



**California Health and Human Services Agency (CalHHS)
988-Crisis Policy Advisory Group (PAG) Meeting 8
Meeting Summary**

January 28, 2026 | 10 a.m. - 3 p.m. PT (Hybrid Meeting)

Attendees:

PAG MEETING PARTICIPANTS (In Person):

- **Adrienne Shilton**, Senior Vice President of Public Policy and Strategy, California Alliance of Child and Family Services (delegate for Pete Weldy)
- **Amanda Levy**, Deputy Director for Health Policy and Stakeholder Relations, California Department of Managed Health Care (DMHC)
- **Amber Westphal**, Behavioral Health Program Manager, Lake County Behavioral Health Services (delegate for April Giambra)
- **April Giambra**, Clinical Deputy Director, Lake County Behavioral Health Services
- **Ashley Mills**, Assistant Deputy Director, Community Wellness, California Department of Public Health
- **Austin Trujillo**, Health Policy Specialist, DMHC (delegate for Amanda Levy)
- **Brenda Grealish**, Executive Officer, Commission for Behavioral Health (CBH)
- **Carmen Katsarov**, Executive Director of Behavioral Health Integration, CalOptima Health
- **Christine Bagley**, Acting Deputy Director, Statewide Clinical Services Division, and Safety Net Branch Chief, California Department of Developmental Services
- **Claudia Chavez**, Social Service Director, Pala Band of Mission Indians (delegate for Robert Smith)

- **Dan Southard**, Chief Deputy Director, DMHC (delegate for Amanda Levy)
- **Daniel Domaguin**, Program Manager, California Consortium for Urban Indian Health (CCUIH) (delegate for Jackie Pierson)
- **Elizabeth Basnett**, Director, California Emergency Medical Services Authority (EMSA)
- **Ivan Bhardwaj**, Division Chief, Medi-Cal Behavioral Health Policy Division, Department of Health Care Services (DHCS) (delegate for Erika Cristo)
- **Jackie Pierson**, Interim Executive Director, CCUIH
- **Jana Lord**, Chief Operating Officer, Sycamores
- **Jared Altenhofel**, Senior Dispatcher, 911 Coordination, Kern County Sheriff's Office (delegate for Lee Ann Magoski)
- **Keris Jän Myrick**, Senior Vice President of Partnerships and Innovation, Inseparable (Mental Health Advocacy and Programs)
- **Kirsten Barlow**, Vice President, Policy, California Hospital Association
- **Lan Nguyen**, Division Manager, Crisis and Suicide Services, County of Santa Clara Behavioral Health Services Department
- **Lee Ann Magoski**, Director of Emergency Communications, Monterey County
- **Lei Portugal Calloway**, Peer Team Lead, Telecare Corporation
- **Michelle Cabrera**, Executive Director, County Behavioral Health Directors Association of California
- **Narges Zohoury Dillon**, Executive Director, Crisis Support Services of Alameda County
- **Pete Weldy**, Chief Executive Officer, California Alliance of Child and Family Services
- **Phebe Bell**, Behavioral Health Director, Nevada County
- **Rayshell Chambers**, Commission Member, CBH
- **Rhyan Miller**, Behavioral Health Deputy Director, Integrated Programs, Riverside County
- **Robert Smith**, Chairman, Pala Band of Mission Indians
- **Ruth Drake**, Senior Program Manager, Pala Band of Mission Indians (delegate for Robert Smith)
- **Saurav Jung Thapa**, Director of Coalitions and Partnership Engagement, The Trevor Project (delegate for Kasey Suffredini)

- **Sean Johnson**, Assistant Deputy Secretary, California Department of Veterans Affairs (CalVet) (delegate for Roberto Herrera)
- **Shari Sinwelski**, Vice President of Crisis Care, Didi Hirsch Mental Health Services
- **Sohil Sud**, Director, Children and Youth Behavioral Health Initiative, CalHHS
- **Stephanie Welch**, Deputy Secretary of Behavioral Health, CalHHS
- **Stephen Sparling**, Program Manager, California Coalition for Youth
- **Steve Yarbrough**, Deputy Director, Public Safety Communications, California Governor's Office of Emergency Services
- **Tara Gamboa-Eastman**, Director of Government Affairs, Steinberg Institute
- **Taun Hall**, Executive Director, The Miles Hall Foundation

PAG MEETING PARTICIPANTS (Virtual):

