February 18, 2022

The Honorable Tony Cárdenas
2438 Rayburn House Office Building
Washington, DC 20515

The Honorable Don Beyer
1119 Longworth House Office Building
Washington, DC 20515

The Honorable Lisa Blunt Rochester
1724 Longworth House Office Building
Washington, DC 20515

The Honorable Brian Fitzpatrick
271 Cannon House Office Building
Washington, DC 20515

The Honorable Seth Moulton
1127 Longworth House Office Building
Washington, DC 20515

The Honorable Grace Napolitano
1610 Longworth House Office Building
Washington, DC 20515

The Honorable Jamie Raskin
2242 Rayburn House Office Building
Washington, DC 20515

RE: Letter of Support for the 988 Implementation Act

Dear Representatives Cárdenas, Beyer, Blunt Rochester, Fitzpatrick, Moulton, Napolitano and Raskin:

The Mental Health Liaison Group (MHLG) – a coalition of national organizations representing individuals with mental illness, their family members, mental health and addiction providers, advocates and other stakeholders – is writing to express our support for the 9-8-8 National Suicide Prevention Lifeline Implementation Act. This legislation would positively impact people seeking mental and behavioral health crisis care, as well as bolster services and practices that will build a strong framework for 988 crisis response.

With the passage of the National Suicide Hotline Designation Act (P.L. 116-172) in 2020, our nation took an important first step in reimagining crisis response for everyone, regardless of location or background. The new three-digit number (988) for suicide prevention and other mental health crises will make it easier for someone experiencing a mental health emergency to reach out for help. While 988 is expected to support millions of people each year who face a mental health, suicidal, or substance use crisis, there is still work that needs to be done to truly reimagine mental health crisis response for everyone and ensure people calling 988 receive the response they need and deserve.

Most communities have limited or no options when it comes to services that support someone in a behavioral health crisis. Law enforcement and hospital emergency departments are the de-facto response, which places a strain on these systems and delays mental health treatment for someone in need. People with substance use disorders are particularly impacted by incarceration and hospitalization and must be accounted for when considering a successful launch of 988. Our response to mental health
crises impacts every corner of our communities, and 988 presents a real opportunity to create a continuum of care that meets the needs of people in crisis.

As defined by guidelines put out by the Substance Abuse and Mental Health Services Administration (SAMHSA), and reinforced by the experience of local crisis systems, every person experiencing a mental health or substance use emergency should have someone to talk to, someone to respond, and somewhere to go. The 9-8-8 National Suicide Prevention Lifeline Implementation Act would provide communities with the necessary resources to make this a reality by supporting 24/7 local crisis call centers, mobile crisis response, and crisis stabilization facilities. This comprehensive bill also creates national standards for crisis care and establishes a Behavioral Health Crisis Coordinating Office as a resource to support and coordinate federal efforts to expand crisis services in every community.

Reimagining crisis care requires sustained resources and efforts to address inequities in our existing mental health system. Your legislation takes steps to do this by requiring coverage of crisis services by Medicare, Medicaid, and other forms of health insurance. It also addresses the urgent mental health workforce crisis by investing in behavioral health workforce training programs and builds on existing best practices by expanding the Medicaid Certified Community Behavioral Health Clinic (CCBHC) demonstration program.

As the new three-digit crisis code becomes universally available, we believe comprehensive community services, educational resources, specialized care, and effective infrastructure must be the foundations of crisis management.

The MHLG thanks you for your leadership on this important legislation and commends you for your continued commitment to mental and behavioral health crisis care. We look forward to working with you to advance this legislation.

Sincerely,

American Academy of Child and Adolescent Psychiatry
American Association for Psychoanalysis in Clinical Social Work
American Association of Suicidology
American Association on Health and Disability*
American Counseling Association
American Foundation for Suicide Prevention
American Group Psychotherapy Association
American Mental Health Counselors Association
American Occupational Therapy Association
American Psychiatric Association
American Psychiatric Nurses Association
American Psychological Association
Anxiety and Depression Association of America
Association for Ambulatory Behavioral Healthcare
Center for Law & Social Policy (CLASP)*
Centerstone*
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Clinical Social Work Association
College of Psychiatric and Neurologic Pharmacists (CPNP)
Confederation of Independent Psychoanalytic Societies
Crisis Text Line*
Depression and Bipolar Support Alliance
Eating Disorders Coalition for Research, Policy & Action
Education Development Center*
Emergency Nurses Association
Global Alliance for Behavioral Health and Social Justice
Inseparable*
International OCD Foundation
International Society for Psychiatric Mental Health Nurses*
The Jed Foundation*
The Kennedy Forum
Maternal Mental Health Leadership Alliance
Mental Health America
NAADAC, the Association for Addiction Professionals
National Alliance on Mental Illness (NAMI)
National Alliance to Advance Adolescent Health*
National Association for Rural Mental Health
National Association of County Behavioral Health and Developmental Disability Directors
National Association of Pediatric Nurse Practitioners*
National Association of Social Workers
National Association of State Mental Health Program Directors
National Board for Certified Counselors (NBCC)
National Council for Mental Wellbeing
National Eating Disorders Association
National Federation of Families
National League for Nursing
Network of Jewish Human Service Agencies*
Postpartum Support International
REDC Consortium
RI International
Sandy Hook Promise
Schizophrenia and Psychosis Action Alliance
SMART Recovery
The Trevor Project
Trust for America’s Health
Vibrant Emotional Health*
Wounded Warrior Project*

*Denotes MHLG Affiliate Membership