

2022 GEORGIA LEGISLATIVE SESSION

Highlights of the Mental Health Parity Act

Parity means that mental health conditions and substance use disorder should be treated the same as physical health conditions. "Mental health" refers to both mental health and addiction/substance use.

Part 1: Access

- Requires **private and public health insurers** to provide coverage for mental health and substance use disorder in accordance with existing federal law.
- **Private insurers**¹ must provide data to the Insurance Commissioner to prove that equal standards are being used for mental and physical health when insurers deny or approve claims.
 - **Department of Insurance** must make it easy to report unfair mental health coverage.
- Creates a full-time position to **make sure insurers are actually following parity rules**.
- Requires **public health insurers** (i.e., Medicaid, PeachCare, and State Health Benefit Plan (SHBP)) to prove that equal standards are being used for mental and physical health when insurers deny or approve claims.
 - **Department of Community Health** must make it easy to report unfair mental health coverage.



Part 2: Workforce Development

- Permits the **cancellation of loans for students** enrolled in programs to become mental health and substance use care professionals.
 - This encourages people to work in mental health fields to get their loans paid off.
- Allows **professional licensing boards to collect data** from behavioral health providers to help state leaders understand the workforce shortage.



Part 3: Involuntary Commitment

- Removes the requirement that a person who is mentally ill be in the process of **committing a crime** for law enforcement to transport that person to a physician or emergency room for a mental health evaluation.



Part 4: Mental Health Courts & Corrections

- Provides **grants to accountability courts** for mental health services (subject to available funding).
 - **Accountability courts** are for people who have been charged with a crime related to their mental illness. These courts ensure that people with serious mental illness are not sent to jail without getting necessary mental health support.
- Directs the state to do two things: 1) **increase access to certified peer specialists** (i.e., trained professionals who have undergone mental health treatment and recovered) in rural and medically underserved communities; and 2) **improve care coordination** between a student's mental health provider(s) in school settings and primary care provider(s).
- Creates a task force to connect people with serious mental illness to appropriate **community-based services** to prevent them from unnecessarily being sent to jails and juvenile detention facilities.



Learn more about the **Mental Health Parity Act**, bill sponsors, and status:

<https://www.legis.ga.gov/legislation/61365>



Part 5: Child & Adolescent Behavioral Health

- Requires DBHDD to create a **registry for children who frequently use behavioral health crisis services**. That means they are treated by the state or stay in juvenile detention for a mental health crisis. The registry is meant to coordinate care more efficiently for each use.
- Clarifies that **community service boards** provide mental health, developmental disabilities, and substance use disorder services to children as well as adults.
 - CSBs are state-funded agencies that provide mental health services to uninsured & low-income Georgians.
- Requires DCH to convene a task force to identify ways to **streamline Medicaid-funded mental health and substance use care** treatment in children.
- Sets a deadline for DCH to develop a **data sharing system to protect children between state agencies**, and creates a Multi-Agency Treatment for Children team to address gaps in children's treatment needs.



Part 6: Additional Details

- Requires the state's Department of Community Health to compare Medicaid, PeachCare, and SHBP **reimbursement rates for mental health services** to other states.
- Requires a single **report with all complaints** against public and private insurers for violating parity requirements.

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