NATIONAL SUICIDE HOTLINE IMPROVEMENT ACT OF 2017

REPORT

OF THE

COMMITTEE ON COMMERCE, SCIENCE, AND TRANSPORTATION

ON

S. 1015

MARCH 13, 2018.—Ordered to be printed
NATIONAL SUICIDE HOTLINE IMPROVEMENT ACT OF 2017

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Mr. THUNE, from the Committee on Commerce, Science, and Transportation, submitted the following

REPORT

[To accompany S. 1015]

[Including cost estimate of the Congressional Budget Office]

The Committee on Commerce, Science, and Transportation, to which was referred the bill (S. 1015) to require the Federal Communications Commission to study the feasibility of designating a simple, easy-to-remember dialing code to be used for a national suicide prevention and mental health crisis hotline system, having considered the same, reports favorably thereon with an amendment (in the nature of a substitute) and recommends that the bill (as amended) do pass.

PURPOSE OF THE BILL

S. 1015 would determine if implementing a nationwide, dedicated, 3-digit dialing code for suicide prevention and mental health (e.g. “9-1-1” and “4-1-1”) would be beneficial in preventing suicides. It would require the Federal Communications Commission (FCC), in consultation with the Assistant Secretary for Mental Health and Substance Use at the Department of Health and Human Services (Assistant Secretary) and the Secretary of Veterans Affairs (Secretary), to conduct a study to explore the effects of using a 3-digit dialing code, similar to 9-1-1 or 4-1-1, for a national suicide prevention and mental health crisis line. It also would examine the effectiveness of the current National Suicide Prevention Lifeline (NSPL), including how well it addresses the needs of veterans.

BACKGROUND AND NEEDS

According to the National Center for Health Statistics, suicide rates in the United States have surged to their highest levels in
nearly 30 years. The overall suicide rate rose by 24 percent from 1999 to 2014. The NSPL (1-800-273-TALK (8255)), launched by the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration (SAMHSA), is a network of over 160 crisis centers that provides a toll-free hotline 24 hours a day, 7 days a week to anyone experiencing a mental health or suicidal emergency or crisis.

Some have suggested that the creation of an easy-to-remember 3-digit dialing code for a national suicide prevention and mental health crisis line would make it easier for people contemplating suicide or suffering from other mental health issues to seek out help. They have pointed to the success of the 9-1-1 system as precedent for this proposal. In 1967, the President's "Commission on Law Enforcement and Administration of Justice" recommended the creation of a single telephone number that could be used nationwide for reporting emergencies.

In 1968, the FCC agreed upon the number 9-1-1, one of eight N11 dialing codes, as a simple, easy-to-remember telephone number to be the dedicated number for reporting emergencies. 9-1-1 quickly became the national emergency number for individuals in the United States to access police, fire, and ambulance services.

Advocates argued, based on the success of the 9-1-1 nationwide emergency number, that a study by the FCC regarding the use of a simple, easy-to-remember dedicated 3-digit dialing code could start the process toward designation of such a code for suicide prevention and mental health issues.

**Legislative History**

S. 1015 was introduced on May 3, 2017, by Senators Hatch (for himself and Senator Donnelly) and is also cosponsored by Senators Sullivan, Heller, Baldwin, Schatz, Shaheen, and Udall.

On October 4, 2017, the Committee met in open Executive Session and, by a voice vote, ordered S. 1015 reported favorably with an amendment (in the nature of a substitute). A substitute amendment offered by Senator Sullivan was adopted by the Committee to clarify certain reporting requirements under the bill.

Representative Chris Stewart (R–UT) introduced a companion bill in the House of Representatives (H.R. 2345) on May 3, 2017. That measure has been referred to the Committee on Energy and Commerce's Subcommittee on Communications and Technology of the House of Representatives. H.R. 2345 is identical to S. 1015 as introduced and shares bipartisan support.

**Estimated Costs**

In accordance with paragraph 11(a) of rule XXVI of the Standing Rules of the Senate and section 403 of the Congressional Budget
Act of 1974, the Committee provides the following cost estimate, prepared by the Congressional Budget Office:

_S. 1015—National Suicide Hotline Improvement Act of 2017_

_S. 1015_ would require the Federal Communications Commission (FCC) to coordinate with the Department of Veterans Affairs (VA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) within the Department of Health and Human Services to study and report on the feasibility of designating a N11 dialing code as a national suicide prevention and mental health crises hotline system.1

Under the act, VA and SAMHSA would each be required to complete a separate study and analysis that would be used by the FCC to develop a comprehensive study and report that includes information from those two studies. The FCC would be required to provide additional analysis and recommendations on the logistics and costs to develop such a dialing code if the other agencies recommend that a dialing code be used.

