

Committee statutory changes

2026 General Session



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Utah Behavioral Health Commission

[26B-5-703. Purpose -- Duties -- Reporting.](#)

- (1) The purpose of the commission is to be the central authority for coordinating behavioral health initiatives between state and local governments, health systems, and other interested persons, to ensure that Utah's behavioral health systems are comprehensive, aligned, effective, and efficient.
 - (2) To fulfill the commission's purpose, the commission shall:
 - (a) establish a shared vision across public and private sectors for improving Utah's behavioral health systems;
 - (b) make recommendations, including policy recommendations, and advise the governor, executive branch agencies, and the Legislature on matters pertaining to behavioral health;
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- (c) provide feedback on proposed bills, rules, policies, and budgets relating to behavioral health;
 - (d) encourage participation in the commission's work by individuals and populations directly impacted by behavioral health issues, including family members of individuals with behavioral health issues;
 - (e) engage private sector payers, providers, and business and employer groups in the commission's work;
 - (f) continually review and revise the master plan as appropriate;
 - (g) identify priorities and lead efforts to implement and advance those priorities by coordinating and collaborating closely with public and private persons throughout the state;
 - (h) identify areas where innovation is necessary to improve behavioral health access and care;
 - (i) cooperate with the Utah System of Higher Education, the State Board of Education, the Division of Professional Licensing, the Utah Health Workforce Advisory Council, and the department to oversee the creation and implementation of behavioral health workforce initiatives for the state;
 - (j) collaborate with the Utah State Hospital, the Department of Corrections, county jails, and the department;
 - (k) regarding the interaction between an individual with a mental illness or an intellectual disability and the civil commitment system, criminal justice system, or juvenile justice system:
 - (i) promote communication between and coordination among all agencies interacting with the individual;
 - (ii) study, evaluate, and recommend changes to laws and procedures;
 - (iii) identify and promote the implementation of specific policies and programs to deal fairly and efficiently with the individual; and
 - (iv) promote judicial education;
 - (l) study the long-term need for adult patient staffed beds at the state hospital, including:
 - (i) the total number of staffed beds currently in use at the state hospital;
 - (ii) the current staffed bed capacity at the state hospital;

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- (iii) the projected total number of staffed beds needed in the adult general psychiatric unit of the state hospital over the next three, five, and 10 years based on:
 - A) the state's current and projected population growth;
 - B) current access to mental health resources in the community; and
 - C) any other factors the committee finds relevant to projecting the total number of staffed beds; and
 - (iv) the cost associated with the projected total number of staffed beds described in Subsection (1)(j)(iii); and
 - (m) each year report on whether the pay of the state hospital's employees is adequate based on market conditions.
 - (n) oversee coordination for the funding, implementation, and evaluation of suicide prevention efforts described in Section 26B-5-611;
 - (o) develop methods or models for implementing and coherently communicating cross-sector strategies;
 - (p) hold the state's behavioral health systems accountable for clear, measurable outcomes; and
 - (q) maintain independence from the department and the governor such that the commission and its committees are able to provide independent advice and recommendations, especially regarding proposed bills and policy considerations.
- (3) The commission may delegate responsibilities to its committees and subcommittees as it deems appropriate.
- (4) (a) The commission shall meet at least quarterly, but may meet at other times as scheduled by the chair.
- (a) The chair of the commission shall set the agenda for each commission meeting with input from commission members and staff.
 - (b) Notice of the time and place of a commission meeting shall be given to each member and to the public in compliance with Title 52, Chapter 4, Open and Public Meetings Act.
 - (c) A commission meeting is open to the public unless the meeting or a portion of a meeting is closed by the commission pursuant to Section 52-4-204 or Section 52-4-205.
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- (5) On or before December 31, 2024, the commission shall provide a report to the Legislature that includes:
- (a) recommendations for behavioral health measures and targets to be included in the next update to the master plan;
 - (b) recommendations for consolidating into the commission other commissions, committees, subcommittees, task forces, working groups, or other bodies pertaining to behavioral health;
 - (c) recommendations on the next steps for reviewing and potentially redefining state law and program options regarding county-based behavioral health services; and
 - (d) recommendations on key budget priorities and key legislative policies for the 2025 General Session and thereafter.
- (6) (a) Beginning in 2025, by no later than September 30 of each year, the commission shall provide a report to the Health and Human Services Interim Committee that describes the commission's work during the preceding year and includes, in accordance with Section 26B-5-705, any legislative recommendations from the commission.
- (a) Before the commission submits a legislative recommendation to the Health and Human Services Interim Committee or the Legislature, the Legislative Policy Committee created in Section 26B-5-705 shall review the recommendation.
- (7) Neither the commission nor a committee of the commission may obtain any individual's health or medical information, whether identifiable or deidentified, without first obtaining the consent of the individual or the individual's legal representative.

