

The Calling for 2-1-1 Act

In January 2007, both houses of the 110th Congress re-introduced the *Calling for 2-1-1 Act*, which, if passed, will provide financial support to designated 2-1-1 state entities.

Local support of the *Calling for 2-1-1 Act* – from state legislators, community leaders, nonprofit agencies and citizens – is critical in moving this legislation through Congress.

What does the Calling for 2-1-1 Act do?

The bill authorizes \$150 million for years one and two, and \$100 million for years three through five through the U.S. Department of Health and Human Services (HHS) to help implement and sustain 2-1-1 nationwide. States would designate, if they have not already, a lead entity for 2-1-1 which would develop a statewide plan for implementation and administration of the funds. States would be required to provide a 50% match in order to draw down the federal dollars.

Why \$150 million in federal funding?

The University of Texas at Austin’s cost/benefit analysis estimates that operating a decentralized nationwide 2-1-1 system (the model that describes the current system) costs approximately \$285 million. These operating expenses do not include costs to launch 2-1-1 centers, which are estimated at \$50 million for the next two years. 2-1-1 leaders are working to unify the nationwide system.

What are the financial benefits of 2-1-1?

A national cost-benefit analysis conducted by the University of Texas estimates a net value to society of a national 2-1-1 system at almost \$130 million in the first year alone and a conservative estimate of \$1.1 billion over ten years. Savings include time saved, tax assistance and recovery, volunteer recruitment, 24/7 service, a reduction in the number of 1-800 numbers, and a reduction in non-emergency calls to 9-1-1.

The research found that the viability of maintaining and expanding a standards-based, national 2-1-1 information and referral network is dependent on the infusion of additional funds.

The study also determined that the national 2-1-1 effort is ripe for enhanced public-private sector collaboration, as the entities which operate the 2-1-1 call centers and the public agencies, which administer the vast majority of health and human services resources recognize the complementary features of their service delivery systems.

Finally, 93% of the users surveyed by the University of Texas indicated they found the information they sought with ease, and 97% said they would call 2-1-1 again.

There is evidence that investing in 2-1-1 will result in long-term cost savings. The University of Nebraska’s Public Policy Center estimates that a fully realized 2-1-1 system in Nebraska will bring \$7.4 million in benefits to the state of Nebraska with a population of 1.7 million.

Why does the Calling for 2-1-1 Act call for administration through the U.S. Department of Health and Human Services?

HHS has years of experience in administering information and referral services for human needs. There are over 964,000 nonprofit organizations in the United States plus scores of government agencies. People looking for assistance have trouble navigating a complicated web of health and human service programs.

In a report following the events of September 11th, the General Accounting Office highlighted the need for a more efficient service delivery system:

While charitable organizations took immediate steps to get aid to those in need, families and victims generally believed that they had to navigate a maze of service providers and confusion existed about the range of services available to people, particularly those facing job or housing losses. (GAO-03-259 Report)

What can the federal funding be used for?

The federal funding can be used for a variety of 2-1-1 related purposes, including but not limited to planning for and implementing 2-1-1, operating costs, technology upgrades, public awareness, training and evaluation.