COMMITTEE ON HEALTH, HOSPITALS, AND HUMAN SERVICES

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BILL NO. 35-0224

Thirty-Fifth Legislature of the Virgin Islands

January 18, 2024

An Act amending title 19, part V, chapter 45, subchapter VI to increase access to behavioral health services, with a focus on a Crisis Intervention Team to provide mobile crisis intervention services, and the 9-8-8 telecommunication system

PROPOSED BY: Senators Diane T. Capehart, Ray Fonseca and Marvin A. Blyden

Be it enacted by the Legislature of the Virgin Islands:

SECTION 1. Title 19 Virgin Islands Code, part V, chapter 45, is amended as follows:

(a) Section 1001 is amended by adding the following definitions:

(1) "9-8-8" means the universal telephone number for the national suicide prevention and mental health crisis hotline system within the United States operating through the National Suicide Prevention Lifeline, or its successor, and maintained by the Assistant Secretary for Mental Health and Substance Use under section 520E–3 of the Public Health Service Act.

(2) "9-8-8 Administrator" means the Administrator of the 9-8-8 national suicide prevention and mental health crisis hotline system maintained by the

Assistant Secretary for Mental Health and Substance Use under section 520E–3 of the Public Health Service Act.

(3) “9-8-8 Crisis Hotline Center” or “Crisis center” means a territory-designated center participating in the National Suicide Prevention Lifeline Network to respond to territory-wide 9-8-8 contacts via modalities offered, including call, chat, or text.

(4) “9-8-8 fee” means the surcharge assessed on commercial landline, mobile service, prepaid wireless voice service, and interconnected voice over internet protocol service lines established under in section 1020(c).

(5) "9-8-8 Trust Fund" means the 9-8-8 suicide prevention and mental health crisis hotline system fund established in section 1020a.

(6) “Crisis receiving and stabilization services” means facilities providing short-term services under 24 hours with capacity for diagnosis, initial management, observation, crisis stabilization and follow up referral services to all persons in a home-like environment.

(7) “Federal Communications Commission” means the federal agency that regulates interstate and international communications by radio, television, wire, satellite, and cable in all 50 states, the District of Columbia, and United States territories. An independent United States government agency overseen by Congress, the Commission is the federal agency responsible for implementing and enforcing America’s communications law and regulations.

(8) "National Suicide Prevention Lifeline" means a national network of local crisis centers providing free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week.

(9) "Peers" means individuals employed based on their personal lived experience of a mental health condition or substance use disorder and recovery who have successfully completed a state or nationally recognized peer support training program.

(10) "Crisis Intervention Team" (CIT) means a mobile crisis intervention and multidisciplinary behavioral health team as defined in the American Rescue Plan Act of 2021 (Section 1947(b)(2) of Public Law 117-2), that provides acute behavioral health, crisis outreach, and receiving and stabilization services by directly responding to the 9-8-8 national suicide prevention and behavioral health crisis hotline.

(11) "Substance Abuse and Mental Health Services Administration" (SAMHSA) means the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation.

(12) "Veterans Crisis Line" means the crisis hotline for veterans maintained by the Secretary of Veterans Affairs under Title 38 United States Code, section 1720F(h).

(b) Section 1020, subsection (b) is amended by striking paragraph (3) and inserting a new paragraph (3) that reads:

"(3) A crisis hotline center to provide crisis intervention services and crisis care coordination to individuals accessing the 9-8-8 suicide prevention and behavioral health crisis hotline from any district within the territory, twenty-four hours a day, seven days a week."

(c) Section 1020 is further amended by adding subsections (c), (d), (e), and (f) to read as follows:

"(c)(1) The designated crisis hotline center must:

(A) have an active agreement with the National Suicide Prevention Lifeline for participation within the Lifeline network;

(B) meet National Suicide Prevention Lifeline requirements and best practices guidelines for operational, performance and clinical standards; and

(C) must provide data, report, and participate in evaluations and related quality improvement activities as required by the 9-8-8 Administrator.

(2) The designated hotline center may deploy crisis and outgoing services, including Crisis Intervention T, and coordinate access to crisis receiving and stabilization services or other local resources as appropriate, consistent with any guidelines and best practices that may be established by the National Suicide Prevention Lifeline.

(3) The designated hotline center shall meet the requirements set forth by the National Suicide Prevention Lifeline for serving at-risk and specialized populations as identified by the Substance Abuse and Mental Health Services Administration, including, but not be limited to, LGBTQ, youth, minorities, rural individuals, veterans, American Indians, Alaskan Natives, and other high-risk populations well as those with co-occurring substance use; provide linguistically and culturally competent care; and include training

requirements and policies for transferring a 9-8-8 contact to an appropriate specialized center or subnetwork within the National Suicide Prevention Lifeline network.

(4) The designated hotline center must provide follow-up services to individuals accessing the 9-8-8 suicide prevention and behavioral health crisis hotline consistent with guidance and policies established by the National Suicide Prevention Lifeline.

