practices, information, and resources to support "familiar faces". These are individuals with serious mental illness that have frequent contact with criminal justice, homeless, and behavioral health systems. Subject to appropriations, DBHDD will develop a pilot program to assist jails in implementing behavioral health screening programs and protocols and create a grant program to create or expand jail in-reach and reentry programs which will focus on "familiar faces" and connect individuals with community resources. A comprehensive study on the public behavioral health workforce will be conducted by DBHDD to understand recruitment and retention issues, and target solutions to help with shortages. The bill adds certain members to the Behavioral Health Reform and Innovation Commission (BHIRC). BHIRC, with DBHDD, is required to develop a common definition of "serious mental illness" and include "familiar faces" to initiative coordination. BHIRC is tasked with creating a multi-year plan to expand the use of forensic peer mentors. BHIRC is required to establish a task force to build a continuum of care. The task force will comprehensively study access to inpatient behavioral health beds, and make recommendations on needed capacity building, youth specific care, and autism spectrum-related care. The task force will also formally review competency evaluation and restoration challenges, and forensic laws and regulations that affect those interacting with the behavioral health and criminal justice systems. This task force will study increased capacity of child and adolescent substance misuse intensive outpatient treatment programs. BHIRC will convene a task force to review the effect of behavioral health on homeless populations across the state. A physician's certificate or affidavit is required to be attached to a court order for involuntary treatment. (Personally identifying information will be removed from such document.) OHSC is required to study behavioral health provider licensing requirements to identify barriers to entry or licensure. Professional boards to be included in the study are Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists; State Board of Examiners of Psychologists; and the Georgia Board of Nursing. The study will update licensing application and renewal systems, create pathways for foreign-trained practitioners, and update practicum and supervision requirements. The Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists is authorized to waive experience requirements for applicants licensed under another state that have maintained good standing in that jurisdiction for at least two years. The Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists and the Georgia Board of Nursing are authorized to manage a professional health program for impaired health care professionals across the state. The Governor's Office of Planning and Budget (OPB) will hire a director as the executive head of the Georgia Data Analytic Center (GDAC). GDAC will serve as the central repository for Georgia from which data can be released to requesting agencies. The director will have the authority to review data sharing disputes between executive state agencies when a data request made by one agency is denied by another with the reasoning that it would violate state or federal law. If the director determines such a request does not break the law, the agency is compelled to cooperate with such request. DCH will ensure that the Medicaid program includes reimbursement for psychological diagnostic assessments and treatment and family therapy services; reimbursement for licensed professional counselors, licensed marriage and family therapists, and certified peer specialists; psychiatric hospitals as eligible for inpatient care for those under the age of 21 years enrolled in fee-for-service Medicaid; updates of reimbursement rates for the assessment and treatment of autism spectrum disorder in collaboration with relevant agencies and organizations; and therapeutic foster care for those under the age of 21 years. Necessary requests for Medicaid state plan amendments or waivers will be made to the United States Department of Health and Human Services by December 1, 2023. DCH is also required to take necessary steps to ensure the receipt of relevant federal funds to provide services, such as housing and employment supports and case management, for recipients and their caregivers if they are under the age of 19 years. The Georgia Board of Health Care Workforce is required to work with state licensing boards to establish the Georgia Health Care Professionals Data System to collect and share de-identified descriptive data about licensed health care professionals in Georgia. Such information will be stored in a publicly accessible repository on the board’s website. Information will include demographics and geographical distribution of licensed health care professionals across the state. Licensing boards must provide such data upon request or up to two times annually as required. Information provided by licensing boards will include age, race, gender, ethnicity, language spoken at home, practice location, and license type.

Status: PASSED HOUSE. Assigned to Senate Health and Human Services Committee.

HB 557  (Stephens-164th)  Bill Link

Authorizes advanced practice registered nurses and physician assistants to prescribe Schedule II controlled substances