

The House Committee on Health and Human Services offers the following substitute to SB 4:

A BILL TO BE ENTITLED
AN ACT

1 To amend Article 7 of Chapter 4 of Title 49 of the Official Code of Georgia Annotated,
2 relating to medical assistance generally, so as to establish the Georgia Mental Health
3 Treatment Task Force; to provide for legislative findings; to provide for the membership,
4 duties, compensation, and expense allowances; to develop applications for a Medicaid waiver
5 and block grant funding; to prohibit the submission of a mental health Medicaid waiver
6 application without legislative approval; to require agencies' cooperation; to provide for the
7 abolishment; to provide for automatic repeal; to provide for a short title; to provide for
8 related matters; to provide for an effective date; to repeal conflicting laws; and for other
9 purposes.

10 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

11 **SECTION 1.**

12 This Act shall be known and may be cited as the "Enhancing Mental Health Treatment in
13 Georgia Act."

14 **SECTION 2.**

15 The General Assembly finds that:

16 (1) It is important to understand the needs of Georgia residents with serious mental
17 illness and substance abuse disorders, to assess the ability of the state's health system to
18 meet these needs effectively, and to understand the impact of untreated mental illness and
19 substance abuse disorders on state budgets, hospitals, emergency rooms, jails, prisons,
20 law enforcement, and related institutions and services;

21 (2) Access to acute care and crisis intervention is vitally important to the citizens of
22 Georgia, and scenarios involving law enforcement, emergency medical service personnel,
23 and other first responders deserve careful consideration and support to ensure resources
24 are utilized in an efficient and safe manner;

- 25 (3) There is a vital need for this state to assess its ability to provide appropriate and
 26 necessary programs and services to Georgia's citizens, and determine where gaps may
 27 exist, as well as where the private sector, public sector, and nonprofit and faith-based
 28 communities' resources may be leveraged to ensure each citizen has access to the right
 29 care, at the right time, at the right place;
- 30 (4) Nationally, 4.1 percent of the population suffers from serious mental illness;
- 31 (5) While 92,118 adults with serious mental illness are currently served by the state
 32 mental health authority, there are an estimated 306,000 adults with serious mental illness
 33 in Georgia;
- 34 (6) Substance abuse and dependence on alcohol and drugs in Georgia mirrors national
 35 rates;
- 36 (7) Untreated serious mental illness prevents individuals from functioning normally in
 37 society and leading productive, fulfilled lives;
- 38 (8) Hospitals and emergency rooms can become overrun when individuals with untreated
 39 serious mental illness conflate emergency care with proper mental health treatment;
- 40 (9) Valuable law enforcement resources across the state are often diverted to attending
 41 to the mentally ill;
- 42 (10) Untreated mental illness can lead to institutionalization, prison, and otherwise worse
 43 health outcomes;
- 44 (11) Early, comprehensive, and regular treatment of individuals with mental illness can
 45 prevent adverse effects upon an individual, the health care system, and society at large;
- 46 (12) Untreated substance abuse has dire consequences on individuals' and families' lives;
- 47 (13) Because mental illness can increase vulnerability to drug abuse and substance
 48 addiction, effective treatment of mental illness may also necessitate treatment for a
 49 substance abuse disorder;
- 50 (14) There is a need to study the effectiveness of the services and health care programs
 51 currently available to individuals with, or at risk for, serious mental illness; and
- 52 (15) An understanding of the feasibility and consequences of using a Medicaid waiver
 53 to improve treatment for those with serious mental illness would enable the General
 54 Assembly to make an informed decision as to whether the state should seek a Section
 55 1115 waiver from the Department of Health and Human Services or apply for Medicaid
 56 block grant funding for mental health treatment and services, if appropriate.

57 **SECTION 2.**

58 Article 7 of Chapter 4 of Title 49 of the Official Code of Georgia Annotated, relating to
 59 medical assistance generally, is amended by adding a new Code section to read as follows:

S. B. 4 (SUB)

60 "49-4-142.3.

61 (a) As used in this Code section, the term:

62 (1) 'Mental illness' means a disorder of thought or mood which significantly impairs
63 judgment, behavior, capacity to recognize reality, or ability to cope with the ordinary
64 demands of life that affects an individual's mood, thinking, or behavior.

65 (2) 'Serious and persistent mental illness' means a serious mental illness that requires
66 ongoing treatment and management and causes severe impairment over time.

67 (3) 'Serious mental illness' means a diagnosable mental, behavioral, or other emotional
68 disorder that results in serious functional impairment which substantially interferes with
69 or limits one or more of an individual's major life activities. It includes the subset
70 population of individuals with serious and persistent mental illness.

71 (4) 'Substance abuse disorder' means a pattern of use of an intoxicating substance leading
72 to clinically significant impairment or distress.

