

# UTAH STATE BULLETIN

OFFICIAL NOTICES OF UTAH STATE GOVERNMENT  
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Nancy L. Lancaster, Managing Editor

The *Utah State Bulletin (Bulletin)* is an official noticing publication of the executive branch of Utah state government. The Office of Administrative Rules, part of the Department of Government Operations, produces the *Bulletin* under authority of Section 63G-3-402.

The Portable Document Format (PDF) version of the *Bulletin* is the official version. The PDF version of this issue is available at <https://rules.utah.gov/>. Any discrepancy between the PDF version and other versions will be resolved in favor of the PDF version.

Inquiries concerning the substance or applicability of an administrative rule that appears in the *Bulletin* should be addressed to the contact person for the rule. Questions about the *Bulletin* or the rulemaking process may be addressed to: Office of Administrative Rules, PO Box 141007, Salt Lake City, Utah 84114-1007, telephone 801-957-7110. Additional rulemaking information and electronic versions of all administrative rule publications are available at <https://rules.utah.gov/>.

The information in this *Bulletin* is summarized in the *Utah State Digest (Digest)* of the same volume and issue number. The *Digest* is available by e-mail subscription or online. Visit <https://rules.utah.gov/> for additional information.

Office of Administrative Rules, Salt Lake City 84114

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# EXECUTIVE DOCUMENTS

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Under authority granted by the Utah Constitution and various federal and state statutes, the Governor periodically issues **EXECUTIVE DOCUMENTS**, which can be categorized as either Executive Orders, Proclamations, and Declarations. Executive Orders set policy for the executive branch; create boards and commissions; provide for the transfer of authority; or otherwise interpret, implement, or give administrative effect to a provision of the Constitution, state law or executive policy. Proclamations call special or extraordinary legislative sessions; designate classes of cities; publish states-of-emergency; promulgate other official formal public announcements or functions; or publicly avow or cause certain matters of state government to be made generally known. Declarations designate special days, weeks or other time periods; call attention to or recognize people, groups, organizations, functions, or similar actions having a public purpose; or invoke specific legislative purposes (such as the declaration of an agricultural disaster).

The Governor's Office staff files **EXECUTIVE DOCUMENTS** that have legal effect with the Office of Administrative Rules for publication and distribution.

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## PROCLAMATION

**WHEREAS**, since the close of the 2025 General Session of the 66th Legislature of the state of Utah, certain matters have arisen which require immediate legislative attention; and

**WHEREAS**, Article VII, Section 6 of the Constitution of the state of Utah provides that the governor may, by proclamation, convene the Senate into Extraordinary Session; and

**NOW, THEREFORE**, I, Spencer J. Cox, governor of the state of Utah, by virtue of the authority vested in me by the Constitution and Laws of the state of Utah, do by this Proclamation call the Senate only of the 66th Legislature of the state of Utah into the Seventh Extraordinary Session at the Utah State Capitol in Salt Lake City, Utah, on the 19th day of November 2025, at 4:00 p.m., for the following purpose:

For the Senate to consent to appointments made by the Governor to positions within state government of the state of Utah since the close of the 2025 General Session of the Legislature of the state of Utah.

**IN TESTIMONY WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the state of Utah. Done at the Utah State Capitol in Salt Lake City, Utah, this 18th day of November 2025.

(State Seal)

Spencer J. Cox  
Governor

ATTEST:

Deidre M. Henderson  
Lieutenant Governor

2025-07E

**End of the Executive Documents Section**

## NOTICES OF PROPOSED RULES

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A state agency may file a **PROPOSED RULE** when it determines the need for a substantive change to an existing rule. With a **NOTICE OF PROPOSED RULE**, an agency may create a new rule, amend an existing rule, repeal an existing rule, or repeal an existing rule and reenact a new rule. Filings received between November 01, 2025, 12:00 a.m., and November 14, 2025, 11:59 p.m. are included in this, the December 01, 2025, issue of the *Utah State Bulletin*.

In this publication, each **PROPOSED RULE** is preceded by a **RULE ANALYSIS**. This analysis provides summary information about the **PROPOSED RULE** including the name of a contact person, anticipated cost impact of the rule, and legal cross-references.

Following the **RULE ANALYSIS**, the text of the **PROPOSED RULE** is usually printed. New rules or additions made to existing rules are underlined (example). Deletions made to existing rules are struck out with brackets surrounding them (~~example~~). Rules being repealed are completely struck out. A row of dots in the text between paragraphs (. . . . .) indicates that unaffected text from within a section was removed to conserve space. Unaffected sections are not usually printed. If a **PROPOSED RULE** is too long to print, the Office of Administrative Rules may include only the **RULE ANALYSIS**. A copy of each rule that is too long to print is available from the filing agency or from the Office of Administrative Rules.

The law requires that an agency accept public comment on **PROPOSED RULES** published in this issue of the *Utah State Bulletin* until at least December 31, 2025. The agency may accept comment beyond this date and will indicate the last day the agency will accept comment in the **RULE ANALYSIS**. The agency may also hold public hearings. Additionally, citizens or organizations may request the agency hold a hearing on a specific **PROPOSED RULE**. Section 63G-3-302 requires that a hearing request be received by the agency proposing the rule "in writing not more than 15 days after the publication date of the proposed rule."

From the end of the public comment period through March 31, 2026, the agency may notify the Office of Administrative Rules that it wants to make the **PROPOSED RULE** effective. The agency sets the effective date. The date may be no fewer than seven calendar days after the close of the public comment period nor more than 120 days after the publication date of this issue of the *Utah State Bulletin*. Alternatively, the agency may file a **CHANGE IN PROPOSED RULE** in response to comments received. If the Office of Administrative Rules does not receive a **NOTICE OF EFFECTIVE DATE** or a **CHANGE IN PROPOSED RULE**, the **PROPOSED RULE** lapses.

The public, interest groups, and governmental agencies are invited to review and comment on **PROPOSED RULES**. *Comment may be directed to the contact person identified on the **RULE ANALYSIS** for each rule.*

**PROPOSED RULES** are governed by Section 63G-3-301, Rule R15-2, and Sections R15-4-3, R15-4-4, R15-4-5a, R15-4-9, and R15-4-10.

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**The Proposed Rules Begin on the Following Page**



**NOTICE OF SUBSTANTIVE CHANGE****TYPE OF FILING:** Amendment**Rule or section number:****R68-1****Filing ID:** 57667**Agency Information**

1. Title catchline:		Agriculture and Food, Plant Industry	
Building:		Taylorsville State Office Building, South Building, Floor 2	
Street address:		4315 S 2700 W	
City, state:		Taylorsville, UT	
Mailing address:		PO Box 146500	
City, state, and zip:		Salt Lake City, UT 84114-6500	
Contact persons:			
Name:		Phone:	Email:
Amber Brown		385-245-5222	Ambermbrown@utah.gov
Camille Knudson		801-597-6010	CamilleK@utah.gov
Robert Hougaard		801-982-2305	Rhougaard@Utah.gov
Please address questions regarding information on this notice to the persons listed above.			

**General Information**

<b>2. Rule or section catchline:</b>
R68-1. Utah Bee Inspection Act Governing Inspection of Bees
<b>4. Purpose of the new rule or reason for the change:</b>
The Division of Plant Industry (division) recently conducted a comprehensive review of administrative rules to identify redundant information due to information already in Title 4, Chapter 11, Utah Bee Inspection Act.
The review determined this rule needed to be amended to align with the standards in the Rulewriting Manual for UTah, and the removing redundant information found in the statute.
<b>5. Summary of the new rule or change:</b>
The proposed changes streamline this rule by removing redundant information from both the registration and the salvage operations sections.
Additionally, the revisions ensure clarity and consistency throughout this rule by aligning it with the Rulewriting Manual for Utah. The majority of the proposed changes are technical due to removing redundant information and rewriting to enhance clarity.

**Fiscal Information**

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
The proposed changes will not have an impact on the state's budget because the requirements are not changing.
<b>B. Local governments:</b>
The proposed changes will not have an impact on local governments because the requirements are not changing.
<b>C. Small businesses</b> ("small business" means a business employing 1-49 persons):
The proposed changes will not have an impact on small businesses because the requirements are not changing.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

The proposed changes will not have an impact on non-small businesses because the requirements are not changing.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The proposed changes will not have an impact on other persons because the requirements are not changing.

**F. Compliance costs for affected persons:**

The compliance costs are not changing.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Commissioner of the Department of Agriculture and Food, Kelly Pehrson, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 4-11-103

**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.****A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

**Agency head or designee and title:**

Kelly Pehrson, Commissioner

**Date:**

11/14/2025/

**R68. Agriculture and Food, Plant Industry.****R68-1. Utah Bee Inspection Act Governing Inspection of Bees.****R68-1-1. Authority.**

~~[Promulgated under the authority of]~~Section 4-11-103 authorizes this rule.

**R68-1-2. Registration.**

(1) Each ~~[very owner or]~~ person who keeps ~~[coming into possession of one or more colonies of]~~ bees ~~[within the State of]~~ in Utah shall register with the ~~[D]~~ department ~~[of Agriculture and Food in accordance with the provisions in]~~ pursuant to Section 4-11-104.

(2) The ~~[Utah D]~~ department ~~[of Agriculture and Food]~~ may waive the registration fee for youth non-profit groups using hives for educational purposes.

**R68-1-3. Apiary Identification.**

(1) A bee owner shall identify ~~[E]~~ each apiary location ~~[shall be identified]~~ by a sign showing the owner's registration number issued by the ~~[Utah D]~~ department ~~[of Agriculture and Food]~~, unless the apiary is located on property owned by the beekeeper.

(2)(a) The sign shall display the registration number ~~[shall]~~ which includes:

(a) the text to be at least one inch in height;

(b) easily readable; and

(c) displaying ~~[ed]~~ it in a conspicuous location in the apiary; or similar identification conspicuously displayed on one or more hive bodies within the apiary.

(b) The department shall consider ~~[A]~~ any apiary not so identified ~~[shall be considered]~~ as abandoned and shall be subject to seizure and destruction as provided for in Section 4-11-114.

**R68-1-4. Assistance in Locating Apiaries.**

(1) All beekeepers shall personally assist the department or county bee inspectors in locating their apiaries~~;~~ or provide accurate and detailed information as to the location of all bee hives under their control or possession.

(2) Bee inspectors shall make a good faith effort to contact the beekeeper ~~[prior to]~~ before an inspection.

**R68-1-5. Salvage Operations.**

~~[+]~~ A bee owner shall perform salvage operations with respect to ~~[wax,]~~ hives, and appliances from diseased colonies ~~[shall be performed in a tightly screened enclosure]~~ using the following procedure:

~~[a]~~ (1) frames ~~[and]~~ with comb ~~[held for at least 30 minutes in boiling water (212 degrees F) before any wax is]~~ are removed and destroyed either by burning or deep burial; and

~~[—]~~ b) after removal from the boiling water the frames are destroyed or boiled for a minimum of 20 minutes in a solution of lye water containing no less than 10 pounds of lye (Sodium Hydroxide) for each 100 gal. of water; and]

~~[e]~~ (2) hive bodies, supers, covers, ~~[and]~~ bottom boards, and frames without comb are thoroughly scorched ~~[or boiled]~~ for a minimum of 20 minutes ~~[in the lye water solution]~~ using an open flame torch.

**KEY: beekeeping, locating apiaries, salvage operations, identification**

Date of Last Change: 2025 ~~[November 23, 2015]~~

Notice of Continuation: March 5, 2025

Authorizing, and Implemented or Interpreted Law: 4-11-103

**NOTICE OF SUBSTANTIVE CHANGE**

TYPE OF FILING: Amendment

Rule or section number:

**R82-1-105**

Filing ID: 57665

**Agency Information**

<b>1. Title catchline:</b>	Alcoholic Beverage Services, Administration	
<b>Building:</b>	Administration building	
<b>Street address:</b>	1625 S 900 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	1625 S 900 W	
<b>City, state and zip:</b>	Salt Lake City, UT 84104	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Brian Swan	801-707-1292	bswan@utah.gov

Please address questions regarding information on this notice to the persons listed above.

### General Information

#### 2. Rule or section catchline:

R82-1-105. Label Approvals

#### 4. Purpose of the new rule or reason for the change:

The purpose of this filing is to better accord with Alcohol and Tobacco Tax and Trade Bureau (ATTB) labeling requirements and to issue a technical correction.

#### 5. Summary of the new rule or change:

This amendment changes the requirement that alcoholic beverage labels require the statement of alcohol to be in capital letters.

This change accords with the current ATTB requirement that either capital or lowercase letters is sufficient and therefore, allows manufacturers flexibility to stay within their branding styles while still adhering to legal requirements.

Secondly, this amendment makes a technical correction to the rule's subsections by replacing the capital letter codification to romanettes.

### Fiscal Information

#### 6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:

##### A. State budget:

No anticipated impact. The proposed revisions clarify existing label requirements to better align with federal regulations, and the renumeration is a technical correction.

##### B. Local governments:

No anticipated impact. The proposed revisions clarify existing label requirements to better align with federal regulations, and the renumeration is a technical correction.

##### C. Small businesses ("small business" means a business employing 1-49 persons):

No anticipated impact. The proposed revisions clarify existing label requirements to better align with federal regulations, and the renumeration is a technical correction.

##### D. Non-small businesses ("non-small business" means a business employing 50 or more persons):

No anticipated impact. The proposed revisions clarify existing label requirements to better align with federal regulations, and the renumeration is a technical correction.

##### E. Persons other than small businesses, non-small businesses, state, or local government entities ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

No anticipated impact. The proposed revisions clarify existing label requirements to better align with federal regulations, and the renumeration is a technical correction.

##### F. Compliance costs for affected persons:

No anticipated impact. The proposed revisions clarify existing label requirements to better align with federal regulations, and the renumeration is a technical correction.

##### G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>H. Department head comments on fiscal impact and approval of regulatory impact analysis:</b>					
The Executive Director of the Department of Alcoholic Beverage Services, Ericka Evans, has reviewed and approved this regulatory impact analysis.					

## Citation Information

<b>7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:</b>		
Section 32B-2-202	Section 32B-1-607	

## Public Notice Information

<b>9. The public may submit written or oral comments to the agency identified in box 1.</b>	
<b>A. Comments will be accepted until:</b>	12/31/2025
<b>10. This rule change MAY become effective on:</b>	01/07/2026
NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.	

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Brian Swan, Deputy Director of Legal and Regulatory Affairs	<b>Date:</b>	11/04/2025
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**R82. Alcoholic Beverage Services, Administration.****R82-1. General.****R82-1-105. Label Approvals.**

(1) Authority. This rule is made pursuant to Section 32B-1-607, which gives the Commission the authority to adopt rules necessary to implement Title 32B, Chapter 6, Malted Beverage Act.

(2) Purpose.

(a) Pursuant to Section 32B-1-604, a manufacturer may not distribute or sell in this state any malted beverage, including a beer, heavy beer, or flavored malt beverage, unless the label and packaging of the beverage is approved by the Department.

(b) The requirements and procedures for applying for label and packaging approval are set forth in Sections 32B-1-604 through 32B-1-606.

(c) This rule:

(i) provides supplemental procedures for applying for and processing label and package approvals;

(ii) defines the meaning of certain terms in the Malted Beverage Act; and

(iii) establishes the format of certain words and phrases required on the label and packaging of certain malted beverages as required by Section 32B-1-606.

## NOTICES OF PROPOSED RULES

### (3) Application.

(a)(i) Except as provided in Subsection (3)(a)(iii) a complete set of original labels for each size of container must accompany each application for label and packaging approval, including all band, strip, front and back labels appearing on any individual container.

(ii) The Department may not accept an original container under Subsection (3)(a)(i).

(iii) If original labels cannot be obtained, the following may be accepted as part of the application:

(A) color reproductions that are exact size; or

(B) if printed in color, a copy of the federal certificate of label approval (COLA) from the Department of Treasury, Tax and Trade Bureau Form TTB F5100.31 with the exact size label.

(b) An application for approval is required for any material revision of a previously approved label or packaging, including a revision to a label or packaging that relates to subject matter other than the required notice that the product is an alcoholic beverage, such as temporary seasonal or promotional themes.

(c) The statement "alcoholic beverage" or "contains alcohol" and the statement of alcohol content as a percentage of alcohol by volume or weight included on a malted beverage under Section 32B-1-606 shall appear:

~~[(A)]~~(i) in ~~capital letters and~~ bold type;

~~[(B)]~~(ii) in a solid contrasting background;

~~[(C)]~~(iii) on the front of the container and packaging;

~~[(D)]~~(iv) in a format that is readily legible; and

~~[(E)]~~(v) separate and apart from any descriptive or explanatory information.

(d) The Department may consider the following elements of the label or packaging of a malted beverage when determining whether the label or packaging must be rejected under Subsection 32B-1-606(3)(b):

(i) color palette;

(ii) font size and type;

(iii) imagery;

(iv) placement of words, images, or descriptions;

(v) references to alcohol content that are not statutorily required; and

(vi) container type or shape.

**KEY: alcoholic beverages**

**Date of Last Change: [June 27,] 2025**

**Notice of Continuation: February 5, 2025**

**Authorizing, and Implemented or Interpreted Law: 32B-1-102; 32B-2-202; 32B-1-206; 32B-1-606; 32B-1-607**

### NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** New

**Rule or section number:**

**R152-76**

**Filing ID: 57660**

### Agency Information

1. Title catchline:		Commerce, Consumer Protection	
Building:		Heber Wells	
Street address:		160 E 300 S	
City, state:		Salt Lake City, UT	
Mailing address:		PO Box 146704	
City, state and zip:		Salt Lake City, UT 84114-6704	
Contact persons:			
Name:		Phone:	Email:
Daniel Larsen		801-530-6601	dcprules@utah.gov
Please address questions regarding information on this notice to the persons listed above.			

### General Information

<b>2. Rule or section catchline:</b>	
R152-76. App Store Accountability Act Rule	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	SB 142 (2025 General Session)

**4. Purpose of the new rule or reason for the change:**

This rule is promulgated to satisfy requirements created by SB 142, 2025 General Session, and codified as Title 13, Chapter 76, App Store Accountability Act.

The purpose of this rule is to establish processes and means by which an app store provider may verify whether an account holder is a minor in accordance with Subsection 13-76-201(1)(a)(ii)(B).

**5. Summary of the new rule or change:**

This rule establishes the processes and means by which an app store provider may verify whether an account holder is a minor in accordance with Subsection 13-76-201(1)(a)(ii)(B).

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

This rule is not anticipated to create costs or savings to the state budget beyond what was contemplated by the Fiscal Note to SB 142 (2025).

**B. Local governments:**

This rule is not anticipated to create costs or savings to local governments because it does not impose requirements or other obligations upon local governments.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

This rule is not anticipated to create costs or savings to small businesses beyond what was contemplated by the Fiscal Note to SB 142 (2025).

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

This rule may have a fiscal impact on non-small businesses.

The impact is inestimable because the number of non-small businesses to which this rule may apply is not readily available and is fluid.

Additionally, it is not clear how many of the non-small businesses to which this rule applies will choose to use an age verification method described by this rule rather than a method permitted by Subsection 13-76-201(1)(a)(ii)(A).

While it cannot estimate the fiscal impact on non-small businesses for the reasons described above, the Division of Consumer Protection (Division) estimates that age verification costs for an app store provider will be: \$0.30 per completed age verification per Utah account holder, and \$2,000, at minimum, per year per app store provider for geo location services.

Depending on the services used, there may be up-front and ongoing costs or fees, but those costs or fees are inestimable, particularly if an app store provider already employs age verification methods.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The proposed rule is not anticipated to have a fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities beyond that already described in the Fiscal Note to SB 142 (2025).

**F. Compliance costs for affected persons:**

Compliance costs for affected persons are inestimable because the number of persons to which this rule may apply is not readily available and is fluid.

Additionally, it is not clear how many affected persons will choose to use an age verification method described by this rule rather than a method permitted by Subsection 13-76-201(1)(a)(ii)(A).

# NOTICES OF PROPOSED RULES

While it cannot estimate the fiscal impact on affected persons for the reasons described above, the Division estimates that age verification costs for affected persons will be: \$0.30 per completed age verification per Utah account holder, and \$2,000, at minimum, per year per affected person for geo location services.

Depending on the services used, there may be up-front and ongoing costs or fees, but those costs or fees are inestimable, particularly if an affected person already employs age verification methods.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## H. Department head comments on fiscal impact and approval of regulatory impact analysis:

The Executive Director of the Department of Commerce, Margaret Busse, has reviewed and approved this regulatory impact analysis.

## Citation Information

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Subsection 13-76-201(1)(a)(ii)(B)	Section 13-76-301	
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## Public Notice Information

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Daniel Larsen, Managing Analyst	<b>Date:</b>	11/03/2025
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**R152. Commerce, Consumer Protection.**

**R152-76. App Store Accountability Act Rule.**

**R152-76-1. Purpose.**

The purpose of this rule is to establish the processes and means by which an app store provider may verify whether an account holder is a minor in accordance with Subsection 13-76-201(1)(a)(ii)(B).



**R152-76-2. Authority.**

This rule is promulgated in accordance with Section 13-76-301.

**R152-76-3. Definitions.**

- (1) "False negative" means an app store provider's age verification system's incorrect determination that a person is a minor.
- (2)(a) "False negative rate" means the rate at which an app store provider's age verification system incorrectly determines a person is a minor.
- (b) "False negative rate" is calculated as (false negative rate = false negatives ÷ (false negatives + true positives)).
- (3) "False positive" means an app store provider's age verification system's incorrect determination that a person is not a minor.
- (4)(a) "False positive rate" means the rate at which an app store provider's age verification system incorrectly determines a person is not a minor.
- (b) "False positive rate" is calculated as (false positive rate = false positives ÷ (false positives + true negatives)).
- (5) "Liveness" means verification that information provided by a user to an app store provider's age verification system is from a human being, and not from an imitation including a photo, video, or other replica.
- (6) "Liveness false acceptance rate" means the proportion of users incorrectly accepted by an age verification system as being live.
- (7) "Outcome error parity" means an age verification system's determinations are correct or incorrect in equal proportion for individuals of different skin color and sex.
- (8) "True negative" means an age verification system's correct determination that a person is a minor.
- (9) "True positive" means an age verification system's correct determination that a person is not a minor.
- (10) "Upper and lower limit" means the age range between 16 and 20 years of age.

**R152-76-4. Processes and Means for Age Verification.**

(1)(a) An app store provider may verify a person is a minor by using processes and means that satisfy the criteria in the following table:

<p style="text-align: center;"><u>TABLE</u> <u>Accuracy of Age Verification</u></p>				
<u>Liveness false acceptance rate maximum</u>	<u>False positive rate maximum</u>	<u>False negative rate maximum</u>	<u>Accuracy within upper and lower limit</u>	<u>Outcome error parity maximum disparity</u>
<u>1%</u>	<u>3%</u>	<u>10%</u>	<u>95%</u>	<u>1%</u>

- (b) The criteria described by Subsection (1)(a) shall be verified by an independent third-party auditor:
- (i) using a random sample of age verification attempts made by the app store provider with respect to 1,400 or more unique Utah persons, half of whom the age verification processes and means identified as a minor, and half of whom the age verification processes and means identified as not a minor; and
- (ii) confirming that the age verification processes and means correctly determined whether each person selected in the sample described by Subsection (1)(b)(i) was or was not a minor.
- (c) The processes and means an app store provider uses to verify an account holder is a minor shall:
- (i) include reasonable means by which a person may challenge an incorrect age verification result; and
- (ii) be designed to:
- (A) encourage the person submitting age information to submit accurate age information, and to deter the person from submitting inaccurate information; and
- (B) deter a person from bypassing the processes and means by which the app store provider verifies whether the person is a minor.
- (2)(a) An app store provider may use a third party's age verification processes and means, provided that the third party complies with the requirements of Title 13, Chapter 76, App Store Accountability Act and this rule.
- (b) An app store provider that uses a third party's age verification processes and means may not use the same third party to verify the age verification system's results, as described by Subsection R152-76-4(1)(b).

**KEY: app store, age verification**

**Date of Last Change: 2026**

**Authorizing, and Implemented or Interpreted Law: 13-76-201(1)(a)(ii)(b); 13-76-301**

**NOTICE OF SUBSTANTIVE CHANGE**

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R156-55c**

**Filing ID: 57661**

**Agency Information**

<b>1. Title catchline:</b>	Commerce, Professional Licensing	
<b>Building:</b>	Heber M Wells Building	
<b>Street address:</b>	160 E 300 S	
<b>City, state:</b>	Salt Lake City, UT 84111	
<b>Mailing address:</b>	PO Box 146741	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-6741	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Stephen Duncombe	801-530-6235	sduncombe@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule or section catchline:</b>	
R156-55c. Plumber Licensing Act Rule	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 483 (2024 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
<p>There are two purposes for the proposed change.</p> <p>The first is to bring this rule into alignment with Utah Code, Title 58, Chapter 55, Utah Construction Trades Licensing Act following that statute's amendment by the legislature.</p> <p>The second is to clarify when applicants seeking journeyman plumber licensing may sit for the examination which arose as part of an informal internal review of the Division of Professional Licensing (Division) rules.</p>	
<b>5. Summary of the new rule or change:</b>	
<p>There are two proposed substantive changes to this rule:</p> <p>Redefining Exempt Minor Plumbing Work. HB 483 passed during the 2024 General Session. Line 120 of that bill amended Subsection 58-55-305(1)(k)(i) by removing the word "replacement" when defining the types of minor plumbing work for which a license is not required. The proposed rule change makes a similar change to the definition of "Minor plumbing work that is incidental" by removing the word "replacement" from the definition.</p> <p>Clarifying When Applicants May Sit for the Journeyman Plumber's Exam. Currently, this rule states that an applicant may sit for the required journeyman plumber examination upon completion of the first semester of the applicant's fourth year of planned program of training. The proposed amendment clarifies this rule by making it clear that applicants must have (i) completed the first semester of their fourth year, and (ii) to be enrolled in the second semester of their fourth year.</p> <p>Additionally, the proposed changes make nonsubstantive formatting changes to bring this rule into conformity with current Division guidelines.</p>	

**Fiscal Information**

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
<p>None of the proposed changes will likely impact the state budget.</p> <p>Redefining Exempt Minor Plumbing Work. The proposed amendment reflects changes required by new legislation. All costs relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation. The proposed changes to this rule, consequently, have no further fiscal impact to the state budget other than was disclosed in the legislation's fiscal notes, which can be found at <a href="https://le.utah.gov/~2024/bills/static/HB0483.html">https://le.utah.gov/~2024/bills/static/HB0483.html</a>.</p>

Clarifying When Applicants May Sit for the Journeyman Plumber's Exam. The proposed amendment clarifies existing policy within the Division and consequently will not impact the state budget.

Non-Material Formatting Changes. The proposed formatting changes to this rule are to bring it into conformity with current Division guidelines and will have no substantive impact on the Division's enforcement or regulation of the profession and will not impact the state budget.

#### **B. Local governments:**

None of the proposed changes will likely impact any local governments.

Redefining Exempt Minor Plumbing Work. The proposed amendment reflects changes required by new legislation. All costs relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2024/bills/static/HB0483.html>. The proposed changes to this rule, consequently, have no further fiscal impact to any local government other than was disclosed in the legislation's fiscal notes.

Clarifying When Applicants May Sit for the Journeyman Plumber's Exam. The proposed amendment clarifies existing policy within the Division and consequently will not impact any local government.

Non-Material Formatting Changes. The proposed formatting changes to this rule are to bring it into conformity with current Division guidelines and will have no substantive impact on the Division's enforcement or regulation of the profession and will not impact any local government.

#### **C. Small businesses** ("small business" means a business employing 1-49 persons):

None of the proposed changes will likely impact any small businesses.

Redefining Exempt Minor Plumbing Work. The proposed amendment reflects changes required by new legislation. All costs relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2024/bills/static/HB0483.html>. The proposed changes to this rule, consequently, have no further fiscal impact to any small business other than was disclosed in the legislation's fiscal notes.

Clarifying When Applicants May Sit for the Journeyman Plumber's Exam. The proposed amendment clarifies existing policy within the Division and consequently will not impact any small business.

Non-Material Formatting Changes. The proposed formatting changes to this rule are to bring it into conformity with current Division guidelines and will have no substantive impact on the Division's enforcement or regulation of the profession and will not impact any small business.

#### **D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

None of the proposed changes will likely impact any non-small business.

Redefining Exempt Minor Plumbing Work. The proposed amendment reflects changes required by new legislation. All costs relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2024/bills/static/HB0483.html>. The proposed changes to this rule, consequently, have no further fiscal impact to non-small businesses than was disclosed in the legislation's fiscal notes.

Clarifying When Applicants May Sit for the Journeyman Plumber's Exam. The proposed amendment clarifies existing policy within the Division and consequently will not impact any non-small business.

Non-Material Formatting Changes. The proposed formatting changes to this rule are to bring it into conformity with current Division guidelines and will have no substantive impact on the Division's enforcement or regulation of the profession and will not impact any non-small business.

#### **E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

None of the proposed changes will likely impact any persons other than small businesses, non-small businesses, state, or local government entities.

**Redefining Exempt Minor Plumbing Work.** The proposed amendment reflects changes required by new legislation. All costs relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2024/bills/static/HB0483.html>. The proposed changes to this rule, consequently, have no further fiscal impact any persons other than small businesses, non-small businesses, state, or local government entities.

**Clarifying When Applicants May Sit for the Journeyman Plumber's Exam.** The proposed amendment clarifies existing policy within the Division and consequently will not impact any persons other than small businesses, non-small businesses, state, or local government entities.

**Non-Material Formatting Changes.** The proposed formatting changes to this rule are to bring it into conformity with current Division guidelines and will have no substantive impact on the Division's enforcement or regulation of the profession and will not impact any persons other than small businesses, non-small businesses, state, or local government entities.

#### **F. Compliance costs for affected persons:**

The Division does not foresee any compliance costs for affected persons.

**Redefining Exempt Minor Plumbing Work.** The proposed amendment reflects changes required by new legislation. All costs relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2024/bills/static/HB0483.html>. The proposed changes to this rule, consequently, will have no further fiscal impact on affected persons.

**Clarifying When Applicants May Sit for the Journeyman Plumber's Exam.** The proposed amendment clarifies existing policy within the Division and consequently will not impact affected persons.

**Non-Material Formatting Changes.** The proposed formatting changes to this rule are to bring it into conformity with current Division guidelines and aid in readability and clarity. The Division does not believe these changes will impact affected persons.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

<b>Regulatory Impact Summary Table</b>					
<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

#### **H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Commerce, Margaret W. Busse, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Subsection 58-1-106(1)(a)	Subsection 58-1-202(1)(a)	Subsection 58-55-103(1)(b)(i)
Subsection 58-55-201(3)(a)		

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>		12/31/2025
<b>B. A public hearing (optional) will be held</b> (The public may request a hearing by submitting a written request to the agency, as outlined in Section 63G-3-302 and Rule R15-1.):		
<b>Date:</b>	<b>Time:</b>	<b>Place</b> (physical address or URL):
12/12/2025	1:00 PM	Anchor Meeting: Heber M Wells Building Fourth Floor, Room 474 160 E 300 S Salt Lake City, UT  Google Meet joining info Video call link: <a href="https://meet.google.com/eqn-esyi-kji">https://meet.google.com/eqn-esyi-kji</a> Or dial: (US) +1 414-909-4132 PIN: 941 698 413#

<b>10. This rule change MAY become effective on:</b>	01/07/2026
NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Mark Steinagel, Division Director	<b>Date:</b>	10/31/2025
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**R156. Commerce, Professional Licensing.****R156-55c. Plumber Licensing Act Rule.****R156-55c-101. Title -- Authority -- Organization of Rules.**

(1) This rule is known as the "Plumber Licensing Act Rule."

(2) This rule is adopted by the Division under the authority of Subsection 58-1-106(1)(a) to enable the Division to administer Title 58, Chapter 55, Utah Construction Trades Licensing Act.

(3) The organization of this rule and its relationship to Rule R156-1 is as described in Section R156-1-101.

**R156-55c-102. Definitions.**

The following definitions supplement the definitions in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 55, Utah Construction Trades Licensing Act:

(1) "Immediate supervision" as used in Subsections 58-55-102(9)(~~5~~) and (~~26~~)(32) means:

(a) for non-residential plumbing work, the apprentice and the supervising plumber are physically present on the same project or jobsite but are not required to maintain a direct line of sight; and

(b) for residential plumbing work, the supervising plumber, when not physically present on the same project or jobsite as the apprentice, is available to provide direction, oversight, inspection, and evaluation of the apprentice's work to ensure that the ~~end~~ result complies with applicable standards.

(2)(a) "Minor plumbing work that is incidental" as used in Subsection 58-55-305(1)(k)(i) means repair ~~or replacement~~ of residential type Plumbing Appurtenances, Fixtures, or Appliances, provided that no modification is made to:

(i) existing culinary water, soil, waste, or vent piping; or

(ii) a gas appliance or combustion system.

(b) "Minor plumbing work that is incidental" as used in Subsection 58-55-305(1)(k)(i) does not include:

(i) installation or replacement of a water heater; or

(ii) work to include the initial installation of Plumbing Appurtenances, Fixtures, and Systems.

## NOTICES OF PROPOSED RULES

(3) "Plumbing Appliance[s]", "~~Plumbing Appurtenance[s]~~", "~~Plumbing Fixture[s]~~", and "~~Plumbing System[s]~~" mean[s] the same as defined ~~the International Plumbing Code, adopted [in] under Subsection 15A-2-103(1)(d) of the [Title 15A,]~~ State Construction and Fire Codes Act.

(4) "Unprofessional conduct" as defined in ~~Subsection 58-1-501(2)(a) of the [Title 58, Chapter 1,]~~ Division of Professional Licensing Act and ~~Section 58-55-502 of the [Title 58, Chapter 55,]~~ Utah Construction Trades Licensing Act ~~[is further defined in accordance with]~~ and is further defined in Subsection 58-1-203(1)(e), in Section R156-55c-501.

### ~~R156-55c-103. Authority - Purpose.~~

~~This rule is adopted by the Division under the authority of Subsection 58-1-106(1)(a) to enable the Division to administer Title 58, Chapter 55, Utah Construction Trades Licensing Act.~~

### ~~R156-55c-104. Organization - Relationship to Rule R156-1.~~

~~The organization of this rule and its relationship to Rule R156-1 is as described in Section R156-1-107.~~

]

### **R156-55c-302b. Qualifications for Licensure - Examination Requirements.**

Under Subsection 58-55-302(1)(c), the exam requirements for licensure are established as follows:

(1) a Master Plumber or Residential Master Plumber applicant shall pass the Utah Plumber Law and Rule Exam with a score of at least 75%.

(2) a Journeyman Plumber applicant shall pass:

(a) the Utah Journeyman Plumber Written Exam with a score of at least 70%; and

(b) the Utah Plumber Practical Exam with a score of at least 70%.

(3) a Residential Journeyman Plumber applicant shall pass:

(a) the Utah Residential Journeyman Plumber Written Exam with a score of at least 70%; and

(b) the Utah Plumber Practical Exam with a score of at least 70%.

(4) Admission to the exams is permitted after:

(a) the applicant has completed ~~the [a]~~ requirements for licensure in Section R156-55c-302a; or

(b) the Journeyman Plumber applicant under Subsection R156-55c-302a(3)(a) has ~~completed~~:

(i) completed the first semester of the fourth year of the planned program of training; ~~and~~

(ii) enrolled in the second semester of the fourth year of the planned program of training; and

(iii) completed at least 6,000 hours of the required full-time work experience.

(5) An applicant who fails an exam may retake that exam:

(a) no sooner than 30 days following any failure, up to six failures; and

(b) no sooner than 120 days following any failure thereafter.

**KEY:** occupational licensing, licensing, plumbers, plumbing

**Date of Last Change:** ~~June 20, 2023~~ **2025**

**Notice of Continuation:** July 8, 2021

**Authorizing, and Implemented or Interpreted Law:** 58-1-106(1)(a); 58-1-202(1)(a); ~~58-55-101~~ **58-55-201(3)(a); 58-55-103(1)(b)(i)**

### NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R156-56**

**Filing ID: 57633**

### Agency Information

<b>1. Title catchline:</b>	Commerce, Professional Licensing	
<b>Building:</b>	Heber M Wells Building	
<b>Street address:</b>	160 E 300 S	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	PO Box 14671	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-6741	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Steve Duncombe	801-530-6235	sduncombe@utah.gov
Matt Johnson	801-530-6701	mmjohnson@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information****2. Rule or section catchline:**

R156-56. Building Inspector and Factory Built Housing Licensing Act Rule

**3. Are any changes in this filing because of state legislative action?**

Changes are because of legislative action.

**If yes, any bill number and session:** HB 58 (2025 General Session)

**4. Purpose of the new rule or reason for the change:**

The proposed amendment will bring this rule into compliance with recently passed legislation and makes other nonsubstantive changes conforming with current Division of Professional Licensing (Division) style and formatting guidelines.

**5. Summary of the new rule or change:**

In addition to nonsubstantive changes, the proposed amendment establishes the licensing requirements for "Private Home Inspectors" as required by HB 58 passed in the 2025 General Session.

The proposed rule will require Private Home Inspectors to carry adequate liability, as well as errors and omissions insurance policies.

Additionally, licensees will be required to maintain certification with one of three recognized associations: (i) the American Society of Home Inspectors (ASHI); the International Association of Certified Home Inspectors (InterNACHI); or the International Code Council (ICC) Residential Combination Inspectors program.

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

The proposed amendment reflects changes required by new legislation.

All costs to the state budget relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2025/bills/static/HB0058.html>.

**B. Local governments:**

The proposed amendment reflects changes required by new legislation.

All costs to local governments relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2025/bills/static/HB0058.html>.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

The proposed amendment reflects changes required by new legislation.

All costs relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2025/bills/static/HB0058.html>.

The proposed changes to this rule, consequently, are not expected to have further fiscal impact to any small business.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

The proposed amendment reflects changes required by new legislation.

All costs relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2025/bills/static/HB0058.html>.

The proposed changes to this rule, consequently, are not expected to have further fiscal impact to any non-small business other than what was disclosed in the legislation's fiscal notes.



**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The proposed amendment reflects changes required by new legislation.

All costs relating to that legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation, which can be found at <https://le.utah.gov/~2025/bills/static/HB0058.html>.

The proposed changes to this rule, consequently, are not expected to have further fiscal impact to persons other than small businesses, non-small businesses, state, or local government entities other than what was disclosed in the legislation's fiscal notes.

**F. Compliance costs for affected persons:**

The updated rule reflects the changes made by HB 58 (2025).

These changes are largely administrative in nature (such as reporting requirements for the Commission and defining unprofessional and unlawful conduct for building officials).

In addition to these administrative changes, HB 58 (2025) creates a new license category for "Private Home Inspectors." The Division believes an affected person would be an individual currently working as a private home inspector who must now become licensed under HB 58 (2025). To qualify as a private home inspector under HB 58 (2025), an affected person must meet the minimum qualifications established by this proposed rule and be subject to disciplinary or other actions by the Division.

The proposed rule requires an affected person seeking to become licensed as a Private Home Inspector to maintain a current certification in at least one of the three major national certification bodies for private home inspectors maintained as current liability and E & O insurances in the amount of \$500,000 respectively, fulfilled the requirements for full licensure as private home inspectors. The Division believes these requirements may increase costs for affected persons.

The cost of premiums for the required insurance will be based on a myriad of factors including the applicant's experience, the market in which the work is done, the size of the business, and the existence or non-existence of past claims. As a general rule, the Division believes adequate policies can be obtained for approximately \$1,000 per year.

The cost of becoming certified with one of the various certification bodies ranges from approximately \$50 to \$1,000 per year depending on various factors including the level of education needed by a candidate and which resources within those certifying bodies a candidate wishes to access, such as online access to building codes, continuing education, etc.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>



**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Commerce, Margaret W. Busse, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Subsection 58-1-106(1)(a)	Subsection 58-1-202(1)(a)	Section 58-56-1
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**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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**B. A public hearing (optional) will be held** (The public may request a hearing by submitting a written request to the agency, as outlined in Section 63G-3-302 and Rule R15-1.):

Date:	Time:	Place (physical address or URL):
12/12/2025	1:00 PM	Heber M Wells Building 160 E 300 S Fourth Floor, Room 474 Salt Lake City, UT PO Box 14671 Salt Lake City, UT 84114-6741  Google Meet joining info Video call link: <a href="https://meet.google.com/eqn-esyi-kji">https://meet.google.com/eqn-esyi-kji</a> Or dial: (US) +1 414-909-4132 PIN: 941 698 413#

<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Mark Steinagel, Division Director	<b>Date:</b>	10/20/2025
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**R156. Commerce, ~~Occupational and~~ Professional Licensing.****R156-56. Building Inspector and Factory Built Housing Licensing Act Rule.****R156-56-302. Qualifications for Licensure of Inspectors - Application Requirements.**

In accordance with ~~[Subsection]~~Section 58-56-9~~(4)~~, the licensee classifications, scope of work, qualifications for licensure, and application for license are established as follows:

(1) License Classifications. Each inspector required to be licensed under ~~[Subsection]~~Section 58-56-9~~(4)~~ shall qualify for licensure and be licensed by the Division in one of the following classifications:

- (a) Combination Inspector;~~[-or]~~
- (b) Limited Inspector~~[-]; or~~
- (c) Private Home Inspector.

(2) Scope of Work. The scope of work permitted under each inspector classification is as follows:

- (a) Combination Inspector.
  - (i) Inspect the components of any building, structure or work for which a standard is provided in the specific edition of the state construction codes adopted under Title 15A, State Construction and Fire Codes Act.
  - (ii) Determine whether the construction, alteration, remodeling, repair or installation of all components of any building, structure or work is in compliance with the state construction code adopted under Title 15A.
  - (iii) After determination of compliance or noncompliance with the state construction codes adopted under Title 15A, take appropriate action as is provided in the ~~aforesaid~~ codes.
- (b) Limited Inspector.
  - (i) A Limited Inspector may only conduct activities under Subsection~~[s]~~ (ii), (iii) or (iv) for which the Limited Inspector has maintained current certificates under state construction codes adopted under Title 15A as provided under Subsection R156-56-302(3)(b).

## NOTICES OF PROPOSED RULES

(ii) Subject to the limitations of Subsection (i), inspect the components of any building, structure or work for which a standard is provided in the state construction codes adopted under Title 15A.

(iii) Subject to the limitations under Subsection (i), determine whether the construction, alteration, remodeling, repair or installation of components of any building, structure or work is in compliance with the state construction codes adopted under Title 15A.

(iv) Subject to the limitations under Subsection (i), after determination of compliance or noncompliance with the state construction codes adopted under Title 15A, take appropriate action as is provided in the adopted codes.

### (c) Private Home Inspector.

(i) evaluate residential dwellings and the components of a residential dwelling to determine the condition of the property and identify potential issues associated with the sale or purchase of real property; and

(ii) provide an informed, independent assessment for prospective buyers or homeowners.

(3) Qualifications for Licensure. The qualifications for licensure for each inspector classification are as follows:

#### (a) Combination Inspector.

Has passed the examination for and maintained as current the following national certifications for state construction codes adopted under Title 15A:

(i) the "Combination Inspector Certification" issued by the International Code Council; or

(ii) ~~all of~~ the following certifications:

(A) the "Building Inspector Certification" issued by the International Code Council or both the "Commercial Building Inspector Certification" and the "Residential Building Inspector Certification" issued by the International Code Council;

(B) the "Electrical Inspector Certification" issued by the International Code Council or the "General Electrical Certification" issued by the International Association of Electrical Inspectors, or both the "Commercial Electrical Inspector Certification" and the "Residential Electrical Inspector Certification" issued by the International Code Council;

(C) the "Plumbing Inspector Certification" issued by the International Code Council, or both the "Commercial Plumbing Inspector Certification" and the "Residential Plumbing Inspector Certification" issued by the International Code Council; and

(D) the "Mechanical Inspector Certification" issued by the International Code Council or both the "Commercial Mechanical Inspector Certification" and the "Residential Mechanical Inspector Certification" issued by the International Code Council.

#### (b) Limited Inspector.

Has passed the examination for and maintained as current one or more of the following national certifications for state construction codes adopted under Title 15A:

(i) the "Building Inspector Certification" issued by the International Code Council;

(ii) the "Electrical Inspector Certification" issued by the International Code Council or the "General Electrical Certification" issued by the International Association of Electrical Inspectors;

(iii) the "Plumbing Inspector Certification" issued by the International Code Council;

(iv) the "Mechanical Inspector Certification" issued by the International Code Council;

(v) the "Residential Combination Inspector Certification" issued by the International Code Council;

(vi) the "Commercial Combination Certification" issued by the International Code Council;

(vii) the "Commercial Building Inspector Certification" issued by the International Code Council;

(viii) the "Commercial Electrical Inspector Certification" issued by the International Code Council;

(ix) the "Commercial Plumbing Inspector Certification" issued by the International Code Council;

(x) the "Commercial Mechanical Inspector Certification" issued by the International Code Council;

(xi) the "Residential Building Inspector Certification" issued by the International Code Council;

(xii) the "Residential Electrical Inspector Certification" issued by the International Code Council;

(xiii) the "Residential Plumbing Inspector Certification" issued by the International Code Council;

(xiv) the "Residential Mechanical Inspector Certification" issued by the International Code Council;

(xv) any other special or otherwise limited inspector certifications used by the International Code Council which certifications cover a part of the state construction codes adopted under Title 15A, including ~~but not limited to~~ each of the following: Reinforced Concrete Special Inspector, Prestressed Concrete Special Inspector, Structural Masonry Special Inspector, Structural Steel and Bolting Special Inspection, Structural Welding Special Inspection, Spray Applied Fire Proofing Special Inspector, Residential Energy Inspector, Commercial Energy Inspector;

(xvi) the Certified Welding Inspector Certification issued by the American Welding Society;

(xvii) any other certification issued by an agency specified in Chapter 17 of the International Building Code ([<sup>2</sup>]IBC[<sup>2</sup>]) or an agency specified in the referenced standards; or

(xviii) any combination certification which is based upon a combination of one or more ~~of the above listed~~ certifications.

~~(e)~~ ~~(xix)~~ If no qualification is listed in the IBC for a special inspector, the special inspector may submit ~~his~~ qualifications to the licensing board for approval.

### (c) Private Home Inspector.

(i) As of June 30, 2026 has maintained as current one or more certifications issued by one of the following organizations:

(A) the American Society of Home Inspectors (ASHI);

(B) the International Association of Certified Home Inspectors (InterNACHI); or

(C) the International Code Council (ICC) Residential Combination Inspector;

(ii) maintained as current liability insurance in the amount of \$500,000 that names the Division as the certificate holder; and

(iii) maintained as current errors and omissions Insurance in the amount of \$500,000 that names the Division as the certificate holder;

(4) Application for License.

- (a) An applicant for licensure shall:
- (i) submit an application in a form prescribed by the Division; and
  - (ii) pay a fee determined by the department pursuant to Section 63J-1-504.
- (5) Code Transition Provisions.

(a) If an inspector or applicant obtains a new, renewal or recertification or replacement national certificate after a new code or code edition is adopted, the inspector or applicant ~~is required to~~ shall obtain that certification under the currently adopted code or code edition.

(b) After a new code or new code edition is adopted under this rule, the inspector ~~shall~~ ~~is required to~~ re-certify the inspector's national certification to the new code or code edition at the next available renewal cycle of the national certification.

(c) If a licensed inspector fails to obtain the national certification as required in Subsections (a), ~~(b)~~, and (c) the inspector's authority to inspect for the area covered by the national certification automatically expires at the expiration date of the national certification that was not obtained as required.

(d) If an inspector recertifies a national certificate on a newer edition of the codes adopted before that newer edition is adopted under this rule, such recertification shall be considered as a current national certification as required by this rule.

(e) If an inspector complies with these transition provisions, the inspector shall be considered to have a current national certification as required by this rule.

#### **R156-56-501. Administrative Penalties - Unlawful Conduct.**

(1) In accordance with ~~Subsections~~ Sections 58-56-9.1, 58-56-9.3, and 58-56-9.5, unless otherwise ordered by the presiding officer, fines shall be assessed in accordance with Subsection 58-56-9.5(3)(i). ~~the following fine schedule shall apply:~~

~~(1) Engaging in the sale of factory built housing without being registered.~~

~~First offense: \$500~~

~~Second offense: \$1,000~~

~~(2) Selling factory built housing within the state as a dealer without collecting and remitting to the Division the fee required by Section 58-56-17.~~

~~First offense: \$500~~

~~Second offense: \$1,000~~

~~(3) Acting as a building inspector or representing oneself to be acting as a building inspector, unless licensed or exempted from licensure under Title 58, Chapter 56 or using the title building inspector or any other description, words, letters, or abbreviation indicating that the person is a building inspector if the person has not been licensed under Title 58, Chapter 56.~~

~~First offense: \$500~~

~~Second offense: \$1,000~~

~~(4) Acting as a building inspector beyond the scope of the license held.~~

~~First offense: \$500~~

~~Second offense: \$1,000~~

~~(5) Hiring or employing in any manner an unlicensed person as a building inspector, unless exempted from licensure.~~

~~First offense: \$800~~

~~Second offense: \$1,600~~

~~(6)~~ (2) Citations ~~shall~~ may not be issued for third offenses, except in extraordinary circumstances approved by the investigative supervisor. If a citation is issued for a third offense, the fine is double the second offense amount, with a maximum amount not to exceed the maximum fine allowed under Section 58-56-9.5.

~~(7)~~ (3) If multiple offenses are cited on the same citation, the fine shall be determined by evaluating the most serious offense.

~~(8)~~ (4) An investigative supervisor may authorize a deviation from the fine schedule based upon the aggravating or mitigating circumstances.

~~(9)~~ (5) In all cases the presiding officer shall have the discretion, after a review of the aggravating or mitigating circumstances, to increase or decrease the fine amount based on the evidence reviewed.

**KEY: factory built housing, building inspections, licensing, building inspectors**

**Date of Last Change: ~~August 22, 2013~~ 2025**

**Notice of Continuation: January 3, 2022**

**Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-56-1**

#### **NOTICE OF SUBSTANTIVE CHANGE**

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R156-60e**

**Filing ID: 57656**

#### **Agency Information**

<b>1. Title catchline:</b>	Commerce, Professional Licensing
<b>Building:</b>	Heber M Wells Building
<b>Street address:</b>	160 E 300 S

City, state:	Salt Lake City, UT 84111	
Mailing address:	PO Box 146741	
City, state and zip:	Salt Lake City, UT 84114-6741	
Contact persons:		
Name:	Phone:	Email:
Brian Pedersen	801-530-6651	bpedersen@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

### General Information

<b>2. Rule or section catchline:</b>	
R156-60e. Mental Health Professional Practice Act Rule	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	SB 26 (2024 General Session), HB 160 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
<p>The Division of Professional Licensing (Division) in collaboration with the new Behavioral Health Board (Board) is filing this amendment to this rule in accordance with statutory changes made in accordance with SB 26 from the 2024 General Session and HB 160 from the 2025 General Session.</p> <p>The proposed amendments include the creation of pathways for a licensee to become a Division-approved clinical supervisor and update the supervision standards under SB 26 (2024).</p> <p>The amendments also include changes made in accordance with HB 160 (2025) that modified the educational requirement for the substance use disorder counselor license.</p>	
<b>5. Summary of the new rule or change:</b>	
<p>The amendments made in accordance with SB 26 (2024) establish three approved pathways for a licensee to become a Division-approved clinical supervisor to be eligible to oversee an associate-level supervised individual who needs clinical supervision before beginning to accrue clinical supervision hours towards full licensure.</p> <p>The amendments also include a requirement that during each two-year renewal cycle, a Division-approved clinical supervisor shall complete at least six hours of ongoing professional development or continuing education that is specific to clinical supervision.</p> <p>Additionally, the amendments update the clinical supervisor eligibility requirements, the requirements of a clinical supervision contract, the clinical supervisor duties and supervisions, and the supervised individual's duties and responsibilities.</p> <p>In accordance with HB 160 (2025), the amendments remove the requirement of an associate's degree for an individual applying for licensure as a substance use disorder counselor.</p> <p>The remaining amendments update references to statute and rule and make nonsubstantive formatting changes for clarity and to update this rule in accordance with the Rulewriting Manual for Utah of the Office of Administrative Rules (OAR).</p>	

### Fiscal Information

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
<p>The amendments update supervision requirements that align with changes made in accordance with SB 26 (2024).</p> <p>Changes in supervision standards are expected to have zero net impact on state revenues or expenditures because these changes should not result in any additional complaints, investigations, or disciplinary actions or any additional licensing issues.</p> <p>The Division does not anticipate that any of the proposed changes will impact state government revenues or expenditures because the changes merely update the rules to establish supervision standards that encompass current requirements and practices in the profession.</p>

Additional requirements for supervision training and professional development will not impose any additional costs to state government revenues or expenditures, as the clinical supervision training course will not be created by the state.

The proposed amendment reflects changes required by new legislation in SB 26 (2024). All costs relating to legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation. The Division does not anticipate any fiscal impact to the state budget beyond what was disclosed in the legislation's fiscal notes for SB 26 (2024) at <https://le.utah.gov/%7E2024/bills/static/SB0026.html>.

The Division does not anticipate any fiscal impact to the state budget for amendments made in accordance with HB 160 (2025) beyond what was disclosed in the legislation's fiscal notes for HB 160 (2025) at <https://le.utah.gov/%7E2025/bills/static/HB0160.html>.

#### **B. Local governments:**

The proposed amendments made in accordance with SB 26 (2024) may impact businesses in the mental health industry that employ mental health professionals as clinical supervisors which may potentially include certain local government entities acting as businesses. All costs relating to legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation.

The proposed changes to this rule, consequently, have no further fiscal impact to any local government beyond what was disclosed in the legislation's fiscal notes for SB 26 (2024) at <https://le.utah.gov/%7E2024/bills/static/SB0026.html>.

The Division does not anticipate any fiscal impact to any local government for amendments made in accordance with HB 160 (2025) beyond what was disclosed in the legislation's fiscal note for HB 160 at <https://le.utah.gov/%7E2025/bills/static/HB0160.html>.

#### **C. Small businesses** ("small business" means a business employing 1-49 persons):

There are approximately 1,532 small businesses in Utah with licensees engaged in the practice of mental health therapy and who may employ those engaged in the practice of mental health therapy, such as private or group practices, hospitals, or medical centers (NAICS 621112, 621420, 621330, 622210, 623220, 623210).

The proposed amendments may impact small businesses that employ mental health professionals as clinical supervisors. However, the proposed amendment reflects changes required by new legislation in SB 26 (2024). All costs relating to legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation.

Therefore, the Division does not anticipate fiscal impact to small businesses beyond what was disclosed in the legislation's fiscal notes for SB 26 (2024) at <https://le.utah.gov/%7E2024/bills/static/SB0026.html>.

The Division does not anticipate any fiscal impact to any small businesses for amendments made in accordance with HB 160 (2025) beyond what was disclosed in the legislation's fiscal note for HB 160 (2025) at <https://le.utah.gov/%7E2025/bills/static/HB0160.html>.

#### **D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There are approximately 96 non-small businesses in Utah with licensees engaged in the practice of mental health therapy and who may employ those engaged in the practice of mental health therapy, such as private or group practices, hospitals, or medical centers (NAICS 621112, 621420, 621330, 622210, 623220, 623210).

These proposed amendments may impact these non-small businesses that employ mental health professionals as clinical supervisors. However, the proposed amendments reflect changes required by new legislation in SB 26 (2024). All costs relating to legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation.

Therefore, the Division does not anticipate any fiscal impact to any non-small businesses beyond what was disclosed in the legislation's fiscal note for SB 26 (2024) at <https://le.utah.gov/%7E2024/bills/static/SB0026.html>.

The Division does not anticipate any fiscal impact to any non-small businesses for amendments made in accordance with HB 160 (2025) beyond what was disclosed in the legislation's fiscal note for HB 160 (2025) at <https://le.utah.gov/%7E2025/bills/static/HB0160.html>.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The proposed amendments outlining the clinical supervision training course reflect changes required by new legislation in SB 26 (2024). All costs relating to legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation. Therefore, the Division does not anticipate any fiscal impact to any persons other than small businesses, non-small businesses, state, or local government entities beyond what was disclosed in the legislation's fiscal note for SB 26 (2024) at <https://le.utah.gov/%7E2024/bills/static/SB0026.html>.

The Division does not anticipate any fiscal impact to any persons other than any persons other than small businesses, non-small businesses, state, or local government entities for amendments made in accordance with HB 160 (2025) beyond what was disclosed in the legislation's fiscal note for HB 160 (2025) at <https://le.utah.gov/%7E2025/bills/static/HB0160.html>.

**F. Compliance costs for affected persons:**

The proposed amendments outlining the clinical supervision training course reflect changes required by new legislation in SB 26 (2024). All costs relating to legislation (including the costs or savings of implementing necessary rule changes) are part of the fiscal notes to that legislation. Therefore, the Division does not anticipate any fiscal impact to affected persons beyond what was disclosed in the legislation's fiscal note for SB 26 (2024) at <https://le.utah.gov/%7E2024/bills/static/SB0026.html>.

The Division does not anticipate any fiscal impact to any affected persons for amendments made in accordance with HB 160 (2025) beyond what was disclosed in the legislation's fiscal note for HB 160 (2025) at <https://le.utah.gov/%7E2025/bills/static/HB0160.html>.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Commerce, Margaret W. Busse, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Subsection 58-1-103(1)(a)	Subsection 58-1-202(1)(a)	Section 58-60-201
Section 58-60-301	Section 58-60-401	Section 58-60-501

**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>		12/31/2025
<b>B. A public hearing (optional) will be held</b> (The public may request a hearing by submitting a written request to the agency, as outlined in Section 63G-3-302 and Rule R15-1.):		
<b>Date:</b>	<b>Time:</b>	<b>Place (physical address or URL):</b>
12/22/2025	10:00 AM	Anchor Meeting Location: Heber M Wells Building 160 E 300 S, Fourth Floor, Room 474 Salt Lake City, UT  Google Meet joining info Video call link: <a href="https://meet.google.com/cpt-nfao-xib">https://meet.google.com/cpt-nfao-xib</a> Or dial: (US) +1 219-973-4186 PIN: 393 442 739# More phone numbers: <a href="https://tel.meet/cpt-nfao-xib?pin=6838495586396">https://tel.meet/cpt-nfao-xib?pin=6838495586396</a>

<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Mark B. Steinagel, Division Director	<b>Date:</b>	10/15/2025
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**R156. Commerce, Professional Licensing.****R156-60e. Mental Health Professional Practice Act Rule.****R156-60e-101.1. Title - Authority - Relationship to Rule R156-1.**

- (1) This rule is known as the "Mental Health Professional Practice Act Rule."
- (2) This rule is adopted by the Division under Subsection 58-1-106(1)(a), to enable the Division to administer Title 58, Chapter 60, Mental Health Professional Practice Act.
- (3) The organization of this rule and its relationship to Rule R156-1 is as described in Section R156-1-101.

**R156-60e-102.1. Definitions Applicable To All Mental Health Professionals.**

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Mental Health Professional Practice Act. [-]In addition:

(1) "Accredited institution of higher education," unless otherwise specified in this rule, means an educational institution that has accreditation recognized by the Council for Higher Education Accreditation (CHEA).

(2) "AI" as used in Subsection R156-60e-307.1(2)(c)(iii) means artificial intelligence.

~~(2)~~ (3) "Approved diagnostic and statistical manual for mental disorders" means one of the following:

(a) Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR), published by the American Psychiatric Association; or

(b) International Classification of Diseases, Tenth Revision, Clinical Modifications (ICD-10-CM), published as the ICD-10-CM: The Complete Official Codebook by the American Medical Association.

~~(3)~~ (4) "APRN" means an advanced practice registered nurse licensed under Subsection 58-60-102(15)(b).

(5) "Asynchronous" as used in Subsections R156-60e-302.1(3)(d) and R156-60e-402.1(3)(b)(vii) means the individual:

~~(a)~~ (a) accesses material online;

~~(b)~~ (b) learns at the individual's own pace and not in real-time; and

~~(c)~~ (c) with or without instructor interaction.

~~(4)~~ (6) "CHEA" means the Council for Higher Education Accreditation.

~~(5)~~ (7) "CSWE" means the Council on Social Work Education.

~~(6)~~ (8) "Client" or "patient" means:

(a) an individual who is competent to request mental health services; or

(b) an individual who is not competent to request mental health services but is lawfully provided professional services by a mental health therapist who:

(i) agrees orally or in writing to provide professional services to that individual; or

(ii) without an overt agreement, provides professional services to that individual.



## NOTICES OF PROPOSED RULES

([7]9) "Clinical supervision form" means the form provided by the Division for use by a supervisor and a supervised individual to document who is providing supervision to a supervised individual and includes at least the following:

- (a) name and license number of the supervised individual;
- (b) name and license number of the supervisor; and
- (c) supervised individual's place of employment.

([8]10) "Independent of control" as used in Subsection ~~[s R156-60e-307.1(2)(b) and R156-60e-308.1(1)(e)]~~ R156-60e-309.1(1)(b)(ii)(A) means the supervisor is not employed by the supervised individual, an agency owned in total or part by the supervised individual, or an agency in which the supervised individual has a controlling interest.

([9]11) "Internship" means one or more courses completed as part of a graduate program at an accredited institution of higher education where the internship hours are obtained:

- (a) at a public agency or private clinic;
- (b) while the individual is engaged in the clinical practice of mental health therapy as defined in Subsection 58-60-102(17); and
- (c) under supervision of a qualified mental health training supervisor as defined in Section R156-60e-305.1.

(12) "Interpersonal and intrapersonal dysfunction" as used in Subsection 58-60-302(2)(d) means the dysfunction is a core feature of a diagnosable disorder.

([10]13) "Mild to moderate behavioral health symptoms or disorders" as used in Subsections 58-60-202(1)(a)(ii)(A), 58-60-202(1)(a)(v)(B), 58-60-502(6)(c)(iii)(B), 58-60-601(4)(c)(v)(A), 58-60-601(4)(c)(vi)(A), and 58-60-601(4)(d)(iii)(B), means symptoms that:

- (a) cause clinically significant disturbances in an individual's cognition, emotion regulation, or behavior that reflect a dysfunction, but are not so severe as to be debilitating or require hospitalization or medications;
- (b) satisfy the legal definition of a disability or equivalent; and
- (c) can be treated with brief, solution-focused therapy.

([11]14) "NASW" means the National Association of Social Workers.

([12]15) "On-the-job training program" as used in Subsections 58-1-307(1)(c) and 58-60-107(2)(g) means a program that:

- (a) applies to an individual who has completed courses required for graduation in a degree or formal training program that qualifies the individual for licensure under [-]Title 58, Chapter 60, Mental Health Professional Practice Act;
- (b) starts immediately upon completion of coursework required for graduation;
- (c)(i) ends 60 days from the date it begins or upon licensure, whichever is earlier; and
- (ii) may not be extended or repeated a second time;
- (d) is completed while the individual is providing clinical mental health services ~~[as an employee of]~~ in a public agency or private clinic; and

(e) is supervised by a mental health training supervisor qualified under Section R156-60e-305.1 who conducts supervision meetings at least weekly in circumstances where the supervisor is physically present in the same room at the same time as the supervised individual.

([13]16) "Practicum" means one or more courses completed as part of a graduate program at an accredited institution of higher learning where the practicum hours are obtained:

- (a) at a public agency or private clinic;
- (b) while engaged in the clinical practice of mental health therapy as used in Subsection 58-60-102(17), 58-60-202(2), 58-60-302(2), 58-60-502(7), or Section 58-60-402; and
- (c) under supervision of a qualified mental health training supervisor as defined in Section R156-60e-305.1.

([14]17) "Public agency or private clinic[-]" as used in Subsections 58-60-308(2)(a)(i), 58-60-407(2)(a)(i), ~~[58-60-502(12),]~~ 58-60-512(2)(a), R156-60e-102.1([9]11)(a), R156-60e-102.1([12]15)(d), R156-60e-102.1([13]16)(a), R156-60e-304.1(1)(b), ~~[R156-60e-307.1(1)(b),]~~ and ~~[R156-60e-308.1(1)(e)]~~ R156-60e-309.1(1)(b)(vi), means one of the following:

- (a) mental health agency;
- (b) in-patient or out-patient hospital;
- (c) educational institution;
- (d) non-profit organization; or
- (e) government agency.

(18) "Supervisee" as used in Subsections 58-60-102(3)(d) and (4)(a)(v) means a supervised individual.

([15]19) "Supervision contract" as used in Subsections 58-60-102(8)(a) and (9) means a written contract between a clinical supervisor and a supervised individual that: ~~[- is signed by both parties, facilitates the experience requirements for licensure, and includes the provisions required by Section R156-60e-306.1.]~~

- (a) is signed by both parties;
- (b) facilitates the experience requirements for licensure; and
- (c) meets the requirements of Section R156-60e-307.1.

(20) "Synchronous" as used in Subsections R156-60e-102.2(4)(a)(ii), R156-60e-302.1(3)(c), R156-60e-306.1(1)(c), R156-60e-307.1(2)(c)(i)(A), and R156-60e-402.1(3)(b)(vi) means a meeting or class where the parties gather:

- (a) virtually or in a physical place; and
- (b) interact in real-time.

### **R156-60e-102.2. Definitions Specific To Social Work.**

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and in Title 58, Chapter 60, Part 2, Social Worker Licensing Act. [-]In addition:

- (1) "ASWB" means the Association of Social Work Boards.



(2) "Clinical social work concentration and practicum," "case work," "group work," or "family treatment course sequence with a clinical practicum," as used in Subsection[s] 58-60-109(2)(b) and Section 58-60-205[(1)(c)(ii), 58-60-205(1)(g), and 58-60-205(2)(c)(ii),] mean a track of professional education that is specifically established to prepare an individual to practice or engage in clinical mental health therapy.

(3) "CSW" means a licensed certified social worker.

(4) "General supervision" as used in Subsection 58-60-202(1)(a) means that the supervisor is available for consultation with the supervised individual:

(a)(i) when both are physically present in the same room at the same time; or

(ii) remotely via a synchronous electronic method that provides real-time communication through interactive technology that enables a supervisor at a distant site and a supervised individual at an originating site to interact simultaneously through two-way audio and video transmission; and

(b) within a reasonable time and consistent with the acts and practices in which the supervised individual is engaged.

(5) "Human growth and development" as used in Subsection 58-60-205(3)(c)(iii)(A)(II) means a course completed from a CSWE-accredited bachelor's degree in social work program that includes an emphasis on human growth and development across the lifespan and from conception to death.

(6) "LCSW" means a licensed clinical social worker.

(7) "Social welfare policy" as used in Subsection 58-60-205(3)(c)(iii)(A)(I) means a course completed from a CSWE-accredited bachelor's degree in social work program that includes an emphasis on the following:

(a) local, state, and federal social policies and how those policies impact individuals, families, and communities; and

(b) the diverse needs of social welfare recipients.

(8) "Social work practice methods" as used in Subsection 58-60-205(3)(c)(iii)(A)(III) means a course from a CSWE-accredited bachelor's degree in social work program that includes an emphasis on the following:

(a) generalist social work practice at the individual, family, group, organization, and community levels;

(b) planned client change processes and social work roles at various levels;

(c) application of key values and principles of the NASW Code of Ethics and resolution of ethical dilemmas; and

(d) evaluation of programs and direct practice in the social work field.

(9) "SSW" means a licensed social service worker.

#### **R156-60e-102.3. Definitions Specific To Marriage and Family Therapy.**

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Part 3, Marriage and Family Therapist Licensing Act. [-]In addition:

(1) "AAMFT" means the American Association for Marriage and Family Therapy.

(2) "AMFT" means an associate marriage and family therapist.

(3) "AMFT-Extern" means an associate marriage and family therapist extern under Section 58-60-117.

(4) "Deficiency" as used in Subsections 58-60-117(1)(d) and R156-60e-302.3([3]4)(a) relating to MFT licensure means the applicant's completed and required educational degree for licensure lacks no more than six semester credit hours or eight quarter credit hours that cover[s] the coursework listed in Subsections R156-60e-302.3([2]3)(a) through (g).

(5) "MFT" means a marriage and family therapist.

#### **R156-60e-102.4. Definitions Specific To Clinical Mental Health Counselor.**

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Part 4, Clinical Mental Health Counselor Licensing Act. [-]In addition:

(1) "ACMHC" means an associate clinical mental health counselor.

(2) "ACMHC-Extern" means an associate clinical mental health counselor extern under Section 58-60-117.

(3) "CMHC" means a clinical mental health counselor.

(4) "Deficiency" as used in Subsections 58-60-117(1)(d) and R156-60e-302.4(2) relating to CMHC licensure means that the applicant's completed and required educational degree for licensure lacks no more than 12 semester credit hours or 18 quarter credit hours of the hours required under Subsection 58-60-405(1)(c)(ii) but still meets the coursework requirements of Subsection R156-60e-302.4(1).

(5) "Equivalent field" as used in Subsection 58-60-405(1)(c)(i)(B) means that the educational program:

(a) prepares students to practice mental health counseling through the study of generally recognized clinical mental health counseling principles, methods, and procedures;

(b) meets the requirements of Subsection R156-60e-302.4(1); and

(c) has adequately prepared the applicant for practice as demonstrated by the applicant passing the NBCC's National Counselor Examination (NCE) to verify education.

(6) "NBCC" means the National Board for Certified Counselors.

#### **R156-60e-102.5. Definitions - Specific To Substance Use Disorder Counselor and Master Addiction Counselor.**

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Part 5, Substance Use Disorder Counselor Act. [-]In addition:

(1) "AMAC" means associate master addiction counselor.

~~[(3)2] (2) "AMAC-Extern" means an associate master addiction counselor extern under Section 58-60-117.]~~

~~[(3)2] (2) "ASAM" means the American Society of Addiction Medicine.~~

~~[(4)3] (3) "ASUDC" means an advanced substance use disorder counselor.~~

## NOTICES OF PROPOSED RULES

~~([5]4)~~ "General supervision" as used in Subsection 58-60-502(3) means experience gathered under the general supervision of a licensed individual who meets the requirements of Section 58-60-508.

~~([6]5)~~ "Human growth and development" as used in Subsection R156-60e-302.5~~(3)(b)(1)~~~~](2)(b)(i)(A)~~ means a course at an accredited institution of higher education that includes an emphasis on human growth and development across the lifespan and from conception to death.

~~([7]6)~~ "IC&RC" means the International Certification and Reciprocity Consortium.

~~([8]7)~~ "Initial assessment" means the procedure of gathering psycho-social information from a client or patient that:

(a) includes the application of the Addiction Severity Index (ASI) as the basis for recommending a level of treatment to assist the mental health therapist supervisor in the information collection process; and

(b) that may include a referral to an appropriate treatment program.

~~([9]8)~~ "MAC" means Master Addiction Counselor.

~~([10]9)~~ "NAADAC" means the Association for Addiction Professionals.

~~([11]10)~~ "NCC AP" means the National Certification Commissions for Addiction Professionals.

~~([12]11)~~ "Prerequisite courses" as used in Subsections 58-60-506(a)(ii)~~(i)~~ and R156-60e-302.5~~(3)(b)~~~~](2)~~ means courses that shall be completed before an individual may qualify for licensure.

~~([13]12)~~ "SASSI" means Substance Abuse Subtle Screening Inventory.

~~([14]13)~~(a) "Screening" as used in Subsections 58-60-502(6)(b) and 58-60-502(9)(b)(i) means a brief interview with the client that is conducted in~~[-]~~person or by other electronic means and is used to determine the potential of a substance abuse problem.

(b) The screening may also include the following:

(i) a preliminary ASAM Criteria recommendation to expedite the subsequent assessment and evaluation process;

(ii) screening instruments such as the SASSI; or

(iii) if a potential problem is identified, a referral for an initial assessment or a substance use disorder evaluation.

~~([15]14)~~ "Substance use disorder evaluation" means the process used to interpret information gathered from a client during an initial assessment, other instruments as needed, and a face-to-face interview with the client by a licensed mental health therapist to determine if the client or patient meets the DSM-5-TR or ICD-10-CM criteria for substance abuse or dependence and requires an individualized treatment plan.

~~([16]15)~~ "Substance use disorder education program" as used in Subsections 58-60-502(13) and 58-60-506(6)(b) means college or university coursework at a regionally accredited institution.

~~([17]16)~~ "Supervised experience" as used in Subsection~~[s]~~ 58-60-506(4)(c)(ii) ~~and (6)(c)~~ means experience gathered under the general supervision of a licensed individual who meets the requirements of Section 58-60-508.

~~([18]17)~~ "SUDC" means a substance use disorder counselor.

### **R156-60e-102.6. Definitions - Specific To Behavioral Health Coach and Behavioral Health Technician.**

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Part 6, Behavioral Health Coach and Technician Licensing Act.

### **R156-60e-202.1. Utah Behavioral Health Board -- Advisory Committees.**

(1) Under Subsection 58-60-102.5(3)(b), the Board shall hear advisory committee reports and make determinations based upon those reports regarding any Division action to be taken on an individual's license or on an application for licensure.

(2) Under Subsection 58-60-102.5(4)(b)(i), the Board shall annually elect a member to serve as chair on each advisory committee that reports to the Board.

(3) Under Subsection 58-60-102.5(4)(c)(i), a member of the Qualifications and Professional Development Advisory Committee may be both a licensed individual and an educator.

(4) Under Subsection 58-60-102.5(4)(c)(ii), a criminal justice professional is an individual who is actively employed or who has retired from employment in at least one of the following capacities:

(a) as a member of law enforcement including a police officer, sheriff, patrol officer, police investigator, police detective, state trooper, or federal agent;

(b) as an attorney in criminal law court including a city attorney, county attorney, district attorney, attorney general, assistant attorney general, city public defender, county public defender, or judge who is a member of the attorney Bar;

(c) in corrections including as a corrections officer, probation officer, parole officer, or warden; or

(d) as an instructor of a criminal justice program from a regionally accredited institution of higher education.

### **R156-60e-302.1. Qualifications for Licensure or Certification - Suicide Prevention Course.**

Under Subsections ~~58-60-105(3)~~, 58-60-205(1)(f), 58-60-305(1)(f), 58-60-405(1)(f), 58-60-506(1)(c), and 58-60-506(6)(b)(ii), the Division~~[-]~~approved two-hour suicide prevention course required to obtain licensure shall be:

(1) approved, sponsored, or conducted by one of the following:

(a) an accredited institution of higher education;

(b) county, state, or federal agency;

(c) professional association, or similar body, involved in clinical mental health therapy; or

(d) mental health agency that provides clinical mental health services;

(2) relevant to mental health therapy and suicide prevention that is consistent with the laws of this state and includes one or more of the following components:

(a) suicide concepts and facts;

- (b) suicide risk assessment, crisis intervention, and first aid;
- (c) evidence-based intervention for suicide risk;
- (d) continuity of care and follow-up services for suicide risk; and
- (e) therapeutic alliances for intervention in suicide risk;
- (3) completed in not less than 50-minute blocks of time in one of the following formats:
  - (a) classroom lecture and discussion;
  - (b) workshop;
  - (c) synchronous webinar;
  - (d) asynchronous online self-paced module;
  - (e) case study review; or
  - (f) simulation; and
- (4) certified as complete via an official document that contains at least the following:
  - (a) course attendance;
  - (b) title, objective, or official description of the course as outlined in Subsection (2);
  - (c) hours completed;
  - (d) name of provider; and
  - (e) date of completion.

**R156-60e-302.2. Qualifications Specific to Social Work Licensure.**

(1) Under Subsections 58-60-205(1)(c)(ii) and ~~58-60-205~~(2)(c)(ii), a doctoral degree that contains a clinical social work concentration and practicum qualifying an applicant for LCSW licensure or CSW licensure shall include professional education that is specifically established to prepare an individual to practice or engage in clinical mental health therapy.

(2) Under Subsection 58-60-205(3)(c)(ii), a master's degree qualifying an applicant for SSW licensure shall be from a regionally accredited institution of higher education in one of the following areas of study:

- (a) clinical mental health counseling;
- (b) education and human development;
- (c) human and social services;
- (d) marriage and family therapy;
- (e) psychology;
- (f) social, behavioral, or health sciences; or
- (g) social work.

(3) Under Subsection 58-60-205(3)(c)(iii)(B), the supervised individual's 2,000 hours of supervised qualifying experience for SSW licensure shall be performed:

- (a) ~~as an employee of~~ in an agency providing social work services and activities;
- (b) according to a written social work job description approved by a licensed mental health therapist supervisor; and
- (c) under the general supervision of an SSW, CSW, or master's level mental health license holder.

(4) Under Subsection 58-60-205(1)(h)(i), an applicant for LCSW licensure shall pass the ASWB Clinical Exam.

(5) Under Subsection 58-60-205(4), an applicant requesting additional testing time shall complete an ASWB application for non-standard testing arrangements.

**R156-60e-302.3. Qualifications Specific to Marriage and Family Therapy Licensure.**

(1) Under Subsection 58-60-305(1)(c)(ii), an applicant for AMFT licensure or MFT licensure shall produce certified transcripts evidencing completion of a clinical master's degree or higher in marriage and family therapy or equivalent from an institution that was accredited by a professional accrediting body approved when the applicant obtained the education.

(2) Under Subsection 58-60-305(1)(e), at least 500 hours of the applicant's required 1,200 direct client hours shall be clinical therapy provided to couples, families, or groups.

~~(2)~~<sup>(3)</sup> Under Subsection 58-60-305(1)(c)(ii), certified transcripts evidencing completion of an equivalent degree shall include the following:

- (a) six semester hours or nine quarter hours of coursework in theoretical foundations of marital and family therapy;
- (b) nine semester hours or 12 quarter hours of coursework in assessment and treatment in marriage and family therapy including the most current diagnostic statistical manual;
- (c) six semester hours or nine quarter hours of course work in human development and family studies that include ethnic minority issues, and gender issues including sexuality, sexual functioning, and sexual identity;
- (d) three semester hours or four quarter hours in professional ethics;
- (e) three semester hours or four quarter hours in research methodology and data analysis;
- (f) three semester hours or four quarter hours in electives in marriage and family therapy; and
- (g) a supervised clinical practicum that includes at least 400 hours as follows:
  - (i) at least 100 hours of direct clinical supervision; and
  - (ii) at least 300 hours of clinical mental health therapy practice under direct clinical supervision with at least 150 hours in couple or family therapy with two or more clients participating.

## NOTICES OF PROPOSED RULES

~~([3]4)(a)~~ An individual whose education after graduation has a deficiency ~~[is deficient in educational requirements]~~ as defined in Subsection R156-60e-102.3(4) ~~[post-degree under this section and qualifies for AMFT Extern licensure under Section 58-60-117]~~ may engage in marriage and family therapy under supervision as outlined in Section R156-60e-304.1 ~~[if:~~

~~(i) the educational deficiency is under Subsection (3)(a), (c), (e), or (f); and~~

~~(ii) the applicant qualifies for AMFT-Extern licensure under Section 58-60-117.~~

(b) No hour earned under Subsection ~~([3]4)(a)~~ may be counted toward an internship, practicum, or associate-level licensure.

~~([4]5)~~ Under Subsection 58-60-305(1)(g)(i), an applicant for MFT licensure shall pass one of the following exams:

(a) Examination in Marital and Family Therapy administered by the Association of Marital and Family Therapy Regulatory Boards (AMFTRB); or

(b) Licensed Marriage and Family Therapist Clinical Examination by the California Board of Behavioral Sciences (BBS).

### **R156-60e-302.4. Qualifications Specific to Clinical Mental Health Counselor Licensure.**

(1) Under Subsection 58-60-405(1)(c), an applicant for ACMHC licensure or ACMHC-Extern licensure shall provide certified transcripts evidencing completion of a degree that includes the following:

(a) at least three semester credit hours or four quarter credit hours of graduate-level courses in the following subjects:

(i) mental status examination, the appraisal of diagnostic and statistical manual maladaptive, and psychopathological behavior; and

(ii) professional and counseling ethics; and

(b) a practicum or internship that includes at least 700 documented hours of supervised clinical mental health counselor training of which at least 240 hours consist of providing clinical therapy directly to clients under the direction of an educational institution.

(2) Under Subsection 58-60-117(1)(d) ~~[if:~~, an individual applying for ACMHC-Extern licensure whose completed educational degree ~~[is deficient as]~~ has a deficiency as defined in Subsection R156-60e-102.4(4) may apply for an ACMHC-Extern license while completing the missing coursework post-degree to obtain an ACMHC license if the courses are taken:

(a) for full credit;

(b) through one institution; and

(c) from a master's or doctoral program in:

(i)(A) clinical mental health counseling, clinical rehabilitation counseling, or counselor education and supervision; and

(B) a program that is accredited by the Council for Accreditation of Counseling and Related Education Programs (CACREP); or

(ii) clinical mental health counseling or an equivalent field as defined in Subsection R156-60e-102.4(5), from an institution accredited by CHEA.

(3)(a) An individual who qualifies to complete educational requirements post-degree under this section and qualifies for ACMHC-Extern licensure under Section 58-60-117 may engage in clinical mental health counseling under supervision as outlined in Section R156-60e-304.1.

(b) No hour obtained under Subsection (2)(a) may be counted toward an internship, practicum, or associate-level licensure.

(4) Under Subsection 58-60-405(1)(g)(i), an applicant for CMHC licensure shall pass the National Clinical Mental Health Counseling Examination (NCMHCE) from the NBCC.

### **R156-60e-302.5. Qualifications Specific to Substance Use Disorder and Master Addiction Counselor Licensure.**

(1) Under Subsections 58-60-506(1)(h)(i) and 58-60-506(4)(c)(iii), an applicant for MAC licensure or ASUDC licensure shall pass one of the following examinations:

(a) Advanced Alcohol and Drug Counselor (AADC) Examination administered by the IC&RC;

(b) National Certified Addiction Counselor, Level II (NCAC II) Examination administered by the NCC AP;

(c) Master Addiction Counselor (MAC) Examination administered by the NCC AP; or

(d) Examination for Master Addiction Counselors (EMAC) administered by the National Board of Certified Counselors (NBCC).

~~[(2) Under Subsection 58-60-506(6)(a)(ii), the completion of the equivalent of an associate's degree for SUDC licensure shall include at least 90 quarter credit hours or 60 semester credit hours of coursework from a regionally accredited institution of higher education or four years of work experience in a related field including:~~

~~(a) human and social services;~~

~~(b) psychology;~~

~~(c) social work;~~

~~(d) social, behavioral, and health sciences; or~~

~~(e) as otherwise determined by the Board.]~~

~~([3]2)(a)~~ Under Subsection 58-60-506(6)(a)(ii) ~~[i]~~, an applicant for SUDC licensure shall complete ~~[each]~~ the prerequisite courses at a regionally accredited institution of higher education.

(b) The prerequisite courses under Subsection (2)(a) shall:

(i) cover the following subjects:

(A) human growth and development across the lifespan and from conception to death; and

(B) general psychology; and

(ii) include a two-hour suicide prevention course as described in Section R156-60e-302.1.

### **R156-60e-302.6. Qualifications Specific To Behavioral Health Coach and Behavioral Health Technician Licensure.**

Reserved.

**R156-60e-303.1. Qualifications for Licensure or Certification - Alternate Examination Pathway.**

An applicant for licensure using an alternate examination pathway under Subsection 58-60-205(1)(h)(ii) as an LCSW, Subsection 58-60-305(1)(g)(ii) as an MFT, Subsection 58-60-405(1)(g)(ii) as a CMHC, or Subsection 58-60-506(1)(h)(ii) as an MAC, shall submit the following:

(1) proof that the applicant attempted the qualifying professional examination after May 1, 2024, except an applicant for CMHC licensure who uses the NBCC's National Counselor Examination (NCE) to verify education in an equivalent field under Subsection R156-60e-102.4(5) may not use the NCE to qualify for licensure under the alternate examination pathway;

(2) a signed alternate exam pathway supervisor association form provided by the Division verifying that the applicant is choosing to use the alternate exam pathway before starting any hours toward the alternate exam pathway 500-hour requirement;

(3) a signed form provided by the Division verifying that the applicant's 500 hours of direct client care hours were obtained under one supervisor;

(4) a recommendation letter [-]from the direct clinical supervisor that contains the following information:

(a) the applicant's:

(i) clinical competency;

(ii) consistency and accuracy of diagnosing;

(iii) orderly decision-making skills;

(iv) use of population-appropriate practices and modalities; and

(v) ability to efficiently and effectively:

(A) screen patients;

(B) make clinical assessments;

(C) draft appropriate treatment plans;

(D) use proper case management;

(E) use proper discharge procedures;

(F) apply ethics and legal standards including managing crises and required reporting;

(G) work within the professional scope of practice;

(H) document treatment; and

(I) use knowledge of profession-relevant laws and rules; and

(b) any ethical violation or concerning behavior by the applicant that occurred during supervision; and

(5) a letter of recommendation from a mental health professional approved by the applicant's direct clinical supervisor who observed the applicant's direct client care and includes the following information:

(a) observed practice including any concern regarding the applicant's work; and

(b) any ethical violation or concerning behavior by the applicant.

**R156-60e-304.1. Supervised Clinical Experience Requirements.**

(1) Under Subsections 58-60-102(3) and (7), 58-60-205(1)(d) and (e), 58-60-305(1)(d) and (e), 58-60-405(1)(d) and (e), and 58-60-506(1)(e) and (f), an applicant shall submit proof that the direct clinical supervision and direct client care hours were obtained as follows:

(a)(i) in Utah ~~[as an employee]~~ while providing clinical mental health services;

(ii) in a state, district, or territory of the United States ~~[as an employee]~~ while providing clinical mental health services if legally obtained under the current law of that state, territory, or district; or

(iii) internationally if:

(A) while the applicant obtained the supervision hours, the license was in a regulated mental health profession, active, and in good standing; or

(B) the applicant was unlicensed, with proof that the applicant's supervision hours were legally obtained as a mental health professional;

(b) in a public agency or private clinic;

(c) after the applicant received a master's or doctoral degree in mental health; and

(d) while the applicant holds an active Utah associate or CSW license, or the out-of-state equivalent.

(2) An applicant who is exempt from licensure under Subsection 58-1-307(1)(a) or (j) may obtain supervision hours while exempt from licensure.

(3) An applicant who is exempt from licensure under Subsection 58-1-307(1)(b) or (c) may not obtain supervision hours while exempt from licensure.

**R156-60e-305.1. Clinical Supervisor Eligibility.**

(1) Under Subsection 58-60-102(4), to be eligible to become a Division-approved clinical supervisor and oversee the clinical supervision of a master's level license holder, ~~[the supervisor]~~ a licensed individual shall:

(a) be an active license holder in good standing in one of the following classifications:

(i) APRN specializing in the practice of clinical mental health therapy under Subsection R156-31b-302e(2);

(ii) CMHC;

(iii) LCSW;

(iv) MFT;

(v) physician who is board certified or board eligible in psychiatry;

(vi) psychologist; or

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- (vii) MAC;
  - (b) ~~(+)~~ hold a master's degree or higher; ~~and~~
  - ~~(ii)(c) be licensed under Subsection (1)(a) for at least two years before providing supervision; and~~
  - ~~(d) complete a supervisor training program that meets the requirements of Section R156-60e-306.1;~~
  - ~~(e) engaged in the lawful practice of providing clinical mental health therapy;~~
  - ~~(e) meet one of the following requirements during the 24 months preceding supervision:~~
    - ~~(i) have overseen or engaged in direct clinical supervision of another licensed individual;~~
    - ~~(ii) provided clinical mental health therapy; or~~
    - ~~(iii) provided direct client care; and~~
  - ~~(f) submit proof to the Division that the licensed individual has completed the training program under Subsection (1)(e) and request Division-approved status as a clinical supervisor.~~
- (2) A training supervisor shall comply with the duties and responsibilities established in Sections R156-60e-30~~[6]~~7.1 and R156-60e-30~~[7]~~8.1.
- (3) A clinical supervisor may not supervise an individual:
- (a) who employs or supervises the clinical supervisor;
  - (b) who is a family member; or
  - (c) if the supervision is compromised by a relationship where the supervisor is controlled by the supervised individual or the supervised individual's employing agency.

**R156-60e-306.1. Clinical Supervisor Training Program.**

- (1) Under Subsection 58-60-102(4), a licensed individual applying to become a Division-approved clinical supervisor shall complete a training course through one of the following approved training pathways:
- (a) complete graduate-level coursework that includes:
    - (i) a clinical supervision course that is:
      - (A) verified by official transcript;
      - (B) completed as a graduate student in an accredited educational institution's doctoral program; and
      - (C) taken after obtaining one of the following licenses:
        - (I) ACMHC;
        - (II) AMAC;
        - (III) AMFT; or
        - (IV) CSW license; or
    - (ii) a clinical supervision course that is:
      - (A) verified by official transcript;
      - (B) completed as a graduate student in an accredited educational institution's clinical psychology doctoral program; and
      - (C) includes a practicum;
  - (b) complete a specialized certification by completing an AAMFT-approved clinical supervision course; or
  - (c) complete a 20-hour synchronous course on learning clinical supervision that:
    - (i) is presented by:
      - (A) a regionally accredited educational institution;
      - (B) a national or state association-approved provider;
      - (C) a professional training organization; or
      - (D) a government agency;
    - (ii) is taught by a mental health license holder from any state, territory, or jurisdiction of the United States or Canada;
    - (iii) is a single, dedicated course of study where all 20 hours are completed under that one course;
    - (iv) with a curriculum that includes:
      - (A) one hour on defining and conceptualizing clinical supervision and models;
      - (B) two hours on the supervisory relationship and the supervised individual's development;
      - (C) six hours on supervision methods and techniques including roles, process, group supervision, multi-cultural supervision, and evaluation;
      - (D) six hours on standards of practice, codes of ethics, and legal and professional issues;
      - (E) two hours on executive and administrative tasks including supervision plans, contracts, record keeping, and reporting; and
      - (F) other supervision-related topics, with up to two hours dedicated to single-profession specific topics;
  - (v) is completed at least 18 months after the licensed individual obtains one of the following licenses:
    - (A) APRN;
    - (B) CMHC;
    - (C) LCSW;
    - (D) MAC;
    - (E) MFT;
    - (F) physician; or
    - (G) psychologist license; and
  - (vi) includes a completion certificate verifying:
    - (A) the course title;

- ~~\_\_\_\_\_ (B) the attendee's name;~~
- ~~\_\_\_\_\_ (C) instructor's name;~~
- ~~\_\_\_\_\_ (D) presenting organization; and~~
- ~~\_\_\_\_\_ (E) total hours.~~

~~\_\_\_\_\_ (2)(a) To maintain approved clinical supervisor status under Subsection 58-60-102(4)(a)(iv), a supervisor shall complete at least six hours of ongoing professional development that is specific to clinical supervision.~~

~~\_\_\_\_\_ (b) The required hours under Subsection (2)(a) may count toward the total hours required to maintain licensure if the ongoing professional development course title clearly states that the course is specific to providing clinical supervision.~~

~~\_\_\_\_\_ (3)(a) If the Division takes formal disciplinary action on the license of a Division-approved clinical supervisor, the clinical supervisor's Division-approval status shall be immediately revoked.~~

~~\_\_\_\_\_ (b) A licensed individual whose status was revoked under Subsection (3)(a) who applies to requalify as a Division-approved supervisor shall:~~

- ~~\_\_\_\_\_ (i) successfully comply with the disciplinary order;~~
- ~~\_\_\_\_\_ (ii) hold an active license in good standing; and~~
- ~~\_\_\_\_\_ (iii) retake an approved clinical supervision course.~~

#### **R156-60e-30[6]7.1. Clinical Supervision Contract -- Requirements.**

~~[\_\_\_\_\_ Under Subsections 58-60-102(8) and (9), the supervision contract required for an individual to obtain clinical supervision for licensure is established and clarified as follows:~~

~~\_\_\_\_\_ (1) before accruing clinical supervised experience, an individual shall enter a written supervision contract with an eligible supervisor that both parties sign; and~~

~~\_\_\_\_\_ (2) a supervision contract shall include at least the following provisions:~~

~~\_\_\_\_\_ (a) a plan to ensure the supervised individual has access to the supervisor;~~

~~\_\_\_\_\_ (b) a plan for meetings between the supervisor and the supervised individual that addresses the following meeting parameters:~~

~~\_\_\_\_\_ (i) frequency;~~

~~\_\_\_\_\_ (ii) duration;~~

~~\_\_\_\_\_ (iii) objectives;~~

~~\_\_\_\_\_ (iv) format, such as individual or small group;~~

~~\_\_\_\_\_ (v) location, such as face to face or remotely; and~~

~~\_\_\_\_\_ (vi) HIPAA and other confidentiality compliance in technology use including artificial intelligence (AI) in practice;~~

~~\_\_\_\_\_ (c) a plan for documenting the ongoing supervision including objective and measurable goals;~~

~~\_\_\_\_\_ (d) a plan to address potential conflicts between the supervisor's clinical recommendation and the clinical recommendation of the supervised individual's employer;~~

~~\_\_\_\_\_ (e) remedies in the event of a breach of contract by either the supervisor or the supervised individual including procedures for contract termination;~~

~~\_\_\_\_\_ (f) reasons why clinical supervision hours may not meet a clinical supervision requirement;~~

~~\_\_\_\_\_ (g) procedure for ensuring the supervisor signs the clinical supervision hours at least monthly;~~

~~\_\_\_\_\_ (h) who to contact in an emergency;~~

~~\_\_\_\_\_ (i) how notification will be provided to the supervised individual's clients or patients regarding the supervised individual's live or recorded direct client care; and~~

~~\_\_\_\_\_ (j) if any part of the supervision will be conducted remotely, plans for:~~

~~\_\_\_\_\_ (i) how the supervisor and supervised individual will:~~

~~\_\_\_\_\_ (A) meet remotely via synchronous electronic method that provides real-time communication through interactive technology that enables a supervisor at a distant site and a supervised individual at an originating site to interact simultaneously through two-way audio and video transmission; and~~

~~\_\_\_\_\_ (B) protect the security of electronic confidential data and information;~~

~~\_\_\_\_\_ (ii) how the supervisor will comply with the supervisor's duties and responsibilities;~~

~~\_\_\_\_\_ (iii) in rural settings, how the supervisor will physically visit the location where the supervised individual practices:~~

~~\_\_\_\_\_ (A) on at least a quarterly basis; or~~

~~\_\_\_\_\_ (B) at such lesser frequency as is approved in advance by the Division in collaboration with the Board; and~~

~~\_\_\_\_\_ (iv) how notice will be provided to the supervised individual's clients or patients and employer regarding the supervised individual's use of remote supervision.]~~

~~\_\_\_\_\_ (1) Under Subsections 58-60-102(8)(a) and (9), the requirements of a clinical supervision contract for an individual seeking clinical supervision for licensure are established, defined, and clarified in this section.~~

~~\_\_\_\_\_ (2) The clinical supervision contract shall include the following provisions:~~

~~\_\_\_\_\_ (a) a meeting and accessibility plan that includes:~~

~~\_\_\_\_\_ (i) a plan to ensure the supervised individual has consistent access to the clinical supervisor;~~

~~\_\_\_\_\_ (ii) a plan for meetings that specifies the following for each meeting:~~

~~\_\_\_\_\_ (A) that the frequency of the meetings will be at least weekly;~~

~~\_\_\_\_\_ (B) the weekly meeting shall last at least 50 minutes;~~

~~\_\_\_\_\_ (C) the format of the meeting, such as individual or a small group; and~~

~~\_\_\_\_\_ (D) the location of the meeting, such as in-person or remote; and~~

- ~~(iii) the learning objectives, progress goals for the supervised individual, and expectations of the supervisor;~~
- ~~(b) a documentation and communication plan that includes:~~
  - ~~(i) a plan for documenting ongoing supervision, with a focus on competency-based measures;~~
  - ~~(ii) a procedure for ensuring the supervisor signs the clinical supervision hours at least quarterly; and~~
  - ~~(iii) a plan for who to contact in case of an emergency;~~
- ~~(c) an ethical and professional standards plan that includes:~~
  - ~~(i) the specific code of ethics that will be used by both the clinical supervisor and the supervised individual;~~
  - ~~(ii) an outline of the ethical requirement to report any unethical actions or violations of the ethical code; and~~
  - ~~(iii) a detailed plan of how the use of artificial intelligence (AI) will be managed in practice, including its role in:~~
    - ~~(A) supervision;~~
    - ~~(B) administration;~~
    - ~~(C) note and report writing; and~~
    - ~~(D) best practices;~~
- ~~(d) a conflict and breach resolution plan that includes:~~
  - ~~(i) a plan for addressing potential conflicts between the supervisor's clinical recommendations and those of the supervised individual's employer;~~
  - ~~(ii) remedies in the event of a contract breach by either party, including procedures for contract termination; and~~
  - ~~(iii) a list of reasons why clinical supervision hours may not meet the clinical supervision requirements; and~~
- ~~(e) if any part of the supervision is remote, a remote supervision protocols plan that includes:~~
  - ~~(i) an outline of:~~
    - ~~(A) how the parties will meet via synchronous electronic methods with two-way audio and video; and~~
    - ~~(B) how the security of confidential electronic data will be protected; and~~
  - ~~(ii) a specific plan that includes:~~
    - ~~(A) how the clinical supervisor will comply with supervision duties;~~
    - ~~(B) how the supervised individual will be notified of the use of remote supervision; and~~
    - ~~(C) how the supervised individual's clients or patients and employer will be notified of the remote supervision.~~

**R156-60e-30[7]8.1. Clinical Supervisor - Duties and Responsibilities[~~-of a Clinical Supervisor~~].**

- ~~(1) Before providing clinical supervision, a supervisor shall[~~:~~~~
- ~~(a)] enter a written supervision contract with the supervised individual that meets the requirements of Section R156-69-307.1[~~;~~ and~~
- ~~(b) ensure that during the period of supervised experience, the supervised individual is an employee providing clinical mental health services at a public agency or private clinic.~~
- ~~(2) A clinical supervisor shall have the following duties and responsibilities:~~
  - ~~(a) ensure that during the period of clinical supervision:~~
    - ~~(i) the clinical supervisor and supervised individual remain appropriately licensed; and~~
    - ~~(ii) comply with the terms of the supervision contract;~~
  - ~~(b) maintain a relationship with the supervised individual in which the clinical supervisor is independent of control, and the ability of the clinical supervisor to supervise and direct the practice of the supervised individual is not compromised;~~
  - ~~(c) be available to the supervised individual for advice, consultation, and direction that is consistent with the standards and ethics of the profession and the requirements suggested by the totality of the circumstances including consideration of the supervised individual's level of training, diagnosis of patients, and other factors known to the supervisor;~~
  - ~~(d) periodically review the client records assigned to the supervised individual;~~
  - ~~(e) comply with the confidentiality requirements of Section 58-60-114;~~
  - ~~(f) monitor the supervised individual's performance for compliance with the laws, rules, standards, and ethics of the profession, and report any violation to the Division;~~
  - ~~(g) be professionally responsible for the acts and practices of the supervised individual that are a part of the required clinical supervision; and~~
  - ~~(h) upon completion of the clinical supervised training, submit the following to the Division on forms provided by the Division:~~
    - ~~(i) documentation of the clinical supervision hours completed by the supervised individual; and~~
    - ~~(ii) the supervisor's evaluation of the supervised individual concerning the quality of the work performed and the supervised individual's competency to practice in the profession.~~
- ~~(3)(a) If a clinical supervisor does not support the Division's issuance of a license to a supervised individual to practice unsupervised, or if the clinical supervisor has another concern regarding the supervised individual that the clinical supervisor believes requires input from the Division and Board, then the clinical supervisor shall submit the following to the Division:~~
  - ~~(i) a current clinical supervision hours reporting form; and~~
  - ~~(ii) a written explanation outlining the clinical supervisor's concerns.~~
- ~~(b) After the Division receives a clinical supervisor's written concerns, the Division:~~
  - ~~(i) shall provide the supervised individual with an opportunity to respond to the Division in writing regarding the clinical supervisor's concerns;~~
  - ~~(ii) shall review the written statements from the clinical supervisor and supervised individual with the Board; and~~
  - ~~(iii) in consultation with the Board, may require the supervised individual to obtain additional clinical supervised hours, education, or training before the supervised individual may be licensed.~~



~~(4) A clinical supervisor shall notify the Division in writing within 30 days of the following changes:~~  
~~(a) termination of a supervision contract;~~  
~~(b) a change in the supervised individual's place of employment; or~~  
~~(c) disciplinary action taken against a supervised individual at their place of employment.]~~  
~~(2) A clinical supervisor shall have the following duties and responsibilities:~~  
~~(a) maintain appropriate licensure and independence including:~~  
~~(i) ensuring that both the clinical supervisor and the supervised individual hold and maintain current, valid licenses; and~~  
~~(ii) ensuring that the clinical supervisor's ability to supervise and direct the individual's practice is not compromised by any relationship where the supervisor is controlled by the supervised individual or the supervised individual's employing agency;~~  
~~(b) provide guidance and direction including:~~  
~~(i) being available to the supervised individual for advice, consultation, and direction that is:~~  
~~(A) consistent with the standards and ethics of the profession; and~~  
~~(B) tailored to the individual's level of training, patient diagnoses, and other relevant factors;~~  
~~(ii) working with the supervised individual to:~~  
~~(A) develop a well-conceptualized supervision plan; and~~  
~~(B) update the supervision plan when there is a change in:~~  
~~(I) employment;~~  
~~(II) job function;~~  
~~(III) supervision goals; or~~  
~~(IV) the method of supervision;~~  
~~(iii) periodically reviewing the client records assigned to the supervised individual;~~  
~~(iv) ensuring that each supervised individual knows and adheres to the supervised individual's authorized scope of practice; and~~  
~~(v) reviewing and understanding the statutes, rules, and ethics specific to the license type the supervised individual is working toward;~~  
~~(c) monitor and enforce compliance including:~~  
~~(i) ensuring that both parties follow the supervision contract;~~  
~~(ii) monitoring the supervised individual's performance for compliance with all applicable laws, rules, standards, and professional ethics;~~  
~~(iii) being professionally responsible for the supervised individual's acts and practices that are part of the required clinical supervision;~~  
~~(iv) ceasing to provide supervision after becoming aware that a supervised individual is practicing outside their authorized scope of practice; and~~  
~~(v) providing notice to the Division within ten days after the supervisor becomes aware of the supervised individual's violation or practice outside the scope of practice;~~  
~~(d) manage documentation and reporting including:~~  
~~(i) requiring each supervised individual to maintain a monthly supervision log;~~  
~~(ii) upon completion of the supervised individual's required clinical training, submitting the following to the Division on forms provided by the Division:~~  
~~(A) documentation verifying that the supervised individual completed the required clinical supervision hours; and~~  
~~(B) the supervisor's evaluation of the supervised individual's competency to practice subject to Subsection (2)(d)(iii);~~  
~~(iii) notifying the Division if the clinical supervisor does not support the issuance of a license to the individual or has other concerns and submitting:~~  
~~(A) the supervised individual's current hours reporting form; and~~  
~~(B) a written explanation of the clinical supervisor's concerns;~~  
~~(iv) notifying the Division in writing within 30 days of:~~  
~~(A) the termination of a supervision contract;~~  
~~(B) a change in the supervised individual's place of employment; or~~  
~~(C) disciplinary action taken against a supervised individual at their place of employment that involves professional misconduct or unlawful conduct; and~~  
~~(v) complying with the confidentiality requirements of Section 58-60-114;~~  
~~(e) defining the structure of the clinical supervision including specifying the following:~~  
~~(i) up to ten hours of direct clinical supervision may be counted toward the supervised individual's licensure hours in any 30-day period;~~  
~~(ii) clinical supervision will occur in proportion to the number of actual hours that the supervised individual works;~~  
~~(iii) clinical supervisions may be provided:~~  
~~(A) through:~~  
~~(I) group clinical supervision sessions with up to six supervised individuals in a group;~~  
~~(II) in one-on-one sessions; or~~  
~~(III) a combination of Subsections (3)(e)(iii)(A)(I) and (II); and~~  
~~(B) using one of the following formats:~~  
~~(I) in-person; or~~  
~~(II) via electronic means that comply with state and federal laws; and~~  
~~(iv) each clinical supervision session and format used will encourage clear, accurate communication that meets confidentiality standards and promotes professional growth; and~~

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- ~~(f) address disciplinary matters including:~~
- ~~(i) a clinical supervisor subject to a Division disciplinary order and is no longer a Division-approved supervisor under Section R156-60e-30 shall:~~
  - ~~(A) inform each supervised individual that the clinical supervisor is no longer a Division-approved clinical supervisor; and~~
  - ~~(B) assist each supervised individual find alternate clinical supervision; and~~
- ~~(ii) a supervisor who agrees to supervise a licensee under a Division-ordered disciplinary action shall review and understand the order, follow all stipulations, and help the licensee remediate the behaviors that led to the discipline.~~
- ~~(3)(a) If the clinical supervisor's employer compensates the clinical supervisor for supervising a supervised individual, then the clinical supervisor may not charge the supervised individual an additional fee.~~
- ~~(b) If the supervised individual directly pays the clinical supervisor for the supervision services, then the clinical supervisor shall:~~
  - ~~(i) notify the clinical supervisor's employing agency;~~
  - ~~(ii) obtain and maintain written approval from the employing agency; and~~
  - ~~(iii) produce the written approval to the Division upon request.~~
- ~~(4) If the clinical supervisor's license expires or receives formal Division discipline, then any of the supervised individual's clinical supervision hours obtained after the expiration or the discipline may only be counted toward licensure hours if approved by the Division in collaboration with the Board.~~
- ~~(5) If the Division receives a supervisor's written concerns about a supervised individual under Subsection (3)(d)(iii), the Division:~~
  - ~~(a) shall provide the supervised individual an opportunity to respond;~~
  - ~~(b) shall review all statements with the Board; and~~
  - ~~(c) may require the supervised individual to obtain additional hours, education, or training.~~

### **R156-60e-30[8]2.1. Supervised Individual - Duties and Responsibilities~~[of a Supervised Individual]~~.**

- ~~(1) A supervised individual shall have the following duties and responsibilities:~~
  - ~~(a) before beginning any clinical supervised training:~~
  - ~~(i) enter a written supervision contract with the clinical supervisor ~~[under]~~that meets the requirements of Section R156-60e-30[6]7.1;[~~  
~~and]~~
  - ~~(ii) submit ~~[to the Division]~~a signed clinical supervisor association form, provided by the Division, to the Division; and~~
  - ~~(iii) within 30 days of initiating supervision, submit to the Division the supervision contract and a clearly defined job description that is consistent with your scope of practice;~~
  - ~~(b) Maintain compliance and ethical standards including:~~
    - ~~(i) maintain all required licensure;~~
    - ~~(c) maintain employment providing clinical mental health services at a public agency or a private clinic;~~
    - ~~(d) comply with the terms of the supervision contract;~~
    - ~~(e) maintain a professional relationship with the clinical supervisor where: ~~[in which the clinical supervisor is independent of control from the supervised individual, and the ability of the clinical supervisor to supervise and direct the practice of the supervised individual is not compromised;]~~~~
      - ~~(A) the clinical supervisor is independent of control from the supervised individual; and~~
      - ~~(B) the ability of the clinical supervisor to supervise and direct the practice of the supervised individual is not compromised;~~
    - ~~(iii) comply with the terms of the supervision contract;~~
    - ~~(f)iv) comply with the confidentiality requirements of Section 58-60-114; and~~
    - ~~(g)v) ~~[comply with the]~~adhere to all applicable laws, rules, standards, and ethics of the profession[-]; and~~
    - ~~(vi) maintain employment providing clinical mental health services at a public agency or a private clinic; and~~
    - ~~(2)c) ~~[A supervised individual shall]~~notify the Division in writing within 30 days of ~~[the following changes]:~~~~
      - ~~(a)i) the termination of a supervision contract;~~
      - ~~(b)ii) a change in the supervised individual's place of employment; or~~
      - ~~(e)iii) disciplinary action taken against a supervised individual at their place of employment that involves professional misconduct or unlawful conduct.~~
  - ~~(2) If the supervised individual's license expires or receives formal Division discipline, then any of the supervised individual's clinical supervision hours obtained after the expiration or the discipline may only be counted toward licensure hours if approved by the Division in collaboration with the Board.~~

### **R156-60e-402.1. Ongoing Professional Development - Continuing Education.**

- ~~(1) Under Subsections 58-1-203(1)(g), 58-1-308(3)(b), and 58-60-102.5(5)(d), and Sections 58-60-105 and 58-60-205.5, and subject to Subsection (9), the hours of ongoing professional development requirements or continuing education requirements for each two-year renewal cycle shall:~~
  - ~~(a) be completed by a licensed individual based on the educational degree used for licensure or the equivalent as follows:~~
    - ~~(i) 40 hours for a master's degree or higher;~~
    - ~~(ii) 20 hours for a bachelor's degree; or~~
    - ~~(iii) ten hours for an associate's degree; and~~
  - ~~(b) include:~~
    - ~~(i) six hours of professional ethics, law, or ethics of technology; and~~
    - ~~(ii) two hours in suicide prevention through a course that meets the requirements of Section R156-60e-302.1.~~

(2) A licensed individual who completes more than the required number of ongoing professional development hours during a two-year renewal cycle may carry over excess hours to the next two-year renewal cycle based on educational degree used for licensure or equivalent as follows:

- (a) up to ten hours for a master's degree or higher;
- (b) up to five hours for a bachelor's degree; or
- (c) up to five hours for an associate's degree.

