

Department of Legislative Services
Maryland General Assembly
2023 Session

FISCAL AND POLICY NOTE
Third Reader - Revised

House Bill 138 (Delegate Kerr, *et al.*)
Health and Government Operations

Study on Statewide 2-1-1 and 3-1-1 Systems

This bill requires the Department of Legislative Services (DLS) to study the implementation by the Department of Human Services (DHS) of a statewide 3-1-1 system in the State that (1) provides citizens with nonemergency government services, resources, and information 24 hours a day, 7 days a week, 365 days a year and (2) merges the 3-1-1 system with the existing statewide 2-1-1 system. By December 1, 2023, DLS must report its findings and recommendations to the Senate Education, Energy, and the Environment Committee and the House Health and Government Operations Committee. **The bill takes effect June 1, 2023.**

Fiscal Summary

State Effect: DLS can likely conduct the study with existing resources. However, general fund expenditures may increase in FY 2024 to the extent that DLS must hire a consultant with relevant expertise. It is assumed that DHS can assist as needed using existing resources. Revenues are not affected.

Local Effect: The bill is not anticipated to materially affect local government operations or finances.

Small Business Effect: None.

Analysis

Bill Summary: The study must examine:

- the difference in cost between implementing a statewide 3-1-1 system and implementing a combined 2-1-1 and 3-1-1 system;

- any potential cost savings to counties that currently operate a county 3-1-1 system if the counties were to join a statewide 3-1-1 system;
- any potential cost savings for authorizing the use of existing 2-1-1 infrastructure for a combined 2-1-1 and 3-1-1 system;
- the anticipated number of new personnel needed for a combined 2-1-1 and 3-1-1 system;
- the expiration date of technology being utilized by counties that currently operate their own 3-1-1 systems;
- the percentage of 2-1-1 calls currently being handled by the 9-8-8 system;
- existing studies addressing the change in 9-1-1 call volumes in jurisdictions that have implemented a 3-1-1 system following the implementation of the 3-1-1 system;
- the potential role of 211 Maryland (211 MD) in a combined 2-1-1 and 3-1-1 system, including how 211 MD can maintain involvement in projects unrelated to the direct operation of the statewide 2-1-1 system; and
- any issues with the management of 2-1-1 shifting from a nonprofit entity to a governmental service.

Current Law:

Maryland's 9-1-1 System

The State's 9-1-1 system, which connects individuals with emergency services, operates primarily through public safety answering points (PSAPs), which are generally owned and operated by local governments. 9-1-1 specialists working within PSAPs answer, redirect, and take action on 9-1-1 calls received based on the location of the originating 9-1-1 call.

2-1-1 and 3-1-1

According to the Federal Communications Commission (FCC), the telephone numbers 2-1-1 and 3-1-1 are assigned nationwide for health and human service referrals, and nonemergency police and other government services, respectively.

2-1-1 Maryland: The three-digit number 2-1-1 is the primary information and referral telephone number for health and human services in the State. 211 MD is a private, nonprofit organization that maintains an information and referral service network that is available to Maryland residents via telephone and Internet. 2-1-1 Maryland offers 24/7 guidance in accessing health, crisis, and social services. The Health and Human Services Referral Board within the Maryland Department of Health (MDH) provides oversight and guidance to the 2-1-1 Maryland system.

County Authorization to Establish a 3-1-1 System: State regulations authorize a county or multicounty system in the State to establish a 3-1-1 system to reduce congestion on the 9-1-1 system. At a minimum, a 3-1-1 system must include the following: (1) switching or programming to direct a 3-1-1 call to a nonemergency answering position; (2) a 3-1-1 answering position that must be capable of immediately transferring an emergency call to a 9-1-1 answering position or an adjoining PSAP, transferring a nonemergency call to an adjoining jurisdiction or appropriate agency, and providing an individual with a speech or hearing disability access to TTY services or who does not speak or understand the English language access to alternative communication services; and (3) a 3-1-1 call taker trained to handle nonemergency calls and to transfer emergency calls to a 9-1-1 call taker.

9-8-8

On July 16, 2020, FCC issued a final order designating 9-8-8 as the new National Suicide Prevention Lifeline (NSPL) and National Veterans Crisis Line. The rule requires telecommunication providers to make every landline, cell phone, and voice-over Internet device in the United States capable of using the 9-8-8 number to reach the existing NSPL structure by July 16, 2022. On October 17, 2020, the National Suicide Hotline Designation Act of 2020 was enacted to designate 9-8-8 as the universal telephone number for the purpose of the national suicide prevention and mental health crisis hotline system. Chapters 145 and 146 of 2022, among other things, required MDH to designate 9-8-8 as the State's behavioral health crisis line.

Additional Information

Prior Introductions: Similar legislation has not been introduced within the last three years.

Designated Cross File: SB 30 (Senator Kagan) - Education, Energy, and the Environment.

Information Source(s): Maryland Department of Emergency Management; Department of Information Technology; Maryland Department of Aging; University System of Maryland; Maryland Department of Disabilities; Maryland Department of Health; Department of Human Services; Department of Housing and Community Development; Maryland Department of Transportation; Baltimore, Kent, Montgomery, Prince George's, St. Mary's, and Worcester counties; Maryland Association of Counties; Maryland Municipal League; Federal Communications Commission; Department of Legislative Services

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