1	BEHAVIORAL HEALTH SERVICES AMENDMENTS
2	2022 GENERAL SESSION
3	STATE OF UTAH
4	Chief Sponsor: Michael S. Kennedy
5	House Sponsor: Stewart E. Barlow
6 7	LONG TITLE
8	General Description:
9	This bill addresses behavioral health treatment and services.
0	Highlighted Provisions:
1	This bill:
2	<ul><li>defines terms;</li></ul>
3	requires the Department of Health to:
4	• award a grant to a local mental health authority to implement or expand an
5	integrated behavioral health program;
6	• develop a proposal to allow the state Medicaid program to reimburse a local
7	mental health authority for physical health services in an integrated behavioral
8	health care setting; and
9	• apply for a waiver under the state Medicaid plan to implement the proposal;
0	<ul> <li>allows a certain medication-assistance treatment drug to be recycled under the</li> </ul>
1	Charitable Prescription Drug Recycling Act, subject to federal law;
2	<ul><li>creates a sunset date;</li></ul>
3	<ul><li>creates reporting requirements; and</li></ul>
24	<ul><li>makes technical and conforming changes.</li></ul>
25	Money Appropriated in this Bill:
6	This bill appropriates in fiscal year 2023:
7	► to Department of Health and Human Services Integrated Health Care Services
8	Medicaid Behavioral Health Services, as an ongoing appropriation:
29	• from General Fund, \$116,000; and

30	to Department of Health and Human Services Integrated Health Care Services
31	Medicaid Behavioral Health Services, as a one-time appropriation:
32	• from General Fund, One-time, \$87,000.
33	Other Special Clauses:
34	None
35	<b>Utah Code Sections Affected:</b>
36	AMENDS:
37	58-17b-902, as last amended by Laws of Utah 2021, Chapter 397
38	58-17b-905, as last amended by Laws of Utah 2021, Chapter 397
39	63I-1-226, as last amended by Laws of Utah 2021, Chapters 13, 50, 64, 163, 182, 234,
40	and 417
41	ENACTS:
42	26-1-43, Utah Code Annotated 1953
43	<b>26-18-427</b> , Utah Code Annotated 1953
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<ul><li>44</li><li>45</li></ul>	Be it enacted by the Legislature of the state of Utah:
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45 46 47 48 49 50 51 52 53	Section 1. Section 26-1-43 is enacted to read:  26-1-43. Integrated behavioral health care grant program.  (1) As used in this section:  (a) "Integrated behavioral health care services" means coordinated physical and behavioral health care services for one patient.  (b) "Local mental health authority" means a local mental health authority described in Section 17-43-301.  (c) "Project" means a project described in Subsection (2).
45 46 47 48 49 50 51 52 53 54	Section 1. Section 26-1-43 is enacted to read:  26-1-43. Integrated behavioral health care grant program.  (1) As used in this section:  (a) "Integrated behavioral health care services" means coordinated physical and behavioral health care services for one patient.  (b) "Local mental health authority" means a local mental health authority described in Section 17-43-301.  (c) "Project" means a project described in Subsection (2).  (2) Before July 1 of each year, the department shall issue a request for proposals in

58	(3) To be considered for a grant award under Subsection (2), a local mental health
59	authority shall submit an application to the department that:
60	(a) explains the benefits of integrated behavioral health care services to a patient who is
51	receiving mental health or substance use disorder treatment;
52	(b) describes the local mental health authority's operational plan for delivery of
63	integrated behavioral health care services under the proposed project and any data or
54	evidence-based practices supporting the likely success of the operational plan;
65	(c) includes:
66	(i) the number of patients to be served by the local mental health authority's proposed
57	project; and
58	(ii) the cost of the local mental health authority's proposed project; and
59	(d) provides details regarding:
70	(i) any plan to use funding sources in addition to the grant award under this section for
71	the local mental health authority's proposed project;
72	(ii) any existing or planned contracts or partnerships between the local mental health
73	authority and other individuals or entities to develop or implement the local mental health
74	authority's proposed project; and
75	(iii) the sustainability and reliability of the local mental health authority's proposed
76	project.
77	(4) In evaluating a local mental health authority's application under Subsection (3) to
78	determine the grant award under Subsection (2), the department shall consider:
79	(a) how the local mental health authority's proposed project will ensure effective
80	provision of integrated behavioral health care services;
31	(b) the cost of the local mental health authority's proposed project;
32	(c) the extent to which any existing or planned contracts or partnerships or additional
33	funding sources described in the local mental health authority's application are likely to benefit
34	the proposed project; and
35	(d) the sustainability and reliability of the local mental health authority's proposed