(3) Under Subsection 58-60-102.5(5)(d) and Sections 58-60-105 and 58-60-205.5, [-]a licensed individual shall complete the ongoing professional development hours required under Subsection (1) through courses that are:

- (a) approved, conducted, or under the sponsorship of one of the following:
    - (i) an accredited institution of higher education;
    - (ii) county, state, or federal agency;
    - (iii) professional association, or similar body, involved in clinical mental health therapy or substance use disorder treatment; or
    - (iv) mental health agency that provides clinical mental health services or substance use disorder treatment;
  - (b) completed in one of the following formats:
    - (i) college or university lecture and discussion, up to three ongoing professional development hours per semester hour or one and one-half hours per quarter hour;
    - (ii) professional conference;
    - (iii) lecture or instruction, up to two times per course and up to five hours;
    - (iv) seminar;
    - (v) training session;
    - (vi) synchronous distance learning course that is clearly documented as real-time and interactive;
    - (vii) asynchronous distance learning course that is not real-time or interactive, up to ~~[40]~~ten hours;
    - (viii) specialty certification;
    - (ix) certifiable clinical readings, up to ten hours;
    - (x) direct clinical supervision of a licensed individual completing the experience requirements for advanced licensure, up to ten hours;
    - (xi) volunteer service on a board, committee, or in a leadership role in any state, national, or international organization for the development and improvement of the licensed individual's profession up to six hours;
    - (xii) volunteer service providing mental health services, up to ten hours;
    - (xiii) peer case consultation, up to ten hours; or
    - (xiv) peer direct observation, up to ten hours;
  - (c) prepared and presented by an individual who is qualified by education, training, and experience to provide ongoing professional development;
    - (d) relevant to the licensed individual's scope of practice; and
    - (e) is verified by:
      - (i) a certificate of course completion that shall include the following:
        - (A) name of the attendee;
        - (B) name of course provider;
        - (C) name of instructor;
        - (D) date of the course;
        - (E) title of the course;
        - (F) number of course hours;
        - (G) course objectives; and
        - (H) format of professional development [-]under Subsection (3)(b); or
      - (ii) a letter from:
        - (A) a peer who also participated; or
        - (B) an individual who oversaw the licensee's volunteer service.
- (4) A licensed individual shall maintain adequate documentation as proof of compliance for two years after the end of the renewal cycle for which the ongoing professional development is due.
- (5) An individual may only carry forward ongoing professional development hours completed after the renewed license was initially granted including any professional upgrade.
- (6) Ongoing professional development hours shall be increased or decreased proportionately based on the date of licensure within the two-year renewal cycle.
- (7) Under Section R156-1-308d, the Division may defer or waive ongoing professional development requirements.
- (8) The Division shall randomly audit a licensed individual's ongoing professional development hours during each two-year renewal window.
- (9) To maintain approval, Division-approved clinical supervisors shall complete an additional six hours of ongoing professional development specifically related to supervision during each two-year renewal cycle.

#### **R156-60e-403.1. Renewal and Reinstatement of License.**

(1) Under Subsection 58-1-308(1), the renewal date for the two-year renewal cycle applicable to licenses under Title 58, Chapter 60, Mental Health Professional Practice Act, is established in Section R156-1-308a.

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(2) Under Section 58-60-117, the Division may extend a current externship license or reinstate an expired externship license for one additional three-year term if the licensed individual completes the following:

- (a) submits an application;
- (b) pays the application fee; and
- (c) has attempted the profession-specific exam at least once while holding the previous extern license.

(3) Under Sections 58-60-304, 58-60-404, and 58-60-504, the Division may reinstate an associate license for one additional three-year term if the licensed individual completes the following:

- (a) submits an application;
- (b) pays the application fee;
- (c) has completed at least 40 hours of ongoing professional development under Section R156-60e-402.1 during the preceding two years;

- (d) has attempted the specific mental health profession exam at least once while holding the previous associate license; and
- (e) has completed at least one-half of the supervision hours required to advance licensure.

(4) Under Subsections 58-1-203(g), 58-60-102.5(4)(d)(iii), 58-60-102.5(4)(e)(iii), and 58-60-102.5(4)(f)(iii), reinstatement procedures shall be in accordance with this section and Sections R156-1-308a through R156-1-308l, except as provided in Subsection (5).

(5) Under Subsection 58-1-308(6)(a) and Section R156-1-308g, an applicant for reinstatement of licensure whose unencumbered license has been expired between two and five years shall, upon Division request:

(a) meet with the Behavioral Health Board's Qualification and Professional Development Advisory Committee to evaluate the applicant's ability to safely and competently practice [-]within the scope for the license held; and

(b) if recommended by the Behavioral Health Board's Qualification and Professional Development Advisory Committee with the concurrence of the Behavioral Health Board, complete one or more of the following:

(i) establish a plan of clinical supervision under an approved supervisor which may include up to 1,200 hours of direct client care while holding an associate's level license or CSW license before qualifying for reinstatement of full master's level licensure; or

(ii) complete up to 40 hours of continuing education in subjects determined by the Behavioral Health Board's Qualification and Professional Development Advisory Committee.

(6) Under Subsections 58-1-308(5)(a) and (6)(a) and Section R156-1-308h, an applicant for reinstatement of licensure whose license was suspended, revoked, or otherwise disciplined shall, upon Division request:

(a) meet with the Behavioral Health Board's Background and Investigations Advisory Committee to evaluate the applicant's ability to safely and competently practice within the scope for the license held; and

(b) if recommended by the Background and Investigations Advisory Committee with the concurrence of the Behavioral Health Board, agree to one of the following:

- (i) a three-year probationary license with conditions set by the Behavioral ~~[h]~~Health Board; or
- (ii) a five-year probationary license with conditions set by the Behavioral Health Board.

### **R156-60e-502.1. Unprofessional Conduct Affecting All Mental Health License Holders.**

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

(1) using one of the following abbreviated titles without the required licensure:

- (a) ACMHC;
- (b) ACMHC-Extern;
- (c) AMAC;
- ~~[(d) AMAC-Extern;]~~
- ~~[(e)d]~~ AMFT;
- ~~[(f)e]~~ AMFT-Extern;
- ~~[(g)f]~~ ASUDC;
- ~~[(h)g]~~ BHC unless licensed has a behavioral health coach;
- ~~[(i)h]~~ CMHC;
- ~~[(j)i]~~ CSW;
- ~~[(k)j]~~ LCSW;
- ~~[(l)k]~~ MAC;
- ~~[(m)l]~~ MFT;
- ~~[(n)m]~~ SSW; or
- ~~[(o)n]~~ SUDC;

(2) acting as a supervisor or accepting supervision from a supervisor without complying with or ensuring compliance with Subsections 58-60-102(~~[(2)3]~~), (4), and (7) through (10), and Sections R156-60e-30~~[(6)7]~~.1, R156-60e-30~~[(7)8]~~.1, and R156-60e-30~~[(8)9]~~.1;

(3) directing one's clinical supervisor to engage in a practice that would violate any statute, rule, or generally accepted professional or ethical standard of the supervisor's profession;

(4) directing a supervised individual to engage in a practice that would violate any statute, rule, or generally accepted professional or ethical standard of the supervised individual's profession;

~~[(5) providing supervision without current and valid status as a Division-approved clinical supervisor;~~

~~[(5)6]~~ engaging in, aiding, or abetting:

- (a) conduct or a practice that is dishonest, deceptive, or fraudulent;
- (b) deceptive or fraudulent billing practices;

- (c) sexual harassment or any conduct that is exploitive or abusive concerning a student, trainee, employee, or colleague with whom the licensed individual has supervisory or management responsibility; or
- (d) physical contact with a client when there is a risk of exploitation or potential harm to the client resulting from the contact;
- (~~6~~7) engaging in a dual relationship or multiple relationships with a client or former client in violation of the standards set by the licensee's professional code of ethics as established in this rule;
- (~~7~~8) knowingly engaging in a sexual activity or sexual contact with a client's relative or another individual with whom the client maintains a relationship in violation of the standards set by the licensee's professional code of ethics as established in this rule;
- (~~8~~9) exploiting one of the following for personal gain:
  - (a) a client;
  - (b) a former client; or
  - (c) an individual who has a personal relationship with a client;
- (~~9~~10) failing to:
  - (a) establish and maintain professional boundaries with a client or former client;
  - (b) exercise professional discretion and impartial judgment required for the performance of professional activities, duties, and functions;
  - (c) provide impartial, objective, and informed services, recommendations, or opinions concerning:
    - (i) custodial or parental rights;
    - (ii) divorce;
    - (iii) domestic relationships;
    - (iv) adoption;
    - (v) mental competency;
    - (vi) mental health; or
    - (vii) another determination concerning an individual's civil or legal rights;
  - (d) maintain client records including records of assessment, treatment, progress notes, and billing information, for at least ten years from the documented termination of services to the client;
  - (e) provide client records in a reasonable time upon written request of the client or the client's legal guardian;
  - (f) obtain informed consent from the client or the client's legal guardian before recording or permitting a third-party observation of a client's activities or records;
  - (g) protect the confidences of an individual named or identified in the client records;
  - (h) follow the Model Standards of Practice for Child Custody Evaluation of the Association of Family and Conciliation Courts (AFCC) May 2006, which is incorporated by reference;
  - (i) cooperate with the Division during an investigation;
  - (j) obtain a thorough working knowledge of the Code of Ethics specifically related to the licensed individual's professional practice;
  - (k) as a supervisor, obtain a thorough working knowledge of the Code of Ethics specifically related to any supervised individual's professional practice; or
  - (l) provide notification as required under Subsection 58-60-110(1)(e) on each agency or practitioner website, or if no website exists, provide notification by paper or electronic document to each individual receiving mental health services;
- (~~10~~11) when providing services remotely, failing to:
  - (a) practice according to professional standards of care in the delivery of services;
  - (b) protect the security of electronic confidential data and information; or
  - (c) appropriately store and dispose of electronic confidential data and information;
- (~~11~~12) violating:
  - (a) Section R156-60e-30(~~4~~7).1 regarding [~~supervised experience~~]the clinical supervision contract;
  - (b) Section R156-60e-30(~~7~~8).1 as a clinical supervisor; or
  - (c) Section R156-60e-30(~~8~~9).1 as a supervised individual.

#### **R156-60e-502.2. Unprofessional Conduct Specific To Social Work Licensed Professionals.**

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

- (1) failing to abide by the following:
  - (a) NASW Code of Ethics as approved by the 1996 NASW Delegate Assembly and revised by the 2020 and 2021 NASW Delegate Assembly, which is incorporated by reference; and
  - (b) NASW, ASWB, CSWE, and Clinical Social Work Association (CSWA) Standards for Technology in Social Work Practice as approved by the 2017 NASW Delegate Assembly, which is incorporated by reference; or
- (2) engaging in the supervised practice of clinical mental health therapy as a licensed CSW if the licensed individual:
  - (a) has not completed a clinical practicum while obtaining a master's degree accredited by CSWE or the Canadian Association of Schools of Social Work; or
  - (b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-30(~~6~~7).1 and R156-60e-30(~~8~~9).1.

#### **R156-60e-502.3. Unprofessional Conduct Specific To Marriage and Family Therapy Licensed Professionals.**

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

- (1) failing to abide by the AAMFT Code of Ethics, effective January 1, 2015, which is incorporated by reference; or

## NOTICES OF PROPOSED RULES

(2) engaging in the supervised practice of clinical mental health therapy as a licensed AMFT or AMFT-Extern if the licensed individual:

(a) has not completed a clinical practicum while obtaining a master's degree accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE); or

(b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-30[6]7.1 and R156-60e-30[8]9.1.

### **R156-60e-502.4. Unprofessional Conduct Specific To Clinical Mental Health Counselor Licensed Professionals.**

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

(1) failing to abide by the American Mental Health Counselors Association's ACMHC Code of Ethics, Revised 2020, which is incorporated by reference; or

(2) engaging in the supervised practice of clinical mental health therapy as a licensed ACMHC or ACMHC-Extern if the licensed individual:

(a) has not completed a clinical practicum while obtaining a master's degree accredited by CHEA or the Council for Accreditation of Counseling and Related Educational Programs (CACREP); or

(b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-30[6]7.1 and R156-60e-30[8]9.1.

### **R156-60e-502.5. Unprofessional Conduct Specific To Substance Use Disorder and Master Addiction Counselor Licensed Professionals.**

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

(1) failing to abide by the NAADAC/NCC AP Code of Ethics, January 1, 2021 edition, which is incorporated by reference;

(2) engaging in the supervised practice of substance use disorder treatment as a licensed ASUDC if the licensed individual:

(a) has not completed a substance use disorder education program accredited by CHEA; or

(b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-30[6]7.1 and R156-60e-30[8]9.1; or

(3) engaging in the supervised practice of clinical mental health or substance use disorder therapy as a licensed AMAC ~~or AMAC-Extern~~ if the licensed individual:

(a) has not completed a clinical practicum while obtaining a master's degree accredited by:

(i) CHEA; or

(ii) the National Addiction Studies Accreditation Commission (NASAC); or

(b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-30[6]7.1 and R156-60e-30[8]9.1.

### **R156-60e-502.6. Unprofessional Conduct Specific To Behavioral Health Coach and Behavioral Health Technician Licensed Professionals.**

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

(1) failing to abide by the following:

(a) NASW Code of Ethics as approved by the 1996 NASW Delegate Assembly and revised by the 2020 and 2021 NASW Delegate Assembly, which is incorporated by reference; and

(b) NASW, ASWB, CSWE, and Clinical Social Work Association (CSWA) Standards for Technology in Social Work Practice as approved by the 2017 NASW Delegate Assembly, which is incorporated by reference; or

(2) engaging in the supervised practice of providing mental health or substance use disorder services as a licensed behavioral health coach if the licensed individual:

(a) has not completed a practicum while obtaining a bachelor's degree from a regionally accredited institution of higher education; or

(b) is not in compliance with Subsection 58-60-110(1)(b) and Subsections 58-60-601(4) and (6)[~~(a)~~].

**KEY:** licensing, social worker, therapist, marriage and family therapist, counselor, mental health, clinical mental health counselor, substance use disorder counselor, master addiction counselor, behavioral health coach, behavioral health technician

**Date of Last Change:** ~~August 11,~~ 2025

**Authorizing, and Implemented or Interpreted Law:** 58-1-106(1)(a); 58-1-202(1)(a); 58-60-201; 58-60-301; 58-60-401; 58-60-501

## NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R156-61**

**Filing ID: 57657**

### Agency Information

<b>1. Title catchline:</b>	Commerce, Professional Licensing
<b>Building:</b>	Heber M Wells Building
<b>Street address:</b>	160 E 300 S
<b>City, state:</b>	Salt Lake City, UT 84111
<b>Mailing address:</b>	PO Box 146741

<b>City, state and zip:</b>	Salt Lake City, UT 84114-6741	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Brian Pedersen	801-530-6651	Bpedersen@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

### General Information

<b>2. Rule or section catchline:</b>
R156-61. Psychologist Licensing Act Rule
<b>4. Purpose of the new rule or reason for the change:</b>
The Division of Professional Licensing (Division) in collaboration with the Behavioral Health Board (Board) is filing this amendment to this rule to correct a typographical error found in the current text, and to remove language for exam requirements that will not be in place.
<b>5. Summary of the new rule or change:</b>
<p>The proposed amendments make the following changes:</p> <p>Subsection R156-61-302a(3)(h)(ii): clarifies that the applicant's internship may be in either school counseling or counseling psychology rather than being in both school counseling and counseling psychology.</p> <p>Subsections R156-61-102(8) and R156-61-302(1)(a): removes the reference to the two parts of the Examination for the Professional Practice of Psychology (EPPP) developed by the Association of State and Provincial Psychology Boards (ASPPB). The ASPPB has decided not to bifurcate the EPPP into two parts.</p> <p>Consequently, all references within this rule to the EPPP having two parts are being removed. Removing this terminology is necessary to prevent confusion for applicants and to ensure this rule accurately reflects the current, single-part structure of the national examination requirement.</p>

### Fiscal Information

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
<p>The proposed amendments are limited to the correction of a typographical error and clarifying the format of the qualifying exam.</p> <p>As these changes are purely clerical and do not alter the substantive intent, meaning, or application of this rule, the Division does not anticipate any fiscal impact on state revenues or expenditures.</p>
<b>B. Local governments:</b>
<p>The proposed amendments are limited to the correction of a typographical error and clarifying the format of the qualifying exam.</p> <p>As these changes are purely clerical and do not alter the substantive intent, meaning, or application of this rule, the Division does not anticipate any fiscal impact on local governments.</p>
<b>C. Small businesses</b> ("small business" means a business employing 1-49 persons):
<p>The proposed amendments are limited to the correction of a typographical error and clarifying the format of the qualifying exam.</p> <p>As these changes are purely clerical and do not alter the substantive intent, meaning, or application of this rule, the Division does not anticipate any fiscal impact on small businesses.</p>
<b>D. Non-small businesses</b> ("non-small business" means a business employing 50 or more persons):
<p>The proposed amendments are limited to the correction of a typographical error and clarifying the format of the qualifying exam.</p>

As these changes are purely clerical and do not alter the substantive intent, meaning, or application of this rule, the Division does not anticipate any fiscal impact any fiscal impact on non-small businesses.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The proposed amendments are limited to the correction of a typographical error and clarifying the format of the qualifying exam.

As these changes are purely clerical and do not alter the substantive intent, meaning, or application of this rule, the Division does not anticipate any fiscal impact for any persons other than small businesses, non-small businesses, state, or local government entities.

**F. Compliance costs for affected persons:**

The proposed amendments are limited to the correction of a typographical error and clarifying the format of the qualifying exam.

As these changes are purely clerical and do not alter the substantive intent, meaning, or application of this rule, the Division does not anticipate any compliance costs for affected persons.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Commerce, Margaret W. Busse, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Subsection 58-1-106(1)(a)	Subsection 58-1-202(1)(a)	Section 58-61-101
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**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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**B. A public hearing (optional) will be held** (The public may request a hearing by submitting a written request to the agency, as outlined in Section 63G-3-302 and Rule R15-1.):

Date:	Time:	Place (physical address or URL):
12/22/2025	10:00 AM	<p>Anchor Meeting Location: Heber M Wells Building 160 E 300 S, Fourth Floor, Room 474 Salt Lake City, UT</p> <p>Google Meet joining info Video call link: <a href="https://meet.google.com/cpt-nfao-xib">https://meet.google.com/cpt-nfao-xib</a> Or dial: (US) +1 219-973-4186 PIN: 393 442 739# More phone numbers: <a href="https://tel.meet/cpt-nfao-xib?pin=6838495586396">https://tel.meet/cpt-nfao-xib?pin=6838495586396</a></p>

**10. This rule change MAY become effective on:** 01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

#### Agency Authorization Information

<b>Agency head or designee and title:</b>	Mark B. Steinagel, Division Director	<b>Date:</b>	10/18/2025
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#### R156. Commerce, Professional Licensing.

##### R156-61. Psychologist Licensing Act Rule.

##### R156-61-102. Definitions.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 61, Psychologist Licensing Act. In addition:

(1) "Accredited by the APA-CoA or CPAAP" as used in Section R156-61-302a means that as of the date the student received the earned degree, the program:

- (a) has obtained accreditation from the APA-CoA or CPAAP; or
- (b)(i) has applied to the APA-CoA or CPAAP for accreditation;
- (ii) has been approved by the APA-CoA for a site visit, which is to occur within the ensuing six years; and
- (iii) has not previously been denied accreditation by the APA-CoA or CPAAP.

(2) "APA" means the American Psychological Association.

(3) "APA-CoA" means the American Psychological Association Committee on Accreditation.

(4) "Approved diagnostic and statistical manual for mental disorders" as used in Subsection 58-61-102(7) means:

(a) the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision, (DSM-5-TR) published by the American Psychiatric Association; or

(b) the International Classification of Diseases, Tenth Revision, Clinical Modifications (ICD-10-CM), published as the ICD-10-CM: The Complete Official Codebook by the American Medical Association.

(5) "ASPPB" means the Association of State and Provincial Psychology Boards.

(6) "CPAAP" means the Canadian Psychological Association Accreditation Panel.

(7) "Direct supervision" as used in Subsection 58-61-304(1)(c) means the supervisor meets with the supervised individual:

(a) when both are physically present in the same room at the same time; or

(b) remotely using real-time electronic methods that allow for visual and audio interaction between the supervisor and the supervised individual, pursuant to a remote supervision agreement that meets the requirements of Section R156-61-302b.

(8) "EPPP" means the Examination for the Professional Practice of Psychology developed by the ASPPB, ~~and after January 1, 2026, shall include Part 1 and Part 2~~.

(9) "On-the-job training program approved by the Division" as used in Subsection 58-1-307(1)(c) referenced by Subsection 58-61-301(1)(b) means a program that meets the standards established in Section R156-61-302b.

(10) "Predoctoral internship" means a formal training program that:

(a) meets the minimum requirements of the Association of Psychology Postdoctoral and Internship Centers (APPIC) to culminate a doctoral degree in clinical, counseling, or school psychology; and

(b) is a full-time one-year program or a half-time two-year program.

(11)(a) "Psychology training" as used in Subsection 58-61-304(1)(d), means practical training experience providing direct services in the practice of mental health therapy and psychology under supervision, and includes an activity in a full-time internship or a full-time postdoctoral position devoted solely to mental health delivery.

## NOTICES OF PROPOSED RULES

(b) "Psychology training" does not include an activity that is not directly related to the practice of psychology, even if the activity is commonly performed by psychologists, such as:

- (i) psychology coursework;
- (ii) analog clinical activities, such as role plays;
- (iii) activities required for business purposes, such as billing;
- (iv) supervision of others engaged in activities when the supervision does not constitute the practice of psychology, such as supervising adolescents in wilderness settings; or

(v) activities commonly performed by non-psychologists, such as teaching psychology on topics not of a professional nature.

(12) "Qualified faculty" as used in Subsection 58-1-307(1)(b), means a university faculty member who:

- (a) is licensed in Utah as a psychologist;
- (b) provides predoctoral supervision of clinical or counseling experience in a university setting; and
- (c) is training students in the context of a doctoral program leading to licensure.

(13) "Residency program" as used in Subsection 58-61-301(1)(b), means a program of postdoctoral supervised clinical training necessary to meet licensing requirements as a psychologist.

### **R156-61-302a. Qualifications for Licensure - Education Requirements.**

(1)(a) Under Section 58-61-304, an institution or program of higher education awarding a doctoral degree in psychology shall meet approval criteria in this section to qualify an applicant for:

- (i) licensure as a psychologist under Subsection 58-61-304(1)(c);
- (ii) certification in the classification of certified prescribing psychologist under Subsection 58-61-304(4)(c)(i); or
- (iii) certification in the classification of provisional prescribing psychologist under Subsection 58-61-304(6)(c)(i).

(b) The institution or program of higher education shall meet the approval criteria on or before the date the applicant received the earned degree.

(c) An applicant's date of completion or receipt of the applicant's earned degree is the graduation date on the applicant's official transcript.

(d) If the course titles on an applicant's transcript do not clearly reflect the specific core course work required by this section, the applicant shall document for the Division the course or combination of courses in which the material was covered.

(e) An applicant shall have graduated from the qualifying accredited or chartered degree program. Another program within the department or institution does not meet approval criteria unless that program is separately accredited or chartered.

(f) If a transcript does not uniquely identify the qualifying accredited or chartered degree program, the applicant shall provide signed, written documentation from the program director or department chair that the applicant graduated from the qualifying accredited or chartered degree program.

(2) An applicant may demonstrate approval criteria by providing satisfactory evidence that their institution or program of higher education was accredited by the APA-CoA or CPAAP, as defined in Section R156-61-102.

(3) An applicant may demonstrate approval criteria by providing satisfactory evidence that their institution or program of higher education was regionally accredited in a state, district, or territory of the United States, or provincially or territorially chartered in Canada, and met the following criteria:

(a) the program is a psychology program that:

- (i) is a distinct, recognizable entity within the institution;
- (ii) offers an integrated and organized sequence of study planned to provide appropriate training for the practice of psychology; and
- (iii) consists of only graduate-level courses, with no coursework counted or credited toward an undergraduate degree;

(b) has identifiable full-time faculty;

(c) has a designated full-time faculty member responsible for the program, who at the faculty member's time of service would:

- (i) qualify as a supervisor under Section R156-61-302e; or
- (ii) as determined by the Division in collaboration with the Board, possess substantially equivalent education, experience, and training

to qualify for licensure under Title 58, Chapter 61, Psychologist Licensing Act;

(d) has an identifiable body of students who are matriculated in the program for a degree;

(e) has examination and grading procedures designed to evaluate the degree of mastery of the subject matter;

(f) has a curriculum that encompasses at least three academic years of full-time graduate study, including the following specific core course work:

(i) professional ethics and standards;

(ii) research design and methodology, such as techniques of data analysis, inferential statistics, descriptive statistics, research implementation, program evaluation, or assessment;

(iii) theories and methods of effective intervention, such as consultation, supervision, or evaluation of treatment efficacy;

(iv) theories and methods of assessment and diagnosis;

(v) biological bases of behavior, such as physiological psychology, neuropsychology, sensation and perception, comparative psychology, or psychopharmacology;

(vi) cognitive-affective bases of behavior, such as learning, thinking, motivation, or emotion;

(vii) social bases of behavior, such as social psychology, group processes, or organizational and systems theory;

(viii) individual differences, such as personality theory, human development, or abnormal psychology; and

(ix) issues of cultural and individual diversity;

(g) has a supervised practicum experience of at least 400 hours that is appropriate to the practice of psychology, and which includes at least:

- (i) 150 hours in direct service experience; and
- (ii) 20 hours in formally scheduled supervision;

(h) has at least the following supervised internships appropriate to the practice of psychology that are accredited by the APA-CoA or CPAAP, or that the Division determines is substantially equivalent to the APA-CoA or CPAAP published guidelines and principles for accreditation of internships:

- (i) an internship in clinical psychology that includes at least one full-time experience encompassing:

- (A) one full-time calendar year, or two half-time calendar years; and
- (B) at least 2,000 experience hours; and

- (ii) an internship in school counseling ~~and~~ or counseling psychology that includes at least one full-time experience encompassing:

- (A) one academic or calendar year, or two half-time academic or calendar years; and
- (B) at least 2,000 experience hours.

(4) An applicant may demonstrate approval criteria by providing satisfactory evidence that when the applicant earned the degree, the applicant's institution or program was:

(a) located in a state, district, or territory of the United States or Canada, and had "designated" status from the ASPPB National Register Joint Designation Committee; or

(b) located outside of the United States or Canada and met the ASPPB National Register Designation Guidelines for defining a doctoral degree in psychology.

(5) If an applicant's training for their doctoral degree in psychology was not designed to lead to clinical practice, or if the applicant wishes to practice in a substantially different area than their training, then the applicant shall complete a program of respecialization that:

- (a) is designed to prepare an individual with a degree in psychology with the necessary skills to practice psychology;

(b) has respecialization activities that include substantial requirements formally offered as an organized sequence of course work and supervised practicum;

(c) leads to a certificate or similar recognition by an educational body that offers a doctoral degree qualifying for licensure in the same area of practice as the certificate; and

- (d) meets approval criteria in this section.

#### **R156-61-302c. Qualifications for Licensure - Examination Requirements.**

- (1) The examination requirements for licensure as a psychologist under Subsection 58-61-304(1)(f) are:

(a) ~~the two-part Examination for~~ the Professional Practice of Psychology (EPPP) developed by the ASPPB, with a passing score as recommended by the ASPPB; and

- (b) the Utah Psychologist Law and Ethics Examination, with a passing score of at least 75%.

(2) An applicant may be admitted to the EPPP and Utah Psychologist Law and Ethics examinations in Utah only after meeting the requirements of Section 58-61-305.

(3)(a) If an applicant is admitted to an EPPP examination based upon substantive information that is incorrect and furnished knowingly by the applicant, the applicant shall receive a failing score and may not retake the examination until the applicant submits fees and a correct application demonstrating the applicant is qualified for the examination and explains to the satisfaction of the Division why the applicant knowingly furnished incorrect information.

(b) If an applicant is incorrectly admitted to the EPPP because of a Division or Board error and the applicant receives a passing score, the applicant may use the passing score for licensure only after the applicant corrects the deficiency that should have barred the applicant from EPPP admission.

- (4) An applicant who has failed the EPPP three times may not receive subsequent admission to the EPPP until the applicant has:

- (a) submitted to the Board a written statement outlining the applicant's:

- (i) core barriers to successful completion of the EPPP;

(ii) plan for overcoming the core barriers, with goals in a specific, measurable, achievable, relevant, and time-bound (SMART) format; and

- (iii) timeline for achieving the plan;

- (b) appeared before the Board and developed with the Board a plan of study in appropriate subject matter; and

- (c) completed the plan of study to the satisfaction of the Board.

(5) An applicant who is found to be cheating on the EPPP or the Utah Psychologist Law and Ethics Examination or in any way invalidating the integrity of the examination shall automatically be given a failing score and may not retake the examination for at least three years or as determined by the Division in collaboration with the Board.

(6) Under Section 58-1-302 and consistent with Subsection 58-61-304(2)(d), an applicant for psychologist licensure by endorsement that is not based upon licensure in another jurisdiction shall pass the Utah Psychologist Law and Ethics Examination.

**KEY: licensing, psychologists**

**Date of Last Change: ~~October 1,~~ 2025**

**Notice of Continuation: September 7, 2023**

**Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-61-101**

<b>NOTICE OF SUBSTANTIVE CHANGE</b>
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<b>TYPE OF FILING:</b> Repeal
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<b>Rule or section number:</b>	<b>R251-110</b>	<b>Filing ID:</b> 57676
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<b>Agency Information</b>
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<b>1. Title catchline:</b>	Corrections, Administration	
<b>Building:</b>	Administration Building	
<b>Street address:</b>	14717 S Minuteman Dr	
<b>City, state:</b>	Draper, UT	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Dan Blanchard	801-400-7797	danblanchard@utah.gov
Tyler Johnson	385-228-9883	tajohnson@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

<b>General Information</b>
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<b>2. Rule or section catchline:</b>	
R251-110. Sex and Kidnap Offender Registration Program	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 156 (2023 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
Pursuant to HB 156, passed in the 2023 General Session, the offender registration program transferred from the Utah Department of Correction (UDC) to the Department of Public Safety (DPS) effective 07/01/2024.	
DPS has enacted a new Rule R722-110, Public Access to Sex, Kidnap, and Child Abuse Offender Registration Information. Therefore, UDC intends to repeal Rule R251-110.	
<b>5. Summary of the new rule or change:</b>	
Rule R251-110 is repealed in its entirety as DPS has enacted new rule, R722-110, as the lead agency administering the registry program.	

<b>Fiscal Information</b>
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<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
There are no anticipated costs or savings to the state budget as the repeal does not make any operational changes to the way the public may access information from the offender registry.
The repeal and new enactment only moves the rule from UDC to DPS for administration of the rule.
<b>B. Local governments:</b>
There are no anticipated costs or savings to local governments as the repeal does not make any operational changes to the way the public may access information from the offender registry.
The repeal and new enactment only moves the rule from UDC to DPS for administration of the rule.
<b>C. Small businesses</b> ("small business" means a business employing 1-49 persons):
There are no anticipated costs or savings to small businesses as the repeal does not make any operational changes to the way the public or businesses may access information from the offender registry.

The repeal and new enactment only moves the rule from UDC to DPS for administration of the rule.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There are no anticipated costs or savings to non-small businesses as the repeal does not make any operational changes to the way the public or businesses may access information from the offender registry.

The repeal and new enactment only moves the rule from UDC to DPS for administration of the rule.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There are no anticipated costs or savings to other persons as the repeal does not make any operational changes to the way the public may access information from the offender registry.

The repeal and new enactment only moves the rule from UDC to DPS for administration of the rule.

**F. Compliance costs for affected persons:**

There are no anticipated compliance costs for affected persons as the repeal does not make any operational changes to the way the public may access information from the offender registry.

The repeal and new enactment only moves the rule from UDC to DPS for administration of the rule.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Utah Department of Corrections, Jared Garcia, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 53-29-402

## Public Notice Information

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:** 12/31/2025

**10. This rule change MAY become effective on:** 01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Jared Garcia, Executive Director	<b>Date:</b>	11/13/2025
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**R251. Corrections, Administration.****~~R251-110. Sex and Kidnap Offender Registration Program.~~****~~R251-110-1. Authority and Purpose.~~**

- ~~\_\_\_\_\_ (1) This rule is authorized under Sections 63G-3-201, 64-13-10, and 77-41, of the Utah Code.~~  
~~\_\_\_\_\_ (2) The purpose of the rule is to define the registrant requirement and process for obtaining sex and kidnap offender registration information.~~

**~~R251-110-2. Definitions.~~**

- ~~\_\_\_\_\_ (1) As used in this section:~~  
~~\_\_\_\_\_ (a) "Department" means Utah Department of Corrections;~~  
~~\_\_\_\_\_ (b) "registrant" means any individual who is registered under UCA 77-41, of the Utah Code; and~~  
~~\_\_\_\_\_ (c) "Sex and kidnap Offender Registry" means the unit of the Department assigned to manage the state's sex and kidnap offender registration program, sex and kidnap offender information files and disseminate information on sex and kidnap offenders.~~

**~~R251-110-3. Registrant Requirements.~~**

- ~~\_\_\_\_\_ (1) A sex/kidnap offender as defined under Section 77-41-102, of the Utah Code, shall adhere to the provisions in stated code.~~  
~~\_\_\_\_\_ (2) Registrants shall sign the Utah Sex and kidnap Offender Registration Form upon each request.~~

**~~R251-110-4. Public Access to Sex Offender Registry.~~**

- ~~\_\_\_\_\_ (1) If members of the public do not have access to the sex and kidnap offender registry website, they may request sex and kidnap offender registration information from the Department's Sex and kidnap Offender Registry.~~  
~~\_\_\_\_\_ (a) Requests may be in writing with a return address and telephone number.~~  
~~\_\_\_\_\_ (b) Requests shall be sent to the Utah Department of Corrections, Sex and kidnap Offender Registry Unit, 14717 S. Minuteman Drive, Draper, Utah 84020.~~  
~~\_\_\_\_\_ (c) If a requestor changes his or her residence after having submitted a request, but prior to receiving a response from the Department, it is the requestor's obligation to file another request with a current return address and telephone number.~~  
~~\_\_\_\_\_ (d) Members of the public may request information by telephone.~~

**~~R251-110-5. Instructions for Use of the Information.~~**

- ~~\_\_\_\_\_ (1) Information compiled for this registry may not be used to harass or threaten sex offenders or their families.~~  
~~\_\_\_\_\_ (2) Harassment, stalking, or threats are prohibited and doing so may violate Utah criminal law.~~

**~~KEY: sex and kidnap crimes, notification~~**

**~~Date of Last Change: 2025[March 21, 2003]~~**

**~~Notice of Continuation: August 17, 2020~~**

**~~Authorizing, and Implemented or Interpreted Law: 64-13-10; 77-27-21.5]~~**

## NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** New

<b>Rule or section number:</b>	<b>R251-701</b>	<b>Filing ID: 57674</b>
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## Agency Information

<b>1. Title catchline:</b>	Corrections, Administration
<b>Building:</b>	Administration Building
<b>Street address:</b>	14717 S Minuteman Dr

City, state:		Draper, UT 84020	
Contact persons:			
Name:		Phone:	Email:
Dan Blanchard		801-400-7797	danblanchard@utah.gov
Tyler Johnson		385-228-9883	tajohnson@utah.gov
Please address questions regarding information on this notice to the persons listed above.			

### General Information

<b>2. Rule or section catchline:</b>
R251-701. Undercover Roles of Offenders
<b>4. Purpose of the new rule or reason for the change:</b>
<p>The purpose of this filing is to enact a previously expired rule for the Department of Corrections (department) (R251-103, Undercover Roles of Offenders – expired 9/13/2023, and R251-716, Undercover Roles of Offenders – emergency rule not enacted). It appears the expiration was due to technical changes not submitted in the correct form, followed by administrative delay in enacting the rule. The department has an internal policy related to these provision; however, an administrative rule is necessary for provisions that impact outside agencies.</p> <p>The provisions establish the parameters for the use of offenders under department jurisdiction in confidential or undercover roles.</p>
<b>5. Summary of the new rule or change:</b>
<p>Sets the rule for the department on using offenders (inmates, parolees, probationers) in undercover roles.</p> <p>All requests must be made in writing and approved by the Law Enforcement Bureau (LEB) Chief.</p> <p>Decisions are made case-by-case, focusing on the offender's risk/safety, correctional goals, and public safety importance.</p> <p>Coercion is prohibited.</p> <p>Any agreements or promises to the offender are invalid unless agreed to in writing by the department or other involved entities.</p>

### Fiscal Information

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
None. The proposed new rule enacts previously expired rule provisions on the use of offenders under department jurisdiction in undercover role.
<b>B. Local governments:</b>
None. The proposed new rule enacts previously expired rule provisions on the use of offenders under department jurisdiction in undercover role.
<b>C. Small businesses</b> ("small business" means a business employing 1-49 persons):
None. The proposed new rule enacts previously expired rule provisions on the use of offenders under department jurisdiction in undercover role.
<b>D. Non-small businesses</b> ("non-small business" means a business employing 50 or more persons):
None. The proposed new rule enacts previously expired rule provisions on the use of offenders under department jurisdiction in undercover role.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

None. The proposed new rule enacts previously expired rule provisions on the use of offenders under department jurisdiction in undercover role.

**F. Compliance costs for affected persons:**

None. The proposed new rule enacts previously expired rule provisions on the use of offenders under department jurisdiction in undercover role.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Corrections, Jared Garcia, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 63G-3-201	Subsection 64-13-6(1)(k)	Section 64-13-14
Section 64-13-10		

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:** 12/31/2025

**10. This rule change MAY become effective on:** 01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Jared Garcia, Executive Director	<b>Date:</b>	11/11/2025
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**R251. Corrections, Administration.****R251-701. Undercover Roles of Offenders.****R251-701-1. Authority and Purpose.**

- (1) This rule is authorized by Sections 63G-3-201, 64-13-10, 64-13-14, and Subsection 64-13-6(1)(k).
- (2) The purpose of this rule is to provide the Department's policy and requirements governing the use of offenders in undercover roles.

**R251-701-2. Definitions.**

- (1) "Department" means Utah Department of Corrections.
- (2) "Entity" means agency, department, court, the Board of Pardons and Parole, or other criminal justice organization.
- (3) "LEB" means the Law Enforcement Bureau.
- (4) "Offenders" means any person under the supervision of the Department including inmates, parolees, and probationers.

**R251-701-3. General Requirements.**

- (1) Requests to use offenders in undercover roles originating within or outside the Department must be made in writing to the LEB Chief.
- (2) Decisions relating to requests from criminal investigators from the Department, or other criminal justice agencies, to use offenders under the supervision of the Department in undercover roles shall be made on a case-by-case basis. Factors to be considered include:
- (a) risk or danger to the offender;
  - (b) impact of these activities on implementation and realization of correctional goals for the offender;
  - (c) the nature of the assignment;
  - (d) the controls which shall exist;
  - (e) the importance of the assignment to maintaining public safety; and
  - (f) consultation with the BOPP for inmates and parolees, or with the court for probationers, if their concurrence is required to effect and enforce an agreement between the offender and the Department or other entities.
- (3) The Department may not unlawfully coerce nor knowingly permit unlawful coercion of offenders to participate in undercover roles.
- (4) Neither the Department nor any other entity shall be bound by any promises, inducements or other arrangements agreed to by the offender unless the Department or any other involved entities has agreed in writing to the promises.
- (5) Final authority within the Department concerning requests shall reside with the LEB Chief.
- (6) Nothing in this section shall prohibit members of this Department or other criminal justice agencies from requesting or receiving information from offenders.
- (7) Functions of this program shall be carried out by policies internal to the Department.

**KEY: corrections, probationers, parolees****Date of Last Change: 2025****Authorizing, and Implemented or Interpreted Law: 63G-3-201; 64-13-10****NOTICE OF SUBSTANTIVE CHANGE****TYPE OF FILING:** Amendment**Rule or section number:****R251-702****Filing ID: 57672****Agency Information**

<b>1. Title catchline:</b>	Corrections, Administration	
<b>Building:</b>	Administration Building	
<b>Street address:</b>	14717 S Minuteman Dr	
<b>City, state:</b>	Draper, UT 84020	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Dan Blanchard	801-400-7797	danblanchard@utah.gov
Tyler Johnson	385-228-9883	tajohnson@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information****2. Rule or section catchline:**

R251-702. Inmate Communication: Telephones

**4. Purpose of the new rule or reason for the change:**

The purpose of this filing is to update terminology and rule application to other forms of electronic communication.

**5. Summary of the new rule or change:**

The changes in this filing:

- 1) re-title catchline to Inmate Communication: Phones and Electronic;
- 2) add definition for "electronic communication"; and
- 3) clarifies other forms of electronic communication in state prisons are included under these provisions, such as kiosks and tablets.

The Department of Corrections (department) is already using these alternative communications methods for inmate communication.

This update is not requiring the other forms of electronic communication to be adopted. The rule change is to clarify similar monitoring and recording provisions are applicable to these communications tools.

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

None. The proposed changes provide updated terminology and application of this rule to other forms of electronic communication utilized for inmates in state prisons.

The department has already adopted other forms of communication, thus there is no anticipated additional cost due to this rule clarification.

**B. Local governments:**

None. The proposed changes provide updated terminology and application of this rule to other forms of electronic communication utilized for inmates in state prisons.

The department has already adopted other forms of communication, thus there is no anticipated additional cost due to this rule clarification.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

None. The proposed changes provide updated terminology and application of this rule to other forms of electronic communication utilized for inmates in state prisons.

The department has already adopted other forms of communication, thus there is no anticipated additional cost due to this rule clarification.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

None. The proposed changes provide updated terminology and application of this rule to other forms of electronic communication utilized for inmates in state prisons.

The department has already adopted other forms of communication, thus there is no anticipated additional cost due to this rule clarification.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

None. The proposed changes provide updated terminology and application of this rule to other forms of electronic communication utilized for inmates in state prisons.

The department has already adopted other forms of communication, thus there is no anticipated additional cost due to this rule clarification.

**F. Compliance costs for affected persons:**

None. The proposed changes provide updated terminology and application of this rule to other forms of electronic communication utilized for inmates in state prisons.

The department has already adopted other forms of communication, thus there is no anticipated additional cost due to this rule clarification.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Corrections, Jared Garcia, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 63G-3-201	Section 64-13-10	
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**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Jared Garcia, Executive Director	<b>Date:</b>	11/11/2025
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**R251. Corrections, Administration.****R251-702. Inmate Communication: ~~Telephones~~ Phones and Electronic.****R251-702-1. Authority and Purpose.**

- (1) This rule is authorized by Sections 63G-3-201 and 64-13-10~~[, of the Utah Code]~~.
- (2) The purpose of this rule is to provide the policy, procedures, and requirements for the use of and access to inmate communication systems in the Department's prison facilities.

**R251-702-2. Definitions.**

- (1) "Collect" means a billing process which allows a call to be billed to the receiver of a call.
- (2) "Department" means Utah Department of Corrections.
- (3) "Electronic communication" means video call, email, instant message and other similar forms of communication transmitted electronically.
- ~~(3)~~(4) "Emergency" means a death or life-threatening illness or accident of an immediate family member.
- ~~(4)~~(5) "Legal call" means calls made to the courts, attorneys or other approved legal advisor.
- ~~(5)~~(6) "Members" means Utah Department of Corrections employees.

**R251-702-3. Policy.**

It is the policy of the Department that:

- (1) phone calls and other forms of electronic communication made on ~~[institutional]~~prison telephones, kiosks, or tablets designated for general inmate use may be intercepted, tape-recorded and monitored;
- (2) members ~~[shall]~~may not monitor inmate legal ~~[calls]~~communication;
- (3) inmates who intend to call an attorney shall notify members ~~[in order]~~to obtain access to a telephone that will not be monitored;
- (4) legal calls should not exceed ~~[thirty]~~30 minutes;
- (5) ~~[attorney/]~~attorneys or their representatives desiring to speak with an inmate client may leave a message, and the inmate may be allowed to return the call using the legal access procedure outlined;
- (6) inmates are not allowed to receive incoming calls; and
- (7) inmate calls shall be billed collect except in a case of verifiable emergency.

**KEY: corrections, inmates, prisons, telephones**

**Date of Last Change: 2025~~[June 6, 1997]~~**

**Notice of Continuation: November 20, 2020**

**Authorizing, and Implemented or Interpreted Law: 64-13-10**

## NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R251-708**

**Filing ID: 57675**

## Agency Information

<b>1. Title catchline:</b>	Corrections, Administration	
<b>Building:</b>	Administration Building	
<b>Street address:</b>	14717 S Minuteman Dr	
<b>City, state:</b>	Draper, UT 84020	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Dan Blanchard	801-400-7797	danblanchard@utah.gov
Tyler Johnson	385-228-9883	tajohnson@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

## General Information

<b>2. Rule or section catchline:</b>
R251-708. Perimeter Patrol

**4. Purpose of the new rule or reason for the change:**

The purpose of this filing is to add clarification for responding to "unauthorized" persons around prison perimeters.

This is intended to clarify a response is not required when the persons identified around the prison perimeter were authorized to be in that location.

**5. Summary of the new rule or change:**

Adds the word "unauthorized" to the specific persons around prison perimeters that are subject to response from the Department of Corrections (department) officers.

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

None. There is no fiscal impact as the department is not changing operations to enforce this rule as they have in the past.

The update is to clarifying current practice of responding to "unauthorized" persons around prison perimeters.

**B. Local governments:**

None. There is no fiscal impact as the department is not changing operations to enforce this rule as they have in the past.

The update is to clarifying current practice of responding to "unauthorized" persons around prison perimeters.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

None. There is no fiscal impact as the department is not changing operations to enforce this rule as they have in the past.

The update is to clarifying current practice of responding to "unauthorized" persons around prison perimeters.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

None. There is no fiscal impact as the department is not changing operations to enforce this rule as they have in the past.

The update is to clarifying current practice of responding to "unauthorized" persons around prison perimeters.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

None. There is no fiscal impact as the department is not changing operations to enforce this rule as they have in the past.

The update is to clarifying current practice of responding to "unauthorized" persons around prison perimeters.

**F. Compliance costs for affected persons:**

None. There is no fiscal impact as the department is not changing operations to enforce this rule as they have in the past.

The update is to clarifying current practice of responding to "unauthorized" persons around prison perimeters.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)**Regulatory Impact Summary Table**

<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0

## NOTICES OF PROPOSED RULES

Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Corrections, Jared Garcia has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 63G-3-201	Section 64-13-10	Section 64-13-14
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**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Jared Garcia, Executive Director	<b>Date:</b>	11/13/2025
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**R251. Corrections, Administration.**
**R251-708. Perimeter Patrol.**
**R251-708-1. Authority and Purpose.**

- (1) This rule is authorized under Sections 63G-3-201, 64-13-10 and 64-13-14.
- (2) The purpose of this rule is to provide the Department's policies and procedures for perimeter patrol of prison facilities.

**R251-708-2. Definitions.**

"Contraband" means any material, substance, or other item not approved by the Department administration to be in the possession of inmates.

"Department" means the Department of Corrections.

"Perimeter patrols" means correctional officers assigned to observe and maintain security around the boundary of the prison.

"Prison" means the Utah State Correctional Facility in Salt Lake City, Utah and the Central Utah Correctional Facility in Gunnison, Utah.

**R251-708-3. Policy.**

- (1) The Department shall maintain perimeter patrols to:
  - (a) provide security;
  - (b) prevent escape;
  - (c) restrict access to Prison property;
  - (d) control visitor traffic;
  - (e) provide escape pursuit when necessary;
  - (f) maintain order; and

- (g) prevent introduction of contraband.
- (2) Perimeter patrols shall assist the facilitation of traffic through the secure perimeter at various access points by verifying the identity of persons at those points.
- (3) Perimeter patrols shall:
  - (a) respond to all unauthorized persons including hunters, walkers, joggers, off-road vehicle riders, and other vehicles on prison property or immediately adjacent areas;
  - (b) investigate any suspicious person or circumstance; and
  - (c) arrest or cite violators when required.
- (4) Perimeter patrols may not allow non-prison personnel to wait in vehicles, in parking lots, or other areas of prison property.
- (5) Perimeter patrols shall investigate unoccupied vehicles on or near the prison perimeter and may impound any vehicle which appears to present a security risk to the prison.

**KEY: corrections, prisons, security measures**

**Date of Last Change:** ~~2025~~**[November 7, 2023]**

**Notice of Continuation:** November 20, 2020

**Authorizing, and Implemented or Interpreted Law:** 64-13-10; 64-13-14

#### NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R277-100**

**Filing ID:** 57677

#### Agency Information

<b>1. Title catchline:</b>	Education, Administration	
<b>Building:</b>	Board of Education	
<b>Street address:</b>	250 E 500 S	
<b>City, state:</b>	Salt Lake City, UT 84111	
<b>Mailing address:</b>	PO Box 144200	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-4200	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Elisse Newey	801-538-7550	elisse.newey@schools.utah.gov
Please address questions regarding information on this notice to the persons listed above.		

#### General Information

<b>2. Rule or section catchline:</b>
R277-100. Definitions for Utah State Board of Education (Board) Rules
<b>4. Purpose of the new rule or reason for the change:</b>
The rule amendments are needed to update a definition which applies in all Utah State Board of Education (USBE) rules.
<b>5. Summary of the new rule or change:</b>
The amendments specifically update the definition of "Accountability practices".

#### Fiscal Information

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
This rule change is not expected to have any fiscal impact on state government revenues or expenditures.
The definition of accountability practice itself is not changed; only clarifying examples. There is no funding tied to accountability practices and this definition update for clarity does not cause additional costs or affect revenue for the Utah State Board of Education (USBE) or any other state entity.

**B. Local governments:**

This rule change is not expected to have any fiscal impact on local governments' revenues or expenditures.

The definition of accountability practice itself is not changed; only clarifying examples. There is no funding tied to accountability practices and this definition update for clarity does not cause additional costs or affect revenue for Local Education Agencies (LEAs).

**C. Small businesses** ("small business" means a business employing 1-49 persons):

This rule change is not expected to have any fiscal impact on small business revenues or expenditures.

This only impacts the USBE and LEAs.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There are no non-small businesses in the industry in question, Elementary and Secondary Schools (North American Industry Classification System (NAICS) 611110). Because there are no non-small businesses, they do not account for any service delivery for Elementary and Secondary Schools. Therefore, non-small businesses are not expected to receive increased or decreased revenues per year. This proposed rule change is not expected to have any fiscal impact on non-small businesses' revenues or expenditures because there are no applicable non-small businesses, and it does not require any expenditures of, or generate revenue for non-small businesses.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This rule change is not expected to have any fiscal impact on revenues or expenditures for persons other than small businesses, businesses, or local government entities.

The definition of accountability practice itself is not changed; only clarifying examples. There is no funding tied to accountability practices and this definition update for clarity does not cause additional costs or affect revenue for any entity or other persons.

**F. Compliance costs for affected persons:**

There are no compliance costs for affected persons.

The definition of accountability practice itself is not changed; only clarifying examples. There is no funding tied to accountability practices and this definition update for clarity does not cause additional costs or affect revenue for the USBE, LEAs, or any other persons.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)**Regulatory Impact Summary Table**

<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0



Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The State Superintendent of the Utah State Board of Education, Molly Hart, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Article X, Section 3	Subsection 53E-3-401(4)	
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**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Elisse Newey, Deputy Superintendent of Policy	<b>Date:</b>	11/14/2025
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**R277. Education, Administration.****R277-100. Definitions for Utah State Board of Education (Board) Rules.****R277-100-1. Authority, Purpose, and Oversight Category.**

(1) This rule is authorized by:

(a) Utah Constitution Article X, Section 3, which vests general control and supervision of public education in the Board; and

(b) Subsection 53E-3-401(4), which allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law.

(2) The purpose of this rule is to provide definitions that are used in the Board rules beginning with Title R277.

(3) This rule is categorized as exempt as described in Rule R277-111.

**R277-100-2. Definitions.**

(1)(a) "Accountability practice" means any evidence-based practice that increases academic outcomes, decreases behavior that disrupts the learning environment and holds students accountable for their actions by requiring them to take responsibility to repair harm and provide restitution when appropriate.

~~\_\_\_\_\_ (b) Some practices include adapting instruction to increase behavior engagement plans, and restorative practices.]~~

~~\_\_\_\_\_ (b) Practices may include behavior plans, restorative practices, and strategies to increase engagement.~~

(2) "Accreditation" means the formal process for internal and external review and approval under the standards of an accrediting entity adopted by the Board.

(3) "Agency" means:

(a) an entity governed by the Board;

(b) an LEA; or

(c) a grant sub-recipient.

(4) "Board" means the 15 elected members of the State Board of Education.

(5) "Charter school" means a school established as a charter school by a charter school authorizer under Title 53G, Chapter 5, Charter Schools, and Board rule.

(6) "Comprehensive dropout intervention and prevention program" means a program that:

(a) addresses needs of students who are not succeeding in a traditional school environment;

(b) provides targeted instruction that increases student credit-earning rates toward graduation; and

(c) partners with community entities to provide a continuum of services with the focus of preparing students for life after high school.

(7)(a) "Cumulative file" or "cumulative folder" means a physical or digital record maintained by an LEA for each student containing, at a minimum, the following information:

(i) evidence of the student's legal name and date of birth;

(ii) student demographic data, including race, ethnicity, and gender;

## NOTICES OF PROPOSED RULES

- (iii) name and contact information for the student's parents;
- (iv) a record of the student's courses, teachers, and grades or progress;
- (v) a record of the student's performance on statewide assessments;
- (vi) documentation concerning a student's eligibility for IDEA or 504 services;
- (vii) a record of suspensions and expulsions, in accordance with Subsection 53G-8-208(4)(a);
- (viii) known allergies;
- (ix) a record of vision and health screening results; and
- (x) a record of required student immunizations, and medical or personal exemptions; and
- (xi) pertinent legal documents, including protective orders, custody orders, and parenting or education plans.
- (b) "Cumulative file" may include additional student information in accordance with an LEA's policies.
- (8) "District school" means a public school under the control of a local school board elected under Title 20A, Chapter 14, Nomination and Election of State and Local School Boards.
- (9) "Dual enrollment student" means a student who:
  - (a) is enrolled simultaneously in:
    - (i) a private school or home school; and
    - (ii) a public school; and
  - (b) is counted by an LEA in membership for purposes of generating state or federal funding for only those courses or subjects for which the LEA provides instruction.
- (10) "Educator" means an individual licensed under Section 53E-6-201 and who meets the requirements of Board rule.
- (11) "ESSA" or the "Every Student Succeeds Act" means the congressional act, which reauthorized the Elementary and Secondary Education Act of 1965, which is found at 20 U.S.C. 6301, et seq.
- (12)(a) "Evaluate" or "review" means to observe and assess a program or set of requirements with an objective of making recommendations, if appropriate, for necessary changes or improvement.
- (b) An "evaluation" or "review" may include providing training and technical assistance on program-related matters and performing on-site reviews of program operations.
- (13)(a) "External audit" means an appraisal activity established under the direction of an individual or entity outside of the subject agency to examine and evaluate the adequacy and effectiveness of:
  - (i) agency control systems;
  - (ii) compliance;
  - (iii) performance; and
  - (iv) financial position.
- (b) An external audit is conducted in accordance with current professional and industry technical standards, as applicable, for external audits.
- (14)(a) "Home school student" means a student who:
  - (a) attends a home school pursuant to Section 53G-6-204; and
  - (b) is not counted by an LEA in membership for purposes of generating state or federal funding.
- (15) "Individualized education program" or "IEP" means a written statement for a student with a disability that is developed, reviewed, and revised in accordance with Part B of the Individuals with Disabilities Education Act (IDEA), 20 U.S.C. Section 1400 (2004), and rule.
- (16) "Individuals with Disabilities Education Act" or "IDEA," 20 U.S.C. Section 1400 et seq. (2004), is a four part (A-D) piece of federal legislation that ensures a student with a disability is provided with a Free Appropriate Public Education (FAPE) that is tailored to the student's individual needs.
- (17)(a) "Internal audit" means an independent appraisal activity established within an agency as a control system to examine and objectively evaluate the adequacy and effectiveness of other internal control systems within the agency or the public education system.
- (b) An "internal audit" is conducted in accordance with the current:
  - (i) International Standards for the Professional Practice of Internal Auditing; or
  - (ii) Government Auditing Standards, issued by the Comptroller General of the United States.
- (18)(a) "LEA" or "local education agency" means a school district or charter school.
- (b) For purposes of certain rules, "LEA" or "local education agency" may include the Utah Schools for the Deaf and the Blind (USDB) if indicated in the specific rule.
- (19)(a) "LEA governing board" or "local board" means:
  - (i) for a school district, a local school board; and
  - (ii) for a charter school, a charter school governing board.
- (b) For purposes of certain rules, "LEA governing board" or "local board" may include the State Board of Education as the governing board for the Utah Schools for the Deaf and the Blind if indicated in the specific rule.
- (20)(a) "Monitor" means to formally supervise, inspect, or examine the compliance, performance, or finances of a program or set of requirements.
- (b) A monitoring program may include:
  - (i) review of financial and performance reports required of the subject program;
  - (ii) follow-up to ensure the subject program takes timely and appropriate actions to correct identified deficiencies;
  - (iii) supervising remedial action recommended by audit or monitoring findings or required by Board rule; and
  - (iv) any function performed in an evaluation or review.

- (21)(a) "Multidisciplinary team" means a group of individuals from multiple disciplines who meet to:
- (i) pursue the common goal of evaluating and triaging the academic, social, emotional, physical, and behavioral needs of a student or group of students; and
  - (ii) create individualized strategies and interventions to address identified needs.
- (b) An LEA's multidisciplinary school team as described in Subsection (20)(a) may include:
- (i) administrative personnel;
  - (ii) a local law enforcement officer or school resource officer;
  - (iii) a mental health professional;
  - (iv) a general education or special education teacher; and
  - (v) other community members as determined by the LEA.
- (22) "Parent" means a parent or guardian who has established residency of a child under Section 53G-6-302, 53G-6-303, or 53G-6-402, or another applicable Utah guardianship provision.
- (23) "Plan for College and Career Readiness" or "SEOP" means a student education occupation plan for college and career readiness that is a developmentally organized intervention process that includes:
- (a) a written plan, updated annually, for a secondary student's (grades 7-12) education and occupational preparation;
  - (b) all Board, local board and local charter board graduation requirements;
  - (c) evidence of parent or guardian, student, and school representative involvement annually;
  - (d) attainment of approved workplace skill competencies, including job placement when appropriate; and
  - (e) identification of post secondary goals and approved sequence of courses.
- (24) "Preschool" means a school in which all the students enrolled are pre-kindergarten.
- (25)(a) "Private school student" means a student who:
- (a) attends a private school; and
  - (b) is not counted by an LEA in membership for purposes of generating state or federal funding.
- (26) "Program" means an instructional environment that does not meet the criteria to be classified as a school, as described in Subsection (27).
- (27) "Public school student" means a student who:
- (a) attends an LEA governed public school; and
  - (b) is counted by an LEA in membership for purposes of generating state or federal funding.
- (28) "School" means an instructional environment that:
- (a) is governed by an LEA board;
  - (b) has an assigned administrator;
  - (c) has enrolled students that generate average daily membership hours during the school year;
  - (d) has assigned instructional staff;
  - (e) provides instruction in the Utah core standards;
  - (f) has one or more grade groups in the range from kindergarten through grade 12; and
  - (g) is not a program for students enrolled in another public school.
- (29) "Split enrollment student" means a student who is:
- (a) regularly enrolled at two schools within two LEAs at the same time;
  - (b) eligible for graduation and other services at both schools; and
  - (c) subject to the split enrollment requirements in Rule R277-419, counted by each LEA in membership for purposes of generating state or federal funding for only those courses or subjects for which each LEA provides instruction.
- (30) "State Charter School Board" or "SCSB" means the State Charter School Board created in Section 53G-5-201.
- (31) "Student Threat assessment" means a prevention strategy that involves:
- (a) identifying student threats including to commit a violent act;
  - (b) determining the seriousness of the threat;
  - (c) developing intervention plans that prioritize protecting potential victims and address threatening behavior; and
  - (d) address underlying behavior contributing to the risk.
- (32) "Success sequence" means a three-prong framework for youth and young adults that encourages:
- (a) completing at least a high school education and pursuing further educational opportunities;
  - (b) obtaining full-time employment; and
  - (c) having children within a health and stable family and marriage.
- (33) "Superintendent" means the State Superintendent of Public Instruction or the Superintendent's designee.
- (34) "Suspension" means, except for purposes of Rules R277-210 through R277-217:
- (a) an in-school suspension that is a temporary removal of a student from the student's regular classroom for disciplinary reasons for at least half a school day but remains under the direct supervision of school personnel; or
  - (b) an out-of-school suspension that is the removal of a student from school grounds for disciplinary reasons unless the student removed is:
    - (i) served solely under a Section 504 plan, where an out-of-school suspension is the excluding of the student from school for disciplinary purposes for one day or longer; or
    - (ii) a student with disabilities under IDEA, where an out-of-school suspension is the temporary removal of the student from the student's regular school for disciplinary reasons to another setting.

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(35) "Threat" means an expression of intent to harm someone that is direct, indirect, or implied and may be spoken, written, or expressed in some other way.

(36) "USDB" means the Utah Schools for the Deaf and the Blind.

(37) "USIMS" or "Utah Schools Information Management System" means a software system maintained by the Superintendent for collecting, processing, providing oversight, and reporting on education data for the state as required by Section 53E-3-518.

**KEY: Board of Education, rules, definitions**

**Date of Last Change:** [August 7,] 2025

**Notice of Continuation:** June 10, 2025

**Authorizing, and Implemented or Interpreted Law:** Art X Sec 3; 53E-3-401(4)

### NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R277-311**

**Filing ID: 57678**

#### Agency Information

<b>1. Title catchline:</b>		Education, Administration	
<b>Building:</b>		Board of Education	
<b>Street address:</b>		250 E 500 S	
<b>City, state:</b>		Salt Lake City, UT 84111	
<b>Mailing address:</b>		PO Box 144200	
<b>City, state and zip:</b>		Salt Lake City, UT 84114-4200	
<b>Contact persons:</b>			
<b>Name:</b>		<b>Phone:</b>	<b>Email:</b>
Elisse Newey		801-538-7550	elisse.newey@schools.utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>			

#### General Information

<b>2. Rule or section catchline:</b>
R277-311. Specialized Endorsements
<b>4. Purpose of the new rule or reason for the change:</b>
The rule amendments are needed to add requirements for an endorsement in adapted physical education.
<b>5. Summary of the new rule or change:</b>
The amendments add an oversight Category 4 and update the section on physical education endorsements to include requirements for an endorsement in adapted physical education.

#### Fiscal Information

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
This rule change is not expected to have any fiscal impact on state government revenues or expenditures.
The oversight framework categorization is part of the Utah State Board of Education's (USBE) effort through Rule R277-111 to categorize each rule into an oversight framework category, or to delineate for stakeholders what type of monitoring or oversight is required by the (USBE) resulting from this rule.
This categorization does not add any requirements or resources in and of itself for the USBE or Local Education Agencies (LEAs).
The adapted physical education endorsement already exists for teachers licensed in special education. This rule is being updated to reflect current practice.

As such, there is no fiscal impact to the USBE, LEAs, or other entities or persons.

#### **B. Local governments:**

This rule change is not expected to have any fiscal impact on local governments' revenues or expenditures.

The oversight framework categorization is part of the USBE's effort through Rule R277-111 to categorize each rule into an oversight framework category, or to delineate for stakeholders what type of monitoring or oversight is required by the USBE resulting from this rule.

This categorization does not add any requirements or resources in and of itself for the USBE or LEAs.

The adapted physical education endorsement already exists for teachers licensed in special education. This rule is being updated to reflect current practice.

As such, there is no fiscal impact to the USBE, LEAs, or other entities or persons.

#### **C. Small businesses** ("small business" means a business employing 1-49 persons):

This rule change is not expected to have any fiscal impact on small businesses' revenues or expenditures.

This only impacts the USBE and LEAs.

#### **D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There are no non-small businesses in the industry in question, Elementary and Secondary Schools (North American Industry Classification System (NAICS) 611110). Because there are no non-small businesses, they do not account for any service delivery for Elementary and Secondary Schools. Therefore, non-small businesses are not expected to receive increased or decreased revenues per year. This proposed rule change is not expected to have any fiscal impact on non-small businesses' revenues or expenditures because there are no applicable non-small businesses, and it does not require any expenditures of, or generate revenue for non-small businesses.

#### **E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This rule change is not expected to have any fiscal impact on revenues or expenditures for persons other than small businesses, businesses, or local government entities.

The oversight framework categorization is part of the USBE's effort through Rule R277-111 to categorize each rule into an oversight framework category, or to delineate for stakeholders what type of monitoring or oversight is required by the USBE resulting from this rule.

This categorization does not add any requirements or resources in and of itself for the USBE or LEAs.

The adapted physical education endorsement already exists for teachers licensed in special education. This rule is being updated to reflect current practice.

As such, there is no fiscal impact to the USBE, LEAs, or other entities or persons.

#### **F. Compliance costs for affected persons:**

There are no compliance costs for affected persons.

The oversight framework categorization is part of the USBE's effort through Rule R277-111 to categorize each rule into an oversight framework category, or to delineate for stakeholders what type of monitoring or oversight is required by the USBE resulting from this rule.

This categorization does not add any requirements or resources in and of itself for the USBE or LEAs. The adapted physical education endorsement already exists for teachers licensed in special education. This rule is being updated to reflect current practice.

As such, there is no fiscal impact to the USBE, LEAs, or other entities or persons.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The State Superintendent of the Utah State Board of Education, Molly Hart, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Article X, Section 3	Section 53E-3-401	Section 53E-3-501
Section 53G-10-507		

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
--	------------

<b>10. This rule change MAY become effective on:</b>	01/07/2026
--	------------

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Elisse Newey, Deputy Superintendent of Policy	<b>Date:</b>	11/14/2025
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**R277. Education, Administration.**

**R277-311. Specialized Endorsements.**

**R277-311-1. Authority, ~~and~~ Purpose, and Oversight Category.**

(1) This rule is authorized by:

(a) Utah Constitution Article X, Section 3, which vests general control and supervision over public education in the Board;

(b) Subsection 53E-3-401(4), which allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law;

(c) Subsection 53E-3-501(1)(a), which directs the Board to make rules regarding the certification of educators; and

(d) Section 53G-10-507, which directs the Board to establish procedures and standards to certify teachers of driver education classes as driver license examiners.

(2) The purpose of this rule is establish standards for earning specialized endorsements in:

- (a) driver education; and
- (b) physical education.

(3) This rule is categorized as Category 4 as described in Rule R277-111.

#### **R277-311-2. Definitions.**

(1) "Driver License Division" or "DLD" means the Driver License Division of the Department of Public Safety.

(2) "Endorsement" means a designation on a license area of concentration earned through demonstrating required competencies established by the Superintendent that qualifies the individual to:

- (a) provide instruction in a specific content area; or
- (b) apply a specific set of skills in an education setting.

(3) "Satisfactory driving record" means that an educator:

(a) holds a valid Utah automobile operator's license;

(b) has not had an automobile operator's license suspended or revoked during the three years immediately ~~[prior to]~~ before applying for the endorsement;

(c) has not received an automobile operator's license suspension from a court for a non-traffic related issue;

(d) has not been convicted of more than one moving violation under Title 41, Chapter 6a, Traffic Code in any ~~[twelve]~~ 12 month period over the last 36 months ~~[prior to]~~ before applying for a driver education endorsement;

(e) has not been convicted of any moving violation under Title 41, Chapter 6a, Traffic Code, which resulted in a fatality;

(f) has not been convicted of a violation of Title 41, Chapter 6a, Part 5, Driving Under the Influence and Reckless Driving during the five years immediately ~~[prior to]~~ before applying for a driver education endorsement;

(g) has not been convicted of two or more violations of Title 41, Chapter 6a, Part 5, Driving Under the Influence and Reckless Driving; and

(h) has not been convicted of a violation of Section 53-3-227 during the five years immediately ~~[prior to]~~ before applying for a driver education endorsement.

#### **R277-311-3. Driver Education Endorsement.**

(1) The Superintendent shall issue a driver education endorsement to a licensee that meets the requirements of this Section R277-311-3 and holds a license area of concentration in one or more of the following areas:

- (a) Secondary Education;
- (b) Special Education;
- (c) School Counselor; or
- (d) Career and Technical Education.

(2) A driver education endorsement shall be valid for the same term as the underlying educator license.

(3) The Superintendent shall award a driver education endorsement if an educator:

- (a) has a satisfactory driving record; and
- (b) completes the following professional preparation:

(i) a minimum of ~~[twelve]~~ 12 semester hours of professional learning in the area of driver and safety education, including a practicum covering classroom, on-street, simulator, and driving range instruction;

(ii) a minimum of two semester hours of driver education state law and policy through Utah Education Network;

(iii) a minimum of one semester hour of current first aid and CPR training approved by the Superintendent; and

(iv) a minimum of one semester hour of DLD online examiners training.

(4) An educator shall hold a current driver education endorsement to administer written and driving tests for driver education classes under Section 53G-10-507.

(5) An educator shall hold a current driver education endorsement to be certified as a driver license examiner by the DLD.

(6) To renew a driver education endorsement, an educator shall:

(a) complete:

(i) eight hours of professional development training every year; or

(ii) 40 hours of professional development training every five years ~~[prior to]~~ before license renewal, which shall include at least one hour of DLD online examiners training; and

(b) provide proof of current first aid and CPR certification from a provider approved by the Superintendent.

(7) An educator may complete professional development under Subsection (6), as follows:

(a) workshops provided by the DLD; or

(b) driver education and traffic safety training pre-approved by the Superintendent through:

(i) a state agency;

(ii) college or university; or

(iii) a professional education organization.

(8)(a) The Superintendent shall administratively dissolve a driver education endorsement if an educator fails to maintain a satisfactory driving record.

## NOTICES OF PROPOSED RULES

(b) An administrative dissolution under Subsection (8)(a) shall have no effect on the underlying educator license or license area absent further Board action in accordance with Section 53E-6-604.

(9) An educator whose endorsement was administratively dissolved under Subsection (8)(a), may apply for reinstatement of the endorsement upon re-obtaining a satisfactory driving record and meeting the renewal requirements of Subsection (6).

### **R277-311-4. Physical Education Endorsement.**

(1) The Superintendent shall issue a physical education endorsement or adapted physical education endorsement to a licensee that meets the requirements of this Section R277-311-4 and holds a license area of concentration in one or more of the following areas:

- (a) Elementary Education;
- (b) Secondary Education; or
- (c) Special Education.

(2) A physical education endorsement or adapted physical education endorsement shall be valid for the same term as the underlying educator license.

(3) The Superintendent shall issue a physical education endorsement or adapted physical education endorsement if an educator:

- (a)(i) completes university and professional development courses as required by the Superintendent; or
- (ii) demonstrates competency, as required by the Superintendent; and
- (b) provides proof of current first aid and CPR certification from a provider approved by the Superintendent.

(4) To renew a physical education endorsement or adapted physical education endorsement, an educator must provide proof of current first aid and CPR certification from a provider approved by the Superintendent.

**KEY: endorsement; driver education; physical education**

**Date of Last Change:** 2025~~January 8, 2024~~

**Authorizing, and Implemented or Interpreted Law:** Art X Sec 3; 53E-3-401; 53E-3-501; 53G-10-507

### NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R277-325**

**Filing ID: 57679**

### Agency Information

<b>1. Title catchline:</b>		Education, Administration	
<b>Building:</b>		Board of Education	
<b>Street address:</b>		250 E 500 S	
<b>City, state:</b>		Salt Lake City, UT 84111	
<b>Mailing address:</b>		PO Box 144200	
<b>City, state and zip:</b>		Salt Lake City, UT 84114-4200	
<b>Contact persons:</b>			
<b>Name:</b>		<b>Phone:</b>	<b>Email:</b>
Elisse Newey		801-538-7550	elisse.newey@schools.utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>			

### General Information

<b>2. Rule or section catchline:</b>	
R277-325. Public Education Exit and Engagement Surveys	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 182 (2024 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
The rule amendments are due to the passage of HB 182 passed in the 2024 General Session.	
<b>5. Summary of the new rule or change:</b>	
The amendments clarify the language and resolve a conflict in how the engagement survey and school climate survey are administered.	



A definition for "Survey" is added.

### Fiscal Information

#### 6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:

##### A. State budget:

This rule change is not expected to have any fiscal impact on state government revenues or expenditures.

The Utah State Board of Education (USBE) believes that any fiscal impacts were captured in the fiscal note to HB182 (2024) and this rule carries no further impacts to the USBE, Local Education Agencies (LEAs), or other persons or entities.

##### B. Local governments:

This rule change is not expected to have any fiscal impact on local governments' revenues or expenditures.

The USBE believes that any fiscal impacts were captured in the fiscal note to HB182 (2024) and this rule carries no further impacts to the USBE, LEAs, or other persons or entities.

##### C. Small businesses ("small business" means a business employing 1-49 persons):

This rule change is not expected to have any fiscal impact on small businesses' revenues or expenditures.

The USBE believes that any fiscal impacts were captured in the fiscal note to HB182 (2024) and this rule carries no further impacts to the USBE, LEAs, or other persons or entities.

##### D. Non-small businesses ("non-small business" means a business employing 50 or more persons):

There are no non-small businesses in the industry in question, Elementary and Secondary Schools (North American Industry Classification System (NAICS) 611110). Because there are no non-small businesses, they do not account for any service delivery for Elementary and Secondary Schools. Therefore, non-small businesses are not expected to receive increased or decreased revenues per year. This proposed rule change is not expected to have any fiscal impact on non-small businesses' revenues or expenditures because there are no applicable non-small businesses, and it does not require any expenditures of, or generate revenue for non-small businesses.

##### E. Persons other than small businesses, non-small businesses, state, or local government entities ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an *agency*):

This rule change is not expected to have any fiscal impact on revenues or expenditures for persons other than small businesses, businesses, or local government entities.

The USBE believes that any fiscal impacts were captured in the fiscal note to HB182 (2024) and this rule carries no further impacts to the USBE, LEAs, or other persons or entities.

##### F. Compliance costs for affected persons:

There are no compliance costs for affected persons.

The USBE believes that any fiscal impacts were captured in the fiscal note to HB182 (2024) and this rule carries no further impacts to the USBE, LEAs, or other persons or entities.

##### G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

**Regulatory Impact Summary Table**

Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0

## NOTICES OF PROPOSED RULES

Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The State Superintendent of the Utah State Board of Education, Molly Hart, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Article X, Section 3	Subsection 53E-3-401(4)	Section 53G-11-304
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**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Elisse Newey, Deputy Superintendent of Policy	<b>Date:</b>	11/14/2025
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**R277. Education, Administration.**
**R277-325. Public Education Exit and Engagement Surveys.**
**R277-325-1. Authority Purpose, and Oversight Category.**

(1) This rule is authorized by:

(a) Utah Constitution, Article X, Section 3, which vests general control and supervision over public education in the Board;

(b) Subsection 53E-3-401(4), which allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law; and

(c) Section 53G-11-304, which requires the Board to make rules for the creation and administration of a public education exit survey.

(2) The purpose of this rule is to:

(a) adopt minimum standards for LEAs to administer a public education exit and engagement survey; and

(b) adopt a model public education exit and engagement survey for use by LEAs.

(3) This Rule R277-325 is categorized as Category 3 as described in Rule R277-111.

**R277-325-2. Definitions.**

[~~\_\_\_\_\_ (1) "Educator" means, for purposes of this rule:~~

~~\_\_\_\_\_ (a) a general education classroom teacher;~~

~~\_\_\_\_\_ (b) a preschool teacher;~~

~~\_\_\_\_\_ (c) a special education teacher;~~

~~\_\_\_\_\_ (d) a school based administrator; or~~

~~\_\_\_\_\_ (e) a school based specialist.]~~

[(2)] "Survey" means the Model Public Education Exit and Engagement Surveys incorporated by reference in Section R277-325-3.

**R277-325-3. Incorporation of Model Public Education Exit and Engagement Surveys by Reference.**

- (1) This rule incorporates by reference the Model Public Education Exit and Engagement Surveys (October 2024).
- (2) A copy of the model surveys are located at:
  - (b) <https://schools.utah.gov/administrativerules/documentsincorporated>; and
  - (c) the Utah State Board of Education.

**R277-325-4. Survey Administration.**

(1)~~(a)~~ Each LEA shall request that the LEA's educators complete the model public education engagement survey, at a minimum, every other year through:

~~(i)~~(a) a Board approved online provider; or

~~(ii)~~(b) a provider approved by the LEA.

~~(b) If an LEA administers the school climate survey every other year, as described in Rule R277-623, the model public education engagement survey shall be administered in the opposite years.]~~

(2) Each LEA shall request that an educator leaving the LEA complete the model public education exit survey at the time of their separation from employment through:

(a) a Board approved online provider; or

(b) a provider approved by the LEA.

(3) If an LEA administers the surveys through a provider other than a Board approved online provider, the LEA shall provide the data from the surveys to the Superintendent by June 30 annually in a manner prescribed by the Superintendent.

(4) The surveys:

(a) shall allow each educator to remain anonymous;

(b) may not request the educator's CACTUS ID number;

(c) shall ask each educator to identify the educator's LEA;

(d) may ask each educator to voluntarily identify the educator's school; and

(e) may ask each educator to provide basic non-identifying demographic data as requested by the Superintendent.

(5) An LEA shall adopt written policies to:

(a) restrict access to survey results to appropriate personnel; and

(b) prevent identification of educators who complete the survey.

(6)(a) An LEA may include additional questions along with the required survey questions at the time the LEA administers the surveys.

(b) An LEA may limit dissemination of data from educator answers to questions included in accordance with Subsection (6)(a) in accordance with the LEA's written policies.

(7) If an LEA fails to administer the surveys, the Superintendent may pursue corrective action in accordance with Rule R277-114.

**KEY:** exit, survey

**Date of Last Change:** ~~February 7,~~ 2025

**Notice of Continuation:** December 16, 2024

**Authorizing, and Implemented or Interpreted Law:** Art X Sec 3; 53E-3-401(4); 53G-11-304

<b>NOTICE OF SUBSTANTIVE CHANGE</b>
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<b>TYPE OF FILING:</b> New
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<b>Rule or section number:</b>	<b>R277-731</b>	<b>Filing ID: 57680</b>
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<b>Agency Information</b>		
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<b>1. Title catchline:</b>	Education, Administration	
<b>Building:</b>	Board of Education	
<b>Street address:</b>	250 E 500 S	
<b>City, state:</b>	Salt Lake City, UT 84111	
<b>Mailing address:</b>	PO Box 144200	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-4200	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Elisse Newey	801-538-7550	elisse.newey@schools.utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

## General Information

<b>2. Rule or section catchline:</b>	
R277-731. Catalyst Center Grant Program Policy	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 447 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
The rule amendments are due to the passage of HB 447 in the 2025 General Session.	
<b>5. Summary of the new rule or change:</b>	
The amendments establish standards and procedures for Local Education Agencies (LEAs) to qualify for and administer funds from the Catalyst Center Grant Program to create new or expand existing catalyst centers to enhance career readiness and align students' skills with Utah's workforce needs.	

## Fiscal Information

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
This rule change is not expected to have any fiscal impact on state government revenues or expenditures. The Utah State Board of Education (USBE) believes that any fiscal impacts were captured in the fiscal note to HB 447 (2025) and the rule carries no further impacts to USBE, Local Education Agencies (LEAs), or other persons or entities.
<b>B. Local governments:</b>
This rule change is not expected to have any fiscal impact on local governments' revenues or expenditures.
The USBE believes that any fiscal impacts were captured in the fiscal note to HB 447 (2025) and this rule carries no further impacts to the USBE, LEAs, or other persons or entities.
<b>C. Small businesses</b> ("small business" means a business employing 1-49 persons):
This rule change is not expected to have any fiscal impact on small businesses' revenues or expenditures.
The USBE believes that any fiscal impacts were captured in the fiscal note to HB 447 (2025) and this rule carries no further impacts to the USBE, LEAs, or other persons or entities.
<b>D. Non-small businesses</b> ("non-small business" means a business employing 50 or more persons):
There are no non-small businesses in the industry in question, Elementary and Secondary Schools (North American Industry Classification System (NAICS) 611110). Because there are no non-small businesses, they do not account for any service delivery for Elementary and Secondary Schools. Therefore, non-small businesses are not expected to receive increased or decreased revenues per year. This proposed rule change is not expected to have any fiscal impact on non-small businesses; revenues or expenditures because there are no applicable non-small businesses, and it does not require any expenditures of, or generate revenue for non-small businesses.
<b>E. Persons other than small businesses, non-small businesses, state, or local government entities</b> ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an <b>agency</b> ):
This rule change is not expected to have any fiscal impact on revenues or expenditures for persons other than small businesses, businesses, or local government entities.
The USBE believes that any fiscal impacts were captured in the fiscal note to HB 447 (2025) and this rule carries no further impacts to the USBE, LEAs, or other persons or entities.

**F. Compliance costs for affected persons:**

There are no compliance costs for affected persons.

The USBE believes that any fiscal impacts were captured in the fiscal note to HB 447 (2025) and this rule carries no further impacts to the USBE, LEAs, or other persons or entities.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

**Regulatory Impact Summary Table**

<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The State Superintendent of the Utah State Board of Education, Molly Hart, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Article X, Section 3	Subsection 53E-3-401(4)	Section 53E-3-507.1
Section 53F-9-204		

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
--	------------

<b>10. This rule change MAY become effective on:</b>	01/07/2026
--	------------

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Elisse Newey, Deputy Superintendent of Policy	<b>Date:</b>	11/14/2025
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**R277. Education, Administration.**

**R277-731. Catalyst Center Grant Program Policy.**

**R277-731-1. Authority, Purpose, and Oversight Category.**

(1) This rule is authorized by:

## NOTICES OF PROPOSED RULES

- (a) Utah Constitution Article X, Section 3, which vests general control and supervision over public education in the Board;
- (b) Subsection 53E-3-401(4), which allows the Board to make rules to execute the Board's duties and responsibilities under the Utah constitution and state law;
- (c) Section 53E-3-507.1, which establishes the Catalyst Center Grant Program; and
- (d) Section 53F-9-204, which describes legislative appropriation for the program.
- (2) The purpose of this rule is to establish standards and procedures for Local Education Agencies (LEAs) to qualify for and administer funds from the Catalyst Center Grant Program to create new or expand existing catalyst centers to enhance career readiness and align students' skills with Utah's workforce needs.
- (3) This Rule R277- 731 is categorized as Category 4 as described in Rule R277-111.

### **R277-731-2. Definitions.**

- (1) "Advisory board" means a group of individuals composed of industry, postsecondary, and community representatives that review program direction and ensure alignment with workforce needs.
- (2) "Consortium" means two or more LEAs located within the same CTE geographic planning region.
- (3) "Profession-based learning center" means a Catalyst Model Center as defined in Section 53E-3-507.1.
- (4) "Program" means the Catalyst Center Grant Program defined in Section 53E-3-507.1.
- (5) "Unwarranted duplication" means the overlap of resources that lead to inefficiencies, wasted resources, or a lack of coordination in providing comprehensive CTE programs.

### **R277-731-3. LEA Grant Requirements.**

- (1) An LEA or LEA consortium may annually apply for grant funding beginning with the 2025-2026 school year.
- (2) An LEA or LEA consortium may not apply for an additional grant that would overlap with an existing award.
- (3) An LEA shall apply for a grant by submitting an application to the state board that includes:
  - (a) a general plan, including a proposed timeline for the project;
  - (b) a detailed budget, identifying proposed expenditures and any matching funds used for the project;
  - (c) justification for any capital expenditures, including plans for building use, cost analyses, and estimates;
  - (d) a description of how the grant will be used to improve student outcomes;
  - (e) a description of the well-defined metrics that will be used to establish and measure student proficiency;
  - (f) evidence of any existing partnerships with industry, including letters of collaboration;
  - (g) evidence of alignment with the LEA's strategic plan;
  - (h) evidence of alignment with local labor market and industry needs;
  - (i) an explanation of how awarded funds will be used within the defined performance period without unnecessary carryforward;
  - (j) as applicable, a description of how the catalyst center programming will align with or enhance programs funded by the weighted pupil unit add-on described in Section 53F-2-311;
  - (k) for applications submitted by a consortium of LEAs, a description of:
    - (i) which LEA will be the fiscal agent;
    - (ii) how the catalyst center will serve students across the consortium;
    - (iii) how costs and resources will be shared; and
    - (iv) how economies of scale will be achieved;
  - (l) a description of any proposed planning activities, including expected timelines and outcomes;
  - (m) evidence of collaboration with the LEA CTE Director; and
  - (n) if applicable, an explanation of the LEA's process for employing an individual with industry experience as an educator who is not a licensed teacher through Subsection 53E-6-204(3), including how the LEA will:
    - (i) determine and verify the individual's industry expertise; and
    - (ii) provide any required training to the individual before or during the teaching assignment.
- (4) Grant funding shall not be used for the unwarranted duplication of existing resources, including physical assets and programmatic offerings, provided by other state or local entities.
- (5) To maximize resources and impact, LEAs may apply for funding as a consortium.

### **R277-731-4. Superintendent Responsibilities and Award Prioritization.**

- (1) Beginning with the 2026-2027 fiscal year, dependent on available funds, the Superintendent shall make the application available beginning May 15.
- (2) Prioritization for grant funding will be given to an LEA that:
  - (a) proposes innovative programming supported by local labor market data;
  - (b) collaborates with local postsecondary institutions and industry;
  - (c) demonstrates the ability to sustain the catalyst center after the grant period;
  - (d) demonstrates a strong focus on student outcomes and workforce alignment;
  - (e) addresses gaps in high-demand, high-skill career pathways;
  - (f) ensures funds are used to enhance programming quality before expansion; and
  - (g) provides for a large number of students to participate in catalyst center programs without limiting participation to students based on socioeconomic challenges.
- (3) For the purposes of subsection (2)(b):

(a) coordination with local postsecondary institutions and industry shall be directed by the LEA in a manner that the LEA determines is in the best interest of the program; and

(b) the level of collaboration may be tailored to the individual needs of each program, and each offering within the program.

(4) Subsection (2)(g) shall not be interpreted to mean that LEAs with more students are prioritized over LEAs with fewer students.

(5) Grant funds may be distributed through smaller planning grants.

(6) The Superintendent may use up to 1% of the funds appropriated by the Legislature to administer the program.

#### **R277-731-5. Program Requirements.**

(1) An LEA receiving a grant shall utilize funds to plan for, create, establish, enhance, or expand profession-based learning programs that:

(a) provide learning experiences and instruction that:

(i) replicates professional environments and workplace practices;

(ii) builds leadership skills;

(iii) builds durable professional skills;

(iv) allows students to advance as they demonstrate proficiency through well-defined metrics;

(v) utilizes student projects that address the specific needs or objectives of industry partners;

(vi) incorporates industry-standard tools, technologies, and methods;

(vii) provides opportunities for students to develop a product or presentation that is shared with an audience; and

(viii) facilitates mentorship by industry professionals to guide and evaluate the student's work;

(b) align programming with labor market needs and local industry demands;

(c) establish or enhance partnerships with:

(i) local industries and employers to ensure workforce relevance; or

(ii) as determined by the LEA, technical colleges, degree-granting institutions, or other postsecondary entities to support postsecondary transitions for students;

(d) address gaps in regional workforce training or opportunities;

(e) incorporate:

(i) career and technical student organizations as the LEA determines relevant;

(ii) advisory boards with representation from local industries and workforce experts;

(iii) professional learning opportunities for instructors to improve workforce-focused skills; and

(iv) strategies for using labor market data to refine and improve program offerings;

(f) is tailored to the unique needs and circumstances of the local student body, community, and industry partners; and

(g) align with CTE Quality Standards.

(2) LEAs or LEA consortiums shall use any equipment or capital purchased with awarded funds for the purposes outlined in the application.

(3) If the award includes a portion of the grant as a lump sum payment, the LEA shall work with the Superintendent to establish a payment timeline requiring milestones and documentation;

(4) Catalyst centers may be collocated on the campus of an institution of higher education with an agreement between the LEA and the institution of higher education.

#### **R277-731-6. Oversight, Monitoring, and Reports.**

(1) An LEA that receives a grant shall submit an annual report to the state board no later than September 15.

(2) The annual report shall include:

(a) the use of grant funds;

(b) progress in meeting proposed goals and benchmarks, including student proficiency measurements using the well-defined metrics described in the application;

(c) updates on partnerships with industry and postsecondary institutions;

(d) a demonstration of the alignment of programming with labor market data; and

(e) a description of applicable student participation and outcomes.

(3) An LEA receiving funds will be monitored to ensure that awarded funds are used in accordance with an LEA's application.

(4) If requesting a portion of the grant as an initial lump sum payment, the LEA must provide evidence of achieved benchmarks before receiving the remainder of the awarded funds on a reimbursement basis.

(5) Annually, funds that are not used within the defined performance period will be recaptured for reallocation.

(6) An LEA that does not comply with the requirements of this Rule R277-731, including not providing evidence of adherence to program standards or misuse of funds, may be subject to a corrective action plan and potential reduction of funds or penalty in accordance with Rule R277-114.

(7) Upon request, the Superintendent shall submit a report on the program to the Education Interim Committee and the Public Education Appropriations Subcommittee.

**KEY: catalyst center, grant program, career readiness, workforce development, profession-based learning****Date of Last Change: 2025****Authorizing, and Implemented or Interpreted Law: Art X Sec 3; 53E-3-401(4); 53E-3-507.1; 53F-9-204****NOTICE OF SUBSTANTIVE CHANGE****TYPE OF FILING:** Amendment**Rule or section number:****R307-101****Filing ID: 57666****Agency Information**

1. Title catchline:	Environmental Quality, Air Quality	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 144820	
City, state and zip:	Salt Lake City, UT 84114-4820	
Contact persons:		
Name:	Phone:	Email:
Jazmine Lopez	801-536-4050	jazminelopez@utah.gov
Becky Close	801-536-4013	bclose@utah.gov

**Please address questions regarding information on this notice to the persons listed above.****General Information**

<b>2. Rule or section catchline:</b>
R307-101. General Requirements
<b>4. Purpose of the new rule or reason for the change:</b>
<p>Section R307-101-3, Version of Code of Federal Regulations Incorporated by Reference, must reflect changes to the federal air quality regulations as published in Title 40 of the Code of Federal Regulations (40 CFR).</p> <p>This rule has been amended to identify the most recent version of 40 CFR, September 30, 2025, as the version that is incorporated throughout the Division of Air Quality (division) rules.</p>
<b>5. Summary of the new rule or change:</b>
<p>This filing amends Rule R307-101 to update the CFR Incorporations by Reference date to reflect the most recent version of the Code of Federal Regulations, Title 40 – Protection of Environment. This filing reflects any changes to 40 CFR from July 2, 2024, to September 30, 2025.</p> <p>Some updates of note include:</p> <p>1. 40 CFR Part 60:</p> <p>a) New NSPS Subpart Kc: EPA finalized requirements to reduce the vapor pressure applicability thresholds and revise the Volatile Organic Compound standards to reflect the best system of emission reduction for affected storage vessels.</p> <p>b) EPA finalized emission standards for ethylene oxide emissions and chloroprene emissions. The EPA also finalized the removal of exemptions from standards for periods of Startup, Shutdown, and Malfunction, adding work practice standards where appropriate; finalized standards for previously unregulated HAP; and added provisions for electronic reporting of performance test reports and periodic reports.</p> <p>2. EPA finalized requirements for sources that reclassify from major source status to area source status under the NESHAP program. The EPA requires that sources subject to certain major source NESHAP for seven specific persistent and bioaccumulative pollutants must remain subject to those NESHAP even if the sources reclassify to area source status.</p>



3. EPA extended deadlines for certain provisions related to control devices, equipment leaks, storage vessels, process controllers, and covers/closed vent systems in Subpart OOOOb; extended the date for future implementation of the Super Emitter Program; and extended the state plan submittal deadline in OOOOc.

4. Revision of Table A-1 to Subpart A of 40 CFR Part 98 to better characterize the climate impacts of individual greenhouse gases and to ensure continued consistency with other U.S. climate programs, including the Inventory.

The Division is also making additional necessary amendments to Rule R307-101 to bring this rule into compliance with Executive Order No. 2021-12 requiring all departments to update their respective rules to align with the Rulewriting Manual for Utah standards.

### Fiscal Information

#### 6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:

##### A. State budget:

There are no anticipated costs or savings to the state budget as there is no fiscal component related to the amendments.

The amendments relate to federal requirements that are already in place.

##### B. Local governments:

There are no anticipated costs or savings for local governments as there is no fiscal component related to the amendments.

The amendments relate to federal requirements that are already in place.

##### C. Small businesses ("small business" means a business employing 1-49 persons):

There are no anticipated costs or savings for small businesses as there is no fiscal component related to the amendments.

The amendments relate to federal requirements that are already in place.

##### D. Non-small businesses ("non-small business" means a business employing 50 or more persons):

There are no anticipated costs or savings for non-small businesses as there is no fiscal component related to the amendments.

The amendments relate to federal requirements that are already in place.

##### E. Persons other than small businesses, non-small businesses, state, or local government entities ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There are no anticipated costs or savings for persons other than small businesses, non-small businesses, state, or local government entities as there is no fiscal component related to the amendments.

The amendments relate to federal requirements that are already in place.

##### F. Compliance costs for affected persons:

There are no compliance costs for affected persons as there is no fiscal component related to the amendments.

The amendments relate to federal requirements that are already in place.

##### G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0

## NOTICES OF PROPOSED RULES

Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Environmental Quality, Tim Davis, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 19-2-104

**Incorporation by Reference Information****8. Incorporation by Reference:**

**A. This rule adds or updates the following title of material incorporated by reference** (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

<b>Official Title of Materials Incorporated (from title page)</b>	Code of Federal Regulations, Title 40 – Protection of Environment
<b>Publisher</b>	The National Archives and Records Administration
<b>Issue or Version</b>	09/30/2025

**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:** 12/31/2025

**B. A public hearing (optional) will be held** (The public may request a hearing by submitting a written request to the agency, as outlined in Section 63G-3-302 and Rule R15-1.):

<b>Date:</b>	<b>Time:</b>	<b>Place (physical address or URL):</b>
12/18/2025	1:00 PM to 2:00 PM	<p>A public hearing is set for Thursday, December 18, 2025.</p> <p>Further details may be found below. The hearing will be cancelled should no request for one be made by Tuesday, December 16, 2025, at 10 AM MT.</p> <p>The final status of the public hearing will be posted on Tuesday, December 16, 2025, after 10 AM MT.</p> <p>The status of the public hearing may be checked at the following website location under the corresponding rule.</p>

		<a href="https://deq.utah.gov/public-notices-archive/air-quality-rule-plan-changes-open-public-comment">https://deq.utah.gov/public-notices-archive/air-quality-rule-plan-changes-open-public-comment</a>  Interested Persons can participate in person or electronically, via the internet. In Person: MASOB 195 N 1950 W First Floor, Air Quality Board Room Salt Lake City, UT  Virtual Attendance: Public Time zone: America/Denver Google Meet joining info: Video call link: <a href="https://meet.google.com/jej-myee-byh">https://meet.google.com/jej-myee-byh</a> Or dial: (US) +1 513-788-1981 PIN: 618 623 210#
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<b>10. This rule change MAY become effective on:</b>	02/04/2026
NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.	

#### Agency Authorization Information

<b>Agency head or designee and title:</b>	Bryce C. Bird, Division Director	<b>Date:</b>	10/15/2025
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### R307. Environmental Quality, Air Quality.

#### R307-101. General Requirements.

##### R307-101-1. Foreword.

Chapter 19-2 and the rules adopted by the Air Quality Board constitute the basis for control of air pollution sources in the state. Title R307 applies and shall be enforced throughout the state and are recommended for adoption in local jurisdictions where environmental specialists are available to cooperate in implementing rule requirements.

National Ambient Air Quality Standards (NAAQS), National Standards of Performance for New Stationary Sources (NSPS), National Prevention of Significant Deterioration of Air Quality (PSD) standards, and the National Emission Standards for Hazardous Air Pollutants (NESHAPS) apply throughout the nation and are legally enforceable in Utah.

##### R307-101-2. Definitions.

Except where specified in individual rules, definitions in Section R307-101-2 are applicable to any rules adopted by the Air Quality Board.

"Actual Emissions" means the actual rate of emissions of a pollutant from an emissions unit determined as follows:

(1) In general, actual emissions as of a particular date shall equal the average rate, in tons per year, at which the unit actually emitted the pollutant during a two-year period which precedes the particular date and which is representative of normal source operations. The director shall allow the use of a different period upon a determination that it is more representative of normal source operation. Actual emissions shall be calculated using the unit's actual operating hours, production rates, and types of materials processed, stored, or combusted during the selected period[-];

(2) The director may presume that source-specific allowable emissions for the unit are equivalent to the actual emissions of the unit[-];

(3) For any emission unit, other than an electric utility steam generating unit specified in Subsection (4), which has not begun normal operations on the date, actual emissions shall equal the potential to emit of the unit on that date[-];

(4) For an electric utility steam generating unit, other than a new unit or the replacement of an existing unit, actual emissions of the unit following the physical or operational change shall equal the representative actual annual emissions of the unit, provided the source owner or operator maintains and submits to the director, on an annual basis for a period of five years from the date the unit resumes regular operation, information demonstrating that the physical or operational change did not result in an emissions increase. A longer period, not to exceed ten years, may be required by the director if the director determines a period to be more representative of normal source post-change operations.

"Acute Hazardous Air Pollutant" means any noncarcinogenic hazardous air pollutant for which a threshold limit value -- ceiling (TLV-C) has been adopted by the American Conference of Governmental Industrial Hygienists (ACGIH) in its "Threshold Limit Values for Chemical Substances and Physical Agents and Biological Exposure Indices, (2009)."

"Air [p]ollutant" means a substance that qualifies as an air pollutant as defined in 42 U.S.C. Sec. 7602.

"Air Pollutant Source" means private and public sources of emissions of air pollutants.

## NOTICES OF PROPOSED RULES

"Air Pollution" means the presence of an air pollutant in the ambient air in quantities and duration and under conditions and circumstances, that are injurious to human health or welfare, animal or plant life, or property, or would unreasonably interfere with the enjoyment of life or use of property as determined by the standards, rules adopted by the Air Quality Board, Section 19-2-104.

"Allowable Emissions" means the emission rate of a source calculated using the maximum rated capacity of the source, unless the source is subject to enforceable limits which restrict the operating rate, or hours of operation, or both, and the emission limitation established pursuant to Section R307-401-8.

"Ambient Air" means that portion of the atmosphere, external to buildings, to which the general public has access. See Subsection 19-2-102(4).

"Appropriate Authority" means the governing body of any city, town, or county.

"Atmosphere" means the air that envelops or surrounds the earth and includes any space outside of buildings, stacks, or exterior ducts.

"Authorized Local Authority" means:

- (1) city, county, city-county, or district health department;
- (2) a city, county, or combination fire department;
- (3) other local agency designated by appropriate authority, with approval of the Utah Department of Health and Human Services; or
- (4) other lawfully adopted ordinances, codes, or regulations not in conflict with.

"Board" means Air Quality Board. See Subsection 19-2-102(8)(a).

"Breakdown" means any malfunction or procedural error, to include any malfunction or procedural error during start-up and shutdown, which will result in the inoperability or sudden loss of performance of the control equipment or process equipment causing emissions in excess of those allowed by approval order or Title R307.

"BTU" means British Thermal Unit, the quantity of heat necessary to raise the temperature of one pound of water by one degree Fahrenheit.

"Calibration Drift" means the change in the instrument meter readout over a stated period of normal continuous operation when the VOC concentration at the time of measurement is the same known upscale value.

"Carbon Adsorption System" means a device containing adsorbent material including activated carbon, aluminum, silica gel, an inlet and outlet for exhaust gases, and a system for the proper disposal or reuse of any VOC adsorbed.