- **Chad Costello**, Executive Director, California Association of Social Rehabilitation Agencies
- **Doug Subers**, Director of Governmental Affairs, California Professional Firefighters
- **Elise Gyore**, Chief of Staff, California State Assemblymember Rebecca Bauer-Kahan (delegate for Assemblymember Rebecca Bauer-Kahan)
- **Erika Cristo**, Assistant Deputy Director, DHCS
- **Hernando Garzon**, Chief Medical Officer, EMSA (delegate for Elizabeth Basnett)
- **Jessica Wilson (Cruz)**, Chief Executive Officer, National Alliance on Mental Illness California
- **Le Ondra Clark Harvey**, Chief Executive Officer, California Behavioral Health Association (CBHA)
- **Miguel Serricchio**, Managing Director, eCapital
- **Robb Layne**, Executive Director, California Association of Alcohol and Drug Program Executives, Inc.
- **Sarah Steenhausen**, Deputy Director of Policy, Research, and Engagement, California Department of Aging (CDA)
- **Susan DeMarois**, Director, CDA

PAG MEETING PARTICIPANTS (Absent):

- **Anete Millers**, Vice President of Legal and Regulatory Affairs, California Association of Health Plans
- **Carli Stelzer**, Senior Policy and Legislative Affairs Advisor, CBHA
- **Kasey Suffredini**, Chief Officer of Prevention, The Trevor Project
- **Rebecca Bauer-Kahan**, Assembly Member (AD-16)/Author of Assembly Bill (AB) 988
- **Roberto Herrera**, Deputy Secretary, Veterans Services Division, CalVet

PROJECT TEAM:

- **Ali Vangrow**, Senior Behavioral Health Program Manager, Office of Policy and Strategic Planning (OPSP), CalHHS
- **Anh Thu Bui**, Project Director, 988-Crisis Care Continuum, OPSP, CalHHS
- **Jamie Strausz-Clark**, Principal, Hypha Consulting, LLC
- **Alison Garibay**, Policy Analyst, OPSP, CalHHS
- **Andrew Guy**, Senior Program Manager I, Advocates for Human Potential, Inc. (AHP)
- **Andunett Langhum**, Senior Consultant I, AHP
- **Austin Dickman**, Senior Policy Analyst, OPSP, CalHHS
- **Brett McMillen**, Senior Program Manager I, AHP
- **Josie Baca**, Senior Policy Analyst, OPSP, CalHHS
- **Tenly Biggs** (Virtual), Senior Program Manager II, AHP

Meeting Summary

WELCOME

Stephanie Welch from CalHHS acknowledged new PAG members, acknowledged that many PAG members have expressed concerns about funding for 988, and affirmed CalHHS' continued commitment to the work of the AB 988 Five-Year Implementation Plan. She explained that, with insight from the PAG, CalHHS will pull together updates for a progress report on efforts related to the AB 988 Five-Year Implementation Plan goals and activities.

Next, Jamie Strausz-Clark from Hypha Consulting shared the meeting objectives:

1. Welcome new members and build/strengthen relationships within the PAG.
2. Share updates and learn about progress toward building an equitable, accessible, high-quality behavioral health crisis system.
3. Acknowledge and discuss opportunities and challenges for implementing the vision for the statewide behavioral health crisis care continuum.
4. Gather member input to shape workgroup priorities.
5. Discuss what information should be shared with stakeholders and the public in the progress report and interim communications.
6. Hear public comments.

She also introduced the two workgroups that will meet following the January PAG meeting: Integrating 988 into the Crisis Care Continuum Workgroup and Sustainable Funding Workgroup.

MISSION MOMENT

Honorable Chairman Robert Smith from the Pala Band of Mission Indians initiated a call to action to include Tribal voices in 988 policy and implementation decisions. The Chairman introduced the concept of Tribal sovereignty, which is self-governance: the right for Tribes to make their own decisions, and the responsibility to take care of their own communities. This includes the authority to design behavioral health and crisis response systems for their people. He emphasized the importance of the following in working with Tribes:

- Providing equal seats at the table and equal partnerships with counties and states reflecting government-to-government relationships.
- Working with Tribes in the provision of services, rather than around them.
- Respecting culture to build trust.
- Integrating Tribes into the 988 system to strengthen the system, create equity, and increase effectiveness.
- Creating policies that prioritize clear referrals and warm handoffs as well as clear rules and coordination.
- Understanding that success means that Native people can receive the right help at the right time.

AGENCY UPDATES

Dr. Anh Thu Bui from CalHHS and Ivan Bhardwaj from DHCS provided updates on their agencies' activities around 988.