26B-5-704. Committees -- Creation -- Duties.

- (1) Each committee created under this part or formed by the commission in accordance with this section serves under the direction of the commission.
- (2) In addition to the committees created under this part or formed by the commission, the following are committees of the commission and shall serve under the direction of the commission to assist the commission in performing the commission's duties:
 - (a) the Behavioral Health Crisis Response Committee created in Section 63C-18-202;

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- (b) the Utah Substance Use and Mental Health Advisory Committee created in Section 26B-5-801; and
 - (c) the Statewide Suicide Prevention Committee created under Section 26B-5-611.
- (3) (a) In addition to the committees described in Subsection (2) or created under this part, the commission may form committees to support the commission in fulfilling the commission's duties.
- (b) When forming a committee, the commission shall:
 - (i) appoint members to the committee who represent a range of views and expertise;
 - (ii) direct the Department of Health and Human Services to determine committee membership and responsibilities in administrative rule, as dictated by the commission; and
 - (iii) adopt procedures and directives for the committee.
 - (c) Unless otherwise provided for in statute, a member of a committee may not receive compensation or benefits for the member's service on the committee, but may receive per diem and travel expenses in accordance with:
 - (i) Section 63A-3-106;
 - (ii) Section 63A-3-107; and
 - (iii) rules made by the Division of Finance under Sections 63A-3-106 and 63A-3-107.
 - (d) Compensation and expenses of a committee member who is a legislator are governed by Section 36-2-2 and Legislative Joint Rules, Title 5, Legislative Compensation and Expenses.

Utah Substance Use and Mental Health Advisory Committee

26B-5-801 Definitions -- Creation of committee -- Membership -- Terms.

- (1) (a) As used in this part, "committee" means the Utah Behavioral Health Policy Review ~~Substance Use and Mental Health Advisory~~ Committee created in this section.

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- (b) There is created within the department the Utah Behavioral Health Policy Review Substance Use and Mental Health Advisory Committee, which serves under the direction of the Utah Behavioral Health Commission created in Section 26B-5-702.
- (2) The department, with the concurrence of the Utah Behavioral Health Commission, shall make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act to determine the voting members of the committee ~~shall be comprised of the following voting members:~~
- ~~(a) the attorney general or the attorney general's designee;~~
 - ~~(a) one elected county official appointed by the Utah Association of Counties;~~
 - ~~(c) the commissioner of public safety or the commissioner's designee;~~
 - ~~(b) the director of the Division of Integrated Healthcare or the director's designee;~~
 - ~~(e) the state superintendent of public instruction or the superintendent's designee;~~
 - ~~(f) the executive director of the Department of Health and Human Services or the executive director's designee;~~
 - ~~(c) the executive director of the State Commission on Criminal and Juvenile Justice or the executive director's designee;~~
 - ~~(d) the executive director of the Department of Corrections or the executive director's designee;~~
 - ~~(e) the director of the Division of Juvenile Justice and Youth Services or the director's designee;~~
 - ~~(j) the director of the Division of Child and Family Services or the director's designee;~~
 - ~~(k) the chair of the Board of Pardons and Parole or the chair's designee;~~
 - ~~(l) the director of the Office of Multicultural Affairs or the director's designee;~~
 - ~~(m) the director of the Division of Indian Affairs or the director's designee;~~
 - ~~(n) the state court administrator or the state court administrator's designee;~~
 - ~~(f) one district court judge who presides over a drug court and who is appointed by the chief justice of the Utah Supreme Court;~~
 - ~~(p) one district court judge who presides over a mental health court and who is appointed by the chief justice of the Utah Supreme Court;~~
 - ~~(q) one juvenile court judge who presides over a drug court and who is appointed by the chief justice of the Utah Supreme Court;~~
 - ~~(r) one prosecutor appointed by the Statewide Association of Prosecutors;~~
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- ~~(s) the chair or co-chair of each subcommittee established by the committee;~~
 - ~~(t) the chair or co-chair of the Statewide Suicide Prevention Committee created under Subsection 26B-5-611(3);~~
 - ~~(u) one representative appointed by the Utah League of Cities and Towns to serve a four-year term;~~
 - ~~(v) the chair of the Utah Victim Services Commission or the chair's designee;~~
 - ~~(w) the superintendent of the Utah State Hospital or the superintendent's designee;~~
 - ~~(i) the following members appointed by the governor to serve four-year terms:
 - ~~(i) one resident of the state who has been personally affected by a substance use or mental health disorder; and~~
 - ~~(ii) one citizen representative; and~~~~
 - ~~(j) in addition to the voting members described in Subsections (2)(a) through (x), the following voting members appointed by a majority of the members described in Subsections (2)(a) through (x) to serve four-year terms:
 - ~~(i) one resident of the state who represents a statewide advocacy organization for recovery from substance use disorders;~~
 - ~~(ii) one resident of the state who represents a statewide advocacy organization for recovery from mental illness;~~
 - ~~(iii) one resident of the state who represents a statewide advocacy organization for protection of rights of individuals with a disability;~~
 - ~~(iv) one resident of the state who represents prevention professionals;~~
 - ~~(v) one resident of the state who represents treatment professionals;~~
 - ~~(vi) one resident of the state who represents the physical health care field;~~
 - ~~(vii) one resident of the state who is a criminal defense attorney;~~
 - ~~(viii) one resident of the state who is a military servicemember or military veteran under Section 53B-8-102;~~
 - ~~(ix) one resident of the state who represents local law enforcement agencies;~~
 - ~~(ii) one representative of private service providers that serve youth with substance use disorders or mental health disorders.~~
 - ~~(xi) one resident of the state who is certified by the Division of Integrated Healthcare as a peer support specialist as described in Subsection 26B-5-102(2)(gg).~~~~

