

# Legislative Analysis



## CREATE MICHIGAN CARES HOTLINE

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<http://www.house.mi.gov/hfa>

**House Bill 4051 as introduced**  
**Sponsor: Rep. Mary Whiteford**  
**Committee: Health Policy**  
**Complete to 2-20-19**

Analysis available at  
<http://www.legislature.mi.gov>

### SUMMARY:

House Bill 4051 would add section 165 to the Mental Health Code, establishing a Michigan CARES (Community, Access, Resources, Education, and Safety) hotline for individuals experiencing a mental health crisis.

The hotline would be a telephone referral system available 24 hours a day, 7 days a week, to connect individuals experiencing a mental health crisis with local mental health providers using such communication methods as phone calls, texts, e-mails, and internet chats. The hotline would also provide the ability to evaluate callers and direct them to the appropriate level of care support, including substance use disorder treatment and rehabilitation services and suicide prevention services, as needed.

Under the bill, the Department of Health and Human Services (DHHS) would contract for the design, operation, and maintenance of the hotline. DHHS would work with the contractor as well as the Department of Licensing and Regulatory Affairs (LARA) to leverage existing databases and lists of service providers. LARA would provide licensing information for appropriate providers of mental health and substance use disorder services to the contractor on an ongoing basis.

Individuals operating or maintaining the hotline would have to do all of the following:

- Have the ability to access information related to the availability of services, including real-time access to any registry of available inpatient psychiatric beds.
- Have the ability to leverage telehealth resources.
- Implement practices to comply with all applicable laws respecting individual and patient privacy.
- Implement practices to ensure the security of the data collected, in line with industry best practices and in compliance with all applicable laws.
- While respecting those privacy and security considerations, collect data and utilize data analytics to track the success of the hotline's operations and identify trends in service needs and outcomes.

The bill would take effect 90 days after enactment.

Proposed MCL 330.1165

## BACKGROUND:

The bipartisan House C.A.R.E.S. (Community, Access, Resources, Education, and Safety) mental health task force, formed on July 12, 2017, met with stakeholders and the public and toured facilities between July and October 2017 and released its report on January 17, 2018.<sup>1</sup> The report includes recommendations for improving care, developing methods of care, and enhancing care in Michigan's mental health system.

In its list of opportunities to enhance care, the report recommended creation of a Michigan CARES hotline. The report noted the following:

In addition to fulfilling the need for a database, the state should have a crisis hotline for individuals who do not know where to turn for help. This hotline can refer the individual to local services or a health facility that has available providers to address their concerns.

In its July 2018 progress report,<sup>2</sup> the task force included the recommendation for the hotline and listed the following actions toward fulfilling it:

The House approved a plan to require the state to create a psychiatric bed registry to help providers connect patients to care and treatment. Additionally, we are pursuing legislation to create a mental health crisis hotline so callers can be referred to available beds and providers. (*HBs 5439 and 6202; FY 2018/19 budget*)

Currently, each of Michigan's 46 Community Mental Health Service Providers (CMHSPs) and 10 Prepaid Inpatient Health Plans (PIHPs) must maintain an "access system." Each access system must operate or arrange for an access line accessible 24 hours a day, seven days a week, and including in-person and by-telephone access for hearing impaired individuals.<sup>3</sup> Current systems primarily are intended to screen callers for crisis information and to address emergent and urgent needs first. The CARES hotline would be intended as a statewide resource to supplement these services and direct all individuals to applicable resources.

## FISCAL IMPACT:

House Bill 4051 would increase state costs by up to \$6.0 million annually. Public Act 618 of 2018 added \$3.0 million GF/GP to the FY 2018-19 Department of Health and Human Services budget to pilot the Michigan CARES hotline in three geographically diverse areas. The bill would have no fiscal impact on local units of government.

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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.

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<sup>1</sup> <https://house.mi.gov/PDFs/HouseCARESTaskForceReport.pdf>

<sup>2</sup> <https://house.mi.gov/PDFs/HouseCaresProgressReportJuly2018.pdf>

<sup>3</sup> Access System Standards beginning at pg. 66: [https://www.michigan.gov/documents/mdch/FY09-10\\_CMHSP\\_Contract\\_Boilerplatewithattachments\\_312216\\_7.pdf](https://www.michigan.gov/documents/mdch/FY09-10_CMHSP_Contract_Boilerplatewithattachments_312216_7.pdf)