MENTAL HEALTH TREATMENT ACCESS AMENDMENTS
2020 GENERAL SESSION
STATE OF UTAH
Chief Sponsor: Steve Eliason
Senate Sponsor:
LONG TITLE
Committee Note:
The Health and Human Services Interim Committee recommended this bill.
Legislative Vote: 12 voting for 0 voting against 5 absent
General Description:
This bill modifies and enacts provisions relating to mental health treatment access.
Highlighted Provisions:
This bill:
defines terms;
 requires the Forensic Mental Health Coordinating Council to study and provide
recommendations to the Legislature regarding the long-term need for adult beds at
the Utah State Hospital;
requires the Division of Substance Abuse and Mental Health, within the Department
of Human Services, to:
 set standards for certification of assertive community outreach treatment teams
(ACOTTs);
 make rules outlining the responsibilities of ACOTTs;
 award a grant for the development of one ACOTT; and
• implement and manage a housing assistance program for certain individuals
released from the Utah State Hospital; and
► makes technical changes



28	Money Appropriated in this Bill:
29	None
30	Other Special Clauses:
31	None
32	Utah Code Sections Affected:
33	AMENDS:
34	62A-15-605, as last amended by Laws of Utah 2015, Chapter 403
35	63I-1-262, as last amended by Laws of Utah 2019, Chapters 246, 257, 440 and last
36	amended by Coordination Clause, Laws of Utah 2019, Chapter 246
37	ENACTS:
38	62A-15-1701, Utah Code Annotated 1953
39	62A-15-1702, Utah Code Annotated 1953
40	62A-15-1703, Utah Code Annotated 1953
41	62A-15-1704, Utah Code Annotated 1953
43 44 45	Be it enacted by the Legislature of the state of Utah: Section 1. Section 62A-15-605 is amended to read: 62A 15 605 Forensia Montal Health Coordinating Council Fetablishment and
45 46	62A-15-605. Forensic Mental Health Coordinating Council Establishment and
46 47	purpose. (1) There is established the Ferencia Montal Health Coordinating Council composed of
47 40	(1) There is established the Forensic Mental Health Coordinating Council composed of the following members:
48 49	(a) the director of the Division of Substance Abuse and Mental Health or the director's
1 9	appointee;
51	(b) the superintendent of the state hospital or the superintendent's appointee;
52	(c) the executive director of the Department of Corrections or the executive director's
53	appointee;
54	(d) a member of the Board of Pardons and Parole or its appointee;
55	(e) the attorney general or the attorney general's appointee;
56	(f) the director of the Division of Services for People with Disabilities or the director's
57	appointee;
58	(g) the director of the Division of Juvenile Justice Services or the director's appointee;

89

59 (h) the director of the Commission on Criminal and Juvenile Justice or the director's 60 appointee; 61 (i) the state court administrator or the administrator's appointee: 62 (i) the state juvenile court administrator or the administrator's appointee: 63 (k) a representative from a local mental health authority or an organization, excluding 64 the state hospital that provides mental health services under contract with the Division of 65 Substance Abuse and Mental Health or a local mental health authority, as appointed by the 66 director of the division: 67 (1) the executive director of the Utah Developmental Disabilities Council or the 68 director's appointee; and 69 (m) other individuals, including individuals from appropriate advocacy organizations 70 with an interest in the mission described in Subsection (3), as appointed by the members 71 described in Subsections (1)(a) through (1). (2) A member may not receive compensation or benefits for the member's service, but 72 73 may receive per diem and travel expenses in accordance with: 74 (a) Section 63A-3-106; 75 (b) Section 63A-3-107; and 76 (c) rules made by the Division of Finance pursuant to Sections 63A-3-106 and 77 63A-3-107. (3) The purpose of the Forensic Mental Health Coordinating Council is to: 78 79 (a) advise the director regarding the state hospital admissions policy for individuals in 80 the custody of the Department of Corrections; 81 (b) develop policies for coordination between the division and the Department of 82 Corrections; 83 (c) advise the executive director of the Department of Corrections regarding 84 department policy related to the care of individuals in the custody of the Department of 85 Corrections who are mentally ill; 86 (d) promote communication between and coordination among all agencies dealing with 87 individuals with an intellectual disability or mental illness who become involved in the civil 88 commitment system or in the criminal or juvenile justice system;

