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REPORT
118–52

9–8–8 LIFELINE CYBERSECURITY RESPONSIBILITY ACT

MAY 11, 2023.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mrs. RODGERS of Washington, from the Committee on Energy and Commerce, submitted the following

R E P O R T

[To accompany H.R. 498]

The Committee on Energy and Commerce, to whom was referred the bill (H.R. 498) to amend title V of the Public Health Service Act to secure the suicide prevention lifeline from cybersecurity incidents, and for other purposes, having considered the same, reports favorably thereon with an amendment and recommends that the bill as amended do pass.

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The amendment is as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the "9–8–8 Lifeline Cybersecurity Responsibility Act".

SEC. 2. PROTECTING SUICIDE PREVENTION LIFELINE FROM CYBERSECURITY INCIDENTS.

(a) NATIONAL SUICIDE PREVENTION LIFELINE PROGRAM.—Section 520E–3(b) of the Public Health Service Act (42 U.S.C. 290bb–36c(b)) is amended—

(1) in paragraph (4), by striking "and" at the end;

(2) in paragraph (5), by striking the period at the end and inserting "; and"; and

(3) by adding at the end the following:

"(6) coordinating with the Chief Information Security Officer of the Department of Health and Human Services to take such steps as may be necessary to ensure the program is protected from cybersecurity incidents and eliminates known cybersecurity vulnerabilities.".

(b) REPORTING.—Section 520E–3 of the Public Health Service Act (42 U.S.C. 290bb–36c) is amended—

(1) by redesignating subsection (f) as subsection (g); and

(2) by inserting after subsection (e) the following:

"(f) CYBERSECURITY REPORTING.—

"(1) IN GENERAL.—

"(A) IN GENERAL.—The program's network administrator receiving Federal funding pursuant to subsection (a) shall report to the Assistant Secretary, in a manner that protects personal privacy, consistent with applicable Federal and State privacy laws—

"(i) any identified cybersecurity vulnerabilities to the program immediately upon identification of such a vulnerability; and

"(ii) any identified cybersecurity incidents to the program immediately upon identification of such incident.

"(B) LOCAL AND REGIONAL CRISIS CENTERS.—Local and regional crisis centers participating in the program shall report to the program's network administrator identified in subparagraph (A), in a manner that protects personal privacy, consistent with applicable Federal and State privacy laws—

"(i) any identified cybersecurity vulnerabilities to the program immediately upon identification of such vulnerability; and

"(ii) any identified cybersecurity incidents to the program immediately upon identification of such incident.

"(2) NOTIFICATION.—If the program's network administrator receiving funding pursuant to subsection (a) discovers, or is informed by a local or regional crisis center pursuant to paragraph (1)(B) of, a cybersecurity vulnerability or incident, such entity shall immediately report that discovery to the Assistant Secretary.

"(3) CLARIFICATION.—

"(A) OVERSIGHT.—

"(i) LOCAL AND REGIONAL CRISIS CENTER.—Except as provided in clause (ii), local and regional crisis centers participating in the program shall oversee all technology each center employs in the provision of services as a participant in the program.

"(ii) NETWORK ADMINISTRATOR.— The program's network administrator receiving Federal funding pursuant to subsection (a) shall oversee the technology each crisis center employs in the provision of services as a participant in the program if such oversight responsibilities are established in the applicable network participation agreement.

"(B) SUPPLEMENT, NOT SUPPLANT.—The cybersecurity incident reporting requirements under this subsection shall supplement, and not supplant, cybersecurity incident reporting requirements under other provisions of applicable Federal law that are in effect on the date of the enactment of the 9–8–8 Lifeline Cybersecurity Responsibility Act.".

(c) STUDY.—Not later than 180 days after the date of the enactment of this Act, the Comptroller General of the United States shall—

(1) conduct and complete a study that evaluates cybersecurity risks and vulnerabilities associated with the 9–8–8 National Suicide Prevention Lifeline; and

(2) submit a report of the findings of such study to the Committee on Energy and Commerce of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate.

PURPOSE AND SUMMARY

H.R. 498 amends title V of the Public Health Service Act to require the Assistant Secretary for Substance Abuse and Mental Health Services Administration (SAMHSA) to coordinate 9–8–8 lifeline cybersecurity protections with the Chief Information Secu-

rity Officer of the Department of Health and Human Services (HHS). It also requires the 9–8–8 lifeline administrator and local call centers to report cybersecurity vulnerabilities and incidents to SAMHSA immediately.

