

Date of Hearing: March 29, 2023

ASSEMBLY COMMITTEE ON COMMUNICATIONS AND CONVEYANCE

Tasha Boerner Horvath, Chair

AB 988 (Mathis) – As Introduced February 15, 2023

SUBJECT: Miles Hall Lifeline and Suicide Prevention Act: veteran and military data reporting

SUMMARY: This bill would require an entity receiving funds from the 988 State Suicide and Behavioral Health Crisis Services Fund (“988 fund”) to report on the number of individuals served who identified as veterans or active military personnel. Specifically, **this bill:**

EXISTING LAW:

- 1) Existing federal law, the National Suicide Hotline Designation Act of 2020 (NSHD), designates the 3-digit telephone number “9-8-8” as the national suicide prevention and mental health crisis hotline. (Public Law No: 116-172)
- 2) Existing state law, the Miles Hall Lifeline and Suicide Prevention Act, establishes the 988 fund.
 - a. The 988 fund is funded through a surcharge on telephone access lines, currently set at \$0.08 through calendar year 2024 and a maximum of \$0.30 per access line thereafter.
- 3) Requires the California Health and Human Services Agency (HHS), by no later than December 21, 2023, to create a set of recommendations to support the five-year implementation plan for the 988 hotline.
- 4) Authorizes OES, in consultation with the State Department of Health Care Services (DHCS), to adopt regulations regarding how 988 funds received shall be disseminated to support the operations of the 988 system and related behavioral health crisis services.
- 5) Requires the Office of Emergency Services (OES) to require an entity seeking moneys available through the 988 fund to annually file an expenditure and outcomes report containing specified information, including, among other things, the number of individuals served and the outcomes for individuals served, if known.

FISCAL EFFECT: Unknown

COMMENTS:

1) *Author’s Statement.*

“This bill adds to the progress of the previous AB 988 (2022) by requiring entities receiving state 988 funding to report the number of self-reported veterans who used their services. This step will not violate anyone’s privacy or access to mental health services. It will rather provide the legislature insight into how California’s veterans are faring, and whether they are aware of these resources. The government can then take well-informed action to address the veteran mental health and suicide crisis. It’s the least we owe them.”

- 2) *Background on 9-8-8.* The National Suicide Hotline Designation Act of 2020 (NSHD) designated 9-8-8 as the new three-digit number for the national suicide prevention and

mental health crisis hotline. The NSHD requires the Federal Communications Commission (FCC) to designate 9-8-8 as the universal telephone number for a national suicide prevention and mental health crisis hotline, which operates through the National Suicide Prevention Lifeline. The NSHD also authorized states to impose a fee on telephone users to fund the 9-8-8 hotlines within the states. In California, AB 988 (Bauer-Kahan, Chapter 747, Statute of 2022) implements NSHD, in compliance with the Federal Communication Commission's rules. Under that bill, OES collects a surcharge for the 988 fund and the 988 hotline administered through the California Health and Human Services Agency. The work to fully implement the 9-8-8 hotline is currently ongoing, with CHHSA required to create a set of recommendations to support the five-year implementation plan for the 9-8-8 hotline by December 31, 2023.

- 3) *This bill expands existing reporting requirements.* Pursuant to AB 988 (Bauer-Kahan, Chapter 747, Statute of 2022), OES is required to annually collect specified information from entities seeking funds from the 9-8-8- fund. The existing reporting requirements budgetary and patient information such as the total budget, number of personnel employed, the number of individuals served, and individual outcomes if known. This bill would expand the existing reporting requirements to explicitly include information about veterans and active military personnel served. The rationale for collecting military and veteran information is quite strong. It is well documented that veterans disproportionately experience employment challenges, substance abuse, homelessness, and mental health problems. For example, the 2021 National Veteran Suicide Prevention Annual Report found that veterans' suicide rates are 21% higher than non-veterans. The military and veteran population is exactly the population that is likely to utilize 988 services, and it would be reasonable for the state to track the number of individuals served from that population.

Nonetheless, as with any data collection about individuals, this bill raises some privacy considerations for the individuals whose data may be collected. For example, an individual utilizing the 9-8-8 might not wish for their identity or affiliations to be recorded. Additionally, in a time of crisis, the personnel staffing the hotline might not find it appropriate to ask the demographic information of the caller.

- 4) *Committee amendments.* Considering the privacy issues that arise with collecting military and veteran data, the author may wish to amend their bill to clarify that the information is only required to be reported if it is known. This amendment would be consistent with the other parts of the statute that require the reporting of demographic information:

*“(8) The number of individuals who used the service and **self-identified** ~~identified~~ as veterans or active military personnel, **if known.**”*

REGISTERED SUPPORT / OPPOSITION:

Support

American Foundation for Suicide Prevention
Dbsa California

Opposition

None on file

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