



**March 15, 2023**

**Bill Number: Neutral SB 135**

**Monica Kurz, VP Policy & Prevention, Kansas Suicide Prevention HQ**

Chairman Thompson and Members of the Committee:

Thank you for the opportunity to testify on SB 135. My name is Monica Kurz, and I am the Vice President for Policy & Prevention at Kansas Suicide Prevention HQ (KSPHQ). My organization is one of four 988 Suicide & Crisis Lifeline crisis call centers operating for Kansas. We provide primary coverage for 103 counties in Kansas and backup coverage to Johnson and Sedgwick counties. We are the only crisis contact center to offer text and online chat support for the entire state. KSPHQ also serves as a resource center for suicide prevention for partners from many different sectors including behavioral health providers, education, first responders, businesses, and many others. We contributed to the writing of the Kansas State Suicide Prevention Plan and are active members of the Kansas Suicide Prevention Coalition which launched in September 2021.

Similar to many other conferees today, I encourage this committee to take a thoughtful approach to medical marijuana in the state of Kansas. According to the 2023 State of Mental Health in America<sup>i</sup> report by MHA (Mental Health America), Kansas ranks 51<sup>st</sup> in mental health. Kansas experiences high prevalence of adult and youth mental health and substance use disorders while also showing very low rates of access to mental health care. Responsible medical marijuana legislation should take steps to support safe prescribing practices while also ensuring that the mental health and substance use treatment services are adequately financially resourced to provide mental health services which includes a robust continuum of crisis mental health services like the 988 Suicide & Crisis Lifeline.

The legislature has made a significant investment in 988 with allocation of State General Funds to support 988 crisis call centers, mobile response teams and crisis receiving facilities. As a result of this investment, 988 has been able to serve more Kansans at local crisis call centers. In-state call data is showing an increase in utilization of the hotline with more callers consistently reaching out for help since the activation of 988 in July 2022. The number of Kansans reaching out via text and chat has also drastically increased with over five times the number of chats/texts being received monthly for the last 6 months than this time last year. Graphs depicting use of 988 statewide both for phone and text are included on the last page of this testimony.

988 is the correct investment for the state as research has shown that crisis line services effectively de-escalate callers who are identified as high risk. This reduces the need for emergency department visits, police and emergency responder calls and other high-cost, restrictive mental health services<sup>ii</sup>. Additional



investigation shows the majority of Lifeline callers are offered referrals to mental health services with more than 40% following through on these referrals<sup>iii</sup>.

Given the increasing demand and effectiveness of hotline services it is essential for reliable and sustainable funding to be identified. My organization encourages this committee and those in the future to consider setting aside a portion of any medical marijuana tax revenues to ensure sufficient funding for 988 crisis behavioral health services. Use of marijuana tax revenue to support suicide prevention and crisis mental health services is not only a logical choice, but also a strategy being utilized in other states.

- Arizona has proposed \$12.5M<sup>iv</sup> in marijuana revenue to be directed to suicide prevention;
- Colorado allocated \$4.9M<sup>v</sup> in FY 21-22 from medical marijuana sales tax revenue to “enhance behavioral health crisis response system”;
- Oregon distributes 25% of marijuana tax revenue on mental health and treatment programs; and
- Illinois directs 20% of marijuana tax revenue to mental health services.<sup>vi</sup>

Thank you for the opportunity to offer testimony on SB 135.