(e) study, evaluate, and recommend changes to laws and procedures relating to

90	individuals with an intellectual disability or mental illness who become involved in the civil
91	commitment system or in the criminal or juvenile justice system;
92	(f) identify and promote the implementation of specific policies and programs to deal
93	fairly and efficiently with individuals with an intellectual disability or mental illness who
94	become involved in the civil commitment system or in the criminal or juvenile justice system;
95	[and]
96	(g) promote judicial education relating to individuals with an intellectual disability or
97	mental illness who become involved in the civil commitment system or in the criminal or
98	juvenile justice system[-]; and
99	(h) study the long-term need for adult patient beds at the state hospital, including:
100	(i) the total number of beds currently in use in the adult general psychiatric unit of the
101	state hospital;
102	(ii) the current bed capacity at the state hospital;
103	(iii) the projected total number of beds needed in the adult general psychiatric unit of
104	the state hospital over the next three, five, and 10 years based on:
105	(A) the state's current and projected population growth;
106	(B) current access to mental health resources in the community; and
107	(C) any other factors the Forensic Mental Health Coordinating Council finds relevant
108	to projecting the total number of beds; and
109	(iv) the cost associated with the projected total number of beds described in Subsection
110	(3)(h)(iii).
111	(4) The Forensic Mental Health Coordinating Council shall report the results of the
112	study described in Subsection (3)(h) and any recommended changes to laws or procedures
113	based on the results to the Health and Human Services Interim Committee before November 30
114	of each year.
115	Section 2. Section 62A-15-1701 is enacted to read:
116	Part 17. Utah Assertive Community Outreach Treatment Team Act
117	<u>62A-15-1701.</u> Definitions.
118	As used in this part:
119	(1) "ACOTT certification" means the certification created in this part for ACOTT
120	personnel and assertive community outreach treatment.

121	(2) "ACOTT personnel" means a licensed psychiatrist or mental health therapist, or
122	another individual, as determined by the division, who is part of an ACOTT.
123	(3) "Assertive community outreach treatment team" or "ACOTT" means a mobile team
124	of medical and mental health professionals that provides assertive community outreach
125	treatment and, based on the individual circumstances of each case, coordinates with other
126	medical providers and appropriate community resources.
127	(4) (a) "Assertive community outreach treatment" means mental health services and
128	on-site intervention that a person renders to an individual with a mental illness.
129	(b) "Assertive community outreach treatment" includes the provision of assessment
130	and treatment plans, rehabilitation, support services, and referrals to other community
131	resources.
132	(5) "Mental health therapist" means the same as that term is defined in Section
133	<u>58-60-102.</u>
134	(6) "Mental illness" means the same as that term is defined in Section 62A-15-602.
135	(7) "Psychiatrist" means the same as that term is defined in Section 62A-15-1601.
136	Section 3. Section 62A-15-1702 is enacted to read:
137	62A-15-1702. Department and division duties ACOTT license creation.
138	(1) To promote the availability of assertive community outreach treatment, the division
139	shall make rules, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking
140	Act, that create a certificate for ACOTT personnel and ACOTTs, that includes:
141	(a) the standards the division establishes under Subsection (2); and
142	(b) guidelines for:
143	(i) required training and experience of ACOTT personnel; and
144	(ii) the coordination of assertive community outreach treatment and other community
145	resources.
146	(2) (a) The division shall:
147	(i) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act,
148	make rules that establish standards that an applicant is required to meet to qualify for the
149	ACOTT certification described in Subsection (1); and
150	(ii) create a statewide ACOTT plan that:
151	(A) identifies statewide assertive community outreach treatment needs, objectives, and

