

Board Meeting

BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental
Disabilities

February 26, 2026



Agenda

Roll Call

Call to Order

Introduction of Guest Speaker

Action Items

- Board Meeting Minutes – December 18, 2025
- Augusta Cemetery Resolution
- Augusta Specialized Transitional CRA Lease Resolution
- Licensure Transition Presentation
 - Rules and Regulations for DATEP
 - Rules and Regulations for Licensure Enforcement and Sanctions

Commissioner's Report

- Child and Adolescent Service Update
- Fiscal Year 2026 Amended & Fiscal Year 2027 Budget Update
- Board Engagement

Chair's Report

Public Comment

Roll Call

Chelsee Nabritt

Board and Special Project Manager

Call to Order

Lasa Joiner

Chair

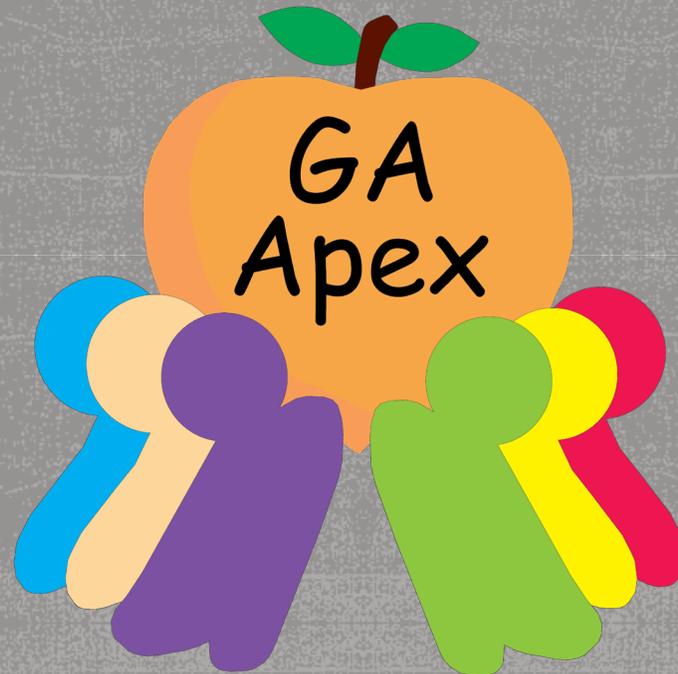
Introduction to Guest Speaker

Dr. Christy Doyle

Senior Director, Office of Children, Young Adults, and Families

APEX PRESENTATION

"Cultivating Our Future"



FOCUS

- *A Day in the Life of an Apex Clinician*
- *Positive Outcomes Achieved*

**1. Provides Individual
Therapy Between
Classes**

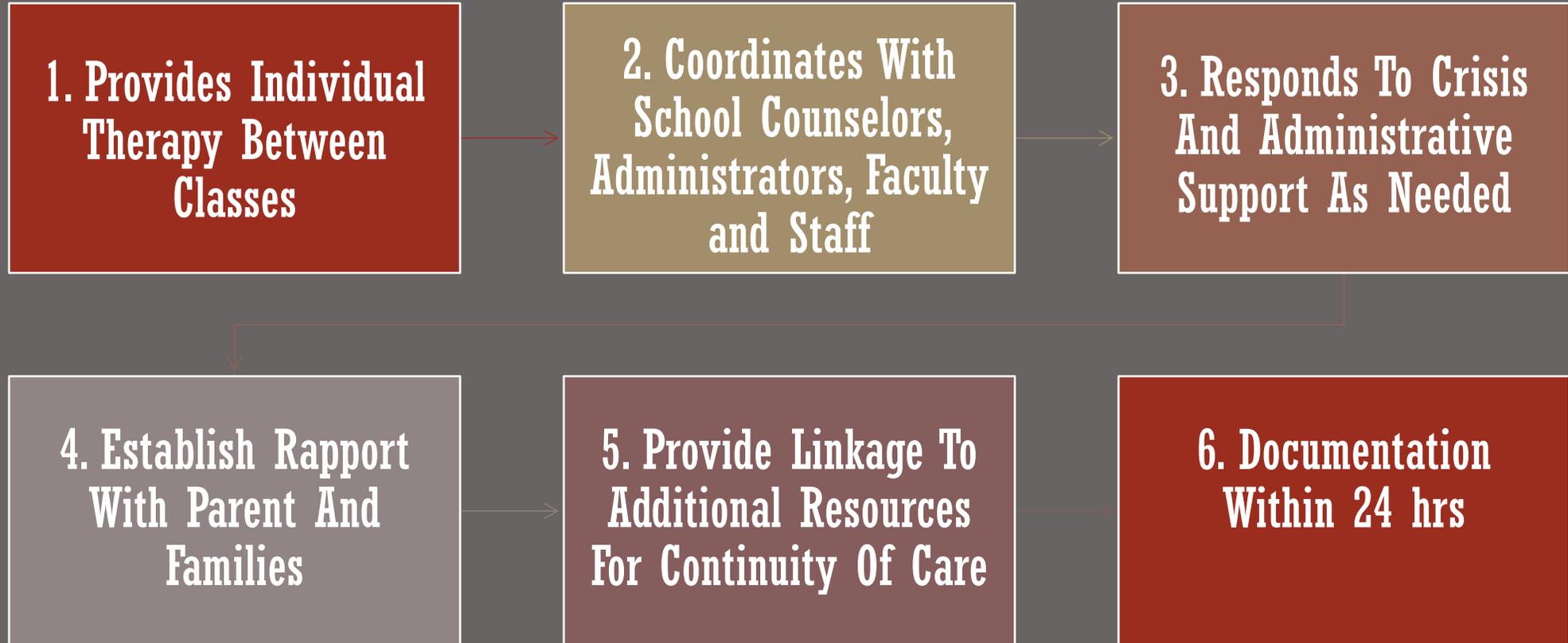
**2. Coordinates With
School Counselors,
Administrators, Faculty
and Staff**

