STATE OF CALIFORNIA
Budget Change Proposal - Cover Sheet
DF-46 (REV 03/25)

Fiscal Year	Business Unit Number	Department
2026-27	0530 4120	California Health and Human Services Agency (CalHHS) Emergency Medical Services Authority (EMSA)

Hyperion Budget Request Name	Relevant Program or Subprogram
0530-012-BCP-2026-MR & 4120-021-BCP-2026-MR	Multiple

Budget Request Title
988 and the Behavioral Health Crisis Continuum Implementation

Budget Request Summary
The California Health and Human Services Agency (CalHHS) requests $445,000 in 2026-27, $439,000 in 2027-28 and 2028-29 from the 988 State Suicide and Behavioral Health Crisis Services Fund, to fulfill its responsibilities as required by Assembly Bill (AB) 988, which includes convening the 988-Crisis Policy Advisory Group and producing an annual progress report.

The Emergency Medical Services Authority (EMSA) requests $203,000 in 2026-27 from the 988 State Suicide and Behavioral Health Crisis Services Fund to support statewide guidance on behavioral health crisis response for local Emergency Medical Services Agencies.

Requires Legislation (submit required legislation with the BCP)	Code Section(s) to be Added/Amended/Repealed
☒ Trailer Bill Language ☐ Budget Bill Language ☐ N/A	Various

Does this BCP contain information technology (IT) components? ☐ Yes ☒ No *If yes, departmental Chief Information Officer must sign.*	Department CIO	Date
	N/A	N/A

For IT requests, specify the project number, the most recent project approval document (FSR, SPR, S1BA, S2AA, S3SD, S4PRA), the approval date, and the total project cost.

Project No. N/A **Approval Date:** N/A

Project Approval Document: N/A **Total Project Cost:** N/A

If proposal affects another department, does other department concur with proposal? ☐ Yes ☐ No
Attach comments of affected department, signed and dated by the department director or designee. N/A

Prepared By	Date	Reviewed By	Date
Anh Thu Bui	5/14/2026	Stephanie Welch	5/14/2026
Department Director	**Date**	**Agency Secretary**	**Date**
Brian Kaplun	5/14/2026	Kim Johnson	5/14/2026

Department of Finance Use Only

Additional Review: ☐ Capital Outlay ☐ ITCU ☐ FSCU ☐ OSAE ☐ Dept. of Technology

Principal Program Budget Analyst	Date submitted to the Legislature
Shelina Noorali	5/14/2026

A. Problem Statement

The transformation of California's behavioral health system is a priority for the state. A key element of this transformation is building a comprehensive behavioral health crisis care continuum, as outlined in the CalHHS Behavioral Health Crisis Care Continuum Plan (CCC-P). The CCC-P envisions a future where person-centered behavioral health crisis services are seamlessly connected to provide an equitable and accessible continuum of care for all Californians.

The National Suicide Hotline Designation Act of 2020 (NSHD) designated 988 as the three-digit number for the national suicide prevention and mental health crisis hotline. The NSHD requires the Federal Communications Commission (FCC) to designate 988 as the universal telephone number for a national suicide prevention and mental health crisis hotline, which operates through the National Suicide Prevention Lifeline. To fund the 988 system, NSHD authorizes states to impose a fee on access lines for providing 988 related services.

Assembly Bill (AB) 988, the Miles Hall Lifeline and Suicide Prevention Act (Chapter 747, Statutes of 2022), was enacted in September 2022 to implement the NSHD, in compliance with the FCC's rules. It created the 988 State Suicide and Behavioral Health Crisis Fund financed through a 988 surcharge for the 2023 and 2024 calendar years at $0.08 per access line per month, and beginning January 1, 2025, at an amount based on a specified formula, but not greater than $0.30 per access line per month.

AB 988 requires CalHHS to establish an advisory body, the 988-Crisis Policy Advisory Group (PAG), to advise the state on the development of recommendations to support a five-year implementation plan (AB 988 Five-Year Plan) for a comprehensive 988 system. CalHHS received $5.5 million in the 2023 Budget Act, with extended availability until June 30, 2028, to complete this work.

