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88	26B-1-101, as enacted by Laws of Utah 2021, Chapter 422
89	62A-1-101, as last amended by Laws of Utah 1992, Chapter 30
90	62A-1-102, as last amended by Laws of Utah 1990, Chapter 183
91	62A-5-304, as last amended by Laws of Utah 2011, Chapter 366
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93	Be it enacted by the Legislature of the state of Utah:
94	Section 1. Section 26-1-2 is amended to read:
95	26-1-2. Definitions.
96	[Subject to additional definitions contained in the chapters of this title which are
97	applicable to specific chapters, as] As used in this title:
98	(1) "Council" means the Utah Health Advisory Council.
99	(2) "Department" means the Department of Health and Human Services created in
100	Section [26-1-4] <u>26B-1-201</u> .
101	(3) "Executive director" means the executive director of the department appointed
102	[pursuant to Section 26-1-8] under Section 26B-1-203.
103	(4) "Public health authority" means an agency or authority of the United States, a state,
104	a territory, a political subdivision of a state or territory, an Indian tribe, or a person acting under
105	a grant of authority from or contract with such an agency, that is responsible for public health
106	matters as part of its official mandate.
107	Section 2. Section 26-8a-310 is amended to read:
108	26-8a-310. Background clearance for emergency medical service personnel.
109	(1) Subject to Section 26-8a-310.5, the department shall determine whether to grant
110	background clearance for an individual seeking licensure or certification under Section
111	26-8a-302 from whom the department receives:
112	(a) the individual's social security number, fingerprints, and other personal
113	identification information specified by the department under Subsection (4); and
114	(b) any fees established by the department under Subsection (10).
115	(2) The department shall determine whether to deny or revoke background clearance
116	for individuals for whom the department has previously granted background clearance.
117	(3) The department shall determine whether to grant, deny, or revoke background
118	clearance for an individual based on an initial and ongoing evaluation of information the

119	department obtains under Subsections (3) and (11), which, at a minimum, shan include an
120	initial criminal background check of state, regional, and national databases using the
121	individual's fingerprints.
122	(4) The department shall make rules, in accordance with Title 63G, Chapter 3, Utah
123	Administrative Rulemaking Act, that specify:
124	(a) the criteria the department will use under Subsection (3) to determine whether to
125	grant, deny, or revoke background clearance; and
126	(b) the other personal identification information an individual seeking licensure or
127	certification under Section 26-8a-302 must submit under Subsection (1).
128	(5) To determine whether to grant, deny, or revoke background clearance, the
129	department may access and evaluate any of the following:
130	(a) Department of Public Safety arrest, conviction, and disposition records described in
131	Title 53, Chapter 10, Criminal Investigations and Technical Services Act, including
132	information in state, regional, and national records files;
133	(b) adjudications by a juvenile court of committing an act that if committed by an adult
134	would be a felony or misdemeanor, if:
135	(i) the applicant is under 28 years old; or
136	(ii) the applicant:
137	(A) is over 28 years old; and
138	(B) has been convicted of, has pleaded no contest to, or is currently subject to a plea in
139	abeyance or diversion agreement for a felony or misdemeanor;
140	(c) juvenile court arrest, adjudication, and disposition records, other than those under
141	Subsection (5)(b), as allowed under Section 78A-6-209;
142	(d) child abuse or neglect findings described in Section 80-3-404;
143	(e) the [Department of Human Services' Division of Child and Family Services]
144	department's Licensing Information System described in Section 62A-4a-1006;
145	(f) the [Department of Human Services' Division of Aging and Adult Services]
146	department's database of reports of vulnerable adult abuse, neglect, or exploitation, described
147	in Section 62A-3-311.1;
148	(g) Division of Occupational and Professional Licensing records of licensing and
149	certification under Title 58, Occupations and Professions;

150 (h) records in other federal criminal background databases available to the state; and 151 (i) any other records of arrests, warrants for arrest, convictions, pleas in abeyance, 152 pending diversion agreements, or dispositions. 153 (6) Except for the Department of Public Safety, an agency may not charge the 154 department for information accessed under Subsection (5). 155 (7) When evaluating information under Subsection (3), the department shall classify a 156 crime committed in another state according to the closest matching crime under Utah law, 157 regardless of how the crime is classified in the state where the crime was committed. 158 (8) The department shall adopt measures to protect the security of information the 159 department accesses under Subsection (5), which shall include limiting access by department 160 employees to those responsible for acquiring, evaluating, or otherwise processing the 161 information. 162 (9) The department may disclose personal identification information the department receives under Subsection (1) to the [Department of Human Services] department to verify that 163 164 the subject of the information is not identified as a perpetrator or offender in the information 165 sources described in Subsections (5)(d) through (f). 166 (10) The department may charge fees, in accordance with Section 63J-1-504, to pay 167 for: 168 (a) the cost of obtaining, storing, and evaluating information needed under Subsection 169 (3), both initially and on an ongoing basis, to determine whether to grant, deny, or revoke 170 background clearance; and 171 (b) other department costs related to granting, denying, or revoking background 172 clearance. 173 (11) The Criminal Investigations and Technical Services Division within the 174 Department of Public Safety shall: 175 (a) retain, separate from other division records, personal information under Subsection

(1), including any fingerprints sent to it by the [Department of Health] department; and

individual for whom personal information has been retained is the subject of:

(b) notify the [Department of Health] department upon receiving notice that an

- (i) a warrant for arrest;
- 180 (ii) an arrest;

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(iv) a pending diversion agreement.(12) The department shall use the Direct Access Clearance System database created
(12) The department shall use the Direct Access Clearance System database created
(12) The department shall use the Direct Access Clearance System database created
under Section 26-21-209 to manage information about the background clearance status of each
individual for whom the department is required to make a determination under Subsection (1).
(13) Clearance granted for an individual licensed or certified under Section 26-8a-302
is valid until two years after the day on which the individual is no longer licensed or certified in
Utah as emergency medical service personnel.
Section 3. Section 26-18-2.4 is amended to read:
26-18-2.4. Medicaid drug program Preferred drug list.
(1) A Medicaid drug program developed by the department under Subsection
26-18-2.3(2)(f):
(a) shall, notwithstanding Subsection 26-18-2.3(1)(b), be based on clinical and
cost-related factors which include medical necessity as determined by a provider in accordance
with administrative rules established by the Drug Utilization Review Board;
(b) may include therapeutic categories of drugs that may be exempted from the drug
program;
(c) may include placing some drugs, except the drugs described in Subsection (2), on a
preferred drug list:
(i) to the extent determined appropriate by the department; and
(ii) in the manner described in Subsection (3) for psychotropic drugs;
(d) notwithstanding the requirements of Part 2, Drug Utilization Review Board, and
except as provided in Subsection (3), shall immediately implement the prior authorization
requirements for a nonpreferred drug that is in the same therapeutic class as a drug that is:
(i) on the preferred drug list on the date that this act takes effect; or
(ii) added to the preferred drug list after this act takes effect; and
(e) except as prohibited by Subsections 58-17b-606(4) and (5), shall establish the prior
authorization requirements established under Subsections (1)(c) and (d) which shall permit a
health care provider or the health care provider's agent to obtain a prior authorization override
of the preferred drug list through the department's pharmacy prior authorization review process,
and which shall:

- (i) provide either telephone or fax approval or denial of the request within 24 hours of the receipt of a request that is submitted during normal business hours of Monday through Friday from 8 a.m. to 5 p.m.;
- (ii) provide for the dispensing of a limited supply of a requested drug as determined appropriate by the department in an emergency situation, if the request for an override is received outside of the department's normal business hours; and
- (iii) require the health care provider to provide the department with documentation of the medical need for the preferred drug list override in accordance with criteria established by the department in consultation with the Pharmacy and Therapeutics Committee.
 - (2) (a) For purposes of this Subsection (2):
 - (i) "Immunosuppressive drug":
- (A) means a drug that is used in immunosuppressive therapy to inhibit or prevent activity of the immune system to aid the body in preventing the rejection of transplanted organs and tissue; and
- (B) does not include drugs used for the treatment of autoimmune disease or diseases that are most likely of autoimmune origin.
- (ii) "Stabilized" means a health care provider has documented in the patient's medical chart that a patient has achieved a stable or steadfast medical state within the past 90 days using a particular psychotropic drug.
- (b) A preferred drug list developed under the provisions of this section may not include an immunosuppressive drug.
- (c) The state Medicaid program shall reimburse for a prescription for an immunosuppressive drug as written by the health care provider for a patient who has undergone an organ transplant. For purposes of Subsection 58-17b-606(4), and with respect to patients who have undergone an organ transplant, the prescription for a particular immunosuppressive drug as written by a health care provider meets the criteria of demonstrating to the Department of Health a medical necessity for dispensing the prescribed immunosuppressive drug.
- (d) Notwithstanding the requirements of Part 2, Drug Utilization Review Board, the state Medicaid drug program may not require the use of step therapy for immunosuppressive drugs without the written or oral consent of the health care provider and the patient.
 - (e) The department may include a sedative hypnotic on a preferred drug list in

accordance with Subsection (2)(f).

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- (f) The department shall grant a prior authorization for a sedative hypnotic that is not on the preferred drug list under Subsection (2)(e), if the health care provider has documentation related to one of the following conditions for the Medicaid client:
- (i) a trial and failure of at least one preferred agent in the drug class, including the name of the preferred drug that was tried, the length of therapy, and the reason for the discontinuation;
- (ii) detailed evidence of a potential drug interaction between current medication and the preferred drug;
- (iii) detailed evidence of a condition or contraindication that prevents the use of the preferred drug;
- (iv) objective clinical evidence that a patient is at high risk of adverse events due to a therapeutic interchange with a preferred drug;
- (v) the patient is a new or previous Medicaid client with an existing diagnosis previously stabilized with a nonpreferred drug; or
 - (vi) other valid reasons as determined by the department.
- (g) A prior authorization granted under Subsection (2)(f) is valid for one year from the date the department grants the prior authorization and shall be renewed in accordance with Subsection (2)(f).
- (3) (a) For purposes of this Subsection (3), "psychotropic drug" means the following classes of drugs:
 - (i) atypical anti-psychotic;
 - (ii) anti-depressant;
 - (iii) anti-convulsant/mood stabilizer;
- 267 (iv) anti-anxiety; and
 - (v) attention deficit hyperactivity disorder stimulant.
 - (b) The department shall develop a preferred drug list for psychotropic drugs. Except as provided in Subsection (3)(d), a preferred drug list for psychotropic drugs developed under this section shall allow a health care provider to override the preferred drug list by writing "dispense as written" on the prescription for the psychotropic drug. A health care provider may not override Section 58-17b-606 by writing "dispense as written" on a prescription.

