

**North American Numbering Council
Meeting Transcript
Thursday, March 28, 2019 (FINAL)**

I. Time and Place of Meeting. The North American Numbering Council Meeting (NANC) held a meeting commencing at 9:30 a.m., at the Federal Communications Commission, 445 12th Street, S.W., Room TW-C305, Washington, D.C. 20554.

II. List of Attendees.

Voting Council Members:

- | | |
|-------------------------------|--------------------------------------|
| 1. Travis Kavulla | NANC Chairman (R Street Institute) |
| 2. Susan Gately | Ad Hoc Telecommunications Users Cmte |
| 3. Jacquelyne Flemming | AT&T |
| 4. Jacqueline Wohlgemuth | ATIS |
| 5. Lisa Jill Freeman | Bandwidth.com |
| 6. Betty Sanders | Charter Communications |
| 7. Beth Choroser | Comcast Corporation |
| 8. Courtney Neville | Competitive Carriers Association |
| 9. Matthew Gerst | CTIA |
| 10. Carolee Hall | NARUC - ID |
| 11. Honorable Karen Peterson | NARUC – MA |
| 12. Honorable Crystal Rhoades | NARUC - NE |
| 13. Barry Hobbins | NASUCA |
| 14. Jerome Candelaria | NCTA |
| 15. Brian Ford | NTCA |
| 16. Julie Oost | Peerless Network |
| 17. Richard Shockey | SIP Forum |
| 18. Shaunna Forshee | Sprint |
| 19. Paul Nejedlo | TDS Telecommunications |
| 20. David Casem | Telnyx |
| 21. Bridget Alexander White | USConnect |
| 22. Mike Saperstein | USTelecom |
| 23. Dana Crandall | Verizon |
| 24. Darren Krebs | Vonage |
| 25. Robert McCausland | West Telecom Services |

Special Members (Non-voting):

- | | |
|------------------|-----------|
| 1. Chris Drake | iconectiv |
| 2. Ann Berkowitz | Somos |

Commission Employees:

Marilyn Jones, Designated Federal Officer (DFO)
Michelle Sclater, Alternate DFO
Kris Monteith, Chief, Wireline Competition Bureau (WCB)
Pam Arluk, Chief, Competition Policy Division
Ann Stevens, Deputy Chief, Competition Policy Division (CPD), WCB
Zachary Ross, Attorney-Advisor, CPD, WCB
Josh Zeldis, Attorney-Advisor, CPD, CGB
Myrva Charles, Contracting Officer Representative, CPD, WCB
Darlene Bidy, Management Analyst, CPD, WCB

III. Estimate of Public Attendance. Approximately 10 members of the public attended the meeting as observers.

IV. Documents Introduced.

- (1) Agenda
- (2) NANC Meeting Transcript – February 14, 2019
- (3) NNP Technical Subcommittee Report Interim Report to the NANC
- (4) Numbering Administration Oversight Working Group (NAOWG) Status Report
- (5) National Suicide Hotline Improvement Act: Substance Abuse and Mental Health Services Administration (SAMHSA) Report to the FCC
- (6) Veterans Crisis Line Overview: National Suicide Hotline Improvement Act
- (7) Reassigned Numbers Database Report and Order FCC 18-177: North American Numbering Council Presentation
- (8) NAOWG’s Contract Oversight Subcommittee Report
- (9) Interoperable Video Calling (IVC) Working Group Report
- (10) North American Portability Management LLC (NAPM LLC) Report

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WELCOMING REMARKS/ANNOUNCEMENTS & RECENT NEWS/APPROVAL OF TRANSCRIPT

Travis Kavulla: Let’s call this meeting to order. This is the regular quarterly meeting of the NANC. There should be a sign-in sheet going around the room. If you’re attending telephonically, please just be sure to send a message to Marilyn so that she can note your attendance for the record.

By way of announcements, there’s been a number of deadlines extended by the FCC, many of them following on the government shutdown that delayed the meetings of various working groups because of the absence of our friends at the FCC. I think at this point we’ve reached a place where people know their deadlines and hopefully can meet them. If you can’t, then I know the FCC is open to additional communications on that subject.

We've got a relatively full agenda today. We'll begin by discussing Nationwide Number Portability and the report that's being given there before moving to a continuation of the N11 discussion, which was the subject of our last meeting, and after which we've got a referral for another bit of scope on that. I'm going to be here for the first part, for those first two items, and then I'll hand it over to Marilyn because I'm regrettably double-booked today.

So, with that, we'll ask if there are any corrections that needed to be made with respect to the transcript which was circulated to NANC members. Are there any? If not, can I have a motion to approve it?

Robert McCausland: I move that the minutes be approved.

Travis Kavulla: Okay. Is there a second?

Female Voice: I second.

Travis Kavulla: It has been moved and seconded that the transcript of the last meeting be approved. Those who are in favor, please say aye.

Voices: Aye.

Travis Kavulla: Aye. Any opposed? Okay. We'll mark the transcript approved and we'll move on to our first item for the day. That is Mary Retka, the NNP Technical Subcommittee chair. This is an update of the subcommittee's work on Nationwide Number Portability.

UPDATE AND DISCUSSION OF THE NATIONWIDE NUMBER PORTABILITY (NNP)

TECHNICAL SUBCOMMITTEE REPORT

Mary Retka: Thank you, Chairman Kavulla. The Nationwide Number Portability Technical Subcommittee has been working since we were authorized back last fall. The group has remained the same LISTSERV group except our FCC liaison has changed to Zachary Ross from Sherwin Siy. The subcommittee members all had a good running start having been involved, almost across the board, in the original Nationwide Number Portability Working Group.

At the time of the government shutdown, the group was directed by our liaison to disengage in our work during that period. So we came back together after the shutdown to begin again. The subcommittee has requested an extension of time. The extension is still under review at the FCC and we should have that information fairly soon.

The work of the committee started out looking at both the NGLRN and the NLRN proposals that came forward from the original NNP group. In order to get started at looking at these more deeply, we began with the call flows. You'll all remember that in the previous report that came to the NANC you had call flows that were a part of the original report. But we went deeper into those call flows and we looked at it not just from the perspective of one modality but from wireline/wireless and interconnected VoIP all the way to all the wireline legacy switches as well.

And we were looking at the way that the calls processed across the network in order to try to find a possibility for a means that

could be used across the board. So, we developed then some tables that we'll lay out for the functionality of the originating switch, the transit and the terminating switch, basically to answer the FCC's question about what are the cost involvement, who bears those cost, and also who gets the benefit of the use of Nationwide Number Portability from the cost that were incurred by those parties. We're in the process of finalizing all of that work.

Looking at each solution, we've made some adjustments in both solutions. In fact, we've made some significant changes to what was proposed in the original Nationwide Number Portability report as NGLRN - non-geographic LRN - and we've decided to rename that proposal because it has changed so much to IPLRN. Our report will explain that and refer to that. Everything that we're doing, all these findings, will be a part of the final report that is made to the NANC once we have the finality on the timing on the final report.

Travis Kavulla: Okay. I am confident that your deadline will be extended. Any questions for Mary on this matter or does anyone want to amplify from the subcommittee anything that she had said? Wow. I put this first on the agenda because I thought NNP would get people going. But we don't need to dwell on it if not. Okay. Well, thank you very much, Mary.

Mary Retka: Thank you.

Travis Kavulla: All right. We'll turn now to the continuation of a discussion we had last time and which essentially was deferred. That's the NAOWG's report on the National Suicide Hotline Improvement

Act and the N11 potential designation. We'll turn to Carolee Hall from the Idaho PUC for that purpose.

**UPDATE AND DISCUSSION OF THE NUMBERING ADMINISTRATION OVERSIGHT
WORKING GROUP REPORT ON THE NATIONAL SUICIDE HOTLINE ACT (NSHIA)**

Carolee Hall: Thank you, Chairman. The Numbering Administration Oversight Working Group and subcommittee have been very busy working on three significant projects - report on feasibility of a three-digit code for the national suicide prevention and mental health crisis hotline, developing the fee and cost recovery structure for the reassigned numbers database, and developing the TRD for the reassigned numbers database.

On the national suicide prevention and mental health crisis hotline, the NAOWG has to develop a report on the feasibility of establishing a three-digit code for a national suicide prevention and mental health crisis hotline. On February 14th the NAOWG presented its initial report and recommendation to the NANC where the vote was deferred pending a few edits. On February 22nd the FCC further directed the NANC through the NAOWG to address the additional questions:

If the FCC were to determine that adopting a three-digit dialing code for suicide mental health crisis hotline system is warranted, what N11 code or non-N11 three-digit code would the NANC recommend and why? If the NANC recommends designating a new code that does not use a number sign or a star, then the NAOWG was directed to consult with

the NANPA to determine (1) if there is a specific code or codes best suited for this purpose, and (2) the impact of using that code or codes on the NANP exhaust. If the NANC recommended repurposing an existing N11 dialing code, which code would be recommended and why? If the NANC were to recommend an existing N11 code, which code would it recommend for expansion, and why? Given the three options, which would the NANC recommend?

For the three-digit recommendations the working group was also asked to explain in detail the steps and timelines required to implement cost associated with implementation for service providers, states and localities, and the federal government. The February 22, 2019 referral also asked the NAOWG to use reports from the Department of Health and Human Services' Substance Abuse and Mental Health Services Administration and the Department of Veterans Affairs' Veterans Health Administration for any information relevant to the cost analysis.

The NAOWG's activities had been the collection of an aggregation and analysis of call volumes utilization data from each N11 code from nine associations for the period from December 1, 2018 to February 28, 2019. The aggregated data from which association is due is no later than March 29th, tomorrow. To help determine whether to recommend a new non-N11 that does not use a number sign or a star and which non-N11 three-digit code to recommend, the NAOWG had asked the NANPA and iconectiv for information. The organizations have been very helpful in providing this.