~~(3) An individual other than an individual described in Subsection (2) may not be appointed as a voting member of the committee.~~

26B-5-802. Chair -- Vacancies -- Quorum -- Expenses.

- (1) The Utah ~~Behavioral Health Policy Review Substance Use and Mental Health~~ ~~Advisory~~ Committee shall annually select one of its members to serve as chair, ~~and~~ one of its members to serve as vice chair, and one of its members to serve as second vice chair.
- (2) When a vacancy occurs in the membership for any reason, the replacement shall be appointed for the unexpired term in the same manner as the position was originally filled.
- (3) A majority of the members of the committee constitutes a quorum.
- (4) A member may not receive compensation or benefits for the member's service, but may receive per diem and travel expenses as allowed in:
 - (a) Section 63A-3-106;
 - (b) Section 63A-3-107; and
 - (c) rules made by the Division of Finance according to Sections 63A-3-106 and 63A-3-107.
- (5) The committee may establish subcommittees as needed to assist in accomplishing its duties under Section 26B-5-803.

26B-5-803. Duties of ~~committee~~ council

- (1) Under the direction of the Utah Behavioral Health Commission created in Section 26B-5-702, the Utah ~~Behavioral Health Policy Review Substance Use and Mental Health~~ ~~Advisory~~ Committee shall:
 - ~~(a) provide leadership and generate unity for Utah's ongoing efforts to reduce and eliminate the impact of substance use and mental health disorders in Utah through a comprehensive and evidence based prevention, treatment, and justice strategy;~~
 - ~~(b) recommend and coordinate the creation, dissemination, and implementation of statewide policies to address substance use and mental health disorders;~~

