UTAH STATE BULLETIN

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

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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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EDITOR'S NOTES

EDITOR'S NOTE

Extended Public Comment Period for Rule R650-215, ID 58250

The Office of Administrative Rules was notified on 11/06/2026 that the Division of Outdoor Recreation (DOR) wanted to extend the public comment period for the filing on Rule R650-215, ID 58250, R650-215. Personal Flotation Devices, that was published in the October 1, 2026, issue, pages 168 to 172, of the Utah State Bulletin.

DOR is adding an additional 30 days for comment.

The comment period will end on 12/07/2026.

First possible effective date MAY be 12/15/2026.

If there are any questions, contact either:
Ty Hunter at phone number 801-440-5106 or email at tyhunter@utah.gov or

Nico Micheletti at phone number 385-867-4643 or email at nicomicheletti@agutah.gov.

End of the Editor's Notes Section

NOTICES OF
PROPOSED RULES

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 October 16, 2026, 12:00 a.m., and November 02, 2026, 11:59 p.m. are included in this, the November 15, 2026, 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 15, 2026. 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 16, 2027, 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.

The Proposed Rules Begin on the Following Page

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58406**
Rule or section number:	**R37-1**

1. Agency Information

Title catchline:	Government Operations, Risk Management
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W
City, state:	Taylorsville, UT

2. Contact Persons

Name:	Phone:	Email:
Adam Wentz	385-499-4157	awentz@agutah.gov

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

3. General Information

A. Rule or section catchline:

R37-1. Risk Management General Rules

B. Purpose of the new rule or reason for the change:

Upon internal review, the Division of Risk Management determined that Rule R37-1 required enhanced clarity to existing provisions, nonsubstantive changes, and updates to citations.

C. Summary of the new rule or change:

The Division of Risk Management updated requirements for Risk Control Committees and covered entities, updated citations and formatting, and made style alignments with the Rulewriting Manual for Utah.

5. Fiscal Information

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

A. State budget:

The amendments to this rule are generally nonsubstantive in nature and any substantive changes are designed to clarify existing processes, and are not associated with either a cost or savings to the state budget.

B. Local governments:

This rule is not anticipated to introduce a cost or savings on local governments, as it does not apply to this group.

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

This rule is not anticipated to introduce a cost or savings on small businesses, as it does not apply to this group.

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

This rule is not anticipated to introduce a cost or savings on non-small businesses, as it does not apply to this group.

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 is not anticipated to introduce a cost or savings to other persons, as it does not apply to this group.

F. Compliance costs for affected persons:
The amendments to this rule are generally nonsubstantive in nature and any substantive changes are designed to clarify existing processes, and are not associated with a cost to affected persons, identified as the state budget.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	FY2027	FY2028	FY2029	FY2030	FY2031
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 63A-4-101.5		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Dennis Flynn, Director, Division of Risk Management	**Date:**	10/14/2026

R37. Government Operations, Risk Management.
R37-1. Risk Management General Rules.
R37-1-1. Purpose.

The purpose of this rule is to describe the Risk Management Fund[~~,~~] [~~hereafter referred to as~~]([~~the "~~]Fund[~~,"~~]), and prescribe the conditions, underwriting standards, and other rules that govern or control the use of coverage provided or purchased by the Fund and any captive insurance company created by the [~~risk manager~~]Risk Manager.

R37-1-2. Authority.

This rule is established pursuant to Section 63A-4-101.5, which authorizes the [~~risk manager~~]Risk Manager to enact rules.

R37-1-3. Definitions.

(1) "Captive" means a captive insurance company created by the [~~risk manager~~]Risk Manager under Title 31A, Chapter 37, Captive Insurance Companies Act.

(2) "Conditions" means specific policy requirements the violation of which will invalidate coverage.

(3) "Coverage" or "coverage provision" means the type of protection provided against specific risks or losses.

(4) "Covered Entity" means a state department or other state agency not within a state department, a state college or university, a public school district, a participating charter school, or other entity which is covered under the terms of a coverage document issued to it by the Risk Management Fund.

(5) "Fund" means the Risk Management Fund created by Section 63A-4-201.

(6) "Risk [~~manager~~]Manager" means the Director of the Division of Risk Management.

(7) "Underwriting [~~S~~]standards" or "[~~R~~]risk [~~C~~]control [~~S~~]standards" means an action or procedure which must be performed by a covered entity to reduce the risk of loss or to avoid imposition of coverage restrictions, deductibles, increased premiums, or loss of credits or dividends.

R37-1-4. Description of the Fund and its Activities.

(1) The Fund is a self-insurance mechanism established by statute to handle losses to or claims against its covered entities.

(2) Although coverage through the Fund may be written in formats like insurance policies, the relationship between the Fund and covered entities is not that of insurer and insured.

(3) No special duties, rules of construction [~~or~~]other legal doctrines recognized by the courts or created by statute with respect to the relationship of an insurer to its insured shall apply to the Fund or entities covered by it, except those which are specifically required by Title 31A, Chapter 12, State Risk Management Fund, with respect to some coverage provided to school districts, or those that may be required for a captive under Title 31A, Chapter 37, Captive Insurance Companies Act.

(4) The duty to defend covered entity employees, as defined in Section 63G-7-902, or volunteers, as defined in Section 67-20-2, extends only as far as the covered entities' duty to employees or volunteers under Title 63G, Chapter 7, Governmental Immunity Act of Utah, and no special relationship of insurer to insured exists between the Fund and employees or volunteers of covered entities, unless otherwise required for a captive under Title 31A, Chapter 37, Captive Insurance Companies Act.

R37-1-5. Coverage and Conditions.

(1) Coverage - Specific risks covered, properties covered, coverage limits, exclusions, deductibles, conditions and other provisions for coverage through the Fund, or through any captive, shall apply in accordance with the terms of annual coverage agreements or policies issued or procured by the Fund, or in accordance with any policies issued by a captive.

(2) Conditions - The following conditions apply to each line of coverage provided by the Fund or any captive:

(a) In the event of an occurrence, loss, personal injury, act, error, omission, incident, or any other situation likely to give rise to a claim covered by the Fund or any captive, each covered entity shall immediately provide written notice to the Fund or captive.

(i) Written notice shall include:

(A) particulars sufficient to identify the covered entity or covered persons;

(B) reasonably obtainable information with respect to the time, place and circumstances thereof; and

(C) [-]the names and addresses of potential claimants and [~~all~~]each known [~~witnesses~~]witness.

(ii) The covered entity shall promptly take[~~-all~~] reasonable steps to prevent additional injury or damage arising out of the same or similar conditions.

(iii) A covered entity's failure to take preventive measures [~~shall~~]does not constitute a breach of this condition unless the Fund has requested the covered entity, in writing, to undertake the preventive measures.

(iv) Costs incurred by a covered entity to implement preventive measures [~~shall~~]may not be recoverable from the Fund or any captive.

(b)(i) If claim is made or suit is brought against the covered entity or person, whether in court or through an administrative proceeding with the Utah Anti-discrimination Division, the Federal Equal Employment Opportunity Commission or similar body, the covered entity or person shall immediately forward to the Fund or captive a copy of each demand, notice, summons or other process received by it or its representative.

(ii) Any covered person who is an employee or volunteer of the covered entity shall comply with Sections 63G-7-902 and 63G-7-903 before the Fund or any captive shall have any duty to defend or pay any judgment against such covered person.

(c) The covered entity or person shall:

(i) cooperate with the Fund or captive; and

(ii) upon the Fund or captive's request;

(A) provide the Fund or captive with requested information;
(B) assist in making settlements;
(C) assist in making rule 68 settlement offers of judgment per Utah Rules of Civil Procedure;
(D) assist in the conduct of suits;
(E) assist in enforcing any right of contribution or indemnity against any person or organization who may be liable to the covered entity or person because of bodily injury or property damage with respect to which coverage is [~~afforded~~]given by the Fund or captive;
(F) attend hearings[~~ and~~], trials, and any other events necessary to the defense of the claims or where their presence or participation is requested; and
(G) assist in timely securing and providing evidence and obtaining the attendance of witnesses.
(d) The covered entity or person may not, except at its own cost:
(i) voluntarily make any payment;
(ii) assume any obligation; or
(iii) incur any expense other than for qualified first aid to others immediately following an injury or accident.
(e)(i) In the event any employees or volunteers request under the terms of Section 63G-7-902 that the covered entity defend them relative to any action or claim which would be covered by the Fund or captive, the covered entity shall immediately forward the request to the Fund or captive, which shall have the right to determine on behalf of the covered entity whether to:
(A) defend;
(B) defend under a reservation of rights; or
(C) decline to defend.
(f) The covered entity or person shall timely share each record requested by the Fund or captive, relative to any claim under their coverage, to the fullest extent permitted by Title 63G, Chapter 2, Government Records Access and Management Act.
(3) Coverage Disputes and Subrogation -- The [~~following~~]conditions listed under Subsections R37-1-5(3)(a) and (b) are applicable to [~~all~~]any lines of coverage provided by the Fund and any captive[~~:~~].
(a) In the event of any coverage dispute between the Fund or any captive and any covered entity or person, there shall be no right of legal action against the Fund or any captive unless otherwise required by Title 31A, Chapter 37, Captive Insurance Companies Act.
(b) In the event of any payment under any coverage provided through the Fund or any captive:
(i) the Fund or captive shall be subrogated to [~~all~~]the covered entity or person's rights of recovery against any person or organization;
(ii) the covered entity or person shall execute and deliver instruments and papers and do whatever else is necessary to secure these rights; and
(iii) the covered entity or person may not prejudice these rights.

R37-1-6. Premium Establishment.

In addition to other actuarially sound factors, the [~~risk manager~~]Risk Manager may use the [~~following~~]items listed in Subsections R37-1-6(1) through (8) in determining the appropriate premiums for coverage provided to each covered entity[~~:~~].
(1) Efforts at exposure management including completion of [~~self-inspection~~]risk mitigation surveys, employee training, risk reduction plans, agency attendance at Fund-sponsored seminars, agency risk control meetings, risk-related policy development and implementation.
(2) Claims and loss history.
(3) State and federal statutes or court decisions affecting covered entities and operations.
(4) Number of employees in the entity and size of the entity's budget.
(5) Value, protection, exposures, and other characteristics of the entity's buildings and contents.
(6) Number, type, and value of entity vehicles.
(7) Characteristics and exposures of operations and activities.
(8) Actuarial studies.

R37-1-7. Risk Control Standards.

In accordance with Subsection 63A-4-101.5(2)(b)(i), each covered entity shall comply with the[~~ following~~] risk control standards[~~:~~] described under Subsections R37-1-7(1) through (4).
(1)(a) Covered entities shall appoint an entity risk coordinator who shall report directly to the covered entity's director, school superintendent or university or college president, or to another individual who reports directly to the covered entity's director, school superintendent or college or university president.
(b) Subordinate risk coordinators or other individuals may be appointed at the division, school or lower levels of the organization as the entity deems appropriate.
(c) The day-to-day implementation or management of the entity's risk management duties may be assigned by the risk coordinator to subordinate individuals, committees, or groups as necessary for efficient operation and implementation.
(2) The covered entity risk coordinator shall be responsible for the following duties:
(a) identifying, evaluating and resolving risk exposures for the entity;
(b) coordinating with the Fund and any captive on the reporting and investigation of [~~all claims~~]each claim or [~~losses~~]loss;
(c) coordinating with the Fund and any captive on [~~all~~]each liability prevention and loss control and prevention activit[~~ies~~]y;
(d) ensuring that the Fund and any captive is provided with [~~all~~]reasonable information necessary to compute premiums;
(e) ensuring that premium billings are processed and paid;

(f) ensuring that notification is made to the Fund and any captive on [~~all incidents, issues~~]each incident, issue or informal or administrative [~~claims~~]claim, including claims originating at the EEOC or UALD that may result in a formal claim against the Fund or any captive;

(g) supervising or managing [~~all~~]each loss prevention [~~activities~~]activity; and

(h) chairing the entity Risk Control Committee and ensuring staff support to the Risk Control Committee.

(3) Each covered entity shall appoint a Risk Control Committee[~~, hereinafter referred to as the~~] [~~c~~](Committee).

(a) Each covered entity shall include on its [~~c~~]Committee those positions deemed necessary by the risk coordinator [~~and/~~]or the entity director, president, or superintendent to provide comprehensive review and risk management services to the entity's operations.

(b) The following positions should be included on the [~~c~~]Committee:

(i) Risk coordinator;

(ii) [~~Maintenance~~]maintenance director or manager;

(iii) facilities director or manager;

(iv) [~~Human~~]human resource director or manager;

(v) Americans with Disabilities Act Coordinator;

(vi) Civil Rights coordinator or director;

(vi) [~~Safety~~]safety director or manager;

(vii) legal counsel; and

(viii) [~~Staff~~]staff from the Fund or any captive.

(c) The covered entity should also appoint on either a permanent or ad hoc basis other individuals whose job duties or special expertise may be of use to the [~~c~~]Committee, and may include:

(i) an internal auditor;

(ii) a security director;

(iii) a transportation or motor pool director or manager;

(iv) a representative from the finance and accounting section; and

(v) employee representatives.

(d) School districts may also include representatives from the district's athletic, vocational, science and other high-risk programs.

(e) Upon request of the covered entity risk coordinator, the Fund or any captive will provide recommendations on the makeup of the [~~c~~]Committee.

(f) The [~~c~~]Committee shall be normally chaired by the covered entity's risk coordinator.

(g) The [~~c~~]Committee shall be responsible for oversight and supervision of the entity's risk coordination and management program and shall meet at least once each quarter[~~.~~] semi-annually. The entity or its [~~c~~]Committee may appoint other ad hoc or standing committees, or subcommittees to deal with specific issues and problems such as safety, risk control training, civil rights, accident review.

(4) The duties of the [~~c~~]Committee shall include[~~ the following activities~~]:

(a) identifying, evaluating and resolving entity risk exposures;

(b) reviewing the hazards and corrective actions identified during the [~~annual~~]Risk Management [~~self-inspection survey~~]risk mitigation surveys and developing effective and timely plans to eliminate those hazards;

(c) serving as a liaison between the Fund, any captive, and the entity at the discretion of the risk coordinator;

(d) reviewing inspection and other reports from the Fund and any captive and, where applicable, implementing the proposed recommendations, and immediately correcting life safety violations or taking action to minimize exposure until corrective action is completed;

(e) reviewing and analyzing investigation reports and recommendations regarding [~~all claims, accidents~~]each claim, accident, worker [~~injuries~~]injury or near [~~accidents~~]accident, and [~~making recommendations~~]recommending to entity management for reducing accidents or claims;

(f) recommending disciplinary or corrective action for employees who violate safety standards including OSHA, health, hazardous materials, fire and entity-specific standards and other standards, policies or rules that result in claims, accidents, worker injuries, or near accidents. Any disciplinary or corrective action imposed shall be taken in accordance with the entity's rules;

(g) receiving and reviewing recommendations from the entity's driver safety committee to reduce auto accidents and improve driver safety;

(h) developing policies related to risk reduction and accident prevention and recommending their adoption by entity management;

(i) conducting appropriate evaluations or audits of entity operations and each facility, and developing [~~findings~~]risk reduction plans and recommendations for resolution of identified problems or risk exposures;

(j) conducting an annual review or evaluation of the entity's risk reduction efforts and providing the Fund or any captive with a copy of this evaluation before July 1 of each year; and

(k) performing other related duties as assigned by the entity risk coordinator, by entity management, or as requested by the Fund or any captive.

R37-1-8. Underwriting Standards.

In accordance with Subsection 63A-4-101(2)(b)(i), covered entities shall comply with the [~~following~~]underwriting standards described under Subsections R37-1-8(1) through (9):

(1) Annually review, update, and submit a Statement of Values to the Fund before July [~~1st~~]1;

(2) Within 90 days of acquisition, report to the Fund or any captive the description and value of any after-acquired property [~~in excess of $25,000~~]more than $250,000.

(3) Within 30 days of receipt, report each leased, donated, or other non-owned asset with a value [~~in excess of~~]more than $500,000, and report collections of art or other valuables with an aggregate value [~~in excess of~~]more than $500,000, located in a single location;

(4) Provide each volunteer and employee with training approved by the Fund on unlawful discrimination and harassment in the workplace and other civil rights and liability issues as required by the Fund:

(a) [~~After~~]after initial training [~~all~~]each covered [~~entities~~]entity shall provide updated or refresher training to [~~all~~]each staff [~~members~~]member every two years;

(b) [~~For~~]for state entities, this training shall be coordinated with the Division of Human Resource Management and shall be developed and provided by qualified individuals; and

(c) [~~Covered~~]covered entities shall keep records of the training, including but not limited to who provided the training, who attended the training, and when they attended it.

(5) Covered entities shall implement the following driver safety standards:

(a) conduct or facilitate driver's license verification checks on [~~all~~]each new [~~employees~~]employee and [~~volunteers~~]volunteer who will operate entity vehicles or their own vehicles on entity business at time of employment;

(b) annually verify the status of the driver's license of [~~all employees~~]each employee and [~~volunteers~~]volunteer who [~~operate~~]operates entity vehicles or their own vehicles on entity business;

(c) establish procedures to ensure that any employee or volunteer who does not have a valid driver's license is not allowed to operate an entity vehicle or their own vehicle on entity business;

(d) develop procedures to ensure that records of driver's license checks are kept confidential;

(e) include a requirement for maintenance of a valid and appropriate driver's license in [~~all~~]each written job [~~descriptions~~]description or other job analysis [~~documents~~]document or individual performance [~~plans~~]plan where use of a vehicle is an essential function of the job;

(f) require and document that [~~all employees~~]each employee and [~~volunteers~~]volunteer who [~~operate~~]operates entity vehicles, or their own vehicles on entity business, complete a Fund-approved or Fund-provided driver safety program [~~at the time of~~]when initial employment commences and every two years thereafter;

(g) develop and enforce policies and procedures to deal with unsafe driving behavior and hazardous driving situations, including the following:

(i) prohibit employees or volunteers who are involved in an at-fault accident involving entity-owned vehicles or personal vehicles on entity business from operating entity vehicles or their own vehicles on entity business for a reasonable time, not to exceed 30 days;

(ii) require each at-fault employee or volunteer to complete the Fund-approved driver safety program before restoring driving privileges;

(iii) ensure employees and volunteers who are required to operate entity vehicles or their own vehicles on entity business operate those vehicles within the limits or restrictions of their individual licenses; and

(iv) prohibit employees and volunteers who are convicted of Driving under the Influence of Alcohol or Drugs or Reckless Driving from operating entity vehicles or their own vehicles on entity business until their driving privileges are legally restored.

[~~(6) comply with Rule R27-7 if the~~](h) [~~covered entity is a state agencies or institution of higher education;~~

~~(7) if the covered entity is a school district or a charter school,~~]establish and maintain a driver safety committee, composed of three or more employees, including the risk coordinator, to perform the following functions:

(a) evaluate, within 30 days of occurrence, each vehicle accident and traffic violation involving entity-owned vehicles or personal vehicles on entity business;

(b) provide reasonable notice to each employee or volunteer, whose accident or traffic violation will be evaluated, of the driver safety committee meeting and ensure the employee or volunteer can participate in person, via video conference, or by telephone;

(c) determine whether each accident was preventable;

(d) determine whether each traffic violation resulted from the employee's or [~~volunteers'~~]volunteer's hazardous driving behavior;

(e) document the determination of the driver safety committee as to accident preventability and hazardous driving behavior;

(f) develop recommendations regarding driving privileges, remediation, and discipline;

(g) promptly report documented determinations and recommendations to entity management;

(h) promptly notify the employee or volunteer of findings regarding accident preventability and hazardous driving behavior; and

(i) maintain driver safety committee determinations, recommendations, and [~~all~~]each reviewed [~~records~~]record for a minimum of four years.

([~~8~~]6) review the performance standards and job descriptions of each employee and where appropriate add a standard requiring the use of required safety equipment, adherence to safety standards, or other liability and risk reduction requirements appropriate to the position and duties performed by the employee; and

([~~9~~]7) comply with the[~~adopted~~] editions of the International Building Code, International Fire Code, and other applicable codes, as adopted in Title 15A, State Construction and Fire Codes Act, in [~~all~~]each new construction, [~~remodels~~]remodel, or [~~additions~~]addition to existing facilities;

([~~10~~]8) ensure existing facilities known to be out of compliance at the time of construction with the[~~adopted~~] editions of the International Building Code, International Fire Code, as adopted in Title 15A, State Construction and Fire Codes Act, and [~~all~~]any other applicable codes are brought up to compliance as a condition of insurability;

([~~11~~]9) covered entities that fail to comply with Subsections (9) and (10) will receive an appropriate premium surcharge or coverage restriction after reasonable notice and an opportunity to cure areas of noncompliance.

KEY: risk management
Date of Last Change: [~~February 22, 2023~~]2026

Notice of Continuation: March 21, 2022
Authorizing, and Implemented or Interpreted Law: 63A-4-101 et seq.

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58405**
Rule or section number:	**R37-2**

1. Agency Information

Title catchline:	Government Operations, Risk Management
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W
City, state:	Taylorsville, UT

2. Contact Persons

Name:	Phone:	Email:
Adam Wentz	385-499-4157	awentz@agutah.gov

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

3. General Information

A. Rule or section catchline:

R37-2. Risk Management State Workers' Compensation Insurance Administration

B. Purpose of the new rule or reason for the change:

Upon internal review, the Division of Risk Management determined that Rule R37-2 required nonsubstantive changes and updates to citations.

C. Summary of the new rule or change:

The Division of Risk Management updated citations and formatting and made style alignments with the Rulewriting Manual for Utah.

5. Fiscal Information

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

A. State budget:

The amendments to this rule are generally nonsubstantive in nature, and do not require additional action or introduce restrictions or requirements associated with either a cost or savings to the state budget.

B. Local governments:

This rule is not anticipated to introduce a cost or savings to local governments, as it does not apply to this group.

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

This rule is not anticipated to introduce a cost or savings to small businesses, as it does not apply to this group.

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

This rule is not anticipated to introduce a cost or savings to non-small businesses, as it does not apply to this group.

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 is not anticipated to introduce a cost or savings to other persons, as it does not apply to this group.
F. Compliance costs for affected persons:
The amendments to this rule are generally nonsubstantive in nature, and do not require additional action or introduce restrictions or requirements associated with a cost to affected persons, identified as the state budget.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	FY2027	FY2028	FY2029	FY2030	FY2031
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 63A-4-101	Subsection 63A-4-101(2)(a)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Dennis Flynn, Director, Division of Risk Management	**Date:**	10/14/2026

R37. Government Operations, Risk Management.
R37-2. Risk Management State Workers' Compensation Insurance Administration.
R37-2-1. Purpose.

The purpose of this rule is to establish the responsibilities and guidelines governing the acquisition and administration of workers' compensation insurance, the allocation of costs; and the required activities or actions of covered agencies utilizing this coverage.

R37-2-2. Authority.

This rule is established pursuant to:

(1) Section 63A-4-101 which authorizes the [~~State's~~]state's Risk Manager to recommend rules to the Department Director who [~~is~~]may be authorized to enact rules; and

(2) Subsection 63A-4-101(2)(a) which authorizes the [~~State's~~]state's Risk Manager to acquire and administer workers' compensation insurance for the state.

R37-2-3. Workers' Compensation Costs Allocation.

(1) The [~~State's~~]state's Risk Manager shall allocate workers' compensation insurance costs to state entities based on[~~the basis of~~] an equitable and actuarially sound distribution of costs.

(2) The Risk Manager shall collect these funds through the state's payroll process. The following factors may be considered in developing this allocation:

([~~1~~]a) [~~Covered~~]covered entity injured workers' compensation claims and accident history and trends[~~.~~];
([~~2~~]b) [~~Covered~~]covered entity participation in preferred provider programs designated by the Risk Manager[~~.~~];
([~~3~~]c) [~~Covered~~]covered entity safety, loss prevention, and loss control programs[~~.~~];
([4]d) [~~Covered~~]covered entity disability prevention efforts[~~.~~];
([~~5~~]e) [~~Covered~~]covered entity injured worker temporary transitional duty, and return to work programs[~~.~~];
([~~6~~]f) [~~Covered~~]covered entity case consultation and cooperation with Risk Management[~~.~~]; and
([~~7~~]g) [~~Covered~~]covered entity payroll by rate classification.

R37-2-4. Expenditure of Workers' Compensation Collections.

(1) The expenditure of collected funds shall be made with the approval of the Risk Manager.

(2) In addition to other activities which reduce the overall workers' compensation costs to the state, the collected funds may be expended for:

([~~1~~]a) [~~Workers' Compensation Insurance~~]workers' compensation insurance premiums for state entities[~~.~~];
([~~2~~]b) [~~Work~~]work site modification and assistive technology to return injured employees to work[~~.~~];
([~~3~~]c) [~~Employee~~]employee safety and loss control programs[~~.~~];
([4]d) [~~Disability~~]disability and injury prevention programs[~~.~~];
([~~5~~]e) [~~Claims~~]claims management systems[~~.~~]; and
([~~6~~]f) [~~Claims~~]claims information systems.

R37-2-5. Preferred Provider Program.

(1) The Risk Manager may designate a preferred provider program developed by the state's workers compensation insurer, or a preferred provider program developed by Risk Management.

(a) Additional contracted facilities or providers may be designated by the Risk Manager.

(b) Any designated program shall be in accordance with statutes and rules governing such workers' compensation programs.

(2) If the Risk Manager designates any preferred provider program or additional contracted facility or providers state entities shall notify employees of them and require their use by employees for initial treatment.

R37-2-6. Temporary Transitional Duty.

(1)(a) Covered entities shall develop return to work and temporary transitional duty procedures.

(b) Entities shall ensure that these procedures are in accordance with the requirements of the [~~"~~]Americans [~~With~~]with Disabilities Act[~~",~~], 42 U.S.C. 12101, and other applicable laws and rules.

(2) The procedures shall provide for the return of injured employees to work at the earliest appropriate date.

R37-2-7. Agency Notice and Other Requirements.

[~~All state entities shall do the following w~~]With respect to any employee or volunteer injury, each state entity shall:

(1) [~~P~~]provide immediate notification to Risk Management through a phone call, [~~E~~]e-mail, or facsimile, when any of the following conditions occur:

(a) [~~S~~]serious injury[~~.~~];
(b) An injury which is questionable or appears to be fraudulent[~~.~~];
(c) An accident involving the death of an employee[~~.~~]; or
(d) An accident where a third-party action caused the accident, death or injury[~~.~~];

(2) [~~N~~]notify the Division of Industrial Accidents of the Utah State Labor Commission of incidents, as required by Subsection 34a-2-407(4)[~~.~~];

(3) [~~W~~]within seven days of an employee injury, complete a "First Report of Injury Form" provided by Risk Management[~~.~~]; and

(4) [~~D~~]distribute copies of the "First Report of Injury Form[~~"~~,]," as indicated on the form, to the Division of Industrial Accidents of the Labor Commission, the state's Workers' Compensation insurer, Risk Management, and the injured employee.

KEY: risk management, workers compensation
Date of Last Change: [~~September 9, 2021~~]2026
Notice of Continuation: March 21, 2022
Authorizing, and Implemented or Interpreted Law: 63A-4-201

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58404**
Rule or section number:	**R37-3**

1. Agency Information

Title catchline:	Government Operations, Risk Management
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W
City, state:	Taylorsville, UT

2. Contact Persons

Name:	Phone:	Email:
Adam Wentz	385-499-4157	awentz@agutah.gov

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

3. General Information

A. Rule or section catchline:

R37-3. Risk Management Adjudicative Proceedings

B. Purpose of the new rule or reason for the change:

Upon internal review, the Division of Risk Management determined that Rule R37-3 required nonsubstantive changes and updates to citations.

C. Summary of the new rule or change:

The Division of Risk Management updated citations and formatting, reordered Section R37-3-4, and made style alignments with the Rulewriting Manual for Utah.

5. Fiscal Information

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

A. State budget:

The amendments to this rule are generally nonsubstantive in nature, and do not require additional action or introduce restrictions or requirements associated with either a cost or savings to the state budget.

B. Local governments:

The amendments to this rule are generally nonsubstantive in nature, and do not require additional action or introduce restrictions or requirements associated with either cost or savings to local governments.

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

This rule is not anticipated to introduce cost or savings to small businesses, as it does not apply to this group.

D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
This rule is not anticipated to introduce cost or savings to non-small businesses, as it does not apply to this group.
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 amendments to this rule are generally nonsubstantive in nature, and do not require additional action or introduce restrictions or requirements associated with either cost or savings to other persons, identified as individuals or groups engaging in informal adjudicative proceedings as defined in this rule.
F. Compliance costs for affected persons:
The amendments to this rule are generally nonsubstantive in nature, and do not require additional action or introduce restrictions or requirements associated with cost to affected persons, identified as the state, local governments, or individuals or groups in informal adjudicative proceedings as defined in this rule.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	FY2027	FY2028	FY2029	FY2030	FY2031
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-4-102		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Dennis Flynn, Director, Division of Risk Management	**Date:**	10/14/2026

R37. Government Operations, Risk Management.
R37-3. Risk Management Adjudicative Proceedings.
R37-3-1. Definitions.

The terms used in this rule are defined in Section 63G-4-103.

R37-3-2. Authority.

This rule is enacted in compliance with [~~the Utah~~]Title 63G, Chapter 4, Administrative Procedures Act[~~, Section 63G-4-102 et seq., and Section 63A-1-110~~].

R37-3-3. Purpose.

(1) The Risk Manager designates [~~all~~]each agency action subject to the scope and applicability of [~~the Utah~~]Title 63G, Chapter 4, Administrative Procedures Act, [~~Title 63G, Chapter 4,~~]as informal proceedings.

(2) Pursuant to Section 63G-4-102, [~~all~~]each agency action with respect to questions of coverage of the [~~risk management~~]Risk Management Fund, premiums to be charged by the Fund and the interpretation of policies issued by the Fund are actions relating to contracts for the purchase or sale of goods or services by and for the [~~State~~]state or by and for an agency of the [~~State~~]state and are excluded from the coverage of the Administrative Procedures Act[~~, Section 63G-4-102 et seq.,~~] and [~~these rules~~]this rule.

R37-3-4. Procedure for Informal Adjudicative Proceedings.

[~~In compliance with Section 63G-4-203, the procedure for the informal adjudicative proceedings is as follows:~~

] (1) The agency [~~shall~~]may not be required to respond in writing to a request for agency action.

(2) The respondent to a notice of agency action pursuant to Section 63G-4-301 shall file an answer or responsive pleading to the allegations contained in the notice of agency action within 20 days following receipt of the notice of agency action.

(3) No hearing shall be held in any agency informal adjudication unless required by statute.

(4) If the agency does not respond in writing to a request for agency action, or does not issue a written decision or order pursuant to Section 63G-4-203 within 90 days of the filing of the request for agency action, such request shall be deemed denied by the agency.

R37-3-5. Agency Review.

Pursuant to Section 63G-4-301, the [~~risk manager~~]Risk Manager does not recommend and the executive director does not enact a rule permitting agency review.

KEY: risk management
Date of Last Change: [~~September 9, 2021~~]2026
Notice of Continuation: March 21, 2022
Authorizing, and Implemented or Interpreted Law: 63A-1-110; 63G-4-101

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58361**
Rule or section number:	**R37-4**

1. Agency Information

Title catchline:	Government Operations, Risk Management
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W
City, state:	Taylorsville, UT

2. Contact Persons

Name:	Phone:	Email:
Adam Wentz	385-499-4157	awentz@agutah.gov

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

3. General Information

A. Rule or section catchline:

R37-4. Adjusted Utah Governmental Immunity Act Limitations on Judgments

B. Purpose of the new rule or reason for the change:

Pursuant to Subsection 63G-7-605(4), in each even-numbered year, the risk manager shall make rules that establish a new individual limit, aggregate limit, and property damage limit.

C. Summary of the new rule or change:

As required by Subsection 63G-7-605(4), this filing reflects adjustments required by the Utah Governmental Immunity Act each even-numbered year to individual, aggregate, and property damage limits as calculated by the legislative fiscal analyst per Subsection 63G-7-605(2).

It also makes nonsubstantive edits.

5. Fiscal Information

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

A. State budget:

The future cost of claims may increase with the statutory limit increase, but the amount cannot be reliably estimated at this time because it is contingent upon the specific claims that will arise in the upcoming fiscal year, including whether any individual claim will reach or exceed the statutory liability cap set forth in the Governmental Immunity Act of Utah, Section 63G-7-604.

Until such claims are actually filed, adjudicated, or settled, and their respective values relative to the cap are determined, the resulting fiscal impact on the state's risk fund remains speculative and not reasonably quantifiable.

There is no benefit attached to this amendment.

B. Local governments:

This rule is not anticipated to introduce cost or savings to local governments, as it does not apply to this group.

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

This rule is not anticipated to introduce cost or savings to small businesses, as it does not apply to this group.

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

This rule is not anticipated to introduce cost or savings to non-small businesses, as it does not apply to this group.

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***)**:**

Because the statutory caps are increasing, other persons, identified as potential plaintiffs, may see an increase in financial gain.

There is no cost attached to this amendment.

F. Compliance costs for affected persons:
The future cost of claims may increase with the statutory limit increase, but the amount cannot be reliably estimated at this time because it is contingent upon the specific claims that will arise in the upcoming fiscal year, including whether any individual claim will reach or exceed the statutory liability cap set forth in the Governmental Immunity Act of Utah, Section 63G-7-604. Until such claims are actually filed, adjudicated, or settled, and their respective values relative to the cap are determined, the resulting fiscal impact on the state's risk fund remains speculative and not reasonably quantifiable.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	inestimable	inestimable	inestimable	inestimable	inestimable
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
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	FY2027	FY2028	FY2029	FY2030	FY2031
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 63G, Chapter 7	Section 63G-7-605	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Dennis Flynn, Director, Division of Risk Management	**Date:**	10/14/2026

R37. Government Operations, Risk Management.
R37-4. Adjusted Utah Governmental Immunity Act Limitations on Judgments.
R37-4-1. Authority and Calculation Process.

Pursuant to Subsection 63G-7-605(4), the Risk Manager establishes new limitations of judgments, based upon the adjustments communicated by the Legislative Fiscal Analyst.

R37-4-2. New Limitation of Judgment Amounts.

The new limitation of judgment amounts currently required by Subsection 63G-7-604(3) are increased as follows, pursuant to Section 63G-7-605, and are effective July 1, 2022 for claims occurring on or after that date:

(1) [~~T~~]the limit for damages for personal injury against a governmental entity, or against an employee whom a governmental entity has a duty to indemnify, is $[~~827,000~~]963,800 for one person in any one occurrence, and $3,[~~329,100~~]879,500 is the aggregate amount of individual awards that [~~be~~]may be awarded in relation to a single occurrence; and

(2) the limit for property damages, excluding damages awarded as compensation when a governmental entity has taken or damaged private property for public use without just compensation, against a governmental entity, or against an employee whom a governmental entity has a duty to indemnify, is $[~~326,200~~]387,700 in any one occurrence.

R37-4-3. Limitations of Judgments by Calendar Date.

The limitations on judgments are established by the date of the occurrence. The dates and dollar amounts are as follows:

(1) [~~I~~]incidents occurring before July 1, 2001 - $250,000 for one person in an occurrence, $500,000 aggregate for two or more persons in an occurrence; and $100,000 for property damage for any one occurrence[~~,~~];

(2) [~~I~~]incidents occurring on or after July 1, 2001 - $500,000 for one person in an occurrence, $1,000,000 aggregate for two or more persons in an occurrence; and $200,000 for property damage for any one occurrence[~~,~~];

(3) [~~I~~]incidents occurring on or after July 1, 2002 - $532,500 for one person in an occurrence, $1,065,000 aggregate for two or more persons in an occurrence; and $213,000 for property damage for any one occurrence[~~,~~];

(4) [~~I~~]incidents occurring on or after July 1, 2004 - $553,500 for one person in an occurrence, $1,107,000 aggregate for two or more persons in an occurrence, and $221,400 for property damage for any one occurrence[~~,~~];

(5) [~~I~~]incidents occurring on or after July 1, 2006 - $583,900 for one person in an occurrence, $1,167,900 aggregate for two or more persons in an occurrence, and $233,600 for property damage for any one occurrence[~~,~~];

(6) [~~I~~]incidents occurring on or after July 1, 2007 - $583,900 for one person in an occurrence, $2,000,000 aggregate for two or more persons in an occurrence, and $233,600 for property damage for any one occurrence[~~,~~];

(7) [~~I~~]incidents occurring on or after July 1, 2008 - $620,700 for one person in an occurrence, $2,126,000 aggregate for two or more persons in an occurrence, and $248,300 for property damage for any one occurrence[~~,~~];

(8) [~~I~~]incidents occurring on or after July 1, 2010 - $648,700 for one person in an occurrence, $2,221,700 aggregate for two or more persons in an occurrence, and $259,500 for property damage for any one occurrence[~~,~~];

(9) [~~I~~]incidents occurring on or after July 1, 2012 - $674,000 for one person in an occurrence, $2,308,400 aggregate for two or more persons in an occurrence, and $269,700 for property damage for any one occurrence[~~,~~];

(10) [~~I~~]incidents occurring on or after July 1, 2014 - $703,000 for one person in an occurrence, $2,407,700 aggregate for two or more persons in an occurrence, and $281,300 for property damage for any one occurrence[~~,~~];

(11) [~~I~~]incidents occurring on or after July 1, 2016 - $717,100 for one person in an occurrence, $2,455,900 aggregate for two or more persons in an occurrence, and $286,900 for property damage for any one occurrence[~~,~~];

(12) [~~I~~]incidents occurring on or after July 1, 2018 - $745,200 for one person in an occurrence, $2,552,000 aggregate for two or more persons in an occurrence, and $295,000 for property damage for any one occurrence as explained in Subsection R37-4-2(2)[~~,~~];

(13) [~~I~~]incidents occurring on or after July 1, 2020 - $779,600 for one person in an occurrence, $3,138,300 aggregate for two or more persons in an occurrence, and $307,700 for property damage for any one occurrence as explained in Subsection R37-4-2(2)[~~,~~];

(14) [~~I~~]incidents occurring on or after July 1, 2022 - $827,000 for one person in an occurrence, $3,329,100 aggregate for two or more persons in an occurrence, and $326,200 for property damage for any one occurrence as explained in Subsection R37-4-2(2)[~~,~~];

(15) [~~I~~]incidents occurring on [~~of~~]or after July 1, 2024 - $911,300 for one person in an occurrence, $3,668,400 aggregate for two or more persons in an occurrence, and $366,900 for property damage for any one occurrence as explained in Subsection R37-4-2(2)[~~,~~]; and

(16) incidents occurring on or after July 1, 2026 - $963,800 for one person in an occurrence, $3,879,500 aggregate for two or more persons in an occurrence, and $387,700 for property damage for any one occurrence as explained in Subsection R37-4-2(2).

KEY: limitation on judgments, risk management, Governmental Immunity Act caps
Date of Last Change: [~~September 22, 2025~~]2026
Notice of Continuation: March 21, 2022
Authorizing, and Implemented or Interpreted Law: 63G-7-605(4)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Repeal	**Filing ID: 58535**
Rule or section number:	**R66-9**

1. Agency Information

Title catchline:	Agriculture and Food, Specialized Products
Building:	TSOB, 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

2. Contact Persons

Name:	Phone:	Email:
Amber Brown	385-245-5222	ambermbrown@utah.gov
Brandon Forsyth	801-710-9945	bforsyth@utah.gov
Trevor Eckhoff	385-549-9937	teckhoff@utah.gov

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

3. General Information

A. Rule or section catchline:

R66-9. Cannabis Licensing Process

B. Purpose of the new rule or reason for the change:

HB 389 (passed in the 2026 General Session) transferred cannabis licensing to the Specialized Product Authority Licensing Board in Section 4-41a-201.1.

The licensing board is filing a new rule to establish its authority over the cannabis licensing process under Rule R67-8.

The Department of Agriculture and Food (department) is repealing its cannabis licensing process rule in tandem with the licensing board's filing.

C. Summary of the new rule or change:

Rule R66-9, Cannabis Licensing Process, in title and body, is repealed in its entirety.

(EDITOR'S NOTE: The proposed new Rule R67-8, is under ID 58484, in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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

A. State budget:

This amendment is not anticipated to result in fiscal impact on the state's budget because licensing duties will continue to be performed under Rule R67-8.

B. Local governments:
This amendment is not anticipated to result in fiscal 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)**:**
This amendment is not anticipated to result in fiscal impact on small businesses because substantive regulations regarding cannabis licensing remain.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
This amendment is not anticipated to result in fiscal impact on non-small businesses because substantive regulations regarding cannabis licensing remain.
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 fiscal impact on other persons because it only affects the department, the licensing board, and licensees.
F. Compliance costs for affected persons:
Compliance costs are not changing.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-201(2)(a)(ii)	Section 4-41a-201.1	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	11/02/2026

R66. Agriculture and Food, Specialized Products.

[~~R66-9. Cannabis Licensing Process.~~

~~R66-9-1. Authority and Purpose.~~

~~(1) Subsections 4-41a-201(2)(a)(ii) and 4-41a-1206(10) authorize this rule.~~

~~(2) This rule establishes the process for issuing a cannabis production establishment license and a closed-door medical cannabis pharmacy license.~~

~~R66-9-2. Cannabis Production Establishment and Pharmacy Licensing.~~

~~(1) The department will solicit applications for cannabis cultivation facility licenses if the conditions in Subsection 4-41a-205(2)(a) or (b) are met.~~

~~(2) A licensed cannabis cultivation facility may not be awarded a second cannabis cultivation facility license.~~

~~(3) Pursuant to Section 4-41a-201, the board may not accept an incomplete license application.~~

~~(4) If there are more qualified applicants than available licenses, the department will evaluate the applicants pursuant to Subsection 4-41a-205(3).~~

~~(5) The department will solicit applications for medical cannabis pharmacy licenses when a medical cannabis pharmacy license becomes available due to closure or another reason.~~

~~(6) The department will solicit applications for closed-door medical cannabis pharmacy licenses pursuant to Section 4-41a-1206.~~

~~(7) Pursuant to Section 4-41a-201, the board may not accept a license application unless it is complete and will return an incomplete application to the applicant.~~

~~(8) The board will consider a license application only after an applicant meets the following conditions:~~

~~(a) submits a complete application, including documents and supplemental materials on the department's application checklist;~~

~~(b) pays the required application fee; and~~

~~(c) a department official conducts a review as described in Section R66-9-3.~~

~~(9) The department shall forward to the board the information and recommendation to aid in the license determination.~~

~~(10) The board will follow the process outlined in Subsection 4-41a-201.1(6) in considering the application.~~

~~(11) Before issuing a license, the department shall inspect the proposed premises to determine if the applicant complies with state laws and rules.~~

~~R66-9-3. Department Review.~~

~~(1) The department's review shall:~~

~~(a) verify required documents and supplemental materials have been submitted with the application;~~

~~(b) confirm the information in the application is correct;~~

~~(c) conduct the criminal background check required in Section 4-41a-202 or Section 4-41a-1001; and~~

~~(d) confirm that operating and business plans comply with state laws and administrative rules.~~

~~(2) The department may require additional information from an applicant.~~

~~(3) The department shall submit the cannabis processing facility or independent cannabis testing laboratory application to the Board with information within a reasonable time of receiving a completed cannabis processing facility or independent cannabis testing laboratory application.~~

~~(4) The department may conduct face to face interviews with an applicant, if needed, to determine the best qualified applicant for the licenses that will be issued.~~

~~**R66-9-4. Board Review-Licenses with Limited Availability.**~~

~~(1) If the department solicits applications for a limited number of cannabis licenses, the board shall score complete applications that meet the requirements of Subsection R66-9-2(8) and Section R66-9-3.~~

~~(2) The board shall issue licenses according to those applicants with the highest score, depending on how many licenses are available.~~

~~(3) The board review in these circumstances shall be a blind process with each name removed from each document that is provided to the board for consideration.~~

~~(4) The board may consider the following factors in determining whether to grant cannabis production establishment licenses:~~

~~(a) the applicant's experience in the medical cannabis industry;~~

~~(b) the applicant's ability to be compliant within their operating plan;~~

~~(c) the applicant's anticipated pricing structure;~~

~~(d) the timeline under which each phase of the applicant's business will be operational;~~

~~(e) other factors determined by the department or the board; and~~

~~(f) the factors required under Title 4, Chapter 41a, Part 2 Cannabis Production Establishment, and Title 4, Chapter 41a, Part 10 Medical Cannabis Pharmacy License.~~

~~(5) In addition to the factors listed in Subsection 4-41a-1206(7), the board shall approve locations for closed-door medical cannabis pharmacies based on:~~

~~(a) patient needs;~~

~~(b) the existence of a policy allowing the Pharmacist in Charge (PIC) to determine pharmacy inventory;~~

~~(c) the applicants' anticipated pricing structure; and~~

~~(d) the applicant's operating plan.~~

~~(6) The board may conduct face-to-face interviews with an applicant if needed, to determine the best qualified applicant for the licenses that will be issued.~~

~~(7) If the board discussion determines to change an applicant's initial score, the board shall document the reason for the change.~~

~~**R66-9-5. Public Hearing.**~~

~~(1) The board shall make licensing determination during a public hearing where the application was considered.~~

~~(2) The board shall allow prospective applicants to make a presentation at the public hearing in which their application is considered.~~

~~(3) The board shall notify the prospective applicant a minimum of ten business days in advance of the public hearing where their application is being considered.~~

~~(4) The board may limit the time available for presentations by the applicants.~~

~~**R66-9-6. Cannabis Production Establishment and Pharmacy Licensing Advisory Board Electronic Meetings.**~~

~~(1) The board shall conduct all meetings in accordance with Title 52, Chapter 4 Utah Open and Public Meetings Act, and Rule R51-7 Open and Public Meetings Act Electronic Meetings.~~

~~(2) The board shall provide public notice of the meeting in accordance with Section 52-4-202.~~

~~(a) The notice shall specify the anchor location, as defined in Subsection 52-4-103(1), where the members of the board not participating electronically or by telephone will be meeting and where interested persons and the public may attend, monitor, and participate in the open portions of the meeting.~~

~~(b) Unless otherwise specified in the notice, the anchor location is the main office of the Utah Department of Agriculture and Food, Taylorsville, Utah.~~

~~(3) The board shall provide public notice of the meeting at least 24 hours before the meeting and shall:~~

~~(a) post the agenda at the anchor location; and~~

~~(b) post it on the Public Notice Website.~~

~~(4) The board shall adhere to the following procedures for electronic participation:~~

~~(a) provide notice of the possibility of an electronic meeting to the board members at least 24 hours before the meeting; and~~

~~(b) describe how a member may participate in the meeting electronically or by telephone.~~

~~(5) A member may participate electronically and shall count as present for purposes of a quorum and may fully participate and vote on any matter coming before the board.~~

~~(6) At the commencement of the meeting, or at such time as any member initially appears electronically or by telephone, the chair shall identify for the record those who are appearing by telephone or electronically.~~

~~(7) The chair shall confirm all votes cast by members participating electronically.~~

~~**KEY: cannabis, cannabis production, licensing, Cannabis Production Establishment, Pharmacy Licensing Advisory Board, meetings**~~
~~**Date of Last Change: December 22, 2025**~~
~~**Authorizing, and Implemented or Interpreted Law: 4-2-103; 4-41a-201(2)(a)(ii)]**~~

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58477**
Rule or section number:	**R67-1**

1. Agency Information

Title catchline:	Agriculture and Food, Specialized Product Authority Licensing Board
Building:	TSOB, 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

2. Contact Persons

Name:	**Phone:**	**Email:**
Jeremiah Sniffin	385-443-3344	udaf-spboard@utah.gov
Amber Brown	385 245-5222	ambermbrown@utah.gov

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

3. General Information

A. Rule or section catchline:

R67-1. Electronic Verification System and Inventory Control System Registration, Limitations, and Confidentiality

B. Purpose of the new rule or reason for the change:

This filing enacts a new rule previously under the Utah Department of Health and Human Services (department).

This is due to the passage of HB 389 in the 2026 General Session, which moves all duties related to the medical cannabis program performed by the Utah Department of Health and Human Services (department) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027.

The DHHS rule will be repealed at the same time as or after the UDAF enacts this rule.

C. Summary of the new rule or change:

This new rule is enacted due to HB 389 (2026), which transfers all regulatory authority over the medical cannabis program from the department to UDAF.

This new rule mirrors Rule R383-2, but it updates statute references, updates the rule title, and expands the definition section.

(EDITOR'S NOTE: The proposed repeal of the rule from Title R383 (Utah Department of Health and Human Services, Center for Medical Cannabis) is R383-2, ID 58261, in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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

A. State budget:

There is no anticipated fiscal cost or gain to the state budget from enacting this rule, as program regulation is transferred to UDAF.

There will be no new costs to the state in enforcing this rule.

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

B. Local governments:
There is no anticipated fiscal cost or gain to local governments with the repeal of this rule. Local governments do not regulate this aspect of the medical cannabis program.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal cost or gain to small businesses in the medical cannabis program from this new rule, as UDAF will not change how it regulates the program for these businesses.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
There is no anticipated fiscal cost or gain to non-small businesses in the medical cannabis program from this new rule, as UDAF will not change how it regulates the program for these 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 cost or gain to persons other than small businesses, non-small businesses, state, or local government entities from this new rule, as there are no new compliance costs for these entities resulting from UDAF's enactment of this rule.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons, such as UDAF, resulting from the enactment of this new rule, as it will not have to alter how it regulates the program for any affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 4-2-103(1)(i)	Subsection 26B-4-202(7)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/28/2026

R67. Agriculture and Food, Specialized Product Authority Licensing Board.
R67-1. Electronic Verification System and Inventory Control System Registration, Limitations, and Confidentiality.
R67-1-1. Authority and Purpose.

(1) Subsections 26B-4-202(7) and 4-2-103(1)(i) authorize this rule.
(2) This rule establishes medical cannabis initial and renewal registration procedures for a:
(a) caregiver;
(b) guardian;
(c) patient who is a:
(i) Utah resident; or
(ii) nonresident;
(d) pharmacy medical provider (PMP);
(e) recommending medical provider (RMP); and
(f) RMP proxy.

R67-1-2. Definitions.

(1) Terms used in Sections 4-41a-102 and 26B-4-201 apply to this rule.
(2) "EVS" means the electronic verification system.
(3) "ICS" means the inventory control system.
(4) "Pharmacy agent" means a medical cannabis pharmacy agent.
(5) "RMP proxy" or "recommending medical provider proxy" means an individual who has been given authority to enter certifications and recommendations for an RMP as described in Subsection 26B-4-202(3).
(6) "Safeguard" means to maintain the confidentiality of the information accessed and not use, release, publish, disclose, or otherwise make available to any other person not authorized to access the information, for any purpose other than those specifically authorized or permitted by applicable law.
(7) "Utah resident" means an individual who has established a domicile in Utah.

R67-1-3. System Access Standards.

(1)(a) An individual shall request access to the data in the EVS by completing the procedures listed in Section R67-1-5.
(b) An individual shall request access to the data in the ICS by completing registration as prescribed by the department and Section 4-41a-1106.
(2) The department shall grant limited EVS access according to:
(a) the type of registrant listed in Subsection R67-1-1(2); or
(b) for pharmacy agents, as established in Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis.
(3) The department shall grant access to the extent allowed in:
(a) Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis;
(b) Title 4, Chapter 41a, Cannabis Production Establishments and Pharmacies; and
(c) this rule.

R67-1-4. Confidentiality Requirements.

(1) A person authorized to access information in the EVS or ICS shall only access the minimum amount of information necessary to perform an authorized function, as specified in:

(a) Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis;

(b) Title 4, Chapter 41a, Cannabis Production Establishments and Pharmacies; and

(c) this rule.

(2) A person authorized to access information in the EVS or ICS shall safeguard any information stored in the system.

(3) A person authorized to access the EVS and ICS shall safeguard login credentials and not share those credentials with anyone.

(4) A person authorized to access the EVS and ICS who fails to observe the confidentiality requirements of this rule may:

(a) be subject to the penalties listed in Section 26B-4-202; and

(b) lose access to the EVS or ICS.

R67-1-5. EVS Registration Procedures.

(1) The registration procedures established in this section govern the registrations listed in Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis.

(2) Each registrant shall apply using the EVS application or a paper application requested from the department.

(3) The registration shall be closed if it is not completed within six months.

(4) The department shall provide the information described in Subsection 26B-4-213(9):

(a) electronically to each medical cannabis patient, guardian, or caregiver cardholder; and

(b) publicly on the department website.

(5) Each registrant shall maintain a current email and mailing address with the department.

(6)(a) Renewal time periods shall follow the stipulations in Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis.

(b) The department shall send renewal notices to a registrant's most recent email in the department's EVS database.

(c)(i) The department shall send a renewal notice to a registrant at least 30 days before the registration expiration date.

(ii) For a nonresident patient registrant, the department shall send a renewal notice at least five days before the expiration date.

(d) A renewal notice shall advise a registrant that registration automatically expires on the expiration date and is no longer valid.

(e) A renewal notice shall include instructions for a registrant to renew registration through the department's website.

(f) If a registration expires, the individual with the expired registration may submit a renewal registration at any time.

(7)(a) The department shall provide written notice of revocation to a registrant who submits an initial or renewal registration if the department determines that the registrant does not meet the requirements.

(b) The department shall send the written notice of revocation to the registrant's most recent email address in the EVS database.

(c) The department may reinstate the registrant's registration if the registrant corrects each deficiency and otherwise meets the registration requirements.

KEY: medical cannabis, medical cannabis pharmacy, inventory control system, electronic verification system
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 4-2-103(1)(i); 26B-4-202(7)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58478**
Rule or section number:	**R67-2**

1. Agency Information

Title catchline:	Agriculture and Food, Specialized Product Authority Licensing Board
Building:	TSOB, 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

2. Contact Persons

Name:	Phone:	Email:
Jeremiah Sniffin	385-443-3344	udaf-spboard@utah.gov
Amber Brown	385 245-5222	ambermbrown@utah.gov

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

3. General Information

A. Rule or section catchline:
R67-2. Dosing Guidelines and Partial Filling
B. Purpose of the new rule or reason for the change:
The purpose of this filing is to enact a new rule that was previously under the Utah Department of Health and Human Services (department). This is due to the passage of HB 389 in the 2026 General Session, which moves all duties related to the medical cannabis program performed by the Utah Department of Health and Human Services (department) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027. The DHHS rule will be repealed at the same time as or after the UDAF enacts this rule.
C. Summary of the new rule or change:
This new rule is enacted due to HB 389 (2026), which transfers all regulatory authority over the medical cannabis program from the department to UDAF. This new rule mirrors Rule R383-5, but statute references are changed, the rule title is updated, and the definition section is expanded. (EDITOR'S NOTE: The proposed repeal of the rule from Title R383 (Utah Department of Health and Human Services, Center for Medical Cannabis) is R383-5, ID 58262, in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
There is no anticipated fiscal cost or gain to the state budget from enacting this rule, as program regulation is transferred to UDAF. There will be no new costs to the state in enforcing this rule. Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.
B. Local governments:
There is no anticipated fiscal cost or gain to local governments with the repeal of this rule. Local governments do not regulate this aspect of the medical cannabis program.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal cost or gain to small businesses in the medical cannabis program from this new rule, as UDAF will not change how it regulates the program for these businesses.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
There is no anticipated fiscal cost or gain to non-small businesses in the medical cannabis program from this new rule, as UDAF will not change how it regulates the program for these 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 cost or gain to persons other than small businesses, non-small businesses, state, or local government entities from this new rule, as there are no new compliance costs for these entities resulting from UDAF's enactment of this rule.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons, such as UDAF, resulting from the enactment of this new rule, as it will not have to alter how it regulates the program on any affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 4-2-103(1)(i)	Subsection 26B-4-231(3)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/28/2026

R67. Agriculture and Food, Specialized Product Authority Licensing Board.
R67-2. Dosing Guidelines and Partial Filling.
R67-2-1. Authority and Purpose.

(1) Subsections 26B-4-231(3) and 4-2-103(1)(i) authorizes this rule.

(2) This rule establishes standards for dosing guidelines and partial filling in a medical cannabis recommendation.

R67-2-2. Definitions.

(1) Terms used in Sections 4-41a-102 and 26B-4-201 apply to this rule.

(2) "EVS" means the electronic verification system.

(3) "ICS" means the inventory control system.

(4) "Pharmacy agent" means a medical cannabis pharmacy agent.

R67-2-3. Dosing Guidelines in Medical Cannabis Recommendation.

(1)(a) A recommending medical provider (RMP) may change the dosage form or dosing guidelines for that RMP's patient.

(b) A pharmacy medical provider (PMP) may not change the dosage form or dosing guidelines entered in the EVS by a patient's RMP without approval from the patient's RMP.

(2)(a) If an RMP has not specified the dosage form or dosing guidelines for a patient, a PMP may specify the dosage form and dosing guidelines.

(b) If an RMP does not specify a dosage form and dosing guidelines for a patient, or specifies a dosage form and some or no dosing guidelines for a patient, a PMP may specify the remaining dosing guidelines.

R67-2-4. Partial Filling.

A PMP or pharmacy agent who partially fills a recommendation for a medical cannabis cardholder shall specify in the ICS the:

(1) date of partial fill;

(2) quantity supplied to the cardholder; and

(3) quantity remaining of the recommendation partially filled.

KEY: medical cannabis, medical cannabis dosing guidelines, medical cannabis pharmacy
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 26B-4-231(3); 4-2-103(1)(i)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58479**
Rule or section number:	**R67-3**

1. Agency Information

Title catchline:	Agriculture and Food, Specialized Product Authority Licensing Board
Building:	TSOB, 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

2. Contact Persons

Name:	**Phone:**	**Email:**
Jeremiah Sniffin	385-443-3344	udaf-spboard@utah.gov

Amber Brown	385-245-5222	ambermbrown@utah.gov

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

3. General Information

A. Rule or section catchline:

R67-3. Pharmacy Medical Provider Continuing Education Requirements

B. Purpose of the new rule or reason for the change:

The purpose of this filing is to enact a new rule that was previously under the Utah Department of Health and Human Services (department).

This is due to the passage of HB 389 in the 2026 General Session, which moves all duties related to the medical cannabis program performed by the Utah Department of Health and Human Services (department) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027.

The DHHS rule will be repealed at the same time as or after the UDAF enacts this rule.

C. Summary of the new rule or change:

This new rule is enacted due to HB 389 (2026), which transfers all regulatory authority over the medical cannabis program from the department to UDAF.

This new rule mirrors Rule R383-6, but statute references are changed, the rule title is updated, and the definition section is expanded.

(EDITOR'S NOTE: The proposed repeal of the rule from Title R383 (Utah Department of Health and Human Services, Center for Medical Cannabis) is R383-6, ID 58263, in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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

A. State budget:

There is no anticipated fiscal cost or gain to the state budget from enacting this rule, as program regulation is transferred to UDAF.

There will be no new costs to the state in enforcing this rule.

Fiscal impacts associated with HB 389 (2026) are documented in that bill's fiscal note, available at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

B. Local governments:

There is no anticipated fiscal cost or gain to local governments with the repeal of this rule.

Local governments do not regulate this aspect of the medical cannabis program.

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

There is no anticipated fiscal cost or gain to small businesses in the medical cannabis program from this new rule, as UDAF will not change how it regulates the program for these businesses.

D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
There is no anticipated fiscal cost or gain to non-small businesses in the medical cannabis program from this new rule, as UDAF will not change how it regulates the program for these 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 cost or gain to persons other than small businesses, non-small businesses, state, or local government entities from this new rule, as there are no new compliance costs for these entities resulting from UDAF's enactment of this rule.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons, such as UDAF, resulting from the enactment of this new rule, as it will not have to alter how it regulates the program on any affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-4-219(3)	Subsection 4-2-103(1)(i)	Subsection 26B-4-202(7)

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/28/2026

R67. Agriculture and Food, Specialized Product Authority Licensing Board.
R67-3. Pharmacy Medical Provider Continuing Education Requirements.
R67-3-1. Authority and Purpose.
(1) Subsections 26B-4-202(7), 26B-4-219(3), and 4-2-103(1)(i) authorizes this rule.
(2) This rule establishes pharmacy medical provider (PMP) continuing education requirements.

R67-3-2. Definitions.
(1) Terms used in Sections 4-41a-102 and 26B-4-201 apply to this rule.
(2) "PMP" means a pharmacy medical provider.

R67-3-3. Continuing Education Requirements.
A person registering as a PMP shall complete continuing education:
(1) as outlined in Subsection 26B-4-219(3);
(2) that includes a course containing at least 0.5 hours of education covering current Utah law applicable to the practice of a pharmacy medical provider;
(3) related to cannabis; and
(4) offered from:
(a) the department;
(b) an accredited institution of higher education; or
(c) an organization accredited through:
(i) Accreditation Council for Continuing Medical Education;
(ii) Accreditation Council for Pharmacy Education;
(iii) American Academy of Physician Assistants; or
(iv) American Association of Nurse Practitioners.

KEY: medical cannabis, pharmacy medical providers, marijuana
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 26B-4-207(7); 26B-4-219(3); 4-2-103(1)(i)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58480**
Rule or section number:	**R67-4**

1. Agency Information

Title catchline:	Agriculture and Food, Specialized Product Authority Licensing Board
Building:	TSOB, 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

2. Contact Persons

Name:	**Phone:**	**Email:**
Jeremiah Sniffin	385-443-3344	udaf-spboard@utah.gov
Amber Brown	385 245-5222	ambermbrown@utah.gov

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

3. General Information

A. Rule or section catchline:
R67-4. Expedited Final Review of Compassionate Use Petitions
B. Purpose of the new rule or reason for the change:
The purpose of this filing is to enact a new rule that was previously under the Utah Department of Health and Human Services (department). This is due to the passage of HB 389 in the 2026 General Session, which moves all duties related to the medical cannabis program performed by the Utah Department of Health and Human Services (department) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027. The DHHS rule will be repealed at the same time as or after the UDAF enacts this rule.
C. Summary of the new rule or change:
This new rule is enacted due to HB 389 (2026), which transfers all regulatory authority over the medical cannabis program from the department to UDAF. This new rule mirrors Rule R383-13, but statute references are changed, the rule title is updated, and the definition section is expanded. (EDITOR'S NOTE: The proposed repeal of the rule from Title R383 (Utah Department of Health and Human Services, Center for Medical Cannabis) is R383-13, ID 58264, in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
There is no anticipated fiscal cost or gain to the state budget from enacting this rule, as program regulation is transferred to UDAF. There will be no new costs to the state in enforcing this rule. Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.
B. Local governments:
There is no anticipated fiscal cost or gain to local governments with the repeal of this rule. Local governments do not regulate this aspect of the medical cannabis program.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal cost or gain to small businesses in the medical cannabis program from this new rule, as UDAF will not change how it regulates the program for these businesses.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
There is no anticipated fiscal cost or gain to non-small businesses in the medical cannabis program from this new rule, as UDAF will not change how it regulates the program for these 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 cost or gain to persons other than small businesses, non-small businesses, state, or local government entities from this new rule, as there are no new compliance costs for these entities resulting from UDAF's enactment of this rule.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons, such as UDAF, resulting from the enactment of this new rule, as it will not have to alter how it regulates the program on any affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 4-2-103(1)(i)	Subsection 4-41a-112(5)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/28/2026

R67. Agriculture and Food, Specialized Product Authority Licensing Board.
R67-4. Expedited Final Review of Compassionate Use Petitions.
R67-4-1. Authority and Purpose.

(1) Subsections 4-2-103(1)(i) and Subsection 4-41a-112(5) authorize this rule.

(2) This rule establishes a process and criteria for a petition to the Compassionate Use Board (board) to qualify for expedited final review and approval or denial by the department.

R67-4-2. Definitions.

(1) Terms used in Sections 4-41a-102 and 26B-4-201 apply to this rule.

(2) "RMP" means a recommending medical provider.

R67-4-3. Availability of Expedited Review.

To qualify for expedited review by the department, an individual submitting the petition must:

(1) be diagnosed with a terminal illness;

(2) have a life expectancy of six months or less;

(3) present symptoms not adequately managed with standard therapies that may reasonably be expected to be alleviated by medical cannabis; and

(4) have a recommendation from an RMP who is directly and regularly involved in the individual's medical care.

R67-4-4. Expedited Review Procedure.

(1) Each individual submitting a petition for expedited review by the department shall complete a form available from the department.

(2) The board may not review a petition until the form is complete and any supporting documentation requested by the board is received.

(3) Within five business days after receiving a complete petition for expedited review, the licensing board shall review the petition and either approve or deny the request for expedited review.

(4) If the department approves the petition, the department shall issue a medical cannabis card to the applicant.

(5) If the department denies the petition for expedited review, the department shall:

(a) send notice of the denial to the applicant; and

(b) send the petition for compassionate use to the board for review on its regular review schedule.

KEY: medical cannabis, compassionate use board, medical marijuana
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 4-2-103(1)(i); 4-41a-112(5)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58481**
Rule or section number:	**R67-5**

1. Agency Information

Title catchline:	Agriculture and Food, Specialized Product Authority Licensing Board
Building:	TSOB, 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

2. Contact Persons

Name:	Phone:	Email:
Jeremiah Sniffin	385-443-3344	udaf-spboard@utah.gov
Amber Brown	385 245-5222	ambermbrown@utah.gov

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

3. General Information

A. Rule or section catchline:

R67-5. Compassionate Use Board Administrative Hearing Procedure

B. Purpose of the new rule or reason for the change:

The purpose of this filing is to enact a new rule that was previously under the Utah Department of Health and Human Services (department).

This is due to the passage of HB 389 in the 2026 General Session, which moves all duties related to the medical cannabis program performed by the Utah Department of Health and Human Services (department) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027.

The DHHS rule will be repealed at the same time as or after the UDAF enacts this rule.

C. Summary of the new rule or change:

This new rule is enacted due to HB 389 (2026), which transfers all regulatory authority over the medical cannabis program from the department to UDAF.

This new rule mirrors Rule R383-15, but statute references have changed, the rule title has been updated, and the definition section has been expanded.

(EDITOR'S NOTE: The proposed repeal of the rule from Title R383 (Utah Department of Health and Human Services, Center for Medical Cannabis) is R383-15, ID 58265, in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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

A. State budget:

There is no anticipated fiscal cost or gain to the state budget from enacting this rule, as program regulation is transferred to UDAF.

There will be no new costs to the state in enforcing this rule.

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, available at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

B. Local governments:

There is no anticipated fiscal cost or gain to local governments with the repeal of this rule.

Local governments do not regulate this aspect of the medical cannabis program.

C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal cost or gain to small businesses in the medical cannabis program from this new rule, as UDAF will not change how it regulates the program for these businesses.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
This new rule is not expected to create any fiscal cost or gain for non-small businesses, as UDAF will not change how it regulates the program for these 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 cost or gain to persons other than small businesses, non-small businesses, state, or local government entities from this new rule, as there are no new compliance costs for these entities resulting from UDAF's enactment of this rule.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons, such as UDAF, resulting from the enactment of this new rule, as it will not have to alter how it regulates the program on any affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-4-202	Subsection 4-2-103(1)(i)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/28/2026

R67. Agriculture and Food, Specialized Product Authority Licensing Board.
R67-5. Compassionate Use Board Administrative Hearing Procedure.
R67-5-1. Authority and Purpose.

(1) Section 63G-4-202 and Subsection 4-2-103(1)(i) authorizes this rule.

(2) This rule governs administrative appeals from decisions made by the Compassionate Use Board (board).

R67-5-2. Definitions.

Terms used in this rule are defined in Section 26B-4-201.

R67-5-2. Form of Proceeding.

Adjudicative proceedings brought against the board shall be informal adjudicative proceedings.

R67-5-3. Availability of Hearing.

(1) When the board recommends denial of a petition pursuant to Subsection 4-41a-112(6), the petitioner may request a hearing within 15 calendar days of receipt of the notice of agency action.

(2) A party who fails to request a hearing within 15 calendar days of receipt of the notice of agency action shall have no right to an administrative hearing or judicial review of the agency action, unless the party can demonstrate, by a preponderance of the evidence, that it was virtually impossible or unreasonably burdensome to file the request within 15 calendar days.

R67-5-4. Qualifications for Presiding Officer.

The presiding officers for administrative hearings involving a decision of the board shall be the Specialized Product Authority Licensing Board.

R67-5-5. Settlement Agreements.

Before issuing a final decision and order, the parties may enter into a settlement agreement resolving the entirety, or any part, of the adjudicative proceeding.

KEY: medical cannabis, compassionate use board, medical marijuana
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 63G-4-202; 4-2-103(1)(i)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58482**
Rule or section number:	**R67-6**

1. Agency Information

Title catchline:	Agriculture and Food, Specialized Product Authority Licensing Board
Building:	TSOB, 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

2. Contact Persons

Name:	Phone:	Email:
Jeremiah Sniffin	385-443-3344	udaf-spboard@utah.gov
Amber Brown	385-245-5222	ambermbrown@utah.gov

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

3. General Information

A. Rule or section catchline:

R67-6. Informal Adjudicative Proceedings and Appeals

B. Purpose of the new rule or reason for the change:

The purpose of this filing is to enact a new rule that dictates the appeal hearing process for the Specialized Product Authority Licensing Board (board).

This is due to the passage of HB 389 in the 2026 General Session, which created this board within the Utah Department of Agriculture and Food (UDAF).

Per Subsection 4-41a-201.1(12)(b), the board must create a rule explaining how the board will process appeals to authoritative action.

C. Summary of the new rule or change:

This new rule establishes the administrative appeal process for the specialized products division.

It describes the appeal process for informal adjudicative proceedings and appeals to the specialized products authority licensing board.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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

A. State budget:

Enacting this rule is not expected to create a fiscal cost or gain to the state budget.

UDAF will not incur any operating costs from enacting this rule because funding is already in place for the board to conduct administrative appeals.

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

B. Local governments:

There is no anticipated fiscal cost or gain to local governments with the enactment of this rule.

Local governments do not regulate this aspect of the medical cannabis program.

C. Small businesses ("small business" means a business employing 1-49 persons)**:**
It is inestimable to evaluate the fiscal impact on small businesses within the medical cannabis program with the enactment of this new rule. This is because it is unknown how much it will cost a small business submitting an appeal to the board.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
It is inestimable to evaluate the fiscal impact on non-small businesses within the medical cannabis program with the enactment of this new rule. This is because it is unknown how much it will cost a small business submitting an appeal to the board.
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 inestimable to evaluate the fiscal impact on persons other than small businesses, non-small businesses, state, or local governments with the enactment of this new rule. This is because it is unknown how much it will cost a person to prepare and submit an appeal to the board.
F. Compliance costs for affected persons:
It is inestimable to evaluate the compliance costs for affected persons. The enactment of this rule changes the previous practice for submitting an appeal. It is difficult to estimate how an affected person may be impacted fiscally by adhering to this new rule when submitting an appeal to the board.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$0	$0	$0	$0	$0
Local Governments	$0	$0	$0	$0	$0
Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Non-Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Other Persons	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$0	$0	$0	$0	$0
Local Governments	$0	$0	$0	$0	$0
Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Non-Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Other Persons	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 4-2-103(1)(i)	Subsection 4-41a-201.1(12)(b)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/28/2026

R67. Agriculture and Food, Specialized Product Authority Licensing Board.
R67-6. Informal Adjudicative Proceedings and Appeals.
R67-6-1. Authority and Purpose.

(1) Subsection 4-41a-201.1(12)(b) and Subsection 4-2-103(1)(i), authorizes this rule.

(2) The purpose of this rule is to establish procedures for informal adjudicative proceedings involving administrative actions of the specialized products division.

R67-6-2. Definitions.

(1) Terms used in Sections 4-41a-102 and 26B-4-201 apply to this rule.

(2) "Division" means the specialized products division.

(3) "Division action" means an order, citation, penalty, or other agency action for which administrative review is authorized by law.

(4) "Informal adjudicative proceeding" means a proceeding designated as informal pursuant to Section 63G-4-202 and conducted pursuant to Section 63G-4-203 and this rule.

(5) "Party" has the meaning provided in Section 63G-4-103.

(6) "Presiding officer" means the director of administrative appeals, the specialized product authority licensing board when authorized by statute, or another person designated by the department who is authorized to conduct the proceeding and issue an order.

(7) "Respondent" means a person requesting administrative review of an appealable division action.

(8) "Staff report" means the written summary prepared by division staff describing the agency action, relevant facts, applicable law, and evidence.

R67-6-3. Commencement of Proceedings.

(1) An agency-initiated proceeding shall commence through issuance of a notice of agency action that complies with Section 63G-4-201.

(2) A person seeking review of an appealable division action shall file a request for agency action using the division's appeal form or another written submission containing substantially the same information.

(3) An appeal shall be filed within 30 calendar days after issuance of the division action being appealed.

(4) An appeal is considered filed on the date it is:

(a) personally delivered to the department;

(b) postmarked, if submitted by United States mail;

(c) received by the department; or

(d) received electronically at an address or electronic filing system designated by the division.

(5) The appeal shall include:

(a) a concise statement explaining the basis for the appeal;

(b) copies of documents the respondent wishes the presiding officer to consider that are not already in the division's possession;

(c) identification of the division action being appealed;

(d) the agency case or reference number;

(e) the date of the division action;

(f) the respondent's name and contact information;

(g) the respondent's signature or authorized electronic certification; and
(h) the specific relief requested.
(6) A copy of the division action being appealed shall accompany the appeal when available.

R67-6-4. Administrative Review and Scheduling.
(1) Upon receipt of a timely appeal, the licensing board shall determine whether:
(a) the action is appealable;
(b) the matter is designated for informal adjudication; and
(c) the submission contains sufficient information to identify the action being appealed.
(2) The presiding officer may permit a respondent to correct a deficient filing within seven calendar days.
(3) The presiding officer shall provide the parties with notice of the date, time, location, and method of the hearing.
(4) Before the hearing, the division shall send the licensing board the staff report.
(5) A hearing may be conducted:
(a) by telephone;
(b) by videoconference;
(c) in person; or
(d) through another method reasonably calculated to provide all parties a meaningful opportunity to participate.

R67-6-5. Failure to Appear.
(1) If a respondent fails to appear or participate after receiving proper notice, the presiding officer may:
(a) dismiss the appeal;
(b) enter an order based upon the available record;
(c) proceed in the respondent's absence; or
(d) take another action authorized by law.
(2) The presiding officer may set aside a dismissal or default for good cause.

R67-6-6. Standard and Scope of Review.
(1) Unless a different standard is established by statute, the presiding officer shall determine whether the division action is supported by the applicable law and the facts contained in the administrative record as determined by the licensing board.
(2) The respondent bears the burden of establishing entitlement to relief from the challenged division action unless applicable law assigns the burden otherwise.
(3) The licensing board shall apply a preponderance of evidence standard when making findings of fact regarding division actions.

R67-6-7. Order.
(1) Within ten business days after the proceeding closes, the presiding officer shall issue a signed written order.
(2) The order shall contain:
(a) identification of the proceeding and parties;
(b) notice of any available administrative or judicial review;
(c) the applicable deadline for seeking further review;
(d) the applicable statutes and administrative rules;
(e) the decision;
(f) the disposition of the appeal;
(g) the material facts relied upon; and
(h) the reasons for the decision.
(3) The presiding officer may:
(a) affirm the division action;
(b) modify the division action;
(c) order another remedy authorized by law;
(d) remand the matter to division staff for additional action;
(e) rescind or reduce a penalty when authorized by law; or
(f) reverse the division action.
(4) The order shall be based upon facts appearing in the agency's files and facts presented during the proceeding.
(5) The department shall promptly provide a copy of the order to each party.

R67-6-8. Agency Review.
Agency review shall follow the stipulations of Section R51-2-7.

R67-6-9. Judicial Review.
(1) A party may seek judicial review of final agency action as provided by Title 63G, Chapter 4, Part 4, Judicial Review, and any applicable program-specific statute.
(2) Licensing decisions are not eligible for judicial review as determined by Chapter 4-41a.

KEY: medical cannabis; appeals
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 4-2-103(1)(i); 4-41a-201.1(12)(b)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58483**
Rule or section number:	**R67-7**

1. Agency Information

Title catchline:	Agriculture and Food, Specialized Product Authority Licensing Board
Building:	TSOB, 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

2. Contact Persons

Name:	Phone:	Email:
Jeremiah Sniffin	385-443-3344	udaf-spboard@utah.gov
Amber Brown	385-245-5222	ambermbrown@utah.gov

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

3. General Information

A. Rule or section catchline:

R67-7. Medical Cannabis Patient Vouchers

B. Purpose of the new rule or reason for the change:

This filing enacts a new rule describing the requirements of the medical cannabis patient voucher program, as set forth in Section 26B-4-248.

This is due to the passage of SB 121 in the 2026 General Session, which created the patient voucher program.

C. Summary of the new rule or change:

This new rule further expands upon the requirements for the medical cannabis patient voucher program established in Section 26B-4-248.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 121 (2026 General Session)

5. Fiscal Information

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

A. State budget:

Enacting this rule is not expected to create a fiscal cost or gain to the state budget.

Fiscal impacts associated with SB 121 (2026) are captured in that bill's fiscal note, which can be viewed at: https://le.utah.gov/~2026/bills/static/SB0121.html

B. Local governments:
This rule is not expected to create any fiscal cost or gain for local governments. Local governments do not regulate this aspect of the medical cannabis program.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal cost or gain to small businesses beyond what is associated with SB 121 (2026).
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
There is no anticipated fiscal cost or gain to non-small businesses beyond what is associated with SB 121 (2026).
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 cost or gain to persons other than small businesses, non-small businesses, state, or local governments beyond what is associated with SB 121 (2026).
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons beyond what is associated with SB 121 (2026).

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-4-248(4)		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/28/2026

R67. Agriculture and Food, Specialized Product Authority Licensing Board.
R67-7. Medical Cannabis Patient Vouchers.
R67-7-1. Authority and Purpose.

(1) This rule is authorized under Subsection 26B-4-248(4).

(2) This rule establishes operating standards and requirements to be followed by a non-profit entity that is awarded a grant to issue patient vouchers.

R67-7-2. Definitions.

Terms used in Sections 4-41a-102 and 26B-4-201 apply to this rule.

(1) "Fiscal Year" means the time period beginning on July 1 of any given year and ending on June 30 of the subsequent year.

(2) "Non-profit entity" means

(a) an entity incorporated under Title 16, Chapter 6a, Utah Revised Nonprofit Corporation Act; and

(b) an entity that does not hold a license or has an ownership interest in a:

(i) medical cannabis pharmacy;

(ii) cannabis processing facility; or

(iii) cannabis cultivation facility.

(3) "Voucher" refers to an allotment given to a patient to use at a medical cannabis pharmacy.

R67-7-3. Awarding the Grant.

(1) The department shall evaluate applications using criteria established in the grant solicitation. Consideration is given to entities that are able to clearly demonstrate in their operating plan:

(a) an ability to keep patient information secure;

(b) processes in place to prevent fraud; and

(c) processes in place to comply with department audits.

(2) The department shall award the grant up to a two-year term ending at the conclusion of the fiscal year with an option to extend based on adherence to:

(a) an approved operating plan; and

(b) state law.

(3)(a) The department may grant a maximum of two extensions.

(b) Each extension shall last one fiscal year.

(c) An applicant renewal or extension shall include information that has changed from their original application or approved operating plan.

R67-7-4. Allocation and Utilization of Funds.

(1) The department shall notify the non-profit entity of available funds by the beginning of each fiscal year.

(2) Funds are made available to the non-profit entity each year by July 30.

(3) Unused funds given to the non-profit entity shall not lapse at the end of the fiscal year but shall remain available for patient vouchers in the next fiscal year.

(4) The individual patient account may not exceed $150.

(5) The non-profit entity shall ensure vouchers can be redeemed:

(a) for medical cannabis products, state transaction fees, or delivery fees;

(b) regardless of sales, discounts, or promotional pricing; and
(c) at any licensed medical cannabis pharmacy within the state.
(6) The non-profit organization shall maintain grant funds separately from all other organizational funds.

R67-7-5. Reporting Requirements.
(1) Quarterly reports shall be submitted to the department within 30 days of the end of each quarter.
(2) Quarterly reports shall include:
(a) application denials that include:
(i) number of denials;
(ii) appeals filed; and
(iii) appeals granted.
(b) average processing time;
(c) average reimbursement time;
(d) fiscal balance;
(e) number of applications pending;
(f) number of patient applications received;
(g) pharmacies that received vouchers which include:
(i) amount of money each patient used; and
(ii) total amount paid to each pharmacy each month; and
(h) vouchers issued and redeemed per patient; that shall include:
(i) EVS patient ID numbers of all patients given vouchers;
(ii) month of issuance; and
(iii) voucher amount.

R67-7-6. Retention of Records.
(1) The non-profit entity shall retain patient applications, eligibility verifications, and reports for seven years from the time the applicant was last active.
(2)(a) After seven years, the organization shall destroy these records.
(b) The non-profit entity shall report to the department when and how the records were destroyed.

R67-7-7. Operating Plan.
(1) The non-profit entity shall submit an operating plan that meets the requirements described in Section 26B-4-248. Additionally, the plan shall outline the following information.
(a) A description of how and when the funds will be distributed to the pharmacies.
(b)(i) Conflicts of interest between it and all employees, specifically conflicts of interest involving:
(A) independent cannabis testing laboratories;
(B) medical cannabis cultivators;
(C) medical cannabis pharmacies;
(D) medical cannabis processors; or
(E) the department.
(ii) The non-profit entity shall notify the department if a conflict of interest exists, as well as the remedy to ensure it does not hinder the program
(c) Eligibility verification methods:
(i) criteria that the non-profit entity will use to determine how many vouchers a patient receives every year;
(ii) criteria that will be used to determine which patients will receive vouchers;
(iii) how a patient will apply;
(iv) how Medicare and Medicaid enrollment will be verified;
(v) how often eligibility will be verified; and
(vi) procedures for accommodating patients with accessibility requirements.
(d) Governance structure that includes:
(i) an organizational chart;
(ii) articles of incorporation;
(iii) bylaws;
(iv) continuity of operations plan;
(v) list and job titles of responsible individuals; and
(vi) succession and vacancies plan.
(e) Privacy and security:
(i) identifiable health information privacy training plan for staff with access to patient information;
(ii) methods for fraud prevention;
(iii) methods for safeguarding individually identifiable health information; and
(iv) steps for addressing a data loss event.

(f) Procedures for patient and customer access:
(i) ADA accommodations;
(ii) complaint intake procedure;
(iii) customer service standards; and
(iv) multilingual access.
(g) The appeal process for an applicant with a denied or revoked voucher request which shall include:
(i) non-profit's actions for the appeal being upheld or overturned;
(ii) steps for appeal; and
(iii) timeframe for appeal.
(h) Voucher distribution process:
(i) how they will generate and distribute vouchers;
(ii) how pharmacies will verify the validity of vouchers; and
(iii) void procedures.
(2) Any proposed changes to the operating plan shall be communicated to the department for approval before making any changes.

R67-7-8. Denials and Appeals Procedure.
If a patient is denied a voucher, the non-profit entity shall provide the patient:
(1) a written notice;
(2) the reason for denial; and
(3) how the patient can appeal the denial.

R67-7-9. Audit Procedure.
(1)(a) The department may conduct announced or unannounced audits of the non-profit entity.
(b) The non-profit entity shall allow access to:
(i) financial records;
(ii) invoices;
(iii) patient verification records;
(iv) voucher records; and
(v) any other requested documents.
(c) If a non-profit entity is audited by someone other than the department, the non-profit entity shall provide the report findings to the department.

R67-7-9. Grant Termination.
(1) The department may terminate a non-profit entity's contract for the following reasons:
(a) failure to maintain non-profit status;
(b) favoritism;
(c) fraud;
(d) insolvency;
(e) misuse of funds;
(f) repeated reporting failures;
(g) security violations; or
(h) any other reason determined by the department to be detrimental to the program or patients.
(2) A 90-day notice is required if the non-profit entity cannot fulfill the requirements and would like to terminate the grant, unless the non-profit entity is no longer able to operate due to unforeseen circumstances, in which case it shall notify the department as soon as possible.
(3) Any remaining funds will be returned to the department within 30 days of the grant termination.

KEY: medical cannabis, medical marijuana
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 26B-4-248(4)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58484**
Rule or section number:	**R67-8**

1. Agency Information

Title catchline:	Agriculture and Food, Specialized Product Authority Licensing Board
Building:	TSOB, 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

2. Contact Persons

Name:	Phone:	Email:
Jeremiah Sniffin	385-443-3344	udaf-spboard@utah.gov
Amber Brown	385-245-5222	ambermbrown@utah.gov

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

3. General Information

A. Rule or section catchline:

R67-8. Application Review Process

B. Purpose of the new rule or reason for the change:

This filing enacts a new rule that establishes the application process for a medical cannabis pharmacy, closed-door medical cannabis pharmacy, medical cannabis couriers, and a cannabis cultivation facility to the Specialized Product Authority Licensing Board (SPALB).

This is due to the passage of HB 389 in the 2026 General Session, which created this board within the Utah Department of Agriculture and Food (UDAF).

Parts of this rule are implemented from Rule R66-9 Cannabis Licensing Process. With the implementation of HB 389 (2026), the specialized products division of UDAF no longer has application review authority, as this is now part of the SPALB.

C. Summary of the new rule or change:

This new rule implements the application review process seen in Subsections R66-9-2(8) through (11), Section R66-9-4, and Section R66-9-5 for the specialized product authority licensing board.

This rule describes the application process to the specialized product authority licensing board.

(EDITOR'S NOTE: The proposed repeal of Rule R66-9 is under ID 58535 in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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

A. State budget:

Enacting this rule is not expected to create a fiscal cost or gain to the state budget.

UDAF will not incur any operating costs from enacting this rule because funding is already in place for the Specialized Product Authority Licensing Board to conduct application reviews.

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

B. Local governments:

Enacting this rule is not expected to create any fiscal cost or gain for local governments.

Local governments do not regulate this aspect of the medical cannabis program.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
This rule is not expected to create fiscal costs or gains for small businesses. The application submission process will not change for small businesses.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
This rule is not expected to create fiscal costs or gains for non-small businesses. The application submission process will not change for 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 new rule is not expected to create fiscal costs or gains for persons other than small businesses, non-small businesses, state, or local governments. These entities already have to adhere to Rule R66-9. The application process under that rule will not change for these entities under this new rule.
F. Compliance costs for affected persons:
Affected persons will incur no compliance costs with the enactment of this new rule. Applicants submitting applications to the SPALB will not have to alter how they submit applications, as this process is being implemented from Rule R66-9.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-201(a)(ii)	Subsection 4-41a-1206(10)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/28/2026

R67. Agriculture and Food, Specialized Product Authority Licensing Board.
R67-8. Application Review Process.
R67-8-1. Authority and Purpose.

(1) Subsections 4-41a-201(2)(a)(ii) and 4-41a-1206(10) authorize this rule.

(2) The purpose of this rule is to establish a process for a medical cannabis production establishment, pharmacy, or courier to apply to receive a license from the specialized product authority licensing board.

R67-8-2. Definitions.

(1) Terms used in Sections 4-41a-102 and 26B-4-201 apply to this rule.

(2) "Applicant" means a medical cannabis pharmacy, medical cannabis cultivator, closed door medical cannabis pharmacy, medical cannabis courier, a cannabis cultivation facility, a cannabis processing facility, or an independent cannabis testing laboratory submitting an initial or renewal application.

R67-8-3. Application Process.

(1) The licensing board shall consider a license application only after an applicant meets the following conditions:

(a) submits a complete application, including documents and supplemental materials required on the department's application checklist;

(b) pays the required application fee; and

(c) a department official conducts a review as described in Section R67-8-4.

(2) The department shall forward the application information and any other relevant information to the licensing board to aid in the license determination.

(3) The licensing board will follow the process outlined in Subsection 4-41a-201.1(6) in considering the application.

R67-8-4. Licensing Board Review-Licenses with Limited Availability.

(1) If the department solicits applications for a limited number of licenses, the licensing board shall score complete applications that meet the requirements of Subsection R67-8-3(1) and Section R67-8-4.

(2)(a) The licensing board shall issue licenses to those applicants with the highest score, depending on how many licenses are available.

(b) The licensing board may change an application score before or after a presentation from applicants.

(3) The licensing board may consider the following factors in determining whether to issue grant cannabis production establishment licenses:

(a) the applicant's ability to be compliant within their operating plan;

(b) the applicant's anticipated pricing structure;

(c) the applicant's experience in the medical cannabis industry;

(d) the timeline under which each phase of the applicant's business will be operational;

(e) other factors determined by the department or the licensing board; and

(f) the factors required under Title 4, Chapter 41a, Part 2, Cannabis Production Establishment, and Title 4, Chapter 41a, Part 10, Medical Cannabis Pharmacy License.

(4) In addition to the factors listed in Subsection 4-41a-1206(7), the licensing board shall approve locations for closed-door medical cannabis pharmacies based on:
(a) patient needs;
(b) the applicant's anticipated pricing structure;
(c) the applicant's operating plan; and
(d) the existence of a policy allowing the Pharmacist in Charge (PIC) to determine pharmacy inventory.
(5) The licensing board may conduct face-to-face interviews with an applicant if needed, to determine the best qualified applicant for the licenses that will be issued.
(6) If the licensing board discussion necessitates changing an applicant's initial score, the licensing board shall document the reason for the change.

R67-8-5. Public Hearing.
(1) The licensing board shall make licensing determinations during a public hearing where each application is considered.
(2) The licensing board shall allow prospective applicants to make a presentation at the public hearing in which their application is considered.
(3) The licensing board shall notify the prospective applicant a minimum of ten business days before the public hearing where their application is being considered.
(4) The licensing board may limit the time available for presentations by the applicants.

R67-8-6. Final Inspection.
Before operating, the department shall inspect the proposed premises to determine if the applicant complies with state laws and rules.

KEY: cannabis, cannabis production, licensing, cannabis production establishment, pharmacy licensing
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 4-41a-201(2)(a)(ii); 4-41a-1206(10)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58459**
Rule or section number:	**R68-7**

1. Agency Information

Title catchline:	Agriculture and Food, Plant Industry
Building:	TSOB South Bldg, 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

2. Contact Persons

Name:	Phone:	Email:
Amber Brown	385-245-5222	Ambermbrown@utah.gov
Camille Knudson	801-597-6010	Camillek@utah.gov
Rob Hougaard	801 791-2746	Rhougaard@utah.gov

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

3. General Information

A. Rule or section catchline:
R68-7. Utah Pesticide Control Rule
B. Purpose of the new rule or reason for the change:
The Department of Agriculture and Food (department) is updating this rule to align it with the legislative changes enacted under SB 26 (passed in the 2026 General Session).

SB 26 (2026) repeals the "qualifying party" licensing requirements and revises Section 4-14-112 to establish permit requirements for Ornamental and Turf Technicians and Pesticide Salespersons.
C. Summary of the new rule or change:
This filing amends the rule to align with SB 26 (2026) legislative changes and guidelines in the Rulewriting Manual for Utah. The proposed changes repeal qualifying party provisions throughout this rule, including the definition of qualifying party, certification procedures, licensing requirements, and related business operational duties. This filing establishes the Ornamental and Turf Technician, and Pesticide Salesperson permits in Section R68-7-10 that include application, examination, training, and renewal requirements. Finally, the proposed changes update the Unlawful Acts (Section R68-7-20) and Penalties (Section R68-7-21) sections to align with the new permit requirements and the recently revised department Rule R51-2 for compliance actions and citations.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 26 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
The proposed changes will not impact on the state's budget because any fiscal impact was accounted for in the fiscal note during the general session.
B. Local governments:
The proposed changes will not impact on local governments because any fiscal impact was accounted for in the fiscal note during the general session.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
The proposed changes will not impact on small businesses because any fiscal impact was accounted for in the fiscal note during the general session.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
The proposed changes will not impact on non-small businesses because any fiscal impact was accounted for in the fiscal note during the general session.
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 impact on other persons because any fiscal impact was accounted for in the fiscal note during the general session.
F. Compliance costs for affected persons:
The compliance costs are not changing.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	$0	$0	$0	$0	$0
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	$0	$0	$0	$0	$0
Net Fiscal Benefits	$0	$0	$0	$0	$0

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 4-14-106		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/30/2026

R68. Agriculture and Food, Plant Industry.
R68-7. Utah Pesticide Control Rule.
R68-7-1. Authority.

Promulgated under authority of Section 4-14-106.

R68-7-2. Definitions.

Terms defined in Section 4-14-102 and the following shall apply for this rule.

(1) "Commercial pesticide applicator" means any person who uses or applies pesticides for hire or compensation, or who makes pesticidal claims, remedies, or advertises for hire or compensation, or who solicits the use of pesticides for hire or compensation.

(2) "Commercial pesticide business license" means a license issued by the department to a business responsible for supervising commercial pesticide applicators employed to apply pesticides on a commercial basis.

(3) "Department" means the Utah Department of Agriculture and Food

(4) "EPA WPS" means the U.S. Environmental Protection Agency (EPA) Worker Protection Standard, or the standards described in 40 CFR 170, as of January 2, 2017, which is incorporated by reference.

(5) "EPA WPS Trainer" means a certified pesticide applicator of any type who trains workers and handlers in the WPS requirements and may also be a graduate of an EPA approved WPS Train the Trainer Program.

(6) "Good standing" means a person has no outstanding infractions with the department and does not owe money to the department. A person who has resolved their infractions, entered into and complying with a settlement agreement with the department or who has not exhausted their rights to appeal are potentially excluded from this categorization with department approval.

(7) "Licensee" means the holder of a pesticide applicator license or a commercial pesticide business license issued by the department or a restricted use pesticide dealer.

(8) "Non-commercial pesticide applicator" means any person working as an employee of any entity, firm, or government agency who uses or demonstrates the use of any restricted use pesticide on the entity's property, or any property occupied, managed, or under the direction or authority of any entity, firm, or government agency, and does not require a commercial pesticide applicator's license.

(9) "Pesticide" means the same as the term is defined in Section 4-14-102.

(10) "Pesticide applicator" or "applicator" means a person who:

(a) applies or supervises the application of a pesticide; or

(b) is required by Title 4, Chapter 14, Utah Pesticide Control Act, to have a license.

(11) "Person" means an individual or entity

(12) "Private pesticide applicator" means any person who uses, or supervises the use of, any restricted use pesticide for producing any agricultural commodity on private property owned, rented, or leased by the pesticide applicator, or on [~~the~~]private property of another, if applied without compensation.

[~~(13) "Qualifying party" means the same as the term is defined in Section 4-14-102.~~]

(13[~~4~~]) "Registrant" means the company responsible for the registration of a pesticide product.

(14[~~5~~]) "Restricted use pesticide" or "RUP" means any pesticide or pesticide use restricted by the administrator of EPA or by the department.

R68-7-3. Registration of Products.

Pesticide products distributed in Utah shall be registered annually with the department.

(1) Application for registration shall be made to the department on the department website, or on forms prepared and provided by the department, and shall include the following information:

(a) the name, address, telephone number, and email address of the registrant, and the name, address, telephone number, and email address of the company whose name will appear on the label, if other than the registrant;

(b) the name of the pesticide product, including the EPA Registration Number;

(c) a list of the active ingredients;

(d) if the product is an RUP, a general use pesticide, or a product claiming a Federal Insecticide, Fungicide, and Rodenticide Act of 1972 (FIFRA), 7 U.S.C Section 136 *et seq.* Section 25(b) exemption; and

(e) a complete copy of the pesticide product label as it will appear on the pesticide product.

(2) The burden shall be on the registrant to notify the department of any changes to their contact information within 30 days.

(3) The department may require submission of the complete formula of any pesticide if it is deemed necessary for the administration of Title 4, Chapter 14, Utah Pesticide Control Act, FIFRA, or to enforce EPA requirements and guidelines.

(4) The product shall be registered if:

(a) it appears to the department that the composition of the product warrants the proposed claims for the product; and

(b) the product, its labeling, and any other information that may be required to be submitted, complies with the requirements of Title 4, Chapter 14, Utah Pesticide Control Act, FIFRA, and EPA rules, requirements, and guidelines

(5) The registrant is responsible for the accuracy and completeness of the information submitted concerning any application for the registration of a pesticide product.

(6) Once a pesticide product is registered no further state registration other than annual renewal is required, provided:

(a) the product remains in the manufacturer's or registrant's original container; and

(b) the claims made for it, the directions for its use, and other labeling information does not differ in substance from the representations made in connection with the registration.

(7) If the name of a pesticide product is changed or there are changes in the product ingredients, a new registration is required. Other labeling changes do not require a new registration, but the registrant shall submit copies of any changes to the department as soon as they are effective.

(8) If a registered pesticide product is to be discontinued for any reason, except when suspended or canceled by the EPA, the licensee shall provide notice of discontinuation to the department.

(a) The department requires that a product be registered for a two-year discontinuation period starting from the date of the notice of discontinuation.

(b) If a product is found in commercial trade after the discontinuation period, the department shall require that the registrant register the product as outlined in Section 4-14-103.

(c) If a product is suspended or canceled by the EPA, the product shall be removed as quickly as reasonably possible from sale in Utah.

(9) The department may exempt, in its sole discretion, any pesticide that is determined either:

(a) to be adequately regulated by a federal agency; or

(b) to be of a character that is not subject to FIFRA.

(10) A registrant who desires to register a pesticide to meet special local needs pursuant to FIFRA Section 24(c) shall comply with Section 4-14-103.

(11) No registration is required for a pesticide distributed in Utah pursuant to an experimental use permit issued by the EPA or under Section 4-14-105.

(12) A registration fee determined by the department, pursuant to Subsection 4-2-103(2), shall be paid annually for each product.

(13) Each registration is renewed for a period of one year upon payment of the annual renewal fee determined by the department, pursuant to Subsection 4-2-103(2). The renewal fee shall be paid on or before June 30 of each year. If the renewal of a pesticide registration is not received before July 1 of each year, an additional fee determined by the department, pursuant to Subsection 4-2-103(2), shall be assessed and added to the original registration fee, and shall be paid by the applicant before the registration renewal for that pesticide will be issued.

R68-7-4. Product Labeling.

(1) Each container of pesticide distributed in Utah shall bear a label showing the information set forth in Section 4-14-104.

(2) Each pesticide label shall contain the statements, words, graphic material, and any other information required by the EPA in 40 CFR 156.

R68-7-5. Classification of Pesticides.

(1) The department shall classify each pesticide product registered in Utah for either restricted use or general use according to standards consistent with FIFRA Section 3.

(2) The department may also classify other substances as pesticides or restrict the use of any substance as a pesticide if the department determines, in its sole discretion, that such a substance may pose a risk to the health or safety of the public or the environment.

(3) Restricted use pesticides shall not be used by any person that does not have a valid pesticide applicator license with the appropriate category for its use, except they may be used by:

(a) a pesticide handler, supervised by a certified pesticide applicator under the EPA WPS and who meets the qualifications in Subsection R68-7-6(6); or

(b) a pesticide handler acting upon an Emergency Use Permit issued under this rule.

R68-7-6. Certification of Pesticide Applicators.

(1) A pesticide applicator shall be certified by the department as a commercial pesticide applicator, non-commercial pesticide applicator, or a private pesticide applicator.

(2) A pesticide applicator shall comply with FIFRA and Title 4, Chapter 14, Utah Pesticide Control Act.

(3) A pesticide applicator shall follow the directions on a pesticide product label.

(4) A pesticide applicator shall be at least 18 years of age.

(5) A certified pesticide applicator may use restricted use, general use, or any other classification of pesticide, including FIFRA Section 25(b) products.

(6) A person who is at least 16 years of age may apply restricted use pesticides while under the direct supervision of a certified pesticide applicator, who is also an immediate family member, according to the family exemption of the EPA WPS, if they only apply pesticides on the privately owned agricultural establishment of a certified pesticide applicator who is also an immediate family member.

(7) An EPA WPS trainer is a certified pesticide applicator of any type who trains workers and handlers in the WPS requirements under 40 CFR 170.

(8) An EPA WPS trainer may also be a graduate of an EPA approved WPS Train the Trainer Program, as set forth in 40 CFR 170.

(9) Commercial and non-commercial EPA WPS trainers shall have the Agricultural Pest Control: Plant pesticide category on their license, pursuant to Subsection R68-7-7(1)(a).

R68-7-7. Pesticide Certification Categories.

Pesticide applicators shall be certified by the department in one or more of the pest control categories defined in this section:

(1) Agricultural Pest Control.

(a) Plant. This category includes applicators applying pesticides to control pests in the production of agricultural crops including field crops, vegetables, fruits, pasture, rangelands, and non-crop agricultural lands.

(b) Animal. This category includes applicators applying pesticides on animals including beef and dairy cattle, swine, sheep, horses, goats, poultry, and to places on or in which animals inhabit. Doctors of [~~v~~]Veterinary [~~m~~]Medicine, or their employees, engaged in applying pesticides for hire, publicly representing themselves as pesticide applicators, or engaged in the use of pesticides, are included in this category.

(2) Forest Pest Control. This category includes applicators applying pesticides in forests, forest nurseries, and forest seed-producing areas.

(3) Ornamental and Turf Pest Control. This category includes applicators applying pesticides to control ornamental and turf pests in the maintenance and production of ornamental trees, shrubs, flowers, and turf. This includes controlling pests on sidewalks, driveways, and other similar locations.

(4) Seed Treatment. This category includes applicators applying pesticides on seeds in seed treatment facilities.

(5) Aquatic Pest Control.

(a) Surface Water. This category includes applicators applying pesticides to control pests in standing or running water. This pesticide category does not include applicators engaged in public health related activities included in Subsection R68-7-7(8).

(b) Sewer Root Control. This category includes applicators applying pesticides to control roots in sewers or other related systems.

(6) Right-of-Way Pest Control. This category includes applicators applying pesticides in the maintenance of public roads, electric power lines, pipelines, railway rights-of-way, or other similar areas.

(7) Structural and Health Related Pest Control. This category includes applicators applying pesticides in, on, or around any public or private food handling establishment; dwelling, educational institution, or medical institution; industrial building; business establishment; packing house; food-processing facility; prison; manufacturing facility; grain elevator; or any other structure or area, or immediately adjacent structure or area, to control pests. This category excludes any pesticide applications included in Subsection R68-7-7(13) Fumigation Pest Control and Subsection R68-7-7(15) Wood Destroying Organisms Pest Control. This category includes applicators applying pesticides on vertebrate pests in buildings and structures, and immediately adjacent to, or no further than three feet from, buildings and structures. If the label for a structural pesticide permits the use of the pesticide more than three feet from the structure, then the pesticide may be used beyond three feet from the structure[,] but may not exceed the maximum distance permitted by the label.

(8) Public Health Pest Control.

(a) Commercial. This category is limited to commercial pesticide applicators who apply pesticides for the management and control of pests due to issues of medical and public health importance. This category is only valid when the pesticide applicator is actively contracted by a government entity[,] and is actively engaged in applying pesticides for that government entity.

(b) Non-Commercial. This category is limited to state and federal employees, county or city governments, or persons under their direct supervision, who apply pesticides in government-sponsored public health programs for the management and control of pests due to issues of medical and public health importance.

(9) Regulatory Pest Control. This category is limited to state and federal employees who:

(a) apply pesticides in a mechanical ejection device; or

(b) apply pesticides in a protective collar or other method to control regulated pests.

(10) Demonstration, Consultation, and Research Pest Control. This category includes applicators who demonstrate or provide instruction to the public in the proper use, techniques, benefits, and methods of applying restricted use pesticides. This category includes agricultural compliance specialists, educational and university personnel, commercial business representatives, consultants and advisors, and persons conducting field research with restricted use pesticides. In addition to certification in this pesticide category, individuals shall also meet specific standards that may be applicable to their particular pesticide category.

(11) Aerial Application Pest Control. This category includes applicators applying pesticides by airplane, drone, helicopter, or any other type of aircraft. Aerial applicators are required to be certified in the Aerial Application Pest Control category, along with any other applicable pest control category for any intended pesticide application. Aerial pesticide applicators shall also possess a valid commercial pilot license, or equivalent remote pilot certifications, issued by the Federal Aviation Administration (FAA).

(12) Vertebrate Animal Pest Control. This category includes applicators applying pesticides for the outdoor control of vertebrate pests, such as rodents, birds, bats, predators, or domestic animal pests. This category excludes any pesticide applications included in Subsection R68-7-7(9) Regulatory Pest Control[,] and specifically excludes the use of sodium cyanide and sodium fluoroacetate.

(13) Fumigation Pest Control.

(a) Stored Commodities. This category includes applicators applying fumigants to control pests in, on, or around stored grains, grain elevators, mills, structures, railroad cars, manufactured products, or similar areas or items.

(b) Structural. This category includes applicators applying fumigants to control pests while additionally tenting, sealing with filling, or completely enclosing a structure.

(c) Soil. This category includes applicators applying fumigants in and on the soil of agricultural locations.

(14) Wood Preservation Pest Control. This category includes applicators applying preservative pesticides to wood products, such as fence posts, electrical poles, railroad ties, or any other form of wood product.

(15) Wood Destroying Organisms Pest Control. This category includes applicators applying pesticides to control wood destroying pests, termites, carpenter ants, wood-boring or tunneling insects, bees, wasps, wood-decaying fungi, and any other pests destroying wood products.

R68-7-8. Standards of Competence for Certification of Pesticide Applicators and Pesticide Businesses.

(1) Pesticide applicators shall be at least 18 years of age to obtain a commercial, non-commercial, or private pesticide applicator license.

(2) The basic standards for certification of pesticide applicators have been established by the EPA[,] and shall be the minimum standards required for certification of pesticide applicators in Utah.

(3) Commercial and non-commercial pesticide applicators shall demonstrate competency and practical knowledge by successfully completing the written pesticide applicator core test and any additional pesticide category tests. The pesticide applicator tests shall include core standards applicable to each pesticide category, and the standards specifically identified for each pesticide category, or subcategory, as set forth in 40 CFR 171.103, and the EPA approved Utah State Pesticide Applicator Certification Plan, including;

(a) familiarity with pesticide labels and labeling and their functions, including each of the following:

(i) the general format and terminology of pesticide labels and labeling;

(ii) understanding instructions, warnings, terms, symbols, and other information commonly appearing on pesticide labels and labeling;

(iii) understanding that it is a violation of federal law to use any registered pesticide in a manner inconsistent with its labeling;

(iv) understanding labeling requirements that a certified applicator must be physically present at the site of the application;

(v) understanding labeling requirements for supervising non-certified applicators working under the direct supervision of a certified applicator;

(vi) understanding that applicators shall comply with any use restrictions and directions for use contained in pesticide labels and labeling, including being certified in the certification category appropriate to the type and site of the application;

(vii) understanding the meaning of product classification as either general or restricted use and that a product may be unclassified;

(viii) understanding and complying with product-specific notification requirements; and

(ix) recognizing and understanding the difference between mandatory and advisory labeling language;

(b) safety measures to avoid or minimize adverse health effects, including each of the following:

(i) understanding the different natures of the risks of acute toxicity and chronic toxicity, as well as the long-term effects of pesticides;

(ii) understanding that a pesticide's risk is a function of exposure and the pesticide's toxicity;

(iii) recognition of likely ways in which dermal, inhalation, and oral exposure may occur;

(iv) common types and causes of pesticide mishaps;

(v) precautions to prevent injury to applicators and other individuals in or near treated areas;

(vi) need for, and proper use of, protective clothing and personal protective equipment;

(vii) symptoms of pesticide poisoning;

(viii) first aid and other procedures to be followed in case of a pesticide mishap; and

(ix) proper identification, storage, transport, handling, mixing procedures, and disposal methods for pesticides and used pesticide containers, including precautions to be taken to prevent children from having access to pesticides and pesticide containers;

(c) the potential environmental consequences of the use and misuse of pesticides, including the influence of each of the following:

(i) weather and other indoor and outdoor climatic conditions;

(ii) types of terrain, soil, or other substrate;

(iii) presence of fish, wildlife, and other non-target organisms; and

(iv) drainage patterns;

(d) the proper identification and effective control of pests, including each of the following:

(i) the importance of correctly identifying target pests and selecting the proper pesticide product for effective pest control; and

(ii) verifying that the labeling does not prohibit the use of the product to control the target pests;

(e) characteristics of pesticides, including each of the following:

(i) types of pesticides;

(ii) types of formulations;

(iii) compatibility, synergism, persistence, and animal and plant toxicity of the formulations;

(iv) hazards and residues associated with use;

(v) factors that influence effectiveness or lead to problems such as pesticide resistance; and

(vi) dilution procedures;

(f) application equipment, including each of the following:

(i) types of equipment and advantages and limitations of each type; and

(ii) use, maintenance, and calibration procedures;

(g) selecting appropriate application methods, including each of the following:

(i) methods used to apply various forms and formulations of pesticides;

(ii) knowledge of which application method to use in a given situation and that use of a fumigant, aerial application, sodium cyanide, or sodium fluoroacetate requires additional certification;

(iii) how selection of application method and use of a pesticide may result in proper use, unnecessary or ineffective use, and misuse; and

(iv) prevention of drift and pesticide loss into the environment;

(h) knowledge of all applicable state, tribal, and federal laws and regulations.; and

(i) professionalism, including understanding the importance of each of the following:

(i) maintaining chemical security for restricted use pesticides;

(ii) how to communicate information about pesticide exposures and risks with customers and the public; and

(iii) appropriate product stewardship for certified applicators.

(4) The standards for commercial, non-commercial, and private applicators do not apply to the following persons for the purposes of this rule:

(a) persons conducting research involving restricted use pesticides who have received state approval;

(b) [~~d~~]Doctors of [~~m~~]Medicine and [~~d~~]Doctors of [~~v~~]Veterinary [~~m~~]Medicine applying pesticides, drugs, or medication during their normal practice, and who do not publicly represent themselves as pesticide applicators;

(c) persons using a general use disinfectant, sanitizer, or deodorizer commercially, and not for the control of insects, weeds, rodents, or similar pests, or use in settings outside of a structure; or

(d) persons using a general use fungicide for interior structural cleaning or interior structural mold remediation.

(5) Aerial Pesticide Applicator. An aerial pesticide applicator shall demonstrate competence and practical knowledge of aerial pest control in a wide variety of environments by successfully completing the aerial pesticide applicator test. Aerial pesticide applicators shall know the significance of drift, and of the potential for non-target injury and environmental contamination. Aerial pesticide applicators shall obtain the Aerial Application Pest Control category certification, along with any additional pesticide category certifications for which they shall apply pesticides. Aerial pesticide applicators shall comply with each standard set forth by the FAA[~~,~~] and shall submit proof of current registration with the FAA as an additional requirement for receiving an aerial pesticide applicator certification.

(6) Private Pesticide Applicator. A private pesticide applicator shall demonstrate competence and practical knowledge by successfully completing the private pesticide applicator test, and any required additional pesticide category tests. This knowledge shall include the basic standards for certification of private applicators set forth in 40 CFR 171.105. This includes:

(a) familiarity with pesticide labels and labeling and their functions, including each of the following:

(i) the general format and terminology of pesticide labels and labeling;

(ii) understanding instructions, warnings, terms, symbols, and other information commonly appearing on pesticide labels and labeling;

(iii) understanding that it is a violation of federal law to use any registered pesticide in a manner inconsistent with its labeling;

(iv) understanding when a certified applicator shall be physically present at the site of the application based on labeling requirements;

(v) understanding labeling requirements for supervising non-certified applicators working under the direct supervision of a certified applicator;

(vi) understanding that applicators shall comply with each use restriction and directions for use contained in pesticide labels and labeling, including being certified in the appropriate category to use restricted use pesticides for fumigation or aerial application, or predator control devices containing sodium cyanide or sodium fluoroacetate, if applicable;

(vii) understanding the meaning of product classification as either general or restricted use, and that a product may be unclassified;

(viii) understanding and complying with product-specific notification requirements; and

(ix) recognizing and understanding the difference between mandatory and advisory labeling language;

(b) safety measures to avoid or minimize adverse health effects, including each of the following:

(i) understanding the different natures of the risks of acute toxicity and chronic toxicity, as well as the long-term effects of pesticides;

(ii) understanding that a pesticide's risk is a function of exposure and the pesticide's toxicity;

(iii) recognition of likely ways in which dermal, inhalation, and oral exposure may occur;

(iv) common types and causes of pesticide mishaps;

(v) precautions to prevent injury to applicators and other individuals in or near treated areas;

(vi) need for, and proper use of, protective clothing and personal protective equipment;

(vii) symptoms of pesticide poisoning;

(viii) first aid and other procedures to be followed in case of a pesticide mishap; and

(ix) proper identification, storage, transport, handling, mixing procedures, and disposal methods for pesticides and used pesticide containers, including precautions to be taken to prevent children from having access to pesticides and pesticide containers;

(c) the potential environmental consequences of the use and misuse of pesticides, including the influence of the following:

(i) weather and other climatic conditions;

(ii) types of terrain, soil, or other substrate;

(iii) presence of fish, wildlife, and other non-target organisms; and

(iv) drainage patterns;

(d) the proper identification and effective control of pests, including each of the following:

(i) the importance of correctly identifying target pests and selecting the proper pesticide product; and

(ii) verifying that the labeling does not prohibit the use of the product to control the target pests;

(e) characteristics of pesticides, including the following:

(i) types of pesticides;

(ii) types of formulations;

(iii) compatibility, synergism, persistence, and animal and plant toxicity of the formulations;

(iv) hazards and residues associated with use;

(v) factors that influence effectiveness or lead to problems such as pesticide resistance; and

(vi) dilution procedures;

(f) application equipment, including each of the following:

(i) types of equipment and advantages and limitations of each type; and

(ii) uses, maintenance, and calibration procedures;

(g) selecting appropriate application methods, including each of the following:

(i) methods used to apply various forms and formulations of pesticides;

(ii) knowledge of which application method to use in a given situation and that use of a fumigant, aerial application, or predator control device containing sodium cyanide or sodium fluoroacetate requires additional certification;

(iii) how selection of application method and use of a pesticide may result in proper use, unnecessary or ineffective use, and misuse; and

(iv) prevention of drift and pesticide loss into the environment;

(h) knowledge of each applicable state, tribal, and federal laws and regulations, including understanding the WPS and the circumstances where compliance is required;

(i) certified applicator responsibilities related to supervision of non-certified applicators, including each of the following:

(i) understanding and complying with requirements in 40 CFR 171.201 and 40 CFR 171.501 for private applicators who supervise non-certified applicators using restricted use pesticides;

(ii) providing use-specific instructions to non-certified applicators using restricted use pesticides under the direct supervision of a certified applicator; and

(iii) explaining appropriate state, tribal, and federal laws and regulations to non-certified applicators working under the direct supervision of a certified applicator;

(j) understanding stewardship and the importance of each of the following:

(i) maintaining chemical security for restricted use pesticides; and

(ii) how to communicate information about pesticide exposures and risks with agricultural workers and handlers and other persons;

(k) practical knowledge of pest control applications to agricultural commodities including each of the following:

(i) specific pests of relevant agricultural commodities;

(ii) how to avoid contamination of ground and surface waters;

(iii) understanding pre-harvest and restricted entry intervals and entry-restricted periods and areas;

(iv) understanding specific pesticide toxicity and residue potential when pesticides are applied to animal or animal product agricultural commodities; and

(v) relative hazards associated with using pesticides on animals or places in which animals are confined based on formulation, application technique, age of animal, stress, and extent of treatment.

(7) A private pesticide applicator that functions in a supervisory role shall be responsible for the actions of any non-certified pesticide handlers under their instruction and control.

(8) A private pesticide applicator shall provide non-certified pesticide handlers under their supervision instructions on the EPA WPS pesticide handler applicator training, including 40 CFR 171.201 and 40 CFR 170.501, and keep records of having provided these instructions for a period of two years.

(9) A private pesticide applicator shall be physically present to supervise the application of any pesticide by a non-certified handler, if such presence is required by the label of the pesticide being applied.

R68-7-9. Commercial Pesticide Applicator Licensing and Certification Procedures.

(1) Commercial Pesticide Applicator and Commercial Pesticide Business License Required.

(a) Each person performing the physical act of applying a pesticide[~~,~~] shall be certified by the department and have a valid license issued by the department. [~~No~~]A person [~~shall~~]may not apply, advertise for, solicit, or hold oneself out as willing to engage in the business of applying any pesticide for hire or compensation to the land or property of another at any time without becoming certified as a pesticide applicator, obtaining a commercial pesticide applicator license, and:

(i) obtaining a commercial pesticide business license, as described in Section 4-14-111 issued by the department; or

(ii) working for a company that has already obtained a commercial pesticide business license.

(b) The fees for a commercial pesticide applicator license and a commercial pesticide business license, shall be determined in accordance with Subsection 4-2-103(2) and Section 63J-1-504.

(c) A commercial pesticide applicator license is required for any individual who applies pesticides for a commercial business. [~~No~~]A person [~~shall~~]may not purchase, use, or demonstrate the use of, any restricted use pesticide, or shall apply any pesticide for a commercial business, without becoming certified and obtaining a commercial pesticide applicator license issued by the department.

(2) An applicant for a commercial pesticide applicator license shall:

(a) complete an application on the department's website or on forms prepared and provided by the department;

(b) pay the licensing fees; and

(c) a license will only be issued after the applicant has successfully passed the required pesticide applicator tests to become certified, or after recertifying according to the Continuing Education Unit (CEU) requirements.

(3) A testing fee, retest fee, or any related fee, may be determined by department approved testing centers, according to their own individual policies.

(4) An applicant for a commercial pesticide business license shall:

(a) complete an application form provided by the department;

(b) pay the licensing fee;

(c) be in good standing with the department; and

(d) demonstrate good character.[~~; and~~]

[~~(e) provide evidence that the owner or qualifying party:~~

~~(i) is a certified pesticide applicator in Utah;~~

~~(ii) is not a designated qualifying party or employee with any other pesticide applicator business;~~

~~(iii) has been a certified pesticide applicator for at least two years out of the ten years immediately before the date of the commercial pesticide business application; or~~

~~(iv) holds an associate degree, or higher, in horticulture, agricultural sciences, biological sciences, pest management, or a related and relevant science degree.~~

~~(f) A person applying for a commercial pesticide business license may be exempted from the two year certification requirement if the individual's and entity's sole use of pesticides is limited to:~~

~~(i) providing ornamental and turf herbicide spot treatment services as part of a lawn maintenance service; and~~

~~(ii) using herbicides with labels that contain the signal word "caution" or "warning."~~]

([~~g~~]4) A commercial pesticide business operating under more than one business identity or name, from a single business location, shall be licensed separately for each business identity or name.

(h) A commercial pesticide business with a single business identity or name, but operating from more than one business location, shall be licensed at each separate business location. Business locations that are used only for pesticide storage and mixing purposes are exempt from licensing requirements[~~,~~] but shall be disclosed to the department.

([~~i~~]5) The department may require a commercial pesticide business license applicant to change their requested business name. This may occur if the applicant requests a business name that is the same, or closely resembles, the name of a currently licensed commercial pesticide business. The department may additionally require a commercial pesticide business, or commercial pesticide business license applicant, to change their business name if the business name could reasonably cause public confusion, public alarm, or public offense. Any determination made pursuant to this subsection shall be at the sole discretion of the department in coordination with the state Division of Corporations. The purpose of this subsection is to ensure compliance with current guidance from the Division of Corporations. The department shall prioritize licensing a business name that is registered with the Division of Corporations.

([~~j~~]6) Each licensed commercial pesticide business location shall have a minimum of one certified commercial pesticide applicator at that location who is certified in each pesticide category for which pesticide applications are made.

([~~k~~]7) A franchised commercial pesticide business licensee shall have a separate commercial pesticide business license and a separate certified commercial pesticide applicator at each business location. Additionally, franchised businesses shall be distinctly identifiable from one another, to avoid departmental and public confusion, by adding unique words or numbers to distinguish the different businesses.

([~~l~~]8) If a commercial pesticide business licensee uses a Doing Business As (DBA) name, it shall be listed on the pesticide business application along with the company name. A business may list more than one assumed name on a single registration application. Any DBA shall be registered and active with the Division of Corporations.

R68-7-10. Commercial Pesticide Applicator and Commercial Pesticide Business Testing Procedures.

(1) Commercial Pesticide Applicator Testing. To become certified, an applicant for a commercial pesticide applicator license shall demonstrate competency and knowledge of pesticide applications, laws, and other relevant subjects by successfully completing the required pesticide applicator tests and department application forms. Each pesticide applicator test shall be proctored at a department approved testing center.

(a) An applicant shall first pay any licensing fees to the department[~~,~~] and obtain a receipt of license payment.

(b) An applicant shall find a testing center from a list of approved testing centers on the department's website.

(c) An applicant shall schedule each required pesticide applicator test with a testing center.

(d) Fees for testing may be established and charged by the testing center, including those operated by the department.

(e) An applicant may acquire study materials from the department website or purchase them from a separate vendor.

(f) An applicant shall present their receipt of license payment from the department, and valid government issued identification, to the proctor at the applicant's chosen testing center.

(g) Cheating, ejection from testing, or failure to follow the rules of the department or testing center shall, at the discretion of the department, constitute a violation of this rule and may serve as a basis for a denial of a license application. Applicants are subject to state and federal law and department rules and policies regardless of whether the applicant successfully passes or not.

(h) The pesticide applicator core test must be successfully completed with a minimum score of 70% before any pesticide category tests may be attempted.

(i) At least one pesticide category test shall be taken and successfully completed with a minimum score of 70% before a license may be obtained.

(j) The steps to recertify solely by testing are the same as for an initial applicant. The pesticide applicator core test must be successfully completed with a minimum score of 70% before any pesticide category tests may be attempted.

(k) Upon the successful completion of the appropriate pesticide applicator tests, the applicant shall complete the department's completion form, which can be found online in the testing program.

(l) When the completion form has been submitted, a license may be issued.

(m) The rules of a testing center, if more restrictive than those of the department, shall take precedence over those of the department during the administration of pesticide applicator tests.

(n) If the minimum score of 70% is not obtained after two attempts, the person taking the tests shall wait at least 24 hours, pay any additional retest fees to the testing center, and begin retesting on any failed tests.

(2) Commercial Pesticide Business Testing. The test shall be taken by the owner, principal agent, or manager,[~~ or designated qualifying party,~~] and that individual shall be bound by the rules for a commercial pesticide business contained in Subsection R68-7-10(1).

(a) Business license tests may be taken on any computer with internet access.

(b) In the event the individual taking the test does not successfully pass the test with a minimum score of 70%, the department may not issue a commercial pesticide business license[~~ shall not be issued~~].

(3) Pesticide Permits Requirements.

(a) In accordance with Subsection 4-14-112(1), an applicant for an Ornamental and Turf Technician permit shall:

(i) be at least 18 years of age;

(ii) comply with permit requirements under Subsection 4-14-112(1)(b); and

(iii) complete department approved annual video training and achieve a score of at least 70% on the examination.

(b) An Ornamental and Turf Technician shall:

(i) work under the indirect supervision of a commercial certified applicator licensed under Section R68-7-8 who is employed by the same commercial pesticide business;

(ii) maintain a physical or digital copy of the permit; and
(iii) display the permit upon request during the pesticide application.
(c) An Ornamental and Turf Technician may not apply:
(i) an herbicide labeled with a "danger" or "danger-poison" signal word;
(ii) a pesticide for any purpose other than Ornamental and Turf Weed Pest Control;
(iii) an insecticide, fungicide, nematicide, or any pesticide other than a general use herbicide authorized under Subsection (1)(a); or
(iv) a restricted use pesticide.
(d) To renew a permit, a technician shall submit a renewal application, pay applicable permit fees established under Subsection 4-2-103(2), and complete department approved annual video training before or on December 31 of each calendar year.
(e) In accordance with Subsection 4-14-112(2), an applicant for a Pesticide Salesperson permit shall:
(i) be at least 18 years of age;
(ii) submit a completed application to the department;
(iii) pay applicable fees established under Subsection 4-2-103(2); and
(iv) complete department approved annual training video and achieve a passing score of at least 70% on the examination.
(f) A Pesticide Salesperson permit expires on December 31 of the year of issuance.
(g) When soliciting, a Salesperson shall:
(i) maintain a physical or digital copy of the permit;
(ii) display the permit upon request; and
(iii) refrain from misrepresenting the application or safety of a pesticide.

R68-7-11. Commercial Pesticide Applicator and Commercial Pesticide Business License Issuance.

(1) A temporary pesticide applicator permit shall be issued automatically by email following the successful completion of the pesticide applicator core test in conjunction with each pesticide category test and provided each other department requirement is met. The temporary permit will expire 30 days from the date it was issued. The pesticide applicator core test must be successfully completed with a minimum score of 70% before any pesticide category tests may be attempted. A temporary pesticide applicator permit is invalid if only the pesticide applicator core test is successfully completed and no additional pesticide category test is successfully completed.

(2) The pesticide applicator and pesticide business is responsible for verifying that their license has been processed by the department.

(3) A commercial pesticide applicator license or a commercial pesticide business license shall be issued when the following conditions have been met:

(a) the applicant has submitted an application form to the department;

(b) any required fees have been paid;

(c) the applicant is in good standing with the department; and

(d) the applicant has successfully passed the appropriate tests to apply pesticides in the classifications and categories for which they have applied.[~~; and~~

~~(e) the applicant for the qualifying party for the pesticide business license meets the requirements in Section 4-14-111.~~]

(4) A commercial pesticide applicator license shall expire on December 31 of the third calendar year from the time of licensure, unless it has been revoked or suspended by the department for cause, which may include any combination of the unlawful acts listed in Section R68-7-20.

(5) If an application for a commercial pesticide applicator license or commercial pesticide business license is denied, the applicant shall be informed of the reason by email or mail.

(6) A pesticide applicator shall have their license in their immediate possession when making a pesticide application.

(7) If a pesticide applicator requests a duplicate license from the department, a fee determined by the department, pursuant to Subsection 4-2-103(2), shall be paid. The pesticide applicator must be in good standing, having no unresolved violations or fines, before a replacement license shall be issued.

(8) A commercial pesticide business license shall be required for each commercial pesticide business location, other than locations used only to store and load pesticides.

(9) A new commercial pesticide applicator or commercial pesticide business license applicant who completes an application completed between November 1 and December 31 shall be licensed for the remainder of that year and the following three calendar years.

(10) Commercial Pesticide Applicator and Commercial Pesticide Business License Recertification and Renewal.

(a) Each commercial pesticide applicator and commercial pesticide business license shall expire on December 31 of the third calendar year following its issuance.

(b) Commercial pesticide applicators shall recertify before their license expires[~~,~~] and may be subject to re-examination at any time during their valid license period.

(c) Recertification options include:

(i) completion of the original certification process by taking the required pesticide core and pesticide category tests and successfully completing each required test with a minimum score of 70%; or

(ii) participation in approved CEUs and accumulating the required amount of 24 total CEU credits during the licensure period. A minimum of two credits in law, six in safety, and ten in pesticide use are required, while any combination of the three categories may be used for the remaining six credits.

[~~(d) The qualifying party for a commercial pesticide business shall complete the related commercial pesticide business test every three years.~~]

(11) Records Maintained. Commercial applicators shall keep and maintain records of any pesticide applications.

(a) These records shall be recorded within 24 hours after the pesticide application is made.

(b) The application records shall include the following information:

(i) the name and address of the person or entity for whom the pesticide is applied;

(ii) the address of the pesticide application location, if the pesticide application location differs from Subsection R68-7-11(11)(a)(i) ;

(iii) the total square footage or total size of the area to be treated with pesticides;

(iv) a description of the specific target sites, crops, commodities, or stored products at the pesticide application location to which any pesticides are applied;

(v) the time and date, including the month, day, and year when the pesticide was applied;

(vi) the brand name of the pesticides, EPA registration number, and mix rate for any pesticides applied;

(vii) the total amount of pesticides, including diluted or ready-to-use (RTU) pesticides, applied per location and per application;

(viii) the purpose of the pesticide application, the pesticide target site, and pest to be treated;

(ix) the name, commercial pesticide business address, and commercial pesticide applicator license number of the certified commercial pesticide applicator who applied the pesticides; and

(c) Records shall be kept for a period of at least two years from the date of the pesticide application and shall be available for inspection by the department upon request.

(d) Records shall be furnished in a uniform format.

(12) Notwithstanding the requirements of this section, the department may give consideration to political subdivisions of the state, or a non-profit organization, regarding their need to obtain a commercial pesticide business license or the requirement of their applicators to obtain a commercial pesticide applicator license.

(a) Consideration shall be given to political subdivisions if their charter includes a fee for pesticide services or products.

(b) Non-profit organizations may not need to obtain the commercial pesticide business license or the commercial pesticide applicator license to receive reimbursement for applications made on public land owned by the federal government or the state.

(c) Application or distribution of restricted use pesticides shall be done in accordance with this rule.

R68-7-12. Non-Commercial Pesticide Applicators.

(1) Non-Commercial Pesticide Applicator License Required.

(a) A non-commercial pesticide applicator license is required for applying restricted use pesticides for a city, county, state, or federal government entity, or for corporations, businesses, or any other entity that does not require a commercial pesticide applicator license.

(b) [~~No~~]A person [~~shall~~]may not purchase, use, or demonstrate the use of any restricted use pesticide without becoming certified and obtaining a non-commercial pesticide applicator license issued by the department.

(c) Each person performing the physical act of applying restricted use pesticides shall be certified and have a valid non-commercial pesticide applicator license.

(2) Non-Commercial Pesticide Applicator Application and Fee Requirements. The fees for a non-commercial pesticide applicator license shall be determined in accordance with Subsection 4-2-103(2) and Section 63J-1-504.

(a) An application for a non-commercial pesticide applicator license shall be made on the approved department form.

(b) A non-commercial pesticide applicator license shall only be issued after the applicant has successfully passed the required pesticide applicator tests, or after recertifying according to CEU requirements.

(c) Each individual performing the physical act of applying restricted use pesticides shall be licensed as a non-commercial pesticide applicator.

(d) A testing fee, retest fee, or any related fee, may be determined by approved testing centers, according to their own individual policies.

(3) Non-Commercial Pesticide Applicator Initial Certification.

(a) Fees for testing may be established and charged by any testing center, including those operated by the department.

(b) The applicant may acquire any necessary study materials from the department website.

(c) The applicant should schedule required pesticide applicator tests with a testing center approved by the department.

(4) Non-Commercial Pesticide Applicator Testing Procedures.

(a) A new applicant for a non-commercial pesticide license shall demonstrate competency and knowledge of pesticide applications, laws, and other relevant subjects by successfully completing the approved pesticide applicator tests and department application forms. Pesticide applicator tests shall be proctored at approved testing centers.

(b) An applicant for a non-commercial pesticide applicator license shall first pay licensing fees to the department[~~,~~] and obtain a receipt of license payment.

(c) An applicant for a non-commercial pesticide applicator license shall find a testing center from a list of approved testing centers on the department's website.

(d) An applicant for a non-commercial pesticide applicator license shall present their receipt of license payment from the department, and valid government issued identification, to the proctor at the applicant's chosen testing center.

(e) Cheating, ejection from testing, or failure to follow the rules of the department or testing center shall, at the discretion of the department, constitute fraud under [~~these~~]this rule[~~s~~]. Applicants are subject to this rule, regardless of whether the applicant successfully passes or not.

(f) The pesticide applicator core test must be successfully completed with a minimum score of 70%, before any pesticide category tests may be attempted.

(g) At least one pesticide category test must be taken and successfully completed with a minimum score of 70% before a non-commercial pesticide applicator license may be obtained.

(h) The steps to recertify solely by testing are the same as for an initial applicant. The pesticide applicator core test must be successfully completed with a minimum score of 70%, before any pesticide category tests may be attempted.

(i) Upon the successful completion of the appropriate pesticide applicator tests, the applicant shall complete the department's completion form, which can be found online in the testing program.

(j) The rules of a testing center, if more restricting than those of the department, shall take precedence over those of the department during the administration of the pesticide applicator tests.

(k) If the minimum score of 70% is not obtained after two attempts, the person taking the tests must wait 24 hours, pay any additional retest fees to the testing center, and begin retesting on any failed tests.

(5) Non-Commercial Pesticide Applicator Certification Tests and Review. The pesticide applicator tests and methods of testing shall be determined and approved by the department. The review of applications shall be made by the department [~~for determining~~]to determine eligibility.

(6) Non-Commercial Pesticide Applicator License Issuance.

(a) A temporary pesticide applicator permit shall be issued automatically by email for the successful completion of the pesticide applicator core test and each pesticide category test and provided each other department requirement is met. The temporary permit will expire 30 days from the date it was issued. The pesticide applicator core test must be successfully completed with a minimum score of 70%, before any pesticide category tests may be attempted. A temporary pesticide applicator permit is not valid if only the pesticide applicator core test is successfully completed, and no additional pesticide category test is successfully completed.

(b) The pesticide applicator is responsible [~~to verify~~]for verifying their license is processed by the department.

(c) A non-commercial pesticide applicator license shall be issued when the following conditions have been met:

(i) an application form has been submitted to the department;

(ii) any fees have been paid;

(iii) the applicant is in good standing with the department; and

(iv) the applicant has successfully passed the appropriate tests to apply pesticides in the classifications for which they have applied

(d) The non-commercial pesticide applicator license shall expire on December 31 of the third calendar year from the time of licensure, unless it has been revoked or suspended by the department for cause, which may include any combination of the unlawful acts given in Section R68-7-20.

(e) If an application for a non-commercial pesticide applicator license is denied, the applicant shall be informed of the reason by email or mail.

(f) A pesticide applicator shall have their license in their immediate possession when making a pesticide application.

(g) If the pesticide applicator requests a duplicate license from the department, a fee determined by the department, pursuant to Subsection 4-2-103(2), shall be paid. The pesticide applicator must also be in good standing, having no unresolved violations or fines, before a replacement license shall be issued.

(h) A new non-commercial pesticide applicator application completed between November 1 and December 31 of the same year shall be licensed for the remainder of that year and the following three calendar years.

(7) Non-Commercial Pesticide Applicator License Recertification and Renewal.

(a) Each non-commercial pesticide applicator license shall expire on December 31 of the third calendar year following its issuance.

(b) Non-Commercial pesticide applicators must recertify before their license expires[~~,~~] and may be subject to re-examination at any time during their valid license period.

(c) Recertification options include:

(i) completion of the original certification process by taking the required pesticide core and pesticide category test and successfully completing each required test with a minimum score of 70%; or

(ii) participate in approved CEUs and accumulate the required amount of 24 total CEU credits during the valid license time period. A minimum of two credits in law, six in safety, and ten in pesticide use are required, while any combination of the three categories may be used for the remaining six credits.

(8) Records Maintained. Non-Commercial applicators shall keep and maintain records of any restricted use pesticide applications.

(a) These records shall be recorded within 24 hours after the pesticide application is made.

(b) The application records shall include the following information:

(i) the name and address of the person for whom the restricted use pesticide is applied;

(ii) the address of the restricted use pesticide application location, if the pesticide application location differs from the location provided pursuant to Subsection R68-7-12(8)(b)(i);

(iii) the complete square footage of the area to be treated with restricted use pesticides;

(iv) the specific sites at the pesticide application location to which any restricted use pesticides are applied;

(v) the time and date, including the month, day, and year when the restricted use pesticide was applied;

(vi) the brand name of the restricted use pesticides, EPA registration number, and mix rate for any restricted use pesticides applied;

(vii) the total amount of restricted use pesticides, including diluted or ready-to-use (RTU) pesticides, applied per application;

(viii) the purpose of the restricted use pesticide application, the pesticide target site, and pest to be treated; and

(ix) the name and non-commercial pesticide applicator license number of the certified non-commercial pesticide applicator who applied the pesticides.

(c) Records shall be kept for a period of at least two years from the date of the pesticide application and shall be available for inspection by the department , upon request.

(d) Records shall be furnished in a uniform format.

R68-7-13. Private Pesticide Applicators.

(1) Private Pesticide Applicator License Required.

(a) A private pesticide applicator license is required for applying restricted use pesticides on the owned, rented, or leased agricultural property of an individual. [~~No~~]A person [~~shall~~]may not purchase, use, demonstrate the use of, or supervise the use of any restricted use pesticide without becoming certified and obtaining a private pesticide applicator license issued by the department. Each person performing the physical act of applying restricted use pesticides shall be 18 years of age[~~,~~] or older, and possess a valid private pesticide applicator license, except:

(i) a person of at least 16 years of age may apply restricted use pesticides while under the direct supervision of a certified pesticide applicator, who is also an immediate family member, according to the family exemption of the EPA WPS, and only applies pesticides on the privately owned agricultural establishment of a certified pesticide applicator who is also an immediate family member; or

(ii) any person, 18 years of age, or older, employed by, or working on, a privately owned, rented, or leased agricultural property who has been trained by an actively certified Utah pesticide applicator, or trainer that has successfully completed an EPA approved Train the Trainer course, and has been instructed on the requirements of the EPA WPS for pesticide handlers.

(b) A private pesticide applicator is considered as having each of the agricultural-related pesticide categories on their license, specifically; Agricultural Pest Control: Plant, Agricultural Pest Control: Animal, Forest Pest Control, Ornamental and Turf Pest Control, Aquatic Pest Control: Surface Water, Structural and Health Related Pest Control, and Vertebrate Pest Control. A private pesticide applicator shall successfully complete the respective pesticide applicator tests for any additional pesticide categories before applying any pesticides restricted by those categories.

(c) Issuance of a private pesticide applicator license shall be conditioned upon the applicant complying with the certification requirements determined by the department as necessary to prevent unreasonable adverse effects on the environment, and to prevent unreasonable injury to any person. A private pesticide applicator license certifies the applicator to give instructions on the EPA WPS to the workers and pesticide handlers of a private agricultural establishment.

(d) Private Pesticide Applicator Application and Fee Requirements. The fees for a private pesticide applicator license shall be determined in accordance with Subsection 4-2-103(2) and Section 63J-1-504.