274	(c) The department, and a Medicaid accountable care organization that is responsible
275	for providing behavioral health, shall:
276	(i) establish a system to:
277	(A) track health care provider prescribing patterns for psychotropic drugs;
278	(B) educate health care providers who are not complying with the preferred drug list;
279	and
280	(C) implement peer to peer education for health care providers whose prescribing
281	practices continue to not comply with the preferred drug list; and
282	(ii) determine whether health care provider compliance with the preferred drug list is at
283	least:
284	(A) 55% of prescriptions by July 1, 2017;
285	(B) 65% of prescriptions by July 1, 2018; and
286	(C) 75% of prescriptions by July 1, 2019.
287	(d) Beginning October 1, 2019, the department shall eliminate the dispense as written
288	override for the preferred drug list, and shall implement a prior authorization system for
289	psychotropic drugs, in accordance with Subsection (2)(f), if by July 1, 2019, the department has
290	not realized annual savings from implementing the preferred drug list for psychotropic drugs of
291	at least \$750,000 General Fund savings.
292	[(e) The department shall report to the Health and Human Services Interim Committee
293	and the Social Services Appropriations Subcommittee before November 30, 2016, and before
294	each November 30 thereafter regarding compliance with and savings from implementation of
295	this Subsection (3).]
296	Section 4. Section 26-54-103 is amended to read:
297	26-54-103. Spinal Cord and Brain Injury Rehabilitation Fund and Pediatric
298	Neuro-Rehabilitation Fund Advisory Committee Creation Membership Terms
299	Duties.
300	(1) There is created a Spinal Cord and Brain Injury Rehabilitation Fund and Pediatric
301	Neuro-Rehabilitation Fund Advisory Committee.
302	(2) The advisory committee shall be composed of 11 members as follows:
303	(a) the executive director, or the executive director's designee;
304	(b) two survivors, or family members of a survivor, of a traumatic brain injury

appointed by the governor;

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- (c) two survivors, or family members of a survivor, of a traumatic spinal cord injury appointed by the governor;
- (d) one traumatic brain injury or spinal cord injury professional appointed by the governor who, at the time of appointment and throughout the professional's term on the committee, does not receive a financial benefit from the fund;
- (e) two parents of a child with a nonprogressive neurological condition appointed by the governor;
- (f) (i) a physical therapist licensed under Title 58, Chapter 24b, Physical Therapy Practice Act, with experience treating brain and spinal cord injuries, appointed by the governor; or
- (ii) an occupational therapist licensed under Title 58, Chapter 42a, Occupational Therapy Practice Act, with experience treating brain and spinal cord injuries, appointed by the governor;
- (g) a member of the House of Representatives appointed by the speaker of the House of Representatives; and
 - (h) a member of the Senate appointed by the president of the Senate.
- (3) (a) The term of advisory committee members shall be four years. If a vacancy occurs in the committee membership for any reason, a replacement shall be appointed for the unexpired term in the same manner as the original appointment.
 - (b) The committee shall elect a chairperson from the membership.
- (c) A majority of the committee constitutes a quorum at any meeting, and, if a quorum is present at an open meeting, the action of the majority of members shall be the action of the advisory committee.
- (d) The terms of the advisory committee shall be staggered so that members appointed under Subsections (2)(b), (d), and (f) shall serve an initial two-year term and members appointed under Subsections (2)(c), (e), and (g) shall serve four-year terms. Thereafter, members appointed to the advisory committee shall serve four-year terms.
 - (4) The advisory committee shall comply with the procedures and requirements of:
 - (a) Title 52, Chapter 4, Open and Public Meetings Act;
- (b) Title 63G, Chapter 2, Government Records Access and Management Act; and

336	(c) Title 63G, Chapter 3, Utah Administrative Rulemaking Act.
337	(5) (a) A member who is not a legislator may not receive compensation or benefits for
338	the member's service, but, at the executive director's discretion, may receive per diem and
339	travel expenses as allowed in:
340	(i) Section 63A-3-106;
341	(ii) Section 63A-3-107; and
342	(iii) rules adopted by the Division of Finance according to Sections 63A-3-106 and
343	63A-3-107.
344	(b) Compensation and expenses of a member who is a legislator are governed by
345	Section 36-2-2 and Legislative Joint Rules, Title 5, Legislative Compensation and Expenses.
346	(6) The advisory committee shall:
347	(a) adopt rules and procedures in accordance with Title 63G, Chapter 3, Utah
348	Administrative Rulemaking Act, that establish priorities and criteria for the advisory committee
349	to follow in recommending distribution of money from the fund to assist qualified IRC
350	501(c)(3) charitable clinics, as defined in Sections 26-54-102 and 26-54-102.5;
351	(b) identify, evaluate, and review the quality of care available to:
352	(i) individuals with spinal cord and brain injuries through qualified IRC 501(c)(3)
353	charitable clinics, as defined in Section 26-54-102; or
354	(ii) children with nonprogressive neurological conditions through qualified IRC
355	501(c)(3) charitable clinics, as defined in Section 26-54-102.5; and
356	(c) explore, evaluate, and review other possible funding sources and make a
357	recommendation to the Legislature regarding sources that would provide adequate funding for
358	the advisory committee to accomplish its responsibilities under this section[; and].
359	[(d) submit an annual report, not later than November 30 of each year, summarizing the
360	activities of the advisory committee and making recommendations regarding the ongoing needs
361	of individuals with spinal cord or brain injuries and children with nonprogressive neurological
362	conditions to:]
363	[(i) the governor;]
364	[(ii) the Health and Human Services Interim Committee; and]
365	[(iii) the Social Services Appropriations Subcommittee.]
366	(7) Operating expenses for the advisory committee, including the committee's staff,

36/	shall be paid for only with money from:
368	(a) the Spinal Cord and Brain Injury Rehabilitation Fund;
369	(b) the Pediatric Neuro-Rehabilitation Fund; or
370	(c) both funds.
371	Section 5. Section 26B-1-102 is amended to read:
372	TITLE 26B. UTAH HEALTH AND HUMAN SERVICES CODE
373	CHAPTER 1. DEPARTMENT OF HEALTH AND HUMAN SERVICES
374	Part 1. General Provisions
375	26B-1-102. Definitions.
376	As used in this title:
377	(1) "Department" means the Department of Health and Human Services created in
378	Section 26B-1-201.
379	(2) "Department of Health" means the Department of Health created in Section 26-1-4.
380	(3) "Department of Human Services" means the Department of Human Services
381	created in Section 62A-1-102.
382	(4) "Stabilization services" means in-home services provided to a child with, or who is
383	at risk for, complex emotional and behavioral needs, including teaching the child's parent or
384	guardian skills to improve family functioning.
385	(5) "Public health authority" means an agency or authority of the United States, a state,
386	a territory, a political subdivision of a state or territory, an Indian tribe, or a person acting under
387	a grant of authority from or a contract with such an agency, that is responsible for public health
388	matters as part of the agency or authority's official mandate.
389	(6) "System of care" means a broad, flexible array of services and supports that:
390	(a) serve a child with or who is at risk for complex emotional and behavioral needs;
391	(b) are community based;
392	(c) are informed about trauma;
393	(d) build meaningful partnerships with families and children;
394	(e) integrate service planning, service coordination, and management across state and
395	<u>local entities;</u>
396	(f) include individualized case planning;
397	(g) provide management and policy infrastructure that supports a coordinated network

398	of interdepartmental service providers, contractors, and service providers who are outside of
399	the department; and
400	(h) are guided by the type and variety of services needed by a child with or who is at
401	risk for complex emotional and behavioral needs and by the child's family.
402	Section 6. Section 26B-1-103 is amended to read:
403	26B-1-103. Purpose of title Consolidation of functions into single state agency.
404	The purpose of this title is to consolidate into a single agency of state government all or
405	the functions previously exercised by[:] the Department of Health and the Department of
406	Human Services to more efficiently and effectively carry out the responsibilities delegated to
407	the department by state law.
408	[(1) the Department of Health, including all of the powers and duties described in Title
409	26, Utah Health Code; and]
410	[(2) the Department of Human Services, including all of the powers and duties
411	described in Title 62A, Utah Human Services Code.]
412	Section 7. Section 26B-1-104, which is renumbered from Section 26-1-32 is
413	renumbered and amended to read:
414	$[\frac{26-1-32}{2}]$. Severability of code provisions.
415	If [any] a provision of this [code] title or Title 26, Utah Health Code, or the application
416	of any such provision to any person or circumstance is held invalid, the invalidity does not
417	affect other provisions or applications of this [code] title or Title 26, Utah Health Code, which
418	can be given effect without the invalid provision or application, and to this end the provisions
419	of this [code] title or Title 26, Utah Health Code, are declared to be severable.
420	Section 8. Section 26B-1-105, which is renumbered from Section 26-1-33 is
421	renumbered and amended to read:
422	$[\frac{26-1-33}{2}]$. $\underline{26B-1-105}$. Individual rights protected.
423	Nothing in this title [shall prohibit] prohibits an individual from choosing the diet,
424	therapy, or mode of treatment to be administered to an individual or an individual's family.
425	Section 9. Section 26B-1-201 is amended to read:
426	Part 2. General Organization and Duties
427	26B-1-201. Department of Health and Human Services Creation Duties.
428	(1) There is created within state government the Department of Health and Human

129	Services, which has all of the policymaking functions, regulatory and enforcement powers,
430	rights, duties, and responsibilities outlined in this title and previously vested in the Department
431	of Health and the Department of Human Services.
432	(2) The department is the health, health planning, medical assistance, and social
433	services authority of the state and is the sole state agency for administration of federally
434	assisted state programs or plans for:
435	(a) social service block grants;
436	(b) alcohol, drug, and mental health programs, including block grants;
437	(c) child welfare;
438	(d) state programs supported under the Older Americans Act, 42 U.S.C. Sec. 3001, et
139	seq.;
440	(e) public health;
441	(f) health planning;
142	(g) maternal and child health;
143	(h) services for individuals with a disability; and
144	(i) medical assistance.
145	(3) A state plan or program administered by the department:
146	(a) shall be developed in the appropriate divisions or offices of the department in
147	accordance with applicable requirements of state and federal law; and
148	(b) may be amended by the executive director to achieve coordination, efficiency, or
149	economy.
450	[(2)] (4) In addition to Subsection (1), [during the transition period described in
451	Section 26B-1-201.1,] from July 1, 2022, through June 30, 2023, the Department of Health and
452	Human Services [may exercise any of] shall exercise the policymaking functions, regulatory
453	and enforcement powers, rights, duties, and responsibilities of the Department of Health and
154	the Department of Human Services under [the joint direction of]:
455	[(a) the executive director of the Department of Health; and]
456	[(b) the executive director of the Department of Human Services.]
457	(a) Title 26, Utah Health Code; and
458	(b) Title 62A, Utah Human Services Code.
159	Section 10 Section 26R-1-201 1 is amended to read:

460	26B-1-201.1. Transition to single state agency Transition plan.
461	(1) As used in this section:
462	(a) "Transition agencies" means the:
463	(i) Department of Health; and
464	(ii) Department of Human Services.
465	(b) "Transition period" means the period of time:
466	(i) during which the transition of the department to the Department of Health and
467	Human Services takes place; and
468	(ii) beginning on [the effective date of the bill,] March 23, 2021, and ending on July 1,
469	2022.
470	[(2) On or before December 1, 2021, the transition agencies shall develop a written
471	transition plan for merging the functions of the transition agencies into the Department of
472	Health and Human Services on July 1, 2022, in order to:]
473	[(a) more efficiently and effectively manage health and human services programs that
474	are the responsibility of the state;]
475	[(b) establish a health and human services policy for the state; and]
476	[(c) promote health and the quality of life in the health and human services field.]
477	[(3) The written transition plan described in Subsection (2) shall describe:]
478	[(a) the tasks that need to be completed before the move on July 1, 2022, including a
479	description of:
480	[(i) how the transition agencies solicited comment from stakeholders, including:]
481	[(A) employees of the transition agencies;]
482	[(B) clients and partners of the transition agencies;]
483	[(C) members of the public;]
484	[(D) the Legislature; and]
485	[(E) the executive office of the governor;]
486	[(ii) the proposed organizational structure of the department, including the transition of
487	responsibilities of employees, by job title and classification, under the newly proposed
488	organizational structure and a plan for these transitions;]
489	[(iii) office space and infrastructure requirements related to the transition;]
490	[(iv) any work site location changes for transitioning employees;]

