

**As Introduced**

**135th General Assembly**

**Regular Session**

**2023-2024**

**H. B. No. 231**

**Representatives Pavliga, Miller, A.**

**Cosponsors: Representatives Abrams, Blackshear, Brennan, Brent, Carruthers,  
Loychik, Ray, Richardson, Robb Blasdel, Russo, Thomas, C., Troy, White**

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**A BILL**

To amend section 340.03 and to enact sections 1  
5119.80, 5119.801, 5119.803, 5119.805, 5119.807, 2  
5119.809, 5119.8011, 5119.8013, 5119.8014, 3  
5119.8015, and 5119.8017 of the Revised Code to 4  
establish a 9-8-8 suicide prevention and mental 5  
health crisis telephone line. 6

**BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:**

**Section 1.** That section 340.03 be amended and sections 7  
5119.80, 5119.801, 5119.803, 5119.805, 5119.807, 5119.809, 8  
5119.8011, 5119.8013, 5119.8014, 5119.8015, and 5119.8017 of the 9  
Revised Code be enacted to read as follows: 10

**Sec. 340.03.** (A) Subject to rules issued by the director 11  
of mental health and addiction services after consultation with 12  
relevant constituencies as required by division (A) (10) of 13  
section 5119.21 of the Revised Code, each board of alcohol, drug 14  
addiction, and mental health services shall: 15

(1) Serve as the community addiction and mental health 16  
planning agency for the county or counties under its 17

jurisdiction, and in so doing it shall: 18

(a) Evaluate the need for facility services, addiction 19  
services, mental health services, and recovery supports; 20

(b) In cooperation with other local and regional planning 21  
and funding bodies and with relevant ethnic organizations, 22  
evaluate strengths and challenges and set priorities for 23  
addiction services, mental health services, and recovery 24  
supports. A board shall include treatment and prevention 25  
services when setting priorities for addiction services and 26  
mental health services. When a board sets priorities for 27  
addiction services, the board shall consult with the county 28  
commissioners of the counties in the board's service district 29  
regarding the services described in section 340.15 of the 30  
Revised Code and shall give priority to those services, except 31  
that those services shall not have a priority over services 32  
provided to pregnant women under programs developed in relation 33  
to the mandate established in section 5119.17 of the Revised 34  
Code. 35

(c) In accordance with guidelines issued by the director 36  
of mental health and addiction services under division (F) of 37  
section 5119.22 of the Revised Code, annually develop and submit 38  
to the department of mental health and addiction services a 39  
community addiction and mental health plan that addresses both 40  
of the following: 41

(i) The needs of all residents of the district currently 42  
receiving inpatient services in state-operated hospitals, the 43  
needs of other populations as required by state or federal law 44  
or programs, and the needs of all children subject to a 45  
determination made pursuant to section 121.38 of the Revised 46  
Code; 47

(ii) The department's priorities for facility services, 48  
addiction services, mental health services, and recovery 49  
supports during the period for which the plan will be in effect. 50  
The department shall inform all of the boards of the 51  
department's priorities in a timely manner that enables the 52  
boards to know the department's priorities before the boards 53  
develop and submit the plans. 54

In alcohol, drug addiction, and mental health service 55  
districts that have separate alcohol and drug addiction services 56  
and community mental health boards, the alcohol and drug 57  
addiction services board shall submit a community addiction plan 58  
and the community mental health board shall submit a community 59  
mental health plan. Each board shall consult with its 60  
counterpart in developing its plan and address the interaction 61  
between the local addiction and mental health systems and 62  
populations with regard to needs and priorities in developing 63  
its plan. 64

The department shall approve or disapprove the plan, in 65  
whole or in part, in accordance with division (G) of section 66  
5119.22 of the Revised Code. Eligibility for state and federal 67  
funding shall be contingent upon an approved plan or relevant 68  
part of a plan. 69

If a board determines that it is necessary to amend an 70  
approved plan, the board shall submit a proposed amendment to 71  
the director. The director shall approve or disapprove all or 72  
part of the amendment in accordance with division (H) of section 73  
5119.22 of the Revised Code. 74

The board shall operate in accordance with the plan 75  
approved by the department. 76

(d) Promote, arrange, and implement working agreements 77  
with social agencies, both public and private, and with judicial 78  
agencies. 79