(i) Applications for a private pesticide applicator license shall be made on the approved department form and shall be submitted to the department along with the required fee. A license will only be issued after the applicant has successfully passed the required pesticide applicator tests, or after recertifying according to the CEU requirements.

(ii) A testing fee, retest fee, or any related fee, may be determined by approved testing centers, according to their own individual policies.

(2) Private Pesticide Applicator Initial Certification.

(a) Fees for testing may be established and charged by any testing center, including those operated by the department.

(b) The applicant may acquire any necessary study materials from the department website.

(c) The applicant shall schedule required pesticide applicator tests with a testing center approved by the department.

(3) Private Pesticide Applicator Testing Procedures.

(a) A new applicant for a private pesticide license must be 18 years of age, or older, and shall demonstrate competency and knowledge of pesticide applications, laws, and other relevant subjects by successfully completing the approved private pesticide applicator test and department application forms. Each pesticide applicator test shall be proctored at an approved testing center.

(b) An applicant for a private pesticide applicator license shall first pay any licensing fees to the department[~~,~~] and obtain a receipt of license payment.

(c) An applicant for a private pesticide applicator license shall find a testing center from a list of approved testing centers on the department's website. A test may also be proctored by a local Utah State University Extension agent.

(d) An applicant for a private pesticide applicator license shall present their receipt of license payment from the department, and valid government issued identification, to the proctor at the applicant's chosen testing center.

(e) Cheating, ejection from testing, or failure to follow the rules of the department or testing center shall, at the discretion of the department, constitute fraud under this rule. Applicants are subject to this rule, regardless of whether the applicant successfully passes or not.

(f) The private pesticide applicator test must be successfully completed with a minimum score of 70%, before any additional pesticide category tests may be attempted.

(g) The private pesticide applicator test must be taken and successfully completed with a minimum score of 70% before a private pesticide applicator license may be obtained.

(h) Upon the successful completion of the appropriate pesticide applicator tests, the applicant shall complete the department's completion form, which can be found online in the testing program.

(i) The steps to recertify solely by testing are the same as for an initial applicant. The private pesticide applicator test must be successfully completed with a minimum score of 70%, before any additional pesticide category tests may be attempted.

(j) Upon the successful completion of the private pesticide applicator test, the applicant shall complete the department's completion form, and the department's pesticide applicator application form, online.

(k) The rules of a testing center, if more restricting than those of the department, shall take precedence over those of the department during the administration of the pesticide applicator tests.

(l) If the minimum score of 70% is not obtained after two attempts, the person taking the tests must wait 24 hours, pay any additional retest fees to the testing center, and begin retesting on any failed tests.

(4) Private Pesticide Applicator Certification Tests and Review. The pesticide applicator tests and methods of testing shall be determined and approved by the department. The review of applications shall be made by the department [~~for determining~~]to determine eligibility.

(5) Emergency Use Permit. An individual may be able to acquire an Emergency Use Permit which allows a single individual, at a singular location, [~~the~~]permission to apply a restricted use pesticide in a situation determined to be an emergency by the department.

(a) Determination is at the sole discretion of the department.

(b) Any subsequent purchase of any restricted use pesticide, or additional pesticide application of any restricted use pesticide, or use of any restricted use pesticide by the individual obtaining the Emergency Use Permit is not allowed without the written consent of the department.

(c) This permit shall be issued only in an emergency as a substitute for a private pesticide applicator license.

(d) An Emergency Use Permit issued by the department shall be in accordance with 40 CFR 166.

(6) Private Pesticide Applicator License Issuance.

(a) A temporary pesticide applicator permit shall be issued automatically by email for the successful completion of the private pesticide applicator test and each pesticide category test and provided each other department requirement is met. The temporary permit will expire 30 days from the date it was issued. The private pesticide applicator test must be successfully completed with a minimum score of 70%, before any pesticide category tests may be attempted.

(b) The pesticide applicator is responsible [~~to verify~~]for verifying their license is approved by the department.

(c) A private pesticide applicator license shall be issued when the following conditions have been met:

(i) the applicant has successfully passed the appropriate tests to apply pesticides in the classifications for which they have applied;

(ii) any fees have been paid; and

(iii) the applicant is in good standing with the department.

(d) The private pesticide applicator license shall expire on December 31 of the third calendar year from the time of licensure, unless it has been revoked or suspended by the department for cause, as set forth in Section R68-7-20.

(e) If an application for a private pesticide applicator license is denied, the applicant shall be informed of the reason by email or mail.

(f) A pesticide applicator shall have their license in their immediate possession when making a pesticide application.

(g) Duplicate licenses from the department are available for a fee as set forth in Subsection 4-2-103(2). The pesticide applicator shall also be in good standing with the department, and have no unresolved violations or fines, before a replacement license may be issued.

(h) A new private pesticide applicator application completed between November 1 and December 31 of the same year shall be licensed for the remainder of that year and the following three calendar years.

(7) Private Pesticide Applicator License Recertification and Renewal.

(a) Each private pesticide applicator license shall expire on December 31 of the third calendar year following its issuance.

(b) Private pesticide applicators shall complete required recertifications before their license expires, and may be subject to re-examination at any time during their valid license period.

(c) Recertification options include:

(i) completion of the original certification process by taking the required pesticide core and pesticide category test and successfully completing each required test with a minimum score of 70%; or

(ii) participation in approved CEUs and accumulate the required amount of six total CEU credits during the valid license time period. A minimum of one credit in [~~L~~]law, one in [~~S~~]safety, and one in pesticide use are required, while any combination of the three categories may be used for the remaining three credits.

(8) Records Maintained. Private pesticide applicators shall keep and maintain records of any restricted use pesticide applications, and of any pesticide applications required by WPS.

(a) These records shall be recorded within 24 hours after the pesticide application is made.

(b) The application records shall include the following information:

(i) If the licensee is subject to WPS, the location of any pesticide applications, detailing the address, the metes and bounds, GPS coordinates, or a map showing the number of applications and the sites treated;

(ii) If the licensee is not subject to the WPS, the location of any restricted use pesticide applications, detailing the address, the metes and bounds, GPS coordinates, or a map showing the number of applications and the sites treated;

(iii) the complete size description of the pesticide application area, using either acres, square footage, section, or other legally descriptive and easily understandable terms common to the industry;

(iv) the specific sites at the pesticide application location to which any restricted use pesticides are applied;

(v) the time and date of the pesticide application, including the month, day, and year when the restricted use pesticide was applied, and the pesticide application start and end times;

(vi) the pesticide product name, as it is written on the pesticide label, of the restricted use pesticides, the EPA registration number, and mix rate for any restricted use pesticides applied;

(vii) the active ingredient of the restricted use pesticide;

(viii) the total amount of restricted use pesticides, including diluted or RTU pesticides, applied per application;

(ix) the amount of restricted use pesticide used per acre or square feet;

(x) the purpose of the restricted use pesticide application, the pesticide target site, the pesticide target pest, and, if applicable, the crop to be treated;

(xi) the duration, or length of time, required for the restricted entry interval:

(xii) the name and pesticide applicator license number of the certified pesticide applicator who applied the pesticides, or who directly supervised the use of any restricted use pesticides; and

(xiii) the name of any individual who applied pesticides under the exemptions provided in Subsection R68-7-13(1)(a)(i) or Subsection R68-7-13(1)(a)(ii).

(c) Records shall be kept for a period of at least two years from the date of the pesticide application and shall be made available for inspection by the department, within 48 hours of a request.

(d) Pesticide application records provided by any commercial pesticide business to the agricultural establishment shall also be kept for two years[~~,~~] and will provide the same information required by Subsection R68-7-13(8).

(e) Records shall be kept recording the maintenance history of pesticide application equipment, any respirator medical information, respirator fit testing, and any other records required by the label of the product used or by EPA WPS.

(f) Records shall be kept in a uniform format.

R68-7-14. Other Individuals.

(1) Employees of Federal Agencies.

(a) Federal government employees requesting to be a pesticide applicator in Utah shall be required to certify as a non-commercial pesticide applicator by successfully passing the written pesticide applicator core test and any applicable pesticide category tests. Federal government employees who possess a valid and current pesticide applicator license from another state may be exempt, and a reciprocal pesticide applicator license may be issued.

(b) Any federal government agency with an EPA approved pesticide applicator certification plan that meets or exceeds the Utah pesticide applicator certification standards may qualify for reciprocal pesticide applicator certification in Utah.

(c) Federal government employees requesting reciprocal licensing status shall apply to the department and confirm that the application is approved before conducting any activities under this rule or Title 4, Chapter 14, Utah Pesticide Control Act.

(2) Certification of Out-of-State Applicants.

(a) An out-of-state pesticide applicator may apply as a Utah pesticide applicator by taking the applicable Utah pesticide applicator tests in their respective state. Out-of-state proctors shall be approved by the department, and the pesticide applicator applicant shall bear the costs involved with out-of-state testing and licensing.

(b) If a pesticide applicator possesses a current and valid pesticide applicator certification from another state, and requests to apply pesticides in Utah, they shall complete the proper application process to the department, including:

(i) payment of any required fees;

(ii) a true copy of the applicant's credentials, both front and back, as proof of certification in the applicant's state of residence;

(iii) a front and back copy of their government issued identification; and

(iv) a letter of good standing, or other acceptable government documents, from the applicant's state pesticide licensing program, sent directly to the department by the licensing entity, specifically stating the applicant is in good standing and is currently licensed as a pesticide applicator in that state.

(c) The department may, upon review of the applicant's required credentials and other materials, issue a Utah Pesticide Applicator License to the applicant in accordance with the pesticide categories or pesticide use situations for which the applicant is certified in another state, without requiring testing.

(d) Out-of-state pesticide applicators who apply pesticides in Utah shall be subject to Utah law.

(3) Changes to License Information.

(a) Each certified commercial, non-commercial, and private pesticide applicator shall notify the department of any change to the pesticide applicator's name, address, phone number, email address, or change of employer within 30 calendar days of the change. Failure to do so shall be considered a violation of this rule.

(b) Each commercial pesticide business and RUP dealer shall notify the department of any changes including ownership, company name, owner or manager's name, company address, phone number, email address, or any other required information, within 30 calendar days of the change. Failure to do so shall be considered a violation of this rule.

(c) Business licenses are non-transferable, and in the case of a change of business ownership, a new application is required, along with the payment of any associated fees.

(i) The department shall determine if the name on the license may be retained by the new owner.

(ii) The department shall determine the necessary fees for a new license.

[~~(iii) The new owner shall either qualify as the qualifying party or have an employee of the business that qualifies as a qualifying party. The qualifying party for the business must be an employee of the business as defined in Section 4-14-102, and not a contractor or third party. The qualifying party may not be the designated qualifying party, or employee, of another pesticide applicator business.~~]

(d) The designated representative for a pesticide business license applicant shall meet the requirements of this section, including taking any applicable tests.

R68-7-15. Restricted Use Pesticide Dealer Licensing.

Restricted Use Pesticide Dealer License Required.

(1) It is unlawful for any person to act, represent, or advertise themselves as a restricted use pesticide dealer at any time without obtaining a restricted use pesticide dealer license.

(a) A separate license is required for each individual business location in the state where restricted use pesticides are sold or distributed.

(b) Any manufacturer, registrant, or distributor who has no restricted use pesticide dealer business licensed within this state, and who distributes a restricted use pesticide directly into Utah, shall obtain a restricted use pesticide dealer license for their principal out-of-state business location.

(c) Any manufacturer, registrant, or distributor who sells only through, or to, a pesticide dealer, is not required to obtain a restricted use pesticide dealer license.

(2) Restricted Use Pesticide Dealer License Issuance. Applications for a restricted use pesticide dealer license shall be on the approved department form. The fees for a restricted use pesticide dealer license shall be determined in accordance with Subsection 4-2-103(2) and Section 63J-1-504.

(a) The applicant shall certify on the application that the business understands and recognizes the rules concerning the sale of restricted use pesticides and the records that shall be kept and maintained for two years.

(b) The applicant shall take online training before the initial issuance of their license and with every renewal. If a new manager is hired, the manager shall take online training.

(c) If the department finds the applicant qualified to sell or distribute restricted use pesticides, and the applicant has paid any required licensing fees, the department may issue a restricted use pesticide dealer license. The restricted use pesticide dealer license shall expire on December 31 of the third calendar year from the time of licensure, unless it has been revoked or suspended by the department for cause, as set forth in Section R68-7-20.

(3) Restricted Use Pesticide Dealer License Renewal. Renewal fees for a restricted use pesticide dealer license shall be determined in accordance with Subsection 4-2-103(2) and Section 63J-1-504. If a restricted use pesticide dealer fails to complete and submit the necessary renewal forms and certifications to the department before the end of their license expiration date, a late fee may be assessed and added to the renewal fee, in accordance with Subsection 4-2-103(2) and Section 63J-1-504.

(4) Records Maintained. Each licensed restricted use pesticide dealer location shall keep a record of any restricted use pesticide sales. This restricted use pesticide sales record shall be submitted to the department on the department's website, and shall contain the following information:

(a) the company name of the restricted use pesticide dealer;

(b) the store or location name of the restricted use pesticide dealer making the sale;

(c) the complete restricted use pesticide dealer license number;

(d) the expiration date of the certified pesticide applicator's certification or license;

(e) the categories in which the pesticide applicator is certified relevant to the pesticides sold;

(f) the complete date of the sale, including the month, day, and year;

(g) the first and last name of the individual who made the sale;

(h) the brand name of the restricted use pesticide sold, the complete EPA registration number of the restricted use pesticide, and the quantity sold;

(i) the restricted use pesticide product container size;

(j) the first and last name of the certified pesticide applicator who made the purchase;

(k) the complete pesticide applicator license number of the certified pesticide applicator who made the purchase; and

(l) the complete address and contact information of the certified pesticide applicator who made the purchase, including street name and house number, city, state, zip code, phone number, and email address.

(m) If the individual who purchased the restricted use pesticide was authorized by letter, the authorization letter shall be kept on file for a minimum of two years. The authorization letter shall contain the name, pesticide applicator license number, signature of the pesticide applicator who wrote the authorization letter, and the full name of the individual being authorized to purchase the restricted use pesticide. The authorization letter may only be used once per restricted use pesticide purchase. The restricted use pesticide dealer shall verify the information contained in the authorization letter, and shall verify the identity of the authorized individual by a government issued identification.

(n) If the individual who purchased the restricted use pesticide used a temporary pesticide applicator permit, a copy of the temporary pesticide applicator permit shall be kept on file for a minimum of two years.

(o) Records shall be kept for a period of two years from the date of the restricted use pesticide sale[~~,~~] and shall be made available for inspection by the department. The department, upon request and within two business days, shall be furnished a copy of any sales records completed by the restricted use pesticide dealer.

(5) Submission of Electronic records. On or before July 1 of each year, restricted use pesticide dealers are required to submit their restricted use pesticide sales records for the period starting the previous July 1 through June 30 of the current year.

(6) Exemption. Section R68-7-15 shall not apply to a certified pesticide applicator who sells restricted use pesticides only as an integral part of their commercial pesticide application business services when the pesticides are dispensed only through their equipment used for pesticide application.

(7) Restricted Use Pesticide Dealers Responsible for the Acts of Their Employees. Each restricted use pesticide dealer shall be responsible for the acts of each person under their employ in the solicitation and sale of restricted use pesticides, and any claims and recommendations for the use of restricted use pesticides. A restricted use pesticide dealer license may be subject to denial, suspension, or revocation for any violation of Title 4, Chapter 14, Utah Pesticide Control Act, or rules promulgated thereunder, whether committed by the restricted use pesticide dealer or by the dealer's officer, agent, or employee.

R68-7-16. Responsibilities of Pesticide Applicator Businesses and Pesticide Applicators.

(1) Pesticide Applicator Business Duties and Responsibilities.

[~~(a) A pesticide applicator business shall ensure the qualifying party of the business, as described in Section 4-14-111, receives the training the qualifying party requires to comply fully with state law, individual pesticide label restrictions, and any applicable labeling directions.~~]

([~~b~~]a) Evidence of any pesticide training and attendance shall be recorded and kept on file, and shall include the name of the employee, their respective pesticide applicator license number, the pesticide topics and specific products covered, and the signatures of the trainees and the trainer. The agenda and copies of the pesticide training material shall be retained for two years after the termination of any employee.

([~~c~~]b) It is the business owner's responsibility to verify that each employed pesticide applicator is properly certified in the appropriate pesticide categories.

([~~d~~]c) Each pesticide service vehicle shall carry complete, appropriate, legible, and up-to-date labels for each pesticide applied directly from that pesticide service vehicle.

(i) Original labels are preferred, and it is prohibited to remove any label from any container still containing any pesticide concentrate.

(ii) If any pesticide labels are printed from an internet source, the revision number or date should be verified with the label on the container to ensure the correct version is used.

(iii) Electronic copies of labels are not acceptable.

(2) Responsibilities of the pesticide business and employees.

(a) A pesticide business,[~~, their qualifying party,~~] or their pesticide applicator may be held responsible for the acts or omissions of an employee of the pesticide business. It is the responsibility of the pesticide business to properly train, equip, and prepare their employees, and to maintain records of employee training and equipment.

(b) Failure to respond to or fully disclose information pursuant to any requests by the department within two business days, for information relating to the training and equipment of a pesticide business and their employees shall be evidence of a failure to properly train or equip. The pesticide business owner,[~~, qualifying party,~~] or designated pesticide business supervisor has the burden of proof by a preponderance of the evidence that the pesticide business,[~~, qualifying party,~~] or pesticide business employee has fulfilled the required duties as prescribed by this rule or a written order of the department.

(3) Use of pesticide business name and license number.

(a) A pesticide business shall prominently display the pesticide business license issued by the department at the primary pesticide business office and at each branch office.

(b) In addition to the requirements of Subsection R68-7-16(3)(a), a pesticide business shall prominently display the pesticide business name and corresponding license number, as recorded on the license issued by the department, on:

(i) customer proposals or contracts that include pest management services;

(ii) service records and service notifications; and

(iii) pesticide business service vehicles and trailers used in providing pest management services.

(c) Pesticide business names and corresponding license numbers displayed on a pesticide business service vehicle or trailer used in providing pest management services shall conform to the following:

(i) are affixed to the service vehicle or trailer used in providing pest management services within 30 days after the department issues the license, or issues a business license change, or after the service vehicle or trailer is acquired, whichever is sooner;

(ii) are in a color that contrasts with the color of the service vehicle and trailer;

(iii) are prominently displayed on both sides of the service vehicle or trailer;

(iv) use at least two-inch letters for the principal words in the pesticide business name and at least one and one-half inch letters for other words in the pesticide business name;

(v) use at least two-inch numbers for the pesticide business license number; and

(vi) use letters and numbers that are weatherproof.

(d) A pesticide business that always uses a pesticide business service vehicle and trailer together shall only mark either the service vehicle or trailer as described in Subsection R68-7-16(3)(c). A pesticide business that uses a vehicle only for sales, solicitations, or solely for inspections, and does not carry a pesticide or pesticide application equipment, and does not otherwise use the vehicle to provide a pest management service, is not required to mark the vehicle as described in Subsection R68-7-16(3)(c).

(e) When complying with Subsection R68-7-16(3)(c), a pesticide business may use a slogan, trade name, or trade mark in addition to the pesticide business name and corresponding license number. When complying with Subsection R68-7-16(3)(c), a pesticide business may use a word or phrase to indicate its formerly licensed pesticide business name, if it had a formerly licensed pesticide business name.

(4) Pesticide Application Notification.

(a) Before the time of each application of a restricted use pesticide with a Danger or Danger-Poison signal word, the certified commercial pesticide applicator, or an employee of the licensed pesticide business shall provide the customer with a written statement containing the following information:

(i) the pesticide business name, pesticide business license number, and telephone number;

(ii) the name and pesticide applicator license number of the licensed pesticide applicator who will make the application;

(iii) the date and time of the pesticide application;

(iv) the type of pesticide application service and brand name and EPA registration number of pesticides applied; and

(v) instructions to the customer to contact the pesticide business telephone number if more specific information is desired regarding the pesticide product applied.

(b) The written statement required in Subsection R68-7-16(4)(a) shall be provided to the customer by any of the following means:

(i) leave statement at the residence;

(ii) in the case of a multi-unit residence, leave the statement with the property manager or their authorized representative; or

(iii) mail to the property manager or their authorized representative if management is located at a location other than the pesticide application site, at least seven calendar days before the date of the pesticide application.

R68-7-17. Termiticide Record Keeping: Additional Requirements.

(1) In addition to the recordkeeping requirements contained in Sections R68-7-11 and R68-7-12, any pesticide applicator shall retain a record of a diagram of the structure treated for termites with termiticide that includes the dimensions of the structure, including the depth to the footer that the foundation rests upon.

(2) For post construction pesticide treatments, the diagram shall also illustrate the area where termites or termite activity was found.

(3) Any records of pesticide applications shall be maintained for a period of two years and organized separately for each individual structure.

(4) If a termiticide distribution system is used:

(a) the system shall meet the standards listed on the label and the use of the system shall be allowed only as stated on the label; and

(b) installation, design, and manufacture of the system shall be allowed by the termiticide label and manufacturer. If no mention of a system is on the label, a distribution application system shall not be used.

R68-7-18. Minimum Standards for Fumigant Applications.

(1) Application of fumigant products require strict adherence to the label, and when required by the label, a verified and written Fumigation Management Plan (FMP) shall be prepared in advance of treatment. An FMP shall provide details regarding the information prescribed by the label. Utah standards for fumigation treatments of any space that can be occupied by a person, or non-target species, require the following:

(a) at least two persons present at the time of releasing the fumigant and during the initial ventilation, one of whom shall be a certified pesticide applicator with the fumigation category, present at the time of the releasing of the fumigant and during the initial ventilation. During the interim, the premises shall be adequately safeguarded against entry by any other person;

(b) notification of local fire department or first responder before fumigation of any building or enclosed space, other than a fumigating vault, the with the address of the fumigation job, time of gas release, kind of gas to be used, and the beginning time of the aeration of the premises.

(c) Premises sealed. Premises to be fumigated shall be sealed in a manner that confines the fumigant to the space intended to be fumigated.

(d) Inspection of premises before releasing fumigant. Immediately before releasing the fumigant, the certified pesticide applicator shall conduct a thorough inspection of the premises to verify that no person or non-target animals remain, and that effective precautions have been taken to safeguard occupants of neighboring buildings as set forth in Subsection R68-7-18(1)(e).

(e) Fumigation of apartments within a multiple unit apartment building.

(i) Fumigation of apartments within a multiple unit apartment building may be fumigated only after the apartments are vacated and the area to be fumigated is properly sealed.

(ii) The adjacent units shall be properly ventilated during the entire exposure period.

(f) Notification of dwellings or places of business within 100 feet of the building being fumigated.

(i) Dwellings or places of business within 100 feet of the building being fumigated shall be notified in writing in advance of the fumigation.

(ii) Premises within 10 feet shall be vacated during the fumigation and aeration periods.

(g) Warning signs.

(i) Warning signs shall be posted conspicuously at entrances of the premises to be fumigated and at the entrances of adjacent multiple units and structures within ten feet and kept there during the entire fumigation and ventilation period. Signs shall be in a bright and conspicuous color with a minimum size of 8 1/2 inches by 11 inches, bearing the word "poison," displaying the skull and crossbones, the name of the fumigant used, and the name, address, and telephone number of the certified pesticide applicator.

(ii) Before the fumigant is released, entrances leading directly to the fumigated space shall be closed, sealed, and locked, except exits to be used by the fumigating crew. These exits shall be closed, sealed, and locked promptly after the fumigant has been released.

(h) Masks worn.

(i) Each member of the fumigating crew shall be equipped with a serviceable mask of a type approved by the U.S. Mines, Safety, and Health Administration with the correct canister for the type of gas used.

(ii) Masks shall be worn while in the enclosed space during and after release of the fumigant, and until initial ventilation is completed.

(i) Re-entering fumigated premises.

(i) No one other than the certified pesticide applicator shall be permitted to re-enter the fumigated premises until the certified pesticide applicator has ascertained by personal inspection, with gas mask and with a chemical appropriate test, that the premises are safe for occupancy.

(ii) Aeration shall be conducted according to the product labeling and re-entry allowed according to levels specified on the label.

(j) Subsections R68-7-18(1)(a) through R68-7-18(1)(i) may not apply to fumigants used to control insects or other pests outside of buildings, or for spot fumigations, or restrictive treatments inside a building, such as grain bins.

(i) Strict adherence to the label instructions shall be adhered to during these applications.

(ii) During the ventilation period of a spot or restrictive fumigation, the premises shall not be occupied by anyone except the certified pesticide applicator.

(iii) A warning gas is recommended where the fumigant is comparatively odorless.

(2) Fumigation of burrowing rodents requires strict adherence to the label as well as a Fumigation Management Plan (FMP) that shall contain the following information:

(a) the purpose of the pesticide application indicating the exact pest to be controlled, and the type of burrow system to be treated;

(b) the pesticide used, stating the name of the pesticide, the EPA registration number, and dosage used;

(c) the property treated information recording the property or facility name and address, and verifying the manager's or property owner's name and contact information;

(d) the certified pesticide applicator information recording the certified pesticide applicator's name, company, pesticide applicator license number, phone numbers, and verifying with valid government issued identification;

(e) any emergency agency contact information, recording the phone numbers for the nearest hospital, fire department, police department, poison control center, and the registrant of the fumigant; and

(f) instructions given to personnel, verifying by written signatures that personnel have been instructed to:

(i) report any accident or incident related to exposure, provide a telephone number for emergency response reporting;

(ii) report to the proper authorities any theft of fumigant or equipment related to fumigation; and

(iii) follow label directions, paying particular attention to the Monitoring, Notification, Sealing, Application Procedures, Fumigation Period, and Use Restrictions portions of the label instructions.

(g) Burrowing Rodent Fumigation Record Keeping: Additional Standards. In addition to the recordkeeping requirements contained in Sections R68-7-11 and R68-7-12, the applicator shall keep as part of the record a scaled diagram of the property treated that includes dimensions of the property, any structures present, and mark each burrow treated on the diagram.

R68-7-19. Transportation, Storage, Handling, Usage, and Disposal of Pesticides and Pesticide Containers.

Any pesticide applicator shall provide a secure pesticide and device storage area. The storage area may include an area on a service vehicle. Any pesticide applying entities shall also have, at a minimum, a pesticide spill kit in each pesticide service vehicle, pesticide service trailer, and at each pesticide business location.

(1) [~~No~~]A person [~~shall~~]may not transport, store, or dispose of any pesticide or pesticide container in such a manner as to cause injury to humans, other non-target species, or the environment.

(2) Pesticide containers shall be secured during transport by use of side or end racks, bracing, chocks, tie downs, or other means to prevent their sliding, falling, tipping, rolling, or falling off the vehicle with normal vehicle acceleration, deceleration, or change in direction.

(3) Portable tanks shall be secured to prevent their sliding, falling, tipping, or rolling with normal vehicle acceleration, deceleration, or change in direction. Stacking or wedging against ends, sidewalls, or doors of van bodies shall not be relied upon for securement.

(4) Pesticides in leaking, broken, corroded, or otherwise damaged containers shall not be displayed, offered for sale or transported, and shall be handled or disposed of in a manner that would not damage or injure humans, other non-target species, or the environment. Pesticides with obscured, illegible, or damaged labels shall not be displayed, offered for sale, or sold.

(5) [~~No~~]A person [~~shall~~]may not distribute or sell any pesticide unless it is in the registrant's or manufacturer's unopened, original container, and the registered pesticide label is affixed to the container.

(6) [~~No~~]A person [~~shall~~]may not transport, handle, store, load, apply, or dispose of any pesticide, pesticide container, apparatus, or rinsate in such a manner as to pollute water supplies or waterways, or cause damage or injury to land, humans, desirable plants and animals, or wildlife, except that a pesticide labeled for aquatic use and used as directed shall not be considered a violation of this subsection. Disposing of pesticides at disposal sites approved by the appropriate agency complies with the requirements of this subsection. Toxicity, volatility, and mobility of pesticides shall be considered in complying with this subsection.

(7) [~~No~~]A person [~~shall~~]may not pollute streams, lakes, or other water supplies during pesticide loading, mixing, and application and shall use appropriately functioning devices and procedures to prevent back siphoning.

(8) [~~No pesticides shall be applied~~]A person may not apply a pesticide by aircraft or air blast sprayers to property abutting or adjacent to schools in session, hospitals, nursing homes, or other similar establishments, when occupied, under conditions that may result in contamination of these establishments or their premises.

(9) [~~No person shall~~]A person may not apply pesticides if physical drift or volatilization may cause damage to adjacent land, injure humans or other species, or the environment.

(10) Requirements for unattended pesticides and their containers:

(a) Pesticides and their containers shall be maintained in accordance with generally accepted industry standards and practices.

(b) Subsections R68-7-19(10)(d) and (e) and Subsection R68-7-19(11) shall not apply to empty pesticide containers once decontaminated.

(c) For the purposes of Subsections R68-7-19(10)(d) and (e) and Subsection R68-7-19(11), pesticides and their containers at the loading area shall not be considered unattended if the operator maintains either visual control or repeatedly returns at closely spaced intervals to ensure safe monitoring of the pesticides and containers.

(d) Unattended pesticides labeled with the signal word "danger/poison" and their containers shall be constructed, stored, and locked to prevent children, unauthorized persons, livestock, or other animals from gaining entry.

(e) Pesticides labeled with the signal word "danger" when not accompanied by the signal word "poison," pesticides labeled with the signal word "warning," pesticides labeled with the signal word "caution," and their containers, shall be stored in secured storage, out of the reach of children, in an enclosure as described in Subsection R68-7-19(10)(d). Metal containers, 28 gallons and larger, with tight screw-type bungs or secured or locked valves shall be considered secured storage.

(11) Requirements for posting of storage area for pesticides and their containers labeled with the signal words "danger/poison":

(a) For purposes of this subsection, warning signs shall show the skull and crossbones symbol and the words: "Danger/Poison (Pesticide or Chemical) Storage Area/Keep Out" in at least two-inch tall letters.

(b) Warning signs shall be posted:

(i) at each entrance or exit from a storage area and on each exterior wall, so that the sign is visible from any direction; and

(ii) if the pesticide storage area is contained in a larger, multipurpose structure, warning signs shall be clearly visible on each entrance of the storage area.

(12) Each service vehicle and business location operated by a commercial pesticide business that carries, transports, or stores any pesticide concentrate or mixed pesticide solution must have, at minimum, a spill kit containing:

(a) a dustproof five-gallon bucket with a lid;

(b) waterproof gloves;

(c) three spill socks, each approximately three inches by 48 inches;

(d) ten medium weight absorbent pads, each approximately 15"x18"; and

(e) one medium weight trash bag to contain used absorbent material.

R68-7-20. Unlawful Acts.

Any person who has committed any of the following acts is in violation of Title 4, Chapter 14, Utah Pesticide Control Act, or rules promulgated thereunder, and is subject to the penalties provided in Section 4-2-301 through Section 4-2-305, up to, and including, citations, fines, and the possible suspension, revocation, or denial of any pesticide applicator, pesticide business, or pesticide dealer license:

(1) been convicted under Section 14(b) of FIFRA;

(2) been subject to a final order imposing a civil penalty under Section 14(a) of FIFRA;

(3) been found in violation of a final state enforcement action for violations of state law;

(4) made false, fictitious, or fraudulent claims, including any written or spoken misrepresentation of the use or effect of pesticides, the certification of any pesticide applicator, or the methods or manner in which pesticides may be applied or utilized;

(5) applied any known ineffective or improper pesticides;

(6) applied any pesticides in a faulty, careless, or negligent manner;

(7) failed to comply with Title 4, Chapter 14, Utah Pesticide Control Act, [~~these rules~~]this rule, or any lawful order of the department;

(8) failure to keep or maintain records required by [~~these rules~~]this rule, or to make reports when and as required, or to notify the department within 30 days of any changes required under Section R68-7-14;

(9) proffered false or fraudulent records, invoices, or reports to the department;

(10) engaged in the business, solicitation, advertisement, or representation of applying a pesticide for hire or compensation on the lands or property of another without having a valid commercial pesticide applicator license;

(11) purchased, used, or supervised the use of, a pesticide which is labeled for restricted use without having qualified as a certified pesticide applicator;

(12) used fraud, deceit, or misrepresentation in any portion of the application process for, or renewal of, a registration, license, permit, or certification with the department;

(13) refused or neglected to comply with any limitations or restrictions on or in an issued license or permit;

(14) used, or caused to be used, any pesticide in a manner inconsistent with its labeling or rules of the department, if [~~those rules~~]this rule further restrict the uses provided on the labeling;

(15) impersonated any federal, state, county, or other government official;

(16) distributed any pesticide labeled for restricted use to any person unless that person or their agent: has a valid pesticide applicator license, permit to use or supervise the use of, or distribute a restricted use pesticide;

(17) applied any pesticides on or in any building, structure, or property without the consent of the owner, manager, or responsible party, with the exception of any government agency that applies a pesticide to abate a public health problem under the direction of the department;

(18) for a pesticide applicator, applied a termiticide at less than the label rate;

(19) for an employer of a commercial or non-commercial pesticide applicator, to allow an employee to apply pesticide before that individual has successfully completed the required pesticide applicator certification process;

(20) a certified pesticide applicator failed to possess a current pesticide applicator license on their person during a pesticide application;

(21) allowed a pesticide application to run off, or drift, from the target pesticide application area, whether or not damage or injury occurred;

(22) failed to register a pesticide business with the department, or follow the rules set forth in this rule for the licensing of a commercial pesticide business;

(23) handled or applied any pesticide for which a person does not have an appropriate, complete, legible, and current label at hand or affixed to the pesticide;

(24) Failed to comply with the federal pesticide container and containment regulations found in 40 CFR 156 and 165;

(25) Failed to perform fumigation applications according to the standards required by this rule;

(26) Failed to display the pesticide business license name and pesticide business license number in accordance with this rule;

(27) Failed to notify a customer of the application of a restricted use pesticide and the information detailed in Section R68-7-16;

[~~(28) The qualifying party of a commercial pesticide business failed to train or prepare a commercial pesticide applicator to comply fully with the following:~~

~~(a) any Utah pesticide statute;~~

~~(b) any Utah pesticide rule;~~

~~(c) any pesticide label;~~

~~(d) any pesticide labeling directions; and~~

~~(e) any equipment they will be using.~~]

(28[~~9~~]) Failure to be timely and fully respond to requests by the department for information relating to training and equipping [~~of~~]pesticide applicators;

([~~30~~]29) transported, stored, handled, used, or disposed of a pesticide or pesticides container that is inconsistent with this rule;
(30[~~.~~]) cheated on any pesticide test required by the department or otherwise failed to comply with testing requirements;
(31[~~.~~]) refused or neglected to change contact and employment information within 30 days; or
(32[~~.~~]) violated the EPA WPS.

R68-7-21. [~~Penalty Matrix~~|Penalties.

(1) The department shall process compliance actions, warning letters, administrative citations, settlement agreements, and information adjudicative proceedings for violations of Title 4, Chapter 14, Utah Pesticide Control Act, or this rule pursuant to Rule R51-2.[~~In the disposition of administrative cases, the department shall use a penalty matrix to determine appropriate penalties. The penalty amount shall be from $50-500 per violation. The department shall~~]

(2) In calculating[~~e~~] an administrative fine or civil penalty,[~~ies based on~~] the department shall consider:

(a) the level and severity of the violation;[~~and the adverse effect or potential adverse effects at the time of the incident giving rise to the violation. The median penalty shall be assessed unless a proportionate adjustment is warranted or there are aggravating or mitigating factors present.~~

~~(1) The department may also choose to issue a warning, in lieu of penalty, where the penalty matrix allows. Any warning in lieu of penalty shall be issued in the department's sole discretion.~~

~~(2) The department may consider circumstances enhancing or reducing the penalty based on the seriousness of the violation. Aggravating and mitigating factors include the following:~~

~~(a) the number of separate alleged violations for a given inspection or incident date;~~]

(b) the magnitude of the harm, or potential harm, including quantity or degree, to humans, non-target species, property, or the environment[~~caused by the violation~~]; and

(c) [~~the similarity of the current alleged violation to violations committed by the pesticide applicator or business; and~~

~~(d) the extent to which the alleged violation is part of a pattern of the same or substantially similar conduct~~]applicable aggravating or mitigating factors.

(3) The department may assess an administrative fine or seek a civil penalty for:

(a) a general violation of Title 4, Chapter 14 Utah Pesticide Control Act, or this rule, up to $5,000 per violation pursuant to Section 4-2-304;

(b) an Ornamental and Turf Technician violation under Section 4-14-112, up to $1,000 per violation pursuant to Subsection 4-14-108(8); or

(c) failure to return a revoked or suspended licensed within 14 calendar days of receiving notice, up to $100 for each 14-day period, pursuant to Subsection 4-14-108(7)(b).

(4) [~~will review past violation trends and update the penalty matrix based on compliance history annually.~~]A person served with a notice of agency action or administrative citation under this rule may appeal the action by requesting an informal adjudicative proceeding pursuant to Rule R51-2.[~~copy of the penalty matrix shall be made available from the department upon request.~~]

KEY: inspections, pesticides, license, permits, restricted use, general use, applicators
Date of Last Change: 2026[~~September 7, 2022~~]
Notice of Continuation: November 17, 2025
Authorizing, and Implemented or Interpreted Law: 4-14-106

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58424**
Rule or section number:	**R156-1**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Lauren Harvey	801-530-6654	laureneharvey@utah.gov

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

3. General Information

A. Rule or section catchline:
R156-1. General Rule of the Division of Professional Licensing
B. Purpose of the new rule or reason for the change:
The Division of Professional Licensing (Division) is filing these proposed amendments in accordance with statutory changes made by HB 559 that passed in the 2026 General Session and became effective on 05/06/2026. HB 559 (2026) requires the Division, with the Department of Health and Human Services (DHHS), to develop a training for certain health care professionals on supporting individuals and families experiencing pregnancy or infant loss.
C. Summary of the new rule or change:
These amendments create a new section of this rule, R156-1-605, that implements the training required by HB 559 (2026) and identifies which professions qualify for counting the training towards their continuing education requirements. Subsection R156-1-605(1) establishes the authority for this rule and the general premise of this rule. Subsection R156-1-605(2) establishes that the number and type of continuing education credit hours allowed for different training courses will be stated on the Division's website or in the training materials. Under this subsection, the Division can also specify the hours in rule. Subsection R156-1-605(3) lists all the licenses the Division believes may work in emergency care, obstetrics and gynecology, or labor and delivery settings and would therefore be eligible to count this training toward their continuing education requirements. Subsection R156-1-605(4) requires individuals who claim the continuing education credit to maintain documentation of completion and follows the Division's documentation requirements for other continuing education. Subsection R156-1-605(5) establishes that the Division's development of such training may include identifying as approved by the Division any existing education, course, training, materials, or resources that the Division approves in collaboration with DHHS.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 559 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
The Division does not anticipate any fiscal impact to the state budget beyond that determined by the fiscal note for HB 559 (2026), at https://le.utah.gov/~2026/bills/static/HB0559.html, because the proposed amendments implement the statutory framework created by HB 559 (2026).
B. Local governments:
The Division does not anticipate any cost or savings to local governments from the proposed amendments because the proposed amendments do not apply to local governments.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
It is difficult to quantify the number of small businesses that employ licensees who work in emergency care, obstetrics and gynecology, or labor and delivery settings.

However, the proposed amendments are not expected to have any measurable impact on small businesses' revenues or expenditures beyond the fiscal note for HB 559 (2026) because the amendments implement the new training which is optional for licensees to participate in and earn continuing education credit for.

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

It is difficult to quantify the number of non-small businesses that employ licensees who work in emergency care, obstetrics and gynecology, or labor and delivery settings.

However, the proposed amendments are not expected to have any measurable impact on non-small businesses' revenues or expenditures beyond the fiscal note for HB 559 (2026) because the amendments implement the new training which is optional for licensees to participate in and earn continuing education credit for.

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***)**:**

In Utah, there are about:
a) 4,425 licensed pharmacists;
b) 7,188 licensed pharmacy technicians;
c) 157 dispensing medical practitioners;
d) 3,487 licensed physical therapists;
e) 1,214 licensed physical therapist assistants;
f) 8,804 licensed APRNs;
g) over 900 APRN-CRNAs;
h) 242 certified nurse midwives;
i) 2,629 licensed practical nurses;
j) 49,075 registered nurses;
k) 1,585 licensed occupational therapists;
l) 569 licensed occupational therapy assistants;
m) 7,913 licensed massage therapists;
n) 4 licensed massage assistants;
o) 4,308 licensed radiologic technologists;
p) 11 licensed radiologist assistants;
q) 627 licensed radiology practical technicians;
r) 2,331 licensed respiratory care practitioners;
s) 12,199 licensed physicians and surgeons;
t) 2,784 physicians and surgeons with multi-state licensure;
u) 2,021 licensed osteopathic physicians;
v) 564 osteopathic physicians with multi-state licensure;
w) 3,463 licensed physician assistants;
x) 6 licensed anesthesiologist assistants and 4 licensed anesthesiologist assistants with controlled substance credentials;
y) 112 licensed naturopathic physicians;
z) 564 licensed genetic counselors;
aa) 83 licensed direct-entry midwives;
bb) 43 licensed medical language interpreters;
cc) 2,864 certified social workers;
dd) 8,327 licensed clinical social workers;
ee) 2,321 licensed social service workers;
ff) 1,914 licensed marriage and family therapists;
gg) 3,437 licensed clinical mental health counselors;
hh) 27 associate master addiction counselors;
ii) 204 licensed advanced substance use disorder counselors;
jj) 487 licensed substance use disorder counselors;
kk) 7 master addiction counselors;
ll) 50 licensed behavioral health coaches;
mm) 52 licensed behavioral health technicians;
nn) 1,496 licensed behavior analysts; and
oo) 1,382 licensed psychologists.

The Division does not anticipate any cost or savings from these proposed amendments to these persons or to additional persons other than small businesses, non-small businesses, the state, or local government entities because the amendments implement the new training which is optional for licensees to participate in and earn continuing education credit for.

The proposed rule amendments will not create new obligations for other persons or increase the costs associated with any existing obligations for other persons.

F. Compliance costs for affected persons:

As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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)	Section 58-1-605	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/14/2026	09:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 402 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/cxz-orvk-pqe Or dial: (US) +1 317-868-2201 PIN: 135 783 131# More phone numbers: https://tel.meet/cxz-orvk-pqe? pin=2777731297695

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/30/2026

R156. Commerce, Professional Licensing.
R156-1. General Rule of the Division of Professional Licensing.
R156-1-101. Title - Authority - Organization of Rules.

(1) This rule is known as the "General Rule of the Division of Professional Licensing."

(2) The Division adopts this rule under the authority of Subsection 58-1-106(1)(a) to enable the Division to administer Title 58, Occupations and Professions.

(3)(a) The rules and sections in Title R156 shall, to the extent practicable, follow the numbering and organization of the chapters in Title 58, Occupations and Professions.

(b) This Rule R156-1 has general provisions for the administration and enforcement of professions regulated in Title 58, Occupations and Professions.

(c) Rule R156-46b is the Division's Utah Administrative Procedures Act Rule for Division adjudicative proceedings.

(d) The other rules in Title R156 have specific or unique provisions for specific Division professions or programs, which may supplement or alter Rule R156-1 unless expressly provided otherwise in Rule R156-1.

R156-1-102. Definitions.

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

(1)(a) "Active and in good standing" means a licensure status that allows the licensee full privileges to engage in the practice of the profession subject to the scope of the licensee's license classification.

(b) A license that has been placed on probation subject to terms and conditions is not active and in good standing.

(2)(a) "Aggravating circumstances" means any consideration or factors that may justify an increase in the severity of an action to be imposed upon an applicant or licensee.

(b) "Aggravating circumstances" include the following:

(i) prior record of disciplinary action, unlawful conduct, or unprofessional conduct;

(ii) dishonest or selfish motive;

(iii) pattern of misconduct;

(iv) multiple offenses;

(v) obstruction of the disciplinary process by intentionally failing to comply with rules or orders of the Division;

(vi) submission of false evidence, false statements, or engaging in other deceptive practices, including creating, destroying, or altering records;

(vii) refusal to acknowledge the wrongful nature of the misconduct involved, either to the client or to the Division;

(viii) vulnerability of the victim;

(ix) lack of good faith to make restitution or to rectify the consequences of the misconduct;

(x) illegal conduct, including the use of controlled substances; or

(xi) intimidation or threats of withholding client records or other detrimental consequences if the client reports or testifies regarding the unprofessional or unlawful conduct.

(3) "Cancel" or "cancellation" means nondisciplinary action by the Division to rescind, repeal, annul, or void a license:

(a) issued to a licensee in error, such as where a license is issued to an applicant:

(i) whose payment of the required application fee is dishonored when presented for payment;

(ii) who has been issued a conditional license pending a criminal background check and the check cannot be completed due to the applicant's failure to resolve an outstanding warrant or to submit acceptable fingerprint cards; or

(iii) who has been issued the wrong classification of licensure; or

(b) not issued in error, but the licensee fails to maintain the ongoing qualifications for licensure and the failure is not defined as unprofessional conduct or unlawful conduct.

(4) "Charges" means the acts or omissions alleged to constitute either unprofessional or unlawful conduct or both by a licensee, that serve as the basis to consider a licensee for inclusion in the Utah Professionals Health Program authorized in Title 58, Chapter 4a, Utah Professionals Health Program.

(5)(a) "Cheating" means the use of any means or instrumentality by or for the benefit of a candidate to alter exam results to inaccurately represent the competency of a candidate with respect to the knowledge or skills about which the candidate is examined.

(b) "Cheating" includes:

(i) for a candidate during an exam:

(A) communication about the exam with another candidate inside the exam room or facility;

(B) communication about the exam with anyone outside of the exam room or facility;

(C) copying or looking at another candidate's answers;

(D) allowing another candidate to copy or look at the candidate's answers;

(E) use of any item, material, or device that is not specifically authorized for use in the exam; or

(F) unauthorized tampering with exam equipment or materials;

(ii) allowing access to exam questions or answers if not authorized by the Division;

(iii) taking or attempting to take an exam for another individual;

(iv) obtaining, using, disclosing, buying, selling, possessing, or having access to any part of a Division exam without written authorization from the Division or its contracted vendor;

(v) violating an exam confidentiality agreement; or

(vi) attesting that the candidate meets the qualifications to sit for an exam if the candidate knows or reasonable should know that the candidate does not meet the qualifications.

(c) "Cheating" is unlawful conduct under Subsection 58-1-501(1)(e) and unprofessional conduct under Subsection 58-1-501(2)(a)(viii).

(6) "Conditional licensure" means an interim non-adverse licensure action, in which a license is issued to an applicant for initial, renewal, or reinstatement of licensure on a conditional basis in accordance with Section R156-1-308f, while an investigation, inspection, or audit is pending.

(7) "Denial of licensure" means action by the Division refusing to issue a license to an applicant for initial licensure, renewal of licensure, reinstatement of licensure, or relicensure.

(8)(a) "Disciplinary action" means adverse licensure action by the Division under the authority of Subsection 58-1-401(2)(a) or (b).

(b) "Disciplinary action" as used in Subsection 58-1-401(6):

(i) means an adverse licensure action initiated by the Division; and

(ii) does not mean an adverse licensure action taken by the Division in response to an application for licensure.

(9) "Duplicate license" means a license reissued to replace a license that has been lost, stolen, or mutilated.

(10) "Emergency review committee" means an emergency adjudicative proceedings review committee created by the Division under the authority of Subsection 58-1-108(2).

(11) "Expire" or "expiration" means the automatic termination of a license that occurs:

(a) at the expiration date shown upon a license if the licensee fails to renew the license before the expiration date; or

(b) before the expiration date shown on the license:

(i) upon the death of a licensee who is a natural person;

(ii) upon the dissolution of a licensee that is a business structure such as a partnership, corporation, or other business entity; or

(iii) upon the issuance of a new license that supersedes an old license, including a license that:

(A) replaces a temporary license;

(B) replaces a student or other interim license that is limited to one or more renewals or other renewal limitation; or

(C) is issued to a licensee in an upgraded classification permitting the licensee to engage in a broader scope of practice in the licensed occupation or profession.

(12) "Home telephone number" in Section 58-1-106 or R156-1-106 includes a licensee's personal cell phone number.

(13) "Home address" in Section 58-1-106 or R156-1-106 may include a licensee's mailing address or email address.

(14) "Inactive" or "inactivation" means action by the Division to place a license on inactive status in accordance with Section 58-1-305 and Section R156-1-305.

(15) "Investigative subpoena authority" means the Division assistant director or legal analyst, or an alternate designated by the director in writing.

(16) "License" means a right or privilege to engage in the practice of a regulated profession as a licensee.

(17) "Limit" or "limitation" means nondisciplinary action placing either terms and conditions or restrictions, or both upon a license:

(a) issued to an applicant for initial licensure, renewal, or reinstatement of licensure, or relicensure; or

(b) issued to a licensee in place of the licensee's current license or disciplinary status.

(18) "Mitigating circumstances" means any consideration or factors that may justify a reduction in the severity of an action to be imposed upon an applicant or licensee.

(a) Mitigating circumstances include:

(i) absence of prior record of disciplinary action, unlawful conduct or unprofessional conduct;

(ii) personal, mental, or emotional problems if the problems have not posed a risk to the health, safety, or welfare of the public or clients served, such as drug or alcohol abuse while working or similar situations where the licensee or applicant should know that they should refrain from engaging in activities that may pose such a risk;

(iii) timely and good faith effort to make restitution or rectify the consequences of the misconduct involved;

(iv) full and free disclosure to the client or Division before the discovery of any misconduct;

(v) inexperience in the practice of the profession, that is not the result of failure to obtain appropriate education or consultation that the applicant or licensee should have known they should obtain before beginning work on a particular matter;

(vi) imposition of other penalties or sanctions if the other penalties and sanctions have alleviated threats to the public health, safety, and welfare; and

(vii) remorse.

(b) The following factors may not be considered as mitigating circumstances:

(i) forced or compelled restitution;

(ii) withdrawal of complaint by client or other affected persons;

(iii) resignation before disciplinary proceedings;

(iv) failure of injured client to complain;

(v) complainant's recommendation as to sanction; or

(vi) in an informal disciplinary proceeding brought pursuant to Subsection 58-1-501(2)(a)(iii), or 58-1-501(2)(a)(iv), or Section R156-1-501:

(A) argument that a prior proceeding was conducted unfairly, contrary to law, or in violation of due process or any other procedural safeguard;

(B) argument that a prior finding or sanction was contrary to the evidence or entered without due consideration of relevant evidence;

(C) argument that a respondent was not adequately represented by counsel in a prior proceeding; and

(D) argument or evidence that former statements of a respondent made in conjunction with a plea or settlement agreement are not true.

(19) "Nondisciplinary action" means adverse licensure action by the Division under the authority of Subsection 58-1-401(1) or 58-1-401(2)(c) or (d).

(20) "Peer committee" mean an advisory peer committee to a board that is created by the Legislature in Title 58, Occupations and Professions, or created by the Division under the authority of Subsection 58-1-203(1)(f).

(21) "Probation" means disciplinary action placing terms and conditions upon a license:

(a) issued to an applicant for initial licensure, renewal or reinstatement of licensure, or relicensure; or

(b) issued to a licensee in place of the licensee's current license or disciplinary status.

(22) "Public reprimand" means disciplinary action to formally reprove or censure a licensee for unprofessional or unlawful conduct, with the documentation of the action being classified as a public record.

(23) "Regulatory authority" as used in Subsection 58-1-501(2)(a)(iv) and this rule means any governmental entity that licenses, certifies, registers, or otherwise regulates persons subject to its jurisdiction, or grants the right to practice before or otherwise do business with the governmental entity.

(24) "Reinstate" or "reinstatement" means to:

(a) activate an expired license; or

(b) restore a license that is restricted as defined in Subsection (26)(b), suspended, or on probation, to a less restrictive license or an active in good standing license.

(25) "Relicense" or "relicensure" means to license an applicant who has previously been revoked or has previously surrendered a license.

(26) "Restrict" or "restriction" means disciplinary action qualifying or limiting the scope of a license:

(a) issued to an applicant for initial licensure, renewal or reinstatement of licensure, or relicensure in accordance with Section 58-1-304; or

(b) issued to a licensee in place of the licensee's current license or disciplinary status.

(27) "Revoke" or "revocation" means disciplinary action by the Division extinguishing a license.

(28) "Suspend" or "suspension" means disciplinary action by the Division removing the right to use a license for a period or indefinitely as indicated in the disciplinary order, with the possibility of subsequent reinstatement of the right to use the license.

(29) "Surrender" means voluntary action by a licensee giving back or returning to the Division in accordance with Section 58-1-306, the rights and privileges associated with a license issued to the licensee.

(30) "Temporary license" or "temporary licensure" means a license issued by the Division on a temporary basis to an applicant for initial licensure, renewal or reinstatement of licensure, or relicensure in accordance with Section 58-1-303.

(31) "Unprofessional conduct" as defined in Title 58, Occupations and Professions is further defined, in accordance with Subsection 58-1-203(1)(e), in Section R156-1-501.

(32) A "warning or final disposition letter that does not constitute disciplinary action" as used in Subsection 58-1-108(3) means a letter that does not contain findings of fact or conclusions of law and does not constitute a reprimand, but that may address one or more of the following:

(a) Division concerns;

(b) allegations upon which those concerns are based;

(c) potential for administrative or judicial action; or

(d) disposition of Division concerns.

R156-1-102a. Global Definitions of Levels of Supervision.

(1) Under Subsection 58-1-106(1)(a), except as otherwise provided by statute or rule, the following global definitions of levels of supervision apply to supervision terminology in Title 58, Occupations and Professions and Title R156, and shall be referenced and used to the extent practicable in those statutes and rules to promote uniformity and consistency:

(a) "Direct supervision" and "immediate supervision" means the supervising licensee is present and available for face-to-face communication with the person being supervised when and where professional services are being provided;

(b) "Indirect supervision" means the supervising licensee:

(i) has given either written or oral instructions to the person being supervised;

(ii) is present in the facility or located on the same premises where the person being supervised is providing services; and

(iii) is available to provide immediate face-to-face communication with the person being supervised as necessary.

(c) "General supervision" means that the supervising licensee:

(i) has authorized the work to be performed by the person being supervised;

(ii) is available for consultation with the person being supervised by personal face-to-face contact, or direct voice contact by electronic or other means, without regard to whether the supervising licensee is present in the facility or located on the same premises where the person being supervised is providing services;

(iii) can provide any necessary consultation within a reasonable time; and

(iv) personal contact is routine.

(d) "Supervising licensee" means a licensee who under statute or rule has satisfied the requirements to act as a supervisor and has agreed to supervise an unlicensed individual or a licensee in a classification or licensure status that requires supervision.

(2) Except as otherwise provided by statute or rule:

(a) unlicensed personnel allowed to practice a regulated profession shall practice under an appropriate level of supervision as defined in this section, as specified by the profession's licensing act or rule; and

(b) a license classification required to practice under supervision shall practice under an appropriate level of supervision as defined in this section, as specified by the profession's licensing act or rule.

R156-1-102b. Definitions Include Words Formed by Derivation.

A word formed by derivation from a word defined in Title 58, Occupations and Professions, or Title R156 is subject to the same applicable requirements, conditions, and restrictions on use. For example, an unlicensed person may not use the word architecture in a business name to avoid the prohibition against the use of the title architect under Section 58-3a-501.

R156-1-106. Division - Licensee Lists.

(1) Each person requesting a licensee list pursuant to Section 58-1-106 and this section shall apply to the Division upon a form provided by the Division in which the requester:

(a) submits for Division approval a copy of the requester's proposed communications to the licensees, with a description of the proposed frequency and method of communication;

(b) acknowledges that the information received is a Division record under Title 63G, Chapter 2, Government Records Access and Management Act (GRAMA), and that a violation of Section 58-1-106 or this section may subject the requester to criminal penalties and other remedies under GRAMA; and

(c) agrees to:

(i) comply with the restrictions of this section;

(ii) use the information received only for the purposes for which the requester is authorized;

(iii) not disclose or disseminate the information received to another person who is not the requester's agent or employee;

(iv) not use the information received for advertising or solicitation except as allowed in this section;

(v) only distribute to the licensees the Division-approved communications and informational material at the approved frequency and method;

(vi)(A) include with each communication a clear and conspicuous explanation of how the licensee can opt out of receiving future communications; and

(B) honor opt-out requests within five business days; and

(vii) if notified by the Division:

(A) immediately stop use of the information received and stop communications and distribution of informational material to licensees; and

(B) within 15 days, destroy the information received, and certify in writing to the Division its destruction.

(2) Under Subsections 58-1-106(1)(k) and 58-1-106(2), the Division may provide the following requesters a list of multiple licensees, and include licensee home telephone numbers, home addresses, or email addresses:

(a) a governmental entity, including another state or territory or its regulatory agency;
(b) a government-managed corporation;
(c) a political subdivision;
(d) the federal government;
(e) a party to a prelitigation proceeding convened by the Division under Title 78B, Chapter 3, Part 4, Utah Health Care Malpractice Act;
(f) a medical reserve corps, public safety authority, host entity, unified command, or other person concurrently engaged with a person described in Subsections (2)(a) through (d), for preparing for, participating in, or responding to an emergency described in Section 58-1-307;
(g) a research university or regional university in the Utah System of Higher Education, for conducting research;
(h) a Utah nonprofit voluntary professional membership association of individuals licensed by the Division, for purposes that, notwithstanding Subsection (1)(c), may include advertising or soliciting association membership;
(i) a local health department created under Title 26A, Chapter 1, Local Health Departments or the Utah Association of Local Health Departments, for contacting health care providers who reside or work within a local health department boundary about a public health emergency or public health concern within that local health department boundary;
(j) a Division contracted vendor for accomplishing that contract, such as the Division's exams vendor for surveying licensees regarding a job analysis; or
(k) the following persons, for the sole purpose of providing licensees continuing education that meets the requirements of Title 58, Occupations and Professions, and Title R156:
(i) a professional association not described in Subsection (2)(h);
(ii) a nonprofit regulatory association in which the Division holds membership;
(iii) a private continuing education organization;
(iv) a trade union; or
(v) a school of higher education and training such as a university, college, technical college, or career and technical school.
(3) As used in Subsection (2)(k), providing licensees continuing education does not mean providing general information, learning opportunities, marketing, or outreach, including the following:
(a) volunteer opportunities, even if the volunteer would receive training and practical education;
(b) involvement in advocating for legislation;
(c) involvement in labor organizing issues;
(d) solicitations or recruitment for membership; or
(e) continuing education advertisements in a newsletter or other communication issued by the requester that also contains non-continuing education advertisements or other information, unless:
(i) the newsletter is issued by a Utah nonprofit professional association or trade union; and
(ii) the Division determines the newsletter's primary focus is communicating educational articles and information about continuing education, and only incidentally contains advertisements and solicitations for membership.
(4) Under Subsection 58-1-106(3)(c), proper identification of an individual who requests the address or telephone number of a licensee under Subsection 58-1-106(3)(a) shall consist of the individual's:
(a) full legal name;
(b) mailing address;
(c) email address;
(d) daytime phone number; and
(e)(i) one of the following current photo identifications issued by a foreign or domestic government:
(A) driver's license;
(B) non-driver identification card;
(C) passport;
(D) military identification; or
(E) concealed weapons permit; or
(ii) if the individual does not have government-issued identification, alternative evidence of the individual's identity as determined appropriate by the Division, if the Division documents on the requester's application how the individual was positively identified.
(5) The Division may deny a request under Section 58-1-106 for a licensee list or for a home address, email address, or home telephone number of a licensee if the Division determines:
(a) the request is an unwarranted invasion of privacy or a threat to the public health, safety, and welfare; or
(b) the requester, or any affiliate of the requester, failed to comply with the terms and conditions of a previous application or otherwise violated this section.

R156-1-109. Presiding Officers.
(1) This section establishes the presiding officers for the Division under Subsection 63G-4-103(1)(h) and Sections 58-1-104, 58-1-106, 58-1-109, 58-1-202, 58-1-203, 58-55-103, and 58-55-201, except as otherwise designated in writing by the Director, or by the Construction Services Commission under Title 58, Chapter 55, Utah Construction Trades Licensing Act.
(2) The Division or Department employee designated in writing by the Director is the presiding officer for issuance of:
(a) notices of agency action; and
(b) notices of hearing issued concurrently with a notice of agency action or issued in response to a request for agency action.

(3) Under Subsections 58-1-109(2) and 58-1-109(4) a Department administrative law judge is the presiding officer for entering an order of default against a party and conducting further proceedings to complete the adjudicative proceeding, including issuing a recommended order to the Director or Construction Services Commission determining the discipline to be imposed, licensure action to be taken, relief to be granted, or other appropriate matters.

(4) Except as provided in Subsection (9), the presiding officers for adjudicative proceedings before the Division are as follows:

(a) the Director is the presiding officer for the following adjudicative proceedings, however resolved, including stipulated settlements and hearings:

(i) formal adjudicative proceedings under:

(A) Subsection R156-46b-201(1)(b), request for declaratory order conducted as a formal adjudicative proceeding;

(B) Subsection R156-46b-201(2)(a), formal disciplinary proceeding for revocation, suspension, restricted licensure, probationary licensure, cease and desist order or administrative fine not through citation, or public reprimand;

(C) Subsection R156-46b-201(2)(b), unilateral modification of disciplinary order; and

(D) Subsection R156-46b-201(2)(c), termination of diversion agreement or program contract under Section 58-4a-107; and

(ii) informal adjudicative proceedings under:

(A) Subsection R156-46b-202(1)(d), payment of approved claim against the Residence Lien Recovery Fund;

(B) Subsection R156-46b-202(1)(e)(iii), approval or denial of request for modification of a disciplinary order;

(C) Subsection R156-46b-202(1)(e)(v), approval or denial of request for correction of other than procedural or clerical mistakes;

(D) Subsection R!56-46b-202(1)(h), request for declaratory order conducted as an informal adjudicative proceeding;

(E) Subsection R156-46b-202(1)(i), disciplinary sanction imposed in a stipulation or memorandum of understanding with a licensure applicant;

(F) Subsection R156-46b-202(1)(j), other requests for agency action not designated as a formal adjudicative proceeding;

(G) Subsection R156-46b-202(2)(a), nondisciplinary proceeding that results in cancellation of licensure;

(H) Subsection R156-46b-202(2)(b)(ii), disciplinary proceeding against a controlled substance licensee;

(I) Subsection R156-46b-202(2)(c), disciplinary proceeding for violation of an order governing a license; and

(J) Subsection R156-46b-202(2)(d), disciplinary proceeding limited to Subsection 58-1-501(2)(a)(iii) or (iv) or Section R156-1-501.

(b) the bureau manager or program coordinator over the profession or program involved is the presiding officer for:

(i) formal adjudicative proceedings under Subsection R156-46b-201(1)(c), for determining if a request for a board of appeal is properly filed under Subsections R156-15A-210(1) through (4); and

(ii) informal adjudicative proceedings under:

(A) Subsection R156-46b-202(1)(a), approval or denial of an application for initial licensure, renewal, reinstatement, inactive or emeritus status, tax credit certificate, or criminal history determination;

(B) Subsection R156-46b-202(1)(b), favorable or unfavorable criminal history determination;

(C) Subsection R156-46b-202(1)(e)(i), approval or denial of request to surrender licensure;

(D) Subsection R156-46b-202(1)(e)(iv), approval or denial of request for correction of procedural or clerical mistakes;

(E) Subsection R156-46b-202(2)(b)(iii), disciplinary proceeding against a contract security company or armored car company for failure to replace a qualifier;

(F) Subsection R156-46b-202(2)(b)(iv), disciplinary proceeding against a hunting guide or outfitter for unprofessional conduct under Subsection R156-79-502(12) or R156-79-502(14); and

(G) Subsection R156-46b-202(2)(e), disciplinary proceeding regarding renewal requirements.

(5) A Department administrative law judge licensed in good standing with the Utah State Bar is the presiding officer for informal citation hearings under Subsection R156-46b-202(1)(g).

(6)(a) The Uniform Building Code Commission is the presiding officer for formal adjudicative proceedings under Subsection R156-46b-201(1)(c) for convening a board of appeal under Subsection 15A-1-207(3), serving as fact finder at the evidentiary hearing, and entering the final order.

(b) A Department administrative law judge shall conduct the hearing as specified in Subsection 58-1-109(2).

(7) The Residence Lien Recovery Fund manager, bureau manager, or program coordinator designated in writing by the Director is the presiding officer for informal adjudicative proceedings under Subsection R156-46b-202(1)(c), for approval or denial of claims against the Residence Lien Recovery Fund.

(8)(a) The Utah Professionals Health Program manager or an alternate Department employee designated in writing by the Director is the presiding officer for informal adjudicative proceedings under Title 58, Chapter 4a, Utah Professionals Health Program, including:

(i) Subsection R156-46b-202(1)(e)(ii), request for entry into and participation in the Utah Professionals Health Program; and

(ii) Subsection R156-46b-202(1)(f), matters relating to the Utah Professionals Health Program that do not involve termination under Section 58-4a-107.

(b) Each program contract for entry into and participation in the Utah Professionals Health Program shall require the written concurrence of the Division director.

(9)(a)(i)(A) The Construction Services Commission is the presiding officer for adjudicative proceedings under Title 58, Chapter 55, Utah Construction Trades Licensing Act, however resolved including stipulated settlements and hearings, except as otherwise specified in this rule.

(B) Orders adopted by the Commission as presiding officer require the concurrence of the Director.

(ii) The Construction Services Commission is the presiding officer:

(A) for informal adjudicative proceedings under:

(I) Subsection R156-46b-202(1)(e)(iii), approval or denial of request for modification of a disciplinary order;

(II) Subsection R156-46b-202(1)(e)(v), approval or denial of request for correction of other than procedural or clerical mistakes;

(III) Subsection R156-46b-202(1)(h), request for declaratory order conducted as an informal adjudicative proceeding;

(IV) Subsection R156-46b-202(1)(i), disciplinary sanctions imposed in a stipulation or memorandum of understanding with a licensure applicant;

(V) Subsection R156-46b-202(1)(j), other requests for agency action not designated as a formal adjudicative proceeding;

(VI) except for dismissals under Subsection (9)(d)(vi), Subsection R156-46b-202(2)(b)(i) disciplinary proceedings against a contractor, plumber, electrician, or alarm company;

(VII) Subsection R156-46b-202(2)(c), disciplinary proceedings concerning violations of an order governing a license; and

(VIII) Subsection R156-46b-202(2)(d), disciplinary proceeding limited to Subsection 58-1-501(2)(a)(iii) or (iv) or Section R156-1-501;

(B) to serve as fact finder and adopt orders in formal evidentiary hearings for adjudicative proceedings involving persons licensed or required to be licensed under Title 58, Chapter 55, Utah Construction Trades Licensing Act; and

(C)(I) to review recommended orders of a board, an administrative law judge, or other presiding officer who acted as the fact finder in an evidentiary hearing involving a person licensed or required to be licensed under Title 58, Chapter 55, Utah Construction Trades Licensing Act, and to adopt an order of its own; and

(II) in adopting its order, the Construction Services Commission may accept, modify, or reject the recommended order.

(iii)(A) Orders of the Construction Services Commission shall address the issues before the Construction Services Commission and shall be based upon the record developed in an adjudicative proceeding conducted by the Construction Services Commission.

(B) If the Commission has designated another presiding officer to conduct an adjudicative proceeding and submit a recommended order, the record to be reviewed by the Construction Services Commission shall consist of the findings of fact, conclusions of law, and recommended order submitted by the presiding officer based upon the evidence presented in the adjudicative proceeding before the presiding officer.

(iv)(A) The Construction Services Commission or its designee shall submit an adopted order to the Director for the Director's concurrence or rejection within 30 days after it receives a recommended order or adopts an order, whichever is earlier.

(B) An adopted order is issued and becomes a final order upon the concurrence of the Director.

(v)(A) Under Subsection 58-55-103(10), if the Director refuses to concur in an adopted order, the Director shall return the adopted order to the Construction Services Commission or its designee with the reasons in writing.

(B) The Construction Services Commission or its designee shall reconsider the returned adopted order and resubmit an adopted order to the Director, whether or not modified, within 30 days of the date of the initial or subsequent return.

(C) The Director shall consider the resubmitted adopted order and either concur rendering the order final, or refuse to concur and issue a final order, within 90 days of the date of the initial recommended order.

(D) If the time frames in this subsection are followed, this subsection may not preclude an informal resolution such as an executive session of the Construction Services Commission or its designee with the Director to resolve the reasons for the Director's refusal to concur in an adopted order.

(vi) The record of the adjudicative proceeding shall include recommended orders, adopted orders, refusals to concur in adopted orders, and final orders.

(vii) The final order issued by the Construction Services Commission and concurred in by the Director, or not concurred in by the Director and issued by the Director, may be appealed by filing a request for agency review with the Executive Director.

(viii) The content of orders shall comply with Subsection 63G-4-203(1) and Sections 63G-4-208 and 63G-4-209.

(b) The Director is the presiding officer for the concurrence role in disciplinary proceedings under Subsections R156-46b-202(2)(b)(i), R156-46b-202(2)(c), and R156-46b-202(2)(d) as required by Subsection 58-55-103(1)(b)(iv).

(c) A Department administrative law judge is the presiding officer to conduct formal adjudicative proceedings before the Construction Services Commission and its advisory boards, as specified in Subsection 58-1-109(2).

(d) The bureau manager is the presiding officer to conduct informal adjudicative proceedings under:

(i) Subsections R156-46b-202(1)(a)(i) through (1)(a)(iv), approval or denial of an application for initial licensure, renewal, reinstatement, inactive or emeritus status;

(ii) Subsection R156-46b-202(1)(a)(vi), approval or denial of an application for criminal history determination;

(iii) Subsection R156-46b-202(1)(b), favorable or unfavorable criminal history determination;

(iv) Subsection R156-46b-202(1)(e)(i), approval or denial of request to surrender licensure;

(v) Subsection R156-46b-202(1)(e)(iv), approval or denial of request for correction of procedural or clerical mistakes;

(vi) dismissal of a Subsection R156-46b-202(2)(b)(i) disciplinary proceeding based upon the respondent's documented compliance, such as by the respondent replacing a qualifier, providing a required bond, or obtaining necessary insurance; and

(vii) Subsection R156-46b-202(2)(e), disciplinary proceeding regarding renewal requirements.

(e) The Plumbers Licensing Board is the presiding officer to serve as the fact finder and to issue recommended orders to the Construction Services Commission in formal evidentiary hearings for adjudicative proceedings involving persons licensed as or required to be licensed as plumbers.

(f) The Electricians Licensing Board is the presiding officer to serve as the fact finder and to issue recommended orders to the Construction Services Commission in formal evidentiary hearings for adjudicative proceedings involving persons licensed as or required to be licensed as electricians.

(g) The Alarm System Security and Licensing Board is the presiding officer to serve as the fact finder and to issue recommended orders to the Construction Services Commission in formal evidentiary hearings for adjudicative proceedings involving persons licensed as or required to be licensed as alarm companies or agents.

(10) At the direction of a manager or program coordinator, a licensing technician or program technician may sign an informal order in the technician's name if:

(a) the manager or program coordinator approves the wording in advance; and

(b) the caption "FOR THE MANAGER" or "FOR THE PROGRAM COORDINATOR" immediately precedes the technician's signature.

R156-1-109a. Designation of Board Panel - Petition for Review of Panel Decision.

(1)(a) Under Subsection 58-1-109(3)(b) the Director may designate any odd number of board members on a case-by-case or period-of-time basis to represent a licensing board as the presiding officer.

(b) If the Director has not designated board members under Subsection (1)(a) or insufficient board members are able to serve, the bureau manager or licensing board chair may designate the board members to serve.

(2)(a) Under Subsection 58-1-109(4)(b) and Section R151-4-401, to petition the licensing board to review a recommended order issued by the designated board members, the aggrieved person shall file with the Division the petition form available from the Division within ten calendar days after the day on which the recommended order is issued.

(b) The petition shall:

(i) be signed by the aggrieved person seeking review;

(ii) state the grounds for review and the relief requested;

(iii) state the date upon which the petition was filed with the Division; and

(iv) be concurrently served on each party and any administrative law judge who is assigned to the case.

(3) If the aggrieved person does not file a petition in accordance with Subsection (2), the designated board members' recommended order becomes the final recommended order of the licensing board.

(4)(a) As determined by the Division, a licensing board may review a properly filed petition together with the designated board members' recommended order at the licensing board's next regularly scheduled board meeting, or at a specially noticed board meeting.

(b) Under Subsection 58-1-109(4)(c), after review a licensing board may issue its recommended order by affirming the designated board members' recommended order, or modifying or rejecting all or any part of that recommended order and entering new findings of fact, conclusions of law, statement of reasons, and order.

R156-1-110. Issuance of Investigative Subpoenas.

(1)(a) A request for a subpoena in a Division investigation pursuant to Subsection 58-1-106(1)(c) shall be made in writing to the investigative subpoena authority and accompanied by a draft of the proposed subpoena.

(b) Each request shall contain adequate information to enable the investigative subpoena authority to make a finding of sufficient need, including:

(i) the factual basis for the request;

(ii) the relevance and necessity of the particular person and evidence to the investigation; and

(iii) an explanation of why the subpoena is directed to the person upon whom it is to be served.

(c) A request for a subpoena and each finding by the investigative subpoena authority is part of the investigative case file and is evidence obtained as a part of an investigation before that evidence is presented in an administrative action or criminal action.

(2) An approved subpoena shall be issued under the seal of the Division and the signature of the investigative subpoena authority.

(3) The person who requests an investigative subpoena is responsible for service of the subpoena.

(4)(a) Service may be made:

(i) on a person upon whom a summons may be served pursuant to the Utah Rules of Civil Procedure; and

(ii) personally or on the agent of the person being served.

(b) If a party is represented by an attorney, service shall be made on the attorney.

(5)(a) Service may be accomplished by hand delivery or by mail to the last known address of the intended recipient.

(b) Service by mail is complete upon mailing.

(c) Service may be accomplished by electronic means.

(d) Service by electronic means is complete on transmission if transmission is completed during normal business hours at the place receiving the service, 8 a.m. to 5 p.m. on days other than Saturdays, Sundays, and state and federal holidays; otherwise, service is complete on the next business day.

(6)(a) Each investigative subpoena shall have a certificate of service.

(b) The certificate of service may be a separate form or may be on the subpoena.

(c) The person serving the subpoena shall complete the certificate of service for both the served copy and the copy kept for the Division files.

(7) Each investigative subpoena shall have a form provided by the Division for the recipient's custodian of records to complete, sign, and return with the requested information to establish the authenticity of the information.

(8)(a) The investigative subpoena authority may quash or modify an investigative subpoena if the recipient shows the investigative subpoena is unreasonable or oppressive.

(b) A recipient shall file and serve a motion to quash or modify an investigative subpoena upon the investigative subpoena authority no later than ten days after service of the investigative subpoena.

(c) The Division shall file and serve its response to a motion to quash or modify an investigative subpoena upon the investigative subpoena authority and the recipient no later than five business days after receipt of the motion.

(d) The recipient may not file a reply to the Division's response.

R156-1-111. Qualifications for Tax Certificate - Definitions - Application Requirements.

(1)(a) "Psychiatrist" under Subsection 58-1-111(1)(d), includes a licensed physician who is board eligible or board certified for a psychiatry specialization recognized by the American Board of Medical Specialties (ABMS) or the American Osteopathic Association's Bureau of Osteopathic Specialists (BOS); and

(b) "previously or currently board certified in psychiatry" in Subsection 58-1-111(1)(f)(ii)(B) means board certified for a psychiatry specialization recognized by the American Board of Medical Specialties (ABMS) or the American Osteopathic Association's Bureau of Osteopathic Specialists (BOS).

(2) An applicant for a tax credit certificate under Section 58-1-111 shall provide to the Division:

(a) the original application made available on the Division's website, containing the signed attestation of compliance; and

(b) additional documentation that may be required by the Division to verify the applicant's representations made in the application.

R156-1-205. Peer or Advisory Committees - Executive Director to Appoint - Terms of Office - Vacancies in Office - Removal from Office - Quorum Requirements - Appointment of Chairman - Division to Provide Secretary - Compliance with Open and Public Meetings Act and Utah Administrative Procedures Act - No Per Diem and Expenses.

(1) The executive director shall appoint the members of peer or advisory committees established under Title 58, Occupations and Professions, or Title R156.

(2)(a) Except for ad hoc committees whose members shall be appointed on a case-by-case basis, the term of office of peer or advisory committee members is four years.

(b) The executive director shall, at the time of appointment or reappointment, adjust the length of terms to ensure that they are staggered so that about half of the peer or advisory committee is appointed on two-year cycles.

(3) A peer or advisory committee member may not serve more than two full consecutive terms, and a member who ceases to serve may not serve again until after the expiration of two years from the date of cessation of service.

(4)(a) If a vacancy on a peer or advisory committee occurs, the executive director shall appoint a replacement to fill the unexpired term.

(b) After filling the unexpired term, the replacement may be appointed for only one additional full term.

(5)(a) If a peer or advisory committee member fails or refuses to fulfill the responsibilities and duties of a peer or advisory committee member, including attendance at meetings, the executive director may remove the peer or advisory committee member and replace the member in accordance with this section.

(b) After filling the unexpired term, the replacement may be appointed for only one additional full term.

(6) Committee meetings may only be convened with the approval of the appropriate board and the concurrence of the Division.

(7) Unless otherwise approved by the Division, peer or advisory committee meetings shall be held in the building occupied by the Division.

(8) A majority of the peer or advisory committee members shall constitute a quorum and may act on behalf of the peer or advisory committee.

(9)(a) Peer or advisory committees shall annually designate one of their members to serve as chair.

(b) The Division shall provide a Division employee to act as committee secretary to take minutes of committee meetings and to prepare committee correspondence.

(10) Peer or advisory committees shall comply with Title 52, Chapter 4, Open and Public Meetings Act.

(11) Peer or advisory committees shall comply with Title 63G, Chapter 4, Administrative Procedures Act, in their adjudicative proceedings.

(12) Peer or advisory committee members shall perform their duties and responsibilities as public service and may not receive a per diem allowance, or traveling or accommodations expenses incurred in peer or advisory committees business, except as otherwise provided in Title 58, Occupations and Professions, or Title R156.

R156-1-206. Emergency Review Committees - Appointment - Terms - Vacancies - Removal - Quorum - Chair and Secretary - Open and Public Meetings Act and Utah Administrative Procedures Act - Per Diem and Expenses.

(1) The board chair for the profession of the person against whom an emergency adjudicative proceeding is proposed under Sections 63G-4-502 and 58-1-108 may appoint the members of the emergency review committee on a case-by-case or period-of-time basis.

(2) With the exception of the appointment and removal of members and filling of vacancies by the board chair, emergency review committees shall serve in accordance with Subsections R156-1-205(7), and (9) through (12).

R156-1-301. License Application - Filing Date - Applicable Requirements for Licensure - Issuance Date.

(1) The filing date for an application for licensure is the postmark date of the application or the date the application is received and date stamped by the Division, whichever is earlier.

(2) Except as otherwise provided by statute, rule, or order, the requirements for licensure are the requirements in effect on the filing date of the application.

(3) The issuance date for a license is the date the approval is input into the Division's electronic licensure database.

(4) Under Subsection 58-1-301(1)(b)(ii)(B), other satisfactory evidence of an applicant's identity is:

(a) an Individual Taxpayer Identification Number (ITIN);

(b) an Alien Registration Number (A-number); or

(c) for an applicant who has never been issued a social security number, Individual Taxpayer Identification Number (ITIN), or Alien Registration Number (A-number):

(i) an unexpired government-issued passport from the applicant's country of residence; and
(ii) an intent-to-hire letter from a Utah-based employer.

R156-1-301.7. Change of Information - Notification.

(1) Notification sent by email under Section 58-1-301.7 is complete on transmission if transmission is completed during normal business hours, 8 a.m. to 5 p.m. on days other than Saturdays, Sundays, and state and federal holidays, at the place receiving the notice; otherwise, notice is complete on the next business day.

(2) Notification by email may be accomplished by attachment to the email or in the body of the email, or both.

R156-1-302. Licensure by Endorsement.

(1) This section is adopted by the Division under the authority of Subsection 58-1-302(6) to enable the Division to administer Section 58-1-302.

(2) An applicant for licensure by endorsement who has the required experience practicing under a license issued in the other state, district, territory, or jurisdiction is not required to have the license currently active.

(3) Under Subsection 58-1-302(4), the Division may consider in its evaluation of an applicant for licensure by endorsement's experience or other qualifications the time that has elapsed since the applicant's licensed or lawful practice.

(4) The Division may require an applicant for licensure by endorsement to pass one or more of the exams required to obtain licensure in the profession, such as a business and law exam, jurisprudence exam, or professional exam, except if expressly provided otherwise in statute or rule.

R156-1-303. Temporary Licenses in Declared Disaster or Emergency.

(1) Under Section 53-2a-1203, a person who provides services under this exemption from licensure, shall within 30 days of entry file a notice with the Division under Subsection 53-2a-1205(1) using forms available from the Division.

(2) Under Section 53-2a-1205 and Subsection 58-1-303(1), a person who provides services under the exemption from licensure in Section 53-2a-1203 for a declared disaster or emergency shall, after the disaster period ends and before continuing to provide services, meet the normal requirements for licensure under Title 58, Occupations and Professions, unless:

(a) before practicing after the declared disaster the person is issued a temporary license under Subsection 58-1-303(1)(c); or
(b) the person qualifies under another exemption from licensure.

R156-1-305. Inactive Licensure.

(1) Under Section 58-1-305, the following licenses issued under Title 58, Occupations and Professions that are active in good standing may be placed on inactive licensure status:

(a) advanced practice registered nurse (APRN);
(b) anesthesiologist assistant;
(c) architect;
(d) audiologist;
(e) certified public accountant emeritus;
(f) certified prescribing psychologist;
(g) certified nurse midwife;
(h) state certified court reporter;
(i) certified social worker;
(j) chiropractic physician;
(k) clinical mental health counselor;
(l) clinical social worker;
(m) contractor;
(n) deception detection examiner;
(o) deception detection intern;
(p) dental hygienist;
(q) dentist;
(r) dispensing medical practitioner - advanced practice registered nurse;
(s) dispensing medical practitioner - physician and surgeon;
(t) dispensing medical practitioner - physician assistant;
(u) dispensing medical practitioner - osteopathic physician and surgeon;
(v) dispensing medical practitioner - optometrist;
(w) dispensing medical practitioner - clinic pharmacy;
(x) genetic counselor;
(y) health facility administrator;
(z) hearing instrument specialist;
(aa) landscape architect;
(bb) licensed advanced substance use disorder counselor;
(cc) licensed physical therapist;
(dd) marriage and family therapist;

(ee) master addiction counselor;
(ff) naturopath-naturopathic physician;
(gg) optometrist;
(hh) osteopathic physician and surgeon;
(ii) pharmacist;
(jj) pharmacy technician;
(kk) physician assistant;
(ll) physician and surgeon;
(mm) podiatric physician;
(nn) private probation provider;
(oo) professional engineer;
(pp) professional land surveyor;
(qq) professional structural engineer;
(rr) psychologist;
(ss) radiology practical technician;
(tt) school psychological practitioner;
(uu) radiologic technologist;
(vv) security personnel;
(ww) speech-language pathologist;
(xx) substance use disorder counselor;
(yy) veterinarian; and
(zz) state certified veterinary technician.

(2)(a) A licensee requesting inactive licensure shall submit a verified application in a form prescribed by the Division together with:

(i) documentation that the applicant meets the requirements for inactive licensure; and

(ii) the appropriate fee.

(b) If the licensee meets the requirements for inactive licensure, the Division shall place the license on inactive status.

(3) A license may remain on inactive status indefinitely except as otherwise provided in Title 58, Occupations or Professions or Title R156.

(4) An inactive licensee may activate their license by submitting a verified application for activation in a form prescribed by the Division together with:

(a) the appropriate fee; and

(b) except as otherwise provided in Title 58, Occupations and Professions or Title R156, documentation that the inactive licensee meets current renewal requirements.

(5) An inactive licensee whose license is activated during the last 12 months of a renewal cycle shall, upon payment of the appropriate fees, be licensed for a full renewal cycle plus the period remaining until the impending renewal date, rather than being required to immediately renew their activated license.

(6) A Controlled Substance license may be placed on inactive status if it is attached to a primary license placed on inactive status.

R156-1-308a. Renewal Dates.

(1) The following standard two-year renewal cycle renewal dates are established by license classification in accordance with Subsection 58-1-308(1):

TABLE 1
Renewal Dates

Acupuncturist	May 1 even years
Advanced Practice Registered Nurse	January 31 even years
Advanced Practice Registered Nurse - CRNA	January 31 even years
Anesthesiologist Assistant	January 31 even years
Architect	May 31 even years
Associate Clinical Mental Health Counselor	September 30 even years
Associate Marriage and Family Therapist	September 30 even years
Associate Master Addiction Counselor	May 31 odd years
Athlete Agent	September 30 even years
Athletic Trainer	May 31 odd years
Audiologist	May 31 odd years
Barber	September 30 odd years
Barber Apprentice	September 30 odd years
Barber School	September 30 odd years
Behavior Analyst	September 30 even years

Assistant Behavior Analyst	
Behavior Specialist Assistant Behavior Specialist	September 30 even years
Building Inspector	November 30 odd years
Burglar Alarm Security	March 31 odd years
C.P.A. Firm	December 31 even years
Certified Dietitian	September 30 even years
Certified Nurse Midwife	January 31 even years
Certified Prescribing Psychologist	September 30 even years
Certified Public Accountant	December 31 even years
Certified Social Worker	September 30 even years
Chiropractic Physician	May 31 even years
Clinical Mental Health Counselor	September 30 even years
Clinical Social Worker	September 30 even years
Contractor	November 30 odd years
Controlled Substance License	primary license renewal
Controlled Substance Precursor	May 31 odd years
Controlled Substance Handler	September 30 odd years
Cosmetologist/Barber	September 30 odd years
Cosmetologist/Barber Apprentice	September 30 odd years
Cosmetology/Barber School	September 30 odd years
Deception Detection Examiner Deception Detection Examination Administrator Deception Detection Intern	November 30 even years
Dental Hygienist	May 31 even years
Dentist	May 31 even years
Direct-entry Midwife	September 30 odd years
Dispensing Medical Practitioner - Advanced Practice Registered Nurse Optometrist Osteopathic Physician and Surgeon Physician and Surgeon Physician Assistant	September 30 odd years
Dispensing Medical Practitioner Clinic Pharmacy	September 30 odd years
Dispensing Practitioner (LDP)	primary license renewal
Electrician - Apprentice Journeyman, Master Residential Journeyman, Residential Master	November 30 even years
Electrologist	September 30 odd years
Electrology School	September 30 odd years
Elevator Mechanic	November 30 even years
Environmental Health Scientist	May 31 odd years
Esthetician	September 30 odd years
Esthetician Apprentice	September 30 odd years
Esthetics School	September 30 odd years
Eyelash and Eyebrow Technician	September 30 odd years
Eyelash and Eyebrow Technology School	September 30 odd years
Factory Built Housing Dealer	September 30 even years
Funeral Service Director	May 31 even years
Funeral Service Establishment	May 31 even years
Genetic Counselor	September 30 even years
Hair Designer	September 30 odd years
Hair Designer School	September 30 odd years
Health Facility Administrator	May 31 odd years
Hearing Instrument Specialist	September 30 even years
Landscape Architect	May 31 even years
Licensed Advanced Substance Use Disorder Counselor	May 31 odd years
Licensed Behavioral Health Coach	September 30 even years

Licensed Practical Nurse	January 31 even years
Licensed School Psychological Practitioner	September 30 even years
Licensed Substance Use Disorder Counselor	May 31 odd years
Marriage and Family Therapist	September 30 even years
Massage Apprentice	May 31 odd years
Massage Therapist	May 31 odd years
Massage Assistant	May 31 odd years
Master Addiction Counselor	May 31 odd years
Master Esthetician	September 30 odd years
Master Esthetician Apprentice	September 30 odd years
Medication Aide Certified	March 31 odd years
Nail Technologist	September 30 odd years
Nail Technologist Apprentice	September 30 odd years
Nail Technology School	September 30 odd years
Naturopath - Naturopathic Physician	May 31 even years
Occupational Therapist	May 31 odd years
Occupational Therapy Assistant	May 31 odd years
Optometrist	September 30 even years
Osteopathic Physician and Surgeon Restricted Associate Osteopathic Physician	May 31 even years
Outfitter and Hunting Guide	May 31 even years
Pharmacy - Class A, B, C, D, E, or Online Contract Pharmacy	September 30 odd years
Pharmacist	September 30 odd years
Pharmacy Technician	September 30 odd years
Physical Therapist	May 31 odd years
Physical Therapist Assistant	May 31 odd years
Physician Assistant	May 31 even years
Physician and Surgeon, Restricted Associate Physician	January 31 even years
Plumber -- Apprentice, Journeyman, Master Residential Master, Residential Journeyman	November 30 even years
Podiatric Physician	September 30 even years
Preneed Funeral Arrangement Sales Agent	May 31 even years
Private Probation Provider	May 31 odd years
Professional Engineer	March 31 odd years
Professional Geologist	March 31 odd years
Professional Land Surveyor	March 31 odd years
Professional Structural Engineer	March 31 odd years
Provisional Prescribing Psychologist	September 30 even years
Psychologist	September 30 even years
Radiologic Technologist Radiology Practical Technician Radiologist Assistant	May 31 odd years
Recreational Therapy - Therapeutic Recreation Technician Therapeutic Recreation Specialist Master Therapeutic Recreation Specialist	May 31 odd years
Registered Nurse	January 31 odd years
Respiratory Care Practitioner	September 30 even years
Security Personnel	November 30 even years
Social Service Worker	September 30 even years
Speech-Language Pathologist	May 31 odd years
State Certified Behavioral Health Technician	September 30 even years
State Certified Commercial Interior Designer	March 31 odd years
State Certified Court Reporter	May 31 even years
State Certified Music Therapist	March 31 odd years
State Certified Veterinary Technician	September 30 even years

Veterinarian	September 30 even years
Vocational Rehabilitation Counselor	March 31 odd years

(2) The following non-standard license terms and renewal or extension cycles are established in accordance with Subsection 58-1-308(1) and specific requirements of the license:

TABLE 2
Non-Standard License Terms

PROFESSION	TERM
Certified Medical Language Interpreter Tier 1 or 2 (Section 58-80a-304)	3-year term, renews March 31 - may renew.
Funeral Service Intern (Subsection 58-9-303(2))	2-year term, and one additional 2-year term* - then may extend only for hardship.**
Hearing Instrument Intern (Subsection 58-46a-303(2))	3-year term - may extend.*, **
Massage Assistant In-Training (Sections 58-47b-303, R156-47b-303)	6-month term - may extend only for hardship.*, **
Pharmacy technician trainee (Section 58-17b-305.1, Subsection R156-17b-303a(4))	2-year term - may extend for exceptional circumstances.*
Psychology Resident (Subsection 58-61-304(3)(b))	2-year term - may extend for a period not to exceed two years past the date of completion of the minimum supervised experience requirement.*
Type I Foreign Trained Physician-Educator (Section 58-67-302.7)	Initial 1-year term - may renew on 2-year cycles if satisfies Subsection 58-67-302.7(2) requirements, and completes Section 58-37-303 CE.
Type II Foreign Trained Physician-Educator (Section 58-67-302.7)	Initial 1-year term -- may renew annually up to four times if satisfies Subsection 58-67-302.7(3) requirements, and completes Section 58-67-303 CE.
*Extension allowed only if the licensee presents evidence satisfactory to the Division and board that the licensee is on a course reasonably expected to lead to licensure, such as making reasonable progress toward passing any qualifying examinations or completing required supervision hours.	
**Extension allowed only if a circumstance of hardship arose beyond the licensee's control to prevent the completion of the licensure process, and extension is for a period proportionate to hardship.	

R156-1-308b. Renewal Periods - Adjustment of Renewal Fees for an Extended or Shortened Renewal Period.

(1) Except as otherwise provided by statute or as required to establish or reestablish a renewal period, each renewal period shall be two years.

(2) The renewal fee for a renewal period that is extended or shortened by more than one month to establish or reestablish a renewal period may be increased or decreased proportionately.

R156-1-308c. Renewal of Licensure Procedures.

(1) Under Subsection 58-1-308(3) this section establishes the procedures for renewal of licensure.

(2) The Division shall send a renewal notice to each licensee at least 60 days before the expiration date of the licensee's license.

(3)(a) The Division shall send each renewal notice by email to the most recent email address provided to the Division by the licensee.

(b) The Division may send a renewal notice by mail deposited in the post office postage prepaid, addressed to the most recent mailing provided to the Division by the licensee.

(4) Under Subsection 58-1-301.7(2), a notification sent to the most recent mailing address or email address provided to the Division by the licensee constitutes legal notice.

(5) Each renewal notice shall:

(a) include directions for the licensee to renew the license on the Division's website;

(b) notify the licensee that the renewal requirements are outlined in the online renewal process, and that each licensee shall document or certify that the licensee meets the renewal requirements before renewal; and

(c) notify the licensee that:

(i) a license that is not renewed before the license expiration date automatically expires; and

(ii) continued practice without a license is a criminal offense under Subsection 58-1-501(1)(a).

(6) A licensee who is licensed during the last 12 months of a renewal cycle shall be licensed for a full renewal cycle plus the time remaining until the impending renewal date, and is not required to immediately renew the license.

R156-1-308d. Waiver of Continuing Education Requirements - Credit for Volunteer Service.

(1)(a) Under Subsection 58-1-203(1)(g), a licensee may request a waiver of a continuing education requirement under this title, or an extension of time to complete a requirement, if the licensee will be unable or was unable to complete the requirement due to a medical or related condition, humanitarian or ecclesiastical services, extended presence in a geographical area where continuing education is not available, or other reasonable cause.

(b) A licensee shall submit the request no later than the deadline for completing the continuing education requirement, except as allowed by the Division for good cause shown.

(c) A licensee submitting a request has the burden of proof and shall document the reason for the request to the satisfaction of the Division.

(d) A request shall include the beginning and ending dates during which the licensee is unable, or was unable, to complete the continuing education requirement and a detailed explanation of the reason that includes:

(i) the extent and duration of the impediment;

(ii) the extent to which the licensee will continue to be, or continued to be, engaged in practice of the licensee's profession;

(iii) the nature of the medical condition;

(iv) the location and nature of the humanitarian services;

(v) the geographical area where continuing education is not available; and

(vi) other relevant information.

(e) The Division may require a licensee to obtain a specified number of continuing education hours, courses, or both, before reentering the practice of the profession or within a specified period after reentering the practice of the profession, as recommended by the appropriate board, to assure competent practice.

(f)(i) A licensee who receives a waiver from meeting the minimum continuing education requirements is not exempt from Subsection 58-1-501(2)(a)(ix), which requires that the licensee provide services within the competency, abilities, and education of the licensee.

(ii) If a licensee cannot competently provide services, the waiver of meeting the continuing education requirements may be conditioned upon the licensee limiting practice to areas in which the licensee has the required competency, abilities, and education.

(2)(a) Under Subsections 58-1-203(1)(g) and 58-55-302.5(2)(e)(i), the Division may grant continuing education credit to a licensee for volunteering as a subject-matter expert in the review and development of licensing exams for the licensee's profession.

(b) Subject to specific limitations established by rule by the Division in collaboration with a licensing board or the Construction Services Commission, this volunteer continuing education credit shall:

(i) apply to the license period or periods during which the volunteer service was provided;

(ii) be granted on a 1:1 ratio, meaning that for each hour of attendance, the licensee may receive one hour of credit;

(iii) be core, classroom, or live credit, regardless of whether the licensee attended meetings in person or electronically; and

(iv) at the licensee's discretion, the whole or part of the credit hours may be counted toward law or ethics continuing education requirements.

(c) The licensee shall maintain information with respect to the licensee's volunteer services to demonstrate the services meet the requirements of this subsection.

(3) Under Section 58-13-3, a health care professional licensee may fulfill up to 15% of the licensee's continuing education requirements by providing volunteer services at a qualified location within the scope of the licensee's license, earning one hour of continuing education credit for every four documented h ours of volunteer health care treatment.

R156-1-308e. Automatic Expiration of Licensure Upon Dissolution of Licensee.

Under Subsection 58-1-308(2), if a dissolved entity's existence has been reinstated before the expiration date shown upon the entity's expired license, and the entity meets the qualifications for licensure:

(1) if the entity submits its application for reinstatement before the expiration date shown on the license, the license shall be retroactively reinstated to the date of expiration of licensure; and

(2) if the entity submits its application for reinstatement after the expiration date shown on the license, the license shall be reinstated on the effective date of the approval of the application for reinstatement.

R156-1-308f. Denial of Renewal of Licensure - Classification of Proceedings - Conditional Renewal of Licensure During Adjudicative Proceedings - Conditional Initial, Renewal, or Reinstatement Licensure During Audit or Investigation.

(1) If an initial, renewal, or reinstatement applicant under Section 58-1-301 or 58-1-308 is selected for audit, under investigation, or pending inspection, the Division may conditionally issue the initial license or conditionally renew or reinstate the license pending the completion of the audit, investigation, or inspection.

(2) The undetermined completion of a referenced audit, investigation, or inspection, rather than the established expiration date, shall be indicated as the expiration date of a conditionally issued, renewed, or reinstated license.

(3) A conditional issuance, renewal, or reinstatement is not an adverse licensure action.

(4) Upon completion of the audit, investigation, or inspection, the Division shall notify the applicant if the applicant's license is unconditionally issued, renewed, reinstated, denied, or partially denied or reinstated.

(5) A notice of unconditional denial or partial denial of licensure shall include:

(a) the basis for action;

(b) the Division's file or other reference number of the audit or investigation; and

(c) notice that the action is subject to agency review, and how and when the applicant may request agency review.

R156-1-308g. Reinstatement of Licensure that was Active and in Good Standing at the Time of Expiration of Licensure - Requirements.

The following requirements apply to reinstatement of licensure that was active and in good standing at the time of expiration of licensure:

(1) under Subsection 58-1-308(5), if the filing date of an application for reinstatement is between the date of the expiration of the license and 30 days after the date of the expiration of the license, the applicant shall:

(a) submit a completed renewal form furnished by the Division demonstrating compliance with requirements and conditions of license renewal; and

(b) pay the license renewal fee and a late fee.

(2) under Subsection 58-1-308(5), if the filing date of an application for reinstatement is between 31 days after the expiration of the license and two years after the date of the expiration of the license, the applicant shall:

(a) submit a completed renewal form provided by the Division demonstrating compliance with requirements and conditions of license renewal; and

(b) pay the license renewal fee and reinstatement fee.

(3) under Subsection 58-1-308(6), if the filing date of an application for reinstatement is more than two years after the date the license expired:

(a) if the applicant has not been active in the licensed profession as described in Subsection 58-1-308(6)(b), the applicant shall:

(i) submit an application for licensure complete with supporting documents as is required of an individual making an initial application for license demonstrating the applicant meets current qualifications for licensure; and

(ii) pay the license fee for a new applicant for licensure; or

(b) if the applicant has been active in the licensed profession as described in Subsection 58-1-308(6)(b), the applicant shall:

(i) provide documentation that the applicant has continuously, since the expiration of the applicant's license in Utah, been active in the licensed profession while in the full-time employ of the United States government or under license to practice that profession in any other state or territory of the United States;

(ii) provide documentation that the applicant has completed or is in compliance with any renewal qualifications;

(iii) provide documentation that the applicant's application was submitted within six months after reestablishing domicile within Utah or terminating full-time government service; and

(iv) pay the license renewal fee and the reinstatement fee.

R156-1-308h. Reinstatement of Restricted, Suspended, or Probationary Licensure During Term of Restriction, Suspension, or Probation - Requirements.

(1) Reinstatement of restricted, suspended, or probationary licensure during the term of limitation, suspension, or probation shall be in accordance with the disciplinary order that imposed the discipline.

(2) Unless otherwise specified in a disciplinary order imposing restriction, suspension, or probation of licensure, the disciplined licensee may, at reasonable intervals during the term of the disciplinary order, petition for reinstatement of licensure.

(3) A petition for reinstatement of licensure during the term of a disciplinary order imposing restriction, suspension, or probation, shall be treated as a request to modify the terms of the disciplinary order, not as an application for licensure.

R156-1-308i. Reinstatement of Restricted, Suspended, or Probationary Licensure After the Specified Term of Suspension of the License or After the Expiration of Licensure in a Restricted, Suspended or Probationary Status - Requirements.

Unless otherwise provided by a disciplinary order, an applicant who applies for reinstatement of a license after the specified term of suspension of the license or after the expiration of the license in a restricted, suspended, or probationary status shall:

(1) submit an application for licensure complete with supporting documents as is required of an individual making an initial application for license demonstrating the applicant meets current qualifications for licensure and compliance with requirements and conditions of license reinstatement;

(2) pay the license renewal fee and the reinstatement fee;

(3) provide information requested by the Division and board to clearly demonstrate the applicant is currently competent to be reinstated to engage in the profession; and

(4) pay any fines or citations owed to the Division.

R156-1-308j. Relicensure Following Revocation of Licensure - Requirements.

An applicant for relicensure following revocation of licensure shall:

(1) submit an application for licensure complete with supporting documents as is required of an individual making an initial application for license demonstrating the applicant meets current qualifications for licensure and compliance with requirements and conditions of license reinstatement;

(2) pay the license fee for a new applicant for licensure; and

(3) provide information requested by the Division and board to clearly demonstrate the applicant is currently competent to be relicensed to engage in the profession.

R156-1-308k. Relicensure Following Surrender of Licensure - Requirements.

(1) An applicant who surrendered a license that was active and in good standing when it was surrendered shall meet the requirements for licensure in Sections R156-1-308a through R156-1-308l.

(2) An applicant who surrendered a license while the license was active but not in good standing as evidenced by the written agreement supporting the surrender of license shall:

(a) submit an application for licensure complete with supporting documents as is required of an individual making an initial application for license demonstrating the applicant meets the current qualifications for licensure and compliance with requirements and conditions of license reinstatement;

(b) pay the license fee for a new applicant for licensure;

(c) provide information requested by the Division and board to clearly demonstrate the applicant is currently competent to be relicensed to engage in the profession; and

(d) pay any fines or citations owed to the Division.

R156-1-308l. Reinstatement of Licensure and Relicensure - Term of Licensure.

Except as otherwise governed by the terms of an order issued by the Division, a license issued to an applicant for reinstatement or relicensure during the last 12 months of a renewal cycle shall, upon payment of the appropriate fees, be issued for the rest of the current renewal cycle plus the next full renewal cycle.

R156-1-309. Division Exams.

(1) This section establishes standards for the administration of Division exams in accordance with Sections 58-1-106, 58-1-203, and 58-1-309.

(2) Upon evidence that a person has engaged in cheating:

(a) the exam administrator shall notify the Division of the circumstances in detail and the identity of each person involved; and

(b) the Division shall make an appropriate inquiry and may open an investigation to determine the facts concerning the alleged cheating.

(3) If evidence of cheating by a candidate is detected before an exam, the Division may:

(a) deny the candidate the privilege of taking the exam; or

(b)(i) before the candidate takes the exam, notify the candidate of the evidence of cheating and that the Division may determine the candidate to have failed the exam if it finds the candidate has cheated.

(4) If evidence of cheating by a candidate is detected during an exam, the exam administrator may:

(a) end the exam, request the candidate to leave the exam facility, and notify the candidate of the evidence of cheating and that the Division may determine the candidate to have failed the exam if it finds that the candidate has cheated; or

(b)(i) determine that the alleged cheating has not yet compromised the integrity of the exam, take any necessary steps to prevent cheating, and permit the candidate to continue taking the exam; and

(ii) after the exam, notify the candidate of the evidence of cheating, and that the Division may determine the candidate to have failed the exam if the Division finds that the candidate has cheated.

(5) If the Division determines that an individual has engaged in cheating or has otherwise engaged in unprofessional conduct regarding an exam, the Division may take appropriate action including one or more of the following:

(a) if the individual is an exam candidate, deny the individual the privilege of taking or retaking the exam for a period;

(b) refuse to issue the individual a license or otherwise act upon a license issued to the individual pursuant to Section 58-1-401; or

(c) establish the conditions that the individual shall meet to qualify for a license, such as meeting with the board.

(6) An exam administrator may end a candidate's exam session, or the Division may invalidate a candidate's exam results if the candidate:

(a) is engaging or appears to be engaging in cheating;

(b) reports late to the candidate's appointed exam session;

(c) fails to present required identification at the time of the exam session;

(d) creates a disturbance of any kind, including for example:

(i) engaging in behavior that the exam administrator determines is disruptive to another candidate taking the exam;

(ii) using language that might generally be considered inappropriate or offensive; or

(iii) engaging in oral or physical altercations with the exam administrator or another individual;

(e) fails to comply with the directions of the exam administrator; or

(f) reports to the exam under the influence of alcohol, drugs, or other intoxicant, to the extent that the exam administrator determines that it does, or might reasonably be considered to, impair the ability of the candidate to safely engage in the exam.

(7) Each exam subject-matter expert and each exam administrator:

(a) shall be a Utah resident;

(b) shall be 18 years of age or older;

(c) if the exam requires specific knowledge of the profession to grade or administer the exam, shall hold an active license in good standing in that profession or have satisfactory experience or an active license in good standing in a related industry as approved by the Division;

(d) shall adhere to professional ethics and codes of conduct for the profession, including this section and Subsection R156-1-501(9);

(e) shall agree in writing to not participate in any exam coaching or preparation activities for the exam for five years following their review or administration of the exam; and

(f) may not be affiliated with a person that may profit from or materially benefit from knowledge of exam content, such as an educational institution or training program.

(8)(a) The Division may invalidate exam results if it determines that there is a basis to question the validity of the exam results for any reason, notwithstanding the absence of any evidence of a candidate's personal involvement in cheating or other unprofessional conduct.

(b) Evidence of invalid results may include, for example, unusual answer patterns or score increases, or equipment failure.

R156-1-310. Application for Division Determination Regarding Criminal Conviction.

(1) This section establishes the application procedures for a Division determination under Section 58-1-310.

(2) An individual applying for a determination shall:

(a) submit the Application for Criminal History Determination form available on the Division's website, containing a signed attestation and release;

(b) submit a separate application with processing fee for each license that the individual is interested in seeking; and

(c) under Subsection 58-1-310(2)(e), provide any additional documentation that may be required by the Division to verify or evaluate the individual's representations made in the application.

(3) Under Subsection 58-1-310(2), the individual's complete criminal conviction history shall include:

(a) criminal convictions, pleas of nolo contendere, and pleas of guilty or nolo contendere that are held in abeyance pending the successful completion of probation; and

(b) current restrictions from possession, purchase, transfer, or ownership of a firearm or ammunition.

(4) The Division shall make a determination based solely on the information in the individual's application and supporting documents.

(5) Agency review is not available for a Division order or determination under Section 58-1-310.

R156-1-401. Consideration of Unlawful Conduct, Unprofessional Conduct, or Other Mental or Physical Condition.

(1) Under Section 58-1-401, this section applies in circumstances where an applicant or licensee:

(a) is not automatically disqualified from licensure pursuant to statute or rule; and

(b)(i) has past unlawful or unprofessional conduct; or

(ii) as described in Subsection 58-1-401(2)(d), may be unable to practice the profession with reasonable skill and safety because of illness, drunkenness, excessive use of drugs, narcotics, chemicals, or other type of material, substance use disorder, or a mental or physical condition that, when considered with the duties and responsibilities of the license held or to be held, demonstrates a threat or potential threat to the public health, safety, or welfare.

(2) In a circumstance described in Subsection (1), the following factors are relevant to a licensing decision:

(a) aggravating circumstances, as defined in Subsection R156-1-102(2);

(b) mitigating circumstances, as defined in Subsection R156-1-102(17);

(c) the degree of risk to the public health, safety, or welfare;

(d) the degree of risk that a conduct will be repeated;

(e) the degree of risk that a condition will continue;

(f) the magnitude of the conduct or condition as it relates to the harm or potential harm;

(g) the length of time since the last conduct or condition has occurred;

(h) the current criminal probationary or parole status of the applicant or licensee;

(i) the current administrative status of the applicant or licensee, for any regulated profession;

(j) results of previously submitted applications, for any regulated profession;

(k) results from any action, taken by any professional licensing agency, criminal, or administrative agency, employer, practice monitoring group, entity, or association, for any regulated profession;

(l) evidence presented indicating that restricting or monitoring the individual's practice, conditions, or conduct can protect the public health, safety, or welfare;

(m) psychological evaluations; or

(n) any other information the Division and the applicable board reasonably believe may assist in evaluating the degree of threat or potential threat to the public health, safety, or welfare.

R156-1-501. Unprofessional Conduct.

"Unprofessional conduct" includes:

(1) surrendering licensure to any other licensing or regulatory authority having jurisdiction over the licensee or applicant in any regulated profession while an investigation or inquiry into allegations of unprofessional conduct or unlawful conduct is in progress, or after a charging document has been filed against the applicant or licensee alleging unprofessional conduct or unlawful conduct;

(2) practicing a regulated profession in, through, or with a business structure or name that:

(a) has not been properly registered with the Division of Corporations and Commercial Code; or

(b) has not been properly licensed with the Division;

(3) engaging in conduct that results in disciplinary action, including reprimand, censure, diversion, probation, suspension, or revocation, by any other licensing or regulatory authority having jurisdiction over the licensee or applicant in any profession, if the conduct:

(a) when considered with the functions and duties of the profession for which the license was issued or is to be issued, bears a substantial relationship to the licensee's or applicant's ability to safely to competently practice the profession; or

(b) would, in this state, constitute grounds for denial of licensure or disciplinary proceedings under Section 58-1-401;

(4) prohibiting or inhibiting the ability of a licensee's customer, patient, or other consumer of the licensee's goods or services from making a complaint to a licensing or regulatory authority, including through the use of a contract provision;

(5) engaging in cheating or otherwise violating Section R156-1-309 regarding Division exams;

(6) failing, as a prescribing practitioner, to follow the Guidelines for the Chronic Use of Opioid Analgesics, adopted as policy April 2017 by the Federation of State Medical Boards, which is incorporated by reference;

(7) failing to comply with an investigative subpoena or an order regarding an investigative subpoena;

(8) failing, as a health care provider, to follow the health care claims practices of Section 31A-26-313, in violation of Subsection 58-1-508(2); or

(9) as an exam candidate or as an exam proctor, grader, or administrator, failing to comply with the Division of Professional Licensing Exam Policies and Procedures, dated December 29, 2023, which is incorporated by reference.

R156-1-502. Administrative Penalties.

(1) Under Subsection 58-1-401(5) and Section 58-1-502, except as otherwise provided by a specific chapter under Title 58, Occupations and Professions or Title R156, the Division shall issue a notice of agency action instead of a citation for a third or subsequent offense, except in extraordinary circumstances approved by the bureau manager or chief investigator.

(2) Multiple offenses may be cited on the same citation, if the citation clearly indicates each offense and the fine allocated to each offense.

(3) The bureau manager, investigative team leader, or chief investigator may authorize a deviation from the fine in a citation based upon the aggravating or mitigating circumstances.

(4) The presiding officer for a contested citation shall have the discretion, after a review of the evidence and any aggravating and mitigating circumstances, to increase or decrease the fine amount imposed by an investigator.

R156-1-503. Reporting Disciplinary Action.

The Division may report disciplinary action to other state or federal governmental entities, state and federal data banks, the media, or other person who is entitled to the information under the Government Records Access and Management Act.

R156-1-506. Supervision of Cosmetic Medical Procedures.

The 80 hours of documented education and experience required under Subsection 58-1-506(2)(f)(iii) to maintain competence to perform nonablative cosmetic medical procedures includes the following:

(1) the appropriate standards of care for performing nonablative cosmetic medical procedures;

(2) physiology of the skin;

(3) skin typing and analysis;

(4) skin conditions, disorders, and diseases;

(5) pre and post procedure care;

(6) infection control;

(7) laser and light physics training;

(8) laser technologies and applications;

(9) safety and maintenance of lasers;

(10) cosmetic medical procedures an individual is permitted to perform under this title;

(11) recognition and appropriate management of complications from a procedure; and

(12) current cardio-pulmonary resuscitation (CPR) certification for health care providers from one of the following organizations:

(a) American Heart Association;

(b) American Red Cross or its affiliates; or

(c) American Safety and Health Institute.

R156-1-601. Suicide Prevention Video - Primary Care Providers.

(1)(a) Under Subsection 58-1-601(3), the Division shall produce the suicide prevention videos described in Subsection 58-1-601(2) by meeting at least annually with the Division of Integrated Healthcare to review information on existing videos and plan new videos, including:

(i) establishing goals, specifications, and standards for the videos;

(ii) identifying approved vendors from Utah's Best Value Cooperative Contracts list or otherwise planning requests for proposals;

(iii) awarding contracts for creation of the videos; and

(iv) producing the videos and providing them in effective formats.

(b) The Division shall collaborate with the Department of Government Operations to allow primary care providers access to view the suicide prevention videos described in Subsection 58-1-601(2) on the Division's website, at no cost to the providers.

(c) A primary care provider may fulfill up to ten of their CPE hours by viewing the Division-created suicide prevention videos, as follows:

(i) for a video 25 minutes or less in length, a provider may recognize one-half CPE credit hour; and

(ii) for a video 26 minutes or longer, a provider may recognize CPE credit in 50-minute hour blocks of time.

(d) The Division's production of the suicide prevention videos may include posting Division-approved substitutes for the videos on its website, such as Counseling on Access to Lethal Means (CALM) training, or more robust in-person training CME hours from a Suicide Prevention Summit provided by the Department of Health and Human Services.

(2)(a) Under Subsection 58-1-601(2)(b), the Division-approved educational materials or courses related to suicide prevention shall include those identified on the Division's website.

(b) The number and type of CPE credit hours allowed for completion of each educational material or course shall be stated on the Division's website or in the educational materials or course.

(3)(a) The Division or other provider of suicide prevention educational materials, courses, or videos may track or confirm a primary care provider's completion of the educational materials, course, or video.

(b) A primary care provider shall maintain documentation sufficient to prove compliance with Section 58-1-601 and this section, for two years after the end of the licensure cycle for which the CPE is due, including:

(i) title of the educational materials, course, or video;

(ii) date completed;

(iii) number of CE hours claimed; and

(iv) type of CE.

R156-1-602. Telehealth.

(1) Terms used in this rule are defined in Section 26B-4-704. In addition:

(a) "Patient Encounter" means any encounter where medical treatment and evaluation and management services are provided. The entire course of an inpatient stay in a healthcare facility or treatment in an emergency department is a single patient encounter.

(b) "Provider" means the same as defined in Subsection 26-60-102(6)(b), an individual licensed under Title 58, Occupations and Professions to provide health care services, and:

(i) shall include an individual exempt from licensure as defined in Section 58-1-307 who provides health care services within the individual's scope of practice under Title 58, Occupations and Professions; and

(ii) may include multiple providers obtaining informed consent and providing care as a team, consistent with the standards of practice applicable to a broader practice model found in traditional health care settings.

(2) Under Subsection 26B-4-704(2)(b), a provider offering telehealth services shall, before each patient encounter:

(i) verify the patient's identity and originating site;

(ii) allow the patient an opportunity to select their provider rather than being assigned a provider at random, to the extent possible; and

(iii) ensure that the online site does not restrict the patient's choice to select a specific pharmacy for pharmacy services; and

(b) before each initial patient encounter, obtain informed consent to the use of telehealth services by clear disclosure of:

(i) additional fees for telehealth services, if any, and how payment is to be made for those additional fees if they are charged separately;

(ii) to whom patient health information may be disclosed and for what purpose, including clear reference to any patient consent governing release of patient-identifiable information to a third-party;

(iii) the rights of the patient with respect to patient health information;

(iv) appropriate uses and limitations of the site, including emergency health situations;

(v) information affirming that the telehealth services meet industry security and privacy standards in Subsection 26B-4-704(1)(i)(ii), and warning of potential risks to privacy regardless of the security measures;

(vi) a warning that information may be lost due to technical failures, and clearly referencing any patient consent to hold the provider harmless for such loss; and

(vii) information disclosing the website owner-operator, location, and contact information.

(3) Under Subsection 26B-4-704(2)(d), a provider offering telehealth services shall be available to the patient for subsequent care related to the initial telemedicine services as follows:

(a) providing the patient with a clear mechanism to:

(i) access, supplement, and amend patient-provided personal health information;

(ii) contact the provider for subsequent care;

(iii) obtain upon request the patient's medical record or other report containing an explanation of the treatment provided to the patient and the provider's evaluation, analysis, or diagnosis of the patient's condition, including the informed consent provided; and

(iv) request a transfer to another provider of the patient's medical record documenting the telemedicine services; and

(b) if the provider recommends that the patient be seen in person, such as if diagnosis requires a physical examination, lab work, or imaging studies:

(i) arranging to see the patient in person, or referring the patient to the patient's designated health care provider, or if none, to an appropriate health care provider; and

(ii) documenting the referral in the patient's medical record; and

(c) if the patient does not have a designated health care provider, consult with the patient and send a medical record or other report to the referred health care provider in the manner provided under Subsection 26B-4-704(2)(g), except the medical record or report shall be provided within a reasonable time frame allowing for timely care of the patient by that provider.

(4) Nothing in this section shall prohibit electronic communications consistent with standards of practice applicable in traditional health care settings, including the following:

(a) between a provider and a patient with a preexisting provider-patient relationship;

(b) between a provider and another provider concerning a patient with whom the other provider has a provider-patient relationship;

(c) in on-call or cross coverage situations when the provider has access to patient records;

(d) in broader practice models when multiple providers provide care as a team, including, for example:

(i) within an existing organization; or

(ii) within an emergency department; or

(e) in an emergency, which as used in this section means a situation when there is an occurrence posing an imminent threat of a life-threatening condition or severe bodily harm.

R156-1-605. Optional Bereavement Training CE for Health Care Professionals.

(1) Under Subsection 58-1-605, a licensed health care professional who works in emergency care, obstetrics and gynecology, or labor and delivery settings may take the bereavement training as identified on the Division's website and have that training apply to the health care professional's continuing education credit requirements.

(2) The number and type of continuing education credit hours allowed for completion of each training shall be stated on the Division's website or in the training materials and may also be specified in Division rule.

(3) Health care professionals who work in emergency care, obstetrics and gynecology, or labor and delivery settings may include:

(a) an individual licensed under:

(i) Title 58, Chapter 17b, Pharmacy Practice Act;

(ii) Title 58, Chapter 24b, Physical Therapy Practice Act;

(iii) Title 58, Chapter 31b, Nurse Practice Act;

(iv) Title 58, Chapter 42a, Occupational Therapy Practice Act;

(v) Title 58, Chapter 44a, Nurse Midwife Practice Act;

(vi) Title 58, Chapter 47b, Massage Therapy Practice Act;

(vii) Title 58, Chapter 54, Radiologic Technologist, Radiologist Assistant, and Radiology Practical Technician Licensing Act;

(viii) Title 58, Chapter 57, Respiratory Care Practices Act;

(ix) Title 58, Chapter 60, Mental Health Professional Practice Act;

(x) Title 58, Chapter 61, Psychologist Licensing Act;

(xi) Title 58, Chapter 67, Medical Practice Act;

(xiii) Title 58, Chapter 68, Utah Osteopathic Medical Practice Act;

(xiv) Title 58, Chapter 70a, Utah Physician Assistant Act;

(xv) Title 58, Chapter 70b, Anesthesiologist Assistant Licensing Act;

(xvi) Title 58, Chapter 71, Naturopathic Physician Practice Act;

(xvii) Title 58, Chapter 75, Genetic Counselors Licensing Act;

(xviii) Title 58, Chapter 77, Direct-Entry Midwife Act; or

(xix) Title 58, Chapter 80a, Medical Language Interpreter Act; and

(b) any licensed health care professional identified in rules established under Section 26B-2-247.

(4) A health care professional who claims continuing education credit under Section 58-1-605 and this Section R156-1-605 shall maintain documentation sufficient to prove compliance for two years after the end of the renewal cycle for which the health care professional's continuing education is due.

(5)(a) The Division's development of the bereavement training may include identifying as approved bereavement training any existing education, course, training, materials, or resources that the Division in collaboration with the Department of Health and Human Services approves as training that will educate health care providers on best practices for supporting patients and families experiencing pregnancy or infant loss.

(b) Bereavement training under this section shall:

(i) be relevant to the licensee's professional practice;

(ii) be approved, conducted, or sponsored by a:

(A) recognized accredited college or university;

(B) local, state, or federal agency;

(C) professional association, organization, or facility involved in supporting parents and families experiencing pregnancy or infant loss; or

(D) commercial continuing education provider;

(iii) have a method of verification of attendance and completion; and

(iv) be completed in any of the following formats:

(A) college or university lecture and discussion;

(B) professional conference;

(C) seminar;

(D) symposium;

(E) training session; or

(F) interactive online course.

KEY: licensing, supervision, evidentiary restrictions
Date of Last Change: [~~December 24, 2024~~]2026
Notice of Continuation: October 1, 2026
Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-308; 58-1-501(2)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58375**
Rule or section number:	**R156-15**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	**Phone:**	**Email:**
David Wright	801-530-6179	davidwright@utah.gov

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

3. General Information

A. Rule or section catchline:

R156-15. Health Facility Administrator Act Rule

B. Purpose of the new rule or reason for the change:

The Division of Professional Licensing (Division), in collaboration with the Health Facility Administrators Licensing Board (Board), is filing these proposed amendments to conform this rule to Title 58, Chapter 15, Health Facility Administrator Act, as amended by SB 117 (passed in the 2026 General Session).

C. Summary of the new rule or change:

Section R156-15-102 is amended to update the definitions. Amendments add a definition of "CPE," correct the name of the Board, update cross-references to Subsection 58-15-101(1) and Subsection R156-1-102a(1)(c), correct the legal name of the National Association of Long Term Care Administrator Boards, and renumber the definitions.

Sections R156-15-103 and R156-15-104 are removed and their content is moved into Section R156-15-101.

Section R156-15-301a is amended to update the citation from Section 58-15-4 to Section 58-15-301 and to supply a subject for the application requirements.

Section R156-15-301b is amended to update the citation to Subsection 58-15-301(2) and to restructure the education requirement.

Section R156-15-301c is amended to update the citation to Subsection 58-15-301(2) and to clarify how Administrator in training (AIT) preceptorship hours count toward the experience and supervisory hour requirements.

Section R156-15-301d is amended to update the citation to Subsection 58-15-301(4), to state that the Board has determined the subjects of the examination as Subsection 58-15-301(4)(a) requires, and to expand "exam" to "examination."

Section R156-15-301e is added to establish the requirements for a temporary license under Subsection 58-15-301(5).

Section R156-15-303 is amended to restructure the expiration, renewal, and reinstatement provisions as a series.

Section R156-15-307 is amended to update terminology, to separate OSHA and UOSHA into distinct subsections, and to correct punctuation in the preceptorship content list.

Section R156-15-308 is amended to delete the citation to former Subsection 58-15-4(6), which has no counterpart in the chapter as renumbered, and to use the defined term "NAB" (National Association of Long Term Care Administrator Boards).

Section R156-15-309 is amended to update the catchline, add an authority subsection, and renumber the continuing professional education provisions.

Section R156-15-502 is added to define unprofessional conduct under Subsections 58-1-203(1)(e) and 58-15-101(7).

Additional nonsubstantive formatting changes are made throughout this rule to comply with Office of Administrative Rules (OAR) drafting requirements.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 117 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
The Division does not anticipate any fiscal impact to the state budget beyond that determined by the fiscal notes for SB 117 (2026) at https://le.utah.gov/~2026/bills/static/SB0117.html, because the proposed amendments conform this rule to statutory changes already enacted, implement a licensure pathway the statute already authorizes, and update the rule to be current and accurate for licensees. The Division will follow the system already in place for issuing temporary licenses under Section R156-15-304. One health facility in the affected industries is state owned, the Utah State Developmental Center in Utah County. The proposed amendments impose no new obligation on that facility beyond the requirements already in this rule and in Title 58, Chapter 15.
B. Local governments:
Two health facilities in the affected industries are locally owned: Emery County Care and Rehabilitation Center in Emery County and Uintah Basin Medical Center in Duchesne County. Each employs a licensed health facility administrator and is subject to this rule. The Division does not anticipate any cost or savings to local governments, because the proposed amendments conform this rule to statutory changes already enacted, correct citations and the name of the Board, and impose no new obligation on a health facility or its administrator.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There are approximately 194 small businesses in Utah that operate health facilities as defined in Subsection 58-15-101(3). This is the count of privately owned Utah establishments employing 1 to 49 persons under NAICS 623110, Nursing Care Facilities (Skilled Nursing Facilities), and NAICS 623210, Residential Intellectual and Developmental Disability Facilities, in the Utah Department of Workforce Services Firm Find database published March 2026 and reflecting employment as of September 2025. The proposed amendments are not expected to have any measurable impact on small businesses' revenues or expenditures. The amendments conform this rule to statutory changes already enacted, correct citations and the name of the Board, and codify duties this rule already imposes. Section R156-15-304 establishes requirements for a temporary license the statute already authorizes; applying for a temporary license is optional and arises only when a position of administrator unexpectedly becomes vacant.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
There are approximately 117 non-small businesses in Utah that operate health facilities as defined in Subsection 58-15-101(3), counted on the same basis and from the same source described in Box 5C. The proposed amendments are not expected to have any measurable impact on non-small businesses' revenues or expenditures, for the reasons described in Box 5C.
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***)**:**

In Utah there are 412 active licensed health facility administrators, per the Division's Active Licensee Count as of 08/11/2026.

The Division does not anticipate any cost or savings from the proposed amendments to these persons or to additional persons, because the amendments conform this rule to statutory changes already enacted, correct citations, and codify duties this rule already imposes.

The proposed amendments do not create new obligations for other persons or increase the costs associated with any existing obligations for other persons. Section R156-15-502 defines unprofessional conduct by reference to requirements already established in Sections R156-15-102 and R156-15-307

F. Compliance costs for affected persons:

As described in Box 5E for other persons, no compliance costs are expected for affected persons.

An applicant for a temporary license under Section R156-15-304 would pay the fee established by the Department under Section 63J-1-504; that fee is set in the Division's fee schedule and is not established by this rule

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-15-201(3)

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
11/24/2026	12:00 PM	Anchor Meeting Location: Heber M. Wells Building Room 474 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/fgd-qyig-sfp Or dial: (US) +1 321-465-5064 PIN: 868 263 759# More phone numbers: https://tel.meet/fgd-qyig-sfp? pin=2981010580436

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Mark B. Steinagel, Division Director	**Date:**	09/14/2026

R156. Commerce, [~~Occupational and~~]Professional Licensing.
R156-15. Health Facility Administrator Act Rule.
R156-15-101. Title - Authority - Relationship to Rule R156-1.

(1) This rule is known as the "Health Facility Administrator 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 15.

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

R156-15-102. Definitions.

[~~In addition to the definitions in Title 58, Chapters 1 and 15, as used in this rule:~~]Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 15, Health Facility Administrator Act. In addition:

(1) "Administrator in training"[~~-(AIT)"~~] or "AIT" means an individual who is participating in a preceptorship with a licensed health facility administrator.

(2) "Board" means the [~~Health Care Administrators Board~~]Health Facility Administrators Licensing Board.

(3) "CPE" means continuing professional education.

([~~3~~]4) "Distance learning" means acquiring [~~continuing professional education (CPE)~~]CPE as [~~referenced~~]used in Subsection R156-15-309(5) using technologies and other forms of learning, including internet, audio[~~/~~] and visual recordings, mail, or other correspondence.

([4]5) "General administration" as used in the definition of "administrator"[~~,~~] under Subsection [~~58-15-2(1),~~]58-15-101(1) means that the administrator is responsible for operation of the health facility [~~in accordance with~~]under all applicable laws regardless of whether the administrator is present full or part time in the facility or whether the administrator maintains an office inside or outside of the facility, but may not exceed responsibility for more than the number of licensed facilities [~~in accordance with~~]under [~~Utah Administrative Code~~]Subsection R432-150-7(1) or R432-[~~200~~]201-5(3).

([~~5~~]6) "General supervision" means general supervision as defined in Subsection R156-1-102a([4]1)(c).

([~~6~~]7) "NAB" means the National Association of Long Term Care Administrator[~~s~~] Boards.

([~~7~~]8) "Nursing home administrator" means a health facility administrator.

([~~8~~]9) "Preceptor" means a licensed health facility administrator who:[~~meeting the qualifications of Subsection R156-15-307(2), who is responsible for the supervision and training of an AIT.~~]

(a) meets the qualifications of Subsection R156-15-307(2); and

(b) is responsible for the supervision and training of an AIT.

([~~9~~]10) "Preceptorship" means a formal training program for an [~~administrator in training (AIT),~~]AIT that is:

(a) conducted in a licensed health facility;

(b) under the supervision of an approved licensed health facility administrator; and

(c) approved by the Division in collaboration with the Board.

([~~10~~]11) "Qualifying experience" means at least 8,000 hours of employment in a licensed health facility including hours in a supervisory role as referenced in Section R156-15-30[~~2~~]1c.

[~~R156-15-103. 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 15.~~

~~R156-15-104. 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.~~

]

R156-15-30[~~2~~]1a. Qualifications for Licensure - Application Requirements.

[~~In accordance with~~]Under Subsections 58-1-203(1)(b), [~~and~~]58-1-301(3), and 58-15-301(2),[~~the application requirements~~] an applicant for licensure [~~in Section 58-15-4 are defined, clarified, or established as follows:~~]shall:

(1)(a) complete an approved AIT preceptorship consisting of [~~a minimum of~~]at least 1,000 hours; or

(b) hold a NAB Health Services Executive (HSE) credential; and

(2) meet:

(a) the education requirement in Section R156-15-30[~~2~~]1b; or

(b) the experience requirement in Section R156-15-30[~~2~~]1c.

R156-15-30[~~2~~]1b. Qualifications for Licensure - Education Requirements.

[~~In accordance with~~]Under Subsections 58-1-203(1)(b), [~~and~~]58-1-301(3), and 58-15-301(2), [~~the education requirement~~]an applicant for licensure:[~~ in Subsection 58-15-4(2) is defined, clarified, or established as follows:~~]

(1) [~~The applicant~~]shall graduate from an accredited university or college with a minimum of a baccalaureate degree[~~.~~]; and

(2) [~~Up~~]may include up to 500 hours spent in an internship, practicum, or outside study program associated with a bachelor's degree in health facility administration or health care administration [~~may be included~~]as part of an approved AIT preceptorship as outlined in Section R156-15-307.

R156-15-30[~~2~~]1c. Qualifications for Licensure - Experience Requirements.

[~~In accordance with~~](1) Under Subsections 58-1-203(1)(b), [~~and~~]58-1-301(3), and 58-15-301(2), [~~the experience requirement~~]an applicant for licensure [~~in Subsection 58-15-4(2) is defined, clarified, or established as follows:~~]shall meet the experience requirements of this section.

([~~1~~]2) [~~The~~]An applicant shall complete at least 8,000 hours of qualifying experience approved by the Division in collaboration with the Board.

([~~2~~]3) At least 4,000 hours of the applicant's qualifying experience [~~shall be~~]hours under Subsection (2) shall be in a supervisory role.

([~~3~~]4) [~~Subsection (1)~~]An applicant may [~~include~~]count up to 500 hours of an approved AIT preceptorship as outlined in Section R156-15-307[~~, and if in a supervisory role may be included as part of Subsection (2)~~] towards the hour requirement of this section, including hours under Subsection (3) if the hours are completed in a supervisory role.

R156-15-30[~~2~~]1d. Qualifications for Licensure - Examination Requirements.

[~~In accordance with~~](1) Under Subsections 58-1-203(1)(b), [~~and~~]58-1-301(3), and 58-15-301(4), an applicant shall meet the examination requirement [~~for licensure in Subsection 58-15-4(4) is defined, clarified, or established as follows:~~]of this section.

([~~1~~]2) An applicant for licensure as a health facility administrator shall pass the NAB's two-part component examination for nursing home administrators which includes the following components:

(a) the National Core of Knowledge Examination for Long Term Care Administrators (CORE); and

(b) the National Nursing Home Administrator Line of Service Examination Program (NHA).

([~~2~~]3) The passing score for each NAB examination component shall be a minimum scaled score of 113.

([~~3~~]4) An applicant may take both NAB examination components at [~~once, or take each component individually.~~]the same time.

([4]5) An applicant who fails a NAB examination component shall retake that component [~~in accordance with~~]under NAB policies and procedures.

([~~5~~]6) An applicant who took the NAB examination [~~prior to~~]before July 5, 2017, shall have passed the NAB National Nursing Home Administrator Licensing Examination (NHA) with a minimum scaled score of 113.

R156-15-301e. Temporary License.

(1) Under Subsections 58-1-203(1)(b) and 58-15-301(5), the requirements for a temporary license are established in this section.

(2) An applicant for a temporary license shall:

(a) submit an application in a form prescribed by the Division;

(b) pay the fee determined by the Department under Section 63J-1-504;

(c) meet:

(i) the education requirement in Section R156-15-301b; or

(ii) the experience requirement in Section R156-15-301c; and

(d) submit evidence that the position of administrator the applicant seeks to fill unexpectedly became vacant.
(3) A temporary license:
(a) is valid for a single period of six months or less, as determined by the Division; and
(b) may not be renewed or extended.
(4) The Division may not issue more than one temporary license for the same vacancy.
(5) A temporary license expires on the earlier of:
(a) the expiration date stated on the license;
(b) the date the individual with the temporary license becomes fully licensed under this chapter; or
(c) the date the health facility employs an individual fully licensed under Section 58-15-301 as the health facility's administrator.

R156-15-303. Expiration, Renewal, and Reinstatement of License.

[~~In accordance with~~]Under Section 58-1-308:

(1) [~~T~~]the renewal date for the two-year renewal cycle applicable to licensees under Title 58, Chapter 15, Health Facility Administrator Act, is established by rule in Subsection R156-1-308a(1)[~~-~~];

(2) [~~R~~]renewal and reinstatement procedures shall be in accordance with Sections R156-1-308a through R156-1-308l, except as provided in Subsection (3)[~~-~~]; and

(3) [~~I~~]if the Division receives an applicant's application for reinstatement of licensure [~~is received by the Division~~]between two years and five years after the date the license expired, and the license was active and in good standing at the time of expiration, the applicant shall:

(a) submit a completed renewal form as furnished by the Division demonstrating compliance with all requirements and conditions of license renewal;

(b) pay the established license renewal fee and reinstatement fee for the current renewal period;

(c) submit evidence of completion of [~~continuing professional education (CPE)~~]CPE for each preceding renewal period in which the license was expired; and

(d) provide information requested by the Division and Board to clearly demonstrate the applicant is currently competent to engage in the profession.

R156-15-307. AIT Preceptorship.

(1) A preceptor shall be allowed to supervise [~~no more than~~]up to two AIT preceptees at a time.

(2) [~~In order to~~]To be approved as a preceptor, the health facility administrator shall:

(a) have been licensed for at least three years;

(b) be currently licensed and in good standing in Utah; and

(c)(i) be currently working in a licensed health facility; or

(ii) be currently working in an executive position related to a licensed health facility.

(3) The AIT preceptee shall at all times be under the general supervision of the preceptor.

(4)(a) The AIT preceptee may work in the facility either full or part time while completing the preceptorship requirements.[~~- Credit received for an AIT preceptorship training shall be earned only for duties related to AIT preceptorship training as set forth under Subsection (5).~~]

(b) Credit received for an AIT preceptorship training shall be earned only for duties related to AIT preceptorship training as set forth under Subsection (5).

(5) An approved AIT preceptorship shall include[~~- the following~~]:

(a) [~~P~~]patient care including:

(i) health maintenance;

(ii) social and psychological needs;

(iii) food service program;

(iv) medical care;

(v) recreational and therapeutic recreational activities;

(vi) medical records;

(vii) pharmaceutical program; and

(viii) rehabilitation program;

(b) [~~P~~]personnel management including:

(i) grievance procedures;

(ii) performance evaluation system;

(iii) job descriptions[~~,~~] and performance standards;

(iv) interview and hiring procedures;

(v) training program;

(vi) personnel policies and procedures; and

(vii) employee health and safety program;

(c) [~~F~~]financial management including:

(i) developing a budget;

(ii) financial planning;

(iii) cash management system; and

(iv) establishing accurate financial records;

(d) [~~M~~]marketing and public relations including
(i) planning and implementing a public relations program; and
(ii) planning and implementing an effective marketing program;
(e) [~~P~~]physical resource management including:
(i) ground and codes, building maintenance;
(ii) sanitation and housekeeping procedures;
(iii) compliance with fire and life safety codes;
(iv) security; and
(v) fire and disaster plan;
(f) [~~L~~]laws and regulatory codes including:
(i) knowledge of Medicaid and Medicare;
(ii) labor laws;
(iii) knowledge of building, fire and life safety codes;
(iv) OSHA[~~/UOSHA~~];
(v) UOSHA;
(vi) Bureau of Health Facility Licensure Law and Rule;
(vii) licensing and certification[~~/~~] or professional licensing boards;
(viii) Health Facility Administrator [~~L~~]law and [~~R~~]rule;
([~~viii~~]ix) tax laws; and
([~~ix~~]x) establishing or working with a governing board.

R156-15-308. License By Endorsement.