(5) To facilitate the ongoing care needs of persons contacting 9-8-8, Department's Behavioral Health Division shall assure active collaborations and coordination of service linkages between the designated center, mental health and substance use disorder treatment providers, local community mental health centers, behavioral health clinics, Crisis Intervention Teams, and community-based, as well as hospital emergency departments and inpatient psychiatric settings, establishing formal agreements and appropriate information sharing procedures where appropriate.

(6) The Department's Behavioral Health Division shall assure active collaborations and coordination of service linkages between the designated center and crisis receiving and stabilization services for individuals accessing the 9-8-8 suicide prevention and behavioral health crisis hotline through appropriate information sharing regarding availability of services.

(7) The Department's Behavioral Health Division, having primary oversight of suicide prevention and crisis service activities and essential coordination with the designated 9-8-8 hotline center, shall work with the National Suicide Prevention Lifeline and Veterans Crisis Line and other SAMHSA-approved networks for the purposes of ensuring consistency of public messaging about 9-8-8 services and provide an annual report of the 9-8-8 suicide prevention and mental health crisis hotline's usage and the

services to the Legislature and the Substance Abuse and Mental Health Services Administration.

(8) VITEMA shall collaborate with the Department of Health, the Virgin Islands Police Department, and Fire/EMS to establish policies and procedures related to the proper routing of calls.

(9) The Department of Health shall promulgate regulations to allow appropriate information sharing and communication between and across crisis and emergency response systems for the purpose of real-time crisis care coordination including, but not limited to, deployment of crisis and outgoing services and linked, flexible services specific to crisis response.

(d) (1) The Department of Health may impose an initial territory-wide 9-8-8 fee of one dollar monthly on each prepaid telephone service, landline telephone, cellular or mobile telephone, or other voice over internet protocol services. The Department of Health may increase the fee as necessary, in an amount not to exceed ten percent of the prior year's fee, to fund this program.

(2) The revenue generated by a 9-8-8 fee must be sequestered in a fund as specified in section 1020a to be obligated or expended only in support of 9-8-8 services, or enhancements of such services.

(3) Consistent with 47 U.S.C. § 251a, the revenue generated by a 9-8-8 fee must be used only to offset costs that are or will be reasonably attributed to:

(A) ensuring the efficient and effective routing and handling of calls, chats and texts made to the 9-8-8 suicide prevention and mental health crisis hotline to the designated hotline center, including staffing and technological infrastructure

enhancements necessary to achieve operational, performance and clinical standards and best practices set forth by the National Suicide Prevention Lifeline; and

(B) personnel and the provision of acute mental health, crisis outreach and stabilization services by directly responding to the 9-8-8 national suicide prevention and mental health crisis hotline.

(4) The revenue generated by 9-8-8 fees may be used only for expenses that are not:

(A) reimbursable through Medicaid, Medicare, federal or state-regulated health insurance plans, and disability insurers;

(B) a covered service by the individual's health coverage; or

(C) covered because the service recipient's name and health coverage information cannot be obtained or billed.

(5) The 9-8-8 fee revenue must be used to supplement, not supplant, any federal, territory or local funding for suicide prevention or behavioral health crisis services.

(6) The 9-8-8 fee amount must be adjusted as needed to provide for continuous operation, volume increases and maintenance.

(7) The Commissioner of the Department of Health shall prepare an annual report on the revenue generated by the 9-8-8 fee to the Legislature of the Virgin Islands and the Federal Communications Commission.

(e) The Department's Behavioral Health Division shall provide primary oversight and direction on the territory's implementation and operation of the 9-8-8 suicide prevention and mental health crisis hotline. The Governor shall create an advisory body or require an existing advisory body to provide guidance to the Division of Behavioral Health, to gather feedback,

and make recommendations regarding the planning and implementation of the 9-8-8 suicide prevention and behavioral health crisis hotline. The advisory body must include representatives of the designated 9-8-8 crisis center, 9-1-1 call centers, the Department's Behavioral Health Division, territorial substance abuse providers, law enforcement, hospital emergency departments, Department of Health enforcement officers with peace officer status, individuals with lived experience with suicide prevention or behavioral health crisis services usage, family members and caregivers, and behavioral health crisis services providers.

(f) The Department of Health shall establish timeframes to accomplish the provisions of this section that are consistent with the timeframes required by the National Suicide Hotline Designation Act of 2020 and the Federal Communication Commission's rules adopted on July 16, 2020.

(d) Section 1021 is amended by striking the entire section and replacing it with:

"§ 1021. Crisis Intervention Team established

(a) The Department's Behavioral Health Division shall establish and operate one CIT in each district, to provide crisis intervention on a 24-hour, 7-day-a-week basis to persons who suffer from behavioral health challenges or mental health disorders and to provide crisis intervention training. The CIT shall work in conjunction with the support of CIT-trained law enforcement officers and must be district-based behavioral health teams, including licensed behavioral health professionals through the Division of Behavioral Health, or behavioral health teams embedded in Emergency Medical Services (EMS), including peers.

(b) The Crisis Intervention Teams shall collaborate with local first responder and behavioral health agencies and licensed behavioral health professionals and peers, to include

police as co-responders in behavioral health teams, only as needed to respond in high-risk situations that cannot be managed without law enforcement.