**3. Responds To Crisis
And Administrative
Support As Needed**

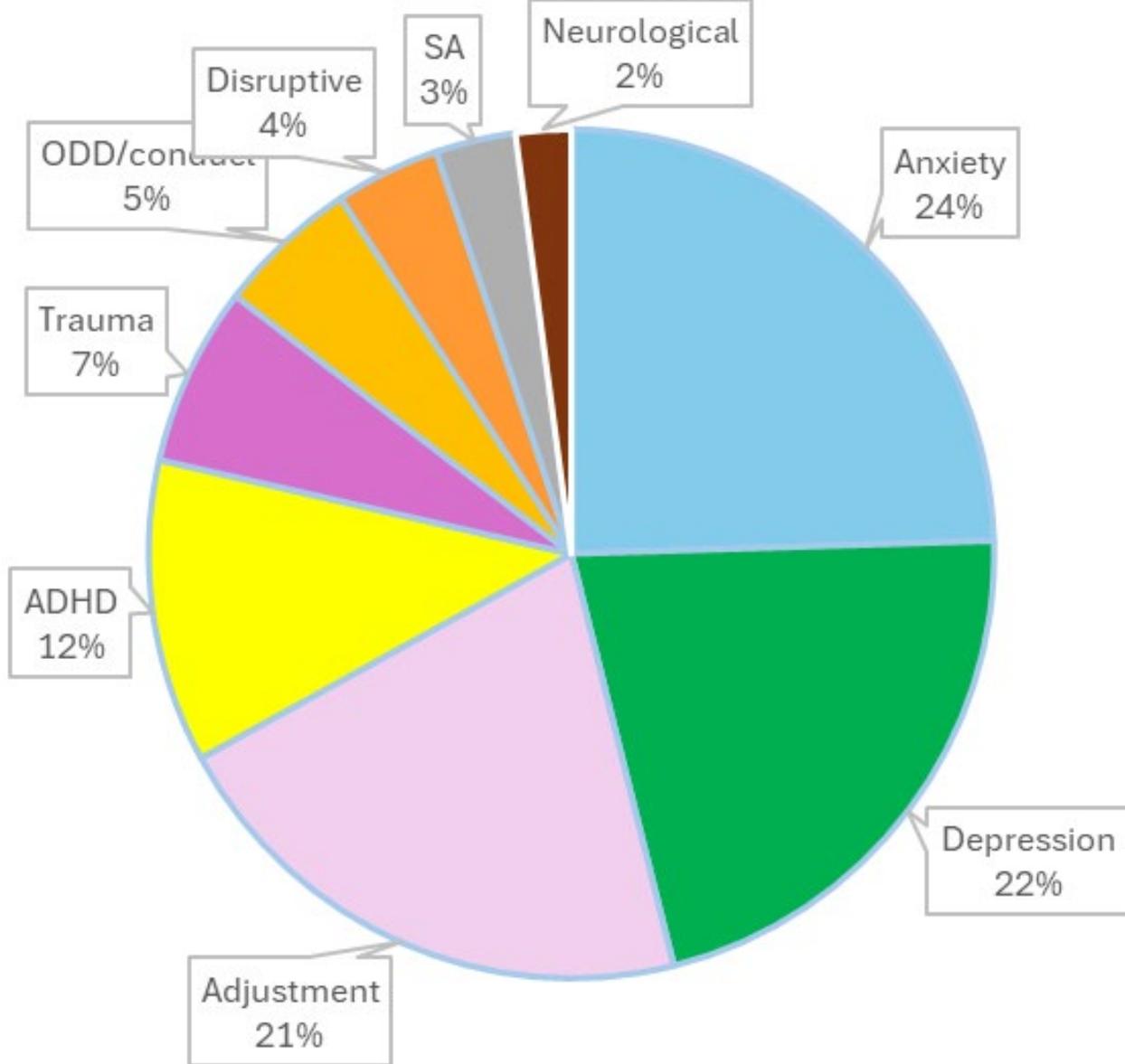
**4. Establish Rapport
With Parent And
Families**

**5. Provide Linkage To
Additional Resources
For Continuity Of Care**

**6. Documentation
Within 24 hrs**



Total 2024-2025



WHO WE SERVE DIAGNOSTIC BREAKDOWN

■ Depression ■ Adjustment ■ ADHD ■ Trauma ■ ODD/conduct ■ Disruptive ■ SA ■ Neurological



POSITIVE OUTCOMES ACHIEVED

Decreased need for higher level of care

Reduce suicidal ideation

Building healthier connections (family, peer, teacher relationships, etc.)

Strengthened School-Community Partnerships



Tier I Mental Health Events: Free Your Feels, Silence the Shame, Suicide Prevention, etc.

Tier II Groups

School Staff Education/Support

Participate in Open House

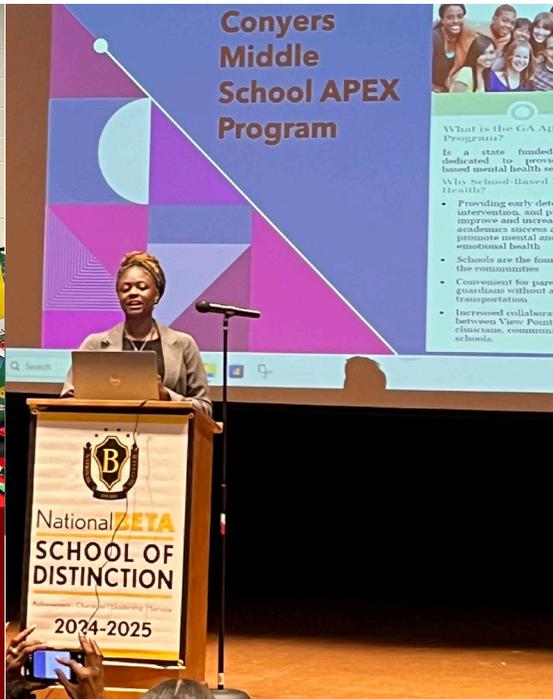
Community Resource Connections (i.e. housing, food, etc.)

