26-8d-101, Title.
8304
               Section 26-9f-101, Title.
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8305
               Section 26-9f-102, Definitions.
8306
               Section 26-9f-104, Duties and responsibilities.
8307
               Section 26-10-1, Definitions.
8308
               Section 26-15-1, Definitions.
8309
               Section 26-15-5.1, Exemptions to food handler requirements.
8310
               Section 26-15-12, Rules to implement statutes on smoking.
8311
               Section 26-15a-101, Title.
               Section 26-15a-103, Duties.
8312
8313
               Section 26-15a-107. Duties.
8314
               Section 26-15b-101, Title.
8315
               Section 26-15b-102, Definitions.
8316
               Section 26-15b-103, Permitting -- Fees.
8317
               Section 26-15b-104, Permits.
8318
               Section 26-15c-101, Title.
8319
               Section 26-15c-102, Definitions.
8320
               Section 26-15c-103, Permitting -- Fees.
8321
               Section 26-15c-104, Safety and health inspections and permits.
8322
               Section 26-18-1. Short title.
               Section 26-18-2, Definitions.
8323
8324
               Section 26-18-402.5, Nonlapsing Medicaid funds.
               Section 26-18-501, Definitions.
8325
8326
               Section 26-18-601, Title.
8327
               Section 26-18-602, Definitions.
8328
               Section 26-18-701. Definitions.
8329
               Section 26-18-702, Division and Department of Workforce Services compliance
8330
        with adoption assistance interstate compact.
8331
               Section 26-18a-1, Definitions.
8332
               Section 26-18a-3, Purpose of committee.
8333
               Section 26-19-101, Title.
8334
               Section 26-20-1, Title.
8335
               Section 26-21-1, Title.
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8336	Section 26-21-4, Per diem and travel expenses of committee members.
8337	Section 26-21-5, Duties of committee.
8338	Section 26-21-100, Reserved.
8339	Section 26-21-203, Department authorized to grant, deny, or revoke clearance
8340	Department may limit direct patient access.
8341	Section 26-21-205, Department of Public Safety Retention of information
8342	Notification of Department of Health.
8343	Section 26-21-206, Covered providers and covered contractors required to apply
8344	for clearance of certain individuals.
8345	Section 26-21-207, Covered providers required to apply for clearance for certain
8346	individuals other than residents residing in residential settings Certain individuals
8347	other than residents prohibited from residing in residential settings without clearance.
8348	Section 26-21-208, Application for clearance by individuals.
8349	Section 26-21-210, No civil liability.
8350	Section 26-21-301, Title.
8351	Section 26-21-302, Definitions.
8352	Section 26-21-304, Monitoring device Facility admission, patient discharge, and
8353	posted notice.
8354	Section 26-21a-201, Short title.
8355	Section 26-21b-101, Title.
8356	Section 26-21b-102, Definitions.
8357	Section 26-21b-301, Investigation and enforcement.
8358	Section 26-21c-101, Title.
8359	Section 26-21c-102, Definitions.
8360	Section 26-21c-104, Presenting protocols upon inspection.
8361	Section 26-23a-1, Definitions.
8362	Section 26-23a-3, Penalties.
8363	Section 26-23b-101, Title.
8364	Section 26-25-2, Restrictions on use of data.
8365	Section 26-25-3, Information considered privileged communications.
8366	Section 26-25-4. Information held in confidence Protection of identities.

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8367
               Section 26-25-5, Violation of chapter a misdemeanor -- Civil liability.
8368
               Section 26-26-1, "Institution" defined.
8369
               Section 26-26-2, Authorization for institutions to obtain impounded animals.
8370
               Section 26-26-4, Institution to pay transportation expense -- Restrictions on use of
8371
        animals -- Fee.
8372
               Section 26-26-5, Records of animals required.
8373
               Section 26-26-6, Revocation of authorization.
8374
               Section 26-26-7, Adoption of rules by department -- Inspection and investigation of
8375
        institutions.
8376
               Section 26-28-101, Title.
8377
               Section 26-31-101, Title.
8378
               Section 26-31-102, Definitions.
8379
               Section 26-31-202, Blood donation by a minor.
8380
               Section 26-33a-101, Short title.
8381
               Section 26-33a-103, Committee membership -- Terms -- Chair -- Compensation.
8382
               Section 26-34-1, Short title.
8383
               Section 26-34-2, Definition of death -- Determination of death.
8384
               Section 26-35a-101, Title.
8385
               Section 26-36b-101, Title.
8386
               Section 26-36c-101, Title.
8387
               Section 26-36d-101, Title.
8388
               Section 26-37a-101, Title.
8389
               Section 26-38-1. Title.
8390
               Section 26-38-2. Definitions.
               Section 26-38-3.5, Smoking ban exemption for Native American ceremony.
8391
8392
               Section 26-38-6, Local ordinances.
               Section 26-38-7, Enforcement action by proprietors.
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8394
               Section 26-38-8, Penalties.
8395
               Section 26-38-9, Enforcement of chapter.
8396
               Section 26-39-101, Title.
8397
               Section 26-39-203, Duties of the Child Care Center Licensing Committee.
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8398
               Section 26-40-101, Title.
8399
               Section 26-41-101, Title.
8400
               Section 26-41-102, Definitions.
8401
               Section 26-43-101, Title.
8402
               Section 26-43-103, Disclosure of information.
8403
               Section 26-46-101, Definitions.
8404
               Section 26-46a-101, Title.
8405
               Section 26-47-101, Title.
