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NEWS
"News You Can Use"

Building on Success: Enhancing Care, Connection, and Collaboration for our Provider Network

The Department of Behavioral Health and Developmental Disabilities (DBHDD) is proud to share our recent accomplishments and ongoing initiatives that reflect our strong commitment to supporting providers and improving the quality of care throughout our network. In 2025, we introduced strategic enhancements, program expansions, and innovative service models—all informed by your input and dedicated to better serving the individuals and communities in Georgia.

Key Accomplishments and Initiatives in 2025:

Hospitals and Forensics

We strengthened hospital and forensic services by launching DBHDD's second Operation New Hope site located at Central State Hospital, opening a skilled nursing facility for forensic patients at Georgia Regional Hospital—Atlanta, and beginning construction on the next Operation New Hope site at West Central Georgia Regional Hospital. We also marked the first full year of serving individuals at the standalone Jail Restoration Center in Dodge County, which is restoring individuals to competency faster and more effectively than traditional settings. We are extremely proud of all five of our state hospitals as they have stepped up to the plate to keep our hospitals operating at full capacity while also offering more programs than ever before.

Behavioral Health

In behavioral health, DBHDD delivered on the promise to connect more Georgians to crisis services. This fall, we were able to announce Georgia's latest Behavioral

Health Crisis Center will be located in Clayton County. Our 988 Lifeline remains an invaluable resource for citizens in both rural and urban parts of the state, and public awareness efforts for 988 have reached more than 89 million connections. DBHDD also piloted a hybrid jail in-reach and co-responder program, expanding behavioral health–law enforcement partnerships in smaller counties.

Intellectual and Developmental Disabilities

Our commitment to individuals with intellectual and developmental disabilities remains strong. We made important strides in crisis care and community-based services. The opening of the Crisis Services Diagnostic Center (CSDC) in Macon is already helping reduce unnecessary hospital stays and emergency department boarding, and we're proud that the CSDC has been able to stabilize 12 patients in just six months of operating. We also started developing two more Crisis Residential Alternatives (CRA) transitional settings in Macon, and Community Service Boards are replicating CRA services in all six regions.

Our IDD Division is preparing for a complete overhaul of the NOW/COMP waiver assessment tool and planning list, which will enable the Department to better respond to the urgent needs of individuals on the planning list and better forecast future funding needs. The IDD Workgroup's recommendations also include developing a new waiver that will better meet the needs of individuals and families.

Workforce Development

We also continued to invest in what matters most: our workforce. In Fall 2025, we reinvested \$10.9 million in savings to increase pay for DBHDD hospital and regional office nursing positions. We introduced innovative partnerships like the DBHDD–Mercer University Psychology Workforce Fellowship, creating a tuition-for-service pathway to grow our clinical workforce. We also want to recognize our innovative efforts to create a program to help nearly 900 Direct Support Professionals earn a state certification, leading to lower turnover rates and higher job satisfaction. Combined with recent provider rate increases, these efforts are already improving retention and expanding access to community-based supports for Georgians with developmental disabilities.

Our central office and regional teams also developed numerous external training opportunities across behavioral health, law enforcement, and crisis response. This includes our first-ever co-responder professional development conference, Georgia Partnership in Action for Co-Responder Training, and continued work to revamp Georgia's Crisis Intervention Team training curriculum.

Meeting Georgians Where They're At

Our regional field office also worked hard to administer support for our services closer to where Georgians live. The regional teams have significantly expanded engagement with community stakeholders, including law enforcement, school systems, the judicial system, and hospital systems of care.

Addressing the Opioid Crisis

We'd be remiss if we left out the great work our state is doing to combat the opioid crisis. The Georgia Opioid Crisis Abatement Trust completed another great grant cycle in 2025, committing \$42.48 million in grant dollars to 109 projects across the state. DBHDD also launched a new partnership with the Trust and the Georgia Department of Education to put Narcan in more than 2,300 public schools across the state.

These accomplishments mark significant milestones in our journey to enhance care, expand service options, and strengthen our partnerships. Our efforts are driven by a singular purpose: to ensure the people we serve have access to high-quality care that leads to a life of recovery and independence.

We look forward to continuing collaboration with our provider network, embracing feedback, and working together to create meaningful, positive outcomes for those we serve.

Thank you for an extraordinary 2025!

Training Announcements

The Department of Behavioral Health and Developmental Disabilities (DBHDD), Office of Talent Acquisition and Learning, are offering virtual and in-person trainings. For more information regarding trainings, [click here](#).

If you have any questions, please contact DBHDDLearning@dbhdd.ga.gov.



Hybrid Positive Behavior Supports Curriculum Train the Trainer Series

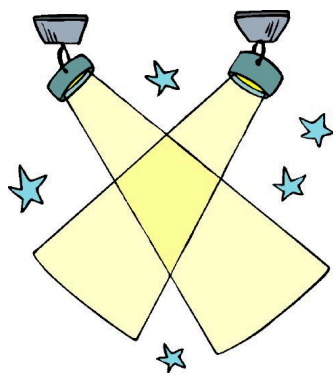
**Sessions Available:
January - March 2026**

The DBHDD Division of IDD is pleased to sponsor the **Positive Behavior Supports (PBS) Curriculum Training** that is offered to community residential and day service providers using a train the trainer format. These sessions will be conducted via Webex video conferencing, online and in-person.