Crisis Support

And much, much more....



"Cultivating Our Future"



**THANK
YOU**



Charletta D. Bourne, LPC



Action Item

- Board Meeting Minutes – December 18, 2025

Action Item

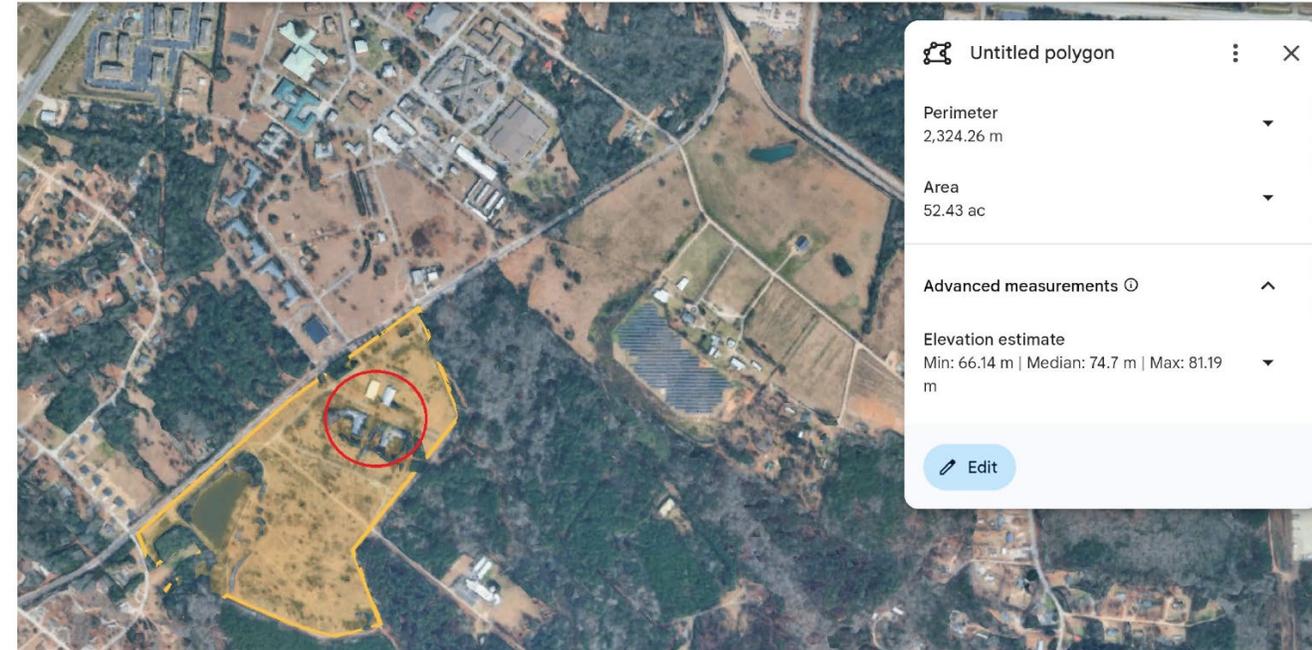
- Augusta Cemetery Resolution

Board of the Department of Behavioral Health and Developmental Disabilities
Augusta Cemetery Resolution Exhibit A

The land outlined in yellow represents the property to be declared surplus.

The buildings within the red circle are the surplus buildings.

BLLIP ID #	<u>Building Name</u>	Latitude	Longitude	Gross Square Feet
2227	Staff Training - 99	33.36233	-82.02853	7,245
2228	Building - 100	33.36207	-82.0279	9,878
2229	Building - 101	33.36294	-82.02823	9,878
2230	Building 102	33.36869	-82.03047	8,228