(c) The Virgin Islands Police Department officers will respond to and address criminal activity being committed and maintain the public order and peace. However, CIT-trained law enforcement officers shall respond to behavioral episodes that disturb the public peace.

(d) Crisis Intervention Teams and crisis stabilization services provided must:

(1) be designed in partnership with community members, including people with lived experience utilizing crisis services;

(2) be staffed by personnel that reflect the demographics of the community served; and

(3) collect customer service data from individuals served by demographic requirements, including race and ethnicity, set forth by SAMHSA and consistent with requirements for continuous evaluation and quality improvement.

(e) The Crisis Intervention Teams must be composed of qualified behavioral health professionals with training and experience in assessment and intervention with persons who suffer from behavioral health challenges, mental health disorders, and substance use disorders in a crisis. The team members must have a working knowledge of intake, case management, behavioral and mental health systems, and local resources.

(e) Section 1022 is amended:

(1) in subsection (b) by adding “and the Police Officer Standards and Training Council” after “Department” in the first sentence, and by striking “biennially” and inserting “annually”; and

(2) by adding subsection (d) to read: "(d) Crisis intervention training must consist of 40 hours of specialized training initially and a minimum of 4 hours of continuing education annually."

(3) The Bureau of Corrections shall create and execute behavioral training courses for corrections officers and staff so that they are qualified to serve inmates with behavioral health needs and meet professional industry standards on behavioral response techniques. The training must also be provided to the Virgin Islands Police Department officers who are assigned to respond with the CIT.

(f) Section 1020a is added and reads as follows:

"§ 1020a. 9-8-8 Trust Fund

(a) The 9-8-8 Trust Fund is established as a separate and distinct non-lapsing fund in the Treasury of the Government of the Virgin Islands. The funds must be used to maintain a territory-wide 9-8-8 suicide prevention and mental health crisis system pursuant to the National Suicide Hotline Designation Act of 2020, the Federal Communication Commission's rules adopted July 16, 2020, and national guidelines for crisis care and to support or enhance 9-8-8 services, including territory designated 9-8-8 hotline centers, the Crisis Teams, and crisis receiving and stabilization services.

(b) The Fund consists of the territory wide 9-8-8 fee revenue assessed on users under title 3 Virgin Islands Code, chapter 3, section 58, and appropriations made by the Legislature of the Virgin Islands.

(c) The Public Service Commission shall collaborate with the local service providers to gather information and data relevant to the annual reporting of Emergency Services Surcharge and 9-8-8 Trust Fund deposits and expenditures and provide the

information to the Office of Management and Budget and the Department of Health for budgetary purposes. An annual report of fund deposits and expenditures must be submitted to the Legislature of the Virgin Islands and the Federal Communications Commission.

SECTION 2. Title 19, chapter 45, subchapter VI, section 1021 subsection (b) is amended by striking "The team" in the two instances it appears and insert "CIT".

(a) title 33 Virgin Islands Code, subtitle 1, part I, chapter 3, section 58 is amended as follows:

(1) subsection (a) (10) is amended by adding "and dial E988 to access the E988 system" after the second instance of "E911"; and

(2) subsection (f) is amended by striking the language "as follows:" and inserting:

"(1) 25% to the Virgin Islands Police Department to fund Community Service Officer positions and related crisis intervention;

(2) 30% to the Department of Health to execute its mandate to address behavioral challenges in the Virgin Islands and related costs;

(3) 10% to the Virgin Islands Fire and Emergency Medical Services as a first responding agency and EMS for crisis intervention services and related costs;

(4) 15% to the Governor Juan F. Luis Hospital and Medical Center to fund the purchase of hospital beds and as a contribution to the salaries for behavioral health nurses;

(5) 15% to the Roy Lester Schneider Hospital and Medical Center to fund the purchase of hospital beds and as a contribution to the salaries for behavioral health nurses; and

(6) 5% to the Virgin Islands Bureau of Corrections for the training of behavioral health officers and leadership training.

(b) title 30 Virgin Islands Code, chapter 1, subchapter I is amended as follows:

(1) in section 1, by adding the following paragraph (6) to section 1(a): "(6) Voice over Internet Protocol (VoIP) service providers".

(2) in section 23, by adding the following subsection (d) :

"(d) In addition to the powers granted in subsection (a), the Commission shall regulate all Voice over Internet Protocol (VoIP) service providers operating in the Virgin Islands for the purpose of collecting 9-8-8 funds and ensuring proper oversight of surcharges imposed on customers' bills.

(1) The Commission shall require all VoIP providers to submit quarterly reports detailing the revenue collected from the 9-8-8 surcharge, including the identification of customer primary locations to ensure that residents with long-distance or non-local numbers are not evading local surcharges.

(2) The Commission shall assess a fee of $1 per line for the 9-8-8 surcharge, replacing any previously established fees.

(3) VoIP service providers failing to comply with these reporting requirements shall be subject to penalties as established by the PSC regulations."

BILL SUMMARY

This Bill amends title 19, part V, chapter 45, subchapter VI to increase access to behavioral health services, with a focus on a Psychiatric Emergency Response Team to provide mobile crisis intervention services, and the 9-8-8 telecommunication system.

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