[~~In accordance with~~]Under Section 58-1-302[~~ and Subsection 58-15-4(6)~~], the Division may grant a license by endorsement to an applicant who:
(1) is currently a licensed health facility administrator in good standing in another state;[~~ and~~]
(2) meets the examination requirement in Section R156-15-30[~~2~~]1d; and
(3) meets one or more of the following equivalent education or experience requirements:
(a) has been employed as a health facility administrator in another state for three years;
(b) has been employed as a health facility administrator at the same facility in another state for two consecutive years; or
(c) holds a Health Services Executive (HSE) qualification from the [~~National Association of Long Term Care Administrator Boards (NAB)~~]NAB.

R156-15-309. Continuing Professional Education (CPE).

[~~In accordance with~~](1) Under Subsections 58-1-203(1)(g) and 58-1-308(3)(b), the [~~following continuing professional education requirements ("CPE") are established as a condition~~]CPE requirements for renewal or reinstatement of licenses under Title 58, Chapter 15[~~:~~], Health Facility Administrator Act are defined, clarified, or established in this section.
([~~1~~]2) During each two-year period commencing on June 1 of each odd-numbered year, a licensee shall complete at least 40 hours of CPE directly related to the licensee's professional practice.
([~~2~~]3) If a licensee first becomes licensed during the two-year renewal period, the licensee's required number of CPE hours shall be decreased proportionately according to the date of licensure.
([~~3~~]4) All CPE shall:
(a) have an identifiable clear statement of purpose and defined objective for the educational program directly related to the practice of a health facility administrator;
(b) be relevant to the licensee's professional practice;
(c) be presented in a competent, well organized, and sequential manner consistent with the stated purpose and objective of the program;
(d) be prepared and presented by individuals who are qualified by education, training, and experience; and
(e) have a competent method of registration of individuals who actually completed the professional education program, with records of that registration and completion available for review.
([4]5) The following may qualify as CPE:
(a) education obtained from an accredited university or college in pursuit of an advanced degree;
(b) lecturing or instructing a CPE course or teaching in a college or university in the licensee's profession;
(c) education under the sponsorship of or approved by a licensing agency of Utah or another state;
(d) real-time, interactive distance learning courses that are clearly documented as real-time and interactive;
(e) distance learning courses that are not real-time and interactive, up to a maximum of 20 CPE hours; or
(f) volunteer service on boards, committees, or in leadership roles in any state, national, or international organization for the development and improvement of the licensee's profession, up to a maximum of 10 CPE hours.
([~~5~~]6) A licensee shall maintain adequate documentation as proof of the licensee's compliance with this section, for a period of four years after the end of the renewal cycle for which the CPE is due.
([~~6~~]7) The Division may defer or waive CPE requirements [~~in accordance with~~]under Section R156-1-308d, for [~~a period of~~]up to three years.

R156-15-502. Unprofessional Conduct.

Under Subsections 58-1-203(1)(e) and 58-15-101(7), "unprofessional conduct" includes:

(1) serving as a preceptor for more than two AIT preceptees at a time, in violation of Subsection R156-15-307(1);

(2) while serving as a preceptor, failing to provide the general supervision required under Subsection R156-15-307(3); or

(3) under Subsection R156-15-307(4), reporting AIT preceptorship hours to the Division that the preceptee:

(a) did not complete; or

(b) did not earn for duties related to AIT preceptorship training.

KEY: licensing, health facility administrators
Date of Last Change: [~~December 10, 2018~~]2026
Notice of Continuation: July 6, 2026
Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); [~~58-15-3(3)~~]58-15-201(3)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58417**
Rule or section number:	**R156-17b**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Jim Garfield	801-530-6458	jimgarfield@utah.gov

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

3. General Information

A. Rule or section catchline:

R156-17b. Pharmacy Practice Act Rule

B. Purpose of the new rule or reason for the change:

The Division of Professional Licensing (Division) in collaboration with the Utah Board of Pharmacy (Board) is filing these proposed amendments in accordance with statutory changes made by HB 97, HB 264, HB 301, SB 117, and SB 261 passed in the 2026 General Session.

HB 97 (2026) permitted certain health facilities to offer the unused portion of the facility-owned medication to a patient under certain circumstances and following specific requirements.

HB 264 (2026) removed a requirement that a pharmacy notify a provider if the pharmacy substitutes a medication as authorized by the prescription, allowed a prescription refill to remain valid for two years, and addressed standing drug orders issued by the Department of Health and Human Services (DHHS).

HB 301 (2026) recodified controlled substance provisions requiring citation updates in rule and SB 117 (2026) made clean-up changes to Title 58 that necessitated clean up changes to Rule R156-17b.

SB 261 (2026) amended the definition of a collaborative pharmacy practice agreement to conform to other provisions of code regarding a pharmacist's role under such agreements, added vaccines and epinephrine to the list of drugs a pharmacist may prescribe, and permitted online sales of pseudoephedrine if the Division in collaboration with the Board approved an electronic tracking system, which the Division and Board have done.

The proposed amendments also restructure parts of this rule for clarity and align this rule with the Office of Administrative Rules (OAR) drafting requirements and Division standards.

C. Summary of the new rule or change:

Section R156-17b-101 is amended to conform the catchline to Division standard and fix a citation.

Section R156-17b-102 is amended to add definitions for "authorized transferee," "authorized transferor," "therapeutically similar drug list," "Utah Guidance for Diabetic Therapeutic Equivalents," "Utah Guidance for Dispensing by Health Department Nurse of STI Drug," "Utah Guidance for Epinephrine," "Utah Guidance for Fluoride," "Utah Guidance for Naloxone," "Utah Guidance for PrEP and PEP," "Utah Guidance for Tobacco Cessation Products," and "Utah Guidance for Vaccine Prescription and Administration." These proposed amendments also further define "unlawful conduct" to create an exception for historical uses of pharmacy signage.

Section R156-17b-102 is also amended to remove the definition for "device." This section is also renumbered to accommodate added and removed definitions and restructured to ensure the definitions are in alphabetical order. These proposed amendments also update citations and clean up language.

Section R156-17b-303a is amended to reduce the hours of directly supervised practical training for a pharmacy technician from 180 hours to 120 hours and cleans up language for clarity.

Section R156-17b-303b is amended to update the edition of the accreditation standards for doctor of pharmacy programs and add the requirement that a foreign graduate must obtain a certification of equivalency, which was implied and is now explicitly stated.

Section R156-17b-306 (was Section R156-17b-307) is amended to align the rule section number with the corresponding statutory section number, update citations, conform the language to background check requirements, and clean up language.

Section R156-17b-308 is amended to update citations.

Section R156-17b-309.7 is amended to fix a typo.

Section R156-17b-402 is amended to update citations and format the fine schedule.

Section R156-17b-502 is amended to update citations, correct errors, remove items already listed in the fine schedule, and renumber.

Section R156-17b-601 is amended to add language describing who may transfer a prescription, clean up language, and update citations.

Section R156-17b-602 is amended to conform the sentence structure to Division standard.

Section R156-17b-603 is amended to restructure the section to put like requirements together and more clearly delineate the responsibilities of the consulting pharmacist, PIC, RDPIC, or DMPIC.

Section R156-17b-604 is amended to update citations and clarify language.

Section R156-17b-605 is amended to restructure to make the section clearer, explain the inventory requirement for a 24-hour pharmacy, delineate the requirements for inventories based on which controlled substances are dispensed at the pharmacy, updates citations, and cleans up language.

Section R156-17b-608 is amended to add "operating standards" to the catchline and update citations.

Section R156-17b-609 is rewritten for clarity.

Section R156-17b-610 is amended to update citations, clean up language, modernize the counseling requirement to include electronic communication of counseling, and allow any unused portion of facility-provided medication to be offered to a patient as allowed under statute.

Section R156-17b-610.5 is removed as the enabling statute for these provisions was repealed in 2024.

Section R156-17b-610.6 is amended to update citations, clean up language, and note that a 72-hour emergency supply may be prescribed as allowed under statute.

Section R156-17b-610.7 is amended to conform language to Division standard, update citations, and fix the numbering.

Section R156-17b-611 is amended to conform the language to Division standard and OAR drafting guidelines and clarify language.

Section R156-17b-612 is amended to conform language to OAR drafting guidelines, update citations and restructure for clarity.

Section R156-17b-612a is amended to update citations and restructure for clarity.

Section R156-17b-612b is amended to update citations, clean up language, update a link, and expand on language relating to exhausted prescriptions.

Section R156-17b-612c is amended to update citations, update a link, and clarify what is required under statute for a therapeutically similar drug product to be added or removed from the list.

Section R156-17b-613 is amended to update citations and clean up and clarify language.

Section R156-17b-614a is amended to conform introductory language to Division standard, restructure for clarity, clean up language, and update citations.

Section R156-17b-614b is amended to conform introductory language to Division standard and clean up and clarify language.

Section R156-17b-614c is amended to conform introductory language to Division standard, restructure for clarity, and clean up language.

Section R156-17b-614d is amended to conform introductory language to Division standard, restructure for clarity, and update citations.

Section R156-17b-614f is amended to conform introductory language to Division standard, restructure for clarity, clean up language, and update citations.

Section R156-17b-614g is amended to update citations, clarify the classification exception for a pharmacy located in a hospital as a remote dispensing pharmacy, clean up language, and restructure for clarity.

Section R156-17b-615 is amended to conform introductory language to Division standard, conform the catchline to OAR drafting standards, clean up language, update citations, remove the requirement for submission of information the Division does not need in practice, provide a timeframe in which a licensee must provide certain information, and restructure for clarity.

Section R156-17b-616 is amended to conform introductory language to Division standard, clean up language, and update citations.

Section R156-17b-617a is amended to conform introductory language to Division standard and renumber.

Section R156-17b-617b is amended to conform introductory language to Division standard and fix punctuation.

Section R156-17b-617c is amended to conform to Division standard and OAR drafting requirements and clarify language.

Section R156-17b-617d is amended to conform introductory language to Division standard, restructure for clarity, and clean up language.

Section R156-17b-617e is amended to update citations and clean up language.

Section R156-17b-617f is amended to conform introductory language to Division standard, clean up language, and renumber.

Section R156-17b-617g is amended to restructure for clarity.

Section R156-17b-618 is amended to update citations, conform to OAR drafting requirements, clean up language, and add language about what happens if a pharmacy requesting a change in name or address does not comply with the requirements of this section.

Section R156-17b-620 is rewritten for clarity.

Section R156-17b-621 is amended to reflect the fact that the referenced documents are mentioned and incorporated by reference in the definitions.

Section R156-17b-621a is amended to conform introductory language to Division standard, add naloxone as something that can be administered by a pharmacist with the required training, and clean up language.

Section R156-17b-621b is amended to update a link.

Section R156-17b-622 is amended to conform introductory language to Division standard and update citations.

Section R156-17b-623 is amended to update citations and clean up language.

Section R156-17b-624 is amended to conform introductory language to Division standard and update citations.

Section R156-17b-625 is amended to conform introductory language to Division standard, update citations, clean up language, and restructure for clarity.

Section R156-17b-626 is amended to conform introductory language to Division standard.

Section R156-17b-627 is amended to update citations, clean up language, restructure for clarity, reflect the fact that the referenced documents are mentioned and incorporated by reference in the definitions, and add guidance for fluoride, vaccine prescription and administration, and epinephrine to the list of 627 guidance documents.

Section R156-17b-628 is amended to update citations, clean up language, and update a link.

Section R156-17b-1005 is amended to conform introductory language to Division standard, clean up language, and update a link.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 97 (2026 General Session), HB 264 (2026 General Session), HB 301 (2026 General Session), SB 117 (2026 General Session), SB 261 (SB General Session), and SB 207 (2024 General Session)

5. Fiscal Information

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

A. State budget:

The Division does not anticipate any fiscal impact to the state budget beyond that determined by the fiscal notes for:
HB 97 (2026) (https://le.utah.gov/~2026/bills/static/HB0097.html);
HB 264 (2026) (https://le.utah.gov/~2026/bills/static/HB0264.html); and
SB 261 (2026) (https://le.utah.gov/~2026/bills/static/SB0261.html) because the proposed amendments merely implement the requirements of those legislative changes and clarify and update the rule to be current and accurate for licensees.

B. Local governments:

The Division does not anticipate any cost or savings to local governments from the proposed amendments because the proposed amendments do not apply to local governments.

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

There are approximately 767 small businesses in Utah with pharmacists (NAICS codes 621399, 446110, 622110) and other similar licensees and who may employ those engaged in pharmacy.

However, the proposed amendments are not expected to have any measurable impact on small business revenues or expenditures beyond those in the fiscal notes for HB 97 (2026), HB 264 (2026), and SB 261 (2026) because the amendments merely implement the requirements of legislative changes and clarify and update this rule to be current and accurate for licensees.

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

There are approximately 51 non-small businesses in Utah with pharmacists (NAICS codes 621399, 446110, 622110) and other similar licensees and who may employ those engaged in pharmacy.

However, the proposed amendments are not expected to have any measurable impact on non-small business revenues or expenditures beyond those in the fiscal notes for HB 97 (2026), HB 264 (2026), and SB 261 (2026) because the amendments merely implement the requirements of legislative changes and clarify and update this rule to be current and accurate for licensees.

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***)**:**

In Utah, there are:
a) 4,441 licensed pharmacists;
b) 376 licensed pharmacy interns;
c) 7,307 licensed pharmacy technicians;
d) 1,716 licensed pharmacy technician trainees;
e) 517 licensed Class A pharmacies;
f) 351 licensed Class B pharmacies;
g) 1,591 licensed Class C pharmacies;
h) 1,028 licensed Class D pharmacies;
i) 900 licensed Class E pharmacies;
j) 159 licensed dispensing medical practitioners;
k) 47 licensed dispensing medical practitioner clinics;
l) 6 registered eligible charity pharmacies;
m) 90 licensed dispensing practices;
n) 5 temporarily licensed pharmacists;
o) 4 licensed volunteer pharmacists; and
p) 1 licensed controlled substance volunteer pharmacist.

The Division does not anticipate any cost or savings from these proposed amendments to these persons or to additional persons other than small businesses, non-small businesses, the state, or local government entities because the amendments merely implement the requirements of legislative changes and clarify and update the rule to be current and accurate for licensees.

F. Compliance costs for affected persons:

As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-17b-101 et seq.

10. Incorporation by Reference Information

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*)**:**	
Official Title of Materials Incorporated (from title page)	Title 21 – Food and Drugs Chapter I – Food and Drug Administration, Department of Health and Human Services Subchapter D – Drugs for Human Use
Publisher	Office of the Federal Register
Issue Date	April 1, 2025

B. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Accreditation Standards and Key Elements for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree
Publisher	Accreditation Council for Pharmacy Education
Issue Date	June 12, 2025
Issue or Version	Standards 2025

C. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Guidance for HIV post-exposure prophylaxis (PEP)
Publisher	Utah Division of Professional Licensing, Utah Department of Health and Human Services
Issue Date	July 31, 2026

D. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Guidance for Diabetic Therapeutic Equivalents
Publisher	Utah Division of Professional Licensing
Issue Date	June 27, 2023

E. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Therapeutically Similar Drug List
Publisher	Utah Division of Professional Licensing
Issue Date	2025

F. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Guidance for Fluoride
Publisher	Utah Division of Professional Licensing
Issue Date	November 18, 2025

G. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Guidance for Naloxone
Publisher	Utah Division of Professional Licensing
Issue Date	September 28, 2021

H. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Guidance for Self-Administered Hormonal Contraceptives
Publisher	Utah Division of Professional Licensing
Issue Date	September 28, 2021

I. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Guidance for Smoking Cessation
Publisher	Utah Division of Professional Licensing
Issue Date	September 28, 2021

J. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Guidance for Dispensing by Health Department Nurse of STI Drugs
Publisher	Utah Division of Professional Licensing
Issue Date	September 22, 2026

K. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Guidance for Epinephrine

Publisher	Utah Division of Professional Licensing
Issue Date	May 14, 2024

L. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Guidance for Oral HIV pre-exposure (PrEP) of HIV
Publisher	Utah Division of Professional Licensing, Utah Department of Health and Human Services
Issue Date	July 31, 2026

M. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Vaccine Administration Protocol Standing Order to Administer Immunizations and Emergency Medications
Publisher	Utah Division of Professional Licensing
Issue Date	September 2023

N. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Vaccine Administration Guidance Document
Publisher	Utah Division of Professional Licensing
Issue Date	April 10, 2024

O. 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*)**:**	
Official Title of Materials Incorporated (from title page)	(795) Pharmaceutical Compounding – Nonsterile Preparations
Publisher	United States Pharmacopeia
Issue Date	November 1, 2023

P. 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*)**:**	
Official Title of Materials Incorporated (from title page)	(797) Pharmaceutical Compounding – Sterile Preparations
Publisher	United States Pharmacopeia
Issue Date	May 1, 2024

Q. 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*)**:**	
Official Title of Materials Incorporated (from title page)	(800) Hazardous Drugs – Handling in Healthcare Settings
Publisher	United States Pharmacopeia
Issue Date	July 1, 2020

R. 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*)**:**	
Official Title of Materials Incorporated (from title page)	(825) Radiopharmaceuticals – Preparation, Compounding, Dispensing, and Repackaging
Publisher	United States Pharmacopeia
Issue Date	January 1, 2024

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/01/2026	08:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 402 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/yvm-teqo-wmg Or dial: (US) +1 252-357-6103 PIN: 920 030 477# More phone numbers: https://tel.meet/yvm-teqo-wmg?pin=1675492979505

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/30/2026

R156. Commerce, Professional Licensing.
R156-17b. Pharmacy Practice Act Rule.
R156-17b-101. Title - Authority - [~~Organization and~~]Relationship to Rule R156-1.

(1) This rule is known as the "Pharmacy Practice 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 17b, Pharmacy Practice Act.

(3) The organization of this rule and its relationship to Rule R156-1 is as described in Section R156-1-10[~~7~~]1.

R156-17b-102. Definitions.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 17b, Pharmacy Practice Act. In addition:

(1) "Accredited by" means that, on the day the applicant for licensure completed the program, the program was:

(a) accredited; or

(b) in candidate status.

(2) "ACPE" means the American Council on Pharmaceutical Education or Accreditation Council for Pharmacy Education.

(3) "Analytical laboratory":

(a) means a facility in possession of prescription drugs for analysis; and

(b) does not include a laboratory possessing prescription drugs used as standards and controls in performing drug monitoring or drug screening analysis, if the prescription drugs are pre-diluted in a human or animal body fluid, human or animal body fluid components, organic solvents, or inorganic buffers at a concentration not exceeding one milligram per milliliter when labeled or otherwise designated as being for in-vitro diagnostic use.

(4) "Area of need" as used in Subsection 58-17b-612(1)(b)(i) means:

(a) a remote-rural hospital, as defined in Section 26B-2-213;

(b) a county of the fourth, fifth, or sixth class, as classified in Section [~~17-50-501~~]17-60-104; or

(c) any area where a demonstration of need is approved by the Division in collaboration with the Board, based on any factors affecting the access of persons in that area to pharmacy resources.

(5) "ASHP" means the American Society of Health System Pharmacists.

(6) "Authorized distributor of record" means a pharmaceutical wholesaler with whom a manufacturer has established an ongoing relationship to distribute the manufacturer's prescription drugs. An ongoing relationship is deemed to exist if:

(a) the manufacturer and pharmaceutical wholesaler are part of an affiliated group, as defined by Section 1504 of the Internal Revenue Code; or

(b) the pharmaceutical wholesaler has a written agreement currently in effect with the manufacturer evidencing the ongoing relationship and is listed on the manufacturer's current list of authorized distributors of record.

(7) "Authorized personnel" means any person who is a part of the pharmacy staff who participates in the pharmacy's operational processes and contributes to the natural flow of pharmaceutical care.

(8) "Authorized transferee" means, at the pharmacy receiving a prescription, a:

(a) pharmacist;

(b) pharmacy intern;

(c) pharmacy technician, at the discretion of the pharmacist on duty; or

(d) DMP.

(9) "Authorized transferor" means, at the pharmacy holding a prescription, a:

(a) pharmacist;

(b) pharmacy intern;

(c) pharmacy technician, at the discretion of the pharmacist on duty; or

(d) DMP.

([~~8~~]10) "Chain pharmacy warehouse" means a physical location for prescription drugs that acts as a central warehouse and performs intracompany sales or transfers of the prescription drugs to a group of chain pharmacies with the same common ownership and control.

([~~9~~]11) "Clinic" as used in Subsection 58-17b-625(3)(b) means a Class B pharmacy as defined in Subsection 58-17b-102(11), or a facility that provides outpatient health care services whose primary practice includes the therapeutic use of drugs related to a specific patient for:

(a) curing or preventing the patient's disease;

(b) eliminating or reducing the patient's disease; or

(c) arresting or slowing a disease process.

([~~10~~]12) "Co-licensed partner" means a person that has the right to engage in the manufacturing or marketing of a co-licensed product.

([~~11~~]13) "Co-licensed product" means a device or prescription drug for which two or more persons have the right to engage in the manufacturing, marketing, or both consistent with 21 CFR Part 203[~~(2021)~~].

([~~12~~]14) "Community pharmacy" as used in Subsection 58-17b-625(3)(b) means a Class A pharmacy as defined in Subsection 58-17b-102(10).

([~~13~~]15) "Compounding," as defined in Subsection 58-17b-102(18), in accordance with 21 [~~U.S.C.~~]USC 353a(e) Pharmacy Compounding, does not include:

(a) mixing, reconstituting, or other such acts that are performed in accordance with directions in approved labeling provided by the product's manufacturer and other manufacturer directions consistent with that labeling; or

(b) the addition of flavoring agents to conventionally manufactured and commercially prepared available liquid medications, if the flavoring agents:

(i) are therapeutically inert; and

(ii) do not exceed 5% of a preparation's total volume.

([~~14~~]16) "Consulting pharmacist" means a licensed pharmacist who provides consultation on an aspect of a pharmaceutical administration facility under Section R156-17b-614c.

([~~15~~]17) "Counterfeit prescription drug" has the meaning given to the term "counterfeit drug" in 21 USC 321(g)(2) as applied to prescription drugs.

([~~16~~]18) "Counterfeiting" means engaging in activities that create a counterfeit prescription drug.

[~~(17) "Dispense," as defined in Subsection 58-17b-102(22), does not include transferring medications for a patient from a legally dispensed prescription for that particular patient into a daily or weekly drug container to facilitate the patient taking the correct medication.~~]

([~~18~~]19) "Designated representative" or "DR" means an individual supervising the licensed facility in accordance with Subsections R156-17b-615([~~4~~]6) and ([~~5~~]7).

(20) "Dispense" as defined in Subsection 58-17b-102(22) does not include transferring medications for a patient from a legally dispensed prescription for that particular patient into a daily or weekly drug container to facilitate the patient taking the correct medication.

[~~(19) "Device" means a prescription device as defined in 21 CFR 801.109 (2021).~~]

([~~20~~]21) "DMP" means a dispensing medical practitioner licensed under Title 58, Chapter 17b, Part 8, Dispensing Medical Practitioner and Dispensing Medical Practitioner Clinic Pharmacy.

([~~21~~]22) "DMP designee" means an individual, acting under the direction of a DMP, who:

(a)(i) holds an active health care professional license under one of the following Title 58 chapters:

(A) Chapter 67, Utah Medical Practice Act;

(B) Chapter 68, Utah Osteopathic Medical Practice Act;

(C) Chapter 70a, Utah Physician Assistant Act;

(D) Chapter 31b, Nurse Practice Act;

(E) Chapter 16a, Utah Optometry Practice Act;

(F) Chapter 44a, Nurse Midwife Practice Act; or

(G) Chapter 17b, Pharmacy Practice Act; or

(ii) is a medical assistant as defined in Subsection 58-67-102(14);

(b) meets requirements in Subsection 58-17b-803(4)(c); and

(c) can document successful completion of a formal or on-the-job dispensing training program under Section R156-17b-622.

([~~22~~]23) "DMPIC" means a dispensing-medical-practitioner-in-charge licensed under Title 58, Chapter 17b, Part 8, Dispensing Medical Practitioner and Dispensing Medical Practitioner Clinic Pharmacy who is designated by a dispensing medical practitioner clinic pharmacy to be responsible for activities of the pharmacy.

[~~(23) "DSCSA" means Title II of the Drug Quality and Security Act of 2013, the Drug Supply Chain Security Act, 113 Pub. L. No. 54, 127 Stat. 587 (2013), and any regulations promulgated pursuant to the DSCSA.~~]

(24) "Drug therapy management" means the review of a drug therapy regimen of a patient by one or more pharmacists evaluating and rendering advice to one or more practitioners regarding adjustment of the regimen.

(25) "Drugs[~~,~~]" as used in this rule[~~,~~] means drugs or devices.

(26) "DSCSA" means Title II of the Drug Quality and Security Act of 2013, the Drug Supply Chain Security Act, Pub. L. No. 113-54, tit. II, 127 Stat. 587, 599 (2013), and any regulations promulgated pursuant to the DSCSA.

([~~26~~]27) "Durable medical equipment" or "DME" means equipment that:

(a) can withstand repeated use;

(b) is primarily and customarily used to serve a medical purpose;

(c) generally is not useful to a person in the absence of an illness or injury;

(d) is suitable for use in a health care facility or in the home; and

(e) may include devices and medical supplies.

([~~27~~]28) "Entities under common administrative control" means an entity holds the power, actual as well as legal, to influence the management, direction, or functioning of a business or organization.

([~~28~~]29) "Entities under common ownership" means entity assets are held indivisibly rather than in the names of individual members.

([~~29~~]30) "ExCPT" means the Exam for the Certification of Pharmacy Technicians.

([~~30~~]31) "FDA" means the United States Food and Drug Administration and any successor agency.

([~~31~~]32) "FDA-Approved" means that the federal Food, Drug, and Cosmetic Act, 21 USC 301 et seq. and regulations promulgated thereunder permit the subject drug or device to be lawfully manufactured, marketed, distributed, and sold.

([~~32~~]33) "High-risk, medium-risk, and low-risk drugs" refers to the risk level to a patient's health from compounding sterile preparations, as referred to in USP-NF [~~Chapter~~]≤797≥.

([~~33~~]34) "Hospice facility pharmacy" means a pharmacy that supplies drugs to patients in a licensed healthcare facility for terminal patients.

([~~34~~]35) "Hospital clinic pharmacy" means a pharmacy that is located in an outpatient treatment area where a pharmacist or pharmacy intern is compounding, admixing, or dispensing prescription drugs, and where:

(a) prescription drugs or devices are under the control of the pharmacist, or the facility for administration to patients of that facility;

(b) prescription drugs or devices are dispensed by the pharmacist or pharmacy intern; or

(c) prescription drugs are administered in accordance with the order of a practitioner by an employee or agent of the facility.

([~~35~~]36) "Legend drug" or "prescription drug" means a drug or device that has been determined to be unsafe for self-medication or one that bears or is required to bear the legend:

(a) "Caution: federal law prohibits dispensing without prescription";

(b) "Caution: federal law restricts this drug to use by or on the order of a licensed veterinarian"; or

(c) "Rx only".

([~~36~~]37) "Long-term care facility" as used in Subsection 58-17b-610.7(2) means the same as defined in Subsection 58-31b-102(9).

([~~37~~]38) "Managerial control" means the ability, regardless of title, to directly manage the finances, strategic initiatives, and personnel of a pharmacy or pharmaceutical facility, including:

(a) taking on debt obligations;

(b) distributing profits;

(c) determining fees and costs charged for products or services offered by the pharmacy or pharmaceutical facility;

(d) hiring, firing, or promoting any personnel, including the PIC; or

(e) changing the location or name of the pharmacy or pharmaceutical facility.

([~~38~~]39) "Maintenance medications" means medications that a patient takes on an ongoing basis.

([~~39~~]40) "Medical supplies" means items for medical use that are:

(a) suitable for use in a health care facility or in the home; and

(b) disposable or semi-disposable and non-reusable.

([~~40~~]41) "MPJE" means the Multistate Pharmacy Jurisprudence Examination.

([~~41~~]42) "NABP" means the National Association of Boards of Pharmacy.

([~~42~~]43) "NAPLEX" means North American Pharmac[~~y~~]ist Licensing Examination.

([~~43~~]44) "Non-drug or device handling central prescription processing pharmacy" means a central prescription processing pharmacy that does not engage in compounding, packaging, labeling, dispensing, or administering of drugs or devices.

([~~44~~]45) "Normal distribution channel" means a chain of custody for a prescription drug sent:

(a)(i) directly from the manufacturer;

(ii) by drop-shipment;

(iii) via intracompany transfer from the manufacturer; or

(iv) from the manufacturer's:

(A) co-licensed partner;

(B) third party logistics provider; or

(C) exclusive distributor;

(b) to:

(i) a pharmacy or other designated persons authorized to dispense or administer prescription drugs to a patient;

(ii) a chain pharmacy warehouse that performs intracompany sales or transfers of such drugs to a group of pharmacies under common ownership and control;

(iii) a cooperative pharmacy warehouse to a pharmacy that is a member of the pharmacy buying cooperative or GPO to a patient;

(iv) an authorized distributor of record, and then to either a pharmacy or other designated persons authorized to dispense or administer such drug for use by a patient;

(v) an authorized distributor of record, and then to a chain pharmacy warehouse that performs intracompany sales or transfers of such drugs to a group of pharmacies under common ownership and control; or

(vi) an authorized distributor of record to another authorized distributor of record to a licensed pharmaceutical facility or a licensed healthcare practitioner authorized to dispense or administer such drug for use by a patient.

([~~45~~]46) "Parenteral" means a method of drug delivery injected into body tissues but not via the gastrointestinal tract.

([~~46~~]47) "Patient's agent" means a:

(a) relative, friend, or other authorized designee of the patient involved in the patient's care; or

(b) if requested by the patient or the individual under Subsection (46)(a), one of the following facilities:

(i) an office of a licensed prescribing practitioner in Utah;

(ii) a long-term care facility where the patient resides; or

(iii) a hospital, office, clinic, or another medical facility that provides health care services.

([~~47~~]48) "Pedigree" means a document or electronic file containing information that records each distribution of any given prescription drug.

([~~48~~]49) "Pharmacy facility" means the same as "Pharmaceutical facility" defined in Subsection 58-17b-102(46).

([~~49~~]50) "PIC[~~,~~]" as used in this rule[~~,~~] means the pharmacist-in-charge.

([~~50~~]51) "Prepackaged" or "Prepackaging" means transferring a drug, manually or by use of an automated pharmacy system, from a manufacturer's or distributor's original container to another container before receiving a prescription drug order or for a patient's immediate need for dispensing by a pharmacy or practitioner authorized to dispense in the establishment where the prepackaging occurred.

([~~51~~]52) "Prescription files" means hard copy and electronic prescriptions that includes pharmacist or technician notes, or information written or attached that is pertinent to the prescription.

([~~52~~]53) "Professional entry degree," as used in Subsection 58-17b-303(1)(e), means the professional entry degree offered by the applicant's ACPE-accredited school or college of pharmacy in the applicant's year of graduation, either a baccalaureate in pharmacy (BSPharm) or a doctorate in pharmacy (PharmD).

([~~53~~]54) "PTCB" means the Pharmacy Technician Certification Board.

([~~54~~]55) "Qualified continuing education," as used in this rule, means continuing education that meets the standards set forth in Section R156-17b-309.

([~~55~~]56) "Qualifying Ownership Change" means any transaction or series of transactions that results in a change in the ownership and managerial control of a pharmaceutical facility, but does not include changes in ownership:

(a) caused by changes in stockholders in publicly listed corporations whose stock is publicly traded;

(b) that do not result in a change in managerial control, including changes in the type of corporate entity under which the pharmaceutical facility is held;

(c) constituting less than 50% of the total ownership of the pharmaceutical facility; or

(d) of a parent entity holding an equitable interest in a pharmaceutical facility as a subsidiary, if the equitable interest constitutes less than 50% of the total ownership interest of the pharmaceutical facility.

([~~56~~]57) "Refill" means to fill again.

([~~57~~]58) "Remote dispensing pharmacist-in-charge" or "RDPIC" means the PIC of a remote dispensing pharmacy. The RDPIC shall be the PIC of the remote dispensing pharmacy's supervising pharmacy.

([~~58~~]59) "Remote dispensing pharmacy" means a Class A or Class B pharmacy located in Utah that serves as the originating site where a patient receiving services through a telepharmacy system is physically located and the practice of telepharmacy occurs, pursuant to Section R156-17b-614g.

([~~59~~]60) "Repackage" means repackaging or otherwise changing the container, wrapper, or labeling to further the distribution of a prescription drug, excluding that completed by the pharmacist or DMP responsible for dispensing the product to a patient.

([~~60~~]61) "Research facility" means a facility where research takes place that has policies and procedures describing such research.

([~~61~~]62) "Responsible [~~party~~]individual" means the [~~identity of the~~]supervisor or director [~~or the~~]of a Class E pharmacy under Section R156-17b-617a.

([~~62~~]63) "Reverse distributing" means a person or company that retrieves unusable or outdated drugs from a pharmacy by removing those drugs from stock and destroying them.

([~~63~~]64) "Self-administered hormonal contraceptive" means the same as defined in Subsection 26B-4-501(2[~~2~~]4).

([~~64~~]65) "Sterile products preparation facility" means any facility, or portion of the facility, that compounds sterile products using aseptic techniques.

([~~65~~]66) "Supervising pharmacy" means the Class A or Class B pharmacy responsible for overseeing the operation of a remote dispensing pharmacy, and whose PIC is the RDPIC for the remote dispensing pharmacy, pursuant to Section R156-17b-614g.

([~~66~~]67) "Supervisor" means a licensed pharmacist or DMP in good standing with the Division.

([~~67~~]68) "Telepharmacy system" means any telecommunication or information technology system, or combination of systems, that monitors the preparation and dispensing of prescription drugs and provides for related drug review and HIPAA-compliant patient counseling services.

(69) "Therapeutically Similar Drug List" under Subsection R156-17b-612c(1) means the list entitled Utah Therapeutically Similar Drug List and approved by the Division in collaboration with the Board, which can be found on the Division's website at https://commerce.utah.gov/dopl/pharmacy/resources/ and is incorporated by reference.

([~~68~~]70) "Third party logistics provider" means anyone who contracts with a prescription drug manufacturer to provide or coordinate warehousing, distribution, or other similar services on behalf of a manufacturer, but does not take title to the prescription drug or have any authoritative control over the prescription drug's sale.

([~~69~~]71) "Unauthorized personnel" means a person not participating in the operational processes of the pharmacy who in some way would interrupt the natural flow of pharmaceutical care.

([~~70~~]72) "Unit dose" means the ordered amount of a drug in a dosage form prepared for a one-time administration to an individual and indicates the name, strength, lot number and beyond use date for the drug.

(73) "Unlawful conduct" as defined in Section 58-1-501 and Subsection 58-17b-501(3)(b) and under Rule R156-17b does not include using the word "pharmacy," "drugstore," or any other word or combination of words of the same or similar meaning, or any sign or graphic representation that would show a pharmacy is at an address or location, if:

(a) the address or location is:

(i) eligible for or listed on the National Register of Historic Places;

(ii) recognized by the Utah State Historic Preservation Office; or

(iii) otherwise recognized by a historic society or other organization dedicated to promoting the history of a particular place, group of people, or topic;

(b) the use is only for historic purposes, and does not include conducting or transacting pharmacy business or providing pharmacy services; and

(c) the Division has been notified in writing of the use at that address or location.

([~~71~~]74) "Unprofessional conduct[~~,~~]" as defined in Title 58, Chapter 1, Division of Professional Licensing Act, Title 58, Chapter 17b, Pharmacy Practice Act, and Subsection 58-1-203(1)(e) is further defined in Section R156-1-501 and Section R156-17b-502.

(75) "USP" means the United States Pharmacopeia-National Formulary (USP-NF), including the following general chapters, which are incorporated by reference:

(a) USP <795> on Pharmaceutical Compounding -- Nonsterile Preparations, effective November 1, 2023;

(b) USP <797> on Pharmaceutical Compounding -- Sterile Preparations, effective May 1, 2024;

(c) USP <800> on Hazardous Drugs -- Handling in Healthcare Settings, effective July 1, 2020; and

(d) USP <825> on Radiopharmaceuticals -- Preparation, Compounding, Dispensing, and Repackaging, effective January 1, 2024.

(76) "Utah Guidance for Diabetic Therapeutic Equivalents" under Subsections 58-17b-608.2(7)(f) and R156-17b-612b(2) means the December 2023 guidance approved by the Division in collaboration with the Board, which can be found on the Division's website at https://commerce.utah.gov/dopl/pharmacy/resources/, and is incorporated by reference.

(77) "Utah Guidance for Dispensing by Health Department Nurse of STI Drug" under Section R156-17b-628 means the September 2026 guidance approved by the Division in collaboration with the Board, which can be found on the Division's website at https://commerce.utah.gov/dopl/pharmacy/resources/, and is incorporated by reference.

(78) "Utah Guidance for Epinephrine" under Subsections 58-17b-627(3)(a)(viii) and R156-17b-627(2)(g) means the May 2024 guidance approved by the Division in collaboration with the individuals described in Subsection 58-17b-627(4), which can be found on the Division's website at https://commerce.utah.gov/dopl/pharmacy/resources/, and is incorporated by reference.

(79) "Utah Guidance for Fluoride" under Subsections 58-17b-627(3)(a)(vi) and R156-17b-627(2)(e) means the August 2025 guidance approved by the Division in collaboration with the individuals described in Subsection 58-17b-627(4), which can be found on the Division's website at https://commerce.utah.gov/dopl/pharmacy/resources/, and is incorporated by reference.

(80) "Utah Guidance for Naloxone" under Subsections 58-17b-627(3)(a)(v) and R156-17b-627(2)(d) means the September 2021 guidance approved by the Division in collaboration with the individuals described in Subsection 58-17b-627(4), which can be found on the Division's website at https://commerce.utah.gov/dopl/pharmacy/resources/, and is incorporated by reference.

(81) "Utah Guidance for PrEP and PEP" under Subsections 58-17b-627(3)(a)(i) and (ii) and R156-17b-627(2)(a) means the September 2026 guidance entitled Utah Guidance for Oral HIV pre-exposure (PrEP) and the July 2026 guidance entitled Guidance for HIV

post-exposure prophylaxis (PEP), which are approved by the Division in collaboration with the individuals described in Subsection 58-17b-627(4), can be found on the Division's website at https://commerce.utah.gov/dopl/pharmacy/resources/, and are incorporated by reference.

([~~72~~]82) "Utah Guidance for Self-Administered Hormonal Contraceptives" under Subsections 58-17b-627(3)(a)(iii), R156-17b-621b(2)(c), and R156-17b-627(2)(b) means the September 2021 guidance approved [~~September 28, 2021~~]by the Division in collaboration with the [~~Board of Pharmacy and Medical Licensing Board~~]individuals described in Subsection 58-17b-627(4), which can be found on the Division's website at https://[~~dopl~~]commerce.utah.gov/dopl/pharmacy/resources/, and is incorporated by reference.

(83) "Utah Guidance for Tobacco Cessation Products" under Subsections 58-17b-627(3)(a)(iv) and R156-17b-627(2)(c) means the September 2021 guidance entitled Utah Guidance for Smoking Cessation approved by the Division in collaboration with the individuals described in Subsection 58-17b-627(4), which can be found on the Division's website at https://commerce.utah.gov/dopl/pharmacy/resources/, and is incorporated by reference.

(84) "Utah Guidance for Vaccine Prescription and Administration" under Subsections 58-17b-627(3)(a)(vii) and R156-17b-627(2)(f) means the April 2024 guidance approved by the Division in collaboration with the individuals described in Subsection 58-17b-627(4), which can be found on the Division's website at https://commerce.utah.gov/dopl/pharmacy/resources/, and is incorporated by reference.

([~~73~~]85) "Utah Hormonal Contraceptive Self-Screening Risk Assessment Questionnaire" under Subsection R156-17b-610(8)(a) means the May 2024 guidance approved [~~September 28, 2021~~]by the Division in collaboration with the Board [~~of Pharmacy~~]and Medical Licensing Board, which can be found on the Division's website at https://[~~dopl~~]commerce.utah.gov/dopl/pharmacy/resources, and is incorporated by reference.

[~~(74) "USP" means the United States Pharmacopeia National Formulary (USP 41 NF 36), including the First Supplement, dated November 1, 2023. The following general chapters are incorporated by reference:.~~

~~(a) USP <795> on Pharmaceutical Compounding -- Nonsterile Preparations;~~

~~(b) USP <797> on Pharmaceutical Compounding -- Sterile Preparations;~~

~~(c) USP <800> on Hazardous Drugs -- Handling in Healthcare Settings; and~~

~~(d) USP <825> on Radiopharmaceuticals -- Preparation, Compounding, Dispensing, and Repackaging.~~]

([~~75~~]86) "Vaccine Administration Protocol" means the Vaccine Administration Protocol: Standing Order to Administer Immunizations and Emergency Medications, adopted September 1, 2023, by the Division in collaboration with the Board and Medical Licensing Board, which is incorporated by reference.

([~~76~~]87) "Wholesaler" means a wholesale distributor who supplies or distributes drugs or medical devices that are restricted by federal law to sales based on the order of a physician to a person other than the consumer or patient.

([~~77~~]88) "Wholesale distribution" means the same as 21 CFR 203.3(cc)[~~(2021)~~].

R156-17b-103. Licensure - Administrative Inspection.

Under Subsection 58-17b-103(3)(f), the procedure for disposing of drugs or devices seized by the Division during an administrative inspection is as follows:

(1) Legal drugs or devices that the Division finds compliant with Title 58, Chapter 17b, Pharmacy Practice Act, shall be returned to the pharmacy's consulting pharmacist, designated representative, responsible party, PIC, RDPIC, or DMPIC, at the conclusion of the investigative or adjudicative proceedings and appeals.

(2)(a) Drugs or devices that the Division finds to be unlawfully possessed, adulterated, misbranded, outdated, or otherwise in violation of Title 58, Chapter 17b, Pharmacy Practice Act, shall be destroyed by Division personnel at the conclusion of the investigative or adjudicative proceedings and appeals.

(b) The destruction of seized controlled substance drugs shall be witnessed by two Division individuals. A controlled substance destruction form shall be completed and retained by the Division.

(3) An investigator may, upon determination that the violations observed pose an imminent peril to the public health, safety, or welfare, recommend to the Division Director to issue an emergency licensure action, such as cease and desist.

R156-17b-203. Advisory Pharmacy Compounding Education Committee Created - Membership - Duties.

(1) Under Subsection 58-1-203(1)(f) and Section R156-1-205, there is created the Advisory Pharmacy Compounding Education Committee (Committee).

(2) The Committee shall consist of seven members, diversified between:

(a) retail pharmacy;

(b) hospital pharmacy;

(c) other pharmacy specialties determined pertinent by the Division in collaboration with the Board; and

(d) at least one physician.

(3) Each Committee member shall:

(a) be licensed in good standing with the state; and

(b) have experience and knowledge of least one USP Chapter, USP <795>, USP <797>, or USP <800>.

(4) The Board shall nominate Committee members for appointment in accordance with Section R156-1-205, and if possible at least six months before the date of cessation of service.

(5) The Committee's duties and responsibilities shall be to address pharmacy compounding issues, including:

(a) monitoring current and proposed federal standards and USP standards for pharmacy compounding; and

(b) reviewing and making recommendations to the Division and boards regarding:

(i) pharmacy compounding education and training;

(ii) pharmacy compounding laws and rules; and

(iii) other pharmacy compounding issues as assigned by the Division in collaboration with the Board.

(6) The Committee shall meet at least once per calendar quarter, and as may be directed by the Board with the concurrence of the Division.

(7) The Committee shall annually designate one of its members to act as chair and another member to act as vice chair, on a calendar year basis. The Committee shall elect its chair and vice chair at a meeting conducted in the last quarter of the calendar year.

(8) Each calendar quarter, a Committee designee shall attend at least one meeting of the Board and one meeting of the Medical Licensing Board to report the Committee's activities and recommendations to each board.

R156-17b-302. Pharmacy Licensure Classifications - Pharmacist-in-Charge, Remote Dispensing Pharmacist-in-Charge, or Dispensing-Medical-Practitioner-in-Charge Requirements.

Under Section 58-17b-302, this section clarifies the classification of pharmacies.

(1) A Class A pharmacy includes retail operations located in Utah. A Class A pharmacy requires a PIC or RDPIC. Examples of Class A pharmacies include:

(a) retail pharmacies;

(b) mail service retail pharmacies; and

(c) remote dispensing pharmacies.

(2) A Class B pharmacy includes an institutional pharmacy that provides services to a target population unique to the needs of the healthcare services required by the patient. A Class B pharmacy require a PIC, RDPIC, or DMPIC, except for pharmaceutical administration facilities and narcotic treatment program pharmacies. Examples of Class B pharmacies include:

(a) closed door pharmacies;

(b) hospital clinic pharmacies;

(c) narcotic treatment program pharmacies;

(d) nuclear pharmacies;

(e) branch pharmacies;

(f) hospice facility pharmacies;

(g) pharmaceutical administration facility pharmacies;

(h) sterile product preparation facility pharmacies;

(i) dispensing medical practitioner clinic pharmacies; and

(j) remote dispensing pharmacies.

(3) A Class C pharmacy includes a pharmacy that is involved in:

(a) manufacturing;

(b) producing;

(c) wholesaling;

(d) distributing; or

(e) reverse distributing.

(4) A Class D pharmacy requires a PIC licensed in the state where the pharmacy is physically located and includes an out[-]_of[-] state mail service pharmacy. A Class D pharmacy with multiple locations shall have licenses for each facility and each component part of a facility.

(5) A Class E pharmacy does not require a PIC and includes:

(a) analytical laboratory pharmacies;

(b) animal control pharmacies;

(c) durable medical equipment provider pharmacies;

(d) human clinical investigational drug research facility pharmacies;

(e) medical gas provider pharmacies;

(f) animal narcotic detection training facility pharmacies;

(g) third party logistics providers;

(h) non-drug or device handling central prescription processing pharmacies; and

(i) veterinarian pharmaceutical facility pharmacies.

(6)(a) Each Class A and each Class B pharmacy required to have a PIC or DMPIC shall have one PIC or DMPIC who is employed on a full-time basis as defined by the employer, who acts as a PIC or DMPIC for one pharmacy.

(b) The PIC or DMPIC:

(i) may be the PIC or DMPIC of more than one Class A or Class B pharmacy, if the additional Class A or Class B pharmacies are not open to provide pharmacy services simultaneously; and

(ii) may serve as an RDPIC.

(7) A PIC, RDPIC, or DMPIC shall comply with Section R156-17b-603.

R156-17b-303a. Qualifications for Licensure - Pharmacist, Pharmacy Intern, and Pharmacy Technician - Education Requirements.

(1) Under Subsections 58-17b-303(2) and 58-17b-304(6)(b), the credentialing agency recognized to provide certification and evaluate equivalency of a foreign educated pharmacy graduate is the Foreign Pharmacy Graduate Examination Committee (FPGEC) of the National Association of Boards of Pharmacy.

(2) Under Subsection 58-17b-304(6), an applicant for a pharmacy intern license shall:

(a) be a current pharmacy student in a college of pharmacy accredited by the ACPE, as evidenced by written verification from a dean of the college;

(b) hold a graduate degree from a foreign pharmacy school and have received a certificate of equivalency from an approved credentialing agency under Subsection (1); or

(c) have been accepted to a college of pharmacy accredited by the ACPE, as evidenced by a written acceptance letter from the college of pharmacy showing that the applicant is expected to begin coursework in the college of pharmacy no more than 90 days from the date of the application.

(3) Under Subsection 58-17b-305(1)(e), a pharmacy technician shall complete a training program that:

(a) is accredited by:

(i) ASHP; or

(ii) the Accrediting Bureau of Health Education Schools (ABHES); or

(b) is conducted by:

(i) a program approved by the Division in collaboration with the Board; or

(ii) a branch of the Armed Forces of the United States; and

(c) meets the following standards:

(i) requires completion, while licensed as a pharmacy technician trainee, of at least [~~180~~]120 hours of directly supervised practical training in a licensed pharmacy by a licensed pharmacist in good standing; and

(ii) has written protocols and guidelines for the teaching pharmacist outlining the use and supervision of pharmacy technician trainees that address:

(A) the specific manner in which supervision will be completed; and

(B) an evaluative procedure to verify the accuracy and completeness of any act, task, and function performed by the pharmacy technician trainee.

(4) A pharmacy technician trainee shall complete a pharmacy technician training program and pass the required examination in Subsection R156-17b-303c(4) within two years after obtaining their pharmacy technician trainee license, unless otherwise approved by the Division in collaboration with the Board for good cause showing exceptional circumstances. An individual who fails to comply with this time frame shall repeat a pharmacy technician training program in its entirety if the individual pursues licensure as a pharmacy technician.

(5)(a) A Division approved program or program in ASHP candidate status shall notify a student before enrollment that if the program is denied accreditation status while the student is enrolled in the program, the student will be required to complete education in another program with no assurance of how many credits will transfer to the new program.

(b) A Division approved program or program in ASHP candidate status that is denied accreditation shall immediately notify the Division, enrolled students, and student practice sites, of the denial.

(c) The notice required in Subsection (5)(b) shall instruct each student and practice site that:

(i) the program no longer satisfies the pharmacy technician license education requirement in Utah; and

(ii) enrollment in a different program meeting requirements in Subsection R156-17b-303a(3) is necessary for the student to complete training and to satisfy the pharmacy technician license education requirement in Utah.

(6) An applicant from another jurisdiction seeking licensure as a pharmacy technician in Utah who does not meet the qualifications for licensure by endorsement in Subsection 58-1-302(2)[~~, meets~~] is considered to meet the qualifications for licensure in Subsections 58-1-302(3), 58-17b-305(1)(e), and 58-17b-305(1)(f) if the applicant:

(a)(i) has engaged in the practice of a pharmacy technician for a minimum of 1,000 hours in that jurisdiction within the past two years; or

(ii) has equivalent experience as approved by the Division in collaboration with the Board; and

(b) has current PTCB or ExCPT certification.

R156-17b-303b. Qualifications for Licensure - Pharmacist - Pharmacy Internship Standards.

(1) Under Subsection 58-17b-303(1)(f), the pharmacy internship standards for licensure as a pharmacist are established in this section.

(2) A graduate of a U.S. pharmacy school shall have at least 1,740 hours of practice obtained according to the Accreditation Council for Pharmacy Education (ACPE), Accreditation Standards and Key Elements for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree, effective [~~July~~]June 2025[~~1, 2016 ("Standards 2016")~~], which is incorporated by reference.

(3)(a) A graduate of a foreign pharmacy school and who has obtained a certification of equivalency under Subsection 58-17b-303(2) shall have at least 1,440 hours of supervised pharmacy practice in the United States.

(b) The Division in collaboration with the Board may credit up to 500 hours toward the requirement of Subsection (3)(a) for a graduate's other experience substantially related to the practice of pharmacy.

(4) If a pharmacy intern is suspended or dismissed from an approved college of pharmacy, the pharmacy intern shall notify the Division within 15 days of the suspension or dismissal.

(5) If a pharmacy intern ceases to meet a requirement for intern licensure, the pharmacy intern shall surrender the pharmacy intern license to the Division within 60 days unless an extension is granted by the Division in collaboration with the Board.

R156-17b-303c. Qualifications for Licensure - Pharmacist and Pharmacy Technician - Examinations.

(1) An applicant seeking licensure as a pharmacist under Subsection 58-17b-303(1), shall pass the following examinations within five years of graduation from a pharmacy program described in Subsection 58-17b-303(1)(e):

(a) the NAPLEX with a passing score established by NABP; and

(b) the Utah MPJE with a passing score established by NABP.

(2) An applicant seeking licensure as a pharmacist by endorsement under Section 58-1-302 or Subsection 58-17b-303(3), shall pass the Utah MPJE, with a passing score established by NABP.

(3) An applicant under Subsection 58-17b-303(1) or Subsection 58-17b-303(3) who has failed a required examination three times and wishes to retake the exam shall:

(a) meet with the Board to request authorization to test up to two additional attempts; and

(b) complete any additional training the Board may require before any approved additional attempts.

(4) An applicant under Subsection 58-17b-303(1) or Subsection 58-17b-303(3) who has failed a required examination five times and who wishes to retake the exam shall complete another education program in accordance with Subsection 58-17b-303(1)(e) before an additional authorization to test.

(5) An applicant shall pass any required examination within five years of graduation from an education program in accordance with Subsection 58-17b-303(1)(e).

(6)(a) Under Subsection 58-17b-305(1)(f), an applicant for licensure as a pharmacy technician shall pass the PTCB or ExCPT with a passing score established by the certifying body.

(b) A PTCB or ExCPT certificate shall show a valid date and that the certification is active.

(7) In addition to any applicable examination requirements of Subsection 58-17b-303(1)(g) or Subsection 58-17b-303(3)(i), a graduate of a foreign pharmacy school seeking licensure under Subsection 58-17b-303(2) shall obtain a passing score on the Foreign Pharmacy Graduate Examination Committee (FPGEC) examination.

R156-17b-303d. Qualifications for Licensure - Meet with the Board.

Under Subsections 58-1-202(1)(d) and 58-1-301(3), an applicant for licensure under Title 58, Chapter 17b, Pharmacy Practice Act may be required to meet with the Board to evaluate the applicant's qualifications for licensure.

R156-17b-304. Temporary Pharmacist Licensure - Additional Authorization to Test.

(1) In accordance with Subsection 58-1-303(1), the Division may issue a temporary pharmacist license to a person who meets all qualifications for licensure as a pharmacist in Utah except for the passing of the required examination, if the applicant:

(a) is:

(i) a graduate of an ACPE accredited pharmacy school within two months immediately preceding application for licensure;

(ii) enrolled in a pharmacy graduate residency or fellowship program; or

(iii) licensed in good standing to practice pharmacy in another state or territory of the United States;

(b) submits a complete application for licensure as a pharmacist except the passing of the NAPLEX and Utah MJPE examinations;

(c) submits evidence of having secured employment in Utah conditioned upon issuance of the temporary license, and the employment is under the direct, on-site supervision of a pharmacist with an active, non-temporary Utah license that includes a controlled substance license; and

(d) has registered to take the required licensure examinations.

(2) A temporary pharmacist license issued under Subsection (1) expires the earlier of:

(a) six months from the date of issuance;

(b) the date upon which the Division receives notice from the examination agency that the individual has failed either examination three times; or

(c) the date upon which the Division issues the individual full licensure.

(3) An individual who has failed either examination three times shall meet with the Board to request an additional authorization to test. The Division, in collaboration with the Board, may require additional training as a condition for approval of an authorization to retest.

(4) A pharmacist temporary license issued in accordance with this section cannot be renewed, but may be extended up to six months, as approved by the Division in collaboration with the Board.

R156-17b-30[~~7~~]6. Qualifications for Licensure - Criminal Background Checks.

(1) Under Section 58-17b-306, [~~A~~]an applicant for licensure as a pharmacy shall document, to the satisfaction of the Division, the owners and management of the pharmacy and the facility in which the pharmacy is located.

(2) The following individuals associated with an applicant for licensure as a pharmacy shall be subject to the criminal background check requirements set forth in Subsection 58-17b-30[~~7~~]6(1)(f) and Section 58-1-301.5:

(a) the PIC;

(b) the PIC's immediate supervisor; and

(c) the senior person in charge of the facility in which the pharmacy is located[~~;~~].

[~~(d) others associated with management of the pharmacy or the facility in which the pharmacy is located as determined necessary by the Division in order to protect public health, safety and welfare; and~~

~~(e) owners of the pharmacy or the facility in which the pharmacy is located as determined necessary by the Division in order to protect public health, safety and welfare.~~]

R156-17b-308. Term, Expiration, Renewal, and Reinstatement of License - Application Procedures.

This section establishes procedures required in Sections 58-1-308, 58-17b-308, and 58-17b-506.

(1) The renewal date for the two-year renewal cycle [~~applicable to~~]for licensees under Title 58, Chapter 17b, Pharmacy Practice Act is established in Section R156-1-308a.

(2) Renewal and reinstatement procedures shall be in accordance with Sections R156-1-308a through R156-1-308l, except as provided in Subsections (3) and (4).

(3) A pharmacist whose license was active and in good standing before its expiration may apply for reinstatement, under the following practice re-entry requirements:

(a) if the application for re-entry is between two years and five years after the date of expiration, an applicant for reinstatement shall submit documentation of compliance with current continuing education as required in Subsection R156-17b-309(1); or

(b) if the application for re-entry is more than five years after the date of license expiration, an applicant for reinstatement shall retake the examinations required for licensure under S[~~ubs~~]ection R156-17b-303c.

(4) A pharmacy technician whose license was active and in good standing before its expiration may apply for reinstatement in accordance with the following practice re-entry requirements:

(a) if the application for re-entry is between two years and five years after the date of expiration, an applicant for reinstatement shall submit documentation of current continuing education as required in Subsection R156-17b-309(2); or

(b) if the application for re-entry is more than five years after the date of expiration, an applicant for reinstatement shall retake the examinations required for licensure under Section R156-17b-303c.

(5) The Division, in collaboration with the Board, may approve the extension of an intern license upon the request of the licensee, if the intern lacks the required number of internship hours for licensure.

R156-17b-309. Continuing Education.

Under Section 58-17b-310 and Subsections 58-1-203(1)(g) and 58-1-308(3)(b), this section establishes the continuing education (CE) requirements for renewal or reinstatement of a pharmacist or pharmacy technician license for each two-year renewal cycle.

(1) A pharmacist shall complete at least 30 CE hours which shall:

(a) include 12 hours of live or technology-enabled participation in lectures, seminars, or workshops;

(b) be relevant to the licensee's professional practice;

(c) include one hour of pharmacy law or ethics;

(d) if engaging in the administration of vaccines under Section R156-17b-621, include two hours in vaccine-related topics;

(e) if engaging in the administration of prescription drugs or devices under Section R156-17b-621 or R156-17b-625, include two hours in topics related to the administration of those prescription drugs or devices; and

(f) if dispensing a self-administered hormonal contraceptive in accordance with Title 26B, Chapter 4, Family Planning Access Act under Section R156-17b-621b, include two hours in topics related to hormonal contraceptive therapy.

(2)(a) A pharmacy technician shall complete at least 20 CE hours, which shall include:

(i) six hours of live or technology-enabled participation at lectures, seminars, or workshops;

(ii) one hour of pharmacy law or ethics; and

(iii) if engaging in the administration of vaccines under Section R156-17b-621, two hours in vaccine-related topics.

(b) Current PTCB or ExCPT certification shall fulfill each CE requirements for a pharmacy technician, except for vaccine-related topic hours that may be required under Subsection (2)(a)(iii).

(3)(a) If a licensee first becomes licensed during the two-year renewal cycle, the licensee's required number of CE hours shall be decreased proportionately according to the date of licensure.

(b) The Division may defer or waive each CE requirements as provided in Section R156-1-308d.

(4) CE credit shall be recognized as follows:

(a)(i) one live CE hour for attending one Board of Pharmacy meeting, up to a maximum of two CE hours during each two-year period; and

(ii) these hours may count as "pharmacy law or ethics" hours;

(b)(i) two CE hours for each hour of lecturing or instructing a CE course or teaching in the licensee's profession, up to a maximum of ten CE hours during each two-year period;

(ii) the licensee shall document the course's content and intended audience such as pharmacists, pharmacy technicians, pharmacy interns, physicians, or nurses; and

(iii) public service programs, such as presentations to schoolchildren or service clubs, are not eligible for CE credit; and

(c) CE credit shall be approved by, conducted by, or under the sponsorship of one of the following:

(i) institutes, seminars, lectures, conferences, workshops, various forms of mediated instruction, and programmed learning courses, presented by an ACPE-approved institution, individual, organization, association, corporation, or agency;

(ii) programs approved by health-related CE approval organizations, if the CE is nationally recognized by a healthcare accrediting agency and is related to the practice of pharmacy;

(iii) Division training or educational presentations;

(iv) educational meetings that are ACPE accredited and are sponsored by the Utah Pharmacy Association, the Utah Society of Health-System Pharmacists, or other professional organization or association; or

(v) for pharmacists, programs of certification by qualified individuals such as certified diabetes educator credentials, board certification, or other certification as approved by the Division in collaboration with the Board.

(5) A licensee shall maintain documentation sufficient to prove compliance with this section, for a period of four years after the end of the renewal cycle for which the CE is due, by:

(a) maintaining registration with the NABP e-Profile CPE Monitor plan or the NABP CPE Monitor Plus plan; and

(b) maintaining a certificate of completion or other adequate documentation for CE that cannot be tracked by the licensee's NABP plan.

R156-17b-309.7. Exemptions from Licensure - Opioid Treatment Program.

(1) [~~In accordance with~~]Under Section 58-17[-]b-309.7 "under the direction of a pharmacist" means that the pharmacist has delegated to a covered provider the authority to perform one or more selected dispensing tasks on behalf of the pharmacist:

(a) in accordance with state and federal laws and rules; and

(b) under the general supervision of the pharmacist as defined in Subsection R156-1-102a([4]1)(c).

(2) A pharmacist retains accountability for the appropriate delegation of dispensing [~~s~~]tasks.

(3) The covered provider is accountable for the accuracy of the dispensing task and shall consult the pharmacist as needed.

(4) A covered provider may not:

(a) further delegate to another person any dispensing task delegated to the covered provider by the pharmacist; or

(b) expand the scope of a delegated dispensing task without the express permission of the pharmacist.

R156-17b-401. Disciplinary Proceedings.

(1) An individual licensed as a pharmacy intern who is currently under disciplinary action and qualifies for licensure as a pharmacist may be issued a pharmacist license under the same restrictions as the pharmacy intern license.

(2) A pharmacist, pharmacy intern, pharmacy technician, pharmacy technician trainee, or DMP whose license or registration is suspended under Subsection 58-17b-701(6) may petition the Division at any time to demonstrate the ability to resume competent practice.

R156-17b-402. Administrative Penalties.

Under Subsection 58-17b-401(6) and Sections 58-17b-501[~~and~~], 58-17b-502, 58-1-501, 58-1-502, and 58-37-304, unless otherwise ordered by the presiding officer, the following fine [~~and citation~~]schedule shall apply:

TABLE 1[~~402 FINE SCHEDULE~~]

[~~SUBSECTION~~	Violation[~~IOLATION~~]	First[~~IRST~~] Offense[~~FFENSE~~]	Subsequent[~~UBSEQUENT~~] Offense[~~FFENSE~~]
~~(1)~~	58-1-501(1)(a)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(2)~~	58-1-501(1)(b)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(3)~~	58-1-501(1)(c)	$[-]500 - $[-]1,000	$[-]1,000 - $[-]5,000
~~(4)~~	58-1-501(1)(d)	$[-]500 - $[-]1,000	$[-]1,000 - $[-]5,000
~~(5)~~	58-1-501(1)(e)	$[-]100 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(6)~~	58-1-501(1)(f)(i)(A)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(7)~~	58-1-501(1)(f)(i)(B)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(8)~~	58-1-501(1)(g)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(9)~~	58-1-501(2)(a)(i)	$[-]100 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(10)~~	58-1-501(2)(a)(ii)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(11)~~	58-1-501(2)(a)(iii)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(12)~~	58-1-501(2)(a)(iv)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(13)~~	58-1-501(2)(a)(v)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(14)~~	58-1-501(2)(a)(vi)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(15)~~	58-1-501(2)(a)(vii)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(16)~~	58-1-501(2)(a)(viii)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(17)~~	58-1-501(2)(a)(ix)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(18)~~	58-1-501(2)(a)(x)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
	58-1-501(2)(a)(xi)	$100 - $500	$200 - $1,000
~~(19)~~	58-1-501(2)(a)(xii)	$[-]100 - $[-]1,000	$[-]500 - $[-]2,000
~~(20)~~	58-1-501(2)(a)(xiii)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(21)~~	58-1-501(2)(a)(xi[~~ii~~]v)(A)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(22)~~	58-1-501(2)(a)(xi[~~ii~~]v)(B)	$500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(23)~~	58-1-501(2)(a)(x[~~i~~]v)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(24)~~	58-1-501(2)(a)(xvi)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(25)~~	58-1-501(2)(a)(xvii)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
	58-1-501(2)(a)(xviii)	$100 - $500	$200 - $1,000
~~(26)~~	58-1-501.5	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(27)~~	R156-1-501(1)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(28)~~	R156-1-501(2)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(29)~~	R156-1-501(3)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(30)~~	R156-1-501(4)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(31)~~	R156-1-501(5)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000

~~(32)~~	R156-1-501(6)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
	R156-1-501(7)	$500 - $2,000	$2,000 - $10,000
~~(33)~~	58-17b-501(1)	$[-]500 - $[-]2,000	$[-]5,000
~~(34)~~	58-17b-501(2)	$[-]100 - $[-]1,000	$[-]500 - $[-]2,000
~~(35)~~	58-17b-501(3)(a)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(36)~~	58-17b-501(3)(b)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(37)~~	58-17b-501(4)	$[—]1,000 - $[ ]5,000	$[-]10,000
~~(38)~~	58-17b-501(5)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(39)~~	58-17b-501(6)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(40)~~	58-17b-501(7)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(41)~~	58-17b-501(8)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(42)~~	58-17b-501(9)	$[-]500 - $[-]1,000	$[-]1,500 - $[-]5,000
~~(43)~~	58-17b-501(10)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(44)~~	58-17b-501(11)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(45)~~	58-17b-501(12)	$[—]1,000 - $[ ]5,000	$[-]10,000
~~(46)~~	58-17b-501(13)	$[-]100 - $[-]500	$[-]1,000 - $[-]2,500
~~(47)~~	58-17b-502(1)(a)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(48)~~	58-17b-502(1)(b)	$[—]2,500 - $[ ]5,000	$[-]5,500 - $[-]10,000
~~(49)~~	58-17b-502(1)(c)	$[—]1,000 - $[ ]5,000	$[-]10,000
~~(50)~~	58-17b-502(1)(d)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(51)~~	58-17b-502(1)(e)	$[—]1,000 - $[ ]5,000	$[-]10,000
~~(52)~~	58-17b-502(1)(f)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(53)~~	58-17b-502(1)(g)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(54)~~	58-17b-502(1)(h)	$[-]100 - $[-]500	$[-]500 - $[-]1,000
~~(55)~~	58-17b-502(1)(i)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(56)~~	58-17b-502(1)(j)	$[-]100 - $[-]500	$[-]500 - $[-]1,000
~~(57)~~	58-17b-502(1)(k)	$[-]100 - $[-]500	$[-]2,000 - $[-]10,000
~~(58)~~	58-17b-502(1)(l)	$[-]100 - $[-]500	$[-]500 - $[-]1,000
~~(59)~~	58-17b-502(1)(m)	$[-]500 - $[-]1,000	$[-]2,500 - $[-]5,000
~~(60)~~	58-17b-502(1)(n)	$[-]100 - $[-]500	$[-]500 - $[-]1,000
~~(61)~~	58-17b-502(1)(o)	$[-]100 - $[-]500	$[-]500 - $[-]1,000
~~(62)~~	58-17b-502(1)(p)	$[—]2,500 - $[ ]5,000	$[-]5,000 - $[-]10,000
~~(63)~~	R156-17b-502(1)	$[-]250 - $[-]500	$[-]2,000 - $[-]10,000
~~(64)~~	R156-17b-502(2)(a)	$[-]250 - $[-]500	$[-]500 - $[-]750
~~(65)~~	R156-17b-502(2)(b)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(66)~~	R156-17b-502(3)	$[-]100 - $[-]500	$[-]500 - $[-]1,000
~~(67)~~	R156-17b-502(4)	$[-]50 - $100	$[-]200 - $[-]300
~~(68)~~	R156-17b-502(5)	$[-]100 - $[-]200	$[-]200 - $[-]500
~~(69)~~	R156-17b-502([~~6~~]5)	$[-]500 - $[-]1,000	$[-]2,000 - $[-]10,000
~~(70)~~	R156-17b-502([~~7~~]6)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(71)~~	R156-17b-502([~~8~~]7)	$[-]100 - $[-]250	$[-]300 - $[-]500
~~(72)~~	R156-17b-502([~~9~~]8)	$250 - $1,000	$[-]500 - $[-]5,000
~~(73)~~	R156-17b-502([~~10~~]9)(a)	$[-]50 - $[-]100	$[-]250 - $[-]500
~~(74)~~	R156-17b-502([~~10~~]9)(b)	$[-]250 - $[-]500	$[-]750 - $[-]1,000
~~(75)~~	R156-17b-502([~~11~~]10)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(76)~~	R156-17b-502([~~12~~]11)(a)	$[-]100 - $[-]250	$[-]500 - $[-]2,500
~~(77)~~	R156-17b-502([~~12~~]11)(b)	$[-]250 - $[-]1,000	$[-]500 - $[-]5,000
~~(78)~~	R156-17b-502([~~13~~]12)(a)	$[-]50 - $[-]100	$[-]250 - $[-]500

~~(79)~~	R156-17b-502([~~13~~]12)(b)	$[-]250 - $[-]500	$[-]1,000 - $[-]2,000
~~(80)~~	R156-17b-502([~~14~~]13)(a)	$[-]500 - $[-]2,500	$[-]5,000 - $[-]10,000
~~(81)~~	R156-17b-502([~~14~~]13)(b)	$[~~—~~]2,000 per occurrence	
~~(82)~~	R156-17b-502([~~15~~]14)	[~~double original penalty, up to $ 10,000~~]$500 - $2,000	$2,000 - $10,000
~~(83)~~	R156-17b-502([~~16~~]15)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(84)~~	R156-17b-502([~~17~~]16)	$[~~—~~]1,000 - $[ ]5,000	$[-]10,000
~~(85)~~	R156-17b-502([~~18~~]17)	$[-]500 - $[-]2,500	$[-]5,000 - $[-]10,000
~~(86)~~	R156-17b-502([~~19~~]18)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(87)~~	R156-17b-502([~~20~~]19)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(88)~~	R156-17b-502([~~21~~]20)	$[-]100 - $[-]500	$[-]200 - $[-]1,000
~~(89)~~	R156-17b-502([~~22~~]21)	$[-]500 - $[-]2,000	$[-]2,000 - $[-]10,000
~~(90)~~	R156-17b-502([~~23~~]22)(a)	$[-]100 - $[-]300	$[-]500 - $[-]1,000
~~(91)~~	R156-17b-502([~~23~~]22)(b)	$[-]250 - $[-]500	$[-]500 - $[-]1,250
~~(92)~~	R156-17b-502([~~24~~]23)	$[-]100 - $[-]500	$[-]500 - $[-]1,000
~~(93)~~	R156-17b-502([~~25~~]24)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(94)~~	R156-17b-502([~~26~~]25)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(95)~~	58-37-[~~8~~]304(11)	$[~~———~~]1,000-$[ ]5,000	$[-]5,000[~~— $ 10,000~~]
	58-37-304(12)	$100 - $500	$500 - $1,000
	58-37-304(13)	$500 - $2,000	$2,500 - $5,000
	58-37-304(14)	$500 - $2,000	$5,000
	58-37-304(15)	$500 - $2,000	$5,000
~~(96)~~	R156-37-502(1)(a)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(97)~~	R156-37-502(1)(b)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(98)~~	R156-37-502(2)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(99)~~	R156-37-502(3)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(100)~~	R156-37-502(4)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(101)~~	R156-37-502(5)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(102)~~	R156-37-502(6)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(103)~~	R156-37-502(7)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
~~(104)~~	R156-37-502(8)	$[-]500 - $[-]2,000	$[-]2,500 - $[-]10,000
	R156-37-502(11)	$500 - $2,000	$2,500 - $10,000
~~(105)~~]	Any other conduct that constitutes [~~U~~]unprofessional or [~~U~~]unlawful conduct	$[-]100 - $[-]500	$[-]200 - $[-]1,000

R156-17b-502. Unprofessional Conduct.

Under Section 58-17b-502, "[~~U~~]unprofessional conduct" includes:

(1) violating the American [~~Pharmaceutical~~]Pharmacists Association (APhA) Code of Ethics for Pharmacists, October 27, 1994, which is incorporated by reference;

(2)(a) failing to comply with the USP-NF <795>, if applicable to activities performed; or

(b) failing to comply with the USP-NF <797>, if applicable to activities performed;

(3) failing to comply with continuing education requirements;

(4) failing to provide the Division with a current mailing address within ten business days of a change of address;

[~~(5) failing to timely fulfill a subpoena issued under Section R156-1-110;~~]

([~~6~~]5) failing to abide by applicable federal and state law regarding the practice of pharmacy;

([~~7~~]6) failing to comply with administrative inspections;

([~~8~~]7) failing to return a self-audit report by the deadline established by the Division;

([~~9~~]8) providing false information on a self-audit report;

([~~10~~]9)(a) violating the laws and rules regulating operating standards in a pharmacy, as discovered upon inspection by the Division; or

(b) after discovery upon inspection by the Division of violation of laws and rules regulating operating standards in a pharmacy, failing to comply within the time established by the Division;

([~~11~~]10) abandoning a pharmacy or leaving prescription drugs accessible to the public;

([~~12~~]11)(a) as a pharmacist, practicing pharmacy with an inappropriate pharmacist to pharmacy intern ratio under Subsection R156-17b-606(3) or pharmacist to pharmacy technician trainee ratio under Subsection R156-17b-601(4); or

(b) as a pharmacy, practicing pharmacy with an inappropriate pharmacist to pharmacy intern ratio under Subsection R156-17b-606(3) or pharmacist to pharmacy technician trainee ratio under Subsection R156-17b-601(4);

([~~13~~]12)(a) as a pharmacist, allowing an unauthorized person in the pharmacy; or

(b) as a pharmacy, allowing an unauthorized person in the pharmacy;

([~~14~~]13)(a) as a pharmacist, failing to offer to counsel a person receiving a prescription medication; or

(b) as a pharmacy, failing to offer to counsel a person receiving a prescription medication;

([~~15~~]14) failing to timely pay an administrative fine;

([~~16~~]15) failing to comply with the PIC, consulting pharmacist, RDPIC or DMPIC standards under Section R156-17b-603;

([~~17~~]16) failing to adhere to institutional policies and procedures related to technician checking of medications when technician checking is utilized;

([~~18~~]17) failing to take appropriate steps to avoid or resolve identified drug therapy management problems under Subsection R156-17b-611(3);

([~~19~~]18) dispensing medication that has been discontinued by the FDA;

([~~20~~]19) failing to keep or report accurate records of training hours;

([~~21~~]20) failing to provide consulting pharmacist, designated representative, responsible [~~party~~]individual, PIC, RDPIC, or DMPIC information to the Division within 30 days of a change in consulting pharmacist, designated representative, responsible [~~party~~]individual, PIC, RDPIC or DMPIC;

([~~22~~]21) requiring a pharmacy, pharmacist, or DMP to operate the pharmacy or allow the operation of the pharmacy with a ratio of supervising pharmacist or DMP to other pharmacy personnel in circumstances that result in, or reasonably would be expected to result in, an unreasonable risk of harm to public health, safety, and welfare;

([~~23~~]22)(a) as a pharmacist, failing under Subsection R156-17b-603([~~3~~]2)([~~t~~]b) to notify the Division within seven calendar days of a change in the email address designated for use in self-audits or pharmacy alerts; or

(b) as a pharmacy, failing under Subsection R156-17b-603(2)(b) to notify the Division within seven calendar days of a change in the email address designated for use in self-audits or pharmacy alerts;

([~~24~~]23) failing to ensure, as a DMP or DMP clinic pharmacy, that a DMP designee has completed a formal or on-the-job dispensing training program under Section R156-17b-622;

([~~25~~]24) failing to make a timely report regarding dispensing of an opiate antagonist to the Division and to the physician who issued the standing order, under Section R156-17b-625; and

([~~26~~]25) failing to comply with the operating standards for a remote dispensing pharmacy under Section R156-17b-614g.

R156-17b-601. Operating Standards - Pharmacy Technician and Pharmacy Technician Trainee.

Under Subsection 58-17b-102(57), this section defines practice as a licensed pharmacy technician.

(1) A pharmacy technician may perform any task associated with the physical preparation and processing of prescription and medication orders, including:

(a) receiving written prescriptions;

(b) taking refill orders, including refill authorizations;

(c) entering and retrieving information into and from a database or patient profile;

(d) preparing labels;

(e) retrieving medications from inventory;

(f) counting and pouring into containers;

(g) placing medications into patient storage containers;

(h) affixing labels;

(i) compounding;

(j) counseling for over-the-counter drugs and dietary supplements under the direction of the supervising pharmacist;

(k) receiving new prescription drug orders when communicating telephonically or electronically, if the original information is recorded so the pharmacist may review the prescription drug order as transmitted, including accepting new prescription drug orders saved on voicemail for a pharmacist to review;

(l) transferring prescriptions as an authorized transferor or authorized transferee under [~~Subsections 58-17b-604(4)(a),~~]Sections 58-17b-604[~~,~~] and R156-17b-612;

(m) performing checks of certain medications prepared for distribution filled or prepared by another technician within a Class B hospital pharmacy, such as medications prepared for distribution to an automated dispensing cabinet, cart fill, crash cart medication tray, or unit dosing from a prepared stock bottle, in accordance with the following operating standards:

(i) a technician authorized by a hospital to check medications shall have at least:

(A) one year of experience working as a pharmacy technician; and

(B) six months of experience at the hospital where the technician [~~is authorized to~~]may check medications;

(ii) a technician may only check steps in the medication distribution process that do not require the professional judgment of a pharmacist and that are supported by sufficient automation or technology to ensure accuracy, such as barcode scanning, drug identification automation, checklists, or visual aids;

(iii) a hospital that authorizes technicians to check medications shall:

(A) have a training program and ongoing competency assessment that is documented and retrievable during each technician's employment and at least three years beyond employment;

(B) maintain a list of technicians on staff [~~that~~]who are allowed to check medications;

(C) have a medication error reporting system and be able to produce documentation of its use;

(D) have a supervising pharmacist immediately available during times [~~that~~]when a pharmacy technician is checking medications; and

(E) have comprehensive policies and procedures that guide technician checking [~~that~~]and include the following:

(I) process for technician training and ongoing competency assessment and documentation;

(II) process for supervising technicians who check medications;

(III) list of medications, or types of medications that may [~~or may not~~]be checked by a technician;

(IV) description of the automation or technology [~~to be utilized~~]used by the institution to augment the technician check;

(V) process for maintaining a permanent log of the unique initials or identification codes that identify each technician responsible for checked medications by name; and

(VI) description of processes used to track and respond to medication errors; and

(n) additional tasks not requiring the judgment of a pharmacist.

(2) A pharmacy technician may not:

(a) receive a new prescription or medication order, except as described in Subsection (1)(k);

(b) clarify a prescription or medication order from a prescriber;

(c) perform a drug utilization review;

(d) perform final review of a prescribed drug prepared for dispensing;

(e) dispense a drug; or

(f) counsel a patient [~~with respect to~~]about a prescription drug.

(3) A pharmacy technician may administer vaccines and emergency medications pursuant to delegation by a pharmacist under the Vaccine Administration Protocol, if the pharmacy technician:

(a) has completed the initial training required by Section R156-17b-621;

(b) is under direct, on-site supervision by the delegating pharmacist as defined in Subsection R156-1-102a(1)(a); and

(c) for each renewal cycle after the initial training, has completed a minimum of two hours of continuing education in immunization or vaccine-related topics in accordance with Section R156-17b-309.

(4) A pharmacy technician trainee:

(a) shall practice only under the direct supervision of a pharmacist, and in a ratio not to exceed:

(i) one pharmacy technician trainee to one pharmacist; or

(ii) two pharmacy technician trainees to one pharmacist, if a licensed pharmacy technician or intern is working during the same shift; and

(b) may perform any task in Subsection (1), except performing checks of certain medications prepared for distribution filled or prepared by a technician within a Class B hospital pharmacy as described in Subsection (1)(m).

R156-17b-602. Operating Standards - Pharmacy Intern.

Under Section R156-17b-606, [~~A~~]a pharmacy intern may provide services including the practice of pharmacy under the supervision of a pharmacist preceptor[~~ in accordance with Section R156-17b-606~~].

R156-17b-603. Operating Standards - Consulting Pharmacist, Pharmacist-In-Charge, Remote Dispensing Pharmacist-in-Charge, or Dispensing-Medical-Practitioner-In-Charge.

Under Subsection 58-17b-601(1) and Section 58-17b-612, the duties of the consulting pharmacist, PIC, RDPIC, and DMPIC are established in this section.

(1) The consulting pharmacist, PIC, RDPIC, or DMPIC shall:[~~ have the responsibility to~~]

(a) oversee the operation of the pharmacy [~~in conformance with laws and rules pertinent to the practice of pharmacy~~]and the distribution of drugs, durable medical equipment, and medical supplies;[~~. The consulting pharmacist, PIC, RDPIC, or DMPIC shall~~]

(b) be personally in full and actual charge of the pharmacy[~~.~~];

(c) ensure that a pharmacist, pharmacy intern, DMP, or DMP designee properly dispenses drugs or devices, including:

(i) packaging, preparation, compounding, and labeling; and

(ii) ensuring that drugs are dispensed safely and accurately as prescribed;

(d) ensure pharmacy personnel deliver drugs to the patient or the patient's agent safely and accurately as prescribed;

(e) ensure that a pharmacist, pharmacy intern, or DMP communicates to the patient or the patient's agent, at their request, information concerning any prescription drugs dispensed to the patient by the pharmacist, pharmacy intern, or DMP;

(f) ensure that a reasonable effort is made to obtain, record, and maintain patient medication records;

(g) ensure pharmacy personnel are educated and trained;

(h) establish policies for procurement of prescription drugs and devices and other products dispensed from the pharmacy;

(i) oversee the disposal and distribution of drugs from the pharmacy;

(j) oversee any bulk compounding of drugs;
(k) ensure appropriate storage of materials, including drugs, chemicals, and biologicals;
(l) maintain records of transactions of the pharmacy necessary to maintain accurate control over and accountability for pharmaceutical materials;
(m) establish and maintain effective controls against theft or diversion of prescription drugs and records for the prescription drugs;
(n) if records are kept on a data processing system, maintain records stored in that system in compliance with pharmacy requirements;
(o) ensure the pharmacy operates legally, including meeting inspection requirements;
(p) if permitted to use an automated pharmacy system for dispensing purposes under Section R156-17b-620:
(i) ensure that the system is in good working order and accurately dispenses the correct strength, dosage form, and quantity of the drug prescribed while maintaining appropriate recordkeeping and security safeguards; and
(ii) implement an ongoing quality assurance program that monitors performance of the automated pharmacy system, which is evidenced by written policies and procedures developed for pharmaceutical care;
(q) ensure that relevant information is submitted to the Controlled Substance Database in the appropriate format and in a timely manner;
(r) ensure pharmacy personnel have the appropriate licensure;
(s) ensure the pharmacy operates with a ratio of pharmacist or DMP to other pharmacy personnel sufficient to prevent circumstances that result in, or would reasonably be expected to result in, an unreasonable risk of harm to public health, safety, and welfare;
(t) ensure the consulting pharmacist, PIC, RDPIC, or DMPIC assigned to the pharmacy is recorded with the Division on a form provided by the Division, and that the Division is notified of a change in consulting pharmacist, PIC, RDPIC, or DMPIC within 30 days of the change;
(u) under Subsection 58-17b-103(1), conduct a pharmacy self-audit on a form provided by the Division according to the following timeframes:
(i) within 30 days of a change of consulting pharmacist, PIC, DMPIC, or RDPIC;
(ii) within 30 days of the opening of a new facility;
(iii) within 90 days before the end of each renewal cycle; and
(iv) maintain each pharmacy self-audit form for two years from the date of the self-audit.

(2)(a) [~~In accordance with~~]Under Subsections 58-17b-103(1) and 58-17b-601(1), [~~a unique email address shall be established by~~]the consulting pharmacist, PIC, RDPIC, DMPIC, or responsible [~~party~~]individual for the pharmacy shall establish a unique email address to be used for self-audits or pharmacy alerts initiated by the Division.

(b) The consulting pharmacist, PIC, RDPIC, DMPIC, or responsible [~~party~~]individual shall:
(i) notify the Division of the pharmacy's email address in the initial application for licensure;
(ii) use a single email address; and
(iii) notify the Division of a change in the email address within seven calendar days of the change.

[~~(3) The duties of the consulting pharmacist, PIC, RDPIC, or DMPIC shall include:~~
~~(a) ensuring that a pharmacist, pharmacy intern, DMP, or DMP designee dispenses drugs or devices, including:~~
~~(i) packaging, preparation, compounding and labeling; and~~
~~(ii) ensuring that drugs are dispensed safely and accurately as prescribed;~~
~~(b) ensuring that pharmacy personnel deliver drugs to the patient or the patient's agent, including ensuring that drugs are delivered safely and accurately as prescribed;~~
~~(c) ensuring that a pharmacist, pharmacy intern, or DMP communicates to the patient or the patient's agent, at their request, information concerning any prescription drugs dispensed to the patient by the pharmacist, pharmacy intern, or DMP;~~
~~(d) ensuring that a reasonable effort is made to obtain, record and maintain patient medication records;~~
~~(e) education and training of pharmacy personnel;~~
~~(f) establishment of policies for procurement of prescription drugs and devices and other products dispensed from the pharmacy;~~
~~(g) disposal and distribution of drugs from the pharmacy;~~
~~(h) bulk compounding of drugs;~~
~~(i) storage of materials, including drugs, chemicals and biologicals;~~
~~(j) maintenance of records of transactions of the pharmacy necessary to maintain accurate control over and accountability for pharmaceutical materials required by state and federal laws and regulations;~~
~~(k) establishment and maintenance of effective controls against theft or diversion of prescription drugs and records for the prescription drugs;~~
~~(l) if records are kept on a data processing system, the maintenance of records stored in that system in compliance with pharmacy requirements;~~
~~(m) legal operation of the pharmacy including meeting inspection and other requirements of state and federal laws, rules and regulations governing the practice of pharmacy;~~
~~(n) implementation of an ongoing quality assurance program that monitors performance of the automated pharmacy system, which is evidenced by written policies and procedures developed for pharmaceutical care;~~
~~(o) if permitted to use an automated pharmacy system for dispensing purposes:~~
~~(i) ensuring that the system is in good working order and accurately dispenses the correct strength, dosage form and quantity of the drug prescribed while maintaining appropriate record keeping and security safeguards; and~~
~~(ii) implementation of an ongoing quality assurance program that monitors performance of the automated pharmacy system, which is evidenced by written policies and procedures developed for pharmaceutical care;~~

~~(p) ensuring that relevant information is submitted to the Controlled Substance Database in the appropriate format and in a timely manner;~~

~~(q) ensuring that pharmacy personnel have the appropriate licensure;~~

~~(r) ensuring that no pharmacy operates with a ratio of pharmacist or DMP to other pharmacy personnel in circumstances that result in, or reasonably would be expected to result in, an unreasonable risk of harm to public health, safety, and welfare;~~

~~(s) ensuring that the consulting pharmacist, PIC, RDPIC, or DMPIC assigned to the pharmacy is recorded with the Division on a form provided by the Division, and that the Division is notified of a change in consulting pharmacist, PIC, RDPIC, or DMPIC within 30 days of the change;~~

~~(t) ensuring, with regard to the unique email address used for self-audits and pharmacy alerts, that the pharmacy:~~

~~(i) uses a single email address; and~~

~~(ii) notifies the Division, on the form prescribed, of a change in the email address within seven calendar days of the change;~~

~~(u) under Subsection 58-17b-103(1), conducting a pharmacy self-audit on a form provided by the Division, in accordance with the following timeframes:~~

~~(i) within 30 days of a change of consulting pharmacist, PIC, DMPIC or RDPIC;~~

~~(ii) within 30 days of the opening of a new facility; and~~

~~(iii) at least 90 days before the end of each renewal cycle; and~~

~~(iv) maintaining each pharmacy self-audit form for two years from the date of the self-audit.~~]

R156-17b-604. Operating Standards - Closing a Pharmacy.

Under Subsections 58-17b-601(1) and 58-17b-614(1)(a)(i), the requirements for closing a pharmacy are established in this section.

(1) The consulting pharmacist, DR, [~~R~~]responsible [~~P~~]party, PIC, RDPIC, or DMPIC of the registered pharmacy shall:

(a) comply with 21 CFR 1301.52, [~~(2021) and~~]21 CFR 1305.18, and 21 CFR 1305.19[~~(2021).~~]; and

(b) submit a written report to the Division in accordance with Subsection 58-17b-614(1).

(2) If the pharmacy dispenses prescription drug orders, the pharmacy shall post a closing notice sign in a conspicuous place in the front of the prescription department and at public entrance doors to the pharmacy. [-]The closing notice shall contain the following information:

(a) the date of closing; and

(b) the name, address, and telephone number of the pharmacy acquiring the prescription drug orders, including refill information and patient medication records of the pharmacy.

(3) On the date of closing, the consulting pharmacist, PIC, RDPIC, or DMPIC shall remove prescription drugs from the pharmacy by [~~one or a combination~~]any of the following methods:

(a) return prescription drugs to the manufacturer or supplier for credit or disposal; or

(b) transfer, sell, or give away prescription drugs to a person who is legally entitled to possess drugs, such as a hospital or another pharmacy.

(4) If the pharmacy dispenses prescription drug orders, the consulting pharmacist, PIC, RDPIC, or DMPIC shall:

(a) transfer the prescription drug order files, including refill information and patient medication records, to a licensed pharmacy within a reasonable distance of the closing pharmacy; and

(b) move signs or notify the landlord or owner of the property that it is unlawful to use the word "pharmacy", or any other word or combination of words of the same or similar meaning, or any graphic representation that would mislead or tend to mislead the public that a pharmacy is located at this address, unless the use is permitted under the exception defined in Subsection R156-17b-102(73).

(5) Within ten days of the closing of the pharmacy, the pharmacy owner, consulting pharmacist, DR, [~~R~~]responsible [~~Party~~]individual, PIC, RDPIC, or DMPIC shall forward to the Division a surrender notice, on a form provided by the Division, [~~of the closing~~]that includes the following information:

(a) the actual date of closing;

(b) a surrender of the license issued to the pharmacy;

(c) a statement attesting:

(i) that an inventory as specified in [~~Subsection~~]Section R156-17b-605[~~(4)~~] has been conducted; and

(ii) the [~~manner in which~~]method used to transfer or dispose of the legend drugs and controlled substances possessed by the pharmacy[~~were transferred or disposed~~]; and

(d) if the pharmacy dispenses prescription drug orders, the name and address of the pharmacy to which the prescription drug orders, including refill information and patient medication records, were transferred.

(6) [~~If the pharmacy is closed suddenly due to fire, destruction, natural disaster, death, property seizure, eviction, bankruptcy or other emergency circumstances and the consulting pharmacist, DR, Responsible Party, PIC, RDPIC, or DMPIC cannot provide notification 14 days prior to the closing, the consulting pharmacist, PIC, RDPIC, or DMPIC shall comply with Subsection (1) as far in advance of the closing as allowed by the circumstances.~~]If the consulting pharmacist, DR, responsible individual, PIC, RDPIC, or DMPIC cannot provide notification at least ten business days before the closing due to an emergency circumstance, such as fire, destruction, natural disaster, death, property seizure, eviction, or bankruptcy, they shall comply with Subsection (1) as far in advance of the closing as allowed by the circumstances.

(7) If the consulting pharmacist, DR, [~~R~~]responsible [~~Party~~]individual, PIC, RDPIC, or DMPIC is not available to comply with the requirements of this section, the owner or legal representative shall be responsible for compliance with this section.

(8) Notwithstanding the requirements of this section, a DMP clinic pharmacy that closes but employs licensed practitioners who will continue providing services other than dispensing may continue to use prescription drugs in their practice as authorized under their respective licensing act.

R156-17b-605. Operating Standards - Inventory Requirements.

Under Subsection 58-17b-601(1), the requirements for inventory of a pharmacy are established in this section.

(1) Authorized personnel shall remove out-of-date legend drugs and controlled substances from the inventory at regular intervals and [~~in correlation~~]according to the beyond use date imprinted on the label.

(2) General requirements for inventory of a pharmacy [~~shall~~]include the following:

(a) the consulting pharmacist, PIC, RDPIC, or DMPIC shall be responsible for taking required inventories, but may delegate the performance of the inventory to another person;

(b) the inventory records shall be:

(i) maintained for a period of five years;[~~and be~~]

(ii) readily available for inspection;

[~~(c) the inventory records shall be~~](iii) filed separately from all other records; and

[~~(d) the inventory records shall be~~](iv) in a written, typewritten, or printed form and include each stock of controlled substances on hand on the date of the inventory, including any [~~that are~~]out-of-date drugs and drugs in automated pharmacy systems;

([~~e~~]c) an inventory taken by use of a verbal recording device shall be promptly transcribed;

([~~f~~]d) the inventory may be taken either at[~~s~~] the opening of the business or the close of business on the inventory date, except that a pharmacy operating 24 hours per day shall record the time the inventory was taken;

([~~g~~]e) the [~~person~~]individual taking the inventory and the consulting pharmacist, PIC, RDPIC, or DMPIC shall state the time the inventory was taken and shall sign and date the inventory with the date the inventory was taken;

([~~h~~]f) the signature of the consulting pharmacist, PIC, RDPIC, or DMPIC and the date of the inventory shall be documented within [~~72 hours or~~]three [~~working~~]business days of the completed initial, annual, change of ownership, [~~and~~]or closing inventory;

([~~i~~]g) the [~~person~~]individual taking the inventory shall make an exact count or measure of Schedule I or II controlled substances[~~listed in Schedule I or II~~];

([~~j~~]h) the [~~person~~]individual taking the inventory shall make an estimated count or measure of Schedule III, IV, or V controlled substances, but if the container holds more than 1,000 tablets or capsules, an exact count of the contents shall be made;

([~~k~~]i) the inventory of Schedule I and II controlled substances shall be listed separately from the inventory of Schedule III, IV, and V controlled substances; and

([~~l~~]j) if the pharmacy maintains a perpetual inventory of any of the drugs required to be inventoried, the perpetual inventory shall be reconciled on the date of the inventory.

(3) Requirements for taking the initial controlled substances inventory shall include the following:

(a) pharmacies having stock of controlled substances shall take an inventory, including out-of-date drugs and drugs in automated pharmacy systems, on the opening day of business;

(b) ~~(~~(i) if a pharmacy commences business with no Schedule I or II controlled substances, the pharmacy shall record this fact as the initial inventory; and

(ii) if a pharmacy commences business with no Schedule III, IV, and V controlled substances, the pharmacy shall document Schedule I and II controlled substance inventory separately from an inventory reporting no Schedule III, IV, and V controlled substances;

(c) the initial inventory shall serve as the pharmacy's inventory until the next completed inventory as specified in Subsection (4) of this section; and

(d) when combining two pharmacies, each pharmacy shall:

(i) conduct a separate closing pharmacy inventory of controlled substances on the date of closure; and

(ii) conduct a combined opening inventory of controlled substances for the new pharmacy before opening.

(4) [~~Requirement for~~]Each annual controlled substances inventory:

(a) shall be taken within 12 months [~~following the inventory~~]after the date of [~~each year~~]the previous initial or annual inventory;[~~and~~]

(b) may be taken within four days of the specified inventory date; and

(c) shall include stocks including out-of-date drugs and drugs in automated pharmacy systems.

(5) Requirements for a qualifying change of ownership shall include the following:

(a) the pharmaceutical facility shall take an inventory of legend drugs and controlled substances including out-of-date drugs and drugs in automated pharmacy systems on the date of the qualifying change of ownership;

(b) such inventory shall constitute the closing inventory for the seller and the initial inventory for the buyer; and

(c) any transfer of Schedule I and II controlled substances shall [~~require the~~]use [~~of official~~]DEA [~~order form~~]Form 222 or an electronic order placed under 21 CFR Part 1305, Subpart C.

(6) A pharmacy shall maintain a perpetual inventory of Schedule II controlled substances that shall be reconciled according to facility policy.

R156-17b-606. Operating Standards - Pharmacist Preceptor.

(1) Under Subsections 58-17b-601(1) and 58-17b-102(50), a pharmacist preceptor shall:

(a) hold an active and good standing pharmacist license to practice in the jurisdiction where the pharmacist is acting as a preceptor; and

(b) have engaged in active practice as a licensed pharmacist for at least one year immediately preceding the internship, in any jurisdiction.

(2) A pharmacist preceptor shall:

(a) ensure or provide as necessary the direct, on-site supervision required under the Vaccine Administration Protocol, and provide general supervision for all other pharmacy intern activities; and

(b) ensure the totality of the internship circumstances are safe and appropriate according to generally recognized industry standards of practice.

(3) A pharmacist preceptor may supervise up to:

(a) two pharmacy interns during a working shift; and

(b) five pharmacy interns at public health outreach programs such as informational health fairs, chronic disease state screening and education programs, or immunization clinics.

(4) A pharmacist preceptor shall document the number of internship hours completed by the pharmacy intern, and evaluate the quality of the pharmacy intern's performance.

(5) A pharmacist preceptor is responsible for the pharmacy intern's actions related to the practice of pharmacy while the pharmacy intern is practicing under the preceptor's supervision.

R156-17b-607. Operating Standards - Supportive Personnel.

(1) Under Subsection 58-17b-102(72)(a), supportive personnel may assist in tasks not related to drug preparation or processing, including:

(a) stock ordering and restocking;

(b) cashiering;

(c) billing;

(d) filing;

(e) receiving a written prescription and delivering it to the pharmacist, pharmacy intern, pharmacy technician, pharmacy technician trainee, DMP, or DMP designee;

(f) housekeeping; and

(g) delivering a pre-filled prescription to a patient.

(2) Supportive personnel may not enter information into a patient prescription profile or accept verbal refill information.

(3) Under Subsection 58-17b-102(72)(b), supportive personnel shall be supervised by a licensed pharmacist or DMP who is:

(a) present in the area where the individual being supervised is performing services; and

(b) immediately available to assist the individual being supervised in the services being performed, except for the delivery of pre-filled prescriptions under Subsection (1)(g).

(4) Under Subsection 58-17b-601(1), a pharmacist, pharmacy intern, pharmacy technician, pharmacy technician trainee, DMP, or DMP designee whose license has been revoked or is suspended may not provide support services in a pharmacy.

R156-17b-608. Operating Standards - Delivery Via United States Postal Service, Licensed Common Carrier, or Supportive Personnel.

(1) Under Subsection 58-17b-601(1), a[~~A~~] pharmacy that employs the United States Postal Service, common carrier, or supportive personnel to deliver a filled prescription to a patient shall:

(a) use adequate storage or shipping containers and shipping processes to ensure drug stability and potency and appropriate storage temperatures throughout delivery with packaging material and devices recommended by the manufacturer or [~~the United States Pharmacopeia Chapter 1079~~]USP-NF <1079>, effective February 1, 2021, and incorporated by reference;

(b) use shipping containers sealed in a manner to detect evidence of opening or tampering;

(c) have policies and procedures to ensure accountability, safe delivery, and compliance with temperature requirements, including when drugs do not arrive on time or there is evidence that the integrity of a drug was compromised and providing for the replacement of those drugs;

(d) provide for an electronic, telephonic, or written communication mechanism to offer counseling to the patient in accordance with Sections 58-17b-613 and R156-17b-610; and

(e) provide information to the patient indicating what the patient should do if the integrity of the packaging or drug was compromised during shipment.

(2) Under Subsection 58-17b-503(2)(c)(iii), to determine that a drug has not been adversely affected by the drug's attempted delivery and return, before the drug is redistributed the pharmacist at the pharmacy shall:

(a) verify that the drug was returned to the original pharmacy within 14 days of the shipped date;

(b) determine in the pharmacist's clinical judgment that the drug's integrity is intact and the security of the drug packaging has not been compromised; and

(c) if the drug is a controlled substance, correct the report to the Controlled Substance Database.

R156-17b-609. Operating Standards - Medication Profile System.

[~~In accordance with~~]Under Subsections 58-17b-601(1) and 58-17b-604(1), the following operating standards shall apply with respect to medication profile systems:

[~~(1) Patient profiles, once established, shall be maintained by a pharmacy dispensing to patients on a recurring basis for a minimum of one year from the date of the most recent prescription filled or refilled; except that a hospital pharmacy may delete the patient profile for an inpatient upon discharge if a record of prescriptions is maintained as a part of the hospital record.~~

~~(2) Information to be included in the profile shall be determined by a responsible pharmacist or DMP at the pharmaceutical facility but shall include as a minimum:~~

~~(a) full name of the patient, address, telephone number, date of birth or age and gender;~~

~~(b) patient history where significant, including known allergies and drug reactions, and a list of prescription drugs obtained by the patient at the pharmacy including:~~
~~(i) name of prescription drug;~~
~~(ii) strength of prescription drug;~~
~~(iii) quantity dispensed;~~
~~(iv) date of filling or refilling;~~
~~(v) charge for the prescription drug as dispensed to the patient; and~~
~~(c) any additional comments relevant to the patient's drug use.~~]

(1) A pharmacy dispensing to patients on a recurring basis shall maintain patient profiles for at least one year after the most recent prescription fill or refill.

(2) A hospital pharmacy may delete a patient profile for an inpatient upon discharge if a record of prescriptions is maintained as part of the hospital record.

(3) A responsible pharmacist or DMP at the pharmacy shall determine the information included in a patient profile, but the profile shall include at least the following patient information:

(a) first and last name;
(b) address;
(c) telephone number;
(d) date of birth or age;
(e) gender;
(f) patient history where significant, including known allergies and drug reactions;
(g) a list of any prescription drugs obtained by the patient at the pharmacy, including:
(i) name of the prescription drug;
(ii) strength of the prescription drug;
(iii) quantity dispensed;
(iv) date of filling or refilling; and
(v) charge for the prescription drug as dispensed to the patient; and
(h) any additional comments relevant to the patient's drug use.

([~~3~~]4) Patient medication profile information shall be recorded by a pharmacist, pharmacy intern, pharmacy technician, pharmacy technician trainee, or DMP designee.

R156-17b-610. Operating Standards - Patient Counseling.

Under Subsection 58-17b-601(1) and Section 58-17b-613, this section establishes guidelines for providing patient counseling.

(1)(a) Counseling shall be offered orally and in person, unless the patient or patient's agent is not at the pharmacy or a specific communication barrier prohibits oral communication.

(b) Counseling may be provided through a telepharmacy system.

(2) A pharmacy facility shall verbally offer the patient or patient's agent counseling as described in Subsection (1)[~~,~~] but is not required to provide counseling to a patient or patient's agent who refuses counseling.

(3) Based upon the professional judgment of the pharmacist, pharmacy intern, or DMP, patient counseling may include the following[~~elements~~]:

(a) the name and description of the prescription drug;
(b) the dosage form, dose, route of administration and duration of drug therapy;
(c) the intended use of the drug, when known, and expected action;
(d) any special directions and precautions for preparation, administration and use by the patient;
(e) any common severe side or adverse effects or interactions and therapeutic contraindications that may be encountered, including their avoidance, and the action required if they occur;
(f) the techniques for self-monitoring drug therapy;
(g) the proper storage;
(h) the prescription refill information;
(i) any action to be taken in the event of a missed dose;
(j) any pharmacist comments relevant to the individual's drug therapy, including any other information specific to the patient or drug; and
(k) [~~the date after which the prescription should not be taken or used, or~~]the beyond use date.

(4)[~~(a)~~] The offer to counsel shall be documented and such documentation shall be maintained for five years and shall be made available for inspection within ten business days after the Division requests it.

[~~(b) Any documentation shall be maintained for five years, and be available for inspection by the Division within seven to ten business days of the Division's request.~~]

(5) Only a pharmacist, pharmacy intern, or DMP may orally provide counseling to a patient or patient's agent and answer questions concerning prescription drugs.

(6) If a prescription drug order is delivered to the patient, [~~or~~]the patient's agent, or other designated location:

(a) the pharmacy shall provide for an electronic, telephonic, or written communication mechanism to deliver the counseling information in Subsection (3)[~~shall be delivered with the dispensed prescription in writing~~];

(b) if the information under Subsection (6)(a) is provided in writing or electronically, it shall be in a form similar to USP-NF patient information monographs or equivalent information; and

([~~b~~]c) [~~if prescriptions are routinely delivered outside the area covered by the pharmacy's local telephone service,~~]in addition to providing the telephone number required by Subsection 58-17b-613(2), the pharmacist shall place on the prescription container or on a separate sheet delivered with the prescription container, [~~the telephone number of the pharmacy and~~]the statement "[~~Written i~~]Information about this prescription has been provided for you. Please read this information before you take this medication. If you have questions concerning this prescription, a pharmacist is available during normal business hours to answer these questions."[~~; and~~

~~(c) the written information under Subsection (6)(b) shall be in the form of patient information leaflets similar to USP-NF patient information monographs or equivalent information.~~]

(7) Patient counseling is not required for patients of a hospital or institution where:

(a) other licensed health care professionals are authorized to administer the patient's drugs[~~,~~]; or

(b) any unused portion of facility-provided medication is offered to the patient in accordance with Section 26B-4-517.

(8) A pharmacist or pharmacy intern who dispenses a self-administered hormonal contraceptive shall:

(a) obtain a completed Utah Hormonal Contraceptive Self-Screening Risk Assessment Questionnaire, which can be found on the Division's website at https://[~~dopl~~]commerce.utah.gov/dopl/pharmacy/resources/; and

(b) provide any other written information and counseling as described in Section 26B-4-506.

[~~R156-17b-610.5. Dispensing in Emergency Department - Patient's Immediate Need.~~

~~In accordance with Section 58-17b-610.5, the guidelines for medical practitioners to dispense drugs to a patient in a hospital emergency department are established in this section.~~

~~(1) To meet a patient's immediate needs, the prescribing practitioner may provide up to a three-day emergency supply, which is properly labeled according to Subsection R156-17b-610.5(3).~~

~~(2) Notwithstanding Subsection R156-17b-610.5(1), the following may be provided:~~

~~(a) a seven-day supply of sexually-transmitted infections (STI) prophylaxis;~~

~~(b) a Naloxone kit.~~

~~(3) Labeling of an emergency supply shall at a minimum include:~~

~~(a) prescribing practitioner's name, facility name and telephone number;~~

~~(b) patient's name;~~

~~(c) name of medication and strength;~~

~~(d) date given;~~

~~(e) instructions for use; and~~

~~(f) beyond use date.~~

~~(4) Records of controlled substances dispensed by the prescribing practitioner shall be provided to the appropriate pharmacy so that the applicable prescription data can be reported to the Utah Controlled Substance Database.~~]

R156-17b-610.6. Hospital Pharmacy Dispensing Prescription Drugs to Patients at Discharge to Meet a Patient's Immediate Needs.

[~~In accordance with~~]Under Section 58-17b-610.6, the guidelines for a hospital pharmacy to dispense to an individual who is no longer a patient, on the day discharged from the hospital setting, are established in this section.

(1) [~~T~~]In addition to the requirements of Subsection 58-17b-610.6(2), the prescription drug shall be dispensed:

(a) during regular inpatient hospital pharmacy hours, by a pharmacist; or

(b) outside of regular inpatient hospital pharmacy hours, by the prescribing practitioner using an appropriately labeled pre-packaged drug.

(2) Labeling for a prescription under Section 58-17b-610.6 shall at a minimum include:

(a) prescribing practitioner's name, facility name, and telephone number;

(b) patient's name;

(c) name and strength of medication;

(d) date given;

(e) instructions for use; and

(f) beyond use date.

(3) To meet a patient's immediate needs, the prescribing practitioner may provide up to a 72-hour emergency supply, which is properly labeled according to Rule R156-17b and Title 58, Chapter 17b, Pharmacy Practice Act.

([~~3~~]4) Applicable data of controlled substances dispensed shall be reported to the Utah Controlled Substance Database.

R156-17b-610.7. Partial Filling of a Schedule II Controlled Substance Prescription.

[~~In accordance with~~]Under Subsections 58-17b-610.7(3) and (5)(a), a pharmacy that partially fills a prescription for a Schedule II controlled substance shall specify by prescription number for each partial fill the:

([~~a~~]1) date;

([~~b~~]2) quantity supplied; and

([~~c~~]3) quantity remaining of the prescription partially filled.

R156-17b-611. Operating Standards - Drug Therapy Management.

(1) [~~In accordance with~~]Under Subsections 58-17b-102(17) and 58-17b-601(1), decisions involving drug therapy management shall be made in the best interest of the patient. Drug therapy management may include:

(a) implementing, modifying and managing drug therapy according to the terms of the Collaborative Pharmacy Practice Agreement;

(b) collecting and reviewing patient histories;

(c) obtaining and checking vital signs, including pulse, temperature, blood pressure and respiration;

(d) ordering and evaluating the results of laboratory tests directly applicable to the drug therapy, when performed [~~in accordance with~~]according to approved protocols applicable to the practice setting; and

(e) [~~such~~]other patient care services [~~as may be~~]allowed by rule.

(2) [~~For the purpose of promoting therapeutic appropriateness, a~~]A pharmacist engaging in drug therapy management shall, at the time of dispensing a prescription[~~,~~] or a prescription drug order, review the patient's medication record[~~. Such review shall at a minimum~~] and identify any clinically significant conditions, situations or items, such as:

(a) inappropriate drug utilization;

(b) therapeutic duplication;

(c) drug-disease contraindications;

(d) drug-drug interactions;

(e) incorrect drug dosage or duration of drug treatment;

(f) drug-allergy interactions; and

(g) clinical abuse or misuse.

(3) Upon identifying any clinically significant conditions, situations or items listed in Subsection (2)[~~ above~~], the pharmacist shall take appropriate steps to avoid or resolve the problem including consultation with the prescribing practitioner.

R156-17b-612. Operating Standards - Prescriptions.

[~~In accordance with~~]Under Subsection 58-17b-601(1), the following shall apply to prescriptions:

(1) Prescription orders for controlled substances including prescription transfers shall be handled in accordance with 21 CFR 1306.25 [~~(2021)~~]and 21 CFR 1306.08.

(2) A prescription issued by an authorized licensed practitioner, if verbally communicated by an agent of that practitioner upon that practitioner's specific instruction and authorization, may be accepted by a pharmacist, pharmacy intern, or DMP.

(3) A prescription issued by a licensed prescribing practitioner, if electronically communicated by an agent of that practitioner, upon that practitioner's specific instruction and authorization, may be accepted by a pharmacist, pharmacy intern, pharmacy technician, pharmacy technician trainee, DMP, or DMP designee.

(4) [~~In accordance with~~]Under Sections 58-17b-609 and 58-17b-611, prescription files, including refill information, shall be maintained for a minimum of five years and shall be immediately retrievable in written or electronic format.

(5) [~~In accordance with~~]Under Subsection 58-17b-601(1) and Section 58-17b-604, prescriptions for legend drugs [~~having~~]that have a remaining authorization for refill may be transferred from the pharmacy holding the prescription to another pharmacy upon the authorization of the patient to whom the prescription was issued, including electronic transfer under Subsection R156-17b-613(9).[~~by the pharmacist, pharmacy intern, pharmacy technician, at the discretion of the pharmacist on duty, or DMP at the pharmacy holding the prescription to a pharmacist, pharmacy intern, pharmacy technician, or DMP at another pharmacy upon the authorization of the patient to whom the prescription was issued or electronically as authorized under Subsection R156-17b-613(9).~~]

(6)(a) A prescription described in Subsection (5) may be transferred only by an authorized transferor to an authorized transferee as defined in Subsections R156-17b-102(8) and (9)

(b) Notwithstanding Subsection (6)(a), only a pharmacist may transfer or receive a prescription for a controlled substance in accordance with Subsection (1).

(7)(a) The [~~transferring pharmacist, pharmacy intern, or DMP~~]authorized transferor and [~~receiving pharmacist, pharmacy intern, or DMP~~]the authorized transferee shall:

(i) act diligently to ensure that the total number of authorized refills is not exceeded[~~.~~];[~~ The following additional terms apply to such a transfer:~~]

([~~a~~]ii) ensure the transfer [~~shall be~~]is communicated directly between [~~pharmacists, pharmacy interns, pharmacy technicians or DMPs~~]the authorized transferor and the authorized transferee or as authorized under Subsection R156-17b-613(9);

([~~b~~]iii) maintain both the original and the transferred prescription drug orders [~~shall be maintained~~]for [~~a period of five~~]years from the date of the last refill; and

(iv) use a data processing system with a mechanism to prohibit the transfer or refilling of legend drugs or controlled substance prescription drug orders that have been previously transferred.

([~~c~~]b) [~~t~~]The [~~pharmacist, pharmacy intern, or DMP transferring the prescription drug order~~]authorized transferor shall void the prescription electronically or write "void" or "transfer" on the face of the invalidated prescription[~~ manually~~];

([~~d~~]c) [~~t~~]The [~~pharmacist, pharmacy intern, or DMP receiving the transferred prescription drug order~~]authorized transferee shall:

(i) [~~indicate~~]state on the prescription record [~~that~~]whether the prescription was transferred electronically or manually; and

(ii) record on the transferred prescription drug order the following information:

(A) original date of issuance and date of dispensing or receipt, if different from date of issuance;

(B) original prescription number and the number of refills authorized on the original prescription drug order;

(C) number of valid refills remaining and the date of last refill, if applicable;

(D) [~~the~~]name and address of the pharmacy and the name of the [~~pharmacist, pharmacy intern, pharmacy technician, or DMP to whom such prescription is transferred~~]authorized transferee who received the prescription; and

(E) [~~the~~]name of the [~~pharmacist, pharmacy intern, or DMP transferring~~]authorized transferor who transferred the prescription[~~, drug order information~~];

[~~(e) the data processing system shall have a mechanism to prohibit the transfer or refilling of legend drugs or controlled substance prescription drug orders that have been previously transferred; and~~]

([~~f~~]d) [~~a pharmacist, pharmacy intern, pharmacy technician, or DMP~~]An authorized transferor may not refuse to transfer original prescription information to [~~another pharmacist, pharmacy intern, pharmacy technician, or DMP~~]an authorized transferee who is acting on behalf of a patient[~~, and who is making a request for this information as specified in Subsection (12) of this section~~].

([~~6~~]8) Prescriptions for terminal patients in licensed hospices, home health agencies or nursing homes may be partially filled if the patient has a medical diagnosis documenting a terminal illness and may not need the full prescription amount.

([~~7~~]9) Refills may be dispensed only in accordance with the prescriber's authorization as indicated on the original prescription drug order.

([~~8~~]10) [~~If there are no refill instructions on the original prescription drug order, or if refills authorized on the original prescription drug order have been dispensed, authorization from the prescribing practitioner shall be obtained prior to dispensing any refills.~~]Additional authorization from the prescribing practitioner shall be obtained before dispensing any refills if:

(a) there are no refill instructions on the original prescription drug order; or

(b) refills authorized on the original prescription drug order have been dispensed.

([~~9~~]11) [~~Refills of prescription drug orders for legend drugs may not be refilled after one year from the date of issuance of the original prescription drug order without obtaining authorization from the prescribing practitioner prior to dispensing any additional quantities of the drug.~~]A prescription drug order for a legend drug may not be refilled more than two years after the date the original prescription drug order was issued without obtaining authorization from the prescribing practitioner.

([~~10~~]12) Refills of prescription drug orders for controlled substances shall be done in accordance with Subsection 58-37-[~~6(7)(f)~~]304(6).

[~~(11) A pharmacist or DMP may exercise professional judgment in refilling a prescription drug order for a drug, other than a Schedule II controlled substance, without the authorization of the prescribing practitioner, if:~~

~~(a) the quantity of prescription drug dispensed does not exceed a 72-hour supply, unless the packaging is in a great quantity;~~

~~(b) failure to refill the prescription might result in an interruption of a therapeutic regimen or create patient suffering;~~

~~(c) either:~~

~~(i) a natural or manmade disaster has occurred that prohibits the pharmacist or DMP from being able to contact the practitioner; or~~

~~(ii) the pharmacist or DMP is unable to contact the practitioner after a reasonable effort, with the effort documented and the documentation available to the Division upon request;~~

~~(d) if the prescription was originally filled at another pharmacy:~~

~~(i) the patient has the prescription container label, receipt, or other documentation from the other pharmacy that contains the essential information; and~~

~~(ii) after a reasonable effort, the pharmacist or DMP is unable to contact the other pharmacy to transfer the remaining prescription refills or there are no refills remaining on the prescription; and~~

~~(e) the pharmacist or DMP:~~

~~(i) informs the patient or patient's agent at the time of dispensing that the refill is being provided without practitioner authorization, and that authorization is required for future refills;~~

~~(ii) informs the practitioner of the emergency refill at the earliest reasonable time;~~

~~(iii) maintains a record of the emergency refill containing the information required to be maintained on a prescription as specified in this subsection; and~~

~~(iv) affixes a label to the dispensing container as specified in Section 58-17b-602.~~]

(13) Under Subsection 58-17b-601(1) and Section 58-17b-608, a pharmacist or pharmacy intern may dispense an emergency refill of a prescription drug order without the authorization of the prescribing practitioner the following requirements are met:

(a) the drug is not a controlled substance;

(b) the pharmacist or pharmacy intern determines:

(i) the patient is currently using the prescribed drug;

(ii) the prescribing practitioner is not available promptly to authorize the refill;

(iii) the pharmacist or pharmacy intern, or another pharmacist or pharmacy intern at the same pharmacy, has not dispensed a refill for the prescription under this Subsection (13) or Section 58-17b-608;

(iv) refilling the prescription is in the interest of the patient's health;

(v) in the professional judgment of the pharmacist or pharmacy intern, the prescription should be refilled;

(vi) the quantity to be dispensed is no more than the amount necessary to address the emergency; and

(vii) the drug will be dispensed in accordance with the prescribing practitioner's instructions included with the prescription;

(c) if the prescription is on file at the pharmacy where the drug is dispensed, the pharmacist or pharmacy intern may dispense:

(i) not more than a three-day supply; or

(ii) if the prescription has expired within the past 30 days or no refills are remaining on the prescription, not more than the lesser of:

(A) a 30-day supply, dispensed in accordance with the prescribing practitioner's instructions included with the prescription; or

(B) the quantity last dispensed at the pharmacy pursuant to the prescription as either a fill or a refill;

(d) if the prescription is not on file at the pharmacy where the drug is dispensed, the pharmacist or pharmacy intern may dispense an emergency refill only if:

(i) the patient has the prescription container label, receipt, or other documentation from the other pharmacy containing the essential information; and

(ii) after a reasonable effort, the pharmacist or pharmacy intern cannot contact the other pharmacy to transfer the remaining prescriptions or there are no refills remaining on the prescription; and

(e) the pharmacist or pharmacy intern:

(i) inform the patient or patient's agent at the time of dispensing that the refill is being provided without practitioner authorization, and that authorization is required for future refills;

(ii) inform the prescribing practitioner of the emergency refill as soon as practicable;

(iii) maintain a record of the emergency refill containing the information required on a prescription under Subsection 58-17b-602(1);

(iv) affix a label to the dispensing container as specified in Subsection 58-17b-602(5); and

(v) affix a label to the dispensing container that states "exhausted prescription."

(14) For purposes of Subsection (13)(b)(ii), a prescribing practitioner is not available promptly if:

(a) a natural or manmade disaster has occurred that prohibits the pharmacist or pharmacy intern from being able to contact the practitioner; or

(b) the pharmacist or pharmacy intern cannot contact the practitioner after a reasonable effort, with the effort documented and the documentation available to the Division upon request.

([~~12~~]15) The address specified in Subsection 58-17b-602(1)(b) shall be a physical address, not a post office box.

([~~13~~]16) [~~In accordance with~~]Under Subsection 58-37-[~~6(7)(e)~~]304(5), a prescription may not be written, issued, filled, or dispensed for a Schedule I controlled substance unless:

(a) the [~~person~~]individual who writes the prescription is licensed [~~to prescribe Schedule I controlled substances~~]under Subsection 58-37-105(2); and

(b) the prescribed controlled substance is to be used in research.

[~~(14) A pharmacist or pharmacy intern may dispense an emergency refill prescription for a drug a patient is currently using and on file with the pharmacy, other than a controlled substance, without the prescribing practitioner's authorization if they are not available promptly, in accordance with Section 58-17b-608, for:~~

~~(a) a 30 day supply with the prescribing practitioners instructions; or~~

~~(b) the quantity last dispensed at the pharmacy pursuant to the prescription as either a fill or a refill.~~]

R156-17b-612a. Operating Standards - Prescription Devices.

(1) [~~In accordance with~~]Under Subsection[~~s~~] 58-17b-601(1) and Sections 58-17b-610.8 and 58-17b-627, the operating standards for prescription devices are established in this section.

(2) The prescribing practitioner identified on the prescription document under Subsection 58-17b-610.8(1) is the prescriber for the prescription device described in Subsection 58-17b-610.8([~~3~~]4).

(3) The pharmacist or pharmacy intern dispensing the prescription device in accordance with Subsection 58-17b-610.8(1)(b) shall determine the following:

(a) an appropriate dispense quantity;

(b) directions for device use; and

(c) refill.

(4) Each prescription device dispensed by a pharmacist or pharmacy intern shall be dispensed[~~:~~

~~(a) dispensed~~] in accordance with Subsections 58-17b-602(1)(a) through (e) and Section 58-17b-609[~~; and~~

~~(b) dispensed~~] from a Class A or Class B pharmacy.

(5)(a) Notice of the prescription device dispense shall be conveyed to the prescribing practitioner in writing, by electronic transmission, or by telephone within five business days following the prescription device dispense.

(b) The prescription device dispense notice shall include the following:

(i) pharmacy name;

(ii) pharmacy phone number;

(iii) patient name;

(iv) dispensed quantity;

(v) directions for use; and

(vi) refill.

R156-17b-612b. Operating Standards - Insulin Prescription and Diabetes Supplies.

(1) Under Subsection 58-17b-601(1) and Section 58-17b-608.2, the operating standards for dispensing an exhausted prescription for insulin are as follows:

(a) Under Subsection 58-17b-608.2(3), [~~a refill for~~]an exhausted prescription [~~in an amount up to a supply for 60 days~~]may be refilled no more than once, in an amount not to exceed a 60-day supply, dispensed in [~~for~~]the nearest available package size that does not exceed that amount.

(b) The pharmacist [~~who dispenses~~]dispensing a refill of an exhausted prescription of insulin shall obtain:

(i) the prescribing information for the insulin;

(ii) prescription directions; and

(iii) other documentation based on the pharmacist's clinical judgment.

(c) The pharmacist shall document the following on the exhausted prescription refill hard copy or in the medication profile system:

(i) the information described in Subsection (1)(b);

(ii) the method of the attempt [~~under Subsection 58-17b-608.2(5)(a)~~]to contact the patient's prescribing practitioner under Subsection 58-17b-608.2(5)(a); and

(iii) the method of the notification to the patient under Subsection 58-17b-608.2(5)(b) regarding the outcome of the attempt to contact the prescribing practitioner.

(d) An exhausted prescription refill label shall state "exhausted prescription."

(e) The pharmacist dispensing a refill of an exhausted prescription of insulin shall inform the prescribing practitioner of the amount and type of insulin dispensed within 30 days in accordance with Subsection 58-17b-608.2(6).

(2) Under Subsection 58-17b-608.2(7)(f), a pharmacist may dispense a therapeutic equivalent when filling a prescription for supplies for treating diabetes that are listed in the Utah Guidance for Diabetic Therapeutic Equivalents posted on the Division's website at https://[~~dopl~~]commerce.utah.gov/dopl/pharmacy/resources/.

R156-17b-612c. Operating Standards -- Therapeutically Similar Drug Products.

(1) Under Subsection 58-17b-605(9)(a), [~~T~~]the Division shall maintain the Therapeutically Similar Drug List posted [~~list of therapeutically similar drug products under Subsection 58-17b-605(9)(a)~~]on the Division's website at https://[~~dopl~~]commerce.utah.gov/dopl/pharmacy/resources/.

(2) [~~The Division may not add or remove a therapeutically similar drug product from the list without specific resolutions, passed by both the Board and the Medical Licensing Board, stating that they do not object to the addition or removal of the therapeutically similar drug.~~]The Division may not add a therapeutically similar drug product to the list if the addition is opposed by the Board or the Medical Licensing Board.

R156-17b-613. Operating Standards - Issuing Prescription Orders by Electronic Means.

[~~In accordance with~~]Under Subsections 58-17b-102(29), 58-17b-102(30), and 58-17b-602(1) and Rules R156-1 and R156-37, [~~and Subsections 58-17b-102(29), 58-17b-102(30), 58-17b-602(1),~~]prescription orders may be issued by electronic means of communication according to the following standards:

(1) Prescription orders for Schedule II [~~-~~]through V controlled substances received by electronic communication shall be handled according to 21 CFR [~~1304.06 (2021)~~]1306.08.

(2) Prescription orders for non-controlled substances received by electronic communication may be dispensed by a pharmacist, pharmacy intern, or DMP only if the following conditions are satisfied:

(a) Electronically transmitted prescription orders shall include the following:

(i) information that is required to be contained in a prescription order pursuant to Section 58-17b-602;

(ii) the time and date of the transmission, and if a facsimile transmission, the electronically encoded date, time, and fax number of the sender; and

(iii) the name of the pharmacy intended to receive the transmission.

(b) A prescription order shall be transmitted under the direct supervision of the prescribing practitioner or the prescribing practitioner's designated agent.

(c) The pharmacist or DMP shall exercise professional judgment regarding the accuracy and authenticity of the transmitted prescription.

(d) A practitioner or the practitioner's agent shall provide voice verification when requested by the pharmacist receiving a [~~medication~~]prescription order.

(e) The pharmacist, pharmacy intern, pharmacy technician at the discretion of the pharmacist on duty, or DMP shall:

(i) [~~assure~~]ensure that each electronically transferred prescription order is valid; and

(ii) [~~shall~~]authenticate a prescription order issued by a prescribing practitioner that has been transmitted to the dispensing pharmacy before filling it[~~,~~] when[~~ever~~] there is a question about the prescription order.

(f)[~~(i)~~] A practitioner may authorize an agent to electronically transmit a prescription if the agent's identifying information is on the transmission.

([~~ii~~]g) The practitioner's electronic signature, or other secure method of validation, shall be provided with the electronic prescription.

(3) [~~a~~]An electronically transmitted prescription order that meets the requirements of Subsection (2) shall be the original prescription.

[~~(4) This section does not apply to the use of electronic equipment to transmit prescription orders within inpatient medical facilities.~~

~~(5) An agreement between a prescribing practitioner and a pharmacy may not require that prescription orders be transmitted by electronic means from the prescribing practitioner only to that pharmacy.~~]

([~~6~~]4) The pharmacist or DMP shall retain a legible printed copy of an electronic prescription, or a record of an electronic prescription that is readily retrievable and printable, for a minimum of five years.[~~The printed copy shall be of non-fading legibility.~~]

(5) An agreement between a prescribing practitioner and a pharmacy may not require that prescription orders be transmitted by electronic means from the prescribing practitioner only to that pharmacy.

(6) An electronically transmitted prescription order shall be transmitted to the pharmacy of the patient's choice.

(7) Wholesalers, distributors, manufacturers, pharmacists, and pharmacies may not supply electronic equipment to a prescriber for transmitting prescription orders.

[~~(8) An electronically transmitted prescription order shall be transmitted to the pharmacy of the patient's choice.~~]

([~~9~~]8) Prescription orders electronically transmitted to the pharmacy by the patient may not be filled or dispensed.

([~~10~~]9)(a) A prescription order for a legend drug or controlled substance in Schedule III through V may be transferred by electronic transmission up to the maximum refills permitted [~~in accordance with 21 CFR 1306.22 (2021) or by the prescriber by electronic transmission~~]by law and authorized by the prescriber, if:

([~~a~~]i) the pharmacies share a real-time, online database;

([~~b~~]ii) the information required to be on the transferred prescription has the same information described in Subsection R156-17b-612([~~5~~]7)(c)(ii)[~~(a) through (f)~~]; and

([~~c~~]iii) [~~pharmacists, pharmacy interns, pharmacy technicians, or pharmacy technician trainees, DMPs, and DMP designees~~]an authorized transferor or an authorized transferee electronically accessing the same prescription drug order records may electronically transfer prescription information if the data processing system has a mechanism to send a message to the transferring pharmacy containing the following information:

([~~i~~]A) the fact that the prescription drug order was transferred;

([~~ii~~]B) the unique identification number of the prescription drug order transferred;

([~~iii~~]C) the name of the pharmacy to which it was transferred; and

([~~iv~~]D) the date and time of the transfer.

(b) Notwithstanding Subsection (9)(a)(iii), only a pharmacist may transfer or receive a prescription for a controlled substance.

(10) This section does not apply to the use of electronic equipment to transmit prescription orders within inpatient medical facilities.

R156-17b-614a. Operating Standards - Class A or Class B Pharmacy - General Operating Standards.

[~~In accordance with~~]Under Subsection 58-17b-601(1), the following operating standards apply to Class A and Class B pharmacies[~~,~~] and may be supplemented or amended by additional standards in this rule applicable to specific types of Class A and B pharmacies.

(1) [~~The general operating standards include~~]A facility shall:

(a) [~~A facility shall~~]be well-lit[~~-lighted~~], well[~~-~~]-ventilated, clean, and sanitary[~~-~~];

(b) [~~A facility that~~]if the facility transfers a drug from a manufacturer's or distributor's original container to another container, [~~shall~~]have a sink with hot and cold culinary water separate [~~and apart~~]from restroom facilities and any clean rooms where sterile products are prepared;[~~. This sink requirement does not apply to clean rooms where sterile products are prepared. Clean rooms may not have sinks or floor drains.~~]

(c) maintain [~~R~~]required equipment [~~shall be~~]in clean and [~~in~~]good operating condition[~~-~~];

(d) [~~A facility shall~~]be equipped to store prescription drugs and durable medical equipment:

(i) in an orderly manner that permits clear identification, separation, and easy retrieval of products; and

(ii) in an environment necessary to maintain the integrity of the product inventory[~~-~~];

(e) [~~A facility shall~~]be equipped to permit practice within the standards and ethics of the profession as dictated by the [~~usual and ordinary~~]scope of practice conducted within that facility[~~-~~];

(f) [~~A facility shall~~]be stocked with the quality and quantity of product necessary [~~for the facility~~]to meet its scope of practice in a manner consistent with [~~the~~]public safety[~~-~~];

(g) [~~A~~]if the facility [~~that~~]dispenses controlled substances, [~~shall~~]be equipped with a security system that:

(i) [~~permits detection of~~]detects entry at all times when the facility is closed; and

(ii) provides notice of unauthorized entry to an individual[~~-~~];

(h) [~~A~~]for a pharmacy department, if applicable[~~- shall~~]:

(i) [~~be equipped~~]equip with a lock the area where drugs are stored; and

(ii) [~~be~~]ensure the area is securely locked when the pharmacy department is closed[~~-~~];

(i) [~~A facility shall~~]have a counseling area to allow for confidential patient counseling, if applicable[~~-~~];

(j) have current editions of the following reference publications in print or electronic format, readily available to and retrievable by facility personnel:

(i) Title 58, Chapter 1, Division of Professional Licensing Act;

(ii) Rule R156-1, General Rule of the Division of Professional Licensing;

(iii) Title 58, Chapter 17b, Pharmacy Practice Act;

(iv) Rule R156-17b, Pharmacy Practice Act Rule;

(v) Title 58, Chapter 37, Controlled Substances;

(vi) Rule R156-37, Controlled Substances Rule;

(vii) Title 58, Chapter 37f, Controlled Substance Database Act;

(viii) Rule R156-37f, Controlled Substance Database Act Rule;

(ix) 21 CFR 1300 et seq. or equivalent;

(x) current FDA-Approved Drug Products; and

(xi) any other general drug references necessary to permit practice, as dictated by the scope of practice conducted within the facility;

(k) maintain a current paper or electronic list of licensed employees involved in the practice of pharmacy at the facility that is readily retrievable for inspection by the Division and includes each licensee's:

(i) first and last names;

(ii) license classification;

(iii) license number; and

(iv) license expiration date;

(l) maintain:

(i) a copy of DEA Form 222 that has been properly dated, initialed, and filed;

(ii) copies of each unaccepted or defective order form; and

(iii) any attached statements or other documents;

(m) maintain a record of suppliers' credit memos for controlled substances; and

(n) maintain hard copy reports of surrender or destruction of controlled substances and legend drugs submitted to appropriate state or federal agencies.

(2)(a) Prescription labels for compounded sterile and non-sterile medications, when dispensed to the patient or patient's agent, shall include:

(i) the minimum information required under Section 58-17b-602;

(ii) generic name;

(iii) quantity or concentration of each active ingredient; and

(iv) [~~labeling for sterile preparation for parenteral use shall include~~]for a sterile preparation for parenteral use:

(A) the name of the diluent;

(B) assigned compounding record or lot number; and

(C) the phrase "compounded preparation."

(b) The requirements described in Subsections 58-17b-602([~~2~~]5)(a)(i) [~~and~~]through ([~~2~~]5)(a)([~~i~~]vi) shall not apply to a label on the container of a drug that a health care provider administers to a patient at:

(i) a pharmaceutical administration facility; or

(ii) a hospital licensed under Title 26B, Chapter 2[~~1~~], Part 2, Health Care Facility Licensing and Inspection[~~Act~~].

(3) The temperature of the pharmacy shall be maintained within a range compatible with the proper storage of drugs.[-] If a refrigerator or freezer is necessary to properly store drugs at the pharmacy, the pharmacy shall keep a daily written or electronic log of the temperature of the refrigerator or freezer on days of operation. The pharmacy shall retain each log entry for at least three years.

[~~(4) A facility shall have current editions of the following reference publications in print or electronic format, that are readily available to and retrievable by facility personnel:~~

~~(a) Title 58, Chapter 1, Division of Occupational and Professional Licensing Act;~~

~~(b) Rule R156-1, General Rule of the Division of Occupational and Professional Licensing;~~

~~(c) Title 58, Chapter 17b, Pharmacy Practice Act;~~

~~(d) Rule R156-17b, Utah Pharmacy Practice Act Rule;~~

~~(e) Title 58, Chapter 37, Utah Controlled Substances Act;~~

~~(f) Rule R156-37, Utah Controlled Substances Act Rule;~~

~~(g) Title 58, Chapter 37f, Controlled Substance Database Act;~~

~~(h) R156-37f, Controlled Substance Database Act Rule;~~

~~(i) 21 CFR 1300 et seq. (2021) or equivalent such as the USP DI Drug Reference Guides;~~

~~(j) current FDA-Approved Drug Products; and~~

~~(k) any other general drug references necessary to permit practice, as dictated by the usual and ordinary scope of practice conducted within that facility.~~

~~(5)(a) A facility shall maintain a current list of licensed employees involved in the practice of pharmacy at the facility, that includes:~~

~~(i) individual licensee names;~~

~~(ii) license classifications;~~

~~(iii) license numbers; and~~

~~(iv) license expiration dates.~~

~~(b) The list shall be readily retrievable for inspection by the Division, and may be maintained in paper or electronic form.~~]

([~~6~~]4) A pharmacy may not dispense a prescription drug or device to a patient unless a pharmacist or DMP is physically present and immediately available in the facility, or, for a remote dispensing pharmacy, physically present and immediately available in the facility or supervising through a telepharmacy system.

([~~7~~]5) Only a licensed Utah pharmacist, DMP, or authorized personnel shall have access to the pharmacy when the pharmacy is closed.

([~~8~~]6) The facility or parent company shall maintain a record for at least five years of the initials or identification codes that identify each dispensing pharmacist or DMP by name.[-] The initials or identification code shall be unique to ensure that each pharmacist or DMP can be identified[~~; therefore identical initials or identification codes may not be used~~].

[~~(9) The pharmacy facility shall maintain:~~

~~(a) copy 3 of DEA order form 222 that has been properly dated, initialed, and filed;~~

~~(b) copies of each unaccepted or defective order form; and~~

~~(c) any attached statements or other documents.~~]

([~~10~~]7) If applicable, a hard copy of a power of attorney authorizing a pharmacist, DMP, or DMP designee to sign DEA [~~order form~~]Form 222 shall be available to the Division upon request.

([~~11~~]8) A pharmacist, DMP, or other responsible individual shall verify that controlled substances are listed on the suppliers' invoices and were [~~actually~~]received[~~,~~] by clearly recording their initials and the actual date of receipt of the controlled substances.

[~~(12) The facility shall maintain a record of suppliers' credit memos for controlled substances.~~]

([~~13~~]9) A copy of the inventories required under Section R156-17b-605 shall be made available to the Division [~~when requested~~]upon request.

[~~(14) The facility shall maintain hard copy reports of surrender or destruction of controlled substances and legend drugs submitted to appropriate state or federal agencies.~~]

([~~15~~]10) If the pharmacy does not store drugs in a locked cabinet and has a drop or false ceiling, the pharmacy's perimeter walls shall extend to the hard deck, or the pharmacy shall take other measures to prevent unauthorized entry into the pharmacy.

R156-17b-614b. Operating Standards - Class B [~~p~~]Pharmacy [~~d~~]Designated as a Branch Pharmacy.

[~~In accordance with~~]Under Subsections 58-17b-102(8) and 58-1-301(3), the qualifications for designation as a branch pharmacy include the following:

(1) The Division, in collaboration with the Board, shall approve the location of each branch pharmacy.[~~-~~] The following shall be considered in granting such designation:

(a) the distance between or from nearby alternative pharmacies and all other factors affecting access [~~of persons~~]in the area to alternative pharmacy resources;

(b) the availability at the location of qualified [~~persons~~]individuals to staff the pharmacy, including the physician, physician assistant or advanced practice registered nurse;

(c) the availability and willingness of a parent pharmacy and supervising pharmacist to assume responsibility for the branch pharmacy;

(d) the availability of satisfactory physical facilities in which the branch pharmacy may operate; and

(e) the totality of conditions and circumstances which surround the request for designation.

(2) A branch pharmacy shall be licensed as a pharmacy branch of an existing Class A or B pharmacy licensed by the Division.