The NAOWG had also submitted questions and request for information to the Department of Health and Human Services; Department of Veterans Affairs; Alliance of Information and Referral Systems, AIRS, which is a nonprofit professional association that provides standards, accreditations, and certifications for the community information and referral section; and, the National Association of State 911 Administrators. Since the last NANC meeting, the NAOWG held nine meetings averaging two hours each and expects to have its report completed by April 11th.

And I guess we have reports from the Veterans Affairs and the substance abuse organizations?

Travis Kavulla: Let's go to them now and then we'll hold questions.

Carolee Hall: Very good.

Travis Kavulla: Okay. We'll start with Richard McKeon. Richard, I hope I'm getting your name correct. Thank you for attending today. Richard is with the SAMHSA which is the Substance Abuse and Mental Health Services Administration, one of the bodies that was designated to prepare a report pursuant to this piece of legislation. Go ahead.

**OVERVIEW OF THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES
ADMINISTRATION (SAMHSA) REPORT TO FCC ON NSHIA**

Richard McKeon: Great. I'm pleased to be here with you. I'm glad to give you a summary of the report. My apologies for getting it

late last night. Hopefully people did receive copies of it. So let me go over that with you. I presume there'll be a time for questions that we'll be able to go through beyond that.

[Off-topic conversation]

Let me just start by framing the context in terms of suicide prevention in the United States, and this is what we do in the report as well. The most significant context is that in 2017, the last year for which we have data, over 47,000 Americans died by suicide. According to a report that came out from the CDC last year, suicide has been rising in 49 of the 50 states. In half of those states the increase in suicides is greater than 30 percent. The increase between 2016 and 2017 was the largest in the past decade. So it was within this context that I think attention has been paid to the issue of improving national hotline services.

The report starts off in addition with that as the context, then moves into talking about the history, development and structure of the National Suicide Prevention Lifeline. So the first national network that received federal funding through SAMHSA started in the year 2001. The current National Suicide Prevention Lifeline was launched in 2005. 2007 was a particularly important year. It was that year that SAMHSA and the Department of Veterans Affairs reached agreement that the National Suicide Prevention Lifeline be used as a portal for reaching the Veterans Crisis Line. And you'll be learning more about that from my colleague, Mr. Wright, who will be presenting after me regarding the VA report. We also instituted a chat service in 2011.

Now let me go over a little bit to the structure of the National Suicide Prevention Lifeline because it's a network of crisis centers, 163, who have agreed to receive calls through the National Suicide Prevention Lifeline. The federal government does not fund these 163 crisis centers actually to answer the calls. It's a decentralized network, so it's not a large crisis service. It's structured differently than the Veterans Crisis Line, as you'll hear from Mr. Wright. It pays for technical assistance to the crisis centers. It pays for the routing structure and the administration they need to make to changes. It pays for the phone bill for the 1-800 number which is 1-800-273-TALK.

The service routes calls from anywhere in the United States to the closest certified local crisis centers with the exception of if the person presses 1, in which case they're connected to the Veterans Crisis Line; or, if they press 2, they are connected to a smaller network of crisis centers that have Spanish language capacity. Then the counselors, their responsibilities are to assess callers for their suicide risk, to provide crisis counseling, crisis intervention, engage emergency services when necessary, provide referrals to mental health, and then substance use services.

In 2018 the Lifeline answered a total of 2.2 million calls with an average of 183,000 calls per month. Now it's at this point that you're not able to see the chart for the lifeline call flow, but it's in the packet. If you have them, it's page number 7. That gives you a sense of how calls get routed through the system.

The next part of our report goes over the issue of the effectiveness of the National Suicide Prevention Lifeline. SAMHSA has funded evaluation studies on the effectiveness of the Lifeline since 2001. So we felt we had a lot of information to be able to speak to the effectiveness of the current National Suicide Prevention Lifeline.

A couple of key findings from those evaluations. One was that we learned that seriously suicidal individuals were calling the Lifeline. Before that the view typically was that, if you were really suicidal, you wouldn't call the hotline. Our evaluation study showed that in fact that was not accurate. Many seriously suicidal people would call. Our evaluation studies showed that there were significant decreases in calls or reports of intent to die, hopelessness, and psychological pain over the course of the call. That was encouraging information that those evaluation studies showed regarding effectiveness and regarding the significant risk of many of the callers to the Lifeline.

We also did studies on callers who are at imminent risk. In other words, a danger of acting on their thoughts about suicide in the very near future or might even be in the process of making a suicide attempt. What we found in studying those callers was that on 19 percent of those calls, counselors sent emergency services with the collaboration of the callers, while on a quarter of those calls counselors sent emergency services without the callers' collaboration. Then in the other half the counselor was able to work to deescalate

the situation where it was not necessary to send the police or ambulances.

Then a third major area of our effectiveness studies looked at the issue of follow-up. What we found was that too often people who were suicidal on the call felt better after the call but in the coming weeks became suicidal again and many had not reached mental health services. So we began a process of encouraging and in some instances funding follow-up calls to be made. Our studies of that showed that people who received those calls felt that they were extremely helpful and helped them save their lives. Okay, let's see.

Travis Kavulla: We're on slide 12 probably.

Richard McKeon: Okay. So that was the one that I said that shows you the structure of the call flow, that one behind you. But actually you probably can see it better if you do have the packet in front of you.

Then the next thing that we turned to in our report was the issue of what are the current challenges for the National Suicide Prevention Lifeline. We felt we have solid reasons to think that in many, many instances people were really being helped by these services. Well, the greatest challenge to the effectiveness of the Lifeline is really its capacity to respond rapidly to steadily increasing call volume. Because any time that somebody has to wait for a period of time, there's the risk that they will hang up. They would abandon the call. That has at least the potential for a tragic outcome.

Now the Lifeline is designed so that if the call is not answered in most instances within about four rings, it will automatically go to backup centers. That's a real advantage because we have that kind of backup system so that, if an individual crisis center is overwhelmed, there's a way of proceeding. But that system is challenged by both rising call volumes and uneven coverage in many states.

So if we go to the next thing, what you see here is the difference between the speed to answer for local centers answering the calls and when it needs to go to our backup systems. So the average wait time was 44 seconds for a local center to answer the call, but it was 116 or almost two minutes for the backup centers. So, the more calls have to go to our backup centers, then the longer the potential wait at those centers. And while we don't provide funding for all these local centers for their operation, we do provide funding for the backup centers to answer these calls.

The slide after that shows you the overall call volume in terms of answered calls for the Lifeline over time. And you can see the steady increase. It's averaging close to 15 percent per year. There are numerous reasons that are going into that most likely.

Robert McCausland: Excuse me --

Richard McKeon: Yes?

Robert McCausland: Mr. Chairman and Marilyn --

Travis Kavulla: Yeah.

Robert McCausland: -- and whoever is controlling the slides, I would like to come back to this slide in a few minutes when we're ready for questions. So if you would, at the end of this presentation, please keep that slide deck available. Bring this slide back please. Thank you.

Richard McKeon: I think I'm controlling it.

Robert McCausland: That'd be great.

Richard McKeon: Okay. This is a chart impossible for you to see from your chair, apologies for that. But it basically gives the same issue, the same numbers in terms of answered calls but also shows the funding for the Lifeline for each of those years which was gradually increased. It was just increased this past year from \$7 million to \$12 million.

The next thing we tried to look at was the issue of what would be the potential impact of an N11 number. We've looked at a couple of different things because there was no precise precedent for us to look at to determine this. So we looked at a number of things. We looked at state systems that had introduced a new number and looked at the impact on volume. So we looked at the state of Colorado which had introduced a ten-digit number, but we also looked at the state of Georgia which instituted a statewide number. Both of which appears to have experienced significant increases but they were also part of redesigned and enhanced crisis systems in those states and they were accompanied by public awareness efforts to get the information out. So it was not really possible to determine the impact of only the

number. But those are some of the closest things that we were able to find.

When we looked at this and we looked at things like the history of 911 and our own experiences, we convened a meeting of a wide variety of stakeholder groups from the suicide prevention crisis and emergency sectors and mental health. We held that meeting on November 29th and 30th. Based on that input, we came to the conclusion that an N11 national suicide prevention number has the potential to play a key role in improving national crisis intervention and suicide prevention efforts if the launch of a new number is accompanied by efforts to develop a more coordinated crisis system with greater capacity and access to sophisticated data and technology systems and an ongoing commitment to data-driven quality improvement.

The most important issue there is the issue of capacity. We know that a three-digit number by itself is not going to improve capacity. We do think it will increase call volume and likely to increase call volume above the current already projected increase which is based on the past number of years. We think that an N11 number would be easier to remember. We've consulted with Dr. Thomas Joiner at Florida State University, who has been studying this in his psychology lab, and that therefore it might be easier for people in crisis to remember that three-digit number than to remember our ten-digit number.

Our ten-digit number is pervasive across the Internet so people rapidly come across it whenever they do any kind of search. And that's probably part of the reason for the increasing numbers. But we

came to the conclusion that the availability of an N11 number for mental health and suicide prevention could be a transformative step forward in the improvement of fragmented crisis services in the U.S. if it were done as part of a more coordinated effort with attention to capacity as an important piece to that.

We also looked specifically at 911, 211, and 611. For 911, obviously the issue was that 911 is already used for suicide prevention. Many therapists will have on their answering machines: if an emergency, call 911. So many calls already come in. And 911 is the system that the Lifeline typically accesses when there's a need for emergency rescue to get to the police and ambulance. 911 also has geolocation capacity that the Lifeline does not have.