(2) Investigate, or request another agency to investigate, 80  
any complaint alleging abuse or neglect of any person receiving 81  
addiction services, mental health services, or recovery supports 82  
from a community addiction services provider or community mental 83  
health services provider or alleging abuse or neglect of a 84  
resident receiving addiction services or with mental illness or 85  
severe mental disability residing in a residential facility 86  
licensed under section 5119.34 of the Revised Code. If the 87  
investigation substantiates the charge of abuse or neglect, the 88  
board shall take whatever action it determines is necessary to 89  
correct the situation, including notification of the appropriate 90  
authorities. Upon request, the board shall provide information 91  
about such investigations to the department. 92

(3) For the purpose of section 5119.36 of the Revised 93  
Code, cooperate with the director of mental health and addiction 94  
services in visiting and evaluating whether the certifiable 95  
services and supports of a community addiction services provider 96  
or community mental health services provider satisfy the 97  
certification standards established by rules adopted under that 98  
section; 99

(4) In accordance with criteria established under division 100  
(D) of section 5119.22 of the Revised Code, conduct program 101  
audits that review and evaluate the quality, effectiveness, and 102  
efficiency of addiction services, mental health services, and 103  
recovery supports provided by community addiction services 104  
providers and community mental health services providers under 105  
contract with the board and submit the board's findings and 106

recommendations to the department of mental health and addiction services; 107  
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(5) In accordance with section 5119.34 of the Revised Code, review an application for a residential facility license and provide to the department of mental health and addiction services any information about the applicant or facility that the board would like the department to consider in reviewing the application; 109  
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(6) Audit, in accordance with rules adopted by the auditor of state pursuant to section 117.20 of the Revised Code, at least annually all programs, addiction services, mental health services, and recovery supports provided under contract with the board. In so doing, the board may contract for or employ the services of private auditors. A copy of the fiscal audit report shall be provided to the director of mental health and addiction services, the auditor of state, and the county auditor of each county in the board's district. 115  
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(7) Recruit and promote local financial support for addiction services, mental health services, and recovery supports from private and public sources; 124  
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(8) In accordance with guidelines issued by the department as necessary to comply with state and federal laws pertaining to financial assistance, approve fee schedules and related charges or adopt a unit cost schedule or other methods of payment for addiction services, mental health services, and recovery supports provided by community addiction services providers and community mental health services providers that have contracted with the board under section 340.036 of the Revised Code; 127  
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(9) Submit to the director and the county commissioners of 135

the county or counties served by the board, and make available 136  
to the public, an annual report of the addiction services, 137  
mental health services, and recovery supports under the 138  
jurisdiction of the board, including a fiscal accounting; 139

(10) Establish a method for evaluating referrals for 140  
court-ordered treatment and affidavits filed pursuant to section 141  
5122.11 of the Revised Code in order to assist the probate 142  
division of the court of common pleas in determining whether 143  
there is probable cause that a respondent is subject to court- 144  
ordered treatment and whether alternatives to hospitalization 145  
are available and appropriate; 146

(11) Designate the treatment services, provider, facility, 147  
or other placement for each person involuntarily committed to 148  
the board pursuant to Chapter 5122. of the Revised Code. The 149  
board shall provide the least restrictive and most appropriate 150  
alternative that is available for any person involuntarily 151  
committed to it and shall assure that the list of addiction 152  
services, mental health services, and recovery supports 153  
submitted and approved in accordance with division (B) of 154  
section 340.08 of the Revised Code are available to persons with 155  
severe mental disabilities residing within its service district. 156  
The board shall establish the procedure for authorizing payment 157  
for the services and supports, which may include prior 158  
authorization in appropriate circumstances. In accordance with 159  
section 340.037 of the Revised Code, the board may provide 160  
addiction services and mental health services directly to a 161  
person with a severe mental disability when life or safety is 162  
endangered and when no community addiction services provider or 163  
community mental health services provider is available to 164  
provide the service. 165

(12) Ensure that housing built, subsidized, renovated, 166  
rented, owned, or leased by the board or a community addiction 167  
services provider or community mental health services provider 168  
has been approved as meeting minimum fire safety standards and 169  
that persons residing in the housing have access to appropriate 170  
and necessary services, including culturally relevant services, 171  
from a community addiction services provider or community mental 172  
health services provider. This division does not apply to 173  
residential facilities licensed pursuant to section 5119.34 of 174  
the Revised Code. 175

