

## National and State Policy Updates

### Michigan Updates

- No updates on state bills since November meeting. All bills below have rolled over to the 2022 session.

<b>Bill and Sponsor</b>	<b>Summary</b>	<b>Status</b>
SB 321 (Santana)	Department of Education develop and adopt professional development standards for teachers on recognizing and addressing mental health and suicide prevention needs.	Passed Senate Substitute version in <b>House Education Committee</b>
SB 192 (Hertel)	Amend school code to mandate evidence-based suicide prevention training for K-12 educators and age-appropriate material for students.	<b>In Senate Education and Career Readiness Committee</b>
HB 4651 (Brabec)	Ban conversion therapy for minors (“A mental health professional shall not engage 1in conversion therapy with a minor. A mental health professional 2who violates this section is subject to disciplinary action and 3licensing sanctions for unprofessional conduct...”)	<b>In House Families, Children, and Seniors Committee</b>
SB 367 (McMorrow)	Ban conversion therapy for minors (“A mental health professional shall not engage 1in conversion therapy with a minor. A mental health professional 2who violates this section is subject to disciplinary action and 3licensing sanctions for unprofessional conduct...”)	<b>In Senate Health Policy and Human Services Committee</b>
HB 5120 (Thanedar)	Require mental health training for law enforcement officers. Minimum standards for this training would be established by the Commission on Law Enforcement Standards.	<b>In House Government Operations Committee</b>
HB 5073 (Peterson)	Require mental health training for law enforcement officers. Minimum standards for this training would be established by the Commission on Law Enforcement Standards. Also includes implicit bias training, and de-escalation and use of force standards	<b>In House Government Operations Committee</b>
HB 5353 (Whiteford)	Revise mental health code to (1) designate MiCAL as the state’s crisis hotline center, (2) mandate MiCAL practice and reporting standards aligned with Lifeline standards, (3) require integration with emergency response systems and health crisis services, (4) add language on mobile crisis teams and crisis stabilization, (5) mandates crisis care coordination, (6) designate the Department as responsible for 988 messaging, (7) mandate meeting Lifeline standards for reaching high-risk and specialized populations, (8) require follow-up services, and (9) require the Department to prove and fund mobile crisis teams.	<b>In House Health Policy Committee</b>
HB 5354 (Whiteford)	Establishes a 988 suicide prevention and mental health crisis hotline fund within the state treasury with DHHS as administrator. State 988 charge of 55 cents per month. Prepaid wireless charge of 2% per retail transaction.	<b>In House Health Policy Committee</b>

## National Updates

- SAMHSA announced the release of [\\$282 million](#) in funding to support 988 implementation:
  - **\$177 million to support the national Lifeline backup centers, text/chat centers and Spanish language crisis centers.** The funding will be awarded directly to Vibrant Emotional Health as the Administrator of the Lifeline. Of the \$177 million, \$152 million is new funding.
  - **\$105 million to improve response and build up local response capacity to 988 contacts going to local call centers.** Local call centers within the Lifeline network do not receive any direct federal funding (although they may receive small stipends from Vibrant). However, this \$105 million is a new opportunity for states to directly receive federal dollars to help increase capacity of local call centers. States must apply by **January 31, 2022**. Funding is not competitive and will be awarded based upon a formula that considers the number of calls to the Lifeline in that state in FY '21.
- The Centers for Medicare & Medicaid Services (CMS) released [guidance](#) on 12/28/21 outlining a new option for states to support community-based mobile crisis intervention services for individuals covered by Medicaid. While several states have mobile crisis intervention services in place, the American Rescue Plan Act gave states new authority (for 5 years) and provides additional federal funding (increased 85% federal match for 3 of the 5 years) for qualifying mobile crisis services under Medicaid. The new Medicaid option requires that mobile crisis intervention services be delivered by a multi-disciplinary team including at least one qualified behavioral health care professional and that services be available 24 hours a day, every day of the year. The guidance provides details on how states can offer these services to take advantage of these additional federal dollars.
- Labor-H and overall appropriations for the next fiscal year have not advanced in Congress. A second Continuing Resolution (CR) was signed into law by President Biden on Friday December 3, 2021. This extends the CR to February 18, 2022.