
SENATE COMMITTEE ON HEALTH

Senator Akilah Weber Pierson, Chair

BILL NO: AB 1540
AUTHOR: Mark González
VERSION: June 15, 2026
HEARING DATE: July 1, 2026
CONSULTANT: Reyes Diaz

SUBJECT: 988 Suicide & Crisis Lifeline: LGBTQ+ youth

SUMMARY: Requires the California Governor’s Office of Emergency Services to request a “press 3” function for 988 calls originating in California if an adequate specialized LGBTQ+ suicide prevention hotline has not been activated by the federal government under 988. Requires the California Health and Human Services Agency to identify and contract with a qualified entity that specializes in LGBTQ+ suicide prevention services to support the press 3 function. Contains an urgency clause that will make this bill effective upon enactment.

Existing law:

- 1) Enacts the Miles Hall Lifeline and Suicide Prevention Act and “988,” which is the three-digit telephone number designated by the Federal Communications Commission for the purpose of connecting individuals experiencing a behavioral health crisis with the national suicide prevention and mental health crisis hotline system in accordance with federal law. [GOV §53123.1 and 53123.1.5(a)]
- 2) Defines “988 center” to mean a center operating on a county or regional basis in California and participating in the National Suicide Prevention Lifeline network to respond to statewide or regional 988 calls. [GOV §53123.1.5(b)]
- 3) Defines “National Suicide Prevention Lifeline” or “988 Suicide & Crisis Lifeline” to mean the national network of local crisis hotline centers that provide free and confidential support to people in suicidal crisis or other behavioral health crisis 24 hours per day, seven days per week via a toll-free telephone hotline number that receives calls made through the 988 system, maintained by the Assistant Secretary for Mental Health and Substance Use. [GOV §53123.1.5(e)]
- 4) Requires the California Governor’s Office of Emergency Services (Cal OES), by July 1, 2024, to verify interoperability between and across 911 and 988, including verifying interoperability of telephone calls, texts, chats, and other similar capabilities consistent with the implementation of Next Generation 911. [GOV §53123.3]
- 5) Requires the California Health and Human Services Agency (CalHHS) to create a set of recommendations to support the five-year implementation plan for the 988 hotline, convene a state 988 advisory group for purposes of advising CalHHS on the set of recommendations to support the five-year implementation plan, and to post regular updates on its website regarding the implementation of 988 until December 31, 2029. Permits CalHHS to disband the advisory group after January 1, 2025. [GOV §53123.3]

This bill:

- 1) Requires CalHHS annually to determine whether an adequate specialized LGBTQ+ suicide prevention hotline is activated by the federal government under 988. Requires Cal OES and

CalHHS to implement the requirements of this bill only after CalHHS has made a determination that an adequate specialized LGBTQ+ suicide prevention hotline has not been activated by the federal government under 988.

- 2) Requires Cal OES to:
 - a) Request, no later than six months after CalHHS determines an LGBTQ+ suicide prevention hotline has not been activated, that the federal Substance Abuse and Mental Health Services Administration (SAMHSA) enable a press 3 function for calls originating in California. Requires a press 3 function to allow callers to dial 988 and press “3” to be automatically routed to a specialized call center. Requires Cal OES also to request authorization to enable text or chat features between a caller and a specialized 988 call center by texting “PRIDE” to 988; and,
 - b) Ensure that these technologies are available no later than 12 months following the approval by SAMHSA or its contracted 988 Suicide & Crisis Lifeline Administrator.
- 3) Requires CalHHS, no later than 12 months following SAMHSA approval of a press 3 function, to identify and contract with a qualified entity or entities that specialize in LGBTQ+ suicide prevention services. Requires CalHHS to determine the eligibility criteria, establish an application process, and administer funds to the qualified entity. Requires CalHHS also to take into consideration whether the applicant is or was previously a part of the 988 Suicide & Crisis Lifeline network, and to prioritize applicants that primarily service LGBTQ+ populations.
- 4) Requires a qualified entity to:
 - a) Become a 988 center. Makes the qualified entity eligible for funding and subject to the requirements under this bill;
 - b) Maintain policies that comply with state and federal medical privacy law, particularly the California Confidentiality of Medical Information Act, the federal Health Insurance Portability and Accountability Act of 1996, and all other applicable state laws governing the protection of sensitive personal and medical information;
 - c) Have a primary objective of reducing suicide rates or addressing mental health crises; and,
 - d) Demonstrate that its mission includes serving the LGBTQ+ population or that it employs staff or volunteers who have completed extensive training in responding to LGBTQ+ crisis contacts in a culturally competent manner. Requires the qualified entity to ensure that trained staff or volunteers are available to respond to those contacts through an established routing system.
- 5) Deems this bill an urgency statute necessary for the immediate preservation of the public peace, health, or safety and states that in order to address the urgent LGBTQ+ youth suicide crisis faced in California, it is necessary for this bill to take effect immediately.
- 6) Makes a series of findings and declarations regarding challenges faced by LGBTQ+ youth, such as bullying and the effects on mental health; attacks on rights, safety, and dignity; substantial increase in mental distress, which leads to suicide; and the defunding of the press 3 option by the federal government in July 2025. States the intent of the Legislature to reinstate the press 3 function in the state to continue its commitment to support the LGBTQ+ Californians who have benefited from this option since 2022.