86	project.
87	(5) Before July 1, 2025, the department shall report to the Health and Human Services
88	Interim Committee regarding:
89	(a) any knowledge gained or obstacles encountered in providing integrated behavioral
90	health care services under each project;
91	(b) data gathered in relation to each project; and
92	(c) recommendations for expanding a project statewide.
93	Section 2. Section 26-18-427 is enacted to read:
94	26-18-427. Medicaid waiver for increased integrated health care reimbursement.
95	(1) As used in this section:
96	(a) "Integrated health care setting" means a health care or behavioral health care setting
97	that provides integrated physical and behavioral health care services.
98	(b) "Local mental health authority" means a local mental health authority described in
99	Section 17-43-301.
100	(2) The department shall develop a proposal to allow the state Medicaid program to
101	reimburse a local mental health authority for covered physical health care services provided in
102	an integrated health care setting to Medicaid eligible individuals.
103	(3) Before December 31, 2022, the department shall apply for a Medicaid waiver or a
104	state plan amendment with CMS to implement the proposal described in Subsection (2).
105	(4) If the waiver or state plan amendment described in Subsection (3) is approved, the
106	department shall:
107	(a) implement the proposal described in Subsection (2); and
108	(b) while the waiver or state plan amendment is in effect, submit a report to the Health
109	and Human Services Interim Committee each year before November 30 detailing:
110	(i) the number of patients served under the waiver or state plan amendment;
111	(ii) the cost of the waiver or state plan amendment; and
112	(iii) any benefits of the waiver or state plan amendment.
113	Section 3. Section <b>58-17b-902</b> is amended to read:

114	58-17b-902. Definitions.
115	As used in this part:
116	(1) "Assisted living facility" means the same as that term is defined in Section 26-21-2.
117	(2) "Cancer drug" means a drug that controls or kills neoplastic cells and includes a
118	drug used in chemotherapy to destroy cancer cells.
119	(3) "Charitable clinic" means a charitable nonprofit corporation that:
120	(a) holds a valid exemption from federal income taxation issued under Section 501(a),
121	Internal Revenue Code;
122	(b) is exempt from federal income taxation under Section 501(c)(3), Internal Revenue
123	Code;
124	(c) provides, on an outpatient basis, for a period of less than 24 consecutive hours, to
125	an individual not residing or confined at a facility owned or operated by the charitable
126	nonprofit corporation:
127	(i) advice;
128	(ii) counseling;
129	(iii) diagnosis;
130	(iv) treatment;
131	(v) surgery; or
132	(vi) care or services relating to the preservation or maintenance of health; and
133	(d) has a licensed outpatient pharmacy.
134	(4) "Charitable pharmacy" means an eligible pharmacy that is operated by a charitable
135	clinic.
136	(5) "County health department" means the same as that term is defined in Section
137	26A-1-102.
138	(6) "Donated prescription drug" means a prescription drug that an eligible donor or
139	individual donates to an eligible pharmacy under the program.
140	(7) "Eligible donor" means a donor that donates a prescription drug from within the

state and is:

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142	(a) a nursing care facility;
143	(b) an assisted living facility;
144	(c) a licensed intermediate care facility for people with an intellectual disability;
145	(d) a manufacturer;
146	(e) a pharmaceutical wholesale distributor;
147	(f) an eligible pharmacy; or
148	(g) a physician's office.
149	(8) "Eligible pharmacy" means a pharmacy that:
150	(a) is registered by the division as eligible to participate in the program; and
151	(b) (i) is licensed in the state as a Class A retail pharmacy; or
152	(ii) is operated by:
153	(A) a county;
154	(B) a county health department;
155	(C) a pharmacy under contract with a county health department;
156	(D) the Department of Health, created in Section 26-1-4;
157	(E) the Division of Substance Abuse and Mental Health, created in Section
158	62A-15-103; or
159	(F) a charitable clinic.
160	(9) (a) "Eligible prescription drug" means a prescription drug, described in Section
161	58-17b-904, that is not:
162	[(a)] (i) except as provided in Subsection (9)(b), a controlled substance; or
163	[(b)] (ii) a drug that can only be dispensed to a patient registered with the drug's
164	manufacturer in accordance with federal Food and Drug Administration requirements.
165	(b) "Eligible prescription drug" includes a medication-assisted treatment drug that may
166	be accepted, transferred, and dispensed under the program in accordance with federal law.
167	(10) "Licensed intermediate care facility for people with an intellectual disability"
168	means the same as that term is defined in Section 58-17b-503.
169	(11) "Medically indigent individual" means an individual who:

170	(a) (i) does not have health insurance; and
171	(ii) lacks reasonable means to purchase prescribed medications; or
172	(b) (i) has health insurance; and
173	(ii) lacks reasonable means to pay the insured's portion of the cost of the prescribed
174	medications.
175	(12) "Medication-assisted treatment drug" means buprenorphine prescribed to treat
176	substance use withdrawal symptoms or an opiate use disorder.
177	[(12)] (13) "Nursing care facility" means the same as that term is defined in Section
178	26-18-501.
179	$[\frac{(13)}{(14)}]$ "Physician's office" means a fixed medical facility that:
180	(a) is staffed by a physician, physician's assistant, nurse practitioner, or registered
181	nurse, licensed under Title 58, Occupations and Professions; and
182	(b) treats an individual who presents at, or is transported to, the facility.
183	[(14)] (15) "Program" means the Charitable Prescription Drug Recycling Program
184	created in Section 58-17b-903.
185	$[\frac{(15)}{(16)}]$ "Unit pack" means the same as that term is defined in Section 58-17b-503.
186	$[\frac{(16)}{(17)}]$ "Unlawful conduct" means the same as that term is defined in Sections
187	58-1-501 and 58-17b-501.
188	$[\frac{(17)}{(18)}]$ "Unprofessional conduct" means the same as that term is defined in
189	Sections 58-1-501 and 58-17b-502.
190	Section 4. Section <b>58-17b-905</b> is amended to read:
191	58-17b-905. Participation in program Requirements Fees.
192	(1) An eligible donor, an individual, or an eligible pharmacy may participate in the
193	program.
194	(2) An eligible pharmacy:
195	(a) shall comply with all applicable federal and state laws related to the storage,
196	disposal, and distribution of a prescription drug;
197	(b) shall comply with all applicable federal and state laws related to the acceptance and

- transfer of a prescription drug, including 21 U.S.C. Chapter 9, Subchapter V, Part H,
- 199 Pharmaceutical Distribution Supply Chain;
- 200 (c) shall, before accepting or dispensing a prescription drug under the program, inspect 201 each prescription drug to determine whether the prescription drug is an eligible prescription 202 drug;
- 203 (d) may dispense an eligible prescription drug to a medically indigent individual who:
- 204 (i) is located in the state when the drug is dispensed; and
- 205 (ii) has a prescription issued by a practitioner;
- 206 (e) may charge a handling fee, adopted by the division under Section 63J-1-504; and
- 207 (f) may not accept, transfer, or dispense a prescription drug in violation of the federal
- Food, Drug, and Cosmetic Act, 21 U.S.C. Sec. 301 et seq.
- Section 5. Section **63I-1-226** is amended to read:
- 210 **63I-1-226.** Repeal dates, Title 26.
- 211 (1) Subsection 26-1-7(1)(f), related to the Residential Child Care Licensing Advisory
- 212 Committee, is repealed July 1, 2024.
- 213 (2) Subsection 26-1-7(1)(h), related to the Primary Care Grant Committee, is repealed
- 214 July 1, 2025.
- 215 (3) Section 26-1-7.5, which creates the Utah Health Advisory Council, is repealed July
- 216 1, 2025.
- 217 (4) Section 26-1-40 is repealed July 1, 2022.
- 218 (5) Section 26-1-41 is repealed July 1, 2026.
- 219 (6) Section 26-7-10 is repealed July 1, 2025.
- 220 (7) Subsection 26-7-11(5), regarding reports to the Legislature, is repealed July 1,
- 221 2028.
- 222 (8) Section 26-7-14 is repealed December 31, 2027.
- 223 (9) Title 26, Chapter 9f, Utah Digital Health Service Commission Act, is repealed July
- 224 1, 2025.
- 225 (10) Subsection 26-10-6(5), which creates the Newborn Hearing Screening Committee,