152	priorities; and
153	(B) identifies the equipment, facilities, personnel training, and other resources
154	necessary to provide assertive community outreach treatment.
155	(b) The division may delegate the ACOTT plan requirement described in Subsection
156	(2)(a)(ii) to a contractor with whom the division contracts to provide assertive community
157	outreach treatment.
158	Section 4. Section 62A-15-1703 is enacted to read:
159	62A-15-1703. Grants for development of an ACOTT.
160	(1) The division shall award grants for the development of one ACOTT to provide
161	assertive community outreach treatment to individuals in the state.
162	(2) The division shall prioritize the award of a grant described in Subsection (1) to
163	entities, based on:
164	(a) the number of individuals the proposed ACOTT will serve; and
165	(b) the percentage of matching funds the entity will provide to develop the proposed
166	ACOTT.
167	(3) An entity does not need to have resources already in place to be awarded a grant
168	described in Subsection (1).
169	(4) The division shall make rules, in accordance with Title 63G, Chapter 3, Utah
170	Administrative Rulemaking Act, for the application and award of the grants described in
171	Subsection (1).
172	Section 5. Section 62A-15-1704 is enacted to read:
173	62A-15-1704. Housing assistance program for individuals discharged from the
174	Utah State Hospital and receiving assertive community outreach treatment.
175	(1) (a) The division shall, within funds appropriated by the Legislature for this purpose,
176	implement and manage the operation of a housing assistance program in consultation with the
177	Utah State Hospital, established in Section 62A-15-601, and one or more housing authorities,
178	associations of governments, or nonprofit entities.
179	(b) The housing assistance program shall provide the housing assistance described in
180	Subsection (1)(c) to individuals:
181	(i) who are discharged from the Utah State Hospital; and
182	(ii) who the division determines would benefit from assertive community outreach

183	treatment.
184	(c) The housing assistance provided under the housing assistance program may
185	include:
186	(i) subsidizing rent payments for housing;
187	(ii) subsidizing the provision of temporary or transitional housing; or
188	(iii) providing money for one-time housing barrier assistance, including rental housing
189	application fees, utility hookup fees, or rental housing security deposits.
190	(2) The division shall make rules, in accordance with Title 63G, Chapter 3, Utah
191	Administrative Rulemaking Act, to establish procedures for the operation of the housing
192	assistance program described in Subsection (1).
193	(3) The division shall report to the Health and Human Services Interim Committee
194	each year before November 30 regarding:
195	(a) the entities the division consulted with under Subsection (1)(a);
196	(b) the number of individuals who are benefitting from the housing assistance program
197	described in Subsection (1);
198	(c) the type of housing assistance provided under the housing assistance program
199	described in Subsection (1);
200	(d) the average monthly dollar amount provided to individuals under the housing
201	assistance program described in Subsection (1); and
202	(e) recommendations regarding improvements or changes to the housing assistance
203	program described in Subsection (1).
204	Section 6. Section 63I-1-262 is amended to read:
205	63I-1-262. Repeal dates, Title 62A.
206	(1) Subsections 62A-1-120(8)(g), (h), and (i) relating to completion of premarital
207	counseling or education under Section 30-1-34 are repealed July 1, 2023.
208	(2) Section 62A-3-209 is repealed July 1, 2023.
209	(3) Section 62A-4a-202.9 is repealed December 31, 2021.
210	(4) Section 62A-4a-213 is repealed July 1, 2024.
211	(5) Section 62A-15-114 is repealed December 31, 2021.
212	(6) Subsections 62A-15-116(1) and (4), the language that states "In consultation with
213	the SafeUT and School Safety Commission, established in Section 53B-17-1203," is repealed

214	January 1, 2023.
215	(7) Subsections 62A-15-605(3)(h) and (4) relating to the study of long-term needs for
216	adult beds in the state hospital are repealed July 1, 2022.
217	[(7)] (8) Subsections 62A-15-1100(1) and 62A-15-1101[(8)](9), in relation to the Utah
218	Substance Use and Mental Health Advisory Council, are repealed January 1, 2023.
219	[(8)] (9) In relation to the Mental Health Crisis Line Commission, on July 1, 2023:
220	(a) Subsections 62A-15-1301(1) and 62A-15-1401(1) are repealed;
221	(b) Subsection 62A-15-1302(1)(b), the language that states "and in consultation with
222	the commission" is repealed;
223	(c) Section 62A-15-1303, the language that states "In consultation with the
224	commission," is repealed; and
225	(d) Subsection 62A-15-1402(2)(a), the language that states "With recommendations
226	from the commission," is repealed.