FISCAL EFFECT: According to the Assembly Appropriations Committee, the author, along with other Assemblymembers, has requested augmentation of the 988 State Suicide and Behavioral Health Crisis Services Fund (988 Fund) for CalHHS and Cal OES to access up to \$5 million for fiscal year (FY) 2026-27, and up to \$2.6 million per year thereafter, to implement the provisions of this bill. The 988 Fund contains revenues generated by the 988 surcharge on end-user access lines, such as cell phone or home phone lines. Cal OES estimates initial costs of \$1.79 million and \$791,000 ongoing for three positions. Costs will depend on the number of 988 centers established to meet statewide demand. Cal OES states initial costs would include one-time expenses of up to \$1 million for telecommunications infrastructure. These costs would be part of the budget allocation requested by the author.

PRIOR VOTES:

Senate Emergency Management Committee:	7 - 1
Assembly Floor:	64 - 8
Assembly Appropriations Committee:	11 - 1
Assembly Communications and Conveyance Committee:	7 - 0
Assembly Health Committee:	12 - 3

COMMENTS:

- 1) *Author’s statement.* According to the author, we have seen decades of hard-fought rights and services rolled back under this federal administration, including access to this proven lifesaving hotline. We will not stand by as our youth are pushed into crisis, lost to suicide, and forgotten. With this bill, California affirms its commitment and ensures we will not abandon our young people. It is heartbreaking to see a lifeline that received 1.5 million contacts over 3 years, and 70,000 contacts per month, ripped away over political talking points. The Centers for Disease Control and Prevention found that 20% of surveyed students who identified as gay, lesbian, or bisexual reported having attempted suicide, compared to 6% of their heterosexual peers. This rate jumps to nearly 26% for transgender high school students.
- 2) *LGBTQ+ youth and suicide.* CalHHS’s December 2024 “AB 988 Chart Book: An Inventory of Needs, Services and Gaps of the Behavioral Health Crisis System” notes that in 2022, 4,312 Californians died by suicide and 11,002 died due to drug overdose. In 2022 in California, 44% of LGBTQ+ youth seriously considered suicide in the past year, including 54% of transgender and nonbinary youth; 4% attempted suicide in the past year, including 19% of transgender and nonbinary youth; 62% wanted mental health care in the past year and were unable to get it, including 58% of transgender and nonbinary youth; and, 70% reported that they have experienced discrimination based on their sexual orientation or gender identity. CalHHS states many LGBTQ+ individuals face historic marginalization in the behavioral health crisis system. Focus group participants and workgroup members shared that LGBTQ+ individuals’ negative experiences, such as being misgendered or encountering culturally insensitive care, can lead to long periods of disengagement. Similar experiences and feelings of mistrust were raised by Black/African American focus group participants and is bolstered by national polling data specific to 988 and related crisis services and other research evidence. California, like most other states, has also experienced a significant rise in overdose deaths from the opioid/fentanyl crisis. Across the state in 2021, more than 2.1 million Californian’s visited an emergency department with a behavioral health concern. In 2023, 25% of Californians reported that they or someone close to them needed treatment for

a serious mental illness, and 21% indicated that either they or someone close to them needed treatment for substance use or addiction issues.