"Carcinogenic Hazardous Air Pollutant" means any hazardous air pollutant that is classified as a known human carcinogen (A1) or suspected human carcinogen (A2) by the American Conference of Governmental Industrial Hygienists (ACGIH) in its "Threshold Limit Values for Chemical Substances and Physical Agents and Biological Exposure Indices, (2009)."

"Chargeable Pollutant" means any regulated air pollutant except the following:

- (1) carbon monoxide;
- (2) any pollutant that is a regulated air pollutant solely because it is a Class I or II substance subject to a standard promulgated or established by Title VI of the Act, Stratospheric Ozone Protection; or
- (3) any pollutant that is a regulated air pollutant solely because it is subject to a standard or regulation under Section 112(r) of the Act, Prevention of Accidental Releases.

"Chronic Hazardous Air Pollutant" means any noncarcinogenic hazardous air pollutant for which a threshold limit value -- time weighted average (TLV-TWA) having no threshold limit value -- ceiling (TLV-C) has been adopted by the American Conference of Governmental Industrial Hygienists (ACGIH) in its "Threshold Limit Values for Chemical Substances and Physical Agents and Biological Exposure Indices, (2009)."

"Clean Air Act" means federal Clean Air Act as found in 42 U.S.C. Chapter 85.

"Clean Coal Technology" means any technology, including technologies applied at the precombustion, combustion, or post combustion stage, at a new or existing facility which will achieve significant reductions in air emissions of sulfur dioxide or oxides of nitrogen associated with the utilization of coal in the generation of electricity, or process steam which was not in widespread use as of November 15, 1990.

"Clean Coal Technology Demonstration Project" means a project using funds appropriated under the heading "Department of Energy-Clean Coal Technology," up to a total amount of \$2,500,000,000 for commercial demonstration of clean coal technology, or similar projects funded through appropriations for the Environmental Protection Agency. The federal contribution for a qualifying project shall be at least 20% of the total cost of the demonstration project.

"Clearing Index" means an indicator of the predicted rate of clearance of ground level pollutants from a given area. This number is provided by the National Weather Service.

"Coating" means a material that can be applied to a substrate and which cures to form a continuous solid film for protective, decorative, or functional purposes. Materials include paints, varnishes, sealants, adhesives, caulks, maskants, inks, and temporary protective coatings.

"Commence" as applied to construction of a major source or major modification means that the owner or operator has any necessary pre-construction approvals or permits and either has:

- (1) begun, or caused to begin, a continuous program of actual on-site construction of the source, to be completed within a reasonable time; or
- (2) entered into binding agreements or contractual obligations, which cannot be canceled or modified without substantial loss to the owner or operator, to undertake a program of actual construction of the source to be completed within a reasonable time.

"Composite vapor pressure" means the sum of the partial pressures of the compounds defined as VOCs.

"Condensable PM<sub>2.5</sub>" means material that is vapor phase at stack conditions, but which condenses or reacts upon cooling and dilution in the ambient air to form solid or liquid particulate matter immediately after discharge from the stack.

"Compliance Schedule" means a schedule of events, by date, which shall result in compliance with this rule.

"Construction" means any physical change or change in the method of operation including fabrication, erection, installation, demolition, or modification of a source which would result in a change in actual emissions.

"Control Apparatus" means any device which prevents or controls the emission of any air pollutant directly or indirectly into the outdoor atmosphere.

"Department" means Utah State Department of Environmental Quality. See Subsection 19-1-103(1).

"Director" means the Director of the Division of Air Quality. See Subsection 19-1-103(1).

"Division" means the Division of Air Quality.

"Electric Utility Steam Generating Unit" means any steam-electric generating unit that is constructed to supply more than one-third of its potential electric output capacity and more than 25 MW electrical output to any utility power distribution system for sale. Any steam supplied to a steam distribution system for providing steam to a steam-electric generator that would produce electrical energy for sale is also considered in determining the electrical energy output capacity of the affected facility.

"Emission" means the act of discharge into the atmosphere of an air pollutant or an effluent which contains or may contain an air pollutant, or the effluent so discharged into the atmosphere.

"Emissions Information" means any source operation, equipment, or control apparatus:

(1) information necessary to determine the identity, amount, frequency, concentration, or other characteristics related to air quality of any air pollutant which has been emitted by the source operation, equipment, or control apparatus;

(2) information necessary to determine the identity, amount, frequency, concentration, or other characteristics to the extent related to air quality, of any air pollutant which, under an applicable standard or limitation, the source operation was authorized to emit including, to the extent necessary for such purposes, a description of the manner or rate of operation of the source operation, or any combination of the foregoing; and

(3) a general description of the location or nature of the source operation to the extent necessary to identify the source operation and to distinguish it from other source operations including, to the extent necessary for such purposes, a description of the device, installation, or operation constituting the source operation.

"Emission Limitation" means a requirement established by the Board, the director or the Administrator, or EPA, which limits the quantity, rate, or concentration of emission of air pollutants on a continuous emission reduction including any requirement relating to the operation or maintenance of a source to ensure continuous emission reduction. See Section 302(k).

"Emissions Unit" means any part of a stationary source which emits or would have the potential to emit any pollutant subject to regulation under the Clean Air Act.

"Enforceable" means any limitations and conditions which are enforceable by the Administrator, including those requirements developed pursuant to 40 CFR Parts 60 and 61, requirements within the State Implementation Plan and Title R307, any permit requirements established pursuant to 40 CFR 52.21 or Rule R307-401.

"EPA" means Environmental Protection Agency.

"EPA Method 9" means 40 CFR Part 60, Appendix A, Method 9, "Visual Determination of Opacity of Emissions from Stationary Sources," and Alternate 1, "Determination of the opacity of emissions from stationary sources remotely by LIDAR."

"Executive Director" means the Executive Director of the Utah Department of Environmental Quality. See Subsection 19-1-103(2).

"Existing Installation" means an installation[~~;~~] or construction [~~of~~] which began before the effective date of any regulation having application to it.

"Filterable PM<sub>2.5</sub>" means particles with an aerodynamic diameter equal to or less than 2.5 micrometers that are directly emitted by a source as a solid or liquid at stack or release conditions and can be captured on the filter of a stack test train.

"Fireplace" means any devices, [~~both~~] including masonry or factory-built units, free standing fireplaces with a hearth, fire chamber or similarly prepared device connected to a chimney which provides the operator with little control of combustion air, leaving its fire chamber fully or at least partially open to the room. Fireplaces include those devices with circulating systems, heat exchangers, or draft-reducing doors with a net thermal efficiency of no greater than 20% and are used for aesthetic purposes.

"Fugitive Dust" means particulate[~~;~~] composed of soil, industrial particulates, or both, including ash, coal, and minerals which becomes airborne because of wind or mechanical disturbance of surfaces. Natural sources of dust and fugitive emissions are not fugitive dust within the meaning of this definition.

"Fugitive Emissions" means emissions from an installation or facility which are neither passed through an air cleaning device nor vented through a stack or could not reasonably pass through a stack, chimney, vent, or other functionally equivalent opening.

"Garbage" means any putrescible animal and vegetable matter resulting from the handling, preparation, cooking and consumption of food, including wastes attendant thereto.

"Gasoline" means any petroleum distillate, used as a fuel for internal combustion engines, having a Reid vapor pressure of four pounds or greater.

"Hazardous Air Pollutant (HAP)" means any pollutant listed by the EPA as a hazardous air pollutant in conformance with Section 112(b) of the Clean Air Act. A list of these pollutants is available at the Division of Air Quality.

"Household Waste" means any solid or liquid material normally generated by the family in a residence in the course of ordinary day-to-day living, including garbage, paper products, rags, leaves, and garden trash.

"Incinerator" means a combustion apparatus designed for high temperature operation in which solid, semisolid, liquid, or gaseous combustible wastes are ignited and burned efficiently and from which the solid and gaseous residues contain little or no combustible material.

"Installation" means a discrete process with identifiable emissions which may be part of a larger industrial plant. Pollution equipment may not be considered a separate installation or installations.

"LPG" means liquified petroleum gas including propane or butane.

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"Maintenance Area" means an area that is subject to ~~the provisions of~~ a maintenance plan that is included in the Utah State Implementation Plan, and that has been redesignated by EPA from nonattainment to attainment of any National Ambient Air Quality Standard.

(1) Provo City is considered a maintenance area[s] for carbon monoxide effective January 3, 2006.

(2) The following areas are considered maintenance areas for PM10:

(a) Salt Lake County, effective on the date that EPA approves the maintenance plan that was adopted by the Board on December 2, 2015;

(b) Utah County, effective on the date that EPA approves the maintenance plan that was adopted by the Board on December 2, 2015; and

(c) Ogden City, effective on the date that EPA approves the maintenance plan that was adopted by the Board on December 2, 2015.

(3) The following area is considered a maintenance area for sulfur dioxide: Salt Lake County and the eastern portion of Tooele County above 5,600 feet, effective on the date that EPA approves the maintenance plan that was adopted by the Board on January 5, 2005.

(4) The following areas are considered maintenance areas for PM2.5:

(a) the Salt Lake City, Utah 24-hour PM2.5 nonattainment area, as defined in the July 1, 2019<sub>2</sub> version of 40 CFR 81.345, effective on the date that EPA redesignates the area to attainment for PM2.5;

(b) the Provo, Utah 24-hour PM2.5 nonattainment area, as defined in the July 1, 2019<sub>2</sub> version of 40 CFR 81.345, effective on the date that EPA redesignates the area to attainment for PM2.5; and

(c) the Utah portion of the Logan, Utah-Idaho 24-hour PM2.5 nonattainment area, as defined in the July 1, 2019<sub>2</sub> version of 40 CFR 81.345, effective on the date that EPA redesignates the area to attainment for PM2.5.

"Major Modification" means any physical change ~~in~~ or change in the method of operation of a major source that would result in a significant net emissions increase of any pollutant. A net emissions increase that is significant for volatile organic compounds shall be considered significant for ozone. Within Salt Lake and Davis Counties or any nonattainment area for ozone, a net emissions increase that is significant for nitrogen oxides shall be considered significant for ozone. Within areas of nonattainment for PM10, a significant net emission increase for any PM10 precursor is also a significant net emission increase for PM10. A physical change or change in the method of operation may not include:

(1) routine maintenance, repair, and replacement;

(2) use of an alternative fuel or raw material by reason of an order under Section 2(a) and Section 2(b) of the Energy Supply and Environmental Coordination Act of 1974, or by reason of a natural gas curtailment plan pursuant to the Federal Power Act;

(3) use of an alternative fuel by reason of an order or rule under Section 125 of the federal Clean Air Act;

(4) use of an alternative fuel at a steam generating unit to the extent that the fuel is generated from municipal solid waste;

(5) use of an alternative fuel or raw material by a source:

(a) which the source was capable of accommodating before January 6, 1975, unless ~~such~~ the change would be prohibited under any enforceable permit condition; or

(b) which the source is otherwise approved to use;

(6) an increase in the hours of operation or in the production rate unless the change would be prohibited under any enforceable permit condition;

(7) any change in ownership at a source;

(8) the addition, replacement, or use of a pollution control project at an existing electric utility steam generating unit, unless the director determines that the addition, replacement, or use renders the unit less environmentally beneficial, or except:

(a) when the director has reason to believe that the pollution control project would result in a significant net increase in representative actual annual emissions of any criteria pollutant over levels used for that source in the most recent air quality impact analysis in the area conducted for Title I of the Clean Air Act, if any; and

(b) the director determines that the increase will cause or contribute to a violation of any national ambient air quality standard or PSD increment, or visibility limitation;

(9) the installation, operation, cessation, or removal of a temporary clean coal technology demonstration project, provided that the project complies with:

(a) the Utah State Implementation Plan; and

(b) other requirements necessary to attain and maintain the national ambient air quality standards during the project and after it is terminated.

"Major Source" means, to the extent provided by the federal Clean Air Act as applicable to Title R307:

(1) any stationary source of air pollutants which emits, or has the potential to emit, 100 tons per year or more of any pollutant subject to regulation under the Clean Air Act; or

(a) any source located in a nonattainment area for carbon monoxide which emits, or has the potential to emit, carbon monoxide in the amounts outlined in Section 187 of the federal Clean Air Act with respect to the severity of the nonattainment area as outlined in Section 187 of the federal Clean Air Act;

(b) any source located in Salt Lake or Davis Counties or in a nonattainment area for ozone which emits, or has the potential to emit, VOC or nitrogen oxides in the amounts outlined in Section 182 of the federal Clean Air Act with respect to the severity of the nonattainment area as outlined in Section 182 of the federal Clean Air Act; or

(c) any source located in a nonattainment area for PM10 which emits, or has the potential to emit, PM10 or any PM10 precursor in the amounts outlined in Section 189 of the federal Clean Air Act with respect to the severity of the nonattainment area as outlined in Section 189 of the federal Clean Air Act.

(2) any physical change that would occur at a source not qualifying under Subsection (1) as a major source, if the change would constitute a major source by itself;

(3) the fugitive emissions and fugitive dust of a stationary source may not be included in determining for any of the purposes of Title R307 rules whether it is a major stationary source, unless the source belongs to one of the following categories of stationary sources:

- (a) coal cleaning plants with thermal dryers;
- (b) Kraft pulp mills;
- (c) Portland cement plants;
- (d) primary zinc smelters;
- (e) iron and steel mills;
- (f) primary aluminum or reduction plants;
- (g) primary copper smelters;
- (h) municipal incinerators capable of charging more than 250 tons of refuse per day;
- (i) hydrofluoric, sulfuric, or nitric acid plants;
- (j) petroleum refineries;
- (k) lime plants;
- (l) phosphate rock processing plants;
- (m) coke oven batteries;
- (n) sulfur recovery plants;
- (o) carbon black plants or furnace process;
- (p) primary lead smelters;
- (q) fuel conversion plants;
- (r) sintering plants;
- (s) secondary metal production plants;
- (t) chemical process plants;
- (u) fossil[-]fuel boilers, or combination thereof, totaling more than 250 million British Thermal Units per hour heat input;
- (v) petroleum storage and transfer units with a total storage capacity exceeding 300,000 barrels;
- (w) taconite ore processing plants;
- (x) glass fiber processing plants;
- (y) charcoal production plants;
- (z) fossil fuel-fired steam-electric plants of more than 250 million British Thermal Units per hour heat input; or
- (aa) any other stationary source category which, as of August 7, 1980, is being regulated under Section 111 or 112 of the federal Clean Air Act.

"Modification" means any planned change in a source which results in a potential increase of emissions.

"National Ambient Air Quality Standards (NAAQS)" means the allowable concentrations of air pollutants in the ambient air specified by the federal government, see Title 40, Code of Federal Regulations, Part 50.

"Net Emissions Increase" means the amount by which the sum of the following exceeds zero:

- (1) any increase in actual emissions from a particular physical change or change in method of operation at a source; and
- (2) any other increases and decreases in actual emissions at the source that are contemporaneous with the particular change and are otherwise creditable. For purposes of determining a "net emissions increase":

(a) an increase or decrease in actual emissions is contemporaneous with the increase from the particular change only if it occurs between the date five years before construction on the particular change commences; and the date that the increase from the particular change occurs;

(b) ~~[A]~~an increase or decrease in actual emissions is creditable only if it has not been relied on in issuing a prior approval for the source which approval is in effect when the increase in actual emissions for the particular change occurs;

(c) ~~[A]~~an increase or decrease in actual emissions of sulfur dioxide, nitrogen oxides, or particulate matter which occurs before an applicable minor source baseline date is creditable only if it is required to be considered in calculating the amount of maximum allowable increases remaining available and with respect to particulate matter, only PM10 emissions will be used to evaluate this increase or decrease;

(d) an increase in actual emissions is creditable only to the extent that the new level of actual emissions exceeds the old level[-];

(e) a decrease in actual emissions is creditable only to the extent that:

(i) the old level of actual emissions or the old level of allowable emissions, whichever is lower, exceeds the new level of actual emissions;

(ii) it is enforceable at and after the time that actual construction on the particular change begins;

(iii) it has about the same qualitative significance for public health and welfare as that attributed to the increase from the particular change; and

(iv) it has not been relied on in issuing any permit under Rule R307-401 nor has it been relied on in demonstrating attainment or reasonable further progress.

(f) an increase that results from a physical change at a source occurs when the emissions unit on which construction occurred becomes operational and begins to emit a particular pollutant and any replacement unit that requires shakedown becomes operational only after a reasonable shakedown period, not to exceed 180 days.

"New Installation" means an installation[-] or construction of which began after the effective date of any regulation having application to it.

"Nonattainment Area" means an area designated by the Environmental Protection Agency as nonattainment under Section 107, Clean Air Act for any National Ambient Air Quality Standard. The designations for Utah are listed in 40 CFR 81.345.

## NOTICES OF PROPOSED RULES

"Offset" means an amount of emission reduction, by a source, greater than the emission limitation imposed on the source by this rule, the State Implementation Plan, or both.

"Opacity" means the capacity to obstruct the transmission of light, expressed as ~~[percent]~~ a percentage.

"Open Burning" means any burning of combustible materials resulting in emissions of products of combustion into ambient air without passage through a chimney or stack.

"Owner or Operator" means any person who owns, leases, controls, operates or supervises a facility, an emission source, or air pollution control equipment.

"PSD Area" means an area designated as attainment or unclassifiable under Section 107(d)(1)(D) or (E) of the federal Clean Air Act.

"PM2.5" means particulate matter with an aerodynamic diameter less than or equal to a nominal 2.5 micrometers as measured by an EPA reference or equivalent method.

"PM2.5 Precursor" means any chemical compound or substance which, after it has been emitted into the atmosphere, undergoes chemical or physical changes that convert it into particulate matter, specifically PM2.5.

(1) Specifically, Sulfur dioxide, Nitrogen oxides, Volatile organic compounds, and Ammonia are precursors to PM2.5 in any PM2.5 nonattainment area, except where the Administrator of the EPA has approved a demonstration satisfying 40 CFR 51.1006(a)(3) which has, for a particular PM2.5 nonattainment area, determined otherwise.

(2) The following ~~[subparagraphs]~~ denote specific nonattainment areas, as defined in the July 1, 2017, version of 40 CFR 81.345, within which certain pollutants identified in Subsection (1) are exempted from the definition of PM2.5 precursor for the purposes of 40 CFR 51.165: In the Logan Utah-Idaho PM2.5 nonattainment area, Ammonia is exempted.

~~[(a) In the Logan UT-ID PM2.5 nonattainment area, Ammonia is exempted.]~~

"PM10" means particulate matter with an aerodynamic diameter less than or equal to a nominal ten micrometers as measured by an EPA reference or equivalent method.

"PM10 Precursor" means any chemical compound or substance which, after it has been emitted into the atmosphere, undergoes chemical or physical changes that convert it into particulate matter, specifically PM10.

"Part 70 Source" means any source subject to the permitting requirements of Rule R307-415.

"Person" means an individual, trust, firm, estate, company, corporation, partnership, association, state, state or federal agency or entity, municipality, commission, or political subdivision of a state. See Subsection 19-2-103(4).

"Pollution Control Project" means any activity or project at an existing electric utility steam generating unit for purposes of reducing emissions from a unit. Activities or projects are limited to:

(1) the installation of conventional or innovative pollution control technology, including advanced flue gas desulfurization, sorbent injection for sulfur dioxide and nitrogen oxide[s] controls, and electrostatic precipitators;

(2) an activity or project to accommodate switching to a fuel which is less polluting than the fuel used before the activity or project, including natural gas or coal reburning, or the cofiring of natural gas and other fuels for controlling emissions;

(3) a permanent clean coal technology demonstration project conducted under Title II, Section 101(d) of the Further Continuing Appropriations Act of 1985 (sec. 5903(d) of [§] Title 42 of the United States Code), or subsequent appropriations, up to a total amount of \$2,500,000,000 for commercial demonstration of clean coal technology, or similar projects funded through appropriations for the Environmental Protection Agency; or

(4) a permanent clean coal technology demonstration project that constitutes a repowering project.

"Potential to Emit" means the maximum capacity of a source to emit a pollutant under its physical and operational design. Any physical or operational limitation on the capacity of the source to emit a pollutant including air pollution control equipment and restrictions on hours of operation or on the type or amount of material combusted, stored, or processed shall be treated as part of its design if the limitation or the effect it would have on emissions is enforceable. Secondary emissions do not count in determining the potential to emit of a stationary source.

"Primary PM2.5" means the sum of filterable PM2.5 and condensable PM2.5.

"Process Level" means the operation of a source, specific to the kind or type of fuel, input material, or mode of operation.

"Process Rate" means the quantity per unit of time of any raw material or process intermediate consumed, or product generated, through the use of any equipment, source operation, or control apparatus. For a stationary internal combustion unit or any other fuel burning equipment, this term may be expressed as the quantity of fuel burned per unit of time.

"Reactivation of a Very Clean Coal-Fired Electric Utility Steam Generating Unit" means any physical change or change in the method of operation associated with the commencement of commercial operations by a coal-fired utility unit after a period of discontinued operation where the unit:

(1) has not been in operation for the two-year period before the enactment of the Clean Air Act Amendments of 1990, and the emissions from the unit continue to be carried in the emission inventory at the time of enactment;

(2) was equipped before shutdown with a continuous system of emissions control that achieves a removal efficiency for sulfur dioxide of no less than 85% and a removal efficiency for particulates of no less than 98%;

(3) is equipped with low-NOx burners before operations begin following reactivation; and

(4) is otherwise in compliance with the requirements of the Clean Air Act.

"Reasonable Further Progress" means annual incremental reductions in emission of an air pollutant which are sufficient to provide for attainment of the NAAQS by the date identified in the State Implementation Plan.

"Refuse" means solid wastes, ~~[such as]~~ including garbage and trash.

"Regulated air pollutant" means any of the following:

~~[(a)]~~ (1) nitrogen oxides or any volatile organic compound;

~~[(b)]~~ (2) any pollutant for which a national ambient air quality standard has been promulgated;



~~[(e)]~~(3) any pollutant that is subject to any standard promulgated under Section 111 of the Act, Standards of Performance for New Stationary Sources;

~~[(d)]~~(4) any Class I or Class II substance subject to a standard promulgated under or established by Title VI of the Act, Stratospheric Ozone Protection; or

~~[(e)]~~(5) any pollutant subject to a standard promulgated under Section 112, Hazardous Air Pollutants, or other requirements established under Section 112 of the Act, including Sections 112(g), (j), and (r) of the Act, including any of the following:

~~[(+)]~~(a) Any pollutant subject to requirements under Section 112(j) of the Act, Equivalent Emission Limitation by Permit. If the Administrator fails to promulgate a standard by the date established pursuant to Section 112(e) of the Act, any pollutant for which a subject source would be major shall be regulated on the date 18 months after the applicable date established pursuant to Section 112(e) of the Act;

~~[(+)]~~(b) Any pollutant for which the requirements of Section 112(g)(2) of the Act, Construction, Reconstruction and Modification, have been met, but only with respect to the individual source subject to Section 112(g)(2) requirements.

(1) "Repowering" means replacement of an existing coal-fired boiler with one of the following clean coal technologies:

(a) atmospheric or pressurized fluidized bed combustion;

(b) integrated gasification combined cycle;

(c) magnetohydrodynamics;

(d) direct and indirect coal-fired turbines;

(e) integrated gasification fuel cells; or

(f) as determined by the Administrator, in consultation with the Secretary of Energy, a derivative of one or more of these technologies, and any other technology capable of controlling multiple combustion emissions simultaneously with improved boiler or generation efficiency and with significantly greater waste reduction relative to the performance of technology in widespread commercial use as of November 15, 1990.

~~[(+)]~~(2) Repowering shall also include any oil or gas-fired unit which has been awarded clean coal technology demonstration funding as of January 1, 1991, by the Department of Energy.

~~[(+)]~~(3) The director shall give expedited consideration to permit applications for any source that satisfies the requirements of this definition and is granted an extension under Section 409 of the Clean Air Act.

"Representative Actual Annual Emissions" means the average rate, in tons per year, at which the source is projected to emit a pollutant for the two-year period after a physical change or change in the method of operation of unit, or a different consecutive two-year period within ten years after that change, where the director determines that the period is more representative of source operations, considering the effect any change will have on increasing or decreasing the hourly emissions rate and on projected capacity utilization. In projecting future emissions, the director shall:

(1) consider any relevant information, including historical operational data, the company's own representations, filings with the State of Federal regulatory authorities, and compliance plans under ~~[(+)]~~ Title IV of the Clean Air Act; and

(2) exclude, in calculating any increase in emissions that results from the particular physical change or change in the method of operation at an electric utility steam generating unit, that portion of the unit's emissions following the change that could have been accommodated during the representative baseline period and is attributable to an increase in projected capacity utilization at the unit that is unrelated to the particular change, including any increased utilization due to the rate of electricity demand growth for the utility system as a whole.

"Residence" means a dwelling in which people live, including all ancillary buildings.

"Residential Solid Fuel Burning" device means any residential burning device except a fireplace connected to a chimney that burns solid fuel and is capable of, and intended for use as a space heater, domestic water heater, or indoor cooking appliance, and has an air-to-fuel ratio less than 35-to-1 as determined by the test procedures prescribed in 40 CFR 60.534. It shall also have a useable firebox volume of less than 6.10 cubic meters or 20 cubic feet, a minimum burn rate less than 5 kilograms per hour or 11 pounds per hour as determined by test procedures prescribed in 40 CFR 60.534, and weigh less than 800 kilograms or 362.9 pounds. Appliances that are described as prefabricated fireplaces and are designed to accommodate doors or other accessories that would create the air starved operating conditions of a residential solid fuel burning device shall be considered as such. Fireplaces are not included in this definition for solid fuel burning devices.

"Road" means any public or private road.

"Salvage Operation" means any business, trade, or industry engaged in whole or in part in salvaging or reclaiming any product or material, including metals, chemicals, shipping containers, or drums.

"Secondary Emissions" means emissions which would occur as a result of the construction or operation of a major source or major modification, but do not come from the major source or major modification itself.

(1) Secondary emissions shall be specific, well defined, quantifiable, and impact the ~~[same]~~ general area as the source or modification which causes the secondary emissions. Secondary emissions include emissions from any off-site support facility which would not be constructed or increase its emissions except as a result of the construction or operation of the major source or major modification. Secondary emissions do not include any emissions which come directly from a mobile source including emissions from the tailpipe of a motor vehicle, from a train, or from a vessel.

(2) Fugitive emissions and fugitive dust from the source or modification are not considered secondary emissions.

"Secondary PM2.5" means particles that form or grow in mass through chemical reactions in the ambient air well after dilution and condensation have occurred. Secondary PM2.5 is usually formed at some distance downwind from the source.

"Significant" means:

(1) ~~[In reference to]~~ For a net emissions increase or the potential of a source to emit any of the following pollutants, a rate of emissions that would equal or exceed any of the following rates:

(a) Carbon monoxide: 100 ton per year (tpy);

## NOTICES OF PROPOSED RULES

- (b) Nitrogen oxides: 40 tpy;
- (c) Sulfur dioxide: 40 tpy;
- (d) PM10: 15 tpy;
- (e) PM2.5: 10 tpy;
- (f) Particulate matter: 25 tpy;
- (g) Ozone: 40 tpy of volatile organic compounds; or
- (h) Lead: 0.6 tpy.

"Solid Fuel" means wood, coal, and other similar organic material or combination of these materials.

"Solvent" means organic materials which are liquid at standard conditions, Standard Temperature and Pressure, and which are used as solvers, viscosity reducers, or cleaning agents.

"Source" means any structure, building, facility, or installation which emits or may emit any air pollutant subject to regulation under the Clean Air Act and which is located on one or more continuous or adjacent properties and which is under the control of the same person under common control. A building, structure, facility, or installation means any of the pollutant-emitting activities which belong to the same industrial grouping. Pollutant-emitting activities shall be considered as part of the same industrial grouping if they belong to the same "Major Group" which have the same two-digit code as described in the Standard Industrial Classification Manual, 1972, as amended by the 1977 Supplement, US Government Printing Office stock numbers 4101-0065 and 003-005-00176-0, respectively.

"Stack" means any point in a source designed to emit solids, liquids, or gases into the air, including a pipe or duct but not including flares.

"Standards of Performance for New Stationary Sources" means the federally established requirements for performance and record keeping, Title 40 Code of Federal Regulations, Part 60.

"Temporary" means not more than 180 calendar days.

"Temporary Clean Coal Technology Demonstration Project" means a clean coal technology demonstration project that is operated for a period of five years or less, and which complies with the Utah State Implementation Plan and other requirements necessary to attain and maintain the national ambient air quality standards during the project and after it is terminated.

"Threshold Limit Value -- Ceiling (TLV-C)" means the airborne concentration of a substance which may not be exceeded, as adopted by the American Conference of Governmental Industrial Hygienists in its "Threshold Limit Values for Chemical Substances and Physical Agents and Biological Exposure Indices, (2009)."

"Threshold Limit Value -- Time Weighted Average (TLV-TWA)" means the time[-]weighted airborne concentration of a substance adopted by the American Conference of Governmental Industrial Hygienists in its "Threshold Limit Values for Chemical Substances and Physical Agents and Biological Exposure Indices, (2009)."

"Total Suspended Particulate (TSP)" means minute separate particles of matter, collected by high volume sampler.

"Toxic Screening Level" means an ambient concentration of an air pollutant equal to a threshold limit value -- ceiling (TLV- C) or threshold limit value -- time weighted average (TLV-TWA) divided by a safety factor.

"Trash" means solids not considered to be highly flammable or explosive including clothing, rags, leather, plastic, rubber, floor coverings, excelsior, tree leaves, yard trimmings, and other similar materials.

"VOC content" means the weight of VOC per volume of material and is calculated by the following equation in gram/liter, pound/gallon, or pound/pound:

$$\text{Grams of VOC per Liter of Material} = \frac{W_s - W_w - W_{es}}{V_m}$$

Where:

Ws = weight of volatile organic compounds

Ww = weight of water

Wes = weight of exempt compounds

Vm = volume of material

"Volatile Organic Compound (VOC)" means VOC as defined in 40 CFR 51.100(s), effective as of the date referenced in Section R307-101-3, is incorporated by reference.

"Waste" means any solid, liquid or gaseous material, including garbage, trash, household refuse, construction or demolition debris, or other refuse including that resulting from the prosecution of any business, trade, or industry.

"Zero Drift" means the change in the instrument meter readout over a stated period of normal continuous operation when the VOC concentration at the time of measurement is zero.

### **R307-101-3. Version of Code of Federal Regulations Incorporated by Reference.**

Except as specifically identified in an individual rule, the version of the Code of Federal Regulations (CFR) incorporated throughout Title R307 is dated ~~July 1, 2024~~ September 30, 2025.

**KEY: air pollution, definitions**

**Date of Last Change: 2025**~~November 6, 2024~~

**Notice of Continuation: November 1, 2023**

**Authorizing, and Implemented or Interpreted Law: 19-2-104(1)(a)**

**NOTICE OF SUBSTANTIVE CHANGE****TYPE OF FILING:** Repeal**Rule or section number:****R357-11****Filing ID: 57684****Agency Information**

<b>1. Title catchline:</b>	Governor, Economic Opportunity	
<b>Building:</b>	World Trade Center	
<b>Street address:</b>	60 E South Temple, Suite 300	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	60 E South Temple, Suite 300	
<b>City, state and zip:</b>	Salt Lake City, UT 84111	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Greg Jeffs	801-368-1957	gjeffs@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule or section catchline:</b>	
R357-11. Utah Technology Innovation Funding Rule	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 542 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
Section 63N-3-205 was repealed by HB 542 passed in the 2025 General Session. Section 63N-3-205 authorized this rule, therefore this rule is no longer authorized by law.	
The authority for this rule was transferred to The Nucleus Institute and they intend to replace this rule.	
<b>5. Summary of the new rule or change:</b>	
Rule R357-11 is repealed in its entirety.	

**Fiscal Information**

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
None. This program was transferred to another agency, therefore there are no anticipated changes to costs or savings.
<b>B. Local governments:</b>
None. This program was transferred to another agency, therefore there are no anticipated changes to costs or savings.
<b>C. Small businesses</b> ("small business" means a business employing 1-49 persons):
None. This program was transferred to another agency, therefore there are no anticipated changes to costs or savings.
<b>D. Non-small businesses</b> ("non-small business" means a business employing 50 or more persons):
None. This program was transferred to another agency, therefore there are no anticipated changes to costs or savings.
<b>E. Persons other than small businesses, non-small businesses, state, or local government entities</b> ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an <b>agency</b> ):

None. This program was transferred to another agency, therefore there are no anticipated changes to costs or savings.

**F. Compliance costs for affected persons:**

None. This program was transferred to another agency, therefore there are no anticipated changes to costs or savings.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Governor's Office of Economic Opportunity, Jefferson Moss, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 63N-3-205

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Jefferson Moss, Executive Director	<b>Date:</b>	10/30/2025
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**R357. Governor, Economic Opportunity.**

~~**R357-11. Utah Technology Innovation Funding Rule.**~~

~~**R357-11-101. Purpose.**~~

~~(1) The purpose of the Utah Technology Innovation Funding is to leverage Utah small business success with the federal Small Business Innovation Research and Small Business Technology Transfer programs.~~

**R357-11-102. Definitions.**

- \_\_\_\_\_ (1) The following terms are defined:
- \_\_\_\_\_ (a) "Micro-grant" means a grant awarded to offset the cost of a SBIR or STTR Phase I proposal;
- \_\_\_\_\_ (b) "Nonrecourse loan" means a loan awarded to a company that has received Phase I SBIR or STTR funding and has submitted a corresponding Phase II proposal;
- \_\_\_\_\_ (c) "Rural County" means a county of the third, fourth, fifth, or sixth class;
- \_\_\_\_\_ (d) "SBIR" means the federal small business innovation research program; and
- \_\_\_\_\_ (e) "STTR" means the small business technology transfer program.

**R357-11-103. Authority.**

- \_\_\_\_\_ (1) This rule is adopted by the office under the authority of Subsection 63G-3-201(2)(d) and Section 63N-3-204

**R357-11-104. Award Amounts.**

- \_\_\_\_\_ (1) Subject to available funds, a micro-grant may be awarded under the following terms:
  - \_\_\_\_\_ (a) a company may not be awarded more than one SBIR or STTR micro-grant within a 5-year period;
  - \_\_\_\_\_ (b) a company must work with the Utah Innovation Center to prepare and submit a Phase I proposal;
  - \_\_\_\_\_ (c) a standard award may not exceed \$3,000; and
  - \_\_\_\_\_ (d) a company that is minority- or women-owned or located in a rural county may receive an additional award of \$2,000 for a total award amount of \$5,000.
- \_\_\_\_\_ (2) Subject to available funds, a nonrecourse loan may be awarded under the following terms:
  - \_\_\_\_\_ (a) a company must have received a prior SBIR or STTR Phase I award;
  - \_\_\_\_\_ (b) a company must work with the Utah Innovation Center to prepare and submit a corresponding Phase II proposal;
  - \_\_\_\_\_ (c) a company shall receive no more than two nonrecourse loans;
  - \_\_\_\_\_ (d) a standard award shall not exceed \$50,000; and
  - \_\_\_\_\_ (e) a company that is minority- or women-owned or located in a rural county may receive an additional award of \$10,000 for a total award amount of \$60,000.

**R357-11-105. Required Contract.**

- \_\_\_\_\_ (1) The office reserves the right to award funding for any proposal in full or in part, to request additional information, or to reject proposals.
- \_\_\_\_\_ (2) Upon award of a nonrecourse loan, and prior to disbursement of funds, awardee shall enter into a contract with the office governing the use of funding.
- \_\_\_\_\_ (3) Unless addressed in the terms and conditions of the contract between awardee and the office, the following provisions shall apply:
  - \_\_\_\_\_ (a) funding may not be used to provide a primary benefit to any state other than Utah; and
  - \_\_\_\_\_ (b) for all other eligibility requirements, awardees must maintain eligibility status until the collaboration is complete, scope of work requirements have been met, final disbursement of funding has been made, and reporting has been completed.

**R357-11-106. Contract Modifications.**

- \_\_\_\_\_ (1) An awardee may request a modification to the terms of a contract.
- \_\_\_\_\_ (2) The office may deny a modification request for any reason.
- \_\_\_\_\_ (3) Approved changes shall be made in writing and through an amendment modifying the terms of the contract.
- \_\_\_\_\_ (4) Awardees refusal or failure to sign the contract within 90 days of receipt of the contract constitutes a rejection of the award and a waiver of any rights and benefits.

**R357-11-107. Funding Distribution.**

- \_\_\_\_\_ (1) The office shall reimburse the awardee for no more than the total amount specified in the contract.
- \_\_\_\_\_ (2) Payment will only be made for those costs authorized and approved by the office after sufficient documentation is provided in accordance with the terms and conditions provided in the contract.
- \_\_\_\_\_ (3) Misrepresentation to the office or violations of the agreement may result in forfeiture of funding, repayment of all or a portion of the funding received, or disqualification from continued funding.
- \_\_\_\_\_ (4) The office reserves the right to audit the use of grant funding.

**KEY:** technology, innovations, commercialization, small businesses

**Date of Last Change:** October 27, 2022

**Notice of Continuation:** June 20, 2025

**Authorizing, and Implemented or Interpreted Law:** 63N-3-204

NOTICE OF SUBSTANTIVE CHANGE		
<b>TYPE OF FILING:</b> Amendment		
<b>Rule or section number:</b>	<b>R383-16</b>	<b>Filing ID:</b> 57640

**Agency Information**

Agency Information		
1. Title catchline:	Health and Human Services, Center for Medical Cannabis	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 144340	
City, state and zip:	Salt Lake City, UT 84116	
Contact persons:		
Name:	Phone:	Email:
Jeremiah Sniffin	385-443-3344	jsniffin@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

**General Information**

<b>2. Rule or section catchline:</b>	
R383-16. Targeted Marketing Requirements	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 357 (2025 General Session), HB 434 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
<p>During the 2025 General Session, HB 357 repealed the term "qualified medical provider" (QMP) from statute and incorporated that definition within the term "recommended medical provider" (RMP).</p> <p>The Department of Health and Human Services (department) determined that, for clarity, it is necessary emphasize that targeted marketing must never guarantee a customer that they will receive a medical cannabis patient card, so a subsection is added in this rule to clarify this.</p> <p>Finally, HB 434 (2025) changed the statutory location for the department's rulewriting authority, requiring an update to the reference in this rule.</p>	
<b>5. Summary of the new rule or change:</b>	
<p>The referenced citation providing rulemaking authority has been updated to align with statutory renumbering.</p> <p>Throughout this rule, "qualified" is replaced with "recommending" to reflect the statute's merging, through HB 357 (2025), of QMPs and LMPs into one type of recommending medical provider.</p> <p>Language clarifying the lack of a guarantee for a medical cannabis card to a customer has been added.</p> <p>Additionally, this filing makes nonsubstantive changes to style and formatting to align with the Rulewriting Manual for Utah and other rules under the department.</p>	

**Fiscal Information**

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
<p>There is no anticipated fiscal impact to the state budget as a result of this amendment.</p> <p>The changes in this amendment align terms with changes to those terms made during the 2025 General Session, references external definitions, clarifies existing provisions, and makes formatting changes.</p> <p>There are no additional requirements or restrictions on this entity as a result of this filing, and nothing that is anticipated to lead to any cost or savings.</p>

**B. Local governments:**

There is no anticipated fiscal impact to local governments as a result of this amendment.

The changes in this amendment align terms with changes to those terms made during the 2025 General Session, references external definitions, clarifies existing provisions, and makes formatting changes.

There are no additional requirements or restrictions on this entity as a result of this filing, and nothing that is anticipated to lead to any cost or savings.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

There is no anticipated fiscal impact to small businesses as a result of this amendment.

The changes in this amendment align terms with changes to those terms made during the 2025 General Session, references external definitions, clarifies existing provisions, and makes formatting changes.

There are no additional requirements or restrictions on this entity as a result of this filing, and nothing that is anticipated to lead to any cost or savings.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated fiscal impact to non-small businesses as a result of this amendment.

The changes in this amendment align terms with changes to those terms made during the 2025 General Session, references external definitions, clarifies existing provisions, and makes formatting changes.

There are no additional requirements or restrictions on this entity as a result of this filing, and nothing that is anticipated to lead to any cost or savings.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There is no anticipated fiscal impact to other persons as a result of this amendment.

The changes in this amendment align terms with changes to those terms made during the 2025 General Session, references external definitions, clarifies existing provisions, and makes formatting changes.

There are no additional requirements or restrictions on this entity as a result of this filing, and nothing that is anticipated to lead to any cost or savings.

**F. Compliance costs for affected persons** (How much will it cost an impacted entity to adhere to this rule or its changes?):

There is no anticipated compliance cost as a result of this amendment.

The changes in this amendment align terms with changes to those terms made during the 2025 General Session, references external definitions, clarifies existing provisions, and makes formatting changes.

There are no additional requirements or restrictions on this entity as a result of this filing.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)**Regulatory Impact Summary Table**

<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0

## NOTICES OF PROPOSED RULES

Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**
**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Subsection 26B-1-202(2)(a)

**Public Notice Information**
**9. The public may submit written or oral comments to the agency identified in box 1.**
**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R383. Health and Human Services, Center for Medical Cannabis.**
**R383-16. Targeted Marketing Requirements.**
**R383-16-1. Authority and Purpose.**

- (1) Subsection 26B-1-202([+]~~2~~)(a) authorizes this rule.
- (2) This rule establishes targeted marketing standards for ~~[qualified]~~ a recommending medical ~~[providers.]~~ provider (RMP).

**R383-16-2. Definitions.**

Terms used in this rule are defined in Section 26B-4-201 and Rule R383-1.

**R383-16-3. Targeted Marketing Standards for [Qualified]Recommending Medical Providers and Affiliated Medical Offices.**

(1) ~~[A qualified medical provider]~~ An RMP may engage in targeted marketing or affiliate with medical offices that engage in targeted marketing, as defined in Subsection[s] 26B-4-201(49) and described in Subsection ~~[26B-4-204.]~~ 58-1-513(2)(c), for advertising medical cannabis recommendation services.

(2) Targeted marketing that ~~[makes a statement relating to]~~ states the side effects, ~~[consequences]~~ outcomes, contraindications, or effectiveness of medical cannabis shall accurately reflect the information as determined by the department.

(3) Targeted marketing may not:

(a) be false or misleading or otherwise lack a fair balance, including:

(i) guaranteeing that a potential patient will receive a medical cannabis recommendation;

(ii) claiming that cannabis cures any medical condition;

(iii) containing favorable information or an opinion about cannabis previously regarded as valid but more recently invalidated by contrary and more credible information;

~~(iii)~~ (iv) containing favorable information or a conclusion from a study that is inadequate in design, scope, or conduct to furnish significant support for the information or conclusion;



- (~~(iv)~~) containing any health or other claim that is not substantiated by evidence or substantial clinical data;
- (~~(v)~~) representing or suggesting that medical cannabis use is more effective or more useful in a broader range of conditions or safer than other drugs or treatments unless the claim is accompanied by evidence or clinical data;
- (vi) using data favorable to a medical cannabis product derived from patients treated with a different product or dosages different from those legal in Utah;
- (vii) using a quote or paraphrase out of context or without citing conflicting information from the same source to convey a false or misleading idea; or
- (~~(viii)~~) using a study on individuals without a qualifying medical condition without disclosing that the subjects were not suffering from a qualifying medical condition;
- (b) promote excessive consumption;
- (c) have any term, statement, design representation, picture, or illustration that is associated with the recreational use of cannabis;
- (d) appeal to a child or minor;
- (e) use terms related to recreational cannabis, including: "420," "bake," "blaze," "blunt," "bong," "bud," "budtender," "combust," "cookies," "dab," "dank," "doobie," "euphoria," "frost," "ganja," "grass," "hash," "haze," "high," "joint," "kush," "Mary Jane," "pot," "rec," "reefer," "smoke," "stoned," "toke," or "weed";
- (f) use slang or phrasing associated with the recreational use of cannabis;
- (g) use an image bearing resemblance to a cartoon character or fictional character whose target audience is children or minors;
- (h) use an image of a celebrity or other person whose target audience is children or minors;
- (i) encourage, promote, or otherwise create an impression that the recreational use of cannabis is legal or acceptable or that the recreational use of cannabis has potential health or therapeutic benefits;
- (j) contain content that is obscene or indecent;
- (k) include information and images related to tobacco paraphernalia as defined in Section 76-~~(4)~~9-101; or
- (l) violate any other laws.
- (4) The ~~Department of Health and Human Services~~ department may approve terms or images otherwise prohibited if the targeted marketing does not promote the recreational use of cannabis.

**KEY:** medical cannabis, ~~[qualified]~~ recommending medical provider, RMP, medical marijuana

**Date of Last Change:** ~~December 26, 2024~~ 2025

**Authorizing, and Implemented or Interpreted Law:** 26B-1-202(~~1~~)2(a); 63G-3-201; 63G-3-301

#### NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** New

**Rule or section number:**

**R384-900**

**Filing ID: 57658**

#### Agency Information

<b>1. Title catchline:</b>	Health and Human Services, Population Health, Health Promotion and Prevention	
<b>Building:</b>	Cannon Health Building	
<b>Street address:</b>	288 N 1460 W	
<b>City, state:</b>	Salt Lake City, UT 84116	
<b>Mailing address:</b>	PO Box 142104	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-2104	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Tricia Bishop	385-261-3726	triciaabishop@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

#### General Information

<b>2. Rule or section catchline:</b>	R384-900. Special Measures for the Operation of Syringe Exchange Programs	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.	
<b>If yes, any bill number and session:</b>	HB 199 (2025 General Session), SB 41 (2023 General Session)	

**4. Purpose of the new rule or reason for the change:**

Changes in this filing update this rule to reflect the passage of HB 199 from the 2025 General Session, which added rulemaking requirements to Section 26B-7-117.

Also, based on feedback from stakeholders, this filing specifies an exchange rate for the program.

Additional changes in the filing are necessary due to the consolidation of the Department of Health and Human Services (department) and the renumbering of the department's statute through SB 41 from the 2023 General Session.

This rule previously existed under Title R386, Environmental Epidemiology, and is being moved to Title R384, Health Promotion and Prevention, to more accurately reflect the program's placement.

**5. Summary of the new rule or change:**

This rule filing specifies requirements for data collection and syringe exchange program evaluation.

It also specifies an exchange rate for the syringe exchange program, among other distribution updates.

It removes incorporations by reference that are outdated and unnecessary.

It changes the department name to Health and Human Services and updates the referenced citations of Utah Code.

It also updates the rule's language for clarity and makes style and formatting changes for consistency with the Rulewriting Manual for Utah and to align it with other rules under the department.

Additionally, this filing adds and updates incorporations by reference and defines the exchange rate for the program.

(EDITOR'S NOTE: The proposed repeal of Rule R386-900, ID 57659, is in this issue, December 1, 2025, of the Utah State Bulletin.)

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

There is no anticipated cost or savings to the state budget as a result of this proposed rule change, as this filing specifies requirements for data collection, syringe exchange program evaluation, and a syringe exchange rate for the syringe exchange program, among other distribution updates.

These newly specified requirements and distribution updates are not anticipated to generate a cost or savings because as of 09/01/2025, the use of state funds to operate a syringe exchange program is prohibited, as introduced in HB 312 of the 2025 General Session.

The filing further updates names and references, makes style and formatting changes consistent with the Rulewriting Manual for Utah, and updates incorporations by reference.

These changes have no fiscal impact on this program in relation to the state budget.

**B. Local governments:**

It is anticipated that four local governments that operate a syringe exchange program may incur an inestimable cost or savings as a result of this filing.

While a syringe exchange program was already required to report necessary aggregate data, this rule now specifies that the data should be collected and how it should be reported.

As the reportable data elements remain the same, syringe exchange programs may already be fulfilling the expanded requirements in this rule and would not see any fiscal impact.

The department is therefore unable to determine how many local governments would need to update processes and to what extent, resulting in an inestimable fiscal impact.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

It is anticipated that small businesses that operate a syringe exchange program may incur an inestimable cost or savings as a result of this filing.

While a syringe exchange program was already required to report necessary aggregate data, this rule now specifies that the data should be collected and how it should be reported.

As the reportable data elements remain the same, syringe exchange programs may already be fulfilling the expanded requirements in this rule and would not see any fiscal impact.

The department is therefore unable to determine how many small businesses would need to update processes and to what extent, resulting in an inestimable fiscal impact.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

It is anticipated that non-small businesses that operate a syringe exchange program may incur an inestimable cost or savings as a result of this filing.

While a syringe exchange program was already required to report necessary aggregate data, this rule now specifies that the data should be collected and how it should be reported.

As the reportable data elements remain the same, syringe exchange programs may already be fulfilling the expanded requirements in this rule and would not see any fiscal impact.

The department is therefore unable to determine how many non-small businesses would need to update processes and to what extent, resulting in an inestimable fiscal impact.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

It is anticipated that ten nonprofit organizations that operate a syringe exchange program may incur an inestimable cost or savings as a result of this filing.

While a syringe exchange program was already required to report necessary aggregate data, this rule now specifies that the data should be collected and how it should be reported.

As the reportable data elements remain the same, syringe exchange programs may already be fulfilling the expanded requirements in this rule and would not see any fiscal impact.

The department is therefore unable to determine how many nonprofit organizations would need to update processes and to what extent, resulting in an inestimable fiscal impact.

**F. Compliance costs for affected persons:**

There are no estimable anticipated compliance costs for affected persons, as it is unknown how many of the 14 syringe exchange programs in the state will need to update processes as a result of this filing.

While each syringe exchange program was already required to report necessary aggregate data, this rule now specifies that the data should be collected and how it should be reported.

As the reportable data elements remain the same, syringe exchange programs may already be fulfilling the expanded requirements in this rule and would not see any fiscal impact.

The department is therefore unable to determine which entities would need to update processes and to what extent, resulting in an inestimable fiscal impact.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>H. Department head comments on fiscal impact and approval of regulatory impact analysis:</b>					
The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.					

## Citation Information

<b>7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:</b>		
Section 26B-7-117		

## Public Notice Information

<b>9. The public may submit written or oral comments to the agency identified in box 1.</b>	
<b>A. Comments will be accepted until:</b>	12/31/2025

<b>10. This rule change MAY become effective on:</b>	01/07/2026
NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.	

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/03/2025
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**R384. Health and Human Services, Population Health, Health Promotion and Prevention.****R384-900. Special Measures for the Operation of Syringe Exchange Programs.****R384-900-1. Authority and Purpose.**

- (1) Section 26B-7-117 authorizes this rule.
- (2) This rule establishes the operating and reporting requirements required of an entity operating a syringe exchange program pursuant to Section 26B-7-117.

**R384-900-2. Definitions.**

- (1) "Department" means the Department of Health and Human Services.
- (2) "HBV" means hepatitis B virus.
- (3) "HCV" means hepatitis C virus.
- (4) "HIV" means human immunodeficiency virus.
- (5) "Homeless shelter" means the same as defined in Section 35A-15-501.
- (6)(a) "One-for-one plus exchange model" means the syringe exchange model in which a participant receives a set of syringes in an amount of up to nine more than the participant's return amount, with thresholds increasing in increments of ten.

- (b) For example, a return of:
  - (i) one to ten used syringes receives up to ten sterile syringes;
  - (ii) 11 to 20 used syringes receives up to 20 sterile syringes; and
  - (iii) 21 to 30 used syringes receives up to 30 sterile syringes.
- (7) "Operating entity" means a government or nongovernment entity authorized by Section 26B-7-117 to operate a syringe exchange program.
- (8) "Opiate antagonist" means the same as defined in Section 26B-4-501.
- (9) "Participant" means an individual who receives services from a syringe exchange program.
- (10) "Substance use disorder treatment program" means the same as defined in Section 26B-2-101.
- (11) "Syringe exchange program" means a program that:
  - (a) provides access to sterile syringes in exchange for used syringes;
  - (b) collects and properly disposes of used syringes;
  - (c) provides information, referrals, and other services as identified by population and community needs to reduce the harms associated with drug use; and
  - (d) may provide other clean and new prevention materials, including cotton filters, cookers, tourniquets, alcohol swabs, and condoms.
- (12) "Treatment" means services received by a participant from a substance use disorder treatment program.

### **R384-900-3. Enrollment Requirements.**

- (1)(a) An operating entity intending to begin a syringe exchange program in a local community shall meet with local stakeholders, which may include any:
  - (i) public health, mental health, or substance use disorder treatment entity;
  - (ii) local governing body;
  - (iii) law enforcement agency with jurisdiction over the area; or
  - (iv) community council.
- (b) An operating entity shall ensure that any meeting taking place in accordance with Subsection (1)(a):
  - (i) assesses community readiness, norms, needs, and parameters for implementing a syringe exchange program in that area;
  - (ii) creates awareness of the operating entity's plans and community partnerships; and
  - (iii) provides education on the purposes and goals of a syringe exchange program and syringe exchange protocols.
- (2) At least 15 days before the start of a syringe exchange program in a new area, the operating entity shall provide the department with the following through the Violence and Injury Prevention Program's Agency Enrollment form:
  - (a) written notice of intent to conduct syringe exchange activities;
  - (b) a signed attestation to comply with each applicable statute and rule, to be renewed annually;
  - (c) a summary of any meeting held according to Subsection (1), including a list of participants, a summary of the discussion, any outcome, and any plan for implementation;
  - (d) documentation for each service area where syringe exchange will be conducted upon enrollment;
  - (e) a safety protocol for the prevention of needle stick and sharps injury; and
  - (f)(i) a sharps disposal plan for each county where the operating entity will be offering services.
  - (ii) Sharps disposal is the financial responsibility of the operating entity.

### **R384-900-4. Operating Requirements.**

- (1) An operating entity shall facilitate the exchange of a participant's used syringes by providing a disposable, medical grade sharps container for the disposal of used syringes.
- (2) An operating entity shall exchange one or more new syringes in sealed sterile packages and may provide other clean and new prevention materials to the individual free of charge.
- (3) An operating entity shall adhere to the one-for-one plus exchange model.
- (4) As available, the department may provide syringes, prevention materials, education materials, and other resources to an entity operating a syringe exchange program.
- (5) At least quarterly, an operating entity shall provide each participant of the syringe exchange program with verbal and written instructions on:
  - (a) methods for preventing the transmission of blood borne pathogens, including HBV, HCV, and HIV;
  - (b) information and referral for HCV and HIV testing;
  - (c) information and referral to services for the treatment of a substance use disorder; and
  - (d) how and where to obtain an opiate antagonist.
- (6) An operating entity shall adhere to requirements in Subsections 26B-7-117(5) and (6).
- (7) If an operating entity discontinues syringe exchange activities, the operating entity must submit to the department written notice through the Violence and Injury Prevention Program's Agency Unenrollment form within 15 days of ending activities.

### **R384-900-5. Data Collection and Reporting Requirements.**

- (1) Each operating entity shall collect the following aggregate data elements:
  - (a) the number of individuals who exchange syringes;
  - (b) a self-reported or approximate number of used syringes exchanged for new syringes;
  - (c) the number of new syringes provided in exchange for used syringes;

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- (d) the number of participants who receive services for the treatment of a substance use disorder within 12 months of exchanging syringes, assessed at least quarterly for each participant;
- (e) a self-reported or approximate number of participants successfully connected to treatment;
- (f) information on educational materials distributed, as required by the Syringe Exchange Quarterly Report Form;
- (g) the number of referrals provided; and
- (h) the number of opiate antagonists distributed to participants.
- (2)(a) Each entity shall report the aggregate data elements in Subsection (1) to the department quarterly through the Violence and Injury Prevention Program's Quarterly Log form.
- (b) The report shall include:
- (i) a brief description of the information the program provided to participants about recovery and treatment resources; and
- (ii) a brief description of the services and supplies provided to participants.

### **R384-900-6. Confidentiality of Reports.**

- (1) The department may collect and maintain data on syringe exchange programs and syringe exchange program participants, as provided in Sections 26B-7-117 and 26B-8-402.
- (2) Any identifiable information collected pursuant to this rule may not be released or made public, except as provided in Sections 26B-8-406 and 26B-8-407.

### **R384-900-7. Compliance and Penalty.**

- (1) The Violence and Injury Prevention Program shall evaluate each syringe exchange program through annual monitoring and site visits as necessary, pursuant to Section 26B-1-226, to ensure compliance with each applicable statute and rule.
- (2) A person or operating entity who violates this rule or Section 26B-7-117 may be subject to a penalty, as provided in Section 26B-1-224.
- (3) The department may revoke the enrollment of a syringe exchange program that does not comply with this rule.

**KEY: syringe exchange programs, needles, syringes**

**Date of Last Change: 2025**

**Authorizing, and Implemented or Interpreted Law: 26B-7-117**

## NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Repeal

**Rule or section number:**

**R386-900**

**Filing ID: 57659**

### Agency Information

<b>1. Title catchline:</b>	Health and Human Services, Population Health, Environmental Epidemiology	
<b>Building:</b>	Cannon Health Building	
<b>Street address:</b>	288 N 1460 W	
<b>City, state:</b>	Salt Lake City, UT 84116	
<b>Mailing address:</b>	PO Box 142104	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-2104	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Tricia Bishop	385-261-3726	triciaabishop@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

### General Information

<b>2. Rule or section catchline:</b>
R386-900. Special Measures for the Operation of Syringe Exchange Programs
<b>4. Purpose of the new rule or reason for the change:</b>
This rule exists under Title R386, Environmental Epidemiology, and is being moved to Title R384, Health Promotion and Prevention, to more accurately reflect the program's placement.

**5. Summary of the new rule or change:**

This rule is being repealed in its entirety and moved to Rule R384-900.

(EDITOR'S NOTE: The proposed new Rule R384-900, ID 57658, is in this issue, December 1, 2025, of the Utah State Bulletin.)

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

There is no anticipated cost or savings to the state budget, as the rule will continue to exist under Rule R384-900.

**B. Local governments:**

There is no anticipated cost or savings to local governments, as the rule will continue to exist under Rule R384-900.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

There is no anticipated cost or savings to small businesses, as the rule will continue to exist under Rule R384-900.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated cost or savings to non-small businesses, as the rule will continue to exist under Rule R384-900.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There is no anticipated cost or savings to other persons, as the rule will continue to exist under Rule R384-900.

**F. Compliance costs for affected persons:**

There are no anticipated compliance costs for affected persons, as the rule will continue to exist under Rule R384-900.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

<b>Regulatory Impact Summary Table</b>					
<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-7-117

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

**Agency head or designee and title:**

Tracy S. Gruber, Executive Director

**Date:**

10/21/2025

**R386. Health, Disease Control and Prevention, Epidemiology.**

**[R386-900. Special Measures for the Operation of Syringe Exchange Programs.**

**~~R386-900-1. Authority.~~**

~~This rule is authorized under Utah Code 26-7-8.~~

**~~R386-900-2. Purpose.~~**

~~This rule establishes operating and reporting requirements required of an entity operating a syringe exchange program pursuant to 26-7-8.~~

**~~R386-900-3. Definitions.~~**

~~The following definitions apply to this rule:~~

~~(1) "Department" means the Utah Department of Health Bureau of Epidemiology Prevention, Treatment and Care Program.~~

~~(2) "Syringe exchange program" is a program that provides access to sterile syringes other clean and new prevention materials, including, but not limited to, cotton filters, cookers, tourniquets, alcohol swabs, and/or condoms and collects, properly disposes of, used syringes, and provides information and referrals and other services as identified by population and community needs to reduce the harms associated with injection drug use; consistent with;~~

~~(a) the "Department of Health and Human Services Implementation Guidance to Support Certain Components of Syringe Services Programs, 2016" HHS 3/29/2016, and~~

~~(b) the CDC Syringe Services Programs standards and definitions.~~

~~(3) "Operating entity" is defined in 26-7-8.~~

~~(4) "HIV" means human immunodeficiency virus.~~

~~(5) "HCV" means hepatitis C virus.~~

~~(6) "HBV" means hepatitis B virus.~~

~~(7) "Opiate antagonist" is defined by Chapter 55, Opiate Overdose Response Act.~~

**~~R386-900-4. Operating Requirements.~~**

~~(1) An operating entity intending to begin syringe exchange programming within a local community shall meet with local stakeholders, which should include: public health, mental health, substance abuse, law enforcement, local governing body, community councils, etc. This meeting should provide education on the purpose and goals of a syringe exchange program, syringe exchange protocols, awareness of operating entity's plans and community partnerships and will assess community readiness, norms, needs and parameters for implementing syringe exchange in that area. The operating entity shall provide UDOH meeting summary(s) which should include: participants, what was discussed, outcomes and plans for implementation. This documentation must be submitted for each major area where exchange will be conducted upon enrollment and submitted 30 days prior to the initiation of syringe exchange program operation in a new area.~~

~~(2) An operating entity shall utilize the department's enrollment form to provide written notice of intent to conduct syringe exchange activities to the department 15 days prior to conducting syringe exchange activities. If an operating entity discontinues syringe exchange activities, written notice shall also be submitted utilizing the department's report form within 15 days of termination of activities to the department.~~



- ~~\_\_\_\_\_ (3) An operating entity must submit a safety protocol to the department for the prevention of needle stick and sharps injury before initiating syringe exchange activities.~~
- ~~\_\_\_\_\_ (4) An operating entity shall submit a sharps disposal plan to the department for each county in which services will be offered. Sharps disposal is the financial responsibility of the entity operating and responsible for the syringe exchange program.~~
- ~~\_\_\_\_\_ (5) An operating entity shall agree to and sign the department's "Utah Syringe Exchange Provider Agreement" upon enrollment, which indicates they have read and understood the requirements outlined in this rule as well as the "Utah Syringe Exchange Program Handbook."~~
- ~~\_\_\_\_\_ (6) An operating entity shall facilitate the exchange of an individual's used syringes by providing a disposable, medical grade sharps container for the disposal of used syringes.~~
- ~~\_\_\_\_\_ (7) The operating entity shall exchange one or more new syringes in sealed sterile packages and may provide other clean and new prevention materials to the individual free of charge.~~
- ~~\_\_\_\_\_ (8) As available, the department will provide syringes, prevention materials, education materials, and other resources to entities operating a syringe exchange program.~~
- ~~\_\_\_\_\_ (9) An operating entity must provide and make available to all clients of the syringe exchange program verbal and written instruction on:~~
  - ~~\_\_\_\_\_ (a) Methods for preventing the transmission of blood borne pathogens, including HIV, HBV and HCV;~~
  - ~~\_\_\_\_\_ (b) Information and referral to drug and alcohol treatment;~~
  - ~~\_\_\_\_\_ (c) Information and referral for HIV and HCV testing; and~~
  - ~~\_\_\_\_\_ (d) How and where to obtain an opiate antagonist.~~
- ~~\_\_\_\_\_ (10) The Department incorporates by reference the "Guide to Developing and Managing Syringe Access Programs", Harm Reduction Coalition, 2010~~
- ~~\_\_\_\_\_ (11) The Department incorporates by reference the "Syringe Services Program (SSP) Development and Implementation Guidelines for State and Local Health Departments" National Alliance of State & Territorial AIDS Directors, 2012~~

#### **~~R386-900-5. Reporting Requirements.~~**

- ~~\_\_\_\_\_ (1) All entities operating a syringe exchange program shall report aggregate data elements in accordance to 26-7-8 to the department on a quarterly basis, utilizing the format provided by the department which is to include:~~
  - ~~\_\_\_\_\_ (a) Number of individuals who have exchanged syringes;~~
  - ~~\_\_\_\_\_ (b) A self-reported or approximated number of used syringes exchanged for new syringes;~~
  - ~~\_\_\_\_\_ (c) Number of new syringes provided in exchange for used syringes;~~
  - ~~\_\_\_\_\_ (d) Educational materials distributed; and~~
  - ~~\_\_\_\_\_ (e) Number of referrals provided.~~

#### **~~R386-900-6. Confidentiality of Reports.~~**

- ~~\_\_\_\_\_ (1) The department may collect and maintain data on syringe exchange programs and syringe exchange program clients as provided by Section 26-3-2. All information collected pursuant to this rule shall not be released or made public, except as provided by Section 26-3-7 and Section 26-3-8.~~

#### **~~R386-900-7. Penalty.~~**

- ~~\_\_\_\_\_ (1) Any person who violates any provision of R386-900 may be assessed a penalty as provided in section 26-23-6.~~

#### **~~R386-900-8. Official References.~~**

- ~~\_\_\_\_\_ (1) Centers for Disease Control and Prevention (CDC), 2016, Program Guidance for Implementing Certain Components of Syringe Services Programs.~~
- ~~\_\_\_\_\_ (2) Federal Register, Health and Human Services Department, 2011, Determination That a Demonstration Needle Exchange Program Would be Effective in Reducing Drug Abuse and the Risk of Acquired Immune Deficiency Syndrome Infection Among Intravenous Drug Users.~~
- ~~\_\_\_\_\_ (3) Harm Reduction Coalition, 2006, Syringe Exchange Programs and Hepatitis C.~~
- ~~\_\_\_\_\_ (4) Harm Reduction Coalition, 2006, Syringe Exchange Programs: Reducing the Risks of Needle stick Injuries.~~
- ~~\_\_\_\_\_ (5) Substance Abuse and Mental Health Services Administration (SAMHSA), Summary of Syringe Exchange Program Studies.~~
- ~~\_\_\_\_\_ (6) United States Department of Health and Human Services (HHS), 2016, Implementation Guidance to Support Certain Components of Syringe Services Programs.~~
- ~~\_\_\_\_\_ (7) World Health Organization (WHO), 2004, Effectiveness of sterile needle and syringe programming in reducing HIV/AIDS among injecting drug users.~~

**KEY: syringe exchange programs, needles, syringes**

**Date of Last Change: January 31, 2020**

**Notice of Continuation: November 5, 2021**

**Authorizing, and Implemented or Interpreted Law: 26-7-8]**

## NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: New

Rule or section number:

R398-40

Filing ID: 57641

## Agency Information

1. Title catchline:		Health and Human Services, Family Health, Children with Special Health Care Needs	
Building:		Multi-Agency State Office Building	
Street address:		195 N 1950 W	
City, state:		Salt Lake City, UT	
Mailing address:		PO Box 144610	
City, state and zip:		Salt Lake City, UT 84114-4610	
Contact persons:			
Name:		Phone:	Email:
Amy Nance		385-377-2801	aenance@utah.gov
Alexis Weight		801-273-2956	abweight@utah.gov
Please address questions regarding information on this notice to the persons listed above.			

## General Information

<b>2. Rule or section catchline:</b>	
R398-40. Diapering Supplies Fund	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 547 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
In the 2025 General Session of the Legislature, HB 547 enacted Section 26B-7-125, which requires that the Department of Health and Human Services (department) make rules governing the application form, process, and criteria to be used in awarding grants under that section.	
<b>5. Summary of the new rule or change:</b>	
This rule governs the application form, process, and criteria to be used in awarding grants under Section 26B-7-125.	

## Fiscal Information

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
This rule governs the grant application process for grants issued through the Diapering Supplies Fund and will require the department to issue grants to one or more diaper distribution centers to provide diapering supplies at no cost to parents, guardians, or family members of a child or an individual with a disability who need diapering supplies.
It is anticipated that the initial implementation of this rule will require an estimated 120 hours of work from an office director at \$89/hour (wages and fringe) and 40 hours of work from a financial analyst at \$62/hour (wages and fringe) to establish grant criteria, draft a scope of work and vet that scope of work through department and legal approvals, issue a request for grant applications, review and score grant applications, and negotiate and execute contracts. The estimate for this one-time cost comes to a total of about \$13,200.
Additional estimated costs and benefits for the department are accounted for in HB 547's (2025) fiscal note, available at <a href="https://pf.utleg.gov/public-web/sessions/2025GS/fiscal-notes/HB0547S03.fn.pdf">https://pf.utleg.gov/public-web/sessions/2025GS/fiscal-notes/HB0547S03.fn.pdf</a> . Because of this, these costs and benefits are not captured in the regulatory impact summary table for this rule filing, but for convenience, they are summarized as follows:
Once grants have been issued, it is anticipated that there will also be a need for ongoing grant distribution support of an estimated 24 hours of work annually from a financial analyst at \$62/hour (wages and fringe) to monitor contracts, budgets, and process and reconcile invoices for an ongoing total of \$1,500. It is anticipated that this ongoing cost will be absorbed by the department.

The department is also required by Section 26B-7-125 to provide a written report regarding grants awarded from the fund including the total amount of grants awarded and a summary of reports made to the department by grantees by October 1 of each year. This will require 8 hours of an office director at \$89/hour (wages and fringe) to review and compile information from grantee reports into a final report, vet it through department and legal approvals, and submit to the legislature, for an ongoing total of \$700. It is anticipated that this cost will be absorbed by the department.

In order for the Diapering Supplies Fund to remain open, it must consistently collect at least \$30,000 in revenue each state fiscal year for three consecutive years. Based on that requirement and comparable restricted accounts, it is estimated that the department will have an estimated benefit \$30,000 in donation revenue to be disbursed in grants annually.

**B. Local governments:**

There is no anticipated cost or savings for local governments as a result of this rule, as this rule does not apply to them.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

There is no anticipated cost or savings for small businesses as a result of this rule, as this rule does not apply to them.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated cost or savings for non-small businesses as a result of this rule, as this rule does not apply to them.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This rule governs the grant application process for grants issued through the Diapering Supplies Fund and will require the department to issue grants to one or more diaper distribution centers to provide diapering supplies at no cost to parents, guardians, or family members of a child or an individual with a disability who need diapering supplies.

This rule is anticipated to result in an inestimable benefit directly for grantees that distribute diapering supplies and indirectly for parents, guardians, and families that receive diapering supplies as a result of the grant. The amount is inestimable because this is a new program and there is no way to know how many applicants will apply for the grant, how many supplies each grantee will distribute, and how many families will ultimately receive distributions.

There are no anticipated costs to other persons as a result of this rule filing.

**F. Compliance costs for affected persons:**

This rule is anticipated to result in a one-time implementation cost to the department of about \$10,700 for one office director who is anticipated to work 120 hours at a rate of \$89/hour.

This rule is anticipated to additionally result in a one-time implementation cost to the department of about \$2,500 for one fiscal analyst who is anticipated to work 40 hours at a rate of \$62/hour.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$13,200	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$13,200</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0

NOTICES OF PROPOSED RULES

Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>(\$13,200)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-7-125		
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**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R398. Health and Human Services, Family Health, Children with Special Health Care Needs.**

**R398-40. Diapering Supplies Fund.**

**R398-40-1. Authority and Purpose.**

(1) Section 26B-7-125 authorizes this rule.

(2) This rule governs the application form, process, and criteria to be used in awarding grants under Section 26B-7-125.

**R398-40-2. Definitions.**

Terms in this rule are defined in Section 26B-7-125. Additionally:

(1) "Department" means the Department of Health and Human Services.

(2) "Fund" means the Diapering Supplies Fund, as created in Section 59-10-1322.

(3) "Grant" means the diapering supplies grant program.

(4) "Grantee" means a nonprofit entity, including a diaper distribution center, that provides free diapering supplies and is awarded funding from the grant.

(5) "Office" means the Office of Children with Special Health Care Needs, within the Department of Health and Human Services.

**R398-40-3. Application Form.**

(1) The department shall solicit grant applications by issuing a request for grant applications.

(2) The grant application shall:

(a) open annually after the State Tax Commission transfers any money deposited into the fund to the department for distribution, in accordance with Subsection 59-10-1322(5); and

(b) remain open until the money is distributed.

(3) Any applicant responding to the request for grant applications shall submit a grant application as directed in the office-issued grant application guidance on the department's grant listings website.

**R398-40-4. Process.**

(1) The office director shall review each application and determine whether to award grant funding.

(2) The office shall notify each applicant of approval or denial of funding by sending an email to the grant contact listed in the application.

(3) Any applicant who is denied funding may submit an appeal to the director of the Division of Family Health for further consideration.

**R398-40-5. Criteria.**

An entity must meet the criteria described in Subsection 26B-7-125(5) to be eligible to be a grantee.

**KEY: baby, cream, diaper, donation, gift, toddler, wipes**

**Date of Last Change: 2025**

**Authorizing, and Implemented or Interpreted Law: 26B-7-125**

**NOTICE OF SUBSTANTIVE CHANGE**

**TYPE OF FILING:** New

**Rule or section number:**

**R414-5**

**Filing ID: 57653**

**Agency Information**

<b>1. Title catchline:</b>	Health and Human Services, Integrated Healthcare	
<b>Building:</b>	Cannon Health Building	
<b>Street address:</b>	288 N 1460 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	PO Box 143325	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-3325	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule or section catchline:</b>	
R414-5. Doula Services	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	SB 284 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
SB 284, passed in the 2025 General Session, enacted Section 26B-3-229, which requires the Department of Health and Human Services (department) to establish, through rule, training and registration requirements for a doula providing doula services to Medicaid members.	
Therefore, this new rule is necessary.	
<b>5. Summary of the new rule or change:</b>	
This new rule provides measures for doula services to be provided to Medicaid members during a pregnancy, childbirth, and postpartum period that includes non-medical advice, information, emotional support, and physical comfort.	

**Fiscal Information**

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
There is no anticipated fiscal impact to the state budget as a result of this rule filing because this rule implements programming for doula services established through SB 284 (2025).

Any anticipated costs or savings to the state, including receipt of federal funding, are already captured in the SB 284 (2025) fiscal note at <https://le.utah.gov/~2025/bills/static/SB0284.html> and are not reflected in the regulatory impact summary table.

**B. Local governments:**

There is no anticipated impact on local governments as they neither fund nor provide services under the Medicaid program.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

There is no anticipated impact on small businesses as the only identified doulas projected to provide doula services for Medicaid members are not considered small businesses.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated impact on non-small businesses as the only identified doulas projected to provide doula services for Medicaid members are not considered non-small businesses.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There is no anticipated fiscal impact to the state budget as a result of this rule filing because this rule implements programming for doula services established through SB 284 (2025).

Any anticipated costs to other persons are already captured in the SB 284 (2025) fiscal note at: <https://le.utah.gov/~2025/bills/static/SB0284.html>.

The fiscal note for SB 284 (2025) provides an estimated six doulas who are projected to provide doula services for Medicaid members. The anticipated cost to these doulas for a five-year license to serve Medicaid members will be a total of \$750, with six doulas paying \$125 each.

It is anticipated that this cost may be offset by an inestimable amount of potential revenue that doulas may acquire while providing doula services.

As this information was captured in the SB 284 (2025) fiscal note, it is not reflected in the regulatory impact summary table.

**F. Compliance costs for affected persons:**

There are no anticipated compliance costs as a result of this filing because this rule implements programming for doula services established through SB 284 (2025 General Session).

Any anticipated compliance costs are already captured in the bill's fiscal note at: <https://le.utah.gov/~2025/bills/static/SB0284.html>.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0

Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-1-213	Section 26B-3-108	Section 26B-3-229
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**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R414. Health and Human Services, Integrated Healthcare.****R414-5. Doula Services.****R414-5-1. Authority and Purpose.**

(1) Sections 26B-1-213, 26B-3-108, and 26B-3-229 authorize this rule.

(2) This rule provides measures for doula services to be provided to Medicaid members during a pregnancy, childbirth, and postpartum period that includes non-medical advice, information, emotional support, and physical comfort.

**R414-5-2. Definitions.**

(1) "Department" means the Department of Health and Human Services.

(2) "Division" means the Division of Integrated Healthcare within the department.

**R414-5-3. Member Eligibility Requirements.**

To be eligible for doula services, an individual must be a pregnant or postpartum-eligible Medicaid member.

**R414-5-4. Program Access Requirements.**

(1) An eligible Medicaid member may only obtain doula services from a doula enrolled with Medicaid.

(2) Each doula providing services to an eligible Medicaid member shall be enrolled with the division through the certification or experience pathway.

(a) The certification pathway requires that a doula:

(i) complete a division-approved doula training program;

(ii) has attended at least three births within the last five years;

(iii) be cardiopulmonary resuscitation (CPR) training certified; and

(iv) sign the doula provider attestation.

(b) The experience pathway requires that a doula:

(i) attest to having knowledge and competency in prenatal, labor and delivery, postpartum, lactation, newborn support, guidance, and education;

(ii) submit four letters of recommendation, of which two letters are from a clinical member of a birth team for a previously attended birth, such as a nurse, nurse practitioner, midwife, or obstetrician;

(iii) has attended at least ten births within the past two years and, of those births, acted as a doula for five;

## NOTICES OF PROPOSED RULES

(iv) be CPR training certified; and

(v) sign the doula provider attestation.

### **R414-5-5. Service Coverage.**

(1) Medicaid provides doula services to an eligible Medicaid member during the member's pregnancy, childbirth, and postpartum periods. These services include:

(a) non-medical advice;

(b) information;

(c) emotional support; and

(d) physical comfort.

(2) Medicaid does not cover travel time and mileage to obtain doula services.

### **KEY: Medicaid**

**Date of Last Change: 2025**

**Authorizing, and Implemented or Interpreted Law: 26B-1-213; 26B-3-108; 26B-3-229**

## NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R414-36**

**Filing ID: 57652**

### Agency Information

<b>1. Title catchline:</b>	Health and Human Services, Integrated Healthcare	
<b>Building:</b>	Cannon Health Building	
<b>Street address:</b>	288 N 1460 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	PO Box 143325	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-3325	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

### General Information

<b>2. Rule or section catchline:</b>	
R414-36. Rehabilitative Mental Health Services	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	SB 65 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
SB 65, passed in the 2025 General Session, added and amended definitions in Section 26B-2-101 and added rulemaking requirements for the Office of Licensing (office) under Section 26B-2-117 to establish and enforce rules to regulate residential treatment program and qualified recovery residence practices related to clients use of medication assisted treatment at the recommendation of a licensed prescriber or provider.	
SB 65 (2025) makes it necessary for the Division of Integrated Healthcare (division) to update language in this rule to align wording related to its practices with the new requirements for the office and make specifications related to payment for treatment of Medicaid members.	
<b>5. Summary of the new rule or change:</b>	
This amendment implements provisions of SB 65 (2025) that allow Medicaid members to receive medication assisted treatment and refers to sanctions for licensed residential programs that fail to do so.	



This amendment also updates the title catchline and rule catchline and adds a section for the authority and purpose and a section for definitions to help provide clarity to readers.

It additionally aligns terminology with common practice, updates a manual's name, updates the name of the Utah Medicaid State Plan, and removes a reference to an incorporation by reference that no longer exists in the previously cited rule.

Additionally, it makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the Department of Health and Human Services.

### **Fiscal Information**

#### **6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:**

##### **A. State budget:**

There is no anticipated fiscal impact to the state budget, as no additional state funding is necessary to allow for medication assisted treatment for Medicaid members. Medicaid has covered medication assisted treatment for members previous to this amendment, which clarifies coverage for this ongoing practice.

Medicaid will continue to pay providers giving this treatment to members from Medicaid's state-funded appropriation.

##### **B. Local governments:**

There is no anticipated fiscal impact to local governments, as they neither fund nor provide services under the Medicaid program.

##### **C. Small businesses** ("small business" means a business employing 1-49 persons):

There is no anticipated fiscal impact on small businesses as no additional funding is necessary to allow medication assisted treatments for Medicaid members. Medicaid has covered medication assisted treatment for members previous to this amendment, which clarifies coverage for this ongoing practice.

Medicaid will continue to pay small business providers giving this treatment to members from Medicaid's state-funded appropriation.

##### **D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated fiscal impact on non-small businesses as no additional funding is necessary to allow medication assisted treatments for Medicaid members. Medicaid has covered medication assisted treatment for members previous to this amendment, which clarifies coverage for this ongoing practice.

Medicaid will continue to pay non-small business providers giving this treatment to members from Medicaid's state-funded appropriation.

##### **E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There is no anticipated fiscal impact on Medicaid providers and members as no additional funding is necessary to allow medication assisted treatments for Medicaid members. Medicaid has covered medication assisted treatment for members previous to this amendment, which clarifies coverage for this ongoing practice.

Medicaid will continue to pay providers giving this treatment to members from Medicaid's state-funded appropriation.

##### **F. Compliance costs for affected persons:**

There are no anticipated compliance costs for affected persons, including the state, a small business, a non-small business, or a single Medicaid provider or member, as no additional funding is necessary to allow medication assisted treatments for Medicaid members. Medicaid has covered medication assisted treatment for members previous to this amendment, which clarifies coverage for this ongoing practice.

Medicaid will continue to pay providers giving this treatment to members from Medicaid's state-funded appropriation.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-1-213	Section 26B-3-108	
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**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R414. Health and Human Services, [~~Health Care Financing, Coverage and Reimbursement Policy~~]Integrated Healthcare.**

**R414-36. [~~Rehabilitative Mental Health and Substance Use Disorder Services~~]Behavioral Health Services.**

**R414-36-1. [~~Introduction~~]Authority and Purpose.**

(1) Sections 26B-1-213 and 26B-3-108 authorize this rule.

(2) This rule provides the circumstances under which Medicaid provides behavioral health services for a member.

**R414-36-2. Definitions.**

Terms used in this rule are defined in Section 26B-2-101. Additionally:

(1) "Behavioral health services" means services for the treatment of a mental health or substance use disorder.

(2) "Member" means the same as defined in Rule R414-1.

**R414-36-3. Services for Medicaid Members.**

~~\_\_\_\_\_ [Rehabilitative mental health and substance use disorder] Behavioral health services may be provided to a [Medicaid recipients] member in accordance with the [Rehabilitative Mental Health and Substance Use Disorder Services] Behavioral Health Services Utah Medicaid Provider Manual and Attachment 4.19-B of the Utah Medicaid State Plan [as incorporated into Section R414-1-5].~~

**R414-36-4. Qualified Licensed Residential Treatment Programs and Qualified Recovery Residences.**

Pursuant to Subsections 26B-2-117(2)(b) and (c) and the recommendation of a licensed healthcare provider, each qualified licensed residential treatment program and qualified recovery residence:

(1) shall allow a member to receive medication assisted treatment; and

(2) is subject to the sanctions described in Subsection 26B-3-108(6) for failure to comply with Subsection (1).

**KEY:** Medicaid

**Date of Last Change:** ~~November 10, 2023~~ 2025

**Notice of Continuation:** June 4, 2024

**Authorizing, and Implemented or Interpreted Law:** 26B-1-213; 26B-3-108

<b>NOTICE OF SUBSTANTIVE CHANGE</b>
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<b>TYPE OF FILING:</b> Amendment
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<b>Rule or section number:</b>	<b>R432-35</b>	<b>Filing ID: 57645</b>
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<b>Agency Information</b>
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<b>1. Title catchline:</b>	Health and Human Services, Health Care Facility Licensing	
<b>Building:</b>	Multi-Agency State Office Building	
<b>Street address:</b>	195 N 1950 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	195 N 1950 W	
<b>City, state and zip:</b>	Salt Lake City, UT 84116	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

<b>General Information</b>
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<b>2. Rule or section catchline:</b>	
R432-35. Background Check-Health Care Facility Licensing	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 21 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
In the 2025 General Session, HB 21 passed and it restructured and re-organized Utah's criminal code.	
The Department of Health and Human Services (department) determined it is necessary to update citations in this rule to accurately reflect statute.	
<b>5. Summary of the new rule or change:</b>	
This amendment updates criminal statute citations and titles as amended under HB 21 (2025).	
It also adds citation titles for reference to provide clarification for reader understanding.	
Additionally, it makes style and formatting changes to comply with the Rulewriting Manual for Utah and better align with other rules under the department.	

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

None of the criminal code updates in this filing introduce any new requirements or restrictions for the Office of Background Processing to enforce or monitor.

Therefore, there is no anticipated fiscal impact on the state budget as a result of this filing.

**B. Local governments:**

This filing is not anticipated to have a fiscal impact on local governments' revenues or expenditures because facilities are regulated by the department and not local governments.

There will be no change in local business licensing or any other process with which local government is involved.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

None of the criminal code updates in this filing introduce any new requirements or restrictions for small businesses to follow.

Therefore, there is no anticipated fiscal impact to small businesses as a result of this filing.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

None of the criminal code updates in this filing introduce any new requirements or content for non-small businesses to follow.

Therefore, there is no anticipated fiscal impact to non-small businesses as a result of this filing.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

None of the criminal code updates in this filing introduce any new requirements or restrictions for persons other than small businesses, non-small businesses, state, or local government entities to follow.

Therefore, there is no anticipated fiscal impact to other persons as a result of this filing.

**F. Compliance costs for affected persons:**

None of the criminal code updates introduce any new requirements or restrictions.

Therefore, there is no anticipated compliance cost for affected persons as a result of this filing.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

<b>Regulatory Impact Summary Table</b>					
<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0

Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-2-202

**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.****A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information****Agency head or designee and title:**

Tracy S. Gruber, Executive Director

**Date:**

11/02/2025

**R432. Health and Human Services, Health Care Facility Licensing.****R432-35. Background Check-Health Care Facility Licensing.****R432-35-1. Authority and Purpose.**

(1) Section 26B-2-202 authorizes this rule.

(2) This rule outlines the process required for individuals to obtain a certification for direct patient access while employed by a covered provider, covered contractor, or covered employer.

**R432-35-2. Definitions.**

~~[Definitions found]~~ Terms used in this rule are defined in [Section 26B-2-238 and] Rule R380-600[~~apply to this rule~~]. Additionally:

(1) "Aged individual" means an individual who is 60 years of age or older.

(2) "Certification for direct patient access" means the same as defined in Section 26B-2-238.~~[an OBP approved background clearance for an individual to have direct patient or resident access whose engaged employment has not lapsed for a period longer than 180 days.]~~

(3) "Corporation" means an entity that has a business interest or connection to covered providers and employs at least one individual who provides consultative services that may result in direct patient access.

~~(4) "Covered body" means the same as defined in Section 26B-2-238.~~~~[a covered provider, covered contractor, or covered employer.~~

~~(4) "Corporation" means an entity that has business interest or connection to covered providers that employs individuals who provide consultative services that may result in direct patient access.]~~

(5) "Covered contractor" means the same as defined in Section 26B-2-238.~~[a person or corporation that provides covered individuals, by contract, to:~~

~~(a) a covered employer; or~~

~~(b) a covered provider for services within the scope of the health facility license.]~~

(6) "Covered employer" means the same as defined in Section 26B-2-238.~~[an individual who:~~

~~(a) engages a covered individual to provide services in a private residence to:~~

~~(i) a disabled individual, as defined by this rule; or~~

~~(ii) an aged individual, as defined by this rule;~~

~~(b) is not a covered provider; and~~

~~(c) is not a licensed health care facility within the state.]~~

(7) "Covered individual"~~[:]~~ means the same as defined in Section 26B-2-238.

(a) A covered individual includes:

~~(i) (a) means an individual that:~~

~~(i) a covered body engages; and~~

## NOTICES OF PROPOSED RULES

- ~~\_\_\_\_\_ (ii) may have direct patient access;~~
- ~~\_\_\_\_\_ (b) a covered individual includes:~~
- ~~\_\_\_\_\_ (i) a nursing assistant;~~
- ~~\_\_\_\_\_ (ii) a personal care aide;~~
- ~~\_\_\_\_\_ (iii) a provider of medical, therapeutic, or social services, including a provider of laboratory and radiology services;~~
- ~~\_\_\_\_\_ (iv) an executive;~~
- ~~\_\_\_\_\_ (v) an individual licensed to engage in the practice of nursing under Title 58, Chapter 31b, Nurse Practice Act;~~
- ~~\_\_\_\_\_ (vi) any administrative staff, including a manager or other administrator;~~
- ~~\_\_\_\_\_ (vii) any dietary and food service staff;~~
- ~~\_\_\_\_\_ (viii) any housekeeping staff;~~
- ~~\_\_\_\_\_ (ix) any maintenance staff;~~
- ~~\_\_\_\_\_ (x) any transportation staff; and~~
- ~~\_\_\_\_\_ (xi) any volunteer[-as defined by this rule];.~~

~~(e)b~~ [a] A covered individual does not include a student directly supervised by a member of the staff of the covered body or the student's instructor.

(8) "Covered provider" means the same as defined in Section 26B-2-238.~~;~~

- ~~\_\_\_\_\_ (a) a home health agency;~~
- ~~\_\_\_\_\_ (b) a hospice agency;~~
- ~~\_\_\_\_\_ (c) a long-term care hospital;~~
- ~~\_\_\_\_\_ (d) a nursing care facility;~~
- ~~\_\_\_\_\_ (e) a personal care agency;~~
- ~~\_\_\_\_\_ (f) a small health care facility;~~
- ~~\_\_\_\_\_ (g) an assisted living facility; or~~
- ~~\_\_\_\_\_ (h) an end-stage renal disease facility.]~~

(9) "DACS" means Direct Access Clearance System.

(10) "Department" means the Department of Health and Human Services.

(11) "Direct patient access" means the same as defined in Section 26B-2-238.~~[an individual in a position where the individual could, in relation to a patient or resident of the covered body:~~

- ~~\_\_\_\_\_ (a) cause physical or mental harm;~~
- ~~\_\_\_\_\_ (b) commit theft; or~~
- ~~\_\_\_\_\_ (c) view medical or financial records.]~~

~~(14)12~~ "Disabled individual" means an individual who has limitations with two or more major life activities, ~~[such as]~~ including caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and employment.

~~(12)13~~ "Division" means the Division of Licensing and Background Checks under the department.

(14) "Engage" means the same as defined in Section 26B-2-238.~~[to obtain an individual's services;~~

- ~~\_\_\_\_\_ (a) as a volunteer;~~
- ~~\_\_\_\_\_ (b) by contract;~~
- ~~\_\_\_\_\_ (c) by employment; or~~
- ~~\_\_\_\_\_ (d) by other arrangement.]~~

~~(13)15~~(a) "Long-term care hospital" means the same as defined in Section 26B-2-238.~~;~~

- ~~\_\_\_\_\_ (a) means a hospital that is certified to provide long-term care services under 42 U.S.C. Sec. 1395tt; and~~
- ~~\_\_\_\_\_ (b) does not include a critical access hospital, designated under 42 U.S.C. Sec. 1395i-4(e)(2).]~~

~~(14)16~~ "Nursing [A]ssistant" means an individual who performs duties under the supervision of a nurse, ~~[that may include]~~ including a certified nurse aid, nurse aide, or personal care aide~~[-or certified nurse aide].~~

~~(15)17~~ "OBP" means the Office of Background Processing in the ~~[Division of Licensing and Background Checks (DLBC)]~~ division under the ~~[Department of Health and Human Services]~~ department.

~~(16)18~~ "OL" means the Office of Licensing in the ~~[DLBC]~~ division under the ~~[Department of Health and Human Services]~~ department.

~~(17)19~~ "Patient" means the same as defined in Section 26B-2-238.~~[an individual who receives health care services from one of the following covered providers:~~

- ~~\_\_\_\_\_ (a) a home health agency;~~
- ~~\_\_\_\_\_ (b) a hospice agency;~~
- ~~\_\_\_\_\_ (c) a long-term care hospital;~~
- ~~\_\_\_\_\_ (d) a personal care agency; or~~
- ~~\_\_\_\_\_ (e) an end-stage renal disease facility.]~~

~~(18)20~~ "Rap-back system" means the same as defined in Section 26B-2-238.~~[system that enables authorized entities to receive ongoing status notification of any criminal history reported on individuals who are registered in the system.]~~

~~(19)21~~ "Resident" means the same as defined in Section 26B-2-238.~~[an individual who receives health care services from one of the following covered providers:~~

- ~~\_\_\_\_\_ (a) a hospice agency that provides living quarters as part of its services;~~
- ~~\_\_\_\_\_ (b) a nursing care facility;~~
- ~~\_\_\_\_\_ (c) a small health care facility;~~

- ~~(d) an assisted living facility;~~  
~~([20]22) "Residential setting" means the same as defined in Section 26B-2-238, [a place provided by a covered provider;~~  
~~(a) for residents to live as part of the services provided by the covered provider; and~~  
~~(b) where an individual who is not a resident also lives.]~~  
~~([24]23) "Volunteer" means the same as defined in Section 26B-2-238, [an individual who may have unsupervised direct patient access who is not directly compensated for providing services.]~~

**R432-35-3. DACS Process for Covered Providers~~—DACS Process~~.**

- (1) ~~[The]~~A covered provider shall enter required information into DACS to initiate a certification for direct patient access of each covered individual before:
- ~~(a) The OL issues[ance of] a provisional license[;] or license renewal[;]; [of]and~~
  - ~~(b) the provider engages[ement as] a covered individual.~~
- (2) The covered provider shall ensure ~~[the]~~an engaged covered individual:
- (a) signs a criminal background check authorization form that is available for review by the OBP; and
  - (b) submits fingerprints within 15 working days of engagement.
- (3) The covered provider shall ensure DACS reflects the current status of ~~[the]~~a covered individual within five working days of the engagement or termination.
- (4) The covered provider may provisionally engage a covered individual while certification for direct patient access is pending, as permitted in Section 26B-2-239.
- (5) If the OBP determines an individual is not eligible for direct patient access, based on information obtained through DACS and the sources listed in Section R432-35-8, the OBP shall send a notice of agency action, as outlined in Section R497-100-5, to the covered provider and the individual.
- (6) The covered provider may not arrange for a covered individual who has been determined not eligible for direct patient access to engage in a position with direct patient access.
- (7) The OBP may allow a covered individual to have direct patient access with conditions, during an appeal process, if the covered individual demonstrates to the OBP the work arrangement does not pose a threat to the safety and health of any patient[s] or resident[s].
- (8) The covered provider that provides services in a residential setting shall enter required information into DACS to initiate and obtain certification for direct patient access for each individual 12 years of age and older, who is not a resident[;] and resides in the residential setting. ~~[-]~~If the individual is not eligible for direct patient access and continues to reside in the setting, the OL may revoke an existing license of or deny licensure to a covered provider.
- (9) The covered provider seeking to renew a license as a health care facility shall utilize DACS to run a verification report and verify each covered individual's information is correct, including:
- (a) address;
  - (b) email address;
  - (c) employment status; and
  - (d) name.
- (10)(a) An individual or covered individual seeking licensure as a covered provider shall submit required information to the OBP to initiate and obtain certification for direct patient access before ~~[the issuance of the]~~the OL issues a provisional license.
- ~~(b) If the individual is not eligible for direct patient access, the OL may revoke an existing license or deny licensure as a health care facility.~~

**R432-35-4. DACS Process for Covered Contractors~~—DACS Process~~.**

- (1) ~~[The]~~A covered contractor may enter required information into DACS to initiate and obtain certification for direct patient access of each covered individual before providing the individual by contract ~~[with]~~to a covered provider.
- (2) The covered contractor shall ensure ~~that any~~~~[the]~~ covered individual[;] who is ~~[being]~~ provided by contract to a covered provider:
- (a) signs a criminal background check authorization form that is available for review by the OBP; and
  - (b) submits fingerprints within 15 working days of placement with a covered provider.
- (3) The covered contractor shall ensure DACS reflects the current status of the covered individual within five working days of placement or termination.
- (4) The covered contractor may provisionally provide a covered individual ~~[with]~~to a covered provider while certification for direct patient access is pending, as permitted in Section 26B-2-239.
- (5) If the OBP determines an individual is not eligible for direct patient access, based on information obtained through DACS and the sources listed in Section R432-35-8, the OBP shall send a notice of agency action, as outlined in Section R497-100-5, to the covered contractor and the individual.
- (6) ~~If the OBP determines~~ an individual is ~~[determined]~~not eligible to have direct patient access, a covered contractor may not provide ~~[a]~~that covered individual to a covered provider.
- (7) The OBP may allow a covered individual direct patient access with conditions, during an appeal process, if the covered individual can demonstrate to the OBP that the work arrangement does not pose a threat to the safety and health of any patient[s] or resident[s].

**R432-35-5. DACS Process for Covered Employers~~—DACS Process~~.**

- (1) ~~[The]~~A covered employer may ensure the required information is entered into DACS to initiate and obtain certification for direct patient access for a covered individual.

## NOTICES OF PROPOSED RULES

(2) If the OBP determines an individual is not eligible for direct patient access, based on information obtained through DACS or the sources listed in Section R432-35-8, the OBP shall send a notice of agency action, as outlined in Section R497-100-5, to the covered employer and the individual.

### R432-35-6. Volunteers.

~~The following individuals or~~ A volunteer or group[s] of volunteers ~~are~~ is not required to complete the certification for direct patient access process if that volunteer or group is:

- (1) a clergy member[s];
- (2) a patient's family member;
- (3) a religious group;
- (4) a resident's family member;
- (5) an entertainment group[s]; or
- (3) an individual[s] volunteering services [as long as they are] who is directly supervised by a covered individual[s];
- ~~(4) patient family members;~~
- ~~(5) religious groups; and~~
- ~~(6) resident family members].~~

### R432-35-7. Sources for Background Review.

- (1) For a finding of certification for direct patient access, the OBP shall include:
  - ~~(a) a fingerprint-based criminal history background check in the databases described in S[ub]section 26B-2-240[4(4)]; and~~
  - ~~(b) the inclusion of the individual's fingerprints in the rap back system.~~
- (2) As required in Section 26B-2-240, the OBP may review relevant information obtained from:
  - (a) child abuse or neglect findings described in Section 80-3-404;
  - (b) federal criminal background databases available to the state;
  - (c) juvenile court arrest, adjudication, and disposition records, as allowed under Section 78A-6-209;
  - (d) licensing and certification records of an individual[s] licensed or certified by the Division of Professional Licensing under Title 58, Occupations and Professions;
  - (e) registries of nurse aides described in 42 CFR 483.156 (2025);
  - (f) ~~the~~ Department of Public Safety arrest, conviction, and disposition records described in Title 53, Chapter 10, Criminal Investigations and Technical Services Act, including information in state, regional, and national records files;
  - (g) the Division of Aging and Adult Services vulnerable adult abuse, neglect, or exploitation database described in Section 26B-6-210;
  - (h) the Division of Child and Family Services[?] Licensing Information System described in Section 80-2-1002; and
  - (i) the List of Excluded Individuals and Entities (LEIE) database maintained by the ~~United States~~ US Department of Health and Human Services' Office of Inspector General.
- (3) If the OBP determines an individual is not eligible for direct patient access, based ~~on~~ up on the criminal background check, and ~~the~~ that individual disagrees with the information provided by the Criminal Investigations and Technical Services Division or court record, the individual may challenge the information as provided by Section 53-10-108.
- (4) If the OBP determines an individual is not eligible for direct patient access, based ~~on~~ up on the non-criminal background check, and the individual disagrees with the information provided, the individual may challenge the information through the appropriate agency.

### R432-35-8. Exclusion from Direct Patient Access.

- (1) The OBP shall review convictions or pending charges as described in Subsections (1)(a) through (1)(c). ~~follows:~~
- (a) ~~Pursuant to Section 26B-2-240, any individual or covered individual who has been convicted, has pleaded no contest, or is subject to a plea in abeyance or diversion agreement, within the past 10 years, for any felony or class A misdemeanor offense listed in this subsection[?] may not have direct patient access[?]. An offense that prevents an individual or covered individual from having direct patient access is [~~
  - ~~(i) any felony or class A misdemeanor under:~~
    - ~~(A) Section 26B-2-[43]707, which describes criminal penalties for operating a facility or program in violation of statute;~~
    - ~~(B) Section 26B-6-205, which describes abuse, neglect, and exploitation of a vulnerable adult;~~
    - ~~(C) Sections 76-3-203.9 through 76-3-203.10, which describe violent offenses committed in the presence of a child;~~
    - ~~(D) Title 76, Chapter 4, [Enticement of a Minor] Inchoate Offenses;~~
    - ~~(E) Title 76, Chapter 5, Offenses Against the [Person] Individual;~~
    - ~~(F) Title 76, Chapter 5b, Sexual Exploitation Act;~~
    - ~~(vii) Title 76, Chapter 5c, Pornographic and Harmful Materials and Performances;~~
    - ~~(viii) Title 76, Chapter 5d, Prostitution;~~
    - ~~(G) Subsection 76-6-106(2)(a), which describes criminal mischief that endangers human health or safety[?];~~ ~~(b)(i)(A) Criminal Mischief - Human Life];~~
    - ~~(H) Sections 76-9-301 through 76-9-301.8, and 306 through 307;~~
    - ~~(I) Sections 76-9-702 through 76-9-702.1;~~
    - ~~(J) Sections [76-9-702.5 and 76-9-702.7] 76-12-306 through 76-12-308, which describe offenses involving voyeurism;~~
    - ~~(K) Sections 76-10-1201 through 76-10-1228;~~



- ~~(L) Sections 76-10-1301 through 76-10-1314;~~
- (xi) Sections 76-13-103 through 76-13-104, 76-13-211, and 76-13-213, which describe offenses involving cruelty to animals;
- (~~M~~)<sup>xii</sup> Section 77-36-2.4, which describes violation of a protective order; or
- (~~N~~)<sup>xiii</sup> Title 78B, Chapter 7, Protective Order and Civil Stalking Injunctions<sup>[;]</sup>.
- (b) ~~[e]~~ Except as listed in Subsection ~~[R432-35-9]~~(1)(a), the OBP may consider granting certification for direct patient access if an individual or covered individual has been convicted, has pleaded no contest, or is subject to a plea in abeyance or diversion agreement~~[;]~~ for the following offenses, the OBP may consider granting certification for direct patient access]:
- (i) any felony or class A misdemeanor;
  - (ii) any ~~[felony, class A, or]~~ class B misdemeanor under Subsection 76-6-106(2)(a)~~[(b)(i)(A), Criminal Mischief—Human Life]~~;
  - (iii) any ~~[felony or class A,]~~ class B~~[;]~~ or C misdemeanor under:
    - (A) Section ~~[26B-2-113]~~ 26B-2-707, which describes criminal penalties for operating a facility or program in violation of statute;
    - (B) Section 26B-6-205, which describes abuse, neglect, and exploitation of a vulnerable adult;
    - (C) Sections 76-3-203.9 through 76-3-203.10, which describes violent offenses committed in the presence of a child;
    - (D) Title 76, Chapter 4, ~~[Enticement of a Minor]~~ Inchoate Offenses;
    - (E) Title 76 Chapter 5, Offenses Against the ~~[Person]~~ Individual;
    - (F) Title 76, Chapter 5b, Sexual Exploitation Act;
    - (G) Title 76, Chapter 5c, Pornographic and Harmful Materials and Performances;
    - (H) Title 75, Chapter 5d, Prostitution;
- ~~[(G) Sections 76-9-301 through 76-9-301.8, and 76-9-306 through 76-9-307;~~
- ~~[(H) Sections 76-9-702 through 76-9-702.1;~~
- ~~[(I) Sections 76-9-702.5 and 76-9-702.7;]~~ 76-12-306 through 76-12-308, which describe offenses involving voyeurism;
- ~~[(J) Sections 76-10-1201 through 76-10-1228;~~
- ~~[(K) Sections 76-10-1301 through 76-10-1314;~~
- ~~[(L) Sections 76-13-103 through 76-13-104, 76-13-202 through 76-13-211, and 76-13-213, which describe offenses involving cruelty to animals;~~
- (~~L~~)<sup>K</sup> Section 77-36-2.4, which describes violation of a protective order; ~~[and]~~ or
- (~~M~~)<sup>L</sup> Title 78B, Chapter 7, Protective Order and Civil Stalking Injunctions<sup>[;]</sup>.
- (c) The OBP may deny direct patient access for any individual or covered individual who has a warrant for arrest or an arrest for any of the identified offenses in Subsection ~~[R432-35-8]~~(1)(a) or (1)(b)~~[, may deny direct patient access]~~ based on:
- (i) the type of offense;
  - (ii) the severity of offense; and
  - (iii) potential risk to any patient<sup>[s]</sup> or resident<sup>[s]</sup>.
- (2) The OBP shall review juvenile records as described in Subsections (2)(a) through (2)(c).<sup>[follows:]</sup>
- (a) ~~[a]~~ <sup>As</sup> ~~[required]~~ authorized by Subsection 26B-2-240(~~[4]~~3)(~~[a]~~b)(~~iii~~)<sup>(E)</sup>, the OBP shall review juvenile court records ~~[shall be reviewed]~~ if an individual or covered individual is:
- (i) under the age of 28; or
  - (ii) over the age of 28 and has convictions or pending charges identified in Subsection ~~[R432-35-8]~~(1)(~~[e]~~a) or (1)(f)b;
- (b) ~~[a]~~ <sup>Adjudication</sup> by a juvenile court shall exclude the individual from direct patient access if the adjudication refers to an act that, if committed by an adult, would be a felony or a misdemeanor, as identified in Subsection ~~[R432-35-9]~~(1)(a); and
- (c) ~~[a]~~ <sup>Adjudication</sup> by a juvenile court may exclude the individual from direct patient access, if the adjudication refers to an act that if committed as an adult, would be a felony or misdemeanor as identified in Subsection ~~[R432-35-9]~~(1)(b).
- (3) To determine whether an individual or covered individual should be granted or keep certification for direct patient access, ~~[F]~~ the OBP may review non-criminal findings from ~~[the following sources to determine whether an individual or covered individual should be granted or keep certification for direct patient access]~~:
- (a) the Division of Child and Family Services Licensing Information System described in Section 80-2-1002;
  - (b) any child abuse or neglect finding<sup>[s]</sup> described in Section 80-3-404;
  - (c) the Division of Aging and Adult Services vulnerable adult abuse, neglect, or exploitation database described in Section 26B-6-210;
  - (d) registries of nurse aides described in 42 CFR 483.156~~[, (2024)]~~;
  - (e) licensing and certification records of individuals licensed or certified by the Division of Professional Licensing under Title 58, Occupations and Professions; ~~[and]~~ or
  - (f) the LEIE database maintained by the ~~[United States]~~ <sup>US</sup> Department of Health and Human Services' Office of Inspector General.
- (4) To determine under what circumstance, if any, the covered individual may be granted or keep certification for direct patient access, ~~[F]~~ the OBP may review relevant background information from sources listed in ~~[Section R432-35-8]~~ <sup>this section</sup> ~~[to determine under what circumstance, if any, the covered individual may be granted or keep certification for direct patient access]~~ and ~~[the following factors]~~ may ~~[be]~~ consider<sup>[ed]</sup>, regarding any offense or finding listed in this section:
- (a) the type<sup>[s]</sup> and number of offenses or findings;
  - (b) the passage of time since ~~[the]~~ <sup>any</sup> offense or finding;
  - (c) the surrounding circumstances of ~~[the]~~ <sup>any</sup> offense or finding;
  - (d) any intervening circumstances regarding ~~[the]~~ <sup>any</sup> offense or finding; and
  - (e) any steps taken to correct or improve.

