

House Bill 20

By: Representatives Scott of the 76<sup>th</sup>, Schofield of the 63<sup>rd</sup>, and Davis of the 87<sup>th</sup>

A BILL TO BE ENTITLED

AN ACT

1 To amend Part 3 of Article 16 of Chapter 2 of Title 20 of the Official Code of Georgia  
2 Annotated, relating to the health of students generally, so as to require the State Board of  
3 Education to adopt rules requiring all certificated public school personnel to receive annual  
4 training in depression and suicide awareness and prevention; to provide for the establishment  
5 and purpose of the Student Mental Health Screenings Grant Program; to provide for the  
6 allocation of grant awards under such program; to provide for grant application and grant  
7 program requirements; to provide for the implementation of grant-funded mental health  
8 screening programs by local school systems; to require the Department of Education to  
9 develop a model policy for student depression and suicide awareness, develop and approve  
10 training materials, assist local school systems in selecting research-based mental health  
11 screening tools, develop guidance to assist local school systems in establishing certain  
12 healthcare related partnerships to conduct mental health screenings, and develop guidance  
13 on the use of telehealth to provide mental health and behavioral health services; to revise  
14 requirements for local school systems to adopt certain policies; to provide for a definition;  
15 to provide for legislative findings; to provide for construction; to provide for related matters;  
16 to provide for a short title; to repeal conflicting laws; and for other purposes.

H. B. 20

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17 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

18 **SECTION 1.**

19 This Act shall be known and may be cited as the "Student Mental Health and Suicide  
20 Prevention Act."

21 **SECTION 2.**

22 The General Assembly finds that:

23 (1) Depression is the most common mental health disorder among American teenagers and  
24 adults. In 2021, over 5 million young people between the ages of 12 and 17 experienced  
25 at least one major depressive episode in the prior year. Major depressive episodes are two  
26 to three times more common in females than in males;

27 (2) Various biological, psychological, and environmental risk factors may contribute to  
28 teenage depression, which can lead to substance and alcohol abuse, social isolation, poor  
29 academic and workplace performance, unnecessary risk taking, early pregnancy, and  
30 suicide, which is the third leading cause of death among teenagers. Approximately 20  
31 percent of teenagers with depression seriously consider suicide and one in 12 attempt  
32 suicide. Untreated teenage depression can also result in adverse consequences into and  
33 throughout adulthood;

34 (3) Most teenagers who experience depression suffer from more than one episode. It is  
35 estimated that although teenage depression is highly treatable through combinations of  
36 therapy, individual and group counseling, and certain medications, fewer than one-third of  
37 teenagers experiencing depression seek help or treatment; and

38 (4) The proper detection and diagnosis of depression is key in reducing the risk of teenage  
39 suicide and improving physical and mental health outcomes for young people. It is  
40 therefore fitting and appropriate to establish school based depression screenings to help  
41 identify the symptoms of depression and facilitate access to appropriate treatment.

42 **SECTION 3.**

43 Part 3 of Article 16 of Chapter 2 of Title 20 of the Official Code of Georgia Annotated,  
44 relating to the health of students generally, is amended by revising Code Section 20-2-779.1,  
45 relating to suicide prevention and awareness training and no duty of care imposed, as  
46 follows:

47 "20-2-779.1.

48 (a)(1) The ~~Department~~ State Board of Education shall adopt rules to require that all  
49 certificated public school personnel receive annual training in depression and suicide  
50 awareness and prevention. This training shall be provided within the framework of  
51 existing in-service training programs ~~offered~~ and materials approved by the Department  
52 of Education or as part of required professional development offered by a local school  
53 system.

54 (2)(A) Subject to appropriations, the State Board of Education is authorized to  
55 establish the Student Mental Health Screenings Grant Program. The purpose of such  
56 grant program shall be to provide funding and resources to allow local school systems  
57 to implement mental health screening programs in schools to identify students in grades  
58 six through 12 who are at risk of depression and suicide.

59 (B) Awards under the grant program shall be allocated to local school systems in a  
60 manner to be determined by the State Board of Education; provided, however, that the  
61 State Board of Education shall, to the greatest extent possible, approve applications  
62 from at least one local school system each in the northern, central, and southern regions  
63 of the state and shall seek a cross section of local school systems from urban, suburban,  
64 and rural areas of the state.

65 ~~(2)(b)(1)~~ The Department of Education shall, in consultation with the Department of  
66 Behavioral Health and Developmental Disabilities, the Suicide Prevention Program  
67 established pursuant to Code Section 37-1-27, and depression and suicide prevention  
68 experts, develop and approve a list of ~~approved~~ training materials to fulfill the

69 requirements of this subsection which may include training materials currently ~~being~~ used  
70 by a local school system, if such training materials meet any criteria established by the  
71 Department of Education.