The AB 988 Five-Year Plan includes a landscape analysis of existing services and describes recommendations for how to expand, improve, and link crisis services with the goal of fully implementing the 988-crisis system by June 30, 2030. The AB 988 Five-Year Plan was submitted to the Legislature in January 2025. The Plan provides a state-led process to operationalize 988 as a user-friendly and universally accessible entry point into crisis care for all Californians, and proposes state governance, relationships, activities, and communication plans that would allow for all implementation partners to work collaboratively to improve upon the current legacy system by establishing statewide standards, access, and integration to support alignment with California's recent initiatives in transforming behavioral health. These represent an organized process to integrate the various parts of 988-crisis system that already exist and need statewide improvement and coordination: the National Suicide Prevention Lifeline centers that became grandfathered into the current CA 988 Crisis Centers but do not yet have statewide quality and training standards; the county access and crisis lines that connect to mobile crisis dispatch but do not yet connect to 988; the 911 dispatch centers that need to transfer to 988 those behavioral health crises that do not need public safety interventions, but do not yet have statewide guidance on how to do so; the need for medical triage and evaluation standards in 988 that would be on par with the standards in 911 and Emergency Medical Services, and the need to connect help-seekers to appropriate immediate and ongoing medical, social and behavioral health resources, provide quality, culturally competent care and avert future crises.

In the 2025 Budget Act, CalHHS received one-time funding of $575,000 to support CalHHS' capacity to operationalize the AB 988 Five-Year Plan including working with the California

Governor's Office of Emergency Services (Cal OES) and the California Department of Health Care Services (DHCS) as well as with the California 988 Crisis Centers. Rapid changes in federal policy and funding have accelerated the need for state leadership in the 988-crisis system. For example, the federal government ended funding for 988 specialized services for LGBTQ+ young people in July 2025. CalHHS responded to the loss of national 988 specialized services by creating a training and technical assistance partnership with The Trevor Project to support the unique needs of LGBTQ+ young people in California. Through a contract with CalHHS, The Trevor Project is providing California 988 crisis counselors with enhanced competencies, and is strengthening statewide capacity, to identify risk factors and support best practices for effective crisis intervention to populations at significantly higher risk for suicide/behavioral health crisis.

Emergency Medical Services Authority (EMSA): EMSA is responsible for the coordination, administration, and integration of California's statewide emergency medical services (EMS) system.

California EMS providers make more than 4,900,000 patients contacts annually. A notable subset of these patients, approximately 400,000 (13 percent of all transported patients) have a paramedic Primary Impression which includes a behavioral health or substance use disorder (SUD) diagnosis. This translates to an average of over 1,095 behavioral health crises being addressed by EMS every single day. Behavioral health crisis has emerged as one of the top 5 paramedic Primary Impressions for every local EMS agency across the state. Many of these patients would be better served with 988 or mobile behavioral health teams, than transport to acute care emergency departments (EDs).

EMSA will issue statewide guidance for local EMS Agencies to support coordination between 911 and 988. EMSA will help 988 become a bridge to "out-of-hospital" care linked to behavioral health by evolving Community Paramedicine and Triage to Alternate Destinations Programs with the goal of reducing health inequities and disparities for A Healthy California for All.

Resource History for CHHS
(Dollars in thousands)

Program Budget	2023-24	2024-25	2025-26
Authorized Expenditures	5,500	0	575
Actual Expenditures	1,669	2,259[1]	389[2]
Revenues	-	-	-
Authorized Positions	-	-	-
Vacancies	-	-	-

B. Justification

Building a comprehensive 988-crisis system is essential to California's broader behavioral health transformation efforts. This system will support the objective of increasing the state's capacity to provide behavioral health care and address the needs of vulnerable populations living with the most significant behavioral health needs. California's substantial behavioral health transformation initiatives greatly increase the state's role in building its behavioral health care system as well as guiding, monitoring, and advancing equity. CalHHS and several of its departments are fundamental to achieving these changes.

The requested resources will enable CalHHS to meet its responsibilities to coordinate, provide accountability, and supply community engagement to impacted CalHHS departments and state entities, alongside supporting collaboration with external stakeholders.