8406
               Section 26-47-102, Prescription Drug Assistance Program.
8407
               Section 26-47-103, Department to award grants for assistance to persons with
8408
        bleeding disorders.
8409
               Section 26-49-101, Title.
8410
               Section 26-50-101, Title.
8411
               Section 26-50-102, Definitions.
8412
               Section 26-51-101, Title.
8413
               Section 26-51-202, Public education concerning methamphetamine contamination.
8414
               Section 26-53-101, Title.
8415
               Section 26-54-101, Title.
8416
               Section 26-55-101, Title.
               Section 26-55-102, Definitions.
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8418
               Section 26-57-101, Title.
8419
               Section 26-57-102, Definitions.
8420
               Section 26-57-104, Labeling of nicotine products containing nicotine.
8421
               Section 26-58-101. Title.
8422
               Section 26-60-101, Title.
8423
               Section 26-60-102, Definitions.
8424
               Section 26-60-104, Enforcement.
8425
               Section 26-60-105, Study by Public Utilities, Energy, and Technology Interim
8426
        Committee and Health Reform Task Force.
8427
               Section 26-61-101, Title.
8428
               Section 26-61-102, Definitions.
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8429
               Section 26-61-202, Duties.
8430
               Section 26-61a-101, Title.
8431
               Section 26-62-101, Title.
8432
               Section 26-64-101, Title.
8433
               Section 26-66-101, Title.
8434
               Section 26-66-102, Definitions.
8435
               Section 26-66-201, Early Childhood Utah Advisory Council.
8436
               Section 26-66-203, Compensation.
8437
               Section 26-67-101. Title.
8438
               Section 26-68-101, Title.
8439
               Section 26-69-101, Definitions.
8440
               Section 26-69-202, Council and executive director duties.
8441
               Section 26-69-203, Members serve without pay -- Reimbursement for expenses.
8442
               Section 26-69-401, Definitions.
8443
               Section 26-70-101, Definitions.
8444
               Section 26A-1-101, Short title.
8445
               Section 26B-1-201.1, Transition to single state agency -- Transition plan.
8446
               Section 26B-1a-101. Definitions.
8447
               Section 26B-1a-102, Office of American Indian-Alaska Native Health and Family
8448
        Services -- Creation -- Purpose.
8449
               Section 26B-1a-103, Director of the office -- Appointment -- Qualifications -- Staff.
8450
               Section 26B-1a-107, Liaison reporting.
8451
               Section 62A-1-104, Definitions.
8452
               Section 62A-1-123, Intergenerational poverty mitigation reporting.
8453
               Section 62A-1-201, Title.
8454
               Section 62A-2-101, Definitions.
8455
               Section 62A-3-101, Definitions.
8456
               Section 62A-4a-101.5, Juvenile services.
8457
               Section 62A-4a-210, Definitions.
8458
               Section 62A-5-206.8, Management of the Utah State Developmental Center
8459
        Sustainability Fund.
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8460
               Section 62A-5-401, Purpose.
8461
               Section 62A-5-403, Services for persons under 11 years of age.
8462
               Section 62A-5a-101, Policy statement.
8463
               Section 62A-5a-102, Definitions.
8464
               Section 62A-5a-104, Powers of council.
8465
               Section 62A-5a-105, Coordination of services for school-age children.
               Section 62A-5b-101, Title.
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               Section 62A-6-101, Definitions.
8468
               Section 62A-11-103, Definitions.
               Section 62A-11-301, Title.
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8470
               Section 62A-11-601, Title.
8471
               Section 62A-11-701, Title.
8472
               Section 62A-11-702, Definitions.
8473
               Section 62A-14-101, Title.
8474
               Section 62A-15-101, Title.
8475
               Section 62A-15-102, Definitions.
8476
               Section 62A-15-201, Title.
8477
               Section 62A-15-645, Retrospective effect of provisions.
               Section 62A-15-1001, Definitions.
8478
8479
               Section 62A-15-1100, Definitions.
8480
               Section 62A-15-1301, Definitions.
8481
               Section 62A-15-1303, Statewide mental health crisis line and statewide warm line
8482
        operational standards.
8483
               Section 62A-15-1401, Definitions.
8484
               Section 62A-15-1501, Definitions.
8485
               Section 62A-15-1601, Definitions.
8486
               Section 62A-15-1701, Definitions.
8487
               Section 62A-15-1801, Definitions.
8488
               Section 62A-16-101, Title.
8489
               Section 62A-17-101, Title.
8490
               Section 62A-18-101, Title.
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8491	Section 62A-18-102, Definitions.
8492	Section 62A-18-103, Office of Quality and Design Creation.
8493	Section 62A-18-104, Director of the office Appointment Qualifications.
8494	Section 178. Revisor instructions.
8495	The Legislature intends that the Office of Legislative Research and General Counsel, in
8496	preparing the Utah Code database for publication:
8497	(1) not enroll this bill if any of the following bills do not pass:
8498	(a) S.B. 38, Health and Human Services Recodification Administration, Licensing, and
8499	Recovery Services;
8500	(b) S.B. 39, Health and Human Services Recodification Prevention, Supports,
8501	Substance Use and Mental Health; or
8502	(c) S.B. 41, Health and Human Services Recodification - Health Care Delivery and
8503	Repeals; and
8504	(2) in any new language added to the Utah Code by legislation passed during the 2023
8505	General Session, replace any references to Titles 26 or 62A with the renumbered reference as it
8506	is renumbered in this bill.