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- ~~(c) facilitate planning for a balanced continuum of substance use and mental health disorder prevention, treatment, and justice services;~~
 - ~~(d) promote collaboration and mutually beneficial public and private partnerships;~~
 - (e) coordinate recommendations made by any subcommittee created under Section 26B-5-802;
 - (f) analyze and provide an objective assessment of all proposed legislation concerning substance use, mental health, forensic mental health, and related issues; and
 - (g) advise the Utah Behavioral Health Commission on behavioral health policy, proposed legislation, and procedures.
 - ~~(h) comply with Section 32B-2-306;~~
 - ~~(i) advise the Department of Health and Human Services regarding the state hospital admissions policy for individuals in the custody of the Department of Corrections;~~
 - ~~(j) regarding the interaction between an individual with a mental illness or an intellectual disability and the civil commitment system, criminal justice system, or juvenile justice system:~~
 - ~~(i) — promote communication between and coordination among all agencies interacting with the individual;~~
 - ~~(ii) — study, evaluate, and recommend changes to laws and procedures;~~
 - ~~(iii) — identify and promote the implementation of specific policies and programs to deal fairly and efficiently with the individual; and~~
 - ~~(iv) — promote judicial education;~~
 - ~~(k) study the long-term need for adult patient staffed beds at the state hospital, including:~~
 - ~~(i) — the total number of staffed beds currently in use at the state hospital;~~
 - ~~(ii) — the current staffed bed capacity at the state hospital;~~
 - ~~(iii) — the projected total number of staffed beds needed in the adult general psychiatric unit of the state hospital over the next three, five, and 10 years based on:~~
 - ~~(A) the state's current and projected population growth;~~
 - ~~(B) current access to mental health resources in the community; and~~

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- ~~(C) any other factors the committee finds relevant to projecting the total number of staffed beds; and~~
 - ~~(iv) the cost associated with the projected total number of staffed beds described in Subsection (1)(j)(iii); and~~
 - ~~(l) each year report on whether the pay of the state hospital's employees is adequate based on market conditions.~~
- (2) The committee shall meet quarterly or more frequently as determined necessary by the chair.
- (3) The committee shall report:
- ~~(a) with the assistance and staff support from the state hospital, regarding the items described in Subsections (1)(j) and (k), including any recommendations, to the Utah Behavioral Health Commission on or before July 31 of each year; and~~
 - (a) any ~~other~~ recommendations annually to the commission, the governor, and the Legislature, ~~and the Judicial Council.~~

Underage drinking prevention media and education campaign

32B-2-306. Underage drinking prevention media and education campaign.

- (1) As used in this section:
- (a) ~~"Advisory committee"~~ Commission means the ~~Utah Substance Use and Mental Health Advisory Committee created in Section 26B-5-801~~ Utah Behavioral Health Commission created in Section 26B-5-701.
 - (b) "Restricted account" means the Underage Drinking Prevention Media and Education Campaign Restricted Account created in this section.
- (2) (a) There is created a restricted account within the General Fund known as the "Underage Drinking Prevention Media and Education Campaign Restricted Account."
- (b) The restricted account consists of:
- (i) deposits made under Subsection (3); and
 - (ii) interest earned on the restricted account.
- (3) The department shall deposit 0.6% of the total gross revenue from sales of liquor with the state treasurer, as determined by the total gross revenue collected for the fiscal year two years preceding the fiscal year for which the deposit is made, to be

credited to the restricted account and to be used by the department as provided in Subsection (5).

- (4) (a) Before ~~January 1, 2033~~ July 1, 2029, the ~~advisory committee~~ commission shall:
- (i) provide ongoing oversight of a media and education campaign funded under this section;
 - (ii) create an underage drinking prevention workgroup consistent with guidelines proposed by the ~~advisory committee~~ commission related to the membership and duties of the underage drinking prevention workgroup to;
 - A) create guidelines for how money appropriated for a media and education campaign can be used;
 - B) include in the guidelines established pursuant to this Subsection (4) that a media and education campaign funded under this section is carefully researched and developed, and appropriate for target groups; and
 - (iii) approve plans submitted by the department in accordance with Subsection (5).
- (b) On or after ~~January 1, 2033~~ July 1, 2029, the department shall:
- (i) provide ongoing oversight of a media and education campaign funded under this section;
 - (ii) create guidelines for how money appropriated for a media and education campaign can be used; and
 - (iii) include in the guidelines established pursuant to this Subsection (4) that a media and education campaign funded under this section is carefully researched and developed, and appropriate for target groups.
- (5) (a) Subject to appropriation from the Legislature, the department shall expend money from the restricted account to direct and fund one or more media and education campaigns designed to reduce underage drinking in cooperation with the advisory committee, subject to the ~~advisory committee~~ commission being in effect under Section 63I-1-232.
- (a) (i) Before ~~January 1, 2033~~ July 1, 2029, the department shall:
- A) in cooperation with the underage drinking prevention workgroup created under Subsection (4), prepare and submit a plan to the ~~advisory~~

