



California Health and Human Services Agency (CalHHS)
988-Crisis Policy Advisory Group (PAG)
Sustainable Funding Workgroup Meeting #2
April 7, 2026 | 10 a.m. to 12 p.m. PT (Virtual)

ATTENDEES:

Workgroup Members (Virtual)

- **Amanda Levy**, California Department of Managed Health Care
- **Amanda McConnell**, CalOptima
- **Anete Millers**, California Association of Health Plans
- **Austin Trujillo**, California Department of Managed Health Care
- **Brenda Grealish**, Commission for Behavioral Health
- **Carli Stelzer**, California Behavioral Health Association
- **Carmen Katsarov**, CalOptima
- **Claudia Chavez**, Pala Band of Mission Indians
- **Erika Cristo**, California Department of Health Care Services
- **Hernando Garzon**, California Emergency Medical Services Authority
- **Jackie Tompkins**, California Department of Aging
- **Jana Lord**, Sycamores
- **Le Ondra Clark Harvey**, California Behavioral Health Association
- **Marika Collins**, Didi Hirsch Mental Health Services
- **Meenal Gounder**, California Department of Health Care Services
- **Michelle Cabrera**, County Behavioral Health Directors Association of California
- **Narges Zohoury Dillon**, Crisis Support Services of Alameda County
- **Phebe Bell**, California Mental Health Services Authority
- **Raven Lopez**, County Behavioral Health Directors Association of California
- **Ruth Drake**, Pala Band of Mission Indians

- **Saurav Jung Thapa**, The Trevor Project
- **Shari Sinwelski**, Didi Hirsch Mental Health Services
- **Tara Gamboa-Eastman**, Steinberg Institute

Workgroup Members (Absent)

- **Adrienne Shilton**, California Alliance of Child and Family Services
- **Alexandria Simpson**, California Department of Health Care Services
- **Amanda Nugent Divine**, Kings View
- **Amber Westphal**, Lake County Behavioral Health Services
- **April Giambra**, Lake County Behavioral Health Services
- **Ashley Mills**, California Department of Public Health
- **Chrissy Andrus**, Lake County Behavioral Health Services
- **Christie Gonzales**, WellSpace Health
- **Christine Bagley**, California Department of Developmental Services
- **Doug Subers**, California Professional Firefighters
- **Ivan Bhardwaj**, California Department of Health Care Services
- **Jacob Ruiz**, Riverside University Health System—Behavioral Health
- **Kasey Suffredini**, The Trevor Project
- **Keris Jän Myrick**, Inseparable (Mental Health Advocacy and Programs)
- **Kristin Miller**, Riverside University Health System—Behavioral Health
- **Ruben Imperial**, Stanislaus County Behavioral Health
- **Sean Johnson**, CalVet
- **Trudy Raymundo**, California Department of Public Health

Project Team (Virtual)

- **Anh Thu Bui**, CalHHS
- **Brett McMillen**, Advocates for Human Potential, Inc. (AHP)
- **Jamie Strausz-Clark**, Hypha Consulting

Meeting Summary

WELCOME

Jamie Strausz-Clark, Hypha Consulting, opened the meeting by welcoming attendees and reviewing instructions for public comment, the meeting objectives and agenda, workgroup members, and PAG mutual agreements. The meeting objectives for the Sustainable Funding Workgroup Meeting #2 included the following:

1. Review key themes and outcomes from Sustainable Funding Workgroup Meeting #1.
2. Identify information that will help legislators and decision makers understand the cost of delivering crisis response.
3. Close the loop on whether the current, publicly available materials on 988 funding are adequate, and if not, what changes need to be made.
4. Clarify next steps.
5. Hear public comments.

PRESENTATION: Recap of Sustainable Funding Workgroup Meeting #1

Jamie reviewed key themes and outcomes from the first Sustainable Funding Workgroup meeting, which was held on March 5, 2026. That meeting primarily focused on the importance of data points and metrics to demonstrate the value of 988 and strategies to strengthen funding pathways. The key themes identified during that meeting included performance data, quantifying downstream cost savings, and strengthening funding and reimbursement.

The workgroup identified several key metrics or data points to show the value of 988 funding and services:

- Evidence of successful stabilization without escalation (e.g., the resolution of the vast majority of 988 contacts by crisis centers without requiring mobile crisis or law enforcement response).
- Outcomes for help-seekers, such as changes in self-rated suicide intent from start to end of the call.
- Measures of downstream system effects, such as reduced emergency room visits, increased 911 diversions, improved coordination with mobile crisis teams, and effective warm handoffs across the continuum.
- Quantitative data combined with personal stories to help legislators and funders contextualize the numbers.
- Cross-system data integration to illustrate total cost savings and systems value.
- Information on the true cost of delivering 988 services.