(13) Establish a mechanism for obtaining advice and 176  
involvement of persons receiving addiction services, mental 177  
health services, or recovery supports on matters pertaining to 178  
services and supports in the alcohol, drug addiction, and mental 179  
health service district; 180

(14) Perform the duties required by rules adopted under 181  
section 5119.22 of the Revised Code regarding referrals by the 182  
board or community mental health services providers under 183  
contract with the board of individuals with mental illness or 184  
severe mental disability to class two residential facilities 185  
licensed under section 5119.34 of the Revised Code and effective 186  
arrangements for ongoing mental health services for the 187  
individuals. The board is accountable in the manner specified in 188  
the rules for ensuring that the ongoing mental health services 189  
are effectively arranged for the individuals. 190

(15) Work in partnership with the 9-8-8 administrator to 191  
oversee the operation of crisis centers and mobile crisis teams 192  
pursuant to sections 5119.803 and 5119.805 of the Revised Code. 193

(B) Each board of alcohol, drug addiction, and mental 194  
health services shall establish such rules, operating 195

procedures, standards, and bylaws, and perform such other duties 196  
as may be necessary or proper to carry out the purposes of this 197  
chapter. 198

(C) A board of alcohol, drug addiction, and mental health 199  
services may receive by gift, grant, devise, or bequest any 200  
moneys, lands, or property for the benefit of the purposes for 201  
which the board is established, and may hold and apply it 202  
according to the terms of the gift, grant, or bequest. All money 203  
received, including accrued interest, by gift, grant, or bequest 204  
shall be deposited in the treasury of the county, the treasurer 205  
of which is custodian of the alcohol, drug addiction, and mental 206  
health services funds to the credit of the board and shall be 207  
available for use by the board for purposes stated by the donor 208  
or grantor. 209

(D) No member or employee of a board of alcohol, drug 210  
addiction, and mental health services shall be liable for injury 211  
or damages caused by any action or inaction taken within the 212  
scope of the member's official duties or the employee's 213  
employment, whether or not such action or inaction is expressly 214  
authorized by this section or any other section of the Revised 215  
Code, unless such action or inaction constitutes willful or 216  
wanton misconduct. Chapter 2744. of the Revised Code applies to 217  
any action or inaction by a member or employee of a board taken 218  
within the scope of the member's official duties or employee's 219  
employment. For the purposes of this division, the conduct of a 220  
member or employee shall not be considered willful or wanton 221  
misconduct if the member or employee acted in good faith and in 222  
a manner that the member or employee reasonably believed was in 223  
or was not opposed to the best interests of the board and, with 224  
respect to any criminal action or proceeding, had no reasonable 225  
cause to believe the conduct was unlawful. 226

(E) The meetings held by any committee established by a board of alcohol, drug addiction, and mental health services shall be considered to be meetings of a public body subject to section 121.22 of the Revised Code.

(F) (1) A board of alcohol, drug addiction, and mental health services may establish a rule, operating procedure, standard, or bylaw to allow the executive director of the board to execute both of the following types of contracts valued at twenty-five thousand dollars or less, as determined by the board, on behalf of the board without the board's prior approval:

(a) Emergency contracts for clinical services or recovery support services;

(b) Standard service contracts pertaining to the board's operations.

(2) If a board establishes a rule, operating procedure, standard, or bylaw under division (F) (1) of this section, both of the following shall be the case:

(a) The board shall define the scope of contracts described in divisions (F) (1) (a) and (b) of this section in that rule, operating procedure, standard, or bylaw.

(b) The board shall disclose the existence of a contract executed pursuant to the rule, operating procedure, standard, or bylaw at the first board meeting that occurs after the contract was executed and ensure that a record of that disclosure is included in the written minutes of that meeting.

