



# DOAA

Georgia Department  
of Audits & Accounts

**Greg S. Griffin**  
State Auditor

February 2, 2026

Honorable Sandra Scott  
State Representative  
611-A Coverdell Legislative Office Building  
Atlanta, Georgia 30334

**SUBJECT:** Fiscal Note  
House Bill (LC 46 1276)

Dear Representative Scott:

This bill would require the Department of Behavioral Health and Developmental Disabilities (DBHDD) to create and maintain an electronic registry for inpatient psychiatric beds, mandate data quality standards, and create linkage to the Georgia Crisis and Access Line (GCAL). Psychiatric facilities and other providers would be required to submit information to this registry to ensure that updates are made within 60 minutes of any changes to bed availability. Finally, DBHDD would be required to provide quarterly reports to relevant legislative committees. The bill has no effective date.

Registry costs would include technology and staffing costs for DBHDD. Technology costs would depend on the method of creating the registry and the features of the system, while staffing costs are estimated at approximately \$1.2 million.

### **Technology**

*Vendor Subscription Model* – North Carolina’s Department of Health and Human Services contracted with a vendor to create the Behavioral Health Statewide Centralized Availability Navigator (BH SCAN). The agency pays annual subscription costs, which totaled \$1.4 million in FY 2024 and \$2.2 million in FY 2025. An additional \$1.4 million was paid in FY 2025 to further automate aspects of the system.

According to state officials, initial costs included a set number of participants with additional costs if that number of participants is exceeded. The system requires providers to log into the system at least once every 24 hours to update availability of beds. Automation efforts include connecting BH SCAN with the electronic health record systems of providers to eliminate the need for provider staff to update manually.

*DBHDD Automated System* – DBHDD provided an estimate of \$7.2 million to \$10.7 to develop a system to interface with approximately 55 known inpatient psychiatric facilities. The DBHDD estimate is based on costs incurred by the agency for a recent Georgia Health Information Network project that allowed Community Service Boards to share data with other entities. The estimate does not include potential costs of connecting the system to GCAL.

### **Staffing**

DBHDD would need additional staff to educate providers and ensure compliance with their requirements. The agency does not currently have relationships with or any regulatory responsibility for the private hospitals that would be impacted by the bill. Agency officials estimated the need for a staff of 10 at an annual cost of approximately \$1.2 million, though additional staff may be needed if the number of facilities with psychiatric beds is significantly higher than expected. The staff would have responsibilities in the areas of policy, provider coordinator, legal, certification, and reporting.

It should be noted that DBHDD staffing costs are partly driven by responsibilities that differ from its current mission. Specifically, the bill allows the department to promulgate regulations that include sanctions for noncompliance, which may include “license revocation, fines, and the withholding of certain reimbursements.” DBHDD noted that it does not license private psychiatric facilities, provide reimbursements to these facilities, or fine entities. These types of responsibilities would require staff with knowledge of licensing and sanctioning.

Respectfully,



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Richard Dunn, Director  
Office of Planning and Budget

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