491	[(v) the transition of service delivery sites;]
492	[(vi) amendments needed to existing contracts, including grants;]
493	[(vii) legislative changes needed to implement the transition described in this section;]
494	[(viii) how the transition agencies will coordinate agency rules;]
495	[(ix) procedures for the transfer and reconciliation of budgeting and funding of the
496	department as the transition agencies transition into the department; and]
497	[(x) the transition of technology services to the department;]
498	[(b) the tasks that may need to be completed after the transition on July 1, 2022; and]
499	[(c) how the transition to the department will be funded, including details of:]
500	[(i) how expenses associated with the transition will be managed;]
501	[(ii) how funding for services provided by the transition agencies will be managed to
502	ensure services will be provided by the transition agencies and the department without
503	interruption; and]
504	[(iii) how federal funds will be used by or transferred between the transition agencies
505	and the department to ensure services will be provided by the transition agencies and the
506	department without interruption.]
507	[(4) The written transition plan described in Subsection (2) shall:]
508	[(a) include a detailed timeline for the completion of the tasks described in Subsection
509	(3)(a);
510	[(b) be updated at least one time in every two week period until the transition is
511	complete;]
512	[(c) describe how information will be provided to clients of the transition agencies and
513	the department regarding any changes to where services will be provided and the hours services
514	will be provided;]
515	[(d) be provided to the:]
516	[(i) Health and Human Services Interim Committee;]
517	[(ii) Social Services Appropriations Subcommittee;]
518	[(iii) the executive office of the governor;]
519	[(iv) Division of Finance; and]
520	[(v) Division of Technology Services; and]
521	[(e) be made available to employees that are transitioning or may potentially be

522	transitioned.
523	[(5)] (2) The transition agencies shall publish information that provides a full overview
524	of [the written transition plan and] how the move may affect client services offered by the
525	transition agencies on the transition agencies' respective websites, including regular updates
526	regarding:
527	(a) how the move may affect client services offered by the transition agencies;
528	(b) information regarding the location where services are provided and the hours
529	services are provided; and
530	(c) contact information so that clients of the transition agencies can contact
531	transitioning employees and obtain information regarding client services.
532	[(6)] (3) The transition agencies may, separately or collectively, enter into a
533	memorandum of understanding regarding how costs and responsibilities will be shared to:
534	(a) ensure that services provided under agreements with the federal government,
535	including new and ongoing grant programs, are fulfilled;
536	(b) ensure that commitments made by the transition agencies are met;
537	(c) provide ongoing or shared services as needed, including the provision of payments
538	to the department from the transition agencies; and
539	(d) ensure that money from the Department of Health and Human Services Transition
540	Restricted Account created in [Subsection (8)] Section 26B-1-305 is used appropriately by the
541	transition agencies and the department.
542	[(7)] <u>(4)</u> In implementing the written transition plan described in this section, the
543	transition agencies and the department shall protect existing services, programs, and access to
544	services provided by the transition agencies.
545	(5) (a) The department shall provide a written update to the entities described in
546	Subsection (5)(b):
547	(i) at least one time after September 1, 2022, but before November 1, 2022;
548	(ii) if the executive director adjusts the organizational structure of the department
549	under Subsection 26B-1-204(5) in a manner that conflicts with the organizational structure
550	described in statute; or
551	(iii) at the request of one or more of the entities described in Subsection (5)(b).
552	(b) The update described in Subsection (5)(a) shall be provided to:

553	(i) the Health and Human Services Interim Committee;
554	(ii) the Social Services Appropriations Subcommittee; and
555	(iii) the executive office of the governor.
556	[(8) (a) There is created a restricted account within the General Fund known as the
557	"Department of Health and Human Services Transition Restricted Account."]
558	[(b) The restricted account shall consist of appropriations made by the Legislature.]
559	[(c) Subject to appropriation, the transition agencies and the department may spend
560	money from the restricted account to pay for expenses related to moving the transition agencies
561	into the department, including staff and legal services.]
562	Section 11. Section 26B-1-202, which is renumbered from Section 62A-1-111 is
563	renumbered and amended to read:
564	[62A-1-111]. 26B-1-202. Department authority and duties.
565	The department may, subject to applicable restrictions in state law and in addition to all
566	other authority and responsibility granted to the department by law:
567	(1) adopt rules, in accordance with Title 63G, Chapter 3, Utah Administrative
568	Rulemaking Act, and not inconsistent with law, as the department may consider necessary or
569	desirable for providing health and social services to the people of this state;
570	(2) establish and manage client trust accounts in the department's institutions and
571	community programs, at the request of the client or the client's legal guardian or representative,
572	or in accordance with federal law;
573	(3) purchase, as authorized or required by law, services that the department is
574	responsible to provide for legally eligible persons;
575	(4) conduct adjudicative proceedings for clients and providers in accordance with the
576	procedures of Title 63G, Chapter 4, Administrative Procedures Act;
577	(5) establish eligibility standards for [its] the department's programs, not inconsistent
578	with state or federal law or regulations;
579	(6) take necessary steps, including legal action, to recover money or the monetary value
580	of services provided to a recipient who was not eligible;
581	(7) set and collect fees for the department's services;
582	(8) license agencies, facilities, and programs, except as otherwise allowed, prohibited,
583	or limited by law;

- (9) acquire, manage, and dispose of any real or personal property needed or owned by the department, not inconsistent with state law;
- (10) receive gifts, grants, devises, and donations; gifts, grants, devises, donations, or the proceeds thereof, may be credited to the program designated by the donor, and may be used for the purposes requested by the donor, as long as the request conforms to state and federal policy; all donated funds shall be considered private, nonlapsing funds and may be invested under guidelines established by the state treasurer;
- (11) accept and employ volunteer labor or services; the department is authorized to reimburse volunteers for necessary expenses, when the department considers that reimbursement to be appropriate;
- (12) carry out the responsibility assigned in the workforce services plan by the State Workforce Development Board;
- (13) carry out the responsibility assigned by Section 35A-8-602 with respect to coordination of services for the homeless;
- (14) carry out the responsibility assigned by Section 62A-5a-105 with respect to coordination of services for students with a disability;
 - (15) provide training and educational opportunities for the department's staff;
 - (16) collect child support payments and any other money due to the department;
- (17) apply the provisions of Title 78B, Chapter 12, Utah Child Support Act, to parents whose child lives out of the home in a department licensed or certified setting;
- (18) establish policy and procedures, within appropriations authorized by the Legislature, in cases where the Division of Child and Family Services or the Division of Juvenile Justice Services is given custody of a minor by the juvenile court under Title 80, Utah Juvenile Code, or the department is ordered to prepare an attainment plan for a minor found not competent to proceed under Section 80-6-403[; any policy and procedures shall include], including:
 - (a) designation of interagency teams for each juvenile court district in the state;
 - (b) delineation of assessment criteria and procedures;
- (c) minimum requirements, and timeframes, for the development and implementation of a collaborative service plan for each minor placed in department custody; and
 - (d) provisions for submittal of the plan and periodic progress reports to the court;

- (19) carry out the responsibilities assigned to the department by statute;
- (20) examine and audit the expenditures of any public funds provided to <u>a</u> local substance abuse [<u>authorities</u>,] <u>authority</u>, <u>a</u> local mental health [<u>authorities</u>,] <u>authority</u>, <u>a</u> local area [<u>agencies</u>] <u>agency</u> on aging, and any person, agency, or organization that contracts with or receives funds from those authorities or agencies. Those local authorities, area agencies, and any person or entity that contracts with or receives funds from those authorities or area agencies, shall provide the department with any information the department considers necessary. The department is further authorized to issue directives resulting from any examination or audit to <u>a</u> local [<u>authorities</u>, <u>area agencies</u>] <u>authority</u>, <u>an area agency</u>, and persons or entities that contract with or receive funds from those authorities with regard to any public funds. If the department determines that it is necessary to withhold funds from a local mental health authority or local substance abuse authority based on failure to comply with state or federal law, policy, or contract provisions, [it] <u>the department</u> may take steps necessary to ensure continuity of services. For purposes of this Subsection (20) "public funds" means the same as that term is defined in Section 62A-15-102;
- (21) [pursuant to] in accordance with Subsection 62A-2-106(1)(d), accredit one or more agencies and persons to provide intercountry adoption services;
- (22) within <u>legislative</u> appropriations [authorized by the <u>Legislature</u>], promote and develop a system of care and stabilization services:
 - (a) in compliance with Title 63G, Chapter 6a, Utah Procurement Code; and
- (b) that encompasses the department, department contractors, and the divisions, offices, or institutions within the department, to:
- (i) navigate services, funding resources, and relationships to the benefit of the children and families whom the department serves;
 - (ii) centralize department operations, including procurement and contracting;
- (iii) develop policies that govern business operations and that facilitate a system of care approach to service delivery;
- (iv) allocate resources that may be used for the children and families served by the department or the divisions, offices, or institutions within the department, subject to the restrictions in Section 63J-1-206;
 - (v) create performance-based measures for the provision of services; and

646	(vi) centralize other business operations, including data matching and sharing among
647	the department's divisions, offices, and institutions;
648	(23) ensure that any training or certification required of a public official or public
649	employee, as those terms are defined in Section 63G-22-102, complies with Title 63G, Chapter
650	22, State Training and Certification Requirements, if the training or certification is required:
651	(a) under this title;
652	(b) by the department; or
653	(c) by an agency or division within the department; [and]
654	(24) reallocate unexpended funds as provided in Section 62A-1-111.6[-];
655	(25) enter into cooperative agreements with the Department of Environmental Quality
656	to delineate specific responsibilities to assure that assessment and management of risk to
657	human health from the environment are properly administered;
658	(26) consult with the Department of Environmental Quality and enter into cooperative
659	agreements, as needed, to ensure efficient use of resources and effective response to potential
660	health and safety threats from the environment, and to prevent gaps in protection from potential
661	risks from the environment to specific individuals or population groups;
662	(27) promote and protect the health and wellness of the people within the state;
663	(28) establish, maintain, and enforce rules necessary or desirable to carry out the
664	provisions and purposes of this title to promote and protect the public health or to prevent
665	disease and illness;
666	(29) investigate and control the causes of epidemic, infectious, communicable, and
667	other diseases affecting the public health;
668	(30) provide for the detection, reporting, prevention, and control of communicable,
669	infectious, acute, chronic, or any other disease or health hazard which the department considers
670	to be dangerous, important, or likely to affect the public health;
671	(31) collect and report information on causes of injury, sickness, death, and disability
672	and the risk factors that contribute to the causes of injury, sickness, death, and disability within
673	the state;
674	(32) collect, prepare, publish, and disseminate information to inform the public
675	concerning the health and wellness of the population, specific hazards, and risks that may affect
676	the health and wellness of the population and specific activities which may promote and protect

6//	the health and wellness of the population;
678	(33) establish and operate programs necessary or desirable for the promotion or
679	protection of the public health and the control of disease or which may be necessary to
680	ameliorate the major causes of injury, sickness, death, and disability in the state, except that the
681	programs may not be established if adequate programs exist in the private sector;
682	(34) establish, maintain, and enforce isolation and quarantine, and for this purpose
683	only, exercise physical control over property and individuals as the department finds necessary
684	for the protection of the public health;
685	(35) close theaters, schools, and other public places and forbid gatherings of people
686	when necessary to protect the public health;
687	(36) abate nuisances when necessary to eliminate sources of filth and infectious and
688	communicable diseases affecting the public health;
689	(37) make necessary sanitary and health investigations and inspections in cooperation
690	with local health departments as to any matters affecting the public health;
691	(38) establish laboratory services necessary to support public health programs and
692	medical services in the state;
693	(39) establish and enforce standards for laboratory services which are provided by any
694	laboratory in the state when the purpose of the services is to protect the public health;
695	(40) cooperate with the Labor Commission to conduct studies of occupational health
696	hazards and occupational diseases arising in and out of employment in industry, and make
697	recommendations for elimination or reduction of the hazards;
698	(41) cooperate with the local health departments, the Department of Corrections, the
699	Administrative Office of the Courts, the Division of Juvenile Justice Services, and the Crime
700	Victim Reparations and Assistance Board to conduct testing for HIV infection of alleged
701	sexual offenders, convicted sexual offenders, and any victims of a sexual offense;
702	(42) investigate the causes of maternal and infant mortality;
703	(43) establish, maintain, and enforce a procedure requiring the blood of adult
704	pedestrians and drivers of motor vehicles killed in highway accidents be examined for the
705	presence and concentration of alcohol, and provide the Commissioner of Public Safety with
706	monthly statistics reflecting the results of these examinations, with necessary safeguards so that
707	information derived from the examinations is not used for a purpose other than the compilation