- 3) *The state's crisis response system to date.* On December 31, 2024, CalHHS published its “Building California's Comprehensive 988-Crisis System: A Strategic Blueprint”—a five-year implementation plan (the Plan) presented to the Legislature—which noted that strengthening crisis services in California is critical. According to the Plan, the long-term aim of a comprehensive 988-crisis system, to help address the ongoing issues faced in the state, is to connect individuals who access 988 through a phone call, text, or chat with community-based providers capable of delivering a full spectrum of crisis care services while also providing them with tools and resources to help prevent future crises. Calls to the 911 system are answered by 441 locally governed public safety answering points (PSAPs). CalHHS's Chart Book also noted that an estimated 240 million calls are made to 911 in the U.S. annually, and in 2022, Californians contacted 911 26.3 million times. In the U.S., 80% of 911 calls are from wireless devices, and in California, 86% are from wireless devices and only 6% are wireline (the remaining contacts are from Voice over Internet Protocol [6%] and “other” [2%]). Studies estimate that 5% to 15% of all calls to 911 are for behavioral health emergencies. A Vera Institute analysis of 911 call data in nine cities estimated that an average of 19% of calls could be answered by unarmed crisis responders. To illustrate this number, the Chart Book states that using the 5% to 15% estimates as a rough proxy for current behavioral health calls to 911 would equate to between 1.35 million and 4 million current behavioral health-related calls being answered by 911 in California. If 10% of these behavioral health calls were instead transferred to 988, that would be an additional 135,000 to 400,000 calls annually (an increase of 35% to 96%) Yet, California is still working toward establishing and verifying interoperability between 911 and 988, as envisioned by AB 988 (Bauer Kahan, Chapter 747, Statutes of 2022). Another barrier is that most Californians said they knew nothing at all about 988 in a poll conducted by the Public Policy Institute of California in August to September 2023. Younger people ages 18 to 34 were more likely to know about 988 than older adults, which is similar to that of national polling.
- 4) *Press 3 option.* According to SAMHSA, the press 3 option was established as a pilot program in FY 2022 under a government agreement with The Trevor Project. The FY 2023 Omnibus included \$29.7 million to fund the press 3 option. Federal funding in FY 2024 for the press 3 services increased to \$33 million. As of June 2025, more than \$33 million in funds have been spent to support the subnetworks, fully expending the monies allocated for 988 Lifeline LGBTQ+ subnetwork services. On July 17, 2025, the President directed SAMHSA to discontinue all specialized services, including the press 3 option, in order to focus on serving all help seekers, including those previously served through the press 3 option.

On February 11, 2026, a group of bipartisan Congressional members sent a letter to the U.S. Department of Health and Human Services (HHS) requesting that SAMHSA take immediate, concrete steps to restart the press 3 option ensuring they are fully operational no later than February 28, 2026. The members stated the FY 2026 Labor, Health and Human Services, Education, and Related Agencies appropriations bill directs HHS to support the 988 press 3 option at a funding level of \$33.1 million. The letter further stated that the funding reflects bipartisan, Congressional recognition that tailored crisis support for populations at higher risk of suicide, including LGBTQ+ youth, is not optional; it is essential.

However, to date, the press 3 option has not been restored.

- 5) *California partnership with the Trevor Project.* Following SAMHSA's announcement ending support and funding for the press 3 option, Governor Newsom announced a partnership with The Trevor Project and CalHHS to provide the state's 988 crisis counselors enhanced competency training from experts, ensuring better attunement to the needs of LGBTQ+ youth, on top of the specific training they already receive. The Governor stated that more than 1,000 crisis counselors would be offered this new training beginning in December 2025 through March 2026. The training session was designed to improve understanding of LGBTQ+ identities, support needs, risk factors, and best practices for compassionate, effective crisis intervention at a time when California has seen a notable rise in LGBTQ+ youth turning to the state's 988 centers for help. Early data showed significant increases in contact volume after the President directed SAMHSA to terminate the press 3 option.
- 6) *Double referral.* This bill was heard in the Senate Emergency Management Committee on June 23, 2026, and passed with a 7-1 vote.
- 7) *Related legislation.* AB 1988 (Pellerin) would require an operator to adopt and make publicly available a policy governing its protocol for identifying and responding to credible crisis expressions and, for each companion chatbot an operator makes available to users in this state, implement a system for monitoring and detecting credible crisis expressions in user conversations with companion chatbots. AB 1988 requires, if the monitoring system detects a credible crisis expression, the operator to take certain actions, including commence a crisis interruption pause. *AB 1988 is set for hearing on June 29, 2026, in the Senate Privacy, Digital Technologies, and Consumer Protection Committee.*