The PBS Curriculum is specifically designed for training direct support professionals and supervisors with the principles and practices of positive behavior supports to use in daily interactions with people with challenging behaviors in settings providing supports and services.

This training is intended for employee participants who will be trainers of direct support professionals and supervisors within their DD Provider organizations. In addition, the employee participants must have been selected by their agency to become trainers of the PBS Curriculum.

Register Now!



Person-Centered Thinking: Follow Up Training Now Available

**Training Dates Available
through March 2026**

This virtual, one-day Person-Centered Thinking Training is the follow-up training to the Person-Centered Thinking eLearn course.

In this one-day training, you'll be trained on the remaining person-centered thinking skills not covered in the PCT eLearn course. This training will be taught by a GA Learning Community PCT Trainer.

Please be sure that you have completed the PCT eLearn course BEFORE the registration deadline. If you do not complete the PCT eLearn course before the registration deadline, your registration will be denied.

As a reminder, this Person-Centered Thinking Training consists of two-parts:

Part 1: Complete Person-Centered Thinking eLearn. This 3-hour eLearn course is housed within Relias. To find it search for *A Course on Person-Centered Thinking* within Relias.

Part 2: A one-day virtual, PCT training with a GA Learning Community Trainer. This is a Zoom-based virtual training with a live trainer.

Important Information:

1. At the conclusion of the eLearn course in Part 1, the learner will have the opportunity to register for the one-day, virtual training.
2. Learners must upload their certificate from Part 1 to register for Part 2.
3. Your registration remains in a pending status until your eLearn course activities have been reviewed. Activities must be completed in earnest. Learners whose activities contain nonsensical entries will be asked to reanswer the areas before their registration is approved.
4. To receive the full credit for Person-Centered Thinking Training, both Part 1 and Part 2 must be successfully completed.
5. The learner will receive a certificate for each part of training.

If you have questions about this training and how to get started, email: PCSupport@ReplacingRisk.com

[Register Now!](#)

Featured Article

DBHDD to Assume Licensing and Oversight for Several Facility Types

Effective January 1, 2026, pursuant to Georgia House Bill 584, the Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) will assume licensing and oversight responsibilities for several facility types previously managed by the Department of Community Health (DCH).



The following facility types will transition to DBHDD's oversight:

- Community Living Arrangements (CLAs)
- Drug Abuse Treatment and Education Programs (DATEPs)
- Narcotic Treatment Programs (NTPs)
- Adult Residential Mental Health Programs (ARMHPs)

The joint memo below from DBHDD and DCH provides instruction and clarification regarding the transition activities. Our primary goal is to support the continuity of services and operations during this transition.

Please visit and bookmark the new [DBHDD Licensure webpage](#) for more information regarding the above licenses.

[View the DBHDD and DCH Joint Memo Now!](#)

DBHDD Regional Field Operations

Regional Community Collaboratives

What is a Regional Community Collaborative (RCC)?

RCCs are facilitated in all six (6) DBHDD Regions by regional teams and other members of the collaborative. It is a membership of stakeholders by invitation that minimally include our community providers, individuals with lived experience, and community partners (i.e., law enforcement partners, area hospital staff, nonprofit organizations, local government, area businesses, faith-based organizations, educational institutions, professional organizations, associations and citizens) who share ideas, expertise and resources to meet the needs of their community and/or region.

The purpose of the regional collaboratives is the same across all regions: To eliminate barriers to services and solution for gaps in the continuum at a community, regional and state level.

The Collaboratives ensure that participants are effective in:

- Communicating
- Educating partners
- Solution focused discussions
- Network/relationship building
- Resource sharing and development

For a list of the upcoming January 2026 Regional Community Collaborative (RCC) Meetings, please click the button below.

[View the Jan 2026 RCC Meeting Schedule Now!](#)

Division of Behavioral Health

AVAILABLE NOW

BH Quality Reviews Scoring Guidance: DBHDD Suicide Prevention, Screening, Brief Intervention and Monitoring Policy, 01-118

On 1/1/2026, Quality Management will begin scoring provider's adherence to the revised DBHDD policy [Suicide Prevention, Screening, Brief Intervention and Monitoring Policy, 01-118](#), during the following provider reviews:

1. Behavioral Health Quality Review
2. Crisis Stabilization Unit Quality Review
3. Housing Quality Review

Quality Management worked closely with DBHDD subject matter experts to develop indicators related to the revised policy. The Quality Review document below outlines the indicator, citation/reference, applicable review type(s), scoring definition and scoring methodology. Additionally, the new indicators have been added to the FY26 Quarter 3 quality review tools.