/08	of these statistics,
709	(44) establish qualifications for individuals permitted to draw blood under Subsection
710	41-6a-523(1)(a)(vi), 53-10-405(2)(a)(vi), 72-10-502(5)(a)(vi), or 77-23-213(3)(a)(vi), and to
711	issue permits to individuals the department finds qualified, which permits may be terminated or
712	revoked by the department;
713	(45) establish a uniform public health program throughout the state which includes
714	continuous service, employment of qualified employees, and a basic program of disease
715	control, vital and health statistics, sanitation, public health nursing, and other preventive health
716	programs necessary or desirable for the protection of public health;
717	(46) adopt rules and enforce minimum sanitary standards as provided in Title 26,
718	Chapter 15, General Sanitation;
719	(47) conduct health planning for the state;
720	(48) monitor the costs of health care in the state and foster price competition in the
721	health care delivery system;
722	(49) adopt rules for the licensure of health facilities within the state in accordance with
723	Title 26, Chapter 21, Health Care Facility Licensing and Inspection Act;
724	(50) license the provision of child care;
725	(51) accept contributions to and administer the funds contained in the Allyson Gamble
726	Organ Donation Contribution Fund created in Section 26-18b-101;
727	(52) serve as the collecting agent, on behalf of the state, for the nursing care facility
728	assessment fee imposed under Title 26, Chapter 35a, Nursing Care Facility Assessment Act,
729	and adopt rules for the enforcement and administration of the nursing facility assessment
730	consistent with the provisions of Title 26, Chapter 35a, Nursing Care Facility Assessment Act;
731	(53) establish methods or measures for health care providers, public health entities, and
732	health care insurers to coordinate among themselves to verify the identity of the individuals the
733	providers serve;
734	(54) designate Alzheimer's disease and related dementia as a public health issue and,
735	within budgetary limitations, implement a state plan for Alzheimer's disease and related
736	dementia by incorporating the plan into the department's strategic planning and budgetary
737	process; and
738	(55) coordinate with other state agencies and other organizations to implement the state

/39	plan for Alzheimer's disease and related dementia;
740	(56) ensure that any training or certification required of a public official or public
741	employee, as those terms are defined in Section 63G-22-102, complies with Title 63G, Chapte
742	22, State Training and Certification Requirements, if the training or certification is required by
743	the agency or under this title, Title 26, Utah Health Code or Title 62A, Utah Human Services
744	Code; and
745	(57) oversee public education vision screening as described in Section 53G-9-404.
746	Section 12. Section 26B-1-203, which is renumbered from Section 62A-1-108 is
747	renumbered and amended to read:
748	[62A-1-108]. <u>26B-1-203.</u> Executive director Appointment
749	Compensation Qualifications Responsibilities.
750	(1) (a) The chief administrative officer of the department is the executive director, who
751	shall be appointed by the governor with the advice and consent of the Senate.
752	(b) The executive director may be removed at the will of the governor.
753	(c) The executive director shall receive a salary established by the governor within the
754	salary range fixed by the Legislature in Title 67, Chapter 22, State Officer Compensation.
755	(2) (a) The executive director shall be:
756	(i) experienced in administration, management, and coordination of complex
757	organizations[.]; and
758	(ii) thoroughly informed and experienced in all aspects of public health work.
759	(b) If the executive director is not a physician, the executive director shall:
760	(i) have successfully completed at least a master's degree of public health or public
<u>761</u>	administration from an accredited school of public health or from an accredited program of
<u>762</u>	public health or public administration;
763	(ii) (A) have at least five years of professional full-time experience, of which at least
<u> 764</u>	two years have been in public health in a senior level administrative capacity; or
765	(B) have at least five years of professional full-time experience in public health
<u> 766</u>	programs, of which at least three years have been in a senior level administrative capacity;
767	(iii) appoint a deputy director of the department who shall have:
768	(A) successfully completed at least one year's graduate work in an accredited school of
769	public health or an accredited program of public health; and

770	(B) at least five years of professional full-time experience in public health programs;
771	and
772	(iv) if the individual described in Subsection (2)(b)(iii) is not a physician licensed to
<u>773</u>	practice medicine in the state, appoint a deputy director of the department who is a physician
774	licensed to practice medicine in the state with experience in public health.
775	[(2)] (3) The executive director is responsible for:
776	(a) administration and supervision of the department;
777	(b) coordination of policies and program activities conducted through the boards,
778	divisions, and offices of the department;
779	(c) approval of the proposed budget of each board, division, and office within the
780	department; and
781	(d) [such] other duties as the Legislature or governor shall assign to [him] the
782	executive director.
783	[(3)] (4) The executive director may appoint deputy or assistant directors to assist
784	[him] the executive director in carrying out the department's responsibilities.
785	Section 13. Section 26B-1-204, which is renumbered from Section 62A-1-105 is
786	renumbered and amended to read:
787	[62A-1-105]. 26B-1-204. Creation of boards, divisions, and offices.
788	(1) The executive director shall make rules in accordance with Title 63G, Chapter 3,
789	Utah Administrative Rulemaking Act, and not inconsistent with law for:
790	(a) the administration and government of the department;
791	(b) the conduct of the department's employees; and
792	(c) the custody use and preservation of the records, papers, books, documents, and
793	property of the department.
794	[(1)] (2) The following policymaking boards, councils, and committees are created
795	within the Department of <u>Health and</u> Human Services:
796	(a) [the] Board of Aging and Adult Services; [and]
797	(b) [the] Utah State Developmental Center Board[:];
798	(c) Health Advisory Council;
799	(d) Health Facility Committee;
800	(e) State Emergency Medical Services Committee;

801	(f) Air Ambulance Committee;
802	(g) Health Data Committee;
803	(h) Utah Health Care Workforce Financial Assistance Program Advisory Committee;
804	(i) Residential Child Care Licensing Advisory Committee;
805	(j) Child Care Center Licensing Committee;
806	(k) Primary Care Grant Committee;
807	(1) Adult Autism Treatment Program Advisory Committee;
808	(m) Youth Electronic Cigarette, Marijuana, and Other Drug Prevention Committee;
809	<u>and</u>
810	(n) any boards, councils, or committees that are created by statute in:
811	(i) this title;
812	(ii) Title 26, Utah Health Code; or
813	(iii) Title 62A, Utah Human Services Code.
814	[(2)] (3) The following divisions are created within the Department of <u>Health and</u>
815	Human Services:
816	(a) relating to operations:
817	(i) the Division of Finance and Administration;
818	(ii) the Division of Licensing and Background Checks;
819	(iii) the Division of Customer Experience;
820	(iv) the Division of Data, Systems, and Evaluation; and
821	(v) the Division of Continuous Quality Improvement;
822	(b) relating to healthcare administration:
823	(i) the Division of Integrated Healthcare, which shall include responsibility for the
824	state's medical assistance programs;
825	(ii) the Division of Aging and Adult Services; and
826	(iii) the Division for Services for People with Disabilities; and
827	(c) relating to community health and well-being:
828	(i) the Division of Child and Family Services;
829	(ii) the Division of Family Health;
830	(iii) the Division of Population Health; and
831	(iv) the Division of Juvenile Justice and Youth Services.

832	(4) The executive director may establish offices and bureaus to facilitate management
833	of the department as required by, and in accordance, with:
834	(a) this title;
835	(b) Title 26, Utah Health Code; and
836	(c) Title 62A, Utah Human Services Code.
837	(5) From July 1, 2022, through June 30, 2023, the executive director may adjust the
838	organizational structure relating to the department, including the organization of the
839	department's divisions and offices, notwithstanding the organizational structure described in:
840	(a) this title;
841	(b) Title 26, Utah Health Code; or
842	(c) Title 62A, Utah Human Services Code.
843	[(a) the Division of Aging and Adult Services;]
844	[(b) the Division of Child and Family Services;]
845	[(c) the Division of Services for People with Disabilities;]
846	[(d) the Division of Substance Abuse and Mental Health; and]
847	[(e) the Division of Juvenile Justice Services.]
848	[(3) The following offices are created within the Department of Human Services:]
849	[(a) the Office of Licensing;]
850	[(b) the Office of Public Guardian;]
851	[(c) the Office of Recovery Services; and]
852	[(d) the Office of Quality and Design.]
853	Section 14. Section 26B-1-205, which is renumbered from Section 62A-1-109 is
854	renumbered and amended to read:
855	[62A-1-109]. <u>26B-1-205.</u> Division directors Appointment
856	Compensation Qualifications.
857	(1) (a) The executive director of the department has administrative jurisdiction over
858	each division and office director.
859	(b) The executive director may make changes in personnel and service functions in the
860	divisions and offices under the executive director's administrative jurisdiction, and authorize
861	designees to perform appropriate responsibilities, to effectuate greater efficiency and economy
862	in the operations of the department.

863	(c) The executive director may establish offices and bureaus to perform functions such
864	as budgeting, planning, data processing, and personnel administration, to facilitate management
865	of the department.
866	[(1)] (2) The chief officer of each division and office enumerated in Section
867	[62A-1-105] 26-1-204 shall be a director who shall serve as the executive and administrative
868	head of the division or office.
869	[(2)] (3) [Each division director shall be appointed by the] The executive director shall
870	appoint each division director with the concurrence of the division's board, if the division has a
871	board.
872	[(3)] (4) The director of any division may be removed from that position at the will of
873	the executive director after consultation with that division's board, if the division has a board.
874	[(4) Each office director shall be appointed by the executive director.]
875	[(5)] (5) Directors of divisions and offices shall receive compensation as provided by
876	Title 63A, Chapter 17, Utah State Personnel Management Act.
877	[(6)] (6) The director of each division and office shall be experienced in administration
878	and possess such additional qualifications as determined by the executive director, and as
879	provided by law.
880	Section 15. Section 26B-1-206, which is renumbered from Section 62A-1-107.5 is
881	renumbered and amended to read:
882	[62A-1-107.5]. 26B-1-206. Limitation on establishment of advisory bodies.
883	[(1) Department divisions and boards:]
884	(1) A department division or board:
885	(a) may not establish permanent, ongoing advisory groups unless otherwise specifically
886	created in federal or state statute; and
887	(b) shall comply with the provisions of this section [with regard to any advisory groups
888	created prior to or after July 1, 2003].
889	(2) (a) [Divisions and boards] A division or board may establish subject-limited and
890	time-limited ad hoc advisory groups to provide input necessary to carry out [their] the
891	division's or board's assigned responsibilities.
892	(b) When establishing such an advisory group, the board [must] shall establish in
893	writing a specific charge and time limit.