## NOTICES OF PROPOSED RULES

(5) The OBP shall rely on relevant information from the sources identified in [Section R432-35-8] this section as conclusive evidence and may deny direct patient access based on that information.

(6) A denied application may be re-submitted to the OBP:

(a) [no sooner than] beginning two years [from] after the date of separation or completion of an administrative hearing, whichever is later; or

(b) upon substantial change to the covered individual's circumstances.

### **R432-35-9. Covered Individuals with Arrests or Pending Criminal Charges.**

(1) If the OBP determines credible evidence exists that a covered individual has been arrested or charged with a felony or a misdemeanor that would [be] exclude[d] that individual from direct patient access under S[ub]section R432-35-8[(2)], the [the] OBP [and] or OL may take action to protect the health and safety of any patient[s] or resident[s] with a covered provider[s].

(2) The OBP may allow a covered individual direct patient access with conditions[?] until [the] any arrest or criminal charges are resolved[?] if the covered individual can demonstrate the work arrangement does not pose a threat to the safety and health of any patient[s] or resident[s].

(3) If the OBP denies or revokes a license[?] or denies direct patient access based upon any arrest or criminal charges, the OBP shall send a notice of agency action, as outlined in Section R497-100-5, to the covered provider and the covered individual.

### **R432-35-10. Penalties.**

Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

**KEY: health care facilities, background screening, background check**

**Date of Last Change:** ~~February 18, 2025~~

**Notice of Continuation:** January 23, 2023

**Authorizing, and Implemented or Interpreted Law:** 26B-2-202

## NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R432-100**

**Filing ID: 57644**

### Agency Information

1. Title catchline:	Health and Human Services, Health Care Facility Licensing	
Building:	Multi-Agency State Office Building (MASOB)	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 142003	
City, state and zip:	Salt Lake City, UT 84114-2003	
Contact persons:		
Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
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**Please address questions regarding information on this notice to the persons listed above.**

### General Information

<b>2. Rule or section catchline:</b>	
R432-100. General Hospital Stand	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 152 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
The Office of Licensing (OL), under the Department of Health and Human Services (department), is updating this rule to comply with Section 26B-2-203, which was updated by HB 152 in the 2025 General Session.	

Changes in statute include updates to licensing requirements for any satellite emergency department located in Cache, Davis, Salt Lake, Utah, Washington, and Weber counties and newly defined terms related to satellite emergency departments.

Additionally, this bill added rulemaking requirements for OL regarding satellite emergency departments. It is necessary for OL to update this rule to reflect licensing requirements for satellite emergency departments, in certain counties, operating under an existing general hospital license.

Based on internal review, the department also determined this amendment should update references and restore a rule reference for hospital swing-bed compliance for recreation therapy that was inadvertently removed due to an issue with renumbering in a previous filing made effective in June 2025.

#### **5. Summary of the new rule or change:**

The filing adds definitions for "county of the first or second class," "satellite emergency department," and "satellite operation" to Section R432-100-2 and adds information about the initial and renewal application process for a general hospital to operate an emergency satellite department in Cache, Davis, Salt Lake, Utah, Washington, and Weber counties in Section R432-100-17. Under Section R432-100-17, the term "prisoner" is updated to "incarcerated individual."

Also, the filing updates the reference to Rule R432-4 under Section R432-100-3 and restores the correct rule reference for recreation therapy under Section R432-100-4.

Under Subsections R432-100-11(1)(f), R432-100-11(2) and R432-100-34(7)(d), the reference is updated.

Also, under Section R432-100-25-1, the name of the Joint Commission is updated from the previous name of the organization, Joint Commission on Accreditation of Healthcare Organizations (JCAHO), to the Joint Commission.

Additionally, this filing makes style and formatting updates to comply with the Rulewriting Manual for Utah and align this rule with other rules under the department.

For this filing, clarifying language is added throughout multiple rule sections and lists are alphabetized.

### **Fiscal Information**

#### **6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:**

##### **A. State budget:**

To implement HB 152 (2025), the department anticipates a net fiscal benefit of \$1,700 in Fiscal Year 2026 and \$3,800 in Fiscal Years 2027 through 2030 for the state budget. The net fiscal benefit figures are based on deducting the staffing costs for the department to conduct additional inspections and oversee compliance for emergency satellite departments from the annual, anticipated revenue for licensee fees for this type of provider.

The department anticipates annual revenue of \$60,000 for up to ten facilities, each paying \$6,000, to be licensed as an emergency satellite department and anticipates the costs for OL staff to conduct inspections and oversee compliance for this license type to be \$58,300 in Fiscal Year 2026 and \$56,200 in Fiscal Years 2027 through Fiscal Year 2030.

Costs to conduct inspections and oversee compliance in Fiscal Year 2026 differ from costs for subsequent fiscal years due to a one-time \$2,100 dedicated credit in Fiscal Year 2026.

The department does not anticipate any fiscal impact on the state budget as a result of the formatting, additional clarifying language changes, and rule and statute updates included in this rule amendment.

##### **B. Local governments:**

This amendment will likely not result in any cost or savings for local governments. General hospitals are regulated by OL and not local governments.

The department does not anticipate any fiscal impact on local business licensing or any other item with which local government is involved as a result of the formatting, additional clarifying language changes, and rule and statute updates included in this rule amendment.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

To implement HB 152 (2025), this amendment could result in a \$6,000 annual licensing cost for small businesses that apply for an emergency satellite department license. The department estimates five facilities classified as small businesses may apply for a license and ongoing license renewals.

The department does not anticipate any fiscal impact on small businesses as a result of the formatting, additional clarifying language changes, and rule and statute updates included in this rule amendment.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

To implement HB 152 (2025), this amendment could result in a \$6,000 annual licensing cost for non-small businesses that apply for an emergency satellite department license. The department estimates five facilities classified as a non-small businesses may apply for a license and ongoing license renewals.

The department does not anticipate any fiscal impact on non-small businesses as a result of the formatting, additional clarifying language changes, and rule and statute updates included in this rule amendment.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This rule change related to implementation of HB 152 (2025) is not anticipated to result in a cost or savings to persons other than small businesses, non-small businesses, state, or local governments as it applies only to general hospitals seeking an additional license for satellite emergency departments in certain counties.

There are no other persons affected by this rule filing.

The department does not anticipate any fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities as a result of the formatting, additional clarifying language changes, and rule and statute updates included in this rule amendment.

**F. Compliance costs for affected persons:**

For implementation of HB 152 (2025), affected persons would be the small and non-small businesses providing emergency satellite facility services under a general hospital license. These affected persons may be subject to a cost of \$6,000 annually for licensing fees.

No other affected persons would be subject to compliance with this rule filing and there is no anticipated cost associated with this filing to any other affected persons.

The department does not anticipate any fiscal impact on affected persons as a result of the formatting, additional clarifying language changes, and rule and statute updates included in this rule amendment.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$58,300	\$56,200	\$56,200	\$56,200	\$56,200
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$30,000	\$30,000	\$30,000	\$30,000	\$30,000
Non-Small Businesses	\$30,000	\$30,000	\$30,000	\$30,000	\$30,000
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$118,300</b>	<b>\$116,200</b>	<b>\$116,200</b>	<b>\$116,200</b>	<b>\$116,200</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$60,000	\$60,000	\$60,000	\$60,000	\$60,000
Local Governments	\$0	\$0	\$0	\$0	\$0

Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$60,000</b>	<b>\$60,000</b>	<b>\$60,000</b>	<b>\$60,000</b>	<b>\$60,000</b>
<b>Net Fiscal Benefits</b>	<b>(\$58,300)</b>	<b>(\$56,200)</b>	<b>(\$56,200)</b>	<b>(\$56,200)</b>	<b>(\$56,200)</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-2-202	Section 26B-2-203	
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**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R432. Health and Human Services, Health Care Facility Licensing.****R432-100. General Hospital Standards.****R432-100-1. Authority and Purpose.**

(1) Sections 26B-2-202 ~~[authorizes]~~ and 26B-2-203 authorize this rule.

(2)(a) This rule promotes public health and welfare through the establishment and enforcement of licensure standards.

(b) This rule sets standards for the construction and operation of a general hospital. The standards of patient care apply to inpatient, outpatient, and satellite services.

**R432-100-2. Definitions.**

Terms used in this rule are defined in Rule R432-1. Additionally:

(1) "Caregiver" means an individual designated by a patient of the hospital to assist with continuing care that can be given in the patient's residence after discharge.

~~[(2)]~~ (2) "County of the first class or second class" means the same as described in Section 17-50-501.

~~[(3)]~~ (3) "Hospital blood services" are defined as follows:

(a) "Blood bank" means a facility that combines the functions of a donor center and transfusion service within the same facility;

(b) "Donor center" means a facility that procures, prepares, processes, stores, and transports blood and blood components; or

(c) "Transfusion service" means a facility that stores, determines compatibility, transfuses blood and blood components, and monitors transfused patients for any adverse effect.

~~[(3)]~~ (4) "Satellite emergency department" means the same as defined in Section 26B-2-203.

~~[(5)]~~ (5) "Swing-bed" means a hospital room that can switch from inpatient acute care status to skilled care status.

~~[(4)]~~ (6) "Type I Acute or Critical Access Hospital" means a hospital that offers comprehensive emergency care 24 hours a day in-house, with at least one physician experienced in emergency care on staff in the emergency care area.

~~[(5)]~~ (7) "Type II Acute or Critical Access Hospital" means a hospital that offers emergency care 24 hours a day, with at least one physician experienced in emergency care on duty in the emergency care area, and with specialty consultation available within 30 minutes by members of the medical staff.

~~[(6)]~~ (8) "Type III Acute or Critical Access Hospital" means a hospital that offers emergency care 24 hours a day, with at least one physician available to the emergency care area within 30 minutes through a medical staff call roster.

~~[(7)]~~ (9) "Type IV Acute or Critical Access Hospital" means a hospital that offers emergency first aid treatment to patients, staff, and visitors; and to persons who may be unaware of, or unable to, immediately reach services in other facilities.

**R432-100-3. Construction, Facilities, and Equipment Standards.**

A licensee shall ~~[follow Sections R432-4-1 through R432-4-15]~~ comply with Rule R432-4 when constructing and maintaining a general hospital and satellite services.

**R432-100-4. Hospital Swing-Bed and Transitional Care Units.**

(1) A licensee that operates a hospital with designated swing-bed units or transitional care units shall comply with this section.

(2) In addition to this rule, a licensee that operates designated hospital swing-beds shall comply with:

- (a) ~~Section R432-150-[3]~~ 4, Scope of Services;
- (b) ~~Section R432-150-[4]~~ 5, Adult Day Care Services;
- (c) ~~Section R432-150-10,~~ Quality Assurance;
- (d) ~~Section R432-150-11,~~ Resident Rights;
- (e) ~~Section R432-150-12,~~ Resident Assessment;
- (f) ~~Section R432-150-13,~~ Restraint Policy;
- (g) ~~Section R432-150-14,~~ Quality of Care;
- (h) ~~Section R432-150-15,~~ Physician Services;
- (i) ~~Section R432-150-16,~~ Laboratory Services;
- (j) ~~Section R432-150-17,~~ Pharmacy Services;
- (k) ~~Section R432-150-[20, and]~~ 18, Recreation Therapy;
- (l) ~~Section R432-150-20, Admission, Transfer, and Discharge; and~~
- (m) ~~Section R432-150-22,~~ Food Services.

(3) A transitional care unit requires licensure as a nursing care facility under a separate licensing category and the licensee shall conform to the requirements of Rule R432-150.

**R432-100-5. Governing Body.**

(1) Each licensee shall have a governing body referred to in this rule as the board.

(2) The board members are legally responsible for the conduct of the hospital staff. The board members are also responsible for the appointment of the medical staff and an administrator assigned to carry out the requirements of Section R432-100-6.

(3) The licensee shall ensure that the board is organized in accordance with the articles of incorporation or bylaws that specify:

- (a) the board's functional organization, including any standing committee;
- (b) the duties and responsibilities of [the] each board member[s];
- ~~[(b) the] (c) the duties and responsibilities of each officer and any standing committee;~~
- ~~(d) the frequency of meetings;~~
- ~~(e) the mechanism for formal approval of the organization, bylaws, rules of the medical staff, and hospital departments;~~
- ~~(f) the method for election or appointment to the board;~~
- ~~[(e)g] the [size of] methods established by the board for holding such individuals responsible;~~
- ~~[(d) the terms of office of the board;~~
- ~~(e) (h) the methods for removal of board members and officers;~~
- ~~[(f) the duties and responsibilities of the officers and any standing committees;~~
- ~~(g) the] (i) the numbers or percentages of members that constitute a quorum for board meetings;~~
- ~~[(h) the board's functional organization, including any standing committees;~~
- ~~(i) (j) the size of the board;~~
- ~~(k) the terms of office of the board; and~~
- (l) to who~~[m]~~ responsibility for operation and maintenance of the hospital, including evaluation of hospital practices, may be delegated~~[s]~~.
- ~~[(j) the methods established by the board for holding such individuals responsible;~~
- ~~(k) the mechanism for formal approval of the organization, bylaws, rules of the medical staff and hospital departments; and~~
- ~~(l) the frequency of meetings.~~
- (4) The board members shall:
  - (a) meet ~~[not less than]~~ at least quarterly~~[s]~~; and~~[-shall]~~
  - (b) keep written minutes of meetings and actions~~[s]~~ and distribute copies to members of the board.
- (5)(a) The board members shall employ a competent administrator and vest this person with authority and responsibility for carrying out board policies.~~[-The board shall define the administrator's qualifications, responsibilities, authority, and accountability in writing.]~~
  - (b) The board shall define, in writing, the administrator's qualifications, responsibilities, authority, and accountability.
- (6) The board, through ~~[its]~~ officers, committees, medical, and other staff, shall:
  - (a) ~~[develop and implement a long-range plan;~~
  - ~~(b) appoint members of the medical staff and delineate [their] clinical privileges;~~
  - ~~[(e)b] approve organization, bylaws, and rules of medical staff and hospital departments;~~
  - ~~(c) develop and implement a long-range plan; and~~
  - (d) maintain a list of the scope and nature of any contracted services.

**R432-100-6. Administrator.**

(1) The administrator shall establish and maintain an organizational structure for the hospital indicating the authority and responsibility of various positions, departments, and services within the hospital.

(2) The administrator shall:

(a) ~~designate,~~ advise the board in ~~writing,~~ the formulation of hospital policies and procedures;

(b) appoint a ~~person~~ member of the staff to ~~act in the administrator's absence~~ oversee compliance with the requirements of the Utah Anatomical Gift Act;

~~(b)~~ (c) be the direct representative of the board in the management of the hospital;

~~(c)~~ (d) designate, in writing, a person to act in the administrator's absence;

(e) ensure that each applicant for medical and professional staff membership is oriented to agency or hospital bylaws and shall agree in writing to abide by each condition;

(f) ensure that patient billing practices comply with Section 26B-2-219;

(g) ensure that policies and procedures are implemented and followed;

(h) function as liaison between the board, the medical staff, the nursing staff, and departments of the hospital;

~~(d)~~ (d) advise the board in the formulation of hospital policies and procedures;

~~(e)~~ (e) review and revise policies and procedures to reflect current hospital practice;

~~(f)~~ (f) ensure that policies and procedures are implemented and followed;

~~(g)~~ (g) (i) maintain a written record of any business transactions and patient services provided in the hospital and submit reports as requested to the board;

~~(h)~~ (h) ensure that each applicant for medical and professional staff membership is oriented to agency or hospital bylaws and shall agree in writing to abide by each condition;

(i) ensure that patient billing practices comply with the requirements of Section 26B-2-219; and

(j) appoint a member of the staff to oversee compliance with the requirements of the Utah Anatomical Gift Act.

(j) (i) review and revise policies and procedures to reflect current hospital practice; and

(k) submit to OL, upon receipt from any accrediting organization, copies of each:

(i) certificate;

(ii) survey report; and

(iii) recommendation of any survey result.

**R432-100-7. Medical and Professional Staff.**

(1) Each licensee shall have an organized medical and professional staff that operates under bylaws approved by the board.

(2) The medical and professional staff shall advise and be accountable to the board for the quality of medical care provided to patients.

(3) (a) The medical and professional staff shall adopt bylaws~~[.]~~ and policies and procedures to establish and maintain a qualified medical and professional staff, including current licensure, relevant training and experience, and competency to perform the privileges requested. ~~[The bylaws shall address:]~~

~~(a)~~ (b) The bylaws shall address:

(i) a fair hearing and appeal process;

(ii) temporary credentialing and privileging of staff in emergency or disaster situations;

(iii) the appointment and re-appointment process;

~~(b)~~ (iv) the delineation of privileges;

(v) the necessary qualifications for membership; and

~~(c)~~ (e) the delineation of privileges;

~~(d)~~ (vi) the participation and documentation of continuing education~~[.]~~;

~~(e)~~ (e) temporary credentialing and privileging of staff in emergency or disaster situations; and

~~(f)~~ (f) a fair hearing and appeals process.

(4)(a) A fully qualified physician who is licensed by the Department of Commerce shall supervise and direct the medical care of each person admitted to the hospital.

(b) During an emergency or disaster situation, a member of the credentialed and privileged staff shall supervise temporary credentialed practitioners.

(5) The licensee may not deny an applicant that is a podiatrist or psychologist solely on the grounds that ~~[they are]~~ the podiatrist or psychologist is not licensed to practice medicine under Title 58, Chapter 67, Utah Medical Practice Act or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act.

(6) Membership and privileges may not be denied on any ground that is otherwise prohibited by law.

(7) The licensee shall orient each applicant for medical and professional staff membership to the bylaws and ensure ~~[they agree]~~ the applicant agrees, in writing, to abide by each condition.

(8) The medical and professional staff shall review each applicant and grant privileges based on the scope of ~~[their]~~ the applicant's license and abilities.

(9) The medical and professional staff shall review appointments and re-appointments to the medical and professional staff at least every three years.

(10) During an emergency or disaster situation, the licensee shall ensure that each temporary practitioner is oriented to ~~[their]~~ the temporary practitioner assigned area.

**R432-100-8. Personnel Management Service.**

(1) The licensee shall organize the personnel management system to ensure personnel are competent to perform ~~[their]~~ respective duties, services, and functions.

(2) The licensee shall ensure there are written policies, procedures, and performance standards that include:

- ~~(a) job descriptions for each position or employee;~~
- ~~(b) periodic employee performance evaluations;~~
- ~~(c) employee health screening, including Tuberculosis testing, as follows:~~
- ~~(i) [employee tuberculosis skin testing is done by the Mantoux method or other Food and Drug Administration (FDA) approved in vitro serologic test and follow up for tuberculosis in accordance with Rule R388-804;~~
- ~~(ii) each employee is skin tested for tuberculosis within two weeks of:~~
  - ~~(A) initial hiring;~~
  - ~~(B) suspected exposure to a person with active tuberculosis; and~~
  - ~~(C) development of symptoms of tuberculosis; and~~
- ~~(iii) skin testing is exempted for an employee with known positive reaction to skin tests;~~
- ~~(d) each employee receives unit specific training;~~
- ~~(e) direct care staff receive continued competency training in current patient care practices;~~
- ~~(f) direct care staff have having current cardiopulmonary resuscitation (CPR) certification[-Completion of], which requires:~~
- ~~(ii) an in-person course, to include skills testing and evaluation on-site with a licensed instructor[-is required for CPR certification;~~

and];

- ~~(g) (b) direct care staff receiving continued competency training in current patient care practices;~~
- ~~(c) each employee receiving unit-specific training;~~
- ~~(d) employee health screening, including tuberculosis skin testing:~~
  - ~~(i) within two weeks of:~~
    - ~~(A) development of symptoms of tuberculosis;~~
    - ~~(B) initial hiring; or~~
    - ~~(C) suspected exposure to a person with active tuberculosis;~~
  - ~~(ii) done by the Mantoux method or another Food and Drug Administration (FDA)-approved in vitro serologic test and follow-up for tuberculosis in accordance with Rule R388-804; and~~
  - ~~(iii) which may be exempt for an employee with a known positive reaction to skin testing;~~
- ~~(e) Occupational Safety and Health Administration regulations regarding [blood borne]bloodborne pathogens [are]being implemented and followed;~~
- ~~(f) job descriptions for each position or employee; and~~
- ~~(g) periodic employee performance evaluations.~~

(3) The licensee shall ensure that medical and professional personnel are registered, certified, or licensed as required by the ~~[Utah]~~ Department of Commerce within 45 days of employment.

(4) The licensee shall maintain a copy of each current certificate, license, or registration available for department review.

(5) The licensee shall provide annual documented in-service training for direct care and housekeeping staff that addresses the requirements for reporting abuse, neglect, or exploitation of children or adults.

(6)(a) The licensee may utilize a volunteer in the daily activities of the hospital but a volunteer may not be included in the hospital staffing plan in lieu of hospital employees.

(b) The licensee shall screen and supervise a volunteer according to hospital policy.

(c) The licensee shall ensure that a volunteer is familiar with hospital volunteer policies, including patient rights and hospital emergency procedures.

(7) If the licensee participates in a professional graduate education program, the licensee shall ensure that there are policies and procedures specifying the patient care responsibilities and supervision of the graduate education program participants.

**R432-100-9. Quality Improvement Plan.**

(1) The board members shall ensure that there is a well-defined quality improvement plan designed to improve patient care.

(2) The plan shall:

- (a) be consistent with the delivery of patient care;
- (b) be implemented and include a system for the collection of indicator data;
- ~~(c) ensure that incident reports are available for department review;~~
- ~~(d) implement actions designed to eliminate identified problems and improve patient care;~~
- ~~(e) include a system for assessing identified problems, concerns, and opportunities for improvement of patient care; and~~
- ~~(f) include an incident reporting system to identify problems, concerns, and opportunities for improvement of patient care[;].~~
- ~~(d) ensure that incident reports are available for department review;~~
- ~~(e) include a system for assessing identified problems, concerns, and opportunities for improvement; and~~
- ~~(f) implement actions that are designed to eliminate identified problems and improve patient care.~~

(3)(a) The licensee shall maintain a quality improvement committee.

(b) The quality improvement committee shall maintain written minutes documenting any corrective action[s] and result[s] and make these minutes available for department review.



(4) The quality improvement committee shall report findings and concerns, at least quarterly, to the board, the medical staff, and the administrator.

(5) The licensee shall ensure that infection reporting is integrated into the quality improvement plan and is reported to the department in accordance with Rule R386-702.

#### **R432-100-10. Infection Control.**

- (1) The licensee shall implement a hospital-wide infection control program that includes ~~the following~~:
- ~~\_\_\_\_\_ (a) definitions of nosocomial infections;~~
  - ~~\_\_\_\_\_ (b) \_\_\_\_\_ (a) a system for reporting, evaluating, and investigating infections;~~
  - ~~\_\_\_\_\_ (c) review and evaluation of aseptic, isolation, and sanitation techniques;~~
  - ~~\_\_\_\_\_ (d) methods for isolation depending on the medical condition involved;~~
  - ~~\_\_\_\_\_ (e) preventive, surveillance, and control procedures;~~
  - ~~\_\_\_\_\_ (f) laboratory services;~~
  - ~~\_\_\_\_\_ (g) \_\_\_\_\_ (b) an employee health program;~~
  - ~~\_\_\_\_\_ (h) orientation \_\_\_\_\_ (c) definitions of [new employees; and] nosocomial infections;~~
  - ~~\_\_\_\_\_ (i) \_\_\_\_\_ (d) documented in-service education for departments and services related to infection control;~~
  - ~~\_\_\_\_\_ (e) laboratory services;~~
  - ~~\_\_\_\_\_ (f) methods for isolation depending on the medical condition involved;~~
  - ~~\_\_\_\_\_ (g) orientation of new employees;~~
  - ~~\_\_\_\_\_ (h) preventative, surveillance, and control procedures; and~~
  - ~~\_\_\_\_\_ (i) review and evaluation of aseptic, isolation, and sanitation techniques.~~
- (2) The licensee shall incorporate infection control reporting data into the hospital quality improvement ~~process~~ plan.
- (3) The licensee shall ensure that:
- ~~\_\_\_\_\_ (a) \_\_\_\_\_ (a) reuse data is incorporated into the hospital infection control identification and reporting processes;~~
  - ~~\_\_\_\_\_ (b) reuse data is incorporated into the quality improvement plan;~~
  - ~~\_\_\_\_\_ (c) single-use items may be reused according to hospital policy;~~
  - ~~\_\_\_\_\_ (d) there are specific policies and procedures for each type of reusable item;~~
  - ~~\_\_\_\_\_ (e) there are written infection control policies and procedures for each area of the hospital, including requirements dictated by the physical layout, personnel, and equipment involved; and~~
  - ~~\_\_\_\_\_ (f) \_\_\_\_\_ (f) there are written policies for the selection, storage, handling, use, and disposition of disposable or reusable items;~~
  - ~~\_\_\_\_\_ (e) single-use items may be reused according to the policy;~~
  - ~~\_\_\_\_\_ (d) there are specific policies and procedures for each type of reusable item;~~
  - ~~\_\_\_\_\_ (e) reuse data is incorporated into the quality improvement process; and~~
  - ~~\_\_\_\_\_ (f) reuse data is incorporated into the hospital infection control identification and reporting processes].~~

#### **R432-100-11. Patient Rights.**

- (1) The licensee shall inform each patient ~~at the time of~~ during admission of patient rights and support the exercise of the patient's right to:
- ~~\_\_\_\_\_ (a) access medical records[;] and [to] purchase, at a cost not to exceed the community standard, photocopies of [their] that patient's record;~~
  - ~~\_\_\_\_\_ (b) be [fully informed of their medical health status in a language they can understand];~~
  - ~~\_\_\_\_\_ (c) reasonable access to care;~~
  - ~~\_\_\_\_\_ (d) refuse treatment;~~
  - ~~\_\_\_\_\_ (e) formulate an advance directive in accordance with the Title 75, Chapter 2a, Advance Health Care Directive Act;~~
  - ~~\_\_\_\_\_ (f) uniform, considerate, and respectful care;~~
  - ~~\_\_\_\_\_ (g) participate in the decision-making process in managing their health care with their physician, or to have a designated representative involved;~~
  - ~~\_\_\_\_\_ (h) express complaints regarding the care received and to have those complaints resolved when possible;~~
  - ~~\_\_\_\_\_ (i) refuse to participate in experimental treatment or research;~~
  - ~~\_\_\_\_\_ (j) be examined and treated in surroundings designed to give visual and auditory privacy; [and]~~
  - ~~\_\_\_\_\_ (k) \_\_\_\_\_ (c) be free from mental and physical abuse[;] and [to be free] from chemical and, except in emergencies, physical restraints, except as authorized in writing by a licensed practitioner for a specified and limited period or when necessary to protect the patient from self-injury [to themselves] or [others.] from injuring another;~~
  - ~~\_\_\_\_\_ (d) be fully informed of that patient's medical health status in a language the patient can understand;~~
  - ~~\_\_\_\_\_ (e) express any complaint regarding the care received and to have that complaint resolved when possible;~~
  - ~~\_\_\_\_\_ (f) formulate an advance health care directive in accordance with the Title 75A, Chapter 3, Health Care Decisions;~~
  - ~~\_\_\_\_\_ (g) participate in the decision-making process in managing that patient's health care with the patient's physician, or to have a designated representative involved;~~
  - ~~\_\_\_\_\_ (h) refuse to participate in experimental treatment or research;~~
  - ~~\_\_\_\_\_ (i) refuse treatment;~~
  - ~~\_\_\_\_\_ (j) reasonable access to care; and~~
  - ~~\_\_\_\_\_ (k) uniform, considerate, and respectful care.~~

## NOTICES OF PROPOSED RULES

(2)(a) The licensee shall establish a policy and inform patients and legal representatives regarding the withholding of resuscitative services and the forgoing or withdrawing of life-sustaining treatment and end-of-life care. ~~[The licensee shall ensure the policy is consistent with Title 75, Chapter 2a, Advance Health Care Directive Act.]~~

(b) The licensee shall ensure the policy is consistent with Title 75A, Chapter 3, Health Care Decisions.

### **R432-100-12. Patient Designated Caregiver.**

(1) The licensee shall give a patient admitted to the hospital the opportunity to designate a caregiver ~~[who will]~~to assist the patient with continuing care after discharge from the hospital.

(a) The licensee shall document the designated caregiver in the patient record and include contact information.

(b) If the patient declines to designate a caregiver, the licensee shall document the patient's choice in the medical record.

(2) The licensee shall notify the designated caregiver as soon as practicable before ~~[either of the following circumstances occur]:~~

(a) the patient is discharged back to the patient's own residence; or

(b) the patient is transferred to another health facility[; or].

~~[(b) the patient is discharged back to their own residence.~~

] (3) The licensee shall document ~~[the dates]~~each date and time[s] of any attempt to contact the designated caregiver in the patient record.

(4) If the licensee cannot contact the designated caregiver when changes occur, the lack of contact may not interfere with, delay, or otherwise affect the medical care provided to the patient or the transfer or discharge of the patient.

(5) The patient may give written consent to allow the licensee to release medical information to the designated caregiver, pursuant to the hospital's established procedures for the release of personal health information.

(6) Before the patient is discharged, the licensee shall provide a written discharge plan for continuing care needs to the patient and designated caregiver, that shall include:

~~[(a) the name and contact information of the designated caregiver and relation to the patient;~~

~~[(b) (a) a description of continuing care tasks that the patient requires, in a culturally competent manner; [and]~~

~~[(e)]b) contact information for any other health care resources necessary to meet the patient's needs; and~~

(c) the name and contact information of the designated caregiver and relation to the patient.

(7) Before the patient is discharged, the licensee shall provide the designated caregiver with an opportunity for instruction in continuing care tasks outlined in the discharge plan, that shall include:

(a) demonstration of the continuing care tasks by hospital personnel;

~~[(b) (b) education and counseling about medications, including dosing and proper use of delivery devices; and~~

~~[(c) opportunity for the patient and designated caregiver to ask questions and receive answers regarding the continuing care tasks; and].~~

(c) education and counseling about medications, including dosing and proper use of delivery devices.

] (8) The licensee shall document the instruction given to the patient and designated caregiver in the patient record, to include the date, time, and contents of the instructions.

### **R432-100-13. Nursing Care Services.**

(1)(a) The licensee shall ensure that there is an organized nursing department that is integrated with other departments and services.

(b) The licensee shall ensure the chief nursing officer of the nursing department is a registered nurse with demonstrated ability in nursing practice and administration.

(c) The chief nursing officer shall approve the nursing policies and procedures, nursing standards of patient care, and standards of nursing practice.

(d) The licensee shall ensure a registered nurse is designated and authorized to act in the chief nursing officer's absence.

(e) Nursing tasks may be delegated pursuant to Section R156-31b-701a.

(2) The licensee shall ensure qualified registered nurses are on duty 24 hours a day to give patients nursing care that requires the judgment and special skills of a registered nurse.

(3) The nursing department shall develop and maintain a system for determining staffing requirements for nursing care on the basis of demonstrated patient need, intervention priority for care, patient load, and acuity levels.

(4)(a) The licensee shall ensure nursing care is documented for each patient from the time of admission through discharge.

(b) A registered nurse shall document each patient's nursing care and coordinate interdisciplinary care.

(c) The licensee shall ensure that nursing care documentation includes:

~~(i) [the assessments of patient's needs;~~

~~(ii) ]clinical diagnoses;~~

~~(iii)] intervention identified to meet the patient's needs;~~

~~(iv)] nursing care provided and the patient's response;~~

~~(v) the outcome of the care provided; and~~

~~(vi)]iv) the ability of the patient, family, or designated caregiver [in managing]to manage the continued care after discharge;~~

(v) the assessments of each patient's needs; and

(vi) the outcome of the care provided.

(d) Before discharge, each patient shall receive written instructions for any follow-up care or treatment.

**R432-100-14. Critical Care Unit.**

(1) A licensee that provides a critical care unit shall comply with the requirements of this section. The scope of services -as delineated in hospital policy and board approval shall dictate the medical direction for the unit.

(2) A designated, qualified, registered nurse manager with relevant education, training, and experience in critical care shall provide critical care unit nursing direction. The nurse manager shall:

~~\_\_\_\_\_ (a) coordinate the care provided by any nursing service personnel in the critical care unit;~~

~~\_\_\_\_\_ (b) have administrative responsibility for the critical care unit; and~~

~~\_\_\_\_\_ (c) \_\_\_\_\_ (a) assure that a registered nurse who has advanced life support certification is on duty and present in the unit 24 hours a day[-];~~

~~\_\_\_\_\_ (b) coordinate the care provided by any nursing service personnel in the critical care unit; and~~

~~\_\_\_\_\_ (c) have administrative responsibility for the critical care unit.~~

(3) The licensee shall ensure that each critical care unit is designed and equipped to facilitate the safe and effective care of the patient population served and make equipment and supplies available to the unit as determined by hospital policy in accordance with the needs of the patients.

(4)(a) The licensee shall ensure that an emergency cart is readily available to the unit and contains appropriate drugs and equipment according to hospital policy.

~~\_\_\_\_\_ (b) The nursing manager shall check the cart, or the cart locking mechanism, every shift and after each use to assure that items required for immediate patient care are in place in the cart and in usable condition.~~

(5) The licensee shall ensure that the following support services are immediately available to the critical care unit on a 24-hour basis:

(a) blood bank or supply;

(b) clinical laboratory; and

(c) radiology services.

(6) If the licensee provides dialysis services, the dialysis services shall comply with:

(a) Section R432-650-7; and

(b) Section R432-650-12.

**R432-100-15. Surgical Services.**

(1)(a) The licensee shall integrate surgical services provided by the hospital with other departments or services of the hospital and specify in writing the relationship, objective, and scope of each surgical service.

(b) A person appointed and authorized by the administrator shall provide administrative direction of surgical services.

(c) A member of the medical staff shall provide medical direction of surgical services.

(d) A qualified registered nurse shall supervise the provision of surgical nursing care.

(e) A qualified registered nurse shall direct and supervise the operating room suites. The operating room suites supervisor shall have authority and responsibility for:

(i) assuring that the planned procedure is within the scope of privileges granted to the physician;

(ii) maintaining the operating room register; and

(iii) other administrative functions, including serving on patient care committees.

(f) The licensee shall establish a policy governing the use of obstetrical delivery and operating rooms to ensure that any patient with parturition imminent, or with an obstetrical emergency requiring immediate medical intervention to preserve the health and life of the parent or the infant, is given priority over other obstetrical and non-emergent surgical procedures.

(g) A qualified surgical assistant shall assist as needed in operations in accordance with hospital bylaws.

(h) A surgical technician or licensed practical nurse may serve as a scrub nurse under the direct supervision of a registered nurse[-] but may not function as a circulation nurse in the operating rooms, unless the scrub nurse is a registered nurse.

~~\_\_\_\_\_ (i)(i) An outpatient surgical patient may not be routinely admitted to the hospital as an inpatient.~~

~~\_\_\_\_\_ (ii) The licensee shall complete a systematic review process to evaluate patients who require hospitalization after outpatient surgery.~~

(2) The licensee shall establish, control and consistently monitor a safe operating room environment that ensures:

(a) surgical equipment, including suction facilities and instruments, is provided and maintained in good condition to assure safe and aseptic treatment of surgical cases;

~~\_\_\_\_\_ (b) traffic in and out of the operating room is controlled and there is no through traffic;~~

~~\_\_\_\_\_ (c) there is a scavenging system for evacuation of anesthetic waste gasses; and~~

~~\_\_\_\_\_ (d) \_\_\_\_\_ (b) the following equipment shall be available to the operating suite:~~

~~\_\_\_\_\_ (i) a call-in system;~~

~~\_\_\_\_\_ (ii) a cardiac monitor;~~

~~\_\_\_\_\_ (iii) a defibrillator;~~

~~\_\_\_\_\_ (iv) a ventilation support system;~~

~~\_\_\_\_\_ (v) a defibrillator;~~

~~\_\_\_\_\_ (vi) an aspirator; and~~

~~\_\_\_\_\_ (vii) equipment for [cardiopulmonary resuscitation]CPR;~~

~~\_\_\_\_\_ (c) there is a scavenging system for evacuation of anesthetic waste gasses; and~~

~~\_\_\_\_\_ (d) traffic in and out of the operating room is controlled and there is no through traffic.~~

(3) The administration of anesthetics shall conform to the requirements of Section R432-100-16.

(4) Removal of surgical specimens shall conform with the requirements of Section R432-100-23.

**R432-100-16. Anesthesia Services.**

- (1) The licensee shall provide facilities and equipment for the administration of anesthesia commensurate with the clinical and surgical procedures planned for the institution on a 24-hour basis.
- (2) The hospital administrator shall appoint and authorize an individual to provide administrative direction of anesthesia services.
- (3) A member of the medical staff shall provide the medical direction of anesthesia services.
- (4) A member of the medical staff, including an anesthesiologist, other qualified physician, dentist, oral surgeon, or certified registered nurse anesthetist, shall provide anesthesia care within the scope of ~~their~~ that member's practice and license.
- (5) A qualified physician, dentist, or oral surgeon shall have documented training that includes the equivalent of 40 days preceptorship with an anesthesiologist and be able to perform at least ~~the following~~:
- (a) any procedure commonly used to make the patient insensate to pain during the performance of surgical, obstetrical, and other pain-producing clinical procedures;
- (b) life support functions during the administration of anesthesia, including induction and intubation procedures; and
- (c) ~~provide~~ pre-anesthesia and post-anesthesia management of the patient.
- (6) The medical staff shall clearly define the responsibilities and privileges of the person administering anesthesia.
- (7) The medical staff shall inform both the patient and the operating surgeon before surgery of who will be administering anesthesia.
- (8) A Medicaid certified hospital licensee shall comply with the requirements of ~~the~~ 42 CFR 482.52(a) (2007).
- (9) The licensee shall prohibit the use of flammable anesthetic agents for anesthesia or for the pre-operative preparation of the surgical field.
- (10) The licensee shall ensure that anesthetic equipment is inspected and tested by the person administering anesthesia before use in accordance with hospital policy.

**R432-100-17. Emergency Care Service.**

- (1)(a) Each licensee shall self-evaluate and classify ~~itself~~ to show its capability in providing emergency care. Type I, II, or III ~~represents~~ categories represent acute care hospitals and critical access hospitals, and Type IV category represents specialty hospitals.
- (b) A Type I ~~A~~ acute or Critical Access Hospital ~~critical access hospital~~ licensee shall provide in-hospital support by members of the medical staff for:
  - (i) anesthesia services;
  - (ii) medical;
  - ~~(ii) surgical;~~
  - (iii) obstetric;
  - (iv) orthopedic;
  - ~~(iv) obstetric;~~
  - (v) pediatric; and
  - (vi) ~~anesthesia services~~ surgical.
- (c) The licensee shall ensure specialty consultation is available within 30 minutes, or two-way voice communication is available for the initial consultation.
- (d) A Type III licensee shall ensure that specialty consultation is available by request of the attending medical staff member by transfer to a ~~it~~ Type I or ~~it~~ Type II hospital where care can be provided.
- (e) A general hospital licensee operating a satellite emergency department in a county of first or second class shall:
  - (i) comply with Section 26B-2-203; and
  - (ii) submit to the department any initial and renewal application and applicable fee.
- (2)(a) The licensee shall organize and staff the emergency service with qualified individuals based on the defined capability of the hospital.
  - (b) An individual appointed and authorized by the hospital administrator shall direct the emergency services.
  - (c)(i) One or more members of the medical staff shall define in writing and provide medical direction of emergency services.
  - (ii) The medical staff shall provide back-up and on-call coverage for emergency services and as needed for emergency specialty services.
  - (d) A licensed practitioner is responsible for the evaluation and treatment of a patient who ~~presents himself~~ goes to or is brought to the emergency care area including:
    - (i) an appropriate medical screening examination;
    - ~~(ii) stabilizing treatment; and~~
    - ~~(iii) (ii) if necessary for definitive treatment, an appropriate transfer to another medical facility that has agreed to accept the patient for care[-]; and~~
    - (iii) stabilizing treatment.
  - (e) Trained personnel using guidelines by the emergency room director and approved by the medical staff may determine the priority that a physician sees a person seeking emergency care.
  - (f) The licensee shall post rosters designating medical staff members on duty or on-call for primary coverage and specialty consultation in the emergency care area.
  - (g) A designated registered nurse who is qualified by relevant training, experience, and current competence in emergency care shall supervise the care provided by nursing service personnel in the department, including that:
    - (i) the emergency nurse supervisor shall ensure that there is enough nursing service personnel for the types and volume of patients served;

- ~~[(ii) type]~~ (ii) the emergency nurse supervisor shall participate in internal committee activities concerned with the emergency service; and
- (iii) Type I and II emergency department licensees shall have at least one registered nurse with advanced cardiac life support certification, and enough other nursing staff assigned and on duty within the emergency care area ~~[; and]~~.
- ~~[(iii) the emergency nurse supervisor shall participate in internal committee activities concerned with the emergency service.]~~
- (h) The licensee shall ensure that the emergency service is integrated with other departments in the hospital.
- (i) The licensee shall provide clinical laboratory services with the capability of performing any routine studies and standard analyses of blood, urine, and other body fluids.
- (j) The licensee shall ensure that a supply of blood is available 24 hours a day.
- (k) The licensee shall ensure that diagnostic radiology services ~~[are]~~ is available 24 hours a day.
- (l) The licensee shall define, in writing, the duties and responsibilities of personnel, including physicians and nurses, providing care within the emergency service area.
- (3)(a) Each licensee shall define ~~[its]~~ the scope of emergency services in writing and implement a plan for emergency care, based on community needs and on the capabilities of the hospital.
- (b) Each licensee shall comply with federal anti-dumping regulations as defined in ~~[the]~~ 19 CFR 351.101 (1998).
- (c) The licensee shall define the role of the emergency service in the hospital's disaster plans.
- (d) Each licensee shall have a communication system that permits instant contact with law enforcement agencies, rescue squads, ambulance services, and other emergency services within the community.
- (e) The licensee~~[s]~~ shall have emergency department policies and protocols ~~[shall]~~ that address:
- (i) the care, security, and control of ~~[prisoners]~~ incarcerated individuals or people to be detained for police or protective custody;
- ~~[(ii) handling of hazardous materials and contaminated patients;~~
- ~~[(iii) providing care to an unemancipated minor not accompanied by parent or guardian, or to an unaccompanied unconscious patient;~~
- ~~[(iii) handling of hazardous materials and contaminated patients;~~
- (iv) reporting of persons dead-on-arrival to the proper authorities including the legal requirements for the collection and preservation of evidence; and
- (v) the evaluation and handling of alleged or suspected child or adult abuse cases.
- (f) The licensee shall develop criteria to alert emergency department and service personnel to possible child or adult abuse. The criteria shall address:
- (i) suspected ~~[physical assault]~~ domestic abuse of elders, spouses, partners, and children;
- (ii) suspected physical assault;
- ~~[(iii) suspected rape or sexual molestation;~~
- ~~[(iii) suspected domestic abuse of elders, spouses, partners, and children;~~
- (iv) the collection, retention, and safeguarding of specimens, photographs, and other evidentiary materials; and
- (v) visual and auditory privacy during examination and consultation of patients.
- (g) The licensee shall make a list available in the emergency department that outlines private and public community agencies and resources that provide, arrange, evaluate, and care for the victims of abuse.
- (4) The licensee shall make reasonable and timely efforts to contact the guardian, parents, or next of kin of any unaccompanied minor, or any unaccompanied unconscious patient admitted to the emergency department.

#### **R432-100-18. Perinatal Services.**

- (1)(a) Each licensee shall designate its capability to provide perinatal, antepartum, labor, delivery, postpartum, and nursery care in accordance with Level I basic, Level II specialty, or Level III sub-specialty or tertiary care.
- (b) A qualified member of the hospital staff shall provide administrative, medical and nursing direction, and oversight for perinatal services according to each hospital's designated level of care.
- (c) The licensee shall ensure a qualified registered nurse is immediately available 24 hours a day with enough trained competent staff to meet the designated level.
- (d) The licensee shall ensure support personnel are available to the perinatal care service according to each hospital's designated level of care.
- (2) Each licensee shall establish and implement security protocols for perinatal patients.
- (3) The perinatal department shall include facilities and equipment for antepartum, labor and delivery, nursery, postpartum, and optional birthing rooms.
- (4) The licensee shall ensure that perinatal areas are located and arranged to avoid non-related traffic to and from other areas.
- ~~5)(a)~~ (a) The licensee shall isolate patients with infections or other communicable conditions.
- ~~(b)~~ (b) The licensee may not use maternity rooms for patients other than maternity patients.
- (6) The licensee shall have at least one surgical suite for operative delivery.
- (7) The licensee shall maintain and make immediately available, equipment and supplies for the parent and newborn, including:
- (a) ~~[furnishings suitable for labor, birth, and recovery]~~ a clock capable of showing seconds;
- (b) ~~[oxygen with flow meters and masks or equivalent;~~
- ~~(c) mechanical suction and bulb suction;~~
- ~~(d) resuscitation equipment;~~
- ~~(e) emergency medications, intravenous fluids, and related supplies and equipment;~~
- ~~(f)]~~ a device to assess fetal heart rate;

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- [~~\_\_\_\_\_~~ (g) ~~equipment to monitor and maintain the optimum body temperature of the newborn;~~  
~~\_\_\_\_\_~~ (h) ~~a clock capable of showing seconds;~~  
~~\_\_\_\_\_~~ (i) ~~an adjustable examination light; and~~  
~~\_\_\_\_\_~~ (j) ~~\_\_\_\_\_~~ (c) a newborn warming unit with temperature controls that comply with Underwriters' Laboratories requirements. The unit shall have capability for administering oxygen and suctioning[~~-~~];  
~~\_\_\_\_\_~~ (d) ~~an adjustable examination light;~~  
~~\_\_\_\_\_~~ (e) ~~emergency medications, intravenous fluids, and related supplies and equipment;~~  
~~\_\_\_\_\_~~ (f) ~~equipment to monitor and maintain the optimum body temperature of the newborn;~~  
~~\_\_\_\_\_~~ (g) ~~furnishings suitable for labor, birth, and recovery;~~  
~~\_\_\_\_\_~~ (h) ~~mechanical suction and bulb suction;~~  
~~\_\_\_\_\_~~ (i) ~~oxygen with flow meters and masks or equivalent; and~~  
~~\_\_\_\_\_~~ (j) ~~resuscitation equipment.~~
- (8) The licensee shall maintain a delivery room record keeping system for cross-referencing information with other departments.
- (9) If birthing rooms are provided, the licensee shall equip them in accordance with this section.
- (10) The licensee shall ensure that the nursery includes facilities and equipment according to its designated level of care, including an individual bassinet for each infant, with space between bassinets as follows:
- (a) Level I Basic: Full Term or Well Baby Nursery; 24 inches between bassinets;
- (b) Level II Specialty: Continuous Care Nursery; four feet between bassinets; or
- (c) Level III Sub-specialty: Newborn Intensive Care Nursery; four feet between bassinets.
- (11) The licensee shall ensure the availability of the following equipment and supplies:-
- (a) [~~an individual thermometer, or one with disposable tips, for each infant;~~  
~~\_\_\_\_\_~~ (b) ~~a supply of medication immediately available for emergencies;~~  
~~\_\_\_\_\_~~ (c) ~~a covered soiled-diaper container with removable lining;~~  
~~\_\_\_\_\_~~ (d) ~~a linen hamper with removable bag for soiled linen other than diapers;~~  
~~\_\_\_\_\_~~ (e) ~~a newborn warming unit with temperature controls that comply with Underwriters' Laboratories requirements;~~  
~~\_\_\_\_\_~~ (f) ~~oxygen, oxygen equipment, and suction equipment;~~  
~~\_\_\_\_\_~~ (g) ~~a supply of medication immediately available for emergencies;~~  
~~\_\_\_\_\_~~ (h) ~~a wall thermometer;~~  
~~\_\_\_\_\_~~ (i) ~~an individual thermometer, or one with disposable tips, for each infant;~~  
~~\_\_\_\_\_~~ (j) ~~an oxygen concentration monitoring device;~~  
~~\_\_\_\_\_~~ (k) ~~accurate scales; and~~  
~~\_\_\_\_\_~~ (l) ~~[a wall thermometer]oxygen, oxygen equipment, and suction equipment.~~
- (12) The licensee shall maintain temperature between 70-80 degrees Fahrenheit in the nursery area.
- (13) The licensee shall make infant formula storage space available that conforms to the manufacturer's recommendations. Only single-use bottles may be used for newborn feeding.
- (14) The licensee shall provide a furnished suspect nursery or isolation area that has a separate hand washing facility and equipment and supplies to be used for any infant who:
- (a) has a communicable disease;
- (b) is delivered of an ill parent infected with a communicable disease;
- (c) is delivered outside the hospital; and
- (d) is readmitted after discharge from a hospital[~~-or~~].  
~~\_\_\_\_\_~~ (e) ~~is delivered outside the hospital.~~
- (15) The licensee shall:
- [~~\_\_\_\_\_~~ (a) ~~not attempt to delay the imminent, normal birth of a child;~~  
~~\_\_\_\_\_~~ (b) ~~\_\_\_\_\_~~ (a) instill a prophylactic solution in the eyes of the infant within three hours of birth in accordance with Section R386-702-14;  
~~\_\_\_\_\_~~ (c) ~~not try to delay the imminent, normal birth of a child;~~  
~~\_\_\_\_\_~~ (d) ~~perform a newborn hearing screening in accordance with Rule R398-2; and~~  
~~\_\_\_\_\_~~ (e) ~~perform disease screening, including phenylketonuria (PKU), in accordance with Section 26B-4-319[~~-and~~].~~  
~~\_\_\_\_\_~~ (f) ~~perform a newborn hearing screening in accordance with Rule R398-2.~~  
~~\_\_\_\_\_~~ ]

### **R432-100-19. Pediatric Services.**

- (1)(a) If the licensee provides pediatric services, the services shall be under the direction of a member of the medical staff who is experienced in pediatrics and whose functions and scope of responsibility are defined by the medical staff.
- (b) A pediatrics qualified registered nurse shall supervise pediatric nursing care and shall supervise the documentation of the implementation of pediatric patient care on an interdisciplinary plan of care.
- (c) If the licensee provides a pediatric unit, the licensee shall ensure there is an interdisciplinary committee responsible for policy development and review of practice within the unit. The committee shall include representatives from administration, the medical and nursing staff, and rehabilitative support staff.
- (d) A licensee that admits pediatric patients shall have written policies and procedures specifying the criteria for admission to the hospital and conditions requiring transfer when indicated. These policies and procedures shall consider and address the resources available at the hospital, specifically, in terms of personnel, space, equipment, and supplies.

- (e) The licensee shall:
  - (i) assess each pediatric patient for maturity and development that incorporates information obtained from the maturity and development assessment into the plan of care;
  - (ii) establish and implement security protocols for pediatric patients; and
  - (iii) provide a safe area for diversional play activities.
- (2) A licensee that admits pediatric patients shall have equipment and supplies in accordance with the hospital's scope of pediatric services.
- (3) The licensee shall have written guidelines for the placement or room assignment of pediatric patients according to patient acuity under usual, specific, or unusual conditions within the hospital that shall address the use of:
  - (a) cribs;
  - (b) bassinets;
  - (c) beds; and
  - (d) proper use of restraints, bed rails, and other safety devices.
- (4) The licensee shall place infant patients in beds where frequent observation is possible.
- (5) The licensee shall ensure that pediatric patients other than infants are placed in beds to allow frequent observation according to each patient's assessed care needs.
- (6) Personnel working with pediatric patients shall have specific training and experience relating to the care of pediatric patients.
- (7) Orientation and in-service training provided by the licensee for pediatric care staff shall include pediatric-specific training on:
  - (a) child abuse and neglect;
  - (b) drugs;
  - ~~\_\_\_\_\_~~ ~~(b) toxicology~~;
  - ~~\_\_\_\_\_~~ ~~(c) infant and child nutrition~~;
  - ~~\_\_\_\_\_~~ ~~(d) intravenous therapy~~;
  - ~~\_\_\_\_\_~~ ~~(e) pediatric emergency procedures~~;
  - ~~\_\_\_\_\_~~ ~~(e) infant and child nutrition~~;
  - (f) the emotional needs and behavioral management of hospitalized children;
  - (g) ~~child abuse and neglect~~ toxicology; and
  - (h) other topics according to the needs of the pediatric patients.

#### **R432-100-20. Respiratory Care Services.**

- (1) A person authorized by the hospital administrator shall provide administrative direction of respiratory care services.
- (2)(a) A member of the medical staff who has the responsibility and authority for the overall direction of respiratory care services shall direct the respiratory care service.
- (b) When the scope of services warrants, a technical director who is registered or certified by the National Board ~~[F]~~ for Respiratory ~~[Therapy Incorporated]~~ Care, or has the equivalent education, training, and experience shall supervise the respiratory care services.
- (c) The technical director shall inform physicians about the use and potential hazards in the use of any respiratory care equipment.
- (3)(a) The responsible licensed practitioner shall provide respiratory care services to patients in accordance with a written prescription that specifies the type, frequency, and duration of the treatment; and when appropriate, the type and dose of medication, the type of diluent, and the oxygen concentration.
- (b) The licensee shall have equipment to perform any pulmonary function study or blood-gas analysis.
- (c) The licensee shall ensure availability of resuscitation, ventilatory, and oxygenation support equipment in accordance with the needs of the patient population served.

#### **R432-100-21. Rehabilitation Therapy Services.**

- (1)(a) If rehabilitation therapy services are provided by the licensee, the services may include physical therapy, speech therapy, and occupational therapy.
- (b) A qualified, licensed provider who has clinical responsibility for the specific therapy service shall direct rehabilitation therapy services.
- (c) Support personnel shall perform patient services that are commensurate with each person's documented training and experience.
- (d)(i) Rehabilitation therapy services may be initiated by a member of the medical staff or by a licensed rehabilitation therapist.
- (ii) A physician's written request for services shall include reference to the diagnosis or condition for the treatment that is planned, and any contraindications.
- (iii) The patient's physician shall ~~[retain responsibility]~~ be responsible for the specific medical problem or condition ~~[for]~~ that necessitated the referral.
- (2) Rehabilitation therapy services provided to the patient shall include evaluation of the patient, establishment of goals, development of a plan of treatment, regular and frequent assessment, maintenance of treatment and progress records, and periodic assessment of the quality and appropriateness of the care provided.

#### **R432-100-22. Radiology Services.**

- (1)(a) The licensee shall provide an organized radiology department offering services that are in accordance with the needs and size of the institution.
- (b) A person appointed and authorized by the hospital administrator shall direct the radiology services.

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- (c)(i) A member of the medical staff shall provide medical direction of the department.
- (ii) If a radiologist is not the medical director of the radiology services, the licensee shall retain the services of a radiologist.
- (iii) If a radiologist provides services on less than a full-time basis, the time commitment shall allow the radiologist to complete the necessary functions to meet the radiological needs of the patients and the medical staff.
- (d) The radiologist shall:
  - ~~[(i) assure the availability of information regarding the purpose and yield of radiological procedures and the risks of radiation;~~
  - ~~(ii) develop technique charts that include part, thickness, exposure factors, focal film distances, and either a grid or screen technique;~~
  - ~~and~~
  - ~~(iii) maintain a quality control program that minimizes unnecessary duplication of radiographic studies and maximizes the quality of diagnostic information available[?].~~
  - ~~[(ii) develop technique charts that include part, thickness, exposure factors, focal film distances and either a grid or screen technique;~~
  - ~~and~~
  - ~~(iii) assure the availability of information regarding the purpose and yield of radiological procedures and the risks of radiation.~~
- (e) The licensee shall ensure at least one licensed radiologic technologist is on duty or available as needed.
- (f) Only a member of the medical staff or other person authorized by the hospital shall authorize the performance of diagnostic radiology services.
- (g) If the licensee provides radiation oncology services, the following shall apply:
  - (i) physicians and staff who provide radiation oncology services have delineated privileges; and
  - (ii) the medical director of the radiation oncology services is a physician member of the medical staff who is qualified by education and experience in radiation oncology.
- (2)(a) The licensee shall integrate radiologic medical with the hospital patient record.
- (b) ~~Requests~~ Any request for radiologic services shall contain the reasons for the examinations.
- (c) The licensee shall file authenticated reports of these examinations in the patient's medical record as soon as possible.
- (d) The licensee shall keep radiological film in accordance with hospital policy.
- (e) If requested by the attending physician and if the quality of the radiograph permits, the radiology department may officially enter the interpretations of the radiologic examinations performed outside of the hospital in the patient's medical record.
- (f)(i) The licensee shall file radiotherapy summaries as follows:
  - ~~[(A) in the patient's medical record;~~
  - ~~(B) forwarded to the referring physician; and~~
  - ~~(C) (A) documented in the medical record of the patient receiving radiotherapy for treatment or palliation of a malignancy and reflect the histologically substantiated diagnosis, unless otherwise justified[-];~~
  - ~~(B) in the patient's medical record; and~~
  - ~~(C) forwarded to the referring physician.~~
- (ii) The licensee may additionally file radiotherapy summaries in the radiotherapy department.

### **R432-100-23. Laboratory and Pathology Services.**

- (1)(a) The licensee shall provide laboratory and pathology services that are in accordance with the needs and size of the institution.
- (b) A person appointed and authorized by the hospital administrator shall provide administrative direction of laboratory and pathology services.
- (c) A member of the medical staff shall provide medical direction of laboratory and pathology services.
- (2) Laboratory and pathology services shall make inspection reports, as described in 42 U.S.C. 263a, the Clinical Laboratory [Inspection]Improvement Amendments [inspection reports] of 1988, as required for [plans]construction plan review in Section R432-4-7 available for department review.
- (3) Laboratories certified by ~~[a Health Care Financing Administration]~~the US Centers for Medicare and Medicaid Services (CMS)-approved accrediting agency are in compliance with this section and the licensee shall ensure any accrediting agency inspection reports are available for department review.

### **R432-100-24. Blood Services.**

- (1)(a) The licensee's blood service shall establish and maintain an appropriate blood inventory in the hospital, have immediate access to community blood services or other institutions, or have an up-to-date list of donors, equipment, and trained personnel to draw and process blood.
- (b) The licensee shall collect, store, and handle blood or blood components in such a manner that they maintain potency and safety.
- (c) The licensee[s] shall properly process, test, and label blood or blood components.
- (2) The licensee shall ensure any donor center, transfusion service, or blood bank is accredited as follows:
  - (a) hospital blood banks and donor centers are accredited by the FDA; or
  - (b) hospital transfusion services are certified by ~~[the Health Care Financing Administration]~~CMS or any accrediting organization approved by ~~[the Health Care Financing Administration]~~CMS.
- (3) The licensee shall ensure that results of the accrediting organization survey are available for department review.



**R432-100-25. Pharmacy Services.**

(1)(a) The pharmacy of a licensee currently accredited and conforming to the standards of the Joint Commission [on Accreditation of Healthcare Organizations (JCAHO)] is determined to be in compliance with this section.

(b) If a licensee is not accredited by [JCAHO]the Joint Commission, then the licensee's pharmacy services shall comply with [rules]the requirements in this section.

(2) A licensed pharmacist shall direct the pharmacy department and service.

(3) The licensee shall employ personnel in keeping with the size and activity of the department and service.

(4) If the licensee uses only a drug room and the size of the hospital does not warrant a full-time pharmacist, a consultant pharmacist may be employed.

(5) The pharmacist is responsible for developing, supervising, and coordinating the activities of the pharmacy.

(6) The licensee shall provide access to emergency pharmaceutical services.

(7) The licensee shall ensure the pharmacist is trained in the specific functions and scope of the hospital pharmacy.

(8) The licensee shall provide facilities for the safe storage, preparation, safeguarding, and dispensing of drugs and ensure ~~the following~~:

~~\_\_\_\_\_ (a) floor stocks are kept in secure areas in the patient care units;~~

~~\_\_\_\_\_ (b) double locked storage is provided for controlled substances and electronically controlled storage of narcotics is permitted if automated dispensing technology is utilized by the hospital;~~

~~\_\_\_\_\_ (c) medications stored at room temperatures are maintained between 59 and 80 degrees Fahrenheit (F);~~

~~\_\_\_\_\_ (d) refrigerated medications are maintained between 36 and 46 degrees F.; and~~

~~\_\_\_\_\_ (e) \_\_\_\_\_ (a) a current toxicology reference, and other references as needed for effective pharmacy operation and professional information, are available[-];~~

~~\_\_\_\_\_ (b) double-locked storage is provided for any controlled substance and electronically controlled storage of a narcotic is permitted if the hospital uses automated dispensing technology;~~

~~\_\_\_\_\_ (c) any floor-stock is kept in a secure area in the patient care unit;~~

~~\_\_\_\_\_ (d) any room-temperature medication is stored in a room where the temperature is maintained between 59 and 80 degrees Fahrenheit (F); and~~

~~\_\_\_\_\_ (e) any refrigerated medication is stored in a refrigerator where the temperature is maintained between 36 and 46 degrees F.~~

(9) The licensee shall maintain records of the transactions of the pharmacy and medication storage unit and coordinate ~~[d]~~ with other hospital records.

(10)(a) ~~[The]~~In accordance with Section R156-17b-605, the licensee shall:

~~\_\_\_\_\_ (i) maintain a recorded and signed floor-stock controlled substance count once per shift; or [-the facility that shall]~~

~~\_\_\_\_\_ (ii) use automated dispensing technology[-in accordance with Section R156-17b-605].~~

(b) A licensee that ~~[utilizes]uses~~ automated dispensing technology shall implement a system for accounting of controlled substances dispensed by the automated dispensing system.

(c) The record shall list the name of the patient receiving the controlled substance, the date, type of substance, dosage, and signature of the person administering the substance.

(11)(a) The director of the pharmaceutical department or service shall develop written policies and procedures, in coordination with the medical staff, that pertain to the intra-hospital drug distribution system and the safe administration of drugs.

(b) Medical staff shall administer drugs that are provided to floor units in accordance with hospital policies and procedures.

(c) The medical staff, in coordination with the pharmacist, shall establish standard stop orders for medications not specifically prescribed in regard to time or number of doses.

(d) The pharmacist shall have full responsibility for dispensing of drugs.

(e) The licensee shall ensure there is a policy stating who may have access to the pharmacy or drug room when the pharmacist is not available.

(f) The licensee shall ensure there is a documentation system for the accounting and replacement of drugs, including narcotics, to the emergency department.

(g) The licensee shall ensure medication errors and adverse drug reactions are reported immediately in accordance with written procedures including notification of the practitioner who ordered the drug.

**R432-100-26. Social Services.**

(1)(a) If a licensee provides an organized social services department, a qualified social worker shall direct the social work services.

(b) If a licensee does not have a full or part-time qualified social worker, the administrator shall designate an employee to coordinate and assure that social work services are provided to patients.

(c) The licensee shall ensure the social worker, or designee, is knowledgeable about community agencies, institutions, and other resources.

(2) If a licensee does not provide an organized social services department, the licensee shall obtain consultation from a qualified social worker to provide social work services.

(3) The licensee shall orient the staff to help the patient make the best use of available inpatient, outpatient, extended care, home health, and hospice services.

(4) The licensee shall integrate social services with other departments and services of the hospital.

**R432-100-27. Psychiatric Services.**

(1)(a) If the licensee provides psychiatric services, the licensee shall ensure the services are integrated with other departments or services of the hospital according to the nature, extent, and scope of service provided.

(b) If the licensee does not provide psychiatric services, the licensee shall have procedures to transfer patients to a facility that can provide the necessary psychiatric services.

(c) A person appointed and authorized by the hospital administrator shall provide administrative direction of psychiatric services.

(d) A qualified physician who is a member of the medical staff shall define in writing and provide medical direction of psychiatric services.

(e) Psychiatric services shall comply with:

(i) Section R432-101-13, Patient Security;

(ii) Section R432-101-14, Special Treatment Procedure;

(iii) Section R432-101-17, Admission and Discharge;

(iv) Section R432-101-20, Inpatient Services;

(v) Section R432-101-21, Adolescent or Child Treatment Program;

(vi) Section R432-101-22, Residential Treatment Services;

(vii) Section R432-101-23, Physical Restraints, Seclusion, and Behavior Management;

(viii) Section R432-101-24, Involuntary Medication Administration; and

(ix) Section R432-101-35, Penalties.

(2) If outreach services are ordered by a physician as part of the plan of care or hospital discharge plan, the outreach services may be provided in a clinic, physician's office, or the patient's home.

**R432-100-28. Substance Use Disorder Rehabilitation Services.**

(1)(a) A licensee may provide inpatient or outpatient substance use disorder rehabilitation services. A licensee that provides substance use disorder rehabilitation services shall staff the hospital to meet the needs of the patients or clients.

(b) An individual appointed and authorized by the hospital administrator shall provide administrative direction.

(c) A qualified physician who is a member of the medical staff shall provide and define, in writing~~[- and provide]~~, medical direction.

(d) The licensee shall ensure nursing services are under the direction of a full-time registered nurse.

(e) The licensee shall ensure substance use disorder counseling is under the direction of a licensed mental health therapist.

(f) A licensed substance use disorder counselor may serve as the primary therapist under the direction of an individual licensed under Title 58, Chapter 60, Mental Health Professional Practice Act.

(g) An interdisciplinary team including the physician, registered nurse, licensed mental health therapist, and substance use disorder counselor is responsible for program and treatment services. The patient or client may be included as a member of the interdisciplinary team.

(2) The licensee shall ensure that substance use disorder rehabilitation services include~~[- the following]~~:

~~[(a) detoxification care is]~~ (a) a referral process where a counselor may refer any client or patient to public or private agencies for substance rehabilitation, and employment and a social assessment;

(b) comprehensive assessment that is documented and includes a physical examination, a psychiatric and psychosocial assessment, and a social assessment;

(c) detoxification care, available for the systematic reduction or elimination of a toxic agent in the body by use of rest, fluids, medication, counseling, or nursing care;

~~[(b) individual, group, or family counseling is available;~~

~~[(c)]~~ (d) educational, employment, or other counseling~~[-is]~~, available as needed;

~~[(d)]~~ (e) individual, group, or family counseling; and

(f) treatment services~~[-that are]~~ coordinated with other hospital and community services to assure continuity of care through discharge planning and aftercare referrals~~[-]~~;

~~[(e) a counselor may refer patients or clients to public or private agencies for substance rehabilitation, and employment and educational counseling; and~~

~~[(f) comprehensive assessment that is documented and includes a physical examination, a psychiatric and psychosocial assessment, and a social assessment.~~

(3) The licensee shall maintain the confidentiality of medical records of substance use disorder patients and clients according to the federal guidelines in ~~the~~ 42 CFR 2 (2024).

(4) The medical director or designee may direct the residential treatment services. Residential treatment services shall comply with Section R432-101-22.

**R432-100-29. Outpatient Services.**

(1) The licensee shall integrate outpatient care services with other departments or services of the hospital according to the nature, extent, and scope of services provided.

(2) Outpatient care shall meet the same standards of care that apply to inpatient care.

(3) Outpatient care includes hospital owned outpatient services~~[-]~~ and~~[-hospital]~~ satellite services.

**R432-100-30. Respite Services.**

(1)(a) A remote-rural general acute licensee with a federal swing-bed designation may provide respite services to provide intermittent, time-limited care to give a primary caretaker~~[-s]~~ relief from the demands of caring for an individual.

(b) The licensee may only provide respite care services ~~[and may comply only]~~ if the licensee complies with ~~[the requirements of]~~ this section.

(c) If the licensee provides respite care to an individual for longer than 14 consecutive days, the licensee shall admit the individual as an inpatient and is subject to the requirements of this rule applicable to non-respite inpatient admissions.

(2) The licensee may provide respite services at an hourly rate or daily rate.

(3) The licensee shall coordinate the delivery of respite services with the recipient of services, case manager, if one exists, and the family member or primary caretaker.

(4) The licensee shall document the individual's response to the respite placement and coordinate with provider agencies to ensure an uninterrupted service delivery program.

(5) The licensee shall complete ~~[the following]~~:

(a) a Level 1 pre-admission screening upon the person's admission for respite services; and

(b) a service agreement that will serve as the plan of care and identifies:

(i) ~~[prescribed medications]~~ diet orders;

(ii) ~~[physician treatment orders;~~

~~— (iii) —]~~ need for assistance for activities of daily living; ~~[and]~~

~~— (iii) —~~ physician treatment orders; and

(iv) ~~[diet orders]~~ prescribed medications.

(6) The licensee shall have written policies and procedures that are available to staff regarding the respite care patients to include:

(a) behavior management interventions;

~~— (b) —~~ handling patient funds;

~~— (c) —~~ medication administration;

~~— (d) —~~ notification of a responsible person in the event of an emergency;

~~— (e) —~~ service agreement and admission criteria;

~~— (d) —~~ behavior management interventions;

~~— (e) —~~ philosophy of respite services;

(f) post-service summary;

(g) service agreement and admission criteria; and

~~— (h) —~~ training and in-service requirements for employees[; and].

~~— (h) —~~ handling patient funds.

(7) The licensee shall provide a copy of the resident rights to the patient upon admission.

(8) The licensee shall maintain a record for each patient who receives respite services that includes:

(a) a service agreement;

(b) a post-service summary;

~~— (c) —~~ any accident and injury report;

~~— (d) —~~ demographic information and patient identification data;

~~— (e) —~~ nursing notes;

~~— (f) —~~ physician treatment orders; and

~~— (g) —~~ records made by staff regarding daily care of the patient in-service[;

~~— (f) —~~ accident and injury reports; and

~~— (g) —~~ a post-service summary].

(9) If a patient has an advanced directive, the licensee shall file a copy of the directive in the record and inform staff.

(10) The licensee shall ensure that retention and storage of records complies with this rule.

(11) The licensee shall provide for confidentiality and release of information in accordance with this rule.

#### **R432-100-31. Pet Therapy.**

(1) If a licensee utilizes pet therapy, household pets such as ~~[dogs, cats, birds]~~ a dog, cat, bird, fish, [and hamsters] or hamster, may be permitted if:

(a) ~~[pets are]~~ a licensee with a bird has procedures in place that protect patients, staff, and visitors from psittacosis;

(b) any pet is clean and disease free;

~~— (b) —~~ the immediate environment of the pets is clean;

~~— (c) —~~ [small pets are kept in appropriate enclosures;

~~— (d) —~~ pets that are not confined and are kept under leash control or voice control;

~~— (e) —~~ pets] a pet that [are] is kept at the hospital, or [are] is a frequent [visitors, have] visitor, has current vaccinations, including rabies, as recommended by a licensed veterinarian;[and]

~~— (f) —~~ a licensee with birds has procedures in place that protect patients, staff, and visitors from psittacosis.

~~— (d) —~~ a pet that is not confined is kept under leash control or voice control;

~~— (e) —~~ a small pet is kept in an appropriate enclosure; and

~~— (f) —~~ the immediate environment of the pet is clean.

(2) A licensee that permits ~~[pets]~~ a pet to remain overnight shall have policies and procedures for the care, housing and feeding, and ~~[for the]~~ proper storage of pet food and supplies.

(3) The licensee may not permit ~~[pets]~~ a pet in any area where ~~[their]~~ the pet's presence would create a significant health or safety hazard or nuisance to others.

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- (4) The licensee may not permit ~~[pets]~~a pet in food preparation and storage areas.
- (5) ~~[Individuals]~~Any individual caring for ~~[pets]~~a pet may not have patient care or food handling responsibilities.

### **R432-100-32. Dietary Service.**

(1)(a) The licensee shall ensure that there is an organized dietary department under the supervision of a certified dietitian or a qualified individual who, by education or specialized training and experience, is knowledgeable in food service management. If the latter is head of the department, ~~they~~the individual shall retain a registered dietitian on a full-time, regular part-time, or consulting basis.

(b) A person whose qualifications, authority, responsibilities, and duties are approved by the administrator shall provide direction of the dietary service. The director shall have the administrative responsibility for the dietary service.

(c) If the services of a certified dietitian are used on less than a full-time basis, the time commitment shall permit performance of necessary functions to meet the dietary needs of the patients.

(d) The licensee shall ensure there are food service personnel to perform any necessary functions.

(2) If dietetic services are provided by an outside provider, the outside provider shall comply with the standards of this section.

(3)(a) The dietary department personnel shall provide a current diet manual, approved by the dietary department and the medical staff, to be available to dietary, medical, and nursing personnel.

(b) The dietary department personnel shall meet the food and nutritional needs of patients, including therapeutic diets, in accordance with the orders of the physician responsible for the care of the patient, or if delegated by the physician, the orders of a qualified registered dietitian in consultation with the physician, as authorized by the medical staff and in accordance with facility policy.

(c) Dietary department personnel shall write regular menus and modifications for basic therapeutic diets at least one week in advance and posted in the kitchen.

(d) The menus shall provide for a variety of foods served in adequate amounts at each meal.

(e) The dietary department shall serve at least three meals daily with not more than a 14-hour span between the evening meal and breakfast. If a substantial evening snack is offered, a 16-hour time span is permitted.

(f) The dietary department shall provide a source of non-neutral exchanged water for use in preparation of no sodium meals, snacks, and beverages.

(4)(a) The dietary department personnel shall comply with Rule R392-100.

(b) The licensee shall ensure that the dietary facilities and equipment ~~[are in compliance]~~comply with federal, state, and local sanitation and safety laws and rules.

(c) The licensee shall control traffic of unauthorized individuals through food preparation areas.

(5) The licensee shall maintain written reports of inspections by state or local health departments on file at the hospital and available for department review.

(6) The dietitian or authorized designee is responsible for documenting nutritional information in the patient's medical record.

(7) The licensee shall ensure that any dietary orders are transmitted in writing to the dietary department.

### **R432-100-33. Telehealth Services.**

(1) If a licensee participates in telehealth, it shall develop and implement policies governing the practice of telehealth in accordance with the scope and practice of the hospital and in accordance with Section 26B-4-704.

(2) The licensee's telehealth policies shall address security, access, and retention of telemetric data.

(3) The licensee's telehealth policies shall define the privileging of physicians and allied health professionals who participate in telehealth.

### **R432-100-34. Medical Records.**

(1)(a) The licensee shall establish a medical records department or service that is responsible for the administration, custody, and maintenance of medical records.

(b) The hospital administrator shall establish administrative direction of the medical records department and in accordance with the organizational structure and policies of the hospital.

(c) The licensee shall retain the technical services of either a registered health information administrator or a registered health information technician through employment or consultation. If retained by consultation, the individual shall visit at least quarterly and document visits through written reports to the hospital administrator.

(2)(a) The licensee shall provide secure storage, controlled access, prompt retrieval, and equipment and facilities to review medical records.

(b) The licensee shall ensure medical records are available for use or review by:

(i) ~~[members of the medical and professional staff];~~

~~(ii) authorized hospital personnel and agents;~~

~~(iii) people authorized by the patient through a consent form; and~~

~~(iv) department representatives to determine compliance with licensing rules;~~

~~(iii) members of the medical and professional staff; and~~

~~(iv) people authorized by the patient through a consent form.~~

(c) Medical records may be stored in multiple locations if the record can be retrieved or accessed in a reasonable ~~[time]~~ period.

(d) If computer terminals are utilized for patient charting, the licensee shall have policies governing access and identification codes, security, and information retention.

(e) The licensee shall index a hospital medical record according to diagnosis, procedure, demographic information, and physician or licensed health practitioner and ensure the index is current within six months following discharge of the patient.

(f) Original medical records are the property of the licensee and may not be removed from the control of the licensee or the licensee's agent as defined by policy, except by court order or subpoena.

(g) The licensee shall manage medical records for individuals who have received or requested admission to an alcohol or drug program in accordance with 42 CFR 2[~~(2024)~~].

(3)(a) The licensee shall ensure that medical record entries are legible, complete, authenticated, and dated by the person responsible for ordering the service, providing, or evaluating the service, or making the entry. The author shall review prepared transcriptions of dictated reports, evaluations, and consultations before authentication.

(b) The authentication may include written signatures, computer key, or other methods approved by the governing body and medical staff to identify the name and discipline of the person making the entry.

(c) Use of computer key or other methods to identify the author of a medical record entry may not be assignable or delegated to another person.

(d) The licensee shall maintain a current list of individuals approved to use the methods of authentication. Hospital policy shall identify sanctions for the unauthorized or improper use of computer codes.

(e) Qualified personnel shall accept and transcribe verbal orders for the care and treatment of the patient and authenticate them within 30 days of the patient's discharge.

(4) The licensee shall ensure:

~~\_\_\_\_\_ (a) if a licensee ceases operation, the licensee shall provide secure, safe storage, and prompt retrieval of any medical records, patient indexes, and discharges for the period specified in Subsection (4)(b);~~

~~\_\_\_\_\_ (b) medical records are kept for at least seven years and medical records of minors are kept until the age of 18 plus four years, but in no case less than seven years;~~

~~\_\_\_\_\_ (c) medical records are organized according to hospital policy;~~

~~\_\_\_\_\_ (b)(d) medical records are reviewed at least quarterly for completeness, accuracy, and adherence to hospital policy;~~

~~\_\_\_\_\_ (e)(e) records of discharged patients are collected, assembled, reviewed for completeness, and authenticated within 30 days of the patient's discharge;~~

~~\_\_\_\_\_ (d) medical records are kept for at least seven years and medical records of minors are kept until the age of 18 plus four years, but in no case less than seven years;~~

~~\_\_\_\_\_ (e)(f) the licensee may destroy medical records after keeping them for the minimum period, and before destroying medical records, the licensee shall notify the public by publishing a notice in a newspaper of statewide distribution a minimum of once per week for three consecutive weeks to allow a former patient to access their records; and~~

~~\_\_\_\_\_ (f)(g) The licensee shall permanently keep a master patient or person index that shall include:~~

~~\_\_\_\_\_ (i) the [patient name] admission and discharge dates;~~

~~\_\_\_\_\_ (ii) the date of birth;~~

~~\_\_\_\_\_ (iii) the medical record number;~~

~~\_\_\_\_\_ (iii) the date of birth;~~

~~\_\_\_\_\_ (iv) the [admission and discharge dates; and~~

~~\_\_\_\_\_ (v) the] name of each attending physician; and~~

~~\_\_\_\_\_ (g) if a licensee ceases operation, the licensee shall provide secure, safe storage, and prompt retrieval of any medical records, patient indexes, and discharges for the period specified in Subsection (4)(d).~~

~~\_\_\_\_\_ (v) the patient name.~~

(5) The licensee may arrange for storage of medical records with another hospital, or an approved medical record storage facility, or may return patient medical records to the attending physician if the physician is still in the community.

(6) The licensee shall establish and maintain a complete medical record for each patient admitted, or who receives hospital services. Emergency and outpatient medical records shall contain documentation of the service provided and other pertinent information in accordance with hospital policy.

(7) The licensee shall ensure that each medical record contains:

~~\_\_\_\_\_ (a) a discharge summary including outcome of hospitalization, disposition of case with an autopsy report when indicated, or provisions for follow-up;~~

~~\_\_\_\_\_ (b) admitting, secondary, and primary diagnoses;~~

~~\_\_\_\_\_ (c) documentation of complications, hospital-acquired infections, and unfavorable reactions to medications, treatments, and anesthesia;~~

~~\_\_\_\_\_ (d) documentation that the facility requested of each admitted person whether the person has initiated an advance health care directive, as described in Title 75A, Chapter 3, Health Care Decisions;~~

~~\_\_\_\_\_ (e)(i) initial or admitting medical history, physical, and other examinations or evaluations; or~~

~~\_\_\_\_\_ (ii) if updated to include changes that reflect the patient's current status, recent histories and examinations;~~

~~\_\_\_\_\_ (f) patient identification and demographic information to include at least the patient's name, address, date of birth, sex, and emergency contact information;~~

~~\_\_\_\_\_ (b) initial or admitting medical history, physical and other examinations or evaluations. Recent histories and examinations may be substituted if updated to include changes that reflect the patient's current status;~~

~~\_\_\_\_\_ (c) admitting, secondary, and primary diagnoses;~~

~~\_\_\_\_\_ (d) results of consultative evaluations and findings by individuals involved in the care of the patient;~~

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- ~~\_\_\_\_\_ (e) documentation of complications, hospital acquired infections, and unfavorable reactions to medications, treatments, and anesthesia;~~  
~~\_\_\_\_\_ (f) \_\_\_\_\_ (g) properly executed informed consent documents for any procedures and treatments ordered for, and received by, the patient;~~  
~~[ \_\_\_\_\_ (g) documentation that the facility requested of each admitted person whether the person has initiated an advanced directive as defined in the Title 75, Chapter 2a, Advance Health Care Directive Act;~~  
~~]~~  
~~\_\_\_\_\_ (h) practitioner orders, nursing notes, reports of treatment, medication records, laboratory and radiological reports, vital signs, and other information that documents the patient condition and status; and~~  
~~[ \_\_\_\_\_ (i) a discharge summary including outcome of hospitalization, disposition of case with an autopsy report when indicated, or provisions for follow up.~~  
~~]~~  
~~\_\_\_\_\_ (i) results of consultative evaluations and findings by individuals involved in the care of the patient.~~  
(8) A medical record of a deceased patient shall contain a completed Inquiry of Anatomical Gift form or a modified hospital death form that has been approved by the department, as required by Title 26B, Chapter 8, Part 3, Revised Uniform Anatomical Gift Act.  
(9) A medical record of a surgical patient shall contain:  
(a) a pre-operative history and physical examination;  
~~[ \_\_\_\_\_ (b) surgeon's diagnosis;~~  
~~\_\_\_\_\_ (c) an operative report describing a description of findings;~~  
~~\_\_\_\_\_ (d) \_\_\_\_\_ (b) an anesthesia report including dosage and duration of any anesthetic and pertinent events during the induction, maintenance, and emergence from anesthesia;~~  
~~\_\_\_\_\_ (c) an operative report describing a description of findings;~~  
~~\_\_\_\_\_ (d) assistants written or dictated by the surgeon within 24 hours after the operation;~~  
~~\_\_\_\_\_ (e) [the technical procedures used]surgeon's diagnosis;~~  
~~\_\_\_\_\_ (f) the [specimen removed]name of the primary surgeon;~~  
~~\_\_\_\_\_ (g) the post-operative diagnosis;~~  
~~\_\_\_\_\_ (h) the [name of the primary surgeon]specimen removed; and~~  
~~[ \_\_\_\_\_ (i) assistants written or dictated by the surgeon within 24 hours after the operation.~~  
~~]~~  
~~\_\_\_\_\_ (i) the technical procedures used.~~  
(10) A medical record of an obstetrical patient shall contain:  
~~[ \_\_\_\_\_ (a) a relevant family history;~~  
~~\_\_\_\_\_ (b) a pre natal examination;~~  
~~\_\_\_\_\_ (c) the length of labor and type of delivery with related notes;~~  
~~\_\_\_\_\_ (d) the anesthesia or analgesia record;~~  
~~\_\_\_\_\_ (e) the Rh status and immune globulin administration when indicated;~~  
~~\_\_\_\_\_ (f) a serological test for syphilis; and~~  
~~\_\_\_\_\_ (g) \_\_\_\_\_ (a) a discharge summary for complicated deliveries or final progress note for uncomplicated deliveries[-];~~  
~~\_\_\_\_\_ (b) a relevant family history;~~  
~~\_\_\_\_\_ (c) a serological test for syphilis;~~  
~~\_\_\_\_\_ (d) a pre-natal examination;~~  
~~\_\_\_\_\_ (e) the anesthesia or analgesia record;~~  
~~\_\_\_\_\_ (f) the length of labor and type of delivery with related notes; and~~  
~~\_\_\_\_\_ (g) the Rh status and immune globulin administration when indicated.~~  
(11) A ~~[M]~~medical record of a newborn infant shall contain the following documentation in addition to the requirements for obstetrical medical records:  
~~[ \_\_\_\_\_ (a) a copy of the parent's delivery room record. In adoption cases where the identity of the parent is confidential, the licensee shall include and access the parent's according to hospital policy;~~  
~~\_\_\_\_\_ (b) the date and hour of birth;~~  
~~\_\_\_\_\_ (c) period of gestation;~~  
~~\_\_\_\_\_ (d) gender;~~  
~~\_\_\_\_\_ (e) reactions after birth;~~  
~~\_\_\_\_\_ (f) delivery room care;~~  
~~\_\_\_\_\_ (g) temperature and weight;~~  
~~\_\_\_\_\_ (h) time of first urination;~~  
~~\_\_\_\_\_ (i) number, character, and consistency of stools;~~  
~~\_\_\_\_\_ (j) \_\_\_\_\_ (a) a record of the physical examination completed at birth and discharge, record of ophthalmic prophylaxis, and the identification number of the newborn screening kit[referred to in Rule R398-2];~~  
~~[ \_\_\_\_\_ (k) \_\_\_\_\_ (b) a summary of the delivery room care;~~  
~~\_\_\_\_\_ (c) the gender;~~  
~~\_\_\_\_\_ (d) the number, character, and consistency of stools;~~  
~~\_\_\_\_\_ (e) the period of gestation;~~  
~~\_\_\_\_\_ (f) any reaction after birth;~~  
~~\_\_\_\_\_ (g) the temperature and weight;~~

~~\_\_\_\_\_~~ (h) the authorization by the parents, state agency, or court authority if the infant is discharged to any person other than the infant's parents;~~and~~

~~[\_\_\_\_\_~~ (i) the date and hour of birth;

~~\_\_\_\_\_~~ (j) the record and results of the newborn hearing screening according to ~~[Sections 26B-1-432 and]~~ Section R398-2-6;

~~\_\_\_\_\_~~ (k) the time of first urination; and

~~\_\_\_\_\_~~ (l)(i) a copy of the parent's delivery room record.

~~\_\_\_\_\_~~ (ii) In an adoption case where the identity of the parent is confidential, the licensee shall include and access the parent's record according to hospital policy.

(12) The licensee shall integrate an emergency department patient medical record into the hospital medical record, that includes:

(a) ~~[time and means of arrival]~~ a diagnosis;

(b) disposition and discharge instructions;

~~\_\_\_\_\_~~ (c) emergency care given to the patient before arrival;

~~\_\_\_\_\_~~ (d) history and physical findings;

~~\_\_\_\_\_~~ (e) lab and x-ray reports;

~~[\_\_\_\_\_~~ (e) diagnosis;

~~]~~ (f) record of treatment; and

(g) ~~[disposition]~~ time and [discharge instructions] means of arrival.

(13) A medical-social services patient record shall include:

~~[\_\_\_\_\_~~ (a) any cooperative activities with community agencies;

~~\_\_\_\_\_~~ (b) a medical-social or psychosocial study of a referred inpatient and outpatient;

~~[\_\_\_\_\_~~ (b) the financial status of the patient;

~~\_\_\_\_\_~~ (c) social therapy and rehabilitation of the patient;

~~\_\_\_\_\_~~ (d) (c) an environmental investigation for an attending physician;

~~\_\_\_\_\_~~ (d) social therapy and rehabilitation of the patient; and

~~\_\_\_\_\_~~ (e) ~~[any cooperative activities with community agencies]~~ the financial status of the patient.

(14) A medical record of a patient receiving rehabilitation therapy shall include:

(a) a problem list;

(b) a written plan of care appropriate to the diagnosis and condition; and

~~[\_\_\_\_\_~~ (b) a problem list; and

~~]~~ (c) short and long term goals.

(15) The medical records department shall maintain records, reports, and documentation of admissions, discharges, and the number of autopsies performed.

(16)(a) The medical records department shall maintain vital statistic registries for births, deaths, and the number of operations performed.~~[The medical records department shall report vital statistics data in accordance with the Title 26B, Chapter 8, Vital Statistics Act.]~~

~~\_\_\_\_\_~~ (b) The medical records department shall report vital statistics data in accordance with Title 26B, Chapter 8, Part I, Vital Statistics.

#### **R432-100-35. Central Supply Services.**

(1) The licensee shall ensure a central supply service supervisor is qualified for the position by education, training, and experience.

(2)(a) The licensee shall provide central service space and equipment for the cleaning, disinfecting, packaging, sterilizing, storing, and distribution of medical and surgical patient care supplies.

(b) The licensee shall ensure the hospital central service area provides~~[the following]~~:

(i) a decontamination area that is separated by a barrier or divider to allow the receiving, cleaning, and disinfection functions to be performed separately from other central service functions;

(ii) a linen assembly or pack-making area that has ventilation to control lint and ~~[the linen assembly or pack-making area]~~ is separated from the general sterilization and processing area; and

(iii) a sterilization area that contains hospital sterilizers with approved controls and safety features and the licensee ensures~~[:]~~:

~~[\_\_\_\_\_~~ (A) if a gas sterilizer is used, the gas sterilizer is inspected, maintained, and operated in accordance with the manufacturer's recommendations;

~~\_\_\_\_\_~~ (B) the accuracy of the sterilizers' performance is checked by a method that includes a permanent record of each run; and

~~\_\_\_\_\_~~ (B) C) the sterilizers are tested by biological monitors at least weekly~~[; and]~~.

~~[\_\_\_\_\_~~ (C) if gas sterilizers are used, they are inspected, maintained, and operated in accordance with the manufacturer's recommendations.

~~]~~ (3) The licensee shall separate the storage area into sterile and non-sterile areas and ensure~~[the following]~~:

(a) outside shipping cartons are not stored in the storage area;

(b) the storage area has temperature and humidity controls; and

~~\_\_\_\_\_~~ (b) c) the storage area is free of excessive moisture and dust~~[; and]~~

~~\_\_\_\_\_~~ (c) outside shipping cartons are not stored in this area.

(4) Staff shall wipe countertops and tables with a broad spectrum disinfectant during each shift that the central service area is staffed.

(5) Staff shall issue and launder any apparel worn in central supply according to hospital policy.

#### **R432-100-36. Laundry Service.**

(1) A person whose qualifications, authority, responsibilities, and duties are approved by the administrator shall direct the laundry service.

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(2)(a) A licensee using a commercial linen service shall require written assurance from the commercial service that standards in Subsection (2) are maintained.

(b) Clean linen shall remain completely packaged and protected from contamination until received by the licensee.

(c) The use of a commercial linen service does not relieve the licensee from its quality improvement responsibilities.

(3) A licensee that maintains an in-house laundry service shall provide equipment, supplies, and staff to meet the needs of the patients and shall ensure:

(a) soiled linen is collected in a manner to minimize cross-contamination as follows[;]:

(i) containers are properly closed as filled and before further transport;

~~[(ii) soiled linen is sorted only in a sorting area;~~

~~[(iii) handwashing is required after handling soiled linen and before handling clean items;~~

~~[(iv) (ii) employees handling soiled linen wear protective clothing that is removed before leaving the soiled work area;[and]~~

~~[(iii) handwashing is required after handling soiled linen and before handling clean items;~~

~~[(iv) soiled linen is sorted only in a sorting area; and]~~

(v) soiled linen is transported separately from clean linen; and

(b) the licensee maintains a supply of clean linen as follows[;]:

~~[(i) clean linen is covered during transport;~~

(ii) clean linen is handled and stored in a manner to minimize contamination from surface contact or airborne deposition; and

(iii) clean linen is stored in enclosed closet areas or carts[;and].

~~[(iii) clean linen is covered during transport;~~

]

(4) The licensee shall launder employee scrubs that are worn in the following areas:

(a) surgical areas; and

(b) other areas as required by 29 CFR 1910.264 (1978).

(5) If hospital employee scrubs are designated as uniforms that may be worn to and from work, the licensee shall develop and implement policies and procedures defining the scope and usage of scrubs as uniforms including hospital storage of employee scrubs, and hospital-provided scrubs in the event of contamination.

### **R432-100-37. Housekeeping Services.**

(1) The licensee shall provide housekeeping services to maintain a clean, safe, sanitary, and health[ful]y environment in the hospital.

(2) If the licensee contracts for housekeeping services with an outside service, the licensee shall secure a signed and dated agreement that details the services provided.

(3) The licensee shall provide safe and secure storage of cleaners and chemicals and keep cleaners and chemicals stored in areas that may be accessible to patients secure in accordance with hospital policy.

(4) The licensee shall ensure that storage and supplies in each area of the hospital are stored at least four inches off the floor, and at least 18 inches below the lowest portion of the sprinkler system.

(5) Personnel engaged in housekeeping or laundry services may not be engaged simultaneously in food service or patient care.

(6) If personnel work in food or direct patient care services, the licensee shall establish and follow a hospital policy to govern the transition from housekeeping services to patient care.

### **R432-100-38. Maintenance Services.**

(1)(a) The licensee shall provide maintenance services to ensure that hospital equipment and grounds are maintained in a clean and sanitary condition and in a state of good repair for the safety and well-being of patients, staff, and visitors.

(b) The administrator shall employ a person qualified by experience and training to oversee hospital maintenance.

(c) If the licensee contracts for maintenance services, the licensee shall secure a signed and dated agreement that details the services provided.

(d) The licensee shall ensure a pest-control program is conducted to ensure the hospital is free from any vermin [~~and rodents~~] or rodent.

(e) The licensee shall maintain [~~entrances, exits, steps, ramps~~] each entrance, exit, step, ramp, and outside walkway[s] in a safe condition regarding snow, ice, and other hazards.

(2) The licensee shall test, calibrate, and maintain any patient care equipment in accordance with the specifications from the manufacturer and make testing frequency and calibration documentation, whether conducted internally or by an outside agency, available for department review.

(3) The licensee shall ensure hot water at public and patient faucets is delivered between 105 to 120 degrees F.

### **R432-100-39. Emergency Operations Plan.**

(1) The licensee shall have an emergency operations plan for the maintenance of a safe environment in the event of an emergency or disaster that overwhelms the facility.

(2) The administrator or designee is responsible for the development of the plan, coordinated with applicable state and local emergency response partners and agencies. The plan shall:

(a) address delivery of essential care and services to hospital occupants utilizing crisis standards of care when staff is reduced by an emergency;

(b) address delivery of essential care and services when additional persons are present at the hospital during an emergency;

(c) address planning, mitigation, response, and recovery for;



- ~~(i) emergency communications;~~  
~~(ii) patient clinical and supportive activities;~~  
~~(iii) safety and security;~~  
~~(iv) staff responsibilities;~~  
~~(v) resources and assets; and~~  
~~(vi) utility management;~~  
~~(d) address risks and threats identified in the licensee's annual hazard vulnerability analysis;~~  
~~(e) be in writing and made available to any hospital staff;~~  
~~(f) be reviewed and updated as necessary and be available for review by the department;~~  
~~(g) delineate individuals who will be in charge in the event of any significant emergency;~~  
~~(d) delineate the person with decision-making authority to activate the emergency operations plan;~~  
~~(i) have an evacuation plan; and~~  
~~(j) include readily available lists of emergency partners with multiple contact options, emergency contact lists are updated and maintained regularly by the licensee[;].~~  
~~(e) delineate the person with decision-making authority to activate the emergency operations plan;~~  
~~(f) address risks and threats identified in the licensee's annual hazard vulnerability analysis;~~  
~~(g) have an evacuation plan;~~  
~~(h) address delivery of essential care and services when additional persons are present at the hospital during an emergency;~~  
~~(i) address delivery of essential care and services to hospital occupants utilizing crisis standards of care when staff is reduced by an emergency; and~~  
~~(j) address planning, mitigation, response, and recovery for each of the following areas:~~  
~~(i) emergency communications;~~  
~~(ii) resources and assets;~~  
~~(iii) safety and security;~~  
~~(iv) staff responsibilities;~~  
~~(v) utility management; and~~  
~~(vi) patient clinical and supportive activities.~~
- (3) The hospital administrator and the board shall approve the emergency operations plan.  
 (4) The licensee shall document any emergency incidents and responses.  
 (5) The licensee shall hold disaster drills or exercises twice yearly according to threats identified in the facility's annual hazard vulnerability analysis.  
 (6) The licensee shall have a fire emergency evacuation plan written in consultation with qualified fire safety personnel. This plan may be included in the facility's emergency operations plan.  
 (7) The licensee shall post evacuation routes posted in prominent locations throughout the hospital.  
 (8) The licensee shall document fire drills and ensure fire drill documentation is in accordance with Rule R710-4.  
 (9)(a) A licensee may exceed ~~its~~the licensed capacity by up to 20% in response to any incident that overwhelms the facility.  
 (b) A hospital that exceeds ~~its~~the licensed capacity under this provision shall notify the department within 72 hours of exceeding ~~its~~the licensed capacity.  
 (c) The licensee shall seek department approval to exceed 20% above licensed capacity.  
 (d) The department may direct that the licensee reduce ~~its~~the patient census to ~~its~~the licensed capacity at any time.

**R432-100-40. Penalties.**

Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

**KEY: health care facilities**

**Date of Last Change:** ~~June 26,~~ 2025

**Notice of Continuation:** August 22, 2025

**Authorizing, and Implemented or Interpreted Law:** 26B-1-202; 26B-2-~~104~~202; 26B-2-20~~2~~3

<b>NOTICE OF SUBSTANTIVE CHANGE</b>
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<b>TYPE OF FILING:</b> Amendment
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<b>Rule or section number:</b>	<b>R432-950</b>	<b>Filing ID: 57643</b>
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<b>Agency Information</b>	
<b>1. Title catchline:</b>	Health and Human Services, Health Care Facility Licensing
<b>Building:</b>	Multi-Agency State Office Building
<b>Street address:</b>	195 N 1950 W

City, state:	Salt Lake City, UT 84116	
Contact persons:		
Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

### General Information

<b>2. Rule or section catchline:</b>	
R432-950. Mammography Quality Assurance	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 146 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
<p>The purpose of this amendment is to ensure compliance with HB146, passed in the 2025 General Session, which avoids duplication of duties already performed on a federal level by removing a cancer screening notice requirement enforced by the Department of Health and Human Services (department) on facilities certified under Section 26B-2-603.</p> <p>The department also determined it was necessary for this amendment to remove outdated content and any redundant content now represented in Rule R380-600, which applies to all license and certificate holders under the Office of Licensing (OL).</p>	
<b>5. Summary of the new rule or change:</b>	
<p>This amendment updates statutory citations, simplifies the notification requirements for dense breast tissue in Sections R432-950-13 and R432-950-14 in accordance with changes to 21 CFR 900.12.12(c)(2), removes redundant content from Sections R432-950-16 and R432-950-17 that are represented in Rule R380-600, and renames and reorganizes the final section to outline OL's authority to enforce penalties.</p> <p>Additional changes are nonsubstantive style and formatting changes to comply with the Rulewriting Manual for Utah and align this rule with other rules under the department.</p>	

### Fiscal Information

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
<p>There is no anticipated cost or savings to the state budget as a result of this amendment.</p> <p>State inspections will continue but will eliminate the checklist requirement to verify that specific wording in dense breast tissue notifications have been provided. Instead, the determination of "not dense" or "dense" will be provided following the mammography in accordance with 21 CFR 900.12(c)(2). It will remain up to the provider and patient to discuss what this means.</p> <p>While there may be a time savings in conducting these reviews, it would be nominal and is not anticipated to be tied to any fiscal savings to the state budget.</p>
<b>B. Local governments:</b>
<p>This proposed rule amendment is not anticipated to impact local governments' revenues or expenditures because facilities are regulated by the department and not local governments.</p> <p>There will be no change in local business licensing or any other item with which local government is involved.</p> <p>There are no fiscal impacts to local government resulting from the changes in this rule content.</p>
<b>C. Small businesses ("small business" means a business employing 1-49 persons):</b>
There is no anticipated cost or savings to small businesses as a result of this filing.

While the specific wording provided in Section 26B-2-605 is no longer required, the notification of "not dense" or "dense" remains a requirement to be provided in-writing in accordance with 21 CFR 900.12(c)(2) for any facility certified under Section 26B-2-603, which may include small businesses.

Since a similar requirement still exists, it is not anticipated that a small business will need to drastically adjust current practices in a way that could lead to a measurable fiscal impact.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated cost or savings to non-small businesses as a result of this filing.

While the specific wording provided in Section 26B-2-605 is no longer required, the notification of "not dense" or "dense" remains a requirement to be provided in-writing in accordance with 21 CFR 900.12(c)(2) for any facility certified under Section 26B-2-603, which may include non-small businesses.

Since a similar requirement still exists, it is not anticipated that a non-small business will need to drastically adjust current practices in a way that could lead to a measurable fiscal impact.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

Identified persons other than small businesses, non-small businesses, state, or local government entities are the individuals receiving the notifications.

There is no anticipated cost or savings to these persons as a result of this filing, as they will still receive the notification, but with less prescriptive wording.

Regardless of this amendment, these individuals will continue to be able to request information and receive training regarding dense breast tissue in an individual discussion with their provider.

**F. Compliance costs for affected persons:**

There are no anticipated compliance costs for affected persons as a result of this amendment filing.

Dropping the dense breast tissue notification specific wording requirement is not anticipated to result in any cost to affected persons to comply with this requirement, as current practices for the department, which regulates this facility service, and facilities, which provide the notifications, are not anticipated to drastically change in a way that would lead to a measurable compliance cost.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0

<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-2-602	42 U.S.C. 263b	21 CFR 900.12(c)(2)
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**Incorporation by Reference Information****8. Incorporation by Reference:**

**A. This rule adds or updates the following title of material incorporated by reference** (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

<b>Official Title of Materials Incorporated (from title page)</b>	2018 Digital Mammography Quality Control Manual
<b>Publisher</b>	American College of Radiology
<b>Issue Date</b>	May 2020
<b>Issue or Version</b>	2nd Edition

**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R432. Health**~~[, Family]~~ **and Human Services, Health** ~~[and Preparedness]~~**, Care Facility Licensing.**

**R432-950. Mammography Quality Assurance.**

**R432-950-1. Authority and Purpose.**

(1) ~~[This rule is adopted pursuant to]~~Section ~~[26-21a-203]~~26B-2-602 authorizes this rule.

(2) This rule establishes quality assurance standards and accountability for each facility performing screening or diagnostic mammography.

**R432-950-2. ~~[Compliance]~~**

~~Facilities shall be in full compliance with R432-950 and 42 U.S.C. 263b, the Mammography Quality Standards Act of 1992.~~

**~~R432-950-3. Definitions.~~**

Terms used in this rule are defined in Rules R380-600 and R432-1. Additionally:

(1) "Diagnostic mammography" means performing a mammogram on a woman suspected of having breast cancer.

(2) "Facility" means:

(a) the same as defined in Rule R432-1; and

(b) includes any of the following entities that is applying for, or has received, a certification from the OL and conducts breast cancer screening or diagnosis through the operation of equipment to produce or initially interpret a mammogram, process film, or view conditions for interpretation:

(i) a clinic;

(ii) a hospital~~[, outpatient department, clinic,]~~;

(iii) a mobile unit;

~~\_\_\_\_\_~~ (iv) a radiology practice~~[-or mobile unit];~~  
~~\_\_\_\_\_~~ (v) an office of a physician~~[-or];~~  
~~\_\_\_\_\_~~ (vi) an outpatient department; or  
~~\_\_\_\_\_~~ (vii) any other facility that conducts breast cancer screening or diagnosis~~[-, including any or all of the following: operation of equipment to produce a mammogram, processing of film, initial interpretation of the mammogram, and the viewing conditions for that interpretation].~~

(3) "Image quality" means the overall clarity and detail of an x-ray, including spatial resolution or resolving power, sharpness, and contrast.

(4) "Mammogram" means a radiographic image of the breast.

(5) "Mammogram unit" means an x-ray system designed specifically for breast imaging, providing optimum imaging geometry, a device for breast compression, and low dose exposure that can produce high quality, reproducible images~~[-of high quality].~~

(6) "Mammography" means radiography of the breast to diagnose breast cancer.

(7) "Phantom" means an artificial test object simulating the average composition of~~[-]~~ and various structures within~~[-]~~ the breast.

