

Attachment—Additional Questions for the Record

Subcommittee on Health Hearing on “Communities in Need: Legislation to Support Mental Health and Well-Being” April 5, 2022

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The Honorable Tony Cárdenas (D-CA)

- 1. With the introduction of the 9-8-8 national hotline, this year is a critical year for crisis care in America. To support these efforts, the Administration has requested \$697 million for FY 23 to support local call centers, the National Suicide Prevention Lifeline, and related crisis services. This is a substantial increase of \$590 million from the \$101.6 million requested in FY 22. Why is this amount different from FY 22, and why is it needed to ensure that 9-8-8 is successful?*

SAMHSA RESPONSE:

The FY 2023 President’s Budget request is \$696.9 million. The proposed allocation for FY 2023 represents a historic investment in suicide prevention and behavioral health crisis services. This funding accounts for a significant expected influx of 988 contact volume in FY 2023.

As communicated in SAMHSA’s recent 988 Resources Report to Congress, we anticipate the need to support close to 7.6 million contacts nation-wide in FY23. Total projected contact volume was calculated by summing (1) historical growth trends, (2) new volume secondary to growth in penetration of the potentially serviceable population, and (3) diverted volume (from 911 and other hotlines). Based on low, moderate, and high-volume growth scenarios, the projected contact volume following one full year of implementation (July 2023) is 6 to 12 million in total volume of call, chat, and texts, and 13–41 million in contact volume by year 5 (July 2027). SAMHSA has relied on the moderate growth scenario to estimate cost and inform resource recommendations.

The FY 2023 proposed funding will play an essential role in advancing the four areas to begin transforming the crisis system to meet the once-in-a-lifetime opportunity of 988 by:

- strengthening network operations through the existing grants (e.g., backup call, chat, and text response);
- enhancing local capacity through partnerships in behavioral health crisis response;
- establishing and maintaining a 988 and Behavioral Health Crisis Coordination Office; and
- supporting public awareness with targeted 988 national messaging.

Ultimately, we know that this system has historically been underfunded, and significant investments are needed to improve response rates and partner with states to drive local capacity improvements.

- 2. Many stakeholder groups have expressed concern that without further federal support, access to 9-8-8 and crisis services will be inequitable—where individuals residing in more affluent areas will have more access to crisis services, and individuals residing in less affluent areas may have no local crisis services available at all. What steps is SAMHSA taking to address this and what can Congress do to ensure that 9-8-8 and crisis services are available for everyone no matter what neighborhood, city, or state they live in?*

SAMHSA RESPONSE:

The consolidated approach proposed in our FY 2023 budget allows for funding flexibility, which is critical for the success of 988. Additional capacity and funding analysis over the coming months will help inform how to most efficiently and appropriately allocate funding within 988 and behavioral health crisis services. In the past, there has not been a significant amount of federal funding directed specifically to local call centers. Thus, this local capacity analysis will help determine how to best allocate funding to local and backup centers. This local capacity analysis will include both qualitative and quantitative approaches. The 988-grant award to states and territories includes monthly meetings with state 988 coordinators, along with monthly reporting of in-state response benchmarks. This information will be used over the course of the summer and refine capacity projections for state and local call centers in FY 2023.

A key criterion for the recent award of ARP funds to states and territories to advance the 988 workforce is that funding will support attainment of full geographic coverage of 988 services throughout the jurisdiction. SAMHSA has also included terms in awards requiring partnership with Tribal nations to address inequities in access among American Indian and Alaska Native populations. SAMHSA is also partnering with states through its grant programs and ongoing technical assistance to support comprehensive crisis system transformation.

SAMHSA is engaged with federal partners in the development of a comprehensive data and evaluation plan for 988 and the broader crisis system. SAMHSA recognizes the critical importance of ongoing evaluation of 988 implementation and operations, which in turn can drive associated quality improvement. Evaluation through a defined set of disaggregated key performance and quality indicators is critically important in addressing inequities in access and outcomes.

- 3. The 9-8-8 Appropriations Report SAMHSA submitted to Congress in December 2021 identified that the agency is working to incorporate organizations providing specialized services for high-risk populations, such as veterans and LGBTQ+ youth. What progress*

has been made so far and when can we anticipate these services to be available to callers?

SAMHSA RESPONSE:

As a component of the ARP funding used for SAMHSA's 988 State and Territory Cooperative Agreements, states and territories are required to address strategies for populations at higher risk of suicide and to include information on both how programs will be inclusive of underserved and diverse populations and how funding will heighten impact in reducing disparities in health outcomes among key populations, including communities of color, individuals with disabilities, LGBTQ+ youth, and American Indians/Alaska Natives.

Additionally, there are ongoing efforts to improve cultural competency training for Lifeline crisis counselors. In 2021, there were several activities addressing this, including updating pages on the Lifeline website and creating specific tools for crisis counselors, such as Spanish-language clinical guidance resources, Deaf and Hard of Hearing best practices for callers/chat visitors, an LGBTQ+ guidance document, an American Indian/Alaskan Native tip sheet and more.

With the recent fiscal year 2022 appropriations, the Lifeline network administrator is working closely with SAMHSA on the development of a plan to enhance training and access for LGBTQ+ individuals in crisis. SAMHSA also continues to work with its partners at the VA to ensure a coordinated approach to 988 implementation.