Crisis Questions & Answers*

(Week of April 14, 2021)

Updated April 24, 2021

* Our growing learning community has enormous expertise ranging from crisis to systems engineering to data and analytics, as well as a penchant for parity.
Q. What are the federal funding opportunities that could help support 988? Is there a list?

A. The National Suicide Hotline Designation Act encourages states to pass legislation assessing small monthly fees on cell phone bills to support 988, as is often done to support 911 services. Even if your state does not assess a 911 fee, legislation can be introduced for 988 assessments in state legislatures. Significant federal opportunities also exist (see list next page).

Q. What about mobile crisis? Crisis receiving?

A. The federal legislation cited above suggests 988 fees at the state level be used for crisis hotline and core crisis services only (mobile and crisis receiving). The list that follows offers additional supports (leveraging Medicaid, etc.).
Federal Funding Opportunities

Vibrant Capacity Grants $9m
State Legislation $600m
CCBHC Grants

5% MHBG Set-aside $35m

American Rescue Plan $1,600m

Police & Mental Health

COVID impact on hospitals

Social Justice

Costs

CARES ACT Relief Funding $825m

MEDICAID $185m AZ Crisis Alone
① NATIONAL SUICIDE HOTLINE DESIGNATION ACT OF 2020
PUBLIC LAW NO: 116-172. EFFECTIVE OCTOBER 17, 2020
Requires the FCC to designate 9-8-8 as the universal telephone number for a national suicide prevention and mental health crisis hotline. A state may impose and collect a fee for providing 9-8-8 related services to establish state crisis call center hubs. Many states are proposing legislation with an escalating fee scale that per phone per month as 988 utilization increases.

② VIBRANT EMOTIONAL HEALTH
STATE GRANTS IN PREPARATION FOR FUTURE 988 DIALING CODE FOR THE NSPL. JANUARY 25, 2021
Vibrant Emotional Health, the nonprofit administrator of the NSPL (Lifeline), awarded $9 million in grants to 49 states and U.S. territories through the 988 State Planning Grant Initiative. Awardees will develop clear roadmaps for how to address coordination, capacity, funding, and communications surrounding the launch of 988. Final planning reports due December 31, 2021

③ SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION
FEBRUARY 3, 2021 NOTICE OF AWARD (NOA)
$35 million annually, was added to the Mental Health Block Grant, which is distributed by SAMHSA to the states. SAMHSA described the new funding as specifically “set-aside” and must be used for crisis services. These funds can be used flexibly—to build crisis infrastructure, to help pay for crisis care for people who are not Medicaid eligible, or to cover startup costs for crisis programs.

④ CORONAVIRUS RESPONSE AND RELIEF SUPPLEMENT APPROPRIATIONS ACT, 2021
PUBLIC LAW NO: 116-260
An additional $825m through SAMHSA’s Mental Health Block Grant, to be used for operation of an access line, crisis phone line, or warm lines; training of staff and equipment to support enhanced MH crisis response; MH Awareness training; hire of outreach and peer support workers for check-ins; prison and jail re-entry and enhanced discharge from inpatient settings and more.

⑤ AMERICAN RESCUE PLAN ACT OF 2021
PUBLIC LAW NO: 117-2. EFFECTIVE MARCH 11, 2021
Supports the development of community-based mobile crisis support teams, and includes a federal matching payment equal to 85% of the cost. Teams eligible will include at least one BH care professional capable of conducting assessment, as well as other professionals or paraprofessionals with appropriate expertise, including nurses, social workers, and peer support specialists.
LEVERAGING MEDICAID FOR BH CRISIS RESPONSE SYSTEMS

In building comprehensive crisis systems, states must leverage and shape Medicaid to become the key payer for crisis services. Medicaid’s financing structure guarantees federal financial support to states with no pre-set limit and allows federal spending to increase as state spending increases. Within Medicaid expansion states, this is particularly critical because crisis service coverage is provided for previously ineligible populations. States also have the option to apply Medicaid’s Administrative Match to partially support crisis call center hub services.

**ARIZONA CRISIS NOW**

- **Crisis Call Hub**: $23 million
- **Mobile Crisis Teams**: $42 million
- **Crisis Receiving**: $120 million
- **FULL SYSTEM**: $185 million

**RETURN ON INVESTMENT**

$370 million

- **Medicaid**: $140 million
- **Medicare**: Near Zero
- **Commercial**: Near Zero
- **State Funds**: Est. $45 million
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CrisisNow.com
988 and Extended Crisis Care