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- ~~committee~~ commission detailing the intended use of the money appropriated under this section;
- B) upon approval of the plan by the ~~advisory committee~~ commission, conduct the media and education campaign in accordance with the guidelines made by the ~~advisory committee~~ commission; and
- C) submit to the ~~advisory committee~~ commission annually by no later than October 1, a written report detailing the use of the money for the media and education campaigns conducted under this Subsection (5) and the impact and results of the use of the money during the prior fiscal year ending June 30.
- (ii) On or after ~~January 1, 2033~~ July 1, 2029, the department shall:
- A) prepare a plan detailing the intended use of the money appropriated under this section; and
- B) conduct the media and education campaign in accordance with the guidelines created by the department under Subsection (4)(b).

Behavioral Health Crisis Response Committee

63C-18-202. Committee established -- Members.

- (1) (a) Under the Utah Behavioral Health Commission created in Section 26B-5-702, there is created the Behavioral Health Crisis Response Committee, ~~composed of the following members:~~
- (2) The department, with the concurrence of the Utah Behavioral Health Commission, shall make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act to determine the voting members of the committee.
- ~~(b) the executive director of the Huntsman Mental Health Institute;~~
- ~~(c) the governor or the governor's designee;~~
- ~~(d) the director of the Office of Substance Use and Mental Health;~~
- ~~(e) one representative of the Office of the Attorney General, appointed by the attorney general;~~
- ~~(f) the executive director of the Department of Health and Human Services or the executive director's designee;~~

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- ~~(g) one member of the public, appointed by the chair of the committee and approved by the committee;~~
 - ~~(h) two individuals who are mental or behavioral health clinicians licensed to practice in the state, appointed by the chair of the committee and approved by the committee, at least one of whom is an individual who:~~
 - ~~(i) is licensed as a physician under:~~
 - ~~A) Title 58, Chapter 67, Utah Medical Practice Act;~~
 - ~~B) Title 58, Chapter 67b, Interstate Medical Licensure Compact; or~~
 - ~~C) Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; and~~
 - ~~(ii) is board eligible for a psychiatry specialization recognized by the American Board of Medical Specialists or the American Osteopathic Association's Bureau of Osteopathic Specialists;~~
 - ~~(i) one individual who represents a county of the first or second class, appointed by the Utah Association of Counties;~~
 - ~~(j) one individual who represents a county of the third, fourth, or fifth class, appointed by the Utah Association of Counties;~~
 - ~~(k) one individual who represents the Utah Hospital Association, appointed by the chair of the committee;~~
 - ~~(l) one individual who represents law enforcement, appointed by the chair of the committee;~~
 - ~~(m) one individual who has lived with a mental health disorder, appointed by the chair of the committee;~~
 - ~~(n) one individual who represents an integrated health care system that:~~
 - ~~(i) is not affiliated with the chair of the committee; and~~
 - ~~(ii) provides inpatient behavioral health services and emergency room services to individuals in the state;~~
 - ~~(o) one individual who represents a Medicaid accountable care organization, as defined in Section 26B-3-219, with a statewide membership base;~~
 - ~~(p) one individual who represents 911 call centers and public safety answering points, appointed by the chair of the committee;~~
 - ~~(q) one individual who represents Emergency Medical Services, appointed by the chair of the committee;~~
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- ~~(r) one individual who represents the mobile wireless service provider industry, appointed by the chair of the committee;~~
- ~~(s) one individual who represents rural telecommunications providers, appointed by the chair of the committee;~~
- ~~(t) one individual who represents voice over internet protocol and land line providers, appointed by the chair of the committee; and~~
- ~~(u) one individual who represents the Utah League of Cities and Towns, appointed by the Utah League of Cities and Towns.~~
- (3) (a) The committee shall annually select one of its members to serve as chair, one of its members to serve as vice chair, and one of its members to serve as second vice chair. ~~Except as provided in Subsection (2)(d), the executive director of the Huntsman Mental Health Institute is the chair of the committee.~~
- ~~(b) The chair of the committee shall appoint a member of the committee to serve as the vice chair of the committee, with the approval of the committee.~~
- (c) The chair of the committee shall set the agenda for each committee meeting.
- ~~(d) If the executive director of the Huntsman Mental Health Institute is not available to serve as the chair of the committee, the committee shall elect a chair from among the committee's members.~~
- (4) (a) A majority of the members of the committee constitutes a quorum.
- (b) The action of a majority of a quorum constitutes the action of the committee.
- (5) A member may not receive compensation, benefits, per diem, or travel expenses for the member's service on the committee.
- (6) The Office of Substance Use and Mental Health ~~Office of the Attorney General~~ shall provide staff support to the committee.