894	(3) The department shall consolidate an advisory group or committee with another
895	committee or advisory group as appropriate to create greater efficiencies and budgetary savings
896	for the department.
897	[(3)] (4) [Members] A member of any ad hoc advisory group shall receive no
898	compensation or benefits for their service.
899	[4] (5) The provision of staffing and support to any ad hoc advisory group $[will be]$ is
900	contingent on availability of human and financial resources.
901	Section 16. Section 26B-1-207, which is renumbered from Section 26-1-4 is
902	renumbered and amended to read:
903	[26-1-4]. <u>26B-1-207.</u> Policymaking responsibilities Regulations for local
904	health departments prescribed by department Local standards not more stringent than
905	federal or state standards Consultation with local health departments Committee to
906	evaluate health policies and to review federal grants Committee responsibilities.
907	[(1) There is created the Department of Health, which has all of the policymaking
908	functions, regulatory and enforcement powers, rights, duties, and responsibilities of the
909	Division of Health, the Board of Health, the State Health Planning Development Agency, and
910	the Office of Health Care Financing. Unless otherwise specifically provided, when reference is
911	made in any statute of this state to the Board of Health, the Division of Health, the State Health
912	Planning Development Agency, or the Office of Health Care Financing, it refers to the
913	department. The department shall assume all of the policymaking functions, powers, rights,
914	duties, and responsibilities over the division, agency, and office previously vested in the
915	Department of Human Services and its executive director.]
916	$[\frac{(2)}{(1)}]$ In establishing public health policy, the department shall consult with the local
917	health departments established under Title 26A, Chapter 1, Local Health Departments.
918	(2) (a) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act,
919	the department may prescribe by administrative rule made in accordance with Title 63G,
920	Chapter 3, Utah Administrative Rulemaking Act, reasonable requirements not inconsistent
921	with law for a local health department as defined in Section 26A-1-102.
922	(b) Except as provided in Subsection (2)(d), or where specifically allowed by federal
923	law or state statute, a local health department, as defined in Section 26A-1-102, may not
924	establish standards or regulations that are more stringent than those established by federal law,

925	state statute, or administrative rule adopted in accordance with Title 63G, Chapter 3, Utah
926	Administrative Rulemaking Act.
927	(c) The local health department may make standards and regulations more stringent
928	than corresponding federal law, state statute, or state administrative rules, only if the local
929	health department makes a written finding after public comment and hearing and based on
930	$\underline{evidence\ in\ the\ record,\ that\ corresponding\ federal\ laws,\ state\ statutes,\ or\ state\ administrative}$
931	rules are not adequate to protect public health of the state.
932	(d) The findings described in Subsection (2)(c) shall address the public health
933	information and studies contained in the record, which form the basis for the local health
934	department's conclusion.
935	(e) Nothing in this Subsection (2), limits the ability of a local health department to
936	make standards and regulations in accordance with Subsection 26A-1-121(1)(a) for:
937	(i) emergency rules made in accordance with Section 63G-3-304; or
938	(ii) items not regulated under federal law, state statute, or state administrative rule.
939	(3) (a) As used in this Subsection (3):
940	(i) "Committee" means the committee established under Subsection (3)(b).
941	(ii) "Exempt application" means an application for a federal grant that meets the
942	criteria established under Subsection (3)(c)(iii).
943	(iii) "Expedited application" means an application for a federal grant that meets the
944	criteria established under Subsection (3)(c)(iv).
945	(iv) "Federal grant" means a grant from the federal government that could provide
946	funds for local health departments to help them fulfill their duties and responsibilities.
947	(v) "Reviewable application" means an application for a federal grant that is not an
948	exempt application.
949	(b) The department shall establish a committee consisting of:
950	(i) the executive director, or the executive director's designee;
951	(ii) two representatives of the department, appointed by the executive director; and
952	(iii) three representatives of local health departments, appointed by all local health
953	departments.
954	(c) The committee shall:
955	(i) evaluate:

956	(A) the allocation of public health resources between the department and local health
957	departments; and
958	(B) policies that affect local health departments;
959	(ii) consider policy changes proposed by the department or local health departments;
960	(iii) establish criteria by which an application for a federal grant may be judged to
961	determine whether it should be exempt from the requirements under Subsection (3)(d); and
962	(iv) establish criteria by which an application for a federal grant may be judged to
963	determine whether committee review under Subsection (3)(d)(i) should be delayed until after
964	the application is submitted because the application is required to be submitted under a
965	timetable that makes committee review before it is submitted impracticable if the submission
966	deadline is to be met.
967	(d) (i) The committee shall review the goals and budget for each reviewable
968	application:
969	(A) before the application is submitted, except for an expedited application; and
970	(B) for an expedited application, after the application is submitted but before funds
971	from the federal grant for which the application was submitted are disbursed or encumbered.
972	(ii) Funds from a federal grant [pursuant to] under a reviewable application may not be
973	disbursed or encumbered before the goals and budget for the federal grant are established by:
974	(A) a two-thirds vote of the committee, following the committee review under
975	Subsection (3)(d)(i); or
976	(B) if two-thirds of the committee cannot agree on the goals and budget, the chair of
977	the health advisory council, after consultation with the committee in a manner that the
978	committee determines.
979	(e) An exempt application is exempt from the requirements of Subsection (3)(d).
980	(f) The department may use money from a federal grant to pay administrative costs
981	incurred in implementing this Subsection (3).
982	Section 17. Section 26B-1-208, which is renumbered from Section 62A-1-112 is
983	renumbered and amended to read:
984	[62A-1-112]. <u>26B-1-208.</u> Participation in federal programs Federal
985	grants Authority of executive director.
986	(1) The executive director may, by following the procedures and requirements of Title

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[62A-1-113].

987	63J, Chapter 5, Federal Funds Procedures Act, seek federal grants, loans, or participation in
988	federal programs.
989	(2) Wherever state law authorizes a board, director, division, or office of the
990	department to accept any grant, fund, or service which is to be advanced or contributed in
991	whole or in part by the federal government, that acceptance shall be subject to the approval or
992	disapproval of the executive director.
993	(3) All applications for federal grants or other federal financial assistance for the
994	support of any department program is subject to the approval of the executive director.
995	[(3)] (4) If any executive or legislative provision of the federal government so requires
996	as a condition to participation by this state in any fund, property, or service, the executive
997	director, with the governor's approval, shall expend whatever funds are necessary out of the
998	money provided by the Legislature for use and disbursement by that department.
999	Section 18. Section 26B-1-209, which is renumbered from Section 26-1-6 is
1000	renumbered and amended to read:
1001	[26-1-6]. <u>26B-1-209.</u> Fee schedule adopted by department.
1002	(1) The department may adopt a schedule of fees that may be assessed for services
1003	rendered by the department, provided that the fees are:
1004	(a) reasonable and fair; and
1005	(b) submitted to the Legislature as part of the department's annual appropriations
1006	request.
1007	(2) When the department submits a fee schedule to the Legislature, the Legislature, in
1008	accordance with Section 63J-1-504, may:
1009	(a) approve the fee;
1010	(b) increase or decrease and approve the fee; or
1011	(c) reject any fee submitted to it.
1012	(3) Fees approved by the Legislature [pursuant to] under this section shall be paid into
1013	the state treasury.
1014	Section 19. Section 26B-1-210, which is renumbered from Section 62A-1-113 is
1015	renumbered and amended to read:

(1) The department shall prepare and submit to the governor, for inclusion in [his] the

26B-1-210. Department budget -- Reports from divisions.

1018	governor's budget to be submitted to the Legislature, a budget of the department's financial
1019	requirements needed to carry out [its] the department's responsibilities, as provided by law
1020	during the fiscal year following the Legislature's next Annual General Session.
1021	(2) The executive director shall require a report from each of the divisions and offices
1022	of the department, to aid in preparation of the departmental budget.
1023	Section 20. Section 26B-1-211, which is renumbered from Section 26-1-17.1 is
1024	renumbered and amended to read:
1025	[26-1-17.1]. <u>26B-1-211.</u> Background checks for employees.
1026	(1) As used in this section, "bureau" means the Bureau of Criminal Identification
1027	created in Section 53-10-201.
1028	(2) Beginning July 1, 2018, the department may require a fingerprint-based local,
1029	regional, and national criminal history background check and ongoing monitoring of:
1030	(a) all staff, contracted employees, and volunteers who:
1031	(i) have access to protected health information or personal identifying information;
1032	(ii) have direct contact with patients, children, or vulnerable adults as defined in
1033	Section 62A-2-120;
1034	(iii) work in areas of privacy and data security;
1035	(iv) handle financial information, including receipt of funds, reviewing invoices,
1036	making payments, and other types of financial information; and
1037	(v) perform audit functions, whether internal or external, on behalf of the department;
1038	and
1039	(b) job applicants who have been offered a position with the department and the job
1040	requirements include those described in Subsection (2)(a).
1041	(3) Beginning July 1, 2022, for the purposes described in Subsection (2), the
1042	department may also access:
1043	(a) the department's Management Information System created in Section 62A-4a-1003;
1044	(b) the department's Licensing Information System created in Section 62A-4a-1006;
1045	(c) the statewide database of the Division of Aging and Adult Services created by
1046	Section 62A-3-311.1; and
1047	(d) juvenile court records under Subsection 80-3-404(6).
1048	[(3)] (4) Each individual in a position listed in Subsection (2) shall provide a

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1049 completed fingerprint card to the department upon request. 1050 [(4)] (5) The department shall require that an individual required to submit to a 1051 background check under Subsection [(3)] (4) provide a signed waiver on a form provided by 1052 the department that meets the requirements of Subsection 53-10-108(4). 1053 [(5)] (6) For a noncriminal justice background search and registration in accordance 1054 with Subsection 53-10-108(13), the department shall submit to the bureau: 1055 (a) the applicant's personal identifying information and fingerprints for a criminal 1056 history search of applicable local, regional, and national databases; and 1057 (b) a request for all information received as a result of the local, regional, and 1058 nationwide background check. 1059 [(6)] (7) The department is responsible for the payment of all fees required by 1060 Subsection 53-10-108(15) and any fees required to be submitted to the Federal Bureau of 1061 Investigation by the bureau. 1062 [(7)] (8) The department may make rules in accordance with Title 63G, Chapter 3, 1063 Utah Administrative Rulemaking Act, that: 1064 (a) determine how the department will assess the employment status of an individual 1065 upon receipt of background information; 1066 (b) determine the type of crimes and the severity that would disqualify an individual 1067 from holding a position; and 1068 (c) identify the appropriate privacy risk mitigation strategy to be used in accordance 1069 with Subsection 53-10-108(13)(b). 1070 Section 21. Section 26B-1-212, which is renumbered from Section 26-1-17.5 is 1071 renumbered and amended to read: 1072 $[\frac{26-1-17.5}{}].$ 26B-1-212. Confidential records. 1073 (1) A record classified as confidential under this title shall remain confidential, and be 1074 released according to the provisions of this title, notwithstanding Section 63G-2-310. 1075 (2) In addition to [those persons] a person granted access to a private record described in Subsection 63G-2-302(1)(b), [schools, school districts, and local and state health 1076 1077 departments and the state Department of Human Services a school, school district, local health

department, and the department may share an immunization record as defined in Section

53G-9-301 or any other record relating to a vaccination or immunization as necessary to ensure

1080	compliance with Title 53G, Chapter 8, Part 3, Physical Restraint of Students, and to prevent,
1081	investigate, and control the causes of epidemic, infectious, communicable, and other diseases
1082	affecting the public health.
1083	Section 22. Section 26B-1-301, which is renumbered from Section 26-1-16 is
1084	renumbered and amended to read:
1085	Part 3. Funds and Accounts
1086	[26-1-16]. <u>26B-1-301.</u> Executive director Power to accept funds and gifts.
1087	The executive director may accept and receive such other funds and gifts as may be
1088	made available from private and public groups for the purposes of promoting and protecting
1089	the public health or for the provision of health services to the people of the state and shall
1090	expend the same as appropriated by the [legislature] Legislature.
1091	Section 23. Section 26B-1-302, which is renumbered from Section 62A-1-202 is
1092	renumbered and amended to read:
1093	[62A-1-202]. <u>26B-1-302.</u> National Professional Men's Basketball Team
1094	Support of Women and Children Issues Restricted Account.
1095	(1) There is created in the General Fund a restricted account known as the "National
1096	Professional Men's Basketball Team Support of Women and Children Issues Restricted
1097	Account."
1098	(2) The account shall be funded by:
1099	(a) contributions deposited into the account in accordance with Section 41-1a-422;
1100	(b) private contributions; and
1101	(c) donations or grants from public or private entities.
1102	(3) Upon appropriation by the Legislature, the department shall distribute funds in the
1103	account to one or more charitable organizations that:
1104	(a) qualify as being tax exempt under Section 501(c)(3) of the Internal Revenue Code
1105	(b) are selected by the owners that, either on an individual or joint basis, own a
1106	controlling interest in a legal entity that is a franchised member of the internationally
1107	recognized national governing body for professional men's basketball in the United States;
1108	(c) are headquartered within the state;
1109	(d) create or support programs that focus on issues affecting women and children
1110	within the state, with an emphasis on health and education; and