(3) The application for designation of a branch pharmacy shall be submitted by the licensed parent pharmacy seeking [~~such~~]the designation.[~~-~~] [~~In the event that~~]If more than one licensed pharmacy makes application for designation of a branch pharmacy location at a previously undesignated location, the Division, in collaboration with the Board, shall review all applications for designation of the branch pharmacy and, if the location is approved, shall [~~approve for licensure~~]license the applicant determined best able to serve the public interest as identified in Subsection (1).

(4) The application shall include the following:

(a) complete identifying information [~~concerning~~]for the applying parent pharmacy;

(b) complete identifying information [~~concerning~~]for the designated supervising pharmacist employed at the parent pharmacy;

(c) address and description of the facility [~~in which~~]where the branch pharmacy [~~is to~~]would be located;

(d) specific formulary to be stocked indicating [~~with respect to each prescription drug,~~]the name, [~~the~~]dosage strength, and dosage units in which the drug will be prepackaged for each prescription drug;

(e) complete identifying information [~~concerning~~]for each [~~person~~]individual [~~located~~]at the branch pharmacy who will dispense prescription drugs [~~in accordance with~~]according to the approved protocol; and

(f) [~~protocols under which~~]the branch pharmacy [~~will operate~~]operating protocols and its relationship with the parent pharmacy [~~to include the following~~]including:

(i) [~~the conditions under which~~]how prescription drugs will be stored, used and accounted for;

(ii) [~~the method by which~~]how the drugs will be transported from the parent pharmacy to the branch pharmacy and accounted for by the branch pharmacy; and

(iii) a description of how records will be kept with respect to:

(A) formulary;

(B) changes in formulary;

(C) record of drugs sent by the parent pharmacy;

(D) record of drugs received by the branch pharmacy;

(E) record of drugs dispensed;

(F) periodic inventories; and

(G) any other record contributing to an effective audit trail [~~with respect to~~]for prescription drugs provided to the branch pharmacy.

R156-17b-614c. Operating Standards - Class B - Pharmaceutical Administration Facility.

[~~In accordance with~~]Under Subsections 58-17b-102(44) and 58-17b-601(1), the following operating standards apply to prescription drugs that are held, stored, or otherwise under the control of a pharmaceutical administration facility for administration to patients:

(1) The licensed consulting pharmacist shall:

(a) provide consultation on each aspect of pharmacy services in the facility;

(b) establish a system of records of receipt and disposition of controlled substances in sufficient detail to enable an accurate reconciliation;[~~-and~~]

(c) determine that drug records are in order; and[~~-that an account of all controlled substances is maintained and periodically reconciled.~~]

(d) maintain and periodically reconcile an account of all controlled substances.

(2) Authorized destruction of prescription drugs shall be:

(a) witnessed by:

(i) one of the following:

(A) the medical or nursing director; or

(B) a designated physician, registered nurse or other licensed [~~person~~]individual employed [~~in~~]by the facility; and

(ii) the consulting pharmacist or licensed pharmacy technician[~~,~~]; and

(b) shall be in compliance with 21 CFR Part 1317[~~-(2021)~~].

(3)(a) A licensed prescribing practitioner [~~- Prescriptions for patients in the facility -~~]may [~~be -~~]verbally request[~~ed~~] prescriptions for patients in the facility [~~by a licensed prescribing practitioner -~~]and the request may be entered as the prescribing practitioner's order if the practitioner signs[~~; but the practitioner must personally sign~~] the order in the facility record within:

(i) 72 hours if prescribing a Schedule II controlled substance; [~~and~~]or

(ii) [~~within -~~]30 days if prescribing any other prescription drug.

(b) The prescribing practitioner's verbal order may be copied and forwarded to a pharmacy for dispensing and may serve as the pharmacy's record of the prescription order unless the prescription is for a Schedule II controlled substance, which may be dispensed only in accordance with 21 CFR 1306.11.

(4) Prescriptions for controlled substances for patients in Class B pharmaceutical administration facilities shall be dispensed according to Title 58, Chapter 37, [~~Utah -~~]Controlled Substances[~~- Act~~], and Rule R156-37, [~~Utah -~~]Controlled Substances [~~Act -~~]Rule[~~s~~].

(5) [~~Requirements for emergency drug kits shall include:~~

~~(a) a~~]An emergency drug kit may be used by pharmaceutical administration facilities and is subject to the following requirements:[~~-~~]

(a) [~~T~~]the emergency drug kit shall be considered[~~- to be~~] a physical extension of the pharmacy supplying the emergency drug kit and shall remain under the ownership of that pharmacy;

(b) the contents and quantity of drugs and supplies in the emergency drug kit shall be determined by the Medical Director or Director of Nursing of the pharmaceutical administration facility and the consulting pharmacist of the supplying pharmacy;

(c) a copy of the approved list of contents shall be conspicuously posted on or near the kit;

(d) the emergency kit shall be used only for bona fide emergencies and only when medications cannot be obtained from a pharmacy in a timely manner;

(e) records documenting the receipt and removal of drugs in the emergency kit shall be maintained by the facility and the pharmacy;

(f) the pharmacy shall be responsible for ensuring proper storage, security and accountability of the emergency kit and shall ensure that:

(i) the emergency kit is stored in a locked area[~~- and is locked itself~~];

(ii) the emergency kit is locked; and

(iii) emergency kit drugs are accessible only to licensed physicians, physician assistants, and nurses employed by the facility; and

(g) the contents of the emergency kit, the approved list of contents and related records shall be made freely available and open for inspection to [~~appropriate representatives of -~~]the Division and the Utah Department of Health and Human Services.

R156-17b-614d. Operating Standards - Class B - Nuclear Pharmacy.

(1) [~~In accordance with~~]Under Subsection 58-17b-601(1), the operating standards for a Class B pharmacy designated as a nuclear pharmacy are established in this section.

(2) A nuclear pharmacy shall[~~- have the following~~]:

(a) have applied for or possess a current Utah Radioactive Materials License;[~~- and~~]

(b) have adequate space and equipment [~~commensurate with~~]for the scope of services required and provided[~~-~~];

(c) dispense only radiopharmaceuticals that comply with acceptable standards of quality assurance; and

(d) maintain a library proportional to the level of radiopharmaceutical service provided.

[~~(3) Nuclear pharmacies shall only dispense radiopharmaceuticals that comply with acceptable standards of quality assurance.~~

~~(4) Nuclear pharmacies shall maintain a library commensurate with the level of radiopharmaceutical service to be provided.~~]

([~~5~~]3)(a) A licensed Utah pharmacist shall be immediately available on the premises at any time when the facility is open or available to engage in the practice of pharmacy.

(b) In addition to Utah licensure, the pharmacist shall have classroom and laboratory training and experience as required by the Utah Radiation Control Rules.

([~~6~~]4) This [~~rule~~]section does not prohibit:

(a) a licensed pharmacy intern or technician from acting under the direct supervision of a pharmacist preceptor who meets the requirements to supervise a nuclear pharmacy; or

(b) a Utah Radioactive Materials licensee from possessing and using radiopharmaceuticals for medical use.

([~~7~~]5) A hospital nuclear medicine department or an office of a physician-surgeon, osteopathic physician-surgeon, veterinarian, podiatric physician or dentist that has a current Utah Radioactive Materials License does not require licensure as a Class B pharmacy.

([~~8~~]6) A nuclear pharmacy preparing sterile compounds shall follow the USP-NF [~~Chapter -~~]≤797≥[~~- Compound for sterile preparations~~].

([~~9~~]7) A nuclear pharmacy preparing medications for a specific person shall be licensed as a Class B [~~-~~]nuclear pharmacy if located in Utah, and as a Class D pharmacy if located outside of Utah.

R156-17b-614e. Operating Standards - Compounding.

(1) A licensee engaging in sterile or nonsterile compounding shall practice in accordance with applicable federal and state laws and rules, and in accordance with the USP-NF, including:

(a)(i) USP <797> Pharmaceutical Compounding - Sterile Preparations;

(ii) except that a smoke study is required only on new construction of a facility, or if physically moving equipment within the clean room;

(b) USP <795> Pharmaceutical Compounding - Nonsterile Preparations; and

(c) USP <825> Radiopharmaceuticals - Preparation, Compounding, Dispensing, and Repackaging.

(2) These operating standards shall apply:

(a) to any pharmacy or individual licensed under Title 58, Chapter 17b, Pharmacy Practice Act, that engages in compounding; and

(b) to the compounding of all sterile or nonsterile compounded pharmaceuticals, antineoplastic drugs, or non-antineoplastic drugs, no matter where the patient is located.

(3) On or before December 31, 2025, a licensed pharmacy engaging in sterile or nonsterile hazardous drug compounding with antineoplastic drugs according to the NIOSH list under USP <797> and USP <795>, shall practice in accordance with applicable federal and state laws and rules, and in accordance with the requirements of USP <800>, Hazardous Drugs - Handling in Healthcare Settings listed in Subsection (4).

(4) A licensed pharmacy compounding sterile or non-sterile non-antineoplastic hazardous drugs shall:

(a) compound sterile or nonsterile hazardous non-antineoplastic drugs in:

(i) a double-HEPA filtered or externally vented containment ventilated exposure (CVE);

(ii) a class II biological safety cabinet (BSC);

(iii) a compounding aseptic containment isolator (CACI); or

(iv) a laminar airflow workbench (LAFW), compounding aseptic isolator (CAI) may be used for the compounding of non-antineoplastic HD in accordance with a hazardous drug risk assessment as defined in USP <800> Section 2 Box 1;

(b)(i) clearly mark and identify hazardous API;

(ii)(A) store it in a designated area separate from all other medications;

(B) the designated area does not require a separate room;

(c) adhere to the requirements in USP <800> except the following Sections:

(i) 1. INTRODUCTION AND SCOPE;

(ii) 3. TYPES OF EXPOSURE;

(iii) 5. FACILITIES AND ENGINEERING CONTROLS;

(iv) 6. ENVIRONMENTAL QUALITY AND CONTROL;

(v) 14. ADMINISTERING;

(vi) 16. SPILL CONTROL;

(vii) 17. DOCUMENTATION AND STANDARD OPERATING PROCEDURES, as follows:

(A) a licensed pharmacy shall generally adhere to the documentation and standard operating procedures listed in USP <800> Section 17, except those listed in Subsection (vii)(B);

(B) a licensed pharmacy need not adhere to:

(I) environmental monitoring including wipe sampling; and

(II) medical surveillance; and

(viii) 18. MEDICAL SURVEILLANCE.

R156-17b-614f. Operating Standards - Central Prescription Processing.

[~~In accordance with~~]Under Subsection 58-17b-601(1), this section establishes the operating standards for pharmacies that engage in central prescription processing as defined in Subsection 58-17b-102(9).

(1) Centralized prescription processing services may be performed if the parties:

(a) either:

(i) have common ownership or common administrative control; or

([~~b~~]ii) have a written contract outlining the services [~~to be~~]provided and the responsibilities [~~and accountabilities~~]of each party in fulfilling the terms of [~~said~~]the contract; and

([~~c~~]b) [~~share a common electronic file or~~]have appropriate technology to allow sufficient access to [~~sufficient~~]information necessary [~~or required~~]to fill or refill a prescription drug order.

(2) The parties performing or contracting for centralized prescription processing services shall maintain a policy and procedures manual, and documentation of implementation, which shall be made available to the Division upon inspection, and [~~which~~]includes the following:

(a) a description of how the parties [~~will~~]comply with federal and state laws and regulations;

(b) appropriate records to identify the responsible pharmacists and the dispensing and counseling process;

(c) a mechanism for tracking the prescription drug order during each step in the dispensing process;

(d) a description of adequate security to protect the integrity and prevent the illegal use or disclosure of protected health information; and

(e) a continuous quality improvement program for pharmacy services designed to objectively and systematically monitor and evaluate the quality and appropriateness of patient care, pursue opportunities to improve patient care, and resolve identified problems.

(3)(a) A "[~~N~~]non[-]-drug or device handling central prescription processing pharmacy[~~ies~~]"[~~,~~] as defined in Subsection R156-17b-102(4[~~3~~]4), shall be licensed as a Class E pharmacy[~~ies~~].

(b) All other central prescription processing pharmacies shall be licensed in the appropriate pharmacy license classification.

R156-17b-614g. Operating Standards - Class A or Class B Pharmacy - Remote Dispensing Pharmacy.

(1) [~~In accordance with~~]Under Subsections 58-17b-102(5[~~8~~]9), 58-17b-601(1), 58-17b-612(1)(b), and 58-1-301(3), the operating standards for a remote dispensing pharmacy are established in this section.

(2) A remote dispensing pharmacy shall:

(a) be a Class A pharmacy or Class B pharmacy, except that a pharmacy located in a hospital may operate as a remote dispensing pharmacy only if the hospital is controlled by a local board that owns up to two hospitals in accordance with Subsection 58-17b-612(1)(c);

(b) have a Class A or Class B pharmacy serve as its supervising pharmacy to oversee its operations; and

(c) be located in an area of need as defined in Subsection R156-17b-102(4).

(3) A remote dispensing pharmacy may not perform compounding.

(4)(a) The supervising pharmacy's PIC shall serve as the remote dispensing pharmacy's RDPIC[~~, who~~] and is responsible for any remote dispensing pharmacy operations.

(b) An RDPIC may not serve as the RDPIC for more than one remote dispensing pharmacy, unless approved by the Division in collaboration with the Board.

(5)(a) At any time that a remote dispensing pharmacy is open and available to serve patients, its pharmacy technicians shall be physically or electronically supervised by a pharmacist from the supervising pharmacy, under Subsection 58-17b-102(71).

(b) [~~In accordance with~~]Under Subsections 58-17b-612(1)(b) and (d), a pharmacist may oversee the operation of up to two remote dispensing pharmacies simultaneously.

(c) Unless a pharmacist is physically present, a remote dispensing pharmacy shall be staffed by no more than two licensed pharmacy technicians.

(d) Each pharmacy technician staffing a remote dispensing pharmacy shall have at least 500 hours of pharmacy technician experience.

(e)[~~(i) Adequate supervision by a~~] A supervising pharmacist of a remote dispensing pharmacy:

(i) shall [~~include~~]maintain[~~ing~~] uninterrupted visual supervision and auditory communication with the site;[~~, and~~]

(ii) shall have full supervisory control of the automated system, if applicable[~~.~~]; and

(iii) [~~A supervising pharmacist~~]may not delegate supervision to any other [~~person~~]individual.

(6) The supervising pharmacy shall maintain a surveillance system and telepharmacy system that provides [~~for~~]effective video and audio communication between supervising pharmacy personnel and remote dispensing pharmacy personnel and patients that includes the following features:

(a) provides comprehensive views of the entire site;

(b) facilitates adequate pharmacist supervision;

(c) allows the appropriate exchanges of visual, verbal, and written communication for patient counseling and other matters involved in the lawful transaction or dispensing of drugs;

(d) confirms that the drug selected to fill the prescription is the same as indicated on the prescription label and prescription; and

(e) is secure and HIPAA compliant as [~~defined~~]described in Subsection R156-17b-102(6[~~7~~]8).

(7)(a) Each component of the telepharmacy system shall be in good working order.

(b) If a component of the system is malfunctioning, the remote dispensing pharmacy shall immediately close to the public and remain closed until system [~~corrections or~~]repairs are completed, unless a pharmacist is present onsite.

(8)(a) The supervising pharmacy shall develop and include in both the supervising pharmacy's and the remote dispensing pharmacy's policies and procedures a plan for continuation of pharmaceutical services by the remote dispensing pharmacy in case of an emergency interruption.

(b)[~~(i)~~] The plan shall address:

(i) the timely arrival of necessary personnel at the remote dispensing pharmacy[~~of necessary personnel,~~]; and

(ii) the delivery of necessary supplies to the remote dispensing pharmacy[~~of necessary supplies,~~] within a reasonable period following the identification of an emergency need.

[~~(ii) A pharmacist shall be available onsite at the remote dispensing pharmacy as soon as possible after an emergency and shall notify the Division in writing if the time exceeds 24 hours.~~]

(c) The plan may provide for alternate methods of continuation of the services of the remote dispensing pharmacy, including personal delivery of patient prescription medications from an alternate pharmacy location or on-site pharmacist staffing at the remote dispensing pharmacy.

(d) A pharmacist shall be available onsite at the remote dispensing pharmacy as soon as possible after an emergency and shall notify the Division in writing if the time exceeds 24 hours.

(9)(a)[~~(i)~~] The remote dispensing pharmacy's security system shall [~~track~~]maintain a record of entries into the remote dispensing pharmacy to be periodically reviewed by the RDPIC.

[~~(ii) The RDPIC shall periodically review the record of entries.~~]

(b) A remote dispensing pharmacy shall conspicuously display a sign [~~easily visible to the public that informs~~]informing patients of the following:

(i) that the pharmacy is a remote dispensing pharmacy;

(ii) the location of the supervising pharmacy; and

(iii) that at the patient's request a pharmacist will counsel the patient using audio and video communication systems.

(10) Records, documentation, and recordings shall be subject to the following requirements:

(a)[~~(i)~~] The supervising pharmacy shall maintain records of the orders entered into its information system, including orders entered from the remote dispensing pharmacy.

([~~ii~~]b) Electronic records shall be available to and accessible from both the remote dispensing pharmacy and the supervising pharmacy.

([~~iii~~]c) The original records of [~~the~~]controlled substance prescriptions dispensed from the remote dispensing pharmacy shall be maintained at the remote dispensing pharmacy.

([~~b~~]d) The remote dispensing pharmacy shall retain a recording of surveillance, excluding patient communications, for at least 45 days.

([~~c~~]e)[~~(i)~~] The RDPIC shall oversee [~~documented~~]monthly inspections of the remote dispensing pharmacy[~~.~~] and [

~~(ii) D~~]documentation of the inspections shall be kept for five years[~~,~~] and shall include:

([~~A~~]i) maintenance and reconciliation of any controlled substance;

([~~B~~]ii) a perpetual inventory of Schedule II controlled substances;

([~~C~~]iii) temperature logs of the refrigerator and freezer that hold medications; and

([~~D~~]iv) the RDPIC's periodic review of the record of entries into the remote dispensing pharmacy.

R156-17b-615. Operating Standards - Class C Pharmacy - Pharmaceutical Wholesaler[~~/~~] or Distributor and Pharmaceutical Manufacturer.

[~~In accordance with~~]Under Subsections 58-17b-102(47) and 58-17b-601(1), the operating standards for a Class C pharmacy[~~ies~~] designated as a pharmaceutical wholesaler[~~/~~] or distributor, [~~and~~]or as a pharmaceutical manufacturer [~~licensees~~]include[~~s~~] the following:

(1) Each pharmaceutical wholesaler or distributor or pharmaceutical manufacturer that distributes or manufactures drugs or medical devices in Utah shall be licensed by the Division.

(2) A separate license shall be obtained for each separate location engaged in the distribution or manufacturing of prescription drugs.

(3) [~~B~~]A business name[~~s cannot~~] may not be identical to [~~the~~]a name used by another unrelated wholesaler licensed to purchase drugs and devices in Utah.

([~~2~~]4) [~~M~~]A manufacturer[~~s~~] distributing only their own FDA-approved:

(a) prescription drugs or prescription drugs that are co-licensed products satisfy the requirement in Subsection (1) by registering their establishment with the FDA pursuant to 21 CFR Part 207 and submitting the information required by 21 CFR Part 205 including any amendments thereto, to the Division; or

(b) devices or devices that are co-licensed products, including products packaged with devices, such as convenience kits, that are exempt from the definition of transaction in 21 USC [~~sec. ~~]360eee[-](24)(B)(xii[~~-xvi~~]) and (xiii) satisfy the requirement in Subsection (1) by registering their establishment with the FDA pursuant to 21 CFR Part 807.

([~~3~~]5) An applicant for licensure as a pharmaceutical wholesaler or distributor shall provide the following [~~minimum~~]information:

(a) [~~A~~]all trade or business names used by the licensee[~~(~~], including "doing business as" and "formerly known as"[~~)~~];

(b) [~~N~~]name of the owner and operator of the license; and[~~ as follows:~~

~~(i) if a person, the name, business address, social security number and date of birth;~~

~~(ii) if a partnership, the name, business address, and social security number and date of birth of each partner, and the partnership's federal employer identification number;~~

~~(iii) if a corporation, the name, business address, social security number and date of birth, and title of each corporate officer and director, the corporate names, the name of the state of incorporation, federal employer identification number, and the name of the parent company, if any, but if a publicly traded corporation, the social security number and date of birth for each corporate officer shall not be required;~~

~~(iv) if a sole proprietorship, the full name, business address, social security number and date of birth of the sole proprietor and the name and federal employer identification number of the business entity;~~

~~(v) if a limited liability company, the name of each member, social security number of each member, the name of each manager, the name of the limited liability company and federal employer identification number, and the name of the state where the limited liability company was organized; and~~]

(c) any other relevant information required by the Division.

([~~4~~]6) The licensed facility need not be under the supervision of a licensed pharmacist, but shall be under the supervision of a designated representative who meets the following criteria:

(a) is at least 21 years of age;

(b) has been employed full time for at least three years in a pharmacy or with a pharmaceutical wholesaler in a capacity related to [~~the~~]dispensing,[~~ and~~] distribution[~~ of~~], and recordkeeping [~~related to~~]for prescription drugs;

(c) is employed by the applicant in a full time, [~~in a~~]managerial level position;

(d) is actively involved in and aware of the actual daily operation of the pharmaceutical wholesale distribution;

(e) is physically present at the facility during regular business hours, except when the absence of the designated representative is authorized,[~~ including but not limited to,~~] such as sick leave and vacation leave; and

(f) is serving [~~in the capacity of~~]as a designated representative for only one licensee at a time.

([~~5~~]7) The licensee shall provide the name, business address, and telephone number of [~~a person to serve~~]the individual serving as the designated representative for each facility of the pharmaceutical wholesaler that engages in the distribution of drugs or devices within 30 days of a change in designated representative.

([~~6~~]8) All pharmaceutical wholesalers and manufacturers shall [~~publicly~~]conspicuously display, or have readily available, all licenses and the most recent inspection report administered by the Division.

([~~7~~]9) All Class C pharmacies shall:

(a) be of suitable size and construction to facilitate cleaning, maintenance and proper operations;

(b) have storage areas designed to provide adequate lighting, ventilation, sanitation, space, equipment and security conditions;

(c) have the ability to control temperature and humidity within tolerances required by all prescription drugs and prescription drug precursors handled or used in the distribution or manufacturing activities of the applicant or licensee;

(d) provide [~~for~~]a quarantine area for storage of prescription drugs and prescription drug precursors that are outdated, damaged, deteriorated, misbranded, adulterated, opened or unsealed containers that have once been appropriately sealed or closed or in any other way unsuitable for use or entry into distribution or manufacturing;

(e) be maintained in a clean and orderly condition; and

(f) be free from infestation by insects, rodents, birds or vermin of any kind.

([~~8~~]10) Each facility used for wholesale drug distribution or manufacturing of prescription drugs shall:

(a) be secure from unauthorized entry;

(b) limit access from the outside [~~to a minimum in conformance with~~]following local building codes[~~,~~] and life and safety codes;

(c) [~~and~~]control access to [~~persons~~]individuals to ensure unauthorized entry is not made;

([~~c~~]d) limit entry into areas where prescription drugs, prescription drug precursors, or prescription drug devices are held to authorized [~~persons~~]individuals who [~~have a~~]need to be in those areas;

([~~d~~]e) be well-lit [~~lighted~~]on the outside perimeter;

([~~e~~]f) be equipped with an alarm system to detect entry and notify appropriate authorities [~~permit detection of entry and notification of appropriate authorities at all times~~]when the facility is not occupied [~~for the purpose of engaging~~]to engage in the distribution or manufacturing of prescription drugs; and

([~~f~~]g) be equipped with security measures, systems, and procedures necessary to provide reasonable security against:

(i) theft and diversion of prescription drugs; and[~~ or~~]

(ii) alteration or tampering with computers and records pertaining to prescription drugs or prescription drug precursors.

([~~9~~]11) Each facility shall [~~provide the storage of~~]store prescription drugs, prescription drug precursors, and prescription drug devices [~~in accordance with~~]according to the following:

(a) all prescription drugs and prescription drug precursors shall be stored at appropriate temperature, humidity and other conditions in accordance with labeling of such prescription drugs or prescription drug precursors or with requirements in the USP-NF;

(b) if no storage requirements are established for a specific prescription drug, prescription drug precursor, or prescription drug device[~~s~~], the product[~~s~~] shall be held in a condition of controlled temperature and humidity as defined in the USP-NF to ensure that its identity, strength, quality and purity are not adversely affected; and

(c) there shall be [~~established~~]a system of manual, electromechanical or electronic recording of temperature and humidity in the areas in which prescription drugs, prescription drug precursors, and prescription drug devices are held to permit review of the record and ensure that the products have not been subjected to conditions that are outside of established limits.

([~~10~~]12) Each person [~~who is~~]engaged in pharmaceutical wholesale distribution of prescription drugs for human use that leave, or have ever left, the normal distribution channel shall, before each pharmaceutical wholesale distribution of such drug, provide a pedigree to the person who receives such drug.[~~-~~] A retail pharmacy or pharmacy warehouse shall comply with the requirements of this section only if the pharmacy engages in pharmaceutical wholesale distribution of prescription drugs. The pedigree shall:

(a) include all necessary identifying information concerning each sale in the chain of distribution of the product from the manufacturer, through acquisition and sale by any pharmaceutical wholesaler, until sale to a pharmacy or other person dispensing or administering the prescription drug, including[~~. At a minimum, the necessary chain of distribution information shall include~~]:

(i) name, address, telephone number, and if available, the email address of each owner of the prescription drug, and each pharmaceutical wholesaler of the prescription drug;

(ii) name and address of each location from which the product was shipped, if different from the owner's;

(iii) transaction dates;

(iv) name of the prescription drug;

(v) dosage form and strength of the prescription drug;

(vi) size of the container;

(vii) number of containers;

(viii) lot number of the prescription drug;

(ix) name of the manufacturer of the finished dose form; and

(x) National Drug Code (NDC) number.

(b) be maintained by the purchaser and the pharmaceutical wholesaler for five years from the date of sale or transfer and be available for inspection or use upon a request of an authorized officer of the law.

([~~11~~]13) Each facility shall comply with the following requirements:

(a) in general, each person [~~who is~~]engaged in pharmaceutical wholesale distribution of prescription drugs shall establish and maintain inventories and records of all transactions regarding the receipt and distribution or other disposition of the prescription drugs. These records shall include pedigrees for all prescription drugs that leave the normal distribution channel;

(b) upon receipt, each outside shipping container containing prescription drugs, prescription drug precursors, or prescription drug devices shall be visibly examined for identity and to prevent the acceptance of prescription drugs, prescription drug precursors, or prescription drug devices that are contaminated, reveal damage to the containers, or are otherwise unfit for distribution:

(i) prescription drugs, prescription drug precursors, or prescription drug devices that are outdated, damaged, deteriorated, misbranded, adulterated, or in any other way unfit for distribution or use in manufacturing shall be quarantined and physically separated from other prescription drugs, prescription drug precursors, or prescription drug devices until they are appropriately destroyed or returned to their supplier; and

(ii) any prescription drug or prescription drug precursor whose immediate sealed or outer secondary sealed container has been opened or in any other way breached shall be identified as such and shall be quarantined and physically separated from other prescription drugs and prescription drug precursors until they are appropriately destroyed or returned to their supplier;

(c) each outgoing shipment shall be carefully inspected for identity of the prescription drug products or devices and to ensure that there is no delivery of prescription drugs or devices that have been damaged in storage or held under improper conditions:

(i) if the conditions or circumstances surrounding the return of any prescription drug or prescription drug precursor cast any doubt on the product's safety, identity, strength, quality, or purity, then the drug shall be appropriately destroyed or returned to the supplier, unless

examination, testing, or other investigation proves that the product meets appropriate and applicable standards related to the product's safety, identity, strength, quality, and purity;

(ii) returns of expired, damaged, recalled, or otherwise non-saleable prescription drugs shall be distributed by the receiving pharmaceutical wholesale distributor only to the original manufacturer or a third party returns processor that is licensed as a pharmaceutical wholesale distributor under this chapter;

(iii) returns or exchanges of prescription drugs, [~~(~~]saleable or otherwise[~~)~~], including any redistribution by a receiving pharmaceutical wholesaler, shall not be subject to the pedigree requirements, so long as they are exempt from the pedigree requirement under the FDA's Prescription Drug Marketing Act guidance or regulations; and

(d) a licensee under this Act and pharmacies or other persons authorized by law to dispense or administer prescription drugs for use by a patient shall be accountable for administering their returns process and ensuring that all aspects of their operation are secure and do not permit the entry of adulterated and counterfeit prescription drugs.

([~~12~~]14) A manufacturer or pharmaceutical wholesaler shall furnish prescription drugs only to a person licensed by the Division or to another appropriate state licensing authority to possess, dispense, or administer such drugs for use by a patient.

([~~13~~]15) Prescription drugs furnished by a manufacturer or pharmaceutical wholesaler shall be delivered only to the business address of a person described in Subsection[~~s~~] R156-17b-102(2[~~0~~]1)[~~(c)~~] and Section R156-17b-615, or to the premises listed on the license, or to an authorized person or agent of the licensee at the premises of the manufacturer or pharmaceutical wholesaler if the identity and authority of the authorized agent is properly established.

([~~14~~]16) Each facility shall establish and maintain records of all transactions regarding the receipt and distribution or other disposition of prescription drugs and prescription drug precursors and shall make inventories of prescription drugs and prescription drug precursors and required records available for inspection by authorized representatives of the federal, state and local law enforcement agencies [~~in accordance with~~]according to the following:

(a) there shall be a record of the source of the prescription drugs or prescription drug precursors to include the name and principal address of the seller or transferor and the address of the location from which the drugs were shipped;

(b) there shall be a record of the identity and quantity of the prescription drug or prescription drug precursor received, manufactured, distributed, or shipped or otherwise disposed of by specific product and strength;

(c) there shall be a record of the dates of receipt and distribution or other disposal of any product;

(d) there shall be a record of the identity of persons to whom distribution is made [~~to include~~]including the name and principal address of the receiver and the address of the location to which the products were shipped;

(e) inventories of prescription drugs and prescription drug precursors shall be made available during regular business hours to authorized representatives of federal, state and local law enforcement authorities;

(f) required records shall be made available for inspection during regular business hours to authorized representatives of federal, state, and local law enforcement authorities and such records shall be maintained for a period of two years following disposition of the products; and

(g)(i) records that are maintained on site or immediately retrievable from computer or other electronic means shall be made readily available for authorized inspection during the retention period; or

(ii) if records are stored at another location, they shall be made available within two working days after request by an authorized law enforcement authority during the two[-]-year period of retention.

([~~15~~]17) Each facility shall establish, maintain, and adhere to written policies and procedures that shall be followed for the receipt, security, storage, inventory, manufacturing, distribution, or other disposal of prescription drugs or prescription drug precursors, including policies and procedures for identifying, recording, and reporting losses or thefts, and for correcting all errors and inaccuracies in inventories. [~~In addition, t~~]The policies shall include the following:

(a) a procedure whereby the oldest approved stock of a prescription drug or precursor product is distributed or used first with a provision for deviation from the requirement if such deviation is temporary and appropriate;

(b) a procedure to be followed for handling recalls and withdrawals of prescription drugs [~~adequate to deal with recalls and withdrawals~~]due to:

(i) any action initiated at the request of the FDA or other federal, state, or local law enforcement or other authorized administrative or regulatory agency;

(ii) any voluntary action to remove defective or potentially defective drugs from the market; or

(iii) any action undertaken to promote public health, safety, or welfare by replacement of existing product with an improved product or new package design;

(c) a procedure to prepare for, protect against or handle any crisis that affects security or operation of any facility in the event of strike, fire, flood, or other natural disaster or other situations of local, state, or national emergency;

(d) a procedure to ensure that any outdated prescription drugs or prescription drug precursors shall be segregated from other drugs or precursors and either returned to the manufacturer[~~,~~] or other appropriate party or appropriately destroyed;

(e) a procedure [~~for providing for documentation of~~]documenting the disposition of outdated, adulterated, or otherwise unsafe prescription drugs or prescription drug precursors and the maintenance of that documentation available for inspection by authorized federal, state, or local authorities for a period of five years after disposition of the product;

(f) a procedure for identifying, investigating, and reporting significant drug inventory discrepancies [~~(~~]involving counterfeit drugs, drugs suspected of being counterfeit, contraband, or suspected [~~of being~~]contraband[~~)~~] and for reporting [~~of~~]such discrepancies within three [~~(3)~~]business days to the Division and[~~/or~~] any appropriate federal or state agency upon discovery of such discrepancies; and

(g) a procedure for reporting criminal or suspected criminal activities involving the inventory of drugs and devices to the Division, FDA, and if applicable, Drug Enforcement Administration (DEA), within three [~~(3)~~]business days.

([~~16~~]18) Each facility shall establish, maintain and make available for inspection by authorized federal, state and local law enforcement authorities, lists of all officers, directors, managers and other persons in charge which lists shall include a description of their duties and a summary of their background and qualifications.

(17) Each facility shall comply with laws including:

[~~(a) operating within applicable federal, state and local laws and regulations;~~]

([~~b~~]a) permitting the state licensing authority and authorized federal, state, and local law enforcement officials, upon presentation of proper credentials, to enter and inspect [~~their~~]the facility's premises and delivery vehicles and to audit [~~their~~]the facility's records and written operating policies and procedures, at reasonable times and in a reasonable manner, to the extent authorized by law; and

([~~c~~]b) obtaining a controlled substance license from the Division and registering with the [~~Drug Enforcement Administration (~~]DEA[~~)~~] if the[~~y~~] facility engages in distribution or manufacturing of controlled substances and [~~shall~~]complying with all federal, state, and local regulations applicable to the distribution or manufacturing of controlled substances.

[~~(18) Each facility shall be subject to and shall abide by applicable federal, state and local laws that relate to the salvaging or reprocessing of prescription drug products.~~]

([~~19~~]20)(a) A Class C pharmacy may not be located in the same building as a separately licensed Class A, B, D, or E pharmacy unless:

(i) the separately licensed pharmacy is a third[~~-~~] party logistics provider; or

(ii) the two pharmacies are located in different suites as recognized by the United States Postal Service.

(b) Two Class C pharmacies may be located at the same address in the same suite if the pharmacies:

(i) are under the same ownership;

(ii) have processes and systems for separating and securing all aspects of the operation; and

(iii) have traceability with a clear audit trail that distinguishes a pharmacy's purchases and distributions.

R156-17b-616. Operating Standards - Class D Pharmacy - Out of State Mail Service Pharmacies.

(1) [~~In accordance with~~]Under Subsections 58-1-301(3) and 58-17b-306(2), an application for licensure as a Class D pharmacy shall include:

(a) a pharmacy care protocol that includes the operating standards established in Subsections R156-17b-610(1) and (8) and R156-17b-612(1) through (4);

(b) a copy of the pharmacist's license for the PIC; and

(c) a copy of the most recent state inspection or NABP inspection completed as part of the NABP Verified Pharmacy Program (VPP) showing the status of compliance with the laws and regulations for the physical facility, records and operations.

(2) An out of state mail service pharmacy that compounds shall follow the USP-NF [~~Chapter ~~]≤795≥ [~~Compounding of non-sterile preparations ~~]and [~~Chapter ~~]≤797≥[~~- Compounding of sterile preparations~~].

R156-17b-617a. Operating Standards - Class E Pharmacy - General Provisions.

[~~(1) In accordance with~~]Under Section 58-17b-302 and Subsection 58-17b-601(1), Class E pharmacies shall have a written pharmacy care protocol that includes:

([~~a~~]1) the identity of the supervisor or director;

([~~b~~]2) a detailed plan of care;

([~~c~~]3) the identity of the drugs to be purchased, stored, used, or accounted for; and

([~~d~~]4) the identity of any licensed healthcare provider associated with the operation.

[~~(2) Class E pharmacies shall comply with all applicable federal and state laws.~~]

R156-17b-617b. Class E Pharmacy Operating Standards - Analytical Laboratory.

[~~In accordance with~~]Under Section 58-17b-302 and Subsection 58-17b-601(1), an analytical laboratory shall:

(1) be of suitable size and construction to facilitate cleaning, maintenance, and proper operations;

(2) provide adequate lighting, ventilation, sanitation, space, equipment, and security conditions;

(3) maintain a list of drugs that will be purchased, stored, used, and accounted for;

(4) maintain a list of licensed health care providers associated with the operation of the business;

(5) possess prescription drugs for [~~the purpose of ~~]analysis; and

(6) take measures to prevent the theft or loss of controlled substances.

R156-17b-617c. Class E Pharmacy Operating Standards - Animal Control or Animal Narcotic Detection Training.

(1) [~~In accordance with~~]Under Section 58-17b-302 and Subsection 58-17b-601(1), an animal control or animal narcotic detection training facility shall:

(a) maintain for immediate retrieval a perpetual inventory of all drugs including controlled substances that are purchased, stored, processed, and administered;

(b) maintain for immediate retrieval a current list of authorized employees and their training [~~with regards to the~~]on handling and using[~~e of~~] legend drugs and[~~/or~~] controlled substances [~~in relation to~~]for euthanasia, immobilization, or narcotic detection training of animals;

(c) maintain[~~,~~] for immediate retrieval documentation of all required materials [~~pertaining to~~]for legitimate animal scientific drug research, guidance policy, and other relevant documentation from the agency's Institutional Review Board, if applicable;

(d) maintain stocks of legend drugs and controlled substances to the smallest quantity needed for efficient operation to conduct animal euthanasia, immobilization, or narcotic detection training purposes;

(e) maintain all legend drugs and controlled substances in an area within a building having perimeter security that limits access during working hours, provides adequate security after working hours, and has the following security controls:

(i) a permanently secured safe or steel cabinet substantially constructed with self-closing and self-locking doors employing either multiple position combination or key lock type locking mechanisms; and

(ii) requisite key control, combination limitations, and change procedures;

(f) have only one individual [~~a responsible party who is the only person~~]authorized to purchase and reconcile legend drugs and controlled substances and is responsible for the inventory of the animal control or animal narcotic detection training facility pharmacy;

(g) ensure that only defined and approved individuals pursuant to the written facility protocol have access to legend drugs and controlled substances; and

(h) develop and maintain written policies and procedures for immediate retrieval that include the following:

(i) the type of activity conducted with [~~regards to~~]legend drugs and[~~/or~~] controlled substances;

(ii) how medications are purchased, inventoried, prepared, and used [~~in relation to~~]for euthanasia, immobilization, or narcotic detection training of animals;

(iii) the type, form, and quantity of legend drugs and[~~/or~~] controlled substances handled;

(iv) the type of safe, or equally secure [~~enclosures or other~~]storage system, used for the storage and retrieval of legend drugs and[~~/or~~] controlled substances;

(v) security measures in place to protect against theft or loss of legend drugs and controlled substances;

(vi) adequate supervision of employees having access to manufacturing and storage areas;

(vii) maintenance of records documenting the initial and ongoing training of authorized employees [~~with regard to~~]on all applicable protocols;

(viii) maintenance of records documenting all approved and trained authorized employees who may have access to [~~the~~]legend drugs and controlled substances; and

(ix) procedures for allowing the presence of business guests, visitors, maintenance personnel, and non-employee service personnel.

R156-17b-617d. Class E Pharmacy Operating Standards- Durable Medical Equipment.

(1) [~~In accordance with~~]Under Section 58-17b-302 and Subsection 58-17b-601(1), a durable medical equipment facility shall:

(a) be of suitable size and construction to facilitate cleaning, maintenance, and proper operations;

(b) provide adequate lighting, ventilation, sanitation, space, equipment, and security conditions;

(c) be equipped [~~to permit~~]for the orderly storage of durable medical equipment in:

(i) a manner [~~to~~]permitting clear identification, separation, and easy retrieval of products; and

(ii) an environment necessary to maintain the integrity of the product inventory;

(d) be equipped [~~to permit~~]for practice within the standards and ethics of the profession as dictated by the [~~usual and ordinary~~]scope of practice [~~to be~~]conducted within [~~that~~]the facility;

(e) maintain prescription forms and records for a period of five years;

(f) be locked and enclosed [~~in such as way as~~]to bar entry by the public or any non-personnel when the facility is closed; and

(g) conspicuously display[~~post~~] the license [~~of~~]for the facility[~~ in full view of the public~~].

(2) A licensed practitioner who administers durable medical equipment to a patient or animal is not engaging in the practice of pharmacy[~~,~~] and does not require a license as a Class E pharmacy.

R156-17b-617e. Class E Pharmacy Operating Standards - Human Clinical Investigational Drug Research Facility.

(1) Under Section 58-17b-302 and Subsection 58-17b-601(1), a human clinical investigational drug research facility licensed as a Class E pharmacy shall, in addition to the requirements in Section R156-17b-617a, conduct operations [~~in accordance with~~]according to the operating standards set forth in 21 CFR Part 312, April 1, [~~2012~~]2025 edition, which is incorporated by reference.

(2) Under Subsections 58-37-[~~6(2)(b)~~]105(2)(b) and (3)(a)(i), [~~persons~~]an individual licensed to conduct research in Utah with controlled substances in Schedules I-V may possess, manufacture, produce, distribute, prescribe, dispense, administer, conduct research with, or perform laboratory analysis upon those substances to the extent authorized by their license.

(3) Under [~~Subsection~~]Section 58-37-[~~6(2)~~]105, the following [~~persons~~]individuals are not required to obtain a license and may lawfully possess controlled substances in Schedules II-V:

(a) an agent or employee in accordance with Subsection 58-37-105(2)(c)(i)[~~acting in the usual course of the person's business or employment,~~]; and

(b) an ultimate user[~~,~~] or [~~a person~~]an individual who possesses a controlled substance pursuant to a lawful order of a practitioner.

(4) [~~A~~]Under Subsection 58-37-105(2)(e), a separate license is required at each principal place of business or professional practice where the applicant manufactures, produces, distributes, dispenses, conducts research with, or performs laboratory analysis upon controlled substances.

R156-17b-617f. Class E Pharmacy Operating Standards - Medical Gas Provider.

[~~In accordance with~~]Under Section 58-17b-302 and Subsection 58-17b-601(1), a medical gas facility shall:

([~~a~~]1) develop a standard operating policy and procedures manual;

([~~b~~]2) conduct training and maintain evidence of employee training programs and completion certificates;

([~~c~~]3) maintain documentation and records of all transactions, including[~~ to include~~]:

([~~i~~]a) batch production records;

([~~ii~~]b) certificates of analysis; and

([~~iii~~]c) dates of calibration of gauges;
([~~d~~]4) provide adequate space for orderly placement of equipment and finished product;
([~~e~~]5) maintain gas tanks securely;
([~~f~~]6) designate return and quarantine areas for separation of products;
([~~g~~]7) label all products;
([~~h~~]8) fill cylinders without using adapters; and
([~~i~~]9) comply with all FDA standards and requirements.

R156-17b-617g. Operating Standards - Class E Pharmacy - Third Party Logistics Provider.

Under Subsection 58-17b-601(1), a third party logistics provider:

(1) [~~A third party logistics provider~~]shall comply with DSCSA standards[~~.~~]; and

(2) [~~A third party logistics provide~~]may not employ at its facility an individual who has been convicted of a felony violation relating to product tampering.

R156-17b-618. Change in Ownership, Name, or Location.

(1) Under Section 58-17b-614, a[~~A~~] licensed pharmacy or pharmaceutical facility shall:

(a) apply for a new license [~~and receive approval from the Division~~]at least ten business days before a Qualifying Ownership Change; and

(b) upon approval of the Qualifying Ownership Change and issuance of a new license, the pharmacy or pharmaceutical facility shall surrender its original license to the Division.

(2)(a) Under Subsections 58-17b-614[~~(2)~~](1)(a)(ii) and (2), a request by a pharmacy or pharmaceutical facility to change its name when the change is not due to, or in anticipation of, a Qualifying Ownership Change shall be [~~received by~~]submitted to the Division no later than ten business days before the proposed effective date of the name change.

(b) [~~This~~]Subsection (2) applies to any change in name, including:

(i) changes to the pharmacy or pharmaceutical facility's registered corporate name; and

(ii) addition or removal of a doing-business-as (DBA) name.

(c) If the requested name change requires [~~a~~]filing with the Division of Corporations and Commercial Code, or equivalent state agency in the jurisdiction where the name change will be effectuated, the applicant shall submit with the request proof of such filing with an effective date of no fewer than ten days following the date of the request.

(3)(a) Under Subsection 58-17b-306(3)(b), a request by a pharmacy or pharmaceutical facility to update its address for reasons not due to, or in anticipation of, a Qualifying Ownership Change shall be [~~received by~~]submitted to the Division [~~no later than 90 business days before the proposed effective date of the address change~~]at least 90 days before the day on which the pharmacy or pharmaceutical facility begins operating at the new address.

(b) If the pharmacy or pharmaceutical facility's new address is located within the state the request shall include a request for inspection of the new facility.

(c) If the pharmacy or pharmaceutical facility's new address is located outside the state:

(i) the request shall include a copy of a request for inspection filed with the government agency with jurisdiction over the inspection at the new address; and

(ii) upon receipt of the inspection report from the government agency under Subsection (3)([~~b~~]c)(i), the pharmacy or pharmaceutical facility shall submit to the Division within ten days:

(A) a copy of the inspection report; and

(B) an affidavit signed by the pharmacy manager that the inspection report is an accurate copy.

(4) If a pharmacy or pharmaceutical facility requesting a change in name or address does not comply with the requirements of Subsection (2) or Subsection (3), the pharmacy or pharmaceutical facility shall:

(a) apply for a new license; and

(b) upon approval of the application by the Division and issuance of a new license, surrender the original license to the Division.

R156-17b-619. Operating Standards - Third Party Payors.

Reserved.

R156-17b-620. Operating Standards - Automated Pharmacy System.

[~~In accordance with Section 58-17b-621, automated pharmacy systems can be utilized in licensed pharmacies, remote locations under the jurisdiction of the Division and licensed health care facilities where legally permissible and shall comply with the following provisions:~~

~~(1) Documentation as to type of equipment, serial numbers, content, policies and procedures and location shall be maintained on site in the pharmacy for review upon request of the Division. Such documentation shall include:~~

~~(a) name and address of the pharmacy or licensed health care facility where the automated pharmacy system is being used;~~

~~(b) manufacturer's name and model;~~

~~(c) description of how the device is used;~~

~~(d) quality assurance procedures to determine continued appropriate use of the automated device; and~~

~~(e) policies and procedures for system operation, safety, security, accuracy, patient confidentiality, access and malfunction.~~

~~(2) Automated pharmacy systems should be used only in settings where there is an established program of pharmaceutical care that ensures that before dispensing, or removal from an automated storage and distribution device, a pharmacist reviews all prescription or~~

~~medication orders unless a licensed independent practitioner controls the ordering, preparation and administration of the medication; or in urgent situations when the resulting delay would harm the patient including situations in which the patient experiences a sudden change in clinical status.~~

~~(3) All policies and procedures must be maintained in the pharmacy responsible for the system and, if the system is not located within the facility where the pharmacy is located, at the location where the system is being used.~~

~~(4) Automated pharmacy systems shall have:~~

~~(a) adequate security systems and procedures to:~~

~~(i) prevent unauthorized access;~~

~~(ii) comply with federal and state regulations; and~~

~~(iii) prevent the illegal use or disclosure of protected health information;~~

~~(b) written policies and procedures in place prior to installation to ensure safety, accuracy, security, training of personnel, and patient confidentiality and to define access and limits to access to equipment and medications.~~

~~(5) Records and electronic data kept by automated pharmacy systems shall meet the following requirements:~~

~~(a) all events involving the contents of the automated pharmacy system must be recorded electronically;~~

~~(b) records must be maintained by the pharmacy for a period of five years and must be readily available to the Division. Such records shall include:~~

~~(i) identity of system accessed;~~

~~(ii) identify of the individual accessing the system;~~

~~(iii) type of transaction;~~

~~(iv) name, strength, dosage form and quantity of the drug accessed;~~

~~(v) name of the patient for whom the drug was ordered; and~~

~~(vi) such additional information as the PIC may deem necessary.~~

~~(6) Access to and limits on access to the automated pharmacy system must be defined by policy and procedures and must comply with state and federal regulations.~~

~~(7) The PIC or pharmacist designee shall have the responsibility to ensure that:~~

~~(a) user access to the system is assigned, discontinued or changed according to employment status and credentials;~~

~~(b) access to the medications comply with state and federal regulations; and~~

~~(c) the automated pharmacy system is filled and stocked accurately and in accordance with established written policies and procedures.~~

~~(8) The filling and stocking of all medications in the automated pharmacy system shall be accomplished by qualified licensed healthcare personnel under the supervision of a licensed pharmacist.~~

~~(9) A record of medications filled and stocked into an automated pharmacy system shall be maintained for a period of five years and shall include the identification of the persons filling, stocking and checking for accuracy.~~

~~(10) All containers of medications stored in the automated pharmacy system shall be packaged and labeled in accordance with federal and state laws and regulations.~~

~~(11) All aspects of handling controlled substances shall meet the requirements of all state and federal laws and regulations.~~

~~(12) The automated pharmacy system shall provide a mechanism for securing and accounting for medications removed from and subsequently returned to the automated pharmacy system, all in accordance with existing state and federal law. Written policies and procedures shall address situations in which medications removed from the system remain unused and must be secured and accounted for.~~

~~(13) The automated pharmacy system shall provide a mechanism for securing and accounting for wasted medications or discarded medications in accordance with existing state and federal law. Written policies and procedures shall address situations in which medications removed from the system are wasted or discarded and must be secured.~~]

Under Section 58-17b-621, an automated pharmacy system shall comply with the following:

(1) Before using an automated pharmacy system, a pharmacy shall obtain approval from the Division in collaboration with the Board by meeting with the Board.

(2) The pharmacy responsible for the automated pharmacy system shall maintain the following documentation, for review upon Division request:

(a) types of automated pharmacy system equipment, content, and location, including:

(i) name and address of the pharmacy or licensed health care facility using the automated pharmacy system;

(ii) manufacturer's name and model;

(iii) serial numbers; and

(iv) description of how the automated pharmacy system is used; and

(b) written policies and procedures for quality assurance and appropriate use of the automated pharmacy system including:

(i) operation;

(ii) safety;

(iii) security;

(iv) accuracy;

(v) automated pharmacy system malfunction;

(vi) patient confidentiality;

(vii) access to the equipment and medications;

(viii) training of personnel; and

(ix) procedures for securing and accounting for medications that are removed from the system and not used, including situations when the unused medications are wasted or discarded.

(3) The pharmacy responsible for the automated pharmacy system shall:

(a) have the documentation in Subsection (2) in place before installation of the automated pharmacy system;

(b) maintain the documentation at the site of the pharmacy, and if the automated pharmacy system is not in the facility where the pharmacy is located, at the site of the automated pharmacy system; and

(c) provide the documentation to the Division for review upon request.

(4) Filling and stocking medications in the automated pharmacy system shall be done by qualified licensed health care personnel under the supervision of a licensed pharmacist.

(5) A pharmacist shall review each prescription or medication order before dispensing the drug or removing it from an automated pharmacy system, unless:

(a) a licensed independent practitioner controls the ordering, preparation, and administration of the medication; or

(b) the pharmacist review would result in a delay that would harm the patient, including situations in which the patient experiences a sudden change in clinical status.

(6) An automated pharmacy system shall have:

(a) adequate security systems and procedures to prevent:

(i) unauthorized access; and

(ii) the illegal use or disclosure of protected health information;

(b) a mechanism for securing and accounting for medications removed from and subsequently returned to the automated pharmacy system; and

(c) a mechanism for securing and accounting for wasted medications or discarded medications.

(7) Records, including electronic data kept by an automated pharmacy system, shall meet the following requirements:

(a) each event involving the contents of the automated pharmacy system shall be recorded electronically;

(b) the pharmacy shall maintain records for five years, and keep them readily available to the Division upon request; and

(c) each record shall include:

(i) identity of the system accessed;

(ii) identity of the individual accessing the system;

(iii) identity of each individual filling, stocking, and checking for accuracy;

(iv) type of transaction;

(v) name, strength, dosage form, and quantity of the drug accessed;

(vi) name of the patient for whom the drug was ordered; and

(vii) additional information that the PIC may determine necessary.

(8) The PIC or pharmacist designee shall ensure that:

(a) user access to the automated pharmacy system is assigned, discontinued, or changed according to employment status and credentials; and

(b) the automated pharmacy system is filled and stocked accurately in accordance with policies and procedures.

R156-17b-621. Operating Standards - Pharmacist, Pharmacy Intern, and Pharmacy Technician Administration - Training.

This section establishes training standards under Subsections 58-17b-102(53), (57), and (58), and 58-17b-502(1)(i)(i).

(1) A pharmacist or pharmacy intern who will administer a prescription drug or device shall first complete the following appropriate training:

(a) current Basic Life Support (BLS) certification;

(b) for injectable drugs, didactic and practical training for administering injectable drugs;

(c) topics related to the specific prescription drug or device that will be administered;

(d) if administering vaccines, current guidelines from the Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control and Prevention (CDC); and

(e) the management of an anaphylactic reaction.

(2) A pharmacy technician who will administer a prescription drug or device shall first complete the appropriate training described in Subsections (1)(a), (b), and (e).

(3) Sources for the appropriate training include:

(a) ACPE-[-]approved programs;

(b) curriculum-based programs from an ACPE accredited college of pharmacy, or an ASHP accredited pharmacy technician program;

(c) state or local health department programs; and

(d) other Board recognized providers.

(4) An individual who engages in the administration of prescription drugs or devices shall:

(a) maintain documentation that they obtained their required training; and

(b) for each renewal cycle after their initial training, complete at least two hours of continuing education related to their administration of prescription drugs or devices, under Section R156-17b-309.

(5) The [~~"~~]Vaccine Administration Protocol[~~:~~] and Utah Guidance for Vaccine Prescription and Administration[~~ Standing Order to Administer Immunizations and Emergency Medications", adopted September, 2023, by the Division in collaboration with the Board of Pharmacy and the Utah Medical Licensing Board, as posted on the Division website, is~~] are the guidelines or standards for pharmacist

administration of vaccines and emergency medications, and for pharmacy intern or pharmacy technician administration pursuant to delegation by a pharmacist.

R156-17b-621a. Operating Standards - Pharmacist Administration of a Long-acting Injectable and Naloxone - Training.

[~~In accordance with~~]Under Subsections 58-17b-502(1)(i) and 58-17b-625(2):

(1) [~~Prior to engaging in the administration of~~]Before administering naloxone or a long-acting injectable drug [~~pursuant to~~]under Section 58-17b-625, a pharmacist shall[~~successfully complete~~]:

(a) obtain and maintain current Basic Life Support (BLS) certification; and

(b) complete a training program for administering naloxone or long-acting injectables intramuscularly that is provided by an ACPE-accredited provider.

(2) An individual who [~~engages in the administration of~~]administers naloxone or long-acting injectable drugs intramuscularly shall maintain documentation that they obtained their required training.

R156-17b-621b. Operating Standards - Pharmacist and Pharmacy Intern Dispensing of a Self-Administered Hormonal Contraceptive - Training.

This section establishes training standards under Subsection 58-17b-502(1)(n) and Section 26B-4-506.

(1) Before dispensing a self-administered hormonal contraceptive, a pharmacist or pharmacy intern shall successfully complete a training program for dispensing self-administered hormonal contraceptives that is provided by an ACPE-accredited provider and approved by the Division in collaboration with the Board.

(2) A pharmacist or pharmacy intern who engages in the dispensing of a self-administered hormonal contraceptive shall:

(a) maintain documentation that they obtained their required training before any dispensing;

(b) for each renewal cycle after the initial training, successfully complete a minimum of two hours of continuing education related to dispensing a self-administered hormonal contraceptive, in accordance with Section R156-17b-309; and

(c) review the Utah Guidance for Self-Administered Hormonal Contraceptives which can be found on the Division's website at https://[~~dopl~~]commerce.utah.gov/dopl/pharmacy/resources/.

R156-17b-622. Standards - Dispensing Training Program.

(1) [~~In accordance with~~]Under Subsection R156-17b-102(2[~~1~~]2)(c), a formal or on-the-job dispensing training program completed by a DMP designee is one that covers the following topics to the extent that the topics are relevant and current to the DMP practice where the DMP designee is employed:

(a) role of the DMP designee;

(b) laws affecting prescription drug dispensing;

(c) pharmacology, including the identification of drugs by trade and generic names, and therapeutic classifications;

(d) pharmaceutical terminology, abbreviations, and symbols;

(e) pharmaceutical calculations;

(f) drug packaging and labeling;

(g) computer applications in the pharmacy;

(h) sterile and non-sterile compounding;

(i) medication errors and safety;

(j) prescription and order entry and fill process;

(k) pharmacy inventory management; and

(l) pharmacy billing and reimbursement.

(2) Documentation demonstrating successful completion of a formal or on-the-job dispensing training program shall include the following information:

(a) name of individual trained;

(b) name of individual or entity that provided training;

(c) list of topics covered during the training program; and

(d) training completion date.

R156-17b-623. Standards - Approved Cosmetic Drugs and Injectable Weight Loss Drugs for Dispensing Medical Practitioners.

The drugs that may be dispensed by a DMP in accordance with Subsections 58-17b-802(1) and (4) and Section 58-17b-803 are limited to:

(1) the following cosmetic or injectable weight loss drugs:

(a) Latisse or generic equivalent; and

(b) the injectable weight loss drug human chorionic gonadotropin; and

(2) the following legend, non-controlled drugs:

(a) hormonal[-]-based contraception [~~unless using except~~]other than an injectable or implantable method[~~s~~];

(b) hydroquinone up to 4%; and

(c) tretinoin up to 0.1%.

R156-17b-624. Operating Standards. Repackaged or Compounded Prescription Drugs - Sale to a Practitioner for Office Use.

[~~Pursuant to~~]Under Section 58-17b-624, a pharmacy may repackage or compound a prescription drug for sale to a practitioner for office use provided that it is in compliance with all applicable federal and state laws and regulations regarding the practice of pharmacy, including[~~, but not limited to~~] the Food, Drug, and Cosmetic Act, 21 [~~U.S.C.A.~~]USC 301 et seq.

R156-17b-625. Standards - Reporting and Maintaining Records on the Dispensing of an Opiate Antagonist.

(1) [~~In accordance with~~]Under Subsections [~~26-55-105~~]26B-4-510([~~2~~]3)(c) and (d), the pharmacist-in-charge or a responsible corporate officer of each pharmacy licensee that dispenses an opiate antagonist pursuant to a valid standing prescription drug order issued by a physician[~~,~~] shall:

(a) affirm that the pharmacy licensee has complied with the protocol for dispensing an opiate antagonist as set forth in Section [~~26-55-105~~]26B-4-510;[~~,~~] and[~~- shall -~~]

(b) annually report[~~, on an annual basis,~~] to the [~~d~~]Division and to the physician who issued the opiate antagonist standing drug order, the following information:

([~~a~~]i) the total number of single doses of opiate antagonists dispensed during the reporting period;[~~- and~~]

([~~b~~]ii) the name of each opiate antagonist dispensed[~~, along with~~]; and

(iii) the total number of single doses of [~~that particular~~]each named opiate antagonist.

(2) Corporations or organizations with multiple component pharmacy licenses may submit one cumulative report for all [~~its~~]component pharmacy licensees so long as the report [~~. However, that report must -~~]contains the information described [~~above~~]in Subsection (1) for each of the component pharmacy licensees.

(3) [~~Null reporting is not required. -~~]If a pharmacy licensee does not dispense an opiate antagonist during any year, [~~that pharmacy~~]the licensee is not required to make an affirmation or report to the [~~d~~]Division.

(4) The annual affirmation and report [~~described above is due~~]shall be submitted to the [~~d~~]Division and to the physician who issued the standing drug order no later than 15 days following December 31 of each calendar year.

(5) [~~In accordance with~~]Under Subsection [~~26-55-105~~]26B-4-510([~~2~~]3)(d), a pharmacy licensee who dispenses an opiate antagonist pursuant to a valid standing prescription order issued by a physician, shall maintain, subject to audit, the following information:

(a) the name of the individual to whom the opiate antagonist is dispensed;

(b) the name of the opiate antagonist dispensed;

(c) the quantity of the opiate antagonist dispensed;

(d) the strength of the opiate antagonist dispensed;

(e) the dosage quantity of the opiate antagonist dispensed;

(f) the full name of the drug outlet which dispensed the opiate antagonist;

(g) the date the opiate antagonist was dispensed; and

(h) the name of the physician issuing the standing order to dispense the opiate antagonist.

(6) The [~~d~~]Division approves the protocol for the issuance of a standing prescription drug order for opiate antagonists that meets the requirements of Subsection 26B-4-510(3) and Sections R156-17b-625, R156-67-604, and R156-68-604[~~, which is set forth in Subsection 26-55-105(2)(a) through (d) along with the requirements set forth in the foregoing provisions, and the reporting requirements set forth in Sections R156-67-604 and R156-68-604~~].

R156-17b-626. Operating Standards - Appropriate Substitutes for Albuterol.

(1) [~~In accordance with~~]Under Subsections 58-17b-601(1) and 58-17b-605(9), a pharmacist or pharmacy intern may make appropriate substitutes for an albuterol inhaler with any brand or proprietary name albuterol product that has the same milligram dose per actuation.

(2) The pharmacist or pharmacy intern shall document an albuterol substitution on the prescription hard copy or in the medication profile system.

R156-17b-627. Operating Standards - Prescription of Drugs or Devices by a Pharmacist.

(1) Under Subsection 58-17b-601(1) and Sections 58-17b-602, 58-17b-609, and 58-17b-627, a pharmacist from a Class A or Class B pharmacy may prescribe a prescription drug or device as follows:

(a) Before prescribing, the pharmacist shall conduct a patient assessment that includes:

(i) current health status;

(ii) past medical history;

(iii) allergies;

(iv) medication sensitivities;

(v) rationale for care;

(vi) current medication; and

(vii) if the pharmacist should refer the patient to an appropriate health care provider or otherwise encourage the patient to seek further medical care.

(b) The pharmacist shall follow the guidelines for prescribing health care providers established by:

(i) the Centers for Disease Control and Prevention;

(ii) nationally accepted guidelines; and

(iii) the Department of Health and Human Services and the Division in collaboration with the Board, in the guidance documents incorporated by reference in Section R156-17b-102[~~Subsection (2)(a)~~].

[~~(c) The pharmacist shall comply with the requirements of Sections 58-17b-602 and 58-17b-609.~~]

([~~d~~]c) The pharmacist shall develop and implement an appropriate follow-up care plan with the patient that includes:

(i) monitoring parameters for efficacy and safety;

(ii) adverse reactions; and

(iii) further medical care.

([~~e~~]d)[~~(i)(A)~~] The pharmacist shall notify the patient's primary care or other health care provider [~~about~~]of the prescription:

(i) within five business days of the prescribing[~~.~~]; and

([~~B~~]ii) [~~The prescription notification may be conveyed~~]in writing, by electronic transmission, or by telephone.

([~~C~~]e) If the patient does not have a primary care or other health care provider, the pharmacist shall provide the prescription notification to the patient.

([~~D~~]f) The pharmacy shall maintain the prescription notification in the patient record for at least five years from the date of notification, in an immediately retrievable written or electronic format.

([~~ii~~]g) Each prescription notification shall include the following:

([~~A~~]i) prescribing pharmacist;

([~~B~~]ii) pharmacy name;

([~~C~~]iii) pharmacy phone number;

([~~D~~]iv) patient;

([~~E~~]v) patient date of birth;

([~~F~~]vi) drug or device;

([~~G~~]vii) if dispensed, dispensed quantity;

([~~H~~]viii) directions for use;

([~~I~~]ix) refill; and

([~~J~~]x) identity of the patient's primary care or other health care provider, if any.

(2)[~~(a)~~] A pharmacist may prescribe drugs or devices under Subsection 58-17b-627(3)(a) as established in the following guidance documents posted on the Division's website at [~~dopl.utah.gov/pharm~~]https://commerce.utah.gov/dopl/pharmacy/resources/:

([~~i~~]a) Utah Guidance for PrEP and PEP[~~Pre-Exposure and Post-Exposure Prophylaxis of HIV, adopted September 28, 2021~~];

([~~ii~~]b) Utah Guidance for Self-Administered Hormonal Contraceptives[~~, adopted September 28, 2021~~];

([~~iii~~]c) Utah Guidance for Tobacco Cessation Products[~~, adopted September 28, 2021~~];[~~ and~~]

([~~iv~~]d) Utah Guidance for Naloxone;[~~, adopted September 28, 2021.~~]

(e) Utah Guidance for Fluoride;

(f) Utah Guidance for Vaccine Prescription and Administration; and

(g) Utah Guidance for Epinephrine.

[~~(b) The Division incorporates by reference the guidance documents in Subsection (2)(a).~~]

(3)(a) The Department of Health and Human Services may submit to the Division a written proposal that includes:

(i) under Subsection 58-17b-627(3)(a), designated public health concerns that the Department of Health and Human Services has determined can be addressed through pharmacist prescribing of drugs or devices; and

(ii) recommendations for updates to the guidance documents in Subsection (2); and

(b) after receipt of the [~~designation~~]proposal, the Division:

(i) shall contact the Department of Health and Human Services to review [~~its~~]the proposal;[~~ and~~]

(ii) may review Division rules and the guidance documents in Subsection (2) in response to the proposal; and

(iii) may [~~review~~]amend [~~the~~]Division rules [~~made by the Division, including~~]and the guidance documents in Subsection (2)[~~,~~] in accordance with Subsections 58-17b-627(3) and (4).

[~~(4) The Division shall review the guidance documents in Subsection (2) biennially, in collaboration with:~~

~~(a) the Board;~~

~~(b) the individuals identified in Subsection 58-17b-627(4); and~~

~~(c) other persons as determined by the Division.~~]

R156-17b-628. Operating Standards - Prescriptions Issued Within the Public Health System.

[~~(1) ~~]Under Subsections 58-17b-620(7) and (8), a nurse employed by a health department and licensed under Title 58, Chapter 31b, Nurse Practice Act, may dispense a drug to treat a sexually transmitted infection if the requirements of Subsection 58-17b-620(7) are met and in accordance with[~~ as established in~~] the Utah Guidance for Dispensing by Health Department Nurse of STI Drug, [~~adopted August 23, 2022,~~]which is incorporated by reference in Section R156-17b-102 and posted on the Division's website at [~~dopl.utah.gov/pharm~~]https://commerce.utah.gov/dopl/pharmacy/resources/.

[~~(2) The Division incorporates by reference the guidance document in Subsection (1).~~]

R156-17b-901. Operating Standards - Charitable Prescription Drug Recycling Program.

(1) Under Sections 58-17b-903 and 58-17b-907, the operating standards for the Charitable Prescription Drug Recycling Program under Title 58, Chapter 17b, Part 9, Charitable Prescription Drug Recycling Act, are established in this section.

(2) The Division in collaboration with the Board has not established a date later than the beyond use date or the expiration date recommended by the manufacturer for a specific prescription drug.

(3) Under Subsection 58-17b-905(2)(e), an eligible pharmacy may charge the following handling fees:

(a) before accepting a prescription drug under the program: $0 - $10; and

(b) before dispensing a prescription drug under the program: $0 - $5.

(4) A pharmacy seeking registration with the Division as an eligible pharmacy shall submit an application on a form provided by the Division and establish that the pharmacy:

(a) is currently licensed and in good standing with the Division;

(b) agrees to maintain, subject to inspection by the Division, written standards and procedures in compliance with Subsection (6);

(c) agrees to create and maintain, subject to inspection by the Division, a special training program in accordance with Subsection (8); and

(d) meets the requirements of Subsection 58-17b-902(8)(b).

(5) The formulary established under Subsection 58-17b-907(2) shall include each prescription drug approved by the federal Food and Drug Administration that meet Section 58-17b-904 criteria, except for:

(a) controlled substances;

(b) compounded drugs; and

(c) drugs that can only be dispensed to a patient registered with the drug's manufacturer per federal Food and Drug Administration requirements.

(6) An eligible pharmacy shall maintain written standards and procedures available for inspection by the Division that:

(a) satisfy the requirements of Section 58-17b-907; and

(b) satisfy labeling requirements of Subsections 58-17b-602(5) through (8), and ensure that labels clearly identify the eligible drug was dispensed under the program.

(7)(a) Under Subsection 58-17b-907(4)(a), the Division shall schedule and facilitate an annual meeting between the Department of Health and Human Services and eligible pharmacies to establish program standards and procedures for assisted living facilities and nursing care facilities.

(b) Under Subsection 58-17b-907(4)(b), the Division shall schedule and facilitate an annual meeting between the Division of Substance [~~Abuse~~]Use and Mental Health and eligible pharmacies to establish program standards and procedures for mental health and substance abuse clients.

(8) An eligible pharmacy shall:

(a) create and maintain a special training program that its pharmacists and licensed pharmacy technicians shall complete before participating in the program; and

(b) maintain a record for at least two years of each pharmacist and licensed pharmacy technician that has completed the special training program.

R156-17b-1005. Operating Standards -- Standing Prescription Orders for Emergency Medications Use as School Stock.

(1) [~~In accordance with~~]Under Subsection 58-17b-601(1), the Division approves [~~all~~]standing orders required by statute and issued by the Utah Department of Health and Human Services relating to dispensing of emergency use medication to be held as school stock.

(2) Authorized standing orders referenced in Subsection [~~1005~~](1) can be found on the Division's website at https://[~~dopl~~]commerce.utah.gov/dopl/pharmacy/resources/.

KEY: pharmacists, licensing, pharmacies
Date of Last Change: [~~August 8, 2025~~]2026
Notice of Continuation: August 5, 2024
Authorizing, and Implemented or Interpreted Law: 63G-3-201; 58-17b-101; 58-17b-601(1); 58-37-1; 58-1-106(1)(a); 58-1-202(1)(a)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58392**
Rule or section number:	**R156-24b**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Lisa Martin	801-530-7632	lmartin@utah.gov

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

3. General Information

A. Rule or section catchline:
R156-24b. Physical Therapy Practice Act Rule
B. Purpose of the new rule or reason for the change:
The Division of Professional Licensing (Division) in collaboration with the Physical Therapies Licensing Board is filing these proposed amendments in accordance with statutory changes made by SB 31 that passed in the 2026 General Session and became effective on 05/06/2026. SB 31 (2026) permits physical therapists and occupational therapists to prescribe durable medical equipment, expands the medical imaging a physical therapist may order, allows a physical therapist assistant to perform limited joint mobilization, gives the Division rulemaking authority for occupational therapists, and aligns dry needling language for occupational therapists and physical therapists. The proposed amendments also align this rule with Office of Administrative Rules (OAR) drafting requirements and Division standards.
C. Summary of the new rule or change:
Section R156-24b-102 is amended to add definitions for "fellowship," "independent study," "research," and "residency." The proposed amendments also update citations and renumber the subsections to accommodate the newly added definitions. Section R156-24b-302a is amended to update citations. Section R156-24b-303a is amended to rename the catchline to match Division standards. Section R156-24b-303b is amended to more clearly state the requirements for continuing education and which activities may be counted toward continuing education requirements. Section R156-24b-306 is amended to remove the term "trigger point" as that term was removed from statute. Section R156-24b-404 is amended to update citations and increase the number of full-time equivalent supportive personnel that can be supervised at one time from three to five. Section R156-24b-502 is amended to cite the version of the guidance incorporated by reference rather than when it was last amended.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 31 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
The Division does not anticipate any fiscal impact to the state budget beyond that determined by the fiscal note for SB 31 (2026), at https://le.utah.gov/~2026/bills/static/SB0031.html, because the proposed amendments clarify and update this rule to be current and accurate for licensees.
B. Local governments:
The Division does not anticipate any cost or savings to local governments from the proposed amendments because the proposed amendments do not apply to local governments.

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

There are approximately 461 small businesses in Utah with physical therapists and physical therapist assistants (NAICS 621340) and other similar licensees and who may employ those engaged in physical therapy (this NAICS code covers professions beyond physical therapy as well).

However, the proposed amendments are not expected to have any measurable impact on small businesses' revenues or expenditures beyond the fiscal note for SB 31 (2026) because the amendments merely implement the expansion in permissible activities for the profession and other statutory changes enacted by SB 31 (2026) and reorganize, streamline, and update this rule to provide more utility to licensees and to comply with OAR drafting requirements and Division standards.

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

There are approximately 8 non-small businesses in Utah with physical therapists and physical therapist assistants (NAICS 621340) and other similar licensees and who may employ those engaged in physical therapy (this NAICS code covers professions beyond physical therapy as well).

However, the proposed amendments are not expected to have any measurable impact on non-small businesses' revenues or expenditures beyond the fiscal note for SB 31 (2026) because the amendments merely implement the expansion in permissible activities for the profession and other statutory changes enacted by SB 31 (2026) and reorganize, streamline, and update this rule to provide more utility to licensees and to comply with OAR drafting requirements and Division standards.

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***)**:**

In Utah, there are:
a) 3,486 licensed physical therapists;
b) 1,214 licensed physical therapist assistants;
c) 5 physical therapists with temporary licenses;
d) 3 physical therapist assistants with temporary licenses; and
e) 1 licensed volunteer physical therapist.

The Division does not anticipate any cost or savings from these proposed amendments to these persons or to additional persons other than small businesses, non-small businesses, the state, or local government entities, because the amendments merely implement the statutory changes enacted by SB 31 (2026) and reorganize, streamline, and update this rule to provide more utility to licensees and to comply with OAR drafting requirements and Division standards.

The proposed rule amendments will not create new obligations for other persons or increase the costs associated with any existing obligations for other persons.

F. Compliance costs for affected persons:

As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-24b-101

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/03/2026	09:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 402 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/ors-ramo-ibs Or dial: (US) +1 405-695-6158 PIN: 712 805 685# More phone numbers: https://tel.meet/ors-ramo-ibs? pin=6053324725974

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/26/2026

R156. Commerce, Professional Licensing.
R156-24b. Physical Therapy Practice Act Rule.
R156-24b-101. Title - Authority - Relationship to Rule R156-1.

(1) This rule is known as the "Physical Therapy 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 24b, Physical Therapy Practice Act.

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

R156-24b-102. Definitions.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 24b, Physical Therapy Practice Act. In addition:

(1) "APTA" means the American Physical Therapy Association.

(2) "Credential evaluation" as used in Subsections R156-24b-302a(3) and (5)(b) means an educational evaluation using the Coursework Tool (CWT) owned by the Federation of State Boards of Physical Therapy to evaluate the educational equivalency of a physical therapy program outside of the United States to a CAPTE-approved program.

(3) "CAPTE" means the Commission on Accreditation in Physical Therapy Education.

(4) "Continuing education" or "CEU" means qualified continuing professional education that meets the standards in Section R156-24b-303b.

(5) "Fellowship" as used in Section R156-24b-303 means a post-professional program focused on a defined area of practice for professionals who have already completed a residency, or who are board-certified by the American Board of Physical Therapy Specialties (ABPTS) in a related area of specialty.

([~~5~~]6) "FCCPT" means the Foreign Credentialing Commission on Physical Therapy.

([~~6~~]7) "FSBPT" means the Federation of State Boards of Physical Therapy.

(8) "Independent study" as used in Section R15-24b-303 means structured learning experiences by an individual that take place outside of traditional learning environments.

([~~7~~]9) "Joint mobilization" as used in Subsections 58-24b-102(1[~~5~~]4)(d)(iii), [~~and~~]58-24b-402(2)([~~d~~]e), and 58-24b-402(3) means a manual therapy technique comprising a continuum of skilled passive movements to a joint or related soft tissue that is applied at varying speeds and amplitudes including a high-velocity low-amplitude (HVLA) therapeutic movement.

([~~8~~]10) "NPTE" means the National Physical Therapy Examination administered by the FSBPT and includes:

(a) the NPTE for Physical Therapists (NPTE-PT) licensure; or

(b) the NPTE for Physical Therapist Assistants (NPTE-PTA) licensure.

([~~9~~]11) "Recognized accreditation agency" as defined in Subsection 58-24b-102(12) and used in Section 58-24b-302 means [~~a physical therapy education program that is accredited by~~]CAPTE or another accreditation agency that is approved by the Division in collaboration with the Board.

(12) "Research" as used in Section R156-24b-303 means contribution to a research project through data collection, project development, or consultation.

(13) "Residency" as used in Section R156-24b-303 means a post-professional program that focuses on a defined area of physical therapy practice.

(1[~~0~~]4) "Routine assistance" as used in Subsections 58-24b-102(11)(b) and 58-24b-401(3)(b) means the physical therapy aide:

(a) engages in the assembly, disassembly, maintenance, transportation, preparation, and other operational activities relevant to the equipment and accessories necessary for treatment; and

(b) provides elementary and direct patient care that the patient and the patient's family members could reasonably be expected to learn and perform.

(1[~~1~~]5)(a) "Supportive personnel" as used in Subsections R156-24b-404(1) and (2) means a physical therapist assistant or a physical therapy aide.

(b) "Supportive personnel" does not include a student in:

(i) a physical therapist program; or

(ii) a physical therapist assistant program.

R156-24b-302a. Qualifications for Licensure - Education Requirements.

(1) Under Subsection 58-24b-302(1)(b), an applicant for licensure as a physical therapist who completed a physical therapy education program in a state, district, or territory of the United States shall:

(a) graduate from a physical therapy education program that is CAPTE-accredited; and

(b) ensure that the applicant's education institution sends one of the following directly to the Division:

(i) the applicant's transcript showing the applicant graduated from the institution's CAPTE-accredited physical therapy education program; or

(ii) a letter from the program director or another authorized official that includes:

(A) a statement that the applicant graduated from the education institution's CAPTE-accredited physical therapy education program;

(B) a signature of the program director or authorized official; and

(C) the school's seal.

(2) Under Subsection 58-24b-302(2)(b), an applicant for licensure as a physical therapist assistant who completes an education program in a state, district, or territory of the United States shall:

(a) graduate from a CAPTE-accredited:
(i) physical therap[~~y~~]ist assistant education program; or
(ii) physical therapy education program; and
(b) ensure that the applicant's education institution sends one of the following directly to the Division:
(i) the applicant's transcript showing the applicant graduated from the institution's CAPTE-accredited:
(A) physical therap[~~y~~]ist assistant education program; or
(B) physical therapy education program; or
(ii) a letter from the program director or another authorized official that includes:
(A) a statement that the applicant graduated from the education institution's CAPTE-accredited:
(I) physical therap[~~y~~]ist assistant education program; or
(II) physical therapy education program;
(B) a signature of the program director or authorized official; and
(C) the school's seal.

(3) Under Subsections 58-1-302(3) and 58-24b-302(3)(b)(ii), an applicant for physical therapist licensure who is educated outside the United States shall submit to the Division a Type 1 Review credential evaluation from the FCCPT that verifies:
(a) the applicant meets the requirements of Subsection 58-24b-302(3)(d); and
(b) the applicant's education program:
(i)(A) has no deficiencies; and
(B) is the equivalent to a CAPTE-approved program; or
(ii) meets the following requirements:
(A) the education program is deficient;
(B) each deficiency in the education program is in one of the following pre-professional topic areas:
(I) the humanities;
(II) the social sciences;
(III) the liberal arts;
(IV) the physical sciences;
(V) the biological sciences;
(VI) the behavioral sciences;
(VII) mathematics; or
(VIII) advanced first aid for health care workers;
(C) the applicant corrected each deficiency by:
(I) completing college level credits in the deficient area; or
(II) passing the College Level Examination Program (CLEP) demonstrating proficiency in the deficient area; and
(D) the FCCPT determined that the applicant's education program and the completed corrective education under Subsection (3)(b)(ii)(C) is equivalent to a CAPTE-accredited physical therapy program.

(4) Under Subsection 58-24b-302(4), an applicant who holds a current unrestricted physical therapist license or physical therapist assistant license issued by another state, district, or territory of the United States, other than Utah shall:
(a) ensure that the applicant's education institution sends documentation directly to the Division that meets the requirements of Subsection (1)(b) or (2)(b); or
(b) ensure that the FSBPT sends the applicant's passing score transfer directly to the Division.

(5) Under Subsection 58-24b-302(2)(b), an applicant for physical therapist assistant licensure shall meet the following requirements:
(a) graduate from a physical therapist assistant education program that is accredited by CAPTE with one of the following degrees:
(i) an associate's degree;
(ii) a bachelor's degree; or
(iii) a master's degree; or
(b) under Subsection ([~~1~~]2)(b) and Section 58-1-302, if the applicant was licensed or educated in a jurisdiction outside the United States, the applicant shall submit to the Division a credential evaluation from the FCCPT that meets the requirements of Subsections (3)(a) and (b).

R156-24b-302b. Qualifications for Licensure - Examination Requirements.

(1) Under Subsections 58-24b-302(1)(c) and (f) and 58-24b-302(3)(c) and (f), an applicant for physical therapist licensure shall pass the NPTE-PT.

(2) Under Subsections 58-24b-302(2)(c) and (f), an applicant for physical therapist assistant licensure shall pass the NPTE-PTA.

(3) An applicant for licensure shall ensure that the FSBPT sends the applicant's passing examination score directly to the Division.

(4) An applicant for licensure as a physical therapist who fails the NPTE-PT is eligible to register with FSBPT to sit for the NPTE-PTA examination.

R156-24b-303a. [~~Term, Expiration, Renewal, and Reinstatement of License~~]Licensing Term - Renewal and Reinstatement Procedures.

(1) Under Subsections 58-1-308(1) and 58-24b-303(1), the renewal date for the two-year renewal cycle for licensees under Title 58, Chapter 24b, Physical Therapy Practice Act, is established in Section R156-1-308a.

(2) Renewal and reinstatement procedures shall be in accordance with Sections R156-1-308a through R156-1-308l, except as provided in Subsection (3).

(3) Under Subsection 58-1-308(5)(a)(ii)(B) and except as in Subsections 58-1-308(6)(b) and (7), an applicant whose license was active and in good standing when it expired may apply for reinstatement of licensure between two years and five years after the date of expiration if the applicant meets the following practice reentry requirements:

(a) the applicant shall:

(i) submit an application demonstrating compliance with each requirement and condition of license renewal;

(ii) pay all license renewal and reinstatement fees for the current renewal period; and

(iii) submit evidence of completion of qualified continuing professional education hours for each renewal period in which the license was expired;

(b) if not previously completed, the applicant shall submit to and pass a criminal background check under Section 58-1-301.5; and

(c) the applicant shall complete one or more of the following practice reentry requirements, if required by the Division in collaboration with the Board:

(i) meet with the Board to evaluate the applicant's:

(A) qualifications for licensure; and

(B) ability to safely and competently practice physical therapy;

(ii) pass the NPTE-PT or NPTE-PTA, if the Division in collaboration with the Board determines that examination or reexamination is necessary to verify the applicant's ability to safely and competently practice;

(iii) complete a plan of supervision under a Board-approved supervisor that may include up to 4,000 hours of physical therapy training under a temporary physical therapist license or a temporary physical therapist assistant license before the applicant may qualify for full reinstatement of the license; or

(iv) comply with each additional licensure requirement or condition considered necessary by the Division in collaboration with the Board to protect the public and ensure that the applicant is currently competent to engage in the profession.

R156-24b-303b. Continuing Education.

[~~(1) Under Subsection 58-24b-303(2), the continuing education requirement for a physical therapist or physical therapist assistant during each two-year renewal cycle commencing on June 1 of each odd numbered year are established in this section.~~

~~(2) As used in this section:~~

~~(a) "Contact hour" means 50 continuous minutes of participation in a continuing education activity without a break period.~~

~~(b) "Continuing Education Unit" or "CEU" means the standard unit of measurement to signify a licensee's completion of participation in a continuing education activity.~~

~~(c) "Category I" CEU means:~~

~~(i) a fellowship, residency, specialty certification, degree awarding education program, or in-person attendance at a live educational program event in which participants can interact with the presenter in real time; and~~

~~(ii) one contact hour of Category I CEU equals two continuing education units.~~

~~(d) "Category II" CEU means:~~

~~(i) in-person attendance at live educational coursework or a live education program in a school setting, an electronic course with assessment, volunteer service, clinical instructor supervision, or teaching a physical therapy education course; and~~

~~(ii) one contact hour of Category II CEU equals 1 and 1/2 continuing education units.~~

~~(e) "Category III" CEU means:~~

~~(i) electronic physical therapy educational coursework without assessment or examination, in-service presentations, self-study, journal clubs, or ethics or law coursework; and~~

~~(ii) one contact hour of Category III CEU equals one continuing education unit.~~

~~(f) "Category IV" CEU means:~~

~~(i) licensed practice by a physical therapist or physical therapist assistant, up to a total of 500 hours; and~~

~~(ii) 50 practice hours of Category IV CEU equals one CEU.~~

~~(g) "Clinical instructor supervision" means the supervision of one or more:~~

~~(i) non-physical therapy students;~~

~~(ii) physical therapist assistants; or~~

~~(iii) physical therapy students.~~

~~(h) "Fellowship" means a post-professional program focused on a defined area of practice for professionals who have already completed a residency, or who are board-certified by the American Board of Physical Therapy Specialties (ABPTS) in a related area of specialty.~~

~~(i) "Group study" means a group of two or more licensed professionals that regularly meets to discuss shared areas or fields of learning, with topics that advance professional skill and experience.~~

~~(j) "Independent study" means structured learning experiences by an individual that take place outside of traditional learning environments.~~

~~(k) "Publication" means activities undertaken by an author or coauthor to design or implement, research, draft, edit, and submit material for publication.~~

~~(l) "Renewal educational coursework" means live, in-person, or electronic education with assessment undertaken in traditional learning environments, academic coursework, lectures, seminars, conferences, or workshops.~~

~~(m) "Research" means contribution to a research project through data collection, project development, or consultation.~~

~~(n) "Residency" means a post-professional program that focuses on a defined area of physical therapy practice.~~

~~(o) "Volunteer service" means services provided at no charge that rely on the skills and advance the professional competence of a physical therapist or physical therapist assistant, such as serving on a professional board or providing services at a health fair screening.~~

(3) During each two-year renewal cycle, a physical therapist shall complete at least 40 CEUs, of which at least two CEUs shall be in ethics or law. A physical therapist who completes more than the required number of CEUs during a two-year renewal cycle may carry over up to ten excess CEUs to the next two-year renewal cycle.

(4) During each two-year renewal cycle, a physical therapist assistant shall complete at least 20 CEUs, of which at least two CEUs shall be in ethics or law. A physical therapist assistant who completes more than the required number of CEUs during a two-year renewal cycle may carry over up to five excess CEUs to the next two-year renewal cycle.

(5) If a licensee first becomes licensed during the two-year renewal period, the licensee's required number of CEUs shall be decreased proportionately according to the date of licensure.

(6) The Division may defer or waive CEU requirements under Section R156-1-308d.

(7) A licensee may not apply continuing education or coursework education, including professional upgrades, that the licensee received before being granted a license, to CEUs required after the license is granted.

(8) CEU credit shall be recognized as follows, during each two-year renewal cycle:

(a) for clinical instructor supervision CEUs, up to ten CEUs for a physical therapist and up to five CEUs for a physical therapist assistant;

(b) for lecturing or instructing a course at an accredited university or college, continuing education course, or as an invited guest lecturer, up to ten CEUs for a physical therapist and up to five CEUs for a physical therapist assistant, subject to the following:

(i) one CEU shall be awarded for each hour of instruction;

(ii) credit shall be awarded for lecturing or instructing the same course up to two times; and

(iii) documentation of completion shall include a certificate or record from the human resources department.

(c) for volunteer service CEUs, up to ten CEUs for a physical therapist and up to five CEUs for a physical therapist assistant; and

(d) for practice hours CEUs, up to ten CEUs for a physical therapist and up to five CEUs for a physical therapist assistant.

(9) A continuing education course for a physical therapist or physical therapist assistant shall meet the following requirements:

(a) have content relevant to the practice of physical therapy;

(b) have learning objectives that are clearly stated in course material;

(c) be prepared and presented by individuals who are qualified by education, training, and experience; and

(d) be approved by, conducted by, or under the sponsorship of one of the following:

(i) a recognized accredited college or university;

(ii) a state or federal agency;

(iii) a professional association, organization, or facility involved in the practice of physical therapy; or

(iv) a commercial continuing education provider;

(e) may be completed as any of the following:

(i) department in-service;

(ii) seminar;

(iii) lecture;

(iv) conference;

(v) training session;

(vi) webinar;

(vii) internet course;

(viii) distance learning course;

(ix) journal club;

(x) authoring of a scholarly peer-reviewed journal article or textbook publication;

(xi) poster platform presentation;

(xii) specialty certification through the American Board of Physical Therapy Specialties;

(xiii) post-professional clinical residency or fellowship approved by the American Physical Therapy Association;

(xiv) post-professional doctorate from a CAPTE accredited program;

(xv) lecturing or instructing a continuing education course; or

(xvi) study of a scholarly peer-reviewed journal article; and

(f) for an ethics or law continuing education course, include any of the following subjects:

(i) patient-physical therapist relationships;

(ii) confidentiality;

(iii) documentation;

(iv) charging and coding;

(v) compliance with state or federal laws that impact the practice of physical therapy; or

(vi) a subject in the American Physical Therapy Association Code of Ethics or Guide for Professional Conduct.

(10) A licensee shall maintain adequate documentation as proof of compliance with this section, such as certificate of compliance, school transcript, course description, or other course materials, for two years after the end of the renewal cycle for which the continuing education is due, as follows:

(a) at minimum, CEU course documentation shall include:

(i) date of the course;

(ii) name of the course provider;

(iii) name of the instructor;

(iv) course title;

~~(v) course objectives; and~~
~~(vi) number of contact hours of continuing education credit; and~~
~~(b) if the CEU is self-directed, such as independent study, group study, authoring, or in-service, documentation shall include:~~
~~(i) dates of study or research;~~
~~(ii) title and an abstract of an article, textbook chapter, poster, or platform presentation;~~
~~(iii) objectives of a self-study course; and~~
~~(iv) number of contact hours of continuing education credit.~~]

(1) Under Subsection 58-24b-303(2), the continuing education requirements for renewal or reinstatement of licensure as a physical therapist or physical therapist assistant under Title 58, Chapter 24b, Physical Therapy Practice Act, are established in this section.

(2) During each two-year renewal cycle, a physical therapist shall complete at least 40 CEUs, of which at least two CEUs shall be in ethics or law.

(3) During each two-year renewal cycle, a physical therapist assistant shall complete at least 20 CEUs, of which at least two CEUs shall be in ethics or law.

(4) Each hour of continuing professional education may include a 10-minute break unless otherwise stated.

(5) A continuing education course for a physical therapist or physical therapist assistant shall meet the following requirements:

(a) have content relevant to the practice of physical therapy;

(b) have learning objectives that are clearly stated in course material;

(c) be prepared and presented by individuals who are qualified by education, training, and experience; and

(d) be approved by, conducted by, or under the sponsorshi8p of one of the following:

(i) a recognized accredited college or university;

(ii) a state or federal agency;

(iii) a professional association, organization, or facility involved in the practice of physical therapy; or

(iv) a commercial continuing education provider; and

(e) for an ethics of law continuing education course, include any of the following subjects:

(i) patient-physical therapist relationships;

(ii) confidentiality;

(iii) documentation;

(iv) charging and coding;

(v) compliance with state or federal laws that impact the practice of physical therapy; or

(vi) a subject in:

(A) the American Physical Therapy Association Code of Ethics, August 2020 version; or

(B) the American Physical Therapy Association Guide for Professional Conduct, March 2019 version.

(6) Credit for continuing education during each two-year cycle shall be recognized as follows:

(a) for clinical instructor supervision, up to ten CEUs for a physical therapist and up to five CEUs for a physical therapist assistant;

(b) for lecturing or instructing a course at an accredited university or college, continuing education course, or as an invited guest lecturer in accordance with the following:

(i) up to ten CEUs for a physical therapist and up to five CEUs for a physical therapist assistant;

(ii) one CEU for each hour of instruction;

(iii) credit shall be awarded for lecturing or instructing the same course up to two times; and

(iv) documentation of completion shall include a certificate or record from the human resources department of the university, college, or continuing education course provider;

(c) for participating in a fellowship, residency, or specialty certification, two CEUs shall be awarded per one participation hour; and

(d) for providing direct patient care volunteer services, continuing education credit shall be awarded in accordance with Subsection R156-1-308d(3).

(7) A licensee shall maintain documentation sufficient to prove compliance with this section for a period of two years after the end of the renewal cycle for which the continuing education is due, as follows:

(a) CEU course documentation shall include:

(i) date of the course;

(ii) name of the course provider;

(iii) name of the instructor;

(iv) course title;

(v) course objectives; and

(vi) number of contact hours of continuing education credit; and

(b) if the CEU is self-directed, such as independent study, authoring, or in-service, documentation shall include:

(i) dates of study, research, or service;

(ii) title and an abstract of an article, textbook chapter, poster, or platform presentation, if applicable;

(iii) objectives of a self-study course, if applicable; and

(iv) number of contact hours of continuing education credit.

(8) If a licensee first becomes licensed during the two-year renewal cycle, the licensee's required number of continuing education hours shall be decreased proportionately according to the date of licensure.

(9) The Division may defer or waive continuing education requirements as provided in Section R156-1-308d.

R156-24b-305. Temporary Licensure.

(1) Under Subsection 58-1-303(1), the Division may issue a temporary physical therapist license or temporary physical therapist assistant license to an applicant who meets each qualification for licensure as a physical therapist or physical therapist assistant except for the passing of the required examination if the applicant meets the following requirements:

(a) has graduated from a CAPTE-accredited physical therapy school within three months before submitting an application for licensure;

(b) is under the direct and on-site supervision of a physical therapist who has an active and non-temporary license, if the applicant is employed as a physical therapist; and

(c) has registered with the FSBPT to take the required licensure examination.

(2) A temporary physical therapist license or temporary physical therapist assistant license issued under Subsection (1) expires the earlier of:

(a) six months from the issuance date;

(b) the date the examination agency notifies the Division that the applicant has failed the examination; or

(c) the date that the Division issues the full licensure to the applicant.

(3) A temporary physical therapist license or temporary physical therapist assistant license issued under this section may not be renewed or extended except as in Subsection 58-1-302(6)(c)(ii).

R156-24b-306. [~~Trigger Point~~]Dry Needling - Education and Experience Required - Registration.

(1) Under Subsection 58-24b-306(1)(b)(i), for a [~~trigger point~~]dry needling course to be approved by the Division, the course shall be, approved, conducted, or sponsored by one of the following:

(a) a recognized accredited college or university;

(b) a state or federal agency;

(c) a professional association, organization, or facility involved in the practice of physical therapy; or

(d) the Board.

(2) Under Subsections 58-24b-306(1)(e) and (2)(b), a physical therapist shall complete an approved [~~trigger point~~]dry needling course and required supervised patient treatment hours under Subsection 58-24b-306(1)(b)(ii)(B) within three calendar years from the date the course started.

(3) Under Subsection 58-24b-306(1)(c), a physical therapist who completes the [~~trigger point~~]dry needling course shall register with the Division by submitting:

(a) a completion certificate for the course that is issued by the organization that approved, conducted, or sponsored the course under Subsection (1); and

(b)(i) a log verifying completion of the physical therapist's supervised patient treatment hours under Subsection 58-24b-306(1)(b)(ii)(B); or

(ii) a letter from the supervising physical therapist that:

(A) states that the supervised physical therapist completed the supervised patient treatment hours required under Subsection 58-24b-306(1)(b)(ii)(B);

(B) is on the letterhead of the supervising physical therapist's organization; and

(C) is signed by the supervising physical therapist.

R156-24b-404. Physical Therapist Supervisory Authority and Responsibility.

(1) Under Section 58-24b-404, a physical therapist who supervises supportive personnel as defined in Subsection R156-24b-102(1[~~.~~]5) shall meet the requirements of this section.

(2) A full-time physical therapist may supervise up to [~~three~~]five full-time equivalent supportive personnel at one time unless otherwise approved by the Division in collaboration with the Board.

(3) A supervising physical therapist shall:

(a) meet each patient of the supervised physical therapist assistant at least every tenth visit or within 30 days from the last date the supervising physical therapist met with the patient, whichever is sooner; and

(b) further assess the patient, evaluate treatment, and modify the patient's treatment plan.

R156-24b-502. Unprofessional Conduct.

Under Subsection 58-24b-502(4), "unprofessional conduct" includes:

(1) as a physical therapist, violating one of the following:

(a) the APTA's Code of Ethics for the Physical Therapist, [~~last amended~~]August [~~12,~~]2020 version, which is incorporated by reference;

(b) the APTA's Guide for Professional Conduct, [~~last amended~~]March 2019 version, which is incorporated by reference; or

(c) Section R156-24b-404;

(2) as a physical therapist assistant, violating one of the following:

(a) the APTA's Standards of Ethical Conduct for the Physical Therapist Assistant, [~~last amended~~]August [~~12,~~]2020 version, which is incorporated by reference; or

(b) the APTA's Guide for Conduct of the Physical Therapist Assistant, [~~last amended~~]March 2019 version, which is incorporated by reference.

KEY: licensing, physical therapy, physical therapist, physical therapist assistant, physical therapy aide
Date of Last Change: [~~December 23, 2025~~]2026
Notice of Continuation: August 21, 2026
Authorizing, and Implemented or Interpreted Law: 58-24b-101; 58-1-106(1)(a); 58-1-202(1)(a)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58396**
Rule or section number:	**R156-28**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Jim Garfield	801-530-6458	jimgarfield@utah.gov

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

3. General Information

A. Rule or section catchline:

R156-28. Veterinary Practice Act Rule

B. Purpose of the new rule or reason for the change:

The Division of Professional Licensing (Division) in collaboration with the Utah Veterinary Board (Board) is filing these proposed amendments to update and clean up the rule language and conform this rule to Division and Office of Administrative Rules (OAR) drafting standards.

C. Summary of the new rule or change:

Section R156-28-101 is amended to fix a citation and conform the catchline to Division standard.

Section R156-28-102 is amended to add definitions for the AVMA and the IVCA (formerly the NBEC) and to conform the section to Division and OAR drafting standards.

Section R156-28-302b is amended to correct the numbering errors created by two subsections not being reauthorized in SB 47 passed in the 2026 General Session. These proposed amendments also clean up the section to make it easier to read and conform this section to Division and OAR drafting standards.

Section R156-28-302c is amended to reflect the change in the name of the NBEC to the ICVA for the provisions about exams passed after 2000. These proposed amendments also clean up the section to make it easier to read and conform to Division and OAR drafting standards.

Section R156-28-303 is amended to conform it to Division standard and fix a citation.

Section R156-28-306a (was 304a) is amended to align the section number with the statute, clean up the section to make it easier to read, and conform the section to Division and OAR drafting standards.

Section R156-28-306b (was 304b) is amended to align the section number with the statute, clean up the section to make it easier to read, and conform the section to Division and OAR drafting standards.

Section R156-28-309a is amended to clarify that the on-the-job training requirement must be within the United States and that training must be performed by a U.S.-licensed veterinarian, because the examination required for this pathway has that requirement.

By placing this information in rule, an applicant can see that their experience must be completed in the U.S. before they go to apply to take the exam.

This amendment is intended to help provide applicants with a clearer understanding of the existing requirements. These proposed amendments also conform the section to Division and OAR drafting standards.

Section R156-28-309b is amended to clean up the section to make it easier to read and conform to Division and OAR drafting standards.

Section R156-28-502 is amended to clean up the section to make it easier to read, update the version of the AVMA Principles incorporated by reference, and conform the section to Division and OAR drafting standards.

Section R156-28-503 is amended to clean up the section to make it easier to read and to add a requirement that records contain the name of the treating employee if the animal is being treated under the Subsection 58-28-307(1) exception.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 47 (2026 General Session)

5. Fiscal Information

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

A. State budget:

The Division does not anticipate any fiscal impact on the state budget because the proposed amendments clarify and update this rule to be current and accurate for licensees.

B. Local governments:

The Division does not anticipate any cost or savings on local governments from the proposed amendments because the proposed amendments do not apply to local governments.

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

There are approximately 248 small businesses in Utah with veterinarians (NAICS 541940) and other similar licensees that may employ those engaged in veterinary services (this NAICS code also covers professions beyond veterinarians and veterinary technicians).

However, the proposed amendments are not expected to have any measurable impact on small businesses' revenues or expenditures because the amendments clarify and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.

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

There are approximately 8 non-small businesses in Utah with veterinarians (NAICS 541940) and other similar licensees that may employ those engaged in veterinary services (this NAICS code also covers professions beyond veterinarians and veterinary technicians).

However, the proposed amendments are not expected to have any measurable impact on non-small businesses' revenues or expenditures because the amendments clarify and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.

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***)**:**
In Utah, there are approximately: a) 1,470 licensed veterinarians; b) 375 licensed veterinary technicians; c) 37 licensed veterinary interns; and d) 15 temporary veterinarian licensees. This is a total of approximately 1,897 licensees in the veterinary field. The Division does not anticipate any cost or savings from these proposed amendments to these persons or to additional persons other than small businesses, non-small businesses, the state, and local government entities because the amendments clarify and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.
F. Compliance costs for affected persons:
As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-28-101

10. Incorporation by Reference Information

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*)**:**	
Official Title of Materials Incorporated (from title page)	Principles of Veterinary Medical Ethics
Publisher	American Veterinarian Medical Association
Issue or Version	June 2024

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/03/2026	10:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 402 160 E 300 S Salt Lake City, UT Video call link: https://meet.google.com/pca-ouab-gom Or dial: (US) +1 402-542-0130 PIN: 363 584 603# More phone numbers: https://tel.meet/pca-ouab-gom?pin=8723369002245

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/27/2026

R156. Commerce, Professional Licensing.
R156-28. Veterinary Practice Act Rule.
R156-28-101. Title - Authority - [~~Organization and~~]Relationship to Rule R156-1.

(1) This rule is known as the "Veterinary Practice 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 28, Veterinary Practice Act.

(3) The organization of this rule and its relationship to Rule R156-1 is as described in Section R156-1-10[~~7~~]1.

R156-28-102. Definitions.

[~~In addition to the definitions~~]Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 28, Veterinary Practice Act. In addition:

(1) "AVMA" means the American Veterinary Medical Association.

(2) "ICVA" means the International Council for Veterinary Assessment, formerly known as the NBEC.

([~~1~~]3) "In association with licensed veterinarians" as used in Subsection 58-28-307(6), means an out of state licensed veterinarian who performs veterinarian services in this state at the request of a Utah licensed veterinarian [~~regarding~~]for a specific client or patient, and the services provided by the out of state licensed veterinarian are limited to that specific request.

([~~2~~]4) "NBEC" means the National Board Examination Committee of the American Veterinary Medical Association.

([~~3~~]5) "Patient" means any animal receiving veterinarian services.

([4]6) "Practice of veterinary medicine, surgery, and dentistry" as defined in Subsection 58-28-102(11) does not include implanting an electronic device to establish and maintain positive identification of an animal[~~s~~].

([~~5~~]7) "Unprofessional conduct[~~,~~]" as defined in Title 58, Chapter 1, Division of Professional Licensing Act[~~,~~] and Title 58, Chapter 28, Veterinary Practice Act[~~,~~] is further defined in accordance with Subsection 58-1-203(1)(e)[~~,~~] in Section R156-28-502.

([~~6~~]8) "Working under" as used in Subsection 58-28-102(17) means:

(a) unlicensed assistive personnel perform the delegated tasks in Utah, while supervised by a veterinarian licensed under Title 58, Chapter 28, Veterinary Practice Act;

(b) the manner and means of performance of the delegated tasks are subject to the right of control of, or are controlled by, the supervising veterinarian; and

(c) the delegated tasks are recorded in the supervising veterinarian's medical records.

R156-28-302b. Qualifications for Licensure - Experience Requirements.

Under Subsections 58-1-203(1) and 58-28-302(1), the experience requirements for licensure are established in this section.[~~in Subsection 58-28-302(1) are defined, clarified, or established as follows:~~]

(1)(a) Each applicant for licensure as a veterinarian shall complete 1,000 hours of experience while licensed as a veterinarian intern under the supervision of a licensed veterinarian.

([~~d~~]b) If the experience is completed in a jurisdiction outside of Utah that does not issue veterinarian, veterinarian intern, or comparable licenses, or completed in a setting that does not require licensure, the applicant shall demonstrate that the experience was:

(i) lawfully obtained;

(ii) obtained after the applicant met the education requirement in Subsection 58-28-302(1)(b);

(iii) supervised by a licensed veterinarian, or by a person who was exempted from licensure but possessed substantially equivalent qualifications; and

(iv) comparable to experience that would be obtained in a standard veterinarian practice setting in Utah.

([~~e~~]c) Supervision may be obtained by indirect supervision as defined in Section 58-28-102, if the supervisor supplements the indirect supervision with routine face to face contact as the supervisor considers appropriate[~~, in the supervisor's professional judgment~~].

([~~f~~]2) Each applicant shall demonstrate completion of the [~~experience~~]required experience by submitting a verification of experience signed by the applicant and [~~by~~]the applicant's supervisor on forms approved by the Division.

([~~g~~]3) If a supervisor is unavailable or refuses to provide a verification of experience, the applicant shall submit:

([~~i~~]a) [~~submit~~]a complete explanation of why the supervisor is unavailable; and

([~~ii~~]b) [~~submit~~]verification of the experience by alternative means [~~acceptable to the Board, which shall~~]demonstrat[~~e~~]ing that the experience was:

([~~A~~]i) profession-related work;

([~~B~~]ii) competently performed; and

([~~C~~]iii) sufficient [~~accumulated experience~~]for the applicant to be granted a license without jeopardy to the public health, safety, or welfare as determined by the Division in collaboration with the Board.

([~~2~~]4) Under Subsection 58-37-[~~6~~]105(1)(a), a veterinary intern is not eligible to obtain a controlled substance license during [~~the~~]an internship.

R156-28-302c. Qualifications for Licensure - Examination Requirements.

Under Subsections 58-1-203(1) and 58-28-302(1)(a), the examination requirements for licensure are established in this section.[~~in Subsection 58-28-302(1)(a) are defined, clarified, or established as follows:~~]

(1) Applicants who passed examinations before May 1, 2000, shall submit documentation [~~showing they passed~~]of a passing score, as determined by the NBEC:

(a) the National Board Examination (NBE) of the [~~National Board Examination Committee (~~]NBEC[~~)~~] of the [~~American Veterinary Medical Association (~~]AVMA[~~), with a minimum passing score as determined by the NBEC~~]; and

(b) the Clinical Competency Test (CCT) of the NBEC[~~, with a minimum passing score as determined by the NBEC~~].

(2) Applicants who passed examinations after May 1, 2000, shall submit documentation [~~showing they passed~~]of a passing score, as determined by the ICVA, for the North American Veterinarian Licensing Examination (NAVLE)[~~, with a score as determined by the NBEC~~].

R156-28-303. [~~Renewal Cycle~~]Licensing Term - Renewal and Reinstatement Procedures.

(1) Under Subsection 58-1-308(1) and Sections 58-28-305 and 58-28-310, the renewal date for the two-year renewal cycle for licenses or state certifications under Title 58, Chapter 28, Veterinary Practice Act is established in [~~Subsection~~]Section R156-1-308a[~~(1)~~].

(2) Renewal and reinstatement procedures shall be in accordance with Sections R156-1-308b through R156-1-308l.

(3) Applicants for renewal shall meet the continuing education requirements in Section R156-28-304a or Section R156-28-304b, as applicable.

R156-28-30[4]6a. Continuing Education - Veterinarian.

Under Subsections 58-1-203(1)(g) and 58-1-308(3)(b) and Section 58-28-306, the qualified continuing education requirements for renewal and reinstatement of licensure under Title 58, Chapter 28, Veterinary Practice Act are established in this section.[~~there is created a~~

~~continuing education requirement as a condition for renewal or reinstatement of licenses issued under Title 58, Chapter 28, Veterinary Practice Act. Continuing education shall comply with the following criteria:~~]

(1)(a) During each two-year [~~period commencing on September 30 of each even-numbered year~~]renewal cycle, a licensee shall complete at least 24 hours of qualified continuing education directly related to the licensee's professional practice.

(b) At least one hour [~~of the 24 hours~~]shall be specifically related to recognizing opioid use and dependency in office staff, clients, and coworkers.

(c) At least one hour [~~of the 24 hours~~]shall be devoted to topics that improve communication in the veterinary workplace for clients, employees, or recruitment, such as[~~, for example~~]:

(i) clinician-patient relationships;

(ii) employee engagement and team building;

(iii) diversity, equity, and inclusion, such as topics relating to culture, race, ethnicity, religion, gender, gender identity, sexual orientation, disability, or issues such as unconscious bias, cross-culture communication, or access and legal aspects of anti-discrimination;

(iv) business writing or other professional communication; or

(v) communication skills training, such as topics relating to active listening, non-verbal communication, or communication styles.

(2) If a licensee is initially licensed during the two-year [~~period~~]renewal cycle, the licensee's required number of continuing education hours shall be decreased proportionately according to the date of licensure.

(3) Continuing education shall:

(a) have an identifiable clear statement of purpose and defined objective for the educational program directly related to the practice of a veterinarian;

(b) be relevant to the licensee's professional practice;

(c) be presented in a competent, well organized, and sequential manner consistent with the stated purpose and objective of the program;

(d) be prepared and presented by individuals who are qualified by education, training, and experience; and

(e) have a competent method of registration of individuals who completed the professional education program, with records of that registration and completion available for review.

(4) The Division shall recognize continuing education credit during each two-year renewal cycle as follows:

(a) unlimited hours for continuing education as a student or presenter, completed in blocks of time of [~~not less than~~]at least one hour in formally established classroom courses, seminars, lectures, wet labs, or specific veterinary conferences approved or sponsored by one or more of the following:

(i) the American Veterinary Medical Association;

(ii) the Utah Veterinary Medical Association;

(iii) the American Animal Hospital Association;

(iv) the American Association of Equine Practitioners;

(v) the American Association of Bovine Practitioners;

(vi) certifying boards recognized by the AVMA;

(vii) other state veterinary medical associations or state licensing boards; or

(viii) the Registry of Continuing Education (RACE) of the AASVB;

(b) up to five [~~continuing education~~]hours for being the primary author of an article published in a peer reviewed scientific journal, and up to two continuing education hours for being a secondary author;

(c) up to six [~~continuing education~~]hours in practice management courses; and

(d) if the course has no instructor or the instructor is not physically present, such as for internet, audio and visual recordings, broadcast seminars, mail, or other correspondence courses, the course provider shall assure the licensee's participation and acquisition of the knowledge and skills intended by an examination.

(5) A licensee shall maintain [~~documentation~~]sufficient documentation to prove compliance with this section for two years after the end of the [~~two-year~~]renewal cycle for which the continuing education is due.

(6) [~~A licensee who cannot complete the continuing education requirement for reasons such as a medical or related condition, humanitarian or ecclesiastical services, or extended presence in a geographical area where continuing education is not available, may be excused from the requirement for up to three years under Section R156-1-308d~~]The Division may defer or waive continuing education requirements as provided in Section R156-1-308d.

R156-28-30[4]6b. Continuing Education - State Certified Veterinary Technician.

Under Section 58-28-310, [~~there is created a~~]the qualified continuing education requirements [~~as a condition~~]for renewal or reinstatement of a state certification issued under Title 58, Chapter 28, Veterinary Practice Act[~~. Continuing education shall comply with the following criteria:~~] are established in this section.

(1)(a) During each two-year [~~period commencing on September 30 of each even-numbered year~~]renewal cycle, a state certified veterinary technician shall complete at least 12 hours of qualified continuing education directly related to their professional practice.

(b) At least nine of the 12 continuing education hours shall be specific to medical practices.

(2) The Division shall recognize continuing education credit during each two-year renewal cycle as outlined in Subsection R156-28-30[4]6a(4).

(3) A state certified veterinary technician shall maintain [~~documentation~~]sufficient documentation to prove compliance with this section for a period of two years after the end of the [~~two-year~~]renewal cycle for which the continuing education is due.

(4) [~~A state certified veterinary technician who cannot complete the continuing education requirement for reasons such as a medical or related condition, humanitarian or ecclesiastical services, or extended presence in a geographical area where continuing education is not available, may be excused from the requirement for up to three years under~~]The Division may defer or waive continuing education requirements as provided in Section R156-1-308d.

R156-28-309a. Qualifications for State Certification - Education Requirements.

Under Subsections 58-1-203(1) and 58-28-309(2)(b), the education requirements [~~in Subsection 58-28-309(2)(b) -~~]for state certification as a state certified veterinary technician are [~~defined, clarified, or established as follows:~~]established in this section.

(1) Each applicant shall submit an official transcript demonstrating that the applicant graduated from a veterinary technician or veterinary nurse training program that was accredited, as of the date of the applicant's graduation by:

(a) the AVMA Committee on Veterinary Technician Education and [~~a~~]Activities (AVMA-CVTEA); or

(b) the Canadian Veterinary Medical Association (CVMA); or

(2) submit evidence, on forms approved by the Division, of at least 6,000 hours of paid on-the-job training within the United States by a U.S.-licensed veterinarian, that included[~~- at minimum~~]:

(a) general veterinary care;

(b) lab skills;

(c) x-ray experience;

(d) surgical experience; and

(e) dental experience.

R156-28-309b. Qualifications for State Certification - Experience Requirements.

Under Subsections 58-1-203(1) and 58-28-309(2)(e), the experience require[~~d~~]ments for state certification as a state certified veterinary technician [~~is as follows:~~]are established in this section.

(1)(a) Each applicant shall have completed at least six continuous months of full time experience working in a veterinary clinic as a veterinary technician or as unlicensed assistive personnel, under the supervision of a veterinarian that has held an active license in good standing for at least two years; or

(b) if the experience is completed in a jurisdiction outside of Utah that does not issue veterinary technician certification or comparable licenses, or completed in a setting that does not require certification or licensure, the applicant shall demonstrate that the experience was:

(i) lawfully obtained;

(ii) obtained after the applicant met the education requirement described in Section R156-28-309a;

(iii) supervised by a licensed veterinarian, or by a person who was exempted from licensure but possessed substantially equivalent qualifications; and

(iv) comparable to veterinary technician experience that would be obtained in a standard veterinary practice setting in Utah.

(2) Each applicant shall demonstrate completion of the required experience by submitting a verification of experience signed by the applicant and [~~by -~~]the applicant's supervisor on forms approved by the Division.

(3) If a supervisor is unavailable or refuses to provide a verification of experience, the applicant shall submit:

(a) [~~submit -~~]a complete explanation of why the supervisor is unavailable; and

(b) [~~submit -~~]verification of the experience by alternative means [~~acceptable to the Board, which shall -~~]demonstrat[~~e~~]ing that the experience was:

(i) profession-related work;

(ii) competently performed; and

(iii) sufficient experience for the applicant to be granted state certification without jeopardy to the public health, safety, or welfare as determined by the Division in collaboration with the Board.

R156-28-502. Unprofessional Conduct.

(1) Under Subsection 58-28-102(18) and Section 58-28-502, [~~U~~]unprofessional conduct includes:

(a) deviating from the minimum standards of veterinary practice in Section R156-28-503;

(b) permitting unlicensed assistive personnel to perform duties that the individual is not competent by education, training, or experience to perform; or

(c) failing to conform to the generally accepted and recognized standards and ethics of the profession, including the Principles of Veterinary Medical Ethics of the [~~American Veterinarian Medical Association (AVMA), as approved by the AVMA Executive Board~~]AVMA, revised [~~August 2019~~]June 2024[~~, which are~~] and incorporated by reference[~~- (Principles)~~].

(2) If a licensee fails to establish [~~the~~]a veterinarian-client-patient relationship as required [~~in Section II of~~]by the Principles of Veterinary Medical Ethics of the AVMA, the failure may not excuse the veterinarian from complying with other duties that would be imposed on the veterinarian if the veterinarian had properly established the veterinarian-client-patient relationship.

R156-28-503. Minimum Standards of Practice.

Under Subsection 58-28-102(18) and Sections 58-28-502 and 58-28-603, a veterinarian shall comply with the following minimum standards of practice in addition to the generally recognized standards and ethics of the profession:

(1) A veterinarian shall compile and maintain records on each patient that include[~~- at least the following information~~]:

(a) client's name, address, and phone number, if telephone is available;

(b) patient's identification, such as name, number, tag, species, age, and gender, except for herds, flocks, or other large groups of animals, which may be more generally defined;

(c) veterinarian's diagnosis or evaluation of the patient;

(d) treatments provided, including drugs used and dosages;[~~ and~~]

(e) date of service[~~.~~]; and

(f) name of the treating employee under Subsection 58-28-307(1), if applicable.

(2) A veterinarian shall maintain veterinary medical records under Subsection (1):

(a) [~~maintain veterinary medical records under Subsection (1) so that~~]in a manner that would allow any veterinarian [~~coming into~~]entering a veterinary practice [~~may, by reading the veterinary medical record of a particular animal, be able~~]to proceed with the proper care and treatment of the animal by reading the veterinary medical record for the animal; and

(b) [~~maintain veterinary medical records under Subsection (1)~~]for at least five years from the date that the veterinarian last treated the animal.

(3) A veterinarian shall maintain a sanitary environment to avoid sources and transmission of infection, including:

(a) proper routine disposal of waste materials; and

(b) proper sterilization or sanitation of equipment used in diagnosis and treatment.

(4) A veterinarian who holds a controlled substance license shall comply with Title 58, Chapter 37, Utah Controlled Substances Act[~~,~~] and Rule R156-37, Utah Controlled Substances Act Rule.

KEY: veterinary medicine, licensing, veterinarian
Date of Last Change: [~~May 1,~~]2026
Notice of Continuation: May 7, 2026
Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-28-101

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58423**
Rule or section number:	**R156-37c**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Jim Garfield	801-530-6458	jimgarfield@utah.gov

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

3. General Information

A. Rule or section catchline:

R156-37c. Utah Controlled Substance Precursor Act Rule

B. Purpose of the new rule or reason for the change:

The Division of Professional Licensing (Division) is filing these proposed amendments to implement legislative changes requiring an electronic tracking system for online sales of pseudoephedrine.

Additionally, these proposed amendments clean up rule language, update citations due to the legislative recodification of controlled substances statutes and conform the rule to the Office of Administrative Rules (OAR) drafting requirements and Division standards.

C. Summary of the new rule or change:
Section R156-37c-101 is amended to incorporate the language from Sections R156-37c-103 and R156-37c-104 to conform to the standard structure of Division rules. As such, Sections R156-37c-103 and R156-37c-104 are removed from this rule. Section R156-37c-102 is amended to conform to Division standards, and to delete the definition of "involved officer, director, partner, proprietor, employee, or manager" because the definition's language has been incorporated into the body of this rule. Section R156-37c-302a is amended to conform to OAR drafting requirements and Division standards and to incorporate the language from the removed definition in Section R156-37c-102. Sections R156-37c-601, R156-37c-602, R156-37c-603, and R156-37c-604 are amended to conform to OAR drafting requirements and Division standards to improve clarity and readability. Section R156-37c-605 is added to establish the requirements for Division approval and implementation of an electronic tracking system and online sale of pseudoephedrine.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 261 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
The Division does not anticipate any fiscal impact to the state budget beyond that determined by the fiscal note for SB 261 (2026), at https://le.utah.gov/Session/2026/bills/static/SB0261.html, because the proposed amendments implement the statutory changes enacted by SB 261 (2026) and update this rule to be current and accurate.
B. Local governments:
The Division does not anticipate any cost or savings to local governments from the proposed amendments because the proposed amendments do not apply to local governments.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
The Division does not anticipate any cost to small businesses because a requirement of SB 261 (2026) and the resulting statutory changes is that the electronic tracking system is free of charge for use by retail distributors and law enforcement agencies. This requirement only permits the Division to make these rule changes if a system is available free of charge. Since such a system is available, online sales of pseudoephedrine products are permissible, which may benefit small businesses as an online market is opened to them. The remaining changes are not anticipated to impact small businesses as these changes merely streamline and update this rule.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
The Division does not anticipate any cost to non-small businesses because a requirement of SB 261 (2026) and the resulting statutory changes is that the electronic tracking system is free of charge for use by retail distributors and law enforcement agencies. This requirement only permits the Division to make these rule changes if a system is available free of charge. Since such a system is available, online sales of pseudoephedrine products are permissible, which may benefit non-small businesses as an online market is opened to them. The remaining changes are not anticipated to impact small businesses as these changes merely streamline and update this 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***)**:**
The Division does not anticipate any cost or savings from these proposed amendments to additional persons other than small businesses, non-small businesses, the state, or local government entities, because the amendments merely implement the free of charge electronic tracking system for online sales of pseudoephedrine and streamline and update this rule.
F. Compliance costs for affected persons:
As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-37c-102

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/01/2026	10:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 402 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/gae-bivv-bqa Or dial: (US) +1 409-444-2854 PIN: 352 273 574# More phone numbers: https://tel.meet/gae-bivv-bqa?pin=9024069908273

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/30/2026

R156. Commerce, [~~Occupational and~~]Professional Licensing.
R156-37c. [~~Utah~~]Controlled Substance Precursors [~~Act~~]Rule.
R156-37c-101. Title - Authority - Relationship to Rule R156-1.

(1) This rule is known as the "[~~Utah~~]Controlled Substance Precursors [~~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 37c, Controlled Substance Precursors.

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

R156-37c-102. Definitions.

[~~In addition to the definitions in Title 58, Chapters 1 and 37c, as used in Title 58, Chapters 1 and 37c or this rule~~](1) Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act and Title 58, Chapter 37c, Controlled Substance Precursors. In addition:

[~~(1) "Involved officer, director, partner, proprietor, employee or manager" means an individual who has direct responsibility for the purchasing, storage, handling, disbursement, sale, shipping or disposal of controlled substance precursors.~~]

(2) "Unusual and extraordinary regulated transaction" means:

(a) a cash transaction;

(b) a transaction of a magnitude outside of standard business conduct; or

(c) a transaction in which the distributor does not have good knowledge of the legitimate use by the purchaser of the controlled substance precursors being purchased.

[~~R156-37c-103. Authority - Purpose.~~

~~These rules are adopted by the division under the authority of Subsection 58-1-106(1)(a) to enable the division to administer Title 58, Chapter 37c.~~

~~R156-37c-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.~~]

R156-37c-302a. Qualifications for Licensure - Application Requirements.

[~~In accordance with~~]Under Subsection 58-37c-[~~8~~]105(2), an applicant shall submit a complete application on a form provided by the [~~d~~]Division which includes the following:

(1) identifying information including:

(a) business legal name[~~,~~];

(b) physical location[~~ and~~];

(c) mailing address[~~,~~];

(d) contact person for licensing purposes[~~,~~];

(e) organization type and identifying information[~~,~~]; and
(f) trade or business names;
(2) disclosure of nature of business;
(3) [~~all facilities~~]each facility where business [~~will be~~]is conducted;
(4) identification of [~~all~~]each controlled substance precursor[~~s~~] for which licensure is requested; and
(5) qualifying information [~~concerning involved officers, directors, partners, proprietors, employees, and managers~~]for each officer, partner, proprietor, employee, or manager of the applicant who has direct responsibility for purchasing, storage, handling, disbursement, sale, or disposal of a controlled substance precursor.

R156-37c-601. Routine Transactions.

[~~In accordance with~~]Under Subsection 58-37c-10(4)(a), [~~the following are~~]the recordkeeping and reporting requirements for routine transactions between [~~which shall be met by~~]a regulated [~~controlled substance precursor~~]distributor and a regulated purchaser [~~transaction~~]are established in this section.

(1) Each regulated distributor shall submit to the [~~d~~]Division[~~ the following~~]:
[~~(a) all records of purchase 15 days following the end of the calendar quarter;~~
~~(b) all records of sale or transfer 15 days following the end of each calendar month; and~~
~~(c) all inventory reconciliations 15 days following the end of the calendar quarter.~~]
(a) within 15 days of the end of each calendar quarter:
(i) records of purchase; and
(ii) inventory reconciliations; and
(b) within 15 days of the end of each calendar month, records of sale or transfer.

(2) Each regulated purchaser shall submit to the [~~d~~]Division the following:
[~~(a) all records of purchase 15 days following the end of each calendar month;~~
~~(b) all records of disposition 15 days following the end of the calendar quarter; and~~
~~(c) all inventory reconciliations 15 days following the end of the calendar quarter.~~]
(a) within 15 days of the end of each calendar quarter:
(i) records of disposition; and
(ii) inventory reconciliations; and
(b) within 15 days of the end of each calendar month, records of purchase.

R156-37c-602. Extraordinary or Unusual Regulated Transactions.

[~~In accordance with~~]Under Subsection 58-37c-107[~~(~~](4)(b), [~~the following are~~]the recordkeeping and reporting requirements for each extraordinary or unusual regulated transaction between [~~which shall be met by~~]a regulated [~~controlled substance precursor~~]distributor and a regulated purchaser [~~with respect to each extraordinary or unusual regulated transaction~~]are established in this section.

(1) Each regulated distributor shall [~~cause~~]submit records of sale or transfer to [~~be received by~~]the [~~d~~]Division within 72 hours after the sale or transfer.

(2) Each purchaser shall [~~cause~~]submit records of purchase to [~~be received by~~]the [~~d~~]Division within 72 hours after purchase.

R156-37c-603. Identification.

[~~In accordance with~~]Under Subsection 58-37c-107(4)(c), [~~the following is the identification which shall be presented by a purchaser to a distributor and~~]the requirements for purchaser identification and recording of that identification by the distributor [~~prior to~~]before the sale or transfer o[~~r~~]f any controlled substance precursor in a regulated transaction are established in this section.

(1) If the purchase is to be shipped by a method other than a common carrier, a[~~A~~] regulated purchaser shall present to the regulated distributor:
(a) a copy of the controlled substance precursor license; and
(b) a form of photo identification[~~, if the purchase is to be shipped by other than a common carrier~~].

(2) A regulated distributor shall record:
(a) the controlled substance precursor license number;[~~ and~~]
(b) the organization name;
(c) [~~along with~~] the date of sale;
(d) [~~and~~]the material sold; and
(e) the quantity sold.

(3) [~~This i~~]Identification [~~can~~]may be kept on file for a customer [~~for the duration of~~]during a license period.

(4) A notarized photocopy of the license is acceptable proof of licensure.

(5) Each reporting requirement applies to a[~~For~~] transaction[~~s~~] involving a purchaser[~~s~~] outside the state, [~~no~~]except a license number is not required[~~, but all other reporting is required~~].

R156-37c-604. Theft, Loss, or Shortage of Controlled Substance Precursor.

[~~In accordance with Subsection 58-37c-10(4)(e), purchasers and distributors shall file a report with respect to a theft, loss, or shortage of a controlled substance precursor with the division within 72 hours of discovery of the loss or shortage using the format required for unusual transactions except in the case of minor shortages discovered during inventory which would be consistent with expected handling losses which will not be reported except in the inventory reconciliation.~~]Under Subsection 58-37c-107(4)(e), except in the case of minor shortages discovered

during inventory consistent with expected handling losses, a regulated purchaser and a regulated distributor shall file a report of a theft, loss, or shortage of a controlled substance precursor with the Division:

(1) within 72 hours of discovery of the loss or shortage; and

(2) using the format required for unusual transactions.

R156-37c-605. Sale of Pseudoephedrine Products - Electronic Tracking System.

Under Section 58-37c-209, this section establishes the requirements for Division approval and implementation of an electronic tracking system, and the procedures for the online sale of a product.

(1) Under Subsections 58-37c-209(6) and (9)(a), the minimum requirements for an electronic tracking system and a retail distributor's submission to the tracking system are the following:

(a) Subsection 58-37c-209(3) requirements for capability, and for free use by retail distributors and law enforcement agencies;

(b) Subsection 58-37c-209(8) requirement that the records a retail distributor submits are for the confidential use of the retail distributor; and

(c) Subsection 58-37c-209(9)(d) requirements of the information a retail distributor shall submit for each online sale of a product.

(2) Under Subsection 58-37c-209(9)(b), the regulations for use of, and access to, an electronic tracking system are as follows:

(a) under Subsection 58-37c-209(2), a retail distributor may only use an electronic tracking system that is approved by the Division in collaboration with the Utah State Board of Pharmacy, as listed on the Division website at https://commerce.utah.gov/dopl/pharmacy/resources/; and

(b)(i) under Subsection 58-37c-209(9)(c), the exceptions to the prohibition for completing a sale despite a stop-sale alert are those listed in Subsection 58-37c-209(9)(c)(i) or (ii); and

(ii) to qualify for the exception in Subsection 58-37c-209(9)(c)(ii), a retail distributor that experiences a mechanical or electronic failure of the electronic tracking system shall record the sale in a written log or an alternative electronic recordkeeping mechanism.

KEY: licensing, controlled substances, precursor
Date of Last Change: [~~1994~~]2026
Notice of Continuation: April 3, 2023
Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-37c-102

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58418**
Rule or section number:	**R156-42a**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Lisa Martin	801-530-7632	lmartin@utah.gov

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

3. General Information

A. Rule or section catchline:
R156-42a. Occupational Therapy Practice Act Rule
B. Purpose of the new rule or reason for the change:
The Division of Professional Licensing (Division) in collaboration with the Physical Therapies Licensing Board (Board)is filing these proposed amendments in accordance with statutory changes made by SB 31 that passed in the 2026 General Session and became effective on 05/06/2026.

The proposed amendments also align this rule with Office of Administrative Rules (OAR) drafting requirements and Division standards.

C. Summary of the new rule or change:

Section R156-42a-101 is amended to conform the catchline to Division standards.

Sections R156-42a-102, R156-42a-303, R156-42a-304, R156-42a-502, and R156-42a-601 are amended to update citations, align the rule with OAR drafting requirements and Division standards, and change "occupational therapist assistant" to the correct term "occupational therapy assistant."

New Section R156-42a-306 is added to this rule in accordance with statutory changes and recommendations made by the Office of Professional Licensure Review (OPLR) to establish an increased supervision ratio for occupational therapists who supervise multiple occupational therapy assistants. An occupational therapist may supervise up to four full-time equivalent occupational therapy assistants at one time, unless otherwise approved in writing by the Division in collaboration with the Board.

Section R156-42a-307 is amended to remove "trigger point" from this rule language as it was removed from statute.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 31 (2026 General Session)

5. Fiscal Information

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

A. State budget:

The Division does not anticipate any fiscal impact to the state budget beyond that determined by the fiscal note for SB 31 (2026), at https://le.utah.gov/~2026/bills/static/SB0031.html, because the proposed amendments clarify and update this rule to be current and accurate for licensees.

B. Local governments:

The Division does not anticipate any cost or savings to local governments from the proposed amendments because the proposed amendments do not apply to local governments.

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

There are approximately 461 small businesses in Utah with occupational therapists and occupational therapy assistants (NAICS 621340) and other similar licensees and who may employ those engaged in occupational therapy (this NAICS code also covers professions beyond physical therapy).

However, the proposed amendments are not expected to have any measurable impact on small businesses' revenues or expenditures beyond the fiscal note for SB 31 (2026) because the amendments merely implement the expansion in permissible activities for the profession and other statutory changes enacted by SB 31 (2026) and reorganize, streamline, and update this rule to provide more utility to licensees and to comply with OAR drafting requirements and Division standards.

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

There are approximately 8 non-small businesses in Utah with occupational therapists and occupational therapy assistants (NAICS 621340) and other similar licensees and who may employ those engaged in occupational therapy (this NAICS code also covers professions beyond physical therapy).

However, the proposed amendments are not expected to have any measurable impact on small business revenues or expenditures beyond the fiscal note for SB 31 (2026) because the amendments merely implement the expansion in permissible activities for the profession and other statutory changes enacted by SB 31 (2026) and reorganize, streamline, and update this rule to provide more utility to licensees and to comply with OAR drafting requirements and Division standards.

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***)**:**
In Utah, there are 1,585 licensed occupational therapists and 569 licensed occupational therapy assistants. The Division does not anticipate any cost or savings from these proposed amendments to these persons or to additional persons other than small businesses, non-small businesses, the state, or local government entities, because the amendments merely implement the statutory changes enacted by SB 31 (2026) and reorganize, streamline, and update this rule to provide more utility to licensees and to comply with OAR drafting requirements and Division standards. The proposed rule amendments will not create new obligations for other persons or increase the costs associated with any existing obligations for other persons.
F. Compliance costs for affected persons:
As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-42a-101

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/07/2026	09:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 402 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/ekj-icso-qot Or dial: (US) +1 234-719-4019 PIN: 529 770 003# More phone numbers: https://tel.meet/ekj-icso-qot?pin=4929206566082

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/30/2026

R156. Commerce, Professional Licensing.
R156-42a. Occupational Therapy Practice Act Rule.
R156-42a-101. Title - Authority - Relationship to Rule R156-1.

(1) This rule is known as the "Occupational Therapy Practice 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 42a, Occupational Therapy Practice Act.

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

R156-42a-102. Definitions.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing, and Title 58, Chapter 42a, Occupational Therapy Practice Act. In addition:

(1) "AOTA" means the American Occupational Therapy Association.

(2) "Client" or "patient" means an individual who lawfully receives professional services by a licensed occupational therapist or a licensed occupational therap[~~ist~~]y assistant.

(3) "Manual therapy" as used in Subsections 58-42a-102(6)(b)(vii)([~~L~~]M) and R156-42a-502(2) means the use of skilled hand movements to manipulate tissues of the body for a therapeutic purpose.

(4) "NBCOT" means the National Board for Certification in Occupational Therapy or a predecessor organization.

(5) "Physical agent modalit[~~ies~~]y" as used in Subsections 58-42a-102(6)(b)(vii)([~~L~~]M) and R156-42a-502(2) means a specialized treatment procedure[~~s~~] that includes:

(a) a superficial thermal agent[~~s~~];

(b) a deep thermal agent[~~s~~];

(c) an electrotherapeutic agent[~~s~~]; or

(d) a mechanical device[~~s~~].

(6) "Qualified continuing professional education" or "CE" as used in Subsection 58-42a-303.5(1) means continuing education that meets the standards [~~set forth~~]in Section R156-42a-304.

(7) "Wound care" as used in Subsections 58-42a-102(6)(b)(vii)([~~L~~]M), R156-42a-502(2), and R156-42a-601(2) means:

(a) the prevention of interruptions in skin and tissue integrity; and

(b) the care and management of interruptions in skin and tissue integrity.

R156-42a-303. Expiration, Renewal, and Reinstatement of License.

(1) Under Subsections 58-1-308(1) and 58-42b-303(1), the renewal date for the two-year renewal cycle for licensees under Title 58, Chapter 42a, Occupational Therapy Practice Act, is established in Section R156-1-308a.

(2) Renewal and reinstatement procedures shall be in accordance with Sections R156-1-308a through R156-1-308l, except as provided in Subsection (3).

(3) Under Subsection 58-1-308(5)(a)(ii)(B) and except as in Subsections 58-1-308(6)(b) and (7), an applicant whose licensure was active and in good standing when it expired may apply for reinstatement of licensure between two years and five years after the date of expiration if the applicant meets the following practice re-entry requirements:

(a) the applicant shall:

(i) submit an application demonstrating compliance with each requirement and condition of license renewal;

(ii) pay [~~all~~]license renewal and reinstatement fees for the current renewal period; and

(iii) submit evidence of completion of qualified continuing professional education for each renewal period during which the license was expired;

(b) if not previously completed, the applicant shall submit to and pass a criminal background check under Section 58-1-301.5; and

(c) if the applicant has been out of practice more than two years but less than five years, the applicant shall:

(i) meet with the Board to evaluate the applicant's:

(A) qualifications for licensure; and

(B) ability to safely and competently practice occupational therapy; and

(ii) comply with each additional licensure requirement or condition considered necessary by the Division in collaboration with the Board to protect the public and ensure that the applicant is currently competent to engage in the profession.

R156-42a-304. Qualified Continuing Professional Education.

(1) Under Subsections 58-1-203(1)(g), 58-1-308(3)(b)(i), and 58-42a-303.5(1), the qualified continuing professional education requirements for occupational therapists and occupational therap[~~ist~~]y assistants during each two-year renewal cycle are defined, clarified, and established in this section.

(2) During each two-year renewal cycle or before reinstatement of licensure, a licensee shall:

([~~i~~]a) complete at least two hours of qualified continuing professional education in legal and ethical principles; and

([~~ii~~]b)([~~A~~]i) complete at least 24 hours of qualified continuing professional education; or

([~~B~~]ii) maintain current and active NBCOT certification.

(3) A qualified continuing professional education course shall meet the following requirements:

(a) have learning objectives that are clearly stated in course material that are directly related to the practice of occupational therapy;

(b) be relevant to the practice of occupational therapy;

(c) be prepared and presented by individuals who are qualified by education, training, and experience;

(d) be presented in a competent, well-organized, and sequential manner consistent with the stated learning objectives of the course;

(e) be approved, conducted, or sponsored by:

(i) a recognized accredited college or university;

(ii) a state or federal agency;

(iii) a professional association, organization, or facility involved in the practice of occupational therapy; or

(iv) a commercial continuing education provider;

(f) be completed in blocks of time of at least 50 minutes;

(g) be completed in one of the following formats:

(i) college or university lecture and discussion;

(ii) professional conference;

(iii) seminar;

(iv) training session;

(v) synchronous distance learning course that is clearly documented as real-time and interactive;

(vi) asynchronous distance learning course that is not real-time or interactive;

(vii) authoring a scholarly peer-reviewed journal article, book, or book chapter;

(viii) volunteer service on a board, committee, or in a leadership role in any state, national, or international organization for the development and improvement of occupational therapy; or

(ix) studying a scholarly peer-reviewed journal article; and

(h) is verified as follows:

(i) a certificate of course completion that includes:

(A) the name of the attendee;

(B) the name of course provider;

(C) the name of instructor;

(D) the date of the course;

(E) the title of the course;

(F) the number of course hours;

(G) the course objectives; and

(H) the format listed under Subsection (3)(g); or

(ii) if the qualified continuing professional education course is self-directed including independent study or authoring a journal article documentation that includes:

(A) the date of study or research;

(B) the title and an abstract of the article, textbook chapter, or platform presentation;

(C) objectives of a self-study course; and

(D) number of contact hours of continuing education credit.