BACKGROUND AND NEED FOR LEGISLATION

The 9–8–8 Lifeline suffered a cybersecurity attack in December 2022 and was proactively taken offline for several hours due to the attack. It is unknown how many individuals were negatively impacted by the outage, but we do know that individuals in emotional distress or suicidal crisis were unable to utilize the lifeline for hours. This legislation was introduced in direct response to the cyberattack in an effort to prevent future incidents.

COMMITTEE ACTION

On February 1, 2023, the Subcommittee on Health held a hearing on H.R. 498. The Subcommittee received testimony from:

- Mr. Kemp Chester, Senior Advisor, International Relations and Supply Reduction, Office of National Drug Control Policy (ONDCP)
- Dr. Neeraj Gandotra, Chief Medical Officer, Substance Abuse and Mental Health Services Administration (SAMHSA)
- Mr. Jon C. DeLena, Associate Administrator, Business Operations, Drug Enforcement Administration (DEA)
- Ms. Kandi Pickard, President and CEO, National Down Syndrome Society (NDSS)
- Mr. Frederick Isasi, J.D. MPH, Executive Director, Families USA
- Ms. Molly Cain, Parent Advocate
- Dr. Stephen Loyd, MD, Chief Medical Officer, Cedar Recovery
- Dr. Timothy Westlake, MD, Emergency Medicine Physician

On March 8, 2023, the Subcommittee on Health met in open markup session and forwarded H.R. 498, as amended, to the full Committee by a record vote of 28 yeas and 0 nays. On March 24, 2023, the full Committee on Energy and Commerce met in open markup session and ordered H.R. 498, as amended, favorably reported to the House by a record vote of 44 yeas and 0 nays.

COMMITTEE VOTES

Clause 3(b) of rule XIII requires the Committee to list the record votes on the motion to report legislation and amendments thereto. The following reflects the record votes taken during the Committee consideration:

COMMITTEE ON ENERGY AND COMMERCE
118TH CONGRESS
ROLL CALL VOTE # 16

BILL: H.R. 498, the 9-8-8 Lifelines Cybersecurity Responsibility Act

AMENDMENT: A motion by Mrs. Rodgers to order H.R. 498 favorably reported to the House, as amended (Final Passage).

DISPOSITION: **AGREED TO,** by a roll call vote of 46 yeas and 0 nays.

REPRESENTATIVE	YEAS	NAYS	PRESENT	REPRESENTATIVE	YEAS	NAYS	PRESENT
Rep. Rodgers	X			Rep. Pallone	X		
Rep. Burgess	X			Rep. Eshoo	X		
Rep. Latta	X			Rep. DeGette	X		
Rep. Guthrie	X			Rep. Schakowsky	X		
Rep. Griffith	X			Rep. Matsui	X		
Rep. Bilirakis	X			Rep. Castor	X		
Rep. Johnson	X			Rep. Sarbanes	X		
Rep. Bucshon				Rep. Tonko	X		
Rep. Hudson	X			Rep. Clarke			
Rep. Walberg	X			Rep. Cárdenas	X		
Rep. Carter	X			Rep. Ruiz	X		
Rep. Duncan	X			Rep. Peters	X		
Rep. Palmer				Rep. Dingell	X		
Rep. Dunn	X			Rep. Veasey	X		
Rep. Curtis	X			Rep. Kuster	X		
Rep. Lesko	X			Rep. Kelly			
Rep. Pence	X			Rep. Barragán			
Rep. Crenshaw				Rep. Blunt Rochester	X		
Rep. Joyce	X			Rep. Soto	X		
Rep. Armstrong	X			Rep. Craig	X		
Rep. Weber	X			Rep. Schrier	X		
Rep. Allen	X			Rep. Trahan	X		
Rep. Balderson	X			Rep. Fletcher	X		
Rep. Fulcher	X						
Rep. Pfluger	X						
Rep. Harshbarger	X						
Rep. Miller-Meeks	X						
Rep. Cammack	X						
Rep. Obernolte	X						

03/24/2023

OVERSIGHT FINDINGS AND RECOMMENDATIONS

Pursuant to clause 2(b)(1) of rule X and clause 3(c)(1) of rule XIII, the Committee held a hearing and made findings that are reflected in this report.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX EXPENDITURES

Pursuant to clause 3(c)(2) of rule XIII, the Committee finds that H.R. 498 would result in no new or increased budget authority, entitlement authority, or tax expenditures or revenues.