73 (b) There is created the Georgia Mental Health Treatment Task Force to be composed of
74 three members of the House of Representatives to be appointed by the Speaker of the
75 House of Representatives; three members of the Senate to be appointed by the President
76 of the Senate; eleven members to be appointed by the Governor to include the
77 commissioner of community health or his or her designee, the commissioner of behavioral
78 health and developmental disabilities or his or her designee, the commissioner of public
79 health or his or her designee, the commissioner of human services or his or her designee,
80 the commissioner of community affairs or his or her designee, a Georgia board licensed
81 practicing psychiatrist, a representative from the Georgia Sheriffs' Association, one
82 representative from a mental health advocacy group, one member of an acute care hospital
83 that maintains in-patient psychiatric beds, one member from a private free-standing
84 psychiatric institution, and a representative from one of the state's community service
85 boards. The Speaker of the House of Representatives and the President of the Senate shall
86 each select a cochairperson. The cochairpersons shall call all meetings of the task force.
87 Administrative support for the task force shall be provided by the staff of the Department
88 of Community Health, as appropriate.

89 (c) The legislative members of the task force shall be entitled to receive the compensation
90 and allowances provided for in Code Section 28-1-8. Members of the task force who are
91 state officials, other than legislative members, or state employees shall receive no
92 compensation for their services on the task force but may be reimbursed for expenses
93 incurred by them in the performance of their duties as members of the task force in the
94 same manner as they are reimbursed for expenses in their capacities as state officials or
95 employees.

- 96 (d) The task force may conduct such meetings at such places and at such times as it may
97 deem necessary or convenient to enable it to exercise fully and effectively its powers,
98 perform its duties, and accomplish the objectives and purposes of this Code section.
- 99 (e) The task force shall perform the following by December 31, 2017:
- 100 (1) Examine the current mental health landscape in the state with particular attention to
101 the number of residents affected by serious mental illness and substance abuse disorders
102 and their health insurance coverage status, both public and private;
- 103 (2) Assess whether the current Medicaid program provides adequate and effective mental
104 health care services to the portion of the population suffering from, and at risk for, serious
105 mental illness and substance abuse disorders;
- 106 (3) Assess how other, non-Medicaid, services work to provide effective health care
107 services to the portion of the population suffering from, and at risk for, serious mental
108 illness and substance abuse disorders;
- 109 (4) Determine the impact on the state's hospitals, emergency rooms, law enforcement,
110 prisons, jails, and related institutions and services resulting from a lack of treatment of
111 those with mental illness and substance abuse disorders;
- 112 (5) Understand the link between substance abuse disorders and serious mental illness in
113 order to provide comprehensive, effective treatment to persons suffering from either or
114 both;
- 115 (6) Assess which services and practices work best to prevent further deterioration within
116 the mentally ill and substance abuse disorder populations, including, but not limited to,
117 supportive housing, crisis stabilization programs, community residential rehabilitation,
118 assertive community treatment services, telemedicine, data integration, and addiction
119 treatment programs;
- 120 (7) Determine what changes could be made to the state's Medicaid program that would
121 increase its ability to provide effective care and services to those suffering from, and at
122 risk for, serious mental illness and substance abuse disorders, with an assessment of the
123 costs and benefits of such changes to the state;
- 124 (8) Determine what changes could be made outside of the state's Medicaid program to
125 increase the state's ability to provide effective care and services to those suffering from,
126 and at risk for, serious mental illness and substance abuse disorders, with an assessment
127 of the costs and benefits of such changes to the state;
- 128 (9) Work within guidelines established by the Centers for Medicare and Medicaid
129 Services and the Department of Health and Human Services to develop a plan for
130 appropriate distribution of funding for mental health and substance abuse services in
131 Georgia. Specifically:

132 (A) Develop a complete application for a Section 1115 Medicaid waiver targeted at
 133 mental illness and substance abuse disorders that would be substantially ready for
 134 submission to the Department of Health and Human Services upon the General
 135 Assembly's subsequent authorization to submit said waiver pursuant to Code Section
 136 49-4-142.1 and in compliance with Code Section 49-4-142.2 in an upcoming session;
 137 and

138 (B) If appropriate, develop a complete application for Medicaid block grant funding
 139 for mental health services and substance abuse prevention and treatment that would be
 140 substantially ready for submission to the Department of Health and Human Services
 141 upon the General Assembly's subsequent authorization to submit said application; and

142 (10) Submit a report to the General Assembly detailing the task force's findings and
 143 recommendations, including whether to submit a Section 1115 waiver application to the
 144 Department of Health and Human Services or apply for a block grant for the provision
 145 of services related to serious mental illness and substance abuse disorders.

146 (f) Pursuant to Code Sections 49-4-142.1 and 49-4-142.2, neither the task force nor any
 147 representative of the state shall submit a waiver application to the Department of Health
 148 and Human Services without legislative approval. Creation of this task force shall not
 149 constitute such approval.

150 (g) All relevant agencies, including the Department of Community Health, the Department
 151 of Behavioral Health and Developmental Disabilities, the Department of Public Health, the
 152 Department of Human Services, and the Department of Community Affairs, shall work
 153 cooperatively with the task force to provide timely and relevant information as requested
 154 by the task force.

155 (h) The task force shall stand abolished and this Code section shall stand repealed on
 156 January 1, 2018."

157 **SECTION 3.**

158 This Act shall become effective upon its approval by the Governor or upon its becoming law
 159 without such approval.

160 **SECTION 4.**

161 All laws and parts of laws in conflict with this Act are repealed.