Augusta Cemetery Resolution Exhibit A

Action Item

- Augusta Specialized Transitional CRA Lease Resolution

Licensure Transition Presentation

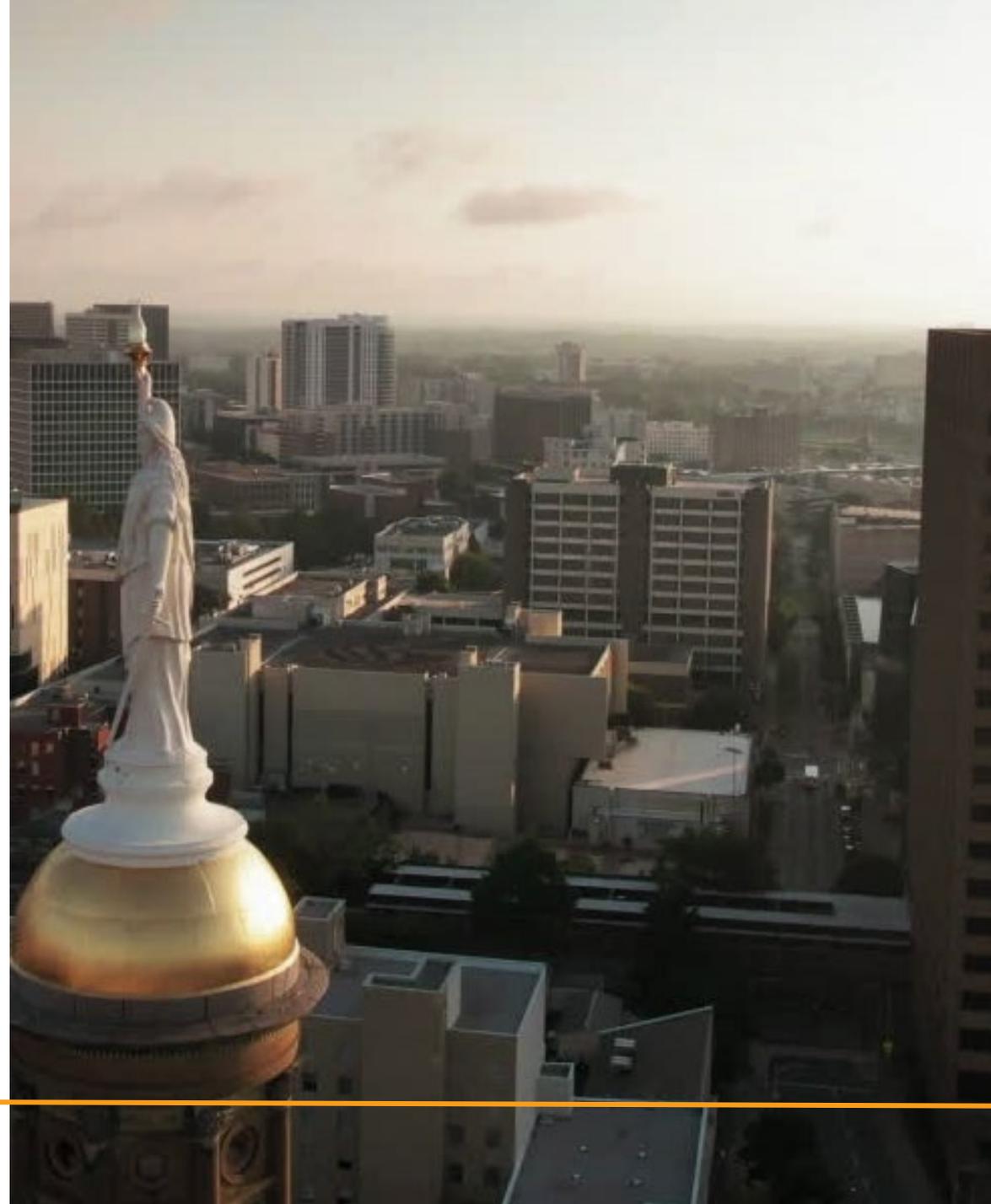


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Licensure Transition

Melissa Sperbeck

Director, Division of Strategy, Technology, and Performance



Overview

- DBHDD Licensure Authority and Responsibilities
- Rulemaking Process
- Focus Areas:
 - Drug Abuse Treatment and Education Programs Rules
 - Licensure Enforcement and Sanctions Rules
 - Request for approval to publish proposed rules

Legislative Foundation

Effective January 1, 2026, Georgia House Bill 584 transferred the licensing and oversight of several facility types from the Department of Community Health (DCH) to the Department of Behavioral Health and Developmental Disabilities (DBHDD). This significant legislative change represents a strategic realignment of oversight responsibilities to better serve Georgia's behavioral health and developmental disabilities community.

Community Living Arrangements

Residential facilities serving adults with developmental disabilities and others, through DBHDD-funded supports

Drug Abuse Treatment Programs

Facilities providing substance use disorder treatment in residential and outpatient settings

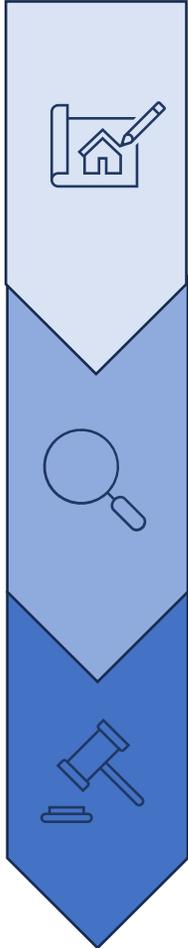
Narcotic Treatment Programs

Specialized programs administering medication-assisted treatment for opioid use disorder

Adult Residential Mental Health Program

Short-term intensive residential treatment programs for adults with mental illness

Core Oversight Functions



Licensing

- Application review and evaluation
- Background checks for owners and key personnel
- Initial inspection to verify compliance
- Award of license upon meeting all requirements

Monitoring

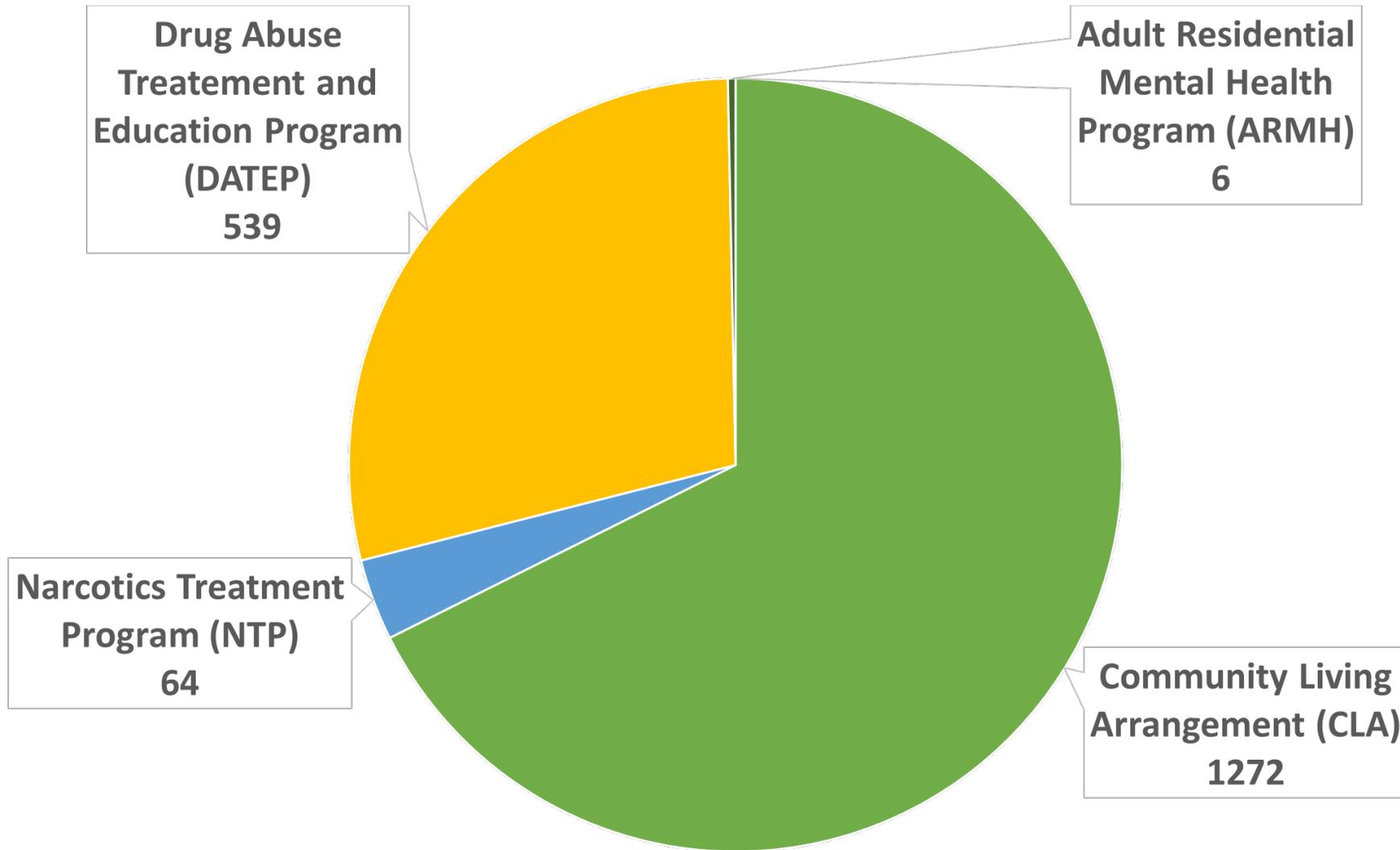
- Routine inspections on scheduled intervals
- Complaint triage and follow-up
- Incident triage and systematic investigations
- Corrective actions and validation of compliance

