



January 6, 2025

Honorable Imani Barnes State Representative 18 Capitol Square Atlanta, Georgia 30334

SUBJECT: Fiscal Note

House Bill (LC 52 0595)

Dear Representative Barnes:

This bill would establish a grant program to create emergency psychiatric assessment, treatment, and healing (EmPATH) units in hospitals. As defined by the bill, an EmPATH unit means a hospital-based outpatient program that meets the following criteria:

- Operates to provide behavioral health services for individuals experiencing a behavioral health crisis.
- Provides brief, intensive crisis treatment that includes an evaluation by a psychiatrist within 24 hours of admission.
- Provides other appropriate treatment or services as necessary, including, but not limited to, observation, detoxification, and stabilization services, and medication prescribed by a physician.
- Provides services 24 hours a day, seven days a week to individuals on a voluntary and involuntary basis in a community-based setting as an alternative to emergency department admission, inpatient hospitalization, and other higher levels of care.
- Certified by the Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD).

The bill would require DBHDD to coordinate with the Georgia Department of Community Health (DCH) to provide grant funding for the creation, development and operation of at least two EmPATH units, one in a rural county and the other in an urban county. In coordination with DCH, DBHDD would also establish grant criteria and make award decisions, with an explicit prohibition of using such grants for funding existing programs. By December 31, 2029, DBHDD must submit a written report on effectiveness of the pilot program. The program is subject to appropriations, but the agencies may solicit donations, in-kind contributions, or public grants.

It is expected that grants would be used to fund planning, transportation, and construction costs, as well as initial operating costs. However, the bill does not explicitly prohibit spending these grant funds on ongoing operational or other costs beyond startup. It is assumed that EmPATH units would also generate revenue, though it is unknown the extent to which patient revenue would cover operational costs. DBHDD and DCH would be able to use existing resources for grant administration.

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We identified two states—South Carolina and California—that have recently distributed state grant funding to establish EmPATH units. As shown in **Table 1**, the average grant amount per unit was similar in both states at approximately \$2.7 million to \$2.8 million.

Table 1. Recent Grant Programs in Other States

State	Total Grant	Units Created	Average
			Grant Award
South Carolina	\$35,000,000	13	\$2,692,308
California	\$17,000,000	6	\$2,833,333

In 2023, South Carolina established a \$35 million grant to provide one-time funding to 13 EmPATH units in return for hospitals' agreement to operate the units for at least three years. In 2022, California established a \$17 million grant to provide funding for the creation and development of six EmPATH units. Georgia's costs would vary based on the number of EmPATH units created and extent to which units operate with non-state funds; while the bill would require at least two be created, it allows DBHDD and DCH to accept or solicit private funding for the pilot program.

It is unknown what portion of each grant is needed for planning and construction versus operations. DBHDD reports that South Carolina incurred around \$1.4 million in construction costs and \$2.84 million in operating costs per pilot site, exceeding the average grant award by \$1.55 million. It should also be noted that the bill would allow for potential stays of up to 11 days for certain individuals (compared to only three days in South Carolina). According to DBHDD, this longer length of stay has the potential to increase operating costs and the need for additional chairs or beds above the levels experienced by South Carolina. Transportation costs would also be reimbursed at a rate of \$10.60 per trip for individuals needing transportation to and from EmPATH units, but the number of individuals needing transportation assistance cannot be estimated.

Respectfully,

Greg S. Griffin State Auditor Richard Dunn, Director Office of Planning and Budget

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GSG/RD/jw