(8) "Physician supervisor" means a physician with an unrestricted license under Title 58, Chapter 67, Utah Medical Practice Act or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act, who is acting within the scope of the practice of medicine.

(9) "Screening mammography" means a standard readable two-view per breast low dose radiographic examination to detect unsuspected breast cancer using specifically designed equipment dedicated ~~for~~to mammography.

~~(9)~~10 "Quality assurance" means a program designed to achieve the desired degree or grade of care, including evaluation and educational components to identify and correct problems in interpreting and obtaining mammogram.

~~(10)~~11 "Quality control" means the process of testing and maintaining the highest possible standards of equipment performance and acquisition of radiographic images.

### **R432-950-3. Compliance.**

Each facility shall comply with:

(1) Rule R380-600;

(2) this rule; and

(3) 42 U.S.C. 263b.

### **R432-950-4. ~~[Facility]~~Quality Assurance.**

(1) ~~[The]~~Each facility shall conduct ~~[a-]~~quality assurance ~~[program-]~~to ~~[as]~~ensure the operation and the services provided are in accordance with ~~[R432-950]~~this rule.

(2) The facility shall correct ~~[identified]~~any deficiency~~[ies to produce desired results]~~ identified by the American College of Radiology (ACR) or state inspection.

(3) The facility shall evaluate ~~[the corrections-]~~each required correction for a systems change to update the facility's plan for maintaining quality assurance~~[-plan].~~

### **R432-950-5. Compliance~~[-with State and Local Rules].~~**

(1) A ~~[supplier of mammography services]~~facility shall comply with ~~[all]~~any applicable ~~[Federal, State]~~federal, state, and local law[s] and regulation~~[s]~~ pertaining to radiological ~~[services-]~~and mammography services.

(2) The facility shall maintain documentation showing ~~[that it complies]~~compliance with ~~[all]~~any applicable federal, state and local law[s] and ~~[rules]~~regulation pertaining to radiological and mammography services.~~[-This includes the following]~~ including:

(a) ~~[C]~~certification of the facility;

(b) ~~[License or certification of the personnel];~~

~~\_\_\_\_\_~~ (c) ~~Documentation]~~documentation that the facility has been approved by the ~~[American College of Radiology (ACR)-]~~ACR; and

~~\_\_\_\_\_~~ (c) license or certification of personnel.

(3) Upon receipt of any survey result of the ACR or any accrediting organization, the facility shall submit copies of the certificate, the survey report, and any recommendation to the OL.

### **R432-950-6. Facility Oversight.**

(1) ~~[The]~~Each facility is responsible for the overall quality of the mammography conducted.

(2) The facility shall have enough qualified staff available, either on staff or through arrangement, ~~[sufficient qualified staff]~~to meet patient~~[s-]~~ needs relating to mammography~~[- Sufficient staff includes the following]~~, including:

(a) ~~[A]~~a designated physician supervisor who meets the requirements for a qualified physician~~[s]~~ specified by the ~~[Utah-]~~Department of Commerce;

(b) ~~[A]~~a medical physicist who;

~~\_\_\_\_\_~~ (i) is certified by the American Board of Radiology in Radiological Physics or Diagnostic Radiological Physics~~[-]; or~~~~[-who]~~

~~\_\_\_\_\_~~ (ii) meets the requirements of a qualified expert, as defined in Section R313-16-215, or mammography imaging medical physicist, as specified by the Department of Environmental Quality in accordance with Section R313-28-140; and

~~\_\_\_\_\_~~ (c) ~~[O]~~one or more radiologic technologists who meet the requirements specified by the ~~[Utah-]~~Department of Commerce ~~[pursuant to]~~in accordance with Section ~~[26-21a-203]~~58-54-302.

**R432-950-7. Physician, Physicist, and Radiologic Technologist ~~[Standards]~~ Requirements.**

(1)(a) A physician interpreting mammograms or supervising mammography~~[- or both,]~~ shall provide documentation to the ~~[Department]~~OL upon request ~~[showing he meets]~~that verifies compliance with the Department of Commerce minimum qualifications specified by Section 58-67-301~~[the Utah Department of Commerce]~~ and 21 CFR 900.12(c)(2) (2025)~~[the Mammography Quality Standards Act]~~.

~~(b) A qualified physician shall interpret the results of [all mammograms. Diagnostic mammography shall be done under the direct on-site supervision of a]each mammogram.~~

~~(c) A qualified physician shall directly supervise any diagnostic mammography on-site.~~

(2)(a) A radiologic technologist shall~~[- meet the following requirements and the facility shall provide documentation to the Department upon request showing the radiologic technologist]:~~

~~[- (a) Meets minimum qualifications specified by the Utah Department of Commerce and the Mammography Quality Standards Act;~~

~~(b) Obtains] (i) complete on-the-job training in mammography under the supervision of a qualified physician[; or both];~~

~~(e) Is]ii) be competent in breast positioning and compression as determined [from critiques.]by a qualified physician of mammogram films taken by the radiologic technologist;~~

~~(d) Is]iii) be knowledgeable, according to the radiologic technologist's supervisor, in facility policies [concerning technical factors, radiation safety,]regarding:~~

~~(A) quality control;~~

~~(B) radiation protection[-, and quality control as evaluated by the radiologic technologist's supervisor];~~

~~(C) radiation safety; and~~

~~(D) technical factors; and~~

~~(iv) meet minimum qualifications described in Subsection R432-950-6(2)(c); and~~

~~(e) [R]receive[s] continuous supervision and feedback on image quality from the [interpreting or supervising]qualified physician.~~

~~(b) The facility shall provide documentation to the OL upon request verifying that the radiologic technologist meets the requirements in Subsection (2)(a).~~

~~(3) [A]The facility shall ensure the medical physicist [must]is:~~

~~(a) [be]certified in an acceptable specialty by one of the bodies approved by the FDA to certify medical physicists; or~~

~~(b) [be]licensed or approved by the [a S]state to conduct evaluations of mammography equipment as required by [S]state law[; or]~~

~~[- (c) for those medical physicists associated with facilities that apply for accreditation before October 27, 1997, who meet training and experience requirements of Mammography Quality Standards Act and its implementing regulations.~~  
]

**R432-950-8. Personnel Requirements.**

(1) The facility shall document that new staff orientation and ongoing in-service training is based on current written facility policies and procedures.

(2) ~~[Personnel]~~The facility shall ensure any on-duty personnel has~~[ve]~~ access to the facility's written policies and procedures~~[- when on duty].~~

(3) The facility shall implement a standardized orientation program for each employment position, including the time ~~[for completing]~~required to complete training.

(4) ~~[A]~~The facility shall develop and implement a written in-service training program ~~[shall identify]~~that identifies the topics and frequency of training, including an annual review of facility policies and procedures.

(5) The facility shall maintain personnel records documenting that each employee is qualified and competent to perform respective duties and responsibilities ~~[by means of appropriate licensure or certification, experience, orientation, ongoing in-service training, and continuing education.]through:~~

~~(a) appropriate licensure or certification;~~

~~(b) continuing education;~~

~~(c) experience;~~

~~(d) ongoing in-service training; and~~

~~(e) orientation.~~

(6) The facility shall ~~[retain]~~keep personnel records for terminated employees for a minimum of four years ~~[following]~~after the ~~[final termination date[- of termination]].~~

**R432-950-9. Equipment Standards.**

(1) ~~[Mammogram]~~The facility shall ensure each mammogram unit~~[s shall be]~~ is designed specifically for mammography and~~[- shall]~~ has~~[ve]~~ a compression device and the capability for placement of a grid.

(2) The facility shall maintain~~[- current]~~ written policies and procedures for operating mammography equipment.

(3) ~~[Prior to initiating operation of a]~~The facility must ensure each mammogram unit ~~[it shall be]~~is registered with the Utah Department of Environmental Quality, in accordance with Section R313-16-230, before initiating operation.

**R432-950-10. Safety Standards.**

(1) The facility shall maintain:

~~(a) documentation that each employee has been trained on safety standards for radiation;~~

~~(b) documentation that the mammogram unit is safe and that proper radiation safety practices are being followed[-]; and~~

~~[- (2) The facility shall maintain documentation that employees have been trained on safety standards for radiation.~~

- ~~(3) The facility shall maintain~~ (c) policy and procedure manuals and logs for equipment and quality control.
- ~~(4)(a) [The facility shall maintain documentation that the quality control program complies with ACR quality control manuals for mammography or the equivalent.~~
- ~~(a) Equivalent programs]~~ Each facility shall ~~[include]~~ implement a quality control program for:
- ~~(i) equipment~~ ~~[- mammogram unit performance, and];~~
- ~~(ii) film processors~~ ~~[-];~~ approved by the ~~[Utah]~~ Department of Environmental Quality ~~[-]; and~~
- ~~(b) Equivalent programs]~~ ~~(iii) mammogram unit performance.~~
- ~~(b) Each facility shall~~ ~~[eo]~~ maintain stated objectives achieved by procedures comparable to objectives and procedures in the ~~[American College of Radiology]~~ ACR 2018 Digital Mammography Quality Control ~~[Manuals for Mammography~~
- ~~(5) Accreditation]~~ Manual, Revised 2nd Edition, May 2020, incorporated by ~~[the American College of Radiology Mammography Program documents]~~ reference in this rule.
- ~~(c) The facility shall maintain documentation that the quality control program complies with ACR quality controls for mammography or the equivalent.~~
- ~~(d) Each ACR-accredited mammography program facility shall document~~ compliance with ~~the~~ mammogram unit quality control requirements in ~~[R432-950-10(1)]~~ this section.

#### **R432-950-11. Technical Specifications for Mammography.**

- ~~(1) [The]~~ Each facility shall have a phantom available ~~[a phantom]~~ for use in the facility's ongoing quality control program.
- ~~(2)(a) The facility shall evaluate image quality at least monthly using a phantom that produces measurements satisfactory to the supervising physician.~~
- ~~(3)(b) The facility's evaluation of image quality shall include clinical images~~ ~~[shall include the following:]~~ for:
- ~~(a) Positioning]~~ i) artifact;
- ~~(b) Compression;~~
- ~~(c) Exposure]~~ (ii) compression;
- ~~(iii) contrast;~~
- ~~(iv) exam identification;~~
- ~~(v) exposure level;~~
- ~~(d) Resolution]~~ vi) noise;
- ~~(e) Contrast;~~
- ~~(f) Noise;~~
- ~~(g) Exam Identification;~~
- ~~(h) Artifacts.~~
- ~~(vii) positioning; and~~
- ~~(viii) resolution.~~

#### **R432-950-12. Physician Supervisor Responsibility.**

- ~~(1) A physician supervisor [is responsible for general oversight of]~~ shall oversee the quality control program of the facility ~~[- Oversight responsibilities include]~~ and verify that:
- ~~(a) [Annual review]~~ each requirement of ~~[the policy and procedure manual]~~ this rule is met;
- ~~(b) [Verification that]~~ equipment is performing properly;
- ~~(c) the equipment and facility personnel meet applicable federal, state, and local licensure and registration requirements;~~
- ~~(e) Verification that equipment is performing properly;~~
- ~~(d) [Verification that]~~ any facility policy and procedure manual is reviewed at least annually; and
- ~~(e) safe operating procedures are used to protect each facility personnel and patient[s];~~
- ~~(e) Verification that all other requirements of R432-950 are being met.~~
- ~~(2) The physician shall annually document~~ ~~[annually that he provides]~~ oversight activities for the quality control of the mammography service.

#### **R432-950-13. Mammography Records.**

- ~~(1) [A-](a) Each facility shall maintain a medical record~~ ~~[shall be maintained]~~ for each patient ~~[on whom]~~ who receives a screening or diagnostic mammography ~~[- is performed]~~.
- ~~(a) Provision]~~ b) The facility shall ~~[be made]~~ provide for the filing, safe storage, and accessibility of medical records ~~[-]~~ and ensure that each medical record is:
- ~~(b) Records shall be]~~ (i) protected against loss, defacement, tampering, fire[s], and flooding[s];
- ~~(c) Records shall be]~~ (ii) protected against access by any unauthorized individual[s]; and
- ~~(d) All records shall be]~~ (iii) readily available upon the request of:
- ~~(i) The attending physician;~~
- ~~(ii) Authorized representatives of the Department for determining compliance with licensure rules;~~
- ~~(iii) Any other]~~ (A) any person authorized by written consent ~~[-];~~
- ~~(e) ]~~ (B) any authorized representative of the department; or
- ~~(C) the attending physician.~~

(2)(a) The facility shall establish a system to ~~[assure that]~~ensure ~~[the]~~each patient's mammogram is accessible for clinical follow-up when requested.

(b)(i) ~~[A]~~Within 14 business days of receiving a request for information from an individual responsible for subsequent medical care of the patient, the facility shall send a copy of the mammogram and other appropriate information ~~[shall be sent]~~ to the requesting ~~[party] individual~~ responsible for subsequent medical care of the patient no later than 14 working days from the request for information. This shall include the full notification and follow-up required under Utah Code 26-21a-206 and Administrative Code R432-950-14].

(ii) Medical information may be released only upon the written consent of the patient ~~[of her]~~or the patient's legal representative.

(2)(3) The facility shall ~~[attempt]~~try to obtain a ~~[prior]~~previous mammogram for each patient if the ~~[prior]~~previous mammogram is necessary for ~~[the]~~a physician to ~~[properly]~~interpret the current exam.

(3)(4)(a) The interpreting physician shall prepare and sign a written report of ~~[his]~~the interpretation of the results of the screening mammogram.

(a)(b) The written report shall include a description of any detected abnormality~~[ies]~~ and each recommendation~~[s]~~ for a subsequent follow-up study~~[ies]~~.

(b)(c) The interpreting physician shall ~~[render]~~complete the report as soon as reasonably possible.

(e)(d) The interpreting physician or ~~[his]~~designee shall document and communicate the results of the report to the referring physician or ~~[his]~~designated representative by ~~[telephone, by certified mail, or in such a manner]~~any method that verifies receipt of the report~~[is assured]~~.

(d)(e) The interpreting physician or ~~[his]~~designee shall notify ~~[self-referred patients, that is, patients]~~each patient who does not have ~~[no]~~a referring physician~~[s]~~ of the results of the ~~[screening study in writing and in lay]~~report in language that is easily understood.

(4)(5) The interpreting physician or ~~[his]~~designee shall document and communicate the results of ~~[all]~~each diagnostic ~~[reports in the]~~report that has a high probability~~[category with]~~, or suspicion, of breast cancer to the referring physician or ~~[his]~~the designated representative by ~~[telephone, by certified mail, or in such a manner]~~any method that verifies receipt of the ~~[report is assured]~~information.

(6)(a) If the report in Subsection (5) ~~[The]~~is for a patient who does not have a referring physician, the results of that report shall ~~[document and communicate in]~~be communicated in-person using~~[in lay]~~ language~~[, by certified mail, or in such a manner]~~ that ~~[receipt of the diagnostic report is assured to all self-referred patients within the high-probability category with a suspicion of breast cancer. The]~~is easily understood.

(b) The report shall ~~[indicate]~~state whether the patient needs to consult with a physician.

(a)(c) The interpreting physician or ~~[his]~~designee shall ~~[attempt]~~try to make ~~[a]~~a follow-up contact with the patient to determine whether ~~[she]~~that patient has consulted a physician for follow-up care.

(b)(d) The interpreting physician or ~~[his]~~designee shall document in the patient's medical record~~[attempts]~~ each attempt to communicate the results to ~~[communicate the results to]~~the patient.

(6)(7) The facility shall ~~[retain]~~keep the original and subsequent mammograms for ~~[a period of]~~at least five years from the date of ~~[the]~~a procedure.

#### **R432-950-14. Education ~~[and Notification]~~ Requirements.**

(1) ~~[A]~~Each patient has the right to be treated with dignity and ~~[afforded]~~given privacy during the examination.

(2) The facility shall establish an education system to ensure that ~~[the]~~each patient ~~[understands]~~receives information on:

(a) ~~[The]~~the importance of the screening mammography to ongoing health;

(b) the process required to obtain the mammogram; and

(c) the purpose of the mammogram and how ~~[it]~~the mammogram is used to screen for breast cancer~~[s]~~.

(3) The facility shall provide a written notification, based on the mammography report summary, to each patient, about breast tissue density information, in accordance with 21 CFR 900.12(c)(2).

~~[~~(b) The process required to obtain the mammogram;

~~(c) The importance of the screening mammography to her ongoing health.~~

~~(3) As required in Utah Code 26-21a-206, the facility shall include the following notification and information with a mammography result provided to a patient with dense breast tissue: "Your mammogram indicates that you have dense breast tissue. Dense breast tissue is common and is found in as many as half of all women. However, dense breast tissue can make it more difficult to fully and accurately evaluate your mammogram and detect early signs of possible cancer in the breast. This information is being provided to inform and encourage you to discuss your dense breast tissue and other breast cancer risk factors with your health care provider. Together, you can decide what may be best for you. A copy of your mammography report has been sent to your health care provider. Please contact them if you have any questions or concerns about this notice."~~

~~(4) The copy of the mammography report provided to the patient and the health care provider shall include the dense breast tissue notification required under Utah Code 26-21a-206.~~

#### **R432-950-15. Collecting and Reporting Data.**

(1)(a) The facility shall establish a system for collecting and periodic reporting of mammography examinations and clinical follow-up~~[as provided below:]~~.

(a)(b) Clinical follow-up data shall include the follow-up on the disposition of positive mammographic findings~~[s]~~ and the correlation of the surgical biopsy results with mammogram reports.

(b)(c) The facility shall maintain records correlating ~~[the]~~any positive mammographic findings to biopsies done and the number of cancers detected.

(e)(d) The facility shall report the results of the outcomes annually to the ~~[Department or its designated agent, on forms furnished]~~OL in a format provided by the ~~[Department]~~OL.



- (c) The report shall include ~~[as a minimum]~~at least the:
- ~~[(i) The]~~ (i) number and names of any patients with positive mammographic findings lost to follow-up;
  - (ii) number of ~~[individual]~~patients receiving screening mammograms;
  - ~~[(ii) Total number of patients recommended for biopsy based on a screening mammogram;~~
  - (iii) ~~[F]~~total number of patients diagnosed with breast cancer based on a screening mammogram; and
  - (iv) ~~[The]~~total number ~~[and names]~~ of ~~[individuals with positive mammographic findings lost to follow-up]~~patients recommended for biopsy based on a screening mammogram.
- (2) The ~~[Department or its designated agent]~~OL shall provide each reporting facility, on a schedule determined by the ~~[Department]~~OL, summary statistical reports ~~[which]~~that permit each facility to compare ~~[its]~~results to statewide and other comparative statistics.

#### **R432-950-16. State Certification.**

- ~~[(1) No facility, person or governmental unit acting severally or jointly with any other person, may establish, conduct or maintain a mammography unit without first obtaining a state certificate from the Department.]~~
- (1) Rule R380-600 applies to each applicant for a certificate or certificate holder for mammography services unless otherwise noted in this section.
- (2) ~~[An applicant]~~In addition to requirements in Section R380-600-4 to apply for ~~[state]~~certification, ~~[shall file a Request for Agency Action/Certification Application with the Utah Department of Health on forms furnished by the Department.]~~
- (3) Each facility shall comply with all zoning, building and licensing laws, rules and ordinances and codes of the city and county in which the facility is located. The ~~[an]~~applicant shall submit ~~[the following]~~to the ~~[Department]~~OL:
- (a) ~~[V]~~verification of licensure or certification of required personnel; and
  - (b) verification of participation and quality control by the ~~[American College of Radiology]~~ACR for monitoring mammography services in the facility~~[?]~~.
  - ~~[(b) Verification of licensure or certification of required personnel;~~
  - ~~[(c) Fees established by the Utah State Legislature pursuant to Section 63-38-3.]~~
  - (4) The Department shall render a decision on the initial certification within 60 days of receipt of a completed application packet or within 6 months of date that the first component of an application packet was received.
    - ~~[(a) Upon verification of compliance with state certification requirements, the Department shall issue a provisional certificate.]~~
    - ~~[(b) The Department shall issue a notice of agency decision under the procedures for informal adjudicative proceedings denying a state certification if the applicant is not in compliance with the applicable laws or rules. The notice shall state the reasons for denial.]~~
  - (5) Certificate Contents and Provisions. The state certificate shall include the name of the mammography facility, owner, supervising physician, address, issue and expiration dates of the state certificate and the certificate number.
    - ~~[(b) The state certificate may be issued only to the owner and for the premises described in the application and shall not be assignable or transferable.]~~
    - ~~[(c) Each state certificate is the property of the Department and shall be returned within five days if the certification is suspended, revoked, or if the operation of the facility is discontinued.]~~
    - ~~[(d) The state certificate shall be prominently displayed where it can be easily viewed by the public.]~~
  - ~~[(6) (3) Certification periods [shall be for]are 24 months[?] and expire at midnight 24 months from the date of issuance.]~~
  - ~~[(a) A request for renewal and applicable fees shall be filed with the Department 15 days before the state certificate expires.]~~
  - ~~[(b) Failure to make a timely renewal shall result in assessment of late fees as established by the Utah State Legislature pursuant to Section 26-21a-203.]~~
  - (7) The owner shall submit a Request for Agency Action/Application to amend or modify state certification status at least 30 days before any of the following proposed or anticipated changes occur:
    - ~~[(a) Change in the name of the facility;~~
    - ~~[(b) Change in the supervising physician;~~
    - ~~[(c) Change in the owner of the facility.]~~
  - (8) The owner who wants to cease operation shall complete the following:
    - ~~[(a) Notify the patients within 30 days before the effective date of closure.]~~
    - ~~[(b) Make adequate provision for the safekeeping of records and notify the department where those records will be stored.]~~
    - ~~[(c) Return the state certificate to the Department within five days after the facility ceases operation.]~~
  - (9) The Department may issue a provisional state certificate to a facility as an initial certification and may issue a provisional state certification to a facility that does not fully comply with the requirements for a standard certification but has made acceptable progress towards meeting the requirements.
    - ~~[(a) In granting a provisional state certification, the Department must be assured that the lack of full compliance does not harm the health, safety, and welfare of the patients.]~~
    - ~~[(b) A provisional state certificate is nonrenewable and shall be issued for no more than 6 months.]~~

#### **R432-950-17. Inspections.**

[Upon presentation of proper identification, authorized representatives of the Department shall be allowed to enter a facility at any reasonable time without a warrant and be permitted to review records including medical records, when it is determined by the Department to be necessary to ascertain compliance with state law and rules promulgated under Section 26-21a-205.]

# NOTICES OF PROPOSED RULES

- ~~(1) Each facility may be inspected by the Department or its designee to determine compliance with minimum standards and the applicable rules.~~
- ~~(2) Upon receipt of the survey results of the ACR, the facility shall submit copies of the certificate and the survey report and recommendations.~~
- ~~(3) The accreditation documents are open to the public.~~
- ~~(4) The Department~~The OL may conduct periodic validation inspections of ~~[facilities]~~any facility accredited by the ACR ~~[for the purpose of determining]~~to determine compliance with state requirements.

## **R432-950-18. ~~[Enforcement and Appeal Process.]Penalties.~~**

~~[Whenever the Department has reason to believe that the facility is in violation of Section 26-21a-203 or any of the rules adopted pursuant to Title 26, Chapter 21, the Department shall issue a written Statement of Findings/Plan of Correction to the certified facility.]~~

- ~~(1) Each facility shall ensure compliance with this rule.~~
- ~~(2) Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.~~

**KEY:** health care facilities, mammography

Date of Last Change: ~~[October 23, 2018]~~2025

Notice of Continuation: August 13, 2021

Authorizing, and Implemented or Interpreted Law: ~~[26-21a-203]~~26B-2-202; 26B-2-602; 42 U.S.C. 263b; 21 CFR 900.12(c)(2)

## NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R501-18**

**Filing ID: 57646**

### Agency Information

<b>1. Title catchline:</b>	Health and Human Services, Human Services Program Licensing	
<b>Building:</b>	Multi-Agency State Office Building	
<b>Street address:</b>	195 N 1950 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	PO Box 142003	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-2003	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

### General Information

<b>2. Rule or section catchline:</b>	
R501-18. Recovery Residence Services	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	SB 65 (2025 General Session), HB 296 (2025 General Session), HB 347 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
The purpose of this amendment is to ensure compliance of the Office of Licensing (OL), under the Department of Health and Human Services (department), with multiple legislative actions from the 2025 General Session that impact this rule, including SB 65, HB 296, and HB 347.	
SB 65 (2025) added and amended definitions in Section 26B-2-101 and required OL to establish and enforce rules relating to medication assisted treatment for qualifying recovery residence providers.	

SB 65 (2025) also prohibits qualifying recovery residence providers from denying any client services solely based on any client receiving medication assisted treatment from a licensed healthcare provider and requires an allowance for continued use of the treatment while the client is receiving services in this license setting. SB 65 (2025) makes it necessary for OL to update language in this rule to align with the new requirement for this type of provider regulated by OL.

HB 296 (2025) made the distinction between recovery residence and residential vocation or life skills providers, updated the definition for a recovery residence to exclude residential vocational or life skills programs, and removed the requirement for any residential vocational or life skills provider to be licensed and regulated by OL. HB 296 (2025) makes it necessary for OL to update the definition of "recovery residence" to no longer include residential vocational or life skills programs as a type of provider under recovery residences that are licensed and regulated by OL.

HB 347 (2025) added and amended definitions in Section 26B-2-101 and Section 26B-2-110 and amended provisions related to the licensing of substance use and mental health providers regulated by OL. HB 347 (2025) required OL to create a process for any adult substance use and mental health provider with a nationally recognized, applicable accreditation to receive deemed status and opt out of annual inspections by OL if the provider submits documentation from the accrediting organization to OL about any inspection record and finding, and any corrective action plan related to an inspection finding. HB 347 (2025) makes it necessary for OL to update language in this rule to align with the requirements for deeming sites of mental health and substance use providers regulated by OL.

#### **5. Summary of the new rule or change:**

To support the implementation of legislation from the 2025 General Session, this amendment updates and adds content in this rule to reflect the required legislative actions impacting OL.

To implement changes from HB 296 (2025), this amendment updates the definition of "recovery residence" to reflect the distinction between recovery residences and residential vocation or life skills providers.

To implement the provisions of HB 347 (2025), this amendment adds the definitions of "good standing," and "deemed site." Additionally, a new section is created to detail the process for a mental health and substance use provider to seek deemed status for a site serving adults meeting certain requirements to support the implementation of HB 347 (2025).

To implement SB 65 (2025), content is added to this rule about qualifying residential treatment providers serving clients receiving medication assisted treatment.

The filing clarifies language related to requirements throughout this rule.

This filing updates the title catchline, combines the Authority and Purpose sections into one section, and adds a Scope section to include any applicable federal, state, or local law, rule, or ordinance the provider is required to comply with and removes those references throughout this rule.

The rule amendment also makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

### **Fiscal Information**

#### **6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:**

##### **A. State budget:**

To implement HB 296 (2025), the aggregate anticipated annual cost to the department is \$150 through Fiscal Year 2027. The figure came from deducting the potential loss of revenue from annual licensing fees associated with this provider type from the cost savings related to staffing costs by reducing the licensing workload as recovery residence providers offering only residential vocation or life skills will no longer have to be licensed and regulated under OL.

Aggregate annual costs are only provided through Fiscal Year 2027, as the department anticipates the three recovery residence services providers offering residential vocational or life skills programs will not seek renewal after Fiscal Year 2027. To implement the provisions of HB 296 (2025), there is no anticipated aggregate savings to the department.

Additionally, the implementation of provisions related to HB 347 (2025), which involves the development of a process to deem any of site of adult substance use and mental health providers with a national accreditation, may result in a \$500 cost savings annually per deemed site for the department by allowing these providers to forgo the annual state inspection, reducing the number of on-site inspections OL staff need to conduct on annual basis. This \$500 savings has already been captured in the fiscal note of HB 347 (2025), available on the Utah Legislature's website.

The department estimates that up to 30 sites under this type of provider may participate in the deeming process in Fiscal Year 2026, resulting in a potential \$15,000 cost savings in Fiscal Year 2026 for the department. The department estimates that in subsequent fiscal years, up to five sites under this type of provider may participate in the deeming process, resulting in a potential cost savings of \$2,500 in Fiscal Year 2027 through Fiscal Year 2030 for the department. As any cost is captured in the fiscal note of HB 347 (2025), there is no anticipated cost to the state budget to implement the provisions of HB 347 (2025).

For the implementation of SB 65 (2025), there is no anticipated cost or savings to the state budget as a result of this amendment. Recovery residence providers are already regulated by OL, and the department notified providers about the new requirements related to implementation of SB 65 (2025).

The department added the requirements for any qualifying recovery residence provider to not solely deny any client under a medication assisted treatment services in a recovery residence and allow these clients to continue the treatment to any applicable department inspection checklist, which will not result in any measurable cost or savings to the state budget.

The department does not anticipate any fiscal impact on the state budget as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

#### **B. Local governments:**

To support the implementation of multiple legislative actions from the 2025 General Session, including SB 65, HB 296, and HB 347 that relate to this proposed rule amendment, there is no anticipated impact on local governments' revenues or expenditures because these providers are regulated by OL and not local governments.

There will be no change in local business licensing or any other item with which local government is involved. There are no fiscal impacts to local governments resulting from the changes in this rule content relating to these legislative actions.

The department also does not anticipate any fiscal impact on local governments as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

#### **C. Small businesses** ("small business" means a business employing 1-49 persons):

The implementation of SB 65 (2025) related to the proposed rule amendment may result in a small compliance cost for small businesses, including licensed facilities providing recovery residence services. The implementation of SB 65 (2025) includes additional requirements for these providers. The aggregate anticipated cost for small businesses is not measurable at this time and will require OL to begin enforcing these new requirements during licensing reviews to understand the cost of implementation of additional requirements related to implementation of SB 65 (2025).

Furthermore, the department does not know the exact cost for each provider to implement the additional requirements of this rule from SB 65 (2025) but anticipates the cost will be minimal. Providers were notified in May 2025 about the additional requirements.

For the implementation of HB 296 (2025) relating to this filing, there may be an anticipated annual, aggregate savings of \$550 per provider that is no longer required to be licensed by OL, up \$550 in Fiscal Year 2026 and 2027 for one provider that may be a small business. The aggregate savings figure is based on the annual cost of licensing fees for this type of provider.

There is no anticipated cost or savings to small businesses due to the rule changes related to HB 347 (2025). Adult substance use and mental health providers, under recovery residence licensure, are still required to pay any licensing fee if participating in the process to receive deemed status for a site with a department-approved national accreditation. The deeming process is optional for providers, not a requirement. Providers were notified in May 2025 about the optional deeming process.

The department does not anticipate any fiscal impact on small businesses as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

#### **D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

The implementation of SB 65 (2025) related to the proposed rule amendment may result in a small compliance cost for non-small businesses, including licensed facilities providing recovery residence services. The implementation of SB 65 (2025) includes additional requirements for these providers. The aggregate anticipated cost for non-small businesses is not measurable at this time and will require OL to begin enforcing these new requirements during licensing reviews to understand the cost of implementation for additional requirements related to implementation of SB 65 (2025).

Furthermore, the department does not know the exact cost for each provider to implement the additional requirements of this rule from SB 65 (2025) but anticipates the cost will be minimal. Providers were notified in May 2025 about the additional requirements.

For the implementation of HB 296 (2025) relating to this filing, there may be an anticipated annual, aggregate savings of \$550 per provider that is no longer required to be licensed by the department, up \$1,100 in Fiscal Year 2026 and 2027 for two providers that may be a non-small business. The aggregate savings figure is based on the annual cost of licensing fees for this type of provider.

There is no anticipated cost or savings to non-small businesses due to the rule changes related to the implementation of HB 347 (2025). Adult substance use and mental health providers, under recovery residence licensure, are still required to pay any licensing fee if participating in the process to receive deemed status for a site with a department-approved national accreditation. The deeming process is optional for providers, not a requirement. Providers were notified in May 2025 about the optional deeming process.

The department does not anticipate any fiscal impact on non-small businesses as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an *agency*):

This rule amendment relating to implementing provisions of SB 65, HB 296, and HB 347 (2025) is not anticipated to result in a cost or savings to persons other than small businesses, non-small businesses, state, or local governments entities as it applies only to recovery residence providers, who are either small business or non-small businesses.

There are no other persons affected by this rule filing.

The department does not anticipate any fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

**F. Compliance costs for affected persons:**

For implementation of SB 65, HB 296, and HB 347 (2025), affected persons would be small and non-small businesses providing recovery residence programs regulated by OL, under the department.

No other affected persons would be subject to compliance with this rule filing and there is no anticipated cost associated with this filing to any other affected persons.

There is no compliance cost for recovery residence providers due to the implementation of HB 296 (2025). The legislation removes the licensing requirement for certain types of recovery residence providers offering only offering only residential vocation or life skills programs. These providers would no longer be subject to annual licensing fees.

Providers who are affected persons must comply with the additional requirements outlined in SB 65 (2025). There may be a small compliance cost for licensed facilities providing recovery residence services to meet the requirement for any qualifying recovery residence provider to not solely deny any client under a medication assisted treatment admission into the program and an allowance for the client to continue to receive the treatment while in a qualifying recovery residence.

The department anticipates any compliance cost will be minimal as these providers are already regulated by OL, although the department does not know the exact cost for each provider to implement the additional requirements. Measuring any compliance cost for recovery residence providers will require OL to begin enforcing this new requirement during licensing reviews.

Providers meeting the requirements to "deem" sites with a national accreditation approved by the department as outlined in HB 347 (2025) have the option to participate in this deeming process and will no longer be subject to the annual inspection conducted by OL but are still required to pay any licensing fee and meet any requirement associated with the deeming process, including the submission of accreditation documentation.

There is no anticipated compliance cost for providers due to the rule changes related to HB 347 (2025), as the deeming process is optional for providers.

The department has notified providers about SB 65, HB 296, and HB 347 (2025) and the department does not anticipate any compliance cost for OL as these providers are already regulated by OL.

The department does not anticipate any compliance cost for affected persons as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-2-104

Section 26B-2-117

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

**Agency head or designee and title:**

Tracy S. Gruber, Executive Director

**Date:**

11/02/2025

**R501. Health and Human Services, [~~Administration, Administrative Services, Licensing~~] Human Services Program Licensing.**

**R501-18. Recovery Residence Services.**

**R501-18-1. Authority and Purpose.**

(1) Sections 26B-2-104 and 26B-2-117 authorize this rule.

(2) This rule provides the basic health and safety standards for recovery residences.

**R501-18-2. [~~Purpose:~~**

~~This rule establishes:~~

~~(1) Basic health and safety standards for recovery residences; and~~

~~(2) Minimum administration requirements.~~**R501-18-3. Definitions.**

The terms used in this rule are defined in Rules R501-1 and R380-600 and Section 26B-2-101. Additionally:

~~(1) "Currently Enrolled Client" is an individual who is a participatory resident of the sober living environment of a recovery residence and is also referred to as client in Title R501.~~

~~(2) "Provider" means the same as licensee as defined in Section 26B-2-101.~~

~~(1) "Deemed site" means:~~

~~(a) the same as defined in Section 26B-2-110; and~~

~~(b) a human services program identified by a single geographic location and linked to the parent program, if one exists.~~

~~(2) "Good standing" means the same as defined in Section 26B-2-110.~~

~~(3) "Recovery [R]residence" [is defined in Section 26B-2-101 and is also referred to as sober living.] means the same as defined in Section 26B-2-101.~~

~~(a) Recovery residence includes sober living.~~

~~(b) Recovery residence does not include a residential vocational or life skills program.~~

~~(4) "Supportive services" includes:~~

~~(a) vocational services;~~

~~(b) peer support;~~

~~(c) skills training; and~~

~~(d) community resource referral.~~

**R501-18-3. Scope.**

Each provider shall comply with any applicable federal, state, or local law, rule, or ordinance, including:

~~(1) Rule R380-80;~~

~~(2) Rule R380-600;~~

~~(3) Rule R501-1;~~

~~(4) Rule R501-14; and~~

~~(5) this rule.~~

**R501-18-4. Legal Requirements.**

~~(1) In addition to this rule, the provider shall comply with Rules R501-1, General Provisions and R501-14, Human Service Program Background Screenings and any applicable local, state, and federal laws.~~

~~(2) 1] The provider shall comply with Rule R501-14 for background screenings by either:~~

~~(a) participating in the background clearances for ~~all~~ any staff; or~~

~~(b) obtaining an approval by the Division of Licensing and Background Checks for an exemption as outlined in Rule R501-14.~~

~~(3) 2] A provider that offers clinical treatment services~~3]~~ shall obtain a residential treatment license or applicable separate outpatient or day treatment license.~~

~~(a) Clinical treatment may not be a mandatory condition of residence.~~

~~(b) Clinical treatment may not be offered within the recovery residence.~~

~~(4) 3] A provider that offers social detoxification services shall obtain a separate social detoxification license before offering any social detoxification services.~~

~~(4) A provider may [The provider shall] not provide housing or services to a client in active withdrawal[-] without a social detoxification license issued by the department.~~

~~(5) A recovery residence program shall only serve adults.~~

**R501-18-5. Administration.**

~~(1) The provider shall ensure that clients receive supportive services from a person associated with the licensee or from a licensed professional. [Supportive services include:~~

~~(a) vocational services;~~

~~(b) peer support;~~

~~(c) skills training; and~~

~~(d) community resource referral.]~~

~~(2) The provider may not offer, entice, refer, or recommend medical cannabis for residents in a recovery residence or as treatment for substance use disorder, as it is not considered a qualifying condition in Subsection 26B-4-203(2).~~

**R501-18-6. Staffing.**

~~(1) The provider shall contract with, or otherwise provide as needed, referral information for client access to ~~a~~ the following:~~

~~(a) physician;~~

~~(b) psychiatrist;~~

~~(c) mental health therapist (LCMHT); or~~

~~(d) substance use disorder counselor (SUD[S]C).~~

~~(2) The provider shall identify a director who shall have:~~

## NOTICES OF PROPOSED RULES

- (a) Utah licensure, in good standing, as a ~~[substance use disorder counselor]~~ SUDC, licensed clinical social worker or equivalent; or
- (b) two years experience in one of the following:
  - (i) administration of a recovery residence;
  - (ii) substance use disorder treatment education; or
  - (iii) recovery or support services education.
- (3) The director's responsibilities that ~~[shall]~~ may not be delegated include:
  - (a) monitoring ~~[all]~~ each aspect[s] of the program and operation of the facility;
  - (b) policy and procedure development, implementation, compliance, and oversight;
  - (c) clearly defining responsibilities of the director, manager, and staff of the program;
  - (d) supervision~~[s]~~ and training of staff; and
  - (e) overseeing client activities.
- (4) The director may manage directly or employ a manager to work under the supervision of the director.
  - (a) The director shall perform the manager's duties when the manager is on scheduled or unscheduled leave unless the manager designates a substitute manager.
  - (b) The manager or substitute manager may not be a currently enrolled client.
- (5) In addition to the staff training requirements of Rule R501-1, the director shall maintain documentation of 40 hours of training covering the following topics for the director, manager, and any direct care staff:
  - (a) recovery services in substance use disorder settings;
  - (b) peer support;
  - (c) emergency overdose reversal;
  - (d) recognition and response to substance-related activities; and
  - (e) current certification in First Aid and CPR~~[, and]~~
- ~~[(6)]~~ [(6)] ~~[A]~~ An employee may not work unsupervised with clients until training is completed and documented.
- ~~[(6)]~~ [(7)] The director or manager shall conduct daily on-site visits to ensure client safety and support clients.
  - (a) The director or manager shall document visits per-site, not per-client.
  - (b) The director or manager shall ~~[utilize]~~ use site visits to assess and document~~[-the following]~~:
    - (i) general safety;
    - (ii) general cleanliness;
    - (iii) verification that only admitted residents reside or stay overnight at the residence;
    - (iv) no presence of alcohol or substances of abuse unless lawfully prescribed; and
    - (v) that medications are in locked storage.
  - ~~[(7)]~~ [(8)] The director or manager shall have documented face-to-face or telephone daily contact with each admitted client.
  - ~~[(8)]~~ [(9)] The director or manager shall ensure there is always administrative on-call availability~~[-at all times]~~ and remain able to respond to the recovery residence staff and the Office of Licensing (OL) immediately by phone, or at the residence in-person within one hour.
  - ~~[(9)]~~ [(10)] The provider shall ensure a director, manager, or substitute manager is on-site seven days per week to assess safety and support clients.
  - [(11)] The provider shall schedule and document daily visits.

### **R501-18-7. Direct Service.**

- (1) In addition to client record requirements of Rule R501-1, the provider shall ensure that ~~[the]~~ each recovery residence client record~~[s]~~ contains:
  - (a) intake documentation indicating that the client meets the admission criteria, that includes~~[-the following]~~:
    - (i) the client is not currently using or withdrawing from alcohol or substances of abuse; and
    - (ii) the client is not presenting with a current clinical assessment that contraindicates this level of care;
  - (b) any client medications;
  - (c) any client allergies;
  - (d) any client chronic conditions;
  - (e) any client communicable diseases;
  - (f) individual recovery plan that includes:
    - (i) documentation of ~~[all]~~ each service[s] provided by the program, including a disclosure that no clinical treatment services occur on-site at the recovery residence; and
    - (ii) documentation of ~~[all]~~ each referred supportive service[s], not directly associated with the recovery residence site;
  - (g) a signed written lease agreement for the recovery residence, if required; and
  - (h) a signed agreement indicating that the client was notified in writing before admission regarding:
    - (i) program and client responsibilities related to transportation to and location of off-site services;
    - (ii) program and client responsibilities related to the provision of toiletries, bedding and linens, laundry, and other household items;
    - (iii) program and client responsibilities related to shopping, provision of food and preparation of meals;
    - (iv) fee disclosures including Medicaid number, insurance information and identification of any other entities who may be billed for the client's services; and
  - (v) rules of the program.
- (2) The recovery plan shall contain the signature and title of the program representative that prepared the plan and the signature of the client.



**R501-18-8. Building and Grounds.**

~~[(1)]~~ In addition to the physical facility requirements of Rule R501-1, the provider shall:

~~[(a)]~~ 1) maintain a client to toilet ratio of 1:10;

~~[(b)]~~ 2) maintain a client to tub or shower ratio of 1:8;

~~[(c)]~~ 3) adhere to the following if a fire clearance is not required from the local fire authority:

~~[(i)]~~ a) a bedroom on the ground floor shall have a minimum of one window that may be used to evacuate the room in case of fire;

and

~~[(ii)]~~ b) a bedroom that is not on the ground floor shall have a minimum of two exits, at least one of which shall exit directly to outside the building that may be used to evacuate the room in case of fire;

~~[(d)]~~ 4) provide either equipment or reasonable access to equipment for washing and drying of linens and clothing;

~~[(e)]~~ 5) maintain an environment free from non-prescribed substances and alcohol;

~~[(f)]~~ 6) ensure client mail addressed to the program site is opened by the client in the presence of program staff to ensure that no contraband enters the program; and

~~[(g)]~~ 7) ensure any unlawful items found on-site are turned over to law enforcement and a critical incident report made to ~~[the office]~~ OL.

**R501-18-9. Medical Standards.**

(1) (a) The provider ~~[shall]~~ may not admit anyone who is currently in an intoxicated state ~~[or]~~ and withdrawing from alcohol or drugs, or otherwise unable to understand terms and consent to reside in the recovery residence.

(b) Any qualifying recovery residence provider:

(i) may not deny any client services solely based on a client receiving medication assisted treatment; and

(ii) shall ensure any client continues the medication assisted treatment while receiving services from the provider.

(2) A provider shall ensure ~~[that] any client[s] [who] overseeing the management [their own]~~ that client's medications keeps ~~[all] any~~ prescription and non-prescription medication[s] in individually accessed locked storage that is not accessible to other clients.

(3) (a) The provider shall ensure that a non-expired opioid reversal kit is safely maintained and available onsite. ~~[, and staff and clients are trained in its proper use.]~~

(b) The provider shall ensure staff and clients are trained on the proper use of the opioid reversal kit.

(4) Medical cannabis is permitted in a recovery residence ~~[only as follows]~~ if:

(a) [for] an individual [who] has a medical cannabis card issued by the [Department of Health and Human Services (DHHS)] department;

(b) the cannabis is obtained from a [DHHS] department-licensed pharmacy with identifying information on the label; and

(c) the cardholder is instructed and adheres to the requirement to ensure medication is not shared and always remains locked [at all times] when not in active use.

**R501-18-10. Requirements for Granting Deemed Status to a Mental Health or Substance Use Disorder Treatment Site.**

(1) The department may grant deemed status to the site of a mental health or substance use disorder treatment program if:

(a) the provider's license for the site is in good standing;

(b) the site only serves adults;

(c) the site is currently accredited from a department-approved national organization; and

(d) the provider submits the licensing documentation from the accrediting organization to the department, including any applicable:

(i) inspection record;

(ii) finding; and

(iii) corrective action plan and a progress report on the site addressing any corrective action plan.

(2) A site with deemed status may opt out of a department renewal inspection.

(3) The department may investigate any complaint or incident involving a deemed site.

(4) The provider is responsible for any renewal licensing fee for each deemed site.

(5) The department shall revoke the deemed site status if:

(a) the site receives any moderate, high, or extreme noncompliance licensing violation from department;

(b) the required accreditation documentation is not submitted to the department;

(c) the accreditation documentation includes any noncompliance violation finding equal to any moderate, high, or extreme state licensing finding level; or

(d) the provider no longer receives national accreditation for the deemed site.

(6) For any provider with multiple deemed sites:

(a) each site must meet the requirements to be granted deemed status; and

(b) the revocation of deemed status for any single site does not impact the status of any other site unless any condition listed in Subsection (5) applies to the other site.

**KEY: licensing, human services, recovery residence**

**Date of Last Change: ~~[August 2, 2023]~~ 2025**

**Notice of Continuation: December 2, 2024**

**Authorizing, and Implemented or Interpreted Law: 26B-2-104; 26B-2-117**

## NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment

Rule or section number:

R501-19

Filing ID: 57647

## Agency Information

<b>1. Title catchline:</b>	Health and Human Services, Human Services Program Licensing	
<b>Building:</b>	Multi-Agency State Office Building	
<b>Street address:</b>	195 N 1950 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	PO Box 142003	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-2003	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

## General Information

<b>2. Rule or section catchline:</b>	
R501-19. Residential Treatment Programs	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	SB 65 (2025 General Session) and HB 347 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
<p>The purpose of this amendment is to ensure compliance of the Office of Licensing (OL), under the Department of Health and Human Services (department), with multiple legislative actions from the 2025 General Session that impact this rule, including SB 65 and HB 347.</p> <p>SB 65 (2025) added and amended definitions in Section 26B-2-101 and required OL to establish and enforce rules relating to medication assisted treatment for qualifying residential treatment providers. SB 65 (2025) prohibits qualifying providers from denying any client services solely based on any client receiving medication assisted treatment from a licensed healthcare provider and requires an allowance for continued use of the treatment while the client is receiving services in this license setting. SB 65 (2025) makes it necessary for OL to update language in this rule to align with the new requirement for this type of provider regulated by OL.</p> <p>HB 347 (2025) added and amended definitions in Section 26B-2-101 and Section 26B-2-110 and amended provisions related to the licensing of substance use and mental health providers regulated by OL. HB 347 (2025) required OL to create a process for any adult substance use and mental health provider with a nationally recognized, applicable accreditation to receive deemed status and opt out of annual inspections by OL if the provider submits documentation from the accrediting organization to OL about any inspection record and finding, and any corrective action plan related to an inspection finding. HB 347 (2025) makes it necessary for OL to update language in this rule to align with the requirements for deeming sites of mental health and substance use providers regulated by OL.</p>	
<b>5. Summary of the new rule or change:</b>	
<p>To support the implementation of legislation from the 2025 General Session, this amendment updates and adds content in this rule to reflect the required legislative actions impacting OL.</p> <p>To implement changes from HB 296 (2025), this amendment updates the definition of "recovery residence" to reflect the distinction between recovery residences and residential vocation or life skills providers. To implement the provisions of HB 347, this amendment adds the definitions of "good standing," and "deemed site."</p> <p>Additionally, a new section is created to detail the process for a mental health and substance use provider to seek deemed status for a site serving adults meeting certain requirements to support the implementation of HB 347 (2025).</p>	

Also, unnecessary content in the definition for "Emergency safety intervention" is removed and added to the appropriate section in this rule.

To implement SB 65 (2025), content is added to about qualifying residential treatment providers serving clients receiving medication assisted treatment.

The filing clarifies language related to requirements throughout the rule. This filing updates the title catchline, combines the Authority and Purpose sections into one section, and adds a Scope section to include any applicable federal, state, or local law, rule, or ordinance the provider is required to comply with and removes those references throughout this rule.

The rule amendment also makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

### Fiscal Information

#### 6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:

##### A. State budget:

For the implementation of SB 65 (2025) relating to this rule, there is no anticipated cost or savings to the state budget as a result of this amendment.

The department notified providers about the new requirements related implementation of SB 65 (2025). OL will add the requirements for any qualifying residential treatment provider to not solely deny any client under a medication assisted treatment services and allow these clients to continue the treatment to any applicable OL inspection checklist, which will not result in any measurable cost or savings to the state budget.

Additionally, the implementation of provisions related to HB 347 (2025), which involves the development of a process to deem any of site of adult substance use and mental health providers with a national accreditation, may result in a \$500 cost savings annually per deemed site for the department by allowing these providers to forgo the annual state inspection, reducing the number of on-site inspections OL staff need to conduct on annual basis. This \$500 savings has already been captured in the fiscal note of HB 347 (2025), available on the Utah Legislature's website.

The department estimates that up to 30 sites under this type of provider may participate in the deeming process in Fiscal Year 2026, resulting in a potential \$15,000 cost savings in Fiscal Year 2026 for the department. The department estimates that in subsequent fiscal years, up to five sites under this type of provider may participate in the deeming process, resulting in a potential cost savings of \$2,500 in Fiscal Year 2027 through Fiscal Year 2030 for the department. As any cost is captured in the fiscal note of HB 347 (2025), there is no anticipated cost to the state budget to implement the provisions of HB 347 (2025).

The department does not anticipate any fiscal impact on the state budget as a result of the style and formatting changes included in this rule amendment.

##### B. Local governments:

To support the implementation of multiple legislative actions from the 2025 General Session, including SB 65, and HB 347 (2025) that relate to this proposed rule amendment, there is no anticipated impact to local governments' revenues or expenditures because residential treatment facilities are regulated by OL and not local governments.

There will be no change in local business licensing or any other item with which local government is involved. There are no fiscal impacts to local government resulting from the changes in this rule content relating to legislative actions.

The department does not anticipate any fiscal impact on local governments as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

##### C. Small businesses ("small business" means a business employing 1-49 persons):

The implementation of SB 65 (2025) related to the proposed rule amendment may result in a small compliance cost for small businesses, including licensed facilities providing residential treatment services. The implementation of SB 65 (2025) includes additional requirements for these providers.

The aggregate anticipated cost for small businesses is not measurable at this time and will require OL to begin enforcing these new requirements during licensing reviews to understand the cost of implementation for additional requirements related to implementation of SB 65 (2025).

Furthermore, the department does not know the exact cost for each provider to implement the additional requirements of this rule from SB 65 (2025) but anticipates the cost will be minimal. Providers were notified in May 2025 about the additional requirements.

There is no anticipated cost or savings to small businesses due to the rule changes related to HB 347 (2025). Adult substance use and mental health providers, under residential treatment licensure, are still required to pay any licensing fee if participating in the process to receive deemed status for a site with a department-approved national accreditation. The deeming process is optional for providers, not a requirement. Providers were notified in May 2025 about the optional deeming process.

The department does not anticipate any fiscal impact on small businesses as a result of the style and formatting changes and additional clarifying language included in this rule amendment.

#### **D. Non-small businesses ("non-small business" means a business employing 50 or more persons):**

The implementation of SB 65 (2025) related to the proposed rule amendment may result in a small compliance cost for non-small businesses, including licensed facilities providing residential treatment services. The implementation of SB 65 (2025) includes additional requirements for these providers.

The aggregate anticipated cost for non-small businesses is not measurable at this time and will require OL to begin enforcing these new requirements during licensing reviews to understand the cost of implementation for additional requirements related to implementation of SB 65 (2025).

Furthermore, the department does not know the exact cost for each provider to implement the additional requirements of this rule from SB 65 but anticipates the cost will be minimal. Providers were notified in May 2025 about the additional requirements.

There is no anticipated cost or savings to non-small businesses due to the rule changes related to HB 347 (2025). Adult substance use and mental health providers, under residential treatment licensure, are still required to pay any licensing fee if participating in the process to receive deemed status for a site with a department-approved national accreditation. The deeming process is optional for providers, not a requirement. Providers were notified in May 2025 about the optional deeming process.

The department does not anticipate any fiscal impact on non-small businesses as a result of the style and formatting changes and additional clarifying language included in this rule amendment.

#### **E. Persons other than small businesses, non-small businesses, state, or local government entities ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an *agency*):**

This rule amendment relating to implementing provisions of SB 65 (2025), and HB 347 (2025) is not anticipated to result in a cost or savings to persons other than small businesses, non-small businesses, state, or local governments entities as it applies only to residential treatment providers, who are either small business or non-small businesses.

There are no other persons affected by this rule filing.

The department does not anticipate any fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities as a result of the style and formatting changes included in this rule amendment.

#### **F. Compliance costs for affected persons:**

For implementation of SB 65 (2025), and HB 347 (2025), affected persons would be small and non-small businesses providing residential treatment programs regulated by OL, under the department.

No other affected persons would be subject to compliance with this rule filing and there is no anticipated cost associated with this filing to any other affected persons.

Providers who are affected persons must comply with the additional requirements outlined in SB 65 (2025). There may be a small compliance cost for licensed facilities providing residential treatment services to meet the requirement for any qualifying residential treatment provider to not solely deny any client under a medication assisted treatment admission into the program and an allowance for the client to continue to receive the treatment while in a qualifying residential treatment.

The department anticipates any compliance cost will be minimal as these providers are already regulated by OL, although the department does not currently know the exact cost for each provider to implement the additional requirements. Measuring any compliance cost for residential treatment providers will require OL to begin enforcing this new requirement during licensing reviews.

Providers meeting the requirements to "deem" sites with a national accreditation approved by the department as outlined in HB 347 (2025) have the option to participate in this deeming process and will no longer be subject to the annual inspection conducted by OL but are still required to pay any licensing fee and meet any requirement associated with the deeming process, including the submission of accreditation documentation.

There is no anticipated compliance cost for providers due to the rule changes related to HB 347 (2025), as the deeming process is optional for providers.

The department has notified providers about SB 65 (2025), and HB 347 (2025) and the department does not anticipate any compliance cost for OL as these providers are already regulated by OL.

The department does not anticipate any fiscal impact on affected persons as a result of the style and formatting changes included in this rule amendment.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$00</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-2-104	Section 26B-2-117	
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**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

### Agency Authorization Information

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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## **R501. Health and Human Services, Human Services Program Licensing.**

### **R501-19. Residential Treatment Programs.**

#### **R501-19-1. Authority and Purpose.**

- (1) ~~[This rule is authorized by]~~ Sections 26B-2-104 and 26B-2-117 authorize this rule.
- (2) ~~[and]~~ This rule establishes standards for licensed providers to provide residential treatment and intermediate secure care.
- (2) ~~This rule supplements the general provisions required of each human services program outlined in Rules R501-1 and R380-600.]~~

#### **R501-19-2. Definitions.**

~~[(1)]~~ Terms ~~[used]~~ in this rule are defined in Rules R380-600 and R501-1, ~~[R380-600]~~ and Section 26B-2-101. Additionally:

- (1) "Deemed site" means:
- (a) the same as defined in Section 26B-2-110; and
- (b) a human services program identified by a single geographic location and linked to the parent program, if one exists.
- (2) ~~(a) "Emergency safety intervention" is defined in Section 26B-2-101 and is a restraint reserved at the highest level as a last resort to gain immediate safety through methods that in a non-emergency situation would be considered cruel, unusual, or unnecessary.~~
- ~~(b) An emergency safety intervention is not considered a behavioral compliance method and is only used to ensure immediate safety of a client or staff member.]~~ "Good standing" means the same as defined in Section 26B-2-110.

#### **R501-19-3. Scope.**

Each provider shall comply with any applicable federal, state, or local law, rule, or ordinance, including:

- (1) Rule R380-80;
- (2) Rule R380-600;
- (3) Rule R501-1;
- (4) Rule R501-14; and
- (5) this rule.

#### **R501-19-~~[3]~~4. Administration.**

(1) Each residential treatment provider shall document local government approval, as described in Section 26B-2-117, for new program services or increased consumer capacity ~~[as described in Section 26B-2-117].~~

(2) Any qualifying residential treatment provider:

- (a) may not deny any client services solely based on a client receiving medication assisted treatment; and
- (b) shall ensure any client continues the medication assisted treatment while receiving services from the provider.

~~[(2)]~~ Each residential treatment provider shall ensure ~~[its]~~ policies include client privacy accommodation in each bedroom space while ~~[assuring]~~ ensuring client health and safety.

~~[(3)]~~ Each residential treatment provider serving a child shall:

- (a) provide direct supervision that meets supervision and ratio requirements described in this section;
- (b) ensure two direct care staff are always on duty;
- (c) maintain a staff-to-client ratio of one staff to every four clients except:
- (i) as otherwise required by a Department of Health and Human Services (department) contract; or
- (ii) to reduce ratios to one staff to every 16 clients during client sleeping hours;
- (d) only decrease the number of staff as described in this section if:
- (i) each client is appropriately supervised to ensure health and safety at the ratio; and
- (ii) each direct care staff remains awake while on duty;
- (e) increase the staff-to-client ratio as necessary to ensure the health and safety of the current client population;
- (f) only allow direct care staff to perform direct supervision with line of sight check-ins every 15 minutes;
- (g) ensure that any direct care staff member assigned to a client's one-on-one supervision is not counted at the same time in the staffing ratio for any other client, except in an emergency situation;
- (h) only utilize on-site video surveillance to directly supervise a client in time out or seclusion or as an enhancement to minimum supervision ratio requirements;
- (i) conduct and document physical check-ins every 15-minutes when a client is being monitored by video; and
- (j) only use video surveillance in a bedroom:
- (i) with client, parent, or guardian permission;
- (ii) when there is a documented need;
- (iii) when the provider monitors any camera[s] or physically checks in at intervals of 15 minutes or less; and
- (iv) when video surveillance complies with Rule R539-3 for serving an individual with disabilities.

(~~14~~)5 Each residential treatment provider serving a child may provide step-down privileges, ~~including~~ authorized departures from the program and unsupervised time ~~and authorized departures from the program~~, if the provider:

- (a) maintains a staff-to-client ratio of one direct care staff to every four clients;
- (b) documents in the client record and communicates to each of the client's direct care staff ~~;~~:

~~(i) the individualized justification for the step-down privileges; and~~

~~(ii) which privileges are authorized by a clinical professional;~~

(c) obtains written parental or guardian consent before allowing step-down privileges; and

(d) provides a policy to each client and parent or guardian that includes:

(i) a description of what constitutes authorized departure and unsupervised time;

(ii) a description of how each step-down privilege, including authorized departure or unsupervised time, is achieved ~~and~~ or rescinded;

(iii) a statement that the provider will immediately communicate to each client parent or guardian and direct care staff when ~~the~~ any step-down privilege[s] has ~~ve~~ been rescinded; and

(iv) a statement that no step-down client is allowed to perform any direct care staff duty ~~ies~~.

(~~5~~)6 Each residential treatment provider shall make any necessary accommodation to allow a child to continue ~~that~~ the child's education with a curriculum approved by the State Board of Education.

(~~6~~)7 Each residential treatment provider that offers education shall ~~utilize~~ use a curriculum that is recognized by an educational accreditation organization, including the State Board of Education or the National School Accreditation Board.

(~~7~~)8(a) In addition to the behavior management policy and training requirements listed in Rule R501-1, each residential treatment provider serving youth shall ensure each direct care staff member is trained through a nationally or regionally recognized curriculum and can recognize the difference between a restraint and an emergency safety intervention.

~~(b) An emergency safety intervention may not be used as a behavioral compliance method.~~

~~(c) The provider shall only use an emergency safety intervention to ensure immediate safety of a client or staff member.~~

~~(b)~~d An emergency safety intervention is subject to each requirement of a restraint for reporting, debriefing, clinical reviews, and training.

(~~e~~)e An emergency safety intervention may exceed the limitations of any restraint listed in Rule R501-1 with documented justification explaining why a regular restraint or another less intrusive intervention was not used.

(~~8~~)9 Each residential treatment provider serving adults may admit a 17-year-old individual if the provider:

(a) obtains written permission from the individual's parent or legal guardian;

(b) provides clinical justification;

(c) ensures that the individual sleeps in a room;

~~(i) [a]separate [room] from any adult[s]; or~~

~~(ii) [a room] that the individual shares with one or more adults no more than two years older than the individual;~~

(d) ensures that any adult with direct access to the ~~[17-year-old]~~ individual is directly supervised by a direct care staff; and

(e) ensures enhanced safety and supervision measures for treating a minor in an adult setting.

(~~9~~)10 Each residential treatment provider providing services to a substance use disorder client shall:

(a) only admit a substance use disorder client with a level of care that falls within American Society of Addiction Medicine levels 3.1 through 3.5; and

(b) obtain any required license[s] before providing any service to a substance use disorder client outside of the residential ~~[milieu]~~ setting with a level of care described in Subsection (~~8~~)10(a), unless otherwise outlined in categorical rule.

(~~10~~)11 Each residential treatment provider that allows a client to participate in food preparation shall ensure the client is trained in safe food handling practices and the provider justifies the client's participation in writing.

(~~11~~)12 Each residential treatment provider shall provide individual, group, and family counseling or other treatment, including skills development, at least weekly or as outlined in the individual's treatment plan.

(~~12~~)13 A clinical professional shall oversee any therapeutic services conducted in the therapeutic environment including:

(a) life skill development;

(b) psychoeducation; and

(c) social coaching.

(~~13~~)14 Each residential treatment provider shall document the time and date of each service provided to each client and include the signature of the individual providing the service.

(~~14~~)15 Each residential treatment provider shall provide indoor space for free time and informal client activities.

#### **R501-19-~~14~~5. Requirements for Intermediate Secure Treatment.**

(1)(a) Each intermediate secure treatment provider shall clearly define in policy the responsibilities of the manager described in Section R501-1-15.

(b) The ~~[licensee]~~ provider shall ensure the manager described in Subsection R501-1-15(2):

(i) is at least 25 years ~~of age~~ old;

(ii) has a bachelor's degree or equivalent training in a human service-related field; and

(iii) has at least three years management experience in a residential or secure treatment setting.

(2)(a) Subsection R501-19-~~3~~4(~~3~~)4(c) does not apply to an intermediate secure treatment provider serving youth.

(b) An intermediate secure treatment provider serving youth shall maintain a staff-to-client ratio of one staff to every five clients.

## NOTICES OF PROPOSED RULES

(3) Each intermediate secure treatment provider shall ensure that each direct care staff working in an intermediate secure treatment program;

- (a) is trained to work with a child with behavioral or mental health needs; and
- (b) works under the supervision of a licensed clinical professional.

(4) Each intermediate secure treatment provider shall ensure each direct care staff completes 30 hours of additional training annually regarding:

- (a) client record and incident documentation;
- (b) client rules;
- (c) human relations and communication skills;
- (d) maintaining staff, client, and visitor safety in a secure setting;
- (e) problem-solving and guidance;
- (f) the special needs of children and families; and
- (g) universal precautions for blood-borne pathogens.

(5) Each intermediate secure treatment provider shall incorporate the use of fixtures and furnishings that help limit self-harm and suicide, including:

- (a) non-exposed fire sprinkler heads;
- (b) plexiglass or safety glass;
- (c) pressure release robe hooks;
- (d) recessed lighting; and
- (e) sealed light fixtures.

### **R501-19-[5]6. Specialized Services Required to Serve Clients Under the Division of Services for People with Disabilities.**

(1) Each residential treatment provider serving a Division of Services for People with Disabilities (DSPD) client shall:

(a) apply for any unearned income benefits for which the client is eligible, in conjunction with the support coordinator for DSPD and each client's parent or guardian;

(b) develop and adhere to policies and procedures governing the daily operation and activity available and applicable to each client [and] or visitor;

(c) ensure the facility is located within a reasonable distance from a:

- (i) church;
- (ii) recreation [and] or other community facility; and
- (iii) school;

(d) maintain a record of any income and client service fee;

(e) maintain a [a-accurate] record of each fund deposited with the residential facility for client use;

(f) maintain a list of each deposit and withdrawal;

(g) maintain a receipt signed by the client and professional staff for any purchase over \$20;

(h) maintain a record of each client's petty cash fund;

(i) present each client with an individual plan that addresses appropriate day treatment;

(j) share a monthly activity schedule with each client; and

(k) specify, in policy, the amount of time any non-client individual may stay as an overnight guest.

(2) If there is a conflict between [a-licensing] this rule and the settings [final] rule, as defined in Rule R501-1, the settings [final] rule shall prevail.

### **R501-19-7. Requirements for Granting Deemed Status to a Mental Health or Substance Use Disorder Treatment Program Site.**

(1) The department may grant deemed status to the site of a mental health or substance use disorder treatment program if:

(a) the provider's license for the site is in good standing;

(b) the site only serves adults;

(c) the site is currently accredited from a department-approved national organization; and

(d) the provider submits the licensing documentation from the accrediting organization to the department, including any applicable:

(i) inspection record;

(ii) finding; and

(iii) corrective action plan and a progress report on the site addressing any corrective action plan.

(2) A site with deemed status may opt out of a department renewal inspection.

(3) The department may investigate any complaint or incident involving a deemed site.

(4) The provider is responsible for any renewal licensing fee for each deemed site.

(5) The department shall revoke the deemed site status if:

(a) the site receives any moderate, high, or extreme noncompliance licensing violation from department;

(b) the required accreditation documentation is not submitted to the department;

(c) the accreditation documentation includes any noncompliance violation finding equal to any moderate, high, or extreme state licensing finding level; or

(d) the provider no longer receives national accreditation for the deemed site.

(6) For any provider with multiple deemed sites:

(a) each site must meet the requirements to be granted deemed status; and



(b) the revocation of deemed status for any single site does not impact the status of any other site unless any condition listed in Subsection (5) applies to the other site.

**R501-19-[6]8. Compliance.**

Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

**KEY:** human services, licensing, residential treatment, congregate care

**Date of Last Change:** ~~February 10,~~ 2025

**Notice of Continuation:** February 28, 2025

**Authorizing, and Implemented or Interpreted Law:** 26B-2-104; 26B-2-117

**NOTICE OF SUBSTANTIVE CHANGE**

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R501-21**

**Filing ID:** 57648

**Agency Information**

<b>1. Title catchline:</b>	Health and Human Services, Human Services Program Licensing	
<b>Building:</b>	Multi-Agency State Office Building	
<b>Street address:</b>	195 N 1950 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	PO Box 142003	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-2003	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule or section catchline:</b>	
R501-21. Outpatient Treatment Programs	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 347 (General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
<p>The purpose of this amendment is to ensure compliance of the Office of Licensing (OL) under the Department of Health and Human Services (department) with HB 347 from the 2025 General Session.</p> <p>HB 347 (2025) added and amended definitions in Section 26B-2-101 and Section 26B-2-110 and amended provisions related to the licensing of substance use and mental health providers regulated by OL.</p> <p>HB 347 (2025) required OL to create a process for any adult substance use and mental health provider with a nationally recognized, applicable accreditation to receive deemed status and opt out of annual inspections by OL if the provider submits documentation from the accrediting organization to OL about any inspection record and finding, and any corrective action plan related to an inspection finding.</p> <p>HB 347 (2025) gives OL rulemaking authority to implement and enforce Section 26B-2-110.</p> <p>HB 347 (2025) makes it necessary for OL to update language in this rule to align with the requirements for deeming sites of mental health and substance use providers regulated by OL.</p>	

**5. Summary of the new rule or change:**

Throughout this rule, this amendment changes any use of the term "licensee" to "provider" to align with other human service rules and use a consistent term.

This amendment adds the definitions of "good standing" and "deemed site" related to HB 347 (2025).

Additionally, unnecessary definitions are removed.

This rule adds a reference to the new rulemaking authority in Section 26B-2-110.

The filing clarifies language related to requirements throughout this rule. It combines the Authority and Purpose sections into one section and adds a Scope section to include any applicable federal, state, or local law, rule, or ordinance the provider is required to comply with and removes those references throughout the rule.

Additionally, a new section is created to detail the process for a mental health and substance use provider to seek deemed status for a site serving adults meeting certain requirements to support the implementation of HB 347 (2025). Section references are updated and sections in this rule are renumbered to account for any related renumbering.

The filing also makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

The implementation of provisions related to HB 347 (2025), which involves the development of a process to deem any of site of adult substance use and mental health providers with a national accreditation, may result in a \$500 cost savings annually per deemed site for the department by allowing these providers to forgo the annual state inspection, reducing the number of on-site inspections OL staff need to conduct on annual basis. This \$500 savings has already been captured in the fiscal note of HB 347 (2025), available on the Utah Legislature's website. This is an optional process for providers, and the department estimates that up to 30 sites under this type of provider may participate in the deeming process in Fiscal Year 2026, resulting in a potential \$15,000 cost savings in Fiscal Year 2026 for the department.

The department estimates that in subsequent fiscal years, up to five sites under this type of provider may participate in the deeming process, resulting in a potential cost savings of \$2,500 in Fiscal Year 2027 through Fiscal Year 2030 for the department. As any cost is captured in the fiscal note of HB 347 (2025), there is no anticipated cost to the state budget to implement the provisions of HB 347 (2025).

The department does not anticipate any fiscal impact on the state budget as a result of the style and formatting changes, additional clarifying language changes, and rule reference updates included in this rule amendment.

**B. Local governments:**

To support the implementation of HB 347 (2025), there is no anticipated fiscal impact to local governments' revenues or expenditures because providers are regulated by OL and not local governments.

There will be no change in local business licensing or any other item with which local government is involved.

There are no fiscal impacts to local government resulting from the changes in this rule content relating to implementation of HB 347 (2025).

The department also does not anticipate any fiscal impact on local governments as a result of the style and formatting changes and additional clarifying language changes included in this amendment.

**C. Small businesses ("small business" means a business employing 1-49 persons):**

There is no anticipated cost or savings to small businesses due to the rule changes related to HB 347 (2025). Adult substance use and mental health providers, under outpatient licensure, are still required to pay any licensing fee if participating in the process to receive deemed status for a site with a department-approved national accreditation. The deeming process is optional for providers, not a requirement. Providers were notified in May 2025 about the optional deeming process.

The department does not anticipate any fiscal impact on small businesses as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated cost or savings to non-small businesses due to the rule changes related to HB 347. Adult substance use and mental health providers, under outpatient licensure, are still required to pay any licensing fee if participating in the process to receive deemed status for a site with a department-approved national accreditation. The deeming process is optional for providers, not a requirement. Providers were notified in May 2025 about the optional deeming process.

The department does not anticipate any fiscal impact on non-small businesses as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This amendment is not anticipated to result in a cost or saving to persons other than small businesses, non-small businesses, state, or local governments entities as it applies only to outpatient treatment providers, who are either small business or non-small businesses.

The department does not anticipate any fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

**F. Compliance costs for affected persons:**

For implementation of HB 347 (2025), affected persons would be small and non-small businesses providing outpatient treatment programs regulated by OL, under the department.

No other affected persons would be subject to compliance with this rule filing and there is no anticipated cost associated with this filing to any other affected persons.

The department has notified providers about the optional deeming process required by HB 347 (2025), and the department does not anticipate any compliance cost for OL as these providers are already regulated by OL.

The department does not anticipate any fiscal impact on affected persons as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>H. Department head comments on fiscal impact and approval of regulatory impact analysis:</b>					
The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.					

**Citation Information**

<b>7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:</b>		
Section 26B-2-104	Section 26B-2-110	

**Incorporation by Reference Information**

<b>8. Incorporation by Reference:</b>	
<b>A. This rule adds or updates the following title of material incorporated by reference</b> (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. <i>If none, leave blank</i> ):	
<b>Official Title of Materials Incorporated (from title page)</b>	21 CFR 1300
<b>Publisher</b>	Office of the Federal Register
<b>Issue Date</b>	April 1, 2021
<b>Issue or Version</b>	2021

<b>B. This rule adds or updates the following title of material incorporated by reference</b> (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. <i>If none, leave blank</i> ):	
<b>Official Title of Materials Incorporated (from title page)</b>	21 CFR 1301
<b>Publisher</b>	Office of the Federal Register
<b>Issue Date</b>	April 1, 2021
<b>Issue or Version</b>	2021

<b>C. This rule adds or updates the following title of material incorporated by reference</b> (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. <i>If none, leave blank</i> ):	
<b>Official Title of Materials Incorporated (from title page)</b>	21 CFR 1304
<b>Publisher</b>	Office of the Federal Register
<b>Issue Date</b>	April 1, 2021
<b>Issue or Version</b>	2021

**Public Notice Information**

<b>9. The public may submit written or oral comments to the agency identified in box 1.</b>	
<b>A. Comments will be accepted until:</b>	12/31/2025

<b>10. This rule change MAY become effective on:</b>	01/07/2026
NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R501. Health and Human Services, Human Service Program[s] Licensing.****R501-21. Outpatient Treatment Programs.****R501-21-1. Authority and Purpose.**

(1) ~~[This rule is authorized by]~~ Sections 26B-2-104 and 26B-2-110 authorize this rule.

(2) This rule provides the basic health and safety standards for an outpatient treatment program.

**R501-21-2. Purpose.**

~~The purpose of this rule is to establish outpatient treatment programs to serve clients who require less structure than offered in day treatment or residential treatment programs.~~

**R501-21-3. Definitions.**

Terms used in this rule are defined in Rules R380-600 and R501-1 and Section 26B-2-101. Additionally:

(1) "Deemed site" means:

(a) the same as defined in Section 26B-2-110; and

(b) a human services program identified by a single geographic location and linked to the parent program, if one exists.

(2) "Good standing" means the same as defined in Section 26B-2-110.

~~[(1)(3)]~~ ~~[(a)]~~ "Outpatient treatment" ~~[is]~~ means the same as defined in Section 26B-2-101 ~~[is]~~ and includes early intervention, outpatient services, or intensive outpatient services on the American Society of Addiction Medicine (ASAM) continuum of care.

~~(b) "Partial Hospitalization" on the ASAM continuum of care is not an outpatient service, and instead requires a day treatment license.~~

~~[(2)(4)]~~ (a) "Outpatient ~~[T]~~ treatment ~~[P]~~ program" means a group of two or more individuals, at least one of whom provides outpatient treatment, ~~[and also meets one or more of the following criteria] that:~~

(i) allows an agent[s], contractor[s], person[s] with a financial interest, staff, volunteer[s], or individual[s] who ~~[are]~~ is not excluded under Subsection ~~[R501-21-3]~~ ~~[(3)(4)(b)]~~ to ~~[either]~~:

(A) provide direct client services, which:

~~(I) includes~~ ~~[ing]~~ assessment, case management, education, peer support services, screening, or transportation ~~[, assessment, screening, education, or peer support services];~~ and

~~(II) does not include office tasks unrelated to client treatment, including billing, payroll, scheduling, or standard correspondence; and payroll];~~ or

(B) manage[s] or direct program operations, including ~~[intake,]~~ admissions or discharge, hiring of staff, intake, or setting of fees ~~[, or hiring of staff];~~

(ii) is specifically required by a Department of Health and Human Services (department) contract to be licensed for outpatient treatment;

(iii) offers outpatient treatment services to satisfy criminal court requirements;

~~(iii) is specifically required by a Department of Health and Human Services contract to be licensed for outpatient treatment;~~

(iv) provides services requiring alcohol and drug education by the Office of Substance Use and Mental Health (OSUMH) as described in Rule R523-11; or

(v) refers clients to services that present a conflict of interest or otherwise provide an opportunity for exploitation or fraud by the referring provider ~~[. Services may include,]~~ including laboratory services, private probation, housing, employment, transportation, or travel.

(b) ~~["]~~ Outpatient treatment program ~~["]~~ does not mean:

(i) a group of individuals who are exempt from individual professional licensure under Section 58-1-307;

(ii) a group of individuals who are licensed, certified, or authorized under:

(A) Title 58, Chapters 60, Mental Health Professional Practice Act;

(B) Title 58, Chapter 61, Psychologist Licensing Act;

(C) Title 58, Chapter 67, Utah Medical Practice Act; or

(D) Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; ~~[and]~~ or

(iii) an entity ~~[ies]~~ that ~~[are]~~ is excluded under Section 26B-2-115.

~~[(3)(5)]~~ "Validated ~~[C]~~ criminogenic ~~[S]~~ screen" means an evidence ~~[,]~~ based tool for predicting recidivism and categorizing individuals into risk groups.

**R501-21-3. Scope.**

Each provider shall comply with any applicable federal, state, or local law, rule, or ordinance, including:

(1) Rule R380-80;

(2) Rule R380-600;

(3) Rule R501-1;

(4) Rule R501-14; and

(5) this rule.

**R501-21-4. Administration and Direct Services.**

~~[~~ (1) In addition to this rule, each outpatient treatment program shall comply with Rules R501-1, and R501-14.

~~]~~ ~~[(2)(1)]~~ A ~~[n outpatient treatment program]~~ provider shall:

(a) provide general outpatient treatment;

## NOTICES OF PROPOSED RULES

- ~~\_\_\_\_\_~~ (i) on a weekly basis~~[-];~~ or
- ~~\_\_\_\_\_~~ (ii) ~~only with individualized clinical justification,~~ less than weekly~~[- only with individualized clinical justification;-];~~
- ~~\_\_\_\_\_~~ (b) only provide intensive outpatient treatment, if offered, for:
  - ~~\_\_\_\_\_~~ (i) between ~~[9]~~nine and 19 hours weekly for adults~~[-]; or [-and]~~
  - ~~\_\_\_\_\_~~ (ii) at least six ~~[or more]~~hours weekly for ~~[adolescents]~~youth; and
- ~~\_\_\_\_\_~~ (c) ensure ~~[the following when]~~any client~~[-s are]~~ present in the facility for six or more consecutive hours:
  - ~~\_\_\_\_\_~~ (i) ~~receives[client]~~ meals~~[-]; and [-~~
  - ~~\_\_\_\_\_~~ (ii) ~~administration of~~any required medication~~[-s]; and~~
  - ~~\_\_\_\_\_~~ (iii)~~[-]~~ ~~[maximum]~~is placed in the appropriate group size~~[-s];~~ according to building capacity~~[-]; and [-~~
  - ~~\_\_\_\_\_~~ (iv)~~[-]~~ a physical environment that provides for the comfort of ~~each client[-s]~~.
- ~~\_\_\_\_\_~~ ~~[(3)]~~~~2~~(a) An outpatient treatment provider that provides only telehealth services may apply for a single license for one centralized site to cover any telehealth services offered.
- ~~\_\_\_\_\_~~ (b) ~~[and]~~An outpatient treatment provider that provides only telehealth services shall ensure that any telehealth services provided to an out of state client~~[-s]~~ are done ~~[so]~~in accordance with the telehealth laws of the client's state of residence.

### **R501-21-5. Substance Use Disorder Treatment Programs.**

- (1) Each ~~[substance use disorder treatment program]~~provider shall:
  - (a) develop and implement a plan on how to support opioid overdose reversal;
  - (b) maintain proof of completion of the National Survey of Substance Abuse Treatment Services annually; and
  - (c) ensure medical cannabis is not used as an enticement for a client or offered, referred, or recommended as treatment for substance use disorder.
- (2) A ~~[program]~~provider providing medication for opioid use disorder (MOUD) shall:
  - (a) maintain a program-wide ratio of one counselor [to]for every 65 clients ~~[ratio of: 1:65]~~to provide adequate substance use counseling to each client as clinically necessary; and
  - (b) ~~[assure]~~ensure that, at least once yearly, each client sees a licensed practitioner that may prescribe controlled substances~~[-at least once yearly]~~.
- (3) Each MOUD provider that prescribes, administers, or dispenses methadone shall:
  - (a) admit a client to the program only after the completion of a face-to-face visit with a licensed practitioner authorized to prescribe controlled substances who confirms that client's opioid dependence;
  - (b) ensure that a licensed practitioner authorized to prescribe controlled substances approves every subsequent dose increase before the change;
  - (c) require each client admitted to the program to participate in random drug testing performed ~~[randomly]~~at least eight times ~~[per]~~a year~~[-];~~ ~~[per]~~for each [patient]client in maintenance treatment, in accordance with generally accepted clinical practice and ~~[in accordance]~~with 42\_CFR ~~[part]~~8 (2025); and
  - (d) require and document at least one hour of prescribing practitioner time at the program site each month for every ten enrolled MOUD clients~~[-enrolled]~~.
- (4) Each MOUD program that prescribes, administers or dispenses methadone shall:
  - (a) maintain Substance Abuse and Mental Health Services Administration certification and accreditation as an opioid treatment program;
  - (b) employ~~[-the following]~~:
    - (i) a licensed physician who is an ASAM-certified physician;
    - (ii) a prescribing licensed practitioner who can document specific training in current industry standards regarding methadone treatment for opioid addiction~~[-s];~~ or
    - (iii) a prescribing licensed practitioner who can document specific training or experience in methadone treatment for opioid addiction~~[-s];~~ and
  - (c) provide one ~~[qualified]~~covered provider, as defined in Section 58-17b-309.7, to dispense or administer medication~~[-s]~~ for every 150 methadone clients dosing on an average of a daily basis.
- (5) A~~[-an outpatient treatment program]~~ provider may offer services from a mobile unit~~[MOUD services]~~, as defined in Section 58-17b-309.7, under the~~[-a]~~ provider's physical site license if:
  - (a) the existing licensed site provides MOUD services;
  - (b) the ~~[licensee]~~provider maintains policy and procedures ~~[addressing]~~in accordance with ~~[the agency]~~department policy~~[-ies as they]~~ applicable~~[-y]~~ to ~~[the]~~a mobile unit and Rule R523-10; and
  - (c) the provider meets registration requirements of 21 CFR 1300, 1301, and 1304 (April 1, 2021), published by the Office of the Federal Register, incorporated by reference in this rule~~[the Drug Enforcement Administration Code of Federal Regulations, Title 21, Parts 1300, 1301 and 1304, 2021 edition are met]~~.
- (6) An alcohol and drug education provider ~~[shall]~~may only provide court~~[-]~~-ordered education ~~[only]~~if certified to do so through the OSUMH in accordance with Rule R523-11.
- (7) A licensed substance use disorder counselor (SUDC) in a substance use disorder outpatient treatment program may:
  - (a) collect client information;
  - (b) conduct the screening portion of an assessment;
  - (c) make level of care recommendations; and
  - (d) identify a substance use disorder.

- (8) A SUDC may not diagnose a client.
- (9) A OSUMH[-]-certified alcohol and drug education provider shall:
  - (a) complete and maintain a substance use screening;
    - (i) for each client before providing the education course; and
    - (ii) ~~[r]~~ that may be shared between providers with written client consent~~[, for each client before providing the education course];~~
  - (b) provide a workbook to each ~~[participant]~~client to keep upon completion of the course;
  - (c) ensure at least 16 hours of course education; and
  - (d) provide separate classes for adults and youth.
- (10) A provider offering services to a justice-involved client[s] shall:
  - (a) operate in compliance with Rule[s] R523-3~~[and R523-4];~~
  - (b) maintain a validated criminogenic screen or risk assessment for each justice-involved client ~~[that]~~which is conducted with an accepted tool, including:
    - (i) Level of Service Inventory-Revised (LSI-R);
    - (ii) Risk and Needs Triage (RANT);
    - (iii) Ohio Risk Assessment System (ORAS); or
    - (iv) any other screen that the provider can demonstrate the~~[#]~~ validation to the OSUMH;
  - (c) separate clients into treatment groups according to each client's assessed level of risk~~[assessed];~~
  - (d) complete screenings that assess ~~[both]~~substance abuse and mental health comorbidity; and
  - (e) treat, or refer to another licensed [Department of Health and Human Services]department program[s] that serves justice-involved clients to treat, ~~[the]~~an array of disorders noted in the screening.

#### **R501-21-6. Domestic Violence Programs.**

- (1) A domestic violence (DV) treatment provider shall comply with generally accepted and current practices in DV treatment.~~[, and shall meet the following requirements:]~~
- (2) A DV treatment provider shall:
  - (a) maintain and document cooperative working relationships with any DV shelter[s], treatment program[s], referring agency~~[ies]~~, local DV coalition[s], and custodial parent[s] when the client is a minor;
  - (b) offer at least ten sessions of treatment for any child~~[ren]~~ [and]or victim[s]~~[offers at least ten sessions for each client]~~, not including intake or orientation;
  - (c) if the client is a perpetrator, ~~[provider]~~contact ~~[with the]~~any victim[s], current partner, ~~or[and the]~~ required criminal justice referring agency~~[ies is also required, as applicable];~~ and
  - (d) ensure a [F]licensed [M]mental [H]health [T]herapist, as defined in Section 58-60-102, [shall]completes a DV treatment evaluation for each client who is a perpetrator~~[offender] [to]that~~ includes individualized recommendations for th~~[e]~~at client~~[offender]'s~~ treatment.
- (~~[2]~~3) ~~[A]~~For groups, a provider shall ~~[ensure]ensure [staff to client ratios are set as follows]there is~~ at least one staff for:
  - (a) ~~[the staff to client ratio in a one hour long adult treatment group is]~~there is at least one staff ~~[to]for~~ every eight clients in an adult treatment group for up to an hour;
  - (b) ~~[the staff to client ratio in a group exceeding one hour is one staff to]~~every ten clients in an adult treatment group exceeding one hour;
  - (c) the maximum group size may not exceed 16;
- (~~[E]~~c) every eight children in a child victim or child witness group where each child client is under 12 years old~~[s shall have a ratio of one staff to eight children, when the clients are under 12 years of age];~~ and
- (~~[E]~~d) a staff to clientevery ten children in a child victim or child witness group where each child client is at least 12 years old~~[ratio of one staff to ten children when the clients are 12 years of age and older].~~
- (~~[3]~~4) For client safety, ~~[T]the [licensee]provider shall~~ ensure client intake and safety as follows:
  - (a) ensure that:
    - (i) when a client enters a DV treatment program, the staff ~~[shall]~~conduct an in-depth, face-to-face interview and intake assessment to determine the client's clinical profile and treatment needs~~[;]~~; and
    - (ii) when the client is a perpetrator, the evaluation described in Subsection ~~[R501-21-7](1)2~~(d) ~~[shall]~~counts for this intake assessment~~[when the client is an offender];~~
  - (b) obtain additional information for any client who is a perpetrator ~~[clients]~~from ~~[the]~~any police incident report, ~~[perpetrator's]~~criminal history of the client, prior treatment provider[s], ~~[the]~~victim, or victim advocate;
  - (c) when appropriate, obtain additional information for a child client from any parent[s], prior treatment provider[s], school[s], ~~[and]or the~~ Division of Child and Family Services Child Protective Services;
  - (d) when any ~~[of]~~document listed in Subsections ~~[R501-21-6](3)4~~(a) through (c) cannot be obtained, ~~[the provider shall]~~document the reason; and
  - (e) ~~[the provider shall]~~ensure that the intake assessment or evaluation described in Subsection (2)(d) includes~~[ the following]~~:
    - (i) a profile of the frequency, severity, and duration of the DV behavior, ~~[that includes]~~including a summary of any psychological violence;
    - (ii) documentation of any homicidal, suicidal ideation and intentions, ~~[as well as]~~or abusive behavior toward children;
    - (iii) a clinical diagnosis and a referral for evaluation to determine the need for medication, if indicated;
    - (iv) documentation of safety planning when;

## NOTICES OF PROPOSED RULES

- ~~\_\_\_\_\_~~ (A) the client is an adult victim, child victim, or child witness; and
- ~~\_\_\_\_\_~~ (B) ~~[they have]~~that client has contact with the perpetrator;
- (v) documentation of a [address]-safety plan[ning upon contact] for any victim[s] who chooses not to become a treatment client[s];
- and
- (vi) documentation that appropriate measures have been taken to protect children from harm.
- ~~\_\_\_\_\_~~ (4) ~~5~~ For treatment procedures, [A]-a provider shall[-ensure that treatment procedures adhere to the following]:
- (a) create an individualized treatment plan addressing relevant treatment issues [is created]for each client;
- (b) refer each client deemed not appropriate for a DV program to the appropriate resource or program, with [the]any reason[s] for referral documented, and [notification given to]notify the referred[ing] agency;
- (c) provide DV[-] counseling concurrently with, or after, other necessary treatment when appropriate;
- (d) ensure that any client who is a perpetrator, or a co-perpetrator, is not provided conjoint or group therapy in the same session as any victim who has experienced violence from the perpetrator or co-perpetrator[conjoint or group therapy sessions with victims and perpetrators, or with co-perpetrators may not be provided] until staff has completed a comprehensive assessment[-has been completed] to determine that:
- ~~\_\_\_\_\_~~ (i) ~~[the]any violence between the client who is a perpetrator, or a co-perpetrator, and the victim has stopped[-]; and~~
- ~~\_\_\_\_\_~~ (ii) ~~[that]-conjoint therapy[treatment] is appropriate;~~
- (e) require the client who is a perpetrator [shall]to complete at least four DV treatment sessions, unless otherwise noted in the [offender]-evaluation recommendations described in Subsection (2)(d), before the provider implements conjoint therapy;
- (f) implement [a]-written procedure in an efficient and timely manner to facilitate any:
- (i) entry of [the]a court[-]-ordered defendant into treatment as a client;
- (ii) notification of client compliance, participation, or completion;
- (iii) disposition of a non-compliant client;
- (iv) notification of the recurrence of violence; and
- (v) notification of factors that may exacerbate a[an] [individual]client's potential for violence;
- (g) [a provider shall]-comply with the duty to warn, in accordance with Section 78B-3-502;
- (h) [a provider shall]-document specialized training in DV assessment and treatment practices for any individual providing treatment service, [to include]including:
- (i) completing 24 hours of Utah Association for Domestic Violence Treatment pre-service training[-within the last two years];
- (ii) completing 16 hours annual training [there]after the initial training in Subsection (5)(h)(i)[-]; and
- (iii) at least one hour per week of clinical supervision for any treatment staff that [are]is not clinically licensed[-shall consist of at least one hour per week] to discuss clinical dynamics of a case[s].
- ~~\_\_\_\_\_~~ (5) ~~6~~ The provider shall ensure training is documented and approved by the designated [Utah Department of Health and Human Services]department DV [S]specialist regarding assessment and treatment practices for treating DV victims and perpetrators.
- ~~\_\_\_\_\_~~ (6) ~~7~~ A provider shall disclose any:
- (a) current [Department of Health and Human Services]department contract[s]; [and]or
- (b) action[s] against the contract to the Office of Licensing.
- ~~\_\_\_\_\_~~ (7) ~~8~~ A provider shall disclose any current accreditation[s] [and]or action[s] against accredited status to the Office of Licensing.

### **R501-21-7. Requirements for Granting Deemed Status to a Mental Health or Substance Use Disorder Treatment Site.**

- (1) The department may grant deemed status to the site of a mental health or substance use disorder treatment provider if:
- (a) the provider's license for the site is in good standing;
- (b) the site only serves adults;
- (c) the site currently receives accreditation from a department-approved national organization; and
- (d) the provider submits the licensing documentation from the accrediting organization to the department, including any applicable:
- (i) inspection record;
- (ii) finding; and
- (iii) corrective action plan and progress report on the site addressing any corrective action plan.
- (2) A site with deemed status may opt out of a department renewal inspection.
- (3) The department may investigate any complaint or incident involving a deemed site.
- (4) The provider is responsible for any renewal licensing fee for each deemed site.
- (5) The department shall revoke the deemed site status if:
- (a) the site receives any moderate, high, or extreme noncompliance licensing violation from department;
- (b) the required accreditation documentation is not submitted to the department;
- (c) the accreditation documentation includes any noncompliance violation finding equal to any moderate, high, or extreme state licensing finding level; or
- (d) the provider no longer receives national accreditation for the deemed site.
- (6) For any provider with multiple deemed sites:
- (a) each site must meet the requirements to be granted deemed status; and
- (b) the revocation of deemed status for any single site does not impact the status of any other site unless any condition listed in Subsection (5) applies to the other site.



**R501-21-[7]8. Compliance.**

A provider that is in operation on the effective date of this rule shall achieve compliance with this rule within 30 days.

**KEY:** human services, licensing, outpatient treatment programs

**Date of Last Change:** ~~January 22, 2024~~2025

**Notice of Continuation:** February 28, 2025

**Authorizing, and Implemented or Interpreted Law:** 26B-2-104

NOTICE OF SUBSTANTIVE CHANGE		
<b>TYPE OF FILING:</b> Amendment		
<b>Rule or section number:</b>	<b>R501-22</b>	<b>Filing ID:</b> 57649

Agency Information		
<b>1. Title catchline:</b>	Health and Human Services, Human Services Program Licensing	
<b>Building:</b>	Multi-Agency State Office Building	
<b>Street address:</b>	195 N 1950 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	PO Box 142003	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-2003	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

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General Information	
<b>2. Rule or section catchline:</b>	
R501-22. Residential Support Programs	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 347 (General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
<p>The purpose of this amendment is to ensure compliance of the Office of Licensing (OL), under the Department of Health and Human Services (department) with HB 347 from the 2025 General Session.</p> <p>HB 347 (2025) added and amended definitions in Section 26B-2-101 and Section 26B-2-110 and amended provisions related to the licensing of substance use and mental health providers regulated by OL. HB 347 (2025) required OL to create a process for any adult substance use and mental health provider with a nationally recognized, applicable accreditation to receive deemed status and opt out of annual inspections by OL if the provider submits documentation from the accrediting organization to OL about any inspection record and finding, and any corrective action plan related to an inspection finding.</p> <p>HB 347 (2025) makes it necessary for OL to update language in this rule to align with the requirements for deeming sites of mental health and substance use providers regulated by OL.</p> <p>Additionally, the department determined it is appropriate to reorganize provisions that have previously existed in this rule amendment relating to the licensure of both temporary homeless youth and emergency homeless facilities. This filing removes those provisions from Rule R501-22, and another filing for a new rule, Rule R501-22A, is being processed simultaneously to house the removed provisions. Rule R501-22A will regulate these facility types, due to the short-term and transient nature of the clientele served by these facilities and existing federal and state oversight requirements.</p>	

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**5. Summary of the new rule or change:**

Throughout this rule, this amendment changes any use of the term "licensee" to "provider" and "domestic violence shelter" to "domestic violence facility" to align with other human service rules and use consistent terminology.

This amendment adds the definitions of "good standing" and "deemed site" related to HB 347. Additionally, definitions related to temporary homeless youth and emergency homeless facilities and settings final rule are removed, as related provisions are being placed into a new rule, Rule R501-22A. The definitions for "dangerous weather conditions" and "code blue event" are also removed and added directly to the applicable section.

Overly specific provisions that are not related to basic health and safety standards, including providing toys and an outdoor play area for children, are removed from Section R501-22-7, and a staff-to-child ratio is added.

Clarifying language is added to Sections R501-22-8 and R501-22-11.

Additionally, the statutory reference for a "code blue event" definition is included.

The former Sections R501-22-9 through R501-22-10 are removed from this rule and will be added to the new rule, R501-22A, which is a residential support rule regulating homeless facility providers.

Other changes in this filing include the creation of three new sections to provide background check requirements, detail the process for a mental health and substance use provider to seek deemed status to comply with HB 347 (2025); and clarify the scope for provider compliance with any applicable federal, state, or local law, rule, or ordinance while removing superfluous references to those throughout the rule. Sections in this rule are renumbered to account for both the removed sections and the newly added sections in this rule.

Additional changes are nonsubstantive style and formatting changes to comply with the Rulewriting Manual for Utah and align the rule with other rules under the department. For this filing, clarifying language is added throughout multiple rule sections to better help the public and providers understand requirements for this type of licensing setting.

(EDITOR'S NOTE: The proposed new Rule R501-22A, ID 57650, is in this issue, December 1, 2025, of the Utah State Bulletin.)

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

The implementation of provisions related to HB 347 (2025), which involves the development of a process to deem any of site of adult substance use and mental health providers with a national accreditation, may result in a \$500 cost savings annually per deemed site for the department by allowing these providers to forgo the annual state inspection, reducing the number of on-site inspections OL staff need to conduct on annual basis. This \$500 savings has already been captured in the fiscal note of HB 347 (2025), available on the Utah Legislature's website.

The department estimates that up to 30 sites under this type of provider may participate in the deeming process in Fiscal Year 2026, resulting in a potential \$15,000 cost savings in Fiscal Year 2026 for the department. The department estimates that in subsequent fiscal years, up to five sites under this type of provider may participate in the deeming process, resulting in a potential cost savings of \$2,500 in Fiscal Year 2027 through Fiscal Year 2030 for the department. As any cost is captured in the fiscal note of HB 347 (2025), there is no anticipated cost to the state budget to implement the provisions of HB 347 (2025).

The department does not anticipate any fiscal impact on the state budget as a result of the style and formatting changes, removal of content related to homeless and temporary youth homeless facilities, additional clarifying language changes, and rule and statute citation updates included in this rule amendment.

Removed content related to homeless and temporary youth homeless facilities will still exist under Rule R501-22A.

**B. Local governments:**

To support the implementation of HB 347 (2025), there is no anticipated fiscal impact to local governments' revenues or expenditures because providers are regulated by OL and not local governments.

There will be no change in local business licensing or any other item with which local government is involved. There are no fiscal impacts to local government resulting from the changes in this rule content relating to these legislative actions.

The department also does not anticipate any fiscal impact on local governments as a result of the style and formatting changes, removal of content related to homeless and temporary youth homeless facilities, additional clarifying language changes, and rule and statute citation updates included in this rule amendment.

Removed content related to homeless and temporary youth homeless facilities will still exist under Rule R501-22A.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

There is no anticipated cost or savings to small businesses due to the rule changes related to HB 347 (2025). Adult substance use and mental health providers, under residential support licensure, are still required to pay any licensing fee if participating in the process to receive deemed status for a site with a department-approved national accreditation. The deeming process is optional for providers, not a requirement. Providers were notified in May 2025 about the optional deeming process.

The department does not anticipate any fiscal impact on small businesses as a result of the style and formatting changes, removal of content related to homeless and temporary youth homeless facilities, additional clarifying language changes, and rule and statute citation updates included in this rule amendment.

Removed content related to homeless and temporary youth homeless facilities will still exist under Rule R501-22A.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated cost or savings to non-small businesses due to the rule changes related to HB 347 (2025). Adult substance use and mental health providers, under residential support licensure, are still required to pay any licensing fee if participating in the process to receive deemed status for a site with a department-approved national accreditation. The deeming process is optional for providers, not a requirement. Providers were notified in May 2025 about the optional deeming process.

The department does not anticipate any fiscal impact on non-small businesses as a result of the style and formatting changes, removal of content related to homeless and temporary youth homeless facilities, additional clarifying language changes, and rule and statute citation updates included in this rule amendment.

Removed content related to homeless and temporary youth homeless facilities will still exist under Rule R501-22A.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This rule amendment relating to implementing provisions of HB 347 (2025) is not anticipated to result in a cost or savings to persons other than small businesses, non-small businesses, state, or local governments entities as it applies only to residential support services providers, who are either small business or non-small businesses.

There are no other persons affected by this rule filing.

The department does not anticipate any fiscal impact on other persons as a result of the style and formatting changes, removal of content related to homeless and temporary youth homeless facilities, additional clarifying language changes, and rule and statute citation updates included in this rule amendment.

Removed content related to homeless and temporary youth homeless facilities will still exist under Rule R501-22A.

**F. Compliance costs for affected persons:**

For implementation of HB 347 (2025), affected persons would be small and non-small businesses providing residential support programs regulated by OL, under the department. No other affected persons would be subject to compliance with this rule filing and there is no anticipated cost associated with this filing to any other affected persons.

Providers meeting the requirements to "deem" sites with a national accreditation approved by the department as outlined in HB 347 (2025) have the option to participate in this deeming process and will no longer be subject to the annual inspection conducted by OL but are still required to pay any licensing fee and meet any requirement associated with the deeming process, including the submission of accreditation documentation. There is no anticipated compliance cost for providers due to the rule changes related to HB 347 (2025), as the deeming process is optional for providers.

The department has notified providers about the optional deeming process required by HB 347 (2025) and the department does not anticipate any compliance cost for OL as these providers are already regulated by OL.

The department does not anticipate any compliance cost for affected persons as a result of the style and formatting changes, removal of content related to homeless and temporary youth homeless facilities, additional clarifying language changes, and rule and statute citation updates included in this rule amendment.