We looked at 211. About 40 of the Lifeline crisis centers are blended 211 centers, but many 211 centers are not. When we looked at the 211, we also were instructed by our experience for a period of time in using the Lifeline as also being used as a disaster distress helpline. What we found was that having a line that had two different purposes was a problem. After a disaster - we first did this after Katrina, did this after the Virginia Tech shootings - what we found is that people who were responding to emotional crisis after a disaster would call and they say but this says it's a suicide line. We didn't want to take the word suicide out of the suicide line there. So we think that the issue of what the purpose is and whether there's a blended purpose is important.

I mentioned 611 because that was the number that advocates at the meeting that came in November 29th and 30th identified most frequently. SAMHSA in our report does not weigh in on a specific N11 number for that.

Finally, we were asked as part of the law to make recommendations for improving the Lifeline. Again the major challenge in the Lifeline is the community crisis center capacity. We do have an appendix in there. I don't have it on the slide. That shows the answer rate by local crisis centers. Within each state, there's variability. Some states answer virtually all of their calls for calls who don't press 1 within the state. Others have very low percentages that then spill over to our backup centers leading to our not being able to get to them as quickly.

So we think that in the need for improvement for the Lifeline it really centers on the need for increasing capacity. That would be true with an N11 number for sure, but it's also true without an N11 number with our existing numbers. We do think that if an N11 number was assigned, a public education and awareness campaign to publicize the new number would be instrumental in encouraging its use. So, I will stop there, but I will go backwards to the slide that you asked for.

Robert McCausland: Thank you. Mr. Chairman, a question. My questions that I have will traverse both the SAMHSA and the Veterans Health Administration VCL. Should we proceed perhaps with the VCL presentation and --?

Travis Kavulla: If it's not specific. We can return to this if the operator doesn't mind switching back to the slide deck after the VA one is projected. But do you have a particular question right now on this data?

Robert McCausland: I have multiple questions.

Travis Kavulla: Let's hold them until after the VA.

Robert McCausland: Okay. Great.

Travis Kavulla: Okay. So Richard, why don't you just stay up here if you can? We'll have the next presenter, James Wright, of the Department of Veterans Affairs. James is the chief of staff to the Veterans Crisis Line at the VA. And James, I assume this is your first time at a NANC meeting. So welcome.

OVERVIEW OF THE DEPARTMENT OF VETERANS AFFAIRS (VA) REPORT

TO THE FCC ON THE NSHIA

James Wright: Thank you. That would be a correct assumption. Can we get the VA slides loaded as well?

Travis Kavulla: I know they have that deck back there.

James Wright: Again, thank you. Yes, my name is James Wright. I'm the chief of staff for the VCL. I'm here to go over a little bit of the two responses that the VCL has provided on behalf of the VA for the potential N11 expansion and response. So with that, I am going to go over a little bit of VCL history with some of our metrics. Then

I'll get into the individual responses that we've submitted per request.

We really have a three-pronged approach in the VCL currently really laid out under Vision, Mission, and Values. I won't read all of those, but essentially what they boil down to is quality care at anytime, anywhere for our veterans and service members and their families in need.

So, to date, we have held or responded to 3.8 million calls. This is going back to 2007 when we started this partnership with SAMHSA and the Suicide Prevention Lifeline. We've answered more than 439,000 chats, 108,000 texts and provided more than 640,000 referrals to our suicide prevention coordinators across the United States. This is nearly 112,000 dispatches of emergency services.

The graph up top gives you a little bit of the history of the expansion of the VCL. If we have time, real quickly, I'll provide about a three-and-a-half minute video of the history of the VCL. It started with 14 responders in Canandaigua. We have expanded that dramatically over the course of the last few years, particularly from 2016 to 2018, for a number of reasons. But our call volume has continued to rise as well. So, with that along the way, we provided online chat in 2009. We expanded to text in 2011. We doubled our responders in 2012. Then we just kept doing that as you saw the expansions to our sites in Atlanta, Georgia and Topeka, Kansas.

So real fast. The Veterans Crisis Line is really an integral part into what we would call the nation's largest integrated suicide

prevention network. We've got over 500 responders and 70 SSAs or social services assistants who are the ones that help coordinate emergency intervention and rescue. What they do a lot of times is they link up to our suicide prevention coordinators across the nation. We've got roughly a baseline of six weeks in an enhanced training to become a responder. Really built off of the original eight dimensions of wellness from SAMHSA and focused primarily on emotional, social, environmental and physical wellness of callers.

Again, when you look at that, we have to date 81 employees in Topeka, Kansas. We have 346 in Canandaigua and 368 employees in Atlanta. We just started providing two months ago text-based services in Atlanta. It was our first expansion. We're working on chat-based services next. We're hoping to get those rolled out at all three sites.

So real fast, if we can play this video. I think they were trying to see if this was available. Can we hit play on this for a second?

[Off-topic conversation]

[Start of video clip]

Male Voice: Okay. How long has it been going on, my friend and what kind of assistance you looking for?

Matt Miller: The Veterans Crisis Line started in 2007 with 14 responders and four lines. Since that time, we've grown to over 500 responders across three call center locations. We've also added

services such as chat, and text, and international services for active duty and veterans as well.

Female Voice: Yes, sir. What got me to this particular job is I came to the VA and applied for their homeless program. I've been where a lot of these guys are and I didn't have a number to call at the time. I mean you're just kind of out there on your own. But now there is a number that somebody can call to say I need help, what do I do?

Male Voice: Now is there anybody with you? You're just by yourself, right? I just wanted to make sure you can breathe okay. All right. And I'm going to stay on the phone until somebody arrives so we can get you the help and the services.

Matt Miller: Veterans experience crisis in a number of ways and across a range of possibilities. We have trained responders ready to talk to veterans and service members' friends and family, to walk them through the situation, and to connect them to resources to help them and assist them.

Male Voice: He had passed out? Now do you think that he needs emergency services? You also may want to consider talking with your children about the level of your concerns because you need support too.

Male Voice: We initially take the call. We assess for safety. We offer support. We get it moving in the right direction and then

from there we want to make sure that, if they choose, that they have the ability to follow up with care locally where they're at.

Male Voice: Veterans sometimes don't have a lot of support and they need to talk to someone whether in a crisis at the moment or they're just feeling lonely. So we're just for them.

Male Voice: I know what you're saying.

Female Voice: He lives in Jacksonville.

Male Voice: Right. And I'm glad you have the courage to call us. But it's not easy for a veteran to sit up and call for help. We're very stubborn. I'm also a veteran so I can understand your concerns, but we're here for you, my friend. Take care, buddy. Bye-bye. I feel bad for the guy. He's down and out, homeless.

Female Voice: When we do have a disturbing call or something that bothers us, I know that those co-workers I can always connect with in order to talk out the call to see if there's anything more I can do.

Male Voice: There are a few core of people that I really, you know, have in my support group here just to be focused on what's important in life and really the benefit to serve America's veterans and their family members.

Female Voice: We got into this field because we want to help people and we care. This is not just a job; it's who we are. It's what we want to do.

Male Voice: How amazing is it that you can hear a person smile? You know when you hit that baseball, it kind of -- you get that, yeah, that crack, that good feeling? It's like that when you're able to hear a person smile and you make a difference.

Matt Miller: The Veterans Crisis Line is a resource that's available 24 hours a day, seven days a week every day of the year. We have over 500 responders eager to answer the call. You have served and we are here to serve you.

Female Voice: Thank you for calling the Veterans Crisis Line. This is Jennifer. How can I help you?

[End of video clip]

James Wright: Okay. Thank you. So that's a little bit more about the actual services that the VA provides. And I'd like to start with the two responses. I think we're on the two responses. Let's see here. Can someone go next? Okay.

So I'd like to start on the two responses from the VCL on this proposal. I do want to be mindful that my colleague, Dr. McKeon, had highlighted the set-up of the Lifeline and their structure. The VCL is different in nature. The set-up from the Lifeline is an infrastructure system and grant. The set-up from the VCL is both an infrastructure and a service provision funding. So we do provide the in-house services. We are in specific locations where we train responders and have them as federal employees that are responding on behalf of the veterans. So it is a very different set-up. The

funding is different and the outcomes are different if you look at what was projected or what we shared.

On January 28th, right before the shutdown ended, we were able to provide a response on how well the VCL is serving its veterans currently. I'd like to highlight just a few of these numbers from that report. We roughly answer about 650,000 calls a year currently. With that, we answer a 98.05 service level which is the amount that are answered within 20 seconds or less. Of that, we have a 1.7 percent abandonment rate of calls over five seconds. We also have an average speed to answer of 8.22 seconds. Finally, we were able to refer over 116,000 referrals to our suicide prevention coordinators. And these are 2018 numbers, by the way. We were able to provide emergency intervention and dispatch to 29,500 callers. We also provided a five-year comparison in the report, the original report to show kind of the growth as well of the VCL.

So with that, these were the specific sections of that. Not only the highlighted mission and description, our KPIs, our relationship with SAMHSA, and why we share the 1-800-273-8255 number currently. How we do that, what our call flow looks like? So for everyone that's aware or seen it, we are the press 1 option. So if you call, you do hear: If you're a veteran or a service member, press 1. And what we saw is our ability to respond to veteran need, our oversight and accreditation, and our community outreach and engagement.

The secondary response was based off of the questions from the Numbering Council for the VA. We provided this to Bob McCausland on

the 22nd of March. Ours was a little bit different than SAMHSA's, obviously. We did include a couple of different projections response on our interactive voice recording a 911 shared-use scenario and the mnemonic value of a three-digit code that we saw. Now this is with a huge caveat and everything else that goes with it.

The projections were based on what available information we have. We do hold that there is no direct comparison across in regards to that. The two projections that we used, one you're probably more than familiar with, it's the NHS. In the UK, their 111 response, the flipside of their 999, which is equivalent to roughly our 911. We used their data on the last four years as a projection as to what we could potentially see as a call volume or impact of an expansion to a three-digit system. They're projected this year to take about 18 million calls and they're about a sixth of the size of the United States for comparison. But that being said, they are more of an integrated health solution than this would be focusing on.