The document has been posted to the [Georgia Collaborative website](#) and is also available by clicking on the following link:

[BHQR-CSUQR-HQR-Suicide-Prevention-Indicators-Effective-1-1-2026.pdf](#)

For questions related to the new indicators, please submit to The Georgia Collaborative Quality inbox: gaquality@carelon.com

Division of Developmental Disabilities



HRST Application Updates

Effective December 10, 2025, all HRST users will log directly into the HRST application and reset passwords on the login page. Users should use their IDD Connects Username and Password that was in use prior to December 10th. **If you are unable to log in or reset password for any reason, please email gasupport@replacingrisk.com for further assistance.**

If you are an Agency Provider and have Gatekeepers, here is the link to the Gatekeepers Guide: <https://replacingrisk.com/downloadables/GA-Gatekeepers-User-Guide.pdf>. Gatekeepers can also log into HRST and access the guide from the "Message of the Day" or "Help/Client Documents". All new user accounts from 12/10/25 forward will have to be created in the HRST Application.

If you are an Agency Provider and did not submit Gatekeepers Information to HRST to allow creation of NEW user accounts and updating user status when employees leave, you will need to reach out to gasupport@replacingrisk.com to set this up.

If you are a NEW Individual Provider, you will need to reach out to gasupport@replacingrisk.com to set user account up in HRST. This will be shared during new provider's orientation as well.

CAG Tiered Rates

Dear NOW/COMP Providers of Community Access Group Services,

The implementation of the tiered rates for Community Access Group services will occur in early 2026 with the new Therap platform. To ensure its effectiveness for

IN CASE YOU
MISSED IT ...

successful billing, the tiered rates will be tested thoroughly prior to the authorization of services.

All providers of Community Access Group will be notified prior to system readiness for Individual Service Plan and Prior Authorization development.

We apologize for the delay and inconvenience as we are transitioning from one system to another. We decided to focus on this work in the Therap system to avoid any interruptions in services.

We thank you for your support of the members you serve in the NOW and COMP Waiver programs.



ACTION REQUIRED: **Transition to Therap Platform** **Effective January 1, 2026**

Dear Provider Network,

DBHDD and Therap are pleased to announce the official launch of the Therap platform on **January 1, 2026**. This modern, data-driven system will replace the current IDD Connect processes, streamlining care coordination and enhancing communication across the state.

Key Transition Details:

1. **Support Coordination:** All documentation, including annual Individual Service Plans (ISPs) and plan updates, will transition to Therap on the launch date.
2. **ISP & Prior Authorization Continuity:** Continue using IDD Connect for existing ISPs and Prior Authorizations. Transition to Therap only when a new annual plan is developed or a mid-year update is required.
3. **Mandatory EULA:** All providers—including current Therap users and those only accessing the system for ISPs/PAs—**must** sign an End-User License Agreement (EULA). This has been sent via DocuSign.

Immediate Next Step: If you have not already done so, please execute your DocuSign EULA immediately. Once submitted, you will receive follow-up communications regarding training and onboarding.

For questions, please contact: gasupport@therapservices.net



Legacy ISPs and Therap

To ensure data integrity and clinical accuracy, a decision has been made to pause the migration of legacy ISPs (those created in IDD Connect) into the Therap system for January 1, 2026, go-live.

Reason for Delay

It has been identified that certain components of legacy ISPs, including clinical assessments, are not linked properly within the new system. Migrating these records without their corresponding components poses a risk to service continuity and documentation accuracy. We anticipate these technical issues will be resolved within the coming weeks.

Required Interim Workflow

Until the migration is finalized, please use the following procedures when needing to access ISPs during the transition to Therap:

1. **Reference IDDC:** Providers, Support Coordinators, Planning List Administrators, and State Support Coordinators may continue to use IDD Connect (IDDC) as the primary reference for all legacy ISPs and associated clinical assessments.
2. **Documentation:** We recommend accessing relevant sections of IDDC and saving them as PDFs for easy reference and record-keeping during this interim period.

Next Steps

DBHDD is working diligently to resolve these linking issues. We will provide further updates as soon as the migration process resumes. We thank you for your patience and your continued commitment to providing high-quality care during this transition.

DBHDD Policy Information

Since December 1, 2025, DBHDD updated or developed the following policies:

Provider Manual for Community Behavioral Health Providers, 01-112

Certification of Georgia-Certified Community Behavioral Health Clinics, 01-425

Planning Lists for Developmental Disability Services for Individuals Living in the Community, 02-101

Provider Manuals for Community Developmental Disability Providers, 02-1201

Please direct all policy-related questions to the Office of Provider Relations via the Provider Issue Management System (PIMS). To submit your questions, [click here](#).

Office of Provider Relations

Question for your Provider Relations Team?

The Provider Issues Management System (PIMS) is your online source to have your questions answered in a consistent, reliable and timely way! In addition to providing a timely response, the information we gather from PIMS will assist DBHDD in trending common concerns, developing FAQs, and informing policy reviews. You can access the PIMS site directly by using the link below.

Provider Issue Management System (PIMS)

PIMS is also accessible through the [DBHDD website](#) by selecting the "**Submit a Question to Provider Relations**" tile on the DBHDD homepage.

Senior Provider Relations Manager

Sharon Pyles

Provider Relations Managers

Mary Williams

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For Provider Relations inquiries,
please contact us at
DBHDD.Provider@dbhdd.ga.gov.



BE WELL



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