63C-18-203 Committee duties.

~~(1) Under the direction of the Utah Behavioral Health Commission created in Section 26B-5-702, the committee shall:~~

- ~~(a) identify a method to integrate existing local mental health crisis lines to ensure each individual who accesses a local mental health crisis line is connected to a qualified mental or behavioral health professional, regardless of the time, date, or number of individuals trying to simultaneously access the local mental health crisis line;~~
- ~~(b) study how to establish and implement a statewide mental health crisis line and a~~

~~statewide warm line, including identifying:~~

~~(i) a statewide phone number or other means for an individual to easily access the statewide mental health crisis line, including a short code for text messaging and a three-digit number for calls;~~

~~(ii) a statewide phone number or other means for an individual to easily access the statewide warm line, including a short code for text messaging and a three-digit number for calls;~~

~~(iii) a supply of:~~

~~(A) qualified mental or behavioral health professionals to staff the statewide mental health crisis line; and~~

~~(B) qualified mental or behavioral health professionals or certified peer support specialists to staff the statewide warm line; and~~

~~(iv) a funding mechanism to operate and maintain the statewide mental health crisis line and the statewide warm line;~~

~~(c) coordinate with local mental health authorities in fulfilling the committee's duties described in Subsections (1)(a) and (b);~~

~~(d) recommend standards for the certifications described in Section 26B-5-610; and~~

~~(e) coordinate services provided by local mental health crisis lines and mobile crisis outreach teams, as defined in Section 62A-15-1401.~~

(2) The committee shall study and make recommendations regarding:

~~(a) crisis line practices and needs, including:~~

~~(i) quality and timeliness of service;~~

~~(ii) service volume projections;~~

~~(iii) a statewide assessment of crisis line staffing needs, including required certifications; and~~

~~(iv) a statewide assessment of technology needs;~~

~~(b) primary duties performed by crisis line workers;~~

~~(c) coordination or redistribution of secondary duties performed by crisis line workers, including responding to non-emergency calls;~~

~~(d) operating the statewide 988 hotline:~~

~~(i) in accordance with federal law;~~

~~(ii) to ensure the efficient and effective routing of calls to an appropriate crisis center;~~

and

(iii)to directly respond to calls with trained personnel and the provision of acute mental health, crisis outreach, and stabilization services;

(e)opportunities to increase operational and technological efficiencies and effectiveness between 988 and 911, utilizing current technology;(3)

(f)needs for interoperability partnerships and policies related to 911 call transfers and public safety responses;

(g)standards for statewide mobile crisis outreach teams, including:

(i)current models and projected needs;

(ii)quality and timeliness of service;

(iii)hospital and jail diversions; and

(iv)staffing and certification;

(h)resource centers, including:

(i)current models and projected needs; and

(ii)quality and timeliness of service;

(i)policy considerations related to whether the state should:

(i)manage, operate, and pay for a complete behavioral health system; or

(ii)create partnerships with private industry; and

(j)sustainable funding source alternatives, which may include:

(i)charging a 988 fee, including a recommendation on the fee amount;

(ii)General Fund appropriations;

(iii)other government funding options;

(iv)private funding sources;

(v)grants;

(vi)insurance partnerships, including coverage for support and treatment after initial call and triage; and

(vii)other funding resources.

(3) The committee is responsible for monitoring the effectiveness, quality, volume and efficiency of the 988 crisis line operated through the Huntsman Mental Health Institute.

(4) The committee shall monitor crisis services throughout the state and to recommend strategies for expansion and continuous improvement of quality standards of crisis services.

(5) The committee may conduct other business related to the committee's duties described in this section.

(6) The committee shall consult with the Office of Substance Use and Mental Health and make recommendations to the Utah Behavioral Health Commission on:

(a) the standards and operation of the statewide mental health crisis line and the statewide warm line, in accordance with Section 26B-5-610; and

(b) the incorporation of the statewide mental health crisis line and the statewide warm line into behavioral health systems throughout the state.