



26	ENACTS:
27	62A-15-1201, Utah Code Annotated 1953
28	62A-15-1202, Utah Code Annotated 1953
29	62A-15-1203, Utah Code Annotated 1953
30	62A-15-1204, Utah Code Annotated 1953
31	62A-15-1205, Utah Code Annotated 1953
32	62A-15-1206, Utah Code Annotated 1953
33	62A-15-1207, Utah Code Annotated 1953
34	62A-15-1208 , Utah Code Annotated 1953
3536	Be it enacted by the Legislature of the state of Utah:
37	Section 1. Section 62A-15-602 is amended to read:
38	62A-15-602. Definitions.
39	As used in this part, Part 7, Commitment of Persons Under Age 18 to Division of
40	Substance Abuse and Mental Health, Part 8, Interstate Compact on Mental Health, Part 9, Utah
41	Forensic Mental Health Facility, [and] Part 10, Declaration for Mental Health Treatment, and
42	Part 12, Essential Treatment and Intervention Act:
43	(1) "Adult" means a person 18 years of age or older.
44	(2) "Approved treatment facility or program" means the same as that term is defined in
45	Subsection 62A-15-103(2)(a)(v).
46	[(2)] (3) "Commitment to the custody of a local mental health authority" means that an
47	adult is committed to the custody of the local mental health authority that governs the mental
48	health catchment area in which the proposed patient resides or is found.
49	[(3)] (4) "Designated examiner" means a licensed physician familiar with severe
50	mental illness, preferably a psychiatrist, designated by the division as specially qualified by
51	training or experience in the diagnosis of mental or related illness or another licensed mental
52	health professional designated by the division as specially qualified by training and at least five
53	years' continual experience in the treatment of mental or related illness. At least one
54	designated examiner in any case shall be a licensed physician. No person who is the applicant,
55	or who signs the certification, under Section 62A-15-631 may be a designated examiner in the
56	same case.

57	[4] [5] "Designee" means a physician who has responsibility for medical functions
58	including admission and discharge, an employee of a local mental health authority, or an
59	employee of an agency that has contracted with a local mental health authority to provide
60	mental health services under Section 17-43-304.
61	(6) "Essential treatment" means court-ordered treatment at a local substance abuse
62	authority or approved treatment facility or program for the treatment of an adult's substance use
63	disorder.
64	[(5)] (7) "Harmful sexual conduct" means any of the following conduct upon an
65	individual without the individual's consent, or upon an individual who cannot legally consent
66	to the conduct including under the circumstances described in Subsections 76-5-406(1) through
67	(12):
68	(a) sexual intercourse;
69	(b) penetration, however slight, of the genital or anal opening of the individual;
70	(c) any sexual act involving the genitals or anus of the actor or the individual and the
71	mouth or anus of either individual, regardless of the gender of either participant; or
72	(d) any sexual act causing substantial emotional injury or bodily pain.
73	[(6)] (8) "Institution" means a hospital, or a health facility licensed under the
74	provisions of Section 26-21-9.
75	[(7)] <u>(9)</u> "Licensed physician" means an individual licensed under the laws of this state
76	to practice medicine, or a medical officer of the United States government while in this state in
77	the performance of official duties.
78	[(8)] (10) "Local comprehensive community mental health center" means an agency or
79	organization that provides treatment and services to residents of a designated geographic area,
80	operated by or under contract with a local mental health authority, in compliance with state
81	standards for local comprehensive community mental health centers.
82	(11) "Local substance abuse authority" means the same as that term is defined in
83	Section 62A-15-102 and described in Section 17-43-201.
84	[(9)] (12) "Mental health facility" means the Utah State Hospital or other facility that
85	provides mental health services under contract with the division, a local mental health
86	authority, or organization that contracts with a local mental health authority.
87	[(10)] (13) "Mental health officer" means an individual who is designated by a local