Sec. 5119.80. As used in sections 5119.80 to 5119.8017 of the Revised Code:

(A) "9-8-8 administrator" means the administrator of the 255  
9-8-8 suicide prevention and mental health crisis hotline 256  
system, as established in section 5119.801 of the Revised Code. 257

(B) "9-8-8 suicide prevention and mental health crisis 258  
hotline" or "9-8-8 hotline" means the 9-8-8 universal telephone 259  
number in the United States, as established under 47 U.S.C. 260  
251(e), for the national suicide prevention and mental health 261  
crisis hotline system operating through the national suicide 262  
prevention lifeline program. 263

(C) "Certified community behavioral health clinics" means 264  
a facility meeting the criteria established under section 223 of 265  
the "Protecting Access to Medicare Act of 2014," 42 U.S.C. 1396a 266  
note. 267

(D) "Community mental health center" means a facility 268  
meeting the criteria set forth in section 1913(c) of the "Public 269  
Health Service Act," 42 U.S.C. 300x-2." 270

(E) "Crisis receiving and stabilization services facility" 271  
means a facility providing short-term (under twenty-four hour) 272  
care, with the capacity for diagnosis, initial management, 273  
observation, crisis stabilization, and follow-up referral 274  
services to individuals in a home-like environment. 275

(F) "Local jurisdiction" means a county, municipal 276  
corporation, combination of two or more counties, combination of 277  
two or more municipal corporations, or combination of one or 278  
more counties and one or more municipal corporations, provided 279  
that a combination has been established by a memorandum of 280  
understanding. 281

(G) "National suicide prevention lifeline program" means 282  
the national suicide prevention lifeline program maintained by 283

the assistant secretary for mental health in the substance abuse 284  
and mental health services administration of the United States 285  
department of health and human services under 42 U.S.C. 290bb- 286  
36c. 287

(H) "Peer recovery supporter" means an individual employed 288  
on the basis of personal lived experience of mental illness or 289  
addiction and recovery who is certified under section 5119.36 of 290  
the Revised Code. 291

(I) "Prepaid wireless calling service" has the same 292  
meaning as in section 5739.01 of the Revised Code. 293

(J) "Seller," "reseller," "wireless service," "wireless 294  
service provider," "wireline service," and "wireline service 295  
provider" have the same meanings as in section 128.01 of the 296  
Revised Code. 297

(K) "Voice over internet protocol service" has the same 298  
meaning as in section 4927.01 of the Revised Code. 299

**Sec. 5119.801.** (A) There is hereby established a 9-8-8 300  
administrator within the department of mental health and 301  
addiction services to oversee the administration of the 9-8-8 302  
suicide prevention and mental health crisis hotline system 303  
statewide. 304

(B) The 9-8-8 administrator shall do all of the following: 305

(1) Work with local alcohol, drug addiction, and mental 306  
health services boards and local jurisdictions to designate and 307  
oversee crisis centers and mobile crisis teams pursuant to 308  
sections 5119.803 and 5119.805 of the Revised Code; 309

(2) Collect and maintain data and submit an annual report 310  
pursuant to section 5119.807 of the Revised Code; 311

(3) Oversee the collection and disbursement of money from 312  
the 9-8-8 fund pursuant to sections 5119.809 to 5119.8013 of the 313  
Revised Code; 314

(4) Coordinate with the veterans crisis line, maintained 315  
by the United States secretary of veterans affairs under 38 316  
U.S.C. 1720F(h), and with the national suicide prevention 317  
lifeline program to ensure consistent public messaging about 9- 318  
8-8 services. 319

**Sec. 5119.803.** (A) The 9-8-8 administrator, in conjunction 320  
with the appropriate local jurisdictions, shall designate crisis 321  
centers to participate in the 9-8-8 suicide prevention and 322  
mental health crisis hotline to provide or coordinate crisis 323  
stabilization and intervention services and crisis care 324  
coordination to individuals accessing the 9-8-8 hotline in this 325  
state. The local jurisdiction shall ensure that all residents 326  
within the jurisdiction have access to the services of a 327  
designated crisis center upon accessing the 9-8-8 hotline. The 328  
9-8-8 administrator shall ensure that an adequate number of 329  
crisis centers are designated so that all residents of the state 330  
have access to a crisis center. 331

(B) Administration and operation of a crisis center shall 332  
be overseen by the local alcohol, drug addiction, and mental 333  
health services board whose jurisdiction covers the location of 334  
the crisis center, in collaboration with the 9-8-8 335  
administrator. 336

(C) A crisis center shall do all of the following: 337

(1) Provide crisis response and outgoing services to calls 338  
twenty-four hours a day, seven days a week by personnel who 339  
reflect the demographics of the served community and are trained 340

to serve at-risk communities, including culturally and 341  
linguistically competent services for LGBTQ, racially, 342  
ethnically, and linguistically diverse communities; 343

