

Senate Bill 4

By: Senators Unterman of the 45th, Shafer of the 48th, Cowsert of the 46th, Gooch of the 51st, Wilkinson of the 50th and others

A BILL TO BE ENTITLED
AN ACT

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

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.

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

SECTION 2.

The General Assembly finds that:

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

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

(3) There is a vital need for this state to assess its ability to provide appropriate and necessary programs and services to Georgia's citizens, and determine where gaps may exist, as well as where the private sector, public sector, and nonprofit and faith-based

communities' resources may be leveraged to ensure each citizen has access to the right care, at the right time, at the right place;

(4) Nationally, 4.1 percent of the population suffers from serious mental illness;

(5) While 92,118 adults with serious mental illness are currently served by the state mental health authority, there are an estimated 306,000 adults with serious mental illness in Georgia;

(6) Substance abuse and dependence on alcohol and drugs in Georgia mirrors national rates;

(7) Untreated serious mental illness prevents individuals from functioning normally in society and leading productive, fulfilled lives;

(8) Hospitals and emergency rooms can become overrun when individuals with untreated serious mental illness conflate emergency care with proper mental health treatment;

(9) Valuable law enforcement resources across the state are often diverted to attending to the mentally ill;

(10) Untreated mental illness can lead to institutionalization, prison, and otherwise worse health outcomes;

(11) Early, comprehensive, and regular treatment of individuals with mental illness can prevent adverse effects upon an individual, the health care system, and society at large;

(12) Untreated substance abuse has dire consequences on individuals' and families' lives;

(13) Because mental illness can increase vulnerability to drug abuse and substance addiction, effective treatment of mental illness may also necessitate treatment for a substance abuse disorder;

(14) There is a need to study the effectiveness of the services and health care programs currently available to individuals with, or at risk for, serious mental illness; and

(15) An understanding of the feasibility and consequences of using a Medicaid waiver to improve treatment for those with serious mental illness would enable the General Assembly to make an informed decision as to whether the state should seek a Section 1115 waiver from the Department of Health and Human Services or apply for Medicaid block grant funding for mental health treatment and services, if appropriate.

SECTION 2.

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

"49-4-142.3.

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

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

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

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

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

(b) There is created the Georgia Mental Health Treatment Task Force to be composed of three members of the House of Representatives to be appointed by the Speaker of the House of Representatives; three members of the Senate to be appointed by the President of the Senate; nine members to be appointed by the Governor to include the commissioner of community health or his or her designee, the commissioner of behavioral health and developmental disabilities or his or her designee, the commissioner of public health or his or her designee, the commissioner of human services or his or her designee, the commissioner of community affairs or his or her designee, a representative from the Georgia Sheriffs' Association, two representatives from mental health advocacy groups, and a representative from one of the state's community service boards. The Speaker of the House of Representatives and the President of the Senate shall each select a cochairperson. The cochairpersons shall call all meetings of the task force. Administrative support for the task force shall be provided by the staff of the Department of Community Health, as appropriate.

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

(d) The task force may conduct such meetings at such places and at such times as it may deem necessary or convenient to enable it to exercise fully and effectively its powers, perform its duties, and accomplish the objectives and purposes of this Code section.

(e) The task force shall perform the following by December 31, 2017:

(1) Examine the current mental health landscape in the state with particular attention to the number of residents affected by serious mental illness and substance abuse disorders and their health insurance coverage status, both public and private;

(2) Assess whether the current Medicaid program provides adequate and effective mental health care services to the portion of the population suffering from, and at risk for, serious mental illness and substance abuse disorders;

(3) Assess how other, non-Medicaid, services work to provide effective health care services to the portion of the population suffering from, and at risk for, serious mental illness and substance abuse disorders;

(4) Determine the impact on the state's hospitals, emergency rooms, law enforcement, prisons, jails, and related institutions and services resulting from a lack of treatment of those with mental illness and substance abuse disorders;

(5) Understand the link between substance abuse disorders and serious mental illness in order to provide comprehensive, effective treatment to persons suffering from either or both;

(6) Assess which services and practices work best to prevent further deterioration within the mentally ill and substance abuse disorder populations, including, but not limited to, supportive housing, crisis stabilization programs, community residential rehabilitation, assertive community treatment services, telemedicine, data integration, and addiction treatment programs;

(7) Determine what changes could be made to the state's Medicaid program that would increase its ability to provide effective care and services to those suffering from, and at risk for, serious mental illness and substance abuse disorders, with an assessment of the costs and benefits of such changes to the state;

(8) Determine what changes could be made outside of the state's Medicaid program to increase the state's ability to provide effective care and services to those suffering from, and at risk for, serious mental illness and substance abuse disorders, with an assessment of the costs and benefits of such changes to the state;

(9) Work within guidelines established by the Centers for Medicare and Medicaid Services and the Department of Health and Human Services to develop a plan for appropriate distribution of funding for mental health and substance abuse services in Georgia. Specifically:

(A) Develop a complete application for a Section 1115 Medicaid waiver targeted at mental illness and substance abuse disorders that would be substantially ready for submission to the Department of Health and Human Services upon the General Assembly's subsequent authorization to submit said waiver pursuant to Code Section

49-4-142.1 and in compliance with Code Section 49-4-142.2 in an upcoming session;

and

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

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

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

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

(h) The task force shall stand abolished on January 1, 2018."

SECTION 3.

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

SECTION 4.

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