CONGRESSIONAL BUDGET OFFICE ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII, at the time this report was filed, the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974 was not available.

FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates prepared by the Director of the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII, the general performance goal or objective of this legislation is to require increased coordination and reporting to prevent future cyberattacks on the 9–8–8 lifeline.

DUPLICATION OF FEDERAL PROGRAMS

Pursuant to clause 3(c)(5) of rule XIII, no provision of H.R. 498 is known to be duplicative of another Federal program, including any program that was included in a report to Congress pursuant to section 21 of Public Law 111–139 or the most recent Catalog of Federal Domestic Assistance.

RELATED COMMITTEE AND SUBCOMMITTEE HEARINGS

Pursuant to clause 3(c)(6) of rule XIII, the following related hearing was used to develop or consider H.R. 498:

On February 1, 2023, the Subcommittee on Health held a hearing on H.R. 498. The Subcommittee received testimony from:

- Mr. Kemp Chester, Senior Advisor, International Relations and Supply Reduction, Office of National Drug Control Policy (ONDCP)
- Dr. Neeraj Gandotra, Chief Medical Officer, Substance Abuse and Mental Health Services Administration (SAMHSA)
- Mr. Jon C. DeLena, Associate Administrator, Business Operations, Drug Enforcement Administration (DEA)
- Ms. Kandi Pickard, President and CEO, National Down Syndrome Society (NDSS)
- Mr. Frederick Isasi, J.D. MPH, Executive Director, Families USA
- Ms. Molly Cain, Parent Advocate

• Dr. Stephen Loyd, MD, Chief Medical Officer, Cedar Recovery
• Dr. Timothy Westlake, MD, Emergency Medicine Physician

COMMITTEE COST ESTIMATE

Pursuant to clause 3(d)(1) of rule XIII, the Committee adopts as its own the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974. At the time this report was filed, the estimate was not available.

EARMARK, LIMITED TAX BENEFITS, AND LIMITED TARIFF BENEFITS

Pursuant to clause 9(e), 9(f), and 9(g) of rule XXI, the Committee finds that H.R. 498 contains no earmarks, limited tax benefits, or limited tariff benefits.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act were created by this legislation.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that the legislation does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1. Short title

Section 1 provides a short title of "9–8–8 Lifeline Cybersecurity Responsibility Act."

Section. 2. Protecting suicide prevention lifeline from cybersecurity incidents

Section 2 amends section 520E–3(b) of the Public Health Service Act to coordinate 9–8–8 lifeline cybersecurity protections with the Chief Information Security Officer of the Department of Health and Human Services (HHS). It also requires the 9–8–8 lifeline administrator and local call centers to report cybersecurity vulnerabilities and incidents to SAMHSA immediately.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italics, and existing law in which no change is proposed is shown in roman):

PUBLIC HEALTH SERVICE ACT

* * * * * * *

TITLE V—SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

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PART B—CENTERS AND PROGRAMS

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Subpart 3—Center for Mental Health Services

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SEC. 520E–3. NATIONAL SUICIDE PREVENTION LIFELINE PROGRAM.

(a) IN GENERAL.—The Secretary, acting through the Assistant Secretary, shall maintain the National Suicide Prevention Lifeline program (referred to in this section as the "program"), authorized under section 520A and in effect prior to the date of enactment of the Helping Families in Mental Health Crisis Reform Act of 2016.

(b) ACTIVITIES.—In maintaining the program, the activities of the Secretary shall include—

(1) supporting and coordinating a network of crisis centers across the United States for providing suicide prevention and mental health crisis intervention services, including appropriate follow-up services, to individuals seeking help at any time, day or night;

(2) maintaining a suicide prevention hotline to link callers to local emergency, mental health, and social services resources;

(3) consulting with the Secretary of Veterans Affairs to ensure that veterans calling the suicide prevention hotline have access to a specialized veterans' suicide prevention hotline;

(4) improving awareness of the program for suicide prevention and mental health crisis intervention services, including by conducting an awareness initiative and ongoing outreach to the public; [and]

(5) improving the collection and analysis of demographic information, in a manner that protects personal privacy, consistent with applicable Federal and State privacy laws, in order to understand disparities in access to the program among individuals who are seeking help[.]*; and*

(6) coordinating with the Chief Information Security Officer of the Department of Health and Human Services to take such steps as may be necessary to ensure the program is protected from cybersecurity incidents and eliminates known cybersecurity vulnerabilities.