Enforcement

- Sanctions and fines for serious violations
- Appeals process and administrative hearings



Scope of Oversight Responsibility



Rulemaking Process

An aerial photograph of a multi-lane highway with a city skyline in the background. The highway has several lanes in each direction, with a median. There are several cars on the road. The city skyline features several tall skyscrapers. The sky is overcast. The text "Rulemaking Process" is overlaid in the center in a large, bold, yellow font.

Licensure Rules

Process for approval and implementation

Currently: Facilities are subject to existing HFRD rules.

DBHDD is updating rules in 2026 to reflect the change in Licensing Authority and make any needed modifications.



Board Presentation

Proposed rules are presented to the DBHDD Board starting the formal rulemaking process



Public Comment Period

A public comment period allows for stakeholder input and potential revisions



Final Adoption

Final adoption occurs at a subsequent board meeting, incorporating public comments

Rule Revision Strategy

Board Presentation Schedule

February 2026

1

Drug Abuse Treatment and
Education Programs

April 2026

2

Community Living Arrangements

Licensure Enforcement
and Sanctions

Narcotic Treatment Programs

June 2026

3

Adult Residential
Mental Health Programs

An aerial view of a multi-lane highway with a city skyline in the background. The image is overlaid with a semi-transparent blue filter. The text is centered and reads:

DATEP & Licensure Enforcement and Sanctions Rules

Drug Abuse Treatment and Education Program

Drug abuse treatment and education program (“DATEP”) means any system of treatment or therapeutic advice, or counsel provided for the rehabilitation of drug dependent persons and shall include programs offered in residential and/or nonresidential settings.

Ambulatory detoxification program

Outpatient drug treatment program

Residential sub-acute detoxification program

Residential intensive treatment program

Residential transitional treatment program

Specialized day treatment program

Drug Abuse Treatment and Education Program

Program Rules

Program Rules provide minimal requirements for the licensing and inspection of programs, covering comprehensive operational standards

- Legal Authority, Title, and Purpose
- Definitions and Governing Body
- Licenses and Accreditation
- Applications and Inspections
- Administration and Staffing
- Physical Plant and Safety
- Food and Nutrition
- Client Referral Intake and Admission
- Individual Treatment Planning
- Medications and Quality Assurance
- Discharge Summaries and Aftercare Plans
- Record Maintenance
- Clients Rights, Responsibilities, and Complaints
- Behavior Management and Emergency Safety Interventions
- Waivers and Variances

Drug Abuse Treatment and Education Program

Key Changes

- Update DBHDD as licensing authority
- Clarify the definition of DATEP Programs
 - Outpatient Treatment Program
 - Exclusion clause
- Support prompt access to care with adjustment of laboratory requirements
- Provide consistency with DBHDD standards of practice and verbiage



Licensure Enforcement and Sanctions Rules

Licensure Enforcement and Sanctions Rules provide general licensing and enforcement actions requirements by the Department, ensuring consistent oversight practices.