(4) A course on the legal and ethical principles of practice shall meet the requirements of Subsection (3) and cover at least one of the following topics:

(a) the patient-occupational therapist relationship;

(b) confidentiality;

(c) documentation;

(d) charging and coding;

(e) compliance with state or federal laws that impact the practice of occupational therapy; or

(f) a topic listed in the AOTA 2020 Occupational Therapy Code of Ethics.

(5) The Division shall recognize [~~C~~]credit for qualified continuing professional education[~~ shall be recognized and awarded~~] as follows:

(a) a licensee who lectures or instructs a course on occupational therapy at an accredited university or college, a qualified continuing education course, or as an invited guest lecturer, may [~~be awarded~~]receive up to ten hours of qualified continuing professional education credit subject to the following:

(i) one hour of qualified continuing professional education credit awarded for each [~~one~~]hour of lecturing or instruction;

(ii) [~~up to ten hours of credit for an occupational therapist or an occupational therapist assistant;~~

~~(iii)~~]credit for lecturing or instructing the same course may be given up to two times during each two-year renewal cycle; and

(i[~~v~~]ii) the licensee obtains a certificate or record from the qualified continuing professional education sponsor or equivalent that verifies the licensee lectured or instructed the course;

(b) a licensee participating in a fellowship, residency, or specialty certification may [~~be awarded~~]receive two qualified continuing professional education hours for each one hour of participation;

(c) providing volunteer health care treatment in occupational therapy that meets the requirements of Subsection 58-13-3(8); or

(d) up to five hours of qualified continuing professional education for a clinical instructor who supervises at least one occupational therapist student or occupational therapy assistant student.

(6) [~~Qualified continuing professional education hours shall be increased or decreased proportionately based on the applicant's date of licensure within the two-year renewal cycle~~]If a licensee first becomes licensed during the two-year renewal period, the licensee's required number of qualified continuing professional education hours shall be decreased proportionately according to the date of licensure.

(7) A licensee shall maintain adequate documentation sufficient to prove compliance with this section for at least two years after the end of the renewal [~~cycle~~]period for which the qualified continuing professional education is due.

(8) [~~Under~~]The Division may defer or waive qualified continuing professional education requirements in accordance with Section R156-1-308d[~~, the Division may defer or waive qualified continuing professional education requirements~~].

R156-42a-306. Supervision Requirements - Supervisor to Supervisee Ratio.

Under Section 58-42a-306, a licensed occupational therapist may supervise up to four full-time equivalent occupational therapy assistants at one time, unless otherwise approved in writing by the Division in collaboration with the Board.

R156-42a-307. [~~Trigger Point~~]Dry Needling - Education and Experience Required - Registration.

(1) Under Subsection 58-42b-307(1)(b)(i), for a [~~trigger point~~]dry needling course to be approved by the Division, the course shall be approved, conducted, or sponsored by one of the following:

(a) a recognized accredited college or university;

(b) a state or federal agency;

(c) a professional association, organization, or facility involved in the practice of occupational therapy; or

(d) the Board.

(2) Under Subsections 58-42a-307(1)(e) and (2)(b), an occupational therapist shall complete an approved [~~trigger point~~]dry needling course and required supervised patient treatment hours under Subsection 58-42a-307(1)(b)(ii)(B) within three calendar years from the date the course started.

(3) Under Subsections 58-42a-307(1)(c) and (e), an occupational therapist who completes the [~~trigger point~~]dry needling course shall register with the Division by submitting:

(a) a completion certificate for the course that is issued by the organization that approved, conducted, or sponsored the course under Subsection (1); and

(b)(i) a log verifying completion of the occupational therapist's supervised patient treatment hours under Subsection 58-42a-307(1)(b)(ii)(B); or

(ii) a letter from the supervising occupational therapist that:

(A) states that the supervised occupational therapist completed the supervised patient treatment hours required under Subsection 58-42a-307(1)(b)(ii)(B);

(B) is on the letterhead of the supervising occupational therapist's organization; and

(C) is signed by the supervising occupational therapist.

R156-42a-502. Unprofessional Conduct.

Under Section 58-42a-502, "unprofessional conduct" includes:

(1) delegating an occupational therapy service[~~s~~], care, or responsibilit[~~ies~~]y that [~~are not authorized to~~]may not be delegated under Title 58, Chapter 42a, Occupational Therapy Practice Act, or this rule;

(2) engaging in or attempting to engage in the use of a physical agent modalit[~~ies~~]y, wound care, or manual therapy:

(a) outside the licensee's scope of practice; or

(b) if the licensee is not competent to engage in the[~~se~~] service[~~s~~] by education, training, or experience;

(3) failing as a supervising occupational therapist to provide the appropriate level of supervision under Title 58, Chapter 42a, Occupational Therapy Practice Act, and this rule;

(4) [~~failing as a supervising occupational therapist to cosign the discharge documentation for an occupational therapist assistant's client within 30 days under~~]violating Subsections 58-42a-306(2) and R156-42a-601(1); or

(5) violating a provision of the AOTA 2020 Occupational Therapy Code of Ethics as adopted by the AOTA's Representative Assembly on November 4, 2020, which is incorporated by reference.

R156-42a-601. Practice Standards.

(1) [~~An~~]Under Section 58-42a-306, an occupational therap[~~ist~~]y assistant may discharge a client from on-going service if:

(a) the occupational therap[~~ist~~]y assistant has consulted with the supervising occupational therapist;

(b) there is no evaluation component associated with the client's discharge from service; and

(c) the supervising occupational therapist cosigns the documentation under Subsection 58-42a-306(2) within 30 days of discharge.

(2) Under Subsection 58-42a-102(6)(b)(vii)([~~I~~]M), an occupational therapist engaging in the care and management of interruptions in skin and tissue integrity shall complete formal specialized wound care training or certification that includes didactic and clinical components.

KEY: licensing, occupational therapy, occupational therapist, occupational therap[~~ist~~]y assistant
Date of Last Change: [~~December 23, 2025~~]2026
Notice of Continuation: September 25, 2023
Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-42a-101

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58452**
Rule or section number:	**R156-44a**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Jeff Busjahn	801-530-6789	JBusjahn@Utah.gov

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

3. General Information

A. Rule or section catchline:
R156-44a. Nurse Midwife Practice Act Rule
B. Purpose of the new rule or reason for the change:
The Division of Professional Licensing (Division) in collaboration with the Board of Nursing and Certified Nurse Midwives (Board) are filing these proposed amendments based on minor changes made by SB 117, HB 301, and SB 174 in the 2026 General Session. This filing also provides stylistic and grammatical cleanup.

C. Summary of the new rule or change:
The rule filing makes the following changes: 1. Updates cross-references based on statutory changes from SB 117 (2026), HB 301 (2026), and SB 174 (2026). 2. Section R156-44a-305 is renumbered to Section R156-44a-306. 3. Adds violations to the Table 1 Fine Schedule based on revisions to statute. 4. Removes extra spaces in the Table 1 Fine Schedule. 5. Section R156-44a-601 is renumbered to Section R156-44a-701 to more closely match the numbering scheme in Rule R156-31b. Nurse Practice Act Rule. 6. Stylistic and grammatical cleanup per the Office of Administrative Rules' (OAR) Rulewriting Manual for Utah.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 117 (2026 General Session), SB 174 (2026 General Session), and HB 301 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
For changes based on SB 117 (2026), HB 301 (2026), and SB 174 (2026), the Division does not anticipate any fiscal impact to the state budget because the proposed rule changes are minor, do not apply to state governments, and will likely not result in direct, measurable costs for the state budget. The remaining proposed changes simply update references and provide stylistic and grammatical changes, and Division does not expect that the proposed amendments will impact the state budget.
B. Local governments:
For changes based on SB 117 (2026), HB 301 (2026), and SB 174 (2026), the Division does not anticipate any fiscal impact to local governments because the proposed rule changes minor, do not apply to local governments, and will likely not result in direct, measurable costs for local governments. These proposed changes are expected to have zero net impact on local governments because these changes should not result in any additional complaints, investigations, or disciplinary actions or any additional licensing issues. The remaining proposed changes simply update references and provide stylistic and grammatical changes, and Division does not expect that the proposed amendments will impact local governments.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There are approximately 96 small businesses in Utah (NAICS 622110) that employ Certified Nurse Midwives. The proposed changes do not add any additional cost or burden to existing small businesses. Changes based on SB 117 (2026), HB 301 (2026), and SB 174 (2026), are minor and will not affect complaints, investigations, or disciplinary actions or any additional licensing issues. The remaining proposed changes simply update references and provide stylistic and grammatical changes, and Division does not expect that the proposed amendments will impact small businesses.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
There are approximately 57 non-small businesses in Utah (NAICS 622110) that employ Certified Nurse Midwives.

The proposed changes do not add any additional cost or burden to existing non-small businesses. Changes based on SB 117 (2026), HB 301 (2026), and SB 174 (2026), are minor and will not affect complaints, investigations, or disciplinary actions or any additional licensing issues.

The remaining proposed changes simply update references and provide stylistic and grammatical changes, and Division does not expect that the proposed amendments will impact 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 are approximately 239 licensed Certified Nurse Midwives in Utah.

The proposed changes do not add any additional cost or burden to any persons other than small businesses, non-small businesses, state, or local government entities. Changes based on SB 117 (2026), HB 301 (2026), and SB 174 (2026), are minor and will not add any cost or savings for persons other than small businesses, non-small business, state, or local government entities.

The remaining proposed changes simply update references and provide stylistic and grammatical changes, and Division does not expect that the proposed amendments will impact any persons other than small businesses, non-small businesses, state, or local government entities

F. Compliance costs for affected persons:

As described in Box 5E for other persons, the Division does not expect any compliance costs for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-44a-101
Section 58-1-307.1		

10. Incorporation by Reference Information

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*)**:**	
A. Official Title of Materials Incorporated (from title page)	Core Competencies for Basic Midwifery Practice
Publisher	American College of Nurse-Midwives
Issue or Version	2025

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/02/2026	2:00 PM	Anchor Meeting Location: Heber M. Wells Building Room 474 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/fvf-kmff-usf Or dial: (US) +1 641-632-2216 PIN: 485 226 796# More phone numbers: https://tel.meet/fvf-kmff-usf? pin=5841047952038

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Mark B. Steinagel, Division Director	**Date:**	11/02/2026

R156. Commerce, Professional Licensing.
R156-44a. Nurse Midwife Practice Act Rule.
R156-44a-101. Title -- Authority -- Relationship to Rule R156-1.

(1) This rule is known as the "Nurse Midwife Practice Act Rule."

(2) This rule is adopted by the Division [~~of Professional Licensing (Division)~~]under Subsection 58-1-106(1)(a) to enable the Division to administer Title 58, Chapter 44a, Nurse Midwife Practice Act.

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

R156-44a-102. Definitions.

[~~The following rule definitions supplement the definitions~~]Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 44a, Nurse Midwife Practice Act[~~:~~]. In addition:

(1) "ACME" means the Accreditation Commission for Midwifery Education.

(2) "AMCB" means the American Midwifery Certification Board.

[~~(3) "Approved certified nurse midwifery education program" means an educational program accredited by the AMCB, affiliated with the American College of Nurse-Midwives (ACNM).~~]

([~~4~~]3) "CNM" means a certified nurse midwife.

([~~5~~]4) "Delegate" is as defined in Subsection R156-31b-102(14).

([~~6~~]5) "Delegatee" is as defined in Subsection R156-31b-102(15).

([~~7~~]6) "Delegator" is as defined in Subsection R156-31b-102(16).

([~~8~~]7) "Direct supervision" as used in Subsection 58-44a-305(1)(d) means that the supervisor is available on the premises where the supervisee or consultee is engaged in practice.

([~~9~~]8) "Generally recognized scope and standards of nurse midwifery" in Subsection 58-44a-102(9)(b) means the following scope and standards of practice published by the American College of Nurse-Midwives (ACNM), which are incorporated by reference:

(a) Core Competencies for Basic Midwifery Practice, [~~March 2020~~]updated 2025;

(b) Standards for the Practice of Midwifery, revised 2022; and

(c) Code of Ethics, December 2013.

([~~10~~]9) "Unlicensed assistive personnel" as defined in Subsection 58-44a-102(11), is further defined in Subsection R156-31b-102([~~38~~]46).

([~~11~~]10) "Unprofessional conduct" is further defined in Sections R156-1-501 and R156-44a-502.

R156-44a-302. Qualifications for Licensure - Examination Requirements.

Under Subsection 58-44a-302(1)(e), the examination required for licensure is the CNM examination administered by the AMCB.

R156-44a-303. License Renewal - Procedures.

(1) Under Subsections 58-1-308(1) and 58-44a-303(1), the renewal date for the two-year renewal cycle for licensees under Title 58, Chapter 44a, Nurse Midwife Practice Act is established in [~~Subsection~~]Section R156-1-308a[~~(1)~~].

(2) Renewal procedures shall be under Sections R156-1-308[~~b~~]a through R156-1-308l.

(3) Each applicant for licensure renewal shall hold current CNM certification from the AMCB.

R156-44a-[~~305~~]306. Inactive Licensure.

(1) A licensee may apply for inactive licensure status in accordance with Sections 58-1-305 and R156-1-305.

(2) To reactivate a license that has been inactive for five years or less, the licensee shall submit documentation to the Division verifying that the licensee is in current compliance with the continuing competency requirements in Subsection R156-44a-303(3).

(3) To reactivate a license that has been inactive for more than five years, the licensee shall submit documentation [~~one of the following~~]to the Division verifying that the licensee has:

(a) active licensure in another state or jurisdiction;

(b) [~~completion of~~]completed a refresher program approved by the American College of Nurse-Midwives; or

(c) a passing score on the required examination under Section R156-44a-302, within six months before submitting the application to reactivate the license.

R156-44a-402. Administrative Penalties.

Under Sections 58-1-501, 58-44a-402, 58-44a-501, 58-44a-502, 58-44a-503, and Subsection[~~s~~] 58-44a-102(1), [~~58-44a-402(1), and 58-44a-503(3),~~]unless otherwise ordered by the presiding officer, the following fine schedule shall apply:

[

~~TABLE~~
~~Fine Schedule~~

~~VIOLATION~~	~~FIRST OFFENSE~~	~~SUBSEQUENT OFFENSE~~
~~58-44a-501(1)~~	~~$ 2,000 - $ 5,000~~	~~$ 5,000 - $ 10,000~~
~~58-44a-501(2)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-44a-501(3)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-44a-501(4)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-44a-502(1)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-44a-502(2)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-44a-502(3)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-44a-502(4)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-44a-502(5)~~	~~$ 200 - $ 1,000~~	~~$ 500 - $ 2,000~~
~~58-44a-502(6)~~	~~Double the original penalty amount, up to $10,000~~	
~~58-44a-502(7)~~	~~$ 500 - $ 1,000~~	~~$ 500 - $ 1,000~~
~~58-44a-502(8)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~

~~58-44a-502(9)(a)~~	~~$ 500 - $ 1,000~~	~~$ 500 - $ 2,000~~
~~58-44a-502(9)(b)~~	~~$ 500 - $ 1,000~~	~~$ 500 - $ 2,000~~
~~58-44a-502(10)(a)~~	~~$ 500 - $ 1,000~~	~~$ 500 - $ 2,000~~
~~58-44a-502(10)(b)~~	~~$ 500 - $ 1,000~~	~~$ 500 - $ 2,000~~
~~58-1-501(1)(a)(i)~~	~~$ 500 - $ 2,000~~	~~$ 500 - $ 10,000~~
~~58-1-501(1)(a)(ii)~~	~~$ 500 - $ 2,000~~	~~$ 500 - $ 10,000~~
~~58-1-501(1)(b)(i)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(1)(b)(ii)~~	~~$ 500 - $ 2,000~~	~~$ 500 - $ 10,000~~
~~58-1-501(1)(c)~~	~~$ 500 - $ 1,000~~	~~$ 1,000 - $ 5,000~~
~~58-1-501(1)(d)~~	~~$ 500 - $ 1,000~~	~~$ 1,000 - $ 5,000~~
~~58-1-501(1)(e)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(1)(f)(i)(A)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(1)(f)(i)(B)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(1)(g)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(i)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(ii)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(iii)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(iv)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-1-501(2)(a)(v)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-1-501(2)(a)(vi)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-1-501(2)(a)(vii)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(viii)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-1-501(2)(a)(ix)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-1-501(2)(a)(x)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-1-501(2)(a)(xi)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~58-1-501(2)(a)(xii)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(xiii)(A)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(xiii)(B)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(xiv)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(xv)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~58-1-501(2)(a)(xvi)~~	~~$ 500 - $ 2,000~~	~~$ 2,000 - $ 10,000~~
~~R156-44a-502(1)~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~
~~R156-44a-502(2)~~	~~$ 250~~	~~$ 500 - $ 1,000~~
~~Ongoing offense~~	~~$ 1,000 per day but not less than the second offense.~~	
~~Any other conduct which constitutes unprofessional or unlawful conduct:~~	~~$ 100 - $ 500~~	~~$ 200 - $ 1,000~~

~~]~~

TABLE
Fine Schedule

VIOLATION	FIRST OFFENSE	SUBSEQUENT OFFENSE
58-1-501(1)(a)(i) or (ii)	$500 - $2,000	$500 - $10,000
58-1-501(1)(b)(i)	$500 - $2,000	$2,000 - $10,000
58-1-501(1)(b)(ii)	$500 - $2,000	$500 - $10,000
58-1-501(1)(c) or (d)	$500 - $1,000	$1,000 - $5,000
58-1-501(1)(e)	$500 - $2,000	$2,000 - $10,000
58-1-501(1)(f)(i)(A) or (B)	$500 - $2,000	$2,000 - $10,000
58-1-501(1)(g)	$500 - $2,000	$2,000 - $10,000
58-1-501(2)(a)(i), (ii), or (iii)	$500 - $2,000	$2,000 - $10,000
58-1-501(2)(a)(iv), (v), or (vi)	$100 - $500	$200 - $1,000
58-1-501(2)(a)(vii)	$500 - $2,000	$2,000 - $10,000
58-1-501(2)(a)(viii), (ix), (x), (xi), or (xii)	$100 - $500	$200 - $1,000
58-1-501(2)(a)(xiii)	$500 - $2,000	$2,000 - $10,000
58-1-501(2)(a)(xiv)(A) or (B)	$500 - $2,000	$2,000 - $10,000
58-1-501(2)(a)(xv), (xvi), (xvii), or (xviii)	$500 - $2,000	$2,000 - $10,000
58-44a-501(1)	$2,000 - $5,000	$5,000 - $10,000
58-44a-501(2), (3), or (4)	$100 - $500	$200 - $1,000
58-44a-502(1)	$100 - $500	$200 - $1,000

58-44a-502(2) or (3)	$500 - $2,000	$2,000 - $10,000
58-44a-502(4)	$100 - $500	$200 - $1,000
58-44a-502(5)	$200 - $1,000	$500 - $2,000
58-44a-502(6)	Double the original penalty amount, up to $10,000	
58-44a-502(7)	$500 - $1,000	$500 - $1,000
58-44a-502(8)	$500 - $2,000	$2,000 - $10,000
58-44a-502(9)(a) or (b)	$500 - $1,000	$500 - $2,000
58-44a-502(10)(a) or (b)	$500 - $1,000	$500 - $2,000
R156-44a-502(1)	$100 - $500	$200 - $1,000
R156-44a-502(2)	$250	$500 - $1,000
Ongoing offense	$1,000 per day but not less than the second offense.	
Any other conduct which constitutes unprofessional or unlawful conduct:	$100 - $500	$200 - $1,000

R156-44a-502. Unprofessional Conduct.

Under Subsections 58-1-203(1)(e) and 58-44a-102(12), "[~~U~~]unprofessional conduct" includes:

(1) the failure to abide by any one or more of the generally recognized scope and standards of nurse midwifery established under Subsections 58-44a-102(9) and R156-44a-102([~~9~~]10); and

(2) the failure to comply with Section 58-37-[~~19~~]306, regarding discussion with a patient or the patient's parent or guardian before issuing an initial opiate prescription.

~~**[R156-44a-601. Delegation of Nursing Tasks.**~~

~~Under Subsections 58-44a-102(9) and (11), the standards and requirements for the delegation of nursing tasks by a certified nurse midwife are in Section R156-31b-701a.~~

]

R156-44a-609. Standards for Out-of-State Programs Providing Certified Nurse Midwife Clinical Experiences in Utah.

(1) To qualify its students for the exemption [~~in~~]under Subsection 58-1-307(1)(b), a nurse midwifery education program located in another state that [~~uses~~]seeks to place a nursing student in a Utah health care facility[~~ies~~] for [~~one or more~~]student clinical experiences with certified nurse midwives[~~,~~] shall[~~,~~] meet the requirements of Subsection (2) before placing [~~a~~]the student.[~~, submit a written request for approval as a recognized school to the Board of Nursing and Certified Nurse Midwives, and demonstrate to the satisfaction of the Board that the program:~~]

(2) A nurse midwifery education program under Subsection (1) shall:

(a) submit a written request for approval as a recognized school to the Board of Nursing and Certified Nurse Midwives; and

(b) demonstrate to the satisfaction of the Board of Nursing and Certified Nurse Midwives that the nurse midwifery education program:

([~~a~~]i) has been approved, if required, by the regulatory body responsible for certified nurse midwives in the program's home state;

([~~b~~]ii) holds current accreditation from the ACME;

([~~c~~]iii) has clinical faculty who are employed by the nurse midwifery education program;

([~~d~~]iv) is affiliated with an institution of higher education; and

([~~e~~]v) has established criteria for selection and supervision of:

([~~i~~]A) onsite preceptors; and

([~~ii~~]B) the clinical activities.

([~~2~~]3) After the nurse midwifery program receives approval [~~by~~]from the Board of Nursing and Certified Nurse Midwives, the nurse midwifery program shall:

(a) reapply for Board of Nursing and Certified Nurse Midwives review and approval when the program's ACME accreditation is reaffirmed; and

(b) notify the Board of Nursing and Certified Nurse Midwives in writing of any change in [~~its~~]the nurse midwifery program's accreditation status.

R156-44a-701. Delegation of Nursing Tasks.

Under Subsections 58-44a-102(9) and (11), the standards and requirements for the delegation of nursing tasks by a certified nurse midwife are in Section R156-31b-701a.

KEY: licensing, midwifery, certified nurse midwife
Date of Last Change: [~~December 24, 2024~~]2026
Notice of Continuation: August 8, 2023
Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-44a-101; 58-1-307.1

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58389**
Rule or section number:	**R156-57**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Jeff Busjahn	801-530-6789	JBusjahn@Utah.gov

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

3. General Information

A. Rule or section catchline:

R156-57. Respiratory Care Practices Act Rule

B. Purpose of the new rule or reason for the change:

The Division of Professional Licensing (Division), in collaboration with the Respiratory Care Licensing Board (Board) are filing these proposed amendments to define the Respiratory Care Apprentice license authorized by statutory changes made by SB 31 passed in the 2026 General Session.

Secondly, this rule defines "high-risk procedures" for Respiratory Care Apprentices within the Respiratory Care Practice Act Rule.

Finally, this rule is being updated to be consistent with the Office of Administrative Rule's (OAR) Rulewriting Manual for Utah and to remove duplicate language already present in the Utah Code.

C. Summary of the new rule or change:

Updates the current rule to reflect changes made within SB 31 (2026) and updates this rule language to OAR standards.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 31 (2026 General Session)

5. Fiscal Information

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

A. State budget:

The Division expects that the proposed amendments may minimally impact the state budget as they define the new respiratory care apprentice license. The Division estimates that the number of respiratory care apprentice licenses will be approximately 100 per year.

The respiratory care apprentice application is simple to process and estimated time to complete an application is five minutes. The fee for the license is set at $35 per license with no criminal background check and an estimated cost of $2 per application to process. The respiratory care apprentice license cannot be renewed and will expire within a year.

There could be DOPL investigative costs if a respiratory care apprentice displays misconduct, however, this cost is estimated to be low due to the projected lower limit of issued apprentice licenses. There could be an initial estimated cost of $500 to update or create applications and $500 to update the information on the DOPL website with $100 ongoing.

The investigative costs would be minimal due to the low number of respiratory care apprentice license holders.

The remainder of the proposed amendments are not expected to result in any impact as they update this rule in accordance with statutory changes.

B. Local governments:

A fiscal cost or fiscal benefit that cannot be quantified because the relevant data is unavailable and the cost of acquiring the relevant data is prohibitively expensive.

The Division has no data to estimate how many Respiratory Care Apprentices would be employed by local governments. A local government would not pay for the license application or have a cost to process it.

There could be a nominal benefit if a local government employs a respiratory care apprentice to reduce the workload for an employed fully licensed respiratory care practitioner.

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

The proposed amendments to Rule R156-57 are not expected to impact the estimated 1,214 small businesses in Utah (NAICS 621399, 621498, 622110) that employ respiratory care therapists.

There could be a very small benefit for a healthcare entity to hire respiratory care apprentice. Many healthcare entities utilize nurses that can perform the same functions as a respiratory care therapist or respiratory care apprentice.

The remainder of the proposed amendments are not expected to result in any impact as they update this rule in accordance with statutory changes.

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

The proposed amendments to Rule R156-57 are not expected to impact the estimated two non-small businesses in Utah (NAICS 621399, 621498, 622110) that employ respiratory care therapists.

There could be a very small benefit for a healthcare entity to hire respiratory care apprentice. Many healthcare entities utilize nurses that can perform the same functions as a respiratory care therapist or respiratory care apprentice.

The remainder of the proposed amendments are not expected to result in any impact as they update this rule in accordance with statutory changes.

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 approximately 2,308 respiratory care practitioners with active licenses in Utah and the impact from the proposed rule is very minimal.

The Division estimates that approximately 100 respiratory care apprentice licenses will be issued per year.

The apprentice license holders could experience a financial benefit since their personal income could be higher if they are employed as a respiratory care apprentice than employed as a certified nursing assistant (CNA), Med Aide, or any job not associated with healthcare.

A license holder could be affected by a citation if the license holder violates the Utah Code or Rule associated with Title 58, Chapter 57, Respiratory Care Practices Act or Rule R156-57. Respiratory Care Practices Act Rule.

F. Compliance costs for affected persons:
As described in box 5E for other persons, the Division anticipates minimal compliance costs for any affected persons from these proposed amendments.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$1,200	$300	$300	$300	$300
Local Governments	inestimable	inestimable	inestimable	inestimable	inestimable
Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Non-Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Other Persons	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$3500	$3500	$3500	$3500	$3500
Local Governments	inestimable	inestimable	inestimable	inestimable	inestimable
Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Non-Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Other Persons	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

B. Summary of reasonable alternatives or modifications:
The rule changes may have a positive effect on the economic wellbeing, family health, stability, and formation of a Respiratory Care Apprentice since they will potentially be making a higher wage than their base job, gaining real work experience and knowledge to apply to their certification exam. The balance of the proposed rule change would minimally impact family health, stability, and formation.

9. Citation Information

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 58-57-102

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/02/2026	2:00 PM	Anchor Meeting Location: Heber M. Wells Building Room 474 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/fvf-kmff-usf Or dial: (US) +1 641-632-2216 PIN: 485 226 796# More phone numbers: https://tel.meet/fvf-kmff-usf? pin=5841047952038

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Mark B. Steinagel, Division Director	**Date:**	10/09/2026

R156. Commerce, [~~Occupational and~~]Professional Licensing.
R156-57. Respiratory Care Practices Act Rule.
R156-57-101. Title.

(1) This rule is known as the "Respiratory Care Practices 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 57, Respiratory Care Practices Act.

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

R156-57-102. Definitions.

[~~In addition to the definitions in Title 58, Chapters 1 and 57, as used in Title 58, Chapters 1 and 57, or this rule:~~]Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 57, Respiratory Care Practices Act. In addition:

(1) "Approved education program" as used in Subsections 58-57-101(5)(b)(v), 58-57-103(3)(a)(iv), and R156-57-103b(1)(b) means a program at a college or university that is a national accredited organization as defined in Subsection (6).

(2) "Certificate of Academic Status" as used in Section R156-57-103b means the Division form that may be completed by an approved respiratory care practitioner educational program:

(a) for an applicant for a respiratory care apprentice license; and

(b) to prove that the applicant meets the qualifications for licensure under Subsections 58-57-103(3)(a)(iv)(A) and (B).

(3) "CRT" means the NBRC's Certified Respiratory Therapist credential.

(4) "Equivalent" as used in Subsections 58-57-103(2)(a)(iii) and (3)(a)(iii) in reference to a high school diploma includes the general education credential (GED) obtained in a jurisdiction of the United States.

(5)(a) "High-risk procedures" as used in Subsection 58-57-101(3)(b)(iii) means:

(i) airway management and intubation;

(ii) pulmonary diagnostics; or

(iii) patient transport.

(b) "High-risk procedures" includes the following, unless the respiratory care apprentice is under the direct supervision of a licensed respiratory care practitioner as defined in Subsection R156-1-102a(1)(a):

(i) emergency response;

(ii) neonatal care; or

(iii) pediatric care.

(6) "Nationally accredited organization" as used in Subsection 58-57-103(2)(a)(iv) means a respiratory care educational program accredited by the Commission on Accreditation for Respiratory Care (CoARC) that is evidenced by NBRC credential as a CRT or a RRT.

(7) "NBRC" means The National Board for Respiratory Care.

([~~1~~]8) "Other respiratory related [~~durable medical~~]equipment intended for use in the home"[~~,~~] as used in Subsection 58-57-

[~~2(6)(k),~~]101(7)(k) means other new respiratory care technology intended for use in the home that was not approved on the market as of September 2006.

(9) "RRT" means the NBRC's Registered Respiratory Therapist credential.

([~~2~~]10) "Supervised" as used in Subsection 58-1-307(1)(b) or "supervising" as used in Subsection 58-57-[~~2(4)(e)~~]101(5)(b)(v) means that the licensed respiratory care practitioner supervising the student is:[~~- present in the facility and shall be available to see the patient and give immediate consultation with respect to care.~~]

(a) present in the facility; and

(b) available to see the patient and give immediate consultation with respect to care.

[~~R156-57-103. 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 57.~~

~~R156-57-104. Organization - Relationship to Rule R156-1.~~

~~The organization of this rule and its relationship to Rule R156-1 is as described in Section 58-1-107.~~

]

R156-57-[~~302a~~]103a. Qualifications for Licensure - Examination Requirements.

[~~In accordance with Subsection 58-57-4(2)(f) and Sections 58-57-5 and 58-1-309, all applicants for licensure shall pass the following examinations:~~

~~(1) the National Board for Respiratory Care (NBRC) Certification Examination for Entry Level Respiratory Therapists (CRT); or~~

~~(2) the NBRC Registry Examination for Advanced Respiratory Therapists (RRT).~~]

(1) Under Subsection 58-57-103(2)(a)(v) and Sections 58-1-309 and 58-57-104, an applicant with a CRT designation applying for licensure as a respiratory care practitioner shall pass:

(a) the NBRC's Therapist Multiple-Choice (TMC) Examination or a predecessor examination; or

(b) the NBRC's Respiratory Therapy (RT) Examination, if the applicant applies to the NBRC for examination after December 31, 2026.

(2) Under Subsection 58-57-103(2)(a)(v) and Sections 58-1-309 and 58-57-104, an applicant with a RRT designation applying for licensure as a respiratory care practitioner shall pass:

(a) the NBRC's Clinical Simulation Examination (CSE) or a predecessor examination.

(b) the NBRC's Respiratory Therapy (RT) Examination, if the applicant applies to the NBRC for examination after December 31, 2026.

[~~R156-57-302b. Qualifications for Licensure - Education Requirements.~~

~~In accordance with Subsection 58-57-4(2)(e) and Section 58-57-5, "a respiratory care practitioner education program that is approved by the board" means a respiratory care educational program accredited by the Committee on Accreditation for Respiratory Care (COARC) as evidenced by NBRC certification as a CRT or RRT.~~

]

R156-57-103b. Respiratory Care Apprentice License -- Education.

(1) Under Subsection 58-57-103(3), an applicant for licensure as a respiratory care apprentice shall:

(a) submit documentation to the Division to prove that the applicant meets the requirement of Subsection 58-57-103(3)(a)(iii); and

(b) ensure that the applicant's approved education program submits a Certificate of Academic Status directly to the Division that verifies:

(i) the applicant meets the requirements of Subsections 58-57-103(3)(a)(iv)(A) and (B); and

(ii) the applicant has permission from the education program to be licensed as a respiratory care apprentice under Subsection 58-57-103(3)(a)(iv)(C).

(2) The applicant's respiratory care education program has the sole discretion to decide if it will submit a Certificate of Academic Status for the applicant to the Division.

R156-57-303. Renewal Cycle - Procedures.

(1) [~~In accordance with~~]Under Subsection 58-1-308(1), the renewal date for the two-year renewal cycle applicable to a licensee[~~s~~] under Title 58, Chapter 57, Respiratory Care Practices Act is established [~~by rule~~]in Section R156-1-308a.

(2) Renewal procedures shall be in accordance with Sections R156-1-308[~~c.~~]a through R156-1-308l.

KEY: licensing, respiratory care, respiratory care practitioner, respiratory care apprentice
Date of Last Change: [~~February 22, 2007~~]2026
Notice of Continuation: March 2, 2026
Authorizing, and Implemented or Interpreted Law: [~~58-57-1; ~~]58-1-106(1)(a); 58-1-202(1)(a); 58-57-102

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58390**
Rule or section number:	**R156-60e**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. 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.

3. General Information

A. Rule or section catchline:

R156-60e. Mental Health Professional Practice Act Rule

B. Purpose of the new rule or reason for the change:

The Division of Professional Licensing (Division) in collaboration with the Behavioral Health Board (Board) is filing these proposed amendments due to SB 117 being passed in the 2026 General Session.

C. Summary of the new rule or change:

The proposed amendments to Section R156-60e-202.1 Utah Behavioral Health Board – Advisory Committee section includes requirements that each advisory committee include at least one individual from each profession under Title 58, Chapter 60, Mental Health Professional Practice Act and Title 58, Chapter 61 Psychologist Licensing Act.

The proposed amendments also include language allowing a CMHC applicant to pass either the NCMHCE or NCE examination.

The proposed amendments also clarify that a training organization providing the clinical supervisor training program must be approved by the Division in consultation with the Board. The proposed amendments further clarify that the supervisor training program must be taught by someone who meets the supervision eligibly requirements under Section R156-60e-305.1.

The proposed amendments clarify that the suicide prevision training that an Advanced Substance Use Disorder Counselor licensee must complete is the suicide prevention course under Section R156-60e-302.1.

The proposed amendments clarify the continuing education requirements for a licensee with a Substance Use Disorder Counselor license who has not obtained an associate's degree or higher.

The proposed amendments also remove obsolete language regarding reinstatement of associate-level licenses.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 117 (2026 General Session)

5. Fiscal Information

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

A. State budget:

The changes further clarify and update language.

These proposed changes 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.

B. Local governments:

The changes further clarify and update language from the previous draft filing.

These proposed changes are expected to have zero net impact on local governments' revenues or expenditures because these changes should not result in any additional complaints, investigations, or disciplinary actions or any additional licensing issues.

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 changes do not add any additional cost or burden to existing small businesses.

Adding required representation from Title 60, Chapter 58 (Mental Health Professional Practice Act) and Title 61, Chapter 58 (Psychologist Licensing Act) to the Qualifications and Professional Development Committee governs internal board structure and volunteer composition. It establishes procedural representation without mandating new fees, reporting obligations, equipment purchases, or operational costs for private practices or small businesses.

Accepting either the National Clinical Mental Health Counseling Examination (NCMHCE) or the National Counselor Examination (NCE) expands options rather than adding requirements. Because it allows applicants to qualify using an exam they may have already taken or prefer, it removes potential duplicate testing costs and reduces barriers to entry into the practice workforce without placing any direct compliance costs on small business employers.

Requiring Division consultation with the Mental Health Board for approving clinical supervisor training organizations clarifies the existing administrative approval pathway. It outlines procedural alignment between state regulatory bodies rather than creating new licensure fees, higher training tuition, or added administrative burdens for small training entities.

Removing unnecessary language regarding the reinstatement of associate-level licenses is a regulatory cleanup measure.

Removing redundant or outdated administrative text simplifies understanding of the rules without altering active license fees, compliance obligations, or payroll demands for businesses employing associate licensees.

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

There are approximately 96 non-small businesses in Utah comprising of licensees engaged in the practice of mental health therapy 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 changes do not add any additional cost or burden to existing non-small businesses.

Adding required representation from Title 60, Chapter 58 (Mental Health Professional Practice Act) and Title 61, Chapter 58 (Psychologist Licensing Act) to the Qualifications and Professional Development Committee governs internal board structure and volunteer composition. It establishes procedural representation without mandating new fees, reporting obligations, equipment purchases, or operational costs for private practices or small businesses.

Accepting either the National Clinical Mental Health Counseling Examination (NCMHCE) or the National Counselor Examination (NCE) expands options rather than adding requirements. Because it allows applicants to qualify using an exam they may have already taken or prefer, it removes potential duplicate testing costs and reduces barriers to entry into the practice workforce without placing any direct compliance costs on small business employers.

Requiring Division consultation with the Mental Health Board for approving clinical supervisor training organizations clarifies the existing administrative approval pathway. It outlines procedural alignment between state regulatory bodies rather than creating new licensure fees, higher training tuition, or added administrative burdens for small training entities.

Removing unnecessary language regarding the reinstatement of associate-level licenses is a regulatory cleanup measure.

Removing redundant or outdated administrative text simplifies understanding of the rules without altering active license fees, compliance obligations, or payroll demands for businesses employing associate licensees.

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 an estimated 300 to 500 therapists directly employed by the state and likely 1,500 to 2,000 therapists employed by Local Mental Health Authorities and Utah's 41 school districts.

As of early 2026, there are approximately 17,400 licensed independent mental health providers in the state of Utah.

F. Compliance costs for affected persons:

The proposed changes do not add any additional cost or burden to affected persons.

Adding required representation from Title 60, Chapter 58 (Mental Health Professional Practice Act) and Title 61, Chapter 58 (Psychologist Licensing Act) to the Qualifications and Professional Development Committee governs internal board structure and volunteer composition. It establishes procedural representation without mandating new fees, reporting obligations, equipment purchases, or operational costs for private practices or small businesses.

Accepting either the National Clinical Mental Health Counseling Examination (NCMHCE) or the National Counselor Examination (NCE) expands options rather than adding requirements. Because it allows applicants to qualify using an exam they may have already taken or prefer, it removes potential duplicate testing costs and reduces barriers to entry into the practice workforce without placing any direct compliance costs on small business employers.

Requiring Division consultation with the Mental Health Board for approving clinical supervisor training organizations clarifies the existing administrative approval pathway. It outlines procedural alignment between state regulatory bodies rather than creating new licensure fees, higher training tuition, or added administrative burdens for small training entities.

Removing unnecessary language regarding the reinstatement of associate-level licenses is a regulatory cleanup measure.

Removing redundant or outdated administrative text simplifies understanding of the rules without altering active license fees, compliance obligations, or payroll demands for businesses employing associate licensees.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-60-201
Section 58-60-301	Section 58-60-401	Section 58-60-501

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
11/24/2026	12:00 PM	Anchor Meeting Location: Heber M. Wells Building Room 474 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/fgd-qyig-sfp Or dial: (US) +1 321-465-5064 PIN: 868 263 759# More phone numbers: https://tel.meet/fgd-qyig-sfp? pin=2981010580436

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Mark B. Steinagel, Division Director	**Date:**	10/09/2026

R156. Commerce, Professional Licensing.
R156-60e. Mental Health Professional Practice Act Rule.
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.

(2) "ASAM" means the American Society of Addiction Medicine.

(3) "ASUDC" means an advanced substance use disorder counselor.

(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.

(5) "Human growth and development" as used in Subsection R156-60e-302.5(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.

(6) "IC&RC" means the International Certification and Reciprocity Consortium.

(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.

(8) "MAC" means Master Addiction Counselor.

(9) "NAADAC" means the Association for Addiction Professionals.

(10) "NCC AP" means the National Certification Commissions for Addiction Professionals.

(11) "Prerequisite courses" as used in Subsections 58-60-506(6)(a)(ii) and R156-60e-302.5(2) means courses that shall be completed before an individual may qualify for licensure.

(12) "SASSI" means Substance Abuse Subtle Screening Inventory.

(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.

(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.

(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.

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

(17) "SUDC" means a substance use disorder counselor.

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)(b)(ii) and subject to Subsections 58-60-102.5(4)(c)(i) and (4)(c)(ii), the membership of each advisory committee under Subsections 58-60-102.5(4)(a)(i), (4)(a)(ii), and (4)(a)(iii) shall include at least one licensed individual from each profession under:

(a) Title 58, Chapter 60, Mental Health Professional Practice Act; and

(b) Title 58, Chapter 61, Psychologist Licensing Act.

(4) Under Subsection 58-60-102.5(4)(b)(ii) and subject to Subsections 58-60-102.5(4)(c)(i) and (4)(c)(ii), if a member of a profession is not available for an open position on an advisory committee under Subsections (3) and 58-60-102.5(4)(a), then the Division may fill the position with a licensed individual who:

(a) is licensed under:

(i) Title 58, Chapter 60, Mental Health Professional Practice Act; or

(ii) Title 58, Chapter 61, Psychologist Licensing Act; and

(b) has the equivalent or higher qualifying education and experience required for the open position.

([~~3~~]5) 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]6) 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), 58-60-506(4)(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-pace 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-302.4. 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), an individual applying for ACMHC-Extern licensure whose completed educational degree 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.~~]one of the following examinations:

(a) the National Clinical Mental Health Counseling Examination (NCMHCE); or

(b) the National Counseling Examination (NCE) from the NBCC, if the applicant did not use this examination to satisfy the applicant's education requirement under Subsection 58-60-405(3)(c).

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)([~~e~~]d)(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)(a) Under Subsection 58-60-506(6)(a)(ii), an applicant for SUDC licensure shall complete 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-306.1. Clinical Supervisor Training Program.

(1) Under Subsection 58-60-102(4)(a)(iii)(A), a licensed individual applying to become a Division-approved clinical supervisor shall complete a synchronous training course on learning clinical supervision that[~~ meets the following requirements~~]:

(a) is presented by:

(i) a regionally accredited educational institution;

(ii) a national or state association-approved provider;

(iii) a professional training organization that is approved by the Division in collaboration with the Board; or

(iv) a government agency;

(b) is taught by a licensed mental health [~~license~~]therapist as defined in Subsection 58-60-102(15) from any state, territory, or jurisdiction of the United States or Canada who meets the supervisor eligibility requirements under Section R156-60e-305.1;

(c) is a single, dedicated course of study where all hours are completed;

(d) has a curriculum that includes:

(i) at least one hour on defining and conceptualizing clinical supervision and models;

(ii) at least two hours on the supervisory relationship and the supervised individual's development;

(iii) at least two hours on supervision methods and techniques including roles, process, group supervision, multi-cultural supervision, and evaluation;

(iv) at least two hours on standards of practice, codes of ethics, and legal and professional issues; and

(v) at least one hour on executive and administrative tasks including supervision plans, contracts, record keeping, and reporting;

(e) is completed at least 24 months after the licensed individual obtains one of the following licenses:

(i) APRN;

(ii) CMHC;

(iii) LCSW;

(iv) MAC;

(v) MFT;

(vi) physician; or

(vii) psychologist license; and

(f) includes a completion certificate verifying:

(i) the course title;

(ii) the attendee's name;

(iii) instructor's name;

(iv) presenting organization; and

(v) 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-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 or a SUDC certification; 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 or a SUDC certification.

(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 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.

(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~~]3) 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~~]4) 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~~]5) 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 Health Board; or

(ii) a five-year probationary license with conditions set by the Behavioral Health Board.

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: [~~May 26,~~] 2026
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	**Filing ID: 58420**
Rule or section number:	**R156-67**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Rich Oborn	801-530-6254	rjoborn@utah.gov

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

3. General Information

A. Rule or section catchline:
R156-67. Utah Medical Practice Act Rule
B. Purpose of the new rule or reason for the change:
The Division of Professional Licensing (Division) in collaboration with the Utah Medical Licensing Board (Board) is filing these proposed amendments to incorporate the statutory changes made by SB 222 (passed in the 2026 General Session), clean up citations including those impacted by the controlled substances recodification enacted by HB 301 (passed in the 2026 General Session), and update language to conform to Division standards and Office of Administrative Rules (OAR) drafting guidelines.
C. Summary of the new rule or change:
Section R156-67-101 is amended to conform the catchline to Division standard and update a citation. Section R156-67-102 is amended to conform the introduction language to Division standard, remove the definition of "alternate medical practices" as the section that references the definition is removed from rule due to statutory changes, add definitions for "CFPC" and "RCPSC", renumber due to the removed and added definitions, and update citations. Section R156-67-302a is amended to update citations, clarify language, and add board certification with an American Osteopathic Association Certifying Board as an option for board certification. Section R156-67-302b is amended to update citations and remove the language requiring a foreign medical school graduate to pass specific exams because this requirement is already stated in statute. Section R156-67-303 is amended to conform renewal and reinstatement language to Division standards. Section R156-67-304 is amended to update citations, correct an acronym, and discontinue use of "CME" and use "continuing education" instead to conform the language with Title 1, Chapter 58 and Rule R156-1. Section R156-67-502 is amended to update citations and clarify language in response to legislative changes. Section R156-67-503 is amended to conform the catchline to Division standard, update citations, clean up the formatting of the fine schedule, and clarify language. Section R156-67-510 is amended to update citations and update the editions of the cited standards. Section R156-67-603 is removed in response to the statutory changes enacted by SB 222 (2026). Section R156-67-604 is amended to update citations. Section R156-67-803 is amended to update a citation.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 222 (2026 General Session) and HB 301 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
The Division does not anticipate any fiscal impact to the state budget beyond that determined by the fiscal note for SB 222 (2026), at https://le.utah.gov/~2026/bills/static/SB0222.html, because the proposed amendments merely clean up, clarify, and update this rule to be current and accurate for licensees.

B. Local governments:

The Division does not anticipate any cost or savings to local governments from the proposed amendments because the proposed amendments do not apply to local governments.

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

There are approximately 2,041 small businesses in Utah with physicians (NAICS 622110, 621111) and who may employ those engaged in the practice of medicine.

However, the proposed amendments are not expected to have any measurable impact on small businesses' revenues or expenditures beyond the fiscal note for SB 222 (2026) because the amendments merely clean up, clarify, and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.

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

There are approximately 106 non-small businesses in Utah with physicians (NAICS 622110, 621111) and who may employ those engaged in the practice of medicine.

However, the proposed amendments are not expected to have any measurable impact on non-small businesses' revenues or expenditures beyond the fiscal note for SB 222 (2026) because the amendments merely clean up, clarify, and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.

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***)**:**

In Utah, there are:
a) 12,361 physicians and surgeons;
b) 2,915 physician and surgeon MBs;
c) 16 physician educator CS licensees;
d) 6 physician educator type I licensees;
e) 10 physician educator type II licensees; and
f) 11 volunteer physicians and surgeons.

The Division does not anticipate any cost or savings from these proposed amendments to these persons or to additional persons other than small businesses, non-small businesses, the state, or local government entities because the amendments merely clean up, clarify, and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.

The proposed rule amendments will not create new obligations for other persons or increase the costs associated with any existing obligations for other persons.

F. Compliance costs for affected persons:

As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**

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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-67-101 et seq.

10. Incorporation by Reference Information

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*)**:**	
Official Title of Materials Incorporated (from title page)	Basic Standards of Preanesthesia Care
Publisher	American Society of Anesthesiologists
Issue Date	October 15, 2025
Issue or Version	October 2025 edition

B. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Standards for Basic Anesthetic Monitoring
Publisher	American Society of Anesthesiologists
Issue Date	October 15, 2025
Issue or Version	October 2025 edition

C. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Standards for Postanesthesia Care
Publisher	American Society of Anesthesiologists
Issue Date	October 23, 2024
Issue or Version	October 2024 edition

D. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Office Anesthesia Evaluation Manual
Publisher	American Association of Oral and Maxillofacial Surgeons
Issue Date	2026
Issue or Version	10th edition

E. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Parameters of Care: AAOMS Clinical Practice Guidelines for Oral and Maxillofacial Surgery
Publisher	American Society of Anesthesiologists
Issue Date	2023
Issue or Version	7th edition

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/07/2026	11:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 402 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/dip-bwtr-qpp Or dial: (US) +1 513-816-0538 PIN: 781 503 126# More phone numbers: https://tel.meet/dip-bwtr-qpp? pin=9377475221570

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/30/2026

R156. Commerce, Professional Licensing.
R156-67. Utah Medical Practice Act Rule.
R156-67-101. Title - Authority - [~~Organization~~]Relationship to Rule R156-1.

(1) This rule is known as the "Utah Medical Practice 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 67, Utah Medical Practice Act.

(3) The organization of this rule and its relationship to Rule R156-1 is as described in Section R156-1-10[~~7~~]1.

R156-67-102. Definitions.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 67, Utah Medical Practice Act. In addition:

(1) "ACCME" means the Accreditation Council for Continuing Medical Education.

(2) [~~"Alternate medical practices" as used in Section R156-67-603, means treatment or therapy that is determined in an adjudicative proceeding under Title 63G, Chapter 4, Administrative Procedures Act, to be:~~

~~(a) not generally recognized as standard in the practice of medicine;~~

~~(b) not shown by current generally accepted medical evidence to present a greater risk to the health, safety, or welfare of the patient than does prevailing treatment considered to be the standard in the profession of medicine; and~~

~~(c) supported by a body of current generally accepted written documentation demonstrating the treatment or therapy has reasonable potential to be of benefit to the patient to whom the therapy or treatment is to be given.~~

~~(3)~~]"AMA" means the American Medical Association.

(3) "CFPC" means the College of Family Physicians of Canada.

(4) "Collaborative practice arrangement contract" means a written, signed contract between a collaborating physician licensed and in good standing under Section 58-67-302, and an associate physician holding a restricted license in accordance with Section 58-67-302.8, that:

(a) includes the terms and conditions required by Section 58-67-807 and Section R156-67-807; and

(b) is approved by the Division in accordance with Section 58-67-807 and Section R156-67-807.

(5) "FLEX" means the Federation of State Medical Boards Licensing Examination.

(6) "FMGEMS" means the Foreign Medical Graduate Examination in Medical Science.

(7) "FSMB" means the Federation of State Medical Boards.

(8) "Homeopathic medicine" means a system of medicine employing and limited to substances prepared and prescribed in accordance with the principles of homeopathic pharmacology as described in the Homeopathic Pharmacopoeia of the United States, its compendia, addenda, and supplements, as officially recognized by:

(a) the Federal Food, Drug and Cosmetic Act, 21 U.S.C. Sec. 301 et seq.;

(b) Utah's food and drug laws; and

(c) Title 58, Chapter 37, Utah Controlled Substances Act.

(9) "LMCC" means the Licentiate of the Medical Council of Canada.

(10) "Medication or substance, including a neurotoxin or a filler, for cosmetic purposes" as used in the definition of cosmetic medical procedure in Subsection 58-67-102(11)(a)(ii) means a medication or substance that is approved by the U.S. Food and Drug Administration (FDA) for use in humans for cosmetic purposes and is used according to FDA guidelines.

(11) "NBME" means the National Board of Medical Examiners.

(12) "RCPSC" means the Royal College of Physicians and Surgeons of Canada.

(1[~~2~~]3) "Unprofessional conduct" under Subsection 58-1-203(1)(e) is further defined in Section R156-67-502.

(1[~~3~~]4) "USMLE" means the United States Medical Licensing Examination.

R156-67-302a. Qualifications for Licensure - Practitioner Data Banks -- Education - Training.

Under Subsections 58-67-302(1)(a), (d), and (e), 58-67-302.7(2), and Section 58-1-302, an applicant for licensure under [~~Subsections~~]Section 58-67-302[~~(1) and (2)~~], 58-67-302.7, or 58-67-302.8 shall submit the following:

(1) a Federation Credentials Verification Service (FCVS) report, which includes the following:

(a) transcripts for medical education;

(b) if applicable, documentation of progressive postgraduate training in an ACGME, CFPC, or [~~LMCC~~]RCPSC accredited residency or an accredited fellowship;

(c) verification of identity; and

(d) for an applicant educated in a jurisdiction outside the United States or its territories, a current ECFMG certification;

(2) if applicable to the license:

(a) American Medical Association Profile; or

(b) documentation of American Board of Medical Specialties (ABMS) Board Certification or certification with an American Osteopathic Association Certifying Board;

(3) Federation of State Medical Boards Disciplinary Inquiry report; and

(4) National Practitioner Data Bank Report of Action.

R156-67-302b. Qualifications for Licensure - Examination Requirements.

(1) Under Subsection 58-67-302(1)(f), the required licensing examination sequence is as follows:

(a) the FLEX components I and II, with a score of not less than 75 on each component part;

(b) the NBME examination parts I, II, and III, with a passing score on each part;

(c) the USMLE steps 1, 2, and 3, with a passing score on each step;

(d) the LMCC examination, Parts 1 and 2;

(e)(i) the NBME part I or the USMLE step 1;

(ii) the NBME part II or the USMLE step 2; and
(iii) the NBME part III or the USMLE step 3;
(f) the FLEX component 1 and the USMLE step 3; or
(g)(i) the NBME part I or the USMLE step 1;
(ii) the NBME part II or the USMLE step 2; and
(iii) the FLEX component 2.
(h) [~~Under Subsection 58-67-302.5(1)(d), a foreign medical school graduate shall pass:~~
~~(i) the FMGEMS; or~~
~~(ii) the USMLE steps 1 and 2.~~
~~(i)~~]An individual who fails any combination of the USMLE, FLEX and NBME three times shall submit to the Division a narrative regarding the failure and may be required to meet with the Board and Division.

(2) Under Subsections 58-67-302(1)(f) and (h), 58-67-302(2)(e) and (f), and Subsection 58-1-401(2)(d), the Division may require an applicant to pass the SPEX examination with a score of not less than 75, if within the past five years the applicant:
(a) has not practiced;
(b) has had disciplinary action; or
(c) has had a substance [~~abuse~~]use disorder or physical or mental impairment that may affect the applicant's ability to practice with reasonable skill and safety.

R156-67-303. Renewal Cycle - Procedures.

(1) Under Subsection 58-1-308(1), the renewal date for the two-year renewal cycle for licensees under Title 58, Chapter 67, Utah Medical Practice Act is established in Section R156-1-308a.
(2) Renewal and reinstatement procedures shall be in accordance with Sections R156-1-308a through R156-1-308l.

R156-67-304. Qualified Continuing Professional Education.

(1) Under Subsection 58-67-304(1)(a), the qualified continuing professional education requirements shall consist of at least 40 hours during each two-year licensure cycle, as follows:
(a) a minimum of 34 hours shall be in category 1 offerings as established by the ACCME;
(b) up to six hours may come from the Division;
(c) up to 15% may come from providing volunteer health care services in accordance with Subsection 58-13-3(8), with one hour of continuing education credit for every four documented hours of volunteer services; and
(d) participation in a residency program approved by the AOA or the AC[~~C~~]GME shall meet the continuing education requirement in a pro-rata amount equal to any part of the two-year licensure cycle.
(2) Continuing education under this section shall:
(a) be relevant to the licensee's professional practice;
(b) be prepared and presented by individuals who are qualified by education, training and experience to provide [~~medical~~]continuing education; and
(c) have a method of verification of attendance and completion which may include a [~~CME~~]Continuing Education Self Reporting Log.
(3) Credit for continuing education shall be recognized in 50-minute hour blocks of time for education completed in formally established classroom courses, seminars, lectures, conferences, or training sessions that meet the criteria in this section.
(4) A licensee shall maintain documentation sufficient to prove compliance with this section[~~,~~] for two years after the end of the [~~licensure~~]renewal cycle for which the [~~CME~~]continuing education is due.

R156-67-305. Exemptions from Licensure.

Exemptions from licensure as a physician and surgeon under Subsection 58-1-307(1) and Section 58-67-305 are subject to the following:
(1) a physician who is exempted from licensure shall obtain a Utah Controlled Substance License before prescribing, dispensing, or administering a controlled substance outside of a hospital;
(2) a person engaged in a public screening program making measures of physiologic conditions such as serum cholesterol, blood sugar, or blood pressure is exempt from licensure and is not engaged in the practice of medicine if:
(a) the instruments or devices used in making measures are:
(i) approved by the FDA, to the extent an approval is required; and
(ii) used in accordance with those approvals;
(b) the facilities and testing protocol meet the standards and personnel training requirements of the Utah Department of Health and Human Services;
(c) unlicensed personnel:
(i) do not interpret results of measures or tests;
(ii) do not recommend treatment or the purchase of any product; and
(iii) conform to the referral and follow-up protocol approved by the Utah Department of Health and Human Services for each measure or test;
(d) licensed personnel act within their scope of practice; and

(e) the information provided to the individuals measured or tested to allow them to interpret their own results is only that approved by the Utah Department of Health and Human Services;

(3) an unlicensed public safety individual who does not have emergency medical technician (EMT) certification, but who is designated as a first responder by city, county, or state officials, may carry a Mark I automatic injector antidote kit and self-administer the antidote, or administer the antidote to the individual's designated first response buddy, if:

(a) the kit is procured through the Utah Department of Health and Human Services;

(b) the kit is issued to the individual by the individual's employing agency; and

(c) before being issued the kit, the responder has completed a course on the use of auto-injectors; and

(4) under Subsection 58-67-305(6)(b)(iv), a medical assistant under the indirect supervision of a physician, may not engage in the following medical practices or procedures:

(a) diagnosing;

(b) establishing a treatment plan; or

(c) injecting the following:

(i) medication or substance, including a neurotoxin or filler, for cosmetic purposes; or

(ii) cosmetic products with bioactive ingredients with claimed medical benefits.

R156-67-502. Unprofessional Conduct.

Under Subsection 58-1-203(1)(e), "unprofessional conduct" includes:

(1) prescribing for oneself any Schedule II or III controlled substance, but a licensee may use, possess, or self-administer a Schedule II or III controlled substance legally prescribed for the licensee by another licensed practitioner acting within scope of licensure if the licensee uses the controlled substance in accordance with the prescription order and for the use intended;

(2) knowingly prescribing, selling, giving, or administering, directly or indirectly, or offering to prescribe, sell, give, or administer, any scheduled controlled substance as defined in Title 58, Chapter 37, Utah Controlled Substances Act to a drug dependent person as defined in Subsection 58-37-[~~2~~]101(1)([~~s~~]r), except if:

(a) permitted by law; and

(b) prescribed, dispensed, or administered according to a proper medical diagnosis and for a condition indicating the use is appropriate;

(3) knowingly engaging in billing practices that are abusive and have charges that are grossly excessive for services provided;

(4) directly or indirectly giving or receiving any fee, commission, rebate, or other compensation for professional services not actually and personally provided or supervised; however, nothing in this section shall preclude the legal relationships within lawful professional partnerships, corporations, or associations or the relationship between an approved supervising physician and physician assistants or advanced practice nurses supervised by them;

(5) knowingly failing to transfer a copy of pertinent and necessary medical records or a summary of those records to another physician when requested by the subject patient or by the patient's legal representative;

(6) failing to furnish to the [~~b~~]Board upon request information known by a licensee with respect to the quality and adequacy of medical care provided to a patient by a physician licensed under Title 58, Chapter 67, Utah Medical Practice Act;

(7) failing as an operating surgeon to:

(a) perform adequate pre-operative or primary post-operative care of the surgical condition for a patient in accordance with the standards and ethics of the profession; or

(b) arrange for competent primary post-operative care of the surgical condition by a licensed physician and surgeon who is equally qualified to provide that care;

(8) billing a global fee for a procedure without providing the requisite care;

(9) supervising the providing of breast screening by diagnostic mammography services or interpreting the results of breast screening by diagnostic mammography to or for the benefit of any patient without having current certification or current eligibility for certification by the American Board of Radiology, except that a licensed physician and surgeon may review the results of any breast screening by diagnostic mammography procedure upon a patient to consider those results in determining appropriate care and treatment of that patient if the results are interpreted by a physician and surgeon qualified under this subsection and a timely written report is prepared by the interpreting physician and surgeon in accordance with the standards and ethics of the profession;

(10) as a licensee under Title 58, Chapter 67, Utah Medical Practice Act, failing without just cause to comply with any written agreement in which the licensee's education or training as a medical doctor is funded in consideration for the licensee's agreement to practice in a certain locality or type of locality or to comply with other conditions of practice following licensure;[~~:~~

~~(a) repay as agreed any loan or other repayment obligation legally incurred by the licensee to fund the licensee's education or training as a medical doctor; or~~

~~(b) comply with any written agreement in which the licensee's education or training as a medical doctor is funded in consideration for the licensee's agreement to practice in a certain locality or type of locality or to comply with other conditions of practice following licensure;~~]

(11) violating Section 58-17b-620;

(12) violating Section 58-1-301.7 by failing to keep the Division informed of a current mailing address or email address;

(13) [~~engaging in alternate medical practice, except as provided in Section R156-67-603~~]deviating or attempting to deviate from medical norms or established practices without meeting the requirements of Subsection 58-1-501(2)(b), (5), and (6);

(14) violating the American Medical Association (AMA) Code of Medical Ethics, 2017 edition, which is incorporated by reference;

(15) failing to timely submit an annual written report to the Division indicating that the physician has reviewed at least annually the dispensing practices of those authorized by the physician to dispense an opiate antagonist, under Section R156-67-604; and

(16) failing to discuss the risks of using an opiate with a patient or the patient's guardian before issuing an initial opiate prescription, under Section 58-37-[~~19~~]306; or

(17) violating Section R156-67-510.

R156-67-503. Administrative [~~Penalties~~]Fine Schedule.

(1) Under Sections 58-1-502[~~,~~] and 58-67-503 and Subsection 58-67-102(3), unless otherwise ordered by the presiding officer, the following fine [~~and citation~~]schedule shall apply:

TABLE 1
[~~Fine and Citation Schedule~~]

Violation[~~IOLATION~~]	First[~~IRST~~] Offense[~~FFENS E~~]	Subsequent[~~UB SEQUENT~~] Offense[~~FFENS E~~]
58-1-501(1)	$[—]5,000 - [ ]$10,000	$10,000
58-1-501(2)(a)(i)	$[——]100 - $[ ]500	$[–]500 - $3,000
58-1-501(2)([~~b~~]a)(ii)	$[——]500 - $[ ]5,000	$[——]1,500 - $10,000
58-1-501(2) [~~(c),(d),(e)~~](a)(iii) through (v)	$[——]500 - $[ ]5,000	$[——]5,000 - $10,000
58-1-501(2)[~~(f)~~](a)(vi)	$[——]500 - $[ ]5,000	$[——]1,500 - $10,000
58-1-501(2)[~~(g),(h),(i), (j),(k),(l)~~](a)(vii) through (xii)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
58-1-501(2)(m)	$[——]5,000 - $10,000	$10,000
58-1-501.5(5)	$[——]500 - $[ ]1,500	$[——]1,500 - $10,000
58-1-510(3)	$[——]500 - $[ ]1,500	$[——]1,500 - $10,000
[~~58-37-8~~]	[~~$ 500 - $ 5,000~~]	[~~$ 5,000 - $10,000~~]
58-67-501(1)	$[—]1,000 - $[ ]5,000	$[——]2,000 - $10,000
58-67-502(1)	$[——]500 - $[ ]5,000	$[——]5,000 - $10,000
R156-1-501 (1) through (9)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
R156-37-502(1)(a)	$ 5,000 - $10,000	$10,000
R156-37-502(1)(b)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
R156-37-502(2)	$[——]500 - $[ ]5,000	$[——]1,500 - $10,000
R156-37-502(3), (4), (5)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
R156-37-502(6), (7)	$[——]5,000 - $10,000	$10,000
R156-37-502(8), (9)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
R156-67-502 (1) through (17)	$[——]500 - $[ ]1,500	$[——]1,500 - $10,000
Other unprofessional or unlawful conduct	$[——]500 - $[ ]1,500	$[——]1,500 - $10,000
Ongoing offenses	$2,000 per day but not less than [~~second~~]subsequent offense	

[~~(2) Citations shall not be issued for third offenses, except in extraordinary circumstances approved by the investigative supervisor.~~
~~(3) If multiple offenses are cited on the same citation, the fine shall be determined by evaluating the most serious offense.~~
~~(4) An investigative supervisor may authorize a deviation from the fine schedule based upon the aggravating or mitigating circumstances.~~
~~(5) The presiding officer for a contested citation shall have the discretion, after a review of the aggravating and mitigating circumstances, to increase or decrease the fine amount imposed by an investigator based upon the evidence reviewed.~~]
(2)(a) Under Subsection R156-1-502(1), a citation may not be used for a third or subsequent offense except in extraordinary circumstances approved by the bureau manager or chief investigator.
(b) If a citation is issued for a third or subsequent offense, the fine amount shall double the second offense fine amount up to the maximum fine allowed under Section 58-67-503.
(3) Multiple offenses may be cited on the same citation if the citation clearly indicates:
(a) each offense; and
(b) the fine amount allocated to each offense.
(4) The Division bureau manager, investigative team lead, or chief investigator may authorize a deviation from the fine amount in a citation based upon the aggravating or mitigating circumstances.
(5) The Division's presiding officer for a contested citation may increase or decrease the fine amount imposed by an investigator based on:
(a) a review of the evidence; and
(b) the aggravating or mitigating circumstances.

R156-67-510. Anesthesia and Sedation Requirements.
Under Subsections 58-1-510(3) and (4) and 58-67-102[~~(17)~~](19)(a)(i), a physician who is providing general anesthesia, deep sedation, or moderate sedation shall possess the knowledge, skills, and education and training required by the following standards, and shall comply with the following standards:
(1) the following American Society of Anesthesiologists (ASA) standards, which are incorporated by reference:
(a) Basic Standards for Preanesthesia Care, October 202[~~0~~]5 edition;
(b) Standards for Basic Anesthetic Monitoring, October 202[~~0~~]5 edition; and
(c) Standards for Postanesthesia Care, October 20[~~19~~]24 edition; or
(2) the following American Association of Oral and Maxillofacial Surgeons (AAOMS) standards, which are incorporated by reference:
(a) Office Anesthesia Evaluation Manual, [~~2018 9th~~]2026 10th edition; and
(b) Parameters of Care, [~~2017 6th~~]2023 7th edition.

[~~R156-67-603. Alternate Medical Practice.~~
~~(1) A licensed physician and surgeon may engage in alternate medical practices as defined in Subsection R156-67-102(2) and shall not be considered to be engaged in unprofessional conduct on the basis that it is not in accordance with generally accepted professional or ethical standards as unprofessional conduct defined in Subsection 58-1-501(2)(b), if the licensed physician and surgeon:~~
~~(a) possesses current generally accepted written documentation, which in the opinion of the board, demonstrates the treatment or therapy has reasonable potential to be of benefit to the patient to whom the therapy or treatment is to be given;~~
~~(b) possesses the education, training, and experience to competently and safely administer the alternate medical treatment or therapy;~~
~~(c) has advised the patient with respect to the alternate medical treatment or therapy, in writing, including:~~
~~(i) that the treatment or therapy is not in accordance with generally recognized standards of the profession;~~
~~(ii) that on the basis of current generally accepted medical evidence, the physician and surgeon finds that the treatment or therapy presents no greater threat to the health, safety, or welfare of the patient than prevailing generally recognized standard medical practice; and~~
~~(iii) that the prevailing generally recognized standard medical treatment or therapy for the patient's condition has been offered to be provided, or that the physician and surgeon will refer the patient to another physician and surgeon who can provide the standard medical treatment or therapy; and~~
~~(d) has obtained from the patient a voluntary informed consent consistent with generally recognized current medical and legal standards for informed consent in the practice of medicine, including:~~
~~(i) evidence of advice to the patient in accordance with Subsection (c); and~~
~~(ii) whether the patient elects to receive generally recognized standard treatment or therapy combined with alternate medical treatment or therapy, or elects to receive alternate medical treatment or therapy only.~~
~~(2) Alternate medical practice includes the practice of homeopathic medicine.~~]

R156-67-604. Annual Review of Dispensing Practices of Those Authorized to Dispense an Opiate Antagonist.
Under [~~Subsection~~]Section 26B-4-510[~~(2)(c)~~], a physician who issues a standing prescription drug order authorizing the dispensing of an opiate antagonist shall review the dispensing practices of those authorized by the physician to dispense the opiate antagonist by reviewing the report of the licensee dispensing the opiate antagonist under [~~Subsection~~]Section R156-17b-625[~~(1)~~].

R156-67-803. Medical Records.
Under [~~Subsection~~]Section 58-67-803[~~(1)~~], medical records shall be maintained in accordance with:
(1) applicable laws, regulations, and rules; and

(2) the AMA Code of Medical Ethics as incorporated by reference in Subsection R156-67-502(14).

R156-67-807. Collaborative Practice Arrangement Contract - Duties and Responsibilities of Collaborating Physician and Associate Physician.

(1) Under Subsection 58-67-302.8(2) and Section 58-67-807, the process for Division approval of a collaborative practice arrangement, and the educational methods and programs required of an associate physician throughout the duration of a collaborative practice arrangement, are established in this section.

(2) Before beginning a collaborative practice arrangement, the prospective collaborating physician and associate physician shall sign a written collaborative practice arrangement contract, which the associate physician shall submit to the Division for approval.

(3) A collaborative practice arrangement contract shall include at least the following:

(a) the terms and conditions required by Subsection 58-67-807(1)(b), including a description of how the health care services provided by the associate physician will be consistent with the associate physician's skill, training, and competence;

(b) if the associate physician will prescribe Schedule III through V controlled substances, documentation of the associate physician's mid-level practitioner Federal Drug Administration (DEA) registration;

(c) under Subsection 58-67-807(1)(c), a provision requiring the associate physician to notify the Division in writing within ten days of any modifications to the collaborative practice arrangement contract, and providing that any modifications shall become effective only upon receipt of written notice from the Division approving the changes;

(d) under Subsection 58-67-807(4), a plan establishing educational methods and programs that the associate physician shall complete throughout the duration of the collaborative practice arrangement contract, which will facilitate the advancement of the associate physician's medical knowledge and abilities; and

(e) remedies in the event of breach of contract by either the collaborating physician or associate physician, including procedures for contract termination and written notification to the Division.

(4) Before an associate physician may provide health care services under a collaborative practice arrangement, the parties shall obtain the Division's written approval of the collaborative practice arrangement contract.

(5) In evaluating a collaborative practice arrangement contract, the Division shall determine if the contract sufficiently complies with Section 58-67-807 and this section to adequately protect the public health, safety, and welfare.

(6) A collaborating physician overseeing an associate physician shall:

(a) ensure that the collaborating physician and associate physician are:

(i) both appropriately licensed; and

(ii) practicing pursuant to a Division-approved collaborative practice arrangement contract;

(b) ensure that the collaborating physician does not enter into a collaborative practice arrangement with more than three full-time equivalent associate physicians as required by Subsection 58-67-807(3)(b);

(c) be available to the associate physician for advice, consultation, and direction consistent with the standards and ethics of the profession, including consideration of the associate physician's level of skill, training, and competence; and

(d) monitor the associate physician's performance for compliance with the laws, rules, standards, and ethics of the profession, and report violations to the Division.

(7) An associate physician shall:

(a) before beginning a collaborative practice arrangement and rendering any health care services, enter into a Division-approved collaborative practice arrangement contract with a collaborating physician in accordance with this section;

(b) maintain required licensure and any required DEA registration;

(c) be professionally responsible for the acts and practices of the associate physician; and

(d) comply with the laws, rules, standards, and ethics of the profession.

(8)(a) A collaborating physician shall submit to the Division a written explanation outlining the collaborating physician's concerns if the collaborating physician:

(i) terminates a collaborative practice arrangement contract for cause;

(ii) does not support continuance of a license for an associate physician to practice; or

(iii) has other concerns regarding the associate physician that the collaborating physician believes requires input from the Division and Board.

(b) Upon receipt of written concerns from a collaborating physician with respect to an associate physician, the Division shall:

(i) provide the associate physician an opportunity to respond in writing to the Division regarding the collaborating physician's concerns;

(ii) review with the Board the written statements from the collaborating physician and associate physician; and

(iii) in consultation with the Board, take any appropriate licensure action.

KEY: physicians, licensing
Date of Last Change: [~~December 24, 2024~~]2026
Notice of Continuation: January 7, 2026
Authorizing, and Implemented or Interpreted Law: 58-67-101; 58-1-106(1)(a); 58-1-202(1)(a)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58421**
Rule or section number:	**R156-68**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Rich Oborn	801-530-6254	rjoborn@utah.gov

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

3. General Information

A. Rule or section catchline:

R156-68. Utah Osteopathic Medical Practice Act Rule

B. Purpose of the new rule or reason for the change:

The Division of Professional Licensing (Division) in collaboration with the Utah Medical Licensing Board (Board) is filing these proposed amendments to incorporate the statutory changes made by SB 222 (passed in the 2026 General Session), clean up citations including those impacted by the controlled substances recodification enacted by HB 301 (passed in the 2026 General Session), and update language to conform to Division standards and the Office of Administrative Rules (OAR) drafting guidelines.

C. Summary of the new rule or change:

Section R156-68-101 is amended to conform the catchline to Division standard and update a citation.

Section R156-68-102 is amended to conform the introduction language to Division standard, remove the definition of "alternate medical practices" as the section that references the definition is removed from rule due to statutory changes, renumber due to the removed definition, and update citations.

Section R156-68-302a is amended to update citations, clarify language, and add board certification with an American Osteopathic Association Certifying Board as an option for board certification.

Section R156-68-302b is amended to update citations.

Section R156-68-303 is amended to conform renewal and reinstatement language to Division standards.

Section R156-68-304 is amended to update citations, correct an acronym, and discontinue use of "CME" and use "continuing education" instead to conform the language with Title 1, Chapter 58 and Rule R156-1.

Section R156-68-502 is amended to update citations and clarify language in response to legislative changes.

Section R156-68-503 is amended to conform the catchline to Division standard, update citations, clean up the formatting of the fine schedule, and clarify language.

Section R156-68-510 is amended to update citations and update the editions of the cited standards.

Section R156-68-603 is removed in response to the statutory changes enacted by SB 222 (2026).

Section R156-68-604 is amended to update a citation.

Section R156-68-802 is amended to update a citation.

Section R156-68-807 is amended to fix formatting.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 222 (2026 General Session) and HB 301 (2026 General Session)

5. Fiscal Information

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

A. State budget:

The Division does not anticipate any fiscal impact to the state budget beyond that determined by the fiscal note for SB 222 (2026), at https://le.utah.gov/~2026/bills/static/SB0222.html, because the proposed amendments merely clean up, clarify, and update this rule to be current and accurate for licensees.

B. Local governments:

The Division does not anticipate any cost or savings on local governments from the proposed amendments because the proposed amendments do not apply to local governments.

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

There are approximately 2,041 small businesses in Utah with osteopathic physicians (NAICS 622110, 621111) and who may employ those engaged in the practice of medicine.

However, the proposed amendments are not expected to have any measurable impact on small businesses' revenues or expenditures beyond the fiscal note for SB 222 (2026) because the amendments merely clean up, clarify, and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.

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

There are approximately 106 non-small businesses in Utah with osteopathic physicians (NAICS 622110, 621111) and who may employ those engaged in the practice of medicine.

However, the proposed amendments are not expected to have any measurable impact on non-small businesses' revenues or expenditures beyond the fiscal note for SB 222 (2026) because the amendments merely clean up, clarify, and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.

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***)**:**

In Utah, there are:
a) 2,050 osteopathic physicians and surgeons;
b) 586 osteopathic physician and surgeon MBs;
c) 1 restricted assoc. osteopathic CS licensee;
d) 1 restricted assoc. osteopathic physician; and;
e) 1 volunteer osteopathic physician/surgeon.

The Division does not anticipate any cost or savings from these proposed amendments to these persons or to additional persons other than small businesses, non-small businesses, the state, or local government entities because the amendments merely clean up, clarify, and update the rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.

The proposed rule amendments will not create new obligations for other persons or increase the costs associated with any existing obligations for other persons.

F. Compliance costs for affected persons:
As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-68-101 et seq.

10. Incorporation by Reference Information

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*)**:**	
Official Title of Materials Incorporated (from title page)	Basic Standards of Preanesthesia Care
Publisher	American Society of Anesthesiologists
Issue Date	October 15, 2025
Issue or Version	October 2025 edition

B. 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*)**:**	
Official Title of Materials Incorporated	Standards for Basic Anesthetic Monitoring

(from title page)	
Publisher	American Society of Anesthesiologists
Issue Date	October 15, 2025
Issue or Version	October 2025 edition

C. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Standards for Postanesthesia Care
Publisher	American Society of Anesthesiologists
Issue Date	October 23, 2024
Issue or Version	October 2024 edition

D. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Office Anesthesia Evaluation Manual
Publisher	American Association of Oral and Maxillofacial Surgeons
Issue Date	2026
Issue or Version	10th edition

E. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Parameters of Care: AAOMS Clinical Practice Guidelines for Oral and Maxillofacial Surgery
Publisher	American Society of Anesthesiologists
Issue Date	2023
Issue or Version	7th edition

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/07/2026	11:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 402 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/dip-bwtr-qpp Or dial: (US) +1 513-816-0538 PIN: 781 503 126#

		More phone numbers: https://tel.meet/dip-bwtr-qpp?pin=9377475221570

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/30/2026

R156. Commerce, Professional Licensing.
R156-68. Utah Osteopathic Medical Practice Act Rule.
R156-68-101. Title - Authority - [~~Organization~~]Relationship to Rule R156-1.

(1) This rule shall be known as the "Utah Osteopathic Medical Practice 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 68, Utah Osteopathic Medical Practice Act.

(3) The organization of this rule and its relationship to Rule R156-1 is as described in Section R156-1-10[~~7~~]1.

R156-68-102. Definitions.

[~~The following definitions supplement the definitions~~]Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 68, Utah Osteopathic Medical Practice Act. In addition:

(1) "AAPS" means American Association of Physician Specialists.

(2) "ABMS" means American Board of Medical Specialties.

(3) "ACCME" means Accreditation Council for Continuing Medical Education.

(4) [~~"Alternate medical practices" as used in Section R156-68-603, means treatment or therapy that is determined in an adjudicative proceeding under Title 63G, Chapter 4, Administrative Procedures Act, to be:~~

~~(a) not generally recognized as standard in the practice of medicine;~~

~~(b) not shown by current generally accepted medical evidence to present a greater risk to the health, safety or welfare of the patient than does prevailing treatment considered to be the standard in the profession of medicine; and~~

~~(c) supported by a body of current generally accepted written documentation demonstrating the treatment or therapy has reasonable potential to be of benefit to the patient to whom the therapy or treatment is to be given.~~

~~(5)~~]"AMA" means the American Medical Association.

([~~6~~]5) "AOA" means American Osteopathic Association.

([~~7~~]6) "Collaborative practice arrangement contract" means a written, signed contract between a collaborating physician licensed and in good standing under Section 58-68-302, and an associate physician holding a restricted license in accordance with Section 58-68-302.[~~8~~]5, that:

(a) includes the terms and conditions required by Section 58-68-807 and Section R156-68-807; and

(b) is approved by the Division in accordance with Section 58-68-807 and Section R156-68-807.

([~~8~~]7) "COMLEX" means the Comprehensive Osteopathic Medical Licensing Examination.

([~~9~~]8) "FLEX" means the Federation of State Medical Boards Licensure Examination.

([~~10~~]9) "FMGEMS" means the Foreign Medical Graduate Examination in Medical Science.

([~~11~~]10) "FSMB" means the Federation of State Medical Boards.

([~~12~~]11) "Homeopathic medicine" means a system of medicine employing and limited to substances prepared and prescribed in accordance with the principles of homeopathic pharmacology as described in the Homeopathic Pharmacopoeia of the United States, its compendia, addenda, and supplements, as officially recognized by:

(a) the federal Food, Drug and Cosmetic Act, Public Law 717.21 U.S. Code Sec. 331 et seq.;

(b) the state[~~ of Utah~~]'s food and drug laws; and

(c) Title 58, Chapter 37, Utah Controlled Substances Act.

([~~13~~]12) "LMCC" means the Licentiate of the Medical Council of Canada.

([~~14~~]13) "NBME" means the National Board of Medical Examiners.

([~~15~~]14) "NBOME" means the National Board of Osteopathic Medical Examiners.

([~~16~~]15) "NPDB" means the National Practitioner Data Bank.

([~~17~~]16) "Unprofessional conduct" under Subsection 58-1-203(1)(e) is further defined in Section R156-68-502.

([~~19~~]17) "USMLE" means the United States Medical Licensing Examination.

R156-68-302a. Qualifications for Licensure - Application Requirements.

Under Subsections 58-68-30[~~1~~]2(1)(a)[~~(i)~~], (d), and (e) and Section 58-68-806, the information and documentation submitted by an applicant for licensure as an osteopathic physician and surgeon [~~submissions by the applicant of information maintained by practitioner data banks~~]shall include the following:

(1)(a) American Osteopathic Association Profile;

(b) American Medical Association Profile; or

(c) documentation of board certification with:

(i) the American Board of Medical Specialties (ABMS)[~~Board Certification~~]; or

(ii) an American Osteopathic Association Certifying Board;

(2) Federation of State Medical Boards Disciplinary Inquiry form;

(3) Federation Credentials Verification (FCVS) report; and

(4) National Practitioner Data Bank Report of Action.

R156-68-302b. Qualifications for Licensure - Examination Requirements.

(1) Under Subsection 58-68-302(1)([~~g~~]f), the required licensing examination sequence is as follows:

(a) the NBOME parts I, II, and III;

(b) the NBOME parts I and II, and the NBOME COMLEX Level III;

(c) the NBOME part I, and the NBOME COMLEX Level II and III;

(d) the NBOME COMLEX Level I, II, and III;

(e) the FLEX components I and II, with a score of not less than 75 on each component;

(f) the NBME examination parts I, II, and III, with a passing score on each part;

(g) the USMLE steps 1, 2, and 3, with a passing score on each step;

(h) the LMCC examination, Parts 1 and 2;

(i)(i) the NBME part I;

(ii) the USMLE step 1 and the NBME part II;

(iii) the USMLE step 2 and the NBME part III; or

(iv) the USMLE step 3;

(j) the FLEX component 1 and the USMLE step 3; or

(k)(i) the NBME part I; or

(ii) the USMLE step 1 and the NBME part II; or

(iii) the USMLE step 2 and the FLEX component 2.

(l) A candidate who fails any combination of the USMLE, FLEX, NBME and NBOME three times shall submit to the Division a narrative regarding the failure, and may be required to meet with the Division or the Board.

(2) Under Subsections 58-68-302(1)(f) and (h) and 58-1-401(2)(d), the Division may require an applicant to pass the SPEX examination with a score of not less than 75, if within the past five years the applicant:

(a) has not practiced;

(b) has had disciplinary action; or

(c) has had a substance use disorder or physical or mental impairment that may affect the applicant's ability to safely practice.

(3) Under Subsection 58-68-302([~~2~~]3)(c), the medical specialty certification shall be current certification in an AOA, ABMS, or AAPS member specialty board.

R156-68-303. Renewal Cycle - Procedures.

(1) Under Subsection 58-1-308(1), the renewal date for the two-year renewal cycle for licensees under Title 58, Chapter 68, Utah Osteopathic Medical Practice Act, is established in Section R156-1-308a.

(2) Renewal and reinstatement procedures shall be in accordance with Sections R156-1-308a through R156-1-308l.

R156-68-304. Qualified Continuing Professional Education.

(1) Under Subsection 58-68-304(1)(a), the qualified continuing professional education requirements shall consist of at least 40 hours during each two-year licensure cycle as follows:

(a) a minimum of 34 hours shall be in category 1 offerings as established by the AOA or ACCME;

(b) up to six hours may come from the Division;

(c) up to 15% may come from providing volunteer health care services in accordance with Subsection 58-13-3(8), with one hour of continuing education credit for every four documented hours of volunteer services; and

(d) participation in a residency program approved by the AOA or the AC[~~C~~]GME may meet the continuing education requirement in a pro-rata amount equal to any part of the two-year licensure cycle.

(2) Continuing education under this section shall:

(a) be relevant to the licensee's professional practice;

(b) be prepared and presented by individuals who are qualified by education, training and experience to provide [~~medical~~]continuing education; and

(c) have a method of verification of attendance and completion, which may include a [~~CME~~]Continuing Education Self Reporting Log.

(3) Credit for continuing education shall be recognized in 50-minute hour blocks of time for education completed in formally established classroom courses, seminars, lectures, conferences, or training sessions that meet the criteria in this section.

(4) A licensee shall maintain documentation sufficient to prove compliance with this section, for two years after the end of the renewal cycle for which the [~~CME~~]continuing education is due.

R156-68-305. Exemptions from Licensure.

Exemptions from licensure as an osteopathic physician under Subsection 58-1-307(1) and Section 58-68-305 are subject to the following:

(1) a physician who is exempted from licensure shall obtain a Utah Controlled Substance License before prescribing, dispensing, or administering a controlled substance outside of a hospital;

(2) a person engaged in a public screening program making measures of physiologic conditions such as serum cholesterol, blood sugar, or blood pressure is exempt from licensure and is not engaged in the practice of medicine if:

(a) the instruments or devices used in making measures are:

(i) approved by the Food and Drug Administration of the U.S. Department of Health, to the extent an approval is required; and

(ii) used in accordance with those approvals;

(b) the facilities and testing protocol meet the standards and personnel training requirements of the Utah Department of Health and Human Services;

(c) unlicensed personnel:

(i) do not interpret results of measures or tests;

(ii) do not recommend treatment or the purchase of any product; and

(iii) conform to the referral and follow-up protocol approved by the Utah Department of Health and Human Services for each measure or test;

(d) licensed personnel act within their scope of practice; and

(e) the information provided to the individuals measured or tested to allow them to interpret their own results is only that approved by the Utah Department of Health and Human Services;

(3) an unlicensed public safety individual who does not have emergency medical technician (EMT) certification, but who is designated as a first responder by city, county, or state officials, may carry a Mark I automatic injector antidote kit and self-administer the antidote, or administer the antidote to the individual's designated first response buddy, if:

(a) the kit is procured through the Utah Department of Health and Human Services;

(b) the kit is issued to the individual by the individual's employing agency; and

(c) before being issued the kit, the responder has completed a course on the use of auto-injectors; and

(4) under Subsection 58-68-305(6)(b)(iv), a medical assistant under the indirect supervision of an osteopathic physician may not engage in the following medical practices or procedures:

(a) diagnosing;

(b) establishing a treatment plan; or

(c) injecting the following:

(i) neurotoxins, soft tissue fillers, or other facial esthetic substances; or

(ii) cosmetic products with bioactive ingredients with claimed medical benefits.

R156-68-502. Unprofessional Conduct.

"Unprofessional conduct" includes:

(1) prescribing for oneself any Schedule II or III controlled substance, but a licensee may use, possess, or self-administer a Schedule II or III controlled substance legally prescribed for the licensee by another licensed practitioner acting within scope of licensure if the licensee uses the controlled substance in accordance with the prescription order and for the use intended;

(2) knowingly prescribing, selling, giving, or administering, directly or indirectly, or offering to prescribe, sell, give, or administer, any scheduled controlled substance as defined in Title 58, Chapter 37, Utah Controlled Substances Act, to a drug dependent person, as defined in Subsection 58-37-[~~2~~]101(1)([~~s~~]r), except if:

(a) permitted by law; and

(b) prescribed, dispensed, or administered according to a proper medical diagnosis and for a condition indicating the use is appropriate;

(3) knowingly engaging in billing practices that are abusive and have charges that are grossly excessive for services rendered;

(4) directly or indirectly giving or receiving any fee, commission, rebate, or other compensation for professional services not actually and personally rendered or supervised; however, nothing in this section shall preclude the legal relationships within lawful professional partnerships, corporations, or associations or the relationship between an approved supervising physician and physician assistants or advanced practice nurses supervised by them;

(5) knowingly failing to transfer a copy of pertinent and necessary medical records or a summary of those records to another physician when requested by the subject patient or by the patient's legal representative;

(6) failing to furnish to the [~~b~~]Board upon request, information known by a licensee with respect to the quality and adequacy of medical care rendered to a patient by an osteopathic physician licensed under Title 58, Chapter 68, Utah Osteopathic Medical Practice Act;

(7) failing as an operating surgeon to:

(a) perform adequate pre-operative or primary post-operative care of the surgical condition for a patient in accordance with the standards and ethics of the profession; or

(b) arrange for competent primary post-operative care of the surgical condition by a licensed physician and surgeon or osteopathic physician who is equally qualified to provide that care;

(8) billing a global fee for a procedure without providing the requisite care;

(9) supervising the providing of breast screening by diagnostic mammography services or interpreting the results of breast screening by diagnostic mammography to or for the benefit of any patient without having current certification or current eligibility for certification by the American Osteopathic Board of Radiology or the American Board of Radiology, except that a licensed physician may review the results of any breast screening by diagnostic mammography procedure upon a patient to consider those results in determining appropriate care and treatment of that patient if the results are interpreted by a physician qualified under this subsection and a timely written report is prepared by the interpreting physician in accordance with the standards and ethics of the profession;

(10) as a licensee under Title 58, Chapter 68, Utah Osteopathic Medical Practice Act, failing without just cause to comply with any written agreement in which the licensee's education or training as an osteopathic physician is funded in consideration for the licensee's agreement to practice in a certain locality or type of locality or to comply with other conditions of practice following licensure;[~~:~~

~~(a) repay as agreed any loan or other repayment obligation legally incurred by the licensee to fund the licensee's education or training as an osteopathic physician; or~~

~~(b) comply with any written agreement in which the licensee's education or training as an osteopathic physician is funded in consideration for the licensee's agreement to practice in a certain locality or type of locality or to comply with other conditions of practice following licensure;~~]

(11) violating Section 58-17b-620;

(12) [~~engaging in alternative medical practice, except as provided in Section R156-68-603~~]deviating or attempting to deviate from medical norms or established practice without meeting the requirements of Subsections 58-1-501(2)(b), (5), and (6);

(13) violating the American Medical Association's (AMA) Code of Medical Ethics, 2017 edition, which is incorporated by reference;

(14) failing to timely submit an annual written report to the Division indicating that the osteopathic physician has reviewed at least annually the dispensing practices of those authorized by the osteopathic physician to dispense an opiate antagonist, under Section R156-68-604;

(15) failing to discuss the risks of using an opiate with a patient or the patient's guardian before issuing an initial opiate prescription, under Section 58-37-[~~19~~]306;

(16) violating Section 58-1-301.7 by failing to keep the Division informed of a current mailing address or email address; or

(17) violating Section R156-68-510.

R156-68-503. Administrative [~~Penalties~~]Fine Schedule.

(1) Under Sections 58-1-502 and 58-68-503 and Subsection 58-68-102(3), unless otherwise ordered by the presiding officer, the following fine [~~and citation~~]schedule shall apply:

TABLE 1
[~~Fine and Citation Schedule~~]

Violation[~~IOLATION~~]	First[~~IRST~~] O[~~FFENSE~~]	Subsequent[~~UB SEQUENT~~] Offense[~~FFENSE~~]
58-1-501(1)	$[—]5,000 - [ ]$10,000	$10,000
58-1-501(2)(a)	$[——]100 - $[ ]500	$[–]500 - $3,000
58-1-501(2)([~~b~~]a)(ii)	$[——]500 - $[ ]5,000	$[——]1,500 - $10,000
58-1-501(2)[~~(c),(d),(e)~~](a)(iii) through (v)	$[——]500 - $[ ]5,000	$[——]5,000 - $10,000
58-1-501(2)[~~(f)~~])(a)(vi)	$[——]500 - $[ ]5,000	$[——]1,500 - $10,000
58-1-501(2)[~~(g),(h),(i),(j),(k),(l)~~](a)(vii) through (xii)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
58-1-501(2)(m)	$[——]5,000 - $10,000	$10,000
58-1-501.5(5)	$[——]500 - $[ ]1,500	$[——]1,500 - $10,000
58-1-510(3)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
[~~58-37-8~~]	[~~$ 500 - $ 5,000~~]	[~~$ 1,500 - $10,000~~]

58-68-501(1)	$[—]1,000 - $[ ]5,000	$[——]2,000 - $10,000
58-68-502(1)	$[——]500 - $[ ]5,000	$[——]5,000 - $10,000
R156-1-501 (1) through ([~~6~~]9)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
R156-37-502(1)(a)	$[——]5,000 - $10,000	$10,000
R156-37-502(1)(b)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
R156-37-502(2)	$[——]500 - $[ ]5,000	$[——]1,500 - $10,000
R156-37-502(3), (4), (5)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
R156-37-502(6), (7)	$[——]5,000 - $10,000	$10,000
R156-37-502(8), (9)	$[—]1,000 - $[ ]5,000	$[——]5,000 - $10,000
R156-68-502 (1) through (16)	$[——]500 - $[ ]1,500	$[——]1,500 - $10,000
Other unprofessional or unlawful conduct	$[——]500 - $[ ]1,500	$[——]1,500 - $10,000
Ongoing offenses	$2,000 per day but not less than [~~second~~]subsequent offense	

[~~(2) Citations shall not be issued for third offenses, except in extraordinary circumstances approved by the investigative supervisor.~~
~~(3) If multiple offenses are cited on the same citation, the fine shall be determined by evaluating the most serious offense.~~
~~(4) An investigative supervisor may authorize a deviation from the fine schedule based upon the aggravating or mitigating circumstances.~~
~~(5) The presiding officer for a contested citation shall have the discretion, after a review of the aggravating and mitigating circumstances, to increase or decrease the fine amount imposed by an investigator based upon the evidence reviewed.~~]

(2)(a) Under Subsection R156-1-502(1), a citation may not be issued for a third or subsequent offense except in extraordinary circumstances approved by the bureau manager or chief investigator.

(b) If a citation is issued for a third or subsequent offense, the fine amount shall be double the second offense fine amount up to the maximum fine allowed under Section 58-68-503.

(3) Multiple offenses may be cited on the same citation if the citation clearly indicates:

(a) each offense; and

(b) the penalty amount allocated to each offense.

(4) The Division bureau manager, investigative team leader, or chief investigator may authorize a deviation from the fine amount in a citation based upon the aggravating or mitigating circumstances.

(5) The Division's presiding officer for a contested citation may increase or decrease the fine amount imposed by an investigator based on:

(a) a review of the evidence; and

(b) the aggravating or mitigating circumstances.

R156-68-510. Anesthesia and Sedation Requirements.

Under Subsections 58-1-510(3) and (4) and 58-68-102([~~17~~]19)(a)(i), a physician who is providing general anesthesia, deep sedation, or moderate sedation shall possess the knowledge, skills, and education and training required by the following standards, and shall comply with the following standards:

(1) the following American Society of Anesthesiologists (ASA) standards, which are incorporated by reference:

(a) Basic Standards for Preanesthesia Care, October 202[~~0~~]5 edition;

(b) Standards for Basic Anesthetic Monitoring, October 202[~~0~~]5 edition; and

(c) Standards for Postanesthesia Care, October 20[~~19~~]24 edition; or

(2) the following American Association of Oral and Maxillofacial Surgeons (AAOMS) standards, which are incorporated by reference:

(a) Office Anesthesia Evaluation Manual, [~~2018 9th~~]2026 10th edition; and

(b) Parameters of Care, [~~2017 6th~~]2023 7th edition.

[~~R156-68-603. Alternate Medical Practice.~~

~~(1) A licensed osteopathic physician may engage in alternate medical practices as defined in Subsection R156-68-102(4) and shall not be considered to be engaged in unprofessional conduct on the basis that it is not in accordance with generally accepted professional or ethical standards as unprofessional conduct defined in Subsection 58-1-501(2)(b), if the licensed osteopathic physician:~~

~~(a) possesses current generally accepted written documentation, which in the opinion of the board, demonstrates the treatment or therapy has reasonable potential to be of benefit to the patient to whom the therapy or treatment is to be given;~~

~~(b) possesses the education, training, and experience to competently and safely administer the alternate medical treatment or therapy;~~

~~(c) has advised the patient with respect to the alternate medical treatment or therapy, in writing, including:~~

~~(i) that the treatment or therapy is not in accordance with generally recognized standards of the profession;~~

~~(ii) that on the basis of current generally accepted medical evidence, the physician and surgeon finds that the treatment or therapy presents no greater threat to the health, safety, or welfare of the patient than prevailing generally recognized standard medical practice; and~~

~~(iii) that the prevailing generally recognized standard medical treatment or therapy for the patient's condition has been offered to be provided, or that the physician and surgeon will refer the patient to another physician and surgeon who can provide the standard medical treatment or therapy; and~~

~~(d) has obtained from the patient a voluntary informed consent consistent with generally recognized current medical and legal standards for informed consent in the practice of medicine, including:~~

~~(i) evidence of advice to the patient in accordance with Subsection (c); and~~

~~(ii) whether the patient elects to receive generally recognized standard treatment or therapy combined with alternate medical treatment or therapy, or elects to receive alternate medical treatment or therapy only.~~

~~(2) Alternate medical practice includes the practice of homeopathic medicine.~~]

R156-68-604. Annual Review of Dispensing Practices of [~~t~~]Those Authorized to Dispense an Opiate Antagonist.

Under Subsection [~~26-55-105(2)(c)~~]26B-4-510(2)(c), an osteopathic physician who issues a standing prescription drug order authorizing the dispensing of an opiate antagonist shall review the dispensing practices of those authorized by the osteopathic physician to dispense the opiate antagonist by reviewing the report of the licensee dispensing the opiate antagonist under Subsection R156-17b-625(1).

R156-68-803. Medical Records.

Under S[~~ubs~~]ection 58-68-803[~~(1)~~], medical records shall be maintained in accordance with:

(1) applicable laws, regulations, and rules; and

(2) the AMA Code of Medical Ethics as incorporated by reference in Subsection R156-68-502(13).

R156-68-807. Collaborative Practice Arrangement Contract - Duties and Responsibilities of Collaborating Physician and Associate Physician.

(1) Under Subsection 58-68-302.8(2) and Section 58-68-807, the process for Division approval of a collaborative practice arrangement, and the educational methods and programs required of an associate physician throughout the duration of a collaborative practice arrangement, are established in this section.[~~——~~]

(2) Before beginning a collaborative practice arrangement, the prospective collaborating physician and associate physician shall sign a written collaborative practice arrangement contract, which the associate physician shall submit to the Division for approval.

(3) A collaborative practice arrangement contract shall include at least the following:

(a) the terms and conditions required by Subsection 58-68-807(1)(b), including a description of how the health care services rendered by the associate physician will be consistent with the associate physician's skill, training, and competence;

(b) if the associate physician will prescribe Schedule III through V controlled substances, documentation of the associate physician's mid-level practitioner Federal Drug Enforcement Administration (DEA) registration;

(c) under Subsection 58-68-807(1)(c), a provision requiring the associate physician to notify the Division in writing within ten days of any modifications to the collaborative practice arrangement contract, and providing that any modifications shall become effective only upon receipt of written notice from the Division approving the changes;

(d) under Subsection 58-68-807(4), a plan establishing educational methods and programs that the associate physician shall complete throughout the duration of the collaborative practice arrangement contract, which will facilitate the advancement of the associate physician's medical knowledge and abilities; and

(e) remedies in the event of breach of contract by either the collaborating physician or associate physician, including procedures for contract termination and written notification to the Division.

(4) Before an associate physician may render health care services under a collaborative practice arrangement, the parties shall obtain the Division's written approval of the collaborative practice arrangement contract.

(5) In evaluating a collaborative practice arrangement contract, the Division shall determine if the contract sufficiently complies with Section 58-68-807 and this section to adequately protect the public health, safety, and welfare.

(6) A collaborating physician overseeing an associate physician shall:

(a) ensure that the collaborating physician and associate physician are:

(i) both appropriately licensed; and

(ii) practicing pursuant to a Division-approved collaborative practice arrangement contract;

(b) ensure that the collaborating physician does not enter into a collaborative practice arrangement with more than three full-time equivalent associate physicians as required by Subsection 58-68-807(3)(b);

(c) be available to the associate physician for advice, consultation, and direction consistent with the standards and ethics of the profession, including consideration of the associate physician's level of skill, in training, and competence; and

(d) monitor the associate physician's performance for compliance with the laws, rules, standards, and ethics of the profession, and report violations to the Division.

(7) An associate physician shall:

(a) before beginning a collaborative practice arrangement and rendering any health care services, enter into a Division-approved collaborative practice arrangement contract with a collaborating physician in accordance with this section;

(b) maintain required licensure and any required DEA registration;

(c) be professionally responsible for the acts and practices of the associate physician; and

(d) comply with the laws, rules, standards, and ethics of the profession.

(8)(a) A collaborating physician shall submit to the Division a written explanation outlining the collaborating physician's concerns if the collaborating physician:

(i) terminates a collaborative practice arrangement contract for cause;

(ii) does not support continuance of a license for an associate physician to practice; or

(iii) has other concerns regarding the associate physician that the collaborating physician believes requires input from the Division and Board.

(b) Upon receipt of written concerns from a collaborating physician with respect to an associate physician, the Division shall:

(i) provide the associate physician an opportunity to respond in writing to the Division regarding the collaborating physician's concerns;

(ii) review with the Board the written statements from the collaborating physician and associate physician; and

(iii) in consultation with the Board, take any appropriate licensure action.

KEY: osteopaths, licensing, osteopathic physician
Date of Last Change: [~~January 12, 2023~~]2026
Notice of Continuation: October 31, 2022
Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-68-101

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58419**
Rule or section number:	**R156-70a**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Rich Oborn	801-530-6254	rjoborn@utah.gov

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

3. General Information

A. Rule or section catchline:

R156-70a. Physician Assistant Practice Act Rule

B. Purpose of the new rule or reason for the change:

The Division of Professional Licensing (Division) in collaboration with the Utah Medical Licensing Board (Board) is filing these proposed amendments to clean up citations including those impacted by the controlled substances recodification enacted by HB 301 (passed in the 2026 General Session) and update language to conform to Division standards and the Office of Administrative Rules (OAR) drafting guidelines.

C. Summary of the new rule or change:
Section R156-70a-101 is amended to conform the catchline and section content to Division standards. Section R156-70a-102 is amended to conform the introduction language to Division standard. Section R156-70a-103 is removed as the language is added to Section R156-70a-101. Section R156-70a-104 is removed as the language is added to Section R156-70a-101. Section R156-70a-303 is amended to conform renewal and reinstatement language to Division standards and update a citation. Section R156-70a-304 is amended to update citations and clarify language. Section R156-70a-503 is amended to update a citation.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 301 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
The Division does not anticipate any fiscal impact on the state budget because the proposed amendments merely clean up, clarify, and update this rule to be current and accurate for licensees.
B. Local governments:
The Division does not anticipate any cost or savings on local governments from the proposed amendments because the proposed amendments do not apply to local governments.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There are approximately 2,593 small businesses in Utah with physician assistants (NAICS 622110, 621111) and who may employ physician assistants. However, the proposed amendments are not expected to have any measurable impact on small businesses' revenues or expenditures because the amendments merely clean up, clarify, and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
There are approximately 106 non-small businesses in Utah with physician assistants (NAICS 622110, 621111) and who may employ physician assistants. However, the proposed amendments are not expected to have any measurable impact on non-small businesses' revenues or expenditures because the amendments merely clean up, clarify, and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.
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***)**:**
In Utah, there are 3,554 physician assistants. The Division does not anticipate any cost or savings from these proposed amendments to these persons or to additional persons other than small businesses, non-small businesses, the state, or local government entities because the amendments merely

clean up, clarify, and update this rule to be current and accurate for licensees and to comply with OAR drafting requirements and Division standards.

The proposed rule amendments will not create new obligations for other persons or increase the costs associated with any existing obligations for other persons.

F. Compliance costs for affected persons:

As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-70a-101 et seq.

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/07/2026	11:00 AM	Anchor Meeting Location: Heber M. Wells Building

		Room 402 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/dip-bwtr-qpp Or dial: (US) +1 513-816-0538 PIN: 781 503 126# More phone numbers: https://tel.meet/dip-bwtr-qpp? pin=9377475221570

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/30/2026

R156. Commerce, [~~Occupational and~~]Professional Licensing.
R156-70a. Physician Assistant Practice Act Rule.
R156-70a-101. Title - Authority - Relationship to R156-1.

(1) This rule is known as the "Physician Assistant Practice 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 70a, Physician Assistant Practice Act.

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

R156-70a-102. Definitions.

[~~In addition to the definitions~~]Terms used in this rule are defined in Title 58, Chapter 1, Division of [~~Occupational and~~]Professional Licensing Act, and Title 58, Chapter 70a, Physician Assistant Practice Act.[~~, the following rule definitions supplement the statutory definitions~~] In addition:

(1) "ACCME" means the Accreditation Council for Continuing Medical Education.
(2) "CAQ" means a Certification for Added Qualification issued by the NCCPA.
(3) "CME" means continuing medical education.
(4) "NCCPA" means the National Commission on Certification of Physician Assistants.
(5) "PANCE" means the NCCPA's Physician Assistant National Certifying Examination.
(6) "PANRE" means the NCCPA's Physician Assistant National Recertifying Examination.

~~[R156-70a-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 70a, Physician Assistant Practice Act.~~

~~R156-70a-104. Organization - Relationship to Rule R156-1.~~

~~The organization of this rule and its relationship to Rule R156-1, General Rule of the Division of Occupational and Professional Licensing, is as described in Section R156-1-107.~~]

R156-70a-302. Qualification for Licensure - Examination Requirements.

Under Subsection 58-70a-302(4), the examination requirement for licensure as a physician assistant is a passing score on:

(1) the PANCE; or
(2) the PANRE.

R156-70a-303. Renewal Cycle - Procedures.

(1) Under Subsection 58-1-308(1)(a), the renewal date for the two-year renewal cycle for licensees under Title 58, Chapter 70a, Physician Assistant Practice Act, is established in Section R156-1-308a.

(2) Renewal and reinstatement procedures shall be in accordance with Sections R156-1-308[~~b~~]a through R156-1-308l.

(3) Under Subsection 58-1-308(5)(a)(ii)(B), and subject to Subsection R156-1-308g(3)(b), an applicant whose license was active and in good standing at the time of expiration may apply for reinstatement between two years and five years after the date of expiration, as follows:

(a) submit a reinstatement application demonstrating compliance with the requirements and conditions of license renewal;

(b) pay the license renewal and reinstatement fees for the current licensure cycle;

(c) submit evidence that the applicant:

(i) has completed the qualified CME hours required for each preceding two-year licensure cycle in which the license was expired; or

(ii) has current NCCPA certification;

(d) for an applicant who seeks to practice in the mental health specialties outside of a collaborative agreement with a psychiatrist:

(i) submit evidence of a current CAQ in psychiatry; and

(ii) if required by the Division under Subsection 58-70a-501.2(5), collaborate for a specified duration with a physician who is board certified in psychiatry; and

(e) upon request:

(i) meet with the Board to evaluate the applicant's ability to safely and competently practice; and

(ii) comply with Division requirements as recommended by the Board, such as collaboration with or practice under the supervision of a physician or physician assistant for a specified duration.

R156-70a-304. Continuing Education.

(1) Under Subsection 58-70a-304(1)(b), the qualified CME requirements for a physician assistant are established in this section.

(2)(a) A physician assistant shall complete at least 40 CME hours during each two-year licensure cycle, that include:

(i) at least 34 CME hours in category 1 offerings as established by the ACCME;

(ii) under Subsection 58-70a-501.1(5), if the physician assistant specializes in mental health care, the CME required to maintain their CAQ in psychiatry; and

(iii) [~~under Subsection 58-70a-303(4), ~~]if the physician assistant is a recommending medical provider, continuing education required under [~~Section 26-61a-106~~]Section 26B-4-204.

(b) A licensee's documentation to the Division of current NCCPA certification shall fulfill the requirements of Subsection[~~s~~] (2)(a)(i) or (ii).

(c) Under Subsection 58-13-3(8), a physician assistant may fulfill up to 15% of their CME requirement by providing volunteer services within the scope of their license at a qualified location.[-] For every four documented hours of volunteer services, the licensee may earn one hour of CME credit.

(3) Approved providers for ACCME offerings include the following:

(a) approved programs sponsored by the American Academy of Physician Assistants (AAPA); or

(b) programs approved by other health-related continuing education approval organizations, if the education is:

(i) nationally recognized by a healthcare accredited agency; and

(ii) related to practice as a physician assistant.

(4) CME shall:

(a) be relevant to the licensee's professional practice;

(b) be prepared and presented by individuals who are qualified by education, training and experience to provide [~~medical~~]continuing medical education; and

(c) have a method of verification of attendance and completion.

(5) CME credit shall be recognized in accordance with ACCME accreditation[~~.~~].

(6) A licensee shall maintain documentation sufficient to prove compliance with this section[~~,~~] for two years after [~~close~~]the end of the two-year [~~licensure~~]renewal cycle for which the CME is due.

(7) The Division may defer or waive CME requirements under Section [~~58~~]R156-1-308d.

R156-70a-501.2. Supervision Requirements for Engaging in the Practice of Mental Health Therapy While Completing Clinical Practice Hours.

Under Subsections 58-70a-501.2(6)(b) and (c), a physician assistant specializing in mental health care who is in the process of completing supervised clinical practice hours under Subsection 58-70a-501.1(4)(d)(i) or (ii), or completing collaborative clinical practice hours under Subsection 58-70a-501.1(4)(d)(iii), may engage in the practice of mental health therapy in accordance with the following supervision standards:

(1) A supervisor shall be licensed in good standing in the jurisdiction in which the supervision occurs.

(2)(a) The duties of the supervisor to mentor and advocate for the appropriate and ethical treatment of patients shall be observed above any other interest or consideration within the supervisor relationship.

(b) The supervisor and supervisee shall maintain a relationship in which the supervisor is independent from the supervisee's control, and the supervisor's ability to supervise and direct the practice of the supervisee is not compromised.

(3) A supervisor shall:

(a) ensure that the supervisee complies with confidentiality requirements and meets the local standards of care in the provision of services while under supervision; and

(b) monitor the performance of the supervisee for compliance with applicable mental health statutes for appropriate and humane treatment of patients, and recognize a duty to report violations to the Division.

(4) The supervisor and supervisee shall submit appropriate documentation to the Division for work completed by the supervisee evidencing the performance of the supervisee during the period of supervision, including the supervisor's evaluation of the supervisee's competence to practice mental health therapy.

R156-70a-503. Unprofessional Conduct.

Under Subsection 58-70a-102(10), "unprofessional conduct" includes:

(1) violating a federal or state law relating to controlled substances, including unprofessional conduct defined in Section R156-37-502;

(2) misrepresentation of the physician assistant's education, training, or qualifications to practice independently;

(3) failing to comply with:

(a) collaboration policies and procedures;

(b) a collaborative practice agreement; or

(c) a requirement of supervision while completing clinical psychotherapy practice hours;

(4) failing to comply with Section 58-37-[~~19~~]306, regarding discussion with a patient or the patient's guardian before issuing an initial opiate prescription; or

(5) failing to practice within the physician assistant's skills and scope of competence, in accordance with Subsection 58-70a-102(2) and Sections 58-70a-501 and 58-70a-501.2.

KEY: licensing, physician assistants
Date of Last Change: [~~November 9, 2021~~]2026
Notice of Continuation: May 19, 2026
Authorizing, and Implemented or Interpreted Law: 58-70a-101; 58-1-106(1)(a); 58-1-202(1)(a)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58422**
Rule or section number:	**R156-73**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	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

2. Contact Persons

Name:	Phone:	Email:
Jim Garfield	801-530-6458	jimgarfield@utah.gov

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

3. General Information

A. Rule or section catchline:

R156-73. Chiropractic Physician Practice Act Rule

B. Purpose of the new rule or reason for the change:

The Division of Professional Licensing (Division) in collaboration with the Chiropractic Physician Licensing Board (Board) is filing these proposed amendments to clean up citations to statute and align the rule with the Office of Administrative Rules (OAR) drafting requirements.

Additionally, legislative changes, such as the removal of a statutory requirement naming a specific exam, necessitated clean-up of this rule.

C. Summary of the new rule or change:
Section R156-73-101 incorporates the language from Sections R156-73-103 and R156-73-104 to conform to the structure of other Division rules. As such, Sections R156-73-103 and R156-73-104 are removed from the rule. Section R156-73-102 conforms the introductory language to that of other Division rules and fixes punctuation errors, and replaces the obsolete definition of "clinical acupuncture" with a reference to the current statutory definition of the "practice of acupuncture." Section R156-73-302 adjusts the language to better reflect the relationship between the Division and the Board, updates citations and language throughout to conform to current statutory provisions, and removes the antiquated reference to "any offense involving controlled dangerous substances." Sections R156-73-302a, R156-73-302b, and R156-73-303 are amended to conform to OAR drafting standards and to other Division rules, and to update citations and references in accordance with statutory changes; Section R156-73-303 is renumbered to Section R156-73-302c. Sections R156-73-303a and R156-73-303b are combined and amended for clarity and to conform to OAR drafting standards and to other Division rules. Section R156-73-304 is amended to conform to OAR drafting standards and to other Division rules, and to update preceptor supervision standards for more comprehensive oversight of procedures performed by a preceptee within the statutory scope of practice for a chiropractic physician. New Section R156-73-305 is added to clarify that the time frame to maintain records in sufficient detail under Subsection 58-73-501(4) is at least seven years from the date of last treatment. Section R156-73-308 is deleted in its entirety; its provisions have been moved to become new Section R156-73-303 and the citations and language updated to conform to OAR drafting standards and to other Division rules. Section R156-73-501 is amended and updated for clarity and to conform to OAR drafting standards and to other Division rules, and to provide that "unprofessional conduct" includes sexual activity or conduct, sexual harassment or any conduct that is exploitive or abusive with respect to a trainee, assistant, employee, or colleague over whom the licensee has supervisory or management responsibility; failing to conform to the generally accepted and recognized standards and ethics of the chiropractic profession; failing to comply with an administrative investigation including an investigative subpoena; or violating Section R156-73-305. Section R156-73-502 is amended to conform to OAR drafting standards. Section R156-73-601, that establishes the competency requirements for a chiropractic physician to engage in acupuncture, is amended to remove old practice conditions that are no longer necessary and to update the organization name that oversees the practice of acupuncture. Sections R156-73-602 and R156-73-603 are amended to conform to OAR drafting standards and to other Division rules. Section R156-73-605 is removed from rule as there is no longer statutory authority for this requirement.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 301 (2026 General Session) and SB 117 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
The Division does not anticipate any fiscal impact to the state budget because the proposed amendments merely clarify and update this rule to be current and accurate for licensees.

B. Local governments:

The Division does not anticipate any cost or savings on local governments from the proposed amendments because the proposed amendments do not apply to local governments.

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

There are approximately 505 small businesses in Utah with chiropractic physicians (NAICS 621310).

However, the proposed amendments are not expected to have any measurable impact on small businesses' revenues or expenditures because the amendments merely update this rule to provide more utility and accuracy to licensees.

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

There is approximately 1 non-small business in Utah with chiropractic physicians (NAICS 621310).

However, the proposed amendments are not expected to have any measurable impact on non-small businesses' revenues or expenditures because the amendments merely update this rule to provide more utility and accuracy to licensees.

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***)**:**

In Utah, there are 1,135 licensed chiropractic physicians.

The Division does not anticipate any cost from these proposed amendments to these persons or to additional persons other than small businesses, non-small businesses, the state, and local government entities because the amendments merely update the rule to provide more utility and accuracy to licensees.

The proposed amendments also will not create new obligations for other persons or increase the costs associated with any existing obligations for other persons.

The Division estimates that the removal of the SPEC examination for licensure by endorsement may create a savings for some individual applicants for licensure who decide to come to Utah by endorsement, but the full fiscal impact cannot be estimated because the data necessary to determine how many such individuals might apply to is unavailable, and the savings an individual may experience will vary depending on the individual professional characteristics of each such applicant.

F. Compliance costs for affected persons:

As described in Box 5E for other persons, no compliance costs are expected for affected persons.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 58-73-101

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
12/03/2026	11:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 402 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/ofm-rscv-vfb Or dial: (US) +1 562-641-5228 PIN: 131 145 365# More phone numbers: https://tel.meet/ofm-rscv-vfb?pin=3195497354140

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Deborah Blackburn, Assistant Director	**Date:**	10/30/2026

R156. Commerce, [~~Occupational and~~]Professional Licensing.
R156-73. Chiropractic Physician Practice Act Rule.
R156-73-101. Title - Authority - Relationship to Rule R156-1.

(1) This rule is known as the "Chiropractic Physician Practice 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 73, Chiropractic Physician Practice Act.

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

R156-73-102. Definitions.

The terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act and in Title 58, Chapter 73, Chiropractic Physician Practice Act. In addition[~~, to the definitions in Title 58, Chapters 1 and 73, as used in Title 58, Chapters 1 and 73, or this rule~~]:

[~~(1) "Clinical acupuncture" means the application of mechanical, thermal, manual, and/or electrical stimulation of acupuncture points and meridians, including the insertion of needles, by a chiropractic physician that has demonstrated competency and training by completing a recognized course that is sponsored by an institution or organization approved to sponsor continuing education, as defined in Section R156-73-303b.~~]

([~~2~~]1) "Distance learning" means the acquisition of knowledge and skills through information and instruction encompassing all technologies and other forms of learning at a distance, including internet, audio/visual recordings, mail or other correspondence.

([~~3~~]2) "FCLB" means the Federation of Chiropractic Licensing Boards.

([~~4~~]3) "Indirect supervision" means the supervising licensed chiropractic physician[~~, shall be~~]:

(a) is available for immediate voice contact by [~~telephone, radio,~~]electronic or other means; and

(b) shall provide daily face to face consultation and review of cases at the chiropractic facility for the chiropractic intern, temporarily licensed, or unlicensed person being supervised.

([~~5~~]4) "Joint mobilization"[~~,~~] as used in Subsection 58-73-601(2)(c)(ii)(B) means passive movements done by another person, applied as a series of stretches or repetitive movements to individual or combinations of joints, not to exceed the end range of motion and stopping short of the articular elastic barrier.

([~~6~~]5) "NBCE" means the National Board of Chiropractic Examiners.

([~~7~~]6) "PACE" means Providers of Approved Continuing Education sponsored by the Federation of Chiropractic Licensing Boards.

(7) "Practice of Acupuncture" means the same as defined in Subsection 58-72-102(5).

(8) "Preceptor" means a licensed chiropractic physician who is a supervisor of interns and externs in the professional practice of chiropractic.

(9) "Preceptorship" means a supervised training program established by a written contract between a chiropractic college or university whose program or institution is accredited by the Council on Chiropractic Education, Inc., and a licensee [~~for the purpose of providing~~]to provide chiropractic training to a student enrolled in the chiropractic college or university while under the supervision of a licensee.

(10) "Unprofessional conduct"[~~,~~] as defined in Title 58, Chapter[~~s 1 and 73~~] 1, Division of Professional Licensing Act and Title 58, Chapter 73, Chiropractic Physician Practice Act, is further defined in accordance with Subsection 58-1-203([~~5~~]1)(e), in Section R156-73-501.

[~~R156-73-103. 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 73.~~

~~R156-73-104. 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.~~]

R156-73-302. [~~Good Moral Character - Disqualifying Convictions~~|Grounds for Denial of License.

(1) When reviewing an application [~~to determine the good moral character of an applicant as set forth in Section 58-73-302 and whether the applicant has been involved in unprofessional conduct as set forth in Subsection 58-1-501(2)(c)~~]for licensure under Title 58, Chapter 73, Chiropractic Physician Practice Act, including Sections 58-1-401 and 58-1-501, the Division [~~and~~]in collaboration with the Board shall consider the applicant's criminal record [~~as follows:~~]in accordance with this section.

[~~(a) a criminal conviction for a sex offense as defined in Title 76, Chapter 5, Part 4 and Chapter 5a, and Title 76, Chapter 10, Parts 12 and 13, shall disqualify an applicant from becoming licensed; or~~

~~(b) a criminal conviction for the following crimes may disqualify an applicant from becoming licensed:~~

~~(i) crimes against a person as defined in Title 76, Chapter 5, Parts 1, 2 and 3;~~

~~(ii) crimes against property as defined in Title 76, Chapter 6, Parts 1 through 6;~~

~~(iii) any offense involving controlled dangerous substances; or~~

~~(iv) conspiracy to commit or any attempt to commit any of the above offenses.~~

~~(2) An applicant who has a criminal conviction for a felony crime of violence may be considered ineligible for licensure for a period of seven years from the termination of parole, probation, judicial proceeding or date of incident, whichever is later.~~

~~(3) An applicant who has a criminal conviction for a felony involving a controlled substance may be considered ineligible for licensure for a period of five years from the termination of parole, probation, judicial proceeding or date of incident, whichever is later.~~

~~(4) An applicant who has a criminal conviction for any misdemeanor crime of violence or the use of a controlled substance may be considered ineligible for licensure for a period of three years from the termination of parole, probation, judicial proceeding or date of incident, whichever is later.~~

~~(5) Each application for licensure or renewal of licensure shall be considered in accordance with the requirements of Section R156-1-302.~~]

(2) This section applies to an applicant who has received or entered any of the following:

(a) a criminal conviction;

(b) a plea of nolo contendere;

(c) a plea of guilty or nolo contendere that is held in abeyance pending the successful completion of probation.

(3) An applicant with a record described in Subsection (2) shall be disqualified from licensure for an offense as defined in:

(a) Title 76, Chapter 5, Part 4, Sexual Offenses;
(b) Title 76, Chapter 5b, Sexual Exploitation Act;
(c) Title 76, Chapter 5c, Pornographic or Harmful Materials and Performances; or
(d) Title 76, Chapter 5d, Prostitution.
(4) An applicant with a record described in Subsection (2) may be disqualified from licensure for any of the following:
(a) an offense against an individual as defined in Title 76, Chapter 5, Part 1, Assault and Related Crimes, Part 2, Criminal Homicide, Part 3, Kidnapping, Trafficking, and Smuggling, or Part 7, Genital Mutilation;
(b) an offense against property as defined in Title 76, Chapter 6, Offenses Against Property;
(c) a felony offense involving a controlled substance; or
(d) conspiracy to commit or attempt to commit any of the offenses listed in Subsections (3) and (4).
(5) An applicant with a record described in Subsection (2) for a violent felony as defined in Section 76-3-203.5 may be disqualified from licensure for a period of seven years from the termination of parole, probation, judicial proceeding, or date of incident, whichever is later.
(6) An applicant with a record described in Subsection (2) may be disqualified from licensure for a period of five years from the termination of parole, probation, judicial proceeding, or date of incident, whichever is later, or for any of the following:
(a) a felony offense involving a controlled substance; or
(b) a misdemeanor crime of violence.

R156-73-302a. Qualifications for Licensure - Education Requirements.

[~~In accordance with~~]Under Subsection 58-73-302(1)([~~d~~]c), graduation from a chiropractic college or university whose program or institution is accredited by the Council on Chiropractic Education, Inc., is evidence of having [~~satisfactorily~~]completed at least two years of general study in a college or university.

R156-73-302b. Qualifications for Licensure - Examination Requirements.

(1)[~~- In accordance with~~](a) Under Subsection 58-73-302(1)([~~f~~]e)(i), the approved written clinical competency examination is the National Chiropractic Board Part 3 [~~or the Special Purposes Examination for Chiropractic (SPEC)~~]administered by the National Board of Chiropractic Examiners.
(b) The passing score shall be established by the National Board of Chiropractic Examiners.
(2)[~~- In accordance with~~](a) Under Subsection 58-73-302(1)([~~f~~]e)(iii), the approved practical examination is the National Chiropractic Board Part 4 [~~(practical examination)~~]administered by the National Board of Chiropractic Examiners.
(b) The passing score shall be established by the National Board of Chiropractic Examiners.

R156-73-30[~~3~~]2c. Temporary License.

[~~In accordance with~~]Under Subsections 58-1-303(1)(a) and 58-73-302(2), an endorsement applicant may be issued a temporary license for a period of not more than six months under the following conditions:
(1) The licensee shall work under the indirect supervision of a chiropractic physician approved by the [~~d~~]Division.
(2) The supervising chiropractic physician shall:
(a) be available at all times to provide advice, instruction and consultation;
(b) assume responsibility for all chiropractic activities and services performed by the temporary licensee; and
(c) supervise no more than two [~~persons~~]individuals at any given time.
(3) The temporary license may not be renewed or extended for any purpose.
(4) Any change in supervising chiropractic physician shall be preapproved by the [~~d~~]Division.

R156-73-303. Licensing Term - Renewal and Reinstatement Procedures.

(1) Under Subsection 58-1-308(1), the renewal date for the two-year renewal cycle for individuals licensed under Title 58, Chapter 73, Chiropractic Physician Practice Act is established in Section R156-1-308a.
(2) Renewal procedures shall be in accordance with Sections R156-1-308b through R156-1-308l.

R156-73-303a. Continuing Education[~~- Renewal Requirement~~].

(1) [~~In accordance with~~]Under Subsection 58-73-303(2), each licensee shall complete 40 hours of continuing education in each [~~preceding~~]two[~~-~~]-year [~~period of licensure~~]renewal cycle.
(2) [~~The required number of hours of continuing education for an individual who first becomes licensed during the two year period shall be prorated to the part of that two year period during which the person is licensed~~]If a licensee first becomes licensed during the two-year renewal cycle, the licensee's required number of continuing education hours shall be decreased proportionately according to the date of licensure.
[
~~**R156-73-303b. Continuing Education - Standards.**~~
~~(1)~~] (3) The standards for continuing education are as follows:
(a) the content [~~must~~]shall be relevant to chiropractic practice and consistent with the laws and rules of this state;
(b) the course [~~must~~]shall be under the sponsorship of or approved by:
(i) a chiropractic college or university whose doctor of chiropractic program is accredited by the Council on Chiropractic Education, Inc.;

(ii) a professional or nonprofit organization or association representing a licensed profession that has open membership and election of officers whose program objectives relate to the practice of chiropractic;

(iii) the [~~licensing agency of Utah~~]Division or another state licensing agency; or

(iv) PACE;

(c) learning objectives [~~must~~]shall be reasonably and clearly stated;

(d) teaching methods [~~must~~]shall be clearly stated and appropriate;

(e) faculty [~~must~~]shall be qualified[~~, both in~~] through experience and [~~in~~]teaching expertise;

(f) documentation of attendance [~~must~~]shall be provided;

(g) [~~there shall be no more than~~]up to four clock hours may be related to chiropractic practice marketing or practice building;

(h) [~~no more than 10~~]up to ten hours of continuing education, in each two[-]-year [~~period of licensure~~]renewal cycle, may be by distance learning.

[~~(2) A licensee shall be responsible for maintaining competent records of completed continuing education for a period of two years after close of the two year period to which the records pertain.~~

~~(3) The board may, after review, waive the continuing education requirements for a licensee presenting sufficient evidence of hardship or illness or other reason making it impossible or highly impractical for the licensee to attend or have attended a sufficient number of continuing education classes.~~]

(4) A licensee shall maintain documentation sufficient to prove compliance with this section for two years after the end of the two-year renewal cycle for which the continuing education is due.

(5) The Division may defer or waive continuing education requirements as provided in Section R156-1-308d.

([4]6) As part of the 40 continuing education hours required every two years, a chiropractic physician[,] who [~~provides acupuncture services~~]engages in the practice of acupuncture as a part of their practice[,] shall complete [~~10~~]ten hours of acupuncture related continuing education.

R156-73-304. Preceptorship - Approved Form of Supervision.

[~~In accordance with~~]Under Subsection 58-73-304(2)(b), the approved form of supervision is defined, clarified, or established as follows:

(1) [~~The~~]A supervising preceptor shall:

(a) be licensed in good standing in Utah and have practiced as a licensed chiropractic physician for the past five years;

(b) have entered into a written contract with an approved college or university to provide chiropractic training to a preceptee; and

(c) provide direct supervision on the premises, either personally or by delegating to another chiropractic physician who is licensed in good standing in Utah and who has practiced as a licensed chiropractic physician for the past five years.

(2) [~~The~~]A preceptor or [~~his~~]the preceptor's designee [~~must~~]shall remain on the premises at all times while the preceptee is performing the following procedures as allowed under Subsection 58-73-304(2):

(a) adjusting of the articulation of the spinal column or extremities;

(b) diagnosis of the articulation of the spinal column or extremities;

(c) manipulation of the articulation of the spinal column or extremities; [~~and~~]or

(d) therapeutic positioning of the articulation of the spinal column or extremities.

R156-73-305. Maintenance of Records.

Under Section 58-73-602, to maintain records in sufficient detail in accordance with Subsection 58-73-501(4), a licensee shall maintain the required detailed records for at least seven years from the date of last treatment.

[~~R156-73-308. Renewal Cycle - Procedures.~~

~~(1) In accordance with Subsection 58-1-308(1), the renewal date for the two-year renewal cycle applicable to licensees under Title 58, Chapter 73, is established by rule in Section R156-1-308a.~~

~~(2) Renewal procedures shall be in accordance with Section R156-1-308c.~~]

R156-73-501. Unprofessional Conduct.

"Unprofessional conduct" includes:

(1) keeping the office, instruments, laboratory, equipment, appliances or supplies in an unsafe or unsanitary condition;

(2) engaging in advertising [~~which is misleading because of omission of necessary material information, which contains false or misleading statements, or which otherwise operates to deceive;~~]that:

(a) is misleading because of omission of necessary material information;

(b) contains false or misleading statements; or

(c) operates to deceive;

(3) engaging in or aiding or abetting deceptive or fraudulent billing practices;

(4) engaging in sexual activity or sexual conduct [~~contact~~]with:

(a) a patient, with or without patient consent, within 12 months of last treatment;

(b) a former patient, with or without consent, within 12 months of last treatment if there is a risk of exploitation or potential harm to the former patient; or

(c) a trainee, assistant, employee, or colleague over whom the licensee has supervisory or management responsibility;

(5) engaging in or aiding or abetting sexual harassment or any conduct that is exploitive or abusive with respect to a trainee, assistant, employee, or colleague over whom the licensee has supervisory or management authority;

[~~(5) engaging in sexual activities or contact with a former patient, with or without consent, after 12 months of last treatment if there is a risk of exploitation or potential harm to the former patient;~~]

(6) engaging in behaviors in a patient[~~/doctor~~]-physician relationship, including verbal, electronic, or other by other means, [~~intended to~~]which may sexually arouse an[~~y person~~] individual or encourage sexual activity;

(7) failing to [~~keep the division informed of a current address and telephone number~~]maintain responsibility for care, billing, or documentation in a group practice, multidisciplinary practice, or third-party ownership practice;

(8) advertising acupuncture services or [~~practicing clinical acupuncture techniques~~]engaging in the practice of acupuncture beyond the scope of the certification held;

(9) advertising or otherwise claiming to be [~~as an~~]a ["]licensed acupuncturist["] either verbally or in [~~print~~]writing;

[~~(10) failing to maintain responsibility for care, billing and documentation in a group practice, multidisciplinary practice or third-party ownership practice;~~]

(1[~~1~~]0) engaging in any act or practice in a professional capacity which the licensee is not competent to perform through education or training;

(1[~~2~~]1) administering injections through the skin, limited to subcutaneous or intramuscular administration, of any substances other than non-prescription drugs as defined in Subsection[~~s~~] 58-17b-102(39) or non-controlled substances as defined in Subsection 58-37-[~~2(1)(f)(ii)~~]102(e)(ii);

(1[~~3~~]2) [~~administering injections of non-prescription drugs or non-controlled substances without sufficient competency and training as demonstrated by the following:~~

~~(a) completion of a recognized course on injectables and their administration, under the sponsorship of or approved by an institution, organization or association meeting the continuing education standards as defined in Section R156-73-303b; and~~

~~(b) receiving a passing score on a certifying examination; and~~]engaging in the practice of acupuncture without sufficient competency and training in accordance with Section R156-73-601;

(1[4]3) delegating the administration of injections to a chiropractic assistant[~~.~~];

(14) failing to conform to the generally accepted and recognized standards and ethics of the chiropractic profession;

(15) failing to comply with an administrative investigation under Subsection 58-1-106(1)(b), including failing to comply with an investigative subpoena or an order regarding an investigative subpoena; or

(16) violating Section R156-73-305.

R156-73-502. Chiropractic Assistant.

[~~In accordance with~~]Under Subsection 58-73-102(3), a chiropractic assistant may perform activities related to the practice of chiropractic in accordance with the following:

(1) The supervising chiropractic physician shall:

(a) be currently licensed in Utah;

(b) be responsible for the chiropractic activities and services performed by the assistant; and

(c) always be available to provide advice, instruction and consultation.

(2) The supervising chiropractic physician [~~shall never~~]may not delegate the following to a chiropractic assistant:

(a) adjustment of the articulation of the spinal column;

(b) diagnosis of the articulation of the spinal column;

(c) manipulation of the articulation of the spinal column;

(d) therapeutic positioning of the articulation of the spinal column; and

(e) administration of injections per Subsection R156-73-501(1[~~4~~]3).

R156-73-601. Competency Requirements to Perform Acupuncture.

[~~The requirements~~]Under Section 58-1-501 and Subsection 58-72-304(4), to [~~demonstrate competency and training to perform clinical~~]engage in the practice of acupuncture [~~include~~]a licensee shall:

(1)(a) meet the requirements to take the NBCE Acupuncture examination; and

(b) receive a passing score on the NBCE Acupuncture Examination; or

(2)(a) meet the requirements to take the National Certification Board of Acupuncture and Herbal Medicine (NCBAHM) Examination; and

(b) receive a passing score on the NCBAHM Examination.

[~~(1) Licensees who provided acupuncture services as a part of their practice prior to January 1, 2002 are not required to meet the requirements of Subsections (2) or (3), but are required to complete a recognized clinical acupuncture course sponsored by an institution or organization approved to sponsor continuing education, as defined in Section R156-73-303b, consisting of at least 100 classroom hours of instruction and passing a certifying examination in order to continue to provide clinical acupuncture as a part of their practice after January 1, 2002.~~

~~(2) Licensees who begin providing clinical acupuncture as a part of their practice on or after January 1, 2002 and prior to January 1, 2005 shall:~~

~~(a) complete a recognized clinical acupuncture course sponsored by an institution or organization approved to sponsor continuing education, as defined in Section R156-73-303b, consisting of at least 200 classroom hours of instruction and passing a certifying examination; or~~

~~(b) complete a recognized clinical acupuncture course sponsored by an institution or organization approved to sponsor continuing education, as defined in Section R156-73-303b, consisting of at least 100 classroom hours of instruction, passing a certifying examination, and completing 100 hours of clinical experience under the indirect supervision of a licensed health care provider who has met the requirements in Subsection (1) or (2)(a), and has practiced clinical acupuncture for at least two years.~~

~~(3) Licensees who begin providing clinical acupuncture as a part of their practice on or after January 1, 2005 shall:~~

~~(a) meet the requirements to take and receive a passing score on the NBCE Acupuncture Examination; or~~

~~(b) meet the requirements to take and receive a passing score on the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) Examination.~~]

R156-73-602. Advisory Peer Committee Created - Membership - Duties.

[~~In accordance with~~]Under Subsection 58-73-602(3), there is created the Quality and Standards Committee as an advisory peer committee to the Chiropractic Physician Licensing Board consisting of five chiropractic physicians licensed and in good standing in Utah who are qualified by education, training and experience to competently act in quality care review.

R156-73-603. Standards for Practice of Animal Chiropractic.

[~~In accordance with~~]Under Subsection 58-28-307(12)(a), a chiropractic physician practicing animal chiropractic shall have completed an animal chiropractic course approved by the American Chiropractic Veterinary Association (ACVA) or another course that is substantially equivalent to the ACVA course.

[~~R156-73-605. Review of Applicant's Qualification for Licensure.~~

~~All new licensees may be requested to attend a regularly scheduled Board meeting within six months of license activation at which time their qualifications may be reviewed.~~]

KEY: chiropractors, licensing, chiropractic physician
Date of Last Change: [~~August 24, 2009~~]2026
Notice of Continuation: January 7, 2026
Authorizing, and Implemented or Interpreted Law: 58-73-101; 58-1-106(1)(a); 58-1-202(1)(a)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58333**
Rule or section number:	**R156-92**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells Building
Street address:	160 E 300 S
City, state:	Salt Lake City, UT 84111
Mailing address:	PO Box 14641
City, state and zip:	Salt Lake City, UT 84114-6741

2. Contact Persons

Name:	Phone:	Email:
Tracy Taylor	801-530-6628	trtaylor@utah.gov

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

3. General Information

A. Rule or section catchline:
R156-92. Private Investigation Licensing Act Rule
B. Purpose of the new rule or reason for the change:
The Division of Professional Licensing (Division) is filing this proposed new rule in accordance with statutory changes made by SB 149 passed in the 2026 General Session that moved the administration of private investigator licensing from the Department of Public Safety to the Division.