Removed content related to homeless and temporary youth homeless facilities will still exist under Rule R501-22A.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$	\$	\$	\$	\$
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-2-104

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R501. Health and Human Services, Human Services Program Licensing.**

**R501-22. Residential Support Programs.**

**R501-22-1. Authority and Purpose.**

(1) ~~[This rule is authorized under ]~~Section 26B-2-104 ~~authorizes this rule.~~~~[and]~~

(2) This rule establishes basic health and safety standards for residential support programs.~~[ This rule is intended to supplement the general provisions required of each human services program in Rule R501-1- ]~~

**R501-22-2. Definitions.**

- ~~[(1) The terms used in this rule are defined in Section 26B-2-101 and R501-1-3]. Additionally:~~
- ~~[(2) "Code Blue Event" is defined in Section 35A-16-701.~~
- ~~[(3) "Dangerous Weather Conditions" means any condition that warrants a public warning or alert by the National Weather Service.~~
- ~~[(1) "Deemed site" means:~~
- ~~(a) the same as defined in Section 26B-2-110; and~~
- ~~(b) a human services program identified by a single geographic location and linked to the parent program, if one exists.~~
- ~~[(4) "Emergency homeless shelter" means any facility that has a primary purpose of providing a temporary shelter for those experiencing homelessness and does not require each occupant to sign a lease or occupancy agreement.~~
- ~~[(2) "Good standing" means the same as defined in Section 26B-2-110.~~
- ~~[(5)(a) "Receiving center" means any facility that has received written office approval to allow short-term residential support.~~
- ~~(b) A receiving center is not a secure or lock-down facility.]~~
- ~~(6) "Settings Final Rule" is defined in Subsection R501-1-3(40).~~
- ~~(7) "Temporary Homeless Youth Shelter" is defined in Section 80-5-102.]~~

**R501-22-3. Scope.**

- ~~(1) Each provider shall comply with any applicable federal, state, or local law, rule, or ordinance, including:~~
- ~~(a) Rule R380-80;~~
- ~~(b) Rule R380-600;~~
- ~~(c) Rule R501-1; and~~
- ~~(d) this rule.~~

**R501-22-3[4]. Administration.**

- ~~(1) [The licensee]A provider may offer treatment through a referral[s] or [within the agency]through the provider's own program by voluntary client participation.~~
- ~~(2) [The]Each [licensee]provider that offers treatment shall obtain the appropriate categorical Department of Health and Human Services (department) license for that treatment.~~
- ~~(3) [The]Each [licensee]provider serving an individual experiencing homelessness in a setting with a contracted service provider shall identify each key decision maker and service provider that is associated with the license application and accountable for compliance with licensing rules within the licensed setting.~~
- ~~(4) [Residential support]A provider may not require consent to treatment as a condition of admission.~~
- ~~(5) The [licensee]provider shall provide evidence of ongoing coordination with [the]any appropriate local health authority[ies] regarding managing communicable diseases within the licensed setting.~~
- ~~(6) The [licensee]provider shall [inform]train staff regarding:~~
- ~~(a) various types of communicable diseases;~~
- ~~(b) recognizing signs and symptoms of communicable diseases; and~~
- ~~(c) steps to take when a potential disease is identified or an outbreak occurs.~~
- ~~(7) The provider shall develop, implement, and comply with safe practices that ensure:~~
- ~~(a) client health, safety, and supervision;~~
- ~~(b) the needs of the client population are met, including needs for food, hydration, laundry, medication, and medical care; and~~
- ~~(c) there is no conflict with any administrative rule or statute.~~

**R501-22-4[5]. Staffing.**

- ~~(1) The [licensee]provider [is not required to]shall provide 24-hour supervision [unless]for [that]any [program is an emergency homeless shelter or a]domestic violence [shelter]facility serving adults.~~
- ~~(2) The [licensee]provider shall establish safe practices that identify each situation requiring medical attention and how the program will meet the client's medical needs.~~
- ~~(3) The licensee shall conduct eligible background clearance and document required training completion for each student of volunteer.~~
- ~~(a) A volunteer or student who provides care without a paid staff present in any emergency homeless shelter or domestic violence shelter shall have direct communication access to designated staff and an eligible background screening before any unsupervised client access.~~
- ~~(b) The licensee shall inform each volunteer or student verbally and in writing of program objectives and the scope of service.]~~

**R501-6. Background Checks.**

- ~~(1) OBP shall conduct a human services program background check for each program staff or volunteer, in accordance with Section 26B-2-120 and Rule R501-14, except for:~~
- ~~(a) an individual identified as an invited visitor in accordance with Subsection 26B-2-120(10)(b)(iii); or~~
- ~~(b) a volunteer that does not have direct or unsupervised access to a client.~~
- ~~(2) The provider shall designate an individual who is responsible for:~~
- ~~(a) ensuring and documenting how each applicant is directly supervised for the entirety of that applicant's supervised employment term before receiving the eligible determination;~~
- ~~(b) ensuring an application is submitted in DACS within 14 days of each staff becoming associated with the provider;~~

- ~~(c) initiating, monitoring, and maintaining background checks in DACS for each individual with direct access;~~
- ~~(d) maintaining compliance with Rule R501-14;~~
- ~~(e) managing communications with OBP and OL;~~
- ~~(f) monitoring DACS and taking necessary action when eligibility status changes; and~~
- ~~(g) separating any staff in DACS within five days of that staff;~~
- ~~(i) no longer being associated with the provider; or~~
- ~~(ii) having an ineligible determination status from OBP on a background check with no pending appeal.~~
- ~~(3) The provider shall ensure each direct care staff, contracted staff, volunteer, and intern has an eligible background check determination before permitting that individual to work unsupervised with a client, except as excluded in Rule R501-14.~~

**R501-22-~~[5]~~7. Physical Facility.**

- ~~(1) Except as otherwise provided in this section, each [licensee] provider shall have at least one bathroom for every ten clients.~~
- ~~(2)(a) [Each] A domestic violence facility [shelter and emergency homeless shelter licensee] may allow family members to share a bathroom.~~
- ~~(b) When [re] a bathroom is shared by more than one family or by children over the age of eight, [either the] each child's parent or program staff shall ensure that client privacy is maintained.~~
- ~~(3) Each emergency homeless shelter may exceed the bathroom ratio set forth in Subsection R501-22-5(1) if:~~
  - ~~(a) each bathroom ratio is approved by either the local authority that determines capacity or the department;~~
  - ~~(b) each bathroom ratio is specifically designated in adult only nightly shelter settings;~~
  - ~~(c) each bathroom is inspected, cleaned, and re-stocked daily and as needed;~~
  - ~~(d) the licensee ensures individual privacy in bathing and toileting;~~
  - ~~(e) each individual with disabilities has access to at least one locking bathroom or stall; and~~
  - ~~(f) the licensee accommodates each parent's needs for changing, toileting, and bathing their children.]~~
- ~~(4)3 The [licensee] provider shall develop safe practices to identify how to manage emergency overflow [when] if the facility reaches capacity [has been reached] during dangerous weather conditions, which include any condition that warrants a public warning or alert by the National Weather Service.~~
- ~~(5)4 The [licensee] provider shall develop safe practices that allow and encourage each client to have clean linens at least weekly.~~
- ~~[ (6) The emergency homeless licensee may have portable beds, cots, or mats to accommodate fluctuating client volume.~~
- ~~] (7)5 Except as outlined in Subsection [R501-22-5](1)30, the [licensee] provider shall provide each client with clean bedding that is laundered;~~
  - ~~(a) at least weekly [or as needed for each client]~~
  - ~~(b) when soiled; and~~
  - ~~(c) before being provided to a different person.~~
- ~~(8)6 A provider may allow family members to [may] share bedroom space.~~
- ~~(9)7 The [licensee] provider shall ensure that [comply with the following bedroom standards for] any domestic violence facility [shelters,] or family support center [s, temporary homeless youth shelters, emergency homeless family shelters, and children's shelters] complies with the following bedroom standards:~~
  - ~~(a) in a multiple occupant bedroom, there [is] shall be at least;~~
  - ~~(i) 40 square feet per client [in a multiple occupant bedroom], not counting storage space; or~~
  - ~~(ii) one crib for each child [ren] under two years old [if the crib] that does not inhibit access to [and] or from the room;~~
  - ~~(b) any roll[-]away bed [and] or hide-a-bed[s] [are] may only be used when the 40 square foot space requirement in Subsection (7)(a) is maintained; and~~
  - ~~(c) when a bedroom is shared by more than one family, program staff shall make arrangements to ensure client privacy[;].~~
- ~~(10) The temporary youth shelter licensee shall ensure that children in a temporary youth shelter with their own children have at least 40 square feet per person, excluding storage space, in a separately enclosed bedroom that houses only children that have their own children.~~
- ~~(11)8 The [licensee] provider shall ensure that [comply with the following bedroom standards for emergency homeless shelters, temporary homeless youth shelters, and] any receiving center[s] complies with the following bedroom standards:~~
  - ~~(a) each dormitory[-] style bedroom[s] shall meet the square footage and capacity determinations made by the local fire authority[-];~~
  - ~~(b) capacity determinations in Subsection (8)(a) include any staff present in the facility;~~
  - ~~(c) if the local fire authority does not identify capacity, licensing square footage requirements described in Subsection (7) apply; and~~
  - ~~(d) there is a safe practice in place to identify how to manage overflow [when] if the receiving center reaches capacity [has been reached].~~
- ~~(12)9 Each [licensee] provider shall [outline] develop, implement, and comply with policy [safe practices] that addresses [regarding]:~~
  - ~~(a) [rules and guidelines for each family or mixed gender sharing the same dormitory space or bedroom, including each individualized bedroom assignment] conflict resolution;~~
  - ~~(b) [securing personal belongings] daily schedules;~~
  - ~~(c) [responsibility for each client supervising the client's own children] housekeeping responsibilities;~~
  - ~~(d) [conflict resolution];~~
  - ~~(e) [nuisance and disruptive behavior];~~
  - ~~(f) housekeeping responsibilities;~~
  - ~~(g) daily schedules;~~
  - ~~(h) prohibited items; [and]~~

~~(f)~~ ~~[search policy]~~ rules and guidelines for each family or mixed gender clients sharing the same dormitory space or bedroom, including each individualized bedroom assignment;

~~(g)~~ securing personal belongings;

~~(h)~~ the responsibility for each client to supervise that client's own children; and

~~(i)~~ the search procedure.

~~(14)~~ 10. Each ~~[licensee]~~ provider that requires a client to provide ~~that~~ ~~[e]~~ client's own laundry supplies and locate a laundromat for laundering shall have a safe practice to assist ~~each~~ ~~any~~ client on a limited basis when ~~that~~ ~~[e]~~ client cannot provide ~~the client's~~ laundry supplies ~~and~~ or locate a laundromat.

#### **R501-22-~~6~~8. Specialized Services for Programs Serving Clients With Substance Use Disorders.**

(1) ~~[Each]~~ ~~A~~ ~~[licensee]~~ provider may not admit any ~~[one]~~ client ~~[who is currently]~~ experiencing convulsions, shock, delirium tremens, or unconsciousness~~;~~ or ~~[is]~~ in a coma.

(2) Each ~~[licensee]~~ provider serving a client~~[s]~~ with a substance use disorder shall provide evidence of ongoing coordination with ~~the~~ ~~any~~ appropriate local health authority~~[ies]~~ regarding managing communicable diseases within the licensed setting.

(3) The ~~[licensee]~~ provider shall screen ~~each~~ staff and client~~[s]~~ for risk of tuberculosis.

(4) A licensed substance ~~[abuse]~~ use disorder treatment program shall maintain documentation of [complete] annual completion of the National Survey of Substance Abuse Treatment~~[annually]~~.

#### **R501-22-~~7~~9. Specialized Services for Programs Serving Children.**

(1) A ~~[licensee]~~ provider serving only child populations is considered a congregate care program, as defined in Section 26B-2-101, and shall adhere to each requirement of Sections 26B-2-120, 26B-2-123, and 26B-2-124 for background clearances, policy development, and behavior management practices.

(2) Congregate care rules under Title R501 apply to any youth program~~[s]~~ that retains a client~~[s]~~ past the age of 18 to complete treatment or education.

~~(3) The licensee shall provide clean and safe age appropriate toys for children.~~

~~(4) The licensee shall provide an outdoor play area enclosed with a five foot safety fence or enclosure as otherwise required by local ordinances.~~

~~(5)~~ 3. Only a custodial parent, legal guardian, or person designated in writing by a parent or legal guardian may remove a ~~any~~ child from the program.

~~(4)~~ The provider shall maintain a ratio of at least one staff for every six children.

~~(6)~~ 5. The ~~[licensee]~~ provider shall provide adequate staff to supervise children or be available to monitor any parent~~[s]~~ supervising the~~[eir]~~ parent's own child~~[ren]~~.

~~(7)~~ 6. The ~~[licensee]~~ provider shall comply~~[as required]~~ with Title 80, Chapter 2, Part 9, the Interstate Compact on Placement of Children (ICPC), including ensuring the disruption plan is followed ~~[when]~~ if an out~~[-]~~of~~[-]~~state minor presents at a shelter as a result of a failed ICPC placement in a Utah residential setting.

#### **R501-22-~~8~~10. Specialized Services for Domestic Violence ~~[Shelters]~~ Facilities.**

(1) The ~~[licensee]~~ provider shall:

~~(a) [document that] provide to each client [shelter] domestic violence facility rules, any reason for termination, and the client's rights to confidentiality[are provided to each client]; and~~

~~(b) document that the items in Subsection (1)(a) were provided to each client verbally and in writing.~~

~~(2)(a)~~ Each parent is responsible for supervising ~~that parent's~~ ~~[eir]~~ own child while at the domestic violence [shelter] facility.

~~(b)~~ If ~~[a]~~ the parent is required to be away from the ~~[shelter]~~ facility or involved in a ~~[shelter]~~ facility activity~~[ies]~~ without the~~[ir]~~ child, the parent shall arrange for appropriate child care services.

(3) The ~~[licensee]~~ provider shall ensure that each domestic violence ~~[shelter]~~ facility action plan documents and includes a review:

~~(a) [a review with each victim] with each client regarding danger and lethality and the level of the [victim] client's risk of safety assessment;~~

~~(b) [a review] with each client of the [victim's] client's safety plan[with each victim];~~

~~(c) with each client of supportive services, including child care, financial assistance, housing assistance, legal assistance, medical care, and self-sufficiency; and~~

~~(d) [a review] of the procedure for a protective order and a referral for the [victim] client to the appropriate agency or clerk of the court authorized to issue the protective order[and~~

~~(d) a review of supportive services for each client, including medical care, self sufficiency, day care, legal assistance, financial assistance, and housing assistance].~~

(4) The ~~[licensee]~~ provider shall assist with connecting the client to identified resources.

(5) The ~~[licensee]~~ provider shall make and document a referral, when indicated in the client record, for victim client treatment, drug and alcohol treatment, psychiatric consultation, ~~[drug and alcohol treatment]~~ or other allied service.

(6) The ~~[licensee]~~ provider shall ensure that an experienced and trained domestic violence provider supervises each domestic violence [shelter] facility staff completing an action plan~~[are supervised by an experienced and trained domestic violence provider]~~.

#### **~~[R501-22-9. Specialized Services for Temporary Homeless Youth Shelters.~~**

~~(1) Each licensee shall provide a staff ratio of at least one direct care staff for every ten children.~~

## NOTICES OF PROPOSED RULES

- ~~\_\_\_\_\_ (2) Except as outlined in Subsection R501-22-9(4), the licensee may only admit individuals under the age of 18.~~
- ~~\_\_\_\_\_ (3) The licensee may admit a child with the child's own biological child.~~
- ~~\_\_\_\_\_ (4) The licensee may provide shelter to an individual that is older than 18 but younger than 21 under the following conditions:~~
  - ~~\_\_\_\_\_ (a) each individual is placed in age and gender appropriate sleeping quarters away from the minor population;~~
  - ~~\_\_\_\_\_ (b) each individual remains in the program voluntarily and is made aware of program rules and the repercussions of criminal behavior as an adult;~~
  - ~~\_\_\_\_\_ (c) a ratio of at least one staff to every ten clients is maintained;~~
  - ~~\_\_\_\_\_ (d) children and individuals are assessed by a facility staff member that is a mental health therapist, as described in Section 58-60-102, to determine whether the individual is at imminent risk of harming themselves or others; and~~
  - ~~\_\_\_\_\_ (e) individuals that are assessed as at imminent risk of harm to self or others are referred to a program qualified to serve them.~~
- ~~\_\_\_\_\_ (5) The licensee shall document and maintain individualized assessments of risk of harm and justification for each client admitted in the youth setting.~~
- ~~\_\_\_\_\_ (6) The licensee shall comply with Section 80-5-601 regarding mandatory reporting requirements for harboring a runaway.~~
- ~~\_\_\_\_\_ (7) The licensee shall comply with Section 26B-2-116 to coordinate educational requirements for each individual.~~
- ~~\_\_\_\_\_ (8) The licensee shall coordinate and transition each client to a more appropriate setting when the client cannot remain in the youth setting.~~

### **R501-22-10. Specialized Services for Emergency Homeless Shelters.**

- ~~\_\_\_\_\_ (1) An emergency shelter licensee shall prioritize the safety of those needing services and emphasize transitioning into a more permanent housing setting.~~
- ~~\_\_\_\_\_ (2) An emergency homeless shelter licensee shall ensure that no less than two direct care staff are always present and available and maintain a ratio of no fewer than one staff present for every 40 clients during weekday daytime hours.~~
- ~~\_\_\_\_\_ (3) An emergency homeless shelter may operate above staffing ratios during dangerous weather conditions, on weekends, and during sleeping hours if:~~
  - ~~\_\_\_\_\_ (a) the program has a documented chain of command for on-call availability;~~
  - ~~\_\_\_\_\_ (b) the program has a surveillance camera system;~~
  - ~~\_\_\_\_\_ (c) the program has an emergency radio onsite and each staff on duty are trained regarding how and when it is to be used; or~~
  - ~~\_\_\_\_\_ (d) the program identifies and can rely upon other means of back up support in case of emergency.~~
- ~~\_\_\_\_\_ (4) In accordance with Subsections 35A-16-703(1), (2), and (3), an emergency homeless shelter licensee operating in a county where a code blue alert is in effect may increase capacity by 35% when:~~
  - ~~\_\_\_\_\_ (a) fire code and building code capacities permit the increase;~~
  - ~~\_\_\_\_\_ (b) procedures are implemented for expediting intake; and~~
  - ~~\_\_\_\_\_ (c) procedures are implemented for only denying entry if the building capacity is at maximum or the individual poses a risk to the population.~~
- ~~\_\_\_\_\_ (5) Each emergency homeless shelter shall require each adult resident to sign an agreement form at admission that outlines the following:~~
  - ~~\_\_\_\_\_ (a) visitors are allowed on premises to assist with housing, food stamps, assessments, religious, social and other client specific needs;~~
  - ~~\_\_\_\_\_ (b) participation in any meetings or groups with these visitors is voluntary;~~
  - ~~\_\_\_\_\_ (c) each client signature on the form and voluntary participation in the visitation constitutes the client's invitation to the visitors in the department licensed setting; and~~
  - ~~\_\_\_\_\_ (d) each client must sign the agreement before participation in any voluntary services offered onsite.~~
- ~~\_\_\_\_\_ (6) Visitors as outlined in Subsection R501-22-10(5) do not include staff in the homeless shelter setting.~~
- ~~\_\_\_\_\_ (7) The emergency homeless shelter licensee shall maintain the following information regarding each client or have documented reasons why the information is not obtainable:~~
  - ~~\_\_\_\_\_ (a) name;~~
  - ~~\_\_\_\_\_ (b) date of birth;~~
  - ~~\_\_\_\_\_ (c) race;~~
  - ~~\_\_\_\_\_ (d) ethnicity;~~
  - ~~\_\_\_\_\_ (e) gender;~~
  - ~~\_\_\_\_\_ (f) veteran status;~~
  - ~~\_\_\_\_\_ (g) disabling condition;~~
  - ~~\_\_\_\_\_ (h) start date;~~
  - ~~\_\_\_\_\_ (i) exit date;~~
  - ~~\_\_\_\_\_ (j) destination;~~
  - ~~\_\_\_\_\_ (k) relationship to head of household;~~
  - ~~\_\_\_\_\_ (l) service location;~~
  - ~~\_\_\_\_\_ (m) prior living situation;~~
  - ~~\_\_\_\_\_ (n) case management log and service plan, where applicable;~~
  - ~~\_\_\_\_\_ (o) information that could affect health, safety, or well-being of the client, including medication needs;~~
  - ~~\_\_\_\_\_ (p) documentation that is updated at 90-day intervals to include each service and contact; and~~
  - ~~\_\_\_\_\_ (q) service plans that emphasize self-sufficiency and identify and refer to applicable sources.~~



~~(8) The shelter maintains the documentation listed in Subsection (7) for re-opening the client file, if the client returns up to 30 days past the last shelter stay, with the exception of single night stays.~~

**JR501-22-11. Specialized Services for Programs Serving Clients of the Division of Services for People with Disabilities.**

(1) In accordance with the federal ~~[H]~~home and ~~[C]~~community~~[B]~~based ~~[S]~~services (HCBS) ~~[S]~~settings ~~[F]~~final ~~[R]~~rule, defined in Rule R501-1, a program serving clients on ~~the~~an HCBS ~~[W]~~waiver shall complete and adhere to the residential attestation agreement form and self-assessment survey for each licensed site.

(2) The ~~[licensee]~~provider shall maintain current copies of the residential attestation agreement form and self-assessment survey forms in program documentation.

(3) In the event of a conflict between this rule and the ~~[S]~~settings ~~[F]~~final ~~[R]~~rule, the ~~[S]~~settings ~~[F]~~final ~~[R]~~rule shall prevail.

(4) The office shall report any noncompliance of the ~~[S]~~settings ~~[F]~~final ~~[R]~~rule to the ~~[DHHS]~~department Division of Continuous Quality and Improvement for contract compliance consideration.

**R501-22-12. Specialized Services for Receiving Centers.**

(1) Each receiving center may be licensed under multiple license types to assess and triage immediate client needs.

(2) A receiving center ~~[licensee]~~provider may offer short-term residential support that is intended to mitigate the initial identified ~~[problem]~~issue, stabilize each client, and return each client to the community as quickly and safely as possible.

(3) A receiving center ~~[licensee]~~provider shall outline safe practices in consumer agreements regarding how each population will be separated and maintained and ~~[the]~~any circumstance[s] when an interaction[s] between populations ~~[are]~~is permitted.

(4) A receiving center ~~[licensee]~~provider shall include individualized clinical documentation outlining the ongoing need and anticipated time frame for discharge for each instance ~~[that]~~when a client's stay lasts longer than 30 days.

(5) A receiving center ~~[licensee]~~provider shall ensure that placement in a receiving center is a voluntary alternative that the client ~~[may]~~chooses instead of a more restrictive placement.

(6) A receiving center may not mandate treatment as a condition ~~[to]~~of residence.

**R501-22-13. Exception to Licensure.**

~~[Subsection 35A-16-703(4) exempts private, nonprofit or government entities from licensing requirements to provide emergency homeless shelter services during, and up to 7 days following, a code blue event as long as the site is compliant with local fire and building codes.]~~In accordance with Subsection 35A-16-703(4), a license is not required for a private, nonprofit, or government entity to provide temporary shelter during, and up to seven days following, a code blue event, as defined in Section 35A-16-701 as long as the facility remains compliant with any local fire and building code and the governing body of the organization approves the use.

**R501-22-14. Requirements for Granting Deemed Status to a Mental Health or Substance Use Disorder Treatment Program Site.**

(1) The department may grant deemed status to the site of a mental health or substance use disorder treatment program if:

(a) the provider's license for the site is in good standing;

(b) the site only serves adults;

(c) the site is currently accredited from a department-approved national organization; and

(d) the provider submits the licensing documentation from the accrediting organization to the department, including any applicable:

(i) inspection record;

(ii) finding; and

(iii) corrective action plan and a progress report on the site addressing any corrective action plan.

(2) A site with deemed status may opt out of a department renewal inspection.

(3) The department may investigate any complaint or incident involving a deemed site.

(4) The provider is responsible for any renewal licensing fee for each deemed site.

(5) The department shall revoke the deemed site status if:

(a) the site receives any moderate, high, or extreme noncompliance licensing violation from department;

(b) the required accreditation documentation is not submitted to the department;

(c) the accreditation documentation includes any noncompliance violation finding equal to any moderate, high, or extreme state licensing finding level; or

(d) the provider no longer receives national accreditation for the deemed site.

(6) For any provider with multiple deemed sites:

(a) each site must meet the requirements to be granted deemed status; and

(b) the revocation of deemed status for any single site does not impact the status of any other site unless any condition listed in Subsection (5) applies to the other site.

**R501-22-1[4]5. Compliance.**

A program operating within the scope of this rule shall have 60 days from the effective date of this rule to come into compliance with this rule.

**KEY: human services, licensing**

**Date of Last Change: [January 22, 2024]2025**

Notice of Continuation: February 28, 2025

Authorizing, and Implemented or Interpreted Law: 26B-2-104

**NOTICE OF SUBSTANTIVE CHANGE****TYPE OF FILING:** New**Rule or section number:****R501-22A****Filing ID:** 57650**Agency Information**

<b>1. Title catchline:</b>	Health and Human Services, Human Services Program Licensing	
<b>Building:</b>	Multi-Agency State Office Building	
<b>Street address:</b>	195 N 1950 W	
<b>City, state:</b>	Salt Lake City, UT 84116	
<b>Mailing address:</b>	PO Box 142003	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-2003	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

**General Information****2. Rule or section catchline:**

R501-22A. Residential Support Programs, Homeless Facilities

**4. Purpose of the new rule or reason for the change:**

Due to the short-term and transient nature of the clientele served by homeless facilities and existing federal and state oversight requirements, the Office of Licensing (OL) determined that this new rule is appropriate to address regulation of homeless facility providers. The decision to create this new rule was also made in conjunction with the Department of Health and Human Services (department) Executive Director's Office and the Utah Office of Homeless Services, under the Department of Workforce Services.

This new rule, Rule R501-22A, contains provisions related to homeless facility providers, which were previously organized under the umbrella of a more widely defined group of residential support providers in Rule R501-22.

This new rule provides regulation for the basic health and safety standards for homeless facility licensure and aims to distinguish the unique services and requirements of homeless facilities separate from residential support program providers.

Additionally, this new rule includes content relevant to homeless facilities that has previously been organized under Rule R501-1. The inclusion of specialized content in this new rule is intended to significantly reduce the administrative burden for homeless facility providers, who found that other provisions in Rule R501-1 were difficult to adhere to and irrelevant for many homeless facility providers.

The new rule is meant to give appropriate oversight while acknowledging the differences in the population served by various human services residential support providers.

To avoid redundancy, OL is processing a simultaneous filing to update Rule R501-22 and is working on an additional file to update to Rule R501-1 to remove the content from each of those rules that is being moved into this new rule.

**5. Summary of the new rule or change:**

This new rule establishes the basic health and safety standards for homeless facilities licensing, including adult, emergency, family, temporary youth, and transitional housing homeless facilities.

This new rule's structure follows the same structure as other OL human services rules and includes penalty and background check sections, congruent with other rules under OL.

(EDITOR'S NOTE: The proposed amendment to Rule R501-22, ID 57649, is in this issue, December 1, 2025, of the Utah State Bulletin.)

### Fiscal Information

#### 6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:

##### A. State budget:

This new rule is not anticipated to result in a cost or savings to the state budget, as homeless facility licensing is already a category of licensure overseen by OL.

The content in this rule has previously existed in other rules, and this reorganization is intended to eliminate confusion around the enforcement of requirements in other rules that are not applicable to homeless facility providers.

While the time needed for OL to review homeless facility providers may be reduced as a result of this new rule, licensors are not likely to reduce work to the point of a measurable savings to the state budget.

No new processes are being added to licensing reviews of these providers.

##### B. Local governments:

This new rule is not anticipated to result in a cost or savings to local governments, as homeless facilities are regulated by the department and not local governments, and this new rule will not apply to any local government.

There is no anticipated fiscal impact to local business licensing or any other item with which local government is involved.

##### C. Small businesses ("small business" means a business employing 1-49 persons):

This new rule is not anticipated to result in a measurable cost or savings to small businesses, as homeless facility licensing is already a category of licensure that homeless facility providers must have to operate this type of facility.

Licensing reviews for homeless facility providers may be shorter due to this new rule eliminating parts of the review that are not applicable to homeless facilities, but the time savings and conversion to monetary savings in provider hourly wages are inestimable due to the differences in pay scales and time spent on licensing compliance for each provider.

No new licensing requirements or processes are being added that would increase costs for small business compliance.

##### D. Non-small businesses ("non-small business" means a business employing 50 or more persons):

This new rule is not anticipated to result in a measurable cost or savings to non-small businesses, as homeless facility licensing is already a category of licensure that homeless facility providers must have to operate this type of facility.

Licensing reviews for homeless facility providers may be shorter due to this new rule eliminating parts of the review that are not applicable to homeless facilities, but the time savings and conversion to monetary savings in provider hourly wages are inestimable due to the differences in pay scales and time spent on licensing compliance for each provider.

No new licensing requirements or processes are being added that would increase costs for non-small business compliance.

##### E. Persons other than small businesses, non-small businesses, state, or local government entities ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This new rule is not anticipated to result in a cost or savings to persons other than small businesses, non-small businesses, state or local governments as the rule applies only to homeless facility providers and there are no other persons affected by this filing.

##### F. Compliance costs for affected persons:

There is no anticipated compliance cost for affected persons, which include OL and the small and non-small businesses providing homeless facility services. These providers are already regulated by the department, and there is no anticipated cost associated with licensing reviews eliminating parts of the review that are not applicable to homeless facilities.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-2-104

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R501. Health and Human Services, Human Services Program Licensing.**

**R501-22A. Residential Support Programs, Homeless Facilities.**

**R501-22A-1. Authority and Purpose.**

(1) Section 26B-2-104 authorizes this rule.

(2) This rule provides basic health and safety standards for homeless facility licensure.

**R501-22A-2. Definitions.**

Terms used in this rule are defined in Section 26B-2-101 and Rule 380-600. Additionally:

(1) "Adult homeless facility" means a facility serving individuals experiencing homelessness who are at least 18 years old.

(2) "Code blue alert" means the same as defined in Section 35A-16-701.

(3) "Code blue event" means the same as defined in Section 35A-16-701.

(4) "Direct Access Clearance System" or "DACS" means the online system used by the Office of Background Processing (OBP) for processing and monitoring background checks for any individual with direct access to a client in a human services program.

- (5) "Dangerous weather conditions" means any condition that warrants a public warning or alert by the National Weather Service.
- (6) "Direct care staff" means any staff that works directly with a client.
- (7) "Emergency facility" means any facility providing immediate, short-term housing to an individual experiencing homelessness, with or without supportive services.
- (8) "Family" means individuals related by:
  - (a) biology;
  - (b) fictive kinship;
  - (c) legal guardianship; or
  - (d) marriage.
- (9) "Family homeless facility" means a facility serving families experiencing homelessness with children under the age of 18.
- (10) "Homeless facility" means the same as "homeless shelter," as defined in Section 35A-16-701, and includes:
  - (a) an adult homeless facility, including any facility where multiple individual pods or units are located on the same property and operated by the same organization;
  - (b) an emergency facility;
  - (c) a family homeless facility;
  - (d) a temporary homeless youth facility; and
  - (e) transitional housing.
- (11) "Temporary homeless youth facility" means the same as "temporary homeless youth shelter," as defined in Section 80-5-102.
- (12) "Transitional housing" means a facility offering longer-term housing with supportive services to facilitate permanent housing.

#### **R501-22A-3. Scope.**

- (1) Each homeless facility provider shall comply with any applicable federal, state, or local law, rule, or ordinance, including:
  - (a) any directive from the Office of Homeless Services, as described in Section 35A-16-201;
  - (b) Rule R380-80;
  - (c) Rule R380-600; and
  - (d) this rule.
- (2) Each homeless facility provider shall prioritize the safety of an individual needing shelter or services and emphasize transitioning each client into a more permanent housing setting.

#### **R501-22A-4. License Required.**

- (1) A residential support homeless facility license is required if a provider meets the definition of a residential support program, as defined in Section 26B-2-101, or a homeless facility.
- (2) In accordance with Subsection 35A-16-703(4), a license is not required for a private, nonprofit, or government entity to provide temporary shelter during, and up to seven days following, a code blue event, as defined in Section 35A-16-701 as long as the facility remains compliant with any local fire and building code and the governing body of the organization approves the use.
- (3) Any residential support homeless facility serving youth, ages 13 through 17, shall comply with the additional requirements for a temporary homeless youth facility in Section R501-22A-13.

#### **R501-22A-5. Policies, Procedures, and Safe Practices.**

- (1) To begin program implementation, a provider must first receive OL approval of policies and procedures, in accordance with Subsection 26B-2-109(2).
- (2) The provider shall develop, implement, and comply with safe practices that ensure:
  - (a) client health, safety, and supervision;
  - (b) the needs of the client population are met, including needs for food, hydration, laundry, medication, and medical care; and
  - (c) there is no conflict with any administrative rule or statute.
- (3)(a) The provider shall maintain a policy for the prevention, screening, and response to any communicable disease outbreak.
- (b) The policy shall include coordination with any appropriate local health authority.
- (4) The provider shall develop, implement, and comply with policy that addresses:
  - (a) assessing each client's physical and mental health needs upon intake;
  - (b) conflict resolution;
  - (c) de-escalation practices and techniques;
  - (d) emergency evacuation procedures and conducting drills to ensure each staff knows where to locate emergency exits and assembly points;
  - (e) identifying any situation requiring medical attention, including using an opioid overdose reversal kit;
  - (f) nuisance and disruptive behavior;
  - (g) prohibited items;
  - (h) responding to significant criminal activity;
  - (i) responding to a significant medical emergency;
  - (j) search procedure;
  - (k) securing personal belongings;
  - (l) storage and administration of medication, if applicable;
  - (m) suicide prevention; and

## NOTICES OF PROPOSED RULES

- (n) the management of facility overflow, including:
  - (i) contacting local authorities, as applicable;
  - (ii) during dangerous weather conditions;
  - (iii) when capacity has been reached; and
  - (iv) during other emergency situations.
- (5) The provider shall have policy that complies with:
  - (a) Title 26B, Chapter 7, Part 5, Regulation of Smoking, Tobacco Products, and Nicotine Products; and
  - (b) Title 53, Chapter 5a, Part 3, Concealed Firearm Permits.

### **R501-22A-6. Administration.**

- (1) Each provider shall identify each key decision maker and service provider associated with the license application who is accountable for compliance with licensing rules.
- (2) In conspicuous places where each visitor, staff, and client may see, the provider shall post:
  - (a) abuse reporting laws, as described in Sections 26B-6-205 and 80-2-609;
  - (b) an Americans with Disabilities Act notice;
  - (c) any department notice of agency action;
  - (d) a civil rights notice;
  - (e) a department code of conduct poster; and
  - (f) the program license.
- (3) The provider shall ensure that whenever a client is present, there is a phone available in the facility that can be used to call 911.
- (4) The provider shall ensure there is a means to communicate with each client at a facility, including an interpreter as needed.
- (5) The provider shall comply with Subsection R380-600-7(16) regarding critical incident reporting.
- (6) The provider shall maintain compliance with, or documentation of any exemption from, requirements for:
  - (a) any person preparing meals for any other person at the facility to have a food handler permit;
  - (b) capacity determinations that:
    - (i) include each staff and client on the premises; and
    - (ii) do not exceed the capacity limits placed by local authorities;
  - (c) fire clearance, if conducted separately from a business license; and
  - (d) licensure and registration of any vehicle used to transport a client.
- (7) A provider that allows self-serve meals shall ensure that each user of the self-serve kitchen is supervised, directed, and trained by staff that has a food handler permit.
- (8) A provider that serves a parent and the parent's child may allow an adult client to maintain full responsibility for that client's dietary needs and the dietary needs of that client's child if the provider maintains that client's written consent in the client record.
- (9) A provider that offers meals for a client shall adhere to and document staff training for safe practices that include:
  - (a) an allowance for nutritious snacks to be available during restricted hours if the provider restricts access to food and kitchen equipment; and
  - (b) how to identify and accommodate a client with special dietary needs.
- (10) If a client participates in any meal preparation, the provider shall provide written information to each participating staff and client of:
  - (a) menu planning and procedures;
  - (b) nutrition and sanitation requirements;
  - (c) rules and privileges of kitchen use;
  - (d) the schedule of responsibilities;
  - (e) rules for sharing self-prepared food; and
  - (f) shopping and storage responsibilities.
- (11) The provider shall require each client to sign an agreement form at admission acknowledging that:
  - (a) visitors are allowed on premises to assist with housing, locating housing, religious needs, social needs, the Supplemental Nutrition Assistance Program (SNAP), and other client-specific needs;
  - (b) participation in any meeting or group with a visitor is voluntary; and
  - (c) each client signature on the form and voluntary participation in the visitation constitutes the client's invitation to the visitors in the facility.
- (12) A visitor, as described in Subsection (11), does not include staff.

### **R501-22A-7. Client Care, Safety, and Supervision.**

- (1) The provider shall ensure there is 24-hour supervision of any client at the facility.
- (2) The provider shall maintain staffing ratios in accordance with the facility type, as described in Subsections (2)(a) through (2)(c).
  - (a) An adult homeless facility shall ensure there is at least one direct care staff at the facility for every 30 adults during weekday, daytime hours.
  - (b) A family homeless facility may allow a child's parent or guardian to be responsible for supervising the child if there is at least one staff member present for every five families.
  - (c) A temporary homeless youth facility shall ensure there is at least one direct care staff member at the facility for every ten clients.

- (3)(a) The provider shall ensure that at least one staff member who is on-duty and present with clients has first aid and CPR certification.
- (b) Any first aid and CPR certification staff training shall be in-person and hands-on.
- (4) An emergency facility may operate above staffing ratios during dangerous weather conditions, on a weekend, or during sleeping hours if the program has:
  - (a) a documented chain of command for on-call availability;
  - (b) a surveillance camera system;
  - (c) an emergency radio on site and each on-duty staff is trained regarding how and when the radio is to be used; or
  - (d) other means of back-up support in case of emergency.
- (5) In accordance with Subsections 35A-16-703(1) through 35A-16-703(3), an emergency facility provider operating in a county where a code blue alert is in effect may increase capacity by 35% when:
  - (a) fire code and building code capacities permit the increase; and
  - (b) procedures are implemented for:
    - (i) expediting intake; and
    - (ii) denial of an individual's entry if the facility is at the maximum building capacity or the individual poses a risk to the population.

**R501-22A-8. Client Intake.**

- (1) The provider shall ensure that at client intake, staff addresses and documents:
  - (a) each client's authorization to obtain emergency care;
  - (b) each client's dominant language and mode of communication; and
  - (c) a suicide screening for each client.
- (2) A provider may not admit an individual who is unresponsive or unable to consent to care.

**R501-22A-9. Client Records.**

- (1) The provider shall maintain client records that meet the requirements of the Homeless Management Information System, as defined in Section 35A-16-102.
- (2) The provider shall maintain the documentation listed in Subsection (1) for at least 30 days after a client's last facility stay, with the exception of a single-night stay, to reopen the client file if the client returns.
- (3)(a) The provider shall ensure each client record includes:
  - (i) client contact information, including the client's:
    - (A) name;
    - (B) date of birth;
    - (C) identified gender;
    - (D) entrance date into the facility;
    - (E) exit date from the facility;
    - (F) phone number;
    - (G) last known physical address; and
    - (H) current email address;
  - (ii) any emergency contact for the client, including the emergency contact's:
    - (A) name;
    - (B) phone number;
    - (C) physical address; and
    - (D) current email address;
  - (iii) any information that could affect the health, safety or wellbeing of the client, including any:
    - (A) allergy;
    - (B) chronic condition;
    - (C) communicable disease; and
    - (D) medication needs;
  - (iv) any grievance or complaint made by or against the client and any action taken by the program to address the grievance or complaint;
  - (v) any critical incident report involving the client; and
  - (vi) any signed agreement and consent form for the client to receive services.
- (b) If the provider cannot obtain any of the information listed in Subsection (3)(a), the client record shall document the reason why that information is not obtainable.

**R501-22A-10. Staff Records and Training.**

- (1) The provider shall make available and document training for each staff member and volunteer that addresses:
  - (a) communicable disease outbreak prevention and response, including:
    - (i) common communicable diseases in the population served;
    - (ii) immediate steps to take upon disease identification or outbreak suspicion, including isolation protocols and notification to the appropriate local health authority; and
    - (iii) recognizing signs and symptoms of communicable diseases;

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- (b) cultural competency;
- (c) de-escalation and crisis intervention techniques;
- (d) facility policies and safe practices; and
- (e) recognizing and addressing signs of abuse and neglect.
- (2) The provider shall ensure each staff record contains:
  - (a) any certification or qualification relevant to staff providing services to a client;
  - (b) any grievance or incident records involving staff;
  - (c) any applicable CPR and first aid training and certification; and
  - (d) the signed department provider code of conduct form.

### **R501-22A-11. Background Checks.**

- (1) OBP shall conduct a human services program background check for each program staff member and volunteer in accordance with Section 26B-2-120 and Rule R501-14, except for:
  - (a) an individual identified as an invited visitor in accordance with Subsection 26B-2-120(10)(b)(iii); or
  - (b) a volunteer that does not have direct or unsupervised access to a client.
- (2) The provider shall designate an individual who is responsible for:
  - (a) ensuring and documenting how each applicant is directly supervised for the entirety of that applicant's supervised employment term before receiving the eligible determination;
  - (b) ensuring an application is submitted in DACS within 14 days of each staff becoming associated with the provider;
  - (c) initiating, monitoring, and maintaining background checks in DACS for each individual with direct access;
  - (d) maintaining compliance with Rule R501-14;
  - (e) managing communications with OBP and OL;
  - (f) monitoring DACS and taking necessary actions when eligibility status changes; and
  - (g) separating any staff in DACS within five days of that staff;
  - (i) no longer being associated with the provider; or
  - (ii) having an ineligible determination status from OBP on a background check with no pending appeal.
- (3) The provider shall ensure each direct care staff, contracted staff member, volunteer, and intern has an eligible background check determination before permitting that individual to work unsupervised with a client, except as excluded in Rule R501-14.

### **R501-22A-12. Physical Facility.**

- (1) The provider shall ensure that each facility complies with the following bedroom standards:
  - (a) a capacity determination that includes any staff present in the facility;
  - (b)(i) a dormitory-style bedroom that meets any square footage and capacity determinations made by the local fire authority;
  - (ii) if the local fire authority does not identify capacity, the provider shall ensure that in a multiple occupant bedroom, there is at least:
    - (A) 40 square feet per client, not counting storage space; and
    - (B) one crib for each child under two years old that does not inhibit access to or from the room;
  - (c) each client is provided with clean, comfortable bedding that is laundered:
    - (i) at least weekly;
    - (ii) when soiled; and
    - (iii) before being provided to a different person;
  - (d) except in a family unit, the sleeping area for a male client shall be separate from the sleeping area for a female client; and
  - (e) secure storage shall be available for a client's personal belongings.
- (2) An emergency facility provider may provide any portable bed, cot, or mat to accommodate fluctuating client volume.
- (3) Except as otherwise provided in Subsection (4), the provider shall ensure there is at least one bathroom that is inspected, cleaned, and stocked daily in each facility.
- (4) The facility may exceed the bathroom ratio set forth in Subsection (3) if:
  - (a) each bathroom ratio is approved by the local authority that determines capacity or OL;
  - (b) each bathroom ratio is specifically designated in any adult-only nightly facility setting;
  - (c) the provider ensures privacy for toileting and bathing;
  - (d) any individual with a disability has access to at least one locking bathroom or stall; and
  - (e) accommodations are made to meet the needs of any parent or guardian for bathing, changing, and toileting their child.
- (5) The provider shall ensure each facility has adequate ventilation and temperature control, as required by local building code.
- (6)(a) The provider may allow family members to share a bathroom.
- (b) If the bathroom is shared by more than one family, or children over the age of eight, the provider shall ensure that client privacy is maintained by the child's parent or guardian or staff.
- (7)(a) The provider shall maintain any medication and potentially hazardous item on-site in compliance with any legal requirement and consideration of the safety and risk level of the population.
- (b) The provider shall keep any medication or hazardous chemical in locked storage when not in active use.
- (8) The provider shall maintain a first aid kit at each facility.



**R501-22A-13. Additional Requirements for Temporary Homeless Youth Facilities.**

(1)(a) A temporary homeless youth facility provider may only serve clients who are younger than 18 years old, except as outlined in Subsection (1)(b).

(b) The provider may offer services to an individual who is 18 through 20 years old if:

(i) the provider maintains a ratio of at least one staff for every ten clients;

(ii) each client who is an adult is placed in age and gender appropriate sleeping quarters separate from the population of clients under 18 years old;

(iii) each client who is an adult remains in the facility voluntarily and is informed of facility rules and the repercussions of criminal behavior as an adult;

(iv) each client, of any age, is assessed by a licensed mental health therapist, as defined in Section 58-60-102, to determine and document whether the client is at imminent risk of self-harm or harming another person; and

(v) each client that is assessed and determined to be at imminent risk of self-harm or harming another person is referred to a program qualified to serve that client.

(2) In addition to the requirements in Subsection R501-22A-5(4), the provider shall develop, implement, and comply with policy that addresses:

(a) the responsibility of any client to supervise that client's own child; and

(b) rules and guidelines for each family or mixed gender clients sharing the same dormitory space or bedroom, including each individualized bedroom assignment.

(3)(a) The provider may admit a client under 18 years old with that client's own biological child.

(b) The provider shall ensure any client admitted with that client's own child has at least 40 square feet of space per person, excluding storage space, in a separately enclosed bedroom that houses only that the client with the client's child.

(4) The provider shall comply with Section 80-5-601 regarding mandatory reporting requirements for harboring a runaway.

(5) The provider shall comply with Section 26B-2-116 to coordinate educational services requirements for each client under 18 years old.

(6) The provider shall coordinate and transition each client under 18 years old to a more appropriate setting when the client cannot remain in the youth setting.

**R501-22A-14. Compliance.**

(1) Any provider operating within the scope of this rule shall have 60 days from the effective date of this rule to come into compliance with this rule.

(2) Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

**KEY: human services, licensing, homeless**

**Date of Last Change: 2025**

**Authorizing, and Implemented or Interpreted Law: 26B-2-104**

<b>NOTICE OF SUBSTANTIVE CHANGE</b>
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<b>TYPE OF FILING:</b> New
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<b>Rule or section number:</b>	<b>R501-24</b>	<b>Filing ID: 57651</b>
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<b>Agency Information</b>		
<b>1. Title catchline:</b>	Health and Human Services, Human Services Program Licensing	
<b>Building:</b>	Multi-Agency State Office Building	
<b>Street address:</b>	195 N 1950 W	
<b>City, state:</b>	Salt Lake City, UT 84116	
<b>Mailing address:</b>	PO Box 142003	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-2003	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information****2. Rule or section catchline:**

R501-24. Behavioral Health Receiving Centers

**3. Are any changes in this filing because of state legislative action?**

Changes are because of legislative action.

**If yes, any bill number and session:** HB 491 (2025 General Session)**4. Purpose of the new rule or reason for the change:**

HB 491, passed in the 2025 General Session, amended definitions in Section 26B-2-101 to include a behavioral health receiving center and enacted Section 26B-2-135 to require the Office of Licensing (OL) to adopt and enforce rules to establish the process for initial and renewal applications to operate a behavioral health receiving center.

Due to the short-term nature of services provided by behavioral health receiving centers and the additional local and state oversight of these facilities, OL determined that this new rule, Rule R501-24, is appropriate for the oversight of behavioral health receiving centers, in alignment with HB 491 (2025), rather than adding requirements to an existing residential support program licensing rule, Rule R501-22.

This new rule, Rule R501-24, provides oversight for behavioral health receiving centers that offer 23-hour crisis services to individuals experiencing a mental health crisis and assess and governs the collection of fees associated with licensure.

This new rule aims to distinguish the unique services and requirements of behavioral health receiving centers separate from residential support program providers.

Additionally, this new rule includes content relevant to behavioral health receiving centers that has previously been organized under Rule R501-1. The inclusion of specialized content in this new rule is intended to reduce the administrative burden for behavioral health receiving center providers and address the unique needs of this type of provider.

Since this provider type was not specified in Rules R501-1 and R501-22 before HB 491 (2025), no update to those rules is necessary to remove language that would otherwise be redundant with the creation of this new rule.

**5. Summary of the new rule or change:**

This new rule establishes a licensing category for a behavioral health receiving center and establishes the basic health and safety standards for behavioral health receiving center licensure, under OL.

This new rule's structure follows the same structure as other OL human services rules and includes penalty and background check sections, congruent with other rules under OL.

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

This new rule is not anticipated to result in any measurable cost or saving to the state budget, as OL already regulates receiving center providers.

Although this particular provider type was not previously specified in other rules, the process for regulating receiving centers already existed, and the creation of this new rule will streamline the process for licensing this provider type by eliminating requirements in other rules that are not applicable to behavioral health receiving centers.

While the time needed for OL to review applications for this provider type may be reduced as a result of this new rule, licensors are not likely to reduce work to the point of a measurable savings to the state budget. Even though this rule introduces a new license type, the process for licensing reviews will remain the same.

The fiscal note for HB 491 (2025) has already captured a one-time, \$700 rulemaking cost in fiscal year 2025 for the Department of Health and Human Services (department), which was absorbed by the department within existing budgets.

The fiscal note can be found at <https://pf.utleg.gov/public-web/sessions/2025GS/fiscal-notes/HB0491S03.fn.pdf>. As this cost was already captured in HB 491's (2025) fiscal note, it is not reflected in the regulatory impact summary table in this filing.

**B. Local governments:**

This new rule is not anticipated to result in a cost or savings to local governments, as behavioral health receiving centers will be regulated by OL and not local governments, and this new rule will not apply to any local government. There is no anticipated fiscal impact to local business licensing or any other item with which local government is involved.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

This new rule is not anticipated to result in a measurable cost or saving to small businesses.

This new rule, created for compliance with HB 491 (2025), is likely to include many providers already governed by residential support licensure.

Licensing reviews for a behavioral health receiving center license may be shorter due to this new rule eliminating parts of the existing review that are not applicable to this license type, but the time savings and conversion to monetary savings in provider hourly wages are inestimable due to the differences in pay scales and time spent on licensing compliance.

This new rule includes requirements applicable to short-term behavioral health receiving centers and is not anticipated to increase any cost for small business compliance.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

This new rule is not anticipated to result in a measurable cost or saving to non-small businesses.

This new rule, created for compliance with HB 491 (2025), is likely to include many providers already governed by residential support licensure.

Licensing reviews for a behavioral health receiving center license may be shorter due to this new rule eliminating parts of the existing review that are not applicable to this license type, but the time savings and conversion to monetary savings in provider hourly wages are inestimable due to the differences in pay scales and time spent on licensing compliance.

This new rule includes requirements applicable to short-term behavioral health receiving centers and is not anticipated to increase any cost for non-small business compliance.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This new rule is not anticipated to result in a cost or savings to persons other than small businesses, non-small businesses, state or local governments as the rule applies only to behavioral health receiving center providers.

There are no other persons affected by this rule filing.

**F. Compliance costs for affected persons:**

There is no anticipated compliance cost for affected persons, which would include OL and the small and non-small businesses providing behavioral health receiving center services, which fall under a broader category of receiving centers already regulated by the department.

There is no anticipated cost associated with licensing reviews eliminating parts of the review that are not applicable to behavioral health receiving centers.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0

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Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-2-135

**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

**Agency head or designee and title:**

Tracy S. Gruber, Executive Director

**Date:**

11/02/2025

**R501. Health and Human Services, Human Services Program Licensing.**
**R501-24. Behavioral Health Receiving Centers.**
**R501-24-1. Authority and Purpose.**

(1) Section 26B-2-135 authorizes this rule.

(2) This rule provides basic health and safety standards for behavioral health receiving center licensure.

**R501-24-2. Definitions.**

Terms used in this rule are defined in Sections 26B-2-101, 26B-2-120, and Rule 380-600. Additionally:

(1) "Direct Access Clearance System" or "DACS" means the online system used by the Office of Background Processing (OBP) for processing and monitoring background checks for any individual with direct access to a client in a human services program.

(2) "Direct care staff" means any staff that works directly with a client.

(3) "Mental health crisis" means the same as defined in Section 26B-5-609.

**R501-24-3. Scope.**

(1) Each behavioral health receiving center provider shall comply with any applicable federal, state, or local law, rule, or ordinance, including:

(a) Rule R380-80;

(b) Rule R380-600; and

(c) this rule.

(2) Each behavioral health receiving center provider shall offer 23-hour crisis services in a non-secured facility to an individual experiencing a mental health crisis.

**R501-24-4. License Required.**

A behavioral health receiving center license is required if a provider meets the criteria of a behavioral health receiving center, as defined in Section 26B-2-101.

**R501-24-5. Policies, Procedures, and Safe Practices.**

(1) To begin program implementation, each provider must receive OL approval of policies and procedures, in accordance with Section 26B-2-109.

(2) The provider shall develop, implement, and comply with safe practices that ensure:

(a) client health, safety, and supervision;

(b) the needs of the client population are met, including needs for food, hydration, laundry, medication, and medical care; and

(c) there is no conflict with any administrative rule or statute.

(3)(a) The provider shall maintain a policy for the prevention, screening, and response to any communicable disease outbreak.

(b) The policy shall include coordination with any appropriate local health authority.

(4) The provider shall develop, implement, and comply with policy that addresses:

(a) assessing each client's physical and mental health needs upon intake;

(b) conflict resolution;

(c) de-escalation practices and techniques;

(d) emergency evacuation procedures and conducting drills to ensure each staff knows where to locate emergency exits and assembly points;

(e) identifying any situation requiring medical attention, including using an opioid overdose reversal kit;

(f) nuisance and disruptive behavior;

(g) prohibited items;

(h) responding to significant criminal activity;

(i) responding to a significant medical emergency;

(j) search procedure;

(k) securing personal belongings;

(l) storage and administration of medication, if applicable; and

(m) suicide prevention.

(5) The provider shall have policy that complies with:

(a) Title 26B, Chapter 7, Part 5, Regulation of Smoking, Tobacco Products, and Nicotine Products; and

(b) Title 53, Chapter 5a, Part 3, Concealed Firearm Permits.

**R501-24-6. Administration.**

(1) Each provider shall identify each key decision maker and service provider associated with the license application who is accountable for compliance with licensing rules.

(2) In conspicuous places where each visitor, staff, and client may see, the provider shall post:

(a) abuse reporting laws as described in Sections 26B-6-205 and 80-2-609;

(b) an Americans with Disabilities Act notice;

(c) any department notice of agency action;

(d) a civil rights notice;

(e) the department code of conduct poster; and

(f) the program license.

(3) The provider shall ensure that when a client is present, there is a phone available in the facility that can be used to call 911.

(4) The provider shall ensure there is a means to communicate with each client at a facility, including an interpreter as needed.

(5) The provider shall comply with Subsection R380-600-7(16) regarding critical incident reporting.

(6) The provider shall maintain compliance with, or documentation of any exemption from, requirements for:

(a) any person preparing meals for any other person at the facility to have a food handler permit;

(b) capacity determinations that:

(i) include each staff and client on the premises; and

(ii) do not exceed the capacity limits placed by local authorities;

(c) fire clearance, if conducted separately from a business license; and

(d) licensure and registration of any vehicle used to transport a client.

(7) A provider that allows self-serve meals shall ensure that each user of the self-serve kitchen is supervised, directed, and trained by staff that has a food handler permit.

(8) A provider that offers meals for a client shall adhere to and document staff training for safe practices that include:

(a) an allowance for nutritious snacks to be available during restricted hours if the provider restricts access to food and kitchen equipment; and

(b) how to identify and accommodate a client with special dietary needs.

(9) The provider shall ensure that placement in a behavioral health receiving center is a voluntary alternative that the client chooses instead of a more restrictive placement.

(10) A behavioral health receiving center may not require consent to treatment as a condition of admission.

**R501-24-7. Client Care, Safety, and Supervision.**

- (1) The provider shall ensure that any client at the facility is supervised during that client's stay.
- (2) The provider shall ensure that at least one direct care staff is on-site for every:
  - (a) 15 clients if each client is an adult; or
  - (b) ten clients if any of those clients is under 18 years old.
- (3) The provider shall ensure each client who is an adult:
  - (a) is placed in an age and gender appropriate area, separate from the population of any client under 18 years old.
- (4)(a) The provider shall ensure there is at least one staff member who is on-duty and present with clients has first aid and CPR certification.
- (b) Any first aid and CPR certification staff training shall be in-person and hands-on.

**R501-24-8. Client Intake and Discharge.**

- (1) The provider shall ensure that at client intake, staff addresses and documents:
  - (a) each client's authorization to obtain emergency care;
  - (b) each client's dominant language and mode of communication; and
  - (c) a suicide screening for each client.
- (2) A provider may not admit an individual who is unresponsive or unable to consent to care.
- (3) A behavioral health receiving center shall complete a discharge summary for each client served within 23 hours of admission even if discharging the client to a different unit within the same facility or campus.

**R501-24-9. Client Records.**

- (1) The provider shall maintain client records that include the intake assessment, any 15-minute check-in notes, and a discharge plan.
- (2) The provider shall maintain the documentation listed in Subsection (1) for at least 30 days after a client's last facility stay to reopen the client file if the client returns.
- (3)(a) The provider shall ensure each client record includes:
  - (i) client information, including the client's:
    - (A) name;
    - (B) date of birth;
    - (C) identified gender;
    - (D) entrance date into the facility;
    - (E) exit date from the facility;
    - (F) phone number;
    - (G) last known physical address; and
    - (H) current email address;
  - (ii) any emergency contact for the client, including the emergency contact's:
    - (A) name;
    - (B) phone number;
    - (C) physical address; and
    - (D) current email address;
  - (iii) any information that could affect the health, safety or wellbeing of the client, including any:
    - (A) allergy;
    - (B) chronic condition;
    - (C) communicable disease; and
    - (D) medication needs;
  - (iv) any grievance or complaint made by or against the client and any action taken by the program to address the grievance or complaint;
  - (v) any critical incident report involving the client; and
  - (vi) any signed agreement and consent form for the client to receive services, including any parent or legal guardian signature for a client under 18 years old.
- (b) If the provider cannot obtain any of the information listed in Subsection (3)(a), the client record shall document the reason why that information is not obtainable.

**R501-24-10. Staff Records and Training.**

- (1) The provider shall make available and document training for each staff member and volunteer that addresses:
  - (a) communicable disease outbreak prevention and response, including:
    - (i) common communicable diseases in the population served;
    - (ii) immediate steps to take upon disease identification or outbreak suspicion, including isolation protocols and notification the appropriate local health authority; and
    - (iii) recognizing signs and symptoms of communicable diseases;
  - (b) cultural competency;
  - (c) de-escalation and crisis intervention techniques;
  - (d) facility policies and safe practices; and

- (e) recognizing and addressing signs of abuse and neglect.
- (2) The provider shall ensure each staff record contains:
  - (a) any certification or qualification relevant to the staff providing services to a client;
  - (b) any grievance or incident record involving the staff member;
  - (c) any applicable CPR and first aid training and certification; and
  - (d) the signed department provider code of conduct form.

**R501-24-11. Background Checks.**

(1) OBP shall conduct a human services program background check for each program staff member and volunteer in accordance with Rule R501-14 and Section 26B-2-120, except for:

- (a) an individual identified as an invited visitor in accordance with Subsection 26B-2-120(10)(b)(iii); and
- (b) a volunteer that does not have direct or unsupervised access to a client.

(2) The provider shall designate an individual who is responsible for:

(a) ensuring and documenting how each applicant is directly supervised for the entirety of that applicant's supervised employment term before receiving the eligible determination;

(b) ensuring an application is submitted in DACS within 14 days of each staff becoming associated with the provider;

(c) initiating, monitoring, and maintaining background checks in DACS for each individual with direct access;

(d) maintaining compliance with Rule R501-14;

(e) managing communications with OBP and OL;

(f) monitoring DACS and taking necessary actions when eligibility status changes; and

(g) separating any staff in DACS within five days of that staff:

(i) no longer being associated with the provider; or

(ii) having an ineligible determination status from OBP on a background check with no pending appeal.

(3) The provider shall ensure each direct care staff, contracted staff member, volunteer, and intern has an eligible background check determination before permitting that individual to work unsupervised with a client, except as excluded in Rule R501-14.

**R501-24-12. Physical Facility.**

(1) The provider shall ensure that each facility complies with the following bedroom standards:

(a) a capacity determination that includes any staff present in the facility;

(b)(i) a dormitory-style bedroom that meets any square footage and capacity determinations made by the local fire authority;

(ii) if the local fire authority does not identify capacity, the provider shall ensure that in a multiple occupant bedroom, there is at least 40 square feet per client, not counting storage space;

(c) each client is provided with clean, comfortable bedding that is laundered:

(i) when soiled; and

(ii) before being provided to a different person;

(d) the sleeping area for a male client shall be separate from the sleeping area for a female client; and

(e) secure storage shall be available for a client's personal belongings.

(2) Except as otherwise provided in Subsection (3), the provider shall ensure there is at least one bathroom that is inspected, cleaned, and stocked daily in each facility.

(3) The facility may exceed the bathroom ratio set forth in Subsection (2) if:

(a) each bathroom ratio is approved by the local authority that determines capacity or by OL;

(b) the provider ensures privacy for toileting and bathing; and

(c) any individual with a disability has access to at least one locking bathroom or stall.

(4) The provider shall ensure each facility has adequate ventilation and temperature control, as required by local building code.

(5)(a) The provider shall maintain any medication and potentially hazardous item on-site in compliance with any legal requirement and consideration of the safety and risk level of the population.

(b) The provider shall keep any medication or hazardous chemical in locked storage when not in active use.

(6) The provider shall maintain a first aid kit at each facility.

**R501-24-13. Compliance.**

(1) A program operating within the scope of this rule shall have 60 days from the effective date of this rule to come into compliance with this rule.

(2) Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

**KEY: human services, licensing, homeless**

**Date of Last Change: 2025**

**Authorizing, and Implemented or Interpreted Law: 26B-2-135**

**NOTICE OF SUBSTANTIVE CHANGE****TYPE OF FILING:** Amendment**Rule or section number:****R523-7****Filing ID: 57654****Agency Information**

<b>1. Title catchline:</b>	Health and Human Services, Substance Use and Mental Health	
<b>Building:</b>	Cannon Health Building	
<b>Street address:</b>	288 N 1460 W, Floor 3	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	288 N 1460 W, Floor 3	
<b>City, state and zip:</b>	Salt Lake City, UT 84116	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Thomas Dunford	801-538-4181	tdunford@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

**General Information**

<b>2. Rule or section catchline:</b>	
R523-7. Designated Examiner, Case Manager Certification and Targeted Case Manager Certification	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 347 (2025 General Session), HB 434 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
<p>The Office of Substance Use and Mental Health (office) is amending this rule to incorporate changes from the 2025 General Session, achieve compliance with the Governor's Executive Order EO No. 2021-12 by aligning rule language with the Rulewriting Manual for Utah, incorporate requirements mandated in the rulewriting authority for case management certification, and to clarify the sections that describe action and requirements associated with a case manager that has obtained a case manager certification with the office.</p>	
<b>5. Summary of the new rule or change:</b>	
<p>These amendments remove all references to a targeted case manager per legislative changes in statute. Clarification has been added to explain the duties of a case manager and the level of supervision for a case manager with a certification from the office.</p> <p>Also, the word "certified" has been added to this rule to clarify when this rule is describing requirements for an individual that has already obtained a case manager certification from the office.</p> <p>Finally, this filing makes style and formatting changes to comply with the Rulewriting Manual for Utah and align with other rules under the Department of Health and Human Services (department).</p>	

**Fiscal Information**

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
<p>This amendment removes references to a targeted case manager as required by legislative action.</p> <p>It also adds clarity to sections that refer to individuals who have obtained a case manager certification and describes the duties and level of supervision for an individual with a case manager certification, as references to targeted case management have been changed to instead refer to case management services, which existed before this amendment, these changes are not anticipated to add to, modify, or remove administrative duties or responsibility placed on the state beyond that which already existed before this filing.</p>



There is no anticipated cost or savings as a result of this amendment.

**B. Local governments:**

This amendment removes references to a targeted case manager as required by legislative action.

It also adds clarity to sections that refer to individuals who have obtained a case manager certification and describes the duties and level of supervision for an individual with a case manager certification, as references to targeted case management have been changed to instead refer to case management services, which existed before this amendment, these changes are not anticipated to add to, modify, or remove administrative duties or responsibility placed on local governments beyond that which already existed before this filing.

There is no anticipated cost or savings as a result of this amendment.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

This amendment removes references to a targeted case manager as required by legislative action.

It also adds clarity to sections that refer to individuals who have obtained a case manager certification and describes the duties and level of supervision for an individual with a case manager certification, as references to targeted case management have been changed to instead refer to case management services, which existed before this amendment, these changes are not anticipated to add to, modify, or remove administrative duties or responsibility placed on small businesses beyond that which already existed before this filing.

There is no anticipated cost or savings as a result of this amendment.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

This amendment removes references to a targeted case manager as required by legislative action.

It also adds clarity to sections that refer to individuals who have obtained a case manager certification and describes the duties and level of supervision for an individual with a case manager certification, as references to targeted case management have been changed to instead refer to case management services, which existed before this amendment, these changes are not anticipated to add to, modify, or remove administrative duties or responsibility placed on non-small businesses beyond that which already existed before this filing.

There is no anticipated cost or savings as a result of this amendment.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This amendment removes references to a targeted case manager as required by legislative action.

It also adds clarity to sections that refer to individuals who have obtained a case manager certification and describes the duties and level of supervision for an individual with a case manager certification, as references to targeted case management have been changed to instead refer to case management services, which existed before this amendment, these changes are not anticipated to add to, modify, or remove administrative duties or responsibility placed on other persons beyond that which already existed before this filing.

There is no anticipated cost or savings as a result of this amendment.

**F. Compliance costs for affected persons:**

This amendment aligns language and terminology with recent changes to statute and clarifies existing provisions.

There is no anticipated compliance cost for affected persons as a result of this amendment.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>H. Department head comments on fiscal impact and approval of regulatory impact analysis:</b>					
The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.					

## Citation Information

<b>7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:</b>		
Subsection 26B-5-102(2)(n)	Subsection 26B-5-104(2)	Subsection 26B-5-301(8)

## Public Notice Information

<b>9. The public may submit written or oral comments to the agency identified in box 1.</b>	
<b>A. Comments will be accepted until:</b>	12/31/2025
<b>10. This rule change MAY become effective on:</b>	01/07/2026
NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.	

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R523. Health and Human Services, Substance Use and Mental Health.****R523-7. Designated Examiner~~[- Case Manager Certification and Targeted]~~ and Case Manager Certification.****R523-7-1. Authority and Purpose.**

- (1) Subsections 26B-5-102(2)(~~(b)(v)~~)(n), 26B-5-104(2), and 26B-5-301(8) authorize this rule.
- (2) This rule establishes certification requirements for a:
  - (a) case manager; and
  - (b) designated examiner~~[- and~~
  - ~~(c) targeted case manager].~~

**R523-7-2. Definitions.**

(1) "Case management services" means advocating, coordinating, linking, and monitoring services to help individuals access needed basic needs, behavioral healthcare, education, housing, medical healthcare, social, and other life-enhancing service needs. A case manager assesses individual needs and develops a plan designed to help the individual obtain access to a coordinated array of non-clinical services.

(2) "Case manager" means an individual who helps a client achieve wellness and autonomy by developing a plan that coordinates and integrates support services the client needs to optimize treatment goals through advocacy, assessment, ~~[planning,]~~ communication, education, ~~planning,~~ resource management, and service facilitation.

(3) "Certified case manager" means a case manager that has received a case manager certification from the Office of Substance Use and Mental Health ~~(office).~~

~~[(2)]~~4 "Designated examiner" means the same as defined in Subsection 26B-5-301(8).

~~[(3)]~~5 "Director" means the director of the ~~[Office of Substance Use and Mental Health]~~office or a designee.

~~[(4)]~~ "Targeted case manager" means a case manager that is certified to provide targeted case management as defined in Subsection 26B-5-101(17).

#### **R523-7-3. Designated Examiners Certification.**

(1) To be certified as a designated examiner, a qualified individual shall submit an application to the ~~office~~~~[Office of Substance Use and Mental Health]~~.

(2) ~~[A]~~To be qualified, ~~an~~ individual must be:

(a) a licensed physician, as defined in Section 58-67-102, or a licensed mental health therapist, as defined in Section 58-60-102; and

(b) employed by or a designee of:

(i) a local mental health authority or a local substance abuse authority;

(ii) the Utah State Hospital; or

(iii) an ~~[Office of Substance Use and Mental Health]~~office-approved accountable care organization.

(3) The director~~[-or designee,]~~ shall review and approve an applicant to receive training if:

(a) the applicant meets the requirements in Subsection 26B-5-301(8) and this rule;

(b) the applicant is a Utah resident; and

(c) as determined by the director~~[-or designee,]~~ the applicant has adequate training and experience to perform the duties of a designated examiner.

(4) To be certified as a designated examiner, an approved applicant shall:

(a) complete a training course provided by the ~~office~~~~[Office of Substance Use and Mental Health]~~; and

(b) take an examination based on the training course ~~[in which the applicant receives]~~and earn a minimum score of 70%.

(5) The director may grant a waiver to a training requirement under this rule if the applicant can demonstrate adequate knowledge and understanding of the training requirement based on prior experience and training.

#### **R523-7-4. Case Manager General Provisions.**

(1) To be certified by the ~~office~~~~[Office of Substance Use and Mental Health]~~, a case manager shall:

(a) be at least 18 years of age;

(b) have a high school degree or a general education diploma; and

(c)(i) have obtained, within the ten years before submitting an application, at least 400 hours experience in human services or a related field through education, volunteer work, or paid employment; or

(ii) have a bachelor's degree in human services or a related field of study.

(2) The director may waive ~~[the]~~any of the certification requirements in Subsection (1)(c) if the director determines that the applicant's experience and qualification is sufficient to ensure that no client is likely to be harmed by the waived requirements if certification is granted.

#### **R523-7-5. Case Manager Certification Requirements.**

(1) An individual who meets the requirements of Section R523-7-4 may submit an application for case manager certification to the ~~office~~~~[Office of Substance Use and Mental Health]~~.

(2)~~(a)~~ The ~~office~~~~[Office of Substance Use and Mental Health]~~ shall review an application to ensure that ~~[#]~~the application is complete~~[-]~~.

~~(b)~~ ~~[and i]~~If the application is not complete, ~~the office~~ shall notify the applicant that more information is needed.

(3) The ~~office~~~~[Office of Substance Use and Mental Health]~~ shall consider each complete application and approve, deny, or ask for additional information.

(4) Before an applicant may be certified, the approved applicant ~~[shall]~~must:

(a) receive a score of 70% or higher on an examination provided by the ~~office~~~~[Office of Substance Use and Mental Health]~~ that is designed to evaluate the applicant's basic knowledge about:

(i) behavioral health disorders;

(ii) ~~case management skills; and~~

(iii) ethical behaviors and attitudes; and~~[~~

~~(iii)~~ ~~case management skills; and]~~

(b) complete an ~~office~~~~[Office of Substance Use and Mental Health]~~-approved 40-hour supervised case management practicum.

(5) The ~~office~~~~[Office of Substance Use and Mental Health]~~ shall issue a certification that is valid for three years to an individual who successfully completes the requirements described in Subsection (4).

(6) If an individual fails the ~~office~~~~[Office of Substance Use and Mental Health]~~ examination twice within a 30-day period~~[of time]~~, the individual shall wait 30 days before retaking the examination.

**R523-7-6. Case Manager Recertification Requirements.**

(1)(a) To recertify, a certified case manager shall complete 30 hours of additional approved training. The office-approved additional training ~~[that is approved by the Office of Substance Use and Mental Health]~~ shall include:

- (i) four hours of an ethics related topic;
- (ii) three hours of a suicide prevention related topic; and
- (iii) 23 hours on a topic related to:
  - (A) mental health disorders;
  - (B) substance use disorders;
  - (C) homelessness;
  - (D) trauma informed care; or
  - (E) another human services related topic.

(b) A certified case manager shall receive a score of 70% or higher on an examination provided by the office~~[Office of Substance Use and Mental Health]~~.

(2) A certified case manager shall retain documentation establishing compliance with Subsection (1) for three years after the end of the renewal cycle for which the continuing education is due. Documentation shall be provided to the office~~[Office of Substance Use and Mental Health]~~ upon request and may include:

- (a) a certificate of completion;
  - (b) a school transcript;
  - (c) a course description; or
  - (d) other course materials and proof of attendance.
- (3) A certified case manager shall ensure documentation described in Subsection (2) includes:
- (a) an official transcript verifying completion of:
    - (i) an undergraduate course of study; or
    - (ii) a graduate course of study; or
  - (b) the following information:
    - (i) the date of the course;
    - (ii) the name of the course provider;
    - (iii) the name of the instructor;
    - (iv) the course title;
    - (v) the number of hours of continuing education credit; and
    - (vi) the course objectives.
- (4) Each certified case manager shall comply with Section R380-80-5.

**R523-7-7. ~~[Targeted Case Manager Certification and Recertification:~~**

~~(1) An individual who meets the requirements of Section R523-7-6 may qualify as a targeted case manager and be certified by Office of Substance Use and Mental Health if the case manager:~~

- ~~(a) is employed by a Medicaid provider that collects Medicaid payments for targeted case management services; and~~
- ~~(b) receives supervision from a Medicaid provider that complies with all federal and state statutes, regulations, and rules that relate to targeted case management services.~~

~~(2) To recertify, a targeted case manager shall comply with Section R523-7-6 and complete an additional five hours of training related to targeted case management services that is approved by the Office of Substance Use and Mental Health.]~~ **Certified Case Manager Services and Supervision.**

(1) Each certified case manager shall be qualified to provide case management services.

(2) Each certified case manager shall be directly supervised at the certified case manager's place of employment and by an individual that:

- (a) has a high school diploma or GED and five years of experience in human services; or
- (b) has an associate's degree in human services or a related field and three years of experience in human services.

**R523-7-8. Corrective Action on a Certified Case Manager's[~~or Targeted Case Manager~~] Certification[s].**

(1) ~~[When]~~If the office~~[Office of Substance Use and Mental Health]~~ becomes aware that a certified case manager ~~[or targeted case manager]~~ has engaged in unprofessional or unlawful conduct, failed to comply with Section R380-80-5, or has failed to comply with Section ~~[R380-80-5]~~R523-7-7, the office~~[Office of Substance Use and Mental Health]~~ shall immediately review the allegation.

(2) If the office~~[Office of Substance Use and Mental Health]~~ determines the allegation is substantiated, the office~~[Office of Substance Use and Mental Health]~~ shall revoke or suspend the certified case manager's ~~[or targeted case manager's]~~ certification, based on the severity of the substantiated allegation, and if the certified case manager's conduct resulted in ~~[any of the following]~~:

- (a) a criminal charge or violation of Section R380-80-5 that results in the certified case manager~~[or targeted case manager]~~ being separated from ~~[their]~~employment with the~~[ir]~~ certified case manager's employer;
- (b) a personal financial gain through deception, or a business transaction with a client;
- (c) physical or emotional harm to a person;
- (d) a financial loss to a client, the state, or another employee; or
- (e) if the nature of the allegation is determined by the office~~[Office of Substance Use and Mental Health]~~ to be egregious enough that immediate action ~~[must]~~needs to be taken~~[to protect an individual]~~.

(3) The ~~office~~~~[Office of Substance Use and Mental Health]~~ shall ensure the following actions take place when the ~~office~~~~[Office of Substance Use and Mental Health]~~ becomes aware that a certified case manager's~~[-or targeted case manager's]~~ conduct is in violation of Section R380-80-5 that does not result in immediate revocation:

(a) within 30 days of becoming aware of the violation, the ~~office~~~~[Office of Substance Use and Mental Health]~~ shall notify the certified case manager~~[-or targeted case manager]~~ through a notice of violation specifying the area of noncompliance;

(b) within 30 days of receiving a notice of violation, the certified case manager~~[-or targeted case manager]~~ shall submit an acceptable written plan to the ~~office~~~~[Office of Substance Use and Mental Health]~~ explaining how the certified case manager~~[-or targeted case manager]~~ will achieve compliance within 30 days after receiving the notice of violation; and

(c) if an acceptable plan of action is not received by the ~~office~~~~[Office of Substance Use and Mental Health]~~ within 30 days of sending the notice of agency action, the ~~office~~~~[Office of Substance Use and Mental Health]~~ shall suspend the certified case manager's~~[-or targeted case manager's]~~ certification until the certified case manager~~[-or targeted case manager]~~ submits an acceptable plan.

(4) The ~~office~~~~[Office of Substance Use and Mental Health]~~ shall revoke the certification of a certified case manager~~[-or targeted case manager]~~ if the certified case manager~~[-or targeted case manager]~~:

(a) fails to provide the ~~office~~~~[Office of Substance Use and Mental Health]~~ with satisfactory written evidence of compliance to a plan of action within 30 days after the certified case manager receives a notice of suspension; or

(b) receives more than two notices of noncompliance with Section R380-80-5 in a one-year period.

(5) An individual with a revoked case manager~~[-or targeted case manager]~~ certification may not reapply for recertification for ~~[a period of]~~ 12 months.

(6) ~~[A]~~~~A~~ notice[s] that a certified case manager's~~[-or targeted case manager's]~~ certification has been revoked shall include instruction on how to appeal the decision as provided in Title 63G, Chapter 4, Administrative Procedures Act and Rule R410-14.

(7) If a certified case manager~~[-or targeted case manager]~~ fails to complete the requirements for continuing education, the ~~office~~~~[Office of Substance Use and Mental Health]~~ shall allow the case manager's~~[-or targeted case manager's]~~ certificate to expire and may not renew the certification unless, within 30 days of expiration, the individual submits proof of completion of the required continuing education.

(8) If a certified case manager's~~[-or targeted case manager's]~~ certification expires as described in Subsection (7), the individual may submit a new application for ~~office~~~~[Office of Substance Use and Mental Health]~~ certification no sooner than 60 days after the expiration date.

**KEY:** designated examiners, involuntary commitment, case managers, case manager certification

**Date of Last Change:** ~~[January 27,]~~2025

**Notice of Continuation:** December 8, 2020

**Authorizing, and Implemented or Interpreted Law:** 26B-5-104(2); 26B-5-301(8)

#### NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Repeal and Reenact

**Rule or section number:**

**R523-10**

**Filing ID: 57642**

#### Agency Information

<b>1. Title catchline:</b>	Health and Human Services, Substance Use and Mental Health	
<b>Building:</b>	Cannon Health Building	
<b>Street address:</b>	288 N 1460 W, Floor 3	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	288 N 1460 W, Floor 3	
<b>City, state and zip:</b>	Salt Lake City, UT 84116	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Thomas Dunford	801-538-4181	tdunford@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

#### General Information

<b>2. Rule or section catchline:</b>	R523-10. Standards for Methadone Addiction Treatment Providers	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.	
<b>If yes, any bill number and session:</b>	HB 199 (2025 General Session)	

**4. Purpose of the new rule or reason for the change:**

HB199, passed in the 2025 General Session, amended Section 58-17b-309.7 to require the Department of Health and Human Services (department) to create rules over the operation of a mobile unit.

Upon agency review, the department determined there were additional provisions originally in this rule that were outdated and unnecessary.

Therefore, the department determined that a repeal and reenact of this rule was appropriate.

**5. Summary of the new rule or change:**

This filing removes outdated and unnecessary provisions, including methadone monitoring duties for the Office of Substance Use and Mental Health, and updates this rule to reflect authority granted to the department in Section 58-17b-309.7 to establish requirements for the operation of a mobile unit.

Additionally, this filing makes style and formatting changes to comply with the Rulewriting Manual for Utah and align with other rules under the department.

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

There is no anticipated cost or savings to the state budget as a result of this filing.

Previous to this filing, an opioid treatment program (OTP) was still required to comply with laws and regulations specified in this rule, and state agencies involved in regulating OTPs, including the Division of Licensing and Background Checks and the Office of Substance Use and Mental Health, still retain the same regulatory responsibilities.

Further, this rule does not require an OTP to operate a mobile unit. Instead, it aligns requirements for any OTP that chooses to operate a mobile unit with statutory definitions.

**B. Local governments:**

There is no anticipated cost or savings to local governments as a result of this filing.

Previous to this filing, an OTP was still required to comply with laws and regulations specified in this rule, and state agencies involved in regulating OTPs still retain the same regulatory responsibilities.

Further, this rule does not require an OTP to operate a mobile unit. Instead, it aligns requirements for any OTP that chooses to operate a mobile unit with statutory definitions.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

There is no anticipated cost or savings to small businesses as a result of this filing.

Previous to this filing, an OTP was still required to comply with laws and regulations specified in this rule, and state agencies involved in regulating OTPs still retain the same regulatory responsibilities.

Further, this rule does not require an OTP to operate a mobile unit. Instead, it aligns requirements for any OTP that chooses to operate a mobile unit with statutory definitions.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated cost or savings to non-small businesses as a result of this filing.

Previous to this filing, an OTP was still required to comply with laws and regulations specified in this rule, and state agencies involved in regulating OTPs still retain the same regulatory responsibilities.

Further, this rule does not require an OTP to operate a mobile unit. Instead, it aligns requirements for any OTP that chooses to operate a mobile unit with statutory definitions.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There is no anticipated cost or savings to other persons as a result of this filing.

Previous to this filing, an OTP was still required to comply with laws and regulations specified in this rule, and state agencies involved in regulating OTPs still retain the same regulatory responsibilities.

Further, this rule does not require an OTP to operate a mobile unit. Instead, it aligns requirements for any OTP that chooses to operate a mobile unit with statutory definitions.

**F. Compliance costs for affected persons:**

There are no anticipated compliance costs for affected persons as a result of this filing.

Previous to this filing, an OTP was still required to comply with laws and regulations specified in this rule, and state agencies involved in regulating OTPs, including the Division of Licensing and Background Checks and the Office of Substance Use and Mental Health, still retain the same regulatory responsibilities.

Further, this rule does not require an OTP to operate a mobile unit. Instead, it aligns requirements for any OTP that chooses to operate a mobile unit with statutory definitions.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 58-17b-309.7		
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## Public Notice Information

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

## Agency Authorization Information

**Agency head or  
designee and title:**

Tracy S. Gruber, Executive Director

**Date:**

11/02/2025

**R523. Health and Human Services, Substance Abuse and Mental Health.**

**~~R523-10. Standards for Methadone Addiction Treatment Providers.~~**

**~~R523-10-1. Statutory Authority.~~**

~~The Division of Substance Abuse and Mental Health under the authority granted to it by Section 62A-15-105, establishes the following standards for providers of methadone and other opioid treatment medication services.~~

**~~R523-10-2. Regulatory Compliance for Methadone Providers.~~**

~~(1) All Substance Abuse providers, contractors or licensed persons who dispense methadone or other opioid treatment medications shall:~~

- ~~(a) Comply with all Federal regulations, including 42 CFR Part 8;~~
- ~~(b) Comply with all State, and Local requirements regulating licensing for the purchasing, possession, distribution, and dispensing of methadone or other opioid treatment medications;~~
- ~~(c) Comply with all requirements of licensed substance abuse treatment programs; and~~
- ~~(d) Comply with the requirements of the Utah Department of Human Services "Provider Code of Conduct".~~

**~~R523-10-3. Division Duties in Monitoring Methadone Treatment.~~**

~~(1) The Division of Substance Abuse and Mental Health, in consultation with, and receiving input from the licensed Opioid Treatment Providers (OTPs) in the state, shall:~~

- ~~(a) Conduct regular meetings of the licensed OTPs in the state;~~
- ~~(b) Work with licensed OTPs and other agencies as necessary to preclude dual enrollments of clients;~~
- ~~(c) Disseminate current research and information pertaining to opioid treatment;~~
- ~~(d) Review and act on Exemption Requests to Federal Take Home regulations in accordance with 42 CFR Part 8; and~~
- ~~(e) Develop and promulgate a protocol for take home exceptions for long distance clients in conjunction with the Center for Substance Abuse Treatment's Division of Pharmacologic Therapies and the licensed OTPs with the state.]~~

**R523-10. Standards for Mobile Methadone Addiction Treatment Providers.**

**R523-10-1. Authority and Purpose.**

(1) Subsection 58-17b-309.7(3)(h) authorizes this rule.

(2) This rule establishes requirements for the operation of a mobile unit.

**R523-10-2. Definitions.**

(1) "Mobile unit" means the same as defined in Subsection 58-17b-309.7(1)(b).

(2) "Opioid treatment program" means the same as defined in Subsection 58-17b-309.7(1)(c).

**R523-10-3. Regulatory Compliance for Mobile Methadone Providers.**

(1) An opioid treatment program may operate one or more mobile units to serve any individual without a fixed address or any other individual as determined appropriate by the program.

(2) An opioid treatment program operating a mobile unit shall comply with:

- (a) Section 58-17b-309.7;
- (b) Rule R501-21;
- (c) each applicable federal regulation, including 42 CFR Part 8 (2025);
- (d) each applicable state and local requirement regulating licensing for the purchasing, possession, distribution, and dispensing of methadone or other opioid treatment medication;
- (e) each applicable requirement of a licensed substance abuse treatment program; and
- (f) each applicable requirement of the Department of Health and Human Services.

**KEY: methadone, methadone programs**

**Date of Last Change: ~~December 22, 2015~~2025**

**Notice of Continuation: December 8, 2020**

**Authorizing, and Implemented or Interpreted Law: ~~62A-15-105~~58-17b-309.7**



**NOTICE OF SUBSTANTIVE CHANGE****TYPE OF FILING:** Amendment**Rule or section number:****R523-12****Filing ID:** 57655**Agency Information**

<b>1. Title catchline:</b>	Health and Human Services, Substance Use and Mental Health	
<b>Building:</b>	Cannon Health Building	
<b>Street address:</b>	288 N 1460 W, Floor 3	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	288 N 1460 W, Floor 3	
<b>City, state and zip:</b>	Salt Lake City, UT 84116	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Thomas Dunford	801-538-4181	tdunford@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

**General Information**

<b>2. Rule or section catchline:</b>	
R523-12. On-Premise Alcohol Training and Education Seminar Rules of Administration	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 361 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
<p>The Department of Health and Human Services (department) is amending this rule to incorporate changes from HB 361, passed in the 2025 General Session, and to achieve compliance with the Governor's Executive Order EO No. 2021-12 by aligning rule language with the Rulewriting Manual for Utah.</p> <p>The department also is filing this to simplify sections of this rule associated with corrective actions to reduce administrative burden on the public and the agency.</p>	
<b>5. Summary of the new rule or change:</b>	
<p>This amendment updates this rule to align with current statute by adding a requirement for on-premise seminar providers to include a Division of Integrated Healthcare (division) provided training and educational materials on ways to identify overdose.</p> <p>It also corrects citations to match legislative renumbering and removes parts of corrective action sections that do not align with current statutory requirements.</p> <p>Finally, it makes style and formatting changes to better align with the Rulewriting Manual for Utah and other rules under the department and simplifies sections to add clarity.</p>	

**Fiscal Information**

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
<p>This filing aligns the rule with changes made by HB 361 (2025), which has added a requirement for on-premise seminar providers to include a division-provided training and educational materials on ways to identify overdose.</p> <p>It is estimated that this training will take approximately one hour to develop but will only require time that is already part of the program administrator's current duties, so no cost is anticipated to be associated with the development of the training materials.</p>

Other changes include updating statutory references, simplifying existing sections to increase clarity without modifying requirements, removing parts of corrective action sections to align with current statutory requirements, and making style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

These changes do not add to or remove administrative duties or responsibilities beyond those existing in this rule before this amendment. As such, the department does not anticipate a cost or savings to the state as a result of this rule.

#### **B. Local governments:**

Local governments do not participate in on-premise training, so this amendment should not affect this group. As such, there is no fiscal impact anticipated for any local government.

#### **C. Small businesses** ("small business" means a business employing 1-49 persons):

This filing aligns this rule with changes made by HB 361 (2025), which has added a requirement for on-premise seminar providers to include a division-provided training and educational materials on ways to identify overdose.

These training materials will require changes to be made to the seminar provider's curriculum. Any cost attributed to this is inestimable, however, as the department has no way of identifying how much time or the effort involved in a seminar provider rewriting a curriculum to meet this requirement, or how a provider may implement the new requirement.

Other changes include updating statutory references, simplifying existing sections to increase clarity without modifying requirements, removing parts of corrective action sections to align with current statutory requirements, and making style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

These changes do not add to or remove administrative duties or responsibilities of small businesses beyond those existing in this rule before this amendment.

#### **D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

This filing aligns the rule with changes made by HB 361 (2025), which has added a requirement for on-premise seminar providers to include a division-provided training and educational materials on ways to identify overdose.

These training materials will require changes to be made to the seminar provider's curriculum. Any cost attributed to this is inestimable, however, as the department has no way of identifying how much time or the effort involved in a seminar provider rewriting a curriculum to meet this requirement, or how a provider may implement the new requirement.

Other changes include updating statutory references, simplifying existing sections to increase clarity without modifying requirements, removing parts of corrective action sections to align with current statutory requirements, and making style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

These changes do not add to or remove administrative duties or responsibilities of non-small businesses beyond those existing in this rule before this amendment.

#### **E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an *agency*):

This filing aligns the rule with changes made by HB 361 (2025), which has added a requirement for on-premise seminar providers to include a division-provided training and educational materials on ways to identify overdose.

These training materials will require changes to be made to the seminar provider's curriculum. Any cost attributed to this is inestimable, however, as the department has no way of identifying how much time or the effort involved in a seminar provider rewriting a curriculum to meet this requirement, or how a provider may implement the new requirement.

Other changes include updating statutory references, simplifying existing sections to increase clarity without modifying requirements, removing parts of corrective action sections to align with current statutory requirements, and making style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

These changes do not add to or remove administrative duties or responsibilities of other persons beyond those existing in this rule before this amendment.

**F. Compliance costs for affected persons:**

Affected persons include the division, which is required to provide a training and educational materials on identifying overdose, and on-premise seminar providers, which are required to include that training and material in a curriculum.

The state is not anticipated to incur a compliance cost, as creating the material falls within existing roles, and while there may be a compliance cost for seminar providers, the department is unable to provide an estimate, as there is no way of identifying how much time or the effort involved in a seminar provider rewriting a curriculum to meet this requirement, or how a provider may implement the new requirement.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

**Regulatory Impact Summary Table**

<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-5-205

**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.****A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/02/2025
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**R523. Health and Human Services, Substance Use and Mental Health.**

**R523-12. On-Premise Alcohol Training and Education Seminar Rules of Administration.**

**R523-12-1. Authority and ~~Intent~~ Purpose.**

(1) ~~[This rule is adopted under the authority of]~~Section 26B-5-205 ~~[authorizing the Division of Integrated Healthcare to administer the Alcohol Training and Education Seminar Program.~~

~~(2) The intent of]~~authorizes this rule~~[- is to require].~~

~~(2) This rule:~~

~~(a) requires that~~ every person who sells or furnishes alcoholic beverages to the public for on-premise consumption ~~[to]~~complete a seminar; and

~~(b) establishes criteria for:~~

~~(i) on-premise server training[- seminar in the scope of the person's employment.], including how an instructor provides the training;~~

~~(3) This rule includes:~~

~~(a) Certification of providers;~~

~~(b) Approval of the Seminar]~~ (ii) seminar curriculum approval;

~~(e) The ongoing activities]~~iii) the requirement of ~~[providers]~~an online course to design each seminar to inhibit fraud;

~~(iv) seminar provider certification; and~~

~~(d) The]~~v) the process for approval, denial, suspension~~[- and], or~~ revocation of ~~[provider]~~a seminar provider's certification.

**R523-12-2. Definitions.**

(1) "Approved ~~[C]~~curriculum" means a provider's curriculum ~~[which]that~~ has been approved by the Division ~~[in accordance with these rules.]of Integrated Healthcare (division).~~

(2) "Certification" means written approval from the ~~[D]~~division stating ~~[a person or company]that an entity~~ has met the requirements to become a seminar provider.

(3) "~~[Director]~~Licensee" means the ~~[Director of the Division of Integrated Healthcare.]same as defined in Subsection 26B-5-205(1)(b).~~

~~(4) "Division" means the Division of Integrated Healthcare.~~

~~(5)(a) "Manager" means a person chosen or appointed to manage, direct, or administer [the]operations at [the]a licensee's premises[ of a licensee].~~

~~(b) A manager may [also]be a supervisor.~~

~~(6)5~~ "On-premise consumption" means the consumption of alcoholic products by a person within any building, enclosure, room, or designated area ~~[which]that~~ has been legally licensed to allow consumption of alcohol.

~~(7)6~~ "Seminar" means the ~~[Alcohol Training -]alcohol training and [Education Seminar]education seminar.~~

~~(8)7~~ "Server" ~~[is]means~~ an employee who~~[- actually]~~ makes available, serves~~[- to]~~, or provides ~~[a]an alcoholic drink [or drinks-]to a~~ customer for consumption on the premises of ~~[the]a~~ licensee.

~~(9)8~~ "Supervisor" means an employee who~~[- under the direction of a manager, if the business establishment employs a manager, or under the direction of the owner or president of the corporation if no manager is hired,]~~ directs or has the responsibility to direct, transfer, or assign duties to ~~[employees who actually provide alcoholic beverages to customers on the premises of the licensee]a server.~~

~~(a) If the licensee employs a manager who is not the supervisor, the supervisor is under the direction of the manager.~~

~~(b) If the licensee does not employ a manager, the supervisor is under the direction of the owner or president of the licensee.~~

**R523-12-3. Seminar Provider Certification Application Procedure.**

(1) ~~[A provider]~~An applicant seeking first-time certification shall ~~[make application to]~~contact the division ~~to apply for a seminar provider certification~~ at least 30 days ~~[prior to]before~~ the first scheduled seminar date.

(2) A seminar provider seeking recertification ~~[to administer the seminar-]shall [make]submit an application and training materials~~ to the division at least 30 days ~~[prior to]before~~ expiration of the current certification.

~~(2)3~~ Any seminar conducted by a noncertified ~~[provider is void and shall]~~entity does not meet the server training requirements authorized under Section 26B-5-205.

~~(3) All]4~~ An application ~~[forms-]shall be reviewed by the division[- The division shall-] to determine if the application is complete and in compliance with Section 26B-5-205 and ~~[these rules.]Sections R523-12-4 through R523-12-9.~~~~

(5) If the division approves ~~[the]an~~ application~~[-]~~ and the submitted curriculum and determines ~~[the provider]an applicant~~ has met ~~[all]every~~ other requirement~~[s]~~, the division shall certify the applicant as a seminar provider.

~~(4) Within 30 days after the division has taken action, the]~~6) The division shall ~~[officially-]notify [the]an applicant [of the action taken: denial, approval, or request for further information. Notification of the action taken shall be forwarded-]in writing [to]that the [applicant-~~

~~(5) If an-]application [requires additional information of corrective action, a provider may continue to conduct seminars for 30 days from the date of notification. If the provider has not resolved the action required with the division by that date, the provider is no longer certified to provide the seminar and must cease until all actions are-]has been approved[- by the division], denied, or needs further information within 30 days after receipt of the application.~~

**R523-12-4. Seminar Provider Responsibilities.**

(1)(a) ~~[For each-]Within 30 days of an individual[person]~~ completing ~~[the]a~~ seminar, the seminar provider shall electronically submit to the division the:

~~(i) individual's name[-];~~

- ~~\_\_\_\_\_~~ (ii) individual's date of birth~~[-]~~;
- ~~\_\_\_\_\_~~ (iii) last four digits of the ~~[person]~~individual's social security number~~[-, the]~~;
- ~~\_\_\_\_\_~~ (iv) date the ~~[person]~~individual completed the training~~[-]~~; and~~[- the]~~
- ~~\_\_\_\_\_~~ (v) required fee~~[-, within 30 days of the completion of the seminar]~~.
- ~~\_\_\_\_\_~~ (b) The seminar provider shall securely send any personal information for an individual, specified in Subsection (1)(a), according to the method specified by the division.
- (2) Each ~~[person]~~individual ~~[who]~~that has completed ~~[the]~~a seminar and passed the seminar provider~~[-]~~administered and division~~[-]~~approved examination shall be approved as ~~[a]~~an on-premise server for a period ~~[which]~~that begins at the completion date of the seminar and expires three years from ~~[this date. Recertification requires the server to complete a new seminar every three years]~~that date.
- (3) ~~[The]~~A seminar provider shall issue a certification card to the server~~[-. The card shall contain]~~ that contains at least the:
  - ~~\_\_\_\_\_~~ (a) name of the server; and~~[- the]~~
  - ~~\_\_\_\_\_~~ (b) expiration date~~[-. The]~~ of the certification.
- ~~\_\_\_\_\_~~ (4) A seminar provider shall be responsible for issuing any duplicate~~[s]~~ or lost card~~[s]~~.
- ~~[(4) The Provider]~~5) A seminar provider shall implement at least three of the following measures to prevent fraud:
  - (a) ~~[A]~~authentication that accurately identifies the individual taking ~~[the]~~an online course or test;
  - (b) ~~[M]~~measures to ensure that an individual taking ~~[the]~~an online course or test is focused on training material throughout the entire training period;
  - (c) ~~[M]~~measures to track the ~~[actual]~~time an individual taking ~~[the]~~an online course or test is actively engaged online;
  - (d) ~~[A seminar provider to provide]~~ technical support, such as requiring a telephone number, email, or other method of communication that allows an individual taking ~~[the]~~an online course or test to receive assistance if the individual ~~[is unable to]~~cannot participate online because of technical difficulties;
  - (e) ~~[A]~~a test to meet quality standards, including randomization of test questions and maximum time limits to take a test;
  - (f) ~~[A seminar provider to have a system to reduce fraud as to]~~a process that tracks who completes an online course or test, such as requiring a distinct online certificate with information printed on the certificate that identifies the ~~[person]~~individual taking the online course or test, or ~~[requiring]~~installing measures ~~[to]~~within the seminar provider's website that inhibit duplication of a certificate;
  - (g) ~~[M]~~measures to allow an individual taking an online course or test to provide an evaluation of the online course or test;
  - (h) ~~[A seminar provider]~~a way to track the ~~[I]~~internet protocol address or similar electronic location of an individual who takes an online course or test;
  - (i) ~~[An]~~a means for an individual who takes an online course or test to use an e-signature; ~~[or]~~and
  - (j) ~~[A seminar provider]~~a means to invalidate a certificate if the seminar provider learns that ~~[the]~~a certificate does not accurately reflect the individual who took the online course or test.

#### **~~R523-12-5.] Server Responsibilities.~~**

~~\_\_\_\_\_ A server is required within 30 days of employment to pass the Seminar.~~

#### **~~R523-12-6.] Division Responsibilities.~~**

The division shall maintain the database of servers who have completed the seminar.

#### **~~R523-12-7]6. Approved Curriculum.~~**

- (1) Each seminar provider must have a curriculum approved by the division~~[-. This curriculum must provide]~~ that provides at least three hours of instruction ~~[both]~~for ~~[original]~~first-time certification and for any ~~[and all recertifications.]~~recertification.
- ~~\_\_\_\_\_~~ (2) The contents of an approved curriculum shall include the topics identified in Subsection 26B-5-205(4)(b) and the following components:
  - (a) ~~[A]~~alcohol as a drug and its effect on the body and behavior:
    - (i) ~~[F]~~facts about alcohol;
    - (ii) ~~[W]~~what alcohol is; and
    - (iii) ~~[A]~~alcohol's path through the body~~[-]~~;
  - (b) ~~[F]~~factors influencing the effect of alcohol including:
    - (i) ~~[F]~~food and digestive factors;
    - (ii) ~~[W]~~weight, physical fitness and gender factors;
    - (iii) ~~[P]~~psychological factors;
    - (iv) ~~[T]~~tolerance; and
    - (v) ~~[A]~~alcohol used in combination with other drugs~~[-]~~;
  - (c) ~~[R]~~recognizing drinking levels including:
    - (i) ~~[Explanation]~~descriptions of behavioral signs and indications of impairment;
    - (ii) ~~[C]~~classification of behavioral signs; and
    - (iii) ~~[Defining]~~the definition of intoxication~~[-]~~;
  - (d) ~~[Recognizing the problem drinker and]~~techniques for servers to help control consumption that include:
    - (i) ~~[U]~~use of a classification system;
    - (ii) ~~[U]~~use of alcohol facts;
    - (iii) ~~[C]~~continuity of service; and
    - (iv) ~~[D]~~drink counting~~[-]~~;

## NOTICES OF PROPOSED RULES

- (e) Overview of state alcohol laws:
- (i) Utah liquor distribution and control;
- (ii) ~~[L]~~ legal age of consumption;
- (iii) prohibited sales;
- (iv) ~~[T]~~ third party liability and the Dram Shop Law;
- (v) ~~[L]~~ legal definition of intoxication; and
- ~~\_\_\_\_\_ (vi) Legal~~ legal responsibilities of servers[-];
- (f) ~~[T]~~ techniques for dealing with the problem customer ~~[including]~~ and rehearsal and practice of these techniques[-] that include:
- ~~[(g) Intervention techniques;~~
- ]
  - (i) ~~[S]~~ slowing down service;
  - (ii) ~~[O]~~ offering food or nonalcoholic beverages;
  - (iii) ~~[S]~~ serving water with drinks;
  - (iv) ~~[N]~~ not encouraging reorders; and
  - (v) ~~[Cutting off]~~ discontinuing service[-];
  - ~~(h) Establishing~~ g) establishing house rules for regulating alcoholic beverages such as:
  - (i) ~~[M]~~ management and co-workers' support; and
  - (ii) ~~[Dealing]~~ ways to deal with minors; ~~[-and]~~
  - ~~(i) Alternative~~ h) alternative means of transportation and getting the customer home safely that include:
  - (i) ~~ask~~ asking a customer to arrange alternative transportation;
  - (ii) ~~[C]~~ calling a taxi or transportation service;
  - (iii) ~~[Accommodations]~~ arranging accommodations for the night; and
  - (iv) ~~[Telephone]~~ calling the police[-]; and
  - ~~\_\_\_\_\_ (i) division-provided training and educational materials on ways to identify overdose.~~

### R523-12-~~[8]~~7. Examination.

The examination shall include questions concerning ~~[alcohol as a drug and its effect on the body]~~ approved curriculum and ~~[behavior, recognizing and dealing with the problem drinker, Utah alcohol laws, terminating service, and alternative means of transportation to get the customer safely home. The]~~ the portion of the exam concerning Utah's alcohol laws ~~[shall be]~~ and uniform questions approved by the Department of Alcoholic Beverage Services or as updated and approved by the division.

### R523-12-~~[9]~~8. Alcohol Training and Education Seminar Provider Standards.

- (1) The division may certify an applicant who has a program course that:
  - (a) ~~[D]~~ does not have a history of liquor law violations or any convictions showing disregard for laws related to being a responsible liquor provider;
  - (b) ~~[Identifies all]~~ identifies each program instructor[s] and instructor trainer[s] and certifies in writing that ~~[they have]~~ each program instructor and instructor trainer:
    - ~~\_\_\_\_\_ (i) has~~ been trained to present the course material; and ~~[-that they have]~~
    - ~~\_\_\_\_\_ (ii) has~~ not been convicted of a felony or of any violation of the laws or ordinances concerning alcoholic beverages[-] within the last five years;
  - (c) ~~[A]~~ agrees to notify the division in writing of any change[s] in program instructor[s] or instructor trainer and submit the assurances called for in Subsection ~~[R523-12-9]~~(1)(b) for ~~[all]~~ each new ~~[instructors;]~~ program instructor or instructor trainer; and
  - (d) ~~[Will establish]~~ establishes and maintains course completion records.
- (2) ~~[All]~~ Any online training course[s] shall be provided on a secure website.
- ~~\_\_\_\_\_ (3) A seminar provider shall update curriculum as requested by the division within 30 days of the request.~~

### R523-12-~~[10]~~9. Grounds for Denial, Corrective Action, Suspension, and Revocation.

- ~~[(1)-]~~ The division may deny, suspend or revoke certification if:
  - (1) ~~a) The~~ seminar provider or applicant violates ~~[these rules, as provided in]~~ this rule or Section 26B-5-205; ~~[-or]~~
  - ~~[(b) The]~~ 2) an applicant fails to correctly complete ~~[all]~~ each required step[s] of the application process ~~[-as determined by these rules]; or~~ ~~[-other rules or statutes referenced in these rules; or]~~
  - ~~[(e) A]~~ 3) a provider whose certification has been previously denied, suspended or revoked has reapplied without ~~[taking the]~~ completing a previously required corrective action plan.

### R523-12-~~[11]~~10. Corrective Action.

- (1) ~~[If]~~ When the division becomes aware that ~~[a]~~ an applicant or seminar provider is in violation of ~~[these rules or other rules or statutes referenced in these rules]~~ this rule the division shall:
  - (a) ~~[W]~~ within 30 days after becoming aware of the violation, ~~[the division shall identify in writing the specific areas in which the]~~ notify an applicant or seminar provider ~~[is not in compliance and send written]~~ in a notice ~~[to the provider]~~ of noncompliance; and
  - (b) ~~[W]~~ within 30 days of the notice ~~[notification]~~ of noncompliance, ~~[the]~~ require:
    - ~~\_\_\_\_\_ (i) an applicant to provide any additional information needed to complete an application; or~~
    - ~~\_\_\_\_\_ (ii) require a seminar provider [shall] to submit a written plan for achieving compliance~~ ~~[-The provider may be granted an extension]~~ within 30 days after receiving the notice of noncompliance.

[  
**~~R523-12-12. Suspension and Revocation.~~**  
~~\_\_\_\_\_ (1) \_\_\_\_\_~~ (2) The ~~[Director or designee]~~division may suspend the certification of a seminar provider ~~[as follows]~~if the seminar provider:  
~~\_\_\_\_\_ (a) When a provider fails to respond in writing to areas of noncompliance identified in writing by the division within the defined period. The defined period is 30 days plus any extensions granted by the division.~~  
~~\_\_\_\_\_ (b) When a provider fails to take corrective action as agreed upon in its written response to the division.~~  
~~\_\_\_\_\_ (a) fails to comply with this rule; or~~  
~~\_\_\_\_\_ (b) fails to complete a plan described in Subsection (1)(b)(ii); or~~  
~~\_\_\_\_\_ (c) [When a provider] fails to allow the division access to information or records necessary to determine the seminar provider's compliance [under these rules and referenced rules and statutes]with this rule.~~  
~~\_\_\_\_\_ ([2]3) The [Director or designee]division may revoke certification of a seminar provider [as follows]if a seminar provider:~~  
~~\_\_\_\_\_ (a) [A provider]provides or allows its authorized [instructors continue]instructor to provide [the]a seminar while the seminar provider [is under a suspended]has had its certification[-] suspended; or~~  
~~\_\_\_\_\_ (b) [A provider]fails to comply with corrective action described in Subsection R523-12-9(3) while under a [suspension.]suspended certification; or~~  
~~\_\_\_\_\_ (c) [A program]has committed a second violation [which]that constitutes grounds for suspension [when a previous violation resulted in a suspension during the last]within 24 months of an initial or subsequent suspension.[~~

**~~R523-12-13. Procedure for Denial, Suspension, or Revocation.~~**

~~\_\_\_\_\_ (1) If the division has grounds for action under these rules, referenced rules, or as required by law, and intends to deny, suspend or revoke certification of a provider, the steps governing the action are as follows:~~  
~~\_\_\_\_\_ (a) The division shall notify the applicant or provider by personal service or by certified mail, return receipt requested, of the action to be taken. The notice shall contain reasons for the action, to include all statutory or rule violations, and a date when the action shall become effective.~~  
~~\_\_\_\_\_ (b) The provider may request an informal hearing with the Director within ten calendar days. The request shall be in writing. Within ten days following the close of the hearing, the Director or designee shall inform the provider or applicant in writing as required under Section 63G-4-203. The provider may appeal to the Department of Health and Human Services, Office of Administrative Hearings as provided for under Section 63G-4-203.]~~

**KEY:** substance abuse, server training, on-premise

**Date of Last Change:** ~~[June 19,]2025~~

**Notice of Continuation:** December 8, 2020

**Authorizing, and Implemented or Interpreted Law:** 26B-5-205; 63G-4-203

**NOTICE OF SUBSTANTIVE CHANGE**

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R592-6-4**

**Filing ID:** 57685

**Agency Information**

1. Title catchline:	Insurance, Title and Escrow Commission		
Building:	Taylorsville State Office Building		
Street address:	4315 S 2700 W		
City, state:	Taylorsville, UT		
Mailing address:	PO Box 146901		
City, state and zip:	Salt Lake City, UT 84114-6901		
Contact persons:			
Name:	Phone:	Email:	
Steve Gooch	801-957-9322	sgooch@utah.gov	

**Please address questions regarding information on this notice to the persons listed above.**

**General Information**

**2. Rule or section catchline:**

R592-6-4. Prohibited Unfair Methods of Competition

**4. Purpose of the new rule or reason for the change:**

The amendment removes a redundant provision regarding use of an interest in another business entity to avoid the provisions of Title 31A.

