



February 28, 2024

**House Health and Government Operations Committee
TESTIMONY IN SUPPORT**

HB 933 - Behavioral Health Crisis Response Services - 9-8-8 Trust Fund Fees

Behavioral Health System Baltimore (BHSB) is a nonprofit organization that serves as the local behavioral health authority (LBHA) for Baltimore City. BHSB works to increase access to a full range of quality behavioral health (mental health and substance use) services and advocates for innovative approaches to prevention, early intervention, treatment and recovery for individuals, families, and communities. Baltimore City represents nearly 35 percent of the public behavioral health system in Maryland, serving over 100,000 people with mental illness and substance use disorders (collectively referred to as “behavioral health”) annually.

Behavioral Health System Baltimore strongly supports HB 933 - Behavioral Health Crisis Response Services - 9-8-8 Trust Fund Fees. This bill establishes a \$0.25 per month 988 telecom fee to provide reliable funding for Maryland’s 988 helplines. This approach, modeled after 911’s funding mechanism, will strengthen and expand 988 services to support all Marylanders experiencing behavioral health crisis.

Maryland’s communities have struggled with mental health in the aftermath of the COVID-19 pandemic. More Marylanders are dying due to suicide and overdose than ever before. Almost 200,000 Maryland adults seriously consider suicide each year which is about 50% more than what occurred ten years ago.¹ The challenges are even more acute for Maryland’s youth with virtually every mental health indicator trending in the wrong direction. Approximately one in four Maryland middle school students have seriously considered suicide, one in five have made a suicide plan, and one in ten have attempted suicide. These rates have been increasing for years and only got worse after the COVID-19 pandemic.² The state must respond to this emergency and 988 can play an important role.

Since its launch in 2022, 988 has provided 24/7, free supportive counseling, information, and referrals to all Marylanders who call or text. These services are effective at helping individuals experiencing thoughts of suicide or other emotional distress resolve their crisis, achieve relief, and stay safe, with more than 80% of all calls being resolved over the phone. For situations that cannot be resolved over the phone, 988 counselors can have specialized mental health teams dispatched into the community and can work with 911 to keep the caller safe.

Maryland has seen about a 60% increase in 988 calls since the 2022 launch and a 13-fold increase in texts to 988. The eight Maryland 988 call centers and one regional partnership have kept up with this increased demand thanks to significant funding from federal grants and state general revenue funds. This funding has allowed call centers to hire over 100 new staff, procure new phone and data systems, and improve performance so that local 988 call centers can respond more quickly to a higher proportion of calls and texts. The state should expect funding needs to increase, however, as more people become familiar with 988 and federal performance goals continue to increase.

HB 933 would establish a permanent funding solution to make sure 988 is fully funded and able to keep up with demand. The bill would establish a \$0.25 telecom fee applied each month to landlines, cell phones, and prepaid phone purchases modeled after the long-standing 911 telecom fee. The

\$0.25/month 988 telecom fee would generate \$15-20 million in revenue each year which would be deposited in the 988 Trust Fund. The Maryland Department of Health administers the 988 Trust Fund and allocates funding to the 988 call centers across the state. This nominal fee on phone bills would provide enough funding to maintain all current 988 operations and make some targeted improvements. The bill also includes an exemption for households who are enrolled in the federal low-cost phone Lifeline program which would exempt approximately 250,000 households.

Creating a dependable source of funding for 988 through a telecom fee would give the state and call centers the budgetary predictability needed to plan for 988 system improvements and expansions. 988 is an effective and life-saving resource, but it has only been available in its current form for less than two years. The state has significant investments to make to improve data collection, increase text message capacity, expand counselor training, and better integrate 988 into the public behavioral health system. Maryland should continue to improve its local answer rate and timeliness to meet forthcoming federal performance expectations and ensure reliable service for Marylanders. The telecom fee created under HB933 would allow these investments and help Maryland's 988 helplines continue to grow.

Building upon 988 to create an even more robust network is critical to solving many of the state's challenges. If fully funded, 988 can serve as a universal access point that can provide education and early intervention to prevent behavioral health challenges from escalating. It can play a large role in preventing unnecessary trips to the hospital emergency department (ED) and help the state reduce high-end health care costs and long ED wait times. 988 can serve as an alternative to 911 and reduce our reliance on the criminal justice system in addressing behavioral health challenges. And 988 can play a leading role in helping Maryland's young people to improve their mental health and wellness.

Congress gave states the authority to establish telecom fees in the legislation that created 988. Eight states have availed themselves of this option to date with many more considering it this year. Maryland should join states such as Virginia and Delaware in giving 988 a strong financial foundation through a 988 telecom fee. **BHSB urges the House Health and Government Operations Committee to support HB 933 and ensure a strong Maryland 988 system for years to come.**

For more information, please contact BHSB Policy and Communications Vice President Adrienne Breidenstine or BHSB Policy Director Dan Rabbitt

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References:

¹ Substance Abuse and Mental Health Services Administration (SAMHSA). "Behavioral Health Barometer: Maryland, Volume 6: Indicators as measured through the 2019 National Survey on Drug Use and Health and the National Survey of Substance Abuse Treatment Services." Available at https://www.samhsa.gov/data/sites/default/files/reports/rpt32837/Maryland-BH-Barometer_Volume6.pdf.

² Center for Disease Control and Prevention (CDC). "Maryland Youth Risk Behavior Survey 2021-2022." Available at <https://health.maryland.gov/phpa/ccdpc/Reports/Pages/State-Level-Data,-2021-2022.aspx>.