

September 17, 2021

The Honorable Patrick Leahy
Chairman
Senate Committee on Appropriations
S-128 United States Capitol
Washington, D.C. 20510

The Honorable Rosa DeLauro
Chair
House Committee on Appropriations
H-307 United States Capitol
Washington, D.C. 20515

The Honorable Richard Shelby
Vice Chairman
Senate Committee on Appropriations
S-146A United States Capitol
Washington, D.C. 20510

The Honorable Kay Granger
Ranking Member
House Committee on Appropriations
1016 Longworth House Office Building
Washington, D.C. 20515

Dear Chairman Leahy, Vice Chairman Shelby, Chair DeLauro, and Ranking Member Granger:

The Mental Health Liaison Group (MHLG), a coalition of national organizations representing consumers, family members, mental health and substance use providers, advocates, and other stakeholders is writing today to ask that you include funding for the National Suicide Prevention Lifeline in the Fiscal Year 2022 Continuing Resolution, which was requested as an anomaly by the Office of Management and Budget (OMB)¹. This funding will provide critical resources for the network and operations of the National Suicide Prevention Lifeline (NSPL) as it transitions to 9-8-8 on July 16, 2022. Funding will also allow the Substance Abuse and Mental Health Services Administration to prepare for the new Federal Communications Commission requirement that telecommunication carriers establish a new three-digit number connecting users to the NSPL, as well as expand the use of text and chat messaging. Without this anomaly funding, the NSPL call centers would be unable to support the significant increases in call, text, and chat volume that is expected due to these upgrades.

We appreciate your leadership and the continued support from the Appropriations Committees for the National Suicide Prevention Lifeline and dedication to increasing access to crisis resources.

The new number, 9-8-8, for the National Suicide Prevention Lifeline (1-800-273-TALK) is set to go live on July 16, 2022. A significant increase in contacts to the Lifeline is expected when 9-8-8 is activated: approximately nine million contacts annually are expected under a moderate volume scenario in the first year, up from 2.5 million contacts answered annually now. Significant investments are needed now to fortify and build capacity within the network to answer this anticipated increase in volume to the Lifeline and to see Congress' vision of 9-8-8 come to fruition. Including increased funds in a Continuing Resolution will allow the National Suicide Prevention Lifeline to better prepare for the increase in expected calls and fortify its network plans for the transition.

¹ Sec. _____. *In addition to amounts provided by section 101, amounts are provided for "Department of Health and Human Services—Substance Abuse and Mental Health Services Administration—Mental Health" at a rate for operations of \$77,621,000, for an additional amount for carrying out section 520E-3 of the Public Health Service Act (42 U.S.C. 290bb-36c): Provided, That such amounts may be apportioned up to the rate for operations necessary to operate and maintain the National Suicide Prevention Lifeline program.*

Moreover, increased funding to the National Suicide Prevention Lifeline during this transition would support routing contacts to local crisis centers, thus helping to connect more people in crisis to local resources. The funding would also be critical to implement infrastructure upgrades to increase network capacity and in supporting specialized national services, such as national back up centers and multi-lingual assistance that supports the multichannel availability of 9-8-8.

We appreciate your commitment to preventing suicide in the United States and connecting individuals in suicidal or behavioral health crisis to care. We look forward to continuing to work with you to support the National Suicide Prevention Lifeline.

Sincerely,

2020 Mom

American Art Therapy Association

American Association for Marriage and Family
Therapy

American Association of Child and Adolescent
Psychiatry

American Association of Nurse Anesthesiology*

American Counseling Association

American Foundation for Suicide Prevention

American Group Psychotherapy Association

American Mental Health Counselors Association

American Nurses Association

American Psychiatric Association

American Psychiatric Nurses Association

American Psychological Association

Association For Ambulatory Behavioral
Healthcare

Association for Behavioral Health and Wellness

Centerstone*

Children and Adults with Attention-
Deficit/Hyperactivity Disorder (CHADD)

Clinical Social Work Association

College of Psychiatric and Neurologic
Pharmacists (CPNP)

Depression and Bipolar Support Alliance

Eating Disorders Coalition

National Association of Social Workers

Global Alliance for Behavioral Health and Social
Justice

IC&RC

Jed Foundation, The*

The Jewish Federations of North America

Maternal Mental Health Leadership Alliance

Mental Health America

NAADAC, the Association for Addiction
Professionals

National Association of County Behavioral
Health & Developmental Disabilities (NACBHDD)

National Association for Rural Mental
Health (NARMH)

National Alliance on Mental Illness

National Association for Behavioral Healthcare

National Association of Pediatric Nurse
Practitioners*

National Association of Social Workers

The Kennedy Forum

National Association of State Mental Health
Program Directors

National Council for Mental Wellbeing

National Federation of Families

National League for Nursing

National Register of Health Service
Psychologists

Network of Jewish Human Service Agencies*

NHMH- No Health Without Mental Health

Residential Eating Disorders Consortium

RI International, Inc.

**denotes affiliate membership*

Sandy Hook Promise

SMART Recovery

The Kennedy Forum

The National Alliance to Advance Adolescent
Health*

The Trevor Project

Global Alliance for Behavioral Health & Social
Justice

Trust for America's Health

Vibrant Emotional Health*

Well Being Trust

CC: House and Senate Appropriations Committee