

Date of Hearing: April 7, 2026

ASSEMBLY COMMITTEE ON HEALTH
Mia Bonta, Chair
AB 2093 (Bauer-Kahan) – As Amended March 26, 2026

SUBJECT: State 988 advisory group.

SUMMARY: Extends the date at which the California Health and Human Services Agency (CHHSA) is authorized to disband the 988 advisory group from January 1, 2025 to January 1, 2030. Requires the advisory group to meet once per quarter until December 31, 2029.

EXISTING LAW:

- 1) Designates the 3-digit telephone number “9-8-8” as the national suicide prevention and mental health crisis hotline pursuant the National Suicide Hotline Designation Act of 2020 (NSHD). (Public Law No: 116-172)
- 2) Defines “988” to mean 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 Section 52.200 of Title 47 of the Code of Federal Regulations. [Government Code (GOV) § 53123.1.5 (a)]
- 3) 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)]
- 4) 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 under Section 520E-3 of the Public Health Service Act, Section 290bb-36c of Title 42 of the United States Code. [GOV § 53123.1.5 (e)]
- 5) Requires CHHSA to, no later than December 21, 2024, 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 CHHSA on the set of recommendations to support the five-year implementation plan, and to post regular updates on the CHHSA internet website regarding the implementation of 988 until December 31, 2029. Permits CHHSA to disband the advisory group after January 1, 2025. [GOV § 53123.3]
- 6) Establishes the 988 State Suicide and Behavioral Health Crisis Services Fund and deposits funds through a surcharge on telephone access lines (currently set at \$0.05 through calendar year 2026 by the Governor’s Office of Emergency Services (OES)) up to maximum of \$0.30 per access line. [GOV § 53123.4 (a), (b)]
- 7) Authorizes OES, in consultation with the State Department of Health Care Services (DHCS), to adopt regulations regarding how 988 funds received must be disseminated to support the

operations of the 988 system and related behavioral health crisis services. [GOV § 53123.4 (c)]

- 8) Requires OES to require an entity seeking moneys available through the 988 fund to annually file an expenditure and outcomes report containing specified information, including, among other things, the number of individuals served, the outcomes for individuals served, if known, and measures of system performance, including capacity, wait times, and the ability to meet demand for services. [GOV § 53123.4 (d)]

FISCAL EFFECT: Unknown. This bill has not been analyzed by a fiscal committee.

COMMENTS:

- 1) **PURPOSE OF THIS BILL.** According to the author, AB 988 passed with broad bipartisan support because all communities struggle to assist people in mental health crisis. It is imperative that the 988 system achieves its original goals of interoperability and teamwork across the departments tasked with 988 implementation. Continued assistance and oversight from the advisory group are key to making success a reality. The author concludes that failure of this program is not an option: the lives of Californians depend on it.
- 2) **BACKGROUND.**
 - a) **Policy advisory group.** AB 988 (Bauer Kahan), Chapter 747, Statutes of 2022, requires CHHSA to establish and convene a “state 988 advisory group,” which has been named the 988-Crisis Policy Advisory Group, to advise on the development of recommendations for a five-year implementation plan for a comprehensive 988 system. Despite statutory authority to disband the group as of January 1, 2025, CHHSA resumed meetings in January 2026 and established new 988-Crisis Workgroups focusing on 988 integration and sustainable funding. This bill would allow the group to be disbanded no sooner than January 1, 2030.
 - b) **988 Oversight.** The Assembly Select Committee on California’s Mental Health Crisis met on December 2, 2025, to explore state level implementation of 988, county and local call center coordination, and perspectives from practitioners are the ground. Speakers identified the need for sustainable funding, strengthening the coordination between 911 and 988, and developing a resource directory, among other things. AB 988 has also been selected as part of this year’s new Outcomes Review oversight tool. The purpose of the Outcomes Review process is to assess, review, and improve implementation of key enacted legislation to ensure that the laws passed by the Legislature continue to improve the lives of Californians.
 - c) **Trailer Bill Language (TBL).** The Administration has posted proposed TBL that, according to DHCS, would establish a process and standard criteria for entities to apply for approval as “designated 988 centers.” Additionally, DHCS proposes language to provide authority for DHCS to establish standards to oversee and govern the performance of designated 988 centers, including staffing requirements, training requirements, clinical and triage protocols for behavioral health services, measures to assess the quality of 988 services, and performance requirements. According to DHCS, without explicit statutory authority, it cannot adequately designate, fund, or oversee designated 988 centers, align with national standards and best practices for ensuring trauma-informed, person-centered,

and culturally responsive care, and achieve the goals set forth by the 988 policy advisory group.

The TBL also provides DHCS with the authority to oversee the funding of 988 centers, designated 988 centers, and mobile crisis teams for staffing necessary to provide 988 and mobile crisis services. It would also require OES, in consultation with DHCS, to allocate and distribute funds to 988 centers and designated 988 centers for the acquisition of technology and equipment as appropriated by the Legislature.

- 3) SUPPORT.** The Steinberg Institute (SI) is the sponsor of this bill and states in support that, as with any large-scale systems transformation, implementation remains ongoing and complex. California continues to face significant challenges related to sustainable funding, 911 interoperability, governance and coordination, and the integration of mobile crisis teams and other in-person response options. These issues require continued collaboration across state departments, counties, providers, and more. SI argues that by making the 988 Policy Advisory Group permanent, this bill ensures California maintains a structured, transparent forum to address implementation challenges, strengthen coordination across agencies, and support continuous improvement of the crisis response system.

The Miles Hall Foundation also supports this bill stating that the 988 Policy Advisory Group has served as a critical forum for collaboration. The Advisory Group has helped identify implementation barriers, elevate stakeholder perspectives, and provide practical guidance to state leaders as California continues to build out a comprehensive crisis response system. This collaborative structure has been particularly valuable given the multi-agency nature of 988 implementation and the need for ongoing course correction as the system evolves. The Miles Hall Foundation concludes that this bill recognizes that 988 is not a one-time implementation, but a long-term systems transformation that requires ongoing guidance and coordination.

- 4) DOUBLE REFERRAL.** This bill has been double referred; upon passage in this committee, it will be referred to the Assembly Communications and Conveyance Committee.

5) RELATED LEGISLATION.

- a)** AB 1540 (Gonzalez) would require OES to request the federal Substance Abuse and Mental Health Services Administration to restore the “press 3” option to route calls originating in California to specialized LGBTQ+ services, and OES and CHHSA to implement within 12 months of approval. AB 1540 is pending in the Assembly Communications and Conveyance Committee.
- b)** AB 1988 (Pellerin) would require a companion chatbot that detects a credible crisis expression to take specified actions, including providing 988 contact information. AB 1988 is pending in the Assembly Privacy and Consumer Protection Committee.

6) PREVIOUS LEGISLATION.

- a)** 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.

- b) AB 118 (Committee on Budget), Chapter 42, Statutes of 2023, made several changes relevant to 988. 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. Revised the statutory definition of 988, requires CHHSA to create recommendations to support the five-year implementation plan, authorizes the Legislature to consider additional uses for 988 revenue based on CHHSA and 988 policy advisory group recommendations, and more.

- c) AB 988 (Bauer Kahan), Chapter 747, Statutes of 2022, established 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. Requires OES to require an entity seeking funds from the 988 Fund to annually file an expenditure and outcomes report.

REGISTERED SUPPORT / OPPOSITION:

Support

Steinberg Institute (sponsor)
The Miles Hall Foundation

Opposition

None on file

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