[Discussion Draft]

AMENDMENT TO THE AMENDMENT IN THE NATURE OF A SUBSTITUTE TO THE COMMITTEE PRINT RELATING TO PUBLIC

HEALTH

Offered by M_.

Page 29, after line 13, insert the following:

1	(c) Plan.—
2	(1) In general.—For purposes of maintaining
3	the suicide prevention hotline under subsection
4	(b)(2) of section 520E-3 of the Public Health Serv-
5	ice Act (42 U.S.C. 290bb-36c), the Secretary shall
6	develop and implement a plan to ensure the provi-
7	sion of high-quality service.
8	(2) Contents.—The plan required by para-
9	graph (1) shall include the following:
10	(A) Quality assurance provisions, includ-
11	ing—
12	(i) clearly defined and measurable
13	performance indicators and objectives to
14	improve the responsiveness and perform-
15	ance of the hotline, including at backup
16	call centers; and

1	(ii) quantifiable timeframes to track
2	the progress of the hotline in meeting such
3	performance indicators and objectives.
4	(B) Standards that crisis centers and
5	backup centers must meet—
6	(i) to participate in the network under
7	subsection (b)(1); and
8	(ii) to ensure that each telephone call,
9	online chat message, and other commu-
10	nication received by the hotline, including
11	at backup call centers, is answered in a
12	timely manner by a person, consistent with
13	the guidance established by the American
14	Association of Suicidology or other guid-
15	ance determined by the Secretary to be ap-
16	propriate.
17	(C) Guidelines for crisis centers and
18	backup centers to implement evidence-based
19	practices including with respect to followup and
20	referral to other health and social services re-
21	sources.
22	(D) Guidelines to ensure that resources are
23	available and distributed to individuals using
24	the hotline who are not personally in a time of
25	crisis but know of someone who is.

1	(E) Guidelines to carry out periodic testing
2	of the hotline, including at crisis centers and
3	backup centers, during each fiscal year to iden-
4	tify and correct any problems in a timely man-
5	ner.
6	(F) Guidelines to operate in consultation
7	with the State department of health, local gov-
8	ernments, Indian tribes, and tribal organiza-
9	tions.
10	(3) Initial Plan; updates.—The Secretary
11	shall—
12	(A) not later than 6 months after the date
13	of enactment of this Act, complete development
14	of the initial version of the plan required by
15	paragraph (1), begin implementation of such
16	plan, and make such plan publicly available;
17	and
18	(B) periodically thereafter, update such
19	plan and make the updated plan publicly avail-
20	able.
21	(d) Transmission of Data to CDC.—The Sec-
22	retary shall formalize and strengthen agreements between
23	the National Suicide Prevention Lifeline program and the
24	Centers for Disease Control and Prevention to transmit
25	any necessary epidemiological data from the program to

1	the Centers, including local call center data, to assist the
2	Centers in suicide prevention efforts.
3	(e) Additional Use of Funds.—
4	(2) Pilot program on innovative tech-
5	NOLOGIES.—
6	(A) Pilot program.—
7	(i) In General.—The Secretary of
8	Health and Human Services, acting
9	through the Assistant Secretary for Mental
10	Health and Substance Use, shall carry out
11	a pilot program to research, analyze, and
12	employ various technologies and platforms
13	of communication (including social media
14	platforms, texting platforms, and email
15	platforms) for suicide prevention in addi-
16	tion to the telephone and online chat serv-
17	ice provided by the Suicide Prevention
18	Lifeline.
19	(ii) Authorization of appropria-
20	TIONS.—To carry out clause (i), there is
21	authorized to be appropriated \$5,000,000
22	for the period of fiscal years 2021 and
23	2022.
24	(B) Report.—Not later than 24 months
25	after the date on which the pilot program under

1	subparagraph (A) commences, the Secretary of
2	Health and Human Services, acting through the
3	Assistant Secretary for Mental Health and Sub-
4	stance Use, shall submit to the Congress a re-
5	port on the pilot program. With respect to each
6	platform of communication employed pursuant
7	to the pilot program, the report shall include—
8	(i) a full description of the program;
9	(ii) the number of individuals served
10	by the program;
11	(iii) the average wait time for each in-
12	dividual to receive a response;
13	(iv) the cost of the program, including
14	the cost per individual served; and
15	(v) any other information the Sec-
16	retary determines appropriate.
17	(3) HHS STUDY AND REPORT.—Not later than
18	24 months after the Secretary of Health and
19	Human Services begins implementation of the plan
20	required by subsection (c) the Secretary shall—
21	(A) complete a study on—
22	(i) the implementation of such plan,
23	including the progress towards meeting the
24	objectives identified pursuant to paragraph
25	(2)(A)(i) of subsection (c) by the time-

1	frames identified pursuant to paragraph
2	(2)(A)(ii) of subsection (c); and
3	(ii) in consultation with the Director
4	of the Centers for Disease Control and
5	Prevention, options to expand data gath-
6	ering from calls to the Suicide Prevention
7	Lifeline in order to better track aspects of
8	usage such as repeat calls, consistent with
9	applicable Federal and State privacy laws;
10	and
11	(B) submit a report to the Congress on the
12	results of such study, including recommenda-
13	tions on whether additional legislation or appro-
14	priations are needed.
15	(4) GAO STUDY AND REPORT.—
16	(A) IN GENERAL.—Not later than 24
17	months after the Secretary of Health and
18	Human Services begins implementation of the
19	plan required by subsection (c), the Comptroller
20	General of the United States shall—
21	(i) complete a study on the Suicide
22	Prevention Lifeline; and
23	(ii) submit a report to the Congress
24	on the results of such study.