(c) PLAN.—

(1) IN GENERAL.—For purposes of supporting the crisis centers under subsection (b)(1) and maintaining the suicide prevention hotline under subsection (b)(2), the Secretary shall develop and implement a plan to ensure the provision of high-quality services.

(2) CONTENTS.—The plan required by paragraph (1) shall include the following:

(A) Program evaluation, including performance measures to assess progress toward the goals and objectives of the program and to improve the responsiveness and performance of the hotline, including at all backup call centers.

(B) Requirements that crisis centers and backup centers must meet—

(i) to participate in the network under subsection (b)(1); and

(ii) to ensure that each telephone call and applicable other communication received by the hotline, including at backup call centers, is answered in a timely manner, consistent with evidence-based guidance or other guidance or best practices, as appropriate.

(C) Specific recommendations and strategies for implementing evidence-based practices, including with respect to followup and communicating the availability of resources in the community for individuals in need.

(D) Criteria for carrying out periodic testing of the hotline during each fiscal year, including at crisis centers and backup centers, to identify and address any problems in a timely manner.

(3) CONSULTATION.—In developing requirements under paragraph (2)(B), the Secretary shall consult with State departments of health, local governments, Indian Tribes, and Tribal organizations.

(4) INITIAL PLAN; UPDATES.—The Secretary shall—

(A) not later than 1 year after the date of enactment of the Restoring Hope for Mental Health and Well-Being Act of 2022, complete development of the initial plan under paragraph (1) and make such plan publicly available; and

(B) periodically thereafter, update such plan and make the updated plan publicly available.

(d) IMPROVING EPIDEMIOLOGICAL DATA.—The Secretary shall, as appropriate, formalize and strengthen agreements between the Suicide Prevention Lifeline program and the Centers for Disease Control and Prevention with respect to the secure sharing of de-identified epidemiological data. Such agreements shall include appropriate privacy and security protections that meet the requirements of applicable Federal law, at a minimum.

(e) DATA TO ASSIST STATE AND LOCAL SUICIDE PREVENTION ACTIVITIES.—The Secretary shall ensure that the aggregated information collected and any applicable analyses conducted under subsection (b)(5), including from local call centers, as applicable, are made available in a usable format to State and local agencies in order to inform suicide prevention activities.

(f) CYBERSECURITY REPORTING.—

(1) IN GENERAL.—

(A) IN GENERAL.—The program's network administrator receiving Federal funding pursuant to subsection (a) shall report to the Assistant Secretary, in a manner that protects personal privacy, consistent with applicable Federal and State privacy laws—

(i) any identified cybersecurity vulnerabilities to the program immediately upon identification of such a vulnerability; and

(ii) any identified cybersecurity incidents to the program immediately upon identification of such incident.

(B) LOCAL AND REGIONAL CRISIS CENTERS.—Local and regional crisis centers participating in the program shall re-

port to the program's network administrator identified in subparagraph (A), in a manner that protects personal privacy, consistent with applicable Federal and State privacy laws—

(i) any identified cybersecurity vulnerabilities to the program immediately upon identification of such vulnerability; and

(ii) any identified cybersecurity incidents to the program immediately upon identification of such incident.

(2) NOTIFICATION.—If the program's network administrator receiving funding pursuant to subsection (a) discovers, or is informed by a local or regional crisis center pursuant to paragraph (1)(B) of, a cybersecurity vulnerability or incident, such entity shall immediately report that discovery to the Assistant Secretary.

(3) CLARIFICATION.—

(A) OVERSIGHT.—

(i) LOCAL AND REGIONAL CRISIS CENTER.—Except as provided in clause (ii), local and regional crisis centers participating in the program shall oversee all technology each center employs in the provision of services as a participant in the program.

(ii) NETWORK ADMINISTRATOR.— The program's network administrator receiving Federal funding pursuant to subsection (a) shall oversee the technology each crisis center employs in the provision of services as a participant in the program if such oversight responsibilities are established in the applicable network participation agreement.

(B) SUPPLEMENT, NOT SUPPLANT.—The cybersecurity incident reporting requirements under this subsection shall supplement, and not supplant, cybersecurity incident reporting requirements under other provisions of applicable Federal law that are in effect on the date of the enactment of the 9–8–8 Lifeline Cybersecurity Responsibility Act.

[(f)**]** *(g)* AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated $101,621,000 for each of fiscal years 2023 through 2027.

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