These resources will aid CalHHS in its statutory responsibilities:

- Coordinating and supporting CalHHS departments and other state entities, such as Cal OES, to facilitate Plan implementation.
- Engaging with other state entities and system partners to support Plan implementation.
- Posting annual updates on Plan implementation progress.

Over the past three years since nationwide implementation of 988, several areas of clarification have been identified as necessary in AB 988 in order to facilitate ongoing support of CA 988 Crisis Centers and establish necessary connection to mobile crisis dispatch as well as life-saving coordination with public safety and EMS and clarify how to communicate to the public how best to use 988 vs 911 and other behavioral health crisis services. These resources will support staffing, subject matter expertise, research and analysis and technical assistance to CalHHS to provide policy direction on these topics.

Proposed statutory amendments will codify and provide authority for several ongoing duties and responsibilities for CalHHS, its departments, and CalOES, to move towards necessary implementation of AB 988 as intended by the Legislature to be part of a comprehensive crisis

[1] While CalHHS did not have authorized expenditures via a new appropriation, this amount primarily reflects expended contract dollars from the encumbrance from 2023-24. The appropriation has multiyear authority until June 30, 2028.
[2] FY 2025-26 Actual Expenditures through January 31, 2026 plus projection for remainder of year associated with salaries/wages. The remaining funding is anticipated to support contract services for the 988 Advisory Committee.

system with user-friendly 24/7/365 access for behavioral health crises and mobile crisis interventions that reduce unnecessary law enforcement involvement and emergency/hospital interventions.

In addition to these new responsibilities, CalHHS will support two departments in fulfilling new duties outlined in proposed statutory amendments including:

- CDPH: Plan to oversee statewide 988 public messaging; oversee public health and surveillance data collection; and oversee population-based crisis prevention strategies, as described in the CalHHS AB 988 Five-Year Plan, contingent upon alignment with the use of Behavioral Health Service Act Fund resources.
- EMSA: Establish statewide training and protocol standards and may implement a quality monitoring program for transfers, medical triage, and response to handoff medical and behavioral health calls and provide consultation to CalHHS on the development of recommendations for a system of funding the operation of mobile crisis teams. EMSA shall establish statewide standards in medical triaging, service quality and training for 988, on par with 911, as the 911 system prepares to transfer behavioral health crisis calls to 988. On the 911 side, behavioral health crises typically get handed off to EMS, which has triaging standards for medical emergencies. There is no such medical standard yet set up for the 988 system, which leaves a gap in training for 988 crisis counselors and potential gap in serving medical needs for help seekers who contact or are transferred to 988. 911 can assess for medical emergencies, while 988 system is still more focused on suicide crisis and only beginning to expand covering diverse types of crises including substance use crises or medical emergencies manifesting as behavioral health crises. EMSA can coordinate with DHCS and Cal OES on how 911 and 988 utilize and connect to EMS and determine statewide standards to ensure quality and consistency.

Upon approval of 4260-061-BCP-2026-GB, DHCS will have new responsibilities beginning in 2026-27. DHCS will establish standards to oversee and govern the performance of designated 988 Crisis Centers, including staffing and training requirements, clinical and triage protocols for behavioral health services, and quality standards for 988 Crisis Centers.

CalHHS will meet its responsibilities to coordinate, provide accountability, and supply community engagement through convenings as needed. CalHHS, in consultation with CalOES, EMSA and DHCS, will engage with key constituencies and stakeholders on key issues such as mobile crisis services, handoffs between 911/988, equitable access to 988 and crisis services for help seekers with higher risk for crises and needs for specialized/tailored services among others. CalHHS will use the 988-Crisis PAG to provide implementation updates and other information to state department representatives, local partners, and stakeholders. CalHHS will also leverage the 988-Crisis PAG as a transparent body to engage with stakeholders and advance the inclusion of diverse perspectives from individuals with lived expertise and experiences.