1111	(e) have a board of directors that disperses all funds of the organization.
1112	(4) (a) An organization described in Subsection (3) may apply to the department to
1113	receive a distribution in accordance with Subsection (3).
1114	(b) An organization that receives a distribution from the department in accordance with
1115	Subsection (3) shall expend the distribution only to:
1116	(i) create or support programs that focus on issues affecting women and children, with
1117	an emphasis on health and education;
1118	(ii) create or sponsor programs that will benefit residents within the state; and
1119	(iii) pay the costs of issuing or reordering National Professional Men's Basketball
1120	Team Support of Women and Children Issues support special group license plate decals.
1121	(c) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
1122	department may make rules providing procedures for an organization to apply to the
1123	department to receive a distribution under this Subsection (4).
1124	(5) In accordance with Section 63J-1-602.1, appropriations from the account are
1125	nonlapsing.
1126	Section 24. Section 26B-1-303, which is renumbered from Section 62A-1-119 is
1127	renumbered and amended to read:
1128	[62A-1-119]. 26B-1-303. Respite Care Assistance Fund Use of money
1129	Restrictions.
1130	(1) There is created an expendable special revenue fund known as the Respite Care
1131	Assistance Fund.
1132	(2) The fund shall consist of:
1133	(a) gifts, grants, devises, donations, and bequests of real property, personal property, or
1134	services, from any source, made to the fund; and
1135	(b) any additional amounts as appropriated by the Legislature.
1136	(3) The fund shall be administered by the director of the Utah Developmental
1137	Disabilities Council.
1138	(4) The fund money shall be used for the following activities:
1139	(a) to support a respite care information and referral system;
1140	(b) to educate and train caregivers and respite care providers; and
1141	(c) to provide grants to caregivers.

1142	(5) An individual who receives services paid for from the fund shall:
1143	(a) be a resident of Utah; and
1144	(b) be a primary care giver for:
1145	(i) an aging individual; or
1146	(ii) an individual with a cognitive, mental, or physical disability.
1147	(6) The fund money may not be used for:
1148	(a) administrative expenses that are normally provided for by legislative appropriation
1149	or
1150	(b) direct services or support mechanisms that are available from or provided by
1151	another government or private agency.
1152	(7) All interest and other earnings derived from the fund money shall be deposited into
1153	the fund.
1154	(8) The state treasurer shall invest the money in the fund under Title 51, Chapter 7,
1155	State Money Management Act.
1156	Section 25. Section 26B-1-304, which is renumbered from Section 26-1-34 is
1157	renumbered and amended to read:
1158	[26-1-34]. <u>26B-1-304.</u> Restricted account created to fund drug testing for law
1159	enforcement agencies.
1160	(1) There is created within the General Fund a restricted account known as the State
1161	Laboratory Drug Testing Account.
1162	(2) The account consists of a specified portion of fees generated under Subsection
1163	53-3-106(5) from the reinstatement of certain licenses, which shall be deposited in this
1164	account.
1165	(3) The Department of Health shall use funds in this account solely for the costs of
1166	performing drug and alcohol analysis tests for state and local law enforcement agencies, and
1167	may not assess any charge or fee to the law enforcement agencies for whom the analysis tests
1168	are performed.
1169	Section 26. Section 26B-2-101 is enacted to read:
1170	26B-2-101. Clinical services Reserved.
1171	Reserved
1172	Section 27. Section 26B-3-101 is enacted to read:

1173	26B-3-101. Licensing and oversight Reserved.
1174	Reserved
1175	Section 28. Section 26B-4-101 is enacted to read:
1176	26B-4-101. Health care administration Reserved.
1177	Reserved
1178	Section 29. Section 26B-5-101 is enacted to read:
1179	26B-5-101. Health care services Reserved.
1180	Reserved
1181	Section 30. Section 26B-6-101 is enacted to read:
1182	26B-6-101. Long-term services and supports Reserved.
1183	Reserved
1184	Section 31. Section 26B-7-101 is enacted to read:
1185	26B-7-101. Public health, prevention, and epidemiology Reserved.
1186	Reserved
1187	Section 32. Section 26B-8-101 is enacted to read:
1188	26B-8-101. Children, youth, and families Reserved.
1189	Reserved
1190	Section 33. Section 26B-9-101 is enacted to read:
1191	26B-9-101. Miscellaneous provisions Reserved.
1192	Reserved
1193	Section 34. Section 35A-3-103 (Effective 07/01/22) is amended to read:
1194	35A-3-103 (Effective 07/01/22). Department responsibilities.
1195	The department shall:
1196	(1) administer public assistance programs assigned by the Legislature and the
1197	governor;
1198	(2) determine eligibility for public assistance programs in accordance with the
1199	requirements of this chapter;
1200	(3) cooperate with the federal government in the administration of public assistance
1201	programs;
1202	(4) administer state employment services;
1203	(5) provide for the compilation of necessary or desirable information, statistics, and

1204	reports;
1205	(6) perform other duties and functions required by law;
1203	(7) monitor the application of eligibility policy;
1207	(8) develop personnel training programs for effective and efficient operation of the
1208	programs administered by the department;
1209	(9) provide refugee resettlement services in accordance with Section 35A-3-701;
1210	(10) provide child care assistance for children in accordance with Part 2, Office of
1211	Child Care;
1212	(11) provide services that enable an applicant or recipient to qualify for affordable
1213	housing in cooperation with:
1214	(a) the Utah Housing Corporation;
1215	(b) the Housing and Community Development Division; and
1216	(c) local housing authorities;
1217	[(12) in accordance with 42 C.F.R. Sec. 431.10, develop non-clinical eligibility policy
1218	and procedures to implement the eligibility state plan, waivers, and administrative rules
1219	developed and issued by the Department of Health and Human Services for medical assistance
1220	under:]
1221	[(a) Title 26, Chapter 18, Medical Assistance Act; and]
1222	[(b) Title 26, Chapter 40, Utah Children's Health Insurance Act;]
1223	[(13)] (12) administer the Medicaid Eligibility Quality Control function in accordance
1224	with 42 C.F.R. Sec. 431.812; and
1225	[(14)] (13) conduct non-clinical eligibility hearings and issue final decisions in
1226	adjudicative proceedings, including expedited appeals as defined in 42 C.F.R. Sec. 431.224, for
1227	medical assistance eligibility under:
1228	(a) Title 26, Chapter 18, Medical Assistance Act; or
1229	(b) Title 26, Chapter 40, Utah Children's Health Insurance Act.
1230	Section 35. Section 62A-1-104 is amended to read:
1231	62A-1-104. Definitions.
1232	(1) As used in this title:
1233	(a) "Competency evaluation" means the same as that term is defined in Section
1234	77-15-2.

1235	(b) "Concurrence of the board" means agreement by a majority of the members of a
1236	board.
1237	(c) "Department" means the Department of Health and Human Services [established in
1238	Section 62A-1-102] created in Section 26B-1-201.
1239	(d) "Executive director" means the executive director of the department, appointed
1240	under Section [62A-1-108] <u>26B-1-203</u> .
1241	(e) "Forensic evaluator" means the same as that term is defined in Section 77-15-2.
1242	(f) "Stabilization services" means in-home services provided to a child with, or who is
1243	at risk for, complex emotional and behavioral needs, including teaching the child's parent or
1244	guardian skills to improve family functioning.
1245	(g) "System of care" means a broad, flexible array of services and supports that:
1246	(i) serves a child with or who is at risk for complex emotional and behavioral needs;
1247	(ii) is community based;
1248	(iii) is informed about trauma;
1249	(iv) builds meaningful partnerships with families and children;
1250	(v) integrates service planning, service coordination, and management across state and
1251	local entities;
1252	(vi) includes individualized case planning;
1253	(vii) provides management and policy infrastructure that supports a coordinated
1254	network of interdepartmental service providers, contractors, and service providers who are
1255	outside of the department; and
1256	(viii) is guided by the type and variety of services needed by a child with or who is at
1257	risk for complex emotional and behavioral needs and by the child's family.
1258	(2) The definitions provided in Subsection (1) are to be applied in addition to
1259	definitions contained throughout this title that are applicable to specified chapters or parts.
1260	Section 36. Section 62A-1-111.6 is amended to read:
1261	62A-1-111.6. Reallocating unexpended money to designated priority programs
1262	Reporting Limitation.
1263	(1) (a) Beginning fiscal year 2022, the department may:
1264	(i) designate up to three existing programs, as defined in Section 63J-1-102, within the
1265	department as priority programs to receive unrestricted General Fund money that is reallocated

1266	under Subsection (1)(a)(ii); and
1267	(ii) reallocate unexpended, unrestricted General Fund money from a program in one
1268	line item within the department to one or more of the designated priority programs in another
1269	line item within the department.
1270	(b) The department may only reallocate funds under Subsection (1)(a) between
1271	programs as defined by Section 63J-1-102 if the programs are created pursuant to this title.
1272	[(b)] (c) The department shall make any reallocation of unexpended money under
1273	Subsection (1)(a) before the end of the fiscal year in which the money was appropriated.
1274	[(c)] (d) The department may not make a reallocation under this section if the
1275	reallocation:
1276	(i) results in the creation of a new program, benefit, or service;
1277	(ii) results in a significant expansion of:
1278	(A) a program; or
1279	(B) the scope or type of benefit or service already provided; or
1280	(iii) provides funding for a budget request that the Legislature previously declined.
1281	(2) On or before December 1 of each year, the department shall report to the Social
1282	Services Appropriations Subcommittee:
1283	(a) on the department's designation of priority programs to receive the unexpended
1284	money under Subsection (1)(a); and
1285	(b) if applicable, on the department's use, during the prior fiscal year, of unexpended
1286	money reallocated under Subsection (1).
1287	(3) Except in accordance with pay plans developed and adopted as described in
1288	Subsection 63A-17-307(4)(a), the department may not allocate unexpended money under
1289	Subsection (1) for a priority program's personnel costs.
1290	Section 37. Section 62A-15-102 is amended to read:
1291	62A-15-102. Definitions.
1292	As used in this chapter:
1293	(1) "Criminal risk factors" means a person's characteristics and behaviors that:
1294	(a) affect the person's risk of engaging in criminal behavior; and
1295	(b) are diminished when addressed by effective treatment, supervision, and other
1296	support resources, resulting in reduced risk of criminal behavior.