72 ~~(3) Approved~~ Such approved training materials shall include training on how to identify  
73 appropriate mental health services, both within the school and also within the larger  
74 community, and when and how to refer youth and their families to those services, ~~and~~  
75 ~~(4) Approved materials~~ may include programs that can be completed through self-review  
76 of suitable depression and suicide awareness and prevention materials.

77 (2) To assist local school systems in developing their own policies for student depression  
78 and suicide awareness and prevention, as required in subsection (c) of this Code section,  
79 the Department of Education, in consultation with the Suicide Prevention Program within  
80 the Department of Behavioral Health and Developmental Disabilities, shall establish a  
81 model policy for use by local school systems in accordance with this Code section.

82 (3)(A) To assist local school systems in selecting a research-based screening tool to use  
83 as part of mental health screening programs, the Department of Education, in  
84 consultation with the Suicide Prevention Program within the Department of Behavioral  
85 Health and Developmental Disabilities, may develop a list of preapproved  
86 research-based screening tools that are validated to screen depression and other mental  
87 health risks in adolescents.

88 (B) No later than January 1, 2026, the Department of Education, in consultation with  
89 the Suicide Prevention Program within the Department of Behavioral Health and  
90 Developmental Disabilities, shall develop guidance and resources for local school  
91 systems to facilitate the establishment of partnerships with organizations or healthcare  
92 providers specializing in pediatric and adolescent mental health to conduct mental  
93 health screenings.

94 (4)(A) As used in this paragraph, the term 'telehealth' means the use of information and  
95 communications technologies, including, but not limited to, telephones, remote patient

96 monitoring devices, and other electronic means, by a healthcare provider to facilitate  
97 the delivery of long-distance healthcare services, including, but not limited to, patient  
98 consultation, evaluation, diagnosis, treatment, education, and care management.

99 (B) The Department of Education, in consultation with the Suicide Prevention Program  
100 within the Department of Behavioral Health and Developmental Disabilities and  
101 appropriate stakeholders, including stakeholders with experience in, shall, on or before  
102 October 1, 2025, develop guidance for the use of telehealth in public schools to provide  
103 mental health and behavioral health services to students, including, but not limited to,  
104 student mental health screenings at school or during any school related function.  
105 Guidance developed pursuant to this subparagraph shall include, but shall not be limited  
106 to, the following:

107 (i) Qualifications of individuals authorized, within the scope of their practice, to  
108 assist students in accessing mental health and behavioral health services via telehealth  
109 while such student is at school or during any school related function;

110 (ii) Qualifications of individuals authorized, within the scope of their practice, to  
111 provide mental health and behavioral health services to students via telehealth;

112 (iii) The legal requirements for parental consent for the provision of mental health  
113 and behavioral health services to a minor via telehealth while such minor is at school  
114 or during any school related function;

115 (iv) Measures necessary to protect the security of data transmitted during the  
116 provision of telehealth to students;

117 (v) Measures necessary to protect the privacy of student data pursuant to Article 15  
118 of this chapter and the federal Family Educational Rights and Privacy Act  
119 (FERPA), 20 U.S.C. Section 1232g, and medical records pursuant to the federal  
120 Health Insurance Portability and Accountability Act (HIPAA), P.L. 104-191; and

121 (vi) Potential liability for public schools and local school systems associated with the  
122 provision of telehealth to students.

123 ~~(5)(A)(c)(1)~~ No later than December 31, 2025, each ~~Each~~ local school system shall adopt  
124 a policy on student depression and suicide awareness and prevention. Such policies shall  
125 be developed in consultation with school and community stakeholders, school-employed  
126 mental health professionals, and suicide prevention experts, and shall, at a minimum,  
127 address procedures relating to depression awareness and intervention and suicide  
128 awareness, prevention, intervention, and postvention.

129 ~~(B) To assist local school systems in developing their own policies for student suicide~~  
130 ~~prevention, the Department of Education, in consultation with the Suicide Prevention~~  
131 ~~Program within the Department of Behavioral Health and Developmental Disabilities,~~  
132 ~~shall establish a model policy for use by local school systems in accordance with this~~  
133 ~~Code section.~~

134 (2) A local school system seeking to participate and receive funding under the grant  
135 program provided for in paragraph (2) of subsection (a) of this Code section shall submit  
136 an application to the State School Superintendent, in accordance with application  
137 procedures and requirements prescribed by the State Board of Education. An application  
138 submitted by a local school system shall include, at a minimum:

139 (A) A description of the mental health screening program to be implemented by the  
140 local school system and an explanation of how the local school system will make  
141 annual mental health screenings available to each student in grades six through 12;