The Title and Escrow Commission approved these changes in a 11/10/2025 meeting by a vote of 4 to 0.

**5. Summary of the new rule or change:**

The amendment removes a provision regarding using an interest in another business entity to avoid the provisions of Title 31A.

The language was determined to prohibit title licensees from owning any other business entity, even a legal one, for any reason and not for purposes of unfair inducement.

The Commission determined that the "directly or indirectly" provision in the opening statement of Section R592-6-4 continues to prohibit using another business entity to avoid the provisions of Title 31A, making redundant the removed provision.

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

There is no anticipated cost or savings to the state budget.

The Department of Insurance (Department) investigates violations of this rule routinely as part of its normal activities. Removal of this redundant provision will have minimal bearing on the Department's budget, if any.

**B. Local governments:**

There is no anticipated cost or savings to local governments.

This rule governs the Department's relationship with its licensees and has no bearing on local governments in any way.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

There is no anticipated cost or savings to small businesses.

The provision being removed is redundant. There is no change in the requirements that small businesses are expected to comply with.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated cost or savings to non-small businesses.

The provision being removed is redundant. There is no change in the requirements that non-small businesses are expected to comply with.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There is no anticipated cost or savings to any other persons.

The provision being removed is redundant. There is no change in the requirements that any other persons are expected to comply with.

**F. Compliance costs for affected persons:**

There are no compliance costs for any affected persons.

The provision being removed is redundant. There is no change in the requirements that affected persons are expected to comply with.



**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

<b>Regulatory Impact Summary Table</b>					
<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Commissioner of the Insurance Department, Jonathan T. Pike, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 31A-2-404		
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**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Steve Gooch, Public Information Officer	<b>Date:</b>	11/14/2025
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**R592. Insurance, Title and Escrow Commission.**

**R592-6. Unfair Inducements and Marketing Practices in Obtaining Title Insurance Business.**

**R592-6-4. Prohibited Unfair Methods of Competition.**

A person identified in Section R592-6-2 who provides or offers to provide, directly or indirectly, any of the following benefits to any client has violated Section 31A-23a-402 and has engaged in an unfair method of competition.

(1) Waiving any charge, premium, or rate for insurance or services otherwise due and payable.

(2) Furnishing services not related to a bona fide title insurance, escrow, settlement, or closing transaction without receiving fair market payment for the services provided.

(3) Paying for, furnishing, or waiving all or any part of the rental or lease charge for space that is occupied by a client.

(4) Renting or leasing space from a client at a rate that is excessive or inadequate when compared with rental or lease charges for comparable space in the same geographic area, or paying rental or lease charges based in whole or in part on the volume of business generated by the client.

## NOTICES OF PROPOSED RULES

(5) Furnishing any part of a title producer's facilities, including conference rooms or meeting rooms, to a client or its trade association, for anything other than providing escrow or title services, or related meetings, without receiving a fair rental or lease charge comparable to other rental or lease charges for facilities in the same geographic area.

(6) Furnishing all or any part of the time or productive effort of any employee of the title producer, including a secretary, clerk, messenger, or escrow officer, to any client when such time or productive effort is not reasonably related to a bona fide title insurance, escrow, settlement, or closing transaction.

(7) Paying a client or an employee of a client for a referral of business.

(8)(a) Payment or pre-payment of the following:

(i) fees or charges of a professional, including an appraiser, surveyor, engineer, or attorney, whose services are required by any party or client to structure or complete a particular transaction; or

(ii) fees or charges of a client or party to the transaction, for example, subordination, loan, or HOA payoff request fees, that are required by any party or client to structure or complete a particular transaction.

(b) Subsection (8)(a) does not prohibit pre-payment of overnight mail and delivery fees.

(9)(a) Except as provided in Subsection (9)(b), sponsoring, cosponsoring, subsidizing, contributing fees, prizes, gifts, food, or otherwise providing anything of value for an activity of a client including:

(i) an open house at a home or property for sale;

(ii) a meeting;

(iii) a breakfast, luncheon, or dinner;

(iv) a convention;

(v) an installation ceremony;

(vi) a celebration;

(vii) an outing;

(viii) a cocktail party;

(ix) a hospitality room function;

(x) an open house celebration;

(xi) a dance;

(xii) a sporting event of any kind, including a fishing trip, gambling trip, hunting trip or outing, or golf or ski tournament;

(xiii) an artistic performance; or

(xiv) an outing in a recreation or entertainment area.

(b) A title producer may attend an activity of a client if:

(i) there is no additional cost to the title producer, other than the title producer's own entry fee, registration fee, and meals; and

(ii) the fees in Subsection (9)(b)(i) are not greater than those charged to a client or other person attending the function.

(10) Sponsoring a trade association event at a cost that is greater than the sponsorships offered to members of the association, affiliates, vendors, or other participants of the event.

(11) Furnishing or providing the following, even for a cost:

(a) building plans;

(b) construction critical path timelines;

(c) "For Sale by Owner" lists;

(d) surveys;

(e) appraisals;

(f) credit reports;

(g) mortgage leads for loans;

(h) rental or apartment lists; or

(i) printed labels.

(12)(a) Engaging in the following advertising activity:

(i) paying for any advertising on behalf of a client;

(ii) advertising jointly with a client;

(iii) placing an advertisement in a publication, including an internet web page and its links, that is hosted, published, produced for, or distributed by or on behalf of a client;

(iv) placing an advertisement that fails to comply with Section 31A-23a-402 and Rule R590-130;

(v) placing an advertisement that is in an official trade association publication that does not offer each title producer an equal opportunity to advertise in the publication and at the standard rates other advertisers in the publication are charged;

(vi) advertising with free or paid social media services that are not open and available to the general public; or

(vii) paying a fee to share, like, respond to, comment on, or increase the visibility, ranking, or distribution of any social media involving a client or a client's social media page.

(b) Nothing in Subsection (12)(a) prohibits the following:

(i) advertising independently that the title producer has provided title insurance for a particular subdivision or condominium project, but the title producer may not indicate that all future title insurance will be written by that title producer; or

(ii)(A) writing or posting on social media services about an event that directly involves the title producer and a client; and

(B) referencing or linking to the event on the client's social media page or the client company's social media page.

~~[(13) Using an interest in another business entity to avoid the provisions of Title 31A, Insurance Code, or any applicable rule.]~~

~~[(14)](13)~~(a) Holding more than two self-promotional open houses per calendar year for each owned or occupied facility, including branch offices.

(b) Holding a self-promotional open house at a location other than a registered office of the title producer.

~~[(15)](14)~~ Making a donation to a charitable organization controlled or managed by a client.

~~[(16)](15)~~ Distributing to a client, consumer, or member of the general public a self-promotional item that:

(a) has a cost of more than \$25;

(b) is edible;

(c) does not contain a permanent marking identifying the title producer; or

(d) is personalized in the donee's name.

~~[(17)](16)~~ Making an expenditure for a business meal or business activity on behalf of any person, whether a client or not, as a method of advertising if:

(a) the person representing the title producer is not present during the business meal or business activity;

(b) a substantial title insurance business discussion does not occur directly before, during, or after the business meal or business activity;

(c) the total cost of the business meal, the business activity, or both exceeds \$100 per person, per day;

(d) more than three individuals from an office of a client are provided a business meal or business activity in a single day by an individual title producer; or

(e) the entire business meal or business activity takes place on a client's premises.

~~[(18)](17)~~ Conducting education that:

(a) does not address title insurance, escrow, or a related subject;

(b) involves expenditure of more than \$20 per anticipated person including the cost of meals and refreshments;

(c) involves expenditure of more than \$500 for a facility and instructor; or

(d) is conducted at an individual, physical office location of a client more than once per calendar quarter.

~~[(19)](18)~~(a) Acknowledging a wedding, a birth or adoption of a child, or a funeral of a client or a member of the client's immediate family with flowers or gifts exceeding \$150.

(b) Acknowledging any other life event of a client or a member of the client's immediate family with a gift or anything of value.

(c) A letter or card in these instances is not a thing of value.

**KEY: title insurance**

**Date of Last Change: 2025[June 7, 2024]**

**Notice of Continuation: June 10, 2019**

**Authorizing, and Implemented or Interpreted Law: 31A-2-404**

#### NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R652-20**

**Filing ID: 57671**

#### Agency Information

<b>1. Title catchline:</b>		Natural Resources; Forestry, Fire and State Lands	
<b>Building:</b>		North Temple Office Building	
<b>Street address:</b>		1594 W North Temple	
<b>City, state:</b>		Salt Lake City, UT	
<b>Mailing address:</b>		1594 W North Tempe	
<b>City, state and zip:</b>		Salt Lake City, UT 84116	
<b>Contact persons:</b>			
<b>Name:</b>		<b>Phone:</b>	<b>Email:</b>
Jake Alexander		801-385-2928	jhallexander@utah.gov
Please address questions regarding information on this notice to the persons listed above.			

#### General Information

<b>2. Rule or section catchline:</b>
R652-20. Mineral Resources

**4. Purpose of the new rule or reason for the change:**

The purpose of this filing is to provide clarity to mineral operators on state expectations, establish royalty rates for previously unclassified resources, and bring the requirements in this rule into alignment with current industry and the Division of Forestry, Fire and State Lands (Division) internal best practice.

**5. Summary of the new rule or change:**

The changes in this rule:

- 1) reorganize administration of mineral leases across six new mineral classifications based on differing extraction methodologies and establish distinct rules to govern each classification;
- 2) require mineral operators to not waste or stockpile state resources;
- 3) establish new Royalty rates for Lithium in brines and geothermal direct power generation;
- 4) clarify requirements for a competitive process when bidding for state lands for mineral extraction; and
- 5) establish general provisions of state mineral Leases.

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

This rule change is not expected to affect the state budget.

The rule changes bring the Division rule into concert with the Division practices and provides clarity to operators of Division expectations.

The new royalty rates established in this rule will provide revenue to the state as those industries develop. As of now, there are no extraction operations on state lands affected by the new royalty rates. These new royalty rates represent the low end of royalty rates established by other administrative agencies in other states and reflect the division's commitment to supporting these nascent industries as they develop.

**B. Local governments:**

This rule change will not affect local governments as this rule does not regulate them.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

This rule establishes expectations for operators when they wish to nominate and bid on state lands. It will reduce the need for business to enter lengthy and costly negotiations with the state on lease terms and royalty rates.

The rule changes are expected to provide a small savings of time to small businesses hoping to lease state minerals.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

This rule establishes expectations for operators when they wish to nominate and bid on state lands. It will reduce the need for business to enter lengthy and costly negotiations with the state on lease terms and royalty rates.

The rule changes are expected to provide a small savings of time to non-small businesses hoping to lease state minerals.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This group will not be affected by the rule change as they are not regulated by this rule.

**F. Compliance costs for affected persons:**

The rule change is expected to reduce compliance costs for operators and administrative costs for the agency.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Natural Resources, Joel Ferry, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Title 65A, Section 6		
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**Public Notice Information**

**9. The public may submit written or oral comments to the agency identified in box 1.**

<b>A. Comments will be accepted until:</b>	12/31/2025
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<b>10. This rule change MAY become effective on:</b>	01/07/2026
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Jamie Barnes, State Forester	<b>Date:</b>	11/13/2025
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**R652. Natural Resources; Forestry, Fire and State Lands.**

**R652-20. Mineral Resources.**

**R652-20-100. Authority.**

This rule implements Section 65A-6-2 which authorizes the Division of Forestry, Fire and State Lands to establish rules for the issuance of mineral leases and management of state owned lands and mineral resources.

**R652-20-200. Classifications of Mineral Leases—Issuance | Resource Lease Types.**

Applications are made for and the ~~[division]~~ Division shall issue separate mineral leases on the following resources classifications~~[of mineral substances]~~:

~~[1. Metalliferous Minerals shall include Aluminum, Antimony, Arsenic, Beryllium, Bismuth, Chromium, Cadmium, Cerium, Columbium, Cobalt, Copper, Fluorspar, Gallium, Gold, Germanium, Hafnium, Iron, Indium, Lead, Mercury, Manganese, Molybdenum, Nickel, Platinum, Group Metals, Radium, Silver, Selenium, Scandium, Rare Earth Metals, Rhenium, Tantalum, Tin, Thorium, Tungsten, Thallium, Tellurium, Vanadium, Uranium, Ytterbium, and Zinc.~~

## NOTICES OF PROPOSED RULES

~~2. Oil, Gas, and Hydrocarbon shall include oil, natural gas, elaterite, ozocerite, and other hydrocarbons (whether the same be found in solid, semi solid, liquid, vaporous, or any other form) including tar, bitumen, asphaltum, and maltha, and other gases. The oil, gas, and hydrocarbon category shall not include coal, oil shale, or gilsonite.~~

~~3. Oil Shale shall include any sedimentary rock containing kerogen.~~

~~4. Coal shall include black or brownish black solid fossil fuel that has been subjected to the natural processes of coalification and which falls within the classification of coal by rank: I Anthracite, II Bituminous, III Sub-Bituminous, IV Lignite.~~

~~5. Potash shall include the chlorides, sulfates, carbonates, borates, silicates, and nitrates of potassium.~~

~~6. Phosphate shall mean any phosphate rock containing one or more phosphate minerals such as calcium phosphate and shall include all phosphatized limestones, sandstones, shales, and igneous rocks.~~

~~7. Clay Minerals Kaolin, Bentonite, Ball Clay, Fire Clay, Fuller Earth, Common Clay, and Shale.~~

~~8. Building Stone and Limestone Flagstone, Granite, Quartzite, Sandstone, Slate, Marble, Travertine, Dolostone, and Limestone whether dimensioned crushed, or calcined.~~

~~9. Gemstone and Fossil Agate, Amber, Beryl, Calcite, Chert, Coral, Corundum, Diamond, Feldspar, Garnet, Geodes, Jade, Jasper, Olivine, Opal, Pearl, Quartz, septarian Nodules, Spinel, Spodumene, Topaz, Tourmaline, Turquoise, and Zircon; and Coquina, Petrified Wood, Trilobites, and Other Fossilized Flora and Fauna.~~

~~10. Gypsum Alabaster, Anhydrite, Gypsite, Satin Spar, and Selenite.~~

~~11. Gilsonite.~~

~~12. Volcanic Material Lava Rock; Volcanic Pyroclastic Material including Ash, Blocks, Bombs, and Tuff; and Volcanic Glass Material including Perlite, Pitchstone, Pumice, Scoria, and Vitrophyre.~~

~~13. Industrial Sands Abrasive Sands, Filler Sands, Foundry Sands, Frac Sands, Glass Sands, Lime Sands, Magnetic Sands, Silica Sands, and other uncommon sands used in industrial applications.~~

~~14. Mineral Salts (Great Salt Lake) Refer to R652-20-3100, R652-20-3200.]~~

1. Oil, Gas and Hydrocarbons shall include: oil, natural gas, and related other hydrocarbons, whether the same be found in solid, semi-solid, liquid, vaporous, or any other form, including tar, bitumen, asphaltum, condensate, and other gases. The oil, gas and hydrocarbon category shall not include coal, oil shale, tar sands, or gilsonite.

2. Mineral-rich Brines shall include: any element in any form contained in aqueous solutions in the subsurface.

3. Industrial and Metallic Minerals:

a. Industrial Minerals shall include: naturally occurring solid deposits of potash, phosphate, magnesium, sodium chloride (salt), lithium, beryllium, fluorspar, clay minerals, building stone and limestone, gypsum, volcanic materials, industrial sands, and others.

b. Metallic Minerals shall include: naturally occurring solid deposits of aluminum, antimony, arsenic, bismuth, chromium, cadmium, cerium, columbium, cobalt, copper, gallium, gold, germanium, hafnium, iron, indium, lead, mercury, manganese, molybdenum, nickel, platinum group metals, radium, silver, selenium, scandium, rare earth elements, rhenium, tantalum, tin, thorium, tungsten, thallium, tellurium, vanadium, uranium, ytterbium, and zinc.

4. Geothermal Resources shall include: the energy, in whatever form, including pressure, present in, resulting from, created by, or which may be extracted from the natural heat, directly or through a material medium, derived from the natural heat of the earth at temperatures greater than 248F (120C), as defined in the Utah Geothermal Resource Conservation Act or traditional hydrothermal steam power produced on state lands. A separate agreement is required for any non-energy material or element or mineral or product produced from the Geothermal Resource. (R652-20-3400; R655-1).

5. Other Energy Resources shall include: coal, oil shale, tar sands, and gilsonite.

6. Gemstones and Fossils shall include: any mineral specimens valued for their beauty, rarity, and durability or their use in jewelry or art rather than industrial purposes and any fossils valued for their scientific significance, aesthetic appeal, or market desirability.

7. Great Salt Lake Elements and Minerals: a metalliferous mineral, metal, or chloride compound, potash or salt, mined or extracted from the brine water of the Great Salt Lake or contained within precipitated minerals on the lakebed. Rules for Great Salt Lake Elements and Minerals are prescribed in Rule R652-21, Section R652-20-3100, and Section R652-20-3200.

### **R652-20-300. Non-Classified Minerals.**

A person may ~~[make application for]~~ apply to nominate mineral resources and the ~~[division]~~ Division may issue leases covering other ~~[minerals]~~ resources not included in Section R652-20-200 classifications. These leases are on terms and conditions as the ~~[d]~~ Division finds to be in the best interest of the state ~~[of Utah]~~.

### **R652-20-400. Close Association Minerals.**

A ~~[mineral]~~ lease issued ~~[as to any category]~~ for a specific mineral resource classification shall include other minerals found in a close association with the expressly leased minerals when the expressly leased minerals cannot reasonably be mined or removed separately. Closely associated minerals extracted from the leased mineral estate are subject to the royalty rates prescribed in rule and may require a separate royalty agreement if not expressly leased or returned to their source. Separate lease shall be required for any mineral production associated with a Geothermal Lease.

### **R652-20-500. No Waste or Stockpiling Provision.**

All minerals extracted in paying quantities shall be sold in a commercially reasonable time and manner and the resulting royalty paid to the state. Produced minerals shall not be held in suspense of processing, stockpiled, or stored in any way to gain or reduce value in detriment to the state.

**R652-20-600. Bed of Navigable ~~[Lake or]~~ River.**

A mineral lease ~~[on any section of land lying in]~~ for the bed of any navigable ~~[lake or]~~ river will ~~[normally]~~ only be issued inclusive of all ~~[lake or]~~ river bed lands available for lease within the associated section. The nominated acres shall be leased to not result in any unleaseable, stranded tract of land.

**R652-20-601. Bed of Navigable Lake.**

A mineral lease for the bed of any navigable lake will only be issued inclusive of all beds within a section, as if the lands were surveyed in the Public Land Survey System. The nominated acres shall be leased to not result in any unleaseable, stranded tract of land.

**R652-21-602. Non-Sovereign Parcels.**

The state owns parcels within its sovereign boundaries that are administered and managed by a variety of state agencies. The state has delegated the management of mineral resources owned by it to the Division. A mineral lease on any section of land in which the state owns the mineral estate, excluding State and Institutional Trust Lands, shall be administered and managed by the Division on behalf of the state agency with surface management authority. These mineral resources may be leased on behalf of the state after approval by the state agency with surface management authority.

**R652-20-700. Non-Contiguous Tracts.**

A separate application for nomination is filed for each non-contiguous tract of land sought to be leased, unless all ~~[of]~~ the tracts sought to be leased fall entirely within a single township or section, at the sole discretion of the Division. This rule shall not apply to mineral salt leases within Great Salt Lake.

**R652-20-800. Size of Leasable Tract.**

Except for good cause shown, no mineral lease is issued for a tract less than a quarter-quarter section or surveyed lot, except where the land owned by the state within any quarter-quarter section or surveyed lot is less than the whole thereof, in which case the lease will be issued only on the entire area owned and available for lease by the state within the quarter-quarter section or surveyed lot. Nominated Lands may no result in any unleaseable, stranded tracts of land.

**R652-20-900. Lease Acreage Limitations.**

~~[Mineral]~~ Except for leases made pursuant to Section R652-20-3100, mineral leases are limited to no more than 2,560~~[-00]~~ acres or four sections. The acreage limitation shall not apply to mineral salt leases within Great Salt Lake (R652-20-3100).

**R652-20-1000. Rentals and Royalties.**

1. Rentals and Payment Provisions. The Division is obligated to receive full value for the resources leased to persons of profit. This obligation includes obtaining a fair rental for the lands being used for mineral extraction.

(a) ~~[Rental]~~ Minimum Rental rates are established in the Division fee schedule. The rental rate will be established within the terms of the mineral lease, and based on the use and fair market value of the leased state lands. Annual [R] rental due dates shall be 30 days[-on or] before the [annual] anniversary date of the effective date of the lease,[-the effective date of the lease being the first day of the month following the date on which the lease is issued.]

(b) Any overpayment of advance rental occurring from mineral lease applicant's incorrect listing of acreage of lands described in the application may be credited toward the applicant's rental account.

(c) Minimum annual rental on any mineral lease is ~~[\$20]~~ \$40.

(d) The ~~[d]~~ Division shall accept ~~[lease]~~ payments made by any party, but the acceptance of ~~[lease]~~ payments shall not be ~~[deemed to be]~~ a recognition of any interest of the payee in the lease or royalty agreement.

(e) No rental credits are allowed. ~~[Effective January 1, 2010, rental credits will be phased out over a four year period. For the calendar year beginning January 1, 2010, 75% of rentals due can be credited against royalties for those leases that allow rental credits. For the calendar year beginning January 1, 2011, 50% of rentals due can be credited against royalties for those leases that allow rental credits. For the calendar year beginning January 1, 2012, 25% of rentals can be credited against royalties for those leases that allow rental credits. Effective January 1, 2013, rental credits will no longer be allowed on any mineral leases.]~~

2. Royalty Provisions

~~[The following]~~ Royalty rates for production [royalty rates] shall apply to all mineral leases and royalty agreements, as classified [mineral leases, as listed] in Section R652-20-200, issued on or after the effective date of the applicable adjusted royalty rate. Mineral leases entered into ~~[prior to]~~ before the effective date of adjusted royalty rates shall retain the royalty rate as specified in the lease agreement.

~~[— (a) Royalty rates on substances under oil, gas, and hydrocarbon leases.]~~

(a) Royalty rates on substances under Classification 1 Oil, Gas and Hydrocarbons.

TABLE 1<sup>(1)</sup>

Oil 16-2/3%	Gas 16-2/3%
Sulfur 12-1/2%	Other hydrocarbon substances 6-1/4%
(1) Notwithstanding the terms of oil, gas, and hydrocarbon lease agreements, gas and natural gas liquid reports, and their required royalty payments, are required to be received by the Division on or before the last day of the second month succeeding the month of production. This extension of payment and reporting time for gas and NGL does not alter the payment and reporting time for oil	

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and condensate royalty which must be received by the Division on or before the last day of the calendar month succeeding the month of production, as currently provided in the lease form.

(b) Royalty rates on any element or mineral or resource in any form produced under Classification 2 Mineral-rich Brine shall follow the rate as prescribed elsewhere in rule except for lithium resources. Adjusted royalty rates are exclusive of Great Salt Lake Elements and Minerals.

TABLE 2	
Lithium 2-1/2 to 5% <sup>(1)</sup>	
(1) Lithium royalty scale: Mkt Price<=\$15/kg 2.5%, Mkt Price<=\$25/kg 3%, Mkt Price <=\$35/kg 3.5%, Mkt Price<=\$45/kg 4%, Mkt Price<=\$55/kg 4.5%, Mkt Price>\$55/kg 5%	

(c) Royalty rates on Classification 3 Industrial and Metallic Minerals shall follow the rates below.

TABLE 3.1	
Potash and associated minerals 5%	Phosphate 5%
Magnesium 1-1/2%	Salt (sodium chloride) <sup>(1)</sup> \$0.50/dry ton
Clay Minerals 5%	Gypsum 5%
Industrial Sands 5%	Building Stone and Limestone 5% (except 2% for calcined lime)
Volcanic Materials 5%	Other Industrial Minerals 5%
(1) Beginning January 1, 2001, the royalty rate per ton will be adjusted annually by the Producer Price Index for Industrial Commodities as provided under Subsection R652-20-1000(g) using 1997 as the base year.	

TABLE 3.2	
Fissionable Met. Minerals 8%	Non-Fissionable Met. Minerals 4%

(d) Royalty rate for Classification 4 Geothermal Resources shall follow the rates below.

TABLE 4	
Geothermal Direct-Power (first 5 years) 1-3/4%	Geothermal Direct-Power (after 5 years) 3-1/2%
Geothermal Steam 10%	

(e) Royalty rates for Classification 5 Other Energy Resources shall follow the rates below.

TABLE 5	
Coal 8%	Oil Shale <sup>(1)</sup> 5%
Gilsonite (uintaite) 10%	Asphaltic/Bituminous Sands <sup>(2)</sup> 7%
(1) 5% during the first five years of production and increasing annually thereafter at the rate of 1% to a maximum of 12-1/2%	
(2) May be escalated after the first five years of production at the rate of 1% each year to a maximum of 12-1/2%	

(f) Royalty rates for Classification 6 Gemstones and Fossils shall follow the rates below.

TABLE 6	
Gemstones (1) 10%	Fossils <sup>(1)</sup> 10%
(1) Requires payment of minimum annual rental of \$5 per acre.	

[TABLE

Oil 16 2/3% Sulfur 12 1/2%  
Gas 16 2/3% Other hydrocarbon substances 6 1/4%(1)

(1) For leases that allow rental credits, the rental paid for the lease year shall be credited against production royalties as they accrue for that lease year, but not against advance or minimum royalties unless allowed by the mineral lease.



~~(b) Royalty rates on mineral commodities, coal, and solid hydrocarbons.~~

TABLE

Coal	8%	Phosphate	5%
Oil Shale (1)	5%	Potash and Associated Minerals	5%
Asphaltic/Bituminous Sands (2)	7%	Gypsum	5%
Gilsonite	10%	Clay	5%
Met. Minerals:		Geothermal Resources	10%
— Fissionable	8%	Building Stone/Limestone	5%
— Non Fissionable	4%	(except 2% for calcined lime)	
— Gemstone/Fossil (3)	10%	Volcanic Materials	5%
— Magnesium	1 1/2%	Industrial sands	5%
— Salt (Sodium chloride) (4)			
	\$0.50/dry ton		

— (1) 5% during the first five years of production and increasing annually thereafter at the rate of 1% to a maximum of 12 1/2%.

— (2) May be escalated after the first five years of production at the rate of 1% per annum to maximum of 12 1/2%.

— (3) Requires payment of annual minimum royalty of \$5 per acre.

— (4) Beginning January 1, 2001, the royalty rate per ton will be adjusted annually by the Producer Price Index for Industrial Commodities as provided under R652-20-1000(c) using 1997 as the base year.

— (c) Notwithstanding the terms of oil, gas, and hydrocarbon lease agreements, gas and natural gas liquid reports, and their required royalty payments, are required to be received by the division on or before the last day of the second month succeeding the month of production. This extension of payment and reporting time for gas and NGL does not alter the payment and reporting time for oil and condensate royalty which must be received by the division on or before the last day of the calendar month succeeding the month of production, as currently provided in the lease form.

— (d) Readjustment of salt royalties on royalty agreements negotiated before July 9, 1992.

— i) The division is obligated to receive full value for the public trust resources leased to persons for profit. This obligation includes obtaining a fair royalty for salt produced from the waters of Great Salt Lake. The division shall readjust the royalty rate for sodium chloride on all royalty agreements negotiated prior to July 9, 1992. The royalty rate will be readjusted in accordance with analysis done by the Utah Bureau of Economic and Business Research, Office of Energy and Resource Planning and division staff and with a rule change approved by the Board of State Lands and Forestry on July 9, 1992 to increase the royalty on salt from \$0.10 per ton to a rate per ton approximately equivalent to three percent of gross value of dry salt. The division has determined this rate to be \$0.50 per dry ton. The royalty rate shall be phased in as provided in Subsections (ii) and (iii).

— ii) Effective January 1, 1997, the royalty rate for sodium chloride shall be \$0.20 per dry ton. Effective January 1, 1998 and on each January 1 thereafter, the royalty rate for sodium chloride shall be increased by the lesser of \$0.10 per dry ton or \$0.10 per dry ton times the percent of salt in brine by weight at the point of intake for each lessee divided by the percent of salt by weight derived from samples at sampling point LVG4 as measured by the Utah Geological Survey for the current year. The method for calculating the percent salt in brine from Utah Geological Survey and company data shall be determined by the division, but shall include a weighted average of samples taken at low and high water and of samples taken at different depths at the sampling point. The point of sampling for each producer shall be determined by the division after considering factors including the location of the intake canal, point of diversion for water rights, and placement of intake pumps.

— iii) The annual adjustment under Subsection (ii) shall continue until the royalty rate for a lessee is \$0.50 per dry ton or an amount per ton as determined under Subsection (e), whichever is greater, at which time subsequent annual adjustments shall be determined in accordance with Subsection (e).]

(e) Effective January 1, 2001 or the date on which the royalty paid by a lessee reaches \$0.50 per dry ton, whichever is later, the royalty rate for sodium chloride will be adjusted annually by the Producer Price Index for Industrial Commodities using the following formula: \$.50 times the Producer price index for Industrial Commodities for the previous year divided by the Producer Price Index for Industrial Commodities for 1997. The adjusted royalty rate will be calculated, then rounded up to the third decimal place. If the previous year's Producer Price Index for Industrial Commodities is in preliminary form at the end of the first quarter, March 31, the lessee shall use the preliminary year end average for that quarter and then shall use the finalized year end average for the remainder of the year.

#### **R652-20-1100. [Limits to Rental Credit] Newly Acquired Lands.**

Lands transferred to the state by the federal government or any entity, public or private shall be called newly acquired lands. If these transferred lands are encumbered by a mineral lease, the state shall honor the terms of that encumbrance however any unencumbered minerals or elements or energy resources shall immediately be available for nomination and leasing.~~[For leases that allow rental credits, the rental paid for the lease year shall be credited only against the production royalties as they accrue for that lease year.]~~

**R652-20-1200. Record of Application and Deficient Applications.**

For the Division to enter into an agreement, lease, or contract for the exploration or extraction of the state's mineral resources, and to ensure fair market value for the opportunity to enter into such agreement, the Division requires all nominations for mineral lease to follow a competitive bidding process.

1. The nomination of a specific tract, or tracts, of state land for the exploration and extraction of a mineral or element or energy resource shall be considered complete and will only be accepted if the following criteria are met:

(a) Nominations are received for filing in the office of the Division during office hours on the nomination application form approved by the Division. Except as provided, all applications received, whether by U.S. Mail or by personal delivery over the counter, are immediately stamped with the time and date of filing. If an application is determined to be deficient, it is returned via certified mail to the applicant with instructions for its amendment or completion;

(b) Deficient applications may be resubmitted in satisfactory form within 15 days of the date of the receipt of the instructions, it shall retain its original filing time and date. If the application is resubmitted at any later time, it is deemed filed at the time of resubmission;

(c) Applicants shall certify they are qualified to do business in the state;

(d) Applicants shall certify that they have no outstanding balances to the Division.

~~[Applications for mineral leases, except in the case of simultaneous filing, are received for filing in the office of the division during office hours. Except as provided, all the applications received, whether by U.S. Mail or by personal delivery over the counter, are immediately stamped with the date of filing. If an application is determined to be deficient, it is returned to the applicant with instructions for its amendment or completion.~~

~~If the application is resubmitted in satisfactory form within 15 days from the date of the instructions, it shall retain its original filing time. If the application is resubmitted at any later time, it is deemed filed at the time of resubmission.]~~

**R652-20-1300. ~~[Order of]~~Simultaneous Filing~~[-Conflict]~~.**

The term "simultaneous filing" shall be defined as the process in which entities bid for the opportunity to enter a mineral lease on lands that have been nominated with the Division.

1. All lands for which a mineral lease nomination has been accepted by the Division shall be available for simultaneous filing.

2. Notice of simultaneous filing shall be provided to the nominator and the public before the simultaneous filing opens.~~[Except in cases of simultaneous filing, in the event that two or more applications for the same land bear a date stamp showing the said applications were filed at the same time, then the division shall determine which applicant is awarded a lease by public drawing.]~~

**R652-20-1400. ~~[Newly Acquired Lands]~~Rental Rates and Example Leases.**

The Division shall prescribe the rental rate for the nominated lands before the simultaneous filing opens. The Division may provide an example lease to present the bidders with common terms to be offered for the nominated lands.~~[The term "newly acquired lands" as used in this rule shall include those lands transferred to the state of Utah by the federal government. If these transferred lands are encumbered by a federal mineral lease at the time of transfer, they are deemed to be newly acquired as of the date when the lands first become available for leasing by the state and not as of the date when the encumbered lands are first transferred to the state.]~~

**R652-20-1500. Minimum Bid~~[/Simultaneous Filing]~~.**

The bid shall at least equal the annual rental ~~[rate]~~ for the ~~[substance]~~ mineral resource lease type to be leased and shall be the rental for the first year of the lease.

**R652-20-1600. Posting Dates~~[/Simultaneous Filing]~~.**

Notices of the offering of lands for simultaneous filing will run for 15 business days and are posted at times to insure that all bid openings are on the last Monday of that month, or on the first business day following the last Monday of that month, if the last Monday falls on a legal state holiday.

**R652-20-1700. Sealed Envelopes~~[/Simultaneous Filing]~~.**

[Applications]Bids shall be submitted in sealed envelopes marked for simultaneous filing. The sealed envelope shall include a complete simultaneous filing bid form, a check for the filing fee, and a check for the bid.

**~~[R652-20-1800. Application Refund.~~**

~~If application, or any part thereof, is rejected, money tendered for rental or rejected portion may be refunded or credited.~~

**R652-20-1900. Application Withdrawal.**

~~Should an applicant desire to withdraw his application, the applicant must make a written request. If the request is received prior to the time the division approves the application, all money tendered by the applicant, except the filing fee, is refunded. If the request is received after approval, then, unless the applicant accepts the offered lease, all money tendered is forfeited to the state.]~~

**R652-20-2000. ~~[Application]~~Bid Withdrawal Under Simultaneous Filing.**

Applicants desiring to withdraw [an application]a bid which has been filed under the simultaneous filing procedure, must make a written request. If the request is received before sealed bids [for rental]have been opened, all money tendered by the applicant, except the filing fee, shall be returned[refunded]. If the request is received after sealed bids [for rental]have been opened, and if the applicant's [rental offer]bid is high, then unless the applicant accepts the offered lease, all money tendered is forfeited to the state.

**R652-20-2100. Failure of State's Title.**

Should it be found necessary to reject ~~[an application]~~ a bid or to terminate an existing lease ~~[, excepting applications or leases approved through simultaneous leasing procedure,]~~ due to failure of state's land title, then only advance rental paid for the year in which title failure is discovered is refunded. ~~[All other advance rentals and fees paid on the application or lease are forfeited to the state.]~~

**R652-20-2200. General Lease Provisions.**

~~[In order to]~~ To affect the purposes of development of mineral resources owned by the state ~~[of Utah]~~, the following provisions, terms and conditions shall apply to all mineral lessees ~~[and]~~ or leases:

1. Preference Rights for Unleased Minerals--Any state mineral lessee who discovers any minerals on lands leased from the state of Utah which are not included within ~~[his]~~ their lease shall have a preference right to a state mineral lease covering these unleased minerals, provided the unleased minerals at the time of discovery are not included within a mineral lease or mineral lease ~~[application]~~ nomination of another party. The preference right lease is issued upon a lease form in current use by the state ~~[of Utah]~~. The preference right lease is subject to the rental, royalty, and development requirements as provided in the lease form. The preference right shall not extend to any unleased minerals on state lands which have been withdrawn from mineral leasing. The preference right shall continue for a period of 60 days after the discovery of unleased minerals, provided the applicant notifies the ~~[d]~~ Division within the ten days after the discovery and makes application to lease the unleased minerals within 60 days after the date of discovery.

2. Lease Term Exclusion, Diligent Operations, Land-Blocking Lease Exclusion.

(a) Definitions.

(i) Lease Term is the contractual length granted to the lessee to perform mineral resource extraction.

(ii) Operations is production that results in a net mineral royalty paid to the state or exploration with financial expenditure performed on or beneath the leased area or negotiation that results in an agreement with adjacent leaseholders to pool, communitize, or enter a joint operating agreement to develop the mineral estate as part of a larger extractive operation.

(iii) Land-blocking is entering into a lease agreement with the Division with the intent to directly or indirectly prevent the development of the mineral estate, or reduce competition by securing mineral resource rights with no intent to develop the mineral estate, or speculative holding of acreage that is not actively being utilized.

(b) If operations are being diligently pursued on the leased premises at the end of the primary term, including any valid extension of any lease with no production before the end of the primary term, the term of the lease may be extended for a term of length at the sole discretion of the Division. Upon written application by lessee and satisfactory showing of due diligence in prosecution of operations, at the sole discretion of the Division, an extension rider may be issued by the Division. Application for extension rider shall be filed by the lessee 30 days before expiration of the fixed term of any valid extension of the lease.

(c) If operations are not being diligently pursued on the leased premises at the end of the primary term, and lessee does not enter negotiations with the Division at least 30 days before expiration of the primary term of any mineral lease, the lease expires under its own term.

(d) Notwithstanding a valid mineral lease extension, or a negotiated extension with the Division in lieu of production, the Division requires that leased substances be produced in paying quantities by the end of the primary term. Diligent and continuous exploration, development, and production of the leased mineral resources shall be required. No land-blocking leases shall be allowed.

~~[If drilling operations are being diligently pursued on the leased premises at the end of the term, including any valid extension of any oil and gas lease, the term of the lease shall automatically extend for a term of two additional years. Upon written application by lessee and satisfactory showing of due diligence in prosecution of drilling operations, an extension rider is issued by the division. Application for extension rider shall be filed by the lessee within 30 days prior to expiration of the fixed term of any valid extension of the lease.]~~

3. Cultural, Paleontological, and Biological Resources--The ~~[d]~~ Division may require the lessee to:

(a) provide a cultural, paleontological or biological survey on lands ~~[under]~~ encumbered by a mineral lease; and

(b) be responsible for reasonable mitigative actions as specified by the ~~[d]~~ Division. Surveys conducted in performance for another state or federal agency may be submitted to the ~~[d]~~ Division when the survey is also required by the ~~[d]~~ Division.

4. Geologic Data--Lessee or operator shall keep a log of geologic data accumulated or acquired by lessee within the land area described in the lease. This log shall show the formations encountered and any other geologic information reasonably required by lessor and shall be available upon request by the ~~[d]~~ Division. A copy of ~~[the log]~~ any logs, as well as any data related to exploration drill holes, shall be deposited with the ~~[d]~~ Division upon termination of the lease.

5. Assignments, Subleases and Overriding Royalties

(a) Definitions

(i) A total assignment is an assignment of undivided total interest.

(ii) An interest assignment is an assignment of any working interest less than the undivided total, except overriding royalty interests.

(iii) A partial assignment is an assignment of part of the lands in a lease and a segregation of the assigned lands into a separate lease.

(b) Any ~~[mineral]~~ lease may be assigned or subleased as to all or part of the acreage, to any person, firm, association, or corporation qualified to hold a state lease, provided, however, that all assignments and subleases are approved by the ~~[d]~~ Division. No assignment or sublease is effective until approval is given. Any assignment or sublease made without approval is void.

(c) Unless otherwise authorized by the ~~[d]~~ Division, an assignment of a portion of a lease covering less than a quarter-quarter section, a surveyed lot, an assignment of a separate zone, or a separate deposit is not approved.

(d) An assignment or sublease shall take effect the first day of the month following the approval of the assignment or sublease by the ~~[d]~~ Division. The assignor or sublessor or surety, if any, shall continue to be responsible for performance of any ~~[and all]~~ obligations as if no assignment or sublease had been executed until the effective date of the assignment or sublease. After the effective date of any assignment or sublease, the assignee or sublessee is bound by the terms of the lease to the same extent as if the assignee or sublessee were the original lessee, any conditions in the assignment to the contrary notwithstanding.

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(e) A partial assignment of any lease shall segregate the assigned or retained portions thereof and, after the effective date, release or discharge the assignor from any obligation thereafter accruing with respect to the assigned lands. Segregated leases shall continue in full force and effect for the primary term of the original lease or as further extended pursuant to the terms of the lease.

(f) An assignment or transfer of a lease, ~~or interest[herein]~~, or of an overriding royalty must be a good and sufficient legal instrument, properly executed and acknowledged, and should clearly set forth the serial number of the lease, the land involved, and the name and address of the assignee, and the interest transferred. Any assignment, sublease, or overriding royalty shall be executed on the form provided by the Division.

(g) An assignment must affect or concern only one lease or a portion thereof, except for good cause shown.

(h) Any assignment which would create a cumulative overriding royalty in excess of the production royalty payable to the state as landowner of the state mineral lease will not be approved by the [d]Division. Any agreement to create or any assignment creating overriding royalties or payments out of production removed or sold from the leased lands is subject to the [d]Division, after notice and hearing, to require the proper parties thereto to suspend or modify the royalties or payments out of production in such a manner as may be reasonable when and during such period ~~[of time]~~ as they may constitute any undue economic burden upon the reasonable operations of this lease.

(i) Assignment instructions are as follows:

(ii) Prepare and execute the assignments in duplicate, complete with acknowledgments.

(iii) Each copy of the assignment shall have attached thereto an acceptance of assignment ~~[duly]~~ executed by the assignee.

~~(iv)[iii]~~ All assignments forwarded to or deposited with the [d]Division must be accompanied by the prescribed fee.

~~(v) No assignment is effective until authorization by the Division on the assignment form provided by the Division.~~

6. Lease Amendments--When the [d]Division approves the amendment of existing mineral leases by substituting a new lease form for the existing forms~~[(s)]~~, the amended lease will retain the effective date of the original lease.

7. Events of Default---If a lessee violates any provision in a lease, the Division may cancel the mineral lease after 30 days' notice by registered or certified return receipt mail, unless the lessee:

(a) Remedies the violation;

(b) Rectifies the condition; or

(c) Requests a hearing within:

(i) the 30 days; or

(ii) any extension of time the Division grants.

(d) Examples of events of default may include:

(i) Failure of lessee to provide an accounting of any payment, simultaneous with the payment, required under any agreement as it applies to any lease or royalty agreement, on the form approved by the Division.

(ii) Failure of lessee to pay annual rent.

(iii) Failure of lessee to pay a minimum royalty and show due diligence in operations outside of primary term.

(iv) Failure to file with the Division, and obtain authorization from the Division, a name-change, assignment, or transfer of the lease before executing said action.

### **R652-20-2300. Lessee Rights.**

Mineral exploration, oil and gas drilling, or other operations which disturb the surface of lands contained within or above state mineral lease lands require surface rehabilitation of the disturbed area as approved by the [d]Division, and as required by the laws administered by the Utah Division of Oil, Gas and Mining.

### **R652-20-2400. Operations Notification Period.**

1. At least 60 days ~~[prior to]~~ before the commencement of mineral resource exploration, mining or other operations which disturb the surface of lands contained within or above a state mineral lease, lessee shall submit plans for operations to the Division~~[-of Forestry, Fire and State Lands]~~. The [d]Division shall review and make an environmental assessment and endorse or stipulate changes in lessee's plan of operation within the review period. Where feasible, the [d]Division's review shall be conducted concurrently with those of other agencies. Review by another state or federal agency may be accepted by the [d]Division in lieu of a separate [d]Division review. Following review, the [d]Division may require the lessee to adopt a special rehabilitation program required by lessor for the particular property in question. Lessee shall not commence operations upon the land without a plan of operation approved by the [d]Division.

2. Before any operator or lessee ~~[shall commence]~~ may begin actual drilling operations of any well or ~~[prior to]~~ before commencing any surface disturbance associated with the activity on lands contained within a state mineral lease, the operator or lessee shall simultaneously file with the [d]Division a legible copy of the application for permit to drill (APD), as is filed with the Division of Oil, Gas, and Mining.

3. The [d]Division will review any request for drilling operation or any surface disturbance associated with the activity on lands contained within a state lease and will grant approval, providing that the contemplated location and operations are not in violation of any rules, order, or policy. Division approval of the application for permit to drill on mineral resources administered by the Division ~~[of Forestry, Fire and State Lands]~~ is required ~~[prior]~~ before approval by the Division of Oil, Gas, and Mining. Notice of approval by the Division of Forestry, Fire and State Lands will be given in an expeditious manner to the Division of Oil, Gas, and Mining.

4.~~[3-]~~ All lessees or designated operators under state mineral leases have responsibility to be aware of notification requirements and operating rules promulgated by the Division of Oil, Gas and Mining with regard to mineral exploration, mining, or oil and gas drilling on lands within the state~~[-of Utah]~~. Lessees or operators shall fully comply with all the rules or requirements and provide timely to the Division notifications, mine plans, well completion reports, or other information as may be requested.

**R652-20-2500. Multiple Mineral Development (MMD) Area Designation.**

1. The [d]Division may designate any state land under its authority as a multiple mineral development area. In designated multiple mineral development areas the [d]Division may require, in addition to all other terms and conditions of the mineral lease, that the lessee furnish a bond or evidence of financial responsibility as specified by the [d]Division, to assure that the state and other mineral lessees shall be indemnified and held harmless from and against unreasonable and all unnecessary damage to mineral deposits or improvements caused by the conduct of the lessee on state lands. Written notice shall be given to all mineral lessees holding a mineral lease within the multiple mineral development area. Thereafter, ~~in order~~ to preserve the value of mineral resources the [d]Division may impose any reasonable requirements upon any mineral lessee who intends to conduct any mineral activity within the multiple mineral development area. The lessee ~~is required to~~ shall submit advance written notice of any activities to occur within the multiple mineral development area to the [d]Division and any other information that the [d]Division may request. All activities within the multiple mineral development area are to be deferred until the [d]Division has specified the terms and conditions under which the mineral activity is to occur and has granted specific permission to conduct the activity. The [d]Division may hold public meetings regarding the mineral development within the multiple mineral development area.

2. The [d]Division may grant a mineral lease extension under a multiple mineral development area designation, providing that the mineral lessee or operator requests an extension ~~prior to~~ before the lease expiration date, and that the lessee or operator would have otherwise been able to request a lease extension as provided in ~~Section~~ Subsection 65A-6-4(4).

**R652-20-2600. Term of ~~Mineral Lease~~ Oil Gas and Hydrocarbons Lease -- Unitization or Communitization Agreement.**

The term of all ~~mineral~~ oil, gas and hydrocarbons leases included in any ~~cooperative or unit~~ communitization or unitization plan of oil and gas development or operation in which the [d]Division has joined, or ~~shall hereafter~~ may later join, shall be extended automatically for the term of the unitization or communitization ~~cooperative~~ agreement. Rentals on leases so extended shall be at the rate specified in the lease, subject to the change in rates as may be demanded by the lessor on any lease readjustment date as authorized by the lease.

**R652-20-2700. Lease Continuation -- Unitization or Communitization Agreement.**

Any lease which is eliminated from any such ~~cooperative~~ communitization or unitization ~~or unit~~ plan of development or operation, or any lease which is in effect at the termination of the cooperative or unit plan of development or operation, unless relinquished, shall continue in effect for the fixed term of the lease, or for two years after its elimination from the plan or agreement or the termination thereof, whichever is longer, and so long thereafter as the leased substances are produced in paying quantities. Rentals under the lease shall continue at the rate specified in the lease.

**R652-20-2800. Bonding.**

1. ~~Prior to~~ Before commencement of any operations on a state mineral lease, the lessee or designated operator shall post with the [d]Division a bond in the form and amount as may be determined by the [d]Division to assure compliance with all terms and conditions of the lease.

2. The bond required for an oil and gas, geothermal, or minerals exploration ~~project shall be~~ or extraction project may be deemed by the Division to be sufficient if the bond is accepted and held by the appropriate agency or agencies with statutory authority over the operator developing the resource and a copy of the bond is filed with the Division.

~~\_\_\_\_\_ (a) a statewide blanket bond in the minimum amount of \$80,000 covering exploration operations on all state of Utah mineral leases held by lessee which shall be in an amount at least equal to the accumulative amount of individual project bonds as set forth below; or~~

~~\_\_\_\_\_ (b) a project bond covering an individual exploration project involving one or more state of Utah mineral leases. The amount of the project bond will be determined by the division at the time lessee gives notice of proposed operations. This bond will not be less than \$5,000 per acre of surface disturbance, or in the case of an oil and gas or geothermal well:~~

[TABLE]

WELL DEPTH	BOND AMOUNT
0 - 3,000 ft.	\$10,000
3,000 - 10,000 ft.	20,000
Greater than 10,000 ft.	40,000

~~\_\_\_\_\_ 3. The bond required for construction and operation of a mine or minerals production plant shall be determined by the division on basis of an approved mining and reclamation plan or plan of development and operations. This bond may be posted with the Division of Oil, Gas and Mining providing written consent is first obtained from the Division of Forestry, Fire and State Lands. Existing project bonds on the same lease(s) may be incorporated into this mine or minerals production plant bond.~~

~~\_\_\_\_\_ 4. All bonds posted on mineral leases may be used for payment of all monies, rentals, and royalties, due the state as lessor, including:~~  
~~\_\_\_\_\_ (a) costs of reclamation, damages to the surface and improvements thereon, and any other costs which arise by operation of the lease and accrue to the lessor.~~

~~\_\_\_\_\_ (b) lessee's compliance with all other terms and conditions of the lease, and rules, and policies relating thereto of the Board of State Lands and Forestry, Division of Forestry, Fire and State Lands, Board of Oil, Gas, and Mining, and Division of Oil, Gas, and Mining.~~

~~This bond shall be in effect even if the lessee or designated operator has conveyed all or part of the leasehold interest to a sublessee(s), assignee(s), or subsequent operator(s), until the bond may be released by the state as lessor, or until the lessee or designated operator fully satisfies the above-described obligations, or until the bond is replaced with a new bond posted by a sublessee, assignee, or new designated operator.~~

## NOTICES OF PROPOSED RULES

- ~~5. Bonds may be accepted in any of the following forms:~~
- ~~(a) Surety bond with an approved corporate surety registered in Utah.~~
  - ~~(b) Cash deposit. The state will not be responsible for any investment returns on cash deposits.~~
  - ~~(c) Certificate of deposit in the name of "Utah Division of Forestry, Fire and State Lands and lessee, c/o lessee's address", with an approved state or federally insured banking institution registered in Utah. The certificate of deposit must have a maturity date no greater than 12 months, be automatically renewable, and be deposited with the division. The lessee will be entitled to and receive the interest payments. All certificates of deposit must be endorsed by the lessee prior to acceptance by the director.~~
  - ~~(d) Other forms of surety as may be acceptable to the Utah Division of Forestry, Fire and State Lands.]~~

~~3[6]. Any lessee or designated operator forfeiting a bond is denied approval of any future exploration or mining on state lands, except by compensating the state for previous defaults and posting the full bond amount estimated for reclamation or lease performance and reclamation on subsequent operations.~~

~~4[7]. Bonds may be increased at any time pursuant to the authority of the relevant agency or agencies with statutory authority that holds the bonds, in reasonable amounts as the Division of Forestry, Fire and State Lands may order, providing lessor first gives lessee 30 days written notice stating the increase and the reason for the increase.~~

~~8. The division shall waive the filing of a bond for any period during which a bond meeting the requirements of this section is on file with another agency.]~~

### **R652-20-3000. Mineral Lease Nomination~~Application~~--Lake or Stream Bed.**

1. ~~[Applications]~~Nominations for mineral leases for lands within the bed of a lake or stream will be rejected unless:

(a) the lake or stream has been judicially determined to have been navigable at the time of statehood or was, in the reasonable judgment of the ~~[d]~~Division, navigable at the time; or

(b) the issuance to ~~[applicant]~~the bid winner of a lease on the navigable lake or navigable stream bed would serve to protect the ~~[applicant]~~bid winner as the owner, or holder of mineral rights, on abutting riparian uplands.

2. Any lessee or operator proposing, or conducting, exploration or mining operations ~~[in]~~within the bed of a navigable lake or stream shall, ~~[prior to]~~before the commencement of operations, file the notification and obtain such permits as may legally be required by ~~[any and all]~~local, state, or federal governmental agencies, having jurisdiction over these activities. In no event will the lessee or operator cause pollution or salinity in any navigable lake or stream to exceed these limits which are set by ordinance, law or inter-governmental treaty.

### **R652-20-3100. Great Salt Lake~~---~~Salt and Other Mineral Resources~~---Royalty Agreements.~~**

1. Salts and other minerals in the brine waters of Great Salt Lake are reserved to the state and shall be sold only upon a royalty basis and under the terms and provisions as specified in the royalty agreement as ~~[herein]~~provided for in this rule and all other terms and conditions as the ~~[d]~~Division deems necessary in the best interest of the state or per Rule R652-21.

2. The term "salts and other minerals" as used in this rule shall include all salts and other minerals contained in solution or suspension in the brine waters of Great Salt Lake, and shall not include salts or other minerals that have precipitated out or have settled on the bottom of the lake.

3. Royalty agreement applications shall be made upon forms provided by the ~~[d]~~Division and shall be in accordance with the laws and rules governing applicant qualifications, application and lease form.

4. Royalty agreements for salts and other minerals contained in brine waters of Great Salt Lake, shall require the following advance royalty payment which may be applied against royalties which may thereafter accrue during the same calendar year for which the advance royalty is paid.

(a) \$10,000 ~~[per annum]~~each year for all royalty agreements in which the lessee therein also obtains a lease of land within Great Salt Lake.

(b) \$5,000 ~~[per annum]~~each year for all royalty agreements in which the lessee therein does not obtain a surface or mineral lease of state lands within Great Salt Lake.

~~[---c. Royalty agreements for sodium chloride salts shall require on or before January 1st of each year, an advance royalty of not less than \$1,000, which sum may be applied against royalties which may thereafter accrue during the same calendar year for which the advance royalty is paid.]~~

5. Royalties shall be paid upon a calendar year basis. The minimum royalty for the balance of the calendar-year in which the agreement is executed shall be prorated in proportion to the time remaining.

6. The gross market value of the products shipped, upon which the royalty payments are to be paid, shall not include amounts expended for bags, boxes, receptacles, or other costs directly related to or necessary in the shipping of any product. No deductions shall be allowed.

7. Royalty agreements shall contain provisions necessary to effect the purpose of this rule, including: the rights of the vendee; the term of the royalty agreement; annual rental and royalties; rights reserved to the vendor; bonds; reporting of technical data; operation requirements; vendees consent to suit in any dispute arising under the terms of the royalty agreement or as a result of operations carried on under the royalty agreement; procedures for notification; transfers of interest by vendee; establishment of water rights and water usage; discovery of other minerals; terms and conditions of royalty agreement forfeiture; protection of the state from liability from all actions of the vendee; and all other provisions that the ~~[d]~~Division deems necessary to protect the interest of the state and to fulfill the purpose of this rule.

### **R652-20-3200. Lake Bed Mineral Salts ~~Leases~~ Within Great Salt Lake~~---~~Leases.**

1. Mineral leases for mineral salts on land within Great Salt Lake, shall be issued pursuant to ~~[the provisions of]~~this rule, and other applicable laws and rules governing the issuance of mineral leases on state owned lands or mineral resources or per Rule R652-21.

2. Definitions: The term "state land within Great Salt Lake", as used in this section, shall include all state lands lying within the exterior boundary lines of the meander-line around the lake as surveyed by the United States. The term "salts", as used in this section, shall mean, chlorides, sulphates, carbonates, borates~~[x]~~, silicates, oxides, nitrates and associated minerals existing at the surface and to the extent of their continuous depth, but shall not include the salts and other minerals contained in solution or suspension in the brine waters of Great Salt Lake as defined in Section R652-20-3100.

3. All mineral lessees granted a mineral salts lease under this section must have a royalty agreement as provided under Section R640-20-3100. This royalty agreement shall ~~[be]~~contain a minimum royalty of \$10,000.

4. Leases issued pursuant to this rule shall grant the lessee the right to mine, extract, or remove salts from the surface of the lands covered thereby, together with the ~~[right to]~~reasonable use ~~[so much]~~ of the surface as is necessary for all purposes incident to the extraction of salts and other minerals from brines of Great Salt Lake or the surface of the lands covered by the lease.

5. Leases shall provide for a rental using rates established in the Division fee schedule and shall be coterminous with Section R652-20-3100. Minimum rental rate for the Great Salt Lake Mineral Salt Leases is \$100 per acre.

6. Leases issued pursuant to this rule shall contain provisions necessary to affect the purpose of this rule, including, the following provisions: the rights of the lessee; the term of the lease; annual rental and royalties; rights reserved to the lessor; bonds; reporting of technical data; operation requirements; lessees consent to suit in any dispute arising under the terms of this lease or as a result of operations carried on under this lease; procedures for notification; transfers of interest by lessee; establishment of water rights and water usage; discovery of other minerals; terms and conditions of lease forfeiture; protection of the state from liability from all actions of the lessee; and all other provisions that the ~~[d]~~Division deems necessary to protect the interest of the state and to fulfill the purpose of this rule.

#### **R652-20-3400. Geothermal ~~[Steam]~~ Leases.**

~~[Geothermal steam]~~Leases for geothermal resources contained in or under lands of the state ~~[of Utah]~~ are reserved to the state and shall be sold only upon a lease and royalty basis. Nominations~~[Applications]~~ shall be made upon forms provided by the ~~[d]~~Division and shall be subject to all applicable minerals management statutes and rules.~~[and the following provisions:]~~

~~[----- 1. Geothermal steam leases are issued only on lands where the state of Utah owns both the surface and mineral rights, unless lessee agrees to accept as part of his lease agreement the "Addendum to Geothermal Steam Lease and Agreement", adopted by the Board of State Lands and Forestry on March 20, 1974.~~

~~2. Lessee shall file the required bond prior to the commencement of any operations on lands of the state.]~~

#### **R652-20-3600. Special Lease Agreement--Documentation.**

1. ~~[Application]~~Nomination for Special Lease Agreements for mineral lease on state lands held by other state agencies shall be in accordance with mineral rules applying to lands held by the Division~~[of Forestry, Fire and State Lands]~~, provided however, that Special Lease Agreement nominations~~[Applications]~~ shall be accompanied by the following documentation to be submitted by the applicant at the time of application for each tract of land contained in the application:

- (a) A complete chain of title indicating all conveyances and mineral reservations.
- (b) A plat map showing the exact location, dimensions, and legal description by metes and bounds of the land.
- (c) ~~[Written consent]~~Identification of the state agency using or holding the land.

#### **2. Special Lease Agreement - Forms**

Special Lease Agreements issued for mineral lease on state lands held by other state agencies shall be on forms approved by the ~~[d]~~Division, provided however, that the state agency holding these lands may stipulate special terms and conditions to be added to the lease to mitigate impact of the lease or lessee's operations upon that state agency's land.

#### **R652-20-4000. Readjustment Rule.**

1. Any lease, except an oil, gas and hydrocarbons lease, which is subject to a readjustment provision may be readjusted as follows:

(a) Any term or condition of a lease may be readjusted including the rent, royalty, minimum rental, or minimum royalty provisions of the lease.

(b) The ~~[d]~~Division shall give notice to the lessee at least one year ~~[prior to]~~ readjustment. Failure to give notice before~~[prior to]~~ a date a lease is eligible for readjustment shall not waive or prejudice the right of the ~~[d]~~Division to readjust the lease at a later date.

(c) The readjusted terms shall become effective on the date specified by the ~~[d]~~Division when~~[at the time]~~ the readjusted terms are sent to the lessee.

(d) Failure of the lessee to accept the terms of any readjustment shall be considered a violation of the provisions of the lease and shall subject the lease to forfeiture.

2. In the event of a conflict between this section and the terms of a readjustment provision in a lease, the lease terms shall supersede to the extent of the conflict.

**KEY: royalties, salt, primary term, administrative procedures**

**Date of Last Change: ~~[August 7,]~~ 2025**

**Notice of Continuation: March 2, 2022**

**Authorizing, and Implemented or Interpreted Law: 65A-6-2; 65A-6-4(3)**

**NOTICE OF SUBSTANTIVE CHANGE****TYPE OF FILING:** New**Rule or section number:****R765-263****Filing ID:** 57682**Agency Information**

<b>1. Title catchline:</b>	Higher Education (Utah Board of), Administration	
<b>Building:</b>	Utah Board of Higher Education Building, The Gateway	
<b>Street address:</b>	60 S 400 W	
<b>City, state:</b>	Salt Lake City, UT 84101	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Hilary Renshaw	801-646-4784	Hilary.renshaw@ushe.edu
Alison Adams	801-646-4784	Alison.adams@ushe.edu
Geoffrey T. Landward	801-646-4784	Glandward@ushe.edu
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule or section catchline:</b>
R765-263. Institutional Policy Review
<b>4. Purpose of the new rule or reason for the change:</b>
The purpose of this new rule is to renumber previously repealed administrative Rule R765-803 to align with the Utah Board of Higher Education policy number.
This new rule also makes nonsubstantive and technical changes from repealed administrative Rule R765-803 to align with the language in other Board policies.
<b>5. Summary of the new rule or change:</b>
This new rule outlines how the Utah Board of Higher Education will review Utah System of Higher Education institutional policies as required under Section 53H-7-303.
The Board repealed administrative Rule R765-803 related to this subject matter. This new rule is being added to change the rule number to align with the Utah Board of Higher Education policy.
This new rule makes nonsubstantive and technical changes from repealed administrative Rule R765-803 to align with the language in other Board policies.

**Fiscal Information**

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
This rule will not have any impact on the state budget.
There is no fiscal impact because all substantive material remains the same as what existed under Rule R765-803.
<b>B. Local governments:</b>
This rule will not have any impact on local governments.
There is no fiscal impact because all substantive material remains the same as what existed under Rule R765-803.
There is no fiscal impact.



**C. Small businesses** ("small business" means a business employing 1-49 persons):

This rule will not have any impact on small businesses.

There is no fiscal impact because all substantive material remains the same as what existed under Rule R765-803.

There is no fiscal impact.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

This rule will not have any impact on non-small businesses.

There is no fiscal impact because all substantive material remains the same as what existed under Rule R765-803.

There is no fiscal impact.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an *agency*):

This rule will not have any impact on persons other than small businesses, non-small businesses, state, or local government entities.

There is no fiscal impact because all substantive material remains the same as what existed under Rule R765-803.

There is no fiscal impact.

**F. Compliance costs for affected persons:**

This rule will not have any impact on compliance costs for affected persons.

There is no fiscal impact because all substantive material remains the same as what existed under Rule R765-803.

There is no fiscal impact.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Utah Commissioner of Higher Education, Geoffrey Landward, has reviewed and approved this regulatory impact analysis.

## Citation Information

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 53H-7-303

## Public Notice Information

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

## Agency Authorization Information

**Agency head or designee and title:**

Alison Adams, Board Secretary and Designee

**Date:**

10/29/2025

**R765. Higher Education (Utah Board of), Administration.**

**R765-263. Institutional Policy Review.**

**R765-263-1. Purpose.**

This rule establishes a procedure and review process whereby a student enrolled in a Utah System of Higher Education institution may petition the Utah Board of Higher Education to review a policy that directly affects the student's enumerated civil liberties, which the student believes the institution adopted without first establishing an administrative rule governing the enumerated civil liberty.

**R765-263-2. Authority.**

This rule is authorized by Section 53H-7-303.

**R765-263-3. Review Process.**

(1) Any student enrolled at a Utah System of Higher Education institution who believes the institution has adopted a policy that directly impacts one of the student's enumerated civil liberties but which is not governed by an existing administrative rule may petition the Utah Board of Higher Education for a review.

(2) To file a petition for review, the student shall send a written request that identifies the policy for which a review is requested to: review@ushe.edu. Within 30 days of receiving the complaint, the Office of the Commissioner of Higher Education, on behalf of the Utah Board of Higher Education, shall:

(a) review the petition to determine if it is made in good faith;

(b) dismiss the petition if it is made in bad faith;

(c) determine if the institution has established an administrative rule that adopts or governs the institution's policy; and

(d) if the institution lacks a governing administrative rule, direct the institution to initiate rulemaking within 60 days of the decision.

**KEY: Civil Liberties, Utah Board of Higher Education**

**Date of Last Change: 2025**

**Authorizing, and Implemented or Interpreted Law: 53H-7-303**

## NOTICE OF SUBSTANTIVE CHANGE

**TYPE OF FILING:** Amendment

**Rule or section number:**

**R765-616**

**Filing ID: 57683**

## Agency Information

**1. Title catchline:**

Higher Education (Utah Board of), Administration

**Building:**

Utah Board of Higher Education Building, The Gateway

**Street address:**

60 S 400 W

**City, state:**

Salt Lake City, UT 84101

**Contact persons:**

**Name:**

**Phone:**

**Email:**

Hilary Renshaw

801-646-4784

Hilary.renshaw@ushe.edu

Alison Adams	801-646-4784	Alison.adams@ushe.edu
Geoffrey T. Landward	801-646-4784	Glandward@ushe.edu
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

### General Information

<b>2. Rule or section catchline:</b>	
R765-616. Adult Learner Grant Program	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 341 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
The purpose of this filing is to update Rule R765-616 in accordance with HB 341, passed in the 2025 General Session. HB 341 (2025) updates the eligible institutions for the Adult Learner Grant Program to include private postsecondary educational institution.	
<b>5. Summary of the new rule or change:</b>	
This filing updates Rule R765-616 in accordance with HB 341 (2025).	
This amendment updates the definition of institutions eligible to participate in this grant program.	
It also makes changes to the eligibility requirements for students to align with state and federal law.	

### Fiscal Information

<b>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
The fiscal note for HB 341 (2025) states that enactment of this legislation will not impact the state budget.
While this amendment updates the definition of institutions eligible for this grant program and makes changes to the eligibility requirements, the amendments do not change any substantive portion of the grant program.
As a result, there is no fiscal impact.
<b>B. Local governments:</b>
The fiscal note for HB 341 (2025) states that enactment of this legislation will not have a fiscal impact on local governments.
While this amendment updates the definition of institutions eligible for this grant program and makes changes to the eligibility requirements, the amendments do not change any substantive portion of the grant program.
As a result, there is no fiscal impact.
<b>C. Small businesses</b> ("small business" means a business employing 1-49 persons):
The fiscal note for HB 341 (2025) states that enactment of this legislation will not have a fiscal impact on small businesses.
While this amendment updates the definition of institutions eligible for this grant program and makes changes to the eligibility requirements, the amendments do not change any substantive portion of the grant program.
As a result, there is no fiscal impact.
<b>D. Non-small businesses</b> ("non-small business" means a business employing 50 or more persons):
The fiscal note for HB 341 (2025) states that enactment of this legislation will not have a fiscal impact on non-small businesses.

While this amendment updates the definition of institutions eligible for this grant program and makes changes to the eligibility requirements, the amendments do not change any substantive portion of the grant program.

As a result, there is no fiscal impact.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The fiscal note for HB 341 (2025) states that enactment of this legislation will not have a fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities.

While this amendment updates the definition of institutions eligible for this grant program and makes changes to the eligibility requirements, the amendments do not change any substantive portion of the grant program.

As a result, there is no fiscal impact.

**F. Compliance costs for affected persons:**

This rule does not impose any fiscal impact on affected persons.

While this amendment updates the definition of institutions eligible for this grant program and makes changes to the eligibility requirements, the amendments do not change any substantive portion of the grant program.

As a result, there is no fiscal impact.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Utah Commissioner of Higher Education, Geoffrey Landward, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 53H-11-412		
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**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.****A. Comments will be accepted until:** 12/31/2025**10. This rule change MAY become effective on:** 01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Alison Adams, General Counsel and Designee	<b>Date:</b>	10/29/2025
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**R765. Higher Education (Utah Board of), Administration.****R765-616. Adult Learner Grant Program.****R765-616-1. Purpose.**

To provide financial assistance for adult learners pursuing an online degree in a field of industry need.

**R765-616-2. Authority.**

Section ~~[Subsection 53B-13e-102(2)]~~ 53H-11-412 authorizes this rule.

**R765-616-3. Definitions.**

- (1) "Board" means the Utah Board of Higher Education.
- (2)(a) "Cost of attendance" means the estimated costs associated with taking an online course, as established by an eligible institution in accordance with board policies.
- (b) "Cost of attendance" includes tuition, costs payable to the eligible institution, and other direct educational expenses related to taking an online course.
- (3) "Eligible institution" means an institution, as defined in this rule that offers a postsecondary level course of instruction using digital technology.
- (4) "Eligible Student" means a student who meets the eligibility criteria established in Section R765-616-4.
- (5) "Fiscal year" means the fiscal year of the state.
- (6) "Institution" means an institution described in Section ~~[53B-1-102]~~ 53H-1-102 or a Utah private ~~[, nonprofit]~~ postsecondary educational institution ~~[that is accredited by a regional accrediting organization that the board recognizes]~~ that enters into an agreement with the Office of the Commissioner of Higher Education to participate in this grant program.
- (7) "OCHE" means the Office of the Commissioner of Higher Education.
- (8) "Online course" means a postsecondary level course of instruction offered by an eligible institution using digital technology.
- (9) "Program" means a sequence of online courses that lead to a certificate or other recognized educational credential that ~~[is]~~:
  - (a) is made up of only online courses, meaning a student can complete the program through online course offerings; and
  - (b) prepares students for employment in four-star or five-star jobs as defined by the Department of Workforce Services.
- (10) "Tuition" means tuition and fees at the rate charged for residents of the state.

**R765-616-4. Grant Eligibility.**

- (1) To be eligible for a grant under this section, each student shall:
  - (a) be 26 years or older;
  - (b) be enrolled in an online program at an eligible institution in a field designed to meet industry needs and leading to a certificate or other recognized educational credential;
  - (c) ~~[be a]~~ qualify for Utah resident student status as determined by ~~[the b]~~ Board's Policy R512;
  - (d) complete the Free Application for Federal Student Aid; and
  - (e) demonstrate financial need, in accordance with Subsection R765-616-6(2)(f) ~~[by being eligible for a Pell Grant]~~.
- (2) The board shall prioritize grant funding for each student who is:
  - (a) from a rural area of the state, as defined by the Utah Department of Health and Human Services, which includes all counties except Utah, Salt Lake, Davis & Weber;
  - ~~[(b) a member of a racial or ethnic minority;]~~
  - ~~[b]~~ (e) classified as low income; or
  - ~~[c]~~ (d) pursuing education in degree programs aligned to four- or five- star jobs as established by the Department of Workforce Services.

**R765-616-5. Process for Allocating Grant Funding to Eligible Institutions.**

The Office of the Commissioner of Higher Education shall allocate the funding based on the proportional number of graduates from eligible programs at participating institutions in the most recent year for which data is available on or before July 1 of each year.

## NOTICES OF PROPOSED RULES

### **R765-616-6. Process for Awarding Grants to Eligible Students.**

- (1) An eligible institution that receives grant funding shall be responsible for establishing a process to award grants along with other financial aid.
- (2) When establishing a process for award grants, the institution shall:
  - (a) award grants on an annual basis and distribute grant money on a quarter or semester basis;
  - (b) ~~[except as provided in Subsection R765-616-4(2)(b),]~~ award grants without regard to an applicant's race, creed, color, religion, sex, or ancestry;
  - (c) ensure the total sum of program grant, and financial aid from any source, do not exceed the cost of attendance for an eligible student at an eligible institution for a fiscal year;
  - (d) determine award amounts within the minimum and maximum award range as established annually by the board; and
  - (e) ensure all funds received from the grant are applied toward the cost of attendance[-]; and
  - (f) prioritize grants based on financial need using an eligible recipient's eligibility index from the FAFSA, which may include maximum eligibility index number set by the institution.

### **R765-616-7. Process for Allocating Grant Funding to Eligible Institutions Reporting.**

- (1) As specified by OCHE, each institution shall provide, as part of an annual institutional financial aid file submission by February 28 of each year, data pertaining to applications, awards, program enrollments, utilization, funding, and other scholarship information for the most recently completed fiscal year.
- (2) For institutions that do not participate in the annual institutional financial aid file submission, data shall be submitted directly no later than June 30 each year.
- (3) OCHE may, at any time, request additional documentation or data related to the scholarship program and may review or formally audit an institution's documentation and compliance with this rule.
- (4) The board shall annually report data and information collected under this section to the Higher Education Appropriations Subcommittee.

**KEY: Utah Board of Higher Education, Adult Learner Grant Program, Student Financial Aid**

**Date of Last Change:** ~~February 14, 2024~~**2025**

**Authorizing, and Implemented or Interpreted Law:** ~~[53B-13e-102]~~**[53H-1-102]**

#### **NOTICE OF SUBSTANTIVE CHANGE**

**TYPE OF FILING:** Amendment

<b>Rule or section number:</b>	<b>R765-627</b>	<b>Filing ID: 57681</b>
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#### **Agency Information**

<b>1. Title catchline:</b>	Higher Education (Utah Board of), Administration	
<b>Building:</b>	Utah Board of Higher Education Building, The Gateway	
<b>Street address:</b>	60 S 400 W	
<b>City, state:</b>	Salt Lake City, UT 84101	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Hilary Renshaw	801-646-4784	Hilary.renshaw@ushe.edu
Alison Adams	801-646-4784	Alison.adams@ushe.edu
Geoffrey T. Landward	801-646-4784	Glandward@ushe.edu
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

#### **General Information**

<b>2. Rule or section catchline:</b>	
R765-627. First Responder Mental Health Services Grant	
<b>3. Are any changes in this filing because of state legislative action?</b>	Changes are because of legislative action.
<b>If yes, any bill number and session:</b>	HB 341 (2025 General Session)
<b>4. Purpose of the new rule or reason for the change:</b>	
The purpose of this filing is to update Rule R765-627 in accordance with HB 341, passed in the 2025 General Session.	

**5. Summary of the new rule or change:**

The amendments to Administrative Rule R765-627 are made to align with requirements under HB 341 (2025) including updating the definition of institutions eligible to participate in this grant program, amending the definitions for first responder, first responder agency, first responder volunteer, and retiree, clarifying the grant amount, and amending the language to allow grant application deadlines to be set for each application window to better align with statutory obligations.

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

The fiscal note for HB 341 (2025) states that there is no fiscal impact on the state budget.

While this amendment updates the definitions, clarifies the grant amount, and amends the language to allow grant application deadlines to be set for each application window it does not impact what grants are available or any other fiscal aspect of the program.

There is no fiscal impact.

**B. Local governments:**

The fiscal note for HB 341 (2025) states that enactment of this legislation likely will not result in direct, measurable costs for local governments.

While this amendment updates the definitions, clarifies the grant amount, and amends the language to allow grant application deadlines to be set for each application window it does not impact what grants are available or any other fiscal aspect of the program.

There is no fiscal impact.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

The fiscal note for HB 341 (2025) states that enactment of this legislation likely will not result in direct expenditures from tax or fee changes for Utah residents and businesses.

While this amendment updates the definitions, clarifies the grant amount, and amends the language to allow grant application deadlines to be set for each application window it does not impact what grants are available or any other fiscal aspect of the program.

There is no fiscal impact.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

The fiscal note for HB 341 (2025) states that enactment of this legislation likely will not result in direct expenditures from tax or fee changes for Utah residents and businesses.

While this amendment updates the definitions, clarifies the grant amount, and amends the language to allow grant application deadlines to be set for each application window it does not impact what grants are available or any other fiscal aspect of the program.

There is no fiscal impact.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The fiscal note for HB 341 (2025) states that enactment of this legislation likely will not result in direct expenditures from tax or fee changes for Utah residents and businesses.

While this amendment updates the definitions, clarifies the grant amount, and amends the language to allow grant application deadlines to be set for each application window it does not impact what grants are available or any other fiscal aspect of the program.

There is no fiscal impact.

#### F. Compliance costs for affected persons:

This amendment will not have any impact in the compliance costs for affected persons.

While this amendment updates the definitions, clarifies the grant amount, and amends the language to allow grant application deadlines to be set for each application window it does not impact what grants are available or any other fiscal aspect of the program.

There is no fiscal impact.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

#### H. Department head comments on fiscal impact and approval of regulatory impact analysis:

The Utah Commissioner of Higher Education, Geoffrey Landward, has reviewed and approved this regulatory impact analysis.

#### Citation Information

**7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 53H-11-411

#### Public Notice Information

**9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:**

12/31/2025

**10. This rule change MAY become effective on:**

01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.



## Agency Authorization Information

<b>Agency head or designee and title:</b>	Alison Adams, Board Secretary and Designee	<b>Date:</b>	10/29/2025
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**R765. Higher Education (Utah Board of), Administration.****R765-627. First Responder Mental Health Services Grant.****R765-627-1. Purpose.**

This rule outlines the requirements of and application process for First Responder Mental Health Services Grant Program.

**R765-627-2. Authority.**

Section ~~[53B-8-117]~~ 53H-11-411 authorizes this rule.

**R765-627-3. Definitions.**

(1) "Academic year" means the calendar year starting July 1 and ending June 30. For degree-granting institutions, this includes Fall, Summer, and Spring semesters of the corresponding academic year.

(2) "Board" means the Utah Board of Higher Education described in Section ~~[53B-1-402]~~ 53H-1-203.

(3) "Eligible institution" means:

(a) an institution of higher education as defined in Section ~~[53B-1-102]~~ 53H-1-102; or

(b) a private postsecondary institution that enters into an agreement with the Office of the Commissioner of Higher Education to participate in this grant program.

(4) "First Responder" means an individual who works in Utah as:

(a) a law enforcement officer, as defined in Section 53-13-103;

(b) an emergency medical technician, as defined in Section 53-2e-101;

(c) an advanced emergency medical technician, as defined in Section 53-2e-101;

(d) a paramedic, as defined in Section 53-2e-101;

(e) a firefighter, as defined in Section 34A-3-113;

(f) a dispatcher, as defined in Section 53-6-102;

(g) a correctional officer, as defined in Section 53-13-104;

(h) a special function officer, as defined in Section 53-13-105, employed by a local sheriff;

(i) a search and rescue worker under the supervision of a local sheriff;

(j) a forensic interviewer or victim advocate employed by a children's justice center established in accordance with Section 67-5b-102;

(k) a credentialed criminal justice system victim advocate as defined in Section 77-38-403 who responds to incidents with a law enforcement officer;

(l) a crime scene investigator technician;

(m) a wildland firefighter;

(n) an investigator or prosecutor of cases involving sexual crimes against children; or

(o) a civilian employee of a first responder agency who has been authorized to view or otherwise access information concerning crimes, accidents, or other traumatic events.

(5) "First responder agency" means the same as that term is defined in Section 53-21-101.

(6) "First responder volunteer" means:

(a) an individual who donates services as a first responder to a first responder agency located in Utah without pay or other compensation except:

(i) expenses that the individual actually and reasonably incurs as the supervising first responder agency approves; and

(ii) health insurance that a participant in the Volunteer Emergency Medical Service Personnel Health Insurance Program described in Section 26-8a-603 receives; or

(b) a volunteer firefighter who is not regularly employed as a firefighter service employee, but who:

(i) has received training in firefighter techniques and skills;

(ii) continues to receive regular firefighting training; and

(iii) is on the rolls of a legally organized volunteer fire department that provides ongoing training and serves a political subdivision of the state.

(7) "Retiree" means the same as that term is defined in Section 49-11-102.

~~(8)~~(4) "OCHE" means the Office of the Commissioner of Higher Education.

~~(9)~~(5) "Scholarship staff" means OCHE staff assigned to administer state scholarships on behalf of the board.

**R765-627-4. Award Requirements.**

(1) To qualify for the First Responder Mental Health Services Grant, an applicant shall:

(a) be a first responder, a first responder volunteer, or a retiree who worked as a first responder in Utah; and ~~be a full-time employee or a retiree, as defined in Section 49-11-102, who is an active member of or has qualified for an allowance under the requirements of:~~

(i) Title 49, Chapter 14, Public Safety Contributory Retirement Act;

(ii) Title 49, Chapter 15, Public Safety Noncontributory Retirement Act;

(iii) Title 49, Chapter 16, Firefighters' Retirement Act; or

## NOTICES OF PROPOSED RULES

~~(iv) Title 49, Chapter 23, New Public Safety and Firefighter Tier II Contributory Retirement Act; and]~~

(b) be seeking a post-secondary degree or certification to become a mental health therapist, as Section 58-60-102 defines that term, at an eligible institution.

### **R765-627-5. Application Process.**

(1) Each applicant shall submit a grant application no later than the deadlines established in the scholarship application form.~~[June 30 before the fiscal year during which awards are made.]~~

~~(a) The board shall annually select and publish two periods of at least 30 days in which it will accept applications for the program.~~

(2) Each applicant shall submit the following documents:

(a) the completed First Responder Mental Health Services Grant application published by OCHE;

~~(b) documentation demonstrating the applicant's status as a first responder, first responder volunteer, or a retiree who worked as a first responder in the state; [enrollment in eligible public safety retirement program, as described in Subsection R765-627-4(1)(a);]~~

(c) a description of the applicant's mental health services career objectives;

(d) a declaration of the applicant's intention to enroll in a program that leads to certification as a mental health professional at an eligible institution; and

(e) other documents as outlined on the annual grant application or as requested by scholarship staff.

(3) The applicant may include the documents described Subsections (2)(b) through (2)(e) in the grant application described in Subsection (2)(a).

(4) Each applicant shall reapply annually to be considered for the award each year.

### **R765-627-6. Grant Amounts.**

(1) Subject to available funding, OCHE may award each qualified applicant a grant in an amount that is equal to or less than the difference between:~~[up to the cost of tuition and fees, with a maximum award of \$6,000 each academic year.]~~

~~(a) the total cost of tuition and fees for the program in which the recipient is enrolled; and~~

~~(b) the total value of all other grants, tuition waivers, fee waivers, and scholarships that the recipient receives to attend the institution.~~

~~(2) A grant reward under Subsection 765-627-6(1) is limited to \$6,000 each academic year.~~

~~(3)~~(2) Each student may participate in First Responder Mental Health Services Grant for a maximum of four academic years.

~~(4)~~(3) If the legislative appropriation is insufficient to cover the costs associated with the First Responder Mental Health Services Grant Program, the board may:

~~(a) prioritize renewal applications;~~

~~(b) prioritize applications for students who have been accepted into a program leading to a degree which qualifies the applicant to work as a mental health therapist;~~

~~(c) reduce the amount of a grant; or~~

~~(d)~~(b) distribute grants on a pro rata basis to all eligible applicants who submitted all application material, as described in Subsection 765-627-5(2), before the application deadline.

(4) Each institution shall combine state or federal loans or grants, internships, student employment, and family and individual contributions toward financing the cost of attendance.

~~(5) Each institution shall combine state or federal loans or grants, internships, student employment, and family and individual contributions toward financing the cost of attendance.~~

~~(6)~~(5) OCHE may reduce the grant amounts based on funding.

~~(7)~~(6) OCHE shall disclose on the application form that the grants are subject to funding and may be reduced.

### **R765-627-7. Transfers.**

(1) Each recipient may transfer to the same program at another eligible institution and retain grant eligibility if the recipient meets all requirements in Section R765-627-4.

(2) Each transfer student shall be responsible for communication with financial aid offices at each institution and with scholarship staff in advance of the application deadline.

### **R765-627-8. Appeals Process.**

(1) An applicant has the right to appeal an adverse decision.

(2) Upon request by the applicant, the scholarship staff shall provide the applicant an opportunity to appeal an adverse decision to a committee of at least three impartial persons.

(3) Each appeal request shall be submitted in writing within 30 days of the notice of adverse decision.

### **R765-627-9. Reporting.**

(1) As specified by OCHE, each institution shall provide, as part of an annual institutional financial aid file submission by February 28 of each year, data pertaining to applications, awards, program enrollments, utilization, funding, and other grant information for the most recently completed academic year.

(2) OCHE may, at any time, request additional documentation or data related to the scholarship program and may review or formally audit an institution's documentation and compliance with this rule.

**KEY:** Utah Board of Higher Education, First Responder Mental Health Services Grant. Student Financial Aid

**Date of Last Change:** ~~2025~~February 14, 2024

**Authorizing, and Implemented or Interpreted Law:** ~~[53B-8-417]~~[53H-11-411]

**End of the Notices of Proposed Rules Section**

## NOTICES OF CHANGES IN PROPOSED RULES

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After an agency has published a **PROPOSED RULE** in the *Utah State Bulletin*, it may receive comment that requires the **PROPOSED RULE** to be altered before it goes into effect. A **CHANGE IN PROPOSED RULE** allows an agency to respond to comments it receives.

As with a **PROPOSED RULE**, a **CHANGE IN PROPOSED RULE** is preceded by a **RULE ANALYSIS**. This analysis provides summary information about the **CHANGE IN PROPOSED RULE** including the name of a contact person, anticipated cost impact of the rule, and legal cross-references.

While the law does not designate a comment period for a **CHANGE IN PROPOSED RULE**, it does provide for a 30-day waiting period. An agency may accept additional comments during this period and, at its option, may designate a comment period or may hold a public hearing. The 30-day waiting period for **CHANGES IN PROPOSED RULES** published in this issue of the *Utah State Bulletin* ends December 31, 2025.

Following the **RULE ANALYSIS**, the text of the **CHANGE IN PROPOSED RULE** is usually printed. The text shows only those changes made since the **PROPOSED RULE** was published in an earlier edition of the *Utah State Bulletin*. Additions made to the rule appear underlined (example). Deletions made to the rule appear struck out with brackets surrounding them (~~example~~). A row of dots in the text between paragraphs (. . . . .) indicates that unaffected text, either whole sections or subsections, was removed to conserve space. If a **CHANGE IN PROPOSED RULE** is too long to print, the Office of Administrative Rules may include only the **RULE ANALYSIS**. A copy of rules that are too long to print is available from the agency or from the Office of Administrative Rules.

From the end of the 30-day waiting period through March 31, 2026, an agency may notify the Office of Administrative Rules that it wants to make the **CHANGE IN PROPOSED RULE** effective. When an agency submits a **NOTICE OF EFFECTIVE DATE** for a **CHANGE IN PROPOSED RULE**, the **PROPOSED RULE** as amended by the **CHANGE IN PROPOSED RULE** becomes the effective rule. The agency sets the effective date. The date may be no fewer than 30 days nor more than 120 days after the publication date of the **CHANGE IN PROPOSED RULE**. If the agency designates a public comment period, the effective date may be no fewer than seven calendar days after the close of the public comment period nor more than 120 days after the publication date. Alternatively, the agency may file another **CHANGE IN PROPOSED RULE** in response to additional comments received. If the Office of Administrative Rules does not receive a **NOTICE OF EFFECTIVE DATE** or another **CHANGE IN PROPOSED RULE** by the end of the 120-day period after publication, the **CHANGE IN PROPOSED RULE** filing, along with its associated **PROPOSED RULE**, lapses.

**CHANGES IN PROPOSED RULES** are governed by Section 63G-3-303, Rule R15-2, and Sections R15-4-3, R15-4-4, R15-4-5b, R15-4-7, R15-4-9, and R15-4-10.

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**The Changes in Proposed Rules Begin on the Following Page**

**NOTICE OF SUBSTANTIVE CHANGE****TYPE OF FILING:** CPR (Change in Proposed Rule)**Rule or section number:****R66-2****Filing ID: 57488****Date of previous publication (only for CPRs):** 10/01/2025**Agency Information**

<b>1. Title catchline:</b>		Agriculture and Food, Specialized Products
<b>Building:</b>		TSOB, South Bldg, Floor 2
<b>Street address:</b>		4315 S 2700 W
<b>City, state:</b>		Taylorsville, UT 84129
<b>Mailing address:</b>		PO Box 146500
<b>City, state, and zip:</b>		Salt Lake City, UT 84114-6500
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Amber Brown	385-245-5222	ambermbrown@utah.gov
Brandon Forsyth	801-710-9945	bforsyth@utah.gov
Camille Knudson	801-597-6010	camillek@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information****2. Rule or section catchline:**

R66-2. Cannabis Processing

**4. Purpose of the new rule or reason for the change:**

During the public comment period for amending this rule, the Department of Agriculture and Food (department) received substantive comments regarding the proposed change to Subsection R66-2-13(4) that would ban "adjectives" on labels for flavors, strains, and terpenes. An analysis of this feedback highlighted several key concerns.

Commenters argued that banning adjectives would force name changes for well-known strains (e.g., "Blue Dream," "Sour Diesel," "Purple Punch"), which would "confuse patients" who rely on these names to make informed medical choices.

Furthermore, stakeholders noted that the terms "adjectives" and "recreational" are "vague and subjective", creating "unpredictable" compliance standards and effectively banning "truthful and factual descriptions."

Based on this feedback, the department determined it was best to remove the prohibition on "adjectives" to enhance clarity for labeling requirements, prevent patient confusion, and better align this rule with the labeling requirements found in Section 4-41a-109.

**5. Summary of the new rule or change:**

This proposed change removes Subsection R66-2-13(4). The remaining subsections have been renumbered for technical conformity and alignment with the Rulewriting Manual for Utah.

Additionally, the division's name is updated from Medical Cannabis and Industrial Hemp to Specialized Products, a technical revision that was omitted from the original proposal.

(EDITOR'S NOTE: The original proposed amendment upon which this change in proposed rule (CPR) was based was published in the October 1, 2025, issue of the Utah State Bulletin, on page 20. Underlining in the rule below indicates text that has been added since the publication of the proposed rule mentioned above; strike-out indicates text that has been deleted. You must view the CPR and the proposed amendment together to understand all of the changes that will be enforceable should the agency make this rule effective.)

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

The proposed change will not have an impact on the state's budget because it clarifies the labeling requirement to align with the statute.

**B. Local governments:**

The proposed change will not have an impact on local governments because they do not participate in or administer the program.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

The proposed change will not have an impact on small businesses because it clarifies the labeling requirement to align with the statute.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

The proposed change will not have an impact on non-small businesses because it clarifies the labeling requirement to align with the statute.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The proposed change will not have an impact on other persons because it clarifies the labeling requirement to align with the statute.

**F. Compliance costs for affected persons:**

The compliance costs are not changing.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

<b>Regulatory Impact Summary Table</b>					
<b>Fiscal Cost</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2026</b>	<b>FY2027</b>	<b>FY2028</b>	<b>FY2029</b>	<b>FY2030</b>
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H. Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Commissioner of the Department of Agriculture and Food, Kelly Pehrson, has reviewed and approved this regulatory impact analysis.

**Citation Information****7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Subsection 4-41a-103(5)	Subsection 4-41a-302(3)(b)(ii)	Subsection 4-41a-404(3)
Subsection 4-41a-405(2)(b)(iv)	Subsection 4-41a-701(3)	Subsection 4-41a-801(1)
Subsection 4-2-103(1)(i)		

**Public Notice Information****9. The public may submit written or oral comments to the agency identified in box 1.**

**A. Comments will be accepted until:** 12/31/2025

**10. This rule change MAY become effective on:** 01/07/2026

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Kelly Pehrson, Commissioner	<b>Date:</b>	11/05/2025
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**R66. Agriculture and Food, ~~[Medical Cannabis and Industrial Hemp]~~Specialized Products.****R66-2. Cannabis Processing.****R66-2-1. Authority and Purpose.**

Pursuant to Subsections 4-41a-103(5), 4-41a-302(3)(b)(ii), 4-41a-404(3), 4-41a-405(2)(b)(iv), 4-41a-701(3), 4-41a-801(1), and 4-2-103(1)(i), this rule establishes the application process, qualifications, and requirements to obtain and maintain a cannabis processing license.

**R66-2-2. Definitions.**

- (1) "Advertised Cannabinoid" means a cannabinoid listed on the product face.
- (2) "Appealing to children" means:
  - (a) has a likeness bearing resemblance to a cartoon character or fictional character; or
  - (b) imitates a food or other product that is typically marketed toward or is appealing to children.
- (3) "Brand name" means a name given to a product by the manufacturer that does not include an image or symbol. "Brand name" does not mean strains or flavors.
- (4) "Cannabinoid isolate" means the same as the term is defined in Subsection R66-3-2(11).
- (5) "Cannabis fact panel" means a part of the label that contains the information described in Subsections R66-2-13(10) and R66-2-13(12).
- (6) "COA" means Certificate of Analysis from an independent cannabis testing laboratory.
- (7) "Complaint" means any negative feedback received from a medical cannabis patient or medical cannabis or industrial hemp licensee.
- (8) "Descriptive product name" means a common name used for the dosage form.
- (9) "Directions for use" means recommended routes of administration for a medical cannabis treatment and suggested usage guidelines, and may include:
  - (a) THC percentage;
  - (b) strain names;
  - (c) strain dominance; or
  - (d) dietary restrictions.
- (10) "Label" means a written, printed, or graphic display on the immediate container of a product.
- (11) "Labeling" means a label and other written, printed, or graphic display:
  - (a) on the product or the product's container or wrapper; or
  - (b) accompanying the product.

## NOTICES OF CHANGES IN PROPOSED RULES

(12) "Logo" means symbols, stylized text, or both that represent a company through a visual image that can be easily understood and recognized.

(13) "Lot" means the quantity of:

(a) flower produced on a particular date and time, following clean up until the next clean up during which the same materials are used; or

(b) trim, leaves, or other plant matter from cannabis plants produced on a particular date and time, following clean up until the next clean up.

(14) "Product face" means the part of a label that is on the outer packaging and most likely to be displayed, presented, or shown under customary conditions of display for retail sale.

(15) "Total THC" means the sum of the determined amounts of delta-9-THC and delta-9-THCA, according to the formula: Total THC = delta-9-THC + (delta-9-THCA x 0.877).

### **R66-2-3. Cannabis Processing Facility License.**

(1) A cannabis processing facility license allows the licensee to receive cannabis from a licensed cannabis cultivator or processor.

(2) A cannabis processing facility license allows the licensee to manufacture cannabis products and send them to medical cannabis pharmacies for sale.

(3) Each cannabis processing facility license shall expire one calendar year from the date of licensure.

### **R66-2-4. Cannabis Processing Facility Requirements.**

(1) A cannabis processing facility operating plan shall meet the requirements described in Section 4-41a-204 and contain a blueprint of the facility containing the following information:

(a) the areas where cannabis is to be extracted;

(b) the areas where cannabis or cannabis products are to be packaged and labeled;

(c) the areas where cannabis products are manufactured;

(d) location of storerooms for cannabis awaiting extraction;

(e) location of storerooms for cannabis awaiting further manufacturing;

(f) the area where finished cannabis and cannabis products are stored;

(g) the location of toilet facilities and hand washing facilities;

(h) the location of a break room and location of personal belonging lockers; and

(i) the location of the areas to be used for loading and unloading of cannabis and cannabis products.

(2) A cannabis processing facility shall have a written plan to handle potential recall and destruction of cannabis due to contamination.

(3) A cannabis processing facility operating plan shall include a waste disposal plan that complies with 4-41a-405.

(4) A cannabis processing facility shall use a standardized scale that is registered with the department when cannabis is:

(a) packaged for sale by weight;

(b) bought and sold by weight; or

(c) weighed for entry into the inventory control system.

(5) A cannabis processing facility creating cannabis derivative product shall develop standard operating procedures.

(6) Pursuant to Subsection 4-41a-403(4)(b), a cannabis processing facility may use signage on the property that includes a logo, as long as the logo does not include:

(a) terms, slang, phrasing, or verbiage associated with the recreational use of cannabis;

(b) any image bearing resemblance to a cartoon character or fictional character whose target audience is children or minors;

(c) content, symbol, or imagery that appeals to children;

(d) imagery featuring a person using the product in any way;

(e) any recreationally oriented subject; or

(f) any statement, design, or representation, picture, or illustration that is obscene or indecent.

(7) A cannabis processing facility shall keep records verifying that each time they receive a batch of vaporizer cartridges a sample is tested for heavy metals by an independent cannabis testing laboratory pursuant to Section 4-41a-603 or have a certificate of conformance from the manufacturer.

### **R66-2-5. Separation of Cannabis and Hemp Processed in a Single Facility.**

(1) Any facility that has both an industrial hemp processing license and a license for medical cannabis processing shall ensure physical separation of medical cannabis and industrial hemp in its facility at all times.

(2) Processing of industrial hemp material and cannabis material may not occur on the same equipment on the same day, unless cleaned between runs.

(3) The licensee shall provide the department with an operating plan detailing how separation of materials is implemented, including the facility's separation procedures for raw material, extract, and final products that ensures:

(a) only one material is processed at a time;

(b) packaging tables are only used for the material being processed each day; and

(c) machinery is cleaned between material being processed;



- (i) cleaning logs shall be kept and provided to the department upon inspection of the facility; and
- (ii) cleaning logs shall include the machines used, the date cleaned, and the name of the employee that conducted the cleaning.
- (4) Cannabis and hemp material shall be clearly labeled pursuant to the requirements of this rule and Rule R66-30 and shall be in sealed containers.

**R66-2-6. Cannabis Extraction Requirements.**

- (1) A cannabis processing facility shall ensure hydrocarbons n-butane, isobutane, propane, or heptane are of at least 99% purity.
- (2) A cannabis processing facility shall use a professional grade extraction system designed to recover the solvents, work in an environment with proper ventilation, and control each source of ignition where a flammable atmosphere is or may be present.
- (3) A cannabis processing facility using carbon dioxide (CO<sub>2</sub>) gas extraction system shall use a professional grade closed loop CO<sub>2</sub> gas extraction system where each vessel is rated to a minimum of six hundred pounds per square inch and CO<sub>2</sub> shall be at least 99% purity.
- (4) Closed loop hydrocarbon, alcohol, or CO<sub>2</sub> extraction systems shall be commercially manufactured and bear a permanently affixed and visible serial number.
- (5) A cannabis processing facility using a closed loop system shall, upon request, provide the department with certification from a licensed engineer stating the system is:
  - (a) safe for its intended use;
  - (b) commercially manufactured; and
  - (c) built to conform to recognized and generally accepted good engineering practices, such as:
    - (i) the American Society of Mechanical Engineers (ASME);
    - (ii) American National Standards Institute (ANSI);
    - (iii) Underwriters Laboratories; or
    - (iv) The American Society for Testing and Materials.
- (6) The certification document shall contain the signature and stamp of the certifying professional engineer and the serial number of the extraction unit being certified.
- (7) A cannabis processing facility may use an alternative extraction method with prior approval from the department.
- (8) A cannabis processing facility shall use food grade ingredients to create cannabis derivative product.
- (9) A cannabis processing facility may use heat, screens, presses, steam distillation, ice water, and other mechanical methods which do not use solvents or gases.
- (10) A cannabis processing facility shall ensure each solvent, with the exception of CO<sub>2</sub>, is extracted in a manner to recapture the solvent and ensure that it is not vented into the atmosphere.
- (11) A cannabis processing facility agent using solvents or gases in a closed loop system shall be fully trained in the use of the system and have direct access to applicable material safety data sheets.
- (12) Parts per million for one gram of finished extract cannot exceed residual solvent or gas levels provided in Rule R66-3.

**R66-2-7. Cannabinoid Isolate.**

- (1) A licensed Tier 1 cannabis processing facility may use cannabinoid isolate from a licensed industrial hemp processing facility.
- (2) A Tier 1 cannabis processing facility may not receive more than 120 kilograms of cannabinoid isolate in a single license year.
- (3) Any transfer of cannabinoid isolate shall be accompanied by a full panel COA.
- (4) The cannabis processing facility shall maintain a record of each transfer of cannabinoid isolate that is available for review by the department, including:
  - (a) the source of the cannabinoid isolate and verification that it was derived from certified industrial hemp;
  - (b) the intended use of the cannabinoid isolate; and
  - (c) the disposition of the cannabinoid isolate.
- (5) Upon receipt of cannabinoid isolate, a cannabinoid processing facility shall submit a sample of the isolate to a licensed independent cannabis testing laboratory for cannabinoid and adulterant testing, pursuant to the requirements of Rule R66-3.

**R66-2-8. Security Requirements.**

- (1) At a minimum, a licensed cannabis processing facility shall have a complete video surveillance system:
  - (a) with minimum camera resolution of 1280 x 720 pixels or pixel equivalent for analog; and
  - (b) that allows for the clear and certain identification of any person and activity.
- (2) Each visitor to a cannabis processing facility shall be required to display an identification badge issued by the facility while on the premises.
- (3) At any time, visitors shall be escorted by a cannabis processing facility agent.
- (4) A cannabis processing facility shall keep and maintain a visitors log showing:
  - (a) the full name and age of each visitor entering the facility;
  - (b) badge number issued;
  - (c) the time of arrival;
  - (d) the time of departure; and
  - (e) the purpose of the visit.

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- (5) The cannabis processing facility shall keep the visitors log for a minimum of one year.
- (6) The cannabis processing facility shall make the visitor log available to the department upon request.

### **R66-2-9. Inventory Control.**

(1) Each batch or lot of cannabis, cannabis derivative product, cannabis product, test sample, or cannabis waste shall be entered into the inventory control system. Recorded information shall include:

- (a) unique identification number;
- (b) batch or lot number;
- (c) name of product;
- (d) facility name and license number; and
- (e) date entered into the inventory control system.

(2) Each batch or lot of cannabis, cannabis derivative product, cannabis product, sample, or cannabis waste shall be traceable to the lot.

(3) Unique identification numbers may not be reused.

(4) Each batch, lot, or sample of cannabis, cannabis derivative product, cannabis product, or cannabis waste shall have a physical tag containing information listed in Subsection R66-2-9(1).

(5) The tag shall be legible and placed in a position that can be clearly read.

(6) A receiving cannabis processing facility shall;

(a) document in the inventory control system any material containing cannabis received, and any difference between the quantity specified in the transport manifest and the quantity received; and

(b) within one working week, notify the department if disparities in the quantity of cannabis received are greater than 10% from the manifest recorded amount.

### **R66-2-10. Cannabis Processing Facility Agents.**

(1) A cannabis processing facility is responsible for ensuring that each agent has received any task specific training as outlined in the operating plan submitted to the department.

(2) A cannabis processing facility agent shall have a properly displayed identification badge which has been issued by the department at all times while on the facility premises or while engaged in the transportation of cannabis.

(3) Each cannabis processing facility agent shall have their state issued identification card in their possession to certify the information on their badge is correct.

### **R66-2-11. Processing of Cannabis and Cannabis Products.**

A licensee that manufactures cannabis products shall be registered with the Division of Regulatory Services within the department.

### **R66-2-12. Irradiated Plant Product From Cannabis Cultivators.**

(1) A cannabis processor may use methods of irradiation for the remediation of cannabis if:

(a) the method is approved in their operating plan, which includes:

- (i) type of radiation or ionizing energy source;
  - (ii) equipment; and
  - (iii) documentation of state approval by the Utah Department of Environmental Quality;
- (b) the product has failed quality assurance testing for microbial contaminants; and
- (c) the processor has submitted and received approval for remediation to use radiation.

(2) Batches or lots of cannabis remediated by radiation shall be noted in the inventory control system, and each container of the batch or lot shall have a sticker with the Radura symbol until the batch is completely used or destroyed.

(3) The processor shall maintain records required by this section for three years after the final disposition of the irradiated cannabis, and shall make the records available for inspection and copy by the department. Records shall include:

- (a) the cannabis batch treated;
  - (b) lot identification;
  - (c) approved operating plan and evidence of compliance with the operating plan;
  - (d) ionizing energy source;
  - (e) source calibration;
  - (f) dosimetry;
  - (g) dose distribution in the product;
  - (h) the date of irradiation;
  - (i) final products that were made by the irradiated cannabis; and
  - (j) pharmacies the product was sent to.
- (4) The label of a cannabis product that contains irradiated cannabis shall display:
- (a) the Radura symbol; and
  - (b) the statement: "Treated with radiation" in text as prominent as the ingredients.

- (5) The Radura symbol and statement shall be placed prominently and conspicuously on the label.
- (6) Processors shall notify a pharmacy that the product has been irradiated before purchase.
- (7) Processors that receive irradiated cannabis from a cultivator shall follow Subsections R66-2-12(4)(a), R66-2-12(4)(b), R66-2-12(5), and R66-2-12(6).