88	mental health authority as qualified by training and experience in the recognition and
89	identification of mental illness, to interact with and transport persons to any mental health
90	facility.
91	[(11)] (14) "Mental illness" means a psychiatric disorder as defined by the current
92	edition of the Diagnostic and Statistical Manual of Mental Disorders published by the
93	American Psychiatric Association which substantially impairs a person's mental, emotional,
94	behavioral, or related functioning.
95	[(12)] (15) "Patient" means an individual who is:
96	(a) under commitment to the custody or to the treatment services of a local mental
97	health authority[-]; or
98	(b) undergoing essential treatment and intervention.
99	[(13)] (16) "Serious bodily injury" means bodily injury which involves a substantial
100	risk of death, unconsciousness, extreme physical pain, protracted and obvious disfigurement, or
101	protracted loss or impairment of the function of a bodily member, organ, or mental faculty.
102	[(14)] (17) "Substantial danger" means the person, by his or her behavior, due to
103	mental illness:
104	(a) is at serious risk to:
105	(i) commit suicide;
106	(ii) inflict serious bodily injury on himself or herself; or
107	(iii) because of his or her actions or inaction, suffer serious bodily injury because he or
108	she is incapable of providing the basic necessities of life, such as food, clothing, and shelter; or
109	(b) is at serious risk to cause or attempt to cause serious bodily injury or engage in
110	harmful sexual conduct.
111	[(15)] (18) "Treatment" means psychotherapy, medication, including the administration
112	of psychotropic medication, and other medical treatments that are generally accepted medical
113	and psychosocial interventions for the purpose of restoring the patient to an optimal level of
114	functioning in the least restrictive environment.
115	Section 2. Section 62A-15-641 is amended to read:
116	62A-15-641. Restrictions and limitations Civil rights and privileges.
117	(1) Subject to the general rules of the division, and except to the extent that the director
118	or his designee determines that it is necessary for the welfare of the patient to impose

restrictions, every patient is entitled to:

- (a) communicate, by sealed mail or otherwise, with persons, including official agencies, inside or outside the facility;
 - (b) receive visitors; and
- (c) exercise all civil rights, including the right to dispose of property, execute instruments, make purchases, enter contractual relationships, and vote, unless the patient has been adjudicated to be incompetent and has not been restored to legal capacity.
- (2) When any right of a patient is limited or denied, the nature, extent, and reason for that limitation or denial shall be entered in the patient's treatment record. Any continuing denial or limitation shall be reviewed every 30 days and shall also be entered in that treatment record. Notice of that continuing denial in excess of 30 days shall be sent to the division [or to], the appropriate local mental health authority[-], or the appropriate local substance abuse authority, whichever is most applicable to the patient.
- (3) Notwithstanding any limitations authorized under this section on the right of communication, each patient is entitled to communicate by sealed mail with the appropriate local mental health authority or the appropriate local substance abuse authority, the division, [his] the patient's attorney, and the court, if any, that ordered [his] the patient's commitment or essential treatment. In no case may the patient be denied a visit with the legal counsel or clergy of the patient's choice.
- (4) Local mental health authorities, local substance abuse authorities, and approved treatment facilities or programs shall provide reasonable means and arrangements for informing involuntary patients of their right to release as provided in this chapter, and for assisting them in making and presenting requests for release.
- (5) Mental health facilities, <u>local substance abuse authorities</u>, <u>and approved treatment</u> <u>facilities or programs</u> shall post a statement, [<u>promulgated</u>] <u>created</u> by the division, describing <u>a</u> patient's rights under Utah law.
- (6) Notwithstanding Section 53B-17-303, [any person] an individual committed under this chapter has the right to determine the final disposition of [his] that individual's body after death.
 - Section 3. Section **62A-15-1201** is enacted to read:

Part 12. Essential Treatment and Intervention Act

150	62A-15-1201. Statement of legislative intent.
151	To address the serious public health crisis of substance use disorder related deaths and
152	life-threatening opioid addiction, and to allow and enable relatives and other caring individuals
153	to seek essential treatment and intervention, as may be necessary, on behalf of a sufferer of a
154	substance use disorder, the Legislature enacts the Essential Treatment and Intervention Act.
155	Section 4. Section 62A-15-1202 is enacted to read:
156	62A-15-1202. Definitions.
157	As used in this part:
158	(1) "Qualified health professional" means:
159	(a) a licensed physician;
160	(b) a psychologist:
161	(i) licensed under Title 58, Chapter 61, Psychologist Licensing Act; or
162	(ii) exempt from licensure under Section 58-1-307; or
163	(c) a mental health therapist, as defined in Section 58-60-102.
164	(2) "Relative" means an adult who is a spouse, parent, stepparent, grandparent, child,
165	or sibling of an individual.
166	(3) "Substance use disorder" means:
167	(a) a problematic pattern of using alcohol, opioids, or a psycho-active substance,
168	including a controlled substance, that results in impairment in daily life or noticable distress; or
169	(b) the same as that term is defined in the current edition of the Diagnostic and
170	Statistical Manual of Mental Disorders published by the American Psychiatric Association.
171	Section 5. Section 62A-15-1203 is enacted to read:
172	<u>62A-15-1203.</u> Petition for essential treatment Contents Guarantee for costs.
173	(1) An individual seeking essential treatment and intervention for a sufferer of a
174	substance use disorder may file a petition with the district court of the county in which the
175	sufferer of the substance use disorder resides or is found.
176	(2) A relative of the respondent, a guardian of the respondent, or a responsible
177	individual who has a close, personal relationship with the respondent may file the petition.
178	(3) The petition shall include:
179	(a) the respondent's:
180	(i) legal name;

181	(ii) date of birth, if known;
182	(iii) social security number, if known; and
183	(iv) residence and current location, if known;
184	(b) the petitioner's relationship to the respondent;
185	(c) the name and residence of the respondent's legal guardian, if any and if known;
186	(d) a statement that the respondent:
187	(i) is suffering from a substance use disorder; and
188	(ii) if not treated for the substance use disorder:
189	(A) presents an imminent danger or threat of danger to self or others; or
190	(B) presents a substantial likelihood of posing a threat of danger to self or others;
191	(e) the factual basis for the statement described in Subsection (4)(d); and
192	(f) at least one specified local substance abuse authority or approved treatment facility
193	or program where the respondent may receive essential treatment.
194	(4) Any petition filed under this section:
195	(a) may be accompanied by proof of health insurance to provide for the respondent's
196	essential treatment; and
197	(b) shall be accompanied by a financial guarantee, signed by the petitioner or another
198	individual described in Subsection (3), obligating the petitioner or other individual to pay all
199	treatment costs beyond those covered by the respondent's health insurance for court-ordered
200	essential treatment for the respondent.
201	Section 6. Section 62A-15-1204 is enacted to read:
202	62A-15-1204. Criteria for essential treatment and intervention.
203	A district court shall order an individual to undergo essential treatment for a substance
204	use disorder when the district court determines by clear and convincing evidence that the
205	individual:
206	(1) suffers from a substance use disorder;
207	(2) can reasonably benefit from the essential treatment;
208	(3) is unlikely to substantially benefit from an alternative voluntary treatment; and
209	(4) presents a substantial threat of danger to self or others as a result of the individual's
210	substance use disorder.
211	Section 7. Section 62A-15-1205 is enacted to read:

213 (1) A district court shall review the assertions contained in the verified petition 214 described in Section 62A-15-1203, 215 (2) If the court determines that the assertions, if true, are sufficient to order the 216 respondent to undergo essential treatment, the court shall: 217 (a) set an expedited date for a time-sensitive hearing to determine whether the court 218 should order the respondent to undergo essential treatment for a substance use disorder; 219 (b) provide notice of: 220 (i) the contents of the petition, including all assertions made; 221 (ii) a copy of any order for detention or examination; 222 (iii) the date of the hearing; 223 (iv) the purpose of the hearing; and 224 (v) the right of the respondent to be represented by legal counsel; 225 (c) provide notice to: 226 (i) the respondent; 227 (ii) the respondent; 228 (iii) the petitioner; and 229 (d) order the respondent to be examined before the hearing date by two qualified health professionals; 230 (i) one of whom, if reasonably available, may be selected by the respondent; and 231 (ii) one of whom may be from the local substance abuse authority or a designee of the local substance abuse authority. 230 (a) The qualified health professionals shall examine the respondent to determine; 231 (a) whether the respondent meets each of the criteria described in Section 232 (a) whether the respondent meets each of the criteria described in Section 233 (b) the severity of the respondent's substance use disorder, if any; 234 (c) what forms of treatment would substantially benefit the respondent, if the examiner determines that the respondent has a substance use disorder; and 233 (d) the appropriate duration for essential treatment, if essential treatment is recommended. 244 (d) The qualified health professionals shall certify their findings to the court within 24	212	62A-15-1205. Proceeding for essential treatment Duties of court Disposition.
215 (2) If the court determines that the assertions, if true, are sufficient to order the 216 respondent to undergo essential treatment, the court shall: 217 (a) set an expedited date for a time-sensitive hearing to determine whether the court 218 should order the respondent to undergo essential treatment for a substance use disorder; 219 (b) provide notice of: 220 (i) the contents of the petition, including all assertions made; 221 (ii) a copy of any order for detention or examination; 222 (iii) the date of the hearing; 223 (iv) the purpose of the hearing; 224 (v) the right of the respondent to be represented by legal counsel; 225 (c) provide notice to; 226 (i) the respondent; 227 (ii) the respondent's guardian, if any; and 228 (iii) the petitioner; and 229 (d) order the respondent to be examined before the hearing date by two qualified health 230 professionals: 231 (i) one of whom, if reasonably available, may be selected by the respondent; and 232 (ii) both of whom may be from the local substance abuse authority or a designee of the 233 local substance abuse authority. 234 (3) The qualified health professionals shall examine the respondent to determine; 235 (a) whether the respondent meets each of the criteria described in Section 236 (2A-15-1204; 237 (b) the severity of the respondent's substance use disorder, if any; 238 (c) what forms of treatment would substantially benefit the respondent, if the examiner 239 determines that the respondent has a substance use disorder; and 240 (d) the appropriate duration for essential treatment, if essential treatment is 241 recommended.	213	(1) A district court shall review the assertions contained in the verified petition
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233 local substance abuse authority. 234 (3) The qualified health professionals shall examine the respondent to determine: 235 (a) whether the respondent meets each of the criteria described in Section 236 62A-15-1204; 237 (b) the severity of the respondent's substance use disorder, if any; 238 (c) what forms of treatment would substantially benefit the respondent, if the examiner 239 determines that the respondent has a substance use disorder; and 240 (d) the appropriate duration for essential treatment, if essential treatment is 241 recommended.	231	(i) one of whom, if reasonably available, may be selected by the respondent; and
(3) The qualified health professionals shall examine the respondent to determine: (a) whether the respondent meets each of the criteria described in Section (b) the severity of the respondent's substance use disorder, if any; (c) what forms of treatment would substantially benefit the respondent, if the examiner determines that the respondent has a substance use disorder; and (d) the appropriate duration for essential treatment, if essential treatment is recommended.	232	(ii) both of whom may be from the local substance abuse authority or a designee of the
 (a) whether the respondent meets each of the criteria described in Section 62A-15-1204; (b) the severity of the respondent's substance use disorder, if any; (c) what forms of treatment would substantially benefit the respondent, if the examiner determines that the respondent has a substance use disorder; and (d) the appropriate duration for essential treatment, if essential treatment is recommended. 	233	local substance abuse authority.
236 62A-15-1204; 237 (b) the severity of the respondent's substance use disorder, if any; 238 (c) what forms of treatment would substantially benefit the respondent, if the examiner 239 determines that the respondent has a substance use disorder; and 240 (d) the appropriate duration for essential treatment, if essential treatment is 241 recommended.	234	(3) The qualified health professionals shall examine the respondent to determine:
237 (b) the severity of the respondent's substance use disorder, if any; 238 (c) what forms of treatment would substantially benefit the respondent, if the examiner 239 determines that the respondent has a substance use disorder; and 240 (d) the appropriate duration for essential treatment, if essential treatment is 241 recommended.	235	(a) whether the respondent meets each of the criteria described in Section
238 (c) what forms of treatment would substantially benefit the respondent, if the examiner 239 determines that the respondent has a substance use disorder; and 240 (d) the appropriate duration for essential treatment, if essential treatment is 241 recommended.	236	<u>62A-15-1204</u> ;
239 <u>determines that the respondent has a substance use disorder; and</u> 240 <u>(d) the appropriate duration for essential treatment, if essential treatment is recommended.</u>	237	(b) the severity of the respondent's substance use disorder, if any;
240 (d) the appropriate duration for essential treatment, if essential treatment is recommended.	238	(c) what forms of treatment would substantially benefit the respondent, if the examiner
241 <u>recommended.</u>	239	determines that the respondent has a substance use disorder; and
	240	(d) the appropriate duration for essential treatment, if essential treatment is
242 (4) The qualified health professionals shall certify their findings to the court within 24	241	recommended.
	242	(4) The qualified health professionals shall certify their findings to the court within 24