CalHHS Update

Dr. Bui reminded the group that the proposed components of the future state crisis care continuum are to prevent, respond to, and stabilize crisis. She reviewed the essential crisis services that should be available statewide and identified those that are already in place. Dr. Bui noted that the purpose of this year's PAG meetings is to focus on updates and efforts that have taken place within the last year to create a progress report, which is to be published by late Quarter 3 or early Quarter 4 of this year. There is \$575,000 allocated to CalHHS for fiscal year (FY) 2025-2026 to fulfill its responsibilities related to the implementation of the AB 988 Five-Year Plan for a comprehensive 988-crisis system. Dr. Bui also noted the following important updates:

- The 988 surcharge fee decreased to \$0.05 for calendar year 2026. California has a lower per line per month 988 fee compared to other states, but due to population size, the estimated annual revenue is higher (see [2025 988 Fees.pdf](#) for more information).
- Following the discontinuation of the national 988 specialized service to LGBTQ+ young people, CalHHS and The Trevor Project are currently partnered to provide enhanced competency training to California 988 Crisis Centers and their staff, ensuring better attunement to the needs of LGBTQ+ youth who contact 988.
- CalHHS and DHCS have partnered with researchers from Columbia University and Wayne State University in a national survey of mobile crisis programs, the results of which will be available to the public in June 2026.

Dr. Bui acknowledged the challenges and opportunities within the California 988 Network, including the following:

- Federal investment shifts.
- Law enforcement involvement.
- Sustainable funding needs and the need to optimize funding.
- Statewide budget constraints.
- Increasing behavioral health crises.

DHCS Update

Mr. Bhardwaj shared that DHCS is responsible for supporting the California 988 Crisis Centers directly, and each year, they start with a \$12.5 million baseline appropriation to fund state operations. DHCS received \$30 million in local assistance for 988 in FY 2025–2026. The Governor’s budget proposes \$31.96 million to DHCS for local assistance for 988 in FY 2026–2027. DHCS has requested more funding for internal staff and a certification consultant. There is potential interest in opening the “closed” network to improve coverage in the future (i.e., onboarding new centers).

DHCS began a 988 public awareness campaign in September 2025 using funds from the Substance Abuse and Mental Health Services Administration (SAMHSA). Additionally, a Tribal 988–billboard campaign was launched statewide in October 2025. 992 billboards were placed throughout the state, generating 303,529,718 impressions so far.

DISCUSSION GROUPS

This meeting included two large group discussions and a set of small group discussions to help inform the progress report. These are summarized below.

Large Group Discussion: Progress on AB 988 Five-Year Implementation Plan

In this group discussion, participants shared their organizations’ work and actions taken to advance an equitable, accessible, high-quality behavioral health crisis system for all Californians. Major activities included the following:

- Work with partners on prevention activities, such as staffing telehealth, creating a digital registry, and working with schools.
- The stand up of mobile crisis teams, thereby reducing unnecessary use of hospitals and providing a safe and prompt response to people in crisis.
- Growth and development of important cross-sector partnerships, resulting in outcomes such as the creation of youth treatment facilities, diversion programming, and respite services.
- Staffing expansion or improvement to better serve help-seekers, such as hiring more counselors and staffing warmlines.
- Expanded focus on certain populations, such as youth, older adults, and rural communities.

- Outreach, awareness-building, and advocacy at the community and state level and with current and potential partners (e.g., law enforcement, schools, payers).
- Training and education for crisis staff.

Small Group Discussions: Progress on AB 988 Five-Year Implementation Plan (Cont.)

Six in-person groups and one virtual group convened to discuss two questions:

1. What specific challenges do you anticipate in implementing the AB 988 Five-Year Implementation Plan? What are your ideas for how we could address those challenges together?
2. Many PAG members have experienced the crisis response system. Drawing on those experiences, what do you believe should be the most critical priorities for implementation in the near term?

Most groups focused on question 1. There was a wide range of input on what might present challenges to success, but the majority fit into a few topic areas:

- One of the greatest challenges cited was related to funding of the system. Participants noted concern with the reduction in the surcharge and need for clarity around future funding. They also noted the need for dedicated funding for text/chat and the need for better fee schedules or reimbursement for services, including among commercial payers. Participants identified challenges such as political uncertainty and federal funding availability.
- Another concern shared by a PAG member is the need for more 988 consumer representation on the PAG to ensure the crisis system is meeting consumer needs. There was a related discussion about the importance of inclusion and integration of more diverse populations in the system, such as older adults. Participants noted that certain populations do not trust 911 or 988 response, so there needs to be work done to build trust and relationships, especially among Tribes.
- Finally, groups talked about the importance of building on and maximizing the existing system to make improvements and enhancements rather than making it more complicated. This includes

clarity around the relationship between 911 and 988 services. Participants noted the power of collaboration with partners like emergency medical services, fire departments, police, and more. Many participants noted the need for more clarity and public awareness-building around the scope and availability of mobile crisis services.