142 (B) Details concerning the research based screening tool that will be used by the local  
143 school system or whether the local school system will partner with an organization or  
144 healthcare provider specializing in pediatric and adolescent mental health to conduct  
145 the screenings;

146 (C) A request and justification for the amount of grant funding sought by the local  
147 school system under the grant program;

148 (D) A description of how the grant funding will be used to further the purposes of the  
149 mental health screening program, including, but not limited to, hiring additional  
150 personnel, purchasing materials, or contracting with outside entities;

151 (E) A description of how the mental health screenings will be conducted in a manner  
152 that permits real-time evaluation of the screening results and same-day intervention by  
153 a licensed mental health professional, if required based on the results of the screening;

154 (F) As applicable, the details of any partnership with an organization or provider  
155 specializing in pediatric and adolescent mental health services, which shall include, but  
156 shall not be limited to, the name of the organization or provider, the number of students  
157 to be served by the organization or provider, the expected time frame to screen the  
158 students, the costs associated with engaging in a partnership with the organization or  
159 provider, and the location where the screenings will take place. A local school system  
160 shall detail whether student health insurance information will be required under its  
161 agreement with a partner organization or provider, how it will obtain that information,  
162 and what accommodations will be made for uninsured or underinsured students and  
163 uninsured and underinsured minor students whose parents or guardians have consented  
164 to the screening;

165 (G) A description of how the local school system will ensure that the parent or  
166 guardian of a student whose screening detects an irregularity is notified of such  
167 irregularity and how the local school system will advise the parent or guardian of the  
168 services available through a partner organization or provider or supply the parent or  
169 guardian with resources to assist in acquiring further evaluation and diagnosis of the  
170 student by a healthcare professional; and

171 (H) A description of how the local school system will obtain written informed consent  
172 from a minor student's parent or guardian prior to the screening.

173 (3) A local school system that receives an award under the grant program provided for  
174 in paragraph (2) of subsection (a) of this Code section shall make available to each

175 student in grades six through 12 an annual mental health screening which shall include  
176 screening for depression and suicide risk. Each such local school system or public school  
177 shall meet the following conditions when implementing its mental health screening  
178 program:

179 (A) The local school system shall use a research based screening tool in its mental  
180 health screening program conducted by a licensed mental health professional or through  
181 a partnership with an organization or healthcare provider specializing in pediatric and  
182 adolescent mental health to conduct the screenings. Nothing in this subparagraph shall  
183 prohibit a local school system from using a self-administered screening tool as part of  
184 the depression screening program;

185 (B) Mental health screenings shall be conducted in a manner that permits real-time  
186 evaluation of the screening results and same day intervention by a licensed mental  
187 health professional as indicated by the screening;

188 (C) The local school system shall ensure that mental health screenings are conducted  
189 in a manner that accommodates students who are English language learners, students  
190 with disabilities, and students with low reading proficiency when conducting the  
191 screenings;

192 (D) Mental health screenings shall be conducted in a manner that ensures the privacy  
193 of the student during the screening process and the confidentiality of the results,  
194 consistent with state and federal laws applicable to the confidentiality of student records  
195 and mental health records;

196 (E) The local school system shall obtain written informed consent from the minor  
197 student's parent or guardian prior to such student's mental health screening; and

198 (F) The local school system shall forward data collected from the mental health  
199 screenings to the Department of Education and to the Suicide Prevention Program  
200 within the Department of Behavioral Health and Developmental Disabilities in a form  
201 and manner to be determined by the Department of Education, provided that any data

202 forwarded shall be aggregated and shall not contain any identifying or confidential  
203 information with regard to any individual.

204 (4) In the event that a local school system chooses to partner with an organization or  
205 healthcare provider specializing in pediatric and adolescent mental health to conduct the  
206 mental health screenings, the partner organization or provider may also provide mental  
207 health services as deemed necessary by the organization or provider and as consented to  
208 by a minor student's parent or guardian. A local school system partnering with an  
209 organization or healthcare provider specializing in pediatric and adolescent mental health  
210 may develop a form to obtain parental consent and student health insurance information  
211 as necessary to satisfy the provisions of any partnership agreement.

212 ~~(b)~~(d) No person shall have a cause of action for any loss or damage caused by any act or  
213 omission resulting from the implementation of the provisions of this Code section or  
214 arising from any advice, screening, facilitation of screening, or training, or lack thereof,  
215 required by provided pursuant to this Code section.

216 ~~(c)~~(e) Any advice, screenings, facilitation of screenings, and ~~The~~ training, or lack thereof,  
217 required by the provisions of provided for in this Code section shall not be construed to  
218 impose any specific duty of care.

219 (f) Nothing in this Code section shall be construed to affect a local school system's ability  
220 to provide additional or supplemental services to a student as required by, or as consistent  
221 with, any applicable provision of state or federal law."

222 **SECTION 4.**

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