General Licensing Requirements

Fee Schedules

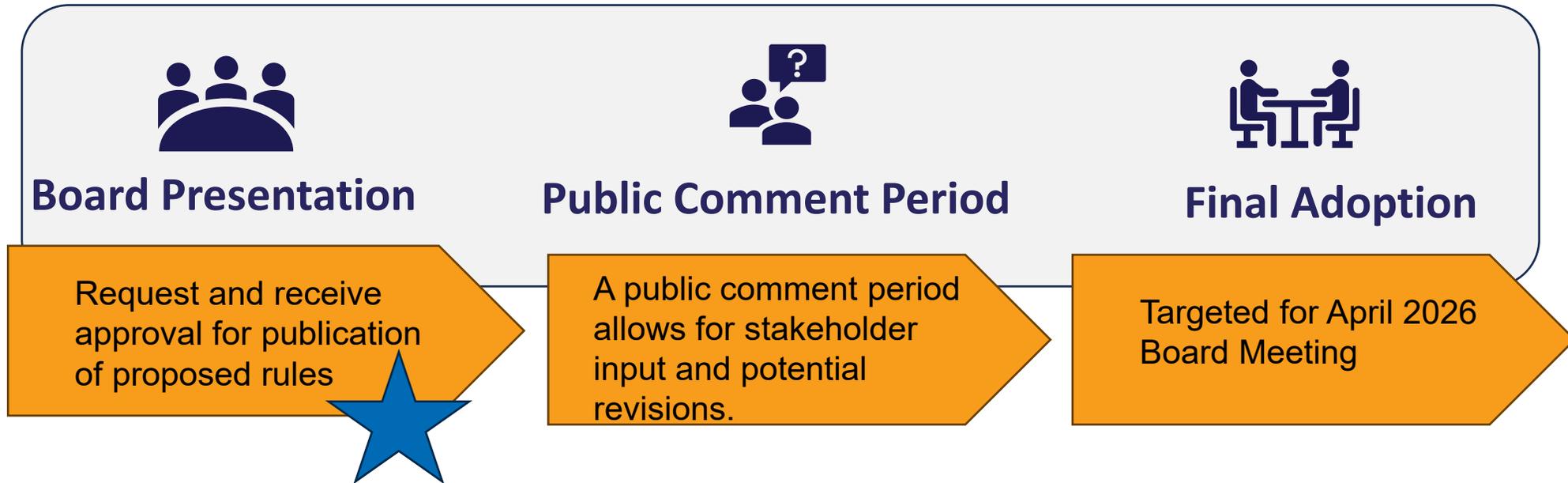
Enforcement

Sanctions

Surveys, Investigations, and Corrective Action Plans

Request approval for publication

DATEP and Licensure Enforcement and Sanctions Rules



Action Item

- Rules and Regulations for DATEP

Action Item

- Rules and Regulations for Licensure Enforcement and Sanctions

Commissioner's Report

Kevin Tanner
Commissioner



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Child and Adolescent Service Update

Georgia Department of Behavioral Health and Developmental Disabilities

HB 268 Updates – DBHDD Completed Tasks

Development of Student Advocacy Specialist

- DBHDD responsible for developing job description, responsibilities, position requirements
- DOE responsible for creating the position and administering grant funds to local schools/systems
- Approved description delivered to DOE October 30, 2025 (per code, due by December 31, 2025)
- Training for new position has been developed and will be administered by the Ralston Institute

HB 268 Updates – DBHDD Completed Tasks (cont.)

- Development of 2-hour behavioral health training to be provided to high needs elementary and middle schools
 - Code defines high needs as scoring one or two stars on climate ratings
 - Requires 95% of all staff to receive training
 - DBHDD team identified training developed by the Hall County School System to train all staff
 - Ralston Institute developing plan to deliver state-wide train-the-trainer opportunities
- Development of resources for evidence-based practices for services and supports for PBIS tiers.
 - Developed a look-up document for existing EBP clearinghouses of PBIS services and supports
 - Will be incorporated into the BH EBP clearinghouse at Ralston Institute

HB 268 Next Steps

- Updating school safety planning guidance to include direction for addressing the behavioral health needs of students and staff
 - Updated guidance document currently in progress
- Updating School Safety Plan Review and TA Process
 - Code requires DBHDD to review and approve school safety plans, provide training and technical assistance to schools/systems/RESAs/other agencies
 - Approximately 2,300 public schools in GA
 - With assistance/expertise from GEMA colleagues, develop review processes for school safety plans
- Providing consultation for DOE list of approved suicide prevention training programs
 - DOE has submitted RFI, DBHDD team members to serve as part of review team

MATCH Updates: State Committee and Clinical Team

This past quarter, several milestones have been achieved:

- Through a partnership with GMAP project, **Emily Rubin**, and MATCH committee members have completed the 1st cohort of **SCERTS** training level 1 and the 2nd cohort level 1 started January 2025.
- **Unite Us**- We have seen an increase in Unite Us Referrals
- **Arianne Weldon**, MATCH State Committee Chair, has introduced new members to the State Committee and Clinical Team
 - Built team capacity with new members
- Evaluation team, MATCH Sustainability workgroup and MATCH Staff are exploring return on investment insights and cost shifts to ensure the future of MATCH

Pilot Impact and Success: Hillside Intensive In-Home

Sustaining Stability and Reducing Hospitalization Rates (2024-2026)

- **Successful Diversion from Acute Care**

- **Targeting High-Risk Clients:** Successfully keeping children in their homes and out of hospitals, crisis units, and psychiatric facilities.
- **70%** of incoming clients have a history of hospitalization (Average: 2 per client).

- **Clinical Outcomes**

- **During Treatment:** Hospitalization rates fell to just **3%** during service delivery.

- **Long-Term Stability:**

- **86%** of clients remained hospital-free 90 days after concluding services.

- **Exceptional Family Satisfaction**

- **100%** of guardians reported being treated in a courteous and friendly manner.
- **94%** of families would recommend Hillside's services to others.

Pilot Financial Comparison:

Devereux Short Term Transition Program (STTP) vs Out-of-State Placement

Program	Daily Rate
Devereux STTP	\$801.10
In other states, Devereux operates programs similar to Georgia's STTP services.	\$1,543/day for individuals not attending school \$2,257/day for individuals attending school

The **investment in local care** aligns with Georgia's strategic goals for family stability and long-term system accountability.

Other out-of-state facilities that offer inpatient/residential treatment for ASD services:

- Springbrook (South Carolina): \$825/day
- Nexus (Texas): \$2,600-\$3,000/day
- Cumberland (Virginia): \$1,100/day

Key Benefit:

In-state STTP placement keeps youth closer to home, supporting continuity of care and improving long-term outcomes that can mitigate future system costs.

Youth Villages Intercept Financial Impact

Georgia Intercept cost: **\$16,500** per episode vs PRTF: \$116,860 per episode

- **Daily rate of \$125 vs \$649.22**

Intercept has reduced the burden on state budgets:

- **Intercept Cost Difference:** Approximately **50% of the cost** institutional care
 - Average daily rate range is \$115 to \$170, depending on the state (Massachusetts, Oklahoma, North Carolina)
- **Direct Cost Comparison:** The average cost per Intercept episode is **\$15,000**, compared to **\$30,000** for residential services in Massachusetts.
- **Oklahoma ROI:** Generated **\$2,684,516** in savings per 100 youth compared to PRTF care.
- **North Carolina Projections:** **\$2.1 million** in cost-savings by discharging 82% of episodes to non-residential community services without crisis follow-ups.