C. Summary of the new rule or change:
This filing proposes a new Rule R156-92, Private Investigation Licensing Act Rule, under new Title 58, Chapter 92, Private Investigation Licensing Act. The proposed rule establishes: a) definitions; b) license terms, application procedures, and renewal periods; and c) required qualifications, scopes of practice, and operating standards for private investigators.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 149 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
The Division does not believe the proposed rule will impact the state budget. The proposed rule is required under SB 149 (2026). All costs associated with that legislation, including the promulgation of this proposed rule, are included in the fiscal note for that legislation which can be found here: https://le.utah.gov/~2026/bills/static/SB0149.html.
B. Local governments:
The Division does not believe the proposed rule will generate cost or savings for local governments. The proposed rule is required under SB 149 (2026). All costs associated with that legislation, including the promulgation of this proposed rule, are included in the fiscal note for that legislation which can be found here: https://le.utah.gov/~2026/bills/static/SB0149.html.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
The Division does not believe the proposed rule will generate cost or savings for small businesses. The proposed rule is required under SB 149 (2026). All costs associated with that legislation, including the promulgation of this proposed rule, are included in the fiscal note for that legislation which can be found here: https://le.utah.gov/~2026/bills/static/SB0149.html.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
The Division does not believe the proposed rule will generate cost or savings for non-small businesses. The proposed rule is required under SB 149 (2026). All costs associated with that legislation, including the promulgation of this proposed rule, are included in the fiscal note for that legislation which can be found here: https://le.utah.gov/~2026/bills/static/SB0149.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 Division does not believe the proposed rule will generate cost or savings for persons other than small businesses, non-small businesses, state, or local government entities. The proposed rule is required under SB 149 (2026). All costs associated with that legislation, including the promulgation of this proposed rule, are included in the fiscal note for that legislation which can be found here: https://le.utah.gov/~2026/bills/static/SB0149.html.

F. Compliance costs for affected persons:
The Division does not believe the proposed rule creates new compliance costs for affected persons. The proposed rule is required under SB 149 (2026). All costs associated with that legislation, including the promulgation of this proposed rule, are included in the fiscal note for that legislation which can be found here: https://le.utah.gov/~2026/bills/static/SB0149.html.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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)	Section 58-1-308	Subsection 58-1-501(2)
Section 58-92-201	Subsection 58-92-302(1)(a)(vi)	Subsection 58-92-303(1)(d)

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

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)**:**
11/24/2026	3:00PM	Commerce, Professional Licensing Heber M. Wells Building Room 402 160 E 300 S

		Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/dny-tqjp-gir Or dial: (US) +1 515-329-5381 PIN: 169 568 826# More phone numbers: https://tel.meet/dny-tqjp-gir? pin=5707366048435

To the agency: If more than one hearing is planned to take place, continue to add rows.

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Adam Watson, Assistant Division Director	**Date:**	10/09/2026

R156. Commerce, Professional Licensing.
R156-92. Private Investigation Licensing Act Rule.
R156-92-101. Title -- Authority -- Relationship to Rule R156-1.
(1) This rule is known as the "Private Investigation 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 92, Private Investigation Licensing Act.
(3) The organization of this rule and its relationship to Rule R156-1 is as described in Section R156-1-101.

R156-92-102. Definitions.
Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 92, Private Investigation Licensing Act. In addition:
(1) "Advertise," "advertising," or "advertisement" means the submission of a bid, contracting or making known by any public notice, publication, or solicitation of business, directly or indirectly, that services regulated under Title 58, Chapter 92, Private Investigation Licensing Act, are available for consideration.
(2) "Compensation" as used in Subsection (4)(a)(i) means:
(a) payment in the form of W-2 wages; or
(b) if the qualifying PI agent is a company owner of the PI agency company, the company owner's profit distributions or dividends.
(3) "Conflict of interest" includes a situation where:
(a) representation of one client will be directly adverse to the representation of another client;
(b) there is a significant risk that the individual's business, activities, or employment will materially limit the individual's ability to faithfully and impartially fulfill the individual's duties and responsibilities as a licensee under Title 58, Chapter 92, Private Investigation Licensing Act, and this rule; or
(c) an individual holds public duties and responsibilities that the individual cannot exercise concurrently with the duties and responsibilities that the individual would owe to a client as a licensee under Title 58, Chapter 92, Private Investigation Licensing Act, and this rule.
(4)(a) "Employee" means an individual providing services for a PI agency:
(i) for compensation as a W-2 employee;
(ii) who is listed on the PI agency's or employer's payroll records; and
(iii) who is under the PI agency's or employer's direction and control.
(b) "Employee" does not include an independent contractor.
(5) "General supervision" is as defined in Subsection R156-1-102a(1)(c).
(6) "PI agency" means a private investigation agency under Subsection 58-92-101(6).
(7) "PI agent" means a private investigator agent under Subsection 58-92-101(7).
(8) "PI apprentice" means a private investigator apprentice under Subsection 58-92-101(8).
(9) "PI registrant" means a private investigator registrant under Subsection 58-92-101(9).
(10) "Qualified continuing education" or "qualified CE" means professional continuing education that meets the standards under Section R156-92-309.
(11) "Supervising PI agent" as used in Section R156-92-305 means an individual who:

(a) is licensed in Utah as a PI agent and is in good standing;
(b) holds collective and individual liability with the licensee for compliance under Title 58, Chapter 92, Private Investigation Licensing Act, and this rule and may be held fully responsible for a violation; and
(c) is approved by the Division.
(12) "Unprofessional conduct" as defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 92, Private Investigation Licensing Act, is further defined under Subsection 58-1-203(1)(e), in Section R156-92-502.
(13) "Verification of Investigative Experience Form" means a form that meets the requirements of Subsection R156-92-303(1)(c) or R156-92-304(e).
(14) "Withdrawal" as used in Subsection 58-92-502(5) means the right that a licensee has to withdraw from a case and refund any portion of the retainer for which investigative work has not been completed.

R156-92-201a. Renewal Cycle -- Procedures -- Renewal Requirements.
(1) Under Subsection 58-92-201(6):
(a) a current and valid license issued to a licensee under Title 53, Chapter 9, Private Investigator Regulation Act, shall expire on the expiration date shown on the license; and
(b) a licensee with a license issued under Title 53, Chapter 9, Private Investigator Regulation Act, shall relicense under Title 58, Chapter 1, Division of Professional Licensing Act, Title 58, Chapter 92, Private Investigation Licensing Act, and this rule.
(2) Under Subsections 58-1-308(1) and 58-92-201(6), the renewal date for the two-year renewal cycle applicable to licensees under Title 58, Chapter 92, Private Investigation Licensing Act, shall be in August of each odd-numbered year.
(3) Renewal procedures shall be in accordance with Sections R156-1-308a through R156-1-308l.
(4) Under Subsections 58-1-308(3)(b)(i) and 58-92-201(6), a PI agent, or PI registrant, or PI apprentice applying for renewal shall:
(a) meet the CE requirements under Section R156-92-309; and
(b) submit to the Division:
(i) a Division-approved renewal form;
(ii) one color passport photograph that:
(A) was taken in the six months immediately preceding the date on which the licensee submits the renewal application; and
(B) if a hard copy is submitted, has the following written on the back of the photograph:
(I) the licensee's name; and
(II) the date the passport photograph was taken;
(iii) a photocopy of the licensee's government issued picture identification; and
(iv) evidence that the licensee has a current and valid surety bond that meets the requirements of:
(A) Subsection R156-92-303(1)(d), if the applicant is a PI agent;
(B) Subsection R156-92-304(1)(f), if the applicant is a PI registrant; or
(C) Subsection R156-92-305(1)(f), if the applicant is a PI apprentice.
(5) Under Subsection 58-1-308(3), a PI agent who applies for renewal of the PI agent's PI agency license shall:
(a) meet the requirements of Subsection (4); and
(b) submit to the Division:
(i) a Division-approved renewal form for a PI agency; and
(ii) evidence that the PI agency has current and valid:
(A) comprehensive general liability insurance for the licensee in an amount of at least $500,000; and
(B) workers' compensation insurance, if applicable.

R156-92-302. Qualifications for Licensure -- Background Check Requirements.
Under Subsections 58-92-302(1)(e) and (1)(f), a licensee shall submit the following with the application:
(1) two fingerprint cards; and
(2) a fee established in accordance with Section 63J-1-504 equal to the cost of conducting a check of records for each individual required to provide a fingerprint card under Subsection (1) with:
(a) the Federal Bureau of Investigation (FBI); and
(b) the Bureau of Criminal Identification (BCI) of the Utah Department of Public Safety.

R156-92-303. Qualifications for Licensure -- Experience -- Examination -- Private Investigator Agent.
(1) Under Subsection 58-92-303(1), an applicant for licensure as a PI agent shall submit the following to the Division:
(a) a copy of the applicant's government issued picture identification;
(b) a color passport photograph of the applicant that:
(i) was taken in the six months immediately preceding the date on which the applicant submits the application for licensure; and
(ii) if a hard copy is submitted, has the following written on the back of the photograph:
(A) the applicant's name; and
(B) the date the passport photograph was taken;
(c) under Subsection 58-92-303(1)(c), a completed and signed Verification of Investigative Experience Form that:
(i) verifies that the applicant has completed at least 5,000 hours of investigative experience that the applicant performed:
(A) within ten years from the date of the application; and

(B) while the applicant was working as a licensed private investigator, an investigator in the private sector, or an investigator for a governmental entity;
(ii) describes the applicant's investigative experience in detail including:
(A) the number of hours; and
(B) the type of work which the applicant performed; and
(iii) is signed and certified by:
(A) the licensed private investigator, private employer, or governmental employer for whom the applicant performed the investigative work; or
(B) the individual for whom the applicant performed the investigative work, if the applicant cannot provide certification from a private investigator or governmental employer under Subsection (1)(c)(iii)(A);
(d) evidence that the PI agent has a current and valid surety bond:
(i) in an amount of at least $10,000; and
(ii) that meets the requirements of Subsection 58-92-303(1)(d); and
(e) an attestation that the applicant does not have a conflict of interest with the individual's duties and responsibilities under Title 58, Chapter 92, Private Investigation Licensing Act, or this rule.
(2) Under Subsection 58-92-303(1)(c) and Section 58-92-308, an applicant for licensure as a PI agent shall obtain a score of at least 75% on the Private Investigator Law and Ethics Examination.
(3)(a) Under Subsections 58-92-201(6) and 58-92-303(4), if a PI agent's surety bond is cancelled or expired, the PI agent:
(i) shall notify the Division in writing and within 10 days of the surety bond cancellation or expiration; and
(ii) may not practice until the PI agent has:
(A) obtained a current and valid surety bond; and
(B) submitted to the Division a copy of the current and valid surety bond.
(b) A PI agent under Subsection (3)(a) shall complete the following within 30 days of the surety bond cancellation or expiration:
(i) obtain a current and valid surety bond; and
(ii) submit to the Division a copy of the current and valid surety bond.
(c) Under Subsections 58-92-201(6) and 58-92-303(4), if the Division receives notice that a PI agent's surety bond is cancelled or is expired under Subsection (3)(a), the Division may take action against:
(i) the PI agent's license; and
(ii) the PI agent's PI agency license including a PI agency license issued through the Department of Public Safety before September 1, 2026, if applicable.

R156-92-304. Qualifications for Licensure -- Private Investigator Registrant.
(1) Under Subsection 58-92-304(1), an applicant for licensure as a PI registrant shall submit the following to the Division:
(a) the name of the licensed PI agency for which the applicant will be an employee or independent contractor;
(b) authorization from a licensed PI agency indicating that the PI agency will employ or contract with the applicant;
(c) a copy of the applicant's government issued picture identification;
(d) a color passport photograph of the applicant that:
(i) was taken in the six months immediately preceding the date on which the applicant submits the application for licensure; and
(ii) if a hard copy is submitted, has the following written on the back of the photograph:
(A) the applicant's name; and
(B) the date the passport photograph was taken;
(e) under Subsection 58-92-304(1)(c), a completed and signed Verification of Investigative Experience Form that:
(i) verifies that the applicant has completed at least 2,000 hours of investigative experience that the applicant performed:
(A) within ten years from the date of the application; and
(B) while the applicant was working as a licensed private investigator, an investigator in the private sector, or an investigator for a governmental entity;
(ii) describes the applicant's investigative experience in detail including:
(A) the number of hours; and
(B) the type of work which the applicant performed; and
(iii) is signed and certified by:
(A) the private investigator, private employer, or governmental employer for whom the applicant performed the investigative work; or
(B) the individual for whom the applicant performed the investigative work, if the applicant cannot provide certification from a private investigator or governmental employer under Subsection (1)(e)(iii)(A);
(f) evidence that the PI registrant applicant has a current and valid surety bond:
(i) in an amount of at least $10,000; and
(ii) that meets the requirements of Subsection 58-92-304(1)(d); and
(g) an attestation that the applicant does not have a conflict of interest with the individual's duties and responsibilities under Title 58, Chapter 92, Private Investigation Licensing Act, or this rule.
(2) Under Subsection 58-92-304(2)(a) or (b), a PI registrant shall only work under the direction of a PI agency as:
(a) an employee; or
(b) an independent contractor.

(3) Under Subsection 58-92-304(3), a PI registrant may not:
(a) advertise the licensed registrant's services;
(b) conduct investigations independent from the PI agency's direction for the general public; or
(c) employ or hire as independent contractor another licensee under Title 58, Chapter 92, Private Investigation Licensing Act.
(4)(a) Under Subsections 58-92-201(6) and 58-92-304(3), if a PI registrant's surety bond is cancelled or expired, the PI registrant:
(i) shall notify the Division in writing and within 10 days of the surety bond cancellation or expiration; and
(ii) may not practice until the PI registrant has:
(A) obtained a current and valid surety bond; and
(B) submitted to the Division a copy of the current and valid surety bond.
(b) A PI registrant under Subsection (4)(a) shall complete the following within 30 days of the surety bond cancellation or expiration:
(i) obtain a current and valid surety bond; and
(ii) submit to the Division a copy of the current and valid surety bond.
(c) Under Subsections 58-92-201(6) and 58-92-304(3), if the Division receives notice that a PI registrant's surety bond is cancelled or is expired, the Division may take action against the PI registrant's license including a PI registrant license issued through the Department of Public Safety before September 1, 2026.

R156-92-305. Qualifications for Licensure -- Private Investigator Apprentice.
(1) Under Subsection 58-92-305(1)(d), an applicant for licensure as a PI apprentice shall submit the following with the application:
(a) the name of the licensed PI agency for which the applicant will be an employee or independent contractor;
(b) authorization from a licensed PI agency indicating that the PI agency will employ or contract with the applicant;
(c) a copy of the applicant's government issued picture identification;
(d) a color passport photograph of the applicant that:
(i) was taken in the six months immediately preceding the date on which the applicant submits the application for licensure; and
(ii) if a hard copy is submitted, has the following written on the back of the photograph:
(A) the applicant's name; and
(B) the date the passport photograph was taken;
(e) name and license number of the supervising PI agent for Division approval;
(f) evidence that the PI agent has a current and valid surety bond:
(i) in an amount of at least $10,000;
(ii) that shall remain in effect throughout the applicant's entire licensing period; and
(iii) that provides that the issuer of the surety bond shall notify the Division if the bond is cancelled or is expired; and
(g) an attestation that the applicant does not have a conflict of interest with the individual's duties and responsibilities under Title 58, Chapter 92, Private Investigation Licensing Act, or this rule.
(2) Under Subsection 58-92-305(2)(a) or (2)(b), a private PI apprentice shall only work:
(a) for a licensed PI agency as:
(i) an employee; or
(ii) an independent contractor; and
(b) under the general supervision of a Division-approved PI agent.
(3) Under Subsection 58-92-305(3), a PI apprentice may not:
(a) advertise the licensed PI apprentice's services;
(b) conduct investigations independent of a supervising PI agent for the general public; or
(c) employ or hire as independent contractor another licensee under Title 58, Chapter 92, Private Investigation Licensing Act; or
(d) obtain information from the Utah State Tax Commission's Motor Vehicle Division or the Department of Public Safety's Driver License Division, except the PI apprentice may utilize information from these agencies for a legitimate business need and under the general supervision and guidance of a licensed PI agency.
(4)(a) Under Subsections 58-92-201(6) and 58-92-305(3), if a PI apprentice's surety bond is cancelled or expired, the PI apprentice:
(i) shall notify the Division in writing and within 10 days of the surety bond cancellation or expiration; and
(ii) may not practice until the PI apprentice has:
(A) obtained a current and valid surety bond; and
(B) submitted to the Division a copy of the current and valid surety bond.
(b) A PI apprentice under Subsection (4)(a) shall complete the following within 30 days of the surety bond cancellation or expiration:
(i) obtain a current and valid surety bond; and
(ii) submit to the Division a copy of the current and valid surety bond.
(c) Under Subsections 58-92-201(6) and 58-92-305(3), if the Division receives notice that a PI apprentice's surety bond is cancelled or is expired, the Division may take action against the PI apprentice's license including a PI apprentice license issued through the Department of Public Safety before September 1, 2026.
(d) Under Subsections 58-92-201(6) and 58-92-305(3), if the Division takes action against a PI apprentice's license under Subsection (4)(c), the PI apprentice shall notify:
(i) the PI apprentice's supervising PI agent; and
(ii) the PI apprentice's PI agency.

R156-92-309. Qualified Continuing Education (CE).

(1) Under Section 58-92-309, the qualified CE requirement for a PI agent, PI registrant, or a PI apprentice licensed under Title 58, Chapter 92, Private Investigation Licensing Act, is established in this section.

(2) During each two-year period commencing in August of each odd-numbered year, a licensee under Subsection (1) shall complete at least 16 hours of qualified CE that includes:

(a) at least four hours of ethics education provided by a nationally recognized association;

(b) at least four hours of education on Utah law, including Title 58, Chapter 92, Private Investigation Licensing Act; and

(c) at least eight hours of education:

(i) that is directly related to the licensee's scope of practice; and

(ii) obtained from a nationally recognized association.

(3) A qualified CE course shall:

(a) have an identifiable clear statement of purpose and defined objective for the educational program that is directly related to the licensee's scope of practice;

(b) be relevant to the licensee's professional practice;

(c) be presented in a competent, well-organized, and sequential manner consistent with the stated purpose and objective of the program;

(d) be prepared and presented by individuals who are qualified by education, training, and experience; and

(e) have records of registration and completion available for review.

(4) The number of required CE hours shall be increased or decreased proportionately based on the date of licensure within the two-year renewal cycle.

(5) The Division may defer or waive CE requirements as provided in Section R156-1-308d.

(6) A licensee shall maintain documentation sufficient to prove compliance with the CE requirements of this section for a period of three years from the end of the renewal period for which the CE hours are due.

R156-92-310. Qualified Credit for Specified Training.

(1)(a) Under Section 58-92-310, an applicant may receive credit for a portion of the required investigative experience hours in Section 58-92-307 in accordance with this section.

(b) An applicant requesting credit under this section shall submit to the Division for review:

(i) official transcripts, if the applicant is requesting credit under Subsection (2) or (4); or

(ii) evidence of having successfully completed a training or experience substantially similar to the training and experience required under Title 58, Chapter 92, Private Investigation Licensing Act, and this rule, if the applicant is requesting credit under Subsection (5).

(2) Under Subsection 58-92-310(1), an applicant with a bachelor's degree in criminal justice from an accredited college or university may receive 4,000 hours of investigative experience credit.

(3) Under Subsection 58-92-310(2), an applicant who successfully completed the state Peace Officers Standards and Training (POST) basic training course may receive 1,000 hours of investigative experience credit.

(4) Under Subsection 58-92-310(3), an applicant with a bachelor's degree in police science from an accredited college or university may receive 4,000 hours of investigative experience credit.

(5) Under Subsection 58-92-310(3), an individual may submit to the Division for review evidence that the applicant successfully completed a training or experience substantially similar to the training and experience required under Title 58, Chapter 92, Private Investigation Licensing Act, and this rule.

R156-92-311. Qualification for Private Investigation Agency Licensure -- Comprehensive General Liability Insurance -- Worker's Compensation -- Cancellation or Expiration -- Revocation -- Change in Name or Address.

(1) Under Subsections 58-92-201(6) and 58-92-311(3)(b), a PI agent applying for licensure of a PI agency shall submit to the Division:

(a) the name under which the applicant intends to do business;

(b) a current certificate of comprehensive general liability insurance policy for the PI agency that:

(i) contains a limit of liability of at least $500,000;

(ii) is continuous in form and runs concurrently with the license period; and

(iii) requires the insurance company to provide notice to the Division if the liability insurance is cancelled or expires; and

(c) a current certificate of workers' compensation insurance policy for the PI agency, if applicable.

(2)(a) The PI agency applicant's comprehensive general liability insurance under Subsection (1)(b) shall name the Division of Professional Licensing as the certificate holder; and

(b) A PI agency licensee shall maintain a current comprehensive general liability insurance:

(i) for the duration of the licensing period;

(ii) that meets the requirements of this section; and

(iii) that is available for immediate inspection by the Division during normal working hours.

(3) Under Subsection 58-92-201(6), a PI agency shall notify the Division in writing and within 30 days if the PI agency's:

(a) comprehensive general liability insurance is cancelled or is expired; or

(b) workers' compensation is cancelled or is expired.

(4) Under Subsection 58-92-201(6), if the Division receives notice that a PI agency's comprehensive general liability insurance or worker's compensation is cancelled or is expired, the Division may take action against the PI agency's license.

R156-92-312. Identification Card.

(1) Under Subsection 58-92-312(1), the Division shall issue to the licensee an identification card that includes on the identification card's face:

(a) the licensee's name;

(b) indicate that the licensee is licensed as a PI agent, PI registrant, PI apprentice, or PI agency;

(c) the license number;

(d) the license expiration date; and

(e) a current color photograph of the licensee.

(2) Under Subsections 58-92-201(6) and 58-92-312(1), the Division-issued identification card under Subsection (1) shall state that the licensee is:

(a) under the direction of a licensed PI agency and may not do investigative work independently for the public, if the licensee is a PI registrant; or

(b) under the general supervision of a licensed PI agency and may not do investigative work independently for the public, if the licensee is a PI apprentice.

R156-92-313. Operating Standards -- Prohibitions.

(1) Under Section 58-92-313, a licensee may not:

(a) wear a uniform, use a title, insignia, badge, or designation, or make any representation or statement that would reasonably cause another individual to believe that the licensee is associated with the federal government, a state government, any political subdivision of a state government, or a public law enforcement agency; or

(b) display a badge or shield in conjunction with performing the duties of a licensee under Title 58, Chapter 92, Private Investigation Licensing Act.

(2) Under Section 58-92-313, a PI agency may not use:

(a) a name that implies that the PI agency is connected to or associated with a public law enforcement agency; or

(b) a logo that bears markings similar to the seal, emblem, acronym, or configuration of a public law enforcement agency of the federal government, a state government, a state political subdivision, a municipal, or a military branch.

R156-92-314. Principal Place of Business -- Records.

(1) Under Subsection 58-92-201(6), a licensee shall meet the requirements of this section.

(2) Each PI agency shall:

(a) have at least one physical location from which the PI agency conducts normal business; and

(b) update any change in the address of the PI agency's physical location with the Division within 10 days.

(3) A PI agency licensee shall post the PI agency license issued by the Division in a conspicuous place in the PI agency's principal office.

(4) A licensee shall maintain client records for at least five years at:

(a) the licensee's principal place of business; or

(b) another location the Division approves for a licensee whose license is:

(i) expired; or

(ii) suspended or revoked.

(5) On request by the Division, a licensee shall make the records under Subsection (4) available immediately to the Division during normal business hours or another time acceptable to the parties, unless the Division grants an extension.

R156-92-315. Limited-Use License.

(1) As used in this section:

(a) "Legislative body" means:

(i) the Legislature;

(ii) the Utah House of Representatives;

(iii) the Utah Senate;

(iv) a special investigative committee; or

(v) a staff office of the Legislature.

(b) "Special investigative committee" is as defined in Subsection 36-12-9(1).

(2) Under Subsection 58-92-201(6), the Division may issue a limited-use license to a person qualified under this section.

(3) Notwithstanding any provision of this rule, a person is qualified to receive a limited-use license if the person:

(a) is licensed, in good standing, by another state, district, or territory of the United States to provide the services of a private investigator; and

(b) is retained by a legislative body to provide the services of a private investigator for:

(i) a special investigative committee; or

(ii) a purpose relating to impeachment.

(4) A person holding a limited-use license may only provide the services described in Subsection (3)(b).

(5) The Division shall issue a limited-use license to a person within five days after the day on which the Division receives notice from a legislative body that:

(a) the person meets the qualifications described in Subsection (3)(a); and

(b) the legislative body has retained the person to provide the services described in Subsection (3)(b).
(6) The Division may not:
(a) impose a qualification for the receipt of a limited-use license other than the qualifications described in Subsection (3)(a); or
(b) charge a fee to issue a limited-use license.
(7) A limited-use license expires when the person to whom it is issued is no longer retained by a legislative body to provide a service described in Subsection (3)(b).

R156-92-502. Unprofessional Conduct.
Under Subsection 58-1-203(1)(e), "unprofessional conduct" includes:
(1) committing an act listed under Subsection 58-92-302(2), whether before or after licensure;
(2) employing or contracting with any unlicensed or improperly licensed person or PI agency to conduct activities regulated under Title 58, Chapter 92, Private Investigation Licensing Act, if the licensure status was known or could have been ascertained by reasonable inquiry;
(3) failing to maintain in full force and effect comprehensive general liability insurance or workers' compensation insurance if the licensee is a PI agency;
(4) failing to maintain in full force and effect a surety bond, if the licensee is a PI agent, PI registrant, or PI apprentice;
(5) failing to notify the Division of a change of name or address under Subsection 58-1-301.7(1)(a);
(6) accepting employment, contracts, or in any way engages in employment that has an adverse impact on investigations being conducted on behalf of clients;
(7) advertising in a false, deceptive, or misleading manner;
(8) failing to display the identification card issued by the Division to Division personnel or law enforcement upon request under Subsection 58-92-312(5);
(9) failing to identify oneself as a private investigator while conducting investigative work on private property under Subsection 58-92-312(6);
(10) being convicted of any act of illegally obtaining or disseminating private, controlled, or protected records under Section 63G-2-801; or
(11) engaging in any business, activity, or employment that:
(a) creates a conflict of interest with a licensee's duties and responsibilities under Title 58, Chapter 92, Private Investigation Licensing Act, or this rule; or
(b) infringes upon the confidentiality of a client.

R156-92-503. Penalties.
(1) In addition to the penalties in Section 58-92-503, the penalties under Sections 58-1-502 and R156-1-502 shall apply to a violation of Title 58, Chapter 92, Private Investigation Licensing Act.
(2) Citation procedures shall be in accordance with Sections 58-1-502 and 58-92-503 and Rule R156-1.

KEY: licensing, private investigator, private investigation agency, private investigator agent, private investigator registrant, private investigator apprentice
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-92-201

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58371**
Rule or section number:	**R380-90**

1. Agency Information

Title catchline:	Health and Human Services, Administration
Building:	Multi-Agency State Office Building
Street address:	195 N 1950 W
City, state:	Salt Lake City, UT
Mailing address:	195 N 1950 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
Lindsay Harris	385-315-0622	lindsayharris@utah.gov

Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:

R380-90. Accounting and Protection of Federal Benefits for Minor Beneficiaries in Custody

B. Purpose of the new rule or reason for the change:

HB 108 passed in the 2026 General Session lowered the percentage of a minor beneficiary's federal benefits the Department of Health and Human Services (department) can use for maintenance costs, as defined in Section 80-2-504, from 75% to 25%.

While the existing rule's wording did not technically conflict with the updated statute, the department determined it is appropriate to update wording within this rule to more closely align with provisions in the updated statute.

C. Summary of the new rule or change:

This filing updates rule language to more closely align with provisions set forth in statute and avoid repetition of required provisions already set forth in statute.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 108 (2026 General Session)

5. Fiscal Information

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 department as a result of this rule filing because any cost to the department is a result of HB 108 (2026), rather than this rule filing.

This rule filing updates wording to more closely align with updated provisions in Section 80-2-504, amended by HB 108 (2026).

Costs to the department have already been captured in a fiscal note for HB 108 (2026) can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0108.fn.pdf.

HB 108 (2026) lowered the percentage of a minor beneficiary's federal benefits the department can use for maintenance costs, as defined in Section 80-2-504. As costs are already reflected in the fiscal note for HB 108 (2026), they are not reflected in the regulatory impact summary table for this rule filing.

B. Local governments:

There is no anticipated fiscal impact on local governments as a result of this rule filing because this rule does not apply to local governments.

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

There is no anticipated fiscal impact on small businesses as a result of this rule filing because this rule does not apply to small businesses.

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 a result of this rule filing because this rule does not apply to 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 cost or savings on other persons, identified as minor beneficiaries in the custody of the department, because this rule filing implements updates to Section 80-2-504, and any potential indirect impact on minor beneficiaries is related to the implementation of the bill rather than this rule filing.

As a result of HB 108 (2026), Section 80-2-504 further limits the department's use of a minor's federal benefits for maintenance costs in comparison to the limits previously established. The department is still responsible for covering maintenance costs, meaning that a minor beneficiary is not fiscally responsible for any additional costs and is not anticipated to see a change in non-fiscal benefits.

Additionally, because of Section 80-2-504, minor beneficiaries may have a larger portion of their federal benefits available to them when they leave department custody, but it is impossible to know how many minor beneficiaries will be released and the value of each beneficiary's benefits. However, this would be a result of the bill and not of this rule filing.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, identified as minor beneficiaries and the department, as a result of this rule filing.

Any cost to the department is a result of HB 108 (2026), rather than this rule filing, and there are no anticipated compliance costs to minor beneficiaries because any potential indirect fiscal impacts on minor beneficiaries are related to the implementation of the bill rather than this rule filing.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$0	$0	$0	$0	$0
Local Governments	$0	$0	$0	$0	$0
Small Businesses	$0	$0	$0	$0	$0
Non-Small Businesses	$	$	$	$	$
Other Persons	$0	$0	$0	$0	$0
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 80-2-504		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/19/2026

R380. Health and Human Services, Administration.
R380-90. Accounting and Protection of Federal Benefits for Minor Beneficiaries in Custody.
R380-90-1. Authority and Purpose.

(1) Section 80-2-504 authorizes this rule.

(2) This rule implements the requirements of Section 80-2-504 and provides for the accounting and protection of federal benefits for minors in department custody.

R380-90-2. Definitions.

Terms used in this rule are defined in Section 80-2-504. Additionally:

(1) "ABLE account" means:

(a) the same as defined in Section 80-2-504; and

(b) a tax-advantaged savings account for an eligible person with disabilities that allows the person to save and invest money for disability-related expenses without jeopardizing the person's eligibility for means-tested public benefits, including Medicaid and supplemental security income (SSI).

(2) "PTIF" means the Public Treasurer's Investment Fund.

(3) "Trust account" means a tracking account used to store funds available to use for a minor beneficiary's maintenance cost.

R380-90-3. Preservation and Disbursement of Minor Beneficiary Federal Benefits.

(1) In accordance with Subsection 80-2-504(4)(e), the department shall conserve or invest federal benefit funds not expended for maintenance costs in a PTIF or an ABLE account, depending on a minor beneficiary's eligibility, unless good cause exists to use a different account, as described in Section R380-90-4.

(2) The department shall:

(a) calculate eligible deposits upon receipt; and

(b) conserve separately from the minor beneficiary's available spending balance [~~at least 25%~~]an amount of each eligible deposit consistent with provisions in Subsection 80-2-504(4)(e)[~~separate from the minor beneficiary's available spending balance~~].

(3)(a) When a minor beneficiary leaves custody, the department shall request authorization from the federal agency that was the source of the minor beneficiary's federal benefit, in accordance with applicable federal regulation, to send any conserved and unspent funds directly to the minor beneficiary or the next representative payee.

(b) The department shall return the conserved and unspent funds to the federal agency that was the source of the benefits if:

(i) the department's request is denied; or

(ii) the department does not receive a response from the federal agency that was the source of the benefits by the time the federal agency requires the funds be returned.

(4) If the department receives federal benefit funds for a minor beneficiary no longer in the department's custody, the department shall return those funds to the federal agency that was the source of the benefits.

R380-90-4. Good Cause for Use of Other Accounts.

Good cause for using an account other than an ABLE account includes if the minor beneficiary:

(1) already has a special needs trust or other account;

(2) has exceeded or is likely to exceed the contribution limits for an ABLE account;

(3) does not qualify for an ABLE account; or

(4) has any other circumstance the department determines is good cause.

R380-90-5. Compliance with Federal Regulations.

The department shall establish policies and procedures to ensure compliance with applicable federal regulations.

R380-90-6. Safeguards Against Mismanagement and Theft.

(1) The department shall limit employee access to minor beneficiary accounts by providing specific authorization to any employee with access.

(2) For each minor beneficiary, the department shall document every account transaction.

(3)(a) The [~~department shall calculate and separate at least 25% of the eligible federal benefit funds received for each minor beneficiary~~]separately conserved funds described in Subsection R380-90-3(2)(b) shall be deposited into an account that is not accessible to the minor beneficiary while the minor beneficiary is in department custody.

(b) Any amount remaining in a minor beneficiary's trust account may be used for maintenance costs.

(4)(a) Before a disbursement from a minor beneficiary's trust account may be processed:

(i) the department must obtain appropriate approval and supporting documentation, in accordance with Division of Finance Administration policy; and

(ii) the representative payee must ensure there is sufficient balance in the account to cover the disbursement.

(b) The department shall void any outstanding check after 180 days.

(5) The department shall reconcile every minor beneficiary's account with bank statements each month, including the funds conserved in accordance with Subsection 80-2-504(4)(e).

(6) A minor beneficiary may request information about that minor beneficiary's account through a caseworker.

KEY: DCFS, Division of Child and Family Services, Division of Juvenile Justice and Youth Services, JJYS
Date of Last Change: [~~March 16, ~~]2026
Authorizing, and Implemented or Interpreted Law: 80-2-504

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Repeal	**Filing ID: 58260**
Rule or section number:	**R383-1**

1. Agency Information

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

2. Contact Persons

Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	dlbcrules@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:

R383-1. Definitions

B. Purpose of the new rule or reason for the change:

HB 389 passed in the 2026 General Session, which moves duties related to the medical cannabis program previously performed by the Utah Department of Health and Human Services (DHHS) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027, renders this rule obsolete because DHHS no longer has statutory authority to oversee its part of the medical cannabis program.

Therefore, this repeal is appropriate.

It is intended that this repeal be made effective at the same time, or shortly after, UDAF adopts a rule within Title R67 that contains provisions previously within this rule. It is anticipated that the UDAF rules pertaining to the medical cannabis program will go into effect in early 2027.

C. Summary of the new rule or change:
This rule is repealed in its entirety. (EDITOR'S NOTE: The proposed new rules for Title R67 (Department of Agriculture and Food, Specialized Product Authority Licensing Board) are R67-1, ID 58477; R67-2, ID 58478; R67-3, ID 58479; R67-4, ID 58480; R67-5, ID 58481; R67-6, ID 58482; R67-7, ID 58483; and R67-8, ID 58484; in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026). Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.
B. Local governments:
There is no anticipated fiscal impact on local governments with the repeal of this rule. Local governments do not regulate this aspect of the medical cannabis program.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal impact on small businesses from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67. Provisions in this rule applicable to small businesses are anticipated to remain the same under the UDAF rule.
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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67. Provisions in this rule applicable to non-small businesses are anticipated to remain the same under the UDAF 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 is no anticipated fiscal impact to other persons, including medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026). Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons, including DHHS, UDAF, small and non-small businesses, and medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67. Responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026). Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	FY2027	FY2028	FY2029	FY2030	FY2031
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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)		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	09/19/2026

R383. Health and Human Services, Center for Medical Cannabis.
[~~R383-1. Definitions.~~
~~R383-1-1. Authority and Purpose.~~
~~(1) Subsection 26B-1-202(2)(a) authorizes this rule.~~
~~(2) This rule establishes the definitions used in Title R383.~~

~~R383-1-2. Definitions.~~
~~(1) The definitions in Section 26B-4-201 and this rule apply to Title R383.~~
~~(2) "Department" means the Department of Health and Human Services.~~
~~(3) "EVS" means the electronic verification system.~~
~~(4) "ICS" means the inventory control system.~~
~~(5) "Pharmacy agent" means a medical cannabis pharmacy agent.~~
~~(6) "PMP" means a medical cannabis pharmacy medical provider.~~
~~(7) "RMP" means a recommending medical provider.~~
~~(8) "RMP proxy" or "recommending medical provider proxy" means an individual who has been given authority to enter certifications and recommendations for an RMP as described in Subsection 26B-4-202(3).~~
~~(9) "Safeguard" means to maintain the confidentiality of the information accessed and not use, release, publish, disclose, or otherwise make available to any other person not authorized to access the information, for any purpose other than those specifically authorized or permitted by applicable law.~~
~~(10) "Utah resident" means an individual who has established a domicile in Utah.~~

~~KEY: medical cannabis, marijuana~~
~~Date of Last Change: January 26, 2026~~
~~Authorizing, and Implemented or Interpreted Law: 26B-1-213(1); 26B-4; 63G-3~~]

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Repeal	**Filing ID: 58261**
Rule or section number:	**R383-2**

1. Agency Information

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

2. Contact Persons

Name:	**Phone:**	**Email:**
Kamille Sheikh	385-227-1290	dlbcrules@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:
R383-2. Electronic Verification System and Inventory Control System Registration, Limitations, and Confidentiality
B. Purpose of the new rule or reason for the change:
HB 389 passed in the 2026 General Session, which moves duties related to the medical cannabis program previously performed by the Utah Department of Health and Human Services (DHHS) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027, renders this rule obsolete because DHHS no longer has statutory authority to oversee its part of the medical cannabis program.

Therefore, this repeal is appropriate.

It is intended that this repeal be made effective at the same time, or shortly after, UDAF adopts a rule within Title R67 that contains provisions previously within this rule. It is anticipated that the UDAF rules pertaining to the medical cannabis program will go into effect in early 2027.

C. Summary of the new rule or change:

This rule is repealed in its entirety.

(EDITOR'S NOTE: The proposed new rules for Title R67 (Department of Agriculture and Food, Specialized Product Authority Licensing Board) are R67-1, ID 58477; R67-2, ID 58478; R67-3, ID 58479; R67-4, ID 58480; R67-5, ID 58481; R67-6, ID 58482; R67-7, ID 58483; and R67-8, ID 58484; in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

B. Local governments:

There is no anticipated fiscal impact to local governments from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to local governments are anticipated to remain the same under the UDAF rule.

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

There is no anticipated fiscal impact to small businesses from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to small businesses are anticipated to remain the same under the UDAF rule.

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to non-small businesses are anticipated to remain the same under the UDAF 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 is no anticipated fiscal impact to other persons, including medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, including DHHS, UDAF, local governments, small and non-small businesses, and medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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)	Subsection 26B-4-202(6)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	09/19/2026

R383. Health and Human Services, Center for Medical Cannabis.

[~~R383-2. Electronic Verification System and Inventory Control System Registration, Limitations, and Confidentiality.~~

~~R383-2-1. Authority and Purpose.~~

~~(1) Subsections 26B-1-202(2)(a) and 26B-4-202(6) authorize this rule.~~

~~(2) This rule establishes medical cannabis initial and renewal registration procedures for a:~~

~~(a) caregiver;~~

~~(b) guardian;~~

~~(c) patient who is a:~~

~~(i) Utah resident; or~~

~~(ii) nonresident;~~

~~(d) pharmacy medical provider (PMP);~~

~~(e) recommending medical provider (RMP); and~~

~~(f) RMP proxy.~~

~~R383-2-2. Definitions.~~

~~Terms used in this rule are defined in Section 26B-4-201 and Rule R383-1.~~

~~R383-2-3. System Access Standards.~~

~~(1)(a) An individual shall request access to the data in the EVS by completing the procedures listed in Section R383-2-5.~~

~~(b) An individual shall request access to the data in the ICS by completing registration as prescribed by the Utah Department of Agriculture and Food.~~

~~(2) The department shall grant limited EVS access according to:~~

~~(a) the type of registrant listed in Subsection R383-2-1(2); or~~

~~(b) for pharmacy agents, as established in Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis.~~

~~(3) The department shall grant access to the extent allowed in:~~

~~(a) Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis;~~

~~(b) Title 4, Chapter 41a, Cannabis Production Establishments and Pharmacies; and~~

~~(c) this rule.~~

~~R383-2-4. Confidentiality Requirements.~~

~~(1) A person authorized to access information in the EVS or ICS shall only access the minimum amount of information necessary to perform an authorized function, as specified in:~~

~~(a) Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis;~~

~~(b) Title 4, Chapter 41a, Cannabis Production Establishments and Pharmacies; and~~

~~(c) this rule.~~

~~(2) A person authorized to access information in the EVS or ICS shall safeguard any information stored in the system.~~

~~(3) A person authorized to access the EVS and ICS shall safeguard login credentials and not share those credentials with anyone.~~

~~(4) A person authorized to access the EVS and ICS who fails to observe the confidentiality requirements of this rule may:~~

~~(a) be subject to the penalties listed in Section 26B-4-202; and~~

~~(b) lose access to the EVS or ICS.~~

~~R383-2-5. EVS Registration Procedures.~~

~~(1) The registration procedures established in this section govern the registrations listed in Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis.~~

~~(2) Each registrant shall apply using the EVS application or a paper application requested from the department.~~

~~(3) The registration shall be closed if it is not completed within six months.~~

~~(4) The department shall provide the information described in Subsection 26B-4-213(9):~~

~~(a) electronically to each medical cannabis patient, guardian, or caregiver cardholder; and~~

~~(b) publicly on the department website.~~

~~(5) Each registrant shall maintain a current email and mailing address with the department.~~

~~(6)(a) Renewal time periods shall follow the stipulations in Title 26B, Chapter 4, Part 2, Cannabinoid Research and Medical Cannabis.~~

~~(b) The department shall send renewal notices to a registrant's most recent email in the department's EVS database.~~

~~(c)(i) The department shall send a renewal notice to a registrant at least 30 days before the registration expiration date.~~
~~(ii) For a nonresident patient registrant, the department shall send a renewal notice at least five days before the expiration date.~~
~~(d) A renewal notice shall advise a registrant that registration automatically expires on the expiration date and is no longer valid.~~
~~(e) A renewal notice shall include instructions for a registrant to renew registration through the department's website.~~
~~(f) If a registration expires, the individual with the expired registration may submit a renewal registration at any time.~~
~~(7)(a) The department shall provide written notice of revocation to a registrant who submits an initial or renewal registration if the department determines that the registrant does not meet the requirements.~~
~~(b) The department shall send the written notice of revocation to the registrant's most recent email address in the EVS database.~~
~~(c) The department may reinstate the registrant's registration if the registrant corrects each deficiency and otherwise meets the registration requirements.~~

~~**KEY: medical cannabis, medical cannabis pharmacy, inventory control system, electronic verification system**~~
~~**Date of Last Change: January 26, 2026**~~
~~**Authorizing, and Implemented or Interpreted Law: 26B-4-201(1); 26B-4-202(6)**~~]

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Repeal	**Filing ID: 58262**
Rule or section number:	**R383-5**

1. Agency Information

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

2. Contact Persons

Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	dlbcrules@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:

R383-5. Dosing Guidelines and Partial Filling

B. Purpose of the new rule or reason for the change:

HB 389 passed in the 2026 General Session, which moves duties related to the medical cannabis program previously performed by the Utah Department of Health and Human Services (DHHS) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027, renders this rule obsolete because DHHS no longer has statutory authority to oversee its part of the medical cannabis program.

Therefore, this repeal is appropriate.

It is intended that this repeal be made effective at the same time, or shortly after, UDAF adopts a rule within Title R67 that contains provisions previously within this rule. It is anticipated that the UDAF rules pertaining to the medical cannabis program will go into effect in early 2027.

C. Summary of the new rule or change:

This rule is repealed in its entirety.

(EDITOR'S NOTE: The proposed new rules for Title R67 (Department of Agriculture and Food, Specialized Product Authority Licensing Board) are R67-1, ID 58477; R67-2, ID 58478; R67-3, ID 58479; R67-4, ID 58480; R67-5, ID 58481; R67-6, ID 58482; R67-7, ID 58483; and R67-8, ID 58484; in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

B. Local governments:

There is no anticipated fiscal impact to local governments from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to local governments are anticipated to remain the same under the UDAF rule.

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

There is no anticipated fiscal impact to small businesses from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to small businesses are anticipated to remain the same under the UDAF rule.

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to non-small businesses are anticipated to remain the same under the UDAF 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 is no anticipated fiscal impact to other persons, including medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, including DHHS, UDAF, local governments, small and non-small businesses, and medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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)		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	09/19/2026

R383. Health and Human Services, Center for Medical Cannabis.

[~~R383-5. Dosing Guidelines and Partial Filling.~~

~~R383-5-1. Authority and Purpose.~~

~~(1) Subsection 26B-1-202(2)(a) authorizes this rule.~~

~~(2) This rule establishes standards for dosing guidelines and partial filling in a medical cannabis recommendation.~~

~~R383-5-2. Dosing Guidelines in Medical Cannabis Recommendation.~~

~~(1)(a) A recommending medical provider (RMP) may change the dosage form or dosing guidelines for that RMP's patient.~~

~~(b) A pharmacy medical provider (PMP) may not change the dosage form or dosing guidelines entered in the EVS by a patient's RMP without approval from the patient's RMP.~~

~~(2)(a) If an RMP has not specified the dosage form or dosing guidelines for a patient, a PMP may specify the dosage form and dosing guidelines.~~

~~(b) If an RMP does not specify a dosage form and dosing guidelines for a patient, or specifies a dosage form and some or no dosing guidelines for a patient, a PMP may specify the remaining dosing guidelines.~~

~~**R383-5-3. Partial Filling.**~~

~~A PMP or pharmacy agent who partially fills a recommendation for a medical cannabis cardholder shall specify in the ICS the:~~

~~(1) date of partial fill;~~

~~(2) quantity supplied to the cardholder; and~~

~~(3) quantity remaining of the recommendation partially filled.~~

~~**KEY: medical cannabis, medical cannabis dosing guidelines, medical cannabis pharmacy**~~
~~**Date of Last Change: November 9, 2025**~~
~~**Authorizing, and Implemented or Interpreted Law: 63G-3; 26B-1-202(2)(a)**~~]

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Repeal	**Filing ID: 58263**
Rule or section number:	**R383-6**

1. Agency Information

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

2. Contact Persons

Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	dlbcrules@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:

R383-6. Pharmacy Medical Provider Continuing Education Requirements

B. Purpose of the new rule or reason for the change:

HB 389 passed in the 2026 General Session, which moves duties related to the medical cannabis program previously performed by the Utah Department of Health and Human Services (DHHS) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027, renders this rule obsolete because DHHS no longer has statutory authority to oversee its part of the medical cannabis program.

Therefore, this repeal is appropriate.

It is intended that this repeal be made effective at the same time, or shortly after, UDAF adopts a rule within Title R67 that contains provisions previously within this rule. It is anticipated that the UDAF rules pertaining to the medical cannabis program will go into effect in early 2027.

C. Summary of the new rule or change:

This rule is repealed in its entirety.

(EDITOR'S NOTE: The proposed new rules for Title R67 (Department of Agriculture and Food, Specialized Product Authority Licensing Board) are R67-1, ID 58477; R67-2, ID 58478; R67-3, ID 58479; R67-4, ID 58480; R67-5, ID 58481; R67-6, ID 58482; R67-7, ID 58483; and R67-8, ID 58484; in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

B. Local governments:

There is no anticipated fiscal impact to local governments from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to local governments are anticipated to remain the same under the UDAF rule.

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

There is no anticipated fiscal impact to small businesses from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to small businesses are anticipated to remain the same under the UDAF rule.

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to non-small businesses are anticipated to remain the same under the UDAF 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 is no anticipated fiscal impact to other persons, including medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by the UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, including DHHS, UDAF, local governments, small and non-small businesses, and medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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)		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	09/19/2026

R383. Health and Human Services, Center for Medical Cannabis.

[~~R383-6. Pharmacy Medical Provider Continuing Education Requirements.~~

~~R383-6-1. Authority and Purpose.~~

~~(1) Subsection 26B-1-202(2)(a) authorizes this rule.~~

~~(2) This rule establishes pharmacy medical provider (PMP) continuing education requirements.~~

~~R383-6-2. Definitions.~~

~~Terms used in this rule are defined in Section 26B-4-201 and Rule R383-1.~~

~~**R383-6-3. Continuing Education Requirements.**~~
~~A person registering as a PMP shall complete continuing education:~~
~~(1) as outlined in Subsection 26B-4-219(3);~~
~~(2) that includes a course containing at least 0.5 hours of education covering current Utah law applicable to the practice of a pharmacy medical provider;~~
~~(3) related to cannabis; and~~
~~(4) offered from:~~
~~(a) the department;~~
~~(b) an accredited institution of higher education; or~~
~~(c) an organization accredited through:~~
~~(i) Accreditation Council for Continuing Medical Education;~~
~~(ii) Accreditation Council for Pharmacy Education;~~
~~(iii) American Academy of Physician Assistants; or~~
~~(iv) American Association of Nurse Practitioners.~~

~~**KEY: medical cannabis, pharmacy medical providers, marijuana**~~
~~**Date of Last Change: January 26, 2026**~~
~~**Authorizing, and Implemented or Interpreted Law: 63G-3; 26B-1-202(2)(a)**~~]

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Repeal	**Filing ID: 58264**
Rule or section number:	**R383-13**

1. Agency Information

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

2. Contact Persons

Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	dlbcrules@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:

R383-13. Expedited Final Review of Compassionate Use Petitions

B. Purpose of the new rule or reason for the change:

HB 389 passed in the 2026 General Session, which moves duties related to the medical cannabis program previously performed by the Utah Department of Health and Human Services (DHHS) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027, renders this rule obsolete because DHHS no longer has statutory authority to oversee its part of the medical cannabis program.

Therefore, this repeal is appropriate.

It is intended that this repeal be made effective at the same time, or shortly after, UDAF adopts a rule within Title R67 that contains provisions previously within this rule. It is anticipated that the UDAF rules pertaining to the medical cannabis program will go into effect in early 2027.

C. Summary of the new rule or change:

This rule is repealed in its entirety.

(EDITOR'S NOTE: The proposed new rules for Title R67 (Department of Agriculture and Food, Specialized Product Authority Licensing Board) are R67-1, ID 58477; R67-2, ID 58478; R67-3, ID 58479; R67-4, ID 58480; R67-5, ID 58481; R67-6, ID 58482; R67-7, ID 58483; and R67-8, ID 58484; in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by the DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

B. Local governments:

There is no anticipated fiscal impact to local governments from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to local governments are anticipated to remain the same under the UDAF rule.

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

There is no anticipated fiscal impact to small businesses from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to small businesses are anticipated to remain the same under the UDAF rule.

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Provisions in this rule applicable to non-small businesses are anticipated to remain the same under the UDAF 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 is no anticipated fiscal impact to other persons, including medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, including DHHS, UDAF, local governments, small and non-small businesses, and medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67.

Responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by the UDAF, in accordance with statutory updates made through HB 389 (2026).

Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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)	Subsection 26B-1-421(6)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	09/19/2026

R383. Health and Human Services, Center for Medical Cannabis.
[~~R383-13. Expedited Final Review of Compassionate Use Petitions.~~
~~R383-13-1. Authority and Purpose.~~
~~(1) Subsection 26B-1-202(2)(a) and Subsection 26B-1-421(6) authorize this rule.~~
~~(2) This rule establishes a process and criteria for a petition to the Compassionate Use Board (board) to qualify for expedited final review and approval or denial by the department.~~

~~R383-13-2. Definitions.~~
~~Terms used in this rule are defined in Section 26B-4-201 and Rule R383-1.~~

~~R383-13-3. Availability of Expedited Review.~~
~~To qualify for expedited review by the department, an individual submitting the petition must:~~
~~(1) be diagnosed with a terminal illness;~~
~~(2) have a life expectancy of six months or less;~~
~~(3) present symptoms not adequately managed with standard therapies that may reasonably be expected to be alleviated by medical cannabis; and~~
~~(4) have a recommendation from a RMP who is directly and regularly involved in the individual's medical care.~~

~~R383-13-4. Expedited Review Procedure.~~
~~(1) Each individual submitting a petition for expedited review by the department shall complete a form available from the department.~~
~~(2) The board may not review a petition until the form is complete and any supporting documentation requested by the board is received.~~
~~(3) Within five business days after receiving a complete petition for expedited review, the department shall review the petition and either approve or deny the request for expedited review.~~
~~(4) If the department approves the petition, the department shall issue a medical cannabis card to the applicant.~~
~~(5) If the department denies the petition for expedited review, the department shall:~~
~~(a) send notice of the denial to the applicant; and~~
~~(b) send the petition for compassionate use to the board for review on its regular review schedule.~~

~~KEY: medical cannabis, compassionate use board, medical marijuana~~
~~Date of Last Change: January 26, 2026~~
~~Authorizing, and Implemented or Interpreted Law: 63G-3; 26B-1; 26B-1-213~~]

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Repeal	**Filing ID: 58265**
Rule or section number:	**R383-15**

1. Agency Information

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

2. Contact Persons

Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	dlbcrules@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:
R383-15. Compassionate Use Board Administrative Hearing Procedure

B. Purpose of the new rule or reason for the change:
HB 389 passed in the 2026 General Session, which moves duties related to the medical cannabis program previously performed by the Utah Department of Health and Human Services (DHHS) to the Utah Department of Agriculture and Food (UDAF) by 01/01/2027, renders this rule obsolete because DHHS no longer has statutory authority to oversee its part of the medical cannabis program. Therefore, this repeal is appropriate. It is intended that this repeal be made effective at the same time, or shortly after, UDAF adopts a rule within Title R67 that contains provisions previously within this rule. It is anticipated that the UDAF rules pertaining to the medical cannabis program will go into effect in early 2027.
C. Summary of the new rule or change:
This rule is repealed in its entirety. (EDITOR'S NOTE: The proposed new rules for Title R67 (Department of Agriculture and Food, Specialized Product Authority Licensing Board) are R67-1, ID 58477; R67-2, ID 58478; R67-3, ID 58479; R67-4, ID 58480; R67-5, ID 58481; R67-6, ID 58482; R67-7, ID 58483; and R67-8, ID 58484; in this issue, November 15, 2026, of the Bulletin.)

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 389 (2026 General Session)

5. Fiscal Information

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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026). Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.
B. Local governments:
There is no anticipated fiscal impact to local governments from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67. Provisions in this rule applicable to local governments are anticipated to remain the same under the UDAF rule.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal impact to small businesses from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67. Provisions in this rule applicable to small businesses are anticipated to remain the same under the UDAF rule.
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 from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67. Provisions in this rule applicable to non-small businesses are anticipated to remain the same under the UDAF 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 is no anticipated fiscal impact to other persons, including medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67, and responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026). Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons, including DHHS, UDAF, local governments, small and non-small businesses, and medical cannabis patients, from the repeal of this rule because the provisions that previously existed under this rule will still exist under Title R67. Responsibilities for the regulation of the medical cannabis program previously fulfilled by DHHS will be fulfilled by UDAF, in accordance with statutory updates made through HB 389 (2026). Fiscal impacts associated with HB 389 (2026) are captured in that bill's fiscal note, which can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0389S04.fn.pdf.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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)		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	09/19/2026

R383. Health and Human Services, Center for Medical Cannabis.

[~~R383-15. Compassionate Use Board Administrative Hearing Procedure.~~

~~R383-15-1. Authority and Purpose.~~

~~(1) Subsection 26B-1-202(2)(a) authorizes this rule.~~

~~(2) This rule governs administrative appeals from decisions made by the Compassionate Use Board (board).~~

~~R383-15-2. Form of Proceeding.~~

~~Adjudicative proceedings brought against the board shall be informal adjudicative proceedings.~~

~~R383-15-3. Availability of Hearing.~~

~~(1) When the board recommends denial of a petition pursuant to Subsection 26B-1-421(5), the petitioner may request a hearing within 15 calendar days of receipt of the notice of agency action.~~

~~(2) A party who fails to request a hearing within 15 calendar days of receipt of the notice of agency action shall have no right to an administrative hearing or judicial review of the agency action, unless the party can demonstrate, by a preponderance of the evidence, that it was virtually impossible or unreasonably burdensome to file the request within 15 calendar days.~~

~~R383-15-4. Qualifications for Presiding Officer.~~

~~The presiding officer for administrative hearings involving a decision of the board shall be a physician under Title 58, Chapter 67, Utah Medical Practice Act, designated by the Department of Health of Human Services executive director.~~

~~R383-15-5. Settlement Agreements.~~

~~Before issuing a final decision and order, the parties may enter into a settlement agreement resolving the entirety, or any part, of the adjudicative proceeding.~~

~~KEY: medical cannabis, compassionate use board, medical marijuana~~

~~Date of Last Change: November 9, 2025~~

~~Authorizing, and Implemented or Interpreted Law: 26B-1-202(2)(a); 26B-4-221(3)~~]

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58394**
Rule or section number:	**R392-111**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT

Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

Name:	Phone:	Email:
Sarah Cheshire	801-538-6191	scheshire@utah.gov
Chris Nelson	801-538-6191	chrisnelson@utah.gov

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

3. General Information

A. Rule or section catchline:

R392-111. Child Care Food Preparation Kitchen Exemptions and Requirements

B. Purpose of the new rule or reason for the change:

HB 379 passed in the 2026 General Session enacted Section 26B-7-417, which requires the Department of Health and Human Services (department) to make a rule in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, in collaboration with representatives of each child care provider association in the state, to establish exemptions for child care food preparation kitchens and establish food sanitation and safety requirements for exempt child care food preparation kitchens.

C. Summary of the new rule or change:

This rule establishes minimum food safety and sanitation requirements and exemptions, as described in Section 26B-7-417, necessary to protect public health in child care food preparation kitchens using risk-based operational controls consistent with the FDA Food Code, prevent imminent health hazards, and control disease outbreaks.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 379 (2026 General Session)

5. Fiscal Information

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 a result of this new rule.

The department is not anticipated to incur any additional inspection, enforcement, staffing, training, or administrative responsibilities as a result of this new rule.

The department anticipates existing staff and administrative resources within the Environmental Health program will manage administrative oversight and coordination with local health departments to meet these requirements.

Implementation of this rule does not create new state revenue, nor does it require additional state expenditure or staffing.

The fiscal note for HB 379 (2026) captures anticipated expenditures as a result of the bill and can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0379S02.fn.pdf.

B. Local governments:

There is no anticipated fiscal impact on local governments as a result of this new rule.

Local health departments currently conduct food safety inspections and verify facility compliance under Section 26B-7-402 and Rule R392-100.

While local health departments are expected to review operational procedures to verify exempt or partially exempt kitchen status described in Section R392-111-8 of this new rule, these reviews will be integrated into existing routine inspections and permitting processes.

Any non-fiscal minor administrative workload changes are expected to be offset by clear operational exemptions that streamline the physical infrastructure inspection requirements.

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

There are approximately 450 licensed center-based child care facilities in Utah, nearly all of which qualify as small businesses.

Under previous standards, child care kitchens providing full meal service were required to install commercial grade equipment, including commercial dishwashers, ranges, ovens, and refrigeration.

This rule exempts qualifying child care kitchens that meet the specific criteria from these commercial equipment requirements.

The cost to purchase and install a full suite of commercial kitchen equipment and undertake the necessary plumbing and electrical facility retrofits typically ranges from $10,000 to $15,000 per facility.

By eliminating requirements for commercial equipment, there is substantial cost savings. Spread across approximately 450 facilities, the total savings are estimated between $4,500,000 and $6,750,000 in upfront and replacement equipment expenditures.

Operation and compliance costs under this rule remain at $0 for savings in ongoing maintenance.

In the Regulatory Impact Summary Table, the $5,625,000 fiscal benefit in FY 2027 represents the midpoint estimate of upfront avoided capital expenditures across Utah's approximately 450 licensed child care centers, which is an average savings of $12,500 per facility.

This is anticipated to be a one-time benefit as these facilities get their initial permit to operate, so there is no anticipated fiscal benefit reflected in the years after FY 2027.

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 new rule.

Child care providers in Utah operating with 50 or more employees represent a very small piece of these businesses.

Furthermore, larger facilities or those serving over 200 meals per meal period are subject to full commercial equipment standards under Rule R392-100 and do not qualify for exemptions found in this new rule, resulting in no direct 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***)**:**

There is no anticipated cost to other persons, identified as parents and guardians using child care services, as a result of this new rule, and the fiscal benefit for other persons is inestimable.

While an affected child care facility may experience savings on equipment costs, there is no way to know how much of these savings may be passed on to enrolled families indirectly through child care facility actions, such as a reduction in child care fees.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, identified as the department, small businesses, and parents and guardians using child care services.

Adhering to this rule requires no additional fees or equipment purchases.

Child care providers only need to submit basic operational information and food preparation procedures to their local health department during standard licensing processes to confirm their exemption status under Section R392-111-8.

Food handler training and basic sanitation requirements are already standard compliance practices under Rule R392-100 and Title 26B, Utah Health and Human Services Code, and there will be no additional cost for affected persons working in a child care facility.

The fiscal note for HB 379 (2026) captures anticipated expenditures as a result of the bill and can be viewed at: https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0379S02.fn.pdf.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$0	$0	$0	$0	$0
Local Governments	$0	$0	$0	$0	$0
Small Businesses	$5,625,000	$0	$0	$0	$0
Non-Small Businesses	$0	$0	$0	$0	$0
Other Persons	inestimable	$0	$0	$0	$0
Total Fiscal Benefits	**inestimable**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**inestimable**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-1-202	Section 26B-7-202	Section 26B-7-402
Section 26B-7-417		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/25/2026

R392. Health and Human Services, Population Health, Environmental Health.
R392-111. Child Care Food Preparation Kitchen Exemptions and Requirements.
R392-111-1. Authority and Purpose.
(1) Sections 26B-1-202, 26B-7-202, 26B-7-402, and 26B-7-417 authorize this rule.
(2) This rule establishes minimum food safety and sanitation requirements and exemptions, as described in Section 26B-7-417, necessary to:
(a) protect public health in child care food preparation kitchens using risk-based operational controls consistent with the FDA Food Code;
(b) prevent imminent health hazards; and
(c) control disease outbreaks.

R392-111-2. Definitions.
(1) "Approved source" means a food source that complies with Rule R392-100.
(2) "Child care food preparation kitchen" means the same as defined in Subsection 26B-7-417(1)(b).
(3)(a) "Cooking" means heating a raw TCS food to a minimum safe internal temperature for a specified time to destroy harmful microorganisms.
(b) Cooking does not include reheating commercially processed pre-cooked foods.
(4) "Department" means the Utah Department of Health and Human Services.
(5) "Exempt kitchen" means a child care food preparation kitchen that meets the exemption criteria described in Subsection R392-111-4(1).
(6) "FDA Food Code" means the version of the FDA Food Code incorporated by reference in Rule R392-100.
(7) "Imminent health hazard" means a significant threat or danger to health that exists when evidence shows that a product, practice, circumstance, or event creates a situation requiring immediate correction or cessation of operation to prevent injury or illness.
(8)(a) "Meal" means the portion of food served to an individual child during a designated eating period, limited to:
(i) breakfast;
(ii) lunch; or
(iii) dinner.
(b) A meal does not include a snack served between the designated eating period.
(9) "Partially exempt kitchen" means a child care food preparation kitchen that meets the exemption criteria described in Subsection R392-111-4(2).
(10) "Person in charge" means an individual designated by the provider to oversee food safety.
(11) "Provider" means a:
(a) person or entity that owns or operates a center-based child care facility licensed under Section 26B-2-403; or
(b) legally responsible individual providing services at a center-based child care facility licensed under Section 26B-2-403.
(12) "Satellite kitchen" means a child care food preparation kitchen that:
(a) receives food prepared by a food establishment permitted by the local health department; and
(b) limits food activities to receiving, holding, portioning, and serving the food.
(13) "Time and temperature controlled food" or "TCS food" means the same as defined in Section 26B-7-401.

R392-111-3. Applicability.
(1) This rule applies to a child care food preparation kitchen that meets exemption requirements in this rule.
(2) Except as otherwise provided in this rule, a child care food preparation kitchen shall meet the requirements of Rule R392-100.
(3) A child care food preparation kitchen that qualifies as an exempt kitchen or partially exempt kitchen, as described in Section R392-111-4, is eligible only for the exemptions provided in this rule.

R392-111-4. Exemption Criteria for Child Care Food Preparation Kitchens.
(1) A child care food preparation kitchen qualifies as an exempt kitchen if the provider:
(a) meets the food preparation process criteria for an exempt kitchen described in Table 1;
(b) prepares 100 or fewer total meals per designated eating period;
(c) prepares non-TCS food or commercially prepackaged TCS food obtained from an approved source;
(d) limits preparation activities to reheating commercially prepared food, assembling ready-to-eat food, washing produce, or cutting fruit or vegetables;
(e) conducts limited hot or cold holding;
(f) does not prepare or store raw fish, raw meat, or raw poultry; and
(g) does not cool TCS food for later service, reheat previously cooked TCS food, or conduct a cook-cool-reheat or other multi-day preparation process.
(2) A child care food preparation kitchen qualifies as a partially exempt kitchen if the provider:
(a) meets the food preparation process criteria for a partially exempt kitchen described in Table 1;

(b) prepares no more than 200 total meals per designated eating period;
(c) cooks raw fish, raw meat, or raw poultry for same-day service;
(d) conducts cooking and hot or cold holding for same-day service; and
(e) does not conduct cooling of TCS food for later service, reheating of previously cooked TCS food, or multi-day preparation.
(3) A partially exempt kitchen may assemble food in advance for cooking on a subsequent day if:
(a) the preparation does not include cooking followed by cooling of TCS food; and
(b) the partially exempt kitchen does not cool cooked TCS food for later service, reheat TCS food previously cooked in the child care food preparation kitchen, or conduct a cook-cool-reheat or other multi-day preparation process.
(4)(a) A child care food preparation kitchen that does not meet the exempt criteria described in Subsection (1) or partially exempt criteria described in Subsection (2) shall comply with the equipment and infrastructure standards described in Rule R392-100, including a:
(i) commercial grade dishwasher;
(ii) commercial grade oven or range;
(iii) commercial grade refrigeration unit or freezer;
(iv) floor sink; and
(v) three-compartment sink.
(b) In accordance with Subsection 26B-7-417(3)(d), a local health officer may not require a separate handwashing sink in a child care food preparation kitchen.
(5) A satellite kitchen may qualify as an exempt kitchen or partially exempt kitchen based on the food preparation and storage activities conducted at the satellite kitchen if:
(a) food is prepared by a food establishment permitted by the local health department;
(b) required temperatures are maintained during transportation, receipt, holding, and service; and
(c) the provider verifies upon receipt that TCS food complies with temperature requirements in Rule R392-100.

TABLE 1
Food Preparation Processes Criteria to Determine Kitchen Exemptions

Food Preparation Process	Exempt Kitchen	Partially Exempt Kitchen
Raw fish, raw meat, or raw poultry	No	Yes, same day service
Cooking	No	Yes, same day service
Cooling of cooked TCS food for later service	No	No
Hot and cold holding	Limited	Yes
Reheating previously cooked TCS food	No	No

R392-111-5. Equipment Exemptions and Requirements
(1) The provider of an exempt kitchen is exempt from the requirements for a:
(a) commercial grade dishwasher;
(b) commercial grade oven or range;
(c) commercial grade refrigeration unit or freezer;
(d) floor sink if dishes are not stored in another sink in the exempt kitchen; or
(e) separate handwashing sink.
(2) An exempt kitchen may use a two-compartment sink if criteria described in Subsection 26B-7-417(3)(c) is met.
(3) The provider of a partially exempt kitchen is exempt from the requirements for a:
(a) commercial grade dishwasher;
(b) commercial grade oven or range;
(c) commercial grade refrigeration unit or freezer; and
(d) floor sink if dishes are not stored in another sink in the partially exempt kitchen.
(4) The provider of a partially exempt kitchen shall provide and maintain a three-compartment sink that meets the applicable warewashing requirements of Rule R392-100.
(5) Except for exemptions in Table 2, the provider shall ensure that any equipment and each facility complies with Rule R392-100.

TABLE 2
Exemption Criteria for Equipment

Required Equipment	Exempt Kitchen	Partially Exempt Kitchen
Commercial grade dishwasher	Exempt	Exempt
Commercial grade oven or range	Exempt	Exempt
Commercial grade freezer	Exempt	Exempt
Commercial grade refrigeration unit	Exempt	Exempt
Floor sink	Exempt -- see note 1	Exempt -- see note 1
Three-compartment sink	May be exempt if statutory criteria is met - see note 2	Required
Separate handwashing sink	Exempt	Exempt
Note 1 -- exempt if dishes or utensils are not stored in another sink		

Note 2 -- may be exempt if the child care food preparation kitchen does not prepare raw fish, raw meat, or raw poultry and has a two-compartment sink that is sanitized regularly

R392-111-6. Core Food Safety and Sanitation Requirements.

(1) In addition to the requirements specified in Rule R392-100, the provider of a child care food preparation kitchen shall:

(a) obtain food from an approved source and use potable water from an approved system;

(b) protect food from contamination and separate raw animal food from ready-to-eat food;

(c) implement time or temperature controls for TCS food consistent with applicable provisions of the FDA Food Code;

(d) recognize children in care as a highly susceptible population and prohibit the service of raw or undercooked animal food;

(e) store chemicals away from food and food-contact surfaces and use approved sanitizers; and

(f) ensure each employee practices proper hygiene and is excluded when ill.

(2) The provider of a satellite kitchen shall:

(a) verify and document that TCS food received from a food establishment permitted by the local health department complies with temperature requirements in Rule R392-100; and

(b) immediately place TCS food into cold holding or hot holding equipment to maintain the temperature required by Rule R392-100.

R392-111-7. Person in Charge and Food Handler Requirements.

(1) The provider shall designate a person in charge during each food preparation activity.

(2) The person in charge shall meet applicable requirements under Rule R392-100 but be exempt from certified food safety manager requirements, as described in Subsection 26B-7-411(1)(h) and Rule R392-101.

(3) Each individual preparing or handling food shall:

(a) obtain food handler training in accordance with Rule R392-103; and

(b) receive documented site-specific training in:

(i) hygienic practices;

(ii) cross-contamination prevention;

(iii) time and temperature control of TCS food;

(iv) cleaning and sanitizing procedures;

(v) response procedures for vomiting and diarrheal events; and

(vi) illness exclusion of sick food workers.

R392-111-8. Verification of Operational Procedures.

(1) A provider shall submit operational information and food preparation procedures to the local health officer before operating a child care food preparation kitchen to verify qualification for an exempt kitchen or partially exempt kitchen status.

(2) The provider shall notify the local health department before making any change to food preparation procedures, menu items, or operational processes that may affect the kitchen's exempt status, as described in Section R392-111-4.

(3) Upon receiving notification of an operational change or during a routine inspection or reassessment, if the local health officer determines that the child care food preparation kitchen no longer meets the exemption criteria described in Section R392-111-4, the provider shall comply with the applicable equipment, facility, and operational requirements in Rule R392-100 and Section R392-111-5.

(4) If the local health officer determines that an imminent health hazard exists within a child care food preparation kitchen, or any portion thereof, the local health officer may restrict or prohibit food service operations.

(5) Regardless of the exemptions provided in this rule, any child care center licensed by the Office of Licensing and Background Checks shall maintain a permit to provide food service if required by the local health department.

(6) A local health representative holding a license under Section 58-20b-301 shall perform each inspection of food service in a child care center.

KEY: food preparation, child care, exempt kitchen
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 26A-1-114; 26B-1-202; 26B-7-202; 26B-7-402; 26B-7-417

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58425**
Rule or section number:	**R414-1-22**

1. Agency Information

Title catchline:	Health and Human Services, Integrated Healthcare
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT

Mailing address:	288 N 1460 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Lane London	801-538-6515	llondon@utah.gov

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

3. General Information

A. Rule or section catchline:

R414-1-22. Retroactive Coverage

B. Purpose of the new rule or reason for the change:

Public Law No. 119-21 was enacted through H.R. 1 in July of 2025 and makes changes to the Medicaid retroactive coverage period.

To comply with this federal statute, it is necessary for the Division of Integrated Healthcare to amend this rule.

C. Summary of the new rule or change:

Pursuant to H.R. 1, this amendment adjusts the Medicaid retroactive coverage period before the application month, shortening it to one month for Medicaid members who are part of the Adult Expansion group and two months for all other eligible groups.

5. Fiscal Information

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

A. State budget:

There is no anticipated fiscal impact as a result of this filing because updates to this rule implement compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

B. Local governments:

There is no anticipated fiscal impact on local governments, as local governments do not make eligibility determinations for Medicaid.

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

There is no anticipated fiscal impact on small businesses because small businesses do not make eligibility determinations for the Medicaid program.

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 because this filing does not affect Medicaid services provided by non-small businesses. This filing does not add to, modify, or remove existing requirements 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***)**:**

There is no anticipated fiscal impact on other persons identified as Medicaid providers because this filing does not affect which Medicaid services are available.

However, other persons identified as Medicaid recipients may see an inestimable cost or savings, depending on the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how shortening the retroactive coverage period will affect Medicaid recipients.

This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons identified as the state budget, non-small businesses, or Medicaid providers who are other persons. This filing implements compliance with H.R. 1 and does not add to, modify, or remove existing requirements for non-small businesses or which Medicaid services are available.

However, affected persons identified as other persons who are Medicaid recipients may see an inestimable compliance cost, depending upon the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how shortening the retroactive coverage period will affect Medicaid recipients.

This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-3-102	Section 26B-3-104
Public Law No. 119-21	42 U.S.C. 1396 through 1396w-5	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	11/01/2026

R414. Health and Human Services, Integrated Healthcare.
R414-1. Utah Medicaid Program.
R414-1-22. Retroactive Coverage.

[~~I~~]An individual is [~~are~~]entitled to Medicaid services under:

(1) the Adult Expansion Medicaid coverage group[~~the plan during the 90 days preceding the month of application~~] during the single month immediately preceding the month of application, as described in Section R414-308-6, if the individual was, or would have been, eligible at that time; and

(2) a coverage group other than the Adult Expansion Medicaid coverage group during the two months immediately preceding the month of application, if the[~~y were~~] individual was, or would have been, eligible at that time.

KEY: Medicaid
Date of Last Change: [~~October 6, ~~]2026
Notice of Continuation: December 13, 2021
Authorizing, and Implemented or Interpreted Law: 26B-1-213; 26B-3-108; 26B-3-1004; 26B-8-132

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58373**
Rule or section number:	**R414-60B**

1. Agency Information

Title catchline:	Health and Human Services, Integrated Healthcare
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 143325
City, state and zip:	Salt Lake City, UT 84114-3325

2. Contact Persons

Name:	**Phone:**	**Email:**
Craig Devashrayee	801-915-4493	cdevashrayee@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:
R414-60B. Preferred Drug List
B. Purpose of the new rule or reason for the change:
Based on discussions within the Division of Integrated Healthcare, this amendment updates and clarifies by rule the current policy for the preferred drug list (PDL) and the organization and membership of the Pharmacy and Therapeutics Committee (committee).
C. Summary of the new rule or change:
This amendment updates and clarifies eligibility requirements for the PDL, service coverage for preferred and non-preferred drugs, prior authorization procedures, and criteria for the appointment and composition of committee members.

Additionally, this filing makes style and formatting changes to comply with the Rulewriting Manual for Utah and aligns with other rules in the Department of Health and Human Services (department).

5. Fiscal Information

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

A. State budget:

The department does not expect a fiscal impact on the state budget as this amendment only updates and clarifies existing PDL and Pharmacy and Therapeutics Committee (committee) practices and procedures.

B. Local governments:

The department does not expect a fiscal impact on local governments as they neither fund nor provide pharmacy services under the Medicaid program.

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

The department does not expect a fiscal impact on small businesses as this amendment only updates and clarifies existing PDL and committee practices and procedures.

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

The department does not expect a fiscal impact on non-small businesses as this amendment only updates existing PDL and committee practices and procedures.

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***)**:**

Medicaid members and entities outside of government or business are not expected to see a fiscal impact as this amendment only updates and clarifies existing PDL and committee practices and procedures.

F. Compliance costs for affected persons:

The department does not expect any compliance costs for affected persons, including the state, a small or non-small businesses, and a Medicaid member or single entity outside of government or business.

This amendment only updates existing PDL and committee practices and procedures.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-3-105

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/19/2026

R414. Health and Human Services, Integrated Healthcare.
R414-60B. Preferred Drug List.
R414-60B-1. [~~Introduction and~~]Authority and Purpose.

(1)(a) Sections 26B-1-213 and 26B-3-108 authorize this rule.

(b) Section 26B-3-105 authorizes the preferred drug list (PDL).

(2) Th[~~e Division of Integrated Healthcare (DIH) has~~]is rule establishes[~~d~~] [~~a~~]the [~~Preferred Drug List (~~]PDL[~~)~~] to operate within the pharmacy program and at the discretion of the Division of Integrated Healthcare (division)[~~'s discretion~~].

~~(2) The Preferred Drug List is authorized under Section 26B-3-105.~~]

R414-60B-2. [~~Client~~]Member Eligibility Requirements.

[~~A~~]The PDL is available to categorically and medically needy individuals.

R414-60B-3. Program Access Requirements.

[~~A~~]The PDL is established for certain therapeutic classes of drugs and is available through the point of sale system of any Medicaid provider. [~~At its discretion, DIH~~]The division establishes and implements the scope and therapeutic classes of drugs at the division's discretion.

R414-60B-4. Service Coverage.

(1) Upon the recommendation of the Pharmacy and Therapeutics [~~(P&T) ~~]Committee (committee), [~~DIH~~]division pharmacy staff select the therapeutic classes and [~~select ~~]the most clinically effective and cost-effective drug or drugs within each class.

(2)(a) To cover any drug requiring prior authorization, including a drug designated as non-preferred on the PDL, for a fee-for-service member or a carved out drug for an Accountable Care Organization (ACO) member, [~~T~~]the prescriber must obtain prior authorization [~~from~~]through the Department of Health and Human Services (department)[~~ to dispense drugs designated as "non-preferred" in each class, through the Department's current prior authorization system~~].

(b) Criteria for a [~~N~~]non-preferred [~~P~~]prior [~~A~~]authorization[~~ (NPA)~~] for a fee-for-service member is established by the [~~D~~]department in consultation with the [~~P&T C~~]committee.

(c) To cover any drug requiring prior authorization, including a non-preferred drug, for an ACO member, the prescriber must obtain prior authorization in accordance with the ACO policy.

(3) [~~A~~]While a prior authorization requirement is not placed on any preferred drug[~~s~~] under this [~~S~~]section[~~ R414-60B-4. Nevertheless~~], a prior authorization may apply if set by the Drug Utilization Review Board[~~ (DURB)~~].

(4) The department shall complete each prior authorization determination within 24 hours of receipt, based on normal business days and operation hours that run Monday through Friday, from 8 a.m. to 5 p.m., excluding weekends and holidays.[

~~(4) For NPA requests submitted during normal business hours, Monday through Friday, 8 a.m. to 5 p.m., the prior authorization system shall provide either telephone or fax approval or denial within 24 hours of the receipt of the request.~~

~~(5) In an emergency situation for a prior authorization needed outside of normal business hours, a 72-hour supply of a non-preferred drug may be dispensed and the Department shall issue an NPA for the 72-hour supply on the next business day. Further quantity requests shall be subject to all NPA requirements.~~]

R414-60B-5. [~~P&T~~]Pharmacy and Therapeutics Committee Composition and Membership Requirements.

(1)(a) [~~There is created a P&T Committee within DIH.~~]The committee shall consist of:

(i) one physician from each of the following specialty areas:

(A) internal medicine;

(B) family practice medicine;

(C) psychiatry; and

(D) pediatrics;

(ii) one pharmacist from each of the following areas:

(A) academia;

(B) chain pharmacy;

(C) hospital pharmacy; and

(D) independent pharmacy; and

(iii) one voting committee manager who is appointed and employed by the division.

(b) The committee may invite up to two non-voting ad hoc specialists to participate on the committee.

(2)(a) To begin the process for committee appointment, division staff shall:

(i) request nominations for committee appointees from professional organizations within the state; and

(ii) compile a list of nominations received from professional organizations for the division director to consider for selection and appointment to the committee.

(b) If there are no recommendations within 30 days of the request, the division may submit a list of potential candidates to professional organizations for consideration.

(c) If there are no nominees from professional organizations willing to serve on the committee, the division director may seek recommendations from division staff.

(3) Any individual considered for nomination must be independent of the pharmaceutical manufacturing industry and demonstrate that the individual has no direct connection to that industry.

(4)(a) The [~~DIH~~]division [~~D~~]director shall appoint [~~the~~]each member[~~s~~] of the [~~P&T C~~]committee for a two-year term.

(b) [~~DIH~~]The division [~~has the option of making~~]may make [~~the~~]an appointment[~~s~~] renewable.[

~~(2) DIH staff request nominations for appointees from professional organizations within the state. These nominations are then given to the Director for selection and appointment.~~

~~(a) If there are no recommendations within 30 days of a request, DIH may submit a list of potential candidates to professional organizations for consideration.~~

~~(b) If there are no willing nominees for appointment from professional organizations, the Director may seek recommendations from DIH staff.~~

~~(3) The P&T Committee consists of one physician from each of the following specialty areas:~~

~~(a) Internal Medicine;~~

~~(b) Family Practice Medicine;~~

~~(c) Psychiatry; and~~

~~(d) Pediatrics.~~

~~(4) The P&T Committee consists of one pharmacist from each of the following areas:~~

~~(a) Pharmacist in Academia;~~

~~(b) Independent Pharmacy;~~

~~(c) Chain Pharmacy; and~~

~~(d) Hospital Pharmacy.~~

~~(5) DIH shall appoint one voting committee manager.~~

~~(6) Up to two non-voting ad hoc specialists participate on the committee at the committee's invitation.~~

~~(7) An individual considered for nomination must demonstrate no direct connection to and must be independent of the pharmaceutical manufacturing industry.~~]

([~~8~~]5)(a) The [~~P&T C~~]committee shall elect a chairperson to a one-year term from among [~~its~~]the members described in Subsection (1)(a).

(b) The chairperson may serve consecutive terms if reelected by the committee.

([~~9~~]6) When a vacancy occurs on the committee, the [~~D~~]division director shall appoint a replacement for the [~~unexpired term~~]rest of the vacating member's term.

([~~10~~]7) Each [~~P&T C~~]committee member[~~s~~] serves at the division director's discretion[~~ of the DIH Director~~].

R414-60B-6. [~~P&T~~]Pharmacy and Therapeutics Committee Responsibilities and Functions.

(1) The [~~P&T C~~]committee functions as a professional and technical advisory board to [~~DIH~~]the division in the formulation of [~~a~~]the PDL.

(2) Each [~~P&T C~~]committee recommendation[~~s must~~] shall:

(a) represent the majority vote at any meeting[~~s~~] in which a majority of voting members are present; and

(b) include votes by at least:

(i) one committee member from the group of physicians [~~identified~~]described in Subsection R414-60B-5([~~3~~]1)(a)(i); and

(ii) one committee member from the group of pharmacists [~~identified~~]described in Subsection R414-60B-5([~~4~~]1)(a)(ii)

(3) The [~~P&T C~~]committee manager described in Subsection R414-60B-5(1)(a)(iii) shall:

(a) schedule meetings[~~,~~];

(b) set agendas[~~,~~];

(c) provide meeting materials[~~,~~];

(d) keep minutes[~~,~~];

(e) record committee business[~~,~~];

(f) notify the [~~D~~]division director when any committee vacancy[~~ies~~] occurs[~~,~~];

(g) provide committee meeting notices in accordance with applicable law[~~,~~]; and

(h) coordinate functions between the committee and the division[~~DIH~~].[

~~(4) Notice for a P&T Committee meeting shall be given in accordance with applicable law.~~]

(5)(a) The [~~P&T C~~]committee chairperson shall conduct [~~all~~]each meeting[~~s~~].

(b) If the committee chairperson is not present, [~~T~~]the [~~P&T C~~]committee manager shall conduct the committee meeting[~~s if the chairperson is not present~~].

(6) The [~~P&T C~~]committee shall meet[~~ings shall occur~~] at least quarterly.

(7) Each [~~P&T C~~]committee meeting[~~s~~] shall be open to the public, except when the committee is meeting in executive session.

(8) The committee shall:

(a) review each drug class[~~es~~] and make recommendations to [~~DIH~~]the division for PDL implementation;

(b) review any new drug[~~s,~~] or new drug class[~~es or both,~~] to make recommendations to [~~DIH~~]the division for PDL implementation;

(c) review any drug[~~s~~] or drug class[~~es~~] as assigned or requested by the division[~~DIH assigns or requests~~];

(d) review each drug[~~s~~] within a therapeutic class and make a recommendation to [~~DIH~~]the division for the preferred drug or drugs within the therapeutic class; and

(e) review evidence[~~-~~]-based criteria and drug information.

R414-60B-7. Clinical and Cost-Related Factors.

The [~~P&T C~~]committee shall base [~~its~~]each determination[~~s~~] on [~~the following~~]factors [~~as~~]established by the Drug Utilization Review Board.[~~DURB.~~]

(1) If clinical and therapeutic considerations are substantially equal, [~~then~~]the [~~P&T C~~]committee shall recommend [~~to DIH~~]that [~~it~~]the division consider only cost.

(2) In making [~~its~~]recommendations to the division[~~DIH~~], the [~~P&T C~~]committee may also consider whether the clinical, therapeutic effects, and medical necessity requirements justify the cost differential between drugs within a therapeutic class.

KEY: Medicaid, P&T Committee, P and T Committee
Date of Last Change: [~~June 19, 2025~~]2026
Notice of Continuation: May 31, 2022
Authorizing, and Implemented or Interpreted Law: 26B-1-213; 26B-3-105; 26B-3-108

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58426**
Rule or section number:	**R414-301-7**

1. Agency Information

Title catchline:	Health and Human Services, Integrated Healthcare
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	288 N 1460 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Lane London	801-538-6515	llondon@utah.gov

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

3. General Information

A. Rule or section catchline:

R414-301-7. Hearings

B. Purpose of the new rule or reason for the change:

Public Law No. 119-21 was enacted through H.R. 1 in July of 2025 and requires medically frail fair hearings be conducted by the Department of Health and Human Services (department).

To comply with this federal statute, it is necessary for the Division of Integrated Healthcare to amend this rule.

C. Summary of the new rule or change:

Pursuant to H.R. 1, this amendment clarifies that medically frail fair hearings will be conducted by the department.

5. Fiscal Information

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

A. State budget:

There is no anticipated fiscal impact as a result of this filing because updates to this rule implement compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

B. Local governments:

There is no anticipated fiscal impact on local governments, as local governments do not make eligibility determinations for Medicaid.

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

There is no anticipated fiscal impact on small businesses because small businesses do not make eligibility determinations for the Medicaid program.

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 because this filing does not affect Medicaid services provided by non-small businesses.

This filing does not add to, modify, or remove existing requirements or processes 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***)**:**

There is no anticipated fiscal impact on other persons identified as Medicaid providers because this filing does not affect which Medicaid services are available.

However, other persons identified as Medicaid recipients may see an inestimable cost or savings, depending on the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how having the department conduct hearings for medically frail fair hearing requests will affect Medicaid recipients.

This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons identified as the state budget, non-small businesses, or Medicaid providers who are other persons. This filing implements compliance with H.R. 1 and does not add to, modify, or remove existing requirements for non-small businesses or which Medicaid services are available. However, affected persons identified as other persons who are Medicaid recipients may see an inestimable compliance cost, depending upon the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how having the department conduct hearings for medically frail fair hearing requests will affect Medicaid recipients. This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-3-108		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	11/02/2026

R414. Health and Human Services, Integrated Healthcare.
R414-301. Medicaid General Provisions.
R414-301-7. Hearings.

(1) The eligibility agency shall provide a fair hearing process for applicants and members in accordance with the requirements of 42 CFR 431.220 through 42 CFR 431.246. The eligibility agency shall comply with Title 63G, Chapter 4, Administrative Procedures Act.

(2) An applicant or member must request a hearing in writing or orally at the agency that made the final eligibility decision. A request for a hearing must be made within 90 calendar days of the date of notice of agency action concerning the Medicaid eligibility decision. The request need only include a statement that the applicant or member wants to present their case.

(3) Hearings are conducted only at the request of a member or spouse, a minor member's parent, or a guardian or representative of the member.

(4) A member who requests a fair hearing concerning a decision about Medicaid eligibility shall receive continued medical assistance benefits pending a hearing decision if the member requests a hearing before the effective date of the action or within 15 calendar days of the date on the notice of agency action.

(5) The member must repay the continued benefits that the member receives pending the hearing decision if the hearing decision upholds the agency action.

(a) A member may decline the continued benefits that the Department offers pending a hearing decision by notifying the eligibility agency.

(b) Benefits that the member must repay include premiums for Medicare or other health insurance, premiums, and fees to managed care and contracted mental health services entities, fee-for-service benefits on behalf of the individual, and medical travel fees or reimbursement to or on behalf of the individual.

(6) The eligibility agency must receive a request for a hearing by the close of business on a business day that is before or on the due date. If the due date is a non-business day, the eligibility agency must receive the request by the close of business on the next business day.

(7) DWS conducts fair hearings for medical assistance cases except those concerning eligibility for Advanced Premium Tax Credits made by the FFM, foster care, or subsidized adoption Medicaid. The Department conducts hearings for foster care or subsidized adoption Medicaid cases. In addition, the Department conducts hearings concerning its disability determination decisions. The FFM conducts hearings concerning determinations for Advanced Premium Tax Credits.

(8) DWS conducts informal, evidentiary hearings in accordance with Sections R986-100-124 through R986-100-139, with the exceptions found in Subsection R986-100-128(17) and Subsection R986-100-134(5). Instead, Subsection (16) concerning the time frame to comply with the DWS decision, and Subsection (17)(c) concerning continued assistance during a superior agency review conducted by DWS, apply respectively.

(9) The Department conducts informal hearings concerning eligibility for foster care or subsidized adoption Medicaid in accordance with Rule R414-1. Pursuant to Section 63G-4-402, within 30 days of the date the Department issues the hearing decision, the applicant or member may file a petition for judicial review with the district court.

(10) The Department conducts informal hearings concerning medically frail decisions in accordance with Rule R414-1. Pursuant to Section 63G-4-402, within 30 days of the date the Department issues the hearing decision, the applicant or recipient may file a petition for judicial review with the district court.

(1[~~0~~]1) DWS may not conduct a hearing contesting resource assessment until an institutionalized individual has applied for Medicaid.

(1[~~1~~]2) An applicant or member may designate a person or professional organization to assist in the hearing or act as a representative. An applicant or member may have a friend or family member attend the hearing for assistance.

(1[~~2~~]3) The applicant, member, or representative may arrange to review case information before the scheduled hearing.

(1[~~3~~]4) At least one employee from the eligibility agency must attend the hearing. Other employees of the eligibility agency, other state agencies, and legal representatives for the eligibility agency may attend as needed.

(1[~~4~~]5) The DWS Division of Adjudication and Appeals shall mail a written hearing decision to the parties involved in the hearing. The decision shall include the decision, a summary of the facts, and the policies or regulations supporting the decision.

(a) The DWS decision shall include information about the right to request an agency review from DWS and how to make that request.

(b) The applicant or member may appeal the DWS decision to DWS pursuant to Section R410-14-16. The request for agency review must be made in writing and delivered to DWS within 30 days of the mailing date of the decision.

(1[~~5~~]6) The Department, as the single state Medicaid agency, is a party to fair hearings concerning eligibility for medical assistance programs. The Department has the right to request an agency review of medical assistance hearing decisions given by DWS.

(1[~~6~~]7) The DWS hearing decision becomes final 30 days after the decision is sent unless DWS conducts an agency review. The DWS hearing decision may be made final in less than 30 days upon agreement of the parties.

(1[~~7~~]8) DWS conducts an agency review when the applicant or member appeals the DWS decision or if the Department appeals because it disagrees with the DWS decision.

(a) DWS notifies the Department when it conducts an agency review.

(b) The DWS hearing decision is suspended until DWS issues a final decision and order on agency review.

(c) A member who receives continued benefits continues to be eligible for continued benefits pending the agency review decision.

(1[~~8~~]9) The agency review is an informal proceeding and is conducted in accordance with Section 63G-4-301.

([~~19~~]20) A DWS decision and order on agency review becomes final upon issuance.

(2[~~0~~]1) The eligibility agency takes case action within ten calendar days of the date the decision becomes final.

(2[~~1~~]2) Pursuant to Section 63G-4-402, within 30 days of the date the decision and order on agency review is issued, the applicant or member may file a petition for judicial review with the district court. Failure to request an agency review negates this right to a judicial appeal.

(2[~~2~~]3) Members are not entitled to continued benefits pending judicial review by the district court.

KEY: member rights, hearings, Medicaid
Date of Last Change: [~~June 19, 2025~~]2026
Notice of Continuation: January 6, 2023
Authorizing, and Implemented or Interpreted Law: 26B-3

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58427**
Rule or section number:	**R414-302-12**

1. Agency Information

Title catchline:	Health and Human Services, Integrated Healthcare
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	288 N 1460 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	**Phone:**	**Email:**
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Lane London	801-538-6515	llondon@utah.gov

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

3. General Information

A. Rule or section catchline:

R414-302-12. Community Engagement

B. Purpose of the new rule or reason for the change:

Public Law No. 119-21 was enacted through H.R. 1 in July of 2025 and makes changes to the community engagement requirements.

To comply with this federal statute, it is necessary for the Division of Integrated Healthcare to amend this rule.

C. Summary of the new rule or change:

Pursuant to H.R. 1, this amendment implements community engagement requirements.

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
There is no anticipated fiscal impact as a result of this filing because updates to this rule implement compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.
B. Local governments:
There is no anticipated fiscal impact on local governments, as local governments do not make eligibility determinations for Medicaid.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal impact on small businesses because small businesses do not make eligibility determinations for the Medicaid program.
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 because this filing does not affect Medicaid services provided by non-small businesses. This filing does not add to, modify, or remove existing requirements 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***)**:**
There is no anticipated fiscal impact on other persons identified as Medicaid providers because this filing does not affect which Medicaid services are available. However, other persons identified as Medicaid recipients may see an inestimable cost or savings, depending on the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how community engagement requirements will affect Medicaid recipients. This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons identified as the state budget, non-small businesses, or Medicaid providers who are other persons. This filing implements compliance with H.R. 1 and does not add to, modify, or remove existing requirements for non-small businesses or which Medicaid services are available. However, affected persons identified as other persons who are Medicaid recipients may see an inestimable compliance cost, depending upon the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how community engagement requirements will affect Medicaid recipients. This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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	Public Law No. 119-21

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	11/01/2026

R414. Health and Human Services, Integrated Healthcare.
R414-302. Eligibility Requirements.
R414-302-12. Community Engagement.

(1) The Department adopts 42 U.S.C. 1396a(xx), on the community engagement requirement for applicable individuals.

(2) The Department adopts the optional exception for short-term hardship events, as described in 42 U.S.C. 1396a(xx)(3)(B).

(3)(a) Before eligibility can be determined, an individual must:

(i) meet the community engagement requirement for a month in the lookback period;

(ii) be excepted from the community engagement requirement for a month in the lookback period; or

(iii) meet a hardship for a month in the lookback period.

(b) The lookback period for an application is the month immediately preceding the month of eligibility.

(c) The lookback period for a renewal of eligibility is the period between an individual's most recent determination, or redetermination, of eligibility and the next regularly scheduled redetermination of eligibility.

KEY: state residency, citizenship, third-party liability, Medicaid
Date of Last Change: [~~January 22, 2024~~]2026
Notice of Continuation: January 6, 2023
Authorizing, and Implemented or Interpreted Law: 26B-3-108; 26B-1-213

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58428**
Rule or section number:	**R414-306-4**

1. Agency Information

Title catchline:	Health and Human Services, Integrated Healthcare
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	288 N 1460 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Lane London	801-538-6515	llondon@utah.gov

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

3. General Information

A. Rule or section catchline:

R414-306-4. Effective Date of Eligibility

B. Purpose of the new rule or reason for the change:

Public Law No. 119-21 was enacted through H.R. 1 in July of 2025 and makes changes to the Medicaid retroactive coverage period.

To comply with this federal statute, it is necessary for the Division of Integrated Healthcare to amend this rule.

C. Summary of the new rule or change:

Pursuant to H.R. 1, this amendment adjusts the Medicaid retroactive coverage period prior to the application month, shortening it to one month for the Adult Expansion group and two months for all other eligible groups.

5. Fiscal Information

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

A. State budget:

There is no anticipated fiscal impact as a result of this filing because updates to this rule implement compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

B. Local governments:

There is no anticipated fiscal impact on local governments, as local governments do not make eligibility determinations for Medicaid.

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

There is no anticipated fiscal impact on small businesses because small businesses do not make eligibility determinations for the Medicaid program.

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 because this filing does not affect Medicaid services provided by non-small businesses.

This filing does not add to, modify, or remove existing requirements 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***)**:**

There is no anticipated fiscal impact on other persons identified as Medicaid providers because this filing does not affect which Medicaid services are available.

However, other persons identified as Medicaid recipients may see an inestimable cost or savings, depending on the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how shortening the retroactive coverage period will affect Medicaid recipients.

This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons identified as the state budget, non-small businesses, or Medicaid providers who are other persons. This filing implements compliance with H.R. 1 and does not add to, modify, or remove existing requirements for non-small businesses or which Medicaid services are available.

However, affected persons identified as other persons who are Medicaid recipients may see an inestimable compliance cost, depending upon the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how shortening the retroactive coverage period will affect Medicaid recipients.

This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-3-108	Public Law No. 119-21	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	11/01/2026

R414. Health and Human Services, Integrated Healthcare.
R414-306. Program Benefits and Date of Eligibility.
R414-306-4. Effective Date of Eligibility.

(1) Subject to the exceptions in Subsection R414-306-4(3), eligibility for any Medicaid program, and for the Specified Low-income Medicare Beneficiary (SLMB), or Qualified Individual (QI) programs begins the first day of the application month if the individual is determined to meet the eligibility criteria for that month.

(2) An applicant for Medicaid, SLMB, or QI benefits may request medical coverage for the applicable retroactive period. The retroactive period is the [~~three months~~]time frame immediately preceding the month of application, as described in Section R414-308-6.

(a) An applicant may request coverage for one or more months of the retroactive period.

(b) Subject to the exceptions in Subsection R414-306-4(3), eligibility for retroactive medical coverage begins no earlier than the first day of the month that is three months before the application month.

(c) The applicant must receive medical services during the retroactive period and be determined eligible for the month he receives services.

(3) To determine the date eligibility for medical assistance may begin for any month, the following requirements apply:

(a) Eligibility of an individual cannot begin any earlier than the date the individual meets the state residency requirement defined in Section R414-302-4;

(b) Eligibility of a qualified alien subject to the five-year bar on receiving regular Medicaid services cannot begin earlier than the date that is five years after the date the person became a qualified alien, or the date the five-year bar ends due to other events defined in statute;

(c) Eligibility of a qualified alien not subject to the five-year bar on receiving regular Medicaid services can begin no earlier than the date the individual meets qualified alien status.

(d) An individual who is ineligible for Medicaid while residing in a public institution or an Institution for Mental Disease (IMD) may become eligible on the date the individual is no longer a resident of either one of these institutions. If an individual is under the age of 22 and is a resident of an IMD, the individual remains a resident of the IMD until he is unconditionally released.

(4) If an applicant is not eligible for the application month, but requests retroactive coverage, the agency will determine eligibility for the retroactive period based on the date of that application.

(5) The eligibility agency shall determine retroactive eligibility by using the eligibility criteria in effect during the retroactive month. Modified Adjusted Gross Income (MAGI) methodology is effective only on or after January 1, 2014, and the eligibility agency may not apply MAGI methodology before that date.

(6) The agency may use the same application to determine eligibility for the month following the month of application if the applicant is determined ineligible for both the retroactive period and the application month. In this case, the application date changes to the date eligibility begins. The retroactive period associated with the application changes to the three months preceding the new application date.

(7) The effective date of eligibility is January 1, 2014, for applicants who file for eligibility from October 1, 2013, through December 31, 2013, and are not found eligible using 2013 eligibility criteria, but are found eligible for a coverage group using MAGI methodology.

(8) Medicaid eligibility for certain services begins when the individual meets the following criteria:

(a) Eligibility for coverage of institutional services cannot begin before the date that the individual has been admitted to a medical institution and meets the level of care criteria for admission. The medical institution must provide the required admission verification to the Department within the time limits set by the Department in Rule R414-501. Medicaid eligibility for institutional services does not begin earlier than the first day of the month that is three months before the month of application for Medicaid coverage of institutional services.

(b) Eligibility for coverage of home and community-based services under a Medicaid waiver cannot begin before the first day of the month the client is determined by the case management agency to meet the level of care criteria and home and community-based services are scheduled to begin within the month. The case management agency must verify that the individual meets the level of care criteria for waiver services. Medicaid eligibility for waiver services does not begin earlier than the first day of the month that is three months before the month of application for Medicaid coverage of waiver services.

(9) An individual determined eligible for QI benefits in a calendar year is eligible to receive those benefits throughout the remainder of the calendar year, if the individual continues to meet the eligibility criteria and the program still exists. Receipt of QI benefits in one calendar year does not entitle the individual to QI benefits in any succeeding year.

(10) After being approved for Medicaid, a client may later request coverage for the retroactive period associated with the approved application if the following criteria are met:

(a) The client did not request retroactive coverage at the time of application; and

(b) The agency did not make a decision about eligibility for medical assistance for that retroactive period; and

(c) The client states that he received medical services and provides verification of his eligibility for the retroactive period.

(11) The Department may not provide retroactive coverage if a client requests coverage for the retroactive period associated with a denied application after the date of denial. The client, however, may reapply and the eligibility agency may consider a new retroactive coverage period based on the new application date.

KEY: effective date, program benefits, medical transportation
Date of Last Change: [~~June 19, 2025~~]2026
Notice of Continuation: January 6, 2023
Authorizing, and Implemented or Interpreted Law: 26B-3

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58429**
Rule or section number:	**R414-308-6**

1. Agency Information

Title catchline:	Health and Human Services, Integrated Healthcare
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	288 N 1460 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Lane London	801-538-6515	llondon@utah.gov

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

3. General Information

A. Rule or section catchline:

R414-308-6. Eligibility Period and Reviews

B. Purpose of the new rule or reason for the change:

Public Law No. 119-21 was enacted through H.R. 1 in July of 2025 and shortens the review interval for designated coverage groups.

To comply with this federal statute, it is necessary for the Division of Integrated Healthcare to amend this rule.

C. Summary of the new rule or change:

Pursuant to H.R. 1, this amendment shortens the review interval for designated coverage groups from every 12 months to every six months.

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
There is no anticipated fiscal impact as a result of this filing because updates to this rule implement compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.
B. Local governments:
There is no anticipated fiscal impact on local governments, as local governments do not make eligibility determinations for Medicaid.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal impact on small businesses because small businesses do not make eligibility determinations for the Medicaid program.
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 because this filing does not affect Medicaid services provided by non-small businesses. This filing does not add to, modify, or remove existing requirements 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***)**:**
There is no anticipated fiscal impact on other persons identified as Medicaid providers because this filing does not affect which Medicaid services are available. However, other persons identified as Medicaid recipients may see an inestimable cost or savings, depending on the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how shortening the review interval for designated coverage groups will affect Medicaid recipients. This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons identified as the state budget, non-small businesses, or Medicaid providers who are other persons. This filing implements compliance with H.R. 1 and does not add to, modify, or remove existing requirements for non-small businesses or which Medicaid services are available. However, affected persons identified as other persons who are Medicaid recipients may see an inestimable compliance cost, depending upon the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how shortening the review interval for designated coverage groups will affect Medicaid recipients. This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-3-108	Public Law No. 119-21	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	11/01/2026

R414. Health and Human Services, Integrated Healthcare.
R414-308. Application, Eligibility Determinations, Improper Medical Assistance, and Suspension of Benefits.
R414-308-6. Eligibility Period and Reviews.

(1)(a) The eligibility period begins on the effective date of eligibility as defined in Section R414-306-4, which may be after the first day of a month, subject to the following requirements.

(b) If a member must pay one of the following fees to receive Medicaid, the eligibility agency shall determine eligibility and notify the member of the amount owed for coverage. The eligibility agency shall grant eligibility if it receives the required payment, or in the case of a spenddown or cost-of-care contribution for waivers, if the member sends proof of incurred medical expenses equal to the payment. The fees a member may owe include:

(i) a spenddown of excess income for medically needy Medicaid coverage;

(ii) a Medicaid Work Incentive (MWI) premium; or

(iii) a cost-of-care contribution for home and community-based waiver services.

(2) A required spenddown, MWI premium, or cost-of-care contribution is due each month for a member to receive Medicaid coverage. A pregnant member or member in their postpartum period is only required to meet the spenddown once and remains eligible through the remainder of the postpartum period.

(3) The member must make the payment or provide proof of medical expenses within 30 calendar days from the mailing date of the application approval notice, which states how much the member owes.

(4) For ongoing months of eligibility, the member has until the close of business on the tenth day of the month after the benefit month to meet the spenddown or the cost-of-care contribution for waiver services, or to pay the MWI premium. If the tenth day of the month is a non-business day, the member has until the close of business on the first business day after the tenth. Eligibility begins on the first day of the benefit month once the member meets the required payment. If the member does not meet the required payment by the due date, the member may reapply for retroactive benefits if that month is within the retroactive period of the new application date.

(5) A member who lives in a long-term care facility and owes a cost-of-care contribution to the medical facility must pay the medical facility directly. The member may use unpaid past medical bills or current incurred medical bills other than the charges from the medical facility to meet some or all of the cost-of-care contribution subject to the limitations in Section R414-304-9. An unpaid cost-of-care contribution is not allowed as a medical bill to reduce the amount that the member owes the facility.

(6) Even if the eligibility agency does not close a medical assistance case, no eligibility exists in a month in which the member fails to meet a required spenddown, MWI premium, or cost-of-care contribution for home and community-based waiver services.

(7) The eligibility agency shall continue eligibility for a resident of a nursing home even if an eligible resident fails to pay the nursing home the cost-of-care contribution. The resident, however, must continue to meet all other eligibility requirements.

(8) The eligibility period ends on:

(a) the last day of the month in which the eligibility agency determines that the member is no longer eligible for medical assistance and sends proper closure notice;

(b) the last day of the month in which the eligibility agency sends proper closure notice if the member fails to provide required information or verification to the eligibility agency by the due date;

(c) the last day of the month in which the member asks the eligibility agency to discontinue eligibility, or if benefits have been issued for the following month, the end of that month;

(d) for time-limited programs, the last day of the month in which the time limit ends;

(e) for the pregnant woman program, the last day of the month which is at least 12 months after the date the pregnancy ends, except that for pregnant woman coverage for emergency services only, eligibility ends on the last day of the month in which the pregnancy ends;

(f) for children under 19 years of age, the earlier of:

(i) the end of the 12-month period beginning on the date the member is determined eligible;

(ii) the date the member reaches 19 years of age;

(iii) the date the member ceases to be a state resident; or

(iv) the date the member loses lawful permanent residence status as defined in Subsection R414-302-3(2); or

(g) the date the member dies.

(9) A presumptive eligibility period begins on the day the qualified entity determines an individual to be presumptively eligible. The presumptive eligibility period shall end on the earlier of:

(a) the day the eligibility agency makes an eligibility decision for medical assistance based on the individual's application if that application is filed in accordance with the requirements of Sections 1920 and 1920A of the Social Security Act; or

(b) in the case of an individual who does not file an application in accordance with Sections 1920 and 1920A of the Social Security Act, the last day of the month that follows the month in which the individual becomes presumptively eligible.

(10) For an individual selected for coverage under the Qualified Individuals program, the eligibility agency shall extend eligibility through the end of the calendar year if the individual continues to meet eligibility criteria and the program still exists.

(11) The eligibility agency shall complete a periodic review of a member's eligibility for medical assistance in accordance with 42 CFR 435.916 (2024). The department elects to conduct reviews for the coverage group described in 19 U.S.C. 1902(a)(10)(A)(i)(VIII) with the requirements in 19 U.S.C. 1902(e)(14)(L). The department elects to conduct reviews for non-MAGI-based coverage groups in accordance with 42 CFR 435.916(a)(3) if eligibility cannot be renewed in accordance with 42 CFR 435.916(a)(2). The eligibility agency shall review factors that are subject to change to determine if the member continues to be eligible for medical assistance.

(12) For non-MAGI-based coverage groups, the eligibility agency may complete an eligibility review more frequently if it:

(a) has information about anticipated changes in the member's circumstances that may affect eligibility;

(b) knows the member has fluctuating income;

(c) completes a review for other assistance programs that the member receives; or

(d) needs to meet workload demands.

(13) If a member fails to respond to a request for information to complete the review, the eligibility agency shall end eligibility effective at the end of the review month and send proper notice to the member.

(a) If the member responds to the review or reapplies within three calendar months of the review closure date, the eligibility agency shall consider the response to be a new application without requiring the member to reapply. The application processing period shall apply for the new request for coverage.

(b) If the member becomes eligible based on this reapplication, the member's eligibility becomes effective the first day of the month after the closure date if verification is provided timely. If the member fails to return verification timely or if the member is determined to be ineligible, the eligibility agency shall send a denial notice to the member.

(c) The eligibility agency may not continue eligibility while it makes a new eligibility determination.

(14) If the eligibility agency sends proper notice of an adverse decision in the review month, the agency shall change eligibility for the following month.

(15) If the eligibility agency does not send proper notice of an adverse change for the following month, the agency shall extend eligibility to the following month. Upon completing an eligibility determination, the eligibility agency shall send proper notice of the effective date of any adverse decision.

(16) If the member responds to the review in the review month and the verification due date is in the following month, the eligibility agency shall extend eligibility to the following month. The member must provide verification by the verification due date.

(a) If the member provides requested verification by the verification due date, the eligibility agency shall determine eligibility and send proper notice of the decision.

(b) If the member does not provide requested verification by the verification due date, the eligibility agency shall end eligibility effective the end of the month in which the eligibility agency sends proper notice of the closure.

(c) If the member returns verification after the verification due date and before the effective closure date, the eligibility agency shall treat the date that it receives the verification as a new application date. The agency shall then determine eligibility and send notice to the member.

(17) The eligibility agency shall provide ten-day notice of case closure if the member is determined ineligible or if the member fails to provide verification by the verification due date.

(18) The eligibility agency may not extend coverage under certain medical assistance programs in accordance with state and federal law. The agency shall notify the member before the effective closure date.

(a) If the eligibility agency determines that the member qualifies for a different medical assistance program, the agency shall notify the member. Otherwise, the agency shall end eligibility when the permitted time period for the program expires.

(b) If the member provides information before the effective closure date that indicates the member may qualify for another medical assistance program, the eligibility agency shall treat the information as a new application. If the member contacts the eligibility agency after the effective closure date, the member must reapply for benefits.

KEY: public assistance programs, applications, eligibility, Medicaid
Date of Last Change: [~~June 19, 2025~~]2026
Notice of Continuation: January 6, 2023
Authorizing, and Implemented or Interpreted Law: 26B-3-108; 26B-1-213

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58430**
Rule or section number:	**R414-312**

1. Agency Information

Title catchline:	Health and Human Services, Integrated Healthcare
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	288 N 1460 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Lane London	801-538-6515	llondon@utah.gov

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

3. General Information

A. Rule or section catchline:

R414-312. Adult Expansion Medicaid

B. Purpose of the new rule or reason for the change:

Public Law No. 119-21 was enacted through H.R. 1 in July of 2025 and updates provisions related to the Adult Expansion Medicaid coverage group.

To comply with this federal statute, it is necessary for the Division of Integrated Healthcare to amend this rule.

C. Summary of the new rule or change:

Pursuant to H.R. 1, this amendment updates provisions related to the Adult Expansion Medicaid coverage group.

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
There is no anticipated fiscal impact as a result of this filing because updates to this rule implement compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.
B. Local governments:
There is no anticipated fiscal impact on local governments, as local governments do not make eligibility determinations for Medicaid.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal impact on small businesses because small businesses do not make eligibility determinations for the Medicaid program.
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 because this filing does not affect Medicaid services provided by non-small businesses. This filing does not add to, modify, or remove existing requirements 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***)**:**
There is no anticipated fiscal impact on other persons identified as Medicaid providers because this filing does not affect which Medicaid services are available. However, other persons identified as Medicaid recipients may see an inestimable cost or savings, depending on the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how changes to provisions related to the Adult Expansion Medicaid coverage group will affect Medicaid recipients. This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons identified as the state budget, non-small businesses, or Medicaid providers who are other persons. This filing implements compliance with H.R. 1 and does not add to, modify, or remove existing requirements for non-small businesses or which Medicaid services are available. However, affected persons identified as other persons who are Medicaid recipients may see an inestimable compliance cost, depending upon the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how changes to provisions related to the Adult Expansion Medicaid coverage group will affect Medicaid recipients. This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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:

Sections 26B-1-213	Section 26B-3-108	Public Law No. 119-21
42 U.S.C. 1315(f)		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	11/01/2026

R414. Health and Human Services, Integrated Healthcare.
R414-312. Adult Expansion Medicaid.
R414-312-2. Definitions.

The definitions in Rules R414-1 and R414-301 apply to this rule. In addition, the following definitions apply.

(1) "Certification period" means the [~~12-month~~]time frame in which an individual is eligible for coverage based on an approved application or review as described in Section R414-308-6.

(2) "Employer-sponsored health plan" means a health insurance plan offered by an employer.

(3) "Medically frail" means an individual as described in 42 CFR 440.315(f).

(4) "Qualified health plan" means a health plan that meets the following:

(a) the plan covers physician visits, hospital inpatient services, pharmacy, well-child exams, and child immunizations;

(b) the network deductible is $4,000 or less per person;

(c) the plan pays at least 70% of an in-network inpatient stay after the deductible;

(d) the plan does not cover abortion services, or the plan only covers abortion services when the life of the mother would be endangered if the fetus were carried to term, or in the case of incest or rape;

(e) the employer pays at least 50% of the premium for the primary-insured individual; and

(f) the lifetime maximum benefits must be at least $1,000,000.

R414-312-8. Community Engagement Provisions.

The eligibility agency shall use Section R414-302-12 to determine community engagement requirements.

KEY: Medicaid, adult expansion, eligibility
Date of Last Change: [~~July 2, 2025~~]2026
Notice of Continuation: August 12, 2024
Authorizing, and Implemented or Interpreted Law: 26B-3-108; 26B-1-213

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58431**
Rule or section number:	**R414-320**

1. Agency Information

Title catchline:	Health and Human Services, Integrated Healthcare
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	288 N 1460 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Lane London	801-538-6515	llondon@utah.gov

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

3. General Information

A. Rule or section catchline:

R414-320. Medicaid Health Insurance Flexibility and Accountability Demonstration Waiver

B. Purpose of the new rule or reason for the change:

Public Law No. 119-21 was enacted through H.R. 1 in July of 2025 and makes changes to the Medicaid retroactive coverage period.

To comply with this federal statute, it is necessary for the Division of Integrated Healthcare (division) to amend this rule.

Additionally, upon internal review, the division determined it is appropriate to update outdated information in this rule related to the Primary Care Network (PCN), which no longer exists.

C. Summary of the new rule or change:

Pursuant to H.R. 1, this amendment adjusts the Medicaid retroactive coverage period prior to the application month, shortening it to one month for the Adult Expansion group and two months for all other eligible groups.

This filing also removes references to the PCN, which no longer exists.

5. Fiscal Information

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

A. State budget:

There is no anticipated fiscal impact as a result of this filing because updates to this rule implement compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

Additionally, the removal of references to the PCN are not anticipated to result in a fiscal impact because this program no longer exists, and this amendment reflects the removal of this program.

B. Local governments:

There is no anticipated fiscal impact on local governments, as local governments do not make eligibility determinations for Medicaid.

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

There is no anticipated fiscal impact on small businesses because small businesses do not make eligibility determinations for the Medicaid program.

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 because this filing does not affect Medicaid services provided by non-small businesses.

This filing does not add to, modify, or remove existing requirements 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***)**:**

There is no anticipated fiscal impact to other persons identified as Medicaid providers because this filing does not affect which Medicaid services are available.

However, other persons identified as Medicaid recipients may see an inestimable cost or savings, depending on the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how shortening the retroactive coverage period will affect Medicaid recipients.

This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

Additionally, the removal of references to the PCN are not anticipated to result in a fiscal impact because this program no longer exists, and this amendment reflects the removal of this program.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons identified as the state budget, non-small businesses, or Medicaid providers who are other persons. This filing implements compliance with H.R. 1 and does not add to, modify, or remove existing requirements for non-small businesses or which Medicaid services are available.

However, affected persons identified as other persons who are Medicaid recipients may see an inestimable compliance cost, depending upon the recipient's individual circumstance. This amount cannot be estimated at the time this filing is being drafted, as no data yet exists related to how shortening the retroactive coverage period will affect Medicaid recipients.

This filing implements compliance with H.R. 1. The bill's fiscal note details the projected costs of implementation and can be viewed at https://www.cbo.gov/publication/61570.

Additionally, the removal of references to the PCN are not anticipated to result in compliance costs because this program no longer exists, and this amendment reflects the removal of this program.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	FY2027	FY2028	FY2029	FY2030	FY2031
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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	Public Law No. 119-21
42 U.S.C. 1315(a)		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	11/01/2026

R414. Health and Human Services, Integrated Healthcare.
R414-320. Medicaid Health Insurance Flexibility and Accountability Demonstration Waiver.
R414-320-2. Definitions.

[~~The definitions in~~]Terms used in this rule are defined in Section 26B-3-901 and Rules R414-1 and R414-301[~~, apply to this rule~~]. [~~In addition, the following definitions apply throughout this rule~~]Additionally:

(1) "Adult" means an individual who is 19 years of age or older.

(2) "Best estimate" means the eligibility agency's determination of a household's income for the upcoming certification period based on past and current circumstances and anticipated future changes.

(3) "Children's Health Insurance Program" or [~~(~~]"CHIP[~~)~~]" means the program for medical benefits under Title 26B, Chapter 3, Part 9, Utah Children's Health Insurance Program[~~the Utah Children's Health Insurance Act, Title 26, Chapter 40~~].

(4) "Creditable Health Coverage" means any health insurance coverage as defined in 45 CFR 146.113.

(5) "Employer-sponsored health plan" means a health insurance plan offered by an employer either directly or through the Utah Health Exchange.

(6) "Member" means an individual who applies for and is found eligible for the UPP program, and is receiving UPP benefits.

(7) "Open enrollment" means a period during which the eligibility agency accepts applications for the UPP program.

[~~(8) "Primary Care Network" or (PCN) means the program for benefits under the Medicaid Primary Care Network Demonstration Waiver.~~

] ([~~9~~]8) "Public Institution" means an institution that is the responsibility of a governmental unit or is under the administrative control of a governmental unit.

([~~10~~]9) "Review month" means the last month of the certification period for an member during which the eligibility agency redetermines the member's eligibility for a new certification period.

(1[~~1~~]0) "UPP Qualified Health Plan" means a health plan that meets the following requirements:

(a) Health plan coverage includes:

(i) physician visits;

(ii) hospital inpatient services;

(iii) pharmacy services;

(iv) well child visits; and

(v) children's immunizations.

(b) Lifetime maximum benefits must be at least $1,000,000.

(c) The deductible may not exceed $4,000 per individual.

(d) The plan must pay at least 70% of an inpatient stay after the deductible.

(e) The employer contributes at least 50% of the cost of the employee's health insurance premium when the plan is offered directly through the employer. If the employer offers plans through the Utah Health Exchange, the employer must contribute at least 50% of the cost of the employee's health insurance premium for either the employer's default plan or the plan the employee selects. If the plan is a Consolidated Omnibus Budget Reconciliation Act (COBRA) plan, the employer does not have to contribute to the premium.

(f) The plan does not cover any abortion services; or the plan only covers abortion services in the case if the life of the mother would be endangered if the fetus were carried to term or in the case of rape or incest.

(1[~~2~~]1) "Utah's Premium Partnership for Health Insurance" or [~~(~~]"UPP"[~~)~~] means a medical assistance program that provides cash reimbursement for all or part of the insurance premium paid by an employee for health insurance coverage through an employer-sponsored health insurance plan, including employer-sponsored health plans available under Avenue H, or COBRA coverage that covers either the eligible employee, the eligible spouse of the employee, dependent children, or the family.

R414-320-6. Creditable Health Coverage.

(1) The department adopts 42 CFR 433.138(b).

(2) An applicant who is covered under a group health plan or other creditable health insurance coverage, as defined in 29 CFR 2590.701-4 is not eligible for enrollment.

(3) An applicant who is covered by COBRA coverage may be eligible for UPP enrollment.

(4) An adult is not eligible for UPP if the individual becomes eligible for Refugee Medical without a spenddown as defined in Section R414-303-10. An individual who is eligible for Refugee Medical with a spenddown may choose to enroll in either Refugee Medical or UPP.

(5) The following requirements apply to an individual who has access to but has not yet enrolled in employer-sponsored health insurance:

(a) If the individual's cost for the employer-sponsored coverage offered by the employer directly, or for the employer's default plan offered through Avenue H, is less than 5% of the countable MAGI-based income for the individual's household, the individual is not eligible for the UPP program.

(b) If the individual's cost for the employer-sponsored coverage offered by the employer directly, or for the employer's default plan offered through Avenue H, equals or exceeds 5% of the countable MAGI-based income for the individual's household, the individual may enroll in UPP.

(i) An eligible child may choose enrollment in either UPP or CHIP.

(ii) If the cost of coverage exceeds 15% for an adult, the individual may enroll in [~~either~~]UPP[~~ or PCN. To enroll in PCN, it must be an open enrollment period and the individual must meet the PCN criteria~~].

(c) The cost of coverage includes a deductible if the employer-sponsored plan has a deductible.

(d) The eligibility agency will include in the cost of coverage for the spouse or dependent child, the cost to enroll the employee if the employee must be enrolled to enroll the spouse or dependent child.

(6) An eligible individual who has access to or who is enrolled in a COBRA plan may choose to enroll in UPP and the COBRA plan if the individual's cost for the COBRA plan exceeds 5% of the countable MAGI-based income for the individual's household.

(7) An individual who could enroll in Medicare is not eligible for UPP enrollment, even if the individual must wait for a Medicare open enrollment period to apply.

(8) An individual who is enrolled in the Veteran's Administration (VA) Health Care System is not eligible for UPP enrollment.

(a) An individual who is eligible to enroll in the VA Health Care System, but who has not yet enrolled, may be eligible for the UPP program while waiting for enrollment in the VA Health Care System to become effective. To be eligible during this waiting period, the individual must apply for and take all necessary steps to enroll in the VA Health Care System.

(b) Eligibility for the UPP program ends once the individual's coverage in the VA Health Care System begins.

(9) An individual who voluntarily terminates health insurance coverage is ineligible to enroll in UPP for 90 days from the date the coverage ends.

(a) The eligibility agency may not apply a 90-day waiting period in the following situations:

(i) The premium paid by the individual or family for coverage of the individual or family member exceeded 5% of the MAGI-based household income.

(ii) The cost of the premium paid and deductible that includes the individual for the family coverage health plan exceeds 9.5% of the MAGI-based household income.

(iii) An employer stopped offering coverage under an ESI.

(iv) Loss of coverage due to a change in employment or involuntary separation.

(v) The individual has special heath care needs as defined by the department.

(vi) Loss of coverage due to the death or divorce of an UPP individual.

(vii) Voluntary termination of COBRA.

(viii) Voluntary termination of coverage through the Federally Facilitated Marketplace.

(ix) Voluntary termination of coverage for an adult child from the parent's or guardian's ESI plan.

(x) Voluntary termination of coverage by a spouse who does not live in the same household as the UPP applicant.

(xi) Voluntary termination of coverage for a child from a non-custodial parent's ESI plan.

(xii) The individual is voluntarily terminated from insurance that does not provide coverage in Utah;

(xiii) The individual is voluntarily terminated from a limited health insurance plan;

(xiv) A child is terminated from a parent's insurance because ORS reverses the forced enrollment requirement due to the insurance being unaffordable.

(b) The eligibility agency will determine the individual's eligibility at the end of the waiting period without requiring a new application.

(i) The agency may request information about changes in the individual's circumstances that may affect eligibility.

(ii) If eligible, enrollment in UPP can begin in the month in which the 90-day ineligibility period ends.

(10) An individual is eligible to enroll in UPP if the individual's prior health insurance coverage expires before the end of the calendar month that follows the month in which the individual applies for UPP, and the individual has access to another employer-sponsored health insurance plan that meets the criteria of an UPP qualified health plan. The UPP enrollment date must be after the prior health insurance coverage ends.

(11) An eligible individual with access to an employer-sponsored health plan who also has creditable health coverage operated or financed by Indian Health Services may enroll in the UPP program.

R414-320-10. Application and Signature.

(1) [~~The provisions of~~]Section R414-308-3 appl[ies[~~y~~] to applicants of the UPP program, except for [~~paragraph~~]Subsection R414-308-3(9), Subsection R414-308-3(10), and the [~~three months of~~]retroactive coverage period.

(2) The eligibility agency shall reinstate an UPP case without requiring a new application if the case closes in error.

(3) An applicant may withdraw an application any time before the eligibility agency completes an eligibility decision on the application.

R414-320-11. Eligibility Decisions and Eligibility Reviews.

(1) The department adopts 42 CFR 435.911 and 435.912, October 1, 2013 ed., regarding eligibility determinations.

(2) At application and review, the eligibility agency shall determine whether the individual applying for UPP enrollment is eligible for Medicaid or Refugee Medical.

(a) An individual who qualifies for Medicaid without paying a spenddown or a Medicaid Work Incentive (MWI) premium may not enroll in the UPP program.

(b) An individual who qualifies for Refugee Medical without paying a spenddown may not enroll in the UPP program.

(c) An individual who must pay a spenddown or MWI premium to receive Medicaid or pay a spenddown for Refugee Medical may enroll in UPP if the individual elects not to receive Medicaid or Refugee Medical.

(3) An individual who is open for Medicaid, Refugee Medical[~~, PCN,~~] or CHIP may request to enroll in the UPP program.

(a) A new application form is not required.

(b) The rules in Section R414-320-12 govern the effective date of enrollment.

(c) A new income test must be completed for the individual. If the individual's income places the UPP household over the income limit for UPP, the individual is not eligible to enroll in UPP.

(d) If the individual is moving from [~~PCN or~~]CHIP, the eligibility agency shall waive the open enrollment requirement if there is no break in coverage.

(e) If the individual was previously on UPP, became eligible for Medicaid or Refugee Medical, and requests to reenroll in UPP without a break in coverage, the eligibility agency shall waive the open enrollment period and the requirement in Subsection 414-320-6(2).

(f) If the individual is moving from Medicaid or Refugee Medical and was not previously on UPP, or there has been a break in coverage of one or more months, an adult individual must reapply during an open enrollment period.

(g) For a [~~PCN or~~]CHIP individual who enrolls in an employer-sponsored health plan, the eligibility agency shall waive the requirement found in Subsection 414-320-6(2) if the change is reported within ten calendar days of signing up for coverage or within [~~10~~]ten calendar days after coverage begins, whichever is later.

(h) All other eligibility requirements must be met.

(4) The eligibility agency shall process each application to a decision unless:

(a) the applicant voluntarily withdraws the application and the eligibility agency sends a notice to the applicant to confirm the withdrawal;

(b) the applicant dies;

(c) the applicant cannot be located; or

(d) the applicant does not respond to requests for information within the 30-day application period or by the verification due date, if that date is later.

(5) The eligibility agency shall complete a periodic review of an member's eligibility for medical assistance in accordance with the requirements of 42 CFR 435.916.

(a) The agency may request a member to contact the agency to complete the eligibility review.

(b) The agency shall provide the member a written request for verification needed to complete the review.

(c) The agency shall provide proper notice of an adverse decision.

(d) If the agency cannot provide proper notice of an adverse decision, the agency extends eligibility to the following month to allow for proper notice.

(6) If a member fails to respond to a request to complete the review or fails to provide requested verification to complete the review, the eligibility agency shall end eligibility effective the end of the month for which the agency sends proper notice to the member.

(a) If the member contacts the agency to complete the review or returns requested verification within three calendar months of the closure date, the eligibility agency shall treat such contact or receipt of verification as a new application. The agency may not require a new application form.

(b) The application processing period applies to this request to reapply.

(c) Eligibility can begin in the month the member contacts the agency to complete the review if verification is received within the application processing period.

(d) If the member fails to return the verification timely, but before the end of the three calendar months, eligibility becomes effective the first day of the month in which all verification is provided and the individual is found eligible.

(e) The eligibility agency may not continue eligibility while it makes a new eligibility determination.

(f) During these three calendar months, the eligibility agency shall waive the open enrollment period requirement and the requirement at Subsection R414-320-6(2).

(g) If the member does not respond to the request to complete a review for UPP during the three calendar months immediately following the review closure date, the member must reapply for UPP and meet eligibility criteria.

(7) If the individual files a new application or makes a request to reenroll within the calendar month that follows the effective closure date, when the closure is for a reason other than an incomplete review, the eligibility agency will process the request as a new application and waive the open enrollment period and the requirement found at Subsection R414-320-6(2).

(8) The member must reapply if the case closes for one or more calendar months for any reason other than an incomplete review.

(9) The eligibility agency shall comply with the requirements of 42 CFR 435.1200(e), regarding transfer of the electronic file for [~~the purpose of~~]determining eligibility for other insurance affordability programs.

R414-320-12. Effective Date of Enrollment and Enrollment Period.

(1) Subject to Section R414-320-6, and the limitations in Section R414-306-4, the effective date of enrollment in the UPP program is the first day of the application month.

(a) The effective date of enrollment for a newborn or adopted child is the date of birth or the date of adoption, if the request is made within 30 days of the date of birth or adoption.

(b) If the request to add a newborn or adopted child is made after 30 days of the date of birth or the date of adoption, enrollment is effective on the first day of the month in which the date of request occurs.

(2) An individual who is approved for the UPP program must enroll in the employer-sponsored health plan or COBRA within 30 days of receiving an approval notice from the eligibility agency.

(3) If the applicant does not enroll in the employer-sponsored health insurance plan or COBRA within 30 days of the date that the eligibility agency sends the UPP approval notice, the eligibility agency shall deny the application.

(4) The department may not reimburse the member for premiums before the effective date of enrollment and not before the month in which the member pays a health insurance or COBRA premium. The member must verify the premium payment.

(5) The effective date of enrollment for an individual moving directly from Medicaid[~~, PCN,~~] or CHIP is the first day of the month after eligibility for Medicaid[~~, PCN,~~] or CHIP ends.

(6) The effective date of reenrollment in UPP after the eligibility agency completes the periodic review, is the first day of the month after the review month, or the first day after the due process month. Subsection R414-320-11(5) defines the effective date of reenrollment when the member completes the review process in the three calendar months after the case is closed for incomplete review.

(7) An individual who becomes eligible for UPP is enrolled for a 12-month certification period that begins with the first month of eligibility.

(8) The eligibility agency shall end eligibility before the end of a 12-month certification period for any of the following reasons:

(a) The individual turns 65 years of age;

(b) An enrolled child turns 19 years of age and was covered by the parent's or guardian's health insurance plan;

(c) The individual becomes entitled to receive Medicare;

(d) The individual becomes covered by VA Health Insurance, or fails to apply for VA health system coverage when potentially eligible;

(e) The individual is determined eligible for Medicaid when the household requests a new eligibility determination for any household member;

(f) The individual dies;

(g) The individual moves out of state or cannot be located; or

(h) The individual enters a public institution or an Institution for Mental Disease.

(9) The eligibility agency shall end eligibility if an adult member discontinues enrollment in employer-sponsored insurance or COBRA.[~~ The member may switch to the PCN program if the member meets PCN eligibility requirements.~~]

KEY: CHIP, Medicaid, [~~PCN, ~~]UPP
Date of Last Change: [~~July 1, 2024~~]2026
Notice of Continuation: January 16, 2026
Authorizing, and Implemented or Interpreted Law: 26B-3-108; 26B-1-213

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58372**
Rule or section number:	**R432-100**

1. Agency Information

Title catchline:	Health and Human Services, Health Care Facility Licensing
Building:	Multi-Agency State Office Building
Street address:	195 N 1950 W
City, state:	Salt Lake City, UT

2. Contact Persons

Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	dlbcrules@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:

R432-100. General Hospital Standards

B. Purpose of the new rule or reason for the change:

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 2026 General Session that impact this rule, including HB 51, HB 380, HB 417, HB 472, and HB 559.

The filing also makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

HB 51 (2026) amended provisions to adoptions in Utah and required any health facility providing birthing services to develop, implement, and comply with a policy to address adoption services occurring at the facility. OL determined it necessary to add requirements in this rule to align with statute.

HB 380 (2026) required any general acute hospital or specialty hospital to track and report any workplace violence incident, including the development and implementation of a workplace violence policy and tracking system. OL determined it necessary to add requirements in this rule to align with statute.

HB 417 (2026) defined terms related to non-medical transportation and required any health facility to allow a patient to use non-medical transportation under specific circumstances. This bill also enacted the review and approval process of health facilities to consider a patient request for non-medical transportation through a written notice, the admissions and billing process for the health facility that receives the patient, and specific liability protections for the health care facility and health care providers from the originating health facility. OL determined it necessary to add a requirement for non-medical transportation for an interfacility transfer in this rule.

HB 472 (2026) renumbered the statute that outlines the responsibilities of the Division of Licensing and Background Checks (DLBC), including the rulemaking authority of DLBC. OL determined it necessary to update the rulemaking authority reference in this rule.

HB 559 (2026) requires OL, in collaboration with the Office of Maternal and Child Health, both under the department, to develop rules, including any procedure and staff training, related to perinatal loss for any health facility providing birthing services. This bill made it necessary to add a requirement in this rule for any health care facility that provides birthing services to develop, implement, and comply with a procedure to address perinatal loss and provide staff training on the procedure.

C. Summary of the new rule or change:

To support the implementation of legislation from the 2026 General Session, this amendment updates and adds content in this rule to reflect the required legislative actions impacting OL.

To implement HB 51 (2026), the requirements to develop, implement, and comply with a policy for adoption services and provide staff onboarding and annual training on the policy are added to Section R432-100-20.

To implement HB 380 (2026), the requirement for the development and implementation of a workplace violence incident tracking system is added to Section R432-100-10. Requirements for the regulated hospital to development, implement, and comply with a policy to govern the tracking system and provide onboarding and annual training for staff are also added to this section.

To implement HB 417 (2026), requirements for any regulated health care facility to allow a patient under certain circumstances to use non-medical transportation to another health care facility are added to Section R432-100-9.

To implement HB 559 (2026), the requirements for any health care facility that provides birthing services to develop, implement, and comply with a policy for perinatal bereavement and provide staff onboarding and annual training on the policy are added to Section R432-100-20.

This amendment also updates the statutory reference for DLBC rulemaking authority to implement HB 472 (2026) and updates other outdated citations.

Additionally, the term "anesthesiologist assistant" is added to Section R432-100-18 as a medical staff qualified to provide anesthesia services to a patient.

This amendment also makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 51 (2026 General Session), HB 380 (2026 General Session), HB 417 (2026 General Session), HB 472 (2026 General Session), and HB 559 (2026 General Session)

5. Fiscal Information

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

A. State budget:

To support the implementation of multiple legislative actions from the 2026 General Session, including HB 51 (2026), HB 380 (2026), HB 417 (2026), HB 472 (2026), and HB 559 (2026) that relate to this rule amendment, there is no anticipated fiscal impact, as OL already regulates this type of health facility.

The department added the new requirements for hospitals related to the implementation of HB 51 (2026), HB 380 (2026), HB 417 (2026), and HB 559 (2026) to each applicable department inspection checklist, which is not anticipated to result in any measurable cost or savings to the state budget.

The department does not anticipate any fiscal impact on the state budget due to the implementation of HB 472 (2026), as this is a nonsubstantive change to update a statutory reference.

Any costs associated with the implementation of HB 51 (2026) have been captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0051S04.fn.pdf.

Any costs associated with the implementation of HB 380 (2026) have been captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0380.fn.pdf.

Any costs associated with the implementation of HB 417 (2026) have been captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0417.fn.pdf.

Any costs associated with the implementation of HB 472 (2026) have been captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0472S01.fn.pdf.

Any costs associated with the implementation of HB 559 (2026) have been captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0559S01.fn.pdf.

The department does not anticipate any fiscal impact on the state budget as a result of the style, formatting, and clarifying language changes included in this rule amendment.

B. Local governments:

To support the implementation of multiple legislative actions from the 2026 General Session, including HB 51 (2026), HB 380 (2026), HB 417 (2026), HB 472 (2026), and HB 559 (2026) that relate to this 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 does not anticipate any fiscal impact on local governments as a result of the style, formatting, and clarifying language changes included in this amendment.

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

The implementation of HB 51 (2026) related to the rule amendment may result in a small compliance cost for small businesses operating a regulated health facility that provides birthing services.

The implementation of HB 51 (2026) includes additional requirements for these providers to develop, implement, and comply with an adoption services policy and provide staff training on the policy upon hire and on an annual basis.

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 the additional requirements.

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional requirements of this rule from HB 51 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the additional requirements.

The implementation of HB 380 (2026) related to the rule amendment may result in a small compliance cost for small businesses operating a general acute hospital or specialty hospital.

The implementation of HB 380 (2026) includes additional requirements for these providers to develop and implement a reporting system to track any incident of workplace violence in these settings, as well as develop, implement, and comply with a policy related to the prevention of any discrimination or retaliation of a staff reporting any workplace violence incident or being part of an investigation of a workplace violence incident by 11/01/2026.

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.

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional requirements of this rule from HB 380 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the additional requirements.

The implementation of HB 417 (2026) related to the rule amendment may result in a small compliance cost for small businesses operating this type of regulated health facility.

HB 417 (2026) includes an additional requirement for these providers to allow for non-medical transportation under certain circumstances to another health facility.