AB 2093 (Bauer-Kahan) would make various changes to the state's 988 system, including establishing a single statewide interoperability platform capable of facilitating real-time communication and warm handoffs between 988 centers and 911 PSAPs; requiring the development of protocols governing the transfer of calls and communications from 911 public safety answering points to 988 centers; and, expanding authority for the Department of Health Care Services and removing authority from the Cal OES in administering the 988 system. *AB 2093 is set for hearing on June 30, 2026, in the Senate Emergency Management Committee.*

- 8) *Prior legislation.* AB 988 (Mathis, Chapter 460, Statutes of 2023) requires an entity receiving funds from the 988 State Suicide and Behavioral Health Crisis Services Fund to report on the number of individuals served who self-identified as veterans or active military personnel, if known.

AB 118 (Committee on Budget, Chapter 42, Statutes of 2023) makes several changes relevant to 988, such as requires a health care service plan or health insurer that is contacted by a 988 center, mobile crisis team, or other provider of behavioral health crisis services to, within 30 minutes of initial contact, either authorize post-stabilization care or inform the provider that it will arrange for the prompt transfer of the enrollee's care to another provider; revises the statutory definition of 988; requires CalHHS to create recommendations to support the five-year implementation plan; and, authorizes the Legislature to consider additional uses for 988 revenue based on CalHHS and 988 policy advisory group recommendations.

AB 988 (Bauer Kahan, Chapter 747, Statutes of 2022) establishes the 988 Crisis Hotline Center for the purpose of connecting individuals experiencing a mental health crisis with suicide prevention and mental health services, as specified. AB 988 requires Cal OES to require an entity seeking funds from the 988 Fund to annually file an expenditure and outcomes report.

- 9) *Support.* The California Alliance for Child and Family Services and Equality California, as co-sponsors, state that since 2022, 988—the nation’s official hotline for suicide prevention and crisis management—has contracted with several non-profit organizations to create a subnetwork of providers offering specialized services designed to prevent LGBTQ+ youth suicide. By calling “988” and pressing “3,” help seekers would be automatically routed to this subnetwork, and since its creation, over 1.5 million contacts have relied on this service. From the State of California, the LGBTQ+ youth line received 73,000 calls from July 2024 to June 2025, representing 9% of all calls to the subnetwork. Additionally, from May 2024 to April 2025, the LGBTQ+ line received 680,127 calls, representing approximately 14% of the 5,153,905 calls that 988 received during that period, reflecting the critical need for this specialized resource. On July 17, 2025, by order of the President, SAMHSA ended all contracts with 988 subnetwork providers, leaving no specialized care services for queer and trans youth. This choice has resulted in even fewer affirming mental health resources for LGBTQ+ youth, a community that already lacks access to inclusive supports. LGBTQ+ youth also experience heightened risk of verbal, physical, and online harassment, which negatively affects their mental health and increases rates of suicidal ideation or death by suicide. Given the disproportionate risk of suicide for LGBTQ+ individuals, queer youth need and deserve specialized suicide prevention services. This bill provides a much-needed solution by re-establishing the 988 “Press 3” program that successfully helped many LGBTQ+ individuals before the federal government eliminated the program. This bill also incorporates amendments to ensure that the State will not duplicate efforts, should the federal government restart the “Press 3” line nationally. This bill is a life-saving bill, ensuring that all LGBTQ+ youth in California, once again, have access to critical and lifesaving suicide and crisis intervention. The host of supporters, largely youth, LGBTQ+, and behavioral health advocates, as well as providers, echo the sentiments of the co-sponsors.
- 10) *Opposition.* Opponents largely argue that while they strongly support effective suicide prevention services for all young people, including for vulnerable gay, lesbian, and bisexual youth, their concerns are with the structure of this bill and the lack of safeguards surrounding the organizations that may receive state funding and be integrated into California’s 988 system. This bill requires California to establish a dedicated routing option that directs youth callers to LGBTQ+ specific crisis providers selected through a grant program administered by CalHHS. Opponents further state that although the bill does not name a specific provider, the structure closely mirrors the previously operated national “press 3” program, which routed calls to organizations such as The Trevor Project. The Trevor Project operates TrevorSpace, an online social platform marketed to youth ages 13 to 24. In addition, this bill would route minors in acute mental health crises to organizations operating within this broader ecosystem without requiring any independent child-safety review. Opponents believe all Californians deserve equal, individualized crisis care. Creating separate pathways unnecessarily fragments the system, adds complexity, and places additional costs on taxpayers and ratepayers.