243	hours after the examinations.
244	(5) The court may, based upon the findings of the qualified health professionals,
245	terminate the proceedings and dismiss the petition.
246	(6) The parties may, at any time, make a binding stipulation to an essential treatment
247	plan and submit that plan to the court for court order.
248	(7) At the hearing, the petitioner and the respondent may testify and may
249	cross-examine witnesses.
250	(8) If, upon completion of the hearing, the court finds that the criteria in Section
251	62A-15-1204 are met, the court shall order essential treatment for a period that:
252	(a) does not exceed 360 days; and
253	(b) (i) is recommended by a qualified health professional; or
254	(ii) is otherwise agreed to at the hearing.
255	(9) The court shall designate the facility for the essential treatment, as:
256	(a) described in the petition;
257	(b) recommended by a qualified health professional; or
258	(c) agreed to at the hearing.
259	(10) The court shall issue a written order that includes the court's findings and the
260	reasons for the court's determination.
261	(11) Failure of a respondent to undergo treatment ordered under this section may place
262	the respondent in contempt of court.
263	Section 8. Section 62A-15-1206 is enacted to read:
264	62A-15-1206. Seventy-two-hour emergency treatment.
265	(1) A court may order a respondent to be hospitalized for up to 72 hours if:
266	(a) a qualified health professional has examined the respondent and certified that the
267	respondent meets the criteria described in Section 62A-15-1204; and
268	(b) the court finds by clear and convincing evidence that the respondent presents an
269	imminent threat of danger to self or others as a result of a substance use disorder.
270	(2) An individual who is admitted to a hospital under this section shall be released
271	from the hospital within 72 hours after admittance.
272	(3) No respondent ordered hospitalized under this section shall be held in jail pending
273	transportation to the hospital or evaluation unless:

274	(a) the court has previously found the respondent to be in contempt of court for:
275	(i) failure to undergo court-ordered essential treatment; or
276	(ii) failure to appear at the evaluation ordered under Section 62A-15-1205; or
277	(b) the individual is being detained for a lawful reason unrelated to the petition for
278	essential treatment and intervention.
279	Section 9. Section 62A-15-1207 is enacted to read:
280	62A-15-1207. Confidentiality.
281	(1) The purpose of Title 62A, Chapter 15, Part 12, Essential Treatment and
282	Intervention Act, is to encourage essential treatment to save lives, preserve families, and reduce
283	substance use disorder, including opioid addiction.
284	(2) An essential treatment petition and any other document filed in connection with the
285	petition for essential treatment is confidential and protected.
286	(3) A hearing on an essential treatment petition is closed to the public, and only the
287	following individuals and their legal counsel may be admitted to the hearing:
288	(a) parties to the petition;
289	(b) the qualified health professionals who completed the court-ordered examination
290	under Subsection 62A-15-1205(2)(d);
291	(c) individuals who have been asked to give testimony; and
292	(d) individuals to whom notice of the hearing is required to be given under Subsection
293	62A-15-1205(2)(c).
294	(4) Testimony, medical evaluations, the petition, and other documents directly related
295	to the adjudication of the petition and presented to the court in the interest of the respondent
296	may not be construed or applied as an admission of guilt to a criminal offense.
297	(5) A court may, if applicable, enforce a previously existing warrant for a respondent or
298	a warrant for a charge that is unrelated to the essential treatment petition filed under this part.
299	Section 10. Section 62A-15-1208 is enacted to read:
300	62A-15-1208. Essential treatment for substance use disorder Rights of patient.
301	All applicable rights guaranteed to a patient by Sections 62A-15-641 and 62A-15-642
302	shall be guaranteed to an individual who is ordered to undergo essential treatment for a
303	substance use disorder.