The aggregate anticipated cost for small businesses is not measurable at this time and will require OL to begin enforcing the new requirement during licensing reviews to understand the cost of implementation for this additional requirement.

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional non-medical transportation requirement of this rule from HB 417 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the requirement for non-medical transportation requests.

The department does not anticipate any fiscal impact on small businesses due to the implementation of HB 472 as this is a nonsubstantive change to update a statutory reference.

The implementation of HB 559 (2026) related to the rule amendment may result in a small compliance cost for small businesses operating a regulated health facility that provides birthing services.

The implementation of HB 559 (2026) includes additional requirements for these providers to develop, implement, and comply with a bereavement policy to support any patient experiencing perinatal loss and to provide any staff that work in the perinatal unit to train on the policy upon hire and on an annual basis.

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 HB 559 (2026).

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional requirements of this rule from HB 559 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the additional requirements.

The department also does not anticipate any fiscal impact on small businesses as a result of the style, formatting, and 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 HB 51 (2026) related to the rule amendment may result in a small compliance cost for non-small businesses operating a regulated health facility that provides birthing services.

The implementation of HB 51 (2026) includes additional requirements for these providers to develop, implement, and comply with an adoption services policy and provide staff training on the policy upon hire and on an annual basis.

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 of the additional requirements.

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional requirements of this rule from HB 51 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the additional requirements.

The implementation of HB 380 (2026) related to the rule amendment may result in a small compliance cost for non-small businesses operating a general acute hospital or specialty hospital.

The implementation of HB 380 (2026) includes additional requirements for these providers to develop and implement a reporting system to track any incident of workplace violence in these settings, as well as develop, implement, and comply with a policy related to the prevention of any discrimination or retaliation of a staff reporting any workplace violence incident or being part of an investigation of a workplace violence incident by 11/01/2026.

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 of additional requirements.

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional requirements of this rule from HB 380 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the additional requirements.

The implementation of HB 417 (2026) related to the rule amendment may result in a small compliance cost for non-small businesses operating this type of regulated health facility.

HB 417 (2026) includes an additional requirement for these providers to allow for non-medical transportation under certain circumstances to another health facility.

The aggregate anticipated cost for non-small businesses is not measurable at this time and will require OL to begin enforcing the new requirement during licensing reviews to understand the cost of implementation for this additional requirement.

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional non-medical transportation requirement of this rule from HB 417 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the requirement for non-medical transportation requests.

The department does not anticipate any fiscal impact on non-small businesses due to the implementation of HB 472 (2026) as this is a nonsubstantive change to update a statutory reference.

The implementation of HB 559 (2026) related to the rule amendment may result in a small compliance cost for non-small businesses operating a regulated health facility that provides birthing services.

The implementation of HB 559 (2026) includes additional requirements for these providers to develop, implement, and comply with a bereavement policy to support any patient experiencing perinatal loss and to provide any staff that work in the perinatal unit to train on the policy upon hire and on an annual basis.

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 of additional requirements related to implementation of HB 559 (2026).

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional requirements of this rule from HB 559 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the additional requirements.

The department also does not anticipate any fiscal impact on non-small businesses as a result of the style, formatting, and 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***)**:**

The implementation of HB 51 (2026) related to the rule amendment may result in a small compliance cost for persons other than small businesses, non-small businesses, state, or local government entities operating a regulated facility that provides birthing services.

The implementation of HB 51 (2026) includes additional requirements for these providers to develop, implement, and comply with an adoption services policy and provide staff training on the policy upon hire and on annual basis.

The aggregate anticipated cost for other persons 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 HB 51 (2026).

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional requirements of this rule from HB 51 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the additional requirements.

The implementation of HB 380 (2026) related to the rule amendment may result in a small compliance cost for other persons operating a general acute hospital or specialty hospital.

The implementation of HB 380 (2026) includes additional requirements for these providers to develop and implement a reporting system to track any incident of workplace violence in these settings, as well as develop, implement, and comply with a policy related to the prevention of any discrimination or retaliation of a staff reporting any workplace violence incident or being part of an investigation of a workplace violence incident by 11/01/2026.

The aggregate anticipated cost for other persons 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 HB 380 (2026).

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional requirements of this rule from HB 380 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the additional requirements.

The implementation of HB 417 (2026) related to the rule amendment may result in a small compliance cost for other persons operating this type of regulated health facility.

HB 417 (2026) includes an additional requirement for these providers to allow for non-medical transportation under certain circumstances to another health facility.

The aggregate anticipated cost for other persons is not measurable at this time and will require OL to begin enforcing the new requirement during licensing reviews to understand the cost of implementation for this additional requirement.

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional non-medical transportation requirement of this rule from HB 417 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the requirement for non-medical transportation requests.

The department does not anticipate any fiscal impact on other persons due to the implementation of HB 472 (2026) as this is a nonsubstantive change to update a statutory reference.

The implementation of HB 559 (2026) related to the rule amendment may result in a small compliance cost for other persons operating a regulated health facility that provides birthing services.

The implementation of HB 559 (2026) includes additional requirements for these providers to develop, implement, and comply with a bereavement policy to support any patient experiencing perinatal loss and to provide any staff working in the perinatal unit to train on the policy upon hire and on an annual basis.

The aggregate anticipated cost for other persons 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 HB 559 (2026).

Furthermore, the department does not know the exact cost for each regulated facility to implement the additional requirements of this rule from HB 559 (2026) but anticipates the cost will not be significant. Providers were notified in April 2026 about the additional requirements.

The department also does not anticipate any fiscal impact on other persons 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 51 (2026), HB 380 (2026), HB 417 (2026), HB 472 (2026), and HB 559 (2026), affected persons would be small and non-small businesses and persons other than small businesses, non-small businesses, state, or local government entities operating health facilities regulated by OL, under the department.

Providers who are affected persons must comply with the additional requirements outlined in HB 51 (2026). There may be a small compliance cost for regulated health facilities that provide birthing services to develop a policy and staff training for adoption services.

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 regulated health care facilities will require OL to begin enforcing this new requirement during licensing reviews.

Providers who are affected persons must comply with the additional requirements outlined in HB 380 (2026). There may be a small compliance cost for health facilities operating a general acute hospital or specialty hospital. The implementation of HB (2026) 380 includes additional requirements for these providers to develop and implement a reporting system to track any incident of workplace violence in these settings, as well as develop, implement, and comply with a policy related to the prevention of any

discrimination or retaliation of a staff reporting any workplace violence incident or being part of an investigation of a workplace violence incident by 11/01/2026.

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 hospital to implement the additional requirements. Measuring any compliance cost for regulated health care facilities will require OL to begin enforcing this new requirement during licensing reviews.

Providers who are affected persons must comply with the additional requirement for non-medical transportation outlined in HB 417 (2026). There may be a small compliance cost for regulated health facilities to implement the additional requirement, which includes allowing any patient who meets specific requirements in accordance with Section 26B-2-249 to use non-medical transport.

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 health facility to implement the additional requirements. Measuring any compliance cost for regulated health care facilities will require OL to begin enforcing this new requirement during licensing reviews.

There is no compliance cost for affected persons due to the implementation of HB 472 (2026) as this is a nonsubstantive change to update a statutory reference.

Providers who are affected persons must comply with the additional requirements outlined in HB 559 (2026). There may be a small compliance cost for regulated health facilities that provide birthing services to implement the additional requirements of HB 559 (2026), which include developing a perinatal bereavement policy and providing staff training on the policy.

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 health facility to implement the additional requirements. Measuring any compliance cost for regulated health care facilities will require OL to begin enforcing this new requirement during licensing reviews.

Additionally, OL, as the regulatory body for health and safety standards for regulated health care facilities, is affected by the amendment. Any cost for rule amendments has been identified and considered under the state budget in the fiscal notes for HB 51 (2026), HB 380 (2026), HB 417 (2026), and HB 559 (2026).

The department has notified providers about the additional requirements related to HB 51 (2026), HB 380 (2026), HB 417 (2026), and HB 559 (2026) and the department does not anticipate any compliance cost for OL.

The department also does not anticipate any compliance cost as a result of the style and formatting changes and additional clarifying language changes included in this rule amendment.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$0	$0	$0	$0	$
Local Governments	$0	$0	$0	$0	$0
Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Non-Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Other Persons	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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	Section 26B-2-902

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/19/2026

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, [~~and~~]26B-2-203, and 26B-2-902 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.

(c) 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 and Sections 26B-2-201, 26B-2-244, 26B-2-245, and 26B-2-249. 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) "County of the first class or second class" means the same as described in Section 17-50-501.

(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.

(4) "Satellite emergency department" means the same as defined in Section 26B-2-203.

(5) "Swing-bed" means a hospital room that can switch from inpatient acute care status to skilled care status.

(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.

(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.

(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.

(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 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 R432-150-4, Scope of Services;

(b) Section R432-150-5, 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 R432-150-18, 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 each board member;

(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;

(g) the methods established by the board for holding such individuals responsible;

(h) the methods for removal of board members and officers;

(i) the numbers or percentages of members that constitute a quorum for board meetings;

(j) the size of the board;

(k) the terms of office of the board; and

(l) to who responsibility for operation and maintenance of the hospital, including evaluation of hospital practices, may be delegated.

(4) The board members shall:

(a) meet at least quarterly; and

(b) keep written minutes of meetings and actions 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.

(b) The board shall define, in writing, the administrator's qualifications, responsibilities, authority, and accountability.

(6) The board, through officers, committees, medical, and other staff, shall:

(a) appoint members of the medical staff and delineate clinical privileges;

(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) advise the board in the formulation of hospital policies and procedures;

(b) appoint a member of the staff to oversee compliance with the requirements of the Utah Anatomical Gift Act;

(c) be the direct representative of the board in the management of the hospital;

(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;

(i) maintain a written record of any business transactions and patient services provided in the hospital and submit reports as requested to the board;

(j) 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.

(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;

(iv) the delineation of privileges;

(v) the necessary qualifications for membership; and

(vi) the participation and documentation of continuing education.

(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 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 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 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 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 respective duties, services, and functions.

(2) The licensee shall ensure there are written policies, procedures, and performance standards that include:

(a)(i) direct care staff having current cardiopulmonary resuscitation (CPR) certification, which requires:

(ii) an in-person course, to include skills testing and evaluation on-site with a licensed instructor;

(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 bloodborne pathogens 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 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~~].

(b) [~~a~~]A volunteer may not be included in the hospital staffing plan in lieu of hospital employees.

([~~b~~]c) The licensee shall screen and supervise a volunteer according to hospital policy.

([~~c~~]d) 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. Patient Interfacility Transportation.

(1) The licensee shall develop, implement, and comply with a procedure for each request for the use of non-medical transportation for an interfacility transfer from a patient or the patient's responsible person, in accordance with Section 26B-2-249.

(2) The licensee shall document in the medical record of the patient before each discharge for an interfacility transfer:

(a) that the formal clinical assessment of the medical condition or mental condition of the patient is stable and does not require ambulance or medically supervised transportation; and

(b) the specific type of non-medical transportation that will be used to transport the patient.

R432-100-10. Workplace Violence Reporting System.

(1) The licensee shall develop, implement, and comply with a policy for implementation and maintenance of a workplace violence reporting system, in accordance with Section 26B-2-245.

(2) The licensee shall ensure staff receive training on the policy described in Subsection (1):

(a) upon hire;

(b) on an annual basis after initial training upon hire; and

(c) any time a change is made to the policy.

(3)(a) The licensee shall use the form on the OL website to submit an annual report of the total number of workplace violence incidents that occur from November 1 through the subsequent October 31.

(b) After the close of the period described in Subsection (3)(a), the licensee shall submit the annual report by the end of each November.

R432-100-[~~9~~]11. 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.

(3)(a) The licensee shall maintain a quality improvement committee.

(b) The quality improvement committee shall maintain written minutes documenting any corrective action and result 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.

R432-100-1[~~0~~]2. Infection Control.

(1) The licensee shall implement a hospital-wide infection control program that includes:

(a) a system for reporting, evaluating, and investigating infections;

(b) an employee health program;

(c) definitions of nosocomial infections;

(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 plan.

(3) The licensee shall ensure that:

(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) there are written policies for the selection, storage, handling, use, and disposition of disposable or reusable items.

R432-100-1[~~1~~]3. Patient Rights.

(1) The licensee shall inform each patient during admission of patient rights and support the exercise of the patient's right to:

(a) access medical records and purchase, at a cost not to exceed the community standard, photocopies of that patient's record;

(b) be examined and treated in surroundings designed to give visual and auditory privacy;

(c) be free from mental and physical abuse and 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 or 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~~]9, Uniform Health Care Decisions Act;

(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.

(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.

(b) The licensee shall ensure the policy is consistent with Title 75A, Chapter [~~3~~]9, Uniform Health Care Decisions Act.

R432-100-1[~~2~~]4. Patient Designated Caregiver.

(1) The licensee shall give a patient admitted to the hospital the opportunity to designate a caregiver 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:

(a) the patient is discharged back to the patient's own residence; or

(b) the patient is transferred to another health facility.

(3) The licensee shall document each date and time 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) a description of continuing care tasks that the patient requires, in a culturally competent manner;

(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) 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.

(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.

R432-100-1[~~3~~]5. 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) clinical diagnoses;
(ii) intervention identified to meet the patient's needs;
(iii) nursing care provided and the patient's response;
(iv) the ability of the patient, family, or designated caregiver 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.

R432-100-1[4]6. 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) 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, Required Staffing; and
(b) Section R432-650-12, Water Quality.

R432-100-1[5]7. 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)(i) A surgical technician or licensed practical nurse may serve as a scrub nurse under the direct supervision of a registered nurse[~~but~~].
(ii) A surgical technician or licensed practical nurse 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) 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) an aspirator; and
(vi) equipment for 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.

R432-100-1[6]8. 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, or anesthesiologist assistant, shall provide anesthesia care within the scope of 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:
(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) 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 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.

R432-100-1[~~7~~]9. Emergency Care Service.

(1)(a) Each licensee shall self-evaluate and classify to show capability in providing emergency care. Type I, II, or III categories represent acute care hospitals and critical access hospitals, and Type IV category represents specialty hospitals.
(b) A Type I acute or critical access hospital licensee shall provide in-hospital support by members of the medical staff for:
(i) anesthesia services;
(ii) medical;
(iii) obstetric;
(iv) orthopedic;
(v) pediatric; and
(vi) 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 Type I or 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;
(ii) submit to the department any initial and renewal application and applicable fee; and
(iii) have the capability to conduct the following clinical laboratory tests and analyses available on-site during hours of operation:
(A) core blood panels;
(B) critical care and cardiac marker tests;
(C) point-of-care tests (POCTs); and
(D) specialized emergency analyses.
(f) The licensee shall ensure clinical laboratory services are immediately available to meet the emergency diagnostic and stabilizing needs of any patient presenting to the satellite emergency department in a county of first or second class.
(g) The licensee shall develop, implement, and maintain a written policy, approved by the medical staff and governing body, that identifies the specific laboratory tests and analyses to be performed at the satellite emergency department in a county of first or second class, including:
(i) a list of emergency laboratory tests available at the facility;
(ii) the required turnaround time for any critical laboratory result; and
(iii) any protocol for obtaining an emergency test not performed on-site.
(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 goes to or is brought to the emergency care area including:

(i) an appropriate medical screening examination;

(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) 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.

(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 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 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 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 shall have emergency department policies and protocols that address:

(i) the care, security, and control of 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;

(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 domestic abuse of elders, spouses, partners, and children;

(ii) suspected physical assault;

(iii) suspected rape or sexual molestation;

(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~~]20. 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) The licensee shall isolate patients with infections or other communicable conditions.

(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) a clock capable of showing seconds;

(b) a device to assess fetal heart rate;

(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) a covered soiled-diaper container with removable lining;

(b) a linen hamper with removable bag for soiled linen other than diapers;

(c) a newborn warming unit with temperature controls that comply with Underwriters' Laboratories requirements;

(d) a supply of medication immediately available for emergencies;

(e) a wall thermometer;

(f) an individual thermometer, or one with disposable tips, for each infant;

(g) an oxygen concentration monitoring device;

(h) accurate scales; and

(i) 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.

(15) The licensee shall:

(a) instill a prophylactic solution in the eyes of the infant within three hours of birth in accordance with Section R386-702-14;

(b) not try to delay the imminent, normal birth of a child;

(c) perform a newborn hearing screening in accordance with Rule R398-2; and

(d) perform disease screening, including phenylketonuria (PKU), in accordance with Section 26B-4-319.

(16) Any licensee that provides birthing services shall develop, implement, and comply with a policy that addresses:

(a) adoption services, in accordance with Section 26B-2-244; and

(b) perinatal bereavement practices, in accordance with Subsection 26B-2-247(2).

(17) The licensee shall ensure any staff working in birthing services receive onboarding training and annual training on each policy described in Subsection (16).

R432-100-[~~19~~]21. 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;

(c) infant and child nutrition;

(d) intravenous therapy;

(e) pediatric emergency procedures;

(f) the emotional needs and behavioral management of hospitalized children;

(g) toxicology; and

(h) other topics according to the needs of the pediatric patients.

R432-100-2[~~0~~]2. 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 for Respiratory 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.

R432-100-2[~~1~~]3. 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 be responsible for the specific medical problem or condition 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.

R432-100-2[~~2~~]4. 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.

(c)(i) A member of the medical staff shall provide medical direction [~~o~~]for 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.

(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) 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) 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.

R432-100-2[~~3~~]5. 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 [~~o~~]for laboratory and pathology services.

(2) Laboratory and pathology services shall make inspection reports, as described in 42 U.S.C. 263a, the Clinical Laboratory Improvement Amendments of 1988, as required for construction plan review in Section R432-4-7 available for department review.

(3) Laboratories certified by 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.

R432-100-2[4]6. 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 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 CMS or any accrediting organization approved by CMS.

(3) The licensee shall ensure that results of the accrediting organization survey are available for department review.

R432-100-2[~~5~~]7. Pharmacy Services.

(1)(a) The pharmacy of a licensee currently accredited and conforming to the standards of the Joint Commission is determined to be in compliance with this section.

(b) If a licensee is not accredited by the Joint Commission, then the licensee's pharmacy services shall comply with 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:

(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 with other hospital records.

(10)(a) 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

(ii) use automated dispensing technology.

(b) A licensee that 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.

R432-100-2[~~6~~]8. 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~~]29. 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 R432-101-1[~~3~~]0, Patient Security;

(ii) Section R432-101-1[~~4~~]1, Special Treatment Procedure;

(iii) Section R432-101-1[~~7~~]5, Admission and Discharge;

(iv) Section R432-101-[~~20~~]18, Inpatient Services;

(v) Section R432-101-[~~21~~]19, Adolescent or Child Treatment Program;

(vi) Section R432-101-2[~~2~~]0, Residential Treatment Services;
(vii) Section R432-101-2[~~3~~]1, Physical Restraints, Seclusion, and Behavior Management;
(viii) Section R432-101-2[~~4~~]2, Involuntary Medication Administration; and
(ix) Section R432-101-3[~~5~~]3, 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~~]30. 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, 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:
(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;
(d) educational, employment, or other counseling, available as needed;
(e) individual, group, or family counseling; and
(f) treatment services coordinated with other hospital and community services to [~~as~~]ensure continuity of care through discharge planning and aftercare referrals.
(3) The licensee shall maintain the confidentiality of medical records of substance use disorder patients and clients according to the federal guidelines in 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~~]31. 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 satellite services.

R432-100-3[~~0~~]2. 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 relief from the demands of caring for an individual.
(b) The licensee may only provide respite care services if the licensee complies with 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:
(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) diet orders;
(ii) need for assistance [~~for~~]with activities of daily living;
(iii) physician treatment orders; and
(iv) 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) philosophy of respite services;
(f) post-service summary;
(g) service agreement and admission criteria; and
(h) training and in-service requirements for employees.
(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.
(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.

R432-100-3[~~1~~]3. Pet Therapy.
(1) If a licensee utilizes pet therapy, household pets such as a dog, cat, bird, fish, or hamster, may be permitted if:
(a) 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;
(c) a pet that is kept at the hospital, or is a frequent visitor, has current vaccinations, including rabies, as recommended by a licensed veterinarian;
(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 a pet to remain overnight shall have policies and procedures for the care, housing and feeding, and proper storage of pet food and supplies.
(3) The licensee may not permit a pet in any area where the pet's presence would create a significant health or safety hazard or nuisance to others.
(4) The licensee may not permit a pet in food preparation and storage areas.
(5) Any individual caring for a pet may not have patient care or food handling responsibilities.

R432-100-3[~~2~~]4. 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, 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 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.

R432-100-3[~~3~~]5. 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.

R432-100-3[4]6. 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 [~~o~~]for 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 license shall ensure medical records are available for use or review by:

(i) authorized hospital personnel and agents;

(ii) 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 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.

(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 a 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)(i) medical records for every person who receives care, including a minor, are kept for at least seven years; and

(ii) [~~and~~]medical records [~~of~~]for a person who receives care as a minor[~~s~~] are kept until that[~~e~~] person reaches at least age [~~of~~]22[~~18 plus four years, but in no case less than seven years~~];

(c) medical records are organized according to hospital policy;

(d) medical records are reviewed at least quarterly for completeness, accuracy, and adherence to hospital policy;

(e) records of discharged patients are collected, assembled, reviewed for completeness, and authenticated within 30 days of the patient's discharge;

(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

(g) The licensee shall permanently keep a master patient or person index that shall include:

(i) the admission and discharge dates;

(ii) the date of birth;

(iii) the medical record number;

(iv) the name of each attending physician; and

(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~~]9, Uniform Health Care Decisions Act;

(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;

(g) properly executed informed consent documents for any procedures and treatments ordered for, and received by, the patient;

(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) 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~~]in accordance with 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) 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) surgeon's diagnosis;

(f) the name of the primary surgeon;

(g) the post-operative diagnosis;

(h) the specimen removed; and

(i) the technical procedures used.

(10) A medical record of an obstetrical patient shall contain:

(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 medical record of a newborn infant shall contain the following documentation in addition to the requirements for obstetrical medical records:

(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;

(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;

(i) the date and hour of birth;

(j) the record and results of the newborn hearing screening according to 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) 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;

(f) record of treatment; and

(g) time and 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;

(c) an environmental investigation for an attending physician;

(d) social therapy and rehabilitation of the patient; and

(e) 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

(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.

(b) The medical records department shall report vital statistics data in accordance with Title 26B, Chapter 8, Part I, Vital Statistics.

R432-100-3[~~5~~]7. 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:

(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 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

(C) the sterilizers are tested by biological monitors at least weekly.

(3) The licensee shall separate the storage area into sterile and non-sterile areas and ensure:

(a) outside shipping cartons are not stored in the storage area;

(b) the storage area has temperature and humidity controls; and

(c) the storage area is free of excessive moisture and dust.

(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.

R432-100-3[~~6~~]8. Laundry Service.

(1) A person whose qualifications, authority, responsibilities, and duties are approved by the administrator shall direct the laundry service.

(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) employees handling soiled linen wear protective clothing that is removed before leaving the soiled work area;

(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.

(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.

R432-100-3[~~7~~]9. Housekeeping Services.

(1) The licensee shall provide housekeeping services to maintain a clean, safe, sanitary, and healthy 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~~]40. 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 or rodent.

(e) The licensee shall maintain each entrance, exit, step, ramp, and outside walkway 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~~]41. 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;

(h) 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.

(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 the licensed capacity by up to 20% in response to any incident that overwhelms the facility.

(b) A hospital that exceeds the licensed capacity under this provision shall notify the department within 72 hours of exceeding 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 the patient census to the licensed capacity at any time.

R432-100-4[~~0~~]2. 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 5,~~] 2026
Notice of Continuation: August 22, 2025
Authorizing, and Implemented or Interpreted Law: 26B-1-202; 26B-2-202; 26B-2-203; 26B-2-902

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58466**
Rule or section number:	**R477-1**

1. Agency Information

Title catchline:	Government Operations, Human Resource Management
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W
City, state:	Taylorsville, UT
Mailing address:	PO Box 141531
City, state and zip:	Salt Lake City, UT 84114-1531

2. Contact Persons

Name:	Phone:	Email:
Bryan Embley	801-618-6720	bkembley@utah.gov

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

3. General Information

A. Rule or section catchline:
R477-1. Definitions
B. Purpose of the new rule or reason for the change:
The amendment adds and adjusts definitions for the implementation of the Paid Time Off program pursuant to SB 299 (passed in the 2026 General Session).
C. Summary of the new rule or change:
Paid Time Off Employee needs to be specifically defined to implement other changes as part of the paid time off roll-out and paid time off is added to the definition of Leave Benefit.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.

B. If yes, any bill number and session:	SB 299 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
These amendments are not expected to have any fiscal impact on state government revenues or expenditures because these changes are administrative in nature and do not impact budgets.
B. Local governments:
These amendments are not expected to have any fiscal impact on local governments because this rule only applies to the executive branch of state government.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
These amendments are not expected to have any fiscal impact on small businesses because this rule only applies to the executive branch of state government.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
These amendments are not expected to have any fiscal impact on non-small businesses because this rule only applies to the executive branch of state government.
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***)**:**
These amendments are not expected to have any fiscal impact on other individuals because this rule only applies to the executive branch of state government.
F. Compliance costs for affected persons:
There are no direct compliance costs for these amendments. This rule only affects the executive branch of state government and will have no impact on other persons. This rule has no financial impact on state employees.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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

Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 63A-17-106	Section 63A-17-301	Section 63A-17-306

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	01/02/2027

13. Agency Authorization Information

Agency head or designee and title:	John Barrand, Division Director, DHRM	**Date:**	11/02/2026

R477. Government Operations, Human Resource Management.
R477-1. Definitions.
R477-1-1. Definitions.

The following definitions apply to Title R477 unless otherwise indicated within the text of each rule.

(1) "Abandonment of Position" means an act of resignation resulting when an employee is absent from work for three consecutive working days without approval.

(2) "Actual FTE" means the total number of full time equivalents based on actual hours paid in the state payroll system.

(3) "Actual Hours Worked" means time spent performing duties and responsibilities associated with the employee's job assignments.

(4) "Actual Wage" means the employee's assigned wage rate in the central personnel record maintained by the Division of Human Resource Management.

(5) "ADA" means the Americans With Disabilities Act, 42 U.S.C. 12102.

(6) "Administrative Leave" means leave with pay granted to an employee at management discretion that is not charged against the employee's leave accounts.

(7) "Administrative Adjustment" means a DHRM approved adjustment to a job or salary range that is not a Market Comparability Adjustment, a Structure Adjustment, or a Reclassification. It is for administrative purposes only. An Administrative Adjustment will result in an increase to incumbent pay only when necessary to bring salaries to the minimum of the salary range.

(8) "Administrative Salary Decrease" means a decrease in an employee's current actual wage based on non-disciplinary administrative reasons determined by an agency head.

(9) "Administrative Salary Increase" means an increase in an employee's current actual wage based on special circumstances determined by an agency head.

(10) "Agency" means an entity of state government that is:

(a) directed by an executive director, elected official, or commissioner defined in Title 67, Chapter 22, State Officer Compensation, or in other sections of the code;

(b) authorized to employ personnel; and

(c) subject to Title 63A, Chapter 17, Utah State Personnel Management Act.

(11) "Agency Head" means the executive director or commissioner of each agency or a designated appointee.

(12) "Agency Human Resource Field Office" means an office of the Division of Human Resource Management located at another agency's facility.

(13) "Alternative State Application Program (ASAP)" means a program designed to appoint a qualified person with a disability through an on the job examination period.

(14) "Appeal" means a formal request to a higher level for reconsideration of a grievance decision.

(15) "Appointing Authority" means the officer, board, commission, person, or group of persons authorized to make appointments in their agencies.

(16) "Break in Service" means a point at which an individual has an official separation date and is no longer an employee of the State of Utah.

(17) "Budgeted FTE" means the total number of full time equivalents budgeted by the Legislature and approved by the Governor.

(18) "Career Mobility" means a temporary assignment of an employee to a different position for professional development or to fulfill specific organizational needs.

(19) "Career Service Employee" means an employee who has successfully completed a probationary period in a career service position.

(20) "Career Service Exempt Employee" means an employee who serves at the pleasure of the appointing authority and may be separated from state employment at any time for any reason or for no reason.

(21) "Career Service Exempt Position" means a position in state service that is exempt from career service provisions under Section 63A-17-301.

(22) "Career Service Status" means status granted to an employee who successfully completes a probationary period following appointment to a career service position.

(23) "Category of Work" means a job series an agency head designates as having positions to be eliminated agency wide through a reduction in force. Category of work may be further reduced as follows:

(a) a unit smaller than the agency upon providing justification and rationale for approval, including:

(i) unit number;

(ii) cost centers;

(iii) geographic locations; or

(iv) agency programs.

(b) positions identified by a set of essential functions, including:

(i) position analysis data;

(ii) certificates;

(iii) licenses;

(iv) special qualifications; or

(v) degrees that are required or directly related to the position.

(24) "Change of Workload" means a change in position responsibilities and duties or a need to eliminate or create particular positions in an agency caused by legislative action, financial circumstances, or administrative reorganization.

(25) "Classification Grievance" means the approved procedure by which an agency or a career service employee may grieve a formal classification decision regarding the classification of a position.

(26) "Classified Service" means positions that are subject to the classification and compensation provisions stipulated in Section 63A-17-307.

(27) "Classification Study" means a classification review conducted by DHRM under Section R477-3-4. A study may include single or multiple job or position reviews.

(28) "Compensatory Time" means time off that is provided to an employee in lieu of monetary overtime compensation.

(29) "Contractor" means an individual who is contracted for service, is not supervised by a state supervisor, but is responsible for providing a specified service for a designated fee within a specified time. The contractor shall be responsible for paying any taxes and FICA payments, and may not accrue benefits.

(30) "Critical Incident Drug or Alcohol Test" means a drug or alcohol test conducted on an employee as a result of the behavior, action, or inaction of an employee that is of such seriousness it requires an immediate intervention by management.

(31) "Demotion" means a disciplinary action resulting in a reduction of an employee's current actual wage.

(32) "Position Management Report" means a document that lists an agency's authorized positions, incumbent's name and hourly rate, job identification number, salary range, and schedule.

(33) "DHRM" means the Division of Human Resource Management.

(34) "DHRM Approved Recruitment and Selection System" means the state's recruitment and selection system, which is a centralized and automated computer system administered by the Division of Human Resource Management.

(35) "Direct Supervisor" means an employee's primary supervisor who normally directs day to day job activity such as assigning work, approving time records, and considering leave requests.

(36) "Disability" has the same definition found in the Americans With Disabilities Act of 1990, 42 U.S.C. 12101 (2008); Equal Employment Opportunity Commission regulation, 29 CFR 1630 (2008); including exclusions and modifications.

(37) "Disciplinary Action" means action taken by management under Rule R477-11.

(38) "Dismissal" means a management initiated separation from state employment.

(39) "Dual State Employment" means an employee works for more than one agency and meets the employee criteria which is located in the Division of Finance accounting policy 11-18.00.

(40) "Drug-Free Workplace Act" means a congressional act, 41 U.S.C. Section 8101, et seq., requiring a drug-free workplace certification by state agencies that receive federal grants or contracts.

(41) "Employee Personnel Files" means the files or records maintained by DHRM and agencies as required by Section R477-2-5 for purposes of Title 67, Chapter 18, Employees' Personnel Files and Title 63A, Chapter 17, Utah State Personnel Management Act. This does not include employee information maintained by supervisors.

(42) "Employment Eligibility Verification" means a requirement of the Immigration Reform and Control Act of 1986, 8 U.S.C. 1324 that employers verify the identity and eligibility of individuals for employment in the United States.

(43) "Escalator Principle" means returning veterans are entitled to return back onto their seniority escalator at the point they would have occupied had they not left state employment under the Uniformed Services Employment and Reemployment Rights Act of 1994, 38 U.S.C. 4301, et seq. (USERRA).

(44) "Employee's Family Member" means an employee's relative or household member as defined in Section 52-3-1 but also including, stepsiblings, stepparents, and stepchildren.

(45) "Fitness For Duty Evaluation" means evaluation, assessment, or study by a licensed professional to determine if an individual can meet the performance or conduct standards required by the position held, or is a direct threat to the safety of self or others.

(46) "FLSA Exempt" means employees who are exempt from the overtime and minimum wage provisions of the Fair Labor Standards Act.

(47) "FLSA Non-Exempt" means employees who are not exempt from the overtime and minimum wage provisions of the Fair Labor Standards Act.

(48) "Follow Up Drug or Alcohol Test" means unannounced drug or alcohol tests conducted for up to five years on an employee who has previously tested positive or who has successfully completed a voluntary or required substance abuse treatment program.

(49) "Furlough" means a temporary leave of absence from duty without pay for budgetary reasons or lack of work.

(50) "GOPB" means Governor's Office of Planning and Budget.

(51) "Grievance" means a career service employee's claim or charge of the existence of injustice or oppression, including dismissal from employment resulting from an act, occurrence, omission, condition, discriminatory practice or unfair employment practice not including position classification or schedule assignment, or a complaint by a reporting employee as defined in Section 67-19a-101.

(52) "Grievance Procedures" means the statutory process of grievances and appeals as set forth in Title 67, Chapter 19a, Grievance Procedures, and the rules promulgated by the Career Service Review Office.

(53) "Gross Compensation" means an employee's total earnings, taxable and nontaxable, as shown on the employee's pay statement.

(54) "Highly Sensitive Position" means a position approved by DHRM that includes the performance of:

(a) safety-sensitive functions:

(i) requiring an employee to operate a commercial motor vehicle under 49 CFR 383;

(ii) directly related to law enforcement;

(iii) involving direct access or having control over direct access to controlled substances;

(iv) directly impacting the safety or welfare of the general public; or

(v) requiring an employee to carry or have access to firearms; or

(b) data sensitive functions permitting or requiring an employee to access an individual's highly sensitive, personally identifiable, private information, including:

(i) financial assets, liabilities, and account information;

(ii) social security numbers;

(iii) wage information;

(iv) medical history;

(v) public assistance benefits; or

(vi) driver license.

(55) "Hiring List" means a list of qualified and interested applicants who are eligible to be considered for appointment or conditional appointment to a specific position created in the DHRM approved recruitment and selection system.

(56) "Incompetence" means inadequacy or unsuitability in performance of assigned duties and responsibilities.

(57) "Inefficiency" means wastefulness of government resources including time, energy, money, or staff resources or failure to maintain the required level of performance.

(58) "Intern" means an individual in a college degree or certification program assigned to work in an activity where on the job training or community service experience is accepted.

(59) "Job" means a group of positions similar in duties performed, in degree of supervision exercised or required, in requirements of training, experience, or skill and other characteristics. The same salary range is applied to each position in the group.

(60) "Job Description" means a document containing the duties, distinguishing characteristics, knowledge, skills, and other requirements for a job.

(61) "Job Family" means a group of jobs that have related or common work content, that share common skills, responsibilities, and requirements, and that normally represents a general occupation area.

(62) "Job Requirements" means skill requirements defined at the job level.

(63) "Job Series" means two or more jobs in the same functional area having the same job title, but distinguished and defined by increasingly difficult levels of skills, responsibilities, knowledge, and requirements; or two or more jobs with different titles working in the same functional area that have licensure, certification, or other requirements with increasingly difficult levels of skills, responsibilities, knowledge, and requirements.

(64) "Leave Benefit" means a benefit provided to an employee that includes: Annual leave, sick leave, converted sick leave, paid time off, and holiday leave. These benefits are not provided to non-benefited employees.

(65) "Legislative Salary Adjustment" means a legislatively approved salary increase for a specific category of employees based on criteria determined by the Legislature.

(66) "Malfeasance" means intentional wrongdoing, deliberate violation of law or standard, or mismanagement of responsibilities.

(67) "Management" means the agency head and any other officers or employees who have responsibility and authority to establish, implement, and manage agency policies and programs.

(68) "Market Based Bonus" means a one-time lump sum monies given to a new hire or a current employee to encourage employment with the state.

(69) "Market Comparability Adjustment" means a legislatively approved adjustment to a salary range that is based upon salary data and other relevant information from comparable jobs in the market that is collected by DHRM or from DHRM approved justifiable sources. The Market Comparability Adjustment may also change incumbent pay resulting in a budgetary impact for an agency.

(70) "Misconduct" means wrongful, improper, unacceptable, or unlawful conduct or behavior that is inconsistent with prevailing agency practices or the best interest of the agency.

(71) "Misfeasance" means the improper or unlawful performance of an act that is lawful or proper.

(72) "Nonfeasance" means failure to perform either an official duty or legal requirement.

(73) "Paid Time Off Employee" means an employee who:

(a) elects to participate in the paid time off program under Section 63A-17-514;

(b) fails to submit a timely election in accordance with Section 63A-17-514; or

(c) is hired or rehired on or after January 1, 2027.

(7[~~3~~]4) "Performance Evaluation" means a formal, periodic evaluation of an employee's work performance.

(7[4]5) "Performance Improvement Plan" means a documented administrative action to address substandard performance of an employee under Section R477-10-2.

(7[~~5~~]6) "Performance Management" means the ongoing process of communication between the direct supervisor and the employee which defines work standards and expectations, and assesses performance leading to a formal annual performance evaluation.

(7[~~6~~]7) "Performance Plan" means a written summary of the standards and expectations required for the successful performance of each job duty or task. These standards normally include completion dates and qualitative and quantitative levels of performance expectations.

(7[~~7~~]8) "Performance Standard" means specific, measurable, observable and attainable objectives that represent the level of performance to which an employee and direct supervisor are committed during an evaluation period.

(7[~~8~~]9) "Personnel Adjudicatory Proceedings" means the informal appeals procedure contained in Title 63G, Chapter 4, Administrative Procedures Act for human resource policies and practices not covered by the state employee's grievance procedure promulgated by the Career Service Review Office, or the classification appeals procedure.

([~~79~~]80) "Phased Retirement" means employment on a half-time basis of a retiree with the same participating employer immediately following the retiree's retirement date where the retiree will receive a reduced retirement allowance.

(8[~~0~~]1) "Position" means a unique set of duties and responsibilities identified by DHRM authorized job and position management numbers.

(8[~~1~~]2) "Position Description" means a document that describes the detailed tasks performed, as well as the knowledge, skills, abilities, and other requirements of a specific position.

(8[~~2~~]3) "Position Identification Number" means a unique number assigned to a position for FTE management.

(8[~~3~~]4) "Post Accident Drug or Alcohol Test" means a drug or alcohol test conducted on an employee who is involved in a vehicle accident while on duty or driving a state vehicle:

(a) the employee was performing safety-sensitive functions with respect to the vehicle the employee was operating and the accident involves the loss of human life;

(b) the driver receives a citation under state or local law for a moving traffic violation arising from the accident and the accident involved:

(i) the loss of human life or bodily injury to any person who, as a result of the injury, immediately receives medical treatment away from the scene of the accident; or

(ii) one or more motor vehicles incurring disabling damage as a result of the accident, requiring the motor vehicle to be transported away from the scene by a tow truck or other vehicle; or

(c) where there is reasonable suspicion that the employee had been driving while under the influence of alcohol or a controlled substance.

(8[4]5) "Pre-employment Drug Test" means a drug test conducted on:

(a) final applicants who are not current employees;

(b) final candidates for a highly sensitive position;

(c) employees who are final candidates for transfer or promotion from a non-highly sensitive position to a highly sensitive position; or

(d) employees who transfer or are promoted from one highly sensitive position to another highly sensitive position.

(8[~~5~~]6) "Probationary Employee" means an employee hired into a career service position who has not completed the required probationary period for that position.

(8[~~6~~]7) "Probationary Period" means a period for management to evaluate an employee's ability to perform assigned duties and responsibilities and to determine if career service status should be granted to the employee. The length of the period is identified at the job level and the period is considered part of the selection process.

(8[~~7~~]8) "Proficiency" means an employee's overall quality of work, productivity, skills demonstrated through work performance and other factors that relate to employee performance or conduct.

(8[~~8~~]9) "Promotion" means an action moving an employee from a position in one job to a position in another job having a higher salary range maximum.

([~~8~~]90) "Protected Activity" means opposition to discrimination or participation in proceedings covered by the antidiscrimination statutes or the Utah State Grievance and Appeal Procedure. Harassment based on protected activity can constitute unlawful retaliation.

(9[~~0~~]1) "Random Drug or Alcohol Test" means unannounced drug or alcohol testing of a sample of an employee in a highly sensitive position done in accordance with federal regulations or state rules, policies, and procedures, and conducted in a manner such that each highly sensitive employee has an equal chance of being selected for testing.

(9[~~1~~]2) "Reappointment" means return to work of an individual from the reappointment register after separation from employment.

(9[~~2~~]3) "Reappointment Register" means a register of individuals who have, before March 2, 2009:

(a) held career service status and been separated in a reduction in force;

(b) held career service status and accepted career service exempt positions without a break in service and were not retained, unless discharged for cause; or

(c) by Career Service Review Board decision, been placed on the reappointment register.

(9[~~3~~]4) "Reasonable Suspicion Drug or Alcohol Test" means a drug or alcohol test conducted on an employee based on specific, contemporaneous, articulated observations concerning the appearance, behavior, speech, or body odors of the employee.

(9[~~4~~]5) "Reassignment" means an action mandated by management moving an employee from one job or position to a different job or position with an equal or lesser salary range maximum for administrative reasons. A reassignment may not include a decrease in actual wage except as provided in federal or state law.

(9[~~5~~]6) "Reclassification" means a DHRM reallocation of a single position or multiple positions from one job to another job to reflect management initiated changes in duties and responsibilities.

(9[~~6~~]7) "Reduction in Force (RIF)" means abolishment of positions resulting in the termination of career service employment. RIFs can occur due to inadequate funds, a change of workload, or a lack of work.

(9[~~7~~]8) "Reemployment" means return to work of an employee who resigned or took military leave of absence from state employment to serve in the uniformed services covered under USERRA.

(9[~~8~~]9) "Salary Range" means established minimum and maximum wage rates assigned to a job.

([~~99~~]100) "Schedule" means the designation of a position as career service (schedule B) or career service exempt (schedule A) under Title 63A, Chapter 17, Utah State Personnel Management Act.

(10[~~0~~]1) "Separation" means an employee's voluntary or involuntary departure from state employment.

(10[~~1~~]2) "Settling Period" means a sufficient amount of time, determined by agency management, for an employee to fully assume new or higher level duties required of a position.

(10[~~2~~]3) "Structure Adjustment" means a DHRM approved adjustment to a salary range that is based upon salary data and other relevant information from comparable jobs in the market that is collected by DHRM or from DHRM approved justifiable sources.

(10[~~3~~]4) "Tangible Employment Action" means a significant change in employment status, such as dismissal, demotion, failure to promote, work reassignment, or a decision which changes benefits.

(10[~~4~~]5) "Transfer" means an action not mandated by management moving an employee from one job or position to another job or position with an equal or lesser salary range maximum for which the employee qualifies. A transfer may include a decrease in actual wage.

(10[~~5~~]6) "Uniformed Services" means the United States Army, Navy, Marine Corps, Air Force, Coast Guard; Reserve units of the Army, Navy, Marine Corps, Air Force, or Coast Guard; Army National Guard or Air National Guard; Commissioned Corps of Public Health Service, National Oceanic and Atmospheric Administration (NOAA), National Disaster Medical Systems (NDMS) and any other category of persons designated by the President in time of war or emergency. Service in uniformed services includes: voluntary or involuntary duty, including active duty; active duty for training; initial active duty for training; inactive duty training; full time National Guard duty; or absence from work for an examination to determine fitness for any of the types of duty listed in this subsection.

(10[~~6~~]7) "Unlawful Discrimination" means an action against an employee or applicant based on race, religion, national origin, color, sex, age, disability, pregnancy, sexual orientation, gender identity, protected activity under the antidiscrimination statutes, political affiliation, military status or affiliation, or any other factor, as prohibited by law.

(10[~~7~~]8) "USERRA" means the Uniformed Services Employment and Reemployment Rights Act of 1994, 38 U.S.C. 4301, et seq. requires state governments to re-employ eligible veterans who resigned or took a military leave of absence from state employment to serve in the uniformed services and who return to work within a specified time period after military discharge.

(10[~~8~~]9) "Veteran" means the same as that term is defined in Section 68-3-12.5.

(1[~~09~~]10) "Volunteer" means any person who donates services to the state or its subdivisions without pay or other compensation except actual and reasonable expenses incurred, as approved by the supervising agency.

(11[~~0~~]1) "Wage" means the fixed hourly rate paid to an employee.

(11[~~1~~]2) "Work Period" means the maximum number of hours an employee may work before accruing overtime or compensatory hours based on variable payroll cycles outlined in Section 63A-17-502 and 29 CFR 553.230.

KEY: personnel management, rules and procedures, definitions
Date of Last Change: [~~July 1,~~] 2026
Notice of Continuation: March 9, 2022
Authorizing, and Implemented or Interpreted Law: 63A-17-106; 63A-17-301; 63A-17-306

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58467**
Rule or section number:	**R477-4-5**

1. Agency Information

Title catchline:	Government Operations, Human Resource Management
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W
City, state:	Taylorsville, UT
Mailing address:	PO Box 141531
City, state and zip:	Salt Lake City, UT 84114-1531

2. Contact Persons

Name:	Phone:	Email:
Bryan Embley	801-618-6720	bkembley@utah.gov

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

3. General Information

A. Rule or section catchline:
R477-4-5. Transfer and Reassignment
B. Purpose of the new rule or reason for the change:
The amendment implements changes for the paid time off program pursuant to SB 229 (passed in the 2026 General Session).
C. Summary of the new rule or change:
The change adds paid time off to the list of leave types that an employee keeps upon reassignment or transfer.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 229 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
These amendments are not expected to have any fiscal impact on state government revenues or expenditures because these changes are administrative in nature and do not impact budgets.
B. Local governments:
These amendments are not expected to have any fiscal impact on local governments because this rule only applies to the executive branch of state government.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
These amendments are not expected to have any fiscal impact on small businesses because this rule only applies to the executive branch of state government.

D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
These amendments are not expected to have any fiscal impact on non-small businesses because this rule only applies to the executive branch of state government.
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***)**:**
These amendments are not expected to have any fiscal impact on other individuals because this rule only applies to the executive branch of state government.
F. Compliance costs for affected persons:
There are no direct compliance costs for these amendments. This rule only affects the executive branch of state government and will have no impact on other persons. This rule has no financial impact on state employees.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 63A-17-106	Section 67-20-8	

11. Public Notice Information

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

A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	01/02/2027

13. Agency Authorization Information

Agency head or designee and title:	John Barrand, Division Director, DHRM	**Date:**	11/02/2026

R477. Government Operations, Human Resource Management.
R477-4. Filling Positions.
R477-4-5. Transfer and Reassignment.

(1) Positions may be filled through a transfer or reassignment.

(a) Management shall verify the employee's career service status and that the employee meets the job requirements for the position.

(b) Management receiving a transfer or reassignment of an employee shall accept that employee's previously accrued sick leave, annual leave, paid time off, and converted sick leave on the official leave records.

(c) A transfer may not include an increase but may include a decrease in actual wage.

(d) A reassignment may not include a decrease in actual wage except as provided in federal or state law.

(2) A reassignment or transfer may include assignment to:

(a) a different job or position with an equal or lesser salary range maximum;

(b) a different work location; or

(c) a different organizational unit.

KEY: employment, fair employment practices, hiring practices
Date of Last Change: 2026[~~July 1, 2025~~]
Notice of Continuation: March 9, 2022
Authorizing, and Implemented or Interpreted Law: 63A-17-106; 67-20-8

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58468**
Rule or section number:	**R477-6**

1. Agency Information

Title catchline:	Government Operations, Human Resource Management
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W
City, state:	Taylorsville, UT
Mailing address:	PO Box 141531
City, state and zip:	Salt Lake City, UT 84114-1531

2. Contact Persons

Name:	**Phone:**	**Email:**
Bryan Embley	801-618-6720	bkembley@utah.gov

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

3. General Information

A. Rule or section catchline:
R477-6-7. Compensation

B. Purpose of the new rule or reason for the change:
The amendment increases the limits on individual awards and adds a provision for paid time off upon career service status change actions.
C. Summary of the new rule or change:
The limits for financial incentive awards are increased from $4,000 per pay period and $8,000 per fiscal year to $7,500 per pay period and $15,000 per fiscal year. Upon career service status change, leave accrual may be annual or paid time off, depending on whether the employee is a paid time off employee or not.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 229 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
These amendments are not expected to have any fiscal impact on state budgets because spending under these provisions is discretionary and subject to availability of existing funds.
B. Local governments:
These amendments are not expected to have any fiscal impact on local governments because this rule only applies to the executive branch of state government.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
These amendments are not expected to have any fiscal impact on small businesses because this rule only applies to the executive branch of state government.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
These amendments are not expected to have any fiscal impact on non-small businesses because this rule only applies to the executive branch of state government.
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***)**:**
These amendments are not expected to have any fiscal impact on other individuals because this rule only applies to the executive branch of state government.
F. Compliance costs for affected persons:
There are no direct compliance costs for these amendments. This rule only affects the executive branch of state government and will have no impact on other persons. This rule has no financial impact on state employees.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	FY2027	FY2028	FY2029	FY2030	FY2031
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 63A-16-105	Section 63A-17-106	Subsection 63A-17-302(4)
Section 63A-17-307	Section 63A-17-803	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	01/02/2027

13. Agency Authorization Information

Agency head or designee and title:	John Barrand, Division Director, DHRM	**Date:**	11/02/2026

R477. Government Operations, Human Resource Management.
R477-6. Compensation.
R477-6-7. Incentive Awards.

(1) Management shall write and publish incentive award and bonus policies before rewarding any employee with incentive awards or bonuses. Incentive awards and bonuses are discretionary, not an entitlement, and are subject to the availability of funds in the agency.

(a) DHRM shall review agency incentive award policies to ensure that they are consistent with standards established in this rule and the Department of Government Operations, Division of Finance, rules, and procedures.

(b) Management may not grant individual awards greater than $[~~4,000~~]7,500 per pay period and $[~~8,000~~]15,000 in a fiscal year, except when approved by DHRM and the governor.

(i) Management shall include documentation of the work units affected and any cost savings in a request for an exception to Subsection (b) for a retirement incentive award.

(ii) A single payment of up to $8,000 may be granted as a retirement incentive.

(c) Any cash and cash equivalent incentive awards and bonuses shall be subject to payroll taxes.

(2) Performance Based Incentive Awards.

(a) Cash Incentive Awards.

(i) Management may grant a cash incentive award to an employee or group of employees that demonstrates exceptional effort or accomplishment beyond what is normally expected on the job for a unique event or over a sustained period.

(ii) To implement a Pay for Performance cash incentive awards program, management shall include the program in the agency's incentive awards policy pursuant to Section R477-10-1.

(A) The policy shall include information supporting the following:

(1) sustainability of the funding for the cash incentive program;

(2) the positions eligible to participate in the Pay for Performance program;

(3) goals of the program;

(4) type of work to be incentivized; and

(5) ability to track the effectiveness of the program.

(iii) The agency head or designee shall approve any cash awards and ensure that documentation relating to the award is maintained.

(b) Noncash Incentive Awards.

(i) Management may recognize an employee or group of employees with noncash incentive awards.

(ii) Individual noncash incentive awards may not exceed the limits in Finance Policy 05-03.06.

(iii) Noncash incentive awards may include cash equivalents such as gift certificates or tickets for admission. Cash equivalent incentive awards shall be subject to payroll taxes and shall follow standards and procedures established by the Department of Government Operations, Division of Finance.

(3) Cost Savings Bonus.

(a) Management may establish a bonus policy to increase productivity, generate savings within the agency, or reward an employee who submits a cost savings proposal.

(i) Management shall document the cost savings involved.

(4) Market Based Bonuses.

Management may award a cash bonus as an incentive to acquire or retain an employee with job skills that are critical to the state and difficult to recruit in the market. Any market based bonuses shall be approved by the DHRM Division Director or designee.

(a) When requesting market based awards, management shall submit documentation specifying how the agency will benefit by granting the bonus based on:

(i) budget;

(ii) recruitment difficulties;

(iii) a mission critical need to attract or retain unique or hard to find skills in the market; or

(iv) other market based reasons.

(b) Eligible reason types for market based bonuses include:

(i) Retention Bonus.

Management may award a bonus to an employee who has unusually high or unique qualifications that are essential for the agency to retain.

(ii) Recruitment or Signing Bonus.

Management may award a bonus to a qualified job candidate to incentivize the candidate to work for the state.

(iii) Scarce Skills Bonus.

Management may award a bonus to a qualified job candidate that has the scarce skills required for the job.

(iv) Relocation Bonus.

Management may award a bonus to a current employee who is required to relocate to accept a position in a different commuting area.

(v) Referral Bonus.

Management may award a bonus to a current employee who refers a job applicant who is subsequently selected.

(vi) Geographic Job Market Bonus.

Management may award a bonus to incentivize an employee to accept or continue an assignment in a specific geographic area.

R477-6-9. Career Service Status Change.

(1) When management changes an occupied schedule B position to schedule AC, AD, AR, AS, or AX, management shall offer the career service employee in that position the opportunity to convert to the new schedule code. The employee may, within 60 days from the date of offer, elect to convert from career service to career service exempt.

(a) If the employee chooses to convert, management shall offer the employee:

(i) an administrative salary increase of at least 1/2% or up to the current salary range maximum; and

(ii) state paid term life insurance coverage if determined eligible by the Group Insurance Office to participate in the Term Life Program, Public Employees Health Plan, as provided in Section R477-6-10.

(b) For an employee at or above the current salary range maximum at the time of conversation, management shall grant, in lieu of the salary adjustment from Subsection (1)(a)(i), a one time bonus, as determined by the agency head or designee, not to exceed limits in Subsection R477-6-7(1)(b).

(c) For an employee electing to convert to career service exempt after the 60 day election period, management may not grant the wage increase, but shall permit the employee to apply for the insurance coverage through the Group Insurance Office.

(d) An employee electing not to convert to career service exempt status retains career service status even though the employee's position shall be designated as schedule AC, AD, AR, AS, or AX. When these career service employees vacate these positions, any subsequent incumbent is career service exempt.

(e) Management shall communicate the conditions and limitations of this incentive program to any employees currently or imminently affected by the program.

(2) An agency head may reorganize so that a current career service exempt position no longer meets the criteria for exemption.

(a) An affected employee:

(i) shall resume career service status if the employee previously earned career service status and had no break in service;

(ii) is no longer eligible for severance pay under Section R477-6-10;

(iii) shall accrue:

(A) annual leave based on service time under Subsection R477-7-[~~3~~]4(1); or

(B) paid time off based on service time under Subsection R477-7-3(1); and

(iv) shall work with management and the Group Insurance Office to discontinue exempt life insurance coverage.

(b) Management may not convert a career service exempt employee to career service status unless:

(i) the employee had prior career service status with no break in service; or

(ii) the employee was hired from a hiring list under Subsection R477-4-2(7).

KEY: wages, employee benefit plans, insurance, personnel management
Date of Last Change: [~~May 7,~~] 2026
Notice of Continuation: March 9, 2022
Authorizing, and Implemented or Interpreted Law: 63A-16-105; 63A-17-106; 63A-17-302(4); 63A-17-307; 63A-17-803

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58469**
Rule or section number:	**R477-7**

1. Agency Information

Title catchline:	Government Operations, Human Resource Management
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W
City, state:	Taylorsville, UT
Mailing address:	PO Box 141531
City, state and zip:	Salt Lake City, UT 84114-1531

2. Contact Persons

Name:	Phone:	Email:
Bryan Embley	801-618-6720	bkembley@utah.gov

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

3. General Information

A. Rule or section catchline:

R477-7. Leave

B. Purpose of the new rule or reason for the change:

The amendment implements changes for the paid time off program pursuant to SB 229 (passed in the 2026 General Session) and restructures the leave buyback process for employees who miss work due to a workplace injury.

C. Summary of the new rule or change:

The change adds paid time off as a new leave type, specifies procedures for managers and employees to follow when paid time off is used, and adds paid time off to the lists of leave types associated with military leave, furlough, FMLA, workers' compensation, long-term disability, leave bank, and safe leave.

The change also simplifies the leave buyback procedures by removing an artificial cap, specifying a minimum threshold for buyback to be an option, and defining the buyback rate.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 229 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
These amendments increase the maximum accrual of paid time off for paid time off employees, and this leave must be paid out when an employee leaves state employment. In coordination with the Governor's Office of Planning and Budget, calculations assumed a 70% opt-in rate for employees, including historical sick leave usage and potential usage of short-term disability, resulting in an anticipated cost of $1,932,900 yearly. FY 2027 is only half that because the rules apply for half of the fiscal year.
B. Local governments:
These amendments are not expected to have any fiscal impact on local governments because this rule only applies to the executive branch of state government.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
These amendments are not expected to have any fiscal impact on small businesses because this rule only applies to the executive branch of state government.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
These amendments are not expected to have any fiscal impact on non-small businesses because this rule only applies to the executive branch of state government.
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***)**:**
These amendments are not expected to have any fiscal impact on other individuals because this rule only applies to the executive branch of state government.
F. Compliance costs for affected persons:
There are no direct compliance costs for these amendments. This rule only affects the executive branch of state government and will have no impact on other persons. This rule has no financial impact on state employees.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	FY2027	FY2028	FY2029	FY2030	FY2031
State Budget	$966,450	$1,932,900	$1,932,900	$1,932,900	$1,932,900
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 63A-17-106	Section 34-43-103	Section 39-3-1
Section 63G-1-301	Section 63A-17-504	Section 63A-17-505
Section 63A-17-511	Section 63A-17-516	Subsection 71A-8-102(3)

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	01/02/2027

13. Agency Authorization Information

Agency head or designee and title:	John Barrand, Division Director, DHRM	**Date:**	11/02/2026

R477. Government Operations, Human Resource Management.
R477-7. Leave.
R477-7-1. Conditions of Leave.

(1) An employee is eligible for a leave benefit when:

(a) in a position designated by management as eligible for benefits; and

(b) in a position which normally requires working a minimum of 40 hours per pay period.

(2) An eligible employee accrues annual, sick, paid time off, or[~~and~~] holiday leave in proportion to the time paid as determined by DHRM.

(3) An employee shall use leave in no less than quarter hour increments.

(4) An employee may not use annual leave,[~~or~~] sick leave, or paid time off before it is accrued. Leave accrued during a pay period may not be used until the following pay period.

(5) An employee may not use [~~annual leave, converted sick leave used as annual leave, or compensatory hours~~]accrued leave without advance approval by management, except under Sections:

(a) R477-7-2, governing holiday leave;

(b) R477-7-5, governing sick leave; or

(c) R477-7-16, governing FMLA leave.

(6) Management may not require employees to maintain a minimum balance of accrued leave.

(7) [~~Any~~]Except for pre-approved leave under Subsection (5), any leave used for purposes described in Subsection R477-7-[~~4~~]5(2) is subject to the requirements of Subsections R477-7-[~~4~~]5(6)[~~, and (7)~~].

(8) An employee transferring from one agency to another retains any accrued annual, sick, [~~and~~]converted sick leave, and paid time off at the new agency.

(9) Management shall make a lump sum payment to an employee separating from state service or changing from a benefited to a non-benefited position for:

(a) annual leave hours;

(b) compensatory hours earned by a FLSA non-exempt employee;[~~, and~~]

(c) converted sick leave if the employee is not retiring under Title 49, Utah State Retirement and Insurance Benefit Act; and

(d) paid time off.

(10) Management may not approve the use of leave after an employee's last day worked except for:

(a) leave without pay;

(b) administrative leave;

(c) leave granted under the FMLA; or

(d) leave granted for other medical or pregnancy related reasons that management approved before the commencement of the leave period.

(11) Management may separate an employee from employment after 18 workweeks cumulative leave in a 24 month period regardless of paid leave status unless prohibited by state or federal law. This rule incorporates by reference 29 CFR 825.205 (March 21, 2021) for purposes of calculating workweeks. The agency head shall make the decision to separate the employee in consultation with DHRM.

(12) Management may not pay contributions to benefits on cashed out leave, other than FICA tax, except as it applies to converted sick leave in Subsection R477-7-[~~5~~]6(2) and the retirement benefit in Section R477-7-[~~6~~]7.

(13) Management may not deny a leave request from a member of the State Legislature who requests leave under Section 63A-17-513.

R477-7-2. Holiday Leave.

(1) The following dates are paid holidays for eligible employees:

(a) New Year's Day -- January 1;

(b) Dr. Martin Luther King Jr. Day -- third Monday of January;

(c) Presidents' Day -- third Monday of February;

(d) Good Friday -- Friday preceding Easter Sunday;

(e) Memorial Day -- last Monday of May;

([~~e~~]f) Juneteenth -- June 19;

([~~f~~]g) Independence Day -- July 4;

([~~g~~]h) Pioneer Day -- July 24;

([~~h~~]i) Labor Day -- first Monday of September;

([~~i~~]j) Columbus Day -- second Monday of October;

([~~j~~]k) Veterans' Day -- November 11;

([~~k~~]l) Thanksgiving Day -- fourth Thursday of November;

([~~l~~]m) Christmas Day -- December 25; and

([~~m~~]n) any other day designated as a paid holiday by the Governor.

(2) If a holiday falls or is observed on a regularly scheduled day off, management shall grant an eligible employee equivalent time off or pay.

(a) If a holiday falls on a Sunday, the following Monday shall be observed as a holiday.

(b) If a holiday falls on a Saturday, the preceding Friday shall be observed as a holiday.

(3) If an employee is required to work on an observed holiday, management shall grant the employee appropriate holiday leave or pay.

(4) Management may not grant holiday pay to a new hire before the employee is in a paid status.

(5) Management may not grant holiday pay to a separating employee unless the employee is in a paid status on or after the holiday.

(6) Holiday leave accrues based on time paid for holidays listed in Subsection (1) except Good Friday. An eligible employee who receives pay in the pay period during which Good Friday occurs accrues 4 hours of holiday pay, regardless of the number of hours paid.

R477-7-3. Paid Time Off.

(1) A Paid Time Off Employee accrues paid time off based on the following years of benefits eligible state service:

(a) less than 4 years -- 6 hours per pay period;

(b) at least 4 years and less than 8 years -- 7 hours per pay period;

(c) at least 8 years and less than 12 years -- 8 hours per pay period;

(d) 12 years or more -- 9 hours per pay period.

(2) The following employees shall accrue nine hours of paid time off per pay period, effective from the day the employee is appointed through the duration of the appointment:

(a) schedule AB employees;

(b) agency deputy directors;

(c) division directors appointed to career service exempt positions; and

(d) an employee who is schedule A, FLSA exempt, and who has a direct reporting relationship to an executive director, deputy director, commissioner, or board.

(3) The accrual rate for an employee rehired to a position which receives leave benefits shall be based on any eligible employment in which the employee accrued leave.

(4) A Paid Time Off Employee takes their personal preference day under Subsection 63G-1-301(1)(d) as paid time off, subject to all paid time off procedures.

(5) Management may not restrict the use of paid time off used in a calendar year to less than the amount the employee accrues in the year.

(6) An employee forfeits unused accrued paid time off exceeding 360 hours during year end processing for each calendar year unless the DHRM Division Director authorizes an extension to this timeframe for a specific number of hours.

(7) An agency may payout an employee's paid time off under conditions not connected with separation from employment with authorization from the DHRM Division Director and GOPB.

(8) Paid time off used for purposes outlined in Subsection R477-7-5(2), governing sick leave:

(a) may be pre-approved by management; or

(b) be approved under sick leave procedures.

R477-7-[~~3~~]4. Annual Leave.

(1) An eligible employee who is not a Paid Time Off Employee accrues leave based on the following years of benefits eligible state service:

(a) less than five years -- four hours per pay period;

(b) at least five and less than ten years -- five hours per pay period;

(c) at least ten and less than 20 years -- six hours per pay period; or

(d) 20 years or more -- seven hours per pay period.

(2) The following employees shall accrue seven hours of annual leave per pay period, effective from the day the employee is appointed through the duration of the appointment:

(a) schedule AB employees;

(b) agency deputy directors;

(c) division directors appointed to career service exempt positions; and

(d) an employee who is schedule A, FLSA exempt, and who has a direct reporting relationship to an executive director, deputy director, commissioner, or board.

(3) The accrual rate for an employee rehired to a position which receives leave benefits shall be based on any eligible employment in which the employee accrued leave.

(4) An employee[~~'s~~] who is not a Paid Time Off Employee takes their personal preference day under Subsection 63G-1-301(1)(d) [~~is taken~~]as annual leave, subject to all annual leave procedures.

(5) Management may not restrict the use of annual leave used in a calendar year to less than the amount the employee accrues in the year.

(6) An employee forfeits unused accrued annual leave time exceeding 320 hours during year end processing for each calendar year unless the DHRM Division Director authorizes an extension to this timeframe for a specific number of hours.

(7) An agency may payout an employee's annual leave hours under conditions not connected with separation from employment with authorization from the DHRM Division Director and GOPB.

R477-7-[4]5. Sick Leave.

(1) An eligible employee who is not a Paid Time Off Employee accrues sick leave, not to exceed four hours per pay period. Sick leave accrues without limit.

(2) Management may approve the use of sick leave when:

(a) an employee becomes a parent as described in Subsection R477-7-[~~20~~]21(5);

(b) an employee is absent from duty because of illness, injury, or disability of the employee, their spouse, their child, their parent, or any individual for whom the employee is a legal guardian;

(c) any individual listed in Subsection (2)(b) receives preventive health or dental care; or

(d) a qualifying FMLA purpose.

(3) Agency management may approve the use of sick leave for other unique medical situations.

(4) When management approves the use of sick leave, an employee may use any combination of Program I, Program II, and Program III sick leave.

(5) An employee shall contact management before the beginning of the scheduled workday the employee is absent due to illness or injury.

(6) Management [~~shall~~]may require an employee to produce administratively acceptable evidence to support any request for leave to cover an absence:

(a) that exceeds three consecutive working days[~~.~~]; or

(b) [~~(7) Management may require an employee to produce administratively acceptable evidence regardless of the number of leave hours used for the reasons in Subsection (2) or (3).~~]if there is reason to believe that an employee is using the leave for reasons not listed in Subsection (2) or (3).

([~~8~~]7) An employee separating from state employment forfeits any unused sick leave without compensation unless the leave is utilized for the sick leave retirement benefit under Section R477-7-[~~6~~]7.

(a) Management shall reinstate forfeited sick leave when an employee is rehired into a benefited position within one year of separation due to a reduction in force. Sick leave shall be reinstated as Program I, Program II, and Program III as accrued before the reduction in force.

(b) Management shall reinstate forfeited sick leave when an employee is appointed to a benefits eligible position within one year of leaving a benefits eligible position for reasons other than a reduction in force. Reinstated sick leave shall be Program III sick leave.

(c) Management may not reinstate forfeited sick leave when an employee retires from state service under Title 49, Utah State Retirement and Insurance Benefit Act and is rehired.

R477-7-[~~5~~]6. Converted Sick Leave.

(1) An employee may not accrue converted sick leave hours on or after January 3, 2014. Converted sick leave hours accrued before January 3, 2014 may be used for retirement under Subsection R477-7-[~~5~~]6(6) or cashed out if the employee leaves employment.

(a) Converted sick leave hours accrued before January 1, 2006 shall remain Program I converted sick leave hours.

(b) Converted sick leave hours accrued after January 1, 2006 shall remain Program II converted sick leave hours.

(2) An employee may use converted sick leave as annual leave or as regular sick leave.

(3) When management approves the use of converted sick leave, an employee may use any combination of Program I and Program II converted sick leave.

(4) Employees retiring from LTD who have converted sick leave balances still intact may use these hours for the unused converted sick leave retirement program when they become eligible for retirement.

(5) Upon retirement under Title 49, Utah State Retirement and Insurance Benefit Act, management shall place 25% of the value of an employee's unused converted sick leave, but not to exceed Internal Revenue Service limitations, in the employee's 401(k) account as an employer contribution.

(a) Management shall place converted sick leave hours from Program II in the 401(k) account before hours from Program I.

(b) The employee may use any remaining converted sick leave for:

(i) the purchase of health care insurance and life insurance under Subsection R477-7-[~~6~~]7(3)(a) if the converted sick leave was accrued in Program I ; or

(ii) a contribution into the employee's PEHP health reimbursement account under Subsection R477-7-[~~6~~]7(6)(b) if the converted sick leave was accrued in Program II.

(6) Upon retirement under Title 49, Utah State Retirement and Insurance Benefit Act, an employee may not suspend or defer for future use any Program I converted sick leave hours. This includes retired employees who reemploy with the state and choose to suspend their defined benefit payments and employees participating in phased retirement.

R477-7-[~~6~~]7. Sick Leave Retirement Benefit.

Upon retirement from active employment or LTD under Title 49, Utah State Retirement and Insurance Benefit Act, including when a retirement eligible employee passes away, management shall grant an employee or surviving spouse an unused sick leave retirement benefit under Sections 63A-17-507 and 63A-17-508.

(1) An employee in the Tier I retirement system or the Tier II hybrid retirement system becomes eligible for this benefit when actively retiring under Title 49, Utah State Retirement and Insurance Benefit Act.

(2) An employee in the Tier II defined contribution system becomes eligible when terminating employment on or after the retirement date established by the Utah Retirement Systems. This date reflects service time accrued by the employee as if the employee were in the Tier II hybrid retirement system.

(3)(a) Sick leave hours accrued before January 1, 2006 shall be Program I sick leave hours.

(b) Sick leave hours accrued on or after January 1, 2006, but before January 4, 2014, shall be Program II sick leave hours.

(c) Sick leave hours accrued on or after January 4, 2014, shall be Program III sick leave hours, which shall have no benefit upon retirement.

(4) Management may offer the Unused Sick Leave Retirement Option Program I to an employee who is eligible to receive retirement benefits. Any decision whether or not to participate in this program shall be agency wide and shall be consistent through an entire fiscal year. If management decides to withdraw for the next fiscal year after initially deciding to participate, management shall notify its employees at least 60 days before the new fiscal year begins.

(5) The Unused Sick Leave Retirement Options Program I provides an employee in a participating agency the following benefit.

(a) Management shall place 25% of the value of the unused sick leave and converted sick leave, but not to exceed Internal Revenue Service limitations, in the employee's 401(k) account as an employer contribution.

(b) Management shall place sick leave hours from Program II in the employee's 401(k) account before hours from Program I.

(c) After the 401(k) contribution, management shall use the remaining Program I sick leave hours and converted sick leave hours from Subsection R477-7-[~~5~~]6(5)(b)(i) to provide the following benefit:

(i) The purchase of PEHP health insurance, or a state approved program, and life insurance coverage for the employee until the employee reaches the age eligible for Medicare.

(A) Health insurance is the same or lower level than the level the employee has when they retire pursuant to Section 63A-17-507.

(B) The purchase rate is eight hours of sick leave or converted sick leave for the state paid portion of one month's premium.

(C) The employee shall pay the same percentage of the premium as a current employee on the same plan. The premium amount shall be determined from the approved PEHP retiree rate and not the active employee rates.

(D) The life insurance provided is the minimum authorized coverage provided for state employees when the employee retires.

(ii) When the employee becomes eligible for Medicare, the employee may purchase a Medicare supplement policy provided by PEHP at the rate of eight hours of sick leave or converted sick leave for one month's premium.

(iii) When the employee becomes eligible for Medicare, the employee may purchase a PEHP health insurance policy, or another state approved policy, for a spouse until the spouse is eligible for Medicare.

(A) The purchase rate is eight hours of sick leave or converted sick leave for one month's premium.

(B) The employee shall pay the same percentage of the premium as a current employee on the same plan. The premium amount shall be determined from the approved PEHP retiree rate and not the active employee rates.

(iv) When the spouse reaches the age eligible for Medicare, the employee may purchase a Medicare supplement policy provided by PEHP for the spouse at the rate of eight hours of sick leave or converted sick leave for one month's premium.

(v) In the event an employee is killed in the line of duty, the employee's spouse is eligible to use the employee's available sick leave hours for the purchase of additional medical coverage under Section 63A-17-804.

(d) Employees retiring from LTD who have sick leave balances still intact may use these hours for the unused sick leave retirement program when they become eligible for retirement.

(e) Upon retirement under Title 49, Utah State Retirement and Insurance Benefit Act, an employee may not suspend or defer for future use any Program I sick leave hours. This includes retired employees who reemploy with the state and choose to suspend their defined benefit payments and employees participating in phased retirement.

(6) The Unused Sick Leave Retirement Option Program II provides an employee the following benefit:

(a) Management shall place 25% of the value of the unused sick leave and converted sick leave, but not to exceed Internal Revenue Service limitations, in the employee's 401(k) account as an employer contribution.

(b) After the 401(k) contribution, management shall deposit the remaining sick leave hours and the converted sick leave hours from Subsection R477-7-[~~5~~]6(5)(b)(ii) in the employee's PEHP health reimbursement account at the greater of:

(i) the employee's rate of pay at retirement; or

(ii) the average rate of pay of state employees who retired in the same retirement system in the previous calendar year.

(c) A retired employee who is reemployed in a benefited position with the state is not eligible for a benefit calculated on any Program II sick leave hours unless:

(i) the employee voluntarily suspends their pension;

(ii) the employee was separated for one year or more;

(iii) the employee was reemployed before January 2, 2014; and

(iv) the employee works for two years or more after reemployment to receive this benefit.

(7) A retired employee who is reemployed in a benefited position with the state after January 3, 2014 accrues Program III sick leave, which has no benefit upon subsequent retirement.

R477-7-[~~7~~]8. Administrative Leave.

(1) Management may grant administrative leave to any employee consistent with agency policy for the following reasons:

(a) administrative;

(i) governor approved holiday leave;

(ii) during management decisions that benefit the organization;

(iii) when no work is available due to unavoidable conditions or influences; or

(iv) other reasons consistent with agency policy;

(b) protected;

(i) suspension with pay pending hearing results;

(ii) personnel decision-making before discipline;

(iii) removal from adverse or hostile work environment situations;

(iv) fitness for duty or employee assistance; or

(v) other reasons consistent with agency policy;

(c) reward in lieu of cash;

(i) the agency head or designee may grant paid administrative leave up to one day per occurrence;

(ii) management may not grant administrative leave exceeding one day without written approval from the agency head;

(iii) management may not grant more than 40 hours of administrative leave per fiscal year as a reward in lieu of cash;

(iv) management may grant administrative leave as a reward in lieu of cash to employees of another agency if both agency heads agree in advance; or

(d) employee education assistance.

(2) Management shall grant an employee up to two hours of administrative leave to vote in an official election if the employee has fewer than three total hours off the job between the time the polls open and close, and the employee applies for the leave at least 24 hours in advance. Management may specify the hours when the employee may be absent.

(3) Management shall grant an employee up to four hours of administrative leave per fiscal year for mental health care or mental health care education consistent with the Governor's Executive Order, 10/12/2021. The leave may be used intermittently in increments of at least one hour. Employees must obtain advance approval to minimize disruptions to operations. Management may not require a doctor's note or any other proof of attendance or participation in mental health promoting activities.

(4) Management shall include employees who are on leave under the FMLA or military leave under USERRA in a grant of administrative leave for non-performance based purposes if the leave would have been given had the employee been in a working status.

(5) Administrative leave taken shall be documented in the employee's leave record.

(6) Administrative leave is not an employee right and management may grant it disparately within its workforce depending on agency needs.

R477-7-[~~8~~]9. Jury Leave.

(1) An employee is entitled to a leave of absence from a regularly scheduled work day with full pay when answering a jury summons or serving on a jury and may choose:

(a) to use their own accrued leave and keep juror's fees; or

(b) to use jury leave and return any juror's fee to agency finance or agency payroll staff for deposit with the State Treasurer.

(2) An employee who participates in a court or administrative proceeding in any capacity as part of the employee's position, in obedience to a subpoena, under direction by proper authority, or as directed by management, shall record such time as work time and may not use jury leave.

(3) An employee may not use work time or jury leave when absent to litigate matters unrelated to state employment.

R477-7-[~~9~~]10. Bereavement Leave.

Upon request from the employee, management shall grant at least three work days of bereavement leave per occurrence with pay following the death of a member of the employee's immediate family or when a pregnancy ends in miscarriage or stillbirth under the conditions set forth in Section 63A-17-106.

(1) "Immediate Family" means relatives of the employee or spouse including in-laws, step-relatives, or equivalent relationship as follows:

(a) spouse;

(b) parents;

(c) siblings;

(d) children;

(e) any level of grandparents; or

(f) any level of grandchildren.

(2) Management may grant bereavement leave for other unique family relationships.

(3) Management may not charge bereavement leave against an employee's accrued leave balances.

R477-7-1[~~0~~]1. Military Leave.

Under Section 71A-8-102, management shall grant up to 160 hours of paid military leave each calendar year to a benefited or non-benefited employee who is a member of the National Guard or Military Reserves and is on official military orders. Military leave for part-time employees is prorated to be no more than the average hours worked in the last 12 months, or if employed less than 12 months, the average hours worked since the date of hire.

(1) An eligible employee may use any combination of military leave, accrued leave, or leave without pay under Section R477-7-[~~13~~]14.

(2) An eligible employee may only use accrued sick leave if the reason for leave meets the conditions in Section R477-7-[~~4~~]5.

(3) An employee on military leave is eligible for any service awards or non-performance administrative leave the employee would otherwise be eligible to receive.

(4) An employee shall notify management of official military orders as soon as possible.

(5) Upon an employee's release from official military orders under honorable conditions, management shall place the employee in a position in the following order of priority.

(a) If the period of service was for less than 91 days, management shall place the employee:

(i) in the same position the employee held on the date of the commencement of the service in the uniformed services; or

(ii) in the same position the employee would have held if the continuous employment of the employee had not been interrupted by the service.

(b) If the period of service was for more than 90 days, management shall place the employee:

(i) in a position of like seniority, status, and salary, of the position the employee held on the date of the commencement of the service in the uniformed services; or

(ii) in a position of like seniority, status, and salary the employee would have held if the continuous employment of the employee had not been interrupted by the service.

(c) When a disability is incurred or aggravated while on official military orders, the employing agency shall adhere to the Uniformed Services Employment and Reemployment Rights Act, 38 U.S.C. 4301, et seq.

(d) An employee is entitled to reemployment rights and benefits including increased pension and leave accrual to which the employee would have been entitled had the employee not been absent due to military service. An employee entering military leave may elect to have payment for annual leave or paid time off deferred.

(6) To be reemployed, an employee shall present evidence of military service, and:

(a) for service less than 31 days, return at the beginning of the next regularly scheduled work period on the first full day after release from service unless impossible or unreasonable through no fault of the employee;

(b) for service of more than 30 days but less than 181 days, submit a request for reemployment within 14 days of release from service, unless impossible or unreasonable through no fault of the employee; or

(c) for service of more than 180 days, submit a request for reemployment within 90 days of release from service.

R477-7-1[~~1~~]2. Disaster Relief Volunteer Leave.

(1) An agency head or designee may grant an employee leave from work with pay for an aggregate of 15 working days in any 12-month period to participate in disaster relief services for a non-governmental disaster relief organization. An employee is not eligible for disaster relief volunteer leave unless they are certified as a disaster relief volunteer and file a written request with the employing agency. The request shall include:

(a) a copy of a written request for the employee's services from an official of the disaster relief organization;

(b) the anticipated duration of the absence;

(c) the type of service the employee is to provide; and

(d) the nature and location of the disaster where the employee's services will be provided.

(2) Management may not dismiss an employee who is absent from or late to work if the absence or tardiness was a result of the employee acting as an emergency services volunteer as defined in Section 34-55-102.

(a) Management may request a written statement to verify the employee's status as an emergency services volunteer.

(b) An emergency services volunteer is not entitled to paid leave except as provided in Subsection (1), but may use their own accrued leave or leave without pay.

R477-7-1[~~2~~]3. Organ Donor Leave.

Management shall grant an employee who serves as a bone marrow or human organ donor paid leave for the donation and recovery as follows:

(1) up to seven days of paid leave for donation of bone marrow; and

(2) up to 30 days of paid leave for donation of a human organ.

R477-7-1[~~3~~]4. Leave Without Pay.

(1) An employee shall apply in writing to management and receive management's approval before taking leave without pay.

(2) Management may not grant leave without pay unless the employee is expected to return to work.

(3) Management may deny a request for leave without pay when documentation from one or more qualified healthcare providers clearly establishes that the employee has a permanent condition preventing the employee from returning to the last held regular position unless by state or federal law requires the leave to be granted.

(4) An employee who receives no compensation for a complete pay period shall be responsible for payment of the full premium of state provided benefits.

(5) Management shall place an employee who returns to work on or before the expiration of leave without pay in a position with comparable pay and seniority to the previously held position.

(6) Upon request, an employee who is granted this leave shall provide a monthly return to work status update to the employee's supervisor.

R477-7-1[4]5. Furlough.

Management may furlough employees as a means of saving salary costs in lieu of or in addition to a reduction in force. The agency head shall approve furlough plans subject to the following conditions:

(1) Furlough hours count for purposes of annual leave, sick leave, paid time off, and holiday leave accrual.

(2) Management pays for any state paid benefits:

(a) at the full rate for benefits with fixed costs, regardless of how many days an employee is furloughed; and

(b) as a percentage of actual wages for benefits paid as a percentage of actual wages, including a pay period with no actual wages.

(3) An employee who is furloughed is responsible to pay the employee portion of any benefits. Voluntary benefits remain entirely at the employee's expense.

(4) An employee shall return to the current position.

(5) Management shall apply the furlough equitably to any person in a given class, program staff, or organization.

R477-7-1[~~5~~]6. Family and Medical Leave.

(1) An eligible employee may take up to 12 workweeks of family and medical leave each calendar year for any of the following qualifying reasons:

(a) birth of a child;

(b) adoption of a child;

(c) placement of a foster child;

(d) a serious health condition of the employee;

(e) care of a spouse, child, or parent with a serious medical condition; or

(f) a qualifying exigency arising as a result of a spouse, son, daughter or parent being on active duty or having been notified of an impending call or order to active duty in the Armed Forces.

(2) An eligible employee may take up to 26 workweeks of family and medical leave during a 12-month period to care for a spouse, son, daughter, parent, or next of kin who is a covered servicemember as defined by the National Defense Authorization Act.

(3) An employee on FMLA leave continues to receive the same health insurance benefits the employee was receiving before the commencement of FMLA leave provided the employee pays the employee share of the health insurance premium.

(4) An employee on FMLA leave receives any administrative leave given for non-performance based reasons if the leave would have been given had the employee been in a working status.

(5) An employee is eligible for family and medical leave when the employee:

(a) has been employed by the state for at least 12 months; and

(b) has worked 1,250 hours or more, as determined under FMLA, during the 12-month period immediately preceding the commencement of leave.

(6) To request FMLA leave, the employee or an appropriate spokesperson shall notify management of the need for leave:

(a) thirty days in advance for foreseeable needs; or

(b) as soon as practicable in emergencies.

(7) An employee may use accrued annual leave, sick leave, converted sick leave, paid time off and compensatory time before going into leave without pay status for the designated period of family and medical leave.

(a) An employee who chooses to use accrued annual leave, sick leave, converted sick leave, and compensatory time before going into leave without pay status for the family and medical leave period shall notify the direct supervisor.

(b) If an employee fails to notify the direct supervisor under this subsection, accrued leave will be used to pay the employee's payroll deductions in the following order:

(i) first, Program III sick leave;

(ii) second, compensatory time or annual leave; and

(iii) third, converted sick leave, Program II sick leave, or Program I sick leave.

(8) When an employee chooses to use FMLA leave, management shall designate as FMLA leave any absences related to that qualifying event which occurred when the employee was eligible for FMLA.

(9) An FMLA eligible employee with a serious health condition covered under workers' compensation may use FMLA leave concurrently with the workers' compensation benefit.

(10) If an employee has gone into leave without pay status and fails to return to work after FMLA leave has ended, management may recover, with certain exceptions under 29 CFR 825.213, the health insurance premiums paid by management on the employee's behalf. An employee is considered to have returned to work if the employee returns for at least 30 calendar days.

(11) When leave is taken after childbirth or placement of a healthy child for adoption or foster care, an employee may not take leave intermittently or on a reduced leave schedule unless the employer agrees.

(12) Medical records created for purposes of FMLA and the Americans with Disabilities Act, 42 U.S.C. 12102 are subject to the confidentiality requirements set forth in Section R477-2-5.

R477-7-1[~~6~~]7. Workers' Compensation Leave.

(1) An employee may use accrued leave benefits to supplement the workers' compensation time-loss benefit.

(a) [~~The combination of paid leave, wages, and workers' compensation time-loss benefit may not exceed the gross pay the employee would have received if the accident had not intervened.~~

~~(b)~~]An employee may not use accrued leave to supplement the workers' compensation benefit when:

(i) the employee is declared medically stable by a licensed medical authority;

(ii) the workers compensation fund terminates the benefit;

(iii) the employee refuses to accept appropriate employment offered by the state; or

(iv) the employee is notified of approval for Long Term Disability or Social Security Disability benefits.

([~~e~~]b) An employee [~~shall refund to the state any accrued leave paid which exceeds the gross pay the employee would have received if the accident had not intervened.~~]who receives indemnity benefits with a gross value in excess of $1,000 for a single claim may buy back any portion of accrued leave used under this Subsection as paid time off.

(i) The buy-back shall be processed as a current period payroll adjustment.

(ii) The buy-back rate for leave hours is the employee's wage at the time of the buy-back.

(2) Workers' compensation hours count for purposes of annual leave, sick leave, paid time off, and holiday leave accrual while the employee is receiving a workers' compensation time-loss benefit for up to six months from the last day worked in the regular position.

(3) Health insurance benefits continue for an employee on leave without pay while receiving workers' compensation benefits. The employee is responsible for the payment of the employee share of the premium.

(4) If an employee can return to work in the employee's regular position, management shall place the employee in the previously held position or a similar position at a comparable salary range.

(5) If an employee cannot return to work in the regular position, or if documentation from one or more qualified health care providers clearly establishes that the employee has a permanent condition preventing the employee from returning to the last held regular position, management may separate the employee from state employment unless prohibited by state or federal law. Exceptions may be granted by the agency head in consultation with DHRM.

(6) Management shall take disciplinary action under Rule R477-11 when an employee files a fraudulent workers compensation claim.

R477-7-1[~~7~~]8. Long Term Disability Leave.

(1) Upon approval of an LTD claim:

(a) Management shall stop biweekly salary payments to the employee.

(b) Management shall pay the employee for any remaining balances of annual leave or paid time off, and compensatory hours earned by FLSA non-exempt employees in a lump sum payment unless the employee requests in writing to receive it upon separation from state employment. Upon return to work from an approved leave of absence, the employee may buy back annual leave or paid time off at the current hourly rate.

(c) An employee with a converted sick leave balance when they are approved for LTD may choose to receive a lump sum payout of any part of the balance or to keep the balance intact to pay for health and life insurance upon retirement. The payout shall be at the employee's wage rate when they are approved for LTD.

(d) An employee who has been separated from state employment but retires under Title 49, Utah State Retirement and Insurance Benefit Act while receiving LTD may utilize unused sick leave for health and life insurance under Section R477-7-[~~6~~]7 when the employee is otherwise eligible for the sick leave retirement benefit.

(2) An employee in the Tier I retirement system shall continue to accrue service credit for retirement purposes while receiving long term disability benefits.

(3) An employee who was not separated from employment may return to work following long term disability when they provide an administratively acceptable medical release allowing a return to work.

(4) Long term disability benefits are provided to eligible employees under Title 49, Chapter 21, Public Employees' Long-Term Disability Act.

R477-7-1[~~8~~]9. Disabled Law Enforcement Officer Amendments.

(1) When a law enforcement officer or state correctional officer, as defined in Section 63A-17-512, is injured in the course of employment, as defined in Section 63A-17-512, management shall approve a leave of absence with 100% of the officer's regular monthly salary and benefits:

(a) during the period the employee has a temporary disability; or

(b) in the case of a total disability, until the employee is eligible for an unreduced retirement under Title 49, Utah State Retirement and Insurance Benefit Act or reaches the retirement age of 62 years, whichever occurs first.

(2) The eligible employee shall disclose to management any time-loss benefit amounts received by, or payable to, the employee, from outside sources, as soon as the employee is made aware. These amounts do not include benefits received from sources in which the employee pays the full premium.

(3) Management shall apply [~~Section R477-7-16, workers compensation leave, and~~]Section R477-7-1[~~7~~]8, long term disability leave rules first. Management then adds any benefit amounts received under Subsection (2). If the total of these benefits is less than 100% of the employee's monthly salary and benefits, management shall make arrangements through payroll to pay the employee the difference.

(4) DHRM shall work with the Division of Risk Management, Workers' Compensation, and the Public Employee's Health Program on a periodic and case-by-case basis to assure that eligible employees receive full benefits. If at any time it is discovered that the employee is receiving less than 100% of their regular monthly salary and benefits, management shall make up the difference to the employee.

(5) If an employee discloses other time-loss benefits received under Subsection (2) after these additional payments by the agency have been made, the employee shall reimburse the agency for salary and benefits paid in overage.

R477-7-[~~19~~]20. Leave Bank.

Agencies shall operate a leave bank program pursuant to Section 63A-17-516 and the following provisions.

(1) A leave bank program shall include an agency policy with the following provisions.

(a) A statement that access to the leave bank is not an employee right and shall be authorized at management's discretion.

(b) A requirement that any application for leave from the leave bank be supported by administratively acceptable medical documentation.

(c) A provision prohibiting leave donors, supervisors, managers, or management teams from reviewing any employee's medical certifications or physician statements.

(d) A requirement that an employee may not receive donated leave until any individually accrued leave is exhausted.

(e) A statement that leave is accrued if an employee receives sick leave donated from an approved leave bank program.

(f) A requirement that employees using donated leave request and receive written consent from the agency head to work a second job.

(g) A statement that only compensatory time earned by an FLSA non-exempt employee, annual leave, paid time off, and converted sick leave hours may be donated to a leave bank.

(h) A statement that employees may donate leave hours to another agency only if both agencies agree to allow the donation.

(2) Any medical records created for leave bank program purposes are subject to the confidentiality requirements of Section R477-2-5.

R477-7-2[~~0~~]1. Adoption, Foster, Parental, and Postpartum Recovery Leave.

(1) An employee is eligible for adoption, foster, parental, or postpartum recovery leave when the employee:

(a) is eligible for benefits under Subsections R477-6-8(1) and R477-7-1(1);

(b) is not reemployed post retirement as defined in Section 49-11-1202; and

(c) is not an employee of an independent entity as defined in Section 63E-1-102.

(2) An employee or a spokesperson shall notify management of their plan to use adoption, foster, parental, or postpartum recovery leave:

(a) thirty days in advance; or

(b) as soon as practicable in emergencies.

(3) Management may not charge adoption, foster, parental, or postpartum recovery leave against any accrued leave balance on the employee's record.

(4) No person may interfere with an employee's intent to use adoption, foster, parental, or postpartum recovery leave or retaliate against an employee who receives parental or postpartum recovery leave.

(5) Parental leave is administered as follows:

(a) An employee is qualified for parental leave when the employee is assuming a parental role for a child or incapacitated adult and:

(i) is the child's biological parent;

(ii) is the spouse of the person who gave birth to the child;

(iii) is the adoptive parent of the child, unless the employee is the spouse of the pre-existing parent;

(iv) is the intended parent of a child born under a valid gestational agreement; or

(v) is appointed the legal guardian of a child or incapacitated adult.

(b) Management shall grant up to three weeks of paid parental leave to an employee who gives notice that they intend to use paid parental leave.

(c) Management calculates the amount of leave for each employee based on the number of hours the employee would have worked per week if they had not taken parental leave.

(d) An employee may use parental leave within the six months immediately following the qualifying event from Subsection (5)(a).

(e) An employee may use parental leave intermittently when:

(i) the employee and management have written mutual consent for intermittent use; or

(ii) a health care provider certifies the need for intermittent leave due to the child's serious health condition.

(f) Parental leave:

(i) runs concurrently with leave under the FMLA;

(ii) runs consecutively with postpartum recovery leave pursuant to Subsection (6)(f)(ii);

(iii) is limited to three weeks within any 12-month period; and

(iv) does not increase when:

(A) more than one child is born from the same pregnancy;

(B) more than one child is adopted; or

(C) the employee is appointed legal guardian of more than one minor child or incapacitated adult.

(6) Postpartum recovery leave is administered as follows:

(a) An employee is qualified for postpartum recovery leave when the employee gives birth at 20 weeks or greater gestation.

(b) Management shall grant up to six weeks of paid postpartum recovery leave to an employee who gives notice that they intend to use paid postpartum recovery leave.

(c) Management calculates the amount of leave for each employee based on the number of hours the employee would have worked per week if they had not taken postpartum recovery leave.

(d) Postpartum recovery leave begins on the date the employee gives birth unless a health care provider certifies the medical necessity of an earlier start date.

(e) An employee shall use postpartum recovery leave in a single continuous period, unless otherwise authorized in writing by the director of the division.

(f) Postpartum recovery leave:

(i) runs concurrently with leave under the FMLA;

(ii) runs consecutively with parental leave under Subsection (6) with postpartum recovery leave used first pursuant to restrictions in Subsection (d); and

(iii) does not increase when more than one child is born from the same pregnancy.

(7) Adoption leave is administered as follows:

(a) An employee is qualified for adoption leave when they legally adopt a young child, who is younger than six years old, unless the employee is the spouse of the pre-existing parent;

(b) Management shall grant up to six weeks of paid adoption leave within a single 12-month period to an employee who gives notice that they intend to use adoption leave. If two adoption leave eligible employees adopt a child, they must share the six weeks of leave;

(c) Management calculates the amount of leave for each employee based on the number of hours the employee would have worked per week if they had not taken adoption leave;

(d) An employee may use adoption leave within the six months immediately following the adoption of the young child;

(e) Adoption leave may not begin before the day the employee adopts the child;

(f) An employee may use adoption leave intermittently when:

(i) the employee and management have written mutual consent for intermittent use; or

(ii) a health care provider certifies the need for intermittent leave due to the child's serious health condition;

(g) Adoption leave:

(i) runs concurrently with leave under the FMLA;

(ii) runs consecutively with parental leave taken for the adoption of a child;

(iii) is limited to six weeks within any 12-month period; and

(iv) does not increase when the employee adopts more than one child.

(8) Foster leave is administered as follows:

(a) An employee is qualified for foster leave when a child is placed with the employee for foster care;

(b) Management shall grant up to four weeks of paid foster leave to an employee who gives notice they intend to use paid foster leave. If two foster leave eligible employees foster a child, they must share the four weeks of leave;

(c) Management calculates the amount of leave for each employee based on the number of hours the employee would have worked per week if they had not taken foster leave;

(d) An employee may use foster leave within the six months immediately following the placement of the child with the eligible employee for foster care;

(e) Foster leave may not begin before the day the child is placed with the employee for foster care;

(f) Foster leave may be used intermittently;

(g) Foster leave:

(i) runs concurrently with leave under the FMLA;

(ii) is limited to four weeks within any 12-month period; and

(iii) does not increase when more than one child is placed with an employee for foster care;

(h) An employee who uses any amount of foster leave may not use parental leave with respect to the same child or adoption leave with respect to the same young child.

R477-7-2[~~1~~]2. Safe Leave.

(1) An employee is eligible for safe leave when the employee:

(a) is eligible for benefits under Subsections R477-6-8(1) and R477-7-1(1);

(b) is not reemployed post retirement as defined in Section 49-11-1202; and

(c) is not an employee of an independent entity as defined in Section 63E-1-102;

(d) is not an employee of the State Board of Education; and

(e) the employee has exhausted all annual leave or paid time off, and compensatory leave.

(2) An employee shall notify management of the intended start and stop dates of safe leave:

(a) seven days in advance; or

(b) as soon as practicable when circumstances beyond the employee's control prevent seven days of notice.

(3) Management may not charge safe leave against any accrued leave balance on the employee's record.

(4) No person may interfere with an employee's intent to use safe leave or retaliate against an employee who receives safe leave.

(5) Safe leave is administered as follows:

(a) An employee is qualified for safe leave when the employee or their immediate family member is the victim of domestic violence, sexual assault, stalking, or human trafficking. Immediate family members are parents, spouse, child, sibling, or any other individual whom the employee may claim as a dependent for purposes of state or federal income tax.

(b) Management shall grant up to one week of paid safe leave to an employee who gives notice that they intend to use safe leave.

(c) Management calculates the amount of leave for each employee based on the number of hours the employee would have worked per week if they had not taken safe leave.

(d) An employee may not use safe leave more than two years after the qualifying event from Subsection (5)(a) except to participate in a criminal proceeding related to the event.

(e) An employee may use safe leave intermittently.

(f) Safe leave:

(i) runs concurrently with leave under the FMLA, if applicable;

(ii) is limited to one week within a calendar year; and

(iii) does not increase when more than one qualifying event occurs in a single calendar year.

KEY: holidays, leave benefits, vacations
Date of Last Change: [~~September 29,~~] 2026
Notice of Continuation: March 9, 2022
Authorizing, and Implemented or Interpreted Law: 34-43-103; 39-3-1; 63G-1-301; 63A-17-106; 63A-17-504; 63A-17-505; 71A-8-102(3)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58470**
Rule or section number:	**R477-12-3**

1. Agency Information

Title catchline:	Government Operations, Human Resource Management
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W

City, state:	Taylorsville, UT
Mailing address:	PO Box 141531
City, state and zip:	Salt Lake City, UT 84114-1531

2. Contact Persons

Name:	Phone:	Email:
Bryan Embley	801-618-6720	bkembley@utah.gov

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

3. General Information

A. Rule or section catchline:

R477-12-3. Reduction in Force

B. Purpose of the new rule or reason for the change:

The amendment implements changes for the paid time off program pursuant to SB 229 (2026 General Session).

C. Summary of the new rule or change:

The change adds paid time off to the list of leave types that an employee may buy back when rehired after separating from employment due to a reduction in force.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 229 (2026 General Session)

5. Fiscal Information

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

A. State budget:

These amendments are not expected to have any fiscal impact on state government revenues or expenditures because these changes are administrative in nature and do not impact budgets.

B. Local governments:

These amendments are not expected to have any fiscal impact on local governments because this rule only applies to the executive branch of state government.

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

These amendments are not expected to have any fiscal impact on small businesses because this rule only applies to the executive branch of state government.

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

These amendments are not expected to have any fiscal impact on non-small businesses because this rule only applies to the executive branch of state government.

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***)**:**

These amendments are not expected to have any fiscal impact on other individuals because this rule only applies to the executive branch of state government.

F. Compliance costs for affected persons:
There are no direct compliance costs for these amendments. This rule only affects the executive branch of state government and will have no impact on other persons. This rule has no financial impact on state employees.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	FY2027	FY2028	FY2029	FY2030	FY2031
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 63A-17-106	Section 63A-17-306	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	01/02/2027

13. Agency Authorization Information

Agency head or designee and title:	John Barrand, Division Director, DHRM	Date:	11/02/2026

R477. Government Operations, Human Resource Management.
R477-12. Separations.
R477-12-3. Reduction in Force.

Reductions in force (RIF) are governed by DHRM rules and standard operating procedures.

(1) When management intends to reduce staff in one or more categories of work, management shall develop a work force adjustment plan (WFAP). Management may only give formal, written notification to a career service employee after a WFAP has been reviewed by the DHRM Division Director or designee and approved by the agency head or designee. The following items shall be addressed in the WFAP:

(a) the categories of work to be eliminated;

(b) specific measures taken, if any, to facilitate the placement of affected employees through reassignment or transfer to vacant positions the employee is qualified to fill;

(c) job-related criteria as identified in Subsection R477-12-3(3)(a) used for determining retention points; and

(d) when more than one employee is affected, employees shall be listed in order of retention points.

(2) Management may RIF a career service employee, including an employee covered by USERRA, only when the employee has been identified in a WFAP and notified of the RIF in accordance with Subsection (5).

(3) Management shall calculate retention points when more than one employee is affected within a category of work by giving appropriate consideration for proficiency and seniority with proficiency being the primary factor.

(a) Management may consider performance evaluations and performance information for the past three years when assessing job proficiency.

(b) Management shall calculate seniority as the length of the most recent continuous career service which commenced in a career service position for which the probationary period was successfully completed. Exempt service time after attaining career service status with no break in service shall be counted for purposes of seniority.

(c) In each WFAP, management shall specify the criteria they will use for determining retention points.

(i) Management shall consult with the DHRM Division Director or designee.

(ii) WFAPs shall comply with current DHRM standard operating procedures.

(4) Management shall separate employees in the following order:

(a) first, temporary employees in schedule IN or TL positions;

(b) second, probationary employees; and

(c) third, career service employees with the lowest retention points.

(5) When an employee, including one covered under USERRA, is identified for separation due to a RIF, management shall provide the employee written notification of:

(a) the pending RIF; and

(b) final written notification of separation due to a RIF on the day of separation.

(6) Management shall notify a career service employee separated due to a RIF that they may appeal to the agency head by submitting a written notice of appeal within 20 working days after the date of separation. When an employee submits such an appeal, the agency head shall notify the employee that they may appeal the agency head's decision according to the grievance procedures of the Career Service Review Office.

(7) A career service employee who is separated in a RIF is governed by the rules in place at the time of separation.

(8) When a career service employee who is separated in a RIF applies for a career service position, management shall give preferential consideration to the individual's application score when developing the hiring list as outlined in DHRM standard operating procedures until the individual accepts a career service position.

(9) Management may allow an individual rehired to a career service position to buy back the value of any accumulated annual leave, paid time off, or[~~and~~] converted sick leave that was cashed out when the individual was separated from employment through a RIF as paid time off.

KEY: administrative procedures, employees' rights, grievances, retirement
Date of Last Change: 2026[~~July 1, 2023~~]
Notice of Continuation: March 9, 2022
Authorizing, and Implemented or Interpreted Law: 63A-17-106; 63A-17-306

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58393**
Rule or section number:	**R501-24**

1. Agency Information

Title catchline:	Health and Human Services, Human Services Program Licensing
Building:	Multi-Agency State Office Building
Street address:	195 N 1950 W
City, state:	Salt Lake City, UT

2. Contact Persons

Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	dlbcrules@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:

R501-24. Behavioral Health Receiving Centers

B. Purpose of the new rule or reason for the change:

The purpose of this amendment is to ensure compliance of the Office of Licensing (OL), under the Division of Licensing and Background Checks (DLBC), within the Department of Health and Human Services (department), with HB 472 and HB 572 from the 2026 General Session.

HB 472 (2026) renumbered the statute that outlines the responsibilities of DLBC, including the rulemaking authority of DLBC. This bill made it necessary to update the rulemaking authority reference in this rule.

HB 572 (2026) amended provisions related to the licensing of behavioral health receiving centers regulated by OL.

Additionally, in response to public comment feedback received in April 2026, this filing updates physical space requirements for this type of setting.

C. Summary of the new rule or change:

Throughout this rule, this amendment adds requirements for a licensed center working with a justice involved client as part of a diversion agreement to adopt policies and procedures for communication and coordination to align with HB 572 (2026).

This amendment requires licensed centers to develop, implement, and comply with policy and procedures for notifying diversion contacts of justice involved client's treatment status and progress, as well as for licensed centers to provide training to staff on the policy and procedures.

This amendment also updates the statutory reference for DLBC rulemaking authority to align with HB 472 (2026).

Additionally, the amendment updates and clarifies physical space requirements under Section R501-24-13 to allow for more flexibility in this type of temporary setting for clients seeking immediate behavioral health support.

The filing also makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 472 (2026 General Session), HB 572 (2026 General Session)

5. Fiscal Information

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, as OL has no licensed 23-hour behavioral health receiving centers at the time this filing was drafted.

This filing adds requirements for licensed centers to develop, implement, and comply with policies and procedures for communication and collaboration efforts with diversion contacts for any justice involved client and provide staff training on these policies and procedures.

The filing also updates and clarifies physical space requirements for this type of temporary setting to allow for more flexibility for licensed centers to service clients seeking immediate and stabilizing behavioral health support.

Additionally, the filing updates the statutory reference for the rulemaking authority of DLBC to align with HB 472 (2026).

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.

Any costs associated with the implementation of HB 472 (2026) have been captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0472S01.fn.pdf.

Any costs associated with the implementation of HB 572 (2026) have been captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0572S06.fn.pdf.

B. Local governments:

There is no anticipated cost or savings on local governments as a result of this filing, as OL has no licensed 23-hour behavioral health receiving centers at the time this filing was drafted.

This filing adds requirements for licensed centers to develop, implement, and comply with policies and procedures for communication and collaboration efforts with diversion contacts for any justice involved client and provide staff training on these policies and procedures.

The filing also updates and clarifies physical space requirements for this type of temporary setting to allow for more flexibility for licensed centers to service clients seeking immediate and stabilizing behavioral health support.

Additionally, the filing updates the statutory reference for the rulemaking authority of DLBC to align with HB 472 (2026).

The department does not anticipate any fiscal impact on local governments as a result of the style and formatting changes included in this rule amendment.

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, as OL has no licensed 23-hour behavioral health receiving centers at the time this filing was drafted.

This filing adds requirements for licensed centers to develop, implement, and comply with policies and procedures for communication and collaboration efforts with diversion contacts for any justice involved client and provide staff training on these policies and procedures.

The filing also updates and clarifies physical space requirements for this type of temporary setting to allow for more flexibility for licensed centers to service clients seeking immediate and stabilizing behavioral health support.

Additionally, the filing updates the statutory reference for the rulemaking authority of DLBC to align with HB 472 (2026).

The department does not anticipate any fiscal impact on small businesses as a result of the style and formatting 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 as a result of this filing, as OL has no licensed 23-hour behavioral health receiving centers at the time this filing was drafted.

This filing adds requirements for licensed centers to develop, implement, and comply with policies and procedures for communication and collaboration efforts with diversion contacts for any justice involved client and provide staff training on these policies and procedures.

The filing also updates and clarifies physical space requirements for this type of temporary setting to allow for more flexibility for licensed centers to service clients seeking immediate and stabilizing behavioral health support.

Additionally, the filing updates the statutory reference for the rulemaking authority of DLBC to align with HB 472 (2026).

The department does not anticipate any fiscal impact on non-small businesses as a result of the style and formatting 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***)**:**

There is no anticipated cost or savings to other persons as a result of this filing, as OL has no licensed 23-hour behavioral health receiving centers at the time this filing was drafted.

This filing adds requirements for licensed centers to develop, implement, and comply with policies and procedures for communication and collaboration efforts with diversion contacts for any justice involved client and provide staff training on these policies and procedures.

The filing also updates and clarifies physical space requirements for this type of temporary setting to allow for more flexibility for licensed centers to service clients seeking immediate and stabilizing behavioral health support.

Additionally, the filing updates the statutory reference for the rulemaking authority of DLBC to align with HB 472.

The department does not anticipate any fiscal impact on other persons as a result of the style and formatting changes included in this rule amendment.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, which are OL as the regulatory body for licensed centers and 23-hour behavioral receiving centers, as there are no licensed behavioral health receiving centers at the time this filing was drafted.

The filing adds requirements for licensed centers to develop, implement, and comply with policies and procedures for communication and collaboration efforts with diversion contacts for any justice involved client and provide staff training on these policies and procedures.

The filing also updates and clarifies physical space requirements for this type of temporary setting to allow for more flexibility for licensed centers to service clients seeking immediate and stabilizing behavioral health support.

Additionally, the filing updates the statutory reference for the rulemaking authority of DLBC to align with HB 472 (2026).

The department does not anticipate any compliance costs as a result of the style and formatting changes included in this filing.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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	Section 26B-2-902	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/25/2026

R501. Health and Human Services, Human Services Program Licensing.
R501-24. Behavioral Health Receiving Centers.
R501-24-1. Authority and Purpose.

(1) Sections 26B-2-[~~104~~]135 and 26B-2-[~~135~~]902 authorize 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 26B-2-135, and Rule 380-600. Additionally:

(1) "Direct Access Clearance System" or "DACS" means the online system used by the Office of Background Processing (OBP), under the Division of Licensing and Background Checks, for processing and monitoring background checks for any applicant 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;

(c) Rule R501-14; and

(d) 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) any coordination effort with the local mental health authority;

(d) de-escalation practices and techniques;

(e) diversion communication with the responsible law enforcement agency or diversion contact for any client who is a justice involved individual;

([~~e~~]f) emergency evacuation procedures and conducting drills to ensure each staff knows where to locate emergency exits and assembly points;

([~~f~~]g) identifying any situation requiring medical attention, including using an opioid overdose reversal kit;

([~~g~~]h) nuisance and disruptive behavior;

([~~h~~]i) prohibited items;

([~~i~~]j) responding to significant criminal activity;

([~~j~~]k) responding to a significant medical emergency;

([~~k~~]l) search procedure;

([~~l~~]m) securing personal belongings;

([~~m~~]n) storage and administration of medication, if applicable;

([~~n~~]o) suicide prevention;

([~~o~~]p) transportation of any client, if applicable; and

([~~p~~]q) use of restraint and seclusion.

(5) The provider shall have a policy on access to a firearm that complies with Title 53, Chapter 5a, Part 3, Concealed Firearm Permits.

(6) The provider shall have a policy that complies with Title 26B, Chapter 7, Part 5, Regulation of Smoking, Tobacco Products, and Nicotine Products.

R501-24-6. Administration.

(1) The provider shall ensure the facility does not take placement of an individual whose needs exceed the scope or ability of the facility to reasonably manage.

(2) Each provider shall identify each key decision maker and service provider associated with the license application who is accountable for compliance with licensing rules.

(3) 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.

(4) 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.

(5) The provider shall ensure there is a means to communicate with each client at a facility, including an interpreter as needed.

(6) The provider shall comply with Subsection R380-600-7(16) regarding critical incident reporting.

(7) 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.

(8) 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.

(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) 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.

(11) 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)(a) The provider shall ensure any client at the facility is supervised during that client's stay.

(b) The provider shall conduct and document line of sight check-ins for each client at least every 15 minutes.

(2) The provider shall ensure that at least two direct care staff are on-site for every:

(a) 30 clients if each client is an adult; or

(b) 16 clients if any client is under 18 years old.

(3) The provider shall ensure each client who is an adult 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;

(c) each client's medical stability;[~~ and~~]

(d) a suicide risk screening for each client[~~.~~]; and

(e) whether the client is a justice involved individual.

(2) If a client is a justice involved individual, at intake, the staff shall:

(a) document any available information regarding the justice involved individual's diversion; and

(b) provide the justice involved individual with the opportunity to complete and sign:

(i) a consent form for disclosure of any mental health or substance use disorder diagnosis, in accordance with Subsection 26B-4-1008(3); or

(ii) a similar form that meets the requirements of Subsection 26B-4-1008(3).

([~~2~~]3) A provider may not admit an individual who is unresponsive or unable to consent to care.

([~~3~~]4)(a) A behavioral health receiving center shall complete a discharge summary for each client served within 23 hours of admission.

(b) A behavioral health receiving center shall provide a transfer plan within the discharge summary for any client transfer, including any discharge to a separate 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[~~.~~]; and

(vii) for any client who is a justice involved individual:

(A) a consent form, as described in Subsection R501-24-8(2)(b);

(B) documentation of initial and ongoing communication with the responsible law enforcement agency or diversion contact;

(C) the diversion agreement or diversion information; and

(D) documentation of each applicable circumstance described in Subsection 26B-2-135(2)(d)(i).

(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;

(e) best practices for working with an individual with a disability;[~~ and~~]

(f) recognizing and addressing signs of abuse and neglect[~~.~~]; and

(g) diversion communication with a responsible law enforcement agency or diversion contact for any client who is a justice involved individual.

(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;~~

] ([~~e~~]b) each client is provided with clean, comfortable bedding that is laundered:

(i) when soiled; and

(ii) before being provided to a different person;

([~~d~~]c) the sleeping area for a male client shall be separate from the sleeping area for a female client; and

([~~e~~]d) 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. Required Diversion Communication for a Justice Involved Individual.
(1)(a) Upon intake of any justice involved individual, each provider shall communicate with the responsible law enforcement agency or diversion contact regarding the participation of the justice involved individual in the treatment program.
(b) If the justice involved individual does not complete and sign a consent form, as described in Subsection R501-24-8(2)(b), the provider may request the justice involved individual's completed and signed consent form from the responsible law enforcement agency or diversion contact.
(c) The provider shall request diversion information from the responsible law enforcement agency or diversion contact to:
(i) develop a potential treatment program recommendation and referral for the individual; or
(ii) understand the terms of the diversion to report any violation to the responsible law enforcement agency or diversion contact.
(2) While the justice involved individual is participating in a treatment program, the provider shall communicate with the diversion contact regarding:
(a) Subsection 26B-2-135(2)(d)(i)(C); or
(b) Subsection 26B-2-135(2)(d)(i)(D).
(3)(a) Within 24 hours of a justice involved individual leaving or discharging from the facility, the provider shall send to the justice involved individual's diversion contact:
(i) the discharge summary; and
(ii) documentation of each applicable circumstance described in Subsection 26B-2-135(2)(d)(i).
(b) Notification requirements in Subsection (3)(a) do not apply if the provider has made a referral for the justice involved individual to another health care provider in accordance with Subsection 26B-2-135(3)(a).

R501-24-1[~~3~~]4. 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~~]receiving centers
Date of Last Change: [~~June 16,~~]2026
Authorizing, and Implemented or Interpreted Law: 26B-2-[~~104~~]135; 26B-2-[~~135~~]902

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58410**
Rule or section number:	**R512-33**

1. Agency Information

Title catchline:	Health and Human Services, Child and Family Services
Building:	Multi-Agency State Office Building
Street address:	195 N 1950 W
City, state:	Salt Lake City, UT
Mailing address:	195 N 1950 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
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Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

3. General Information

A. Rule or section catchline:

R512-33. Continuity of Treatment and Services for a Child in Foster Care

B. Purpose of the new rule or reason for the change:

HB 590 passed in the 2026 General Session enacted Section 80-2-310, which requires the Division of Child and Family Services (division) to make rules implementing that section.

This new rule is necessary for compliance with that statutory requirement.

C. Summary of the new rule or change:

This new rule implements requirements to establish and maintain continuity of mental health treatment for children as they enter, remain in, and leave division custody.

This rule requires the division to evaluate existing therapist relationships, facilitate Medicaid enrollment or alternative payment agreements, and coordinate ongoing care or transition planning.

Requirements include establishing temporary single-payer arrangements and supporting children as they transition out of care upon reaching the age of majority.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 590 (2026 General Session)

5. Fiscal Information

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

A. State budget:

The fiscal impact of this new rule on the state budget is inestimable due to a lack of baseline tracking data. The division cannot project the total number of children entering or exiting custody who will possess an already established relationship with a qualifying mental health provider.

Because the precise volume of eligible children and their respective frequencies are unknown, the aggregate cost to the state cannot be calculated.

The fiscal note for HB 590 (2026) captures anticipated expenditures as a result of the bill and can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0590S01.fn.pdf.

B. Local governments:

The fiscal impact of this new rule on local governments is inestimable due to a lack of tracking data.

Local mental health agencies lack data to project how many children entering or exiting custody will require a single case agreement to maintain continuity of care with an existing provider.

Because local agencies cannot anticipate the volume of these specialized agreements or the variable reimbursement rates associated with them, the total localized cost is inestimable.

C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is no anticipated fiscal impact on small businesses because this rule does not apply to this group.
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 because this rule does not apply to this group.
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 other persons because this rule does not apply to this group.
F. Compliance costs for affected persons:
Affected persons are identified as the state budget and local governments, but compliance costs for these affected persons are inestimable due to a lack of tracking data. The division cannot project the total number of children entering or exiting custody who will possess an already established relationship with a qualifying mental health provider. Because the precise volume of eligible children and their respective frequencies are unknown, the compliance cost for the state cannot be calculated. Local mental health agencies lack data to project how many children entering or exiting custody will require a single case agreement to maintain continuity of care with an existing provider. Because local agencies cannot anticipate the volume of these specialized agreements or the variable reimbursement rates associated with them, the compliance cost for local governments is inestimable. The fiscal note for HB 590 (2026) captures anticipated expenditures as a result of the bill and can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0590S01.fn.pdf.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	inestimable	inestimable	inestimable	inestimable	inestimable
Local Governments	inestimable	inestimable	inestimable	inestimable	inestimable
Small Businesses	$0	$0	$0	$0	$0
Non-Small Businesses	$0	$0	$0	$0	$0
Other Persons	$0	$0	$0	$0	$0
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	inestimable	inestimable	inestimable	inestimable	inestimable
Local Governments	inestimable	inestimable	inestimable	inestimable	inestimable
Small Businesses	$0	$0	$0	$0	$0
Non-Small Businesses	$0	$0	$0	$0	$0
Other Persons	$0	$0	$0	$0	$0
Total Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Net Fiscal Benefits	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 80-2-310		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/29/2026

R512. Health and Human Services, Child and Family Services.
R512-33. Continuity of Treatment and Services for a Child in Foster Care.
R512-33-1. Authority and Purpose.

(1) Subsection 80-2-310(5) authorizes this rule.

(2) This rule implements Section 80-2-310 by providing the process the division uses to provide continuity of treatment and services for a child in foster care.

R512-33-2. Definitions.

(1) "Child" means the same as defined in Section 80-1-102.

(2) "Custody" means the same as defined in Section 80-2-102.

(3) "Division" means the Division of Child and Family Services, within the Department of Health and Human Services.

(4) "Existing relationship with a mental health therapist" means any documented, professional course of mental or behavioral health treatment completed by a licensed mental health professional within the year before a child enters division custody.

(5) "Guardian" means a person appointed by the court to make decisions with respect to the personal affairs of an individual.

(6) "Mental health therapist" means the same as defined in Section 58-60-102.

(7) "Minor" means the same as defined in Section 80-1-102.

(8) "Parent" means the legal parent of a child, as described in Section 81-5-201.

R512-33-3. Continuity of Mental Health Treatment Services.

(1) As described in Subsection 80-2-310(2), when a child enters into division custody, the division shall evaluate that child, as described in division policy, to determine whether the child has an existing relationship with a mental health therapist.

(a) If the child has an existing relationship with a mental health therapist and wishes to continue receiving mental health treatment from the same mental health therapist, the division shall, in accordance with Subsection 80-2-310(2)(b) and division policy:

(i) contact the mental health therapist to determine whether the mental health therapist is a Medicaid provider or is willing to become a Medicaid provider to continue treatment for the child in custody;

(ii) facilitate arrangements for the mental health therapist to deliver local or virtual treatment if the mental health therapist holds a contract to provide Medicaid services with the local mental health authority; or

(iii) connect the mental health therapist with Medicaid to facilitate enrollment discussions if the mental health therapist is willing to become a Medicaid provider.

(b)(i) The division shall establish a single payer agreement with the mental health therapist to continue the child's treatment until the mental health therapist is established as a Medicaid provider; or

(ii) in accordance with division policy, the division shall arrange for the child to receive ongoing mental health care and treatment from a different local mental health provider if the mental health therapist:

(A) declines to continue treatment with the child while in division custody;

(B) does not accept the Medicaid rate for a single payment agreement; or

(C) is not willing to become a Medicaid provider.

(2) As described in Subsection 80-2-310(3) and division policy, when a child or minor leaves division custody, the division shall take steps to facilitate continuity of care for each child or minor by evaluating whether the child or minor has received services from a mental health therapist while in division custody and, if so, consulting with the mental health therapist to determine whether the therapist agrees to continue treatment after the child or minor leaves custody.

(a) If the child or minor and the mental health therapist agree to continue treatment after the child or minor leaves division custody, the division shall, before the child or minor leaves custody, facilitate coordination between the child or minor's parent or legal guardian, the mental health therapist, and the anticipated post-custody insurance payer to transition ongoing billing and care protocols by:

(i) sharing the mental health therapist's contact and scheduling information with the child or minor or parent or legal guardian to facilitate seamless appointment scheduling;

(ii) identifying the child's post-custody health insurance provider, including private commercial insurance or Medicaid;

(iii) assisting the post-custody health insurance provider and the parent or legal guardian in submitting a request for a Medicaid or private insurance single case agreement if the mental health therapist who provided treatment to the child or minor during division custody is a non-network provider under the child or minor's post-custody insurance plan, ensuring that any Medicaid rates comply with statutory limits under Section 80-2-310; and

(iv) coordinating with the post-custody health insurance provider and the local mental health authority, if applicable, to arrange for the delivery of services via localized in-person settings or a virtual telehealth format, based on the clinical needs and the logistical capacity of the child or minor.

(b) If the child or minor and the mental health therapist do not agree to continue treatment with each other after the child or minor leaves division custody, the division shall, before the child or minor leaves division custody, facilitate mental health treatment transition planning with the child or minor and the child or minor's parent or legal guardian to identify, select, and establish ongoing mental health treatment with a new outpatient mental health provider.

(c) For a minor who is 18 years of age, or within 30 days of reaching 18 years of age, the division shall:

(i) inform the child and the child's parent or legal guardian that division-funded continuity of care under Section 80-2-310 ends upon the child reaching the age of 18;

(ii) assist the child in applying for and transitioning to adult Medicaid programs, including specialized coverage pathways for a former foster child; and

(iii) coordinate a formal warm handoff and secure an intake appointment with the local mental health authority or a network adult provider before case closure.

(3) Provisions in this rule are subject to restrictions described in Subsection 80-2-310(4).

KEY: foster care; continuity of care; child leaves custody; custody departure; mental health care
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 80-2-310

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58411**
Rule or section number:	**R512-500**

1. Agency Information

Title catchline:	Health and Human Services, Child and Family Services
Building:	Multi-Agency State Office Building
Street address:	195 N 1950 W
City, state:	Salt Lake City, UT
Mailing address:	195 N 1950 W
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
Corey Blythe	801-891-9068	coblythe@utah.gov
Danette Larsen	801-870-2065	dllarsen@utah.gov
Steven Sullivan	385-256-7094	ssulliva@utah.gov

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

3. General Information

A. Rule or section catchline:
R512-500. Kinship Services, Placement and Background Screening
B. Purpose of the new rule or reason for the change:
SB 141 passed in the 2026 General Session amends the definition of "relative" in Section 80-2a-101 and requires the Division of Child and Family Services (division) to further define that term by rule. Additionally, upon further review, the division determined that other statutory definitions cited in this rule have been updated and the rule's formatting should be updated to clarify existing requirements, comply with the Rulewriting Manual for Utah, and align with other rules in the Department of Health and Human Services (department). Therefore, the division determined this filing is appropriate.
C. Summary of the new rule or change:
This filing amends this rule's definition of "relative" to comply with rulemaking requirements in Subsection 80-2a-101(1)(e). This filing also updates other definitions to align with statute. Additionally, this filing makes style and formatting changes to clarify existing requirements, comply with the Rulewriting Manual for Utah, and align this rule with other department rules.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 141 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
This filing is not anticipated to result in a fiscal impact to the state budget because it updates definitions to align with updated statute and makes style and formatting changes to clarify existing requirements, comply with the Rulewriting Manual for Utah, and align this rule with other department rules. No processes or procedures are anticipated to change as a result of this filing.
B. Local governments:
This filing is not anticipated to result in a fiscal impact on local governments because local governments do not play a role in the preliminary placement of children in care, evaluation of kinship caregiver capacity for ongoing care, or background screening for prospective kinship caregivers.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
This filing is not anticipated to result in a fiscal impact on small businesses because small businesses do not play a role in the preliminary placement of children in care, evaluation of kinship caregiver capacity for ongoing care, or background screening for prospective kinship caregivers.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
This filing is not anticipated to result in a fiscal impact om non-small businesses because non-small businesses do not play a role in the preliminary placement of children in care, evaluation of kinship caregiver capacity for ongoing care, or background screening for prospective kinship caregivers.

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 is not anticipated to result in a fiscal impact to other persons because it updates definitions to align with updated statute and makes style and formatting changes to clarify existing requirements, comply with the Rulewriting Manual for Utah, and align this rule with other department rules. This filing does not alter existing requirements or restrictions for other persons that participate in placement processes for children in foster care.
F. Compliance costs for affected persons:
There are no anticipated compliance costs for affected persons, which includes the state and other persons. This filing updates definitions to align with updated statute and makes style and formatting changes to clarify existing requirements, comply with the Rulewriting Manual for Utah, and align this rule with other department rules. No processes or procedures for the state are anticipated to change as a result of this filing, and this filing does not alter existing requirements or restrictions for other persons that participate in placement processes for children in foster care.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 80-2-302	Section 80-2a-101	Section 80-3-102

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/29/2026

R512. Health and Human Services, Child and Family Services.
R512-500. Kinship Services, Placement and Background Screening.
R512-500-1. [~~Purpose and~~]Authority and Purpose.

(1) Sections 80-2-302, 80-2a-101, and 80-3-102, authorize this rule.

(2) This rule establishes standards for kinship placement for a child who is in Child and Family Services custody, including preliminary placement, evaluation of kinship caregiver capacity for ongoing care, and background screening.[

~~(2) This rule is authorized by Sections 80-2-302, 80-2a-301, 80-3-302, and 80-3-303.~~]

R512-500-2. Definitions.

(1) "Abuse" [~~is~~]means the same as defined in Section 80-1-102.

(2) "Child" [~~is~~]means the same as defined in Section 80-1-102.

(3) "Child and Family Services" means the Division of Child and Family Services.

(4) "Child and [~~F~~]family [~~T~~]team" [~~is~~]means the same as defined in Rule R512-301.

(5) "Friend" [~~is~~]means the same as defined in Section 80-2a-101.

(6) For preliminary placements, "[~~K~~]kinship caregiver" means a non[-]custodial parent, relative, or friend who is selected for placement and care of a child in Child and Family Services custody.

(7) "Neglect" [~~is~~]means the same as defined in Section 80-1-102.

(8) "Non[-]custodial parent" [~~is~~]means a parent with an established parent-child relationship, pursuant to Section 81-5-201, but who is not the custodial parent, regardless of any designation of joint legal custody[~~natural parent as defined in Section 80-1-102 who is a biological or adoptive mother, an adoptive father, or a biological father who was married to the child's biological mother when the child was conceived or born, or who has had paternity established, who has not been granted legal custody of the child~~].

(9) "Non[-]relative" [~~is~~]means the same as defined in Section 80-2a-101.

(10) "Preliminary placement" means an out-of-home placement with a non[-]custodial parent, relative, or with a friend who is either a licensed foster parent or is willing to become a licensed foster parent, [~~which is~~]referred to in statute as:

(a) an emergency placement with a non[-]custodial parent or relative, as authorized in Section 80-2a-301; or

(b) a post-shelter hearing placement with a non[-]custodial parent, relative, or friend, as authorized in Section 80-3-303.

(11)(a) "Relative" means the same as[~~is~~] defined in Section 80-2a-101.

(b) A relative, as described in Subsection 80-2a-101(1)(e)(iii), includes an individual who:

(i) has an established relationship with the child or with the child's:

(A) parent;

(B) sibling;

(C) grandparent; or

(D) parent's sibling;

(ii) is familiar to other members of the family; and

(iii) possesses historical knowledge of the child's culture, family traditions, or heritage sufficient to support and maintain the child's connection to their familial or cultural identity.

[~~(12) "Severe type of child abuse or neglect" is defined in Section 80-1-102.~~

~~(13) "Sibling" is defined in Section 80-2-102.~~

~~(14) "Substantiated" is defined in Section 80-1-102.~~

~~(15) "Supported" is defined in Section 80-1-102.~~

]

R512-500-3. [~~Philosophy.~~

~~(1) Children need permanency through enduring relationships that provide stability, familiarity, and support for the culture of the child; support the child's sense of self based on existing attachments; provide for the child's safety and physical care; and connect the child to their past, present, and future through continuing family relationships. First priority is to maintain a child safely at home. However, if a child cannot safely remain at home, kinship care has the potential for providing these elements of permanency by virtue of the kin's knowledge of and relationship to the family and child.~~

~~(2) Kinship work is done in the context of a child and family team. Kinship care includes elements of child protection, in-home services, family preservation, and out-of-home care. When a child cannot safely remain home, kinship care is preferable to other out-of-home placements if the kinship caregiver can keep the child safe and appropriately meet the child's needs.~~

~~(3) The caregiver's willingness and ability to care for and keep the child safe are fundamental. The kinship caregiver must have or acquire knowledge of the child, be able to meet the child's needs, support reunification efforts, and be able to provide the child access to parents, siblings, and other family members through visits or caring for the child and siblings as a group.~~

~~(4) Ongoing assessment of the child's safety, permanence, and well-being is important to the stability and value of kinship care. Ongoing assessment of safety is based on the components of safety decision-making, which include threats of harm, vulnerabilities of the child, and protective capacities of the kinship caregiver and their support system.~~

~~(5) Providing for kinship care in the Child and Family Services spectrum of services requires due diligence to identify and locate kin families with whom children may form or continue relationships at home or in temporary or permanent placements. Support to kinship caregivers is essential to the success of the child's placement with the family and to the family's ability to respond to the needs of the child. As members of the child and family team, kinship caregivers will receive support from other family members and from informal and formal supports to provide for the child.~~

~~R512-500-4. ~~]Preferences for Placement.

(1) Preferences for placement are governed by Sections 80-3-302 and 80-3-303.

(2)(a) Preferential consideration, given in accordance with Section 80-3-302 to relatives, expires eight months from the date of the shelter hearing.

(b) After eight months, a relative who has not obtained custody or asserted an interest in the child may not be granted preferential consideration by Child and Family Services or the court.

(c) A relative may be considered for prospective placement after eight months if that placement is in the best interest of the child.

(3)(a) Preferential consideration, given in accordance with Section 80-3-302 to [~~kinship caregivers or~~]friends who are licensed or who become licensed, expires 120 days from the date of the shelter hearing.

(b) After [~~that time period has expired~~]120 days, a [~~relative or~~]friend who has not obtained custody or asserted an interest in the child may not be granted preferential consideration by Child and Family Services or the court.

(c) [~~Prospective kinship caregivers or~~]A friend[~~s~~] may be considered for prospective placement after [~~the~~]120 days[~~ has lapsed,~~] if [~~it~~]that placement is in the best interest of the child.

([~~3~~]4)(a) For a child to remain in the care of a prospective caregiver who is a friend but is not a licensed foster parent, that friend must:[~~A potential caregiver who meets the definition of friend and who is not a licensed foster parent must ~~]

(i) be willing to become a licensed foster parent[~~,~~];

(ii) [~~must ~~]be actively engaged in the process of becoming a licensed foster parent within 60 days of the child being placed with [~~them,~~]the friend; and[~~ must~~]

(iii) complete the requirements of the [~~Department of Health and Human Services, ~~]Division of Licensing and Background Checks, within the Department of Health and Human Services, to obtain a child-specific foster care license within six months of a child being placed with the friend[~~them and for the child to remain in the friend's care~~].

(b) [~~Furthermore, i~~]If [~~the~~]a child remains in the custody of Child and Family Services placed in the home of [~~the~~]a friend, as described in Subsection (4)(a), the friend must continue to comply with the Division of Licensing and Background Checks requirements to [~~receive~~]maintain ongoing licensure as a foster parent before the child-specific foster care license expires.[~~ing~~]

(c) If the friend does not maintain ongoing licensure, as described in Subsection (4)(b), [~~or ~~]the child will be removed from the friend's care.

R512-500-[~~5~~]4. Preliminary Placement.

(1)(a) The requirements specified in Section 80-2a-301 must be met for emergency preliminary placement of a child with a relative or friend.

(b) The requirements specified in Section 80-3-303 must be met for post-shelter preliminary placement of a child with a relative or friend.

(2) A decision to make a preliminary placement of a child with a relative or friend [~~will~~]shall include assessment of whether[~~ the following factors~~]:

(a) the relative or friend[~~'s~~] has a history of abusive or neglectful behavior toward any other child[~~ren~~] that may show or present a danger to the child being placed;

(b) the child is comfortable with the relative or friend;

(c) the relative or friend recognizes the parent's history of abuse and is committed to protecting the child;

(d) the relative or friend [~~is strong enough to~~]will resist any inappropriate request[~~s~~] by the parent for access to the child, in accordance with court orders;

(e) the relative or friend is committed to caring for the child as long as necessary; and

(f) the relative or friend can provide a secure and stable environment for the child.

(3) [~~P~~]In addition to the assessment factors described in Subsection (2), placement with a friend[~~s are also~~] is subject to the child's preferences, comfort level, and designation, as specified in Section 80-3-302.

(4) A [~~relative or friend~~]kinship caregiver must meet the background screening requirements for preliminary placement of a child.

(5) [~~A~~]Child and Family Services shall conduct an assessment of safety [~~will be ~~]based on safety decision-making principles, [~~which ~~]including any[~~e~~]:

(a) potential threats of harm;

(b) vulnerabilities of the child; and

(c) protective capacities of the [~~potential~~]prospective kinship caregiver and [~~their~~]the prospective kinship caregiver's support system.

(6) The limited home inspection specified in Section 80-2a-301 is required for a [~~non-custodial parent, relative, or friend~~]prospective kinship caregiver.

(a) The limited home inspection is conducted in the home of the prospective kinship caregiver to determine [~~if~~]whether there are apparent safety risks in the home that present a potential threat of harm to the child.

(b) The limited home inspection determines whether[~~if the following are met~~]:

([~~a~~]i) the home is free from observable health and fire hazards;

([~~b~~]ii) there are adequate sleeping arrangements to meet the specific needs of each child; and

([~~c~~]iii) any firearm[~~s~~], ammunition, hazardous chemical[~~s~~], and medication[~~s~~] [~~are~~]is secured and not accessible to children.

(7) [~~R~~]Child and Family Services may contact references [~~may be contacted~~]to obtain input regarding placing the child with the [~~potential~~]prospective kinship caregiver or information about other available relatives or friends who may care for the child.

R512-500-[6]5. Evaluation of Capacity for Ongoing Care of a Child.

(1)(a) The child and family team [~~will~~]shall determine the most appropriate [~~relative or friend~~]kinship caregiver to meet the ongoing and permanency needs of the child[~~:~~].

[~~(a) since the preliminary placement is made in an emergency situation, they may or may not be the most appropriate caregiver to meet the ongoing and permanency needs of the child; and~~

](b) [~~t~~]The ongoing caregiver may be:

(i) the kinship caregiver who [~~is~~]was the preliminary placement; or

(ii) [~~may be~~]a different prospective caregiver.

(2)(a) Child and Family Services [~~will~~]shall evaluate, with the [~~prospective~~]relative or friend, the relative or friend's[~~their~~] capacity [~~for~~]to provide ongoing care [~~of~~]for the child as well as permanency if reunification efforts are not successful.

(b) The [~~components of the~~]evaluation process described in Subsection (2)(a) shall include[~~:~~

~~(a)~~] [~~the~~]a child-specific home study for the relative or friend, [~~will~~]including assessment of[~~e~~]:

(i) the results of the relative or friend's background screening;

(ii) [~~obtaining positive~~]written references from three different people known to the relative or friend expressing the referent's opinion about the [~~family~~]relative or friend's ability to care for the child;

(iii) the relative or friend's physical and emotional ability [~~of the relative or friend~~]to provide adequate care for the child;

(iv) [~~understanding of~~]the relative or friend's family dynamics and how placement will impact relationships within the family;

(v) the relative or friend's ability to provide for the child's safety and well-being needs and to support a plan for permanency;

(vi) [~~analysis of~~]the type of resources and support needed by the relative or friend to care for the child; and

(vii) the relative or friend's ability to ensure[~~of~~] the home [~~to~~]meets required Division of Licensing and Background Checks safety standards[~~ of the Division of Licensing and Background Checks; and~~].

([~~b~~]c) Child and Family Servies shall provide[~~providing~~] information to the kinship caregiver to assist with considering options for ongoing care of the child, including:

(i) educating the kinship caregiver of the expectations of caring for a child who is under the jurisdiction of the court;

(ii) assessing the resources that may be available to assist the kinship caregiver in providing a stable placement for the child;

(iii) becoming a licensed out-of-home care placement for the child; and

(iv) requesting temporary custody and guardianship from the court.

R512-500-[7]6. Background Screening.

(1)(a) As part of the evaluation of a prospective kinship caregiver's capacity for ongoing care of a child, in addition to background screening required for preliminary placement, anyone [~~over the age of~~]18 years or older residing in the home [~~must~~]shall complete an FBI fingerprint-based criminal history records check.

(b) Background screening for placement with [~~the~~]a non[~~-~~]custodial parent is subject to:

(i) Sections 80-3-302, 80-3-303, and 80-3-305[~~,~~]; or

(ii) a court order.

(2)(a) Child and Family Services shall complete a[~~A~~] Utah child abuse registry check [~~will be completed~~]for each person[~~s~~] [~~over the age of~~]18 years or older residing in the home.

(b) If any person 18 years[~~ of age~~] or older residing in the home has lived out of Utah within the five years immediately preceding the date of the application, Child and Family Services shall complete a child abuse and neglect registry check [~~must be completed~~]for [~~any~~]every state in which that person[~~ individual~~] resided.

(3) [~~P~~]For Child and Family Services to conduct a background screening, each person[~~s~~] 18 years [~~of age and~~]or older [~~living in the household~~]residing in the home must [~~provide the following information on~~]complete and submit a form provided by Child and Family Services [~~in order for background screening to be conducted~~]that includes:

(a) the person's full first name, middle name, last name, maiden name, any previous married name, and any alias, as applicable[~~and previous married names~~];

(b) the person's Social Security number, if a number has been issued;

(c) proof of the person's identity verified by a government-issued photo identification;

(d) the person's date of birth;

(e) [~~the potential kinship caregiver and applicable adults living in the household shall provide~~]fingerprints from an authorized law enforcement agency or designated electronic scanning site; and

(f) if the [~~applicant~~]person has lived outside of Utah within the five years immediately preceding the date of the application, a list of [~~the~~]every state[~~s~~] where the [~~applicant~~]person resided[~~has lived in must be provided~~].