Youth Villages Intercept Clinical Outcomes

Clinical Outcomes and Stability (Massachusetts)

- **ED Boarding Solution:** 71% reduction in pediatric psychiatric boarding in EDs
- **Clinical Stability:** 71% experienced no further suicidal ideation, self-harm, or hospitalization
- **Placement Stability:** 84% to 97% of youth living at home or independently one-year post-discharge.
- **Education Engagement:** Over 90% of youth are attending school, have graduated, or earned a GED one-year post-discharge.
- **Legal Diversion:** 91% to 98% of youth have no further involvement with the criminal justice system post-discharge.
- **Treatment Dosage:** 94% of families remain engaged for at least 60 days and receive therapeutic dose

MATCH Next Steps:

Identify and build in-state ASD/IDD residential options and trauma-focused programs.

Justification

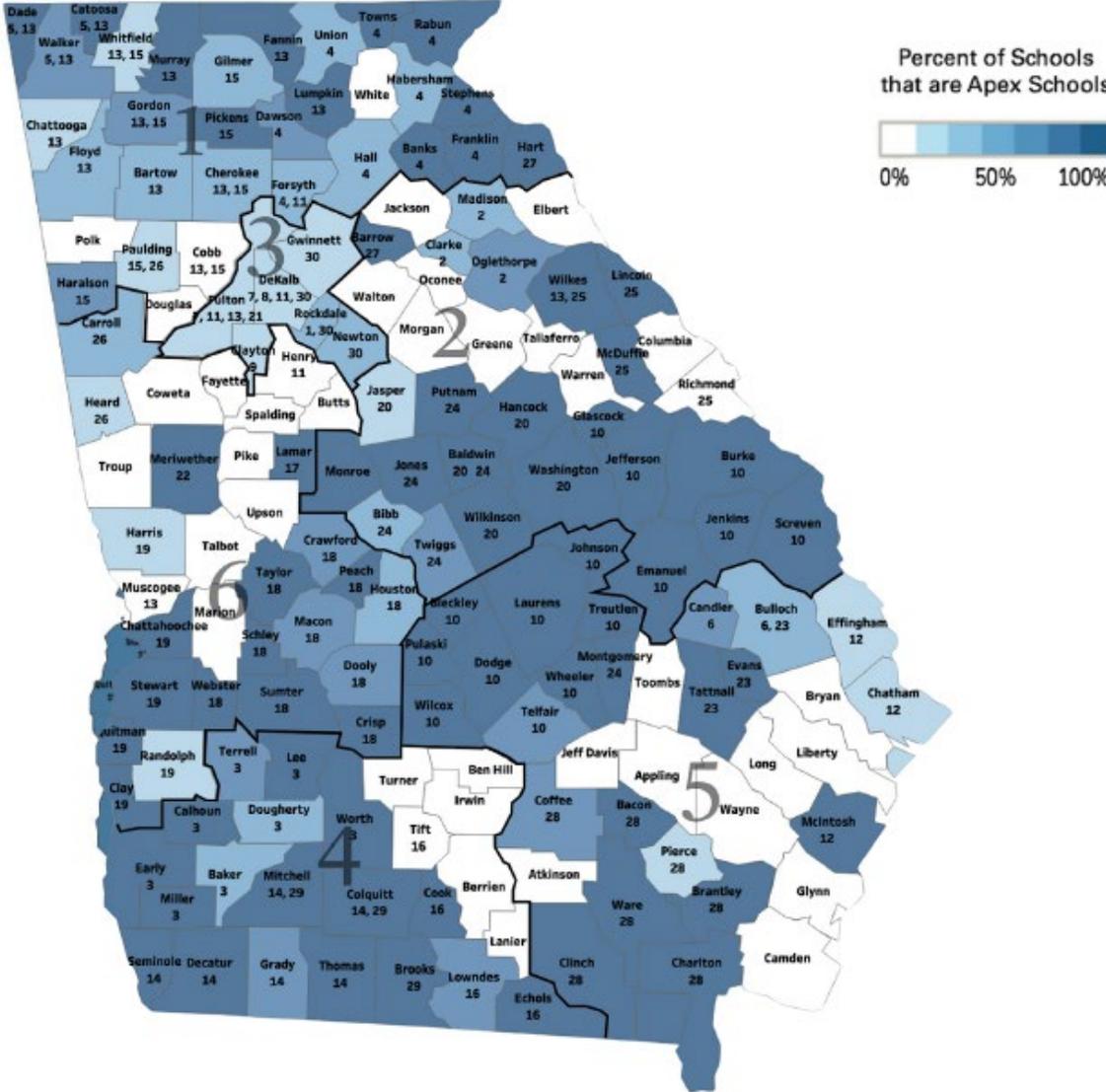
- **58%** of individuals referred to the MATCH Clinical Team had an ASD diagnosis
- Of the individuals with ASD who were referred to the MATCH Clinical Team,
 - **64%** experienced an escalation in behavioral symptoms despite community care prior to MATCH referral
 - **49%** reported a lack of access to specialized care within the state
 - **20%** reported being denied admission to PRTF/CSU services due to an ASD/IDD diagnosis

Apex Program Year 10 Update

- Funded and designed by DBHDD, the Georgia Apex Program is a transformative mental health resource within schools, strengthening access, coordination, and early intervention for students across diverse communities.

2024-2025 School Year

- Delivered **264,940** behavioral health services (14% increase from last year)
- Reached **15,617 students**, providing vital mental health support.
- Expanded its impact to **868 schools**, fostering a network of accessible care for students across Georgia.



Apex Program: Closing the Continuum Gap

Apex Tiered Support Model

- Tier I – Universal Prevention: Schoolwide activities to promote mental health awareness (e.g., info sessions, outreach at events).
- Tier II – Targeted Early Intervention: Support for at-risk students with emerging needs (e.g., psychoeducation groups).
- Tier III – Intensive Intervention: Focused support for students with mental health disorders (e.g., crisis intervention, individual/family therapy).