(2) Deploy mobile crisis teams to the location of an 344  
individual accessing the 9-8-8 hotline, as appropriate; 345

(3) Provide follow-up services to individuals accessing 346  
the 9-8-8 hotline; 347

(4) Utilize technology to allow real-time crisis care 348  
coordination, including text and electronic chat, that enables 349  
information sharing and communication between crisis and 350  
emergency response systems throughout this state, such as 9-1-1, 351  
and the national suicide prevention lifeline program 352  
administrator; 353

(5) Coordinate and, where appropriate, establish formal 354  
agreements and parameters for information sharing, with mental 355  
health and substance use disorder treatment providers, including 356  
all of the following, to provide individuals contacting the 9-8- 357  
8 hotline access to the appropriate resources and services: 358

(a) Hospital emergency departments; 359

(b) Inpatient psychiatric settings; 360

(c) Community mental health services providers, including 361  
certified community behavioral health clinics and community 362  
mental health centers; 363

(d) Crisis receiving and stabilization services 364  
facilities; 365

(e) Mobile crisis teams. 366

(6) Maintain and disburse documents and resources for 367

<u>individuals accessing the hotline in languages other than</u>	368
<u>English that are deemed appropriate for the area served;</u>	369
<u>(7) Maintain a partnership with the local alcohol, drug</u>	370
<u>abuse, and mental health services board whose jurisdiction</u>	371
<u>includes the location of the crisis center to ensure</u>	372
<u>coordination with, and access to, crisis receiving and</u>	373
<u>stabilization services for individuals accessing the 9-8-8</u>	374
<u>hotline, including guidelines for appropriate information</u>	375
<u>sharing about the availability of services and operational</u>	376
<u>processes;</u>	377
<u>(8) Maintain a valid agreement with the national suicide</u>	378
<u>prevention lifeline program administrator to participate in the</u>	379
<u>9-8-8 hotline;</u>	380
<u>(9) Meet all national suicide prevention lifeline program</u>	381
<u>requirements and guidelines for operational and clinical</u>	382
<u>standards and other relevant federal laws;</u>	383
<u>(10) Collect and submit to the 9-8-8 administrator on a</u>	384
<u>quarterly basis all of the following information:</u>	385
<u>(a) The total number of calls received by the crisis</u>	386
<u>center;</u>	387
<u>(b) Demographic information about the callers, including</u>	388
<u>age, sexual orientation or gender identity, and race and</u>	389
<u>ethnicity;</u>	390
<u>(c) Details about the deployment of mobile crisis teams;</u>	391
<u>(d) Any other information that the 9-8-8 administrator</u>	392
<u>deems necessary to comply with federal law.</u>	393
<u>(11) Participate in evaluations and quality improvement</u>	394
<u>activities, as required by the 9-8-8 administrator.</u>	395

Sec. 5119.805. (A) The 9-8-8 administrator, in conjunction 396  
with the appropriate local jurisdictions, shall designate mobile 397  
crisis teams to deploy response services to the location of an 398  
individual accessing the 9-8-8 hotline, as appropriate. The 399  
local jurisdiction shall ensure that all residents within the 400  
jurisdiction have access to the services of a designated mobile 401  
crisis team. The 9-8-8 administrator shall ensure that an 402  
adequate number of mobile crisis teams are designated so that 403  
all residents of the state have access to a mobile crisis team. 404

(B) Administration and operation of a mobile crisis team 405  
shall be overseen by the local alcohol, drug addiction, and 406  
mental health services board whose jurisdiction covers the 407  
location of the mobile crisis team, in collaboration with the 9- 408  
8-8 administrator. 409

(C) A mobile crisis team shall be a locally-based 410  
professional mental health and behavioral health team that 411  
operates as a distinct entity within a crisis center or as part 412  
of a local emergency medical services personnel department or 413  
other emergency response setting, such as a police department. 414  
The team shall include licensed community mental health services 415  
providers, community addiction services providers, and peer 416  
recovery supporters. 417

(D) A mobile crisis team shall do all of the following: 418

(1) Provide onsite, community-based intervention services, 419  
such as de-escalation and stabilization, for individuals who are 420  
experiencing a mental health crisis; 421

(2) Collaborate with local law enforcement agencies to 422  
establish policies and procedures regarding data sharing and 423  
response protocols under the 9-8-8 hotline; 424