For those with lived experience within the crisis response system (question 2), the importance of culturally responsive services and peer involvement were highly supported, especially for Native populations. People noted that services can sometimes feel less personal and rushed, and that involving law enforcement may at times escalate the situation.

Large Group Discussion: Lessons Learned for Improving System Integration

In this group discussion, participants identified the information, data, and stories that could best illustrate challenges, successes, and progress toward a more equitable system in the progress report. They agreed that the report's primary audience is legislators and that it should be aligned with the goals of the AB 988 Five-Year Implementation Plan. Participants emphasized that real stories help show the system's impact and that data on 988 and mobile crisis response/dispatch are essential for demonstrating the system's success. Participants also noted that the progress report should include funding and reimbursement information and identify the improvements needed in these areas.

GROUP EXERCISE: WORKGROUPS

Participants engaged in an exercise to discuss questions or issues they thought each workgroup should tackle. There were many helpful suggestions, which have been grouped into the following main themes:

Sustainable Funding Workgroup

- Ensuring stable, long-term funding for 988.
- Deciding whether—and how—to adjust the 988 surcharge to meet current and future demand.
- Clarifying governance of 988 revenues and allocations (including the surcharge).
- Improving transparency on 988 funding, how dollars flow to 988

centers, and how the fee is set.

- Exploring diversified revenue and payment strategies (e.g., all-payer models, commercial plan parity, assessments or taxes) and supporting provider and consumer education on coverage and billing.
- Braiding and targeting funds—including for Tribal-operated programs and mobile crisis, capturing downstream savings, and using forecasting to plan for 988’s growth.

Integrating 988 into Crisis Care Continuum Workgroup

- Governance of 988.
- Reliable 911-to-988 diversion, including when and how 988 can dispatch mobile crisis services.
- Seamless integration across warmlines, mobile crisis, stabilization, and follow-up.
- Shared data, referral tools, and outcome measures that reflect what callers and families value.
- Building and sustaining the crisis workforce.
- Equity, cultural responsiveness, and trust.
- Standards and supports for warm handoffs and clear, least-intrusive care pathways.
- Prevention and integration with health care, managed care, schools, and intellectual and developmental disabilities services.

MEETING CONCLUSION AND NEXT STEPS

Jamie Strausz-Clark shared information about upcoming events and concluded the meeting.

- 988-Crisis PAG Workgroups
 - Integration of 988 into the Crisis Care Continuum
 - Tuesday, February 24, 2026 from 10 a.m. to 12 p.m.
 - Thursday, March 19, 2026 from 10 a.m. to 12 p.m.
 - Sustainable Funding
 - Thursday, March 5, 2026 from 10 a.m. to 12 p.m.
 - Tuesday, April 7, 2026 from 10 a.m. to 12 p.m.
- CalOES Technical Advisory Board
 - Thursday, February 19, 2026 from 10 a.m. to 12 p.m.
- 988-Crisis PAG Meeting

- Wednesday, April 29, 2026 from 10 a.m. to 3 p.m.

ADDITIONAL MATERIALS AND RESOURCES

Meeting materials will be available on the [988-Crisis PAG 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. One public comment was submitted for this meeting.

Wednesday, January 28, 2026, 1:31 p.m.

My name is Ruqayya Ahmad, Senior Policy Manager at the California Pan-Ethnic Health Network. Thank you for the presentation and update today. We reviewed the Governor's January budget proposal and noted the proposed investment to strengthen implementation supports for 988 and the broader behavioral health crisis continuum. We support strengthening statewide infrastructure and coordination as demand grows.

As folks discussed during the meeting, the goal should be to respond effectively when someone is in crisis, AND to prevent crises from happening in the first place. That prevention goal is becoming harder to achieve for many immigrant and undocumented Californians because proposed Medi-Cal coverage restrictions will bar access to full-scope medical care, included behavioral health care, for millions of Californians. When people lose access to routine behavioral health services, primary care, and consistent treatment, we should expect more unmet need to show up as crisis, meaning the crisis system will be asked to absorb the consequences of upstream coverage and access decisions.