1297	[(2) "Director" means the director of the Division of Substance Abuse and Mental
1298	Health.]
1299	[(3) "Division" means the Division of Substance Abuse and Mental Health established
1300	in Section 62A-15-103.]
1301	(2) "Director" means, as designated by the executive director:
1302	(a) the director appointed by the executive director under Section 62A-15-104; or
1303	(b) the director of the division.
1304	(3) "Division" means:
1305	(a) the Division of Integrated Healthcare created in Section 26B-1-204; or
1306	(b) a division, office, or operation designated by the executive director under
1307	Subsection 26B-1-204(5).
1308	(4) "Local mental health authority" means a county legislative body.
1309	(5) "Local substance abuse authority" means a county legislative body.
1310	(6) "Mental health crisis" means:
1311	(a) a mental health condition that manifests in an individual by symptoms of sufficient
1312	severity that a prudent layperson who possesses an average knowledge of mental health issues
1313	could reasonably expect the absence of immediate attention or intervention to result in:
1314	(i) serious danger to the individual's health or well-being; or
1315	(ii) a danger to the health or well-being of others; or
1316	(b) a mental health condition that, in the opinion of a mental health therapist or the
1317	therapist's designee, requires direct professional observation or intervention.
1318	(7) "Mental health crisis response training" means community-based training that
1319	educates laypersons and professionals on the warning signs of a mental health crisis and how to
1320	respond.
1321	(8) "Mental health crisis services" means an array of services provided to an individual
1322	who experiences a mental health crisis, which may include:
1323	(a) direct mental health services;
1324	(b) on-site intervention provided by a mobile crisis outreach team;
1325	(c) the provision of safety and care plans;
1326	(d) prolonged mental health services for up to 90 days after the day on which an
1327	individual experiences a mental health crisis:

- (e) referrals to other community resources;
- (f) local mental health crisis lines; and
- 1330 (g) the statewide mental health crisis line.
- 1331 (9) "Mental health therapist" means the same as that term is defined in Section 1332 58-60-102.
 - (10) "Mobile crisis outreach team" or "MCOT" means a mobile team of medical and mental health professionals that, in coordination with local law enforcement and emergency medical service personnel, provides mental health crisis services.
 - (11) (a) "Public funds" means federal money received from the [Department of Human Services or the Department of Health] department, and state money appropriated by the Legislature to the [Department of Human Services, the Department of Health] department, a county governing body, or a local substance abuse authority, or a local mental health authority for the purposes of providing substance abuse or mental health programs or services.
 - (b) "Public funds" include federal and state money that has been transferred by a local substance abuse authority or a local mental health authority to a private provider under an annual or otherwise ongoing contract to provide comprehensive substance abuse or mental health programs or services for the local substance abuse authority or local mental health authority. The money maintains the nature of "public funds" while in the possession of the private entity that has an annual or otherwise ongoing contract with a local substance abuse authority or a local mental health authority to provide comprehensive substance abuse or mental health programs or services for the local substance abuse authority or local mental health authority.
 - (c) Public funds received for the provision of services [pursuant to] <u>under</u> substance abuse or mental health service plans may not be used for any other purpose except those authorized in the contract between the local mental health or substance abuse authority and provider for the provision of plan services.
 - (12) "Severe mental disorder" means schizophrenia, major depression, bipolar disorders, delusional disorders, psychotic disorders, and other mental disorders as defined by the division.
- 1357 (13) "Statewide mental health crisis line" means the same as that term is defined in Section 62A-15-1301.

1359	Section 38. Section 62A-15-103 is amended to read:
1360	62A-15-103. Division Creation Responsibilities.
1361	(1) (a) [There is created] The department shall exercise responsibility over the
1362	policymaking functions, regulatory and enforcement powers, rights, duties, and responsibilities
1363	outlined in state law that were previously vested in the Division of Substance Abuse and
1364	Mental Health [within the department, under the administration and general supervision of the
1365	executive director].
1366	(b) The [division] department is the substance abuse authority and the mental health
1367	authority for this state.
1368	(2) The [division] department shall:
1369	(a) (i) educate the general public regarding the nature and consequences of substance
1370	abuse by promoting school and community-based prevention programs;
1371	(ii) render support and assistance to public schools through approved school-based
1372	substance abuse education programs aimed at prevention of substance abuse;
1373	(iii) promote or establish programs for the prevention of substance abuse within the
1374	community setting through community-based prevention programs;
1375	(iv) cooperate with and assist treatment centers, recovery residences, and other
1376	organizations that provide services to individuals recovering from a substance abuse disorder,
1377	by identifying and disseminating information about effective practices and programs;
1378	(v) except as provided in Section 62A-15-103.5, make rules in accordance with Title
1379	63G, Chapter 3, Utah Administrative Rulemaking Act, to develop, in collaboration with public
1380	and private programs, minimum standards for public and private providers of substance abuse
1381	and mental health programs licensed by the department under [Title 62A,] Chapter 2, Licensure
1382	of Programs and Facilities;
1383	(vi) promote integrated programs that address an individual's substance abuse, mental
1384	health, physical health, and criminal risk factors;
1385	(vii) establish and promote an evidence-based continuum of screening, assessment,
1386	prevention, treatment, and recovery support services in the community for individuals with
1387	substance use disorder and mental illness that addresses criminal risk factors;
1388	(viii) evaluate the effectiveness of programs described in this Subsection (2);
1389	(ix) consider the impact of the programs described in this Subsection (2) on:

mental health services;

1390	(A) emergency department utilization;
1391	(B) jail and prison populations;
1392	(C) the homeless population; and
1393	(D) the child welfare system; and
1394	(x) promote or establish programs for education and certification of instructors to
1395	educate individuals convicted of driving under the influence of alcohol or drugs or driving with
1396	any measurable controlled substance in the body;
1397	(b) (i) collect and disseminate information pertaining to mental health;
1398	(ii) provide direction over the state hospital including approval of the state hospital's
1399	budget, administrative policy, and coordination of services with local service plans;
1400	(iii) make rules in accordance with Title 63G, Chapter 3, Utah Administrative
1401	Rulemaking Act, to educate families concerning mental illness and promote family
1402	involvement, when appropriate, and with patient consent, in the treatment program of a family
1403	member; and
1404	(iv) make rules in accordance with Title 63G, Chapter 3, Utah Administrative
1405	Rulemaking Act, to direct that an individual receiving services through a local mental health
1406	authority or the Utah State Hospital be informed about and, if desired by the individual,
1407	provided assistance in the completion of a declaration for mental health treatment in
1408	accordance with Section 62A-15-1002;
1409	(c) (i) consult and coordinate with local substance abuse authorities and local mental
1410	health authorities regarding programs and services;
1411	(ii) provide consultation and other assistance to public and private agencies and groups
1412	working on substance abuse and mental health issues;
1413	(iii) promote and establish cooperative relationships with courts, hospitals, clinics,
1414	medical and social agencies, public health authorities, law enforcement agencies, education and
1415	research organizations, and other related groups;
1416	(iv) promote or conduct research on substance abuse and mental health issues, and
1417	submit to the governor and the Legislature recommendations for changes in policy and
1418	legislation;
1419	(v) receive, distribute, and provide direction over public funds for substance abuse and

1421	(vi) monitor and evaluate programs provided by local substance abuse authorities and
1422	local mental health authorities;
1423	(vii) examine expenditures of local, state, and federal funds;
1424	(viii) monitor the expenditure of public funds by:
1425	(A) local substance abuse authorities;
1426	(B) local mental health authorities; and
1427	(C) in counties where they exist, a private contract provider that has an annual or
1428	otherwise ongoing contract to provide comprehensive substance abuse or mental health
1429	programs or services for the local substance abuse authority or local mental health authority;
1430	(ix) contract with local substance abuse authorities and local mental health authorities
1431	to provide a comprehensive continuum of services that include community-based services for
1432	individuals involved in the criminal justice system, in accordance with division policy, contract
1433	provisions, and the local plan;
1434	(x) contract with private and public entities for special statewide or nonclinical
1435	services, or services for individuals involved in the criminal justice system, according to
1436	division rules;
1437	(xi) review and approve each local substance abuse authority's plan and each local
1438	mental health authority's plan in order to ensure:
1439	(A) a statewide comprehensive continuum of substance abuse services;
1440	(B) a statewide comprehensive continuum of mental health services;
1441	(C) services result in improved overall health and functioning;
1442	(D) a statewide comprehensive continuum of community-based services designed to
1443	reduce criminal risk factors for individuals who are determined to have substance abuse or
1444	mental illness conditions or both, and who are involved in the criminal justice system;
1445	(E) compliance, where appropriate, with the certification requirements in Subsection
1446	(2)(j); and
1447	(F) appropriate expenditure of public funds;
1448	(xii) review and make recommendations regarding each local substance abuse
1449	authority's contract with the local substance abuse authority's provider of substance abuse
1450	programs and services and each local mental health authority's contract with the local mental
1451	health authority's provider of mental health programs and services to ensure compliance with

1452	state and federal law and pol	icy;

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- 1453 (xiii) monitor and ensure compliance with division rules and contract requirements; 1454 and
 - (xiv) withhold funds from local substance abuse authorities, local mental health authorities, and public and private providers for contract noncompliance, failure to comply with division directives regarding the use of public funds, or for misuse of public funds or money;
 - (d) ensure that the requirements of this part are met and applied uniformly by local substance abuse authorities and local mental health authorities across the state;
 - (e) require each local substance abuse authority and each local mental health authority, in accordance with Subsections 17-43-201(5)(b) and 17-43-301(6)(a)(ii), to submit a plan to the division on or before May 15 of each year;
 - (f) conduct an annual program audit and review of each local substance abuse authority and each local substance abuse authority's contract provider, and each local mental health authority and each local mental health authority's contract provider, including:
 - (i) a review and determination regarding whether:
 - (A) public funds allocated to the local substance abuse authority or the local mental health authorities are consistent with services rendered by the authority or the authority's contract provider, and with outcomes reported by the authority's contract provider; and
 - (B) each local substance abuse authority and each local mental health authority is exercising sufficient oversight and control over public funds allocated for substance use disorder and mental health programs and services; and
 - (ii) items determined by the division to be necessary and appropriate;
 - (g) define "prevention" by rule as required under Title 32B, Chapter 2, Part 4, Alcoholic Beverage and Substance Abuse Enforcement and Treatment Restricted Account Act;
 - (h) (i) train and certify an adult as a peer support specialist, qualified to provide peer supports services to an individual with:
 - (A) a substance use disorder;
 - (B) a mental health disorder; or
- (C) a substance use disorder and a mental health disorder;
- (ii) certify a person to carry out, as needed, the division's duty to train and certify an

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1483 adult as a peer support specialist; 1484 (iii) make rules in accordance with Title 63G, Chapter 3, Utah Administrative 1485 Rulemaking Act, that: 1486 (A) establish training and certification requirements for a peer support specialist; 1487 (B) specify the types of services a peer support specialist is qualified to provide; 1488 (C) specify the type of supervision under which a peer support specialist is required to 1489 operate; and 1490 (D) specify continuing education and other requirements for maintaining or renewing 1491 certification as a peer support specialist; and 1492 (iv) make rules in accordance with Title 63G, Chapter 3, Utah Administrative 1493 Rulemaking Act, that: 1494 (A) establish the requirements for a person to be certified to carry out, as needed, the 1495 division's duty to train and certify an adult as a peer support specialist; and 1496 (B) specify how the division shall provide oversight of a person certified to train and 1497 certify a peer support specialist; 1498 (i) except as provided in Section 62A-15-103.5, establish by rule, in accordance with 1499 Title 63G, Chapter 3, Utah Administrative Rulemaking Act, minimum standards and 1500 requirements for the provision of substance use disorder and mental health treatment to an 1501 individual who is incarcerated or who is required to participate in treatment by a court or by the 1502 Board of Pardons and Parole, including: 1503 (i) collaboration with the Department of Corrections and the Utah Substance Use and 1504 Mental Health Advisory Council to develop and coordinate the standards, including standards 1505 for county and state programs serving individuals convicted of class A and class B 1506 misdemeanors; 1507 (ii) determining that the standards ensure available treatment, including the most 1508 current practices and procedures demonstrated by recognized scientific research to reduce 1509 recidivism, including focus on the individual's criminal risk factors; and 1510 (iii) requiring that all public and private treatment programs meet the standards

established under this Subsection (2)(i) in order to receive public funds allocated to the

division, the Department of Corrections, or the Commission on Criminal and Juvenile Justice

for the costs of providing screening, assessment, prevention, treatment, and recovery support;