SUPPORT AND OPPOSITION:

Support: California Alliance for Child and Family Services (co-sponsor)

Equality California (co-sponsor)
988 California Crisis Center Consortium
Advocates for Trans Equality
Alameda County Office of Education
All for Kids
Alliance College-Ready Public Schools
Alliance for Children's Rights
Alliance for Transyouth Liberation
American Academy of Pediatrics, California
American Foundation for Suicide Prevention
Asian Americans Advancing Justice Southern California
Behavioral Health Services Oversight and Accountability Commission
Cal Voices
California Academy of Child and Adolescent Psychiatry
California Alliance of Caregivers
California Association of Alcohol and Drug Program Executives, Inc.
California Association of Marriage and Family Therapists
California Association of School Psychologists
California Association of Social Rehabilitation Agencies
California Behavioral Health Planning Council
California Commission on the Status of Women and Girls
California Family Resource Association
California Federation of Teachers
California Fire Chiefs Association
California League of United Latin American Citizens
California Legislative LGBTQ Caucus
California LGBTQ Health and Human Services Network
California Medical Association
California Primary Care Association Advocates
California Psychological Association
California School-Based Health Alliance
California State Association of Psychiatrists
California Youth Empowerment Network
CalPride Valle Central
Casa Pacifica Centers for Children and Families
Central Valley Pride
Child Abuse Prevention Center
Children Now
City of West Hollywood
County Behavioral Health Directors Association
County of Humboldt
County of Los Angeles
County of Santa Clara
County Welfare Directors Association of California
Courage California
Didi Hirsch Mental Health Services
Disability Rights California
Drug Policy Alliance
El/La Para TransLatinas
Fire Districts Association of California

Fred Finch Youth Center
Gender Affirming Professionals
Health Officers Association of California
Hmong Innovating Politics
Indivisible CA: StateStrong
Interim, Inc.
Jewish Center for Justice
John Burton Advocates for Youth
Latino Equality Alliance
Legislative Action Committee - Santa Clara County School Boards Association
LGBTQ+ Inclusivity, Visibility, and Empowerment
Lieutenant Governor Eleni Kounalakis
Los Angeles LGBT Center
Los Angeles LGBTQ Chamber of Commerce
Los Angeles Unified School District
Lyon-Martin Community Health Services
Mental Health Advocacy Services
Mental Health America of California
Mental Health Association of San Francisco
Multi-Faith Action Coalition
National Alliance on Mental Illness – California
National Association of Social Workers California
National Center for Youth Law
National Health Law Program
Our Family Coalition
Pacific Clinics
Parents, Families, and Friends of Lesbians and Gays (PFLAG) Fresno
PFLAG Oakland-East Bay
PFLAG Sacramento
PFLAG San Jose/Peninsula
Planned Parenthood Affiliates of California
Pride At the Pier
Public Counsel
Racial and Ethnic Mental Health Disparities Coalition
Rainbow Pride Youth Alliance
San Diego Pride
San Francisco AIDS Foundation
Santa Monica Democratic Club
Seneca Family of Agencies
St. Anne's Family Services
The Children's Partnership
The San Diego LGBT Community Center
The Translatin@ Coalition
Transfamily Support Services
Transgender Health and Wellness Center
University of California Student Association
Viet Voices
Youth Leadership Institute

Oppose: California Baptist for Biblical Values
California Family Council
California Teachers Supporting Gender-nonconforming Youth
Californians United for Sex-based Evidence in Policy and Law
Democrats for an Informed Approach to Gender
Lesbians Advocating for a Resilient Future
LGB Alliance USA
Our Duty-USA
PERK
Save Glendora Schools
SFV Alliance
Women are Real

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