The second projection that we included was a 211 projection of mental health data that we had available at the time. Again it is not all encompassing. It is a projection of publicly available data that was provided online along with the call volumes that were estimated in the original Numbering Council report.

So there are a couple different things. We saw that we could potentially estimate somewhere between 1.4 and 2.4 million calls from the 111. We estimated that we could potentially see an impact of 1.6 calls from the 211 response. Then we also shared what we extrapolated

out to what it might look like for SAMHSA. And a total response, if we shared the number again going all the way up to a potential 16 million calls I believe it was. It was either 16 or 18. I need to double check, but I think it was 16 million calls.

So that is where we are currently. All of those have been submitted along with our projection of what it would look like if we did have either a shared use or isolated number. So I will pause there and I think we can allow time for questions.

Marilyn Jones: This is Marilyn, the DFO. Can I remind everyone on the phone to mute your lines when you're not speaking? Thank you.

Travis Kavulla: So let's have the operator go back to the previous slide deck and to slide 15 in particular so we can have Bob ask his question.

While they're doing that, so I understand the current 800 number, I assume the vast majority of people come across that by like a web-based search or do they somehow know about it through other means?

James Wright: Yes. I will say it depends, but I do believe the largest number comes actually from online searches. But we are seeing a significant impact on advertisements as well. If you haven't been aware of this, the VA has been going into a billboard campaign, for example. Over the last couple months we've seen significant increases of demand that we can attribute to a billboard campaign. So while we still have individuals getting that obviously online, there are other factors that will impact those numbers pretty significantly during

courses of time. There are also impacts based off of situations that occur, highly publicized deaths of celebrities and others, that we've seen increase. Dr. McKeon, do you have others?

Richard McKeon: Yeah. I would agree with everything that James has said. Virtually every suicide prevention organization, most mental health groups have the Lifeline number on their websites and feature that prominently. Then when events happen such as the deaths of Kate Spade and Anthony Bourdain, for example, the CDC's report came out right in the middle of that. There was a lot of attention around suicide. So the Lifeline number, for example, all weekend long on CNN ran underneath.

At this point in time most high profile news articles and television interviews will include a reference to the National Suicide Prevention Lifeline number. Of course we encourage that. We encourage it to be used every time SAMHSA does an immediate interview on the topic of suicide. So it has achieved a significant amount of knowledge but we think probably it's its ubiquitousness online. So you google the word suicide, you'll find the Lifeline number will come up at the top there. So we think that that's a major contributor.

Robert McCausland: Mr. Chairman.

Travis Kavulla: Yeah, Bob.

Robert McCausland: Mr. Chairman, in that same context, on Monday of this week, both ABC nightly news and *NBC Nightly News* included the Lifeline number, the 8255 number, 273-8255 - TALK - in the context of

the recent suicides at Parkland in Florida and also the parent of one of one of the children in Connecticut. And that leads me to a question that I'll come back to. May I, Mr. Chairman?

Travis Kavulla: Yeah. Go for it, Bob.

Robert McCausland: First, on behalf of the Numbering Administration Oversight Working Group and the full NANC, we thank you all for all the efforts you've been making to supply us with the data. We know that we are asking for a lot of data and that your people are working hard and you are working hard on that. The same holds true for the folks at AIRS, for Catherine [Rea - Chair, AIRS Public Policy Committee] and Clive [Jones - AIRS Executive Director] at AIRS - the Alliance of Information and Referral Systems. And for Evelyn Bailey at NASNA, the National Association of State 911 Administrators, and several other people and also the input of the United Way at this point. So thank you for that. Your efforts are appreciated.

Some commentary sort of as a fall-over from our February 14th meeting. I think that some people perceived our effort at the Numbering Administration Oversight Working Group to be a little bit removed from the sensitivities of the subject matter. I'd like to say that's definitely not the case. I remind everybody that our job really is to analyze the data and produce objective recommendations. We try to remove the emotions from that process when we're looking at the data and considering these issues, but the emotional factor is important to us too. I know I'm not just speaking for myself. There are many others who are very sensitive to this and who care a lot.

Another piece of commentary. As I've analyzed the data, as everybody who knows me knows I love data, the data tell me what to do basically with a business case. I like data because I don't have to make decisions. The data tell me what the decision should be, which is one of the reasons why we're so deeply into the data that you all are providing to us. It is obvious this is outside of the scope of the NANC, but it is completely obvious that there is a long-term significant funding need. We shouldn't get into that here, but I would like to highlight that. I'm not sure of everything going on with respect to the funding aspect of this, but those issues should be happening in parallel. They shouldn't be waiting for our recommendation and waiting for the FCC recommendation in the Congress on this issue.

Now moving over to the data, Richard, first I'd like to ask what is the status of the responses to the additional data we have requested? There are some questions that we have asked for which we haven't yet received data. That's not a criticism. I know you're working on it. I'd just like to know the approximate estimated time.

Richard McKeon: Hopefully very soon. I was hoping that we'd be able to get that cleared for release by today. Unfortunately, I was not able to do that. But we have completed that. It's just needing to go through our clearance process. So I'm hoping any day now we would be able to release it.

I can speak in general terms about some of that, but unfortunately we don't have it here the way Mr. Wright was able to do.

He was able to get it through his clearance process quicker than I was able to.

Robert McCausland: Okay. Thank you. Now, looking at this slide 15, we see a pretty consistent slope. You had mentioned and your slides indicated that in 2011, Richard, chat was introduced. Some of the data that we received from the Veterans Health Administration Veterans Crisis Line and also from the AIRS in fact showed the introduction of a chat service and a text service. A crisis text and a crisis chat service. One of the characteristics that I look for is an impact to the slope or the increase in the numbers. I expected to see a plateau or even a slight decline. I didn't see much of a plateau at all. I saw a decline, a slight decline in the slope. But the slope was still fairly consistent. I'd like to know, Richard, is that consistent with your expectations and what you've seen in the past when you introduced chat? Clearly, based on that, there wasn't a plateau. Did you roll out text as well? I don't know --

Richard McKeon: No. So, one difference between the overall Lifeline structure and the VA structure is that for chat, there's a chat service for both although they're not connected to each other the way the phone systems are. The National Suicide Prevention Lifeline however does not have a text component, unlike the Veterans Administration. I think that before we launched the chat we thought that there might be a plateauing for exactly the kind of thinking that you indicated. But you are quite correct, we did not experience

anything that appeared to be a diversion of people who would have called into the chat services. Of course that may be the case for some individuals. But overall the phones continued to grow and then the chat demand increased right alongside of it.

Robert McCausland: Okay. Thank you.

James Wright: And I will say - hopefully I'm not responding too much on behalf of SAMHSA - for full disclosure, I used to work at SAMHSA under Dr. McKeon and I used to be the government project officer for the National Suicide branch in Lifeline. So I know a whole lot about these two pieces. But I will say that when we looked at those expansions, we saw that we were reaching a different demographic with that service than we were reaching historically with the call service. So not only it didn't have a decline, you are bringing in new individuals that were in crisis. The majority of contacts at that time under chat were under the age of 29. That wasn't the historical ones that were picking up the phone. So that's one of the reasons why you didn't see that immediate impact.

Robert McCausland: And that goes right into my next question very, very well. James, you and your team had talked to the folks in London about the 111 rollout in 2013. For those of you not familiar, in 2013 the UK rolled out their shorter dialing code 111. It wasn't initially I think publicly promoted aggressively, but then there was a period where it began to be promoted aggressively.

Now I get back to the slope. The slope of the increase in demand, the calling volume in other words, was fairly consistent. It

was relatively steep. Then there was the time, the period where the public promotion of 111 began and there was a very extreme increase. Then there was a period where the slope began almost like it was prior. So what we had seen from the data was we saw a fairly consistent increase, then all of a sudden a very dramatic jump. Then back to about the same slope but again with a much, much higher volume. Richard, I'm assuming that you expect to see the same based on your experiences in the past year in the U.S. and based on what we've learned from the UK. Is that correct?

Richard McKeon: Yes. I think that we would see that as very much a possibility which would be very important to be prepared for.

Robert McCausland: Thank you. Some commentary. Naturally the data are from different sources. There are some differences in the source data. Some of the data are collected and represented as answered calls. Some of them are call volume not answered but calls waiting. The significance of the numbers is such that ultimately I concluded -- and I admit I did confer with a few people who were data experts on this as well, including Henning Schulzrinne who has been providing assistance to me on this and other issues.

I'm not representing the conclusion of the full Numbering Administration Oversight Working Group on this, but my personal conclusion is it doesn't seem to matter there are some inconsistencies in the data sources and the presentation of the data. The numbers are very significant in terms of demand. That's relevant to the shared-use scenario, for example, of 911. Again, I caution everybody. We

are not at the point where we have conclusions on the Numbering Administration Oversight Working Group. But I think it's worthwhile pointing out that the volumes are higher than some of us had anticipated. That will impact our recommendations.

Sorry for the froggy voice today. I forgot to take my allergy meds. Maybe if there are others who have questions, let's do that while I try to get my voice back.

Travis Kavulla: Nature is telling Bob to take a break.
Commissioner Rhoades.

Crystal Rhoades: I just have a clarifying question. So, when we look at this slide of 2.2 million calls that are coming in and then VA is estimating they're getting 600,000-ish?

James Wright: [Off-mic] 650,000-ish, about at least 700,000 this year.

Commissioner Rhodes: Okay. Do we have any idea what the overlap is? I know some of those obviously are going to be transferred calls to you and I assume that you're getting -- the calls that are transferred to you, press 1, are they all coming from the suicide prevention hotline or is there another source for you?