- 226 is repealed July 1, 2026.
- 227 (11) Section 26-10b-106, which creates the Primary Care Grant Committee, is repealed
- 228 July 1, 2025.
- 229 (12) Subsection 26-15c-104(3), relating to a limitation on the number of
- 230 microenterprise home kitchen permits that may be issued, is repealed on July 1, 2022.
- 231 (13) Subsection 26-18-2.6(9), which addresses reimbursement for dental hygienists, is
- 232 repealed July 1, 2028.
- 233 (14) Section 26-18-27 is repealed July 1, 2025.
- 234 (15) Section 26-1-43 is repealed December 31, 2025.
- [(15)] (16) Title 26, Chapter 18, Part 2, Drug Utilization Review Board, is repealed
- 236 July 1, 2027.
- [(16)] (17) Subsection 26-18-418(2), the language that states "and the Behavioral
- Health Crisis Response Commission created in Section 63C-18-202" is repealed July 1, 2023.
- 239 [(17)] (18) Section 26-33a-117 is repealed on December 31, 2023.
- [(18)] (19) Title 26, Chapter 33a, Utah Health Data Authority Act, is repealed July 1,
- 241 2024.
- [(19)] (20) Title 26, Chapter 36b, Inpatient Hospital Assessment Act, is repealed July
- 243 1, 2024.
- [(20)] (21) Title 26, Chapter 36c, Medicaid Expansion Hospital Assessment Act, is
- 245 repealed July 1, 2024.
- [(21)] (22) Title 26, Chapter 36d, Hospital Provider Assessment Act, is repealed July
- 247 1, 2024.
- [(22)] (23) Section 26-39-201, which creates the Residential Child Care Licensing
- Advisory Committee, is repealed July 1, 2024.
- [(23)] (24) Section 26-40-104, which creates the Utah Children's Health Insurance
- 251 Program Advisory Council, is repealed July 1, 2025.
- [(24)] (25) Section 26-50-202, which creates the Traumatic Brain Injury Advisory
- 253 Committee, is repealed July 1, 2025.

254 [(25)] (26) Title 26, Chapter 54, Spinal Cord and Brain Injury Rehabilitation Fund and 255 Pediatric Neuro-Rehabilitation Fund, is repealed January 1, 2025. 256 [(26)] (27) Title 26, Chapter 63, Nurse Home Visiting Pay-for-Success Program, is 257 repealed July 1, 2026. 258 [<del>(27)</del>] (28) Title 26, Chapter 66, Early Childhood Utah Advisory Council, is repealed 259 July 1, 2026. 260 [(28)] (29) Title 26, Chapter 68, COVID-19 Vaccine Restrictions Act, is repealed July 261 1, 2024. 262 Section 6. Appropriation. 263 The following sums of money are appropriated for the fiscal year beginning July 1, 264 2022, and ending June 30, 2023. These are additions to amounts previously appropriated for 265 fiscal year 2023. Under the terms and conditions of Title 63J, Chapter 1, Budgetary Procedures 266 Act, the Legislature appropriates the following sums of money from the funds or accounts indicated for the use and support of the government of the state of Utah. 267 268 ITEM 1 269 To Department of Health and Human Services -- Integrated Health Care Services 270 From General Fund \$116,000 271 From General Fund, One-time \$87,000 272 Schedule of Programs: 273 Medicaid Behavioral Health Services \$203,000 274 The Legislature intends that the appropriations provided under this item be used to 275 award grants under the integrated behavioral health care grant program created in Section

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26-1-43.