KEY: child welfare, kinship
Date of Last Change: [~~August 15, 2023~~]2026
Notice of Continuation: February 14, 2023
Authorizing, and Implemented or Interpreted Law: 80-1-102; 80-2-102; 80-2-301; 80-2-302; 80-2a-101; 80-2a-301; 80-3-102; 80-3-302; 80-3-303; 80-3-305

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58432**
Rule or section number:	**R523-28**

1. Agency Information

Title catchline:	Health and Human Services, Substance Use and Mental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W, Floor 3
City, state:	Salt Lake City, UT
Mailing address:	288 N 1460 W, Floor 3
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	Phone:	Email:
Thomas Dunford	801-538-4181	tdunford@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Melissa Aitken	385-478-0501	melissaaitken@utah.gov

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

3. General Information

A. Rule or section catchline:

R523-28. Peer Support Grants

B. Purpose of the new rule or reason for the change:

HB 572 passed in the 2026 General Session enacted Section 26B-5-122, which requires the Division of Integrated Healthcare to provide peer support grants to recovery support organizations for the provision of peer support services and make rules for the appropriation of those grants.

This new rule is necessary to comply with this requirement.

C. Summary of the new rule or change:

This proposed rule outlines the process by which the Division of Integrated Healthcare, in conjunction with the Utah Behavioral Health Commission, shall award grants to recovery support organizations. This process includes a request for proposal.

Additionally, this filing describes the scoring process and prioritization of awards and provides guidance on using awarded funding.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 572 (2026 General Session)

5. Fiscal Information

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 a result of this filing because any costs and savings, including the initial appropriation of grant funding for this program, to the state are a result of HB 572 (2026), rather than this rule.

The bill's fiscal note can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0572S06.fn.pdf.

B. Local governments:

There is no anticipated fiscal impact on local governments as a result of this filing.

The grants established in this rule are prioritized for emerging organizations that have been operating for fewer than five years or small businesses with fewer than ten full-time employees.

While this prioritization would not preclude a local government from submitting a request for proposal, it is unlikely that a local government would be selected to receive these grants because local governments do not meet the criteria for the intended target population of applicants.

Any awarded grant money is not accounted for as a fiscal benefit because this rule only provides for the request for proposal process.

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

There is no anticipated fiscal impact on small businesses as a result of this filing.

The grants established in this rule are prioritized for emerging organizations that have been operating for fewer than five years or small businesses with fewer than ten full-time employees.

Submitting a request for proposal may require a small business to use some resources, such as time and division of labor or tasks, but this use of resources would already be considered part of normal business practice for any small business that seeks outside funding for operations.

Any awarded grant money is not accounted for as a fiscal benefit because this rule only provides for the request for proposal process.

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 a result of this filing.

The grants established in this rule are prioritized for emerging organizations that have been operating for fewer than five years or small businesses with fewer than ten full-time employees.

While this prioritization would not preclude a non-small business from submitting a request for proposal, it is unlikely that a non-small business would be selected to receive these grants because non-small businesses do not meet the criteria for the intended target population of applicants.

Any awarded grant money is not accounted for as a fiscal benefit because this rule only provides for the request for proposal process.

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 persons other than small businesses, non-small businesses, state, or local government entities as a result of this filing.

The grants established in this rule are prioritized for emerging organizations that have been operating for fewer than five years or small businesses with fewer than 10 full-time employees.

Submitting a request for proposal may require other persons to use some resources, such as time and division of labor or tasks, but this use of resources would already be considered part of normal business practice for any other persons that seek outside funding for operations.

Any awarded grant money is not accounted for as a fiscal benefit because this rule only provides for the request for proposal process.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, identified as the state budget and any entities that submit a request for proposal, which may include local governments, small and non-small businesses, and other persons.

The fiscal note for HB 572 (2026) accounts for anticipated costs, including the initial appropriation of grant funding for this program, associated with the bill and can be viewed at https://pf.utleg.gov/public-web/sessions/2026GS/fiscal-notes/HB0572S06.fn.pdf.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Health and Human Services, Tracy S. Gruber, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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-5-122		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	11/02/2026

R523. Health and Human Services, Substance Use and Mental Health.
R523-28. Peer Support Grants.
R523-28-1. Authority and Purpose.

(1) Section 26B-5-122 authorizes this rule.

(2) This rule establishes the requirements for the peer support grant, issued by the Division of Integrated Healthcare (division) in collaboration with the Utah Behavioral Health Commission (commission).

R523-28-2. Requirements for Receiving a Peer Support Grant.

(1) The division and commission shall jointly develop a competitive, data-driven request for proposal process to:

(a) solicit submissions for the peer support grant; and

(b) select peer support grant recipients.

(2) The division shall evaluate and score submissions based on:

(a) the applicant's proposed peer support services;

(b) projected data outcomes; and

(c) sustainability planning for when grant funding concludes.

(3) When awarding a grant, the division and commission shall prioritize submissions from:

(a) emerging organizations that have been operating for five years or less; or

(b) small businesses with fewer than ten full-time employees located in designated mental health professional shortage areas.

(4) Each organization awarded a peer support grant shall ensure dedicated access and representation for individuals seeking recovery support for a mental health condition.

KEY: peer support grants, mental health, substance use recovery, behavioral health commission
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 26B-5-122

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Repeal and Readopt	**Filing ID: 58475**
Rule or section number:	**R650-221**

1. Agency Information

Title catchline:	Natural Resources, Outdoor Recreation
Building:	Department of Natural Resources State Building
Street address:	1594 W North Temple, Suite 100
City, state:	Salt Lake City, UT
Mailing address:	1594 W North Temple, Suite 100
City, state and zip:	Salt Lake City, UT 84116

2. Contact Persons

Name:	**Phone:**	**Email:**
Ty Hunter	801-440-5106	tyhunter@utah.gov
Nico Micheletti	385-867-4643	nicomichelettu@agutah.gov

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

3. General Information

A. Rule or section catchline:
R650-221. Boat Liveries and Boat Rental Companies
B. Purpose of the new rule or reason for the change:
Recent legislative change requires individuals to complete a watercraft operator safety course before operating a vessel. This legislative bill also authorizes the Division of Outdoor Recreation to promulgate rules that offer boat liveries alternatives in training prospective customers in the operation of the vessel.
C. Summary of the new rule or change:
This new rule allows boat liveries to provide a Boater Safety and an AIS Course in lieu of requiring all customers to take the watercraft operator safety course.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 54 (2026 General Session)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
This rule promulgation will have no impact on the state's budget because this rule change does not require any further expenditure, any monetary commitment, or provide any revenue to the state's budget.
B. Local governments:
This rule promulgation will have no fiscal impact on local governments because this rule change does not require any expenditures or monetary commitments from local governments. This proposed rule does not task local governments with any duties which would require monetary change.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
This rule change will have no fiscal impact on small businesses because the rule promulgation allows boat liveries to provide operator safety training to individuals who have not previously completed the training, enabling them to legally operate a boat rented from the livery and allowing the business to serve additional customers.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
This rule change will have no fiscal impact on non-small businesses because the rule promulgation allows boat liveries to provide operator safety training to individuals who have not previously completed the training, enabling them to legally operate a boat rented from the livery and allowing the business to continue to serve customers.
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 has no fiscal impact on persons because this rule change does not require additional fees from any individual or entity.
F. Compliance costs for affected persons:
There are no compliance costs to persons because the Boater Safety and AIS Course are free of charge.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Natural Resources, Jamie Barnes, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 73-18-15.6	Subsection 73-18-10(2)	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Jason Curry, Division Director	**Date:**	09/03/2026

R650. Natural Resources Outdoor Recreation.
R650-221. Boat Liveries and Boat Rental Companies.
[~~R650-221-1. Boat Liveries.~~

~~(1) A person who wishes to operate a boat livery shall annually register the livery with the division.~~
~~(2) A person shall submit the following to the division to register a boat livery:~~
~~(a) a registration application on a form provided by the division;~~
~~(b) evidence of a valid business license; and~~

~~(c) the applicable boat livery fee.~~

~~(3) A person who has registered with the division a boat livery as an outfitting company is not required to pay the boat livery fee required by Subsection (2)(c).~~

~~(4) A person may not operate a boat livery unless it has been registered with the division pursuant to Subsection (2).~~

~~(5)(a) A boat livery owner shall display the name of the boat livery on the outward superstructure of each vessel in the boat livery's fleet.~~

~~(b) If a governmental agency with regulatory authority over a boat livery or a vessel in the boat livery's fleet prohibits the display of a livery's name on the exterior of a vessel in the boat livery's fleet, the boat livery owner shall display the boat livery's name on the vessel in a visible manner that does not violate the agency's requirements.~~

~~(6)(a) A boat livery that rents or leases a vessel from its fleet shall do so pursuant to a written rental or lease agreement.~~

~~(b) The lease or rental agreement shall:~~

~~(i) be signed by the owner of the livery or the owner's representative;~~

~~(ii) be signed by the person leasing or renting the vessel;~~

~~(iii) list name of the person leasing or renting the vessel;~~

~~(iv) list the vessel's assigned bow number, hull identification number, or other number if the vessel is not powered by a motor or sail;~~

~~(v) contain a description of the vessel's make, model, color, and length;~~

~~(vi) list the period for which the vessel is leased or rented; and~~

~~(vii) include a check-off list of the required safety equipment provided on the vessel.~~

~~(c) A person renting or leasing a motorboat or sailboat shall carry on board the vessel a copy of the lease or rental agreement.~~

~~(7) A person renting or leasing a group of non-motorized vessels is only required to complete one rental agreement pursuant to Subsection (6).~~

~~(8) Upon request of the division, the owner of a boat livery, or the owner's representative, shall provide the division with a copy of a lease or rental agreement.~~

~~(9) A boat livery may maintain a certificate of registration for a leased or rented vessel on shore.~~

~~(10) A recreational equipment timeshare business which leases or rents vessels for consideration is a boat livery.~~

~~(11) Each vessel in a boat livery's fleet that is equipped with a 50 hp or greater motor shall be covered with liability insurance as required by Sections 73-18c-101 through 73-18c-308 and Sections 31A-22-1501 through 31A-22-1504.~~]

R650-221-1. Purpose, Authority, and Definitions.

(1) The purpose of this rule is to regulate boat liveries.

(2) This rule is authorized by Section 73-18-15.6 and Subsection 73-18-10(2).

(3) For the purposes of this rule, "motorboat" encompasses all terms under Section 73-18-2, including personal watercraft.

R650-221-2. Registration of Boat Liveries.

(1) A person who wishes to operate a boat livery shall annually register the livery with the division.

(2) A person shall submit the following to the division to register a boat livery:

(a) a registration application on a form provided by the division;

(b) evidence of a valid business license; and

(c) the applicable boat livery fee.

(3) A person who has registered with the division a boat livery as an outfitting company is not required to pay the boat livery fee required by Subsection (2)(c).

(4) A person may not operate a boat livery unless it has been registered with the division pursuant to Subsection (2).

(5)(a) A boat livery owner shall display the name of the boat livery on the outward superstructure of each vessel in the boat livery's fleet.

(b) If a governmental agency with regulatory authority over a boat livery or a vessel in the boat livery's fleet prohibits the display of a livery's name on the exterior of a vessel in the boat livery's fleet, the boat livery owner shall display the boat livery's name on the vessel in a visible manner that does not violate the agency's requirements.

(6)(a) A boat livery that rents or leases a vessel from its fleet shall do so pursuant to a written rental or lease agreement.

(b) The lease or rental agreement shall:

(i) be signed by the owner of the livery or the owner's representative;

(ii) be signed by the person leasing or renting the vessel;

(iii) list name of the person leasing or renting the vessel;

(iv) list the vessel's assigned bow number, hull identification number, or other number if the vessel is not powered by a motor or sail;

(v) contain a description of the vessel's make, model, color, and length;

(vi) list the period for which the vessel is leased or rented; and

(vii) include a check-off list of the required safety equipment provided on the vessel.

(c) A person renting or leasing a motorboat or sailboat shall carry on board the vessel a copy of the lease or rental agreement.

(7) A person renting or leasing a group of non-motorized vessels is only required to complete one rental agreement pursuant to Subsection (6).

(8) Upon request of the division, the owner of a boat livery, or the owner's representative, shall provide the division with a copy of a lease or rental agreement.

(9) A boat livery may maintain a certificate of registration for a leased or rented vessel on shore.

(10) A recreational equipment timeshare business which leases or rents vessels for consideration is a boat livery.

(11) Each vessel in a boat livery's fleet that is equipped with a 50 hp or greater motor shall be covered with liability insurance as required by Sections 73-18c-101 through 73-18c-308 and Sections 31A-22-1501 through 31A-22-1504.

R650-221-3. Boater Safety Briefing and AIS Course.

(1) Before a boat livery may lease a motorboat or sailboat to a person:

(a) the boat livery shall provide a person with a Boater Safety briefing, as described in Subsection (2), unless the person provides the boat livery with a proof of completion of the division's watercraft operator safety course obtained within the calendar year.

(b) the boat livery shall provide a person with an AIS Course, as described in Subsection (4), unless;

(i) the person provides the boat livery with a proof of completion of the course obtained within the same calendar year;

(ii) the vessel being rented or leased is a nonmotorized vessel or inflatable motorboat; or

(iii) the following is met;

(A) the vessel being rented or leased is transported by the boat livery to the waterbody;

(B) the person renting or leasing the vessel does not operate the vessel during the rental period; and

(C) the boat livery rents or leases the vessel on the condition that the livery owner's agent, independent contractor, or employee of the livery operates the vessel.

(2) A Boater Safety briefing shall include:

(a) Instruction on proper personal flotation device use consistent with Subsection 73-18-8(1);

(b) Instruction on the risks of operating a motorboat under the influence as described in Title 41, Chapter 6a, Part 5, Driving Under the Influence and Reckless Driving, including providing

(i) A statement that operating a motorboat under the influence of alcohol, any drug, or the combined influence of drugs and alcohol to a degree that renders the operator incapable of safely operating the vehicle; and

(ii) A statement that having a blood or breath alcohol concentration of .05% or greater at the time of operation may subject the operator to the full penalties available under Section 41-6a-502.

(c) Instruction on the speed and proximity rule as described in Subsection 73-18-15.1(10), with specific instruction that the operator of a motorboat may not exceed a wakeless speed when within 150 feet of:

(i) another vessel;

(ii) a person in or floating on the water;

(iii) a water skier being towed by another boat;

(iv) a water skier that had been towed behind the operator's vessel unless the skier is still surfing or riding in an upright stance on the wake created by the vessel;

(v) a water skier that had been towed behind another vessel and the skier is still surfing or riding in an upright stance on the wake created by the other vessel;

(vi) a shore fisherman;

(vii) a launching ramp;

(viii) a dock; or

(viv) a designated swimming area.

(d) Instruction on the meaning and definition of "wakeless speed" as described in Subsection 73-18-2(20);

(e) Instruction on the identification and meaning of navigational buoys and other regulatory markers, including no-boating zones and designated swimming areas, and the requirements applicable to safely operating a watercraft in or near those areas;

(3) A Boating Safety Briefing and AIS course given by a boat livery only authorizes the individual to operate the watercraft for the time period listed in the written agreement.

(4) The AIS course shall include:

(a) An overview of the Aquatic Invasive Species Education course as contemplated in Subsection 23A-4-304(4)(a); and

(b) Guidance and demonstration of how to remove and clean the vessel's drain plug and sea strainer, if applicable.

(5) The Division may publish guidance to assist a boat livery in conducting the Boating Safety Course and AIS Course.

KEY: boating
Date of Last Change: [~~January 9, 2024~~]2026
Authorizing, and Implemented or Interpreted Law: 73-18-10(2)

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58395**
Rule or section number:	**R698-15**

1. Agency Information

Title catchline:	Public Safety, Administration
Building:	Calvin Rampton Building
Street address:	4501 S 2700 W, 1st Floor

City, state:	Salt Lake City, UT 84119-5994
Mailing address:	PO Box 141775
City, state and zip:	Salt Lake City, UT 84114-1775

2. Contact Persons

Name:	**Phone:**	**Email:**
Kim Gibb	801-556-8198	kgibb@utah.gov

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

3. General Information

A. Rule or section catchline:

R698-15. Minimum Cybersecurity Standards for a Local Education Agency

B. Purpose of the new rule or reason for the change:

This rule is required by Section 63C-27-202, which states the Cybersecurity Commission shall make rules establishing minimum cybersecurity standards for a local education agency.

C. Summary of the new rule or change:

The rule filing establishes minimum cybersecurity standards for a local education agency through the incorporation by reference of the CIS Controls Version 8.1, published May 2024 by the Center for Internet Security.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 44 (2026 General Session)

5. Fiscal Information

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

A. State budget:

This rule is not expected to have any impact on the state budget because this rule only establishes minimum cybersecurity standards for a local education agency through the incorporation by reference of CIS Critical Security Controls, Version 8.1.

There are no anticipated costs associated with establishing, implementing, or maintaining a cybersecurity program that aligns with the Center for Internet Security Controls because the controls have already been established and may be used by local education agencies free of charge.

B. Local governments:

This rule is not expected to have any impact on local governments because this rule only establishes minimum cybersecurity standards for a local education agency through the incorporation by reference of CIS Critical Security Controls, Version 8.1.

There are no anticipated costs associated with establishing, implementing, or maintaining a cybersecurity program that aligns with the Center for Internet Security Controls because local education agencies may use the CIS controls free of charge. In addition, HB 3 (2026), appropriated $28,000,000 in one-time funding to the State Board of Education to be used for four years of public education cybersecurity from fiscal year 2027 to fiscal year 2031, using the Department of Government Operations – Cyber Security to implement the program.

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

This rule is not expected to have any impact on small businesses because this rule only establishes minimum cybersecurity standards for a local education agency through the incorporation by reference of CIS Critical Security Controls, Version 8.1.

There are no anticipated costs associated with establishing, implementing, or maintaining a cybersecurity program that aligns with the Center for Internet Security Controls because the controls have already been established and may be used by local education agencies free of charge.

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

This rule is not expected to have any impact on non-small businesses because this rule only establishes minimum cybersecurity standards for a local education agency through the incorporation by reference of CIS Critical Security Controls, Version 8.1.

There are no anticipated costs associated with establishing, implementing, or maintaining a cybersecurity program that aligns with the Center for Internet Security Controls because the controls have already been established and may be used by local education agencies free of charge.

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 is not expected to have any impact on persons other than small businesses, non-small businesses, state, or local government entities, because the rule only establishes minimum cybersecurity standards for a local education agency through the incorporation by reference of CIS Critical Security Controls, Version 8.1.

There are no anticipated costs associated with establishing, implementing, or maintaining a cybersecurity program that aligns with the Center for Internet Security Controls because the controls have already been established and may be used by local education agencies free of charge.

F. Compliance costs for affected persons:

There are no expected compliance costs associated with this rule.

There are no anticipated costs associated with establishing, implementing, or maintaining a cybersecurity program that aligns with the Center for Internet Security Controls because the controls have already been established and may be used by local education agencies free of charge.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Public Safety, Beau Mason, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 63C-27-202	Title 63G, Chapter 3	

10. Incorporation by Reference Information

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*)**:**	
Official Title of Materials Incorporated (from title page)	CIS Critical Security Controls
Publisher	Center for Internet Security
Issue Date	May 2024
Issue or Version	Version 8.1

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Beau Mason, Commissioner, Department of Public Safety	**Date:**	10/20/2026

R698. Public Safety, Administration.
R698-15. Minimum Cybersecurity Standards for a Local Education Agency.
R698-15-1. Purpose.

(1) This rule establishes minimum cybersecurity standards for a local education agency in accordance with Section 63C-27-202.

(2) The purpose of these standards is to safeguard LEA digital assets, educational technology infrastructure, student and employee data, and network systems against cyber threats by promoting alignment with industry-recognized cybersecurity frameworks.

R698-15-2. Authority.

This rule is authorized by Section 63C-27-202 and Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

R698-15-3. Definitions.

(1) Terms used in this rule are defined in Section 53E-1-102.

(2) In addition, "Center for Internet Security Controls" or "CIS Controls" means the prioritized set of technical, operational, and administrative cybersecurity safeguards published by the Center for Internet Security.

R698-15-4. Minimum Cybersecurity Standards for LEAs.

An LEA shall establish, implement, and maintain a cybersecurity program that aligns with the Center for Internet Security Controls.

R698-15-5. Incorporation by Reference.

This rule incorporates by reference CIS Critical Security Controls Version 8.1, published May 2024 by the Center for Internet Security.

KEY: minimum cybersecurity standards, local education agency cybersecurity, CIS controls, Utah Cybersecurity Commission
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 63C-27-202; 63G-3

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: New	**Filing ID: 58374**
Rule or section number:	**R710-17**

1. Agency Information

Title catchline:	Public Safety, Fire Marshal
Building:	Conference Center at Miller Campus
Street address:	410 W 9800 S, Suite 372
City, state:	Sandy UT 84070

2. Contact Persons

Name:	Phone:	Email:
Kim Gibb	801-556-8198	kgibb@utah.gov
Ted Black	801-256-2390	tblack@utah.gov

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

3. General Information

A. Rule or section catchline:

R710-17. Concerns Servicing Carbon Dioxide Systems of 100-pound Capacity or More

B. Purpose of the new rule or reason for the change:

This rule is required under Section 53-7-602, which states the board shall make rules establishing requirements and standards for licensing and certification for businesses and individuals that service carbon dioxide systems, creation of forms for licensing and certification, and establishing fees for licensing and certification.

C. Summary of the new rule or change:

The rule establishes requirements for licensing for business concerns servicing carbon dioxide systems of 100-pound capacity or more, certification requirements for a person servicing carbon dioxide systems of 100-pound capacity or more, and service tag requirements.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	HB 240 (2026 General Session)

5. Fiscal Information

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

A. State budget:

There is a negligible cost anticipated to the state budget; however, fees for licensing and examination collected from applicants should cover the cost to administer the program.

B. Local governments:

There is no anticipated cost to local governments because this rule establishes requirements for a business or individual to become licensed or certified to service carbon dioxide systems of 100-pound capacity or more.

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

It is anticipated that there are three small businesses that provide services in Utah as outlined in this rule.

A small business will be assessed an annual fee of $100 to become licensed or to renew a license to service carbon dioxide systems of 100-pound capacity or more based on the fee structure adopted by the Utah Fire Prevention Board.

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

It is anticipated that there are three non-small businesses that provide services in Utah as outlined in the rule.

A non-small business will be assessed an annual fee of $100 to become licensed or to renew a license to service carbon dioxide systems of 100-pound capacity or more based on the fee structure adopted by the Utah Fire Prevention Board.

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 there are approximately 25 employees of both small and non-small companies that would be required to obtain certification to provide services as outlined in the rule.

Based on the fee structure adopted by the Utah Fire Prevention Board, a person other than a small business, non-small business, state or local government entity will be assessed a fee of $30 to become certified to service carbon dioxide systems of 100-pound capacity or more.

In addition, a person will be assessed a fee of $20 for each examination and re-examination. The annual license renewal fee will be $30.

F. Compliance costs for affected persons:

Compliance costs for affected persons include an annual fee of $30 for certification, and a fee of $20 for each examination and re-examination.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$0	$0	$0	$0	$0
Local Governments	$0	$0	$0	$0	$0
Small Businesses	$300	$300	$300	$300	$300
Non-Small Businesses	$300	$300	$300	$300	$300
Other Persons	$1,250	$1,250	$1,250	$1,250	$1,250
Total Fiscal Cost	**$1,850**	**$1,850**	**$1,850**	**$1,850**	**$1,850**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$1,850	$1,850	$1,850	$1,850	$1,850
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
Total Fiscal Benefits	**$1,850**	**$1,850**	**$1,850**	**$1,850**	**$1,850**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Public safety, Beau Mason, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 53-7-204	Section 53-7-602	

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Ted Black, State Fire Marshal	**Date:**	10/19/2026

R710. Public Safety, Fire Marshal.
R710-17. Concerns Servicing Carbon Dioxide Systems of 100-pound Capacity or More.
R710-17-1. Authority.

This rule is authorized by Sections 53-7-204 and 53-7-602.

R710-17-2. Purpose.

The purpose of this rule is to:

(1) establish licensing requirements for business concerns servicing carbon dioxide systems of 100-pound capacity or more;

(2) establish the requirements for a certificate of registration for a person servicing carbon dioxide systems of 100-pound capacity or more; and

(3) establish service tag requirements.

R710-17-3. Definitions.

(1) Terms used in this rule are defined in Section 53-7-601.

(2) In addition:

(a) "annual" means a period of one year or 365 calendar days;

(b) "board" means Utah Fire Prevention Board;

(c) "branch office" means any location, other than the primary business location, where business license, telephone, advertising and servicing equipment are utilized;

(d) "certificate of registration" means a written or digital document issued by the agency to any person to grant permission to such person to perform any act or acts for which authorization is required;

(e) "concern" means a person, firm, corporation, partnership, or association, licensed by the agency;

(f) "employee" means a person who works for a licensed concern, and may include a person who works on a contractual basis;

(g) "IFC" means the state adopted International Fire Code;

(h) "license" means a written document issued by the agency authorizing a concern to engage in the business of servicing CO2 systems;

(i) "NFPA" means National Fire Protection Association;

(j) "repair" means any work performed on, or to, any CO2 system; and

(k) "agency" means the Utah State Fire Marshal.

R710-17-4. Exclusions.

The requirements outlined in this rule do not apply to carbon dioxide systems with a capacity of less than 100 pounds.

R710-17-5. Licenses and Certificates Required.

(1) Effective January 1, 2027, a person may not engage in activities related to a carbon dioxide system of 100-pound capacity or more unless the person has obtained a license or certificate of registration from the agency.

(2) System activities include:

(a) the installation, service, or repair of carbon dioxide systems of 100-pound capacity or more used in dispensing applications for use in this state; and

(b) laying or connecting of pipes or tubing and fittings connecting with or to systems or servicing a system and appliances to be used with carbon dioxide systems of 100-pound capacity or more.

(3) Appliance activities include the service, installation, or repair of appliances used or to be used in this state in connection with systems using carbon dioxide systems of 100-pound capacity or more.

(4) Gas detection activities include the installation of any part of the carbon dioxide gas detection system, including the power supply system, back up battery, detectors, control units and signage as required by NFPA 72 and the IFC.

R710-17-6. License and Renewal.

(1) A license application shall:

(a) be signed by an authorized representative of the applicant:

(i) if the application is made by a partnership, it shall be signed by at least one partner; or

(ii) if the application is made by a corporation or association other than a partnership, it shall be signed by the principal officer or authorized agent;

(b) state the name of the person, partnership, corporation or association to whom the license will be issued;

(c) specify the location, by street and number, of the premises for which the license will be issued and the particular classification of the license authorizing the type of staffed plant or facility to be conducted; and

(d) include proof of insurance.

(2) An original license or renewal license shall be valid for one year from the date of issuance.

(3) A license issued under this part is:

(a) not transferable by the licensee or licensees to any other person, firm, association, partnership, or corporation; and

(b) valid only for the particular premises and particular persons described on the license.

(4) If there is a transfer or change in ownership of a company who possesses a license, the change shall be reported to the board within 30 days.

(5) A license or registration fee paid under this part may not be refunded when a license is no longer valid because of:

(a) voluntary transfer of any nature;

(b) revocation under this part;

(c) death of the holder;

(d) insolvency;

(e) assignment for the benefit of creditors; or

(f) for any other reason determined by rule of the board.

R710-17-7. Certificate of Registration.

(1) A person that installs, repairs, or services appliances, containers, equipment, systems, tubing or piping for the use of carbon dioxide systems of 100-pound capacity or more shall be certified by the agency by passing an appropriate examination based on the safety requirements of the board.

(2) A trainee employee:

(a) is exempt from completing the examination for 45 working days, and until examined by a representative of the board; and

(b) shall be supervised by a qualified instructor during the 45 day period and until examined by a representative of the board.

(3) Certification Examination.

(a) Applicants shall pay the required fee before testing.

(b) Each examination shall be administered by the agency.

(4) Application for certification shall be made in writing to the agency and shall be signed by the applicant.

(5) An original certification or renewal certification shall be valid for one year from the date of issuance.

R710-17-8. Service Tags.

(1) Size and Color. Tags shall be not more than five and one-half inches in height, nor less than four and one-half inches in height, and not more than three inches in width, nor less than two and one-half inches in width. Tags may not have a red hue.

(2) Attaching Tag. One service tag shall be attached to each CO2 system gas detector in such a position as to be conveniently inspected.

(3)(a) Service tags shall bear the following information on one side of the service tag:

(i) type of license;

(ii) approved Seal of Registration of the agency;

(iii) license registration license number;

(iv) certificate of registration certification number of individual who performed or supervised the service or services performed;

(v) signature of individual whose certificate of registration number appears on the tag;

(vi) concern's name;

(vii) concern's address;

(viii) type of service performed;

(ix) size of tank serviced; and

(x) date service is performed.

(b) Any other desired printing or information shall be placed on the reverse side of the tag.

(4) Legibility.

(a) The certificate of registration number and the signature shall be printed or written distinctly.

(b) Any information pertaining to date and type of service shall be indicated on the card by perforations in the appropriate space provided. Each perforation shall clearly indicate the desired information.
(5) A sample service tag is on file in the State Fire Marshal's Office for review.
(6) A new service tag shall be attached to the CO2 system each time a service is performed.
(7) The following wording shall be placed at the top or reinforced ring end of every tag: "DO NOT REMOVE, BY ORDER OF THE STATE FIRE MARSHAL".
(8) No person shall remove a service tag, unless it is being replaced with a new tag.
(9) Restrictive Use.
(a) CO2 System components which do not conform with this rule and the International Fire Code, 2024 edition, incorporated by reference under Section 15A-5-103, shall be removed from service and shall be tagged with a non-compliance tag. Such tags shall be red in color, and shall be not less in size than that of an approved service tag.
(b) The certified technician shall notify the AHJ that the bulk carbon dioxide system has been placed out of service. This can be done through a compliance program or by direct notification.
(c) Service tags shall only be placed on systems as allowed in this rule.

R710-6-9. Conflicts.
In the event where separate requirements pertain to the same situation in the same code, or between different codes or standards as adopted, the more restrictive requirement shall govern, as determined by the enforcing authority.

KEY: carbon dioxide systems
Date of Last Change: 2026
Authorizing and Implemented or Interpreted Law: 53-7-204; 53-7-602

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: Amendment	**Filing ID: 58401**
Rule or section number:	**R911-9**

1. Agency Information

Title catchline:	Public Safety, Emergency Medical Services
Building:	Calvin Rampton Building
Street address:	4501 S 2700 W
City, state:	Taylorsville, UT 84129

2. Contact Persons

Name:	Phone:	Email:
Kim Gibb	801-965-4018	kgibb@utah.gov

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

3. General Information

A. Rule or section catchline:

R911-9. Specialty Care Systems Facility Designations

B. Purpose of the new rule or reason for the change:

The purpose for the rule change is to incorporate changes made upon passage of SB 127, passed in the 2026 General Session.

C. Summary of the new rule or change:

This amendment updates Rule R911-9 to align with SB 127 (2026 General Session), current national standards, and statewide specialty care system requirements.

Changes include updating trauma center designation standards, incorporating the 2026 American College of Surgeons standards and Utah Trauma Registry Data Dictionary, revising trauma system oversight and designation processes, and establishing a needs-based assessment for new or upgraded Level I and II trauma centers.

Additional changes clarify hospital reporting requirements, medical control responsibilities, and recognition of nationally accredited stroke and cardiac care facilities. The amendments also include technical corrections and updates to improve consistency and clarity throughout this rule.

4. Legislative Action Information

A. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
B. If yes, any bill number and session:	SB 127 (2026 General Session)

5. Fiscal Information

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

A. State budget:

The amendments are not anticipated to have a fiscal impact on the state budget.

Most changes clarify existing processes, update standards, or formalize current practices.

Implementation is expected to occur primarily through existing Bureau of EMS resources.

B. Local governments:

No fiscal impact is anticipated for local governments.

The amendments primarily affect hospital designation, reporting, and specialty care system requirements rather than local government operations.

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

No fiscal impact is anticipated for small businesses. The amendments primarily apply to hospitals and designated specialty care facilities.

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

Some hospitals may experience additional administrative or operational costs associated with updated national trauma standards, registry reporting, or accreditation requirements.

These costs will vary depending on the facility's current capabilities and designation level.

The overall fiscal impact is inestimable.

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 fiscal impact is anticipated for individuals or other persons not directly involved in hospital designation or specialty care system operations.

F. Compliance costs for affected persons:

Compliance costs are expected to vary depending on the facility's existing operations and designation level.

Facilities already meeting current national standards may experience minimal additional costs, while others may need to make operational or administrative adjustments.

The overall fiscal impact is inestimable.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
State Budget	$0	$0	$0	$0	$0
Local Governments	$0	$0	$0	$0	$0
Small Businesses	$0	$0	$0	$0	$0
Non-Small Businesses	inestimable	inestimable	inestimable	inestimable	inestimable
Other Persons	inestimable	inestimable	inestimable	inestimable	inestimable
Total Fiscal Cost	**inestimable**	**inestimable**	**inestimable**	**inestimable**	**inestimable**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

The Commissioner of the Department of Public Safety, Beau Mason, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 53-2d-101.1		

10. Incorporation by Reference Information

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*)**:**	
Official Title of Materials Incorporated (from title page)	Resources for Optimal Care of the Injured Patient 2026 Standards
Publisher	American College of Surgeons
Issue Date	October 2026

B. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Resources for Optimal Care of the Injured Patient Level IV Trauma Center 2026 Standards
Publisher	American College of Surgeons
Issue Date	July 2026

C. 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*)**:**	
Official Title of Materials Incorporated (from title page)	Utah Trauma Registry Data Dictionary
Publisher	Department of Public Safety
Issue Date	2026

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Erik Bornemeier, Director, Emergency Medical Services Bureau	**Date:**	10/20/2026

R911. Public Safety, Emergency Medical Services.
R911-9. Specialty Care Systems Facility Designations.
R911-9-1[~~00~~]. Authority and Purpose for Specialty Care Systems Standards.

(1) This rule establishes requirements pursuant to statute for a statewide specialty care systems and related emergency medical systems including the following:

(a) establishes and actively supervises a statewide trauma system;

(b) establishes, by rule, trauma center designation requirements and model state guidelines for triage, treatment, transport, and transfer of trauma patients to the most appropriate health care facility; and

(c) allows designation of trauma care facilities consistent with the trauma center designation requirements and verification process established by the department and applicable statutes.

(2) This rule provides standards for the categorization of hospitals and the voluntary designation of trauma centers to assist physicians in selecting the most appropriate physician and facility based upon the nature of the patient's critical care problem and the capabilities of the facility.

(3) It is intended that the categorization process be dynamic and updated periodically to reflect changes in national standards, medical facility capabilities, and treatment processes. Also, as suggested by the Utah Medical Association, the standards are in no way to be construed as mandating the transfer of any patient contrary to the wishes of their attending physician, rather the standards serve as an expression of the type of facilities and care available in the respective hospitals for the use of physicians requesting transfer of patients requiring skills and facilities not available in their own hospitals.

R911-9-2[~~00~~]. Trauma System Advisory Committee.

(1) The Trauma System Advisory Committee shall:

(a) be a subcommittee of the Trauma System and Emergency Medical Services Committee created by Section 53-2d-104;

[~~(a)~~](b) be a broad and balanced representation of healthcare providers and health care delivery systems; and

[~~(b)~~](c) conduct meetings in accordance with committee procedures.

(2) The department shall appoint committee members to serve terms [~~from one to four years~~]for two years.

(3) The department may re-appoint committee members for one additional term in the position initially appointed by the department.

(4) Causes for removal of a committee member include the following:

(a) more than two unexcused absences from meetings within 12 calendar months;

(b) more than three excused absences from meetings within 12 calendar months;

(c) conviction of a felony; or

(d) change in organizational affiliation or employment which may affect the appropriate representation of a position on the committee for which the member was appointed.

R911-9-3[~~00~~]. Trauma Center Categorization Guidelines.

The department incorporates by reference as criteria for Level I, Level II, Level III, Level IV, Level V trauma ready facility, and [~~P~~]pediatric trauma center designation, compliance with national standards published in the American College of Surgeons (ACS) documents: Resources for Optimal Care of the Injured Patient [~~2014~~]2026 Standards, and Resources for Optimal Care of the Injured Patient Level IV Trauma Center 2026 Standards.

(1) Adult and Pediatric Level I and Level II trauma centers shall be verified by the American College of Surgeons.

(2) Adult and Pediatric Level III, Level IV, and Level V trauma centers shall be designated by the department pursuant to state rule and are not required to obtain ACS verification.

R911-9-4[~~00~~]. Trauma Center Review Process.

(1) The department shall conduct a quality review site visit of trauma centers and applicants to verify compliance with standards set in Section R911-9-3[~~00~~]. In conducting each evaluation, the department may consult with experts from the following disciplines:

(a) trauma surgery;

(b) emergency medicine;

(c) emergency or critical care nursing; and

(d) hospital administration.

(2) A consultant may not assist the department in evaluating a facility in which the consultant is employed, practices, or has any financial interest.

R911-9-5[~~00~~]. Trauma Center Categorization Process.

The department shall:

(1) [~~D~~]develop a survey document based upon the Trauma Center Criteria described in Section R911-9-3[~~00~~].

(2) [~~P~~]periodically survey Utah hospitals which provide emergency trauma care to determine the maximum level of trauma care which each is capable of providing.

(3) [~~D~~]disseminate survey results to each Utah hospital, and as appropriate, to Utah licensed ambulance providers.

R911-9-6[~~00~~]. Trauma Center Designation Process.

(1) Hospitals seeking voluntary designation and any designated trauma centers desiring to remain designated, shall [~~apply for designation by~~]submit[~~ting~~] the following information to the department at least 30 days before the date of the scheduled site visit:

(a) a completed and signed application and appropriate fees for trauma center verification;

(b) a letter from the hospital administrator of continued commitment to comply with current trauma center designation standards as applicable to the applicant's designation level;

(c) [~~the~~]current data specified under Section R911-9-7[~~00 is current~~];

(d) Level I and Level II trauma centers shall[~~must~~] submit a copy of the Pre-review Questionnaire (PRQ) from the ACS in lieu of the application in Subsection R911-9-6[~~00~~](1)(a);

(e) Level III and Level IV and Level V trauma centers must submit a complete department approved application.

(2) Hospitals desiring to be designated as Level I and Level II trauma centers must be verified by the ACS within three months of the expiration date of previous designation;

(a) [~~and must~~]hospitals shall submit a copy of the full ACS report detailing the results of the ACS site visit[~~.~~]; and

(b) [~~A~~]a department representative [~~must~~]shall be present during the entire ACS verification or consultation visit.[~~Hospitals desiring to be Level III or Level IV trauma centers must be designated by hosting a formal site visit by the department.~~]

[~~(3) Hospitals not previously designated as a Level I or a Level II trauma center, applying for designation after December 31, 2016, will be considered for designation implementing the point system suggested by the ACS as follows and using data from the Utah Trauma Registry:~~

~~(a) population as defined by the federal Office of Management and Budget total Metropolitan Statistical Area (MSA):~~

~~(i) total MSA population of less than 600,000 receives two points;~~

~~(ii) total MSA population of 600,000 to 1,200,000 receives four points;~~

~~(iii) total MSA population of 1,200,000 to 1,800,000 receives six points;~~

~~(iv) total MSA population of 1,800,000 to 2,400,000 receives eight points; and~~

~~(v) total MSA population of greater than 2,400,000 receives ten points;~~

~~(b) median transport times, combined air and ground time at scene only, not to include transfer:~~

~~(i) median transport time of less than 10 minutes receives zero points;~~

~~(ii) median transport time of 10 -- 20 minutes receives one point;~~

~~(iii) median transport time of 21 -- 30 minutes receives two points;~~

~~(iv) median transport time of 31 -- 40 minutes receives three points; and~~

~~(v) median transport time of greater than 41 minutes receives four points;~~

~~(c) department, system stakeholder, or community support:~~

~~(i) department support for a trauma center, if none exist, or an additional trauma center in the MSA -- five points;~~

~~(ii) department position that no additional trauma centers are needed -- negative five points;~~

~~(iii) Trauma System Advisory Committee, or equivalent body, statement of support for a trauma center if none exist, or an additional trauma center in the MSA -- five points;~~

~~(iv) community support demonstrated by letters of support from 25% - 50% of city and county governing bodies within the MSA -- one point; and~~

~~(v) community support demonstrated by letters of support from over 50% of city and county governing bodies within the MSA -- two points;~~

~~(d) severely injured patients, ISS more than 15, discharged from acute care facilities not designated as Level I, II, or III trauma centers:~~

~~(i) discharges of 0-200 severely injured patients receives zero points;~~
~~(ii) discharges of 201 -- 400 severely injured patients receives one point;~~
~~(iii) discharges of 401 -- 600 severely injured patients receives two points;~~
~~(iv) discharges of 601 -- 800 severely injured patients receives three points; and~~
~~(v) discharges of greater than 800 severely injured patients receives four points;~~
~~(e) Level I trauma centers:~~
~~(i) for the existence of each verified Level I trauma center already in the MSA assign one negative point;~~
~~(ii) for the existence of each verified Level II trauma center already in the MSA assign one negative point; and~~
~~(iii) for the existence of each verified Level III trauma center already in the MSA assign one half negative point;~~
~~(f) numbers of severely injured patients, ISS more than 15, seen in Level I and Level II trauma centers already in the MSA. The expected number of high ISS patients is calculated as: 500 times the number of Level I and Level II centers in the MSA equals the expected number of high ISS patients:~~
~~(i) if the MSA has more than 500 severely injured patients above the expected number assign two points;~~
~~(ii) if the MSA has 0 - 500 severely injured patients above the expected number assign one point;~~
~~(iii) if the MSA has 0 - 500 fewer severely injury patients than the expected number assign one negative point; and~~
~~(iv) if the MSA has more than 500 fewer severely injured patients than the expected number assign two negative points.~~
~~(g) The following scoring system shall be used to allocate trauma centers within the MSAs:~~
~~(i) MSAs with scores of five points or less shall be allocated 1 Level I or II trauma center;~~
~~(ii) MSAs with scores of six - ten points shall be allocated 2 Level I or II trauma centers;~~
~~(iii) MSAs with score of 11 - 15 points shall be allocated 3 Level I or II trauma centers; and~~
~~(iv) MSAs with scores of 16 - 20 points shall be allocated 4 Level I or II trauma centers.~~
~~(h) If the number of trauma centers allocated by the model is greater than the existing number of Level I or II trauma centers in the MSA, efforts should be undertaken to recruit and designate additional trauma centers.~~
~~(i) If the number of Level I and II trauma centers allocated by the model is less than or equal to the number currently designated, the department should not designate additional Level I or II trauma centers in the MSA.~~]

(3) Hospitals desiring to be Level III, Level IV or Level V trauma centers must be designated by hosting a formal site visit by the department.

(4)(a) Before approving the designation of a new Level I or Level II trauma center, or the upgrade of an existing trauma center to a higher level, the department shall conduct a formal trauma system needs assessment.

(b) Hospitals not previously designated as a Level I or a Level II shall be guided by a needs-based assessment including:

(i) population size and distribution;

(ii) access to Level I and Level II trauma care, including the percentage of the population within 60 minutes of a designated trauma center by ground or air transport;

(iii) EMS response, transport, and interfacility transfer times;

(iv) volume and distribution of severely injured patients;

(v) trauma-related morbidity and mortality;

(vi) utilization, diversion status, and transfer patterns of existing trauma centers;

(vii) projected impact of a new or upgraded trauma center on patient volumes, readiness, and performance of existing trauma centers; and

(viii) economic considerations and safeguards including:

(A) trauma center designation decisions shall not be driven by economic incentives unrelated to population need; and

(B) trauma patient triage, transport, and transfer decisions shall be based solely on patient clinical needs and shall not be influenced by insurance status or network affiliation.

R911-9-7[~~00~~]. Data Requirements for an Inclusive Trauma System.

(1) Each hospital shall collect, and [~~monthly~~]submit to the department monthly, trauma registry information necessary to maintain an inclusive trauma system.

(a) Designated trauma centers shall provide such data in a standardized electronic format approved by the department.

(b) The department shall provide funds to hospitals, excluding designated trauma centers, for the data collection process.

(2) To ensure consistent patient data collection, a trauma patient is defined as a patient sustaining a traumatic injury and meeting the following criteria:

(a) at least one of the following injury diagnostic codes: ICD10 Diagnostic Codes: S00-S00 with 7th character modifiers of A, B, or C only, T07, T14, T20-T28 with 7th character modifier of A, T30-T32, T79.A1-T79.A9 with 7th character modifier of A excluding the following isolated injuries: S00, S10, S20, S30, S40, S50, S60, S70, S80, S90. Late effect codes, which are represented using the same range of injury diagnosis codes but with the 7th digit modifier code of D through S are also excluded; and

(b) at least one of the following patient conditions:

(i) stay at a hospital greater than 12 hours, as measured from the arrival at the emergency department to patient discharge;

(ii) transferred in or out of reporting hospital via EMS transport, including air ambulance; or

(iii) death resulting from the traumatic injury, independent of hospital admission or hospital transfer status.

(3) The department incorporates by reference the [~~National Trauma Data Standard Data Dictionary for 2024 Admissions published by the ACS, and the Utah Trauma Registry State Required Elements for 2023 published by the Department of Health and Human Services~~]Utah Trauma Registry Data Dictionary, Release 2026, published by the Department of Public Safety.

R911-9-8[~~00~~]. Noncompliance to Trauma Standards.

(1) The department may warn, reduce, deny, suspend, revoke, or place on probation a facility designation, if the department finds evidence that the facility has not been or will not be operated in compliance with standards [~~adopted~~]incorporated under Section R911-9-3[~~00~~].

(2) A hospital, clinic, health care provider, or health care delivery system may not profess or advertise to be designated as a trauma center if the department has not designated it as such pursuant to this rule.

R911-9-9[~~00~~]. Resource Hospital Minimum Designation Requirements.

(1) A resource hospital shall meet the following minimum requirements for designation:

[~~(1)~~](a) [~~B~~]be licensed in Utah or another state as a general acute hospital or be a Veteran's Administration hospital operating in Utah;

[~~(2)~~](b) [~~H~~]have the ability to communicate with other EMS providers operating in the area;

[~~(3)~~](c) [~~P~~]provide on-line medical control for pre-hospital EMS providers who request assistance for patient care, 24 hours day, seven days a week;

[~~(4)~~](d) [~~Create and abide by written pre-hospital emergency patient care protocols~~]abide by off-line protocols approved by the licensed ambulance provider's off-line medical director for use in providing on-line medical control for pre-hospital EMS providers;

[~~(5)~~](e) [~~T~~]train new staff on the protocols before the new staff is permitted to provide on-line medical control and [~~annually~~]regularly review protocols with physicians and nursing staff;

[~~(6)~~](f) [~~Annually~~]regularly provide in-service training on the protocols to physicians and nurses who provide on-line medical control;

[~~(7)~~](g) [~~M~~]make the protocols immediately available to staff for reference;

[~~(8)~~](h) [~~P~~]provide on-line medical control which shall include:

[~~(a)~~](i) direct voice communication with a physician; or

[~~(b)~~](ii) a registered nurse or physician's assistant, who shall be licensed in Utah, who is in voice contact with a physician;

[~~(9)~~](i) [~~I~~]implement a quality improvement process which shall include:

[~~(a)~~](i) representatives from local EMS providers that routinely transport patients to the resource hospital;

[~~(b)~~](ii) quarterly meetings; and

[~~(c)~~](iii) minutes of the quality improvement meetings which are available for department review;

[~~(10)~~](j) [~~I~~]identify a coordinator for the pre-hospital quality improvement process;

[~~(11)~~](k) [~~C~~]cooperate with the pre-hospital EMS providers' off-line medical directors in the quality review process, including granting access to hospital medical records of patients served by the particular pre-hospital EMS provider;

[~~(12)~~](l) [~~P~~]participate in local and regional forums for performance improvement; and

[~~(13)~~](m) [~~A~~]assist the department in evaluating EMS system effectiveness by submitting to the department, in an electronic format, quarterly data specified by the department.

[~~(14)~~](2) Designated trauma centers are deemed to meet the resource hospital standards and are exempt from requirements outlined in this section.

[~~(15)~~](3) The resource hospital designation and re-designation shall be for a period of three years.

R911-9-10[~~00~~]. Stroke Treatment and Stroke Receiving Facility Minimum Designation Requirements.

(1) A Primary [~~or~~]Stroke Center, Thrombectomy-Capable Stroke Center, Comprehensive Stroke [~~Treatment~~]Center, or an Acute Stroke Ready Hospital shall be accredited by the Joint Commission or other nationally recognized accrediting body.

(2) A hospital designated as a Stroke Receiving Facility for receiving stroke patients via Emergency Medical Services shall meet the following requirements:

(a) [~~B~~]be licensed as an acute care hospital in Utah;

(b) [~~R~~]require physician response to the emergency department in less than 30 minutes for treatment of stroke patients;

(c) [~~M~~]maintain the ability of physician and nursing staff to utilize a standardized assessment tool for ischemic stroke patients;

(d) [~~M~~]maintain and utilize approved thrombolytic medications for treatment of patients meeting criteria for administration of thrombolytic therapy;

(e) [~~E~~]establish a standardized acute stroke protocol and authorize appropriate emergency department staff to implement the protocol when appropriate;

(f) [~~H~~]have ancillary equipment and personnel available to diagnose and treat acute stroke patients in a timely manner;

(g) [~~E~~]establish patient transport protocols with designated stroke treatment centers;

(h) [~~H~~]have a performance improvement program for acute stroke care and report stroke data as required by the department; and

(i) [~~S~~]submit to [~~a~~]site visits by representatives of the department.

(3) Upon designation, the department may, in consultation with off-line EMS medical direction and protocol, recommend direct transport of stroke patients to a Stroke Receiving Center or [~~a~~]other designated Stroke [~~Treatment~~]Center by licensed ambulance provider.

(4)(a) Each hospital shall collect, and submit [~~at least quarterly~~]to the department quarterly, stroke registry information necessary to maintain an inclusive stroke system.

(b) Each hospital shall provide such data in a standardized electronic format approved by the department.

(5) [~~The~~]A stroke [~~treatment and stroke receiving designation~~]center designation and re-designation shall be for a period of three years.

R911-9-11[~~00~~]. Percutaneous Coronary Intervention Center Minimum Designation Requirements.

(1) To receive acute ST-elevation myocardial infarction (STEMI) patients via an ambulance, a Percutaneous Coronary Intervention (PCI) center, shall meet the following minimum designation requirements:

(a) be licensed as an acute care hospital in Utah;

(b) maintain an emergency department that is always staffed by at least one physician and one registered nurse;

(c) have the ability to receive 12 lead EKG data from licensed ambulance providers transporting patients to the hospital for treatment of STEMI;

(d) maintain the ability to provide cardiac catheterization and PCI of STEMI patients within 90 minutes of patient arrival in the emergency department 24 hours a day [~~and~~]seven days a week;

(e) maintain a performance improvement program for STEMI care and report data to the department as required by the department; and

(f) submit to [~~a~~]site visits by representatives of the department.

(2) Upon designation, the department may, in consultation with off-line EMS medical direction and protocol, recommend direct transport of STEMI patients to a STEMI Treatment Center by a licensed ambulance provider.

(3) The PCI designation and re-designation shall be for a period of three years.

(4)(a) Each hospital shall collect, and submit [~~at least quarterly~~]to the department, cardiac arrest registry, (CARES), information necessary [~~to maintain an inclusive cardiac system~~]to fully participate in the national CARES registry.

(b) Each hospital shall provide such data in a standardized electronic format approved by the department.

(5)(a) An Acute Heart Attack Ready Center, Primary Heart Attack Center, or Comprehensive Heart Attack Center, or a Comprehensive Cardiac Center shall be accredited by the Joint Commission or other nationally recognized accrediting body.

(b) These designations shall be recognized by the department for EMS patient destination guidelines.

R911-9-12[~~00~~]. Patient Receiving Facility Minimum Designation Requirements.

(1) A patient receiving facility shall meet the following minimum designation requirements:

(a) have the ability to communicate with licensed and designated EMS providers;

(b) be staffed or have on-call physician, physician assistant, or nurse practitioner availability during designated hours with a response time of less than 20 minutes;

(c) have and maintain ACLS and PALS certification;

(d) attend meetings of the local EMS council, if one exists, to participate in the coordination and operations of local licensed and designated EMS providers;

(e) abide by off-line protocols approved by the licensed ambulance provider's off-line medical director;

(f) train staff on protocols used by the licensed ambulance providers who transport patients to the patient receiving facility;

(g) implement a quality improvement process of all patients received at the patient receiving facility with the local resource hospital or trauma center including access to medical records for patients transported by ambulance;

(h) maintain equipment, services and medications on-site to provide advanced life support (ALS) intervention and appropriate treatment. Equipment and services shall include:

(i) ECG;

(ii) ACLS medications;

(iii) laboratory services;

(iv) radiology services;

(v) oxygen delivery systems;

(vi) airway support equipment and supplies; and

(vii) suction equipment and supplies[~~;~~].

[~~(i)~~](2) The facility shall submit to [~~a yearly~~]site visits by representatives of the department[~~; and~~].

[~~(j)~~](3) The facility shall submit [~~monthly~~]data reports to the department on each patient received by an ambulance, and in an electronic format provided by the department.

[~~(2) The department may recommend the preferential transportation of STEMI patients by ambulance to a patient receiving facility.~~]

KEY: emergency medical services, trauma, reporting, trauma center designation
Date of Last Change: [~~July 1, 2024~~]2026
Authorizing, and Implemented or Interpreted Law: 53-2d-101.1

End of the Notices of Proposed Rules Section

NOTICES OF
CHANGES IN PROPOSED RULES

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 15, 2026.

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 16, 2027, 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.

The Changes in Proposed Rules Begin on the Following Page

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: CPR (Change in Proposed Rule)	**Filing ID: 58210**
Rule or section number:	**R70-330**
Date of previous publication (only for CPRs):	**09/15/2026**

1. Agency Information

Title catchline:	Agriculture and Food, Regulatory Services
Building:	Taylorsville State Office Buildings, South Bldg, 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

2. Contact Persons

Name:	**Phone:**	**Email:**
Amber Brown	385-245-5222	Ambermbrown@Utah.gov
Camille Knudson	801-597-6010	camillek@Utah.gov
Travis Waller	801-982-2200	Twaller@Utah.gov

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

3. General Information

A. Rule or section catchline:

R70-330. Raw Milk Permitting and Operational Standards

B. Purpose of the new rule or reason for the change:

The Department of Agriculture and Food (department) is filing a Change in Proposed Rule (CPR) to address public comments and ensure this rule aligns with the legislative intent of HB 179 (passed in the 2026 General Session).

The purpose of this filing is to maintain the six-month veterinary check as a conditional trigger during active disease threats and to ensure the requirements remain within the authority without imposing unintended regulatory burden on producers.

C. Summary of the new rule or change:

The proposed changes amend Section R70-330-4 by reverting the routine six-month veterinary exam to a conditional trigger activated during an active disease threat, and by removing references to "official tags" to align with Subsection 4-3-602(2)(g)(i).

In Section R70-330-10, the CPR removes the mandatory black cap requirement to align directly with Subsection 4-3-604(2)(d), which specifies a "specific colored label".

Additionally, the filing includes technical amendments throughout this rule to adjust numbering from removed text and to ensure the text aligns with the Rulewriting Manual for Utah.

(EDITOR'S NOTE: The original proposed repeal and readopt upon which this change in proposed rule (CPR) was based was published in the September 15, 2026, issue of the Utah State Bulletin, on page 16. Underlining in the rule below indicates text that has been added since the publication of the proposed repeal and readopt mentioned above; strike-out indicates text that has been deleted. You must view the CPR and the proposed repeal and readopt together to understand all of the changes that will be enforceable should the agency make this rule effective.)

5. Fiscal Information

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

A. State budget:

The proposed changes will not impact on the state budget because the department did not make the initial proposed repeal and readopt effective, and the revisions create no new agency costs or revenue.

B. Local governments:

The filing does not impact 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 changes will not impact on small businesses because the department did not make the initial proposed repeal and readopt effective, and the revisions impose no new compliance costs or equipment requirements on permitted producers.

D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
The proposed changes will not impact on non-small businesses because the department did not make the initial proposed repeal and readopt effective, and the revisions impose no new compliance costs or equipment requirements on permitted producers.
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 impact other persons because the department did not make the initial proposed repeal and readopt effective, and the revisions impose no new compliance costs or equipment requirements on permitted producers.
F. Compliance costs for affected persons:
The filing does not change the compliance costs.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**
Fiscal Benefits	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

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

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 4-3-607		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Kelly Pehrson, Commissioner	**Date:**	10/23/2026

R70. Agriculture and Food, Regulatory Services.
R70-330. Raw Milk Permitting and Operational Standards.
R70-330-1. Purpose and Authority.

(1) The department enacts this rule under Section 4-3-607.

(2) This rule establishes administrative, operational, sanitation, packaging, labeling, and product standards for a producer holding or seeking a permit to produce, process, or distribute raw milk or a raw milk product.

R70-330-2. Definitions.

Terms used in this rule mean as defined in Section 4-3-601.

R70-330-3. Permits.

(1) An applicant shall submit a completed permit application on a department-provided form at least 30 days before selling raw milk.

(2) The department shall inspect the applicant's premises to verify compliance with this rule before issuing a permit under Section 4-3-301.

(3) A permittee may not transfer a permit to another person or location.

R70-330-4. Building and Premises Requirements.

(1) A producer shall maintain a facility structured to minimize milk contamination.

(2) A producer shall construct three separate, clean, enclosed rooms dedicated to:

(a) milking;

(b) packaging or sealing; and

(c) storing raw milk.

(3) A producer shall provide a designated, sanitary area for cleaning, sanitizing, and storing multi-use milk containers.

(4) A producer shall physically separate any retail sales area from rooms or areas where animals are milked, or milk is handled or processed.

(5) A producer shall ensure that all milk-handling areas:

(a) feature smooth, non-absorbent, and easily cleanable floors and walls;

(b) remain free of dust, debris, and unnecessary equipment; and

(c) remain dry.

(6) A producer shall:

(a) manage and drain livestock environments, including paddocks and shelters to remain clean;

(b) implement time or space separation to ensure that poultry, swine, or other livestock do not enter milking or milk-handling areas;

(c) maintain adequate pest and rodent control measures in all buildings; and

(d) ensure that the immediate perimeter surrounding the milkhouse and milking areas is free of stagnant water, accumulated manure, and excessive mud.

(7) A producer shall use a water supply that the producer tests annually for potability and maintains free of environmental contamination.

R70-330-5. Sanitation, Operating, and Bulk Milk Tank Requirements.

(1) A producer shall implement a sanitation routine that prevents the adulteration of raw milk.

(2) A producer shall clean and sanitize all milk-contact surfaces, milking equipment, transfer lines, and bulk tanks after each use.

(3) A producer shall use food-grade cleaning agents according to manufacturer specifications.

(4) A producer shall maintain a sanitization log on the premises that records the date, time, and method used for equipment cleaning.

(5) Before milking, a producer shall:

(a) keep udders and teats visibly clean, dry, and free of manure or mud; and

(b) wipe teats with a single-use sanitizing cloth or paper towel.
(6) A producer shall apply a department-approved post-milking teat dip immediately after milking.
(7) A producer shall ensure that personnel wear clean attire and use sanitized milk-handling tools during operation.
(8) A producer shall ensure that bulk milk tanks:
(a) consist of stainless steel or other approved non-absorbent, corrosion-resistant material;
(b) feature tight-fitting covers and sanitary outlets;
(c) include a department-approved temperature-recording device for tanks put into service on or after August 7, 2007; and
(d) maintain temperature-recording charts for at least six months, which includes:
(i) the date;
(ii) the producer's name; and
(iii) the signature of the individual who reviewed and verified the recorded temperature.

R70-330-6. Additional Tests and Use of Third-Party Testing Laboratories.
(1) A producer using a third-party laboratory to satisfy the requirements of Section 4-3-602 shall ensure the laboratory:
(a) holds a current certification from the department;
(b) holds ISO/IEC 17025 accreditation for microbiological testing of food or dairy products; or
(c) appears on the federal Interstate Milk Shippers list.
(2) In addition to batch bacterial and coliform counts, the department may require a producer to test for somatic cell count or antibiotic residues.

R70-330-7. Frequency of Inspections Including Random Cooler Checks.
(1) The department shall annually inspect each permitted production facility, as well as any mobile units utilized by the producer, designated agents, or third-party vendors for raw milk distribution.
(2)(a) In accordance with Section 4-3-203, the department may conduct random inspections at reasonable times and places to ensure compliance with Title 4, Chapter 3, Utah Dairy Act, and this rule.
(b) Random inspections may include unannounced checks of mobile units and retail display cases to verify refrigeration standards.
(c) Mobile units must present calibrated temperature monitoring devices and continuous temperature logs upon request.
(3) A producer shall grant the department access to all milk-handling areas, records, and temperature logs during regular business hours.
(4) A permittee shall pay any inspection or testing fee established by the department under Subsection 4-3-607(2) and Section 63J-1-504.
(5) A producer who relies on a designated agent or third-party vendor for transport shall maintain an active manifest that includes vehicle identification, transport routes, and designated handlers for department review.

R70-330-8. Animal Health.
[~~(1) A producer shall mark each animal in a raw milk production herd with an official animal identification tag or microchip.~~]
([~~2~~]1) If the United States Department of Agriculture Animal and Plant Health Inspection Service (USDA/APHIS) determines that Utah is not "Certified Free" of zoonotic disease, then a licensed veterinarian shall:
(a) [~~A producer shall ensure that a licensed veterinarian~~]examine[~~s~~] each herd animal for general systemic health and udder health before inclusion in a raw milk supply; and[~~:~~
~~(a) before adding the animal to the milking herd; and~~]
(b) conduct an examination [~~at least once~~]every six months[~~ thereafter~~].
(2) This section does not apply if the state veterinarian determines that a species milked for human consumption is not at risk for a specific zoonotic disease.
(3) A producer shall maintain official veterinary inspection certificates and disease testing records on the premises in accordance with Section R70-330-9.
(4) A producer shall immediately remove an animal from the milking herd if the animal exhibits clinical signs of disease, mastitis, or if the animal tests positive for a contagious or zoonotic disease.

R70-330-9. Recordkeeping.
(1) A producer shall maintain the following records on the premises for at least 12 months:
(a) daily batch production and distribution logs;
(b) test results for each batch showing compliance with Subsection 4-3-602(2)(i);
(c) animal herd health and disease testing records; and
(d) water supply safety test results.
(2) A producer shall make required records available to department personnel upon request during regular business hours.

R70-330-10. Packaging and Labeling.
(1) A producer shall package raw milk and raw milk products in clean, sanitary, and food-grade containers[~~,~~] consisting of:

[~~(2) A producer shall package:~~]

(a) raw milk in containers of one gallon or less; and

(b) raw milk products in containers or packages of five gallons or less.

[~~(3) Under Subsection 4-3-604(2)(d), a producer shall cap each container of raw milk or raw milk product with a black cap.~~]

([4]2) In addition to the requirements of Section 4-3-604 and 21 CFR Part 101, a producer shall ensure container labels display:

(a) the species of animal producing the milk, such as "Raw Goat Milk" or "Raw Sheep Milk", if [~~the product is~~]derived from an animal other than a cow;

(b) the handling instructions stating "Keep Refrigerated"; and

(c) required label text printed in a contrasting, legible font with a minimum height of [~~one-eighth~~]1/8 inch.

R70-330-11. Standards of Identity and Product Standards.

(1) Raw milk products shall conform to product standards under 21 CFR Parts 131, 133, and 135, except that the producer shall manufacture the product without pasteurization.

(2) A producer shall manufacture raw butter to contain at least 80% milkfat by weight.

(3) A producer shall ensure raw milk and raw milk products comply with Chapter 5, Utah Wholesome Food Act, and applicable rules governing food establishments.

(4) A producer may not offer for sale, distribute, or hold raw milk or a raw milk product that is adulterated, which occurs if the raw milk or a raw milk product:

(a) contains added water, antibiotic residues, or unauthorized chemicals;

(b) exceeds somatic cell count standards;

(c) originates from an animal exhibiting clinical signs of disease or mastitis; or

(d) contacts equipment that is not clean and sanitized.

(5) A producer may not label or represent a product as "raw milk" or a "raw milk product" unless it is:

(a) produced under a valid permit issued by the department; or

(b) meets the exemption requirements listed in Section 4-3-608 or 4-3-609.

(6) The department may issue an order to remove from sale any misbranded or adulterated raw milk or raw milk product[~~ that is misbranded or adulterated~~].

KEY: dairy inspections, raw milk, raw milk products, permits, labeling, recordkeeping, standards
Date of Last Change: November 1, 2026
Notice of Continuation: January 8, 2026
Authorizing, and Implemented or Interpreted Law: 4-3-201, 4-3-607

NOTICE OF SUBSTANTIVE CHANGE	
TYPE OF FILING: CPR (Change in Proposed Rule)	**Filing ID: 58142**
Rule or section number:	**R884-24P-33**
Date of previous publication (only for CPRs):	**09/01/2026**

1. Agency Information

Title catchline:	Tax Commission, Property Tax
Building:	Tax Commission Building
Street address:	210 N 1950 W
City, state:	Salt Lake City, UT 84004

2. Contact Persons

Name:	Phone:	Email:
Administrative Assistant	801-297-3901	officeofthecommission@utah.gov

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

3. General Information

A. Rule or section catchline:
R884-24P-33. 2026 Personal Property Valuation Guides and Schedules Pursuant to Utah Code Ann. Section 59-2-107

B. Purpose of the new rule or reason for the change:
After publication, the Property Tax Division discovered two percentages were transposed in the rule section proposed text that need to be corrected before this section is effective.
C. Summary of the new rule or change:
On Table 8, the 2023 percentage has been changed from 75% to 77% and the 2022 percentage has been changed from 77% to 75%. (EDITOR'S NOTE: The original proposed amendment upon which this change in proposed rule (CPR) was based was published in the September 1, 2026, issue of the Utah State Bulletin, on page 147. Underlining in the section below indicates text that has been added since the publication of the proposed section 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 section effective.)

5. Fiscal Information

Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
There is not a savings or cost on state government because the change resulted from a technical error.
B. Local governments:
There is not a savings or cost on local governments because the change resulted from a technical error.
C. Small businesses ("small business" means a business employing 1-49 persons)**:**
There is not a savings or cost on small businesses because the change resulted from a technical error.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons)**:**
There is not a savings or cost on non-small businesses because the change resulted from a technical error.
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 not a savings or cost on persons other than small businesses, non-small businesses, state, or local government entities because the change resulted from a technical error.
F. Compliance costs for affected persons:
There is no change to compliance costs for an affected person because the change resulted from a technical error.

6. Regulatory Impact Summary Table

Enter the cost or savings in the relevant cell. If there is no cost or savings, enter, "$0." If a cost or savings is inestimable, enter, "inestimable."

Fiscal Cost	**FY2027**	**FY2028**	**FY2029**	**FY2030**	**FY2031**
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
Total Fiscal Cost	**$0**	**$0**	**$0**	**$0**	**$0**

Fiscal Benefits	FY2027	FY2028	FY2029	FY2030	FY2031
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
Total Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**
Net Fiscal Benefits	**$0**	**$0**	**$0**	**$0**	**$0**

7. Regulatory Impact Analysis Approval

Commissioner of the Tax Commission, Rebecca L. Rockwell, has reviewed and approved this regulatory impact analysis.

8. Family Impact Information

A. The agency has considered this rule's impact on family health, stability, and formation:	☒

9. Citation Information

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 59-2-107		

11. Public Notice Information

The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	12/15/2026

12. Effective Date Information

This rule change MAY become effective on: (NOTE: This is the date the agency anticipates making the filing effective. It is NOT the effective date)	12/22/2026

13. Agency Authorization Information

Agency head or designee and title:	Rebecca Rockwell, Commissioner	**Date:**	10/29/2026

R884. Tax Commission, Property Tax.
R884-24P. Property Tax.
R884-24P-33. 2027 Personal Property Valuation Guides and Schedules Pursuant to Utah Code Ann. Section 59-2-107.

(1) As used in this rule:

(a) "Acquisition cost" means the same as that term is defined in Section 59-2-102.

(b)(i) "Actual cost" includes the value of components necessary to complete the vehicle, such as tanks, mixers, special containers, passenger compartments, special axles, installation, engineering, erection, or assembly costs.

(ii) Actual cost does not include sales or excise taxes, maintenance contracts, registration and license fees, dealer charges, tire tax, freight, or shipping costs.

(c) "Assessing authority" means:

(i) the State Tax Commission for property assessed under Title 59, Chapter 2, Part 2, Assessment of Property; and

(ii) the county assessor for property assessed under Title 59, Chapter 2, Part 3, County Assessment.

(d) "Cost new" means the actual cost of the property when purchased new.

(i) Except as otherwise provided in this rule, the assessing authority shall rely on the following sources to determine cost new:

(A) documented actual cost of the new or used vehicle; or

(B) recognized publications that provide a method for approximating cost new for new or used vehicles.

(ii) For the following property purchased used, the assessing authority may determine cost new by dividing the property's actual cost by the percent good factor for that class:

(A) Class 6 heavy and medium duty trucks;
(B) Class 13 heavy equipment;
(C) Class 17 vessels equal to or greater than 31 feet in length; and
(D) Class 21 commercial trailers.

(e) For purposes of Sections 59-2-108 and 59-2-1115, "item of taxable tangible personal property" means a piece of equipment, machinery, furniture, or other piece of tangible personal property that is functioning at its highest and best use for the purpose it was designed and constructed and is capable of performing that function without being combined with other items of personal property. An item of taxable tangible personal property is not an individual component part of a piece of machinery or equipment, but the piece of machinery or equipment. For example, a fully functioning computer is an item of taxable tangible personal property, but the motherboard, hard drive, tower, or sound card are not.

(f) "Percent good" means an estimate of value, expressed as a percentage, based on a property's acquisition cost or cost new, adjusted for depreciation and appreciation.

(i) The percent good factor shall be applied against the acquisition cost or the cost new to derive taxable value for the property.

(ii) Percent good schedules shall be derived from an analysis of the Internal Revenue Service Class Life, the Marshall and Swift Cost index, other data sources or research, and vehicle valuation guides such as Price Digests.

(2) Each year percent good schedules for use in computing personal property valuation shall be updated and recommended by the Property Tax Division for adoption by the Commission by rule in accordance with Section 59-2-107.

(a) County assessors may deviate from the schedules when warranted by specific conditions affecting an item of personal property. When a deviation will affect an entire class or type of personal property, a written report, substantiating the changes with verifiable data, must be presented to the Commission. Alternative schedules may not be used without prior written approval of the Commission.

(b) A party may request a deviation from the value established by the schedule for a specific item of property if the use of the schedule does not result in the fair market value for the property at the retail level of trade on the lien date, including any relevant installation and assemblage value.

(3) This rule does not apply to:
(a) a vehicle subject to the age-based uniform fee under Section 59-2-405.1;
(b) the following personal property subject to the age-based uniform fee under Section 59-2-405.2:
(i) an all-terrain vehicle;
(ii) a camper;
(iii) an other motorcycle;
(iv) an other trailer;
(v) a personal watercraft;
(vi) a small motor vehicle;
(vii) a snowmobile;
(viii) a street motorcycle;
(ix) a tent trailer;
(x) a travel trailer; and
(xi) a vessel, including an outboard motor of the vessel, that is less than 31 feet in length;
(c) a motorhome subject to the uniform statewide fee under Section 59-2-405.3; and
(d) an aircraft subject to the uniform statewide fee under Section 72-10-110.5.

(4) Other taxable personal property that is not included in the listed classes includes:

(a) Equipment leased or rented from inventory is subject to ad valorem tax. Refer to the appropriate property class schedule to determine taxable value.

(b) Property held for rent or lease is taxable, and is not exempt as inventory. For entities primarily engaged in rent-to-own, inventory on hand at January 1 is exempt and property out on rent-to-own contracts is taxable.

(5) Personal property valuation schedules may not be appealed to, or amended by, county boards of equalization.

(6) Taxable personal property, other than personal property subject to an age-based uniform fee under Sections 59-2-405.1 through 59-2-405.3, or a uniform statewide fee under Section 59-2-405, is classified by expected economic life as follows:

(a) Class 1 - Short Life Property.

(i) Property in this class has a typical life of more than one year and less than four years. It is fungible in that it is difficult to determine the age of an item retired from service.

(ii) Property in this class includes:
(A) barricades or warning signs;
(B) library materials;
(C) patterns, jigs and dies;
(D) pots, pans, and utensils;
(E) canned computer software;
(F) hotel linen;
(G) wood and pallets;
(H) video tapes, compact discs, and DVDs; and

(I) uniforms.

(iii) Except as provided in Subsections (6)(a)(iv) and (v), taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

(iv) A licensee of canned computer software shall use one of the following substitutes for acquisition cost of canned computer software if no acquisition cost for the canned computer software is available:

(A) retail price of the canned computer software;

(B) if a retail price is unavailable, and the license is a nonrenewable single year license agreement, the total sum of expected payments during that 12-month period; or

(C) if the licensing agreement is a renewable agreement or is a multiple year agreement, the present value of expected licensing fees paid pursuant to the agreement.

(v) Video tapes, compact discs, and DVDs shall be valued at $15 per tape or disc for the first year and $3 per tape or disc thereafter.

Table 1
Short Life Property

Year of Acquisition	Percent Good of Acquisition Cost
2026	76%
2025	44%
2024 and prior	11%

(b) Class 2 - Computer Integrated Machinery.

(i) Machinery shall be classified as computer integrated machinery if the following conditions are met:

(A) except as provided in Subsection (6)(b)(iv), equipment is sold as a single unit.

(B) the machinery cannot operate without the computer and the computer cannot perform functions outside the machinery.

(C) the machinery can perform multiple functions and is controlled by a programmable central processing unit.

(D) the total cost of the machinery and computer combined is depreciated as a unit for income tax purposes.

(E) the capabilities of the machinery cannot be expanded by substituting a more complex computer for the original.

(ii) Property in this class includes:

(A) CNC mills;

(B) CNC lathes; or

(C) high-tech medical and dental equipment such as MRI equipment, CAT scanners, and mammography units.

(iii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

(iv) If the invoice for computer integrated machinery separately itemizes the computer from other machinery, the computer shall be valued as Class 12 property and the machinery shall be valued as Class 8 property.

Table 2
Computer Integrated Machinery

Year of Acquisition	Percent Good of Acquisition Cost
2026	96%
2025	86%
2024	74%
2023	63%
2022	59%
2021	48%
2020	32%
2019 and prior	17%

(c) Class 3 - Short Life Trade Fixtures.

(i) Property in this class is subject to rapid functional and economic obsolescence or severe wear and tear.

(ii) Property in this class includes:

(A) office machines;

(B) alarm systems;

(C) shopping carts;

(D) ATM machines;

(E) small equipment rentals;

(F) rent-to-own merchandise;

(G) telephone equipment and systems;

(H) music systems;

(I) vending machines;

(J) video game machines; and

(K) cash registers.
(iii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

Table 3 Short Life Trade Fixtures	
Year of Acquisition	Percent Good of Acquisition Cost
2026	90%
2025	74%
2024	55%
2023	38%
2022 and prior	22%

(d) Class 5 - Long Life Trade Fixtures.
(i) Property in this class is subject to functional obsolescence in the form of style changes.
(ii) Property in this class includes:
(A) furniture;
(B) bars and sinks:
(C) booths, tables and chairs;
(D) beauty and barber shop fixtures;
(E) cabinets and shelves;
(F) displays, cases and racks;
(G) office furniture;
(H) theater seats;
(I) water slides;
(J) signs, mechanical and electrical; and
(K) LED component of a billboard.
(iii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

Table 5 Long Life Trade Fixtures	
Year of Acquisition	Percent Good of Acquisition Cost
2026	97%
2025	89%
2024	78%
2023	68%
2022	66%
2021	58%
2020	43%
2019	30%
2018 and prior	16%

(e) Class 6 - Heavy and Medium Duty Trucks.
(i) Property in this class includes:
(A) heavy duty trucks;
(B) medium duty trucks;
(C) crane trucks;
(D) concrete pump trucks; and
(E) trucks with well-boring rigs.
(ii) Taxable value shall be calculated by applying the percent good factor against the cost new.
(iii)(A) Cost new of a vehicle in this class shall be the documented actual cost of the vehicle for new vehicles.
(B) If the documented actual cost of the vehicle for new vehicles is unavailable, the cost new shall be 75% of the manufacturer's suggested retail price.
(iv) For state assessed vehicles, cost new shall include the value of attached equipment.
(v) The 2027 percent good applies to 2027 models purchased in 2026.
(vi) Trucks weighing two tons or more have a residual taxable value of $1,750.

Table 6 Heavy and Medium Duty Trucks

Model Year	Percent Good of Cost New
2027	98%
2026	94%
2025	88%
2024	83%
2023	78%
2022	72%
2021	67%
2020	62%
2019	56%
2018	51%
2017	46%
2016	40%
2015	35%
2014 and prior	30%

(f)(i) Class 7 - Medical and Dental Equipment.

(ii) Class 7 has been merged into Class 8.

(g) Class 8 - Machinery and Equipment and Medical and Dental Equipment.

(i) Machinery and equipment in this class is subject to considerable functional and economic obsolescence created by competition as technologically advanced and more efficient equipment becomes available. Machinery and equipment in this class includes:

(A) manufacturing machinery;

(B) amusement rides;

(C) bakery equipment;

(D) distillery equipment;

(E) refrigeration equipment;

(F) laundry and dry cleaning equipment;

(G) machine shop equipment;

(H) processing equipment;

(I) auto service and repair equipment;

(J) mining equipment;

(K) ski lift machinery;

(L) printing equipment;

(M) bottling or cannery equipment; and

(N) packaging equipment.

(ii) Medical and dental equipment in this class is subject to a high degree of technological development by the health industry. Medical and dental equipment in this class includes:

(A) medical and dental equipment and instruments;

(B) exam tables and chairs;

(C) microscopes; and

(D) optical equipment.

(iii) Except as provided in Subsection (6)(g)(iv), taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

(iv) Notwithstanding Subsection (6)(g)(iii), the taxable value of pollution control equipment as defined in Section 59-2-301.9, shall be calculated pursuant to Section 59-2-301.9.

Table 8 Machinery and Equipment Including Medical and Dental Equipment	
Year of Acquisition	Percent Good of Acquisition Cost
2026	98%
2025	92%
2024	83%
2023	[~~75%~~]77%
2022	[~~77%~~]75%
2021	72%
2020	60%

2019	50%
2018	39%
2017	26%
2016 and prior	13%

(h)(i) Class 9 - Off-Highway Vehicles.

(ii) As required by Section 59-2-405.2, an off-highway vehicle is subject to an age-based uniform fee in lieu of property tax.

(i)(i) Class 10 - Railroad Cars.

(ii) Property in this class is subject to heavy wear and tear, and functional and economic obsolescence resulting from developing technology within the shipping industry.

(iii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

Table 10 Railroad Cars	
Year of Acquisition	Percent Good of Acquisition Cost
2026	98%
2025	96%
2024	94%
2023	90%
2022	88%
2021	86%
2020	77%
2019	70%
2018	62%
2017	53%
2016	42%
2015	32%
2014	21%
2013 and prior	11%

(j)(i) Class 11 - Street Motorcycles.

(ii) As required by Section 59-2-405.2, a street motorcycle is subject to an age-based uniform fee in lieu of property tax.

(k) Class 12 - Computer Hardware.

(i) Property in this class includes:

(A) data processing equipment;

(B) personal computers;

(C) main frame computers;

(D) computer equipment peripherals;

(E) cad or cam systems; and

(F) copiers.

(ii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

Table 12 Computer Hardware	
Year of Acquisition	Percent Good of Acquisition Cost
2026	62%
2025	46%
2024	21%
2023	9%
2022 and prior	7%

(l) Class 13 - Heavy Equipment.

(i) Property in this class includes:

(A) construction equipment;

(B) excavation equipment;

(C) loaders;

(D) batch plants;

(E) snow cats; and

(F) pavement sweepers.
(ii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.
(iii) For 2027 model equipment purchased in 2026, the model equipment is valued at 100% of acquisition cost.

Table 13 Heavy Equipment	
Model Year	Percent Good of Acquisition Cost
2026	82%
2025	78%
2024	75%
2023	72%
2022	68%
2021	65%
2020	61%
2019	58%
2018	55%
2017	51%
2016	48%
2015	44%
2014	41%
2013 and prior	38%

(m)(i) Class 14 - Motor Homes.
(ii) As required by Section 59-2-405.3, a motor home is subject to an age-based uniform fee in lieu of property tax.
(n) Class 15 - Semiconductor Manufacturing Equipment.
(i) This class applies to equipment:
(A) used in the production of semiconductor products; and
(B) that is subject to significant economic and functional obsolescence due to rapidly changing technology and economic conditions.
(ii) Property in this class includes:
(A) crystal growing equipment;
(B) die assembly equipment;
(C) wire bonding equipment;
(D) encapsulation equipment;
(E) semiconductor test equipment;
(F) clean room equipment;
(G) chemical and gas systems related to semiconductor manufacturing;
(H) deionized water systems;
(I) electrical systems; and
(J) photo mask and wafer manufacturing dedicated to semiconductor production.
(iii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

Table 15 Semiconductor Manufacturing Equipment	
Year of Acquisition	Percent Good of Acquisition Cost
2026	47%
2025	34%
2024	24%
2023	15%
2022 and prior	6%

(o) Class 16 -- Long Life Property.
(i) Property in this class has a long physical life with little obsolescence.
(ii) Property in this class includes:
(A) billboards , excluding LED component;
(B) sign towers;
(C) radio towers;
(D) ski lift and tram towers;
(E) non-farm grain elevators;

(F) bulk storage tanks;
(G) underground fiber optic cable;
(H) solar panels and supporting equipment; and
(I) pipe laid in or affixed to land.
(iii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

Table 16 Long Life Property	
Year of Acquisition	Percent Good of Acquisition Cost
2026	98%
2025	96%
2024	94%
2023	92%
2022	90%
2021	88%
2020	85%
2019	80%
2018	74%
2017	68%
2016	62%
2015	60%
2014	56%
2013	49%
2012	42%
2011	34%
2010	26%
2009	18%
2008 and prior	9%

(p) Class 17 - Vessels Equal to or Greater Than 31 Feet in Length.
(i) Property in this class includes:
(A) houseboats equal to or greater than 31 feet in length;
(B) sailboats equal to or greater than 31 feet in length; and
(C) yachts equal to or greater than 31 feet in length.
(ii) A vessel, including an outboard motor of the vessel, under 31 feet in length:
(A) is not included in Class 17;
(B) may not be valued using Table 17; and
(C) is subject to an age-based uniform fee under Section 59-2-405.2.
(iii) Taxable value shall be calculated by applying the percent good factor against the cost new of the property.
(iv) The assessing authority shall rely on the following sources to determine cost new for property in this class:
(A) the following publications or valuation methods:
(I) the manufacturer's suggested retail price listed in the ABOS Marine Blue Book;
(II) for property not listed in the ABOS Marine Blue Book but listed in the NADA Marine Appraisal Guide, the NADA average value for the property divided by the percent good factor; or
(III) for property not listed in the ABOS Marine Blue Book or the NADA Appraisal Guide:
(aa) the manufacturer's suggested retail price for comparable property; or
(bb) the cost new established for that property by a documented valuation source; or
(B) the documented actual cost of new or used property in this class.
(v) The 2027 percent good applies to 2027 models purchased in 2026.
(vi) Property in this class has a residual taxable value of $1,000.

Table 17 Vessels Equal to or Greater Than 31 Feet in Length	
Model Year	Percent Good of Acquisition Cost
2027	90%
2026	77%

2025	75%
2024	73%
2023	71%
2022	69%
2021	67%
2020	65%
2019	63%
2018	61%
2017	59%
2016	57%
2015	55%
2014	53%
2013	51%
2012	49%
2011	47%
2010	45%
2009	43%
2008	41%
2007	39%
2006 and prior	37%

(q)(i) Class 17a - Vessels Less Than 31 Feet in Length.

(ii) As required by Section 59-2-405.2, a vessel less than 31 feet in length is subject to an age-based uniform fee in lieu of property tax.

(r)(i) Class 18 - Travel Trailers and Class 18a -- Tent Trailers or Truck Campers.

(ii) As required by Section 59-2-405.2, a travel trailer, tent trailer, and truck camper is subject to an age-based uniform fee in lieu of property tax.

(s) Class 20 - Petroleum and Natural Gas Exploration and Production Equipment.

(i) Property in this class is subject to significant functional and economic obsolescence due to the volatile nature of the petroleum industry.

(ii) Property in this class includes:

(A) oil and gas exploration equipment;

(B) distillation equipment;

(C) wellhead assemblies;

(D) holding and storage facilities;

(E) drill rigs;

(F) reinjection equipment;

(G) metering devices;

(H) cracking equipment;

(I) well-site generators, transformers, and power lines;

(J) equipment sheds;

(K) pumps;

(L) radio telemetry units; and

(M) support and control equipment.

(iii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

Table 20 Petroleum and Natural Gas Exploration and Production Equipment	
Year of Acquisition	Percent Good of Acquisition Cost
2026	98%
2025	96%
2024	94%
2023	91%
2022	86%
2021	81%
2020	76%
2019	66%

2018	57%
2017	47%
2016	35%
2015	23%
2014 and prior	12%

(t) Class 21 - Commercial Trailers.
(i) Property in this class includes:
(A) dry freight van trailers;
(B) refrigerated van trailers;
(C) flat bed trailers;
(D) dump trailers;
(E) livestock trailers; and
(F) tank trailers.
(ii)(A) Taxable value shall be calculated by applying the percent good factor against the cost new of the property.
(B) For state assessed vehicles, cost new shall include the value of attached equipment.
(iii) The 2027 percent good applies to 2027 models purchased in 2026.
(iv) Commercial trailers have a residual taxable value of $1,000.

Table 21 Commercial Trailers	
Model Year	Percent Good of Acquisition Cost
2027	95%
2026	80%
2025	78%
2024	76%
2023	74%
2022	71%
2021	69%
2020	67%
2019	64%
2018	62%
2017	60%
2016	58%
2015	55%
2014	53%
2013	51%
2012	49%
2011 and prior	46%

(u)(i) Class 21a -- Other Non-Commercial Trailers.
(ii) As required by Section 59-2-405.2, a trailer in this class is subject to an age-based uniform fee in lieu of property tax.
(v) Class 22 - Passenger Cars, Light Trucks/Utility Vehicles, and Vans.
(i) Property in this class is the following:
(A) domestic passenger cars;
(B) foreign passenger cars;
(C) light trucks;
(D) utility vehicles; and
(E) vans.
(ii) As required by Section 59-2-405.1, property in this class is subject to an age-based uniform fee in lieu of property tax.
(w)(i) Class 22a - Small Motor Vehicles.
(ii) As required by Section 59-2-405.2, a small motor vehicle is subject to an age-based uniform fee in lieu of property tax.
(x)(i) Class 23 - Aircraft Required to be Registered With the State.
(ii) As required by Section 59-2-404, aircraft required to be registered with the state is subject to a statewide uniform fee in lieu of property tax.
(y) Class 24 - Leasehold Improvements on Exempt Real Property.
(i) This class applies to leasehold improvements where the underlying real property is owned by an entity that is exempt from property tax under Section 59-2-1101.
(ii) Property in this class includes:

(A) walls and partitions;
(B) plumbing and roughed fixtures;
(C) floor coverings other than carpet;
(D) store fronts;
(E) wiring;
(F) suspended or acoustical ceilings;
(G) heating and cooling systems; and
(H) iron or millwork trim.
(iii) Taxable value is calculated by applying the percent good factor against the cost of acquisition, including installation.
(iv) Short life leasehold improvements shall be valued under Class 3.

Table 24 Leasehold Improvements on Tax Exempt Real Property	
Year of Acquisition	Percent Good of Acquisition Cost
2026	94%
2025	88%
2024	82%
2023	77%
2022	71%
2021	65%
2020	59%
2019	54%
2018	48%
2017	42%
2016	36%
2015	30%

(z) Class 25 - Aircraft Parts Manufacturing Tools and Dies.
(i) Property in this class is subject to heavy wear and tear, and rapid physical, functional, and economic obsolescence due to rapid technological and economic shifts in the airline parts manufacturing industry.
(ii) Property in this class includes:
(A) aircraft parts manufacturing jigs and dies;
(B) aircraft parts manufacturing molds;
(C) aircraft parts manufacturing patterns;
(D) aircraft parts manufacturing taps and gauges; and
(E) aircraft parts manufacturing test equipment.
(iii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

Table 25 Aircraft Parts Manufacturing Tools and Dies	
Year of Acquisition	Percent Good of Acquisition Cost
2026	90%
2025	74%
2024	56%
2023	39%
2022	24%
2021 and prior	4%

(aa)(i) Class 26 - Personal Watercraft.
(ii) As required by Section 59-2-405.2, a personal watercraft is subject to an age-based uniform fee in lieu of property tax.
(bb) Class 27 - Electrical Power Generating Equipment and Fixtures.
(i) Property in this class includes:
(A) electrical power generators; and
(B) control equipment.
(ii) Taxable value shall be calculated by applying the percent good factor against the acquisition cost of the property.

Table 27 Electrical Power Generating Equipment and Fixtures

Year of Acquisition	Percent Good of Acquisition Cost
2026	97%
2025	95%
2024	92%
2023	90%
2022	87%
2021	84%
2020	82%
2019	79%
2018	77%
2017	74%
2016	71%
2015	69%
2014	66%
2013	64%
2012	61%
2011	58%
2010	56%
2009	53%
2008	51%
2007	48%
2006	45%
2005	43%
2004	40%
2003	38%
2002	35%
2001	32%
2000	30%
1999	27%
1998	25%
1997	22%
1996	19%
1995	17%
1994	14%
1993	12%
1992 and prior	9%

This rule shall be implemented and become binding on taxpayers beginning January 1, 2027.

KEY: taxation, personal property, property tax, appraisals
Date of Last Change: 2026
Notice of Continuation: November 9, 2021
Authorizing, and Implemented or Interpreted Law: Art. XIII, Sec 2; 9-2-201; 11-13-302; 41-1a-202; 41-1a-301; 59-1-210; 59-2-102; 59-2-103; 59-2-103.5; 59-2-104; 59-2-201; 59-2-210; 59-2-211; 59-2-301; 59-2-301.3; 59-2-302; 59-2-303; 59-2-303.1; 59-2-305; 59-2-306; 59-2-401; 59-2-402; 59-2-404; 59-2-405; 59-2-405.1; 59-2-406; 59-2-508; 59-2-514; 59-2-515; 59-2-701; 59-2-702; 59-2-703; 59-2-704; 59-2-704.5; 59-2-705; 59-2-801; 59-2-918 through 59-2-924; 59-2-1002; 59-2-1004; 59-2-1005; 59-2-1006; 59-2-1101; 59-2-1102; 59-2-1104; 59-2-1106; 59-2-1107 through 59-2-1109; 59-2-1113; 59-2-1115; 59-2-1202; 59-2-1202(5); 59-2-1302; 59-2-1303; 59-2-1308.5; 59-2-1317; 59-2-1328; 59-2-1330; 59-2-1347; 59-2-1351; 59-2-1365; 59-2-1703

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:	**R156-15A-402**	**Filing ID: 58328**

Effective date:	**10/29/2026**

1. Agency Information

Title catchline:	Commerce, Professional Licensing
Building:	Heber M. Wells
Street address:	160 E 300 S
City, state:	Salt Lake City, UT
Mailing address:	PO Box 14671
City, state and zip:	Salt Lake City, UT 84114-6741

2. Contact Persons

Name:	Phone:	Email:
Steve Duncombe	801-530-6235	sduncombe@utah.gov

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

3. General Information

A. Rule or section catchline:
R156-15A-402. Statewide Amendments to the International Energy Conservation Code

B. Purpose of the new rule or reason for the change:

On 08/12/2026, following public testimony and deliberation, the Utah Uniform Building Code Commission voted unanimously (11 to 0, with two members absent) to recommend that three commercial energy management provisions of the International Energy Conservation Code (IECC) incorporated into the State Construction Code be repealed.

The Commission transmitted that recommendation to the Business and Labor Interim Committee on 09/01/2026, in the statutorily specified report required by Subsections 15A-1-204(5)(a) and 68-3-14(3), signed by Commission Chair W. Thomas Peterson on 08/27/2026.

The Legislature will not convene in general session until January 2027, and legislation implementing the Commission's recommendation could not take effect until later in 2027. The Commission determined, at its 09/09/2026 meeting, that under Subsection 15A-1-204(6)(a) waiting for legislative action in the next general session would cause an imminent peril to the public health, safety, or welfare.

This filing implements that determination by amending the State Construction Code, by rule, as Subsection 15A-1-204(6)(a) expressly authorizes the Commission to do in accordance with Title 63G, Chapter 3, the Utah Administrative Rulemaking Act.

C. Summary of the new rule or change:

This filing amends Section R156-15A-401 to add statewide amendments to the IECC that delete three commercial energy management sections from the code as it applies in Utah:
(1) IECC Section C405.12, which mandates automatic control of selected receptacles to shut off when spaces are unoccupied in commercial buildings;

(2) IECC Section C405.13, which mandates electrical service panel capacity, dedicated feeders, and raceway infrastructure for electric vehicle power transfer; and

(3) IECC Section C405.15, which mandates on-site renewable electricity generation sized at a minimum of 0.75 W/ft² across the three largest conditioned floors, or equivalent off-site renewable power procurement.

The amendment is limited to the three sections identified above. No other provision of the IECC, and no provision of any other code incorporated into the State Construction Code, is changed by this filing.

All building safety and core energy efficiency requirements of the IECC, including the building thermal envelope, mechanical, service water heating, and lighting provisions, remain in effect without change.

5. Emergency Rule Information

A. 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:

Finding: Regular rulemaking would cause an imminent peril to the public health, safety, or welfare; see Subsection 15A-1-204(6)(a)(i) and Subsection 63G-3-304(1)(a).

Specific reasons and justifications:
Cost of delay to housing and commercial affordability.

The Commission's 09/01/2026 report to the Business and Labor Interim Committee documents that the three provisions impose combined capital equipment and engineering costs of $10,500 to $33,000 per commercial building: 1) $5,000 to $15,000 per building for sub-meters, current transformers, wiring, data gateways, and commissioning under C405.12;

2) $3,000 to $10,000 per building for oversized electrical panels, conduits, and service capacity under C405.13; and

3) $2,500 to $8,000 per project for photovoltaic arrays, inverters, specialized engineering, or long-term off-site power purchase agreements under C405.15.

Every commercial building permitted between the date of this filing and the effective date of any 2027 legislation would incur those costs irreversibly, because the affected systems are installed during construction and cannot be economically removed afterward.

The harm cannot be remedied later. Legislation adopted in the 2027 General Session would take effect prospectively and would not relieve projects permitted in the interim.

Building permits issued during the interval would lock in requirements the Commission has determined do not deliver commensurate benefit under Utah's regulatory framework, and the resulting expenditures cannot be recovered.

Regular rulemaking is not a timely alternative. The Commission acted on 08/12/2026, and its report was transmitted 09/01/2026. The next general session does not convene until January 2027. Regular rulemaking under Section 63G-3-301 would not conclude before a substantial volume of commercial permits is issued for the 2026-2027 construction cycle.

Narrow scope; no reduction in life-safety protection. The amendment deletes three energy management provisions only. It does not alter any structural, fire, electrical, mechanical, plumbing, or means-of-egress requirement, and it does not alter the IECC's building thermal envelope or equipment efficiency requirements. The Commission found no adverse effect on building safety.

Procedural record. The recommendation was developed on the Commission's own initiative following feedback from recognized construction-related associations and local code regulators, as authorized by Subsection 15A-1-204(5)(b), and was adopted after public testimony at the Commission's 08/12/2026 public meeting by a unanimous 11 to 0 vote.

Statutorily required companion filings. Under Subsection 15A-1-204(6)(b), the Commission has filed with the Division of Professional Licensing (Division) the text of this amendment and this analysis of the specific reasons and justifications for its findings.

Under Subsection 15A-1-204(6)(c), the Division will publish the amendment in accordance with Section 15A-1-205 and will submit written notice of the amendment, including a copy of this analysis, to the Business and Labor Interim Committee in accordance with Section 68-3-14.

Under Subsection 63G-3-304(2)(b), the information required by Subsection 63G-3-304(2)(a) is being provided to the members of the General Oversight Committee concurrently with this filing.

Duration. Under Subsection 63G-3-304(2)(e), this rule is effective for a period not exceeding 120 days from the date of filing.

Under Subsection 15A-1-204(6)(d), if the amendment is not formally adopted by the Legislature at the next annual general session, it is repealed on July 1 immediately following that session. If the Commission intends the amendment to remain effective beyond 120 days, it will also comply with the procedures of Section 63G-3-301.

6. Fiscal Information

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

A. State budget:

No fiscal impact to the state budget.

The Commission's report identifies the state budget impact of each of the three repeals as $0 (neutral).

The Division anticipates a one-time administrative cost of less than $500 to update state guidance materials, including the Commercial Energy Code quick reference guidance, which is absorbed within existing appropriations.

The State Construction Code is administered by the Division under Section 15A-1-205, which does not assign the Division responsibility to conduct inspections, issue permits, or assess building permit fees, so no state enforcement cost changes.

B. Local governments:

Cost savings, amount not determinable in the aggregate.

Local governments act as compliance agencies and perform plan review and field inspection of the affected provisions.

Removing the three provisions decreases electrical plan review scope and eliminates review of sub-metering, EV infrastructure, and renewable system documentation, along with associated third-party commissioning verification.

The per-jurisdiction savings depend on commercial permit volume and staffing model and cannot be reliably quantified statewide.

No local government will incur a new cost, and no local government is required to take any action as a result of this filing.

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

Cost savings of $10,500 to $33,000 per commercial building for small businesses that construct, develop, or own newly constructed commercial buildings in Utah.

The savings consist of $5,000 to $15,000 per building in sub-metering hardware and commissioning, $3,000 to $10,000 per building in electrical service capacity and EV raceway infrastructure, and $2,500 to $8,000 per project in renewable energy equipment, engineering, or off-site procurement contracting.

Small business electrical contractors, mechanical contractors, and design professionals may experience a corresponding reduction in revenue from work associated with these three provisions; the aggregate amount is not determinable because it depends on future commercial construction volume and on how many owners continue to install these systems voluntarily.

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***)**:**

Cost savings of $10,500 to $33,000 per commercial building for persons other than small businesses, state, or local government entities that construct, develop, or own newly constructed commercial buildings in Utah, on the same cost components described in Box 6C.

Building owners who elect to install energy monitoring, EV infrastructure, or on-site renewable generation may continue to do so; this filing removes the mandate, not the option.

Owners who defer EV infrastructure and later add EV charging may incur higher per-unit retrofit costs than if conduit and capacity had been installed during original construction, and owners who do not voluntarily install these systems will not have mandatory operational energy data tracking or baseline renewable capacity.

E. Compliance costs for affected persons:

No compliance cost.

This filing imposes no new requirement on any person. It removes three existing mandatory requirements, so an affected person's cost of adhering to the State Construction Code decreases by the amounts described in Boxes 5C and D.

No person is required to modify an existing building, retrofit an installed system, submit any filing, or obtain any approval as a result of this amendment.

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 emergency amendment reduces the cost of commercial construction in Utah by an estimated $10,500 to $33,000 per building without reducing building safety or the core energy efficiency requirements of the adopted code.

Businesses that construct or own commercial buildings, including small businesses, will benefit from lower upfront capital costs, reduced design and inspection overhead, and restored flexibility to make energy investments based on financial return.

Contractors and design professionals whose work relates specifically to the three repealed provisions may see a corresponding reduction in that scope of work.

The filing imposes no new compliance obligation on any business.

On 09/09/2026, the Uniform Building Code Commission unanimously accepted the proposed changes to the Utah Uniform Building Code.

The Commission determined that waiting for legislative action to codify these changes would cause imminent peril to public health, safety, or welfare within the meaning of Subsection 15A-1-204(6) and acted on an emergency basis.

Under Subsection 15A-1-204(6)(c), the Division is required to publish this amendment. The statute grants neither Division nor the Commissioner, Margaret Busse, authority to alter the Commission's recommendation.

Nevertheless, for purposes of this filing, the Commissioner has reviewed this fiscal impact summary and believes it to accurately reflect the potential fiscal impacts of the Commission's changes. Margaret W. Busse, Commissioner of the Department of Commerce

7. Citation Information

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 15A-1-204(6)
Section 15A-1-205		

9. Agency Authorization Information

Agency head or designee and title:	Adam Watson, Assistant Division Director	**Date:**	10/06/2026

R156. Commerce, Professional Licensing.
R156-15A. State Construction Code Administration and Adoption of Approved State Construction Code Rule.
R156-15A-402. Statewide Amendments to the International Energy Conservation Code.

Under Subsection 15A-1-204(6)(a), the commission determined that waiting for legislative action in the next general legislative session would cause an imminent peril to the public health, safety, or welfare, the following are adopted as amendments to the IECC to be applicable statewide:

(1) In IECC, Section C405.12 is deleted.
(2) In IECC, Section C405.13 is deleted.
(3) In IECC, Section C405.15 is deleted.

KEY: contractors, building codes, building inspections, licensing
Date of Last Change: [~~November 7, 2024~~]October 29, 2026
Notice of Continuation: April 13, 2026
Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 15A-1-204(6); 15A-1-205

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. 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:	**R13-4**	**Filing ID: 58358**

Effective date:	**10/16/2026**

1. Agency Information

Title catchline:	Government Operations, Administration
Building:	Taylorsville State Office Building
Street address:	4315 S 2700 W
City, state:	Taylorsville, UT
Mailing address:	PO Box 141002
City, state and zip:	Salt Lake City, UT 84114-1002

2. Contact Persons

Name:	Phone:	Email:
Michael Broschinsky	801-957-7110	mbroschi@utah.gov

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

3. General Information

A. Rule catchline:
R13-4. In-State Work Location Rule

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 63A-1-105.5	This section authorizes the commissioner of the Department of Government Operations to write rules.

C. 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.

D. 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 is necessary to ensure that administrative details regarding state employment are as straightforward as possible. This includes minimizing costs associated with workers' compensation and liability. It also helps ensure the security of state information technology resources. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Marvin Dodge, Commissioner, Government Operations	**Date:**	10/14/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R277-307**	**Filing ID: 58380**

Effective date:	**10/22/2026**

1. Agency Information

Title catchline:	Education, Administration
Building:	Board of Education
Street address:	250 E 500 S
City, state:	Salt Lake City, UT 84111
Mailing address:	PO Box 144200
City, state and zip:	Salt Lake City, UT 84114-4200

2. Contact Persons

Name:	**Phone:**	**Email:**
Ben Rasmussen	801-538-7992	Ben.rasmussen@schools.utah.gov

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

3. General Information

A. Rule catchline:
R277-307. Teacher Leader

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Utah Constitution, Article X, Section 3	Vests general control and supervision over public education in the Utah State Board of Education (Board).
Section 53E-6-902	Requires the Board to define the role of a teacher leader and establish the minimum criteria for a teacher to qualify as a teacher leader.
Subsection 53E-3-401(4)	Allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law.

C. 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 public comments received since the last five-year review of this rule.

D. 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 defines the role of a teacher leader and establishes the minimum criteria for a teacher to qualify as a teacher leader. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Ben Rasmussen, Director of Policy	**Date:**	10/22/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R277-406**	**Filing ID: 58381**

Effective date:	**10/22/2026**

1. Agency Information

Title catchline:	Education, Administration
Building:	Board of Education
Street address:	250 E 500 S
City, state:	Salt Lake City, UT 84111
Mailing address:	PO Box 144200
City, state and zip:	Salt Lake City, UT 84114-4200

2. Contact Persons

Name:	Phone:	Email:
Ben Rasmussen	801-538-7992	Ben.rasmussen@schools.utah.gov

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

3. General Information

A. Rule catchline:
R277-406. Early Learning Program and Assessments

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Utah Constitution, Article X, Section 3	Vests general control and supervision over public education in the Utah State Board of Education (Board).
Subsection 53E-3-401(4)	Allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law.
Section 53E-4-307	Requires the Board to approve a benchmark assessment for statewide use to assess the reading competency of students in grades one, two, and three.
Section 53G-7-203	Requires the Board to establish rules regarding the administration of and reporting regarding the kindergarten assessment.

C. 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 public comments received since the last five-year review of this rule.

D. 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 provides definitions and designate assessments required in Sections 53E-4-307 and 53E-4-307.5, provides testing reporting windows, and timelines, and requires local education agencies to submit student reading assessment data to the Board. This rule also designates kindergarten assessment and establishes timelines and requirements for administration and reporting kindergarten assessment results and enrollment. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Ben Rasmussen, Director of Policy	**Date:**	10/22/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R277-622**	**Filing ID: 58382**

Effective date:	**10/22/2026**

1. Agency Information

Title catchline:	Education, Administration
Building:	Board of Education
Street address:	250 E 500 S
City, state:	Salt Lake City, UT 84111
Mailing address:	PO Box 144200
City, state and zip:	Salt Lake City, UT 84114-4200

2. Contact Persons

Name:	**Phone:**	**Email:**
Ben Rasmussen	801-538-7992	Ben.rasmussen@schools.utah.gov

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

3. General Information

A. Rule catchline:
R277-622. School-based Mental Health Qualifying Grant Program

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Utah Constitution, Article X, Section 3	Vests general control and supervision over public education in the Utah State Board of Education (Board).
Subsection 53E-3-401(4)	Allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law.
Section 53F-2-415	Requires the Board to makes rules that establish procedures for submitting a plan for the School-based Mental Health Qualifying Grant Program, a distribution formula the Board will use to distribute funds to an local education agency (LEA) and annual reporting requirements for an LEA that receives funds pursuant to the School-based Mental Health Qualifying Grant Program.

C. 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 public comments received since the last five-year review of this rule.
D. 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 establishes the procedures for an LEA to receive a School-based Mental Health Qualifying Grant including plan submission process, format, and requirements funding distribution methods, and additional requirements including reporting and accountability. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Ben Rasmussen, Director of Policy	**Date:**	10/22/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R277-717**	**Filing ID: 58383**

Effective date:	**10/22/2026**

1. Agency Information

Title catchline:	Education, Administration
Building:	Board of Education
Street address:	250 E 500 S
City, state:	Salt Lake City, UT 84111
Mailing address:	PO Box 144200
City, state and zip:	Salt Lake City, UT 84114-4200

2. Contact Persons

Name:	**Phone:**	**Email:**
Ben Rasmussen	801-538-7992	Ben.rasmussen@schools.utah.gov

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

3. General Information

A. Rule catchline:
R277-717. High School Course Grading Requirements

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Utah Constitution, Article X, Section 3	Vests general control and supervision over public education in the Utah State Board of Education (Board).
Subsection 53E-3-401(4)	Allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law.

C. 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 public comments received since the last five-year review of this rule.

D. 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 establishes requirements for awarding credit when a student repeats a course or takes a comparable course and earns a higher grade. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Ben Rasmussen, Director of Policy	**Date:**	10/22/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R277-733**	**Filing ID: 58384**

Effective date:	**10/22/2026**

1. Agency Information

Title catchline:	Education, Administration
Building:	Board of Education
Street address:	250 E 500 S
City, state:	Salt Lake City, UT 84111
Mailing address:	PO Box 144200
City, state and zip:	Salt Lake City, UT 84114-4200

2. Contact Persons

Name:	Phone:	Email:
Ben Rasmussen	801-538-7992	Ben.rasmussen@schools.utah.gov

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

3. General Information

A. Rule catchline:
R277-733. Adult Education Programs

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Utah Constitution, Article X, Section 3	Vests general control and supervision over public education in the Utah State Board of Education (Board).
Subsection 53E-3-401(4)	Allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law.
Section 53E-10-202	Vests general control and supervision in the Board over adult education.
Section 53E-3-501	Allows the Board to adopt minimum standards for programs.
Section 53F-2-401	Vests the Board with responsibility to provide education to persons in the custody of the Utah Department of Corrections.

C. 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 public comments received since the last five-year review of this rule.
D. 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 describes curriculum, program standards, allocation formulas, and operation procedures for the adult education program for adult education students both in and out of state custody. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Ben Rasmussen, Director of Policy	**Date:**	10/22/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-100**	**Filing ID: 58379**

Effective date:	**10/22/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

Name:	**Phone:**	**Email:**
Sarah Cheshire	801-538-6191	scheshire@utah.gov
Chris Nelson	801-538-6191	chrisnelson@utah.gov

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

3. General Information

A. Rule catchline:
R392-100. Food Service Sanitation

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Utah Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by maintaining sanitary conditions in a food establishment.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a restaurant or a place where food or drink is handled, sold, or served to the public.

C. 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.
D. 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 is necessary to fulfill a statutory mandate and safeguard public health. Further, this rule is necessary to provide consumers with food that is safe, unadulterated, and honestly presented by setting standards for management, personnel, food operations, equipment, and facilities and providing conditions for food establishment plan review, permit issuance, inspection, employee health, and permit enforcement. Therefore, this rule should be continued. This rule was amended in June of 2025 to incorporate the 2022 version of the U.S. Food and Drug Administration Food Code (Food Code), Chapters 1 through 8, Annex 1 Parts 8-6 through 8-9 and the December 2024 version of the Supplement to the 2022 Food Code, with the stated exceptions and amendments as established in Subsections R392-100-4(2) and R392-100-4(3). Continuously updating this rule ensures it remains relevant, practical, and aligned with Utah's current administrative and policy environment while continuing to safeguard the public. As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/22/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-106**	**Filing ID: 58377**

Effective date:	**10/22/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

Name:	**Phone:**	**Email:**
Sarah Cheshire	801-538-6191	scheshire@utah.gov
Chris Nelson	801-538-6191	chrisnelson@utah.gov

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

3. General Information

A. Rule catchline:
R392-106. Microenterprise Home Kitchen Sanitation

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Utah Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by maintaining sanitary conditions in a microenterprise home kitchen.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a place where food or drink is handled, sold, or served to the public, such as a microenterprise home kitchen.
Section 26B-7-416	This section gives authority to the department to make standards and regulations relating to the permitting of a microenterprise home kitchen and describes how a kitchen qualifies for a microenterprise home kitchen permit.

C. 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.

D. 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 is necessary to fulfill a statutory mandate.

This rule establishes minimum standards for the sanitation, operation, and maintenance of a microenterprise home kitchen, as defined in Section 26B-7-401, and, to safeguard public health and ensure that food is safe, unadulterated, and honestly presented, provides for the prevention and control of health hazards associated with a microenterprise home kitchen. Therefore, this rule should be continued.

This rule was amended in October of 2025 in response to a statutory amendment. SB 315 passed in the 2025 General Session amended requirements in Section 26B-7-416 for microenterprise home kitchens, rendering it necessary to match rule requirements with updated language in the authorizing statute to provide microenterprise home kitchen operators with 72 hours of food preparation time, rather than same day only. For ease of reading, other sections of this rule contained minor amendments to use the acronym of "TCS" rather than "time and temperature controlled" food.

As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/22/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-200**	**Filing ID: 58364**

Effective date:	**10/19/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102

City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

Name:	**Phone:**	**Email:**
Sarah Cheshire	801-538-6191	scheshire@utah.gov
Chris Nelson	801-538-6191	chrisnelson@utah.gov

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

3. General Information

A. Rule catchline:
R392-200. Sanitation and Safety of Schools

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by maintaining sanitary conditions in a school as defined in this rule.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a public or private school.
Section 26B-7-113	This section gives authority to the department to identify the major risk factors contributing to injury, sickness, death, and disability within the state and educate the public regarding these risk factors. This reference also authorizes the department to establish programs to reduce or eliminate these risk factors if there is not an adequate program that already exists in the private sector.

C. 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.
D. 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 is necessary to fulfill a statutory mandate. This rule establishes minimum standards for the design, construction, operation, maintenance, and sanitation of a school, and provides for the prevention and control of hazards associated with a school that are likely to adversely affect public health and wellness including risk factors contributing to injury, sickness, death, disability, and the spread of disease. Therefore, this rule should be continued. This rule was amended in October of 2025 in response to a statutory amendment from SB 272 passed in the 2025 General Session. This bill amended the definition of "school" in Section 26B-7-201 to specifically exclude a micro-education entity or a home-based microschool. Therefore, this rule was amended to exempt a micro-education entity or a home-based microschool from public health regulation in accordance with the statute. The department did not receive any public comments during this amendment's public comment period. As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/15/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-300**	**Filing ID: 58365**

Effective date:	**10/19/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

Name:	**Phone:**	**Email:**
Sarah Cheshire	801-538-6191	scheshire@utah.gov
Chris Nelson	801-538-6191	chrisnelson@utah.gov

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

3. General Information

A. Rule catchline:
R392-300. Recreation Camp Sanitation

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by maintaining sanitary conditions at a recreation camp or resort.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a recreational resort or camp.

C. 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.

D. 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 is necessary to fulfill a statutory mandate. This rule establishes definitions and sets standards for health, safety, and welfare of individuals and for the prevention of the spread of disease in or from a recreational camp. Without this rule, there would be no state oversight and no set standard for health and sanitation at a recreational resort or camp. Therefore, this rule should be continued.

As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/15/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-301**	**Filing ID: 58366**

Effective date:	**10/19/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

Name:	**Phone:**	**Email:**
Sarah Cheshire	801-538-6191	scheshire@utah.gov
Chris Nelson	801-538-6191	chrisnelson@utah.gov

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

3. General Information

A. Rule catchline:
R392-301. Recreational Vehicle Park Sanitation

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by maintaining sanitary conditions at a recreational vehicle park or resort.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a recreational resort or vehicle park.

C. 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.
D. 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 is necessary to fulfill a statutory mandate.

This rule establishes minimum standards for the sanitation, operation, and maintenance of a recreational vehicle park, as defined by this rule, and provides for the prevention and control of health hazards associated with a recreational vehicle park that are likely to affect individuals dwelling temporarily therein including risk factors contributing to injury, sickness, death, and disability. Therefore, this rule should be continued.

As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/15/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-302**	**Filing ID: 58367**

Effective date:	**10/19/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

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

3. General Information

A. Rule catchline:
R392-302. Public Pool Design, Construction, and Operation

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by establishing minimum standards for the sanitation, design, construction, operation, and maintenance of public pools.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a public swimming pool or spa.
Section 26B-7-113	This section gives authority to the department to identify the major risk factors contributing to injury, sickness, death, and disability within the state and educate the public regarding these risk factors.

	This reference also authorizes the department to establish programs to reduce or eliminate these risk factors if there is not an adequate program that already exists in the private sector. There is not a current program to address these risk factors in public pools.
Section 26B-7-124	This section prohibits the department from adopting rules that restrict, limit, or impose requirements on the operation of a public cold bath as defined in this statute.

C. 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:

During this five-year period, this rule was amended several times to ensure it remains current, technically accurate, and aligned with industry standards and the present regulatory environment.

Public comments received during these specific rulemaking amendment processes were constructive and focused entirely on refining, updating, or clarifying individual provisions. All such comments were reviewed and addressed through the department standard rulemaking process.

About three weeks before this five-year review was due, the department also received a public comment requesting consideration of an amendment to allow water from a tested source that is not a public water system to be used to fill a public pool, similar to the testing required through other Title R392 rules for geothermal pools and artificial swimming lagoons.

At the time of the submission of this five-year review to the Office of Administrative Rules, the department is still in the process of reviewing and considering this request.

However, similarly to the other comments received, this comment focused on updating a provision in this rule and did not oppose the rule's continuation.

The continuous, active engagement from stakeholders to update this rule, without challenging its underlying mandate, demonstrates that this rule continues to serve a critical, necessary, and widely supported public health function in Utah.

Public support for maintaining an administrative rule that protects public health and safety at public swimming pools and spas remains strong.

D. 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 is necessary to fulfill a statutory mandate to protect public health and safety across Utah, specifically in a public swimming pool or spa.

This rule establishes requirements for the sanitation, design, construction, operation, and maintenance of public pools and provides for the prevention and control of hazards associated with public pools that are likely to adversely affect public health and wellness, including risk factors contributing to injury, sickness, death, disability, and the spread of disease. Therefore, this rule should be continued.

During the past five-year period, the department actively maintained and updated this rule through multiple amendments. These revisions responded directly to legislative discussions related to public cold baths, emerging technologies, variance requests, and evolving industry standards, including lifeguarding.

Continuously adapting this rule ensures it remains relevant, practical, and aligned with Utah's current administrative and policy environment while continuing to safeguard the public.

As there have been no comments in opposition to this rule's continuance, the department did not disagree with or reject any overarching comments in opposition.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/15/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-400**	**Filing ID: 58378**

Effective date:	**10/22/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

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

3. General Information

A. Rule catchline:
R392-400. Temporary Mass Gathering Sanitation

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Utah Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by maintaining sanitary conditions at a temporary mass gathering.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a center or place used for public gatherings.

C. 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.
D. 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 is necessary for compliance with statute and establishes minimum standards for the sanitation, operation, and maintenance of a temporary mass gathering to protect, preserve, and promote the health and safety of the public, to prevent and control the incidents of communicable diseases, to reduce hazards to health and environment, to maintain adequate sanitation and public health, and to promote the general welfare of the public. Without this rule, there would be no state oversight and no set standard for health and sanitation at a place where a temporary mass gathering is established. Therefore, this rule should be continued. As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/22/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-402**	**Filing ID: 58368**

Effective date:	**10/19/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

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

3. General Information

A. Rule catchline:
R392-402. Manufactured Home Community Sanitation

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by maintaining sanitary conditions at a manufactured or mobile home park.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a manufactured or mobile home park.

C. 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.

D. 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 is necessary to fulfill a statutory mandate. This rule establishes minimum standards for the sanitation, operation, and maintenance of a manufactured home community, as defined by this rule, and provides for the prevention and control of health hazards associated with a manufactured home community that are likely to affect individuals dwelling temporarily therein including risk factors contributing to injury, sickness, death, and disability. Therefore, this rule should be continued.

As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/15/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-501**	**Filing ID: 58369**

Effective date:	**10/19/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
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2. Contact Persons

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

3. General Information

A. Rule catchline:
R392-501. Temporary Labor Community Sanitation

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by maintaining sanitary conditions at a temporary labor community.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a construction or labor camp.

C. 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.
D. 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 is necessary to fulfill a statutory mandate.

This rule also provides for the prevention and control of health hazards associated with a temporary labor community that are likely to affect individuals dwelling temporarily therein including risk factors contributing to injury, sickness, death, and disability.

Without this rule, there would be no state oversight for the health and sanitation of temporary labor communities. Therefore, this rule should be continued.

As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/15/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-502**	**Filing ID: 58370**

Effective date:	**10/19/2026**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

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

3. General Information

A. Rule catchline:
R392-502. Public Lodging Facility Sanitation

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases. This rule is written to protect public health, prevent illness, and stop the spread of communicable diseases by maintaining sanitary conditions at a public lodging facility.
Section 26B-7-402	This section gives authority to the department to establish and enforce the minimum rules of sanitation necessary to protect public health in a hotel, motel, a lodging house or boarding house that is considered a public lodging facility.

C. 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.
D. 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 is necessary to fulfill a statutory mandate. This rule also sets standards for health and welfare of guests of a public lodging facility. It also establishes standards for the prevention of the spread of disease in or through a public lodging facility. Without this rule, there would be no state oversight and no set standard for the health and sanitation of public lodging facilities. Therefore, this rule should be continued. As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/15/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R392-510**	**Filing ID: 58376**

Effective date:	**10/22/2031**

1. Agency Information

Title catchline:	Health and Human Services, Population Health, Environmental Health
Building:	Cannon Health Building
Street address:	288 N 1460 W
City, state:	Salt Lake City, UT
Mailing address:	PO Box 142102
City, state and zip:	Salt Lake City, UT 84114-2102

2. Contact Persons

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Sarah Cheshire	801-538-6191	scheshire@utah.gov
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Please address questions regarding information on this notice to the persons listed above.

3. General Information

A. Rule catchline:
R392-510. Utah Indoor Clean Air Act

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 26B-1-202	This section gives authority to the Utah Department of Health and Human Services (department) to establish, maintain, and enforce rules to protect public health, prevent illness, and stop the spread of communicable diseases.

	This rule is written to protect public health and prevent illness, due to secondhand smoke in enclosed indoor places of public access and publicly owned buildings, except as specified in this rule.
Section 26B-7-502	This section gives authority to the department and the local health departments to enforce the public health law regulating smoking, tobacco products, and nicotine products in Section 26B-7-503.
Subsection 26B-7-503(6)	This subsection gives the department and local health departments authority to enforce the Utah Indoor Clean Air Act in a coordinated effort and requires the department to adopt rules necessary and reasonable to implement the provisions of Section 26B-7-503.

C. 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.
D. 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 is necessary to fulfill a statutory mandate and provides for the prevention and control of health hazards associated with smoking in enclosed indoor places of public access and publicly owned buildings and offices. Without this rule, there would be no state oversight for smoking, tobacco products, and nicotine product use in an indoor place of public access and to publicly owned buildings and offices. Therefore, this rule should be continued. As there have been no comments in opposition to this rule, the department did not disagree with or respond to any comments.

4. Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Commissioner	**Date:**	10/22/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R590-176**	**Filing ID: 58416**

Effective date:	**10/30/2026**

1. Agency Information

Title catchline:	Insurance, Administration
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

2. 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.

3. General Information

A. Rule catchline:
R590-176. Health Benefit Plan Enrollment

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 31A-2-201	Authorizes the insurance commissioner to write rules to implement Title 31A, Insurance Code.
Section 31A-2-202	Authorizes the insurance commissioner to prescribe forms for the department to use in collecting information.

C. 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.
D. 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 provides clarification for Title 31A, Chapter 30, regarding the federal Health Insurance Portability and Accountability Act (HIPAA). This rule provides standards that must be met for an insurer to be waived from the requirements of Chapter 30, and defines what constitutes meeting the enrollment cap. It also addresses general requirements to make sure insurers treat health benefit applicants fairly. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Steve Gooch, Public Information Officer	**Date:**	10/30/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R590-181**	**Filing ID: 58415**

Effective date:	**10/30/2026**

1. Agency Information

Title catchline:	Insurance, Administration
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

2. 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.

3. General Information

A. Rule catchline:
R590-181. Yankee Bond Rule

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 31A-2-201	Authorizes the insurance commissioner to write rules to implement Title 31A, Insurance Code.

C. 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.
D. 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 is no longer necessary. The authorizing statute was amended by SB 49 (2025 General Session), making this rule obsolete. This rule is being continued until the Department can file a rule repeal.

4. Agency Authorization Information

Agency head or designee and title:	Steve Gooch, Public Information Officer	**Date:**	10/30/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R708-7**	**Filing ID: 58397**

Effective date:	**10/27/2026**

1. Agency Information

Title catchline:	Public Safety, Driver License
Building:	Taylorsville State Office Building
Mailing address:	PO Box 144501
City, state and zip:	Salt Lake City, UT 84114-4501

2. Contact Persons

Name:	**Phone:**	**Email:**
Kim Gibb	801-556-8198	kgibb@utah.gov
Tara Zamora	801-964-4483	tarazamora@utah.gov
Britani Flores	801-884-8313	bflores@utah.gov

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

3. General Information

A. Rule catchline:
R708-7. Functional Ability in Driving: Responsibilities for Physicians and Drivers

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 53-3-104	This statute requires the Division of Driver License (division) to make rules for the examination of applicants for a license. The medical and vision questions and resulting medical forms are especially important to assess a person's ability to operate a vehicle safely.
Section 53-3-1007	This statute requires the division to make rules regarding the procedures for an individual to petition for removal of an ignition interlock device if they are medically unable to provide a deep breath lung sample.

C. 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.
D. 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 is required by statute and allows the division to establish a medical program which allows the division to determine and examine an individual's medical ability to safely operate a vehicle. Additionally, the division is required by statute to make rules regarding the process for removal of an ignition interlock device when an individual is required to have one but is medically unable to provide the breath sample required by the device. Therefore, this rule should be continued. The division is in the process of making some necessary changes regarding the procedures for an individual to petition the division for the removal of an ignition interlock device which will be submitted in a future filing.

4. Agency Authorization Information

Agency head or designee and title:	Jimmy Higgs, Director	**Date:**	10/27/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R708-27**	**Filing ID: 58400**

Effective date:	**10/27/2026**

1. Agency Information

Title catchline:	Public Safety, Driver License
Building:	Taylorsville State Office Building
Mailing address:	PO Box 144501
City, state and zip:	Salt Lake City, UT 84114-4501

2. Contact Persons

Name:	Phone:	Email:
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Britani Flores	801-884-8313	bflores@utah.gov

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

3. General Information

A. Rule catchline:
R708-27. Certification of Driver Education Teachers in the Public Schools to Administer Knowledge and Driving Skills Tests

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 53G-10-507	This section requires the Division of Driver License (division) to make rules regarding the process and procedures of certifying driver education teachers as license examiners.

C. 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.
D. 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 is required by statute and is necessary for the division and the State Board of Education to understand the process and procedures of certifying driver education teachers as licensed examiners to be able to administer written and driving skills tests. This ensures the standards are uniform for testing with both the division and with the public school system. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Jimmy Higgs, Director	**Date:**	10/27/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R708-34**	**Filing ID: 58399**

Effective date:	**10/27/2026**

1. Agency Information

Title catchline:	Public Safety, Driver License
Building:	Taylorsville State Office Building
Mailing address:	PO Box 144501
City, state and zip:	Salt Lake City, UT 84114-4501

2. Contact Persons

Name:	**Phone:**	**Email:**
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Please address questions regarding information on this notice to the persons listed above.

3. General Information

A. Rule catchline:
R708-34. Medical Waivers for Intrastate Commercial Driving Privileges

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Subsection 63G-3-201(2)	This statute allows the Division of Driver License to make rules if statute authorizes an action.
Section 53-3-303.5	This section requires the Driver License Medical Advisory Board to establish fitness standards and provisions for a waiver of specified federal driver's physical qualifications under 49 CFR 391.41 for intrastate commercial driving privileges.

C. 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.
D. 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 is necessary to establish minimum fitness standards to obtain a commercial driving privilege, and provisions to obtain a waiver of specified federal physical qualifications for individuals who may not qualify for an interstate commercial driving privilege to be able to qualify for an intrastate commercial driving privilege. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Jimmy Higgs, Director	**Date:**	10/27/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R708-35**	**Filing ID: 58398**

Effective date:	**10/27/2026**

1. Agency Information

Title catchline:	Public Safety, Driver License
Building:	Taylorsville State Office Building
Mailing address:	PO Box 144501
City, state and zip:	Salt Lake City, UT 84114-4501

2. Contact Persons

Name:	Phone:	Email:
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Please address questions regarding information on this notice to the persons listed above.

3. General Information

A. Rule catchline:
R708-35. Adjudicative Proceedings For Driver License Offenses Not Involving Alcohol or Drug Actions

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Subsection 63G-4-203(1)	This subsection requires agencies to prescribe procedures for informal adjudicative proceedings if the agency has designated a proceeding as informal.

Subsection 53-3-221(6)(v)	This subsection requires the Division of Driver License (division) to make rules to implement the provisions of Title 53, Chapter 3, Part 2, Driver Licensing Act.

C. 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.
D. 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 is required to outline the procedures for informal proceedings as required by statute. Additionally, the division is required to make rules regarding the implementation of Title 53, Chapter 3, Part 2, Driver Licensing Act which requires the division to allow hearings regarding the denial, suspension, revocation or disqualification of driving privileges. This rule outlines the process for applicants to appeal the denial, suspension, revocation, or disqualification of their driving privileges with a hearing officer of the division during an informal proceeding. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Jimmy Higgs, Director	**Date:**	10/27/2026

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	**R909-4**	**Filing ID: 58362**

Effective date:	**10/16/2026**

1. Agency Information

Title catchline:	Transportation, Motor Carrier
Building:	Calvin Rampton
Street address:	4501 S 2700 W
City, state:	Taylorsville, UT
Mailing address:	PO Box 148455
City, state and zip:	Salt Lake City, UT 84114-8455

2. Contact Persons

Name:	**Phone:**	**Email:**
Leif Elder	801-580-8296	lelder@utah.gov
James Godin	801-573-7181	jamesjgodin@agutah.gov
Lori Edwards	385-341-3414	loriedwards@agutah.gov

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

3. General Information

A. Rule catchline:
R909-4. Motor Carrier, Enforcement, Penalties

B. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 72-9-301	This section requires the Department of Transportation (department) to administer and enforce state and federal laws related to the operation of a motor carrier within Utah.
Section 72-9-103	This section requires the department to make rules providing for the necessary administration and enforcement of Title 72, Chapter 9.
Section 72-9-303	This section authorizes the department to issue cease and desist orders to persons who violate Title 72, Chapter 9.

C. 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.
D. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:
The statute still requires and authorizes the provisions of this rule and the department has determined it should remain in place. Therefore, this rule should be continued.

4. Agency Authorization Information

Agency head or designee and title:	Carlos M. Braceras, PE, Commissioner, UDOT	**Date:**	10/16/2026

End of the Five-Year Notices of Review and Statements of Continuation Section

NOTICES OF
RULE EFFECTIVE DATES

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.

Agriculture and Food
Marketing and Development
No. 58208 (Repeal and Readopt) R65-13: Utah's Own
Published: 09/15/2026
Effective: 10/23/2026

Specialized Products
No. 58179 (Amendment) R66-2: Cannabis Processing
Published: 09/15/2026
Effective: 10/22/2026

No. 58356 (Amendment) R66-3. Quality Assurance Testing on Cannabis
Published: 07/01/2026
Effective: 10/22/2026

No. 58356 (Change inProposed Rule) R66-3: Quality Assurance Testing on Cannabis
Published: 09/15/2026
Effective: 10/22/2026

No. 58230 (Amendment) R66-34: Industrial Hemp Retailer Permit
Published: 10/01/2026
Effective: 11/10/2026

No. 58232 (Amendment) R66-50: Kratom Retail Permit
Published: 10/01/2026
Effective: 11/10/2026

Commerce
Consumer Protection
No. 58211 (Amendment) R152-22: Charitable Solicitations Act Rule
Published: 09/15/2026
Effective: 10/26/2026

No. 58212 (Amendment) R152-23: Health Spa Services Protection Act Rule
Published: 09/15/2026
Effective: 10/26/2026

No. 58214 (Amendment) R152-34: Utah Postsecondary School and State Authorization Act Rule
Published: 09/15/2026
Effective: 10/26/2026

No. 58213 (New Rule) R152-83: Virtual Currency Kiosk Regulation Rule
Published: 09/15/2026
Effective: 10/26/2026

Professional Licensing
No. 58209 (Amendment) R156-46a: Hearing Instrument Specialist Licensing Act Rule
Published: 09/15/2026
Effective: 10/22/2026

No. 58206 (Amendment) R156-55b: Electricians Licensing Act Rule
Published: 09/15/2026
Effective: 11/05/2026

No. 58207 (Amendment) R156-55c: Plumber Licensing Act Rule
Published: 09/15/2026
Effective: 11/05/2026

Education
Administration
No. 58238 (Amendment) R277-113: LEA Fiscal and Auditing Policies
Published: 10/01/2026
Effective: 11/09/2026

No. 58387 (Nonsubstantive) R277-301: Educator Licensing
Published: Not Published in Bulletin
Effective: 11/10/2026

No. 58386 (Nonsubstantive) R277-303: Educator Preparation Programs
Published: Not Published in Bulletin
Effective: 11/10/2026

No. 58239 (Amendment) R277-305: School Leadership License Areas of Concentration and Programs
Published: 10/01/2026
Effective: 11/09/2026

No. 58240 (Amendment) R277-323: Public Educator Evaluation
Published: 10/01/2026
Effective: 11/09/2026

No. 58385 (Nonsubstantive) R277-328: Equal Opportunity in Education
Published: Not Published in Bulletin
Effective: 11/10/2026

No. 58241 (Amendment) R277-330: Utah Effective Educator Standards
Published: 10/01/2026
Effective: 11/09/2026

No. 58242 (Amendment) R277-608: Emergency Safety Interventions and Prohibition of Corporal Punishment
Published: 10/01/2026
Effective: 11/09/2026

No. 58243 (Amendment) R277-631: Student Toilet Training Requirements
Published: 10/01/2026
Effective: 11/09/2026

No. 58244 (New Rule) R277-633: Dyslexia Screening Pilot Program
Published: 10/01/2026
Effective: 11/09/2026

No. 58388 (Nonsubstantive) R277-634: Grants and Scholarships
Published: Not Published in Bulletin
Effective: 11/10/2026

No. 58245 (Amendment) R277-702: Procedures for the Utah High School Completion Diploma
Published: 10/01/2026
Effective: 11/09/2026

No. 58246 (Repeal) R277-712: Personalized, Competency-based Learning Grant Programs
Published: 10/01/2026
Effective: 11/09/2026

No. 58247 (Repeal) R277-720: Reimbursement Program for Early Graduation from Personalized, Competency-Based Learning Program
Published: 10/01/2026
Effective: 11/09/2026

No. 58248 (Amendment) R277-727: School Meals Program
Published: 10/01/2026
Effective: 11/09/2026

Environmental Quality
Air Quality
No. 58133 (Amendment) R307-101: General Requirements
Published: 09/01/2026
Effective: 11/04/2026

No. 58134 (Amendment) R307-105: General Requirements: Emergency Controls
Published: 09/01/2026
Effective: 11/04/2026

No. 58135 (Amendment) R307-110-13: General Requirements: State Implementation Plan
Published: 09/01/2026
Effective: 11/04/2026

No. 58136 (Amendment) R307-110: General Requirements: State Implementation Plan
Published: 09/01/2026
Effective: 11/04/2026

Drinking Water
No. 58216 (Repeal and Readopt) R309-520: Facility Design and Operation: Disinfection
Published: 09/15/2026
Effective: 11/03/2026

Government Operations
Archives and Records Service
No. 58359 (Nonsubstantive) R17-6: Records Storage and Disposal at the State Records Center
Published: Not Published in Bulletin
Effective: 11/10/2026

No. 58360 (Nonsubstantive) R17-7: Archival Records Care and Access at the State Archives
Published: Not Published in Bulletin
Effective: 11/10/2026

Health and Human Services
Population Health, Health Promotion and Prevention
No. 58132 (Repeal and Readopt) R384-201: School-Based Vision Screening for Students in Public Schools
Published: 09/01/2026
Effective: 10/29/2026

No. 58403 (Nonsubstantive) R384-415: Requirements to Sell Electronic Cigarette Products
Published: Not Published in Bulletin
Effective: 11/10/2026

Integrated Healthcare
No. 58202 (Amendment) R414-11: Podiatric Services
Published: 09/15/2026
Effective: 10/27/2026

No. 58144 (Amendment) R414-303: Coverage Groups
Published: 09/01/2026
Effective: 10/27/2026

No. 58205 (New Rule) R414-340: Health Care Transparency and Accountability
Published: 09/15/2026
Effective: 11/01/2026

Health Care Facility Licensing
No. 58128 (Repeal and Readopt) R432-4: General Construction
Published: 08/15/2026
Effective: 10/29/2026

Higher Education (Utah Board of)
Administration
No. 58221 (New Rule) R765-132: Workforce Pell Grant Program Certification and Oversight
Published: 10/01/2026
Effective: 11/10/2026

Natural Resources
Outdoor Recreation
No. 58251 (Amendment) R650-205: Zoned Waters
Published: 10/01/2026
Effective: 11/09/2026

Wildlife Resources
No. 58433 (Nonsubstantive) R657-57: Division Variance Rule
Published: Not Published in Bulletin
Effective: 11/10/2026

Pardons (Board of)
Administration
No. 58180 (Amendment) R671-101: Definitions
Published: 10/01/2026
Effective: 11/12/2026

No. 58186 (Amendment) R671-201: Original Hearing Schedule and Notice
Published: 10/01/2026
Effective: 11/12/2026

No. 58181 (Amendment) R671-301: Personal Appearance
Published: 10/01/2026
Effective: 11/12/2026

No. 58187 (Amendment) R671-303: Information Received, Maintained or Used by the Board
Published: 10/01/2026
Effective: 11/12/2026

No. 58182 (Amendment) R671-308: Offender Hearing Assistance
Published: 10/01/2026
Effective: 11/12/2026

No. 58183 (Amendment) R671-310: Rescission Hearings
Published: 10/01/2026
Effective: 11/12/2026

No. 58188 (Amendment) R671-315: Pardons
Published: 10/01/2026
Effective: 11/12/2026

No. 58184 (Amendment) R671-517: Evidentiary Hearings and Proceedings
Published: 10/01/2026
Effective: 11/12/2026

No. 58185 (Amendment) R671-520: Treatment of Confidential Testimony
Published: 10/01/2026
Effective: 11/12/2026

Public Safety
Driver License
No. 58252 (Repeal and Readopt) R708-21: Third-Party Testing
Published: 10/01/2026
Effective: 11/10/2026

School and Institutional Trust Lands
Administration
No. 58348 (Nonsubstantive) R850-8: Adjudicative Proceedings
Published: Not Published in Bulletin
Effective: 10/15/2026

Workforce Services
Administration
No. 58197 (Repeal) R982-502: Low-income ADU Loan Guarantee Pilot Program
Published: 09/15/2026
Effective: 11/09/2026

Unemployment Insurance
No. 58253 (Amendment) R994-305: Collection of Contributions
Published: 10/01/2026
Effective: 11/09/2026

No. 58254 (Amendment) R994-403: Claim for Benefits
Published: 10/01/2026
Effective: 11/09/2026

End of the Notices of Rule Effective Dates Section