James Wright: Great question. The answer is no. The majority of them do come through the press 1 option. But in the last few recent years we've also expanded to a press 7 option through our medical facility. So, all of the medical facilities within the VHA do have a press 7 option on their dial to directly link up with the VCL

on the backside. And then we also have 85 percent of all of our CBOCs, our community behavioral [sic] health [sic] outpatient clinics, have that option as well. So, we have a few different ways that we can get to call volume. When you see Lifeline's projections, we are included in Lifeline's projections but not all of our numbers are included in Lifeline's projections. There are other things that the VCL is responding to.

Crystal Rhoades: I just have one other comment. There's a dramatic increase in 2017. There was a discussion a little bit about where people were getting this information about this hotline. This hotline in 2017 was the subject of a number one R&B song and a number three Hot 100 song. So, I am going to hypothesize that that kind of awareness did have something to do with that dramatic increase because it looks like things had been plugging along at about 200,000 additional calls a year. It's quite a dramatic jump there.

Travis Kavulla: That is an awesome factoid. Any response to that?

Richard McKeon: Yeah. Yes. So, the song by Logic was played at the Grammy's. It was. So yeah, we are very familiar with that. It did have an impact. One thing that we've noticed historically - and James is very familiar with this as well - is that the trend has been that whenever anything has bumped up call volume, that it's tended to stay at that new increased plateau. In other words, not all this attention comes to the number because the song goes up and then it goes down. You know, it goes up. It may moderate a bit but it never

goes back down to the baseline. We've had that experience over and over. That's contributed at multiple points to those increases, including last year the suicide deaths of Kate Spade and Anthony Bourdain and the CDC report which led to a real surge in attention and as well as attention to the number.

James Wright: I'll also be mindful that, when I was at SAMHSA, the largest increases actually started with Robin Williams' death. So when we have pushes, we have to be mindful that it can be a push from the public in a good or a responsive way to an unfortunate death by suicide. It could be a push from SAMHSA on a campaign. I cannot push the VCL, for example, publicly without impacting the Lifeline. Because we have that relationship, we have to be mindful that it can be internal, it can be external, it can be across federal organizations.

And really from the White House page down it's become integrated into what we are as a government response as well. So just to be mindful that even if there is an expansion or something like that, it's still going to be impacted for a significant amount of time. I know that they still continue to see that with the original 1-800-SUICIDE that has not been used for many, many years. So there's a large number of ways that this can increase volume.

Ann Berkowitz: Hi. **Ann Berkowitz** from Somos. You actually just teed up my question. First of all, thank you for all the good work you're doing to help people in crisis and particularly our veterans.

Why aren't you advertising the 1-800-SUICIDE which is a dedicated line, a still a dedicated number for this?

Richard McKeon: Yeah, and there was a long history. I didn't go into it in depth in this presentation. We do reference it in the report. So 1-800-SUICIDE was the number that was utilized by SAMHSA through our national suicide hotline grant between 2001 and 2004. There were a variety of issues that came out over it. It was not a number that SAMHSA had control over. The group that ran it lost the competitive grant bid. It was at that point we launched 1-800-273-TALK. The 800-SUICIDE number came close to collapse even though it was still getting significant volume. And so there were multiple interactions between SAMHSA and the VA and the FCC with regard to that. There were court filings. It's a long history. Ultimately the number was permanently assigned to SAMHSA.

The way the system operates is now that if you call 1-800-SUICIDE or you call 1-800-273-TALK, those calls get processed in exactly the same way. So, SAMHSA pledged to protect people who called that number for the indefinite future, and we have done that. What we haven't done is we've not discouraged anyone from promoting the number. But in all of our efforts at promotion, we have utilized the 273-TALK number. What we have seen is that it has taken many, many years for volume on 1-800-SUICIDE to drop down.

So the implication of that is that if the 273-TALK number was no longer the go-to a national number and we stop promotion, we would expect there would be significant call volume continuing on that line

for many, many years. Part of that is how it permeates the Internet. So the thinking was we at SAMHSA are pledged to protecting callers who call 1-800-SUICIDE and we continue to do that. I think about 8,000 or 9,000 calls a month are still coming in on that number. But we felt it was difficult for us just to promote two different numbers at the same time.

Travis Kavulla: Yeah, Bob.

Robert McCausland: Mr. Chairman, I have my voice back for the moment. Thank you for the lozenge.

James, this one I think is probably more directed to you. But, Richard, I'd be interested in your input on it as well. There's a legislative framework associated with the Veterans Crisis Line of which I was not familiar. It's been referenced of course in the responses that we've received. I'd like for a very brief, maybe a couple of minutes backgrounder for the benefit of the NANC and the Numbering Administration Oversight Working Group on that particularly in the context of what it means with respect to the operation of the crisis and suicide hotline going forward and what implications exist.

For example, with the legislative framework on which the Veterans Crisis Line is based, does that inhibit the use of say shared 911 or some other shared N11 code or non-11 three-digit code? How does that legislative framework impact what we're examining here as part of the Numbering Administration Oversight Working Group?

James Wright: I'm not familiar with exactly the legislation you're asking about. I know we have the no call should go left unanswered that came out. We also get our congressional funding directly to respond for the Veterans Crisis Line itself. We do receive our congressional funding directly for this purpose. We also have in there a joint responsibility for the response currently.

And we can get those specifics for you. So if that's the case, I would request that we provide that information at a later time. But up until this point it has been that we do have this relationship and we are able to use that funding for more of again not only in infrastructure but a services provision stance on the VA side. That's different than the SAMHSA response, so I'll turn it over to Richard briefly.

Richard McKeon: Yeah. Correct me if I'm wrong, I think you might be referring to SAMHSA and our report references, the authorizing language for the National Suicide Prevention Lifeline. So basically from 2001 up until December of 2016 Congress appropriated money for the National Suicide Prevention Lifeline but it was never incorporated in any authorizing legislation. In December 2016, when President Obama signed the Cures Act, a huge healthcare bill, it included a number of different pieces related to suicide prevention. One of those things that it did was to authorize into law the National Suicide Prevention Lifeline for the first time although the appropriations had gone back to 2001.

That authorizing legislation does explicitly reference the relationship with the VA. Now with the caveat that it's always hazardous to take advice on legal matters from a psychologist such as myself, my read on it would be that it's telling us that we at SAMHSA must provide this opportunity to the VA. So I think we would not be able to under the law to say to the VA we're not going to work with you anymore. The law requires that.

Now regarding the level of specificity that you're talking about, I wouldn't want to render an opinion on that. But that's what I can tell you regarding the relatively brief authorizing language for the National Suicide Prevention Lifeline that was passed as part of the Cures Act in December 2016 and that we do include a reference on it in our report.

Robert McCausland: All right. Thank you. What we really need to know very quickly is whether there's a restraint on the approach that we may recommend as a result of the legislative framework on which this is based. So if you could help us with that very quickly, you can introduce me if you'd like to someone else within the organization who may be able to answer this question. Whatever I can do to facilitate a quick response would be appreciated.

James Wright: Well, if you just put your response or your request in an email and send it to -- you can send it to me and us at the VCL. I'm sure you can do the same with Richard as well. We'll try to identify the legislation requirements that we have and then

just submit them to you. They'll be public. We'll just have to pull them.

Robert McCausland: All right. Thank you.

Richard McKeon: I would mention that we've had ongoing contact between the FCC, the VA, SAMHSA, and the HHS Office of the General Counsel. So I would anticipate that we would be able to get their input on this.

Robert McCausland: All right. Mr. Chairman, one final question if I may.

Travis Kavulla: Sure.

Robert McCausland: There was some commentary in one of the responses that we've received, that veterans would be unlikely to want to call 911 for crisis and suicide intervention. Do you both agree with that? If not, why? If so, do you have any other commentary to add on that subject? Thank you.

James Wright: Can you clarify the statement that you received on that?

Robert McCausland: I don't remember the source right off hand. I will have to find it. Let me do this. I'll follow up in an email when I pull it from the source. I can't remember which -- I've received data, as you know, from a number of sources. It was very explicitly stated in one of the sources that veterans would be unlikely to call 911 for crisis and suicide intervention. I'll follow up in an email.

James Wright: Great. Thank you.

Robert McCausland: Thank you, Mr. Chairman.

Travis Kavulla: Beth.

Beth Choroser: Beth Choroser from Comcast. This is actually related to Bob's question a little bit. I think it's for both of you because in both presentations there's an indication in the Veterans Crisis Line presentation nearly 112,000 dispatches of emergency services are sent and then on the SAMHSA presentation, a quarter of the imminent risk calls the counselor sent emergency services without the caller's collaboration.

So I'm just wondering how you get the information of where to dispatch those services particularly in the instances where it's without the caller's collaboration. Are you trying to collect the -- ask for the caller's location at the time they call? Like how is that information ascertained to send emergency services?

James Wright: The way that the VCL does it is, when we get an individual that we identify needs emergency intervention, we do try to collect as much information as we can. There's a number of ways that we do that. We have training. We also have, which may set us a little apart, is that we have specific individuals that help link up with emergency rescue. We call them our SSAs and they help in coordination with the rescue that the responders are doing. So, they're gathering information and we're looking at, okay, what information do we have whether it's from a phone, a chat, or a text.

If we have a case where we absolutely have no information, then we do a localized report if we need to and provide whatever we have - whether it's just a blink [sounds like] phone number, whether it's an IP address. Essentially you're doing investigative work when you have an individual that you're no longer able to collaborate with. But the very first thing we always try to do is make it a collaborative process. Make it voluntary if we can. Provide support for safety. When you get to that point when you can't, then you'll basically give whatever information you have for a local intervention.