Based on an analysis of information from the affected agencies, CBO estimates that implementing the provisions of _S. 1015_ would cost less than $500,000 over the 2018–2022 period for the agencies to coordinate and develop the analyses and reports required under the act; that spending would be subject to the availability of appropriated funds.

Enacting _S. 1015_ would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply.

CBO estimates that enacting _S. 1015_ would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2028.

_S. 1015_ contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act.

The CBO staff contact for this estimate is Stephen Rabent. The estimate was approved by H. Samuel Papenfuss, Deputy Assistant Director for Budget Analysis.

REGULATORY IMPACT STATEMENT

In accordance with paragraph 11(b) of rule XXVI of the Standing Rules of the Senate, the Committee provides the following evaluation of the regulatory impact of the legislation, as reported:

NUMBER OF PERSONS COVERED

The bill would not authorize any new regulations and, thus, would not subject any individuals or businesses to new regulations.

ECONOMIC IMPACT

The bill would not have an adverse economic impact on the Nation.

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1The term N11 dialing code refers to an abbreviated dialing code consisting of three digits, of which the first may be any digit other than one or zero and each of the last two digits be one.
PRIVACY

The bill would not have any adverse impact on the personal privacy of individuals.

PAPERWORK

The legislation would not increase paperwork requirements for private individuals or businesses. The bill would require three reports from the Federal Government. The first report would be submitted by the Assistant Secretary not later than 180 days after the date of enactment. The second report would be submitted by the Secretary to the FCC not later than 180 days after the date of enactment. The third report would be submitted by the FCC, in coordination with the Assistant Secretary and the Secretary, on the primary study not later than 1 year after the date of enactment.

CONGRESSIONALLY DIRECTED SPENDING

In compliance with paragraph 4(b) of rule XLIV of the Standing Rules of the Senate, the Committee provides that no provisions contained in the bill, as reported, meet the definition of congressionally directed spending items under the rule.

SECTION-BY-SECTION ANALYSIS

Section 1. Short title.

This section would provide that the Act may be cited as the “National Suicide Hotline Improvement Act of 2017.”

Section 2. Definitions.

This section would define “Commission” as the FCC; a “covered dialing code” as a simple, easy-to-remember, 3-digit dialing code; and “N11 dialing codes” as a 3-digit dialing code where the first digit is any digit other than “1” or “0” and the last 2 digits are “1s”.

Section 3. Studies and reports.

Not later than 1 year after the date of enactment, the FCC, in coordination with the Assistant Secretary and the Secretary, would be required to conduct a study that would examine the following: the feasibility of designating a N11 or other covered dialing code to be used for a national suicide prevention and mental health crisis hotline system; and the effectiveness of the NSPL, including how well it addresses the needs of veterans. As part of the study, the FCC would be required to consider each of the N11 dialing codes and other covered dialing codes, and consult with the North American Numbering Council.

To assist the FCC in studying the feasibility and effectiveness of creating a N11 or other covered dialing code for a national suicide prevention and mental health crisis hotline system, this section would direct the following: the Assistant Secretary to provide the FCC with a report examining the impact of an N11 or other covered dialing code on suicide prevention, as well as the effectiveness of the NSPL; and the Secretary to provide the FCC with a report on how well the NSPL and the Veterans Crisis Line are working...
to address the needs of veterans. Both reports would be due no later than 180 days after the date of enactment.

The section would direct the FCC to submit a report on its study to the appropriate committees of Congress not later than 1 year after the date of enactment. That report would include a recommendation regarding whether a particular N11 or other covered dialing code should be used for a national suicide prevention and mental health crisis hotline system. If the FCC does recommend the use of a particular N11 or other covered dialing code, the report would be required to do the following: outline the logistics of designating that code; estimate the costs associated with designating that code; provide recommendations for designating that code; provide a cost-benefit analysis comparing that code with the NSPL; and make other recommendations, as appropriate, for improving the NSPL.

**Changes in Existing Law**

In compliance with paragraph 12 of rule XXVI of the Standing Rules of the Senate, the Committee states that the bill as reported would make no change to existing law.