1	(B) Issues to be studied.—The study
2	required by subparagraph (A) shall address—
3	(i) the feasibility of geolocating callers
4	to direct calls to the nearest crisis center;
5	(ii) operation shortcomings of the Sui-
6	cide Prevention Lifeline;
7	(iii) geographic coverage of each crisis
8	call center;
9	(iv) the call answer rate of each crisis
10	call center;
11	(v) the call wait time of each crisis
12	call center;
13	(vi) the hours of operation of each cri-
14	sis call center;
15	(vii) funding avenues of each crisis
16	call center;
17	(viii) the implementation of the plan
18	under subsection (c), including the
19	progress towards meeting the objectives
20	identified pursuant to paragraph (2)(A)(i)
21	of subsection (c) by the timeframes identi-
22	fied pursuant to paragraph (2)(A)(ii) of
23	subsection (c); and
24	(ix) service to individuals requesting a
25	foreign language speaker, including—

1	(I) the number of calls or chats
2	the Lifeline receives from individuals
3	speaking a foreign language;
4	(II) the capacity of the Lifeline
5	to handle these calls or chats; and
6	(III) the number of crisis centers
7	with the capacity to serve foreign lan-
8	guage speakers, in house.
9	(C) RECOMMENDATIONS.—The report re-
10	quired by subparagraph (A) shall include rec-
11	ommendations for improving the Suicide Pre-
12	vention Lifeline, including recommendations for
13	legislative and administrative actions.
14	(5) Definition.—In this subsection, the term
15	"Suicide Prevention Lifeline" means the suicide pre-
16	vention hotline maintained pursuant to section
17	520E–3 of the Public Health Service Act (42 U.S.C.
18	290bb-36c).
19	(6) NATIONAL SUICIDE PREVENTION LIFE-
20	LINE.—Section 520E-3(b)(2) of the Public Health
21	Service Act (42 U.S.C. 290bb–36c(b)(2)) is amend-
22	ed by inserting after "suicide prevention hotline" the
23	following: ", which, beginning not later than one
24	year after the date of the enactment of the Commit-
25	ment to Defeat the Virus and Keep America Healthy

1	Act, shall be a 3-digit nationwide toll-free telephone
2	number,".
3	(7) National suicide prevention media
4	CAMPAIGN.—
5	(A) NATIONAL SUICIDE PREVENTION
6	MEDIA CAMPAIGN.—
7	(i) IN GENERAL.—Not later than the
8	date that is three years after the date of
9	the enactment of this Act, the Secretary of
10	Health and Human Services (referred to in
11	this paragraph as the "Secretary"), in co-
12	ordination with the Assistant Secretary for
13	Mental Health and Substance Use (re-
14	ferred to in this paragraph as the "Assist-
15	ant Secretary") and the Director of the
16	Centers for Disease Control and Preven-
17	tion (referred to in this paragraph as the
18	"Director"), shall conduct a national sui-
19	cide prevention media campaign (referred
20	to in this paragraph as the "national
21	media campaign"), in accordance with the
22	requirements of this section, for purposes
23	of—
24	(I) preventing suicide in the
25	United States;

1 (II) educating families, friends
2 and communities on how to address
3 suicide and suicidal thoughts, includ
4 ing when to encourage individual
5 with suicidal risk to seek help; and
6 (III) increasing awareness of suf
7 cide prevention resources of the Cer
8 ters for Disease Control and Preven
9 tion and the Substance Abuse an
Mental Health Services Administra
tion (including the suicide prevention)
hotline maintained under section
520E-3 of the Public Health Service
Act (42 U.S.C. 290bb–36e)), any sur
cide prevention mobile application of
the Centers for Disease Control an
Prevention or the Substance Abus
8 Mental Health Services Administra
tion, and other support resources de
termined appropriate by the Sec
21 retary.
22 (ii) Additional consultation.—I
addition to coordinating with the Assistan
Secretary and the Director under this
paragraph, the Secretary shall consul

1	with, as appropriate, State, local, Tribal,
2	and territorial health departments, primary
3	health care providers, hospitals with emer-
4	gency departments, mental and behavioral
5	health services providers, crisis response
6	services providers, first responders, suicide
7	prevention and mental health professionals,
8	patient advocacy groups, survivors of sui-
9	cide attempts, and representatives of tele-
10	vision and social media platforms in plan-
11	ning the national media campaign to be
12	conducted under clause (i).
13	(B) TARGET AUDIENCES.—
14	(i) Tailoring advertisements and
15	OTHER COMMUNICATIONS.—In conducting
16	the national media campaign under sub-
17	paragraph (A)(i), the Secretary may tailor
18	culturally competent advertisements and
19	other communications of the campaign
20	across all available media for a target au-
21	dience (such as a particular geographic lo-
22	cation or demographic) across the lifespan.
23	(ii) Targeting certain local
24	AREAS.—The Secretary shall, to the max-
25	imum extent practicable, [use amounts