Richard McKeon: Yeah. And I would say that our evaluations of imminent risk callers has shown that the willingness of the caller to collaborate on their safety is the key thing in making a distinction between when we need to send the police or an ambulance without their consent. Our estimate is that that's about 2 percent of Lifeline callers because not every caller is at imminent risk. We estimate about 25 percent of the Lifeline callers. So, of those 2.2 million calls, about 25 percent we think are actively suicidal at the time thinking about it. But that doesn't mean that they are at imminent risk.

What we do is very similar. So, with 163 crisis centers, when the call goes to the local crisis center, that local crisis center is familiar with their emergency response capabilities, who to call in terms of the local 911 system engaging police and ambulance. But when it goes to our backup centers, those centers provide as much information as we can about our knowledge about local capacities. But

much as James described, that's also what we try to do. We work toward collaboration and then, if there needs to be emergency rescue, work with local authorities.

One issue that does come up is the issue of cell phones because of where the Lifeline operates. So, if I'm at home in Montgomery County, Maryland and I call the Lifeline, then my area code is from Montgomery County, Maryland. So, I am where my phone is. But it tracks on the phone the area code and exchanges rather than on the physical location of the person. So, if I'm in California and I call the Lifeline number, it gets routed to the local Maryland crisis center. So that is an important distinction and issue for us.

Travis Kavulla: All right. Any other questions or comments on this? So next -- Ann, yeah.

Ann Berkowitz: Just a quick follow up. So, if you are given the three-digit code, you're going to be pushing the advertising on that and dropping the 273-TALK or are you going to keep pushing both?

Richard McKeon: Well, I don't think that we've made a formal determination. I would anticipate that because that hasn't happened. But I think our report would indicate at least an intention that we would utilize the new number. The issue would be how to protect the 273-TALK callers because we know that it will probably take a decade or two for that volume to drop.

Ann Berkowitz: [Off-mic/inaudible]

Richard McKeon: Right. So from an operational sense, we would envision being heavily engaged around both. In terms of promotion, then if that is the new number and that is the instruction from Congress, then that is exactly what we would do.

Travis Kavulla: Okay. So next steps on this topic are a draft final report on April 11th and then I know the FCC is working to schedule a teleconference where the NANC can discuss the full report before voting on it and submitting it to the commission. Yes?

Betty Sanders: Betty Sanders from Charter. I may have missed this in all the dialogue, but kind of following up on Beth's call. When you mentioned that there are 2 percent callers that cannot collaborate, it sounds like a small percentage, this gets to the local facilities or area. I'm trying to understand how that gets there. If a call is going into one of your centers and one is in Maryland, how does that call get routed to the local area and with what information? How quickly does that occur?

Richard McKeon: Yeah. My understanding of it is that the call itself would not be -- so we have the situation where a call has gone, for example, to a responder in Maryland who is talking to the person there doing an assessment of the risk. They feel that the person is at imminent risk. They're trying to get them to collaborate, to go voluntarily to an emergency room or; otherwise, accept they're unable to do that and their assessment is that this is a high risk situation. This person might kill themselves if we don't immediately intervene.

So typically, then the call is not transferred. Rather the responder --

I mean typically what will happen in the local crisis center is that the person on the phone will contact a supervisor who will then be working while keeping the caller on the phone to contact 911, police, ambulance in order to respond depending on what the local system is there. I imagine it's similar at the VCL. But you can speak to that, James.

James Wright: Actually, to answer that, I'd like to go to what we propose a little bit in the secondary response to the Numbering Council because ultimately these are challenges that could potentially be addressed with appropriate access to information. For example, we know we have a different authority to use geolocation-based services than 911. I live in Houston. If I get a call, my phone is in Austin. If I call the Lifeline, it would ping in Austin. They would have to identify that I'm in Houston and then they would dispatch emergency services in Houston. So not localized. That would be changed if there is that same level of access.

So, in the actual response itself, we stated that if we're having to look at what would be better than N11 shared response or standalone response, our response is that it would be a standalone response between those two options with access similar to 911.

Now the VA, because the VA has three specific locations and we do not route by current location, it's different than the Lifeline. So, if you call 1-800-273-8255 and you press option one, you're going to

one of our three centers. It doesn't matter where you called from. So that's going to be a different routing structure. Then we try to identify where you are and then we try to get you to the local either suicide prevention coordinator if need be, or the local CBAC or medical facility, or the local emergency intervention services because we do have so many spread out across the United States. So it is a different response than we do, than we have with the Lifeline. Does that answer your question?

Can I make one more statement?

Travis Kavulla: Sure.

James Wright: There is one thing I wanted to highlight in the report. And Bob, I know that you said this is not a funding discussion but I did want to highlight -- we put in red the conclusion of what we saw with the report and I want to read it just to make sure we're clear. None of the estimates that we had, although there were a lot of caveats with them, none of them showed a reduction. It showed a significant increase in volume.

I just want to read this one paragraph real fast so people are aware: The VCL could expect to see between 1.6 and 2.4 million calls while the NSPL could have between 4.6 and 16 million calls of demand. This does not mean that the VCL will only see 1.6 or 2.4 million calls though due to the complexities of funding and staffing smaller centers within the Lifeline network. If funding is not in place to grow both organizations accordingly, one organization or the other could see an influx or spillover demand that the other does not adequately support.

So just to be mindful that this is a joint relationship. If you build up one and you do not build up the other, you have significant differences in the ability to respond. We do see spillover one way or the other; i.e., someone presses one because they can't get through or staying on the line because of the other. So I did want to make sure that was clear as we move forward with the funding discussions as well.

Travis Kavulla: Okay. Richard and James, thank you for joining us today. We're running a little bit behind schedule, but I'm sure we can make that up. We'll take a break now for 15 minutes and reconvene at 11:15 with Josh Zeldis' presentation on the recent reassigned numbers database order of the FCC, and Marilyn will take over the chairing duties at that time. Thank you.

[Break]

UPDATE OF THE FCC SECOND REPORT AND ORDER ESTABLISHING

A REASSIGNED NUMBERS DATABASE

Marilyn Jones: Let's reconvene the NANC meeting everyone. Thank you. May I remind the folks on the phone that we're still having problems with sound, so can everybody please mute their phones.

Okay. Our next presentation is going to be concerning the reassigned numbers database order from the FCC. This is going to be presented by Josh Zeldis from the Consumer and Governmental Affairs Bureau. Thank you for being here today, Josh.

Josh Zeldis: No problem. I work in the Consumer Policy Division. I first want to thank the NANC for taking on this task. I've been sitting in on the working group's twice weekly calls and I've been very impressed with how they just dug right in and done some pretty hard lifting pretty quickly. We won't go into the weeds in this presentation, but my hope here is that this overview will help you better understand both the problem of inadvertent calls to reassigned numbers and how the reassigned numbers database will be a viable solution for that problem.

So here's a real world pop culture example of the reassigned numbers problem. Miley Cyrus gave up her phone number for some reason and didn't let her friends or fans know that she had changed numbers. In a strange twist of fate, this number was then reassigned to the rapper Lil Jon. This all came to light when Lil Jon started receiving calls and texts from Cyrus's friends. He was in shock because he was getting congratulated on winning the cover of *Teen Vogue* magazine. He didn't know what all this was about. So, there were some tweets and they worked it all out. Apparently this number reassignment led to a collaboration between the two singers on a song *Can't Be Tamed*. Depending on what you may think of their music, you might see this particular reassignment and resulting inadvertent text as a good or a bad thing.

But if you're not a rap artist and getting the old phone number of a pop star, the issue is definitely an annoyance at best and a hardship at worst. How does the number reassignment problem happen?

So consumers disconnect their old numbers and change to new telephone numbers for a variety of reasons, including switching wireless providers without porting their numbers and getting new wire line telephone numbers when they move. Once a customer disconnects their number, the commission's rules require providers to ensure the efficient use of telephone numbers by reassigning the telephone number to a new consumer.

A consumer might not update all the parties who had called him or her in the past - their banks, businesses to which the consumer gave prior expressed consent to call, and other callers from which the consumer expects to receive calls. When that number is reassigned, the new subscriber of that number may receive unwanted calls intended for the previous subscriber. So, the problem has become significant enough that commercial databases now exist to aid callers. However, these databases aren't comprehensive and in some cases are cost prohibitive, thus callers and consumers alike continue to be frustrated by unwanted calls to reassigned numbers.

So why do we need a reassigned numbers database to identify phone numbers that have been reassigned? First reason is it annoys the new subscriber of the reassigned number furthering distrust in the telephone system. A really good extreme example of this, and you guys may have heard about this, is the 2018 Nobel Prize winner Paul Romer. He didn't answer his repeated calls to let him know that he had won the award. When he was asked, "Why didn't you answer those calls, we were trying to let you know this really good information," he said, "I

didn't answer the phone because I've been getting so many spam calls, I just assumed it was more spam." It's the first good reason.

The next one is it deprives the previous subscriber of the reassigned number a desired call from for example their child's school, healthcare provider, or financial institution. I recently got a new number and I can't tell you the countless number of times my local school system calls me to let me know Olivia has been cutting class four, six, and seven. I don't know who Olivia is but she is sure cutting a lot of classes.

Finally, it makes lawful callers cautious and causes them to stop making lawful calls out of fear of legal liability for violation of the Telecommunications Consumer Protection Act.

So, this proceeding progressed actually relatively quickly. In July 2017 the Commission went out with an NOI. In March 2018 the Commission released an NPRM, and that was followed up with a report and order in December of 2018. In the feedback the Commission received legislators as well as commenters who supported establishing a comprehensive and timely database that allows callers to verify whether a number has been reassigned before making a call.

So here in a nutshell, before I go into it in a little more detail, is an overview of the overall goal in the Commission ask. The overall goal is to create an accurate, comprehensive, cost-effective, and timely single database with information from providers that obtain U.S. telephone numbers that callers can query to determine whether a number has been permanently disconnected and thus avoid calling a

number that is not connected or now is assigned to a new subscriber. Specifically, the FCC seeks the NANC's recommendations in development of a technical requirements document, with requirements for technical interoperability and operational standards. And then in addition to that, a design of a fee structure including fee amounts and how best to collect those fees.