Housed within the Office of Policy and Strategic Planning, proposed staffing will forge partnerships in and outside of CalHHS and with local implementation partners and stakeholders to advance the CalHHS mission to build a Healthy California for All. To achieve the level of coordination, accountability, and community engagement needed to successfully implement the AB 988 Five-Year Plan, CalHHS requests resources equivalent to the following:

Public Health Medical Administrator (PHMA) I

- Primary responsibilities will include, but not be limited to:
  - Serving as the lead at CalHHS to oversee the implementation of the AB 988 Five-Year Plan and support impacted departments to achieve their specific responsibilities and goals identified in the Plan, with the overarching responsibility of linking the 988-crisis care continuum work to align with statewide population-level behavioral health goals identified in BHT.
  - Supporting CalHHS departments to meet state objectives or goals on behavioral health transformation.
  - Serving as a subject matter expert on behavioral health policy and clinical practice related to current and emerging behavioral health issues, including 988 and the crisis care continuum.
  - Leading, organizing, and facilitating complex external and internal workgroups and trainings to support cross-departmental implementation planning.
  - Leading inter- and cross-departmental coordination on cross-system issues such as mobile crisis, 988, and related behavioral health initiatives
  - Leading bringing and soliciting additional clinical/subject matter expertise on quality metrics and outcomes.

EMSA requests resources equivalent to the following:

EMS Behavioral Health Policy Specialist

- Primary responsibilities will include, but not be limited to:
  - Provide vision and strategic guidance for aligning EMS services with state behavioral health related initiatives including the 988 Suicide & Crisis Lifeline.
  - Develop and oversee policies and procedures to integrate EMS with county behavioral health crisis services, including 988.
  - Coordinate with local EMS agencies, county behavioral health leaders, and key stakeholders to facilitate seamless integration and resource alignment. Partner with national entities, including Substance Abuse and Mental Health Services Administration (SAMHSA) and the National Suicide Prevention Lifeline, to standardize communications and awareness strategies.
  - Represent EMSA in state level behavioral health related workgroups including 988/9-1-1 implementation

C. Departmentwide and Statewide Considerations

This proposal supports CalHHS' strategic priority to Build a Healthy California for All and provides CalHHS with resources to coordinate between CalHHS departments and other state entities, ensure engagement of key implementation partners and individuals with lived experience, and promote accountability in the implementation of the AB 988 Five-Year Plan. It also supports the Governor's mission to transform California's mental health and SUD system and to provide "mental health for all" Californians.

D. Outcomes and Accountability

CalHHS: The requested resources will allow CalHHS to be resourced to complete the following activities through 2028-29:

- Fulfill its responsibilities to transform the mental health landscape for all Californians while providing cross departmental and cross sector coordination and collaboration.
- Support cross departmental coordination and priority alignment, as well as collaborate with departments and entities beyond CalHHS at the local, state, and federal levels as appropriate.

- Facilitate accountability of the AB 988 Five-Year Plan implementation
- Advise and support robust state and local level planning efforts with an emphasis on engaging diverse perspectives, especially from individuals with diverse lived experiences.
- Address underlying racial, ethnic, cultural, geographic, and other inequities that may exist in the 988-crisis care system.
- Analyze reports and guidance from SAMHSA and other federal partners to inform implementation of the AB 988 Five-Year Plan.
- Monitor outcomes, performance, and quality of the 988-crisis care system by leveraging internal capacity and external partnerships.
- Maintain a 988 listserv and webpage and other proactive communication tools.

EMSA: The requested resources will allow EMSA to accomplish the following deliverables:

- Issue statewide policies and procedures for EMS-behavioral health integration.
- Statewide rollout strategies and training frameworks.

E. Implementation Plan

Fiscal Year	Activities
2026-27 through 2028-29	• CalHHS shall post regular updates, no less than annually, regarding the implementation of 988 on its public internet website, until December 31, 2029. • CalHHS will coordinate with its departments and other state entities to implement the plan. • Convene the 988-Crisis PAG for coordination, accountability and community engagement.