Improved access to care (2024-2025)

- **7,243** students received mental health services from an Apex therapist for the first time
- **12,453** referrals made for Apex Services
- **71%** of parents reported that their child was better able to handle daily life after Apex services.

“We’re fairly rural so having Apex here has helped us give the opportunity for our families to have mental health services. ... We’ve seen several kids who have academically grown over the last year because they’ve been able to have access to mental health services through Apex.”

–School partner

83% of
parents reported
improved access
to care

Apex Program: Looking Forward

Positions and Staffing Numbers (2024-2025 School Year)

- **Staff Turnover:** 72% of providers reported clinician turnover in APEX staff during the year.
- **Top Reasons for Turnover** included:
 - Salary
 - Workload
 - Other opportunities

Solutions

- **Supported Internship Pilot:** Leveraging a grant partnership with the COE at GSU, DBHDD has piloted a program to pay tuition for the second year of coursework for students in a clinical master's degree program in exchange for a commitment to work for APEX following graduation.
- Following the success of the pilot, a statewide supported internship program is expected to roll out in 2026, with a focus on rural areas.



Budget Update: AFY2026 - FY2027

Georgia Department of Behavioral Health and Developmental Disabilities

Appropriations Process Status Update

AFY2026 Appropriations Bill

- This bill is awaiting Governor Kemp's signature.

FY2027 Appropriations Bill

- This bill is in the early stages of the appropriations process
- At this time, we are not aware of any changes to the budgets proposed in the Governor's Budget Report for FY2027

Details of both the AFY2026 and the FY2027 budgets are summarized on the following slides



Amended Fiscal Year 2026 Budget

Georgia Department of Behavioral Health and Developmental Disabilities



Amended FY 2026 Adjustments

Amended Fiscal Year 2026 (HB 973)	As Passed
Summary of Statewide Adjustments	
Increase funds to provide one-time salary supplement of \$2,000 to full-time, regular state employees	\$18,905,493
Reduce funds to reflect a reduction in the employer contribution rate for the State Health Benefit Plan from 29.454% to 20.264% effective June 1, 2026	(\$7,554,626)
Adult Addictive Diseases Services	Amount
Replace state general funds with other funds for the expansion of Hepatitis C screening services at core behavioral health provider sites	(\$142,919)



Amended FY 2026 Adjustments

Amended Fiscal Year 2026 (HB 973)	As Passed
Adult Forensic Services	Amount
Restore funds for jail-based competency restoration in Cobb County Jail	\$243,750
Georgia State Financing and Investment Commission (GSFIC)	Amount
Increase funds for one-time funding for a 40-bed forensic restoration facility at East Central Regional Hospital, Augusta, Richmond County.	\$20,740,730
Increase funds for one-time funding to begin design and construction of new Georgia Regional Hospital - Atlanta to address mental health and forensic bed capacity.	\$409,000,000



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Fiscal Year 2027 Budget

Georgia Department of Behavioral Health and Developmental Disabilities



FY 2027 Adjustments

Fiscal Year 2027 (HB 974)	Governor
Summary of Statewide Adjustments	
Reflect an adjustment in telecommunications and infrastructure rates for the Georgia Technology Authority	(\$84,779)
Reduce funds to reflect a reduction in the employer contribution rate for the State Health Benefit Plan from 29.454% to 20.264%	(\$45,327,760)
Increase funds for the Teachers Retirement System to reflect an increase in the actuarially determined employer contribution rate from 21.91% to 22.32%	\$21,733
Reflect an adjustment to agency premiums for Department of Administrative Services administered insurance programs	(\$1,938,021)
Reflect an adjustment for GA@Work billings to meet projected expenditures	\$218,646



FY 2027 Adjustments

Fiscal Year 2027 (HB 974)	Governor
Adult Addictive Diseases Services	
Replace state general funds with other funds for the expansion of Hepatitis C screening services at core behavioral health provider sites	(\$142,919)
Eliminate funds for one-time funding for Hope House	(\$50,000)
Adult Developmental Disabilities Services	
Increase funds to annualize the cost of 150 New Options Waiver (NOW) and Comprehensive Supports Waiver Program (COMP) slots for individuals with intellectual and developmental disabilities	\$3,213,955
Increase funds for 100 additional slots for the New Options Waiver (NOW) and the Comprehensive Supports Waiver Program (COMP) for individuals with intellectual and developmental disabilities	\$2,318,504
Reduce funds to reflect an adjustment in the Federal Medical Assistance Percentage (FMAP) from 66.40% to 66.63%	(\$2,890,282)



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FY 2027 Adjustments

Fiscal Year 2027 (HB 974)	Governor
Adult Forensic Services	
Increase funds to annualize the operations of a 30-bed Project New Hope forensic step-down unit at the West Central Georgia Regional Hospital in Columbus	\$1,618,742
Restore funds for jail-based competency restoration in Cobb County Jail	\$250,000
Adult Mental Health Services	
Increase funds for mobile crisis response teams to support mental health crisis services	\$2,357,480
Increase funds to support mental health crisis intervention services through the '988' hotline	\$2,933,069
Increase funds for the Georgia Housing Voucher Program for 404 additional housing vouchers to achieve substantial compliance with and termination of the behavioral health requirements of the Department of Justice (DOJ) Settlement Agreement	\$9,324,320
Reduction to reflect an adjustment in the Federal Medical Assistance Percentage (FMAP) from 66.40% to 66.63%	(\$326,481)
Child and Adolescent Mental Health Services	
Increase funds to annualize the operational cost of the new Gateway child and adolescent crisis stabilization unit in Savannah	\$1,140,358

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Georgia Department of Behavioral Health & Developmental Disabilities

Kevin Tanner
Commissioner, DBHDD



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Board Engagement

- Lowndes County Bird Supper
- Mercer University - Georgia Opioid Crisis Abatement Trust Contract Signing
- Mental Health Day at the Capitol





Operation New Hope Ribbon Cutting & DBHDD Police Force

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Chair's Report

Lasa Joiner

Chair

Public Comment





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