What does the report and order do specifically? There are a number of things here. Eight in total. First, it establishes a minimum aging period of 45 days before reassignment for all permanently disconnected telephone numbers. Second, it requires the toll-free numbering administrator and providers that receive NANP numbers to report on a monthly basis information to a database whereby a caller can determine whether a number has been permanently disconnected since the date provided by the caller.

Third, it concludes that a single database containing the most recent permanent disconnection date for each number allocated to or ported to the provider is the most efficient way to make reassigned number information available to callers. Fourth, the Commission concluded that over the long term callers should pay for the database. The database isn't going to be live when initial funding is necessary. Therefore, the Commission funds startup cost by collecting them from providers using the same type of mechanism as other numbering administration cost, the billing and collection agent bills too, and collects from providers.

Fifth, authorizes the administrator to fund operating costs through usage charges to callers that choose to use the database. So subscribers who want to use this database to identify permanently disconnected/reassigned numbers, they can do that. The administrator is going to be chosen through a competitive bidding process. Sixth, it authorizes the administrator to recoup startup cost paid by providers and to return them to providers through offsets to future number administration charges.

Seventh, it allows small voice providers additional time to begin maintaining and reporting data to the database. Eighth, and this is where the NANC plays a big role, it directs the NANC to make recommendations on technical and operational issues including usage fees. In this next slide, for those of you that are a little more visual, the slide shows the database in funding and operations. I won't go through it. But in the materials you received, you should have this. It's also in the order itself.

The database has a number of complexities to it that are beyond the Commission's expertise. Commenter suggested seeking NANC recommendations, which is something the Commission agreed with. Therefore, the Commission has asked the NANC for recommendations on the following. The first is a single unified set of functional and interphase requirements for technical interoperability and operational standards. The second is the user interface specifications and data format for service providers to report to the administrator. Third, the user interfaces and other means by which callers may submit

queries, including providing callers the ability for high volume and batch processing or to submit individual queries.

Fourth, appropriate safeguards to protect both the privacy and security of subscribers, protect the database from unauthorized access, ensure the security and integrity of the data. Fifth, the best way to keep records of service providers reporting and accounting. Sixth, guidance on any new or modified requirements for the billing and collection agent contract that may be advisable or necessary with implementation and operation in this database. Seventh, how the fee structure should be designed including a recommendation on the initial and ongoing amount of fees and technical issues surrounding how the administrator can collect fees from callers that use the database.

In determining the fee structure the Commission has asked the NANC to consider both a subscription fee model, like the National Do Not Call Registry, and a per-query fee structure. In seeking these recommendations, the Commission has asked the NANC to keep in mind a couple of guiding principles, and that's to the most cost-effective way of administering the database and also to minimize cost and burdens for all users and service providers.

Now, for this ask, the Commission has set a deadline to report recommendations to the Commission before June 13, 2019. Once the Commission receives those recommendations, as it always does, it will seek comment on the NANC's guidance.

In this last slide I've just provided liaisons to the working group, both myself and Bill Andrlle of WCB. If you come up with questions that you have after this presentation, you could certainly ping us. But I'm happy to answer any questions today as well.

Marilyn Jones: Does anyone at the table have any questions for Josh? Rich Shockey, SIP Forum.

Male Voice: Are questions from the phone allowed?

Josh Zeldis: I should hope so.

Marilyn Jones: Yes, they are. We have one in the room right now from Rich Shockey. Can you hold one second?

Male Voice: Okay.

Richard Shockey: The question I have -- we already have the solution in hand. It's called the NPAC. Okay. We have an SMS - a service management system that can basically, if there's an additional field, put into the NPAC. It can basically say that that number has been disconnected and provide the aging data associated with it. And on top of it, the industry is already paying for it right now. It would be a modest modification of the NPAC contract that we have right now. The NPAC administrator could essentially peel that data off into the kind of registry we see in Do Not Call. You can have multiple operators have that data or potentially make that available as a service under competitive terms and conditions that are acceptable with the Commission.

What I am deeply concerned about is that there is a cost to the industry. We have no idea what this thing is going to look like which could be hundreds and hundreds of millions of dollars. If this looks like a real time transactional database, much like credit card validation. And I did not see anything in the report and order that look like a cost-benefit analysis. So I'm just going to leave it at that and I open it up to additional questions.

Marilyn Jones: Any other questions?

Steven Johnson: Yes. This is Steven Johnson with Trusted. The question I was going to ask was --

Marilyn Jones: I'm sorry, Steven. Can you hold one second?

Steven Johnson: Yeah.

Marilyn Jones: Can you save your question for when we have the public participation? Right now the questions are just for the official NANC members.

Steven Johnson: Okay. Yes, I can do that. No problem.

Marilyn Jones: Okay. That should be coming up later on the agenda. Any other NANC members with questions? CTIA Matt Gerst.

Matthew Gerst: Hi. So just a question on the last slide. Once the recommendations are received or approved by the NANC, then they go to the FCC and they're going to seek public comment on that. How quickly do you expect the Commission to act on that? Is there a

vehicle that would spell it out in the report and order that there might -- is it a public notice or NPRM concept?

Josh Zeldis: In terms of timing, I think we'd want to do that sooner rather than later. Beyond that, yeah, we'd release a public notice seeking comment.

Matthew Gerst: A public notice?

Josh Zeldis: Yeah.

Matthew Gerst: Okay, got it. Thank you.

Marilyn Jones: Any other questions on the phone? Hearing none, let's move on to the NAOWG's report. An update on their report for the technical issues for the RND.

UPDATE AND DISCUSSION OF THE NAOWG REPORT ON THE TECHNICAL AND

OPERATIONAL ISSUES FOR THE REASSIGNED NUMBERS DATABASE

Carolee Hall: Thank you, Marilyn. The NAOWG, as reported here, was tasked with coming up with a fee structure for users of the reassigned numbers database by May 12, 2019 and to submit the report to the FCC by I guess now June 13th. The working group has been kind of busy with the N11 three-digit code, and so we'll get to the costing mechanism after that is presented to the NANC for recommendation to the FCC. Part of this, we have the Contract Oversight Subcommittee. He's been very busy with the TRD and his regular things. So I'm going to turn this over to Phil Linse to report that out.

Philip Linse: Thank you, Carolee. My name is Philip Linse with Century Link. I am one of the co-chairs for the Contract Oversight Subcommittee. I share that role with Betty Sanders of Charter. Our mission is essentially to oversee the contracts around covering North American Numbering Plan Administrator, as well as the Number Pooling Administrator, and then the Billing and Collections Agent that then administers the billing and funding of those two contracts. Or actually three contracts including the Billing and Collections Agent.

The activities that we've experienced, since the last NANC meeting in December we've had our monthly contract review of deliverables for all three contracts; as well as we experienced the successful transition from the previous NANPA/PA contract to a bridge contract that was awarded to Somos for both the NANPA and the PA. We've also had our kickoff meeting for the reassigned numbers database, and we have initiated and continued to develop the technical requirements associated with our objective there.

In addition, we've also approved one change order to modify the forms necessary to identify contact with the NPAC since the NPAC vendor has changed. We've made that a little more generic so that it provides us with the flexibility. So we don't need to change that going forward. Then the additional change orders that are pending, we'll also modify the forms to be consistent with the combined guidelines that the industry numbering committee has completed.

Just as additional background, the NANPA vendor Somos, with the bridge contract, it's a 12-month contract. It started in November 1,

2018. That was for both the NANPA and the PA. Then the B&C Agent had a contract that was initiated on May 1st and that's a five-year term.

As far as the Contract Oversight Subcommittee membership, we have representation from AT&T, Bandwidth, CenturyLink, Charter, Cox, the Maine PUC, NASUCA, Sprint, Verizon, the Washington PUC, and then some nonvoting members - T-Mobile, Neustar, Somos, and Telcordia. That concludes my readout on that.

Marilyn Jones: Thank you, Phil and Carolee. Does anyone at the table have questions about the NAOWG presentation? Does anyone on the phone have questions? Okay.

Our next update is going to be from the Interoperable Video Calling Working Group. Matt Gerst is the co-chair and Dave Bahar.

UPDATE AND DISCUSSION OF THE INTEROPERABLE VIDEO CALLING (IVC)

WORKING GROUP REPORT

Matthew Gerst: Great. I'd like to invite my co-chair David Bahar up to the table. We'll do a slide presentation. You all should have access to it. I don't know if we need to present it if it's available. Do you have a recommendation, Marilyn? Do you want to put up the slide deck or should we --?

Marilyn Jones: I don't have control of the slide deck, but I see who does.

Matthew Gerst: While we're waiting, I think you all know me. I've been tasked with co-chairing the Interoperable Video Calling Working Group. We'll go through and give you all an overview of what we've been doing for the last six months working on this project. But, David, do you want to take a second and introduce yourself?

David Bahar: Hi. My name is David Bahar. I am the co-chair for the working group, with Matt. It's wonderful to meet you all.

Matthew Gerst: Thank you. And I think you have the -- there you go if you want to advance to the first slide. Great.

Again David and I have been tasked by the FCC via the NANC to co-chair the Interoperable Video Calling Working Group. We are a very diverse group that is not made up of all NANC members but is a number of external folks who have an interest in the issue of interoperable video calling or at least an interest in video calling services. I'll run through it just to give you an idea of who is on the call. This issue in particular is an issue that is focused on interoperable video calling for all services, but there's a particular interest from the deaf and hard of hearing community in seeing video calling become interoperable. And we'll have David talk a little about that for a few minutes just to give everyone some background.