**R66-2-13. Labeling and Packaging of Cannabis and Cannabis Products.**

- (1) Cannabis product labeling shall contain the following information:
  - (a) the medicinal dosage form identified on the product face along with the words "THC or Cannabis Infused";
    - (i) "gummies" may be used instead of "gelatinous cube";
    - (ii) "tincture" may be used instead of "sublingual preparation" or "liquid suspension";
    - (iii) a descriptive product name, that is not appealing to children, recreational, or contain adjectives;
  - (b) the name and license number of the cannabis processing facility;
  - (c) directions for consumers to contact the department with product complaints by going to [medicalcannabis.utah.gov/production](http://medicalcannabis.utah.gov/production);
  - (d) for products containing THC, a warning symbol provided by the department that contrasts conspicuously with the background;
- and
  - (e) the amount of total THC contained in the package, in milligrams.
- (2) A cannabis processing facility may include a QR code on the cannabis product labeling that links to a COA from a licensed independent cannabis testing laboratory. The QR code may not link to any other information.
- (3) Any information appearing on the cannabis product labeling shall be:
  - (a) displayed in any legible font, that is not a script or decorative font, provided that the lowercase letter "o" is at least one-sixteenth inch in height;
  - (b) displayed in a color that contrasts conspicuously with its background; and
  - (c) displayed in English, although a licensee may also choose to display required information in additional languages.
- ~~[(4) Flavors, strains, and terpenes may not be appealing to children, recreational, or contain adjectives.]~~
- ~~[(5)]~~ (4) A cannabis processing facility shall place a cannabis fact panel on a cannabis product before the sale of the cannabis product to a medical cannabis pharmacy.
- ~~[(6)]~~ (5) The cannabis fact panel shall be printed in black and white.
- ~~[(7)]~~ (6) The cannabis fact panel shall be securely affixed to the package.
- ~~[(8)]~~ (7) The cannabis fact panel for cannabis plant product shall include the following information, from top to bottom, in the order as listed:
  - (a) the name of the cannabis cultivation facility, identified as the cultivator;
  - (b) the lot number;
  - (c) the date of harvest;
  - (d) the date of final testing;
  - (e) the batch number;
  - (f) the date on which the product was packaged;
  - (g) the quantity of any cannabinoid listed as present on the COA that is greater than 1% of total cannabinoids;
  - (h) the expiration date; and
  - (i) the net weight displayed in grams.
- ~~[(9)]~~ (8) THC potency levels for cannabis flower shall be listed as total THC in milligrams per gram.
- ~~[(10)]~~ (9) The cannabis fact panel for a cannabis derivative product shall include the following information, from top to bottom, in the order listed:
  - (a) the batch number;
  - (b) the date of the final testing;
  - (c) the date on which the product was packaged;
  - (d) for products intended to be ingested, the amount of total THC and any advertised cannabinoid in milligrams per serving;
  - (e) the quantity of any cannabinoid listed as present on the COA that is greater than 1% of total cannabinoids;
  - (f) the expiration date;
  - (g) the total amount of THC measured in milligrams per gram;
  - (h) a list of each ingredient and each major food allergen as identified in 21 U.S.C. 343;
  - (i) the identity of any artificially derived cannabinoid present in the product;
  - (j) the net weight of the product displayed in grams or milliliters and the number of pieces, if applicable; and
  - (k) a disclosure of the type of extraction process used and any solvent, gas, or other chemical used in the extraction process.
- ~~[(10)]~~ (10) A cannabis processing facility may include a QR code affixed to the product that is scannable for inventory control at the pharmacy. The QR code may not link to any other information.
- ~~[(11)]~~ (11) The label of a cannabis derivative product may include a flavor name if it is not candy-like or a name that appeals to children.
- ~~[(12)]~~ (12) The label of a cannabis product that contains an artificially derived cannabinoid shall clearly display the following text: "This product contains artificially derived cannabinoids."

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(13[4]) Any terpene listed on a cannabis product package shall be verified as present by a licensed independent cannabis testing laboratory and have its quantity listed on the fact panel.

(14[5]) A cannabis processing facility may include a logo and product brand name on the cannabis product face that is exempt from the requirements of Subsection R66-2-13([6]5) and that:

- (a) does not obscure the information required on the label; and
- (b) does not include:
  - (i) terms, slang, phrasing, or verbiage associated with the recreational use of cannabis;
  - (ii) any image bearing resemblance to a cartoon character or fictional character whose target audience is children or minors;
  - (iii) content, symbol, or imagery that appeals to children;
  - (iv) imagery featuring a person using the product in any way;
  - (v) any recreationally oriented subject; or
  - (vi) any statement, design, or representation, picture, or illustration that is obscene, sexual, or criminal.

(15[6])(a) No other information, illustration, or depiction with the exception of directions for use or an item required by state law shall appear on the labeling.

(b) Any warnings required in Chapter 4-41a may be added to the label of any product.

(16[7]) Shapes on cannabis product packaging or labeling may not resemble the product or real-world items.

(17[8]) Labeling may not contain medical claims.

(18[9]) Cannabis product packaging, logos, and brand names shall be pre-approved by the department.

([20]19) The department reserves the right to deny any label, logo, or brand name if the department reasonably believes it is in conflict with Chapter 4-41a or this section.

### **R66-2-14. Recall Protocol.**

(1) The department may initiate a recall of cannabis or cannabis products if:

- (a) evidence exists that pesticides not approved by the department are present on or in the cannabis or cannabis product;
- (b) evidence exists that residual solvents are present on or in cannabis or cannabis product;
- (c) evidence exists that harmful contaminants are present on or in cannabis or cannabis product; or
- (d) the department believes or has reason to believe the cannabis or cannabis product is unfit for human consumption.

(2) The recall plan of a cannabis processing facility shall include, at a minimum:

- (a) a designation of at least one member of the staff who serves as the recall coordinator;
- (b) procedures for identifying and isolating product to prevent or minimize distribution to patients;
- (c) procedures to retrieve and destroy product; and
- (d) a communications plan to notify those affected by the recall.

(3) The cannabis processing facility shall track the total amount of affected cannabis or cannabis product and the amount of affected cannabis or cannabis product returned to the facility as part of the recall.

(4) The cannabis processing facility shall coordinate the destruction of the cannabis or cannabis product with the department and allow the department to oversee the destruction of the affected product.

(5) The department has authority to monitor the progress of the recall until the department declares an end to the recall.

(6) A cannabis production facility shall notify the department before initiating a voluntary recall.

### **R66-2-15. Change in Operation Plans.**

(1) A cannabis processing facility shall submit a notice, on a form provided by the department, before making any changes to the facility's operating plan, including:

- (a) ownership or financial backing of the facility;
- (b) the facility's name;
- (c) a change in location;
- (d) any modification, remodeling, expansion, reduction, or physical, non-cosmetic alteration of a facility;
- (e) changes or adds processing or extraction equipment;
- (f) adds a new product or dosage form; or
- (g) any information requested by the department that shall allow the department to determine if requirements will be met.

(2) A cannabis processing facility may not implement changes to the initial approved operation plan without approval.

(3) The board shall approve of requested changes unless approval would lead to a violation of the applicable laws and rules of the state.

(4) The department shall specify the reason for the denial of approval for a change to the operation plan.

(5) Before the board's review of a cannabis production establishment license under Subsection 4-41a-201.1(7)(e), the cannabis production establishment shall provide the board with:

(a) blueprints that show that there will be physical separation between medical cannabis and industrial hemp produced in their facility, including demonstrating storage and packaging areas are separate; and

(b) any information requested by the board that shall allow the board to determine if the requirements of Section R66-2-5 will be met before the medical cannabis production establishment processes industrial hemp or industrial hemp products.

**R66-2-16. Renewals.**

- (1) A cannabis processing facility shall submit a notice of intent to renew and the licensing fee to the department within 30 days of license expiration.
- (2) The licensee shall report the information required for renewal under Subsection 4-41a-201.1(10)(b)(iii) to the board.
- (3) If the licensing fee and intent to renew are not submitted by the day of license expiration, the licensee may not continue to operate.
- (4) The board may take into consideration significant violations issued in determining license renewals.

**R66-2-17. Targeted Marketing.**

- (1) A medical cannabis processor may engage in targeted marketing of the processor's medical cannabis product, medical cannabis brand, or a medical cannabis device pursuant to Section 4-41a-604.
- (2) Targeted marketing may not:
  - (a) include deceptive, false, or misleading statements;
  - (b) contain any health-related statement that is untrue or tends to create a misleading impression as to the effects on health of cannabis consumption;
  - (c) promote excessive consumption;
  - (d) contain a statement, design, illustration, picture, or representation that:
    - (i) encourages or represents the recreational use of cannabis;
    - (ii) displays the use of cannabis, including the consumption, smoking, or vaping of cannabis;
    - (iii) encourages or promotes cannabis for use as an intoxicant;
    - (iv) is obscene or indecent;
  - (e) include any image designed or likely to appeal to children, such as:
    - (i) cartoons;
    - (ii) toys;
    - (iii) animals;
    - (iv) children; or
  - (v) any other likeness to images, characters, or phrases that are popularly used to advertise to children;
  - (f) contain any language or imagery that is likely to mislead patients to believe that the medical cannabis product has been endorsed, made, or used by the state or any of its representatives, except where specifically authorized; or
  - (g) display medical cannabis products or images of products where the advertisement is visible to members of the public.
- (3) Targeted marketing shall accurately and legibly identify the medical cannabis processor responsible for its content and include a statement that cannabis products are for use by patients only.
- (4) Any targeted marketing for medical cannabis products that is related to the benefits, safety, or efficacy of the product, including therapeutic or medical claims, shall:
  - (a) be supported by substantial, current clinical evidence or data; and
  - (b) include information on side effects or risks associated with the use of cannabis.
- (5) A medical cannabis processor may have a link on their website to allow individuals to sign up to receive targeted marketing electronically.

**R66-2-18. Violation Categories.**

- (1) Public Safety Violations: \$3,000- \$5,000 per violation. This category is for violations which present a direct threat to public health or safety including:
  - (a) cannabis sold to an unlicensed source;
  - (b) cannabis purchased from an unlicensed source;
  - (c) refusal to allow inspection;
  - (d) failure to comply with testing requirements;
  - (e) a test result for high pesticide residue in the cannabis produced or cannabis product;
  - (f) a test result for high residual solvents, heavy metal, microbials, molds, or other harmful contaminants;
  - (g) failure to maintain required cleanliness and sanitation standards;
  - (h) unauthorized personnel on the premises;
  - (i) permitting criminal conduct on the premises;
  - (j) possessing, manufacturing, or distributing cannabis products that the person knows or should know appeal to children;
  - (k) failure to follow an approved recall protocol; or
  - (l) engaging in or permitting a violation of the Title 4, Chapter 41a, Cannabis Production Establishments, which amounts to a public safety violation as described in this subsection.
- (2) Regulatory Violations: \$1,000-\$5,000 per violation. This category is for violations involving this rule and other applicable state rules including:
  - (a) failure to maintain alarm and security systems;
  - (b) failure to keep and maintain records for at least two years;
  - (c) failure to maintain traceability;

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- (d) failure to follow transportation requirements;
- (e) failure to follow the waste and disposal requirements;
- (f) failure to maintain separation between cannabis and hemp;
- (g) failure to follow labeling and packaging requirements;
- (h) failure to meet extraction requirements;
- (i) distributing a final cannabis product with an actual weight that is lower than the net weight listed on the cannabis fact panel;
- (j) engaging in or permitting a violation of Title 4, Chapter 41a, Cannabis Production Establishments or this rule which amounts to a regulatory violation as described in this subsection; or
- (k) failure to maintain standardized scales.
- (3) Licensing Violations: \$500- \$5,000 per violation. This category is for violations involving licensing requirements including:
  - (a) an unauthorized change to the operating plan;
  - (b) failure to notify the department of changes to the operating plan;
  - (c) failure to notify the department of changes to financial or voting interests of greater than 2%;
  - (d) failure to follow the operating plan as approved by the department;
  - (e) engaging in or permitting a violation of this rule or Title 4, Chapter 41a, Cannabis Production Establishments which amounts to a licensing violation as described in this subsection; or
  - (f) failure to respond to violations.
- (4) The department shall calculate penalties based on the level of violation and the adverse effect or potential adverse effect at the time of the incidents giving rise to the violation.
- (5) The department may enhance or reduce the penalty based on the seriousness of the violation.

**KEY:** cannabis processing, cannabis production establishment, violations, targeted marketing, qualifications, and requirements

**Date of Last Change:** 2025

**Authorizing, and Implemented or Interpreted Law:** 4-41a-103(5); 4-41a-404(3); 4-41a-701(3); 4-41a-302(3)(b)(ii); 4-2-103(1)(i); 4-41a-405(2)(b)(iv); 4-41a-801(1)

NOTICE OF SUBSTANTIVE CHANGE		
<b>TYPE OF FILING:</b> CPR (Change in Proposed Rule)		
<b>Rule or section number:</b>	<b>R66-5</b>	<b>Filing ID: 57403</b>
<b>Date of previous publication (only for CPRs):</b>	<b>09/15/2025</b>	

### Agency Information

<b>1. Title catchline:</b>	Agriculture and Food, Specialized Products	
<b>Building:</b>	TSOB, South Bldg, Floor 2	
<b>Street address:</b>	4315 S 2700 W	
<b>City, state:</b>	Taylorsville, UT 84129	
<b>Mailing address:</b>	PO Box 146500	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-6500	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Amber Brown	385-245-5222	ambermbrown@utah.gov
Brandon Forsyth	801-710-9945	bforsyth@utah.gov
Camille Knudson	801-597-6010	camillek@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

### General Information

<b>2. Rule or section catchline:</b>
R66-5. Medical Cannabis Pharmacy

**4. Purpose of the new rule or reason for the change:**

During the public comment period, the Department of Agriculture and Food (department) received comments regarding the proposed changes to this rule.

The concerns in the comments are regarding the requirement to have a physical tag to identify cannabis products and cannabis waste. The intent of the original change was to ensure these products were identifiable through the unique identifier in the inventory control system to ensure that the products are accurately tracked until destruction.

The proposed change in the CPR clarifies the options to provide the information to align with how industry currently complies with this requirement.

**5. Summary of the new rule or change:**

The proposed changes clarify the requirement in Subsection R66-5-6(3).

(EDITOR'S NOTE: The original proposed amendment upon which this change in proposed rule (CPR) was based was published in the September 15, 2025, issue of the Utah State Bulletin, on page 30. Underlining in the rule below indicates text that has been added since the publication of the proposed rule mentioned above; strike-out indicates text that has been deleted. You must view the CPR and the proposed amendment together to understand all of the changes that will be enforceable should the agency make this rule effective.)

**Fiscal Information****6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

The proposed change will not have an impact on the state's budget because it clarifies the requirement to align with the current industry practices.

**B. Local governments:**

The proposed change will not have an impact on local governments because they do not administer or participate in the program.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

The proposed change will not have an impact on small businesses because it clarifies the requirement to align with current industry practices.

**D. Non-small businesses** ("non-small business" means a business employing 50 or more persons):

The proposed change will not have an impact on non-small businesses because it clarifies the requirement to align with current industry practices.

**E. Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The proposed change will not have an impact on other persons because it clarifies the requirement to align with current industry practices.

**F. Compliance costs for affected persons:**

The compliance costs are not changing.

**G. Regulatory Impact Summary Table** (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

## NOTICES OF CHANGES IN PROPOSED RULES

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>H. Department head comments on fiscal impact and approval of regulatory impact analysis:</b>					
The Commissioner of the Department of Agriculture and Food, Kelly Pehrson, has reviewed and approved this regulatory impact analysis.					

## Citation Information

<b>7. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:</b>		
Subsection 4-2-103(1)(i)		

## Public Notice Information

<b>9. The public may submit written or oral comments to the agency identified in box 1.</b>	
<b>A. Comments will be accepted until:</b>	12/31/2025
<b>10. This rule change MAY become effective on:</b>	01/07/2026
NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.	

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Kelly Pehrson, Commissioner	<b>Date:</b>	11/05/2025
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**R66. Agriculture and Food, Specialized Products.****R66-5. Medical Cannabis Pharmacy.****R66-5-1. Authority and Purpose.**

- (1) Title 4, Chapter 41a, Cannabis Production Establishments and Pharmacies and Subsection 4-2-103(1)(i) authorize this rule.
- (2) This rule establishes operating and licensing standards and requirements to be followed by medical cannabis pharmacies and their employees.

**R66-5-2. Definitions.**

- (1) "Cannabis waste" means cannabis product that is damaged, deteriorated, mislabeled, expired, returned, subject to a recall, or enclosed within a container or package that has been opened or breached.
- (2) "Card" means any type of medical cannabis card or registration card, whichever applies, authorized under Title 26B, Chapter 4, Part 2 Cannabinoid Research and Medical Cannabis.



(3) "Cardholder area" means the area of a medical cannabis pharmacy where a product is purchased that is restricted to a medical cannabis cardholder, a medical cannabis pharmacy employee, or another individual authorized by the medical cannabis pharmacy to enter the cardholder area.

(4) "DHHS" means The Utah Department of Health and Human Services.

(5) "Limited access area" means an area of a medical cannabis pharmacy where medical cannabis and medical cannabis devices shall be stored that is:

(a) a lockable cabinet in a medical cannabis pharmacy facility to which only a pharmacy agent or PMP has access; or

(b) an indoor area or room of a medical cannabis pharmacy facility that is separated from the cardholder and the public areas of the medical cannabis pharmacy by a physical barrier with suitable locks and an electronic barrier to detect entry doors.

(6) "PIC" means a pharmacist-in-charge who oversees the operation and generally supervises a medical cannabis pharmacy.

(7) "PMP" means a medical cannabis pharmacy medical provider that meets the criteria defined in Subsection 4-41a-1101(12).

(8) "Public waiting area" means an area of the medical cannabis pharmacy where the public waits for cardholders and cardholders wait for authorization to enter the cardholder area.

(9) "Recreational disposition" means:

(a) slang words or phrasing associated with the recreational use of cannabis;

(b) an image of a celebrity or other person whose target audience is children or minors;

(c) content that encourages, promotes, or otherwise creates an impression that the recreational use of cannabis is legal or acceptable, or that the recreational use of cannabis has potential health or therapeutic benefits;

(d) content that promotes excessive consumption;

(e) content that is obscene or indecent; and

(f) content that a reasonable person knows or should know appeals to children.

#### **R66-5-3. Medical Cannabis Pharmacy License.**

(1) A medical cannabis pharmacy license allows the licensee to receive cannabis from a licensed cannabis processor or medical cannabis pharmacy.

(2) A medical cannabis pharmacy license allows the licensee to sell medical cannabis or medical cannabis devices to medical cannabis patients.

(3) Each medical cannabis pharmacy license shall expire one calendar year from the date of licensure.

#### **R66-5-4. Medical Cannabis Pharmacy Requirements.**

(1) A medical cannabis pharmacy operating plan shall meet the requirements described in Section 4-41a-204 and contain a blueprint of the facility containing the following information:

(a) limited access areas;

(b) public waiting area;

(c) patient counseling area;

(d) where cannabis products and cannabis devices are stored;

(e) location of returned cannabis and cannabis waste awaiting destruction;

(f) the location of toilet facilities and hand washing facilities;

(g)(i) the location of a break room and the location of personal belonging lockers; and

(i) the location of the areas to be used for loading and unloading of cannabis and cannabis products.

(2) A medical cannabis pharmacy shall have a counseling area to allow for confidential patient counseling.

(3) A medical cannabis pharmacy shall protect confidential cardholder data and information stored in the Electronic Verification System to ensure that access to and use of the data and information is limited to those individuals and purposes authorized under Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis, and this rule.

(4) A medical cannabis pharmacy shall set hours open for business to give patients the greatest access to medical cannabis possible.

(5) A medical cannabis pharmacy may not dispense expired, damaged, deteriorated, misbranded, adulterated, or opened medical cannabis products or medical cannabis devices.

(6) A medical cannabis pharmacy shall have a written plan to handle potential recall and destruction of cannabis due to contamination.

(7) A medical cannabis pharmacy operating plan shall include a waste disposal plan that complies with Section 4-41a-1101.

(8) Pursuant to Section 4-41a-109, a medical cannabis pharmacy may use signage on the property that includes a logo, as long as the logo does not include a recreational disposition.

(9) A medical cannabis pharmacy shall provide a copy of a certificate of analysis for a medical cannabis product to a medical cannabis cardholder or a recommending medical provider if:

(a) it is requested in writing; and

(b) the medical cannabis pharmacy redacts the location of the medical cannabis processor.

(10) A medical cannabis pharmacy shall immediately report any actual or suspected criminal activity to:

(a) the department; and

(b) law enforcement with jurisdiction where the criminal acts occurred.

## NOTICES OF CHANGES IN PROPOSED RULES

### **R66-5-5. Security Standards.**

- (1) A medical cannabis pharmacy shall comply with security standards established in Section 4-41a-1101.
- (2) A medical cannabis pharmacy shall have a complete video surveillance system that:
  - (a) has a minimum camera resolution of 640 x 470 pixels or pixel equivalent for analog;
  - (b) allows for the clear and certain identification of any person or activities; and
  - (c) sets the date and time stamp embedded on video camera recordings correctly.
- (3) Visitors to a medical cannabis pharmacy shall be required to have a properly displayed identification badge issued by the facility while on the premises of the facility.
- (4) A Pharmacy Agent or PMP shall escort any medical cannabis pharmacy visitors while in the facility.
- (5) A medical cannabis pharmacy shall keep and maintain a visitor log for each visitor that enters the facility showing:
  - (a) full name and age;
  - (b) badge number issued;
  - (c) time of arrival;
  - (d) time of departure; and
  - (e) purpose of the visit.
- (6) The medical cannabis pharmacy shall maintain the visitor log for a minimum of one year.
- (7) The medical cannabis pharmacy shall make the visitor log available to the department upon request.

### **R66-5-6. Inventory Control.**

- (1) All cannabis products and cannabis waste shall be entered into the inventory control system. Recorded information shall include:
  - (a) unique identification number;
  - (b) batch or lot number;
  - (c) name of product;
  - (d) storage location; and
  - (e) date entered in the inventory control system.
- (2) Returned product shall be reactivated and placed into the inventory control system.
- (3) Each cannabis product or cannabis waste shall be identified [have] by a physical tag, label, or other suitable means containing information listed in Subsections R66-5-6(1)(a), (b), and (c).
- (4) A receiving medical cannabis pharmacy shall;
  - (a) document in the inventory control system any material containing cannabis received, and any difference between the quantity specified in the transport manifest and the quantity received; and
  - (b) within one working day, notify the department if the quantity of cannabis received is greater than 10% of the amount recorded on the manifest.

### **R66-5-7. Minimum Requirements for the Storage and Handling of Cannabis.**

- (1) Storage areas shall provide adequate lighting, sanitation, temperature, humidity, space, equipment, and security conditions for the storage of cannabis.
- (2) Stored cannabis shall be at least six inches off the ground.
- (3) Cannabis shall be stored away from potential contaminants.
- (4) Cannabis that is outdated, damaged, deteriorated, misbranded, or adulterated shall be stored separately by a physical barrier until it is destroyed.

### **R66-5-8. Product Recall.**

- (1) A recall may be initiated by a cannabis production establishment, a medical cannabis pharmacy, or the department.
- (2) A medical cannabis pharmacy shall maintain a recall plan that includes, at a minimum:
  - (a) a designation of at least one employee who shall serve as the recall coordinator;
  - (b) if the recall is initiated by a medical cannabis pharmacy, a requirement that the pharmacy will immediately notify the department and the cannabis production establishment from which it obtained the cannabis product in question;
  - (c) a requirement that notification occur within 24 hours of the pharmacy becoming aware of a complaint about the medical cannabis product or medical cannabis device;
  - (d) a procedure to identify and isolate recalled products to prevent or minimize distribution to patients;
  - (e) a procedure to retrieve and destroy recalled product; and
  - (f) a communication plan to notify those affected by the recall.
- (3) The medical cannabis pharmacy shall track the total amount of affected medical cannabis product and the amount of medical cannabis product returned to the medical cannabis pharmacy as part of the recall.
- (4) The medical cannabis pharmacy shall coordinate the destruction of the medical cannabis product with the department and allow the department to oversee the destruction.
- (5) A medical cannabis pharmacy shall notify the department before initiating a voluntary recall.

**R66-5-9. Abandoning or Relinquishing a License.**

- (1) When a medical cannabis pharmacy determines to cease operations, the licensee shall:
  - (a) send notice to the department with the date of closure of the medical cannabis pharmacy;
  - (b) provide a written plan to the department for approval, detailing:
    - (i) when the department may conduct a comprehensive inventory;
    - (ii) the expected disposition of any medical cannabis product and medical cannabis devices; and
    - (iii) the name of the medical cannabis pharmacy to which the orders, including any refill information and patient records, will be transferred; and
  - (c) post a closing notice in a conspicuous place at the public entrance doors to the medical cannabis pharmacy that includes the closing date.
- (2) On the date of the closing, the licensee shall remove medical cannabis product and medical cannabis devices from the medical cannabis pharmacy according to the department approved plan.
- (3) The licensee shall remove signs and notify the landlord of the property that it is unlawful to use the word "medical cannabis pharmacy," or any other words of the same or similar meaning or any graphic representation that would mislead the public that a medical cannabis pharmacy is located at the address.

**R66-5-10. Walk- up, Drive-Through, and Curbside Service.**

- (1) A medical cannabis cardholder may make an order for medical cannabis by phone or online and receive the product using a medical cannabis pharmacy's walk-up, drive-through, or curbside service.
- (2)(a) Medical cannabis products and medical cannabis devices, including those that are awaiting pick-up, shall be securely stored in the medical cannabis pharmacy facility until a medical cannabis cardholder arrives for pick-up.
- (b) A medical cannabis product or medical cannabis device may not be stored outside of a medical cannabis pharmacy facility before a customer arrives to pick-up the product.
- (3)(a) A medical cannabis pharmacy's video surveillance shall enable the video recording of each medical cannabis cardholder transaction that includes:
  - (i) video surveillance of a cardholder, cardholder vehicle, medical cannabis pharmacy employee verifying the cardholder's valid form of government issued identification; and
  - (ii) the transfer and dispensing of an item bought by a cardholder.
- (b) Video cameras shall record points of entry and exit of a parking lot and shall be angled to ensure the capture of clear and certain identification of a cardholder and their vehicle's license plate.
- (4)(a) The individual receiving the delivery of a product from the medical cannabis pharmacy employee via walk-up, drive-through, or curbside pick-up shall be a cardholder.
- (b) When drive-through service is used, the medical cannabis cardholder verifying their ID to the medical cannabis pharmacy shall be visible to cameras and to the medical cannabis pharmacy employee who is helping them.
- (5)(a) When a PMP's consultation with a medical cannabis cardholder is required, the consultation may be provided in-person, over the phone, or with another real-time communications device.
- (b) It is the responsibility of the medical cannabis pharmacy to ensure the privacy of these consultations, regardless of where or how the consultations happen.

**R66-5-11. Targeted Marketing.**

- (1) A medical cannabis pharmacy may engage in targeted marketing pursuant to Subsection 4-41a-1104(2)(f).
- (2) Targeted marketing may not:
  - (a) include deceptive, false, or misleading statements;
  - (b) contain any health-related statement that is untrue or tends to create a misleading impression as to the effects on health of cannabis consumption;
  - (c) promote excessive consumption;
  - (d) contain a statement, design, illustration, picture, or representation that:
    - (i) encourages or represents the recreational use of cannabis;
    - (ii) displays the use of cannabis, including the consumption, smoking, or vaping of cannabis;
    - (iii) encourages or promotes cannabis for use as an intoxicant; or
    - (iv) is obscene or indecent;
  - (e) include any image designed or likely to appeal to children, such as:
    - (i) cartoons;
    - (ii) toys;
    - (iii) animals;
    - (iv) children; or
  - (v) any other likeness to images, characters, or phrases that are popularly used to advertise to children;
  - (f) contain any language or imagery that is likely to mislead patients to believe that the medical cannabis product has been endorsed, made, or used by the state or any of its representatives, except where specifically authorized; or

## NOTICES OF CHANGES IN PROPOSED RULES

- (g) display medical cannabis products or images of products where the advertisement is visible to members of the public.
- (3) Targeted marketing shall accurately and legibly identify:
  - (a) the medical cannabis pharmacy responsible for its content; and
  - (b) a statement that cannabis products are for use by patients only.
- (4) Any targeted marketing for medical cannabis products that is related to the benefits, safety, or efficacy of the product, including therapeutic or medical claims, shall:
  - (a) be supported by substantial, current clinical evidence or data; and
  - (b) include information on side effects or risks associated with the use of cannabis.
- (5) A medical cannabis pharmacy may have a link on its website to allow individuals to sign up to receive targeted marketing electronically.

### **R66-5-12. Change in Operating Plans.**

- (1) A medical cannabis pharmacy shall submit a notice, on a form provided by the department, before making any changes to the pharmacy's operating plan, including:
  - (a) ownership or financial backing of the facility;
  - (b) the facility's name;
  - (c) any modification, remodeling, expansion, reduction, or physical, non-cosmetic alteration of a facility;
  - (d) change to the protected areas;
  - (e) change in regular hours of operation or hours open for business; and
  - (f) any other information requested by the department.
- (2) Pursuant to Subsection 4-41a-201.1(7), a medical cannabis pharmacy may not implement changes to the initial approved operating plan without board approval.
- (3) The department shall specify the reason for the denial of approval for a change to the operation plan.

### **R66-5-13. Pharmacy License and Renewal.**

- (1) A medical cannabis pharmacy shall submit a notice of intent to renew to the department within 30 days of license expiration.
- (2) The licensee shall report the information required for renewal under Subsection 4-41a-201.1(10)(b)(iv) to the board.
- (3) If the licensing fee and intent to renew are not submitted by the day of license expiration, the licensee may not continue to operate.
- (4) The board may take into consideration significant violations issued in determining license renewals.

### **R66-5-14. Geographic Regions.**

- (1) Pursuant to Subsection 4-41a-1005(1), the department shall divide the state into geographic regions based on:
  - (a) overall population;
  - (b) patient population; and
  - (c) travel time.
- (2) The department establishes the following geographic regions by county:
  - (a) Region 1- Northern Utah:
    - (i) Box Elder;
    - (ii) Cache; and
    - (iii) Rich.
  - (b) Region 2 - Weber Basin
    - (i) Davis;
    - (ii) Morgan; and
    - (iii) Weber;
  - (c) Region 3 - Salt Lake:
    - (i) Salt Lake;
    - (ii) Summit; and
    - (iii) Tooele;
  - (d) Region 4 - Uintah Basin:
    - (i) Daggett;
    - (ii) Duchesne; and
    - (iii) Uintah;
  - (e) Region 5 - West Central:
    - (i) Juab;
    - (ii) Sanpete;
    - (iii) Utah; and
    - (iv) Wasatch;
  - (f) Region 6- Central:
    - (i) Carbon;

- (ii) Emery;
- (iii) Millard;
- (iv) Piute;
- (v) Sevier; and
- (vi) Wayne;
- (g) Region 7 - Southwest:
  - (i) Beaver;
  - (ii) Garfield;
  - (iii) Iron;
  - (iv) Kane; and
  - (v) Washington; and
- (h) Region 8 - Southeast:
  - (i) Grand; and
  - (ii) San Juan.

**R66-5-15. Cannabis Pharmacy Agents.**

- (1) Medical cannabis pharmacy employees shall be registered as PMP or a medical cannabis pharmacy agent.
- (2) A medical cannabis pharmacy is responsible for ensuring that each agent has received any task specific training as outlined in the operating plan submitted to the department.
- (3) A medical cannabis pharmacy agent shall have a properly displayed identification badge which has been issued by the department at all times while on the facility premises or while engaged in the transportation of cannabis.
- (4) Each medical cannabis pharmacy agent shall have their state issued identification card in their possession to certify that the information on their badge is correct.
- (5) A pharmacy agent may perform the following duties:
  - (a) assist a prospective cardholder with an application for a medical cannabis card;
  - (b) assist the cardholder with understanding available products, proper use of a medical device, medical cannabis strains, and methods of consumption or application within the dosing guidelines specified by an RMP or PMP;
  - (c) verify the status of an individual's medical cannabis card and dosing guidelines in a patient recommendation within the Electronic Verification System;
  - (d) enter and retrieve information from the Inventory Control System;
  - (e) authorize entry of a cardholder into the cardholder counseling area;
  - (f) take a refill order from an RMP;
  - (g) provide pricing and product information;
  - (h) process cardholder payment, including the issuance of receipt, refund, credit, and cash;
  - (i) prepare labeling for a product;
  - (j) retrieve medical cannabis and medical cannabis devices from inventory;
  - (k) accept a new order of medical cannabis or a medical cannabis device, orders left on voicemail for a PMP to review;
  - (l) verbally offer to a cardholder, the opportunity for counseling with a PMP regarding medical cannabis, or a medical cannabis device;
  - (m) assist with dispensing of product to a cardholder;
  - (n) screen calls for a PMP;
  - (o) prepare an inventory of medical cannabis and medical cannabis device;
  - (p) transport medical cannabis, or medical cannabis device; and
  - (q) assist with maintaining a safe, clean, and professional environment.
- (6) A pharmacy agent may not perform the following duties:
  - (a) receive dosing guidelines for a patient's recommendation over the phone or in-person;
  - (b) determine or modify dosing guidelines in a patient's recommendation; or
  - (c) provide counseling or consultation regarding a patient's medical condition, or medical treatment.

**R66-5-16. Violation Categories.**

- (1) Public Safety Violations: \$3,000 - \$5,000 per violation. This category is for violations that present a direct threat to public health or safety, including:
  - (a) cannabis sold to an unlicensed source;
  - (b) cannabis purchased from an unlicensed source;
  - (c) refusal to allow inspection;
  - (d) failure to comply with PIC requirements;
  - (e) failure to maintain required general operating standards;
  - (f) failure to comply with product recall requirements;
  - (g) unauthorized personnel on the premises;

## NOTICES OF CHANGES IN PROPOSED RULES

- (h) permitting criminal conduct on the premises; or
- (i) engaging in or permitting a violation of the Title 4, Chapter 41a, Medical Cannabis Pharmacy Operation and Agents, which amounts to a public safety violation as described in this subsection.
- (2) Regulatory Violations: \$1,000 - \$5,000 per violation. This category is for violations involving this rule and other applicable state rules:
  - (a) failure to maintain alarm and security systems;
  - (b) failure to keep and maintain records for at least five years;
  - (c) failure to maintain traceability;
  - (d) failure to follow transportation requirements;
  - (e) failure to follow the waste and disposal requirements;
  - (f) failure to follow the walk- up, drive-thru, delivery, and curbside service requirements;
  - (g) failure to follow targeted marketing requirements;
  - (h) failure to follow agent duties and responsibilities requirements; or
  - (i) engaging in or permitting a violation of Title 4, Chapter 41a, Medical Cannabis Pharmacy Operation and Agents or this rule which amounts to a regulatory violation as described in this subsection;
- (3) Licensing Violations: \$500- \$5,000 per violation. This category is for violations involving licensing requirements, including:
  - (a) an unauthorized change to the operating plan;
  - (b) failure to notify the department of changes to the operating plan;
  - (c) failure to notify the department of changes to financial or voting interests of greater than 10%;
  - (d) failure to follow the operating plan as approved by the department;
  - (e) engaging in or permitting a violation of this rule or Title 4, Chapter 41a, Medical Cannabis Pharmacy License which amounts to a licensing violation as described in this subsection; or
  - (f) failure to respond to violations.
- (4) The department shall calculate penalties based on the level of violation and the adverse effect or potential adverse effect at the time of the incidents giving rise to the violation.
- (5) The department may enhance or reduce the penalty based on the seriousness of the violation.

**KEY: medical cannabis, medical cannabis pharmacy, targeted marketing, geographic regions, pharmacy cannabinoids, cannabis products**

**Date of Last Change: 2025**

**Authorizing, and Implemented or Interpreted Law: 4-41a-1101(12), 4-41a-1104(4), 4-2-103(1)(i)**

**End of the Notices of Changes in Proposed Rules Section**

## NOTICES OF 120-DAY (EMERGENCY) RULES

An agency may file a **120-DAY (EMERGENCY) RULE** when it finds that regular rulemaking procedures would:

- (a) cause an imminent peril to the public health, safety, or welfare;
- (b) cause an imminent budget reduction because of budget restraints or federal requirements; or
- (c) place the agency in violation of federal or state law (Subsection 63G-3-304(1)).

As with a **PROPOSED RULE**, a **120-DAY RULE** is preceded by a **RULE ANALYSIS**. This analysis provides summary information about the **120-DAY RULE** including the name of a contact person, justification for filing a **120-DAY RULE**, anticipated cost impact of the rule, and legal cross-references.

Following the **RULE ANALYSIS**, the text of the **120-DAY RULE** is printed. New text is underlined (example) and text to be deleted is struck out with brackets surrounding the deleted text ([~~example~~]). An emergency rule that is new is entirely underlined. Likewise, an emergency rule that repeals an existing rule shows the text completely struck out. A row of dots in the text (. . . . .) indicates that unaffected text was removed to conserve space.

A **120-DAY RULE** is effective when filed with the Office of Administrative Rules, or on a later date designated by the agency. A **120-DAY RULE** is effective for 120 days or until it is superseded by a permanent rule. Because of its temporary nature, a **120-DAY RULE** is not codified as part of the *Utah Administrative Code*.

The law does not require a public comment period for **120-DAY RULES**. However, when an agency files a **120-DAY RULE**, it may file a **PROPOSED RULE** at the same time, to make the requirements permanent.

Emergency or **120-DAY RULES** are governed by Section 63G-3-304, and Section R15-4-8.

### NOTICE OF EMERGENCY (120-DAY) RULE

Rule or section Number:	R66-50	Filing ID: 57662
Effective date:	11/04/2025	

### Agency Information

1. Title catchline:	Agriculture and Food, Specialized Products	
Building:	Taylorsville State Office Building, South Bldg, Floor 2	
Street address:	4315 S 2700 W	
City, state	Taylorsville, UT 84129	
Mailing address:	PO Box 146500	
City, state and zip:	Salt Lake City, UT 84114-6500	
Contact persons:		
Name:	Phone:	Email:
Camille Knudson	801-597-6010	camillek@utah.gov
Brandon Forsyth	801-710-9945	bforsyth@utah.gov
Amber Brown	385-245-5222	ambermbrown@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

### General Information

2. Rule or section catchline:
R66-50. Kratom Retail Permit

**4. Purpose of the new rule or reason for the change:**

Changes are needed to ensure this rule is written in a way that is consistent with Utah statute and to address first amendment concerns.

**5. Summary of the new rule or change:**

Changes are made to refer to limitations on products marketed towards or appealing to children to be rephrased to refer to individuals under 18 years old. This language is consistent with the statutory limitation in Section 4-45-105 and will address potential first amendment concerns raised about the ambiguity of the term "children".

Additional changes are made to make this rule clearer and remove passive voice.

**6A. The agency finds that regular rulemaking would:**

- ☐ cause an imminent peril to the public health, safety, or welfare;
- ☐ cause an imminent budget reduction because of budget restraints or federal requirements; or
- ☒ place the agency in violation of federal or state law.

**B. Specific reasons and justifications for this finding:**

The current language of this rule limiting the sale of products that appeal to or are marketed to children is inconsistent to statute that limits the sale of products to individuals under 18 years of age.

Changes are needed to make this rule consistent with state law.

Additionally, potential first amendment concerns have been raised due to the ambiguity of the term "children," so the term has been removed to address that issue.

**Fiscal Information****7. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

The changes do not impact the state budget because the Department of Agriculture and Food (department) has previously interpreted "children" and "under 18 years old" to mean the same thing.

**B. Local governments:**

Local governments do not participate in the kratom program and will not be impacted.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

The changes do not impact small businesses because the department has previously interpreted "children" and "under 18 years old" to mean the same thing.

**D. Persons other than small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The changes do not impact other persons because the department has previously interpreted "children" and "under 18 years old" to mean the same thing.

**E. Compliance costs for affected persons:**

The rule change will not impact the cost of complying with the program because the department has previously interpreted "children" and "under 18 years old" to mean the same thing.

**F. Comments by the department head on the fiscal impact this rule may have on businesses** (Include the name and title of the department head):

This rule change will not have a fiscal impact on businesses. Kelly Pehrson, Commissioner



## Citation Information

**8. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 4-45-107		
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## Agency Authorization Information

<b>Agency head or designee and title:</b>	Kelly Pehrson, Commissioner	<b>Date:</b>	11/04/2025
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**R66. Agriculture and Food, Specialized Products.****R66-50. Kratom Retail Permit.****R66-50-1. Authority and Purpose.**

Pursuant to Section 4-45-107, this rule establishes the requirements for a person seeking a kratom retailer permit.

**R66-50-2. Definitions.**

- (1) "End Consumer" means an individual who does not resell the purchased kratom product.
- (2) "Kratom Retailer" means a kratom processor who sells a kratom product to an end consumer.
- (3) "Kratom Retailer Permit" means a permit that the department issues to a retailer who sells or markets any kratom product.
- (4) "Person" means an individual, partnership, association, firm, trust, limited liability company, or corporation, or any employees of such.
- (5) "Premises" means a place where a kratom product is sold, offered for sale, exposed for sale, stored, or marketed.

**R66-50-3. Kratom Retailer Permit.**

- (1) A person who sells, offers for sale, or exposes for sale a kratom product in the state shall secure a kratom retailer permit from the department.
- (2) A person shall obtain a retailer permit ~~[shall be obtained]~~ before offering a kratom product ~~[is offered]~~ for sale in Utah.
- (3) A person seeking a kratom retailer permit shall provide the following to the department for each individual store or retail establishment location where kratom products are sold:
  - (a) the name of the person who sells, offers for sale, or markets a kratom product;
  - (b) the address where the kratom product is sold, offered for sale, or marketed; and
  - (c) written consent allowing a representative of the department to enter any premises where the person is selling or storing a kratom product.
- (4) A person shall pay the non-refundable permit fee, as set forth in the fee schedule approved by the ~~[L]~~ legislature, ~~[shall be paid]~~ to the department with the submission of the application.
- (5) The department may deny a permit for an incomplete application.
- (6) A permit is renewable for up to a one-year period with an annual renewal fee that shall be paid on or before December 31~~[st]~~ of each year.
- (7) ~~The department shall assess [A] a late fee [shall be assessed]~~ for a renewal of a kratom retailer permit submitted on or after [December] January 1 [31<sup>st</sup>] and a permittee shall ~~[be paid]~~ pay it before the renewal is issued.

**R66-50-4. Inspection and Testing.**

- (1) The department may randomly inspect a ~~[permittee]~~ premises to ensure that kratom products distributed or available for distribution in Utah comply with this rule and Rule R66-51.
- (2) The department shall periodically sample, analyze, and test kratom products distributed within the state for compliance with registration and labeling requirements and the certificate of analysis.
  - (a) Each department sample shall include at least ten grams of kratom product.
  - (b) The department may test kratom products for any substance listed in Rule R66-52 as well as for any of the following prohibited substances, at the discretion of the department:
    - (i) any fentanyl derivative;
    - (ii) any cannabinoid tested ~~[for]~~ by the laboratory with an action level of 0.01% (w/w);
    - (iii) cocaine; or
    - (iv) any of the following Benzodiazepines:
      - (A) diazepam;
      - (B) alprazolam;
      - (C) triazolam;
      - (D) lorazepam; or
      - (E) clonazepam.
  - (c) The department shall consider ~~[A]~~ a kratom product that ~~[is found to]~~ contain a prohibited substance ~~[shall be considered]~~ as adulterated and in violation of this rule.
- (3) The department may inspect kratom products distributed or available for distribution for any other reason the department deems necessary.

## NOTICES OF 120-DAY (EMERGENCY) RULES

(4) The department may, upon request, inspect a retailer permittee's records of receipt, inventory, and invoices to ensure that kratom products distributed or available for distribution in Utah are following this rule and Rule R66-51.

(5) The sample taken by the department shall be the official sample.

### R66-50-5. Retailer Permittee Responsibilities.

(1) A retailer shall ensure that:

(a) ~~[ensure that a]~~each kratom product ~~distributed, sold, or offered for sale,~~ is properly registered with the department; and

(b) ~~[ensure that]~~any advertisement for a kratom product ~~[sold or marketed in Utah]~~does not:

(i) ~~[does not]~~contain any medical claims; and

(ii) ~~[does not]~~appeal to ~~[children]~~an individual under 18 years old.

(2) A retailer shall provide the department with the identity of the manufacturer or distributor of a kratom product sold upon request~~[of the department]~~.

(3) A retailer may register the product in lieu of the manufacturer if the manufacturer does not register the product~~[is not registered]~~.

### R66-50-6. Violation.

(1) Each unregistered product shall be a separate violation of this rule.

(2) An advertisement ~~[shall be considered]~~is falsely advertised if the permittee makes a claim about a product that is not on the label.

(3) It is a violation to market or sell kratom products in Utah without a valid retailer permit pursuant to this rule.

(4) It is a violation to refuse inspection of a retail establishment, product for sale, or a product storage area.

(5) It is a violation to sell kratom products that have any ~~[likeness bearing]~~resemblance to a cartoon character or fictional character.

(6) It is a violation to sell kratom products that appear to imitate a food or other product, or that is typically marketed toward or appealing to ~~[children]~~an individual under 18 years old.

(7) It is a violation to prepare, distribute, sell, or offer for sale a kratom product that would be potentially harmful to consumers.

**KEY:** kratom, retail permit, retailer responsibilities, inspection and testing

Date of Last Change: November 4, 2025~~[September 22, 2025]~~

Authorizing, and Implemented or Interpreted Law: 4-45-107

## NOTICE OF EMERGENCY (120-DAY) RULE

Rule or section Number:	R66-51	Filing ID: 57663
Effective date:	11/04/2025	

### Agency Information

1. Title catchline:	Agriculture and Food, Specialized Products	
Building:	Taylorsville State Office Building, South Bldg, Floor 2	
Street address:	4315 S 2700 W	
City, state	Taylorsville, UT 84129	
Mailing address:	PO Box 146500	
City, state and zip:	Salt Lake City, UT 84114-6500	
Contact persons:		
Name:	Phone:	Email:
Camille Knudson	801-597-6010	camillek@utah.gov
Brandon Forsyth	801-710-9945	bforsyth@utah.gov
Amber Brown	385-245-5222	ambermbrown@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

### General Information

2. Rule or section catchline:
R66-51. Kratom Product Registration and Labeling
4. Purpose of the new rule or reason for the change:
The Department of Agriculture and Food (department) is amending this rule to address federal preemption issues and to align current information with the statute and the standards in the Rulewriting Manual for Utah.

**5. Summary of the new rule or change:**

The proposed changes include replacing "the Food and Drug Administration" with "the State of Utah" in Subsection R66-51-6(1)(g)(i) to distinguish state and federal labeling requirements.

Additionally, the term "children" is consistently replaced with "an individual under 18 years old" or "a minor under the age of 18" in Subsections R66-51-3(6)(c), R66-51-6(4)(c), R66-51-7(2), R66-51-7(3), and R66-51-9(7) to align with statutory language and clarify age-related restrictions.

The requirement that products be in child resistant packaging has been removed from Section R66-51-7 because this is an area governed by federal, and not state, law.

Other technical changes throughout this rule were made to ensure alignment with the Rulewriting Manual for Utah.

**6A. The agency finds that regular rulemaking would:**

- ☐ cause an imminent peril to the public health, safety, or welfare;
- ☐ cause an imminent budget reduction because of budget restraints or federal requirements; or
- ☒ place the agency in violation of federal or state law.

**B. Specific reasons and justifications for this finding:**

The federal government has preemption on determining what constitutes child resistant packaging. As such, to include a requirement for child resistant packaging in this rule is a violation of federal law.

Additionally, the language regarding products that appeal to children has been clarified to remove ambiguity and address free speech concerns that have been raised.

Finally, warning language has been clarified because it is inconsistent with the FDA requirement that products only require such wording when their labels include structure or function claims. It is a violation of federal law for the state to require the same wording for all kratom products.

**Fiscal Information****7. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

The state budget will not be impacted because the state's current administration of the program is not changing.

The requirements are being clarified to ensure they do not violate federal or state law.

**B. Local governments:**

Local governments do not participate in the program and will not be impacted.

**C. Small businesses** ("small business" means a business employing 1-49 persons):

Small businesses will not be impacted because the state's current administration of the program is not changing.

The requirements are being clarified to ensure they do not violate federal or state law.

**D. Persons other than small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

Other persons will not be impacted because the state's current administration of the program is not changing.

The requirements are being clarified to ensure they do not violate federal or state law.

**E. Compliance costs for affected persons:**

The cost to comply with the program will not change because the department's administration of this program is not changing.

**F. Comments by the department head on the fiscal impact this rule may have on businesses** (Include the name and title of the department head):

This rule change will not have a fiscal impact on businesses. Kelly Pehrson, Commissioner

**Citation Information****8. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 4-45-107		
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**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Kelly Pehrson, Commissioner	<b>Date:</b>	11/04/2025
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**R66. Agriculture and Food, Specialized Products.****R66-51. Kratom Product Registration and Labeling.****R66-51-1. Authority and Purpose.**

- (1) Pursuant to Section 4-45-107, this rule establishes the requirements for labeling and registration of kratom products.

**R66-51-2. Definitions.**

- (1) "7-OH" means 7-hydroxymitragynine (CAS 174418-82-7).
- (2) "Batch or lot" means a uniquely processed quantity identified by a specific date and the timeframe between two consecutive cleanups.
- (3) "Certificate of Analysis" (COA) means a document produced by a testing laboratory listing the quantities of the various analytes for which testing was performed.
- (4) "Finished product" means a reasonably homogenous kratom product in its final packaged form.
- (5) "Label" means the display of any written, printed, or graphic matter upon the immediate container of a kratom product or a statement by or under the control of the kratom processor or distributor, which is directly related to the kratom product bearing the label.
- (6) "Registrant" means a person who assumes responsibility for the compliance of the product registration.
- (7) "Serving Size" means a specific amount of food, measured as an integer, that ~~is~~ is used as a standard reference to help consumers make informed choices.
- (8) "Third-party Laboratory" means a laboratory that has no direct interest in a processor or distributor of kratom products that can perform mandated testing utilizing validated methods.
- (9) "Unapproved delivery form" means:
- (a) any form that is combustible or intended to be used for vaporization; or
- (b) any form that mimics a candy product or is manufactured, packaged, or advertised in a way that appeals to ~~children~~ an individual under 18 years old.

**R66-51-3. Product Registration.**

- (1) A registrant shall register any kratom product distributed, available for distribution, or that is intended to be offered for sale to an end consumer, including on the internet or social media platforms, annually with the department.
- (2) The department shall require a separate registration fee for each kratom product unless:
- (a) the label is identical;
- (b) the product delivery form is identical; and
- (c) the product ingredients are identical.
- (3) A single registration may include products that contain the same kratom ingredients in the same kratom delivery form but in a different container or volume.
- (4) To register a product, a registrant shall:
- (a) apply on a form provided by the department; and
- (b)(i) include a Certificate of Analysis (COA) for the kratom product from a third-party laboratory, based on tests performed within the previous six months.
- (ii) The third-party laboratory shall have International Organization for Standardization (ISO) 17025:2017 accreditation from an accreditation body that is a signatory to the International Laboratory Accreditation Cooperation (ILAC) Mutual Recognition Arrangement.
- (iii) A third-party laboratory may test a kratom product before obtaining ISO/IEC 17025:2017 accreditation, provided the third-party laboratory:
- (A) adopts and follows minimum good laboratory practices which satisfy the OECD Principles of Good Laboratory Practice and Compliance Monitoring published by the Organization for Economic Co-operation and Development; and
- (B) is currently in the process of becoming ISO/IEC 17025:2017 accredited by an accreditation body that is a signatory to the International Laboratory Accreditation Cooperation (ILAC) Mutual Recognition Arrangement.

- (5) A registrant shall pay the non-refundable registration fee, as outlined in the fee schedule approved by the Legislature, ~~shall be paid~~ to the department with the submission of a registration application.
- (6) The department shall deny or withdraw registration if:
- (a) the kratom product violates Title 4, Chapter 45, Kratom Consumer Protection Act;
  - (b) there is any reasonable basis to suspect that the kratom product is unsafe or that ingredients violate state law;
  - (c) the kratom product is in a shape that is appealing to ~~children~~ an individual under 18 years old; or
  - (d) the product contains a prohibited additive as outlined in Section R66-52-11.
- (6) The department requires ~~A~~ a new registration application ~~is required~~ for the following:
- (a) a change in the kratom product ingredients or processes that materially alters the product;
  - (b) a change to the recommended usage; or
  - (c) a change of name for the product.
- (7) Other changes may not require a new registration, but the registrant shall submit copies of each label change to the department as soon as they are effective.
- (8) The registrant is responsible for the accuracy and completeness of information submitted.
- (9) Kratom product registrations shall expire on June 30 of each year, and the department may not prorate these registrations.
- (10) The department shall deny product registration if products:
- (a) violate Chapter 4-45 Kratom Consumer Protection Act; or
  - (b) are in an unapproved delivery form.

#### **R66-51-4. Product Renewal.**

- (1)(a) Beginning on May 1 of each year, a registrant shall renew a product registration by submitting payment of an annual renewal fee per kratom product on or before June 30.
- (b) The department shall assess a late fee for a renewal of a kratom product registration submitted on or after July 1 and may not issue a renewal until paid.
- (2) A ~~registrant shall continue to register discontinued~~ kratom products ~~[that has been discontinued shall continue to be registered in the state]~~ until the product is no longer available for distribution.

#### **R66-51-5. Certificate of Analysis (COA).**

- (1) Testing shall be performed on finished products identified with a lot or batch number.
- (2) At a minimum, the ~~[certificate of analysis]~~ COA for each batch of kratom product in its final form shall include the following test results:
- (a) the contents of mitragynine and 7-hydroxymitragynine in the kratom product certifying compliance with this rule and Subsection 4-45-104(1);
  - (b) microbials;
  - (c) heavy metals;
  - (d) pesticides;
  - (e) solvents; and
  - (f) mycotoxins if requested by the department.
- (3) The test results required in Section R66-51-5 shall be reported in accordance with the requirements for a kratom product in Rule R66-52, including the specified units of measure.
- (4) The ~~[certificate of analysis]~~ COA shall also include the following information:
- (a) the lot or batch identification number of the tested product;
  - (b) the date received;
  - (c) the date of testing completion;
  - (d) the method of analysis for each test conducted;
  - (e) proof that the certificate of analysis is connected to the product documented by:
    - (i) a photo of the kratom product that was tested; or
    - (ii) as determined by the department;
  - (f) the name of the kratom processor that manufactured the product; and
  - (g) the name and address of the laboratory that completed the testing.
- (5) The lot or batch number on the ~~[certificate of analysis]~~ COA shall match the lot or batch number on the kratom product.
- (6) An adverse or non-compliant test result shall be cause for denial of registration.

#### **R66-51-6. Label Requirements.**

- (1) The label of a kratom product shall contain the following information, legibly displayed:
- (a) product name or common name, on the front of the label;
  - (b) the suggested use of the product, including serving size and recommended daily intake;
  - (c) the amount of mitragynine and 7-hydroxymitragynine contained in the packaged kratom product;
  - (d) an accurate statement of the quantity of the contents in terms of weight, measure, or numerical count;
  - (e) identification of each kratom product by a unique batch or lot number, specifically linking each kratom product to a specific batch or lot manufactured by the kratom processor;
  - (f) manufacturer, packer, or distributor name and address; and

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- (g) the following statements:
- (i) "this product has not been evaluated by ~~[the Food and Drug Administration]~~a governmental entity" or an equivalent statement;
- and
- (ii) "this product is not intended to diagnose, treat, cure, or prevent any disease" or an equivalent statement.
- (2) If there is not sufficient room on the kratom product label, the kratom product may include a scannable bar code, QR code, or web address linked to a document containing any additional required information.
- (3) A kratom product shall meet the standards of any applicable state laws and ~~[regulations]~~rules relating to the labeling of food, including Title 4, Chapter [4-]5, Utah Wholesome Food Act.
- (4) A kratom product label may not:
- (a) contain claims that the product ~~[is-]~~intends[ed] to diagnose, treat, cure, or prevent any health condition or disease~~[on the label or labeling unless the product has been registered with the FDA];~~
- (b) have any likeness bearing resemblance to a cartoon character or fictional character;
- (c) appear to imitate a food or other product that is typically marketed toward or that is appealing to ~~[children]~~an individual under 18 years old; or
- (d) contain statements that remove responsibility or liability for the use of the product.
- (5) A registrant misbrands a kratom product if:
- (a) its label is false or misleading in any way; or
- (b) it fails to conform to any requirement specified in this section.

### **R66-51-7. Product Appearance and Flavor.**

- (1) A kratom processor may not produce a kratom product ~~[that is-]~~designed to mimic a candy product.
- (2) A kratom processor may not produce a product that includes a candy-like flavor or another flavor that appeals to ~~[children]~~an individual under 18 years old.
- (3) A kratom processor may not shape a kratom product in any way that appeals to ~~[children]~~an individual under 18 years old.
- ~~[(4) A kratom product shall be packaged in child-resistant packaging.]~~

### **R66-51-8. Inspection and Testing.**

- (1) The department shall conduct a randomized inspection of kratom products distributed or available for distribution in the state for compliance with this rule.
- (2) The department shall periodically sample, analyze, and test a kratom product distributed within the state for compliance with registration and labeling requirements and the ~~[certificate of analysis]~~COA.
- (a) Each department sample shall include at least ten grams of kratom product.
- (b) The department may test a kratom product for any substance listed in Rule R66-52 as well as for any substance the department deems necessary.
- (c) The department shall consider [A]a kratom product that ~~[is found to-]~~contains a prohibited substance ~~[shall be considered]~~as adulterated and in violation of this rule.
- (3) The department may conduct an inspection of kratom products distributed or available for distribution for any reason the department deems necessary.
- (4) The sample taken by the department shall be the official sample.
- (5) Upon request, a kratom processor shall provide documentation certifying that any batch of kratom raw materials<sub>2</sub> acquired pursuant to a compliant specification purchase that is used to process or manufacture a kratom product<sub>1</sub> is compliant with Section R66-51-5.

### **R66-51-9. Violation.**

- (1) Each improperly labeled kratom product shall be a separate violation of this rule.
- (2) Kratom products not meeting the labeling requirements shall be considered misbranded.
- (3) Kratom products shall be considered falsely advertised if they do not meet the labeling requirements of this rule.
- (4) It is a violation to distribute or market a kratom product that is not registered with the department.
- (5) It is a violation to distribute or market a kratom product that contains 7-OH at greater than 2% of the alkaloid composition.
- (6) It is a violation to distribute or market a kratom product that has not been tested as required by Rule R66-52.
- (7) It is a violation to distribute or market a kratom product that is marketed toward or is appealing to ~~[children]~~an individual under 18 years old.
- (8) It is a violation to submit a fraudulent COA to the department.

**KEY: kratom, kratom processor, product registration, labeling, inspection, and testing**

**Date of Last Change: November 4, 2025~~[September 22, 2025]~~**

**Authorizing, and Implemented or Interpreted Law: 4-45-107**

NOTICE OF EMERGENCY (120-DAY) RULE		
Rule or section Number:	R66-52	Filing ID: 57664
Effective date:	11/04/2025	

**Agency Information**

<b>1. Title catchline:</b>	Agriculture and Food, Specialized Products	
<b>Building:</b>	Taylorsville State Office Building, South Bldg, Floor 2	
<b>Street address:</b>	4315 S 2700 W	
<b>City, state</b>	Taylorsville, UT	
<b>Mailing address:</b>	PO Box 146500	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-6500	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Camille Knudson	801-597-6010	camillek@utah.gov
Brandon Forsyth	801-710-9945	bforsyth@utah.gov
Amber Brown	385-245-5222	ambermbrown@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule or section catchline:</b>
R66-52. Kratom Product Testing
<b>4. Purpose of the new rule or reason for the change:</b>
Changes are needed to remove the controlled additive limits in Table 6 because the Department of Agriculture and Food (department) has recently learned that the department's lab and other third-party labs do not have the ability to test products to determine if the limits are exceeded. As such this rule as written is not enforceable.
<b>5. Summary of the new rule or change:</b>
Table 6 that sets limits on controlled additives has been removed from Section R66-52-11.
<b>6A. The agency finds that regular rulemaking would:</b>
<input type="checkbox"/> cause an imminent peril to the public health, safety, or welfare;
<input type="checkbox"/> cause an imminent budget reduction because of budget restraints or federal requirements; or
<input checked="" type="checkbox"/> place the agency in violation of federal or state law.
<b>B. Specific reasons and justifications for this finding:</b>
The department has recently become aware that our laboratory and other third-party labs in Utah are not able to test for controlled additives to determine if the limits in Table 6 have been exceeded.
The department misunderstood the way products containing such additives are manufactured when this rule was drafted. The current rule is not enforceable by the department.

**Fiscal Information**

<b>7. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A. State budget:</b>
The changes will not impact the state budget because the current rule has not yet been put in place.
<b>B. Local governments:</b>
The changes will not impact local governments because they do not participate in the kratom program.
<b>C. Small businesses</b> ("small business" means a business employing 1-49 persons):
The changes will not impact small businesses because the limits set in the current rule have not yet been enforced by the department.

**D. Persons other than small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

Other persons will not be impacted because the limits set in the current rule have not yet been enforced by the department.

**E. Compliance costs for affected persons:**

The compliance costs for affected persons will not change because the limits in the current rule have not yet been enforced by the department.

**F. Comments by the department head on the fiscal impact this rule may have on businesses** (Include the name and title of the department head):

The rule changes will not have a fiscal impact on businesses. Kelly Pehrson, Commissioner

**Citation Information**

**8. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 4-45-107

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Kelly Pehrson, Commissioner	<b>Date:</b>	11/04/2025
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**R66. Agriculture and Food, Specialized Products.**

**R66-52. Kratom Product Testing.**

**R66-52-1. Authority and Purpose.**

Pursuant to Section 4-45-107, this rule establishes the standards for kratom product potency testing and sets limits for foreign matter, microbial life, pesticides, residual solvents, heavy metals, mycotoxins, and other additives.

**R66-52-2. Definitions.**

- (1) "7-OH level" means the concentration of 7-OH divided by the combined concentration of total kratom alkaloids.
- (2) "Adulterant" means any poisonous or deleterious substance in a quantity that may be injurious to health, including:
  - (a) prohibited additives outlined in Section R66-52-11;
  - (b) pesticides;
  - (c) heavy metals;
  - (d) solvents;
  - (e) microbial life;
  - (f) mycotoxins; or
  - (g) foreign matter.
- (3) "Alkaloid" means any class of nitrogenous organic compounds of plant origin which have pronounced physiological actions on humans.
- (4) "Analyte" means a substance or chemical component undergoing analysis.
- (5) "Certificate of Analysis (COA)" means a certificate from a laboratory describing the results of the laboratory's analytical testing of a sample.
- (6) "Extract" means:
  - (a) the product of any chemical or physical process applied to naturally occurring biomass that concentrates or isolates the alkaloid contained in the biomass; and
  - (b) any amount of a natural, derivative, or synthetic alkaloid in the synthetic alkaloid's purified state.
- (7) "Foreign matter" means any matter that is present in a kratom:
  - (a) lot that is not a part of the kratom plant; or
  - (b) product that is not listed as an ingredient.
- (8) "Kratom manufacturer" means an entity that holds, stores, packages, or labels a kratom product.
- (9) "Pesticide" means any:
  - (a) substance or mixture of substances, including a living organism, that is intended to prevent, destroy, control, repel, attract, or mitigate any insect, rodent, nematode, snail, slug, fungus, weed, or other forms of plant or animal life that are normally considered to be a pest or that the commissioner declares to be a pest;
  - (b) any substance or mixture of substances intended to be used as a plant regulator, defoliant, or desiccant; and
  - (c) any spray adjuvant, such as a wetting agent, spreading agent, deposit builder, adhesive, or emulsifying agent with deflocculating properties of its own, used with a pesticide to aid in the application or effect of a pesticide.



(10) "Total alkaloid" means the sum of the determined amount of alkaloids from *Mitragyna speciosa*.

**R66-52-3. Required Kratom Product Tests.**

- (1) Testing shall be performed on finished products identified with a lot or batch number.
- (2) A kratom manufacturer may not register or sell a kratom product unless a third-party ISO/IEC 17025:2017 accredited testing laboratory has tested a representative sample of the kratom product to determine:
  - (a) the amount of any alkaloids present in the sample; and
  - (b) the presence of adulterants in the sample.
- (3) Each batch or lot of kratom product shall include a certificate of analysis, in accordance with Section R66-51-5.

**R66-52-4. Foreign Matter Standards.**

A sample and related batch of kratom product fail quality assurance testing if:

- (1) the sample contains foreign matter visible to the unaided human eye;
- (2) the sample is found to contain microscopic foreign matter considered to be harmful or estimated to comprise greater than 3% of the mass of the representative sample as determined by the testing laboratory; or
- (3) foreign matter is found that is suspected to have been intentionally added to the sample to increase its visual appeal or market value.

**R66-52-5. Potency Testing and Standards.**

- (1) At a minimum, the ~~certificate of analysis~~ COA for each batch of kratom product shall include the following test results, when applicable:
  - (a) the contents of mitragynine and 7-hydroxymitragynine in the kratom product certifying compliance with this rule and Subsection 4-45-104(1);
  - (i) the department may require testing of alkaloid content of a kratom product by the department lab for verification, at the cost of the registrant.
  - (b) the level of microbials in the kratom product that does not exceed the amounts listed in Table 1 when one gram or greater sample is tested;
  - (c) the levels of heavy metals in the kratom product that do not exceed the amounts listed in Table 2;
  - (d) the levels of pesticides in the kratom product do not exceed the amounts listed in Table 3;
  - (e) the levels of residual solvents in the kratom product that do not exceed the amounts listed in Table 4; and
  - (f) if required by the department, mycotoxin levels that are compliant with Section R66-52-10.

**R66-52-6. Microbial Standards.**

- (1) A sample and related batch of kratom product fail quality assurance testing for microbiological contaminants if the results exceed the limits in Table 1.

TABLE 1 Kratom Plant Matter	
Microbial	Microbial Limit Requirement
Total Aerobic Microbial Count	NMT $\leq 100,000$ cfu/g
Total Combined Yeast and Mold	NMT $\leq 100,000$ cfu/g
Salmonella spp., Shiga-toxin producing E. coli (STEC), Aspergillus fumigatus, Aspergillus flavus, Aspergillus niger, and Aspergillus terreus	Not detected in 25g
Kratom Extract	
Microbial	Microbial Limit Requirement
Total Aerobic Microbial Count	NMT $\leq 10,000$ cfu/g
Total Combined Yeast and Mold	NMT $\leq 1,000$ cfu/g
Salmonella spp., Shiga-toxin producing E. coli (STEC)	Not Detected in 1g

## NOTICES OF 120-DAY (EMERGENCY) RULES

Kratom Infused Edible	
Microbial	Microbial Limit Requirement
Total Aerobic Microbial Count	NMT $\leq 10,000$ cfu/g
Total Combined Yeast and Mold	NMT $\leq 1,000$ cfu/g
Salmonella spp., Shiga-toxin producing E. coli (STEC)	Not Detected in 1g

**R66-52-7. Heavy Metal Standards.**

(1) A sample and related batch of kratom product fail quality assurance testing for heavy metals if the results exceed the limits in Table 2.

TABLE 2 Heavy Metals	
Metals	Natural Health Products Acceptable Limits
Arsenic	<2 ppm
Cadmium	<0.82 ppm
Lead	<1.2 ppm
Mercury	<0.4 ppm

**R66-52-8. Pesticide Standards.**

(1) A sample and related batch of kratom product fail quality assurance testing for pesticides if the results exceed the limits in Table 3.

TABLE 3 Kratom Plant Matter Pesticide Analytes and Action Levels		
Analyte	Chemical Abstract Service	Action Level
	(CAS) Registry number	ppm
Abamectin	71751-41-2	0.5
Acephate	30560-19-1	0.4
Acequinocyl	57960-19-7	2
Acetamiprid	135410-20-7	0.2
Aldicarb	0116-06-03	0.4
Azoxystrobin	131860-33-8	0.2
Bifenazate	149877-41-8	0.2
Bifenthrin	82657-04-03	0.2
Boscalid	188425-85-6	0.4
Carbaryl	63-25-2	0.2

Carbofuran	1563-66-2	0.2
Chlorantraniliprole	500008-45-7	0.2
Chlorfenapyr	122453-73-0	1
Chlorpyrifos	2921-88-2	0.2
Clofentezine	74115-24-5	0.2
Cyfluthrin	68359-37-5	1
Cypermethrin	52315-07-08	1
Daminozide	1596-84-5	1
DDVP (Dichlorvos)	62-73-7	0.1
Diazinon	333-41-5	0.2
Dimethoate	60-51-5	0.2
Ethoprophos	13194-48-4	0.2
Etofenprox	80844-07-01	0.4
Etoxazole	153233-91-1	0.2
Fenoxycarb	72490-01-08	0.2
Fenpyroximate	134098-61-6	0.4
Fipronil	120068-37-3	0.4
Flonicamid	158062-67-0	1
Fludioxonil	131341-86-1	0.4
Hexythiazox	78587-05-0	1
imazalil	35554-44-0	0.2
Imidacloprid	138261-41-3	0.4
Kresoxim-methyl	143390-89-0	0.4
Malathion	143390-89-0	0.2
Metalaxyl	57837-19-1	0.2
Methiocarb	2032-65-7	0.2
Methomyl	16752-77-5	0.4
Methyl parathion	298-00-0	0.2
MGK-264	113-48-4	0.2
Myclobutanil	88671-89-0	0.2
Naled	300-76-5	0.5

## NOTICES OF 120-DAY (EMERGENCY) RULES

Oxamyl	23135-22-0	1
Paclobutrazol	76738-62-0	0.4
Permethrins	52645-53-1	0.2
Phosmet	0732-11-6	0.2
Piperonyl_butoxide	51-03-6	2
Prallethrin	23031-36-9	0.2
Propiconazole	60207-90-1	0.4
Propoxur	114-26-1	0.2
Pyrethrins	8003-34-7	1
Pyridaben	96489-71-3	0.2
Spinosad	168316-95-8	0.2
Spiromesifen	283594-90-1	0.2
Spirotetramat	203313-25-1	0.2
Spiroxamine	118134-30-8	0.4
Tebuconazole	80443-41-0	0.4
Thiacloprid	111988-49-9	0.2
Thiamethoxam	153719-23-4	0.2
Trifloxystrobin	141517-21-7	0.2

(2) Permethrins should be measured as the cumulative residue of cis- and trans-permethrin isomers (CAS numbers 54774-45-7 and 51877-74-8).

(3) Pyrethrins should be measured as the cumulative residues of pyrethrin I (CAS 121-21-1), pyrethrin II (CAS 121-29-9), cinerin I (CAS 25402-06-6), and jasmolin I (CAS 4466-14-2).

(4) Abamectin is a composite of the amounts of avermectin B1a and avermectin B1b.

**R66-52-9. Residual Solvent Standards.**

(1) A sample and related batch of kratom product fail quality assurance testing for residual solvents if the results exceed the limits in Table 4, unless the solvent is:

- (a) a component of the product formulation;
- (b) listed as an ingredient; and
- (c) generally considered to be safe for the intended form of use.

TABLE 4 Kratom Extract/Kratom Infused Edible List of Solvents and Action Levels		
Solvent	Chemical Abstract Service; (CAS) Registry number	Action Level; ppm
1,2 Dimethoxyethane	110-71-4	100
1,4 Dioxane	123-9	380
1-Butanol	71-36-3	5,000

1-Pentanol	71-41-0	5,000
1-Propanol	71-23-8	5,000
2-Butanol	78-92-2	5,000
2-Butanone	78-93-3	5,000
2-Ethoxyethanol	110-80-5	160
2-methylbutane	78-78-4	5,000
2-Propanol (IPA)	67-63-0	5,000
Acetone	67-64-1	5,000
Acetonitrile	75-05-8	410
Benzene	71-43-2	2
Butane	106-97-8	5,000
Cumene	98-82-8	70
Cyclohexane	110-82-7	3,880
Dichloromethane	75-09-2	600
2,2-dimethylbutane	75-83-2	290
2,3-dimethylbutane	79-29-8	290
1,2-dimethylbenzene	95-47-6	See Xylenes
1,3-dimethylbenzene	108-38-3	See Xylenes
1,4-dimethylbenzene	106-42-3	See Xylenes
Dimethyl sulfoxide	67-68-5	5,000
Ethanol	64-17-5	5,000
Ethyl acetate	141-78-6	5,000
Ethylbenzene	100-41-4	See Xylenes
Ethyl ether	60-29-7	5,000
Ethylene glycol	107-21-1	620
Ethylene Oxide	75-21-8	50
Heptane	142-82-5	5,000
n-Hexane	110-54-3	290
Isopropyl acetate	290	5,000
Methanol	67-56-1	3,000
Methylpropane	75-28-5	5,000

## NOTICES OF 120-DAY (EMERGENCY) RULES

2-Methylpentane	107-83-5	290
3-Methylpentane	96-14-0	290
N,N-dimethylacetamide	127-19-5	1,090
N,N-dimethylformamide	68-12-2	880
Pentane	109-66-0	5,000
Propane	74-98-6	5,000
Pyridine	110-86-1	100
Sulfolane	126-33-0	160
Tetrahydrofuran	109-99-9	720
Toluene	108-88-3	890
Xylenes	1330-20-7	2,170

(2) Xylenes is a combination of the following:

- (a) 1,2-dimethylbenzene;
- (b) 1,3-dimethylbenzene;
- (c) 1,4-dimethylbenzene; and
- (d) ethyl benzene.

**R66-52-10. Mycotoxin Standards.**

- (1) Mycotoxin testing of a kratom product may be required if the department has reason to believe that mycotoxins may be present.
- (2) A sample and related batch of kratom product fail quality assurance testing for mycotoxin if the results exceed the limits in Table

5.

TABLE 5 Mycotoxin	
Test	Specification
The total of Aflatoxin B1, B2, G1 and G2	<20 ppb of substance
Ochratoxin	<20 ppb of substance

**R66-52-11. Additives.**

~~[(1)]~~A kratom product may not[:

- ~~(a) contain additives that exceed the allowable limits in the following table:]~~

[TABLE 6 Controlled Additives	
Additive	Limit per Serving
Ashwagandha	250mg
Blue Lotus	250mg
Caffeine	100mg
California Poppy	40mg

Corydalis Yanhuso	500mg
Devil's Claw	100mg
Guarana	100mg
Kavalactones	125mg
Valerian Root	150mg
Yohimbe Bark	9mg]

[~~\_\_\_\_\_~~(b)-] contain any of the following:

(1) ~~cannabinoids~~; or

(~~(i)~~2) mushroom species, that contain:

(~~(A)~~a) psilocin;

(~~(B)~~b) muscimol;

(~~(C)~~c) ibotenic acid; or

(~~(D)~~d) muscarine.

[~~\_\_\_\_\_~~(ii) ~~any cannabinoids~~.]

**KEY:** kratom, kratom processor, testing

**Date of Last Change:** ~~November 4, 2025~~[September 22, 2025]

**Authorizing, and Implemented or Interpreted Law:** 4-45-107

**End of the Notices of 120-Day (Emergency) Rules Section**

## FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

Within five years of an administrative rule's original enactment or last five-year review, the agency is required to review the rule. This review is intended to help the agency determine, and to notify the public, that the administrative rule in force is still authorized by statute and necessary. Upon reviewing a rule, an agency may: repeal the rule by filing a **PROPOSED RULE**; continue the rule as it is by filing a **FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION (REVIEW)**; or amend the rule by filing a **PROPOSED RULE** and by filing a **REVIEW**. By filing a **REVIEW**, the agency indicates that the rule is still necessary.

A **REVIEW** is not followed by the rule text. The rule text that is being continued may be found in the online edition of the *Utah Administrative Code* available at [adminrules.utah.gov](http://adminrules.utah.gov). The rule text may also be inspected at the agency or the Office of Administrative Rules. **REVIEWS** are effective upon filing.

**REVIEWS** are governed by Section 63G-3-305.

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	R154-2	Filing ID: 54776
Effective date:	11/12/2025	

### Agency Information

1. Title catchline:	Commerce, Corporations and Commercial Code	
Building:	Heber Wells Building	
Street address:	160 E 300 S	
City, state:	Salt Lake City, UT 84111-2316	
Mailing address:	PO Box 146705	
City, state and zip:	Salt Lake City, UT 84114-6705	
Contact persons:		
Name:	Phone:	Email:
Adam Watson	801-530-6433	awatson@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

### General Information

2. Rule catchline:	
R154-2. Filing Office Rules	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Subsection 13-1a-5(1)	This subsection is the Division of Corporations and Commercial Code's (Division) authorizing statute, and it authorizes the Division Director to "make rules in accordance with [UAPA], to administer the responsibilities of the division", which includes administering Chapter 9a of the Uniform Commercial Code (UCC) statute, Title 70A.
Subsection 70A-9a-526(1)	This subsection of the UCC statute states the Division "shall adopt and publish rules to implement the chapter".



**4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:**

No comments have been received about this rule.

**5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:**

Subsection 70A-9a-526(1) still requires the Division to make rules for Title 70A, Chapter 9a, the UCC statute. Therefore, this rule should be continued.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Adam Watson, Division Director	<b>Date:</b>	11/10/2025
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**NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule number:</b>	<b>R251-102</b>	<b>Filing ID: 50344</b>
<b>Effective date:</b>	<b>11/13/2025</b>	

**Agency Information**

<b>1. Title catchline:</b>	Corrections, Administration	
<b>Building:</b>	Utah Department of Corrections	
<b>Street address:</b>	14717 S Minuteman Dr	
<b>City, state:</b>	Draper, UT	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Dan Blanchard	801-400-7797	danblanchard@utah.gov
Tyler Johnson	385-228-9883	tajohnson@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>	
R251-102. Release of Communicable Disease Information	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Section 63G-3-201	Rulemaking requirements for state agency.
Section 64-13-10	This section grants the Department of Corrections (department) rulemaking authority to carry out department provisions.
Section 64-13-36	Test results for AIDS and HIV infection shall be provided to the Department of Health.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
The department has not received any written comments regarding this rule since the last five-year review.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
This rule is required by Subsection 64-13-36(3), specifically, test results for AIDS and HIV infection are only accessible to persons designated by department rule. Through the department rulemaking authority established by Section 64-13-10, this rule includes limited sharing of other communicable disease test results to specific persons/agencies for legitimate correctional interests.	

## FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

This rule allows the department to take necessary precautions when inmates with communicable diseases are placed in department community correctional centers and other housing locations in the community. Therefore, this rule should be continued.

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Jared Garcia, Executive Director	<b>Date:</b>	11/11/2025
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## NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

<b>Rule number:</b>	<b>R251-109</b>	<b>Filing ID: 52978</b>
<b>Effective date:</b>	<b>11/13/2025</b>	

## Agency Information

<b>1. Title catchline:</b>	Corrections, Administration	
<b>Building:</b>	Utah Department of Corrections	
<b>Street address:</b>	14717 S Minuteman Dr	
<b>City, state:</b>	Draper, UT	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Dan Blanchard	801-400-7797	danblanchard@utah.gov
Tyler Johnson	385-228-9883	tajohnson@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

## General Information

<b>2. Rule catchline:</b>	
R251-109. Sex Offender Treatment Providers	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Section 63G-3-201	Rulemaking requirements for state agencies.
Section 64-13-10	This section grants the Department of Corrections (department) rulemaking authority to carry out department provisions.
Section 64-13-25	The department is required to have rules that establish standards and a certification process for sex offender treatment standards.
Section 76-5-406.5	The department shall develop qualification criteria for sexual abuse treatment programs and professionals.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
The department has not received any written comments regarding this rule since the last five-year review.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
This rule is required by specific legislation for the department to establish sex offense treatment standards and a certification process for sex offense treatment providers. This is applicable to all public and private treatment providers. Therefore, this rule should be continued.	

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Jared Garcia, Executive Director	<b>Date:</b>	11/11/2025
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## NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

<b>Rule number:</b>	<b>R251-702</b>	<b>Filing ID: 50365</b>
<b>Effective date:</b>	<b>11/13/2025</b>	

## Agency Information

<b>1. Title catchline:</b>	Corrections, Administration	
<b>Building:</b>	Utah Department of Corrections	
<b>Street address:</b>	14717 S Minuteman Dr	
<b>City, state:</b>	Draper, UT	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Dan Blanchard	801-400-7797	danblanchard@utah.gov
Tyler Johnson	385-228-9883	tajohnson@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

## General Information

<b>2. Rule catchline:</b>	
R251-702. Inmate Communication: Telephones	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Section 63G-3-201	Rulemaking requirements for state agencies.
Section 64-13-10	This section grants the Department of Corrections (department) rulemaking authority to carry out department provisions.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
The department has not received any written comments regarding this rule since the last five-year review.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
This rule is necessitated by Section 63G-3-201 and the department's regulations related to inmate telephone communication between inmates and members of the public.	
Specifically, the department may intercept, record, or monitor non-legal phone calls of inmates. Legal calls are limited by time allowed. Therefore, this rule should be continued.	

## Agency Authorization Information

<b>Agency head or designee and title:</b>	Jared Garcia, Executive Director	<b>Date:</b>	11/11/2025
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## NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

<b>Rule number:</b>	<b>R251-708</b>	<b>Filing ID: 55545</b>
<b>Effective date:</b>	<b>11/13/2025</b>	

## FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

**Agency Information**

<b>1. Title catchline:</b>	Corrections, Administration	
<b>Building:</b>	Utah Department of Corrections	
<b>Street address:</b>	14717 S Minuteman Dr	
<b>City, state:</b>	Draper, UT	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Dan Blanchard	801-400-7797	danblanchard@utah.gov
Tyler Johnson	385-228-9883	tajohnson@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>	
R251-708. Perimeter Patrol	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Section 63G-3-201	Rulemaking requirements for state agencies.
Section 64-13-10	This section grants the Department of Corrections (department) rulemaking authority to carry out department provisions.
Section 64-13-14	Mandates the department's operation of secure correctional facilities.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
The department has not received any written comments regarding this rule since the last five-year review.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
This rule allows the department to restrict access to prison property, control visitor traffic, prevent introduction of contraband, and to maintain other safety and security needs. Therefore, this rule should be continued.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Jared Garcia, Executive Director	<b>Date:</b>	11/13/2025
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**NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule number:</b>	<b>R251-711</b>	<b>Filing ID: 55597</b>
<b>Effective date:</b>	<b>11/13/2025</b>	

**Agency Information**

<b>1. Title catchline:</b>	Corrections, Administration	
<b>Building:</b>	Utah Department of Corrections	
<b>Street address:</b>	14717 S Minuteman Dr	
<b>City, state:</b>	Draper, UT	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Dan Blanchard	801-400-7797	danblanchard@utah.gov

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

Tyler Johnson	385-228-9883	tajohnson@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>	
R251-711. Admission and Intake	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Section 63G-3-201	Rulemaking requirements for state agencies.
Section 64-13-10	This section grants the Department of Corrections (department) rulemaking authority to carry out department provisions.
Section 64-13-14	Mandates the department's operation of secure correctional facilities.
Section 64-13-15	Offenders shall arrange for disposal of property retained by the department.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
The department has not received any written comments regarding this rule since the last five-year review.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
This rule is required as it sets intake and property procedures for the department, impacting outside agencies and personal property disposition. Therefore, this rule should be continued.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Jared Garcia, Executive Director	<b>Date:</b>	11/13/2025
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**NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule number:</b>	<b>R277-311</b>	<b>Filing ID: 53207</b>
<b>Effective date:</b>	<b>11/14/2025</b>	

**Agency Information**

<b>1. Title catchline:</b>	Education, Administration	
<b>Building:</b>	Board of Education	
<b>Street address:</b>	250 E 500 S	
<b>City, state:</b>	Salt Lake City, UT 84111	
<b>Mailing address:</b>	PO Box 144200	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-4200	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Elisse Newey	801-538-7550	elisse.newey@schools.utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>	
R277-311. Specialized Endorsements	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Utah Constitution, Article X, Section 3	Vests general control and supervision over public education in the Board.
Subsection 53E-3-401(4)	Allows the Utah State Board of Education (Board) to adopt rules in accordance with its responsibilities.
Subsection 53E-3-501(1)(a)	Directs the Board to make rules regarding the certification of educators.
Section 53G-10-507	Directs the Board to establish procedures and standards to certify teachers of driver education classes as driver license examiners.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
There were no public comments received since the last five-year review of this rule.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
This rule is necessary because it establishes standards for earning specialized endorsements in driver education and physical education. Therefore, this rule should be continued.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Elisse Newey, Deputy Superintendent of Policy	<b>Date:</b>	11/14/2025
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**NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule number:</b>	<b>R436-18</b>	<b>Filing ID: 56437</b>
<b>Effective date:</b>	<b>11/12/2025</b>	

**Agency Information**

<b>1. Title catchline:</b>	Health and Human Services, Data, Systems and Evaluation, Vital Records and Statistics		
<b>Building:</b>	Cannon Health Building		
<b>Street address:</b>	288 N 1460 W		
<b>City, state:</b>	Salt Lake City, UT		
<b>Mailing address:</b>	PO Box 141012		
<b>City, state and zip:</b>	Salt Lake City, UT 84114-1012		
<b>Contact persons:</b>			
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>	
Nicole Bissonette	385-266-1543	nbissonette@utah.gov	
Mariah Noble	385-214-1150	mariahnoble@utah.gov	
<b>Please address questions regarding information on this notice to the persons listed above.</b>			

**General Information**

<b>2. Rule catchline:</b>
R436-18. Adoption Program Procedures, Form Content, and Donations

**3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:**

Section 26B-8-125	This section requires the Office of Vital Records and Statistics (office) to: 1) make rules establishing procedures and the content of forms for the inspection of adoption documents under Subsection 81-13-103(3); 2) for the release of information by the mutual-consent, voluntary adoption registry as described in Section 81-13-504; 3) for collecting fees and donations under Section 81-13-505; and 4) for the review and approval of a request for a drug use intervention or suicide prevention effort or a statistical or medical research program when the state registrar obtains prior consent.
Section 81-13-103	Section 78B-6-141 was recently renumbered to 81-13-103. The Department of Health and Human Services (department) is in the process of filing an update to this rule to reflect the updated citation.  This section governs the release of adoption documents and describes when a person may inspect and copy a sealed adoption document or another document filed in connection with a petition for adoption.
Section 81-13-504	Section 78B-6-144 was recently renumbered to Section 81-13-504. The department is in the process of filing an update to this rule to reflect the updated citation.  This section requires the department to establish a mutual-consent, voluntary adoption registry and describes procedures for the registry and access to the registry and related adoption records.
Section 81-13-505	Section 78B-6-144.5 was recently renumbered to Section 81-13-505. The department is in the process of filing an update to this rule to reflect the updated citation.  This section requires the office to establish a fee to cover the costs related to providing information, services, and improvements related to adoption records and the office's voluntary adoption registry.  This section additionally allows the office to accept donations or grants to cover costs. It describes procedures for fees and donations and criteria for the use of those fees or donations.

**4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:**

No comments have been received since the last five-year review of this rule.

**5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:**

This rule fulfills a statutory rulemaking requirement and governs the process by which the office implements the adoption registry and shares original birth record information with eligible adoptees and mutually agreed upon contact information. Therefore, this rule should be continued.

This rule is being updated in a separate filing to reflect recent legislative actions that renumbered statute and updated procedures related to this rule.

As there were no comments in opposition to this rule, the office did not respond to any such comments.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/11/2025
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	R501-15	Filing ID: 56269
Effective date:	11/13/2025	

**Agency Information**

1. Title catchline:	Health and Human Services, Human Services Program Licensing	
Building:	Mult-State Agency Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 142003	
City, state and zip:	Salt Lake City, UT 84114-2003	
Contact persons:		
Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

**General Information**

2. Rule catchline:	R501-15. Therapeutic Schools	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:		
Section 26B-2-104	Section 26B-2-104 authorizes the Division of Licensing and Background Checks, under the Department of Health and Human Services (department), to make and enforce rules relating to basic health and safety standards for human services programs licensed, certified, or contracted by the department.	
4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:	No comments have been received since the last five-year review of this rule.	
5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:	<p>This rule is necessary to comply with statute and to ensure there is no lapse in oversight and enforcement of the licensure for therapeutic schools. Any such lapse in oversight and enforcement would threaten public health and safety. Therefore, this rule should be continued.</p> <p>As there have been no comments in opposition to this rule, the department has not responded to any such comments.</p>	

**Agency Authorization Information**

Agency head or designee and title:	Tracy S. Gruber, Executive Director	Date:	11/13/2025
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	R510-401	Filing ID: 56023
Effective date:	11/13/2025	



**Agency Information**

<b>1. Title catchline:</b>	Health and Human Services, Aging and Adult Services	
<b>Building:</b>	Cannon Health Building	
<b>Street address:</b>	288 N 1460 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	288 N 1460 W	
<b>City, state and zip:</b>	Salt Lake City, UT 84116	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Jean Boyack	385-515-5439	jboyack@utah.gov
Jake Murakami	385-222-1755	jmurakami@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>	
R510-401. Utah Caregiver Support Program	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Section 26B-1-202	This section allows the Department of Health and Human Services (department) to adopt rules necessary or desirable for providing health and social services to the people of Utah, including this rule to facilitate the administration of the Utah Caregiver Support Program (UCSP).
Older Americans Act of 1965, 42 U.S.C. Section 3030s et seq.	The Older Americans Act of 1965 provides requirements on state and community programs for aging and allows for states to administer aging programs pursuant to this act.  This rule establishes the state-specific processes for the UCSP.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
No comments have been received since the last five-year review of this rule.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
This rule is necessary to provide parameters of the Utah Caregiver Support Program, as required by state and federal statute. Therefore, this rule should be continued.  As there were no comments in opposition to this rule, the department did not respond to any such comments.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/13/2025
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**NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule number:</b>	<b>R547-11</b>	<b>Filing ID:</b> 57560
<b>Effective date:</b>	<b>11/12/2025</b>	

**Agency Information**

<b>1. Title catchline:</b>	Health and Human Services, Juvenile Justice and Youth Services	
<b>Building:</b>	Multi-Agency State Office Building	
<b>Street address:</b>	195 N 1950 W	
<b>City, state:</b>	Salt Lake City, UT	
<b>Mailing address:</b>	195 N 1950 W	
<b>City, state and zip:</b>	Salt Lake City, UT 84116	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
April Graham	801-330-8299	aprilgraham@utah.gov
Reg Garff	801-602-6261	rgarff@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>	
R547-11. Transfer of a Minor Provisionally Housed in Secure Care to the Department of Corrections	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Section 26B-1-202	Section 26B-1-202 authorizes the Department of Health and Human Services to adopt administrative rules necessary or desirable for providing health and social services to the people of the state.
Section 80-6-507	Section 80-6-507 requires the Division of Juvenile Justice and Youth Services (division) to adopt procedures by rule for the transfer of a minor provisionally housed in a secure care facility to the physical custody of the Department of Corrections.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
No comments have been received since the last five-year review of this rule.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
This rule is necessary for the division to comply with statute and the division needs a mechanism to transfer minors provisionally housed in a division facility to the Utah Department of Corrections when the youth turns 25 or when the division determines that it is no longer in the best interest of the minor to continue to be housed in a division facility. Therefore, this rule should be continued.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	11/11/2025
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**NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule number:</b>	<b>R657-39</b>	<b>Filing ID: 57300</b>
<b>Effective date:</b>	<b>11/04/2025</b>	

**Agency Information**

<b>1. Title catchline:</b>	Natural Resources, Wildlife Resources
<b>Building:</b>	DNR Complex
<b>Street address:</b>	1594 W North Temple

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

<b>City, state:</b>	Salt Lake City, UT 84416	
<b>Mailing address:</b>	PO Box 146301	
<b>City, state and zip:</b>	Salt Lake City, UT 84414-6301	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Staci Coons	801-450-3093	stacicoons@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

**General Information**

<b>2. Rule catchline:</b>	
R657-39. Wildlife Board and Regional Advisory Councils	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Section 23A-2-304	Authorizes the Wildlife Board to exercise the Wildlife Board's powers by making rules and issuing proclamations and orders.
Section 23A-2-305	Authorizes the Wildlife Board to exercise the Wildlife Board's powers by making rules and issuing proclamations and orders for the protection, propagation, introduction, increase, control, harvest, management and conservation of protected wildlife in the state and provide for the use and development of protected wildlife for public recreation and food supply while maintaining a sustainable population of protected wildlife.  The Wildlife Board shall determine the circumstances, time, location, means, and the amounts and numbers of protected wildlife that may be taken.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
No written comments supporting or opposing Rule R657-39 were received since 2020, when this rule was last reviewed.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
Rule R657-39 provides the standards and procedures for the operation of the Wildlife Board and regional advisory councils. This rule is necessary for continued success of this program. Therefore, this rule should be continued.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Riley Peck, DWR Director	<b>Date:</b>	11/04/2025
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**NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule number:</b>	<b>R657-40</b>	<b>Filing ID: 55772</b>
<b>Effective date:</b>	<b>11/04/2025</b>	

**Agency Information**

<b>1. Title catchline:</b>	Natural Resources, Wildlife Resources
<b>Building:</b>	DNR Complex
<b>Street address:</b>	1594 W North Temple
<b>City, state:</b>	Salt Lake City, UT 84416
<b>Mailing address:</b>	PO Box 146301
<b>City, state and zip:</b>	Salt Lake City, UT 84414-6301

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Staci Coons	801-450-3093	stacicoons@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>	
R657-40. Wildlife Rehabilitation	
<b>3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:</b>	
Section 23A-2-302	Authorizes the Wildlife Board to exercise the Wildlife Board's powers by making rules and issuing proclamations and orders.
Section 23A-2-305	<p>Authorizes the Wildlife Board to exercise the Wildlife Board's powers by making rules and issuing proclamations and orders for the protection, propagation, introduction, increase, control, harvest, management and conservation of protected wildlife in the state and provide for the use and development of protected wildlife for public recreation and food supply while maintaining a sustainable population of protected wildlife.</p> <p>The Wildlife Board shall determine the circumstances, time, location, means, and the amounts and numbers of protected wildlife that may be taken.</p>
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>	
No written comments supporting or opposing Rule R657-40 were received since 2020, when this rule was last reviewed.	
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>	
<p>Rule R657-40 provides the standards and procedures for possessing protected wildlife in captivity for rehabilitation purposes. In accordance with the provisions of this rule, the Wildlife Board encourages responsible wildlife rehabilitation by trained and educated individuals as a public service and for the benefit of Utah's wildlife resources.</p> <p>This rule is necessary for continued success of this program. Therefore, this rule should be continued.</p>	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Riley Peck, DWR Director	<b>Date:</b>	11/04/2025
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**End of the Five-Year Notices of Review and Statements of Continuation Section**

## NOTICES OF RULE EFFECTIVE DATES

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State law provides for agencies to make their administrative rules effective and enforceable after publication in the *Utah State Bulletin*. In the case of **PROPOSED RULES** or **CHANGES IN PROPOSED RULES** with a designated comment period, the law permits an agency to make a rule effective no fewer than seven calendar days after the close of the public comment period, nor more than 120 days after the publication date. In the case of **CHANGES IN PROPOSED RULES** with no designated comment period, the law permits an agency to make a rule effective on any date including or after the thirtieth day after the rule's publication date, but not more than 120 days after the publication date. If an agency fails to file a **NOTICE OF EFFECTIVE DATE** within 120 days from the publication of a **PROPOSED RULE** or a related **CHANGE IN PROPOSED RULE** the rule lapses.

Agencies have notified the Office of Administrative Rules that the rules listed below have been made effective.

**NOTICES OF EFFECTIVE DATE** are governed by Subsection 63G-3-301(12), Section 63G-3-303, and Sections R15-4-5a and R15-4-5b.

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### Agriculture and Food

#### Specialized Products

No. 57461 (Amendment) R66-29: Compliance Procedures

Published: 10/01/2025

Effective: 11/13/2025

#### Regulatory Services

No. 57525 (Amendment) R70-580: Kratom Product Registration and Labeling

Published: 10/15/2025

Effective: 11/24/2025

### Commerce

#### Professional Licensing

No. 57516 (Amendment) R156-69: Dentist and Dental Hygienist Practice Act Rule

Published: 10/15/2025

Effective: 11/24/2025

### Corrections

#### Administration

No. 57335 (Amendment) R251-709: Transportation of Inmates

Published: 08/01/2025

Effective: 11/13/2025

### Education

#### Administration

No. 57500 (Amendment) R277-125: Small School District Capital Projects

Published: 10/01/2025

Effective: 11/07/2025

No. 57532 (Amendment) R277-210: Utah Professional Practices Advisory Commission (UPPAC), Definitions

Published: 10/15/2025

Effective: 11/21/2025

No. 57533 (Amendment) R277-211: Utah Professional Practices Advisory Commission (UPPAC), Rules of Procedure: Notification to Educators, Complaints and Final Disciplinary Actions

Published: 10/15/2025

Effective: 11/21/2025

## NOTICES OF RULE EFFECTIVE DATES

No. 57534 (Amendment) R277-215: Utah Professional Practices Advisory Commission (UPPAC), Disciplinary Rebuttable Presumptions  
Published: 10/15/2025  
Effective: 11/21/2025

No. 57535 (Amendment) R277-217: Educator Standards and LEA Reporting  
Published: 10/15/2025  
Effective: 11/21/2025

No. 57501 (Amendment) R277-301: Educator Licensing  
Published: 10/01/2025  
Effective: 11/07/2025

No. 57536 (Amendment) R277-303: Educator Preparation Programs  
Published: 10/15/2025  
Effective: 11/21/2025

No. 57502 (Repeal) R277-318: Teacher Salary Supplement Program  
Published: 10/01/2025  
Effective: 11/07/2025

No. 57537 (Amendment) R277-324: Paraprofessional/Paraeducator Programs, Assignments, and Qualifications  
Published: 10/15/2025  
Effective: 11/21/2025

No. 57503 (Amendment) R277-400: School Facility Emergency and Safety  
Published: 10/01/2025  
Effective: 11/07/2025

No. 57538 (Amendment) R277-608: Emergency Safety Interventions and Prohibition of Corporal Punishment  
Published: 10/15/2025  
Effective: 11/21/2025

No. 57504 (Amendment) R277-622: School-based Mental Health Qualifying Grant Program  
Published: 10/01/2025  
Effective: 11/07/2025

No. 57539 (Amendment) R277-701: Early College Programs  
Published: 10/15/2025  
Effective: 11/21/2025

No. 57540 (Amendment) R277-723: Start Smart Utah Program  
Published: 10/15/2025  
Effective: 11/21/2025

No. 57505 (Amendment) R277-726: Statewide Online Education Program  
Published: 10/01/2025  
Effective: 11/07/2025

No. 57506 (Amendment) R277-800: Utah Schools for the Deaf and the Blind  
Published: 10/01/2025  
Effective: 11/07/2025

### Environmental Quality

#### Air Quality

No. 57374 (Amendment) R307-205: Emission Standards: Fugitive Emissions and Fugitive Dust  
Published: 09/01/2025  
Effective: 11/05/2025

No. 57375 (Amendment) R307-401: Permit: New and Modified Sources  
Published: 09/01/2025  
Effective: 11/05/2025

No. 57376 (New Rule) R307-431: Emission Unit Exemptions From Obtaining an Approval Order Under Section R307-401-8: Permit by Rule for Emission Units  
Published: 09/01/2025  
Effective: 11/05/2025

No. 57377 (New Rule) R307-432: Source Category Exemptions From Obtaining an Approval Order Under Section R307-401-8: Permit by Rule for Source Categories  
Published: 09/01/2025  
Effective: 11/05/2025

#### Drinking Water

No. 57468 (Repeal and Reenact) R309-305: Cross Connection Control and Backflow Prevention Certification  
Published: 10/01/2025  
Effective: 11/19/2025

#### Environmental Response and Remediation

No. 57423 (Amendment) R311-200: Petroleum Storage Tanks: Definitions  
Published: 10/01/2025  
Effective: 11/14/2025

No. 57441 (Amendment) R311-201: Petroleum Storage Tanks: Certification Programs and UST Operator Training  
Published: 10/01/2025  
Effective: 11/14/2025

No. 57442 (Amendment) R311-203: Petroleum Storage Tanks: Technical Standards  
Published: 10/01/2025  
Effective: 11/14/2025

No. 57443 (Amendment) R311-204: Petroleum Storage Tanks: Closure and Remediation  
Published: 10/01/2025  
Effective: 11/14/2025

No. 57444 (Amendment) R311-212: Administration of the Petroleum Storage Tank Fund Loan Program  
Published: 10/01/2025  
Effective: 11/14/2025

#### Waste Management and Radiation Control, Waste Management

No. 57492 (Amendment) R315-260: Hazardous Waste Management System  
Published: 10/01/2025  
Effective: 11/17/2025

No. 57493 (Amendment) R315-261: General Requirements -- Identification and Listing of Hazardous Waste  
Published: 10/01/2025  
Effective: 11/17/2025

No. 57494 (Amendment) R315-262: Hazardous Waste Generator Requirements  
Published: 10/01/2025  
Effective: 11/17/2025

No. 57495 (Amendment) R315-263: Standards Applicable to Transporters of Hazardous Waste and Standards Applicable to Emergency Control of Spills for Any Hazardous Waste Handlers  
Published: 10/01/2025  
Effective: 11/17/2025

No. 57496 (Amendment) R315-264: Standards for Owners and Operators of Hazardous Waste Treatment, Storage, and Disposal Facilities  
Published: 10/01/2025  
Effective: 11/17/2025

## NOTICES OF RULE EFFECTIVE DATES

No. 57497 (Amendment) R315-265: Interim Status Standards for Owners and Operators of Hazardous Waste Treatment, Storage, and Disposal Facilities  
Published: 10/01/2025  
Effective: 11/17/2025

No. 57498 (Amendment) R315-266: Standards for the Management of Specific Hazardous Wastes and Specific Types of Hazardous Waste Management Facilities  
Published: 10/01/2025  
Effective: 11/17/2025

No. 57499 (Amendment) R315-270: Hazardous Waste Permit Program  
Published: 10/01/2025  
Effective: 11/17/2025

### Government Operations

#### Archives and Records Service

No. 57517 (New Rule) R17-10: Government Records Ombudsman  
Published: 10/15/2025  
Effective: 11/25/2025

#### Data Privacy

No. 57465 (New Rule) R18-1: Relief from Data Privacy Requirements  
Published: 10/01/2025  
Effective: 11/10/2025

#### Government Records Office

No. 57476 (New Rule) R20-1: Definitions for Rules in Title R20  
Published: 10/01/2025  
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No. 57481 (New Rule) R20-3: Government Records Office Hearing Procedures  
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No. 57479 (New Rule) R20-4: Filing and Declining Hearings  
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No. 57482 (New Rule) R20-6: Subpoenas Issued by the Director  
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No. 57480 (New Rule) R20-7: Expedited Hearing  
Published: 10/01/2025  
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### Governor

#### Economic Opportunity

No. 57464 (Amendment) R357-13: Hotel Convention Center Incentive  
Published: 10/01/2025  
Effective: 11/14/2025

### Health and Human Services

#### Population Health, Environmental Health

No. 57411 (Amendment) R392-102: Mobile Food Business Sanitation  
Published: 09/15/2025  
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Integrated Healthcare

No. 57359 (Amendment) R414-10: Service Coverage and Limitations

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No. 57410 (Amendment) R414-140: Choice of Health Care Delivery Program

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Health Care Facility Licensing

No. 57412 (Amendment) R432-270: Assisted Living Facilities

Published: 09/15/2025

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Higher Education (Utah Board of)

Administration

No. 57407 (Amendment) R765-165: Concurrent Enrollment

Published: 09/15/2025

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Money Management Council

Administration

No. 57489 (Amendment) R628-4: Bonding of Public Treasurers

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No. 57490 (Amendment) R628-12: Certification of Qualified Depositories for Public Funds

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Natural Resources

Outdoor Recreation

No. 57491 (Amendment) R650-301: Off-Highway Vehicle Recreation Grant Program

Published: 10/15/2025

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Public Safety

Criminal Investigations and Technical Services, Criminal Identification

No. 57530 (Amendment) R722-300: Concealed Firearm Permit and Instructor Rule

Published: 10/15/2025

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Emergency Medical Services

No. 57542 (Repeal and Reenact) R911-6: Emergency Medical Services Per Capita Grants and Competitive Grants Program

Published: 10/15/2025

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Public Service Commission

Administration

No. 57527 (Repeal) R746-510: Funding for Speech and Hearing Impaired Certified Interpreter Training

Published: 10/15/2025

Effective: 11/24/2025

NOTICES OF RULE EFFECTIVE DATES

Tax Commission

Administration

No. 57507 (Amendment) R861-1A-26: Procedures for Formal Adjudicative Proceedings Pursuant to Utah Code Ann. Sections 59-1-501 and 63G-4-204 through 63G-4-209

Published: 10/01/2025

Effective: 11/13/2025

No. 57508 (Amendment) R861-1A-34: Private Letter Rulings Pursuant to Utah Code Ann. Section 59-1-210

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Property Tax

No. 57510 (Amendment) R884-24P-19: Appraiser Designation Program Pursuant to Utah Code Ann. Sections 59-2-701 and 59-2-702

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Transportation Commission

Administration

No. 57484 (Repeal) R940-4: Airports of Regional Significance

Published: 10/01/2025

Effective: 11/10/2025

**End of the Notices of Rule Effective Dates Section**