So, as the state deploys these new 988 resources, we urge the state to explicitly prioritize immigrant and refugee communities, especially people experiencing immigration enforcement-related trauma, and to ensure 988 is accessible, trusted, and responsive. That means strong language access, culturally responsive training and protocols for call centers and mobile crisis, partnerships with trusted community-based organizations (including

organizations that already operate community hotlines and need additional resources to sustain and expand that work), because many immigrant communities understandably have deep mistrust of government-led systems, and people are more likely to reach out in a crisis when the entry point is a trusted, community-rooted resource.

We appreciate the investment, and we urge the state to use it to strengthen crisis response AND address the increased crisis demand we anticipate as preventive care becomes less reachable for immigrant and undocumented communities.

Appendix

RESOURCES

- Bagley-Keene Open Meeting Act Guide 2026 (California Department of Justice): <https://oag.ca.gov/system/files/media/bk-open-meeting-act-guide-2026.pdf>
- Behavioral Health Crisis Care Continuum Plan (CalHHS): https://www.chhs.ca.gov/wp-content/uploads/2023/08/CalHHS_Behavioral-Health-Crisis-Care-Continuum-Plan.pdf
- AB 988 Miles Hall Lifeline and Suicide Prevention Act: https://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?lawCode=GOV&division=2.&title=5.&part=1.&chapter=1.&article=6.3
- CalOES CA 988 Technical Advisory Board Website: <https://www.caloes.ca.gov/office-of-the-director/operations/public-safety-communications/ca-9-1-1-emergency-communications-branch/ca-9-8-8-information/>
- 988-Crisis Policy Advisory Group Website: <https://www.chhs.ca.gov/home/committees/988-crisis-policy-advisory-group/>
- AB 118 Budget Act of 2023: https://leginfo.legislature.ca.gov/faces/billCompareClient.xhtml?bill_id=202320240AB118&showamends=false
- California Department Fund Condition Statements FY 25-26: <https://ebudget.ca.gov/2026-27/pdf/GovernorsBudget/0010/0690FCS.pdf>
- 2025 988 Fee Overview (National Alliance on Mental Illness): <https://reimaginecrisis.org/wp-content/uploads/2025/02/2025-988-Fees.pdf>
- 988 Fee FAQs (National Association of State Mental Health Program Directors): <https://nasmhpd.org/wp-content/uploads/988-fee-faq-october-2025.pdf>
- 988 Suicide and Crisis Lifeline Call and Text Georouting (Washington State Department of Health): <https://doh.wa.gov/sites/default/files/2024-09/140299->

[GeoroutingCallsTo988.pdf](#)

- "Following Trump Cut to LGBTQ Youth Suicide Hotline, California Steps Up to Fill the Gap" (Governor Gavin Newsom):
<https://www.gov.ca.gov/2025/07/16/following-trump-cut-to-lgbtq-youth-suicide-hotline-california-steps-up-to-fill-the-gap/>
- National Survey of Mobile Crisis Teams 2023 (SAMHSA):
<https://988crisissystemshelp.samhsa.gov/sites/default/files/2024-11/National%20Mobile%20Crisis%20Survey%20ReportvFINAL.pdf>
- CalHHS 988 Suicide & Crisis Lifeline Website:
<https://www.chhs.ca.gov/988california/>
- Governor's Proposed Budget FY 26-27 Health and Human Services:
<https://ebudget.ca.gov/2026-27/pdf/GovernorsBudget/4000.pdf>
- 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>
- DHCS 988 Suicide & Crisis Lifeline Website:
<https://www.dhcs.ca.gov/Pages/988-Suicide-and-Crisis-Lifeline.aspx>
- DHCS Mobile Crisis Services Website:
<https://www.dhcs.ca.gov/Pages/CalAIM-Mobile-Crisis-Services-Initiative.aspx>
- Executive Order N-31-25: <https://www.gov.ca.gov/wp-content/uploads/2025/07/2025-7-30.Men-and-Boys-Workgroup-EO.ATTESTED.pdf>
- "Growing Number of California Sheriffs No Longer Respond to Mental Health Calls" (The Guardian): <https://www.theguardian.com/us-news/2026/jan/02/california-police-cut-mental-health-calls>
- "Remembering Papa: Northern California's Elderly Face Hidden Epidemic of Gun Suicides" (CalMatters):
<https://calmatters.org/health/2025/12/trinity-county-gun-suicide-rural/>
- Being A Good Relative: A Training for Crisis Counselors Responding to Native Callers, Texters, and Chatters (Suicide Prevention Resource Center): <https://sprc.org/resources/being-a-good-relative-a-training-for-crisis-counselors-responding-to-native-callers-texters-and-chatters/>
- Resources for Tribal Communities (Suicide Prevention Resource

Center): <https://sprc.org/tribal-resources>