F. Supplemental Information (If Applicable)

- Attachment A: Fiscal Detail Sheets

BCP Fiscal Detail Sheet

(Dollars in Thousands)

BCP Title: 988 and the Behavioral Health Crisis Continuum Implementation

BR Name: 0530-012-BCP-2026-MR

Budget Request Summary

Personal Services

Personal Services	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
Salaries and Wages Earnings - Permanent	0	243	243	243	0	0
Total Salaries and Wages	**$0**	**$243**	**$243**	**$243**	**$0**	**$0**
Total Staff Benefits	0	152	152	152	0	0
Total Personal Services	**$0**	**$395**	**$395**	**$395**	**$0**	**$0**

Operating Expenses and Equipment

Operating Expenses and Equipment	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
5301 - General Expense	0	9	3	3	0	0
5302 - Printing	0	1	1	1	0	0
5304 - Communications	0	2	2	2	0	0
5306 - Postage	0	1	1	1	0	0
5320 - Travel: In-State	0	3	3	3	0	0
5322 - Training	0	2	2	2	0	0
5324 - Facilities Operation	0	9	9	9	0	0
5326 - Utilities	0	1	1	1	0	0
5344 - Consolidated Data Centers	0	12	12	12	0	0
5346 - Information Technology	0	9	9	9	0	0
539X - Other	0	1	1	1	0	0
Total Operating Expenses and Equipment	**$0**	**$50**	**$44**	**$44**	**$0**	**$0**

Total Budget Request

Total Budget Request	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
Total Budget Request	**$0**	**$445**	**$439**	**$439**	**$0**	**$0**

Fund Summary

Fund Source

Fund Source	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
State Operations - 3414 - 988 State Suicide and Behavioral Health Crisis Services Fund	0	445	439	439	0	0
Total State Operations Expenditures	**$0**	**$445**	**$439**	**$439**	**$0**	**$0**
Total All Funds	**$0**	**$445**	**$439**	**$439**	**$0**	**$0**

Program Summary

Program Funding

Program Funding	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
0280 - Secretary of California Health and Human Services	0	445	439	439	0	0
Total All Programs	**$0**	**$445**	**$439**	**$439**	**$0**	**$0**

Personal Services Details

Salaries and Wages

Salaries and Wages	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
8336 - Hlth Program Spec II (Eff. 07-01-2026)	0	243	243	243	0	0
Total Salaries and Wages	**$0**	**$243**	**$243**	**$243**	**$0**	**$0**

Staff Benefits

Staff Benefits	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
5150150 - Dental Insurance	0	2	2	2	0	0
5150200 - Disability Leave - Industrial	0	1	1	1	0	0
5150350 - Health Insurance	0	22	22	22	0	0
5150400 - Life Insurance	0	1	1	1	0	0
5150450 - Medicare Taxation	0	4	4	4	0	0
5150500 - OASDI	0	16	16	16	0	0
5150600 - Retirement - General	0	77	77	77	0	0
5150750 - Vision Care	0	1	1	1	0	0
5150800 - Workers' Compensation	0	2	2	2	0	0
5150900 - Staff Benefits - Other	0	26	26	26	0	0
Total Staff Benefits	**$0**	**$152**	**$152**	**$152**	**$0**	**$0**

Total Personal Services

Total Personal Services	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
Total Personal Services	**$0**	**$395**	**$395**	**$395**	**$0**	**$0**

BCP Fiscal Detail Sheet

(Dollars in Thousands)

BCP Title: 988 and the Behavioral Health Crisis Continuum Implementation

BR Name: 4120-021-BCP-2026-MR

Budget Request Summary

Personal Services

Personal Services	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
Salaries and Wages Earnings - Temporary Help	0	203	0	0	0	0
Total Salaries and Wages	**$0**	**$203**	**$0**	**$0**	**$0**	**$0**
Total Personal Services	**$0**	**$203**	**$0**	**$0**	**$0**	**$0**

Total Budget Request

Total Budget Request	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
Total Budget Request	**$0**	**$203**	**$0**	**$0**	**$0**	**$0**

Fund Summary

Fund Source

Fund Source	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
State Operations - 3414 - 988 State Suicide and Behavioral Health Crisis Services Fund	0	203	0	0	0	0
Total State Operations Expenditures	**$0**	**$203**	**$0**	**$0**	**$0**	**$0**
Total All Funds	**$0**	**$203**	**$0**	**$0**	**$0**	**$0**

Program Summary

Program Funding

Program Funding	FY26 Current Year	FY26 Budget Year	FY26 BY+1	FY26 BY+2	FY26 BY+3	FY26 BY+4
3820 - Emergency Medical Services Authority	0	203	0	0	0	0
Total All Programs	**$0**	**$203**	**$0**	**$0**	**$0**	**$0**