1	made available under subsection (f)] [that
2	subsection was struck, should this be de-
3	leted? I for media that targets individuals
4	in local areas with higher suicide rates.
5	(C) USE OF FUNDS.—
6	(i) Required uses.—
7	(I) IN GENERAL.—The Secretary
8	shall, to the extent reasonably feasible
9	with the funds made available under
10	[subsection (f)] [that subsection was
11	struck, should this be deleted?], carry
12	out the following, with respect to the
13	national media campaign:
14	(aa) The purchase of adver-
15	tising time and space, including
16	the strategic planning for, and
17	accounting of, any such purchase.
18	(bb) Creative services and
19	talent costs.
20	(cc) Advertising production
21	costs.
22	(dd) Testing and evaluation
23	of advertising.

1	(ee) Evaluation of the effec-
2	tiveness of the national media
3	campaign.
4	(ff) Operational and man-
5	agement expenses.
6	(gg) The creation of an edu-
7	cational toolkit for television and
8	social media platforms to use in
9	discussing suicide and raising
10	awareness about how to prevent
11	suicide.
12	(II) Specific requirements.—
13	(aa) Testing and evalua-
14	TION OF ADVERTISING.—In test-
15	ing and evaluating advertising
16	under subclause (I)(dd), the Sec-
17	retary shall test all advertise-
18	ments after use in the national
19	media campaign to evaluate the
20	extent to which such advertise-
21	ments have been effective in car-
22	rying out the purposes of the na-
23	tional media campaign.
24	(bb) Evaluation of ef-
25	FECTIVENESS OF NATIONAL

1	MEDIA CAMPAIGN.—In evaluating
2	the effectiveness of the national
3	media campaign under subclause
4	(I)(ee), the Secretary shall take
5	into account—
6	(AA) the number of
7	unique calls that are made
8	to the suicide prevention
9	hotline maintained under
10	subsection (c) and assess
11	whether there are any State
12	and regional variations with
13	respect to the capacity to
14	answer such calls;
15	(BB) the number of
16	unique encounters with sui-
17	cide prevention and support
18	resources of the Centers for
19	Disease Control and Preven-
20	tion and the Substance
21	Abuse and Mental Health
22	Services Administration and
23	assess engagement with such
24	suicide prevention and sup-
25	port resources;

1	(CC) whether the na-
2	tional media campaign has
3	contributed to increased
4	awareness that suicidal indi-
5	viduals should be engaged,
6	rather than ignored; and
7	(DD) such other meas-
8	ures of evaluation as the
9	Secretary determines are ap-
10	propriate.
11	(ii) Optional uses.—The Secretary
12	may use amounts made available under
13	this section for the following, with respect
14	to the national media campaign:
15	(I) Partnerships with professional
16	and civic groups, community-based or-
17	ganizations, including faith-based or-
18	ganizations, and Government or Trib-
19	al organizations that the Secretary de-
20	termines have experience in suicide
21	prevention, including the Substance
22	Abuse and Mental Health Services
23	Administration and the Centers for
24	Disease Control and Prevention.

1	(II) Entertainment industry out-
2	reach, interactive outreach, media
3	projects and activities, public informa-
4	tion, news media outreach, outreach
5	through television programs, and cor-
6	porate sponsorship and participation.
7	(D) Prohibitions.—None of the amounts
8	made available under this section may be obli-
9	gated or expended for any of the following:
10	(i) To supplant current suicide pre-
11	vention campaigns.
12	(ii) For partisan political purposes, or
13	to express advocacy in support of or to de-
14	feat any clearly identified candidate, clear-
15	ly identified ballot initiative, or clearly
16	identified legislative or regulatory proposal.
17	(E) Report to congress.—Not later
18	than 18 months after implementation of the na-
19	tional media campaign has begun, the Sec-
20	retary, in coordination with the Assistant Sec-
21	retary and the Director, shall, with respect to
22	the first year of the national media campaign,
23	submit to Congress a report that describes—
24	(i) the strategy of the national media
25	campaign and whether specific objectives

1	of such campaign were accomplished, in-
2	cluding whether such campaign impacted
3	the number of calls made to lifeline crisis
4	centers and the capacity of such centers to
5	manage such calls;
6	(ii) steps taken to ensure that the na-
7	tional media campaign operates in an ef-
8	fective and efficient manner consistent
9	with the overall strategy and focus of the
10	national media campaign;
11	(iii) plans to purchase advertising
12	time and space;
13	(iv) policies and practices imple-
14	mented to ensure that Federal funds are
15	used responsibly to purchase advertising
16	time and space and eliminate the potential
17	for waste, fraud, and abuse; and
18	(v) all contracts entered into with a
19	corporation, a partnership, or an individual
20	working on behalf of the national media
21	campaign.