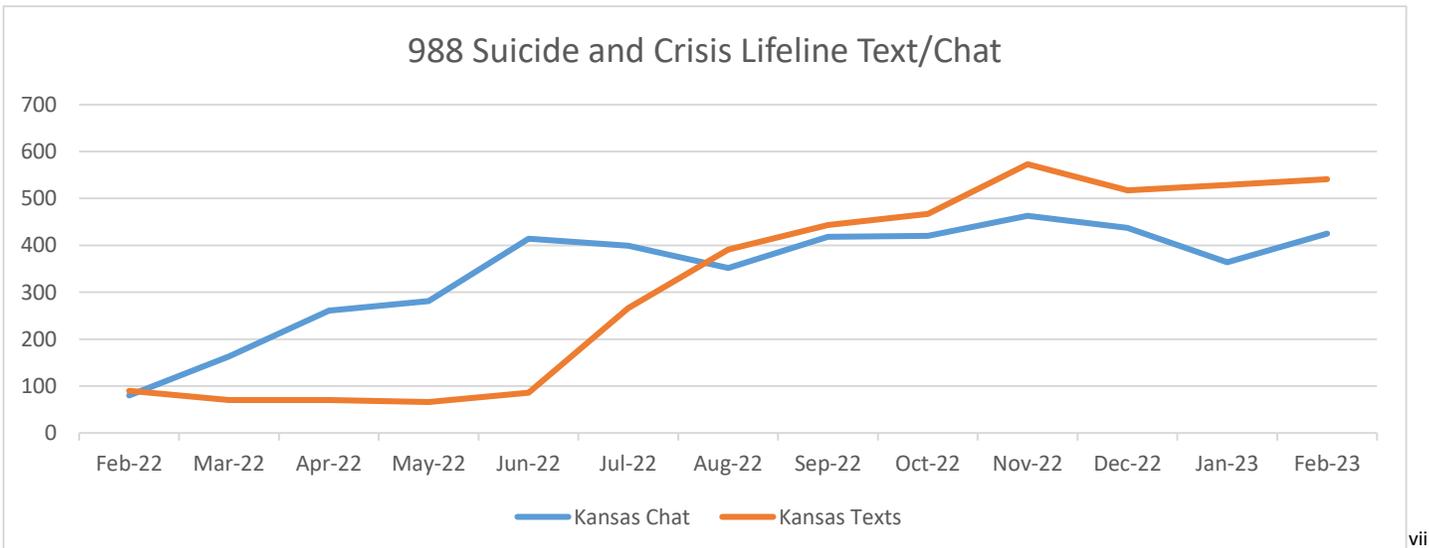
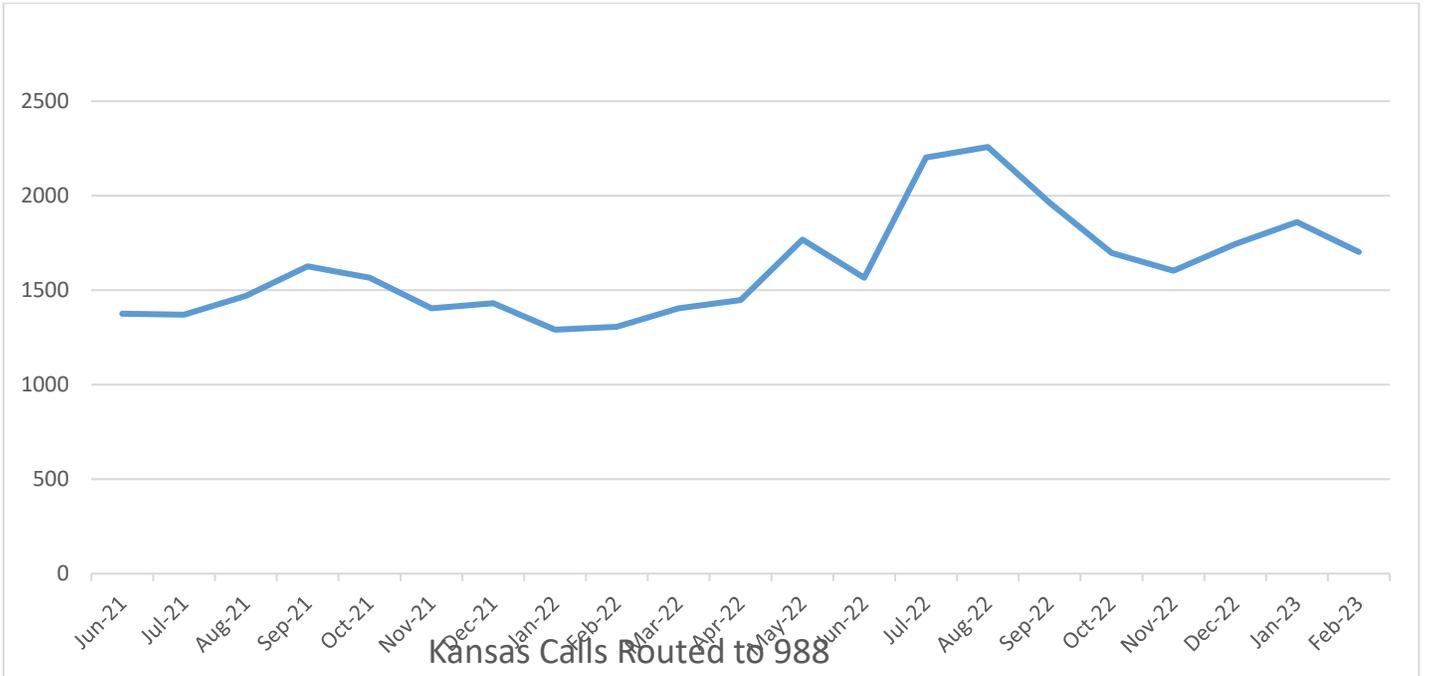
Submitted respectfully,

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<sup>i</sup> Reinert, M, Fritze, D & Nguyen, T. (October 2022). "The State of Mental Health in America 2023" Mental Health America, Alexandria VA. Retrieved from, <https://mhanational.org/sites/default/files/2023-State-of-Mental-Health-in-America-Report.pdf>

<sup>ii</sup> Gould, M. et al. (June 2007). "An Evaluation of Crisis Hotline Outcomes Part 2: Suicidal Callers," *Suicide and Life-Threatening Behavior* 37(3).



# Kansas Suicide Prevention HQ

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<sup>iii</sup> Gould, M. et al. (February 2012). “National Suicide Prevention Lifeline: Enhancing Mental Health Care for Suicidal Individuals and Other People in Crisis,” *Suicide and Life-Threatening Behavior* 42(1).

<sup>iv</sup> State of Arizona. House of Representatives, 55<sup>th</sup> Legislature. HB 2828 retrieved from, <https://www.azleg.gov/legtext/55leg/2R/bills/HB2828P.pdf>

<sup>v</sup> Appropriations report fiscal year 2021-2022, Joint Budget Committee, Colorado Assembly. Retrieved from, [https://leg.colorado.gov/sites/default/files/fy21-22apprept\\_0.pdf](https://leg.colorado.gov/sites/default/files/fy21-22apprept_0.pdf)

<sup>vi</sup> Marijuana Policy Project. Cannabis Tax Revenue in States that Regulate Cannabis for Adult Use. April 2022. Retrieved from: <https://www.mpp.org/issues/legalization/cannabis-tax-revenue-states-regulate-cannabis-adult-use/>

<sup>vii</sup> All call volume, text and chat numbers are retrieved from “Kansas Broad State Metrics Reports.” Original reports can be requested from Kansas Department of Aging and Disability Services, Behavioral Health Commission, 988 Project Coordinator.