(3) Include local law enforcement officers as co-responders to 9-8-8 calls only as needed to respond to high-risk situations that cannot be managed without law enforcement present; 425  
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(4) Maintain and disburse documents and resources for individuals accessing the hotline in languages other than English that are deemed appropriate for the area served. 429  
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(E) A mobile crisis team shall meet both of the following criteria: 432  
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(1) Be designed in partnership with community members, including individuals with lived experience using crisis response and stabilization services; 434  
435  
436

(2) Be staffed by personnel that reflect the demographics of the community served. 437  
438

**Sec. 5119.807.** (A) Not later than one year after the effective date of this section and annually thereafter, the 9-8-8 administrator shall compile an annual report regarding both of the following: 439  
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441  
442

(1) Data collected from local crisis centers pursuant to division (C)(10) of section 5119.803 of the Revised Code; 443  
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(2) Deposits and expenditures from the 9-8-8 fund, pursuant to sections 5119.809 to 5119.8013 of the Revised Code. 445  
446

(B) The 9-8-8 administrator shall submit the report to all of the following: 447  
448

(1) The general assembly, in accordance with section 101.68 of the Revised Code; 449  
450

(2) The state's congressional delegation; 451

<u>(3) The federal communications commission.</u>	452
<b><u>Sec. 5119.809.</u></b> (A) There is hereby created in the state	453
<u>treasury the 9-8-8 fund. The fund shall consist of all money</u>	454
<u>from the following sources:</u>	455
<u>(1) The 9-8-8 charge authorized by section 5119.8011 of</u>	456
<u>the Revised Code;</u>	457
<u>(2) Appropriations made by the general assembly;</u>	458
<u>(3) Money awarded to the state by donation, gift, or</u>	459
<u>bequest, and other money received for purposes of this section;</u>	460
<u>(4) Interest or other earnings on the fund.</u>	461
<u>(B) Money in the 9-8-8 fund is not subject to transfer to</u>	462
<u>any other fund or for any other purpose other than what is</u>	463
<u>provided in section 5119.8013 of the Revised Code.</u>	464
<u>(C) Any money remaining in the fund, including interest</u>	465
<u>thereon, at the end of each fiscal year shall not revert to the</u>	466
<u>general revenue fund but shall remain in the fund.</u>	467
<b><u>Sec. 5119.8011.</u></b> (A) There is hereby imposed a 9-8-8 charge	468
<u>per month on the following:</u>	469
<u>(1) Each subscriber of wireless service or voice over</u>	470
<u>internet protocol service who has a billing address in this</u>	471
<u>state and each wireline service customer;</u>	472
<u>(2) Each retail sale of a prepaid wireless calling service</u>	473
<u>occurring in this state as provided in section 128.42 of the</u>	474
<u>Revised Code.</u>	475
<u>(B) The charge amount shall be ten cents per month for</u>	476
<u>each subscriber or customer and for each retail sale of a</u>	477
<u>prepaid wireless calling service described under division (A) of</u>	478

this section. 479

Sec. 5119.8013. (A) The revenue generated by the 9-8-8 480  
charge authorized under section 5119.8011 of the Revised Code 481  
shall be used only for costs that are reasonably attributed to 482  
any of the following: 483

(1) Ensuring the efficient and effective routing of calls 484  
made to the 9-8-8 hotline to the appropriate crisis center, 485  
including technological infrastructure enhancements necessary to 486  
achieve operational and clinical standards and best practices as 487  
established by the national suicide prevention lifeline program; 488

(2) Maintaining 9-8-8 hotline personnel for crisis centers 489  
and mobile crisis teams throughout the state to provide crisis 490  
response and outgoing services to 9-8-8 hotline callers, 491  
including recruiting personnel who reflect the demographics of 492  
the served community and providing specialized training to serve 493  
at-risk communities, including culturally and linguistically 494  
competent services for LGBTQ, racially, ethnically, and 495  
linguistically diverse communities; 496

(3) Operating costs related to serving at-risk 497  
communities, crisis centers, or comparable service providers and 498  
costs related to the provision of allowable behavioral health, 499  
crisis outreach, and stabilization services for individuals 500  
needing support; 501

(4) Hiring staff at local alcohol, drug addiction, and 502  
mental health services boards and the department of mental 503  
health and addiction services to oversee the 9-8-8 hotline and 504  
assist the 9-8-8 administrator; 505