- (j) except as provided in Section 62A-15-103.5, establish by rule, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the requirements and procedures for the certification of licensed public and private providers, including individuals licensed by the Division of Occupational and Professional Licensing, programs licensed by the department, and health care facilities licensed by the Department of Health, who provide, as part of their practice, substance use disorder and mental health treatment to an individual involved in the criminal justice system, including:
- (i) collaboration with the Department of Corrections, the Utah Substance Use and Mental Health Advisory Council, and the Utah Association of Counties to develop, coordinate, and implement the certification process;
- (ii) basing the certification process on the standards developed under Subsection (2)(i) for the treatment of an individual involved in the criminal justice system; and
- (iii) the requirement that a public or private provider of treatment to an individual involved in the criminal justice system shall obtain certification on or before July 1, 2016, and shall renew the certification every two years, in order to qualify for funds allocated to the division, the Department of Corrections, or the Commission on Criminal and Juvenile Justice on or after July 1, 2016;
- (k) collaborate with the Commission on Criminal and Juvenile Justice to analyze and provide recommendations to the Legislature regarding:
 - (i) pretrial services and the resources needed to reduce recidivism;
- (ii) county jail and county behavioral health early-assessment resources needed for an offender convicted of a class A or class B misdemeanor; and
- (iii) the replacement of federal dollars associated with drug interdiction law enforcement task forces that are reduced;
- (l) (i) establish performance goals and outcome measurements for all treatment programs for which minimum standards are established under Subsection (2)(i), including recidivism data and data regarding cost savings associated with recidivism reduction and the reduction in the number of inmates, that are obtained in collaboration with the Administrative Office of the Courts and the Department of Corrections; and
- (ii) collect data to track and determine whether the goals and measurements are being attained and make this information available to the public;

- (m) in the division's discretion, use the data to make decisions regarding the use of funds allocated to the division, the Administrative Office of the Courts, and the Department of Corrections to provide treatment for which standards are established under Subsection (2)(i);
- (n) annually, on or before August 31, submit the data collected under Subsection (2)(k) to the Commission on Criminal and Juvenile Justice, which shall compile a report of findings based on the data and provide the report to the Judiciary Interim Committee, the Health and Human Services Interim Committee, the Law Enforcement and Criminal Justice Interim Committee, and the related appropriations subcommittees; and
- (o) consult and coordinate with the Department of Health and the Division of Child and Family Services to develop and manage the operation of a program designed to reduce substance abuse during pregnancy and by parents of a newborn child that includes:
- (i) providing education and resources to health care providers and individuals in the state regarding prevention of substance abuse during pregnancy;
- (ii) providing training to health care providers in the state regarding screening of a pregnant woman or pregnant minor to identify a substance abuse disorder; and
- (iii) providing referrals to pregnant women, pregnant minors, or parents of a newborn child in need of substance abuse treatment services to a facility that has the capacity to provide the treatment services.
- (3) In addition to the responsibilities described in Subsection (2), the division shall, within funds appropriated by the Legislature for this purpose, implement and manage the operation of a firearm safety and suicide prevention program, in consultation with the Bureau of Criminal Identification created in Section 53-10-201, including:
- (a) coordinating with the Department of Health, local mental health and substance abuse authorities, a nonprofit behavioral health advocacy group, and a representative from a Utah-based nonprofit organization with expertise in the field of firearm use and safety that represents firearm owners, to:
- (i) produce and periodically review and update a firearm safety brochure and other educational materials with information about the safe handling and use of firearms that includes:
 - (A) information on safe handling, storage, and use of firearms in a home environment;
 - (B) information about at-risk individuals and individuals who are legally prohibited

1576	from possessing firearms;
1577	(C) information about suicide prevention awareness; and
1578	(D) information about the availability of firearm safety packets;
1579	(ii) procure cable-style gun locks for distribution under this section;
1580	(iii) produce a firearm safety packet that includes the firearm safety brochure and the
1581	cable-style gun lock described in this Subsection (3); and
1582	(iv) create a suicide prevention education course that:
1583	(A) provides information for distribution regarding firearm safety education;
1584	(B) incorporates current information on how to recognize suicidal behaviors and
1585	identify individuals who may be suicidal; and
1586	(C) provides information regarding crisis intervention resources;
1587	(b) distributing, free of charge, the firearm safety packet to the following persons, who
1588	shall make the firearm safety packet available free of charge:
1589	(i) health care providers, including emergency rooms;
1590	(ii) mobile crisis outreach teams;
1591	(iii) mental health practitioners;
1592	(iv) other public health suicide prevention organizations;
1593	(v) entities that teach firearm safety courses;
1594	(vi) school districts for use in the seminar, described in Section 53G-9-702, for parents
1595	of students in the school district; and
1596	(vii) firearm dealers to be distributed in accordance with Section 76-10-526;
1597	(c) creating and administering a rebate program that includes a rebate that offers
1598	between \$10 and \$200 off the purchase price of a firearm safe from a participating firearms
1599	dealer or a person engaged in the business of selling firearm safes in Utah, by a Utah resident;
1600	(d) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act,
1601	making rules that establish procedures for:
1602	(i) producing and distributing the suicide prevention education course and the firearm
1603	safety brochures and packets;
1604	(ii) procuring the cable-style gun locks for distribution; and
1605	(iii) administering the rebate program; and
1606	(e) reporting to the Health and Human Services Interim Committee regarding

implementation and success of the firearm safety program and suicide prevention education course at or before the November meeting each year.

- (4) (a) The division may refuse to contract with and may pursue legal remedies against any local substance abuse authority or local mental health authority that fails, or has failed, to expend public funds in accordance with state law, division policy, contract provisions, or directives issued in accordance with state law.
- (b) The division may withhold funds from a local substance abuse authority or local mental health authority if the authority's contract provider of substance abuse or mental health programs or services fails to comply with state and federal law or policy.
- (5) (a) Before reissuing or renewing a contract with any local substance abuse authority or local mental health authority, the division shall review and determine whether the local substance abuse authority or local mental health authority is complying with the oversight and management responsibilities described in Sections 17-43-201, 17-43-203, 17-43-303, and 17-43-309.
- (b) Nothing in this Subsection (5) may be used as a defense to the responsibility and liability described in Section 17-43-303 and to the responsibility and liability described in Section 17-43-203.
- (6) In carrying out the division's duties and responsibilities, the division may not duplicate treatment or educational facilities that exist in other divisions or departments of the state, but shall work in conjunction with those divisions and departments in rendering the treatment or educational services that those divisions and departments are competent and able to provide.
- (7) The division may accept in the name of and on behalf of the state donations, gifts, devises, or bequests of real or personal property or services to be used as specified by the donor.
- (8) The division shall annually review with each local substance abuse authority and each local mental health authority the authority's statutory and contract responsibilities regarding:
 - (a) use of public funds;
- (b) oversight of public funds; and
- (c) governance of substance use disorder and mental health programs and services.

1638	(9) The Legislature may refuse to appropriate funds to the division upon the division's
1639	failure to comply with the provisions of this part.
1640	(10) If a local substance abuse authority contacts the division under Subsection
1641	17-43-201(10) for assistance in providing treatment services to a pregnant woman or pregnant
1642	minor, the division shall:
1643	(a) refer the pregnant woman or pregnant minor to a treatment facility that has the
1644	capacity to provide the treatment services; or
1645	(b) otherwise ensure that treatment services are made available to the pregnant woman
1646	or pregnant minor.
1647	(11) The division shall employ a school-based mental health specialist to be housed at
1648	the State Board of Education who shall work with the State Board of Education to:
1649	(a) provide coordination between a local education agency and local mental health
1650	authority;
1651	(b) recommend evidence-based and evidence informed mental health screenings and
1652	intervention assessments for a local education agency; and
1653	(c) coordinate with the local community, including local departments of health, to
1654	enhance and expand mental health related resources for a local education agency.
1655	Section 39. Section 62A-15-104 is amended to read:
1656	62A-15-104. Director Qualifications.
1657	[(1) The director of the division shall be appointed by the executive director.]
1658	(1) The executive director may appoint an individual to carry out all or part of the
1659	duties and responsibilities of the director described in this part.
1660	(2) [The] If the executive director appoints an individual under Subsection (1), the
1661	director shall have a bachelor's degree from an accredited university or college, be experienced
1662	in administration, and be knowledgeable in matters concerning substance abuse and mental
1663	health.
1664	[(3) The director is the administrative head of the division.]
1665	Section 40. Section 63I-2-226 is amended to read:
1666	63I-2-226. Repeal dates, Title 26.
1667	(1) Subsection 26-1-7(1)(c), in relation to the Air Ambulance Committee, is repealed
1668	July 1, 2024.

- 1669 (2) Section 26-4-6.1 is repealed January 1, 2022.
- 1670 (3) Section 26-6-41, in relation to termination of public health emergency powers
- pertaining to COVID-19, is repealed on July 1, 2021.
- 1672 (4) Subsection 26-7-8(3) is repealed January 1, 2027.
- 1673 (5) Section 26-8a-107 is repealed July 1, 2024.
- 1674 (6) Subsection 26-8a-203(3)(a)(i) is repealed January 1, 2023.
- 1675 (7) Section 26-8a-211 is repealed July 1, 2023.
- 1676 (8) In relation to the Air Ambulance Committee, on July 1, 2024, Subsection
- 1677 26-8a-602(1)(a) is amended to read:

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- 1678 "(a) provide the patient or the patient's representative with the following information 1679 before contacting an air medical transport provider:
- (i) which health insurers in the state the air medical transport provider contracts with;
- 1681 (ii) if sufficient data is available, the average charge for air medical transport services 1682 for a patient who is uninsured or out of network; and
 - (iii) whether the air medical transport provider balance bills a patient for any charge not paid by the patient's health insurer; and".
- 1685 (9) Subsection 26-18-2.4(3)(e) is repealed January 1, 2023.
- 1686 (10) Subsection 26-18-411(8), related to reporting on the health coverage improvement program, is repealed January 1, 2023.
- 1688 (11) Subsection 26-18-420(5), related to reporting on coverage for in vitro fertilization 1689 and genetic testing, is repealed July 1, 2030.
 - (12) In relation to the Air Ambulance Committee, July 1, 2024, Subsection 26-21-32(1)(a) is amended to read:
 - "(a) provide the patient or the patient's representative with the following information before contacting an air medical transport provider:
 - (i) which health insurers in the state the air medical transport provider contracts with;
- 1695 (ii) if sufficient data is available, the average charge for air medical transport services 1696 for a patient who is uninsured or out of network; and
- 1697 (iii) whether the air medical transport provider balance bills a patient for any charge 1698 not paid by the patient's health insurer; and".
- 1699 (13) Subsection 26-33a-106.1(2)(a) is repealed January 1, 2023.

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1700 (14) Title 26, Chapter 46, Utah Health Care Workforce Financial Assistance Program, 1701 is repealed July 1, 2027. (15) Subsection 26-61-202(4)(b) is repealed January 1, 2022. 1702 (16) Subsection 26-61-202(5) is repealed January 1, 2022. 1703 1704 (17) Section 26A-1-130, in relation to termination of public health emergency powers 1705 pertaining to COVID-19, is repealed on July 1, 2021. 1706 [(18) Section 26B-1-201.1 is repealed July 1, 2022.] 1707 Section 41. Repealer. 1708 This bill repeals: 1709 Section 26-1-1, Title cited as "Utah Health Code." 1710 Section 26-1-3, Purpose of title -- Consolidation of health functions into single state 1711 agency. 1712 Section 26B-1-101, Title. 1713 Section 62A-1-101, Short title. 1714 Section 62A-1-102, Department of Human Services -- Creation. 1715 Section 62A-5-304, Limited admission of persons convicted of felony offenses. 1716 Section 42. Effective date. This bill takes effect on July 1, 2022. 1717