July 15, 2021

Meredith Attwell Baker
President & CEO
CTIA
1400 16th Street NW #600
Washington, D.C. 20036

Dear Ms. Baker:

We write today regarding reported efforts by CTIA and its member companies to stop or limit states’ adoption of funding mechanisms to support implementation of the National Suicide Hotline Designation Act. These efforts could threaten the effective implementation of the new three-digit National Suicide Prevention Lifeline and the Veterans Crisis Line.

Suicide rates in this country have increased by 35% over the past two decades, according to the National Alliance on Mental Illness. More than 48,000 lives were lost to suicide in 2018 alone, and, tragically, it appears that these mental illness and risk factors for suicide have been acutely exacerbated by the COVID-19 public health crisis and its related social, economic, and health consequences. Compounding these concerns, Americans struggling with mental health crises are frequently met by law enforcement officials rather than mental health professionals trained to appropriately respond. In fact, people with severe mental illness account for 10 percent of all law enforcement responses. Law enforcement interventions are not designed to provide vital mental health services that are necessary to address the problems that led to the crisis in the first place. Time and time again, mobile crisis response teams have proven to be a safer, cost-efficient, and more effective alternative for managing mental health crises.

Last year, Congress took bold action to address this country’s dire mental health crisis by coming together on a bipartisan, bicameral basis to pass the National Suicide Hotline Designation Act into law. Under this critical law, by no later than July 2022, people across the country will be able to use the three-digit code 9-8-8 to access the National Suicide Prevention Lifeline and, for veterans, to be swiftly routed to the Veterans Crisis Line for veteran-specific mental health support. This new, easy to remember lifeline represents a landmark improvement over the previous, ten-digit number for the National Suicide Prevention Lifeline and Veterans Crisis Line, which could be a barrier to care for Americans in crisis when every second counts.

Importantly, in drafting this law, Congress deliberately gave states the flexibility to strengthen local crisis call centers and in-person mobile crisis response teams by assessing fees on commercial mobile service or an IP-enabled voice service for 9-8-8 related services attributable to “ensuring the efficient and effective routing of calls made to the 9-8-8 national suicide prevention and mental health crisis hotline to an appropriate crisis center; and (B) personnel and the provision of acute mental health, crisis outreach and stabilization services by directly responding to the 9-8-8 national suicide prevention and mental health crisis hotline.”
Making it easier to access federal suicide prevention resources has the potential to save countless lives. But we have to let it, and that means full and efficient implementation of 9-8-8, both at the federal level and in states and local communities across the country. That is why we are gravely concerned by reports that the telecommunications industry — represented by your association — is actively working to limit the states’ implementation of this critical lifeline for Americans in crisis. From Montana to Kansas to California, telecom lobbyists appear to be pressing state legislatures to reduce the size of the fees assessed and the scope of services to which the fees could apply, well beyond — and in some cases contrary to — the guardrails already written into law by Congress. If successful, these efforts would limit the ability of states to establish and maintain the call centers staffed by trained individuals, mobile crisis teams, and crisis stabilization services that are all fundamental to breaking the cycle of suicide.

Every American should be doing everything they can to get those in crisis help when and where they need it, and not working to tie the hands of those who can provide it. Given the public interest in a fully-functioning National Suicide Prevention Lifeline that is supported by trained mental health professionals, we urge CTIA and its member companies to rethink its efforts around state-level implementation of the National Suicide Hotline Designation Act, and instead to work with officials in Washington, D.C. and across the country to stand up this critical resource.

Thank you for your attention to this critical request.

Sincerely,

Ron Wyden
United States Senator

Christopher S. Murphy
United States Senator

Jeffrey A. Merkley
United States Senator