(5) Provision of data, reporting, and participation in 506  
evaluations and related quality improvement activities as 507

required by the 9-8-8 administrator; 508

(6) Administration, oversight, and evaluation of the fund. 509

(B) The treasurer shall disburse money from the 9-8-8 fund 510  
only upon the request of, or consultation with, the 9-8-8 511  
administrator. 512

**Sec. 5119.8014.** (A) The 9-8-8 administrator shall ensure 513  
that no 9-1-1 charges collected under Chapter 128. of the 514  
Revised Code and that no other funds that are otherwise 515  
appropriated for the 9-1-1 system are used for the benefit of 516  
the 9-8-8 hotline. 517

(B) The 9-8-8 administrator shall ensure that no 9-8-8 518  
charges imposed under section 5119.8011 of the Revised Code and 519  
deposited in the 9-8-8 fund under section 5119.809 of the 520  
Revised Code are used for the benefit of the 9-1-1 system. 521

**Sec. 5119.8015.** The 9-8-8 hotline shall provide crisis 522  
response and outgoing services to all callers at no cost. 523

**Sec. 5119.8017.** Not later than ninety days after the 524  
effective date of this section, the department of mental health 525  
and addiction services shall adopt rules in accordance with 526  
Chapter 119. of the Revised Code as necessary to develop and 527  
implement the 9-8-8 hotline and carry out the requirements of 528  
sections 5119.801 to 5119.8017 of the Revised Code. The rules 529  
shall do all of the following: 530

(A) Establish qualifications and responsibilities for the 531  
9-8-8 administrator within the department, which shall oversee 532  
the administration of the 9-8-8 hotline in conjunction with 533  
local alcohol, drug addiction, and mental health services 534  
boards; 535

(B) Establish the scope of powers for the department of 536  
mental health and addiction services and local alcohol, drug 537  
addiction, and mental health services boards for overseeing the 538  
9-8-8 hotline; 539

(C) Assign tasks to one or more new or existing agencies, 540  
boards, commissions, or other entities to accomplish the 541  
planning required to implement and oversee the requirements of 542  
sections 5119.801 to 5119.8017 of the Revised Code, in 543  
coordination with the department of mental health and addiction 544  
services, 9-1-1 administrators, hospital emergency departments, 545  
and the national suicide prevention lifeline program; 546

(D) Establish timeframes to accomplish the requirements of 547  
sections 5119.801 to 5119.8017 of the Revised Code that are 548  
consistent with the timeframes required by the "National Suicide 549  
Hotline Designation Act of 2020," 47 U.S.C. 251 and rules 550  
adopted by the United States federal communications commission 551  
on July 16, 2020; 552

(E) Provide for the collection and return of the 9-8-8 553  
charge authorized under section 5119.8011 of the Revised Code, 554  
including rules that do the following: 555

(1) Require each wireline service provider, wireless 556  
service provider, seller of prepaid wireless calling service, 557  
reseller, and voice over internet protocol service provider to 558  
remit the 9-8-8 charge amounts to the 9-8-8 administrator; 559

(2) Require the 9-8-8 administrator to deposit 9-8-8 560  
charge funds into the 9-8-8 fund established under section 561  
5119.809 of the Revised Code; 562

(3) Specify how the providers, sellers, and resellers are 563  
to collect and remit the 9-8-8 charge and how the 9-8-8 564

administrator is to deposit the charge amounts into the 9-8-8 565  
fund. 566

(F) Provide for information sharing and communication 567  
between crisis and emergency response systems to offer both of 568  
the following: 569

(1) Real-time coordination between crisis response and 570  
outgoing services; 571

(2) Linked, flexible services specific to crisis response, 572  
such as mobile crisis teams and crisis stabilization facilities. 573

(G) Notwithstanding any provision of section 121.95 of the 574  
Revised Code to the contrary, a regulatory restriction contained 575  
in a rule adopted under this section is not subject to sections 576  
121.95 to 121.953 of the Revised Code. 577

**Section 2.** That existing section 340.03 of the Revised 578  
Code is hereby repealed. 579

**Section 3.** Section 340.03 of the Revised Code as presented 580  
in this act takes effect on the later of April 6, 2023, or the 581  
effective date of this section. April 6, 2023, is the effective 582  
date of an earlier amendment to that section by H.B. 281 of the 583  
134th General Assembly. 584