The group discussed the following key barriers and opportunities for funding and reimbursement for 988 services:

- Barrier: Lack of standardization in billing codes, claim forms, routing, provider IDs, and documentation.
- Barrier: Reluctance and uneven adoption of reimbursement processes due to persistent denials or underpayments.
- Barrier: Misalignment between information that payors need in order to provide reimbursement and what providers can collect and share (i.e., in a crisis it is often not appropriate or desirable to ask for the kinds of information that would later be needed in a reimbursement claim).
- Opportunity: Convene payors and providers to work through solutions.

DISCUSSION AND EXERCISE: Helping Decision Makers Understand the Cost of Delivering Crisis Response

The group discussed the following three key questions, aimed at helping decision makers understand the true cost of delivering crisis response. This was done both through a verbal conversation and using a Zoom Whiteboard.

1. What are the current cost drivers in your part of the system? Given the vision for the 988 system, what do you anticipate will be the main cost drivers in the future?
2. What evidence best illustrates the impact of growing demand for 988 on costs and resource needs?
3. What makes it challenging to share a full and detailed picture of your costs—whether due to operational, administrative, or trust-related factors? And what would help make this easier or more comfortable to provide?

Key points are summarized below.

Current and Future Cost Drivers.

Workgroup members identified the continuously rising demand for services as the biggest driver of current and future costs. Additionally, they called out the following cost drivers:

- Acuity and growing complexity of crisis contacts.
- Length of contact for text and chat services.
- Compliance with changing standards of care for crisis centers (e.g., follow-up requirements).

- Misalignment between fee-for-service mobile crisis reimbursement and the fixed cost needed to maintain services regardless of the volume of calls and services delivered.
- Inconsistent or low reimbursement outcomes for mobile crisis services.
- Workforce demands (e.g., need for clinical oversight).
- Training and education needs (e.g., culturally responsive care for diverse populations).

Evidence of the Impact of Growing Demand for 988 Services.

The group discussed the need for predictive analysis or forecasting to more accurately estimate yearly increases to help proactively plan for increased costs related to staffing and other needs. Other impacts discussed by the group included the higher acuity/higher cost relationship, the cost of increasing isolation and loneliness among older populations, and issues with access to resources for Tribal populations related to lack of funding. Data points that demonstrate growing costs included the cost impacts of time-intensive interventions during text or chat services (and that youth are more likely to use these modalities), as well as the diversity of California and the requirement for culturally responsive care.

Challenges with Accurately Demonstrating Costs.

Workgroup members briefly discussed challenges with communicating true costs to the state, which included unpredictability and uncertainty in several areas, including year-to-year state funding for crisis centers and the potentially changing funding approach for mobile crisis teams.

DISCUSSION: Publicly Available Materials on 988 Funding

Jamie reviewed several tools that have been used to communicate 988 funding this far, including the AB 988 Five-Year Implementation Plan, the 988 Rate Calculation Surcharge Methodology, and the Draft CalHHS 988 FAQs. Workgroup members shared feedback and agreed that these are useful tools, and there is no deficit in the materials that have been issued.

MEETING CONCLUSION AND NEXT STEPS

The meeting concluded with the following action item:

- By April 17, 2026, provide written feedback on the publicly available 988 funding materials to AB988Info@chhs.ca.gov.

Jamie also reviewed the following upcoming event:

- April 29, 2026: 988-Crisis PAG Meeting.

ADDITIONAL MATERIALS AND RESOURCES

Meeting materials and the recording will be available on the [988-Crisis Policy Advisory Group website](#). Resources from the meeting are included as an appendix to this file.

PUBLIC COMMENT

Public comments were open for this meeting. Comments could be submitted at any time via email at AB988Info@chhs.ca.gov. None were submitted live or via email.

Appendix

RESOURCES

- AB 988 Five-Year Implementation Plan (CalHHS): <https://www.chhs.ca.gov/wp-content/uploads/2025/01/AB-988-Five-Year-Implementation-Plan-Final-ADA-Compliant.pdf>
- 988 Rate Calculation Surcharge Methodology (CalOES): [988 Rate Calculation Surcharge Methodology - Calendar Year 2026 \(002\).pdf](#)