

## Testimony Engrossed Senate Bill No.2149 House Finance and Taxation Committee Representative Headland, Chairman

March 13, 2023

Chairman Headland, and members of the House Finance and Taxation Committee, I am James Knopik, Manager of Addiction and Prevention Program and Policy with the Department of Health and Human Services' (Department), Behavioral Health Division. I appear before you in support of Engrossed Senate Bill No. 2149.

The 988 Suicide and Crisis Lifeline is a three-digit emergency number for behavioral health crisis. This number allows individuals experiencing a behavioral health crisis to call or text the simple number 9-8-8 or chat online at 988lifeline.org 24/7 365 days a year. On June 16, 2022 the 988 number rolled out nationwide.

The National Suicide Prevention Lifeline was previously accessible by calling 1-800-273-8255. The 988 Suicide and Crisis Lifeline creates very distinct changes that did not exist with the National Suicide Prevention Lifeline. 988 simplifies the number to a three-digit number and broadens the intent of calling the lifeline to include any behavioral health crisis, not exclusively suicide related issues. Additionally, the vision of 988 is to have behavioral health crisis services available in communities across the nation, similar to 911 for medical emergencies.

The Substance Abuse and Mental Health Services Administration (SAMHSA) has identified a three phased rollout of 988 crisis services. The first phase has a goal of 90 percent of all 988 calls being answered in-

state by 2023. The second phase has a goal of 80 percent of individuals having access to mobile behavioral health crisis services by 2025. The third and final phase of 988 is to have 80 percent of individuals have access to behavioral health crisis stabilization services (a place to go) by 2027.

Currently, in North Dakota the 988 Suicide and Crisis Lifeline is answered in-state by FirstLink who then provides suicide risk assessment, descalation, or support to those in need. As needed, FirstLink connects to one of the eight local Human Service Center crisis teams for additional supportive services as available by the region. Behavioral health mobile crisis services are only available within 45 miles of the eight major cities in the state. Currently, the Department's budget does not have funds to expand outside of 45 miles of these major cities. Funding through this bill would assist with meeting the needs of those in rural and underserved areas of the state.

Funds in the Department's budget do not cover new costs needed to sustain the 988 line which includes; increased call capacity due to the ease of a three digit number, new call types for broader behavioral health crises not exclusively suicide prevention calls, call center technology capabilities to dispatch mobile crisis teams, integration with local Public Safety Answering Points (PSAPs) for 911, ability to respond to behavioral health crises texts and chats, implement real-time Global Positioning System (GPS) technology in partnership with the region's crisis call center hub and increase the expansion of mobile crisis (outside of the current 45 mile radius of the 8 major cities). The state does not have other funds to draw upon for these needs, and without additional funding our state will not be able to meet the additional needs.



When the vision of 988 is fully operationalized individuals with a behavioral health crisis will receive support from behavioral health professionals resulting in better care. Our behavioral health crisis system will reduce the utilization of our 911 call centers, our first responders who are dispatched such as law enforcement, and our emergency departments.

When President Trump signed The National Suicide Hotline Designation Act of 2020 into law creating the 988 Suicide and Crisis Lifeline it enabled states to pass legislation assessing monthly fees on telecommunication devices to support 988 and integrated crisis care services. This is similar to what is done to support 911 services.

Behavioral health crisis services are a necessary public service similar to how 911 is a necessary service for medical emergencies. The Department supports this bill that will treat crisis behavioral healthcare on an equal footing to existing physical health crisis responses and lays the foundation to develop an infrastructure to grow these services to the needed level to support our citizens.

This concludes my testimony. I would be happy to try to answer any questions the committee may have. Thank you.