Our membership includes representatives from AT&T, Bandwidth, Blue Jeans Network, Charter, the city of Los Angeles Representative Richard Ray who may be familiar to many of you in the disability advocacy issues, Comcast, Convo, Gallaudet University which is an entirely deaf university here in Washington D.C., Google, the National

Association of State Relay Administrators, the National Emergency Numbering Association, Professor Schulzrinne who you all know, Somos, Sorensen, Sprint, ZVRS and Purple. We have technical advisors from MITRE, Brian Rosen who is a technical expert and Eric Burger who is the FCC CTO. Our liaisons are Robert McConnell and Michael Scott from the FCC's Consumer and Government Affairs Bureau, and Bill Andrlle from the Wireline Competition Bureau.

With the NANC, this group has been tasked by the FCC. Then a subgroup has been formed to explore how to facilitate the provision of interoperable telephone number-based video calling and to allow the increased use of video calling for both hearing individuals and people with hearing and speech disabilities using different and otherwise incompatible equipment and services. And we'll have David explain a little bit why this is important in a second.

The working group comprises, as I said, a variety of stakeholders with various technical policy and regulatory backgrounds. They are providing knowledge necessary to refine and develop recommendations to achieve the NANC's goal here. We are committed to providing the NANC a final working group report as soon as possible, and we'll talk about the timeline for that in a second.

The working group has been meeting weekly, pretty much since the end of October, in an effort to prepare and submit the final report for the NANC's approval. Ideally the final report will provide options for analysis of any changes necessary in numbering or numbering administration to allow and encourage the deployment of

telephone number-based interoperable video calling. This is important because, if you think about video calling services that you might use through an application, not all of them rout or use a telephone number.

So, we're focused specifically on whether the telephone number can be sort of a centralized enable interoperability among various video calling services. We're going to be looking at whether there needs to be any changes to Commission rules, any change on migration or consolidation of existing numbering directories including the TRS numbering directory which essentially is a database that facilitates interoperability among relay services today but not other video calling services.

We're going to be describing any recommended developments in technology standards or operations required to promote the deployment of telephone number-based interoperable video calling, including the incorporation of interoperable video calling in the implementation of next generation 911. Again, here our scope is a little bit broader than just looking at numbering administration. We're being also asked to look at the technical capabilities of enabling interoperable video calling services. And we'll be recommending next steps to the Commission that the Commission and industry should take to promote interoperable video calling. So, go to next slide and then I'll turn it over to David.

As of last week, the working group has determined that we need to address recommendations that address the issues of addressing, which

is how you identify where video call should go but also whether a service or device that an end user might be using is actually a video capable device. We'll be looking at some recommendations around signaling in media at least in terms of if they can find consensus on those things and also what is the impact to next generation 911.

We've determined that the scope of the report will likely include and focus on point-to-point video calling using 10-digit telephone numbers across video service boundaries. The scope will focus on the ability of video calling users to discover which of their contacts are video capable regardless of which service they use, initiate and establish calls to other users on any other service, exchange video and audio, and communicate across services.

But one thing we are not going to be addressing given the complications is multi-party video calling with screen sharing services. You might have all experienced this through products like Zoom, or WebEx, or other things where you might have a video calling or video chat capability and a screen sharing service. Those aren't the type of services. Those services will not be in scope for what we're dealing with. We're talking about point-to-point and one-to-one communications for video calling.

So, I want to pause here. And David, if you want to give a little bit of background for the NANC from your perspective on the importance of this issue and anything else you'd like the NANC to know.

David Bahar: Sure. Thank you, Matt. Just to sum up some of what we've been talking about so far and to provide you with a little bit of background on what we've been working on and how we've been working through it. So, we're talking about 10-digit phone calls through audio. People who are making these calls using a 10-digit number every day can be making video calls through a relay service referred to as VRS which started approximately 12 years ago, 13 years ago or something like that. 2006, 2007.

That established a database that was kind of bolt-on to the North American Numbering Plan. If you have a 10-digit phone number but it requires information that could be identifying what kind of phone you are connecting to or a computer or video phone device, how you could connect to the specific and different devices at different times specifically with interstate relay calls and using this database - the TRS database which would map phone numbers using the uniform location.

For example, if a person has a specific phone number and using a particular device that uses a phone number, the URD can track if that person has video capabilities on that device and they can find where that video call is happening in order to make that connection. This was considered a trailblazing aspect and created more opportunities for these kind of phone calls to happen. But there were also frustrations then with issues that would come up that would rely on different kinds of software and hardware that was being used which resulted in a kind of interoperability issue which made relay calling

more of a challenge. Sometimes there would be issues when one person could not see each other. There were bugs.

There were different things that needed to be developed. Then we needed to establish rules that are in place, like the ones we have now. FCC has asked us to consider video calling using TRS as an example and using the VRS industry as a source in order to consider how we can make these video calls interoperable for all. So as opposed to a kind of bolt-on as that database was created for initially, this is providing an opportunity for us to figure out a way to have a uniform system. There had been some discussions and good ideas thrown out on how to make this kind of calling successful in general regardless of if you are deaf, hard of hearing, or hearing. So, this particular committee is working through different kinds of particular issues with the video interoperability, including access to NG911 utilizing video.

One particular frustration for the VRS industry is this particular concept of a bolt-on which means that there have been historical issues in trying to connect to 911 in emergencies. So when this kind of video calling becomes universal, this would not be a problem as we're looking forward to what NG911 can become. So we want to make sure that this video communication can happen between everyone in the same way and have the same set of functions. It's using a standard set of methods and approaches which means that different backgrounds, different industries, different service providers, different carriers whether it be a relay company or not can work on

video interoperability. Which means a consumer like me can come to this kind of group and offer up some information that I have had through my experience in working with VRS.

We have had different members with different expertise, including from the industry, presenting on information that would become useful for our particular topic. For example, their 10-digit number use in VRS and discussing how that model could be effective in thinking forward to NG911, thinking about NG911 and what kind of software that would require which means that we could make better informed decisions. As we go forward, we'll be able to share those and make a recommendation to you.

Matt Gerst: Thank you. Shall we go to next slide? So, with David's background, I think you understand we've got a pretty challenging topic that we've been asked to address. We've got a diverse set of interest on our group. We've been making steady progress since October where we spent the first six to eight weeks just trying to baseline knowledge amongst our working group members about video relay services and Next Generation 911, what are we talking about when we talk about interoperability.

Some folks don't have the background that NANC has on how the numbering system is actually administered, and we had to have a sort of crash course on that as well. Then, with the government going into shutdown, we were unable to meet. So, we lost about four, five weeks there. Once the FCC resumed normal operations, we've been meeting weekly since. We're supposed to actually have preliminary

recommendations to this group for this meeting but, given the significant amount of work we have coupled with the hiatus during the shutdown, we are very grateful for the FCC to give us another additional three months to get you preliminary recommendations in June and then to try to get a final report as soon as possible thereafter - at some point in the summer - for you all to review, provide feedback on, and ultimately vote on. Then we'll send our report on to the FCC and see what happens from there.

Moving to the final slide, we are continuing to receive and deliberate on contributions related to the core issues that I mentioned before addressing signaling and media Next Generation 911 in order to develop preliminary recommendations to provide to you in June. We will report those in June, and then that report will be provided as soon as possible. With that, Dave and I are happy to take any questions.

Marilyn Jones: Thank you, Matt and David. There is a question from Chris Drake of iconectiv.

Chris Drake: Thanks for the presentation. My question is is the working group looking at how this may relate to the IP telephony relay service for the hard of hearing. Which, when I heard the description from David, was very similar in nature.

David Bahar: Are you referring to IP video calling?

Chris Drake: ITRS. ITRS is the name, IP telephony relay services.

David Bahar: Oh, I see. So, where you have an interpreter typing text. That's what you're referring to, uh-huh. But this should not impact IP relay. The system that we're discussing is how a 10-digit phone call can be used to identify video callers. It should not influence or impact how we are calling into a relay system. We may take the opportunity to go into more details about how a 10-digit video call might work. I mean we can share information on how we see that going forward. But right now we don't have all of our members providing consensus. We're still in the discussion process. But I'm happy to provide more information about what we've been working on in that way.

Chris Drake: That might be interesting. I would say the fact that a phone number has a special requirement for handling and is known by a database to designate that sounds very similar to what you're trying to do with video services. I appreciate that technology you would then trigger is totally different, but the database function and administration of that is very similar. So that's why I asked the question.

Marilyn Jones: AT&T, Jackie Flemming.

Jacquelyne Flemming: Hi. This is Jackie Flemming with AT&T. I'm a little confused. Can you help me understand? Matt I believe said that this was only point-to-point video. So, in my mind I'm thinking I have a device that is video capable. I dial a number to reach Marilyn or to reach you and, regardless of whatever platform we use, we can see each other. Right?

But then you talked about video relay. So, I'm not sure how that would work if I am trying to reach someone. I'm dialing a number and trying to reach someone who is deaf or hard of hearing and needs an interpreter. Then there's got to be another person. That stops being point-to-point. I guess I'm a little confused on the scope.

David Bahar: I can respond to that. That is a very good question. It's actually a terrific question. There are a few scenarios that we need to work through in this situation which is why I mentioned I'm sort of hesitant to share all of those thoughts right now since we are still working through some of those issues. But the example that you're talking about, which is how VRS works, if for example we could all make a video call, how would that look different from what you're talking about?

If we have a system established where we are calling my video product and I can ping the TRS directory, so that number that I call is in that directory. If I ping it and it basically says yes, it means that the person I am calling has a video capable device. So I can connect to find whatever video-enabled device they have.

But if the number I'm calling is not in that database, then it will put me through to a provider that can pull an interpreter into that call and the interpreter would have the number that needs to be called in order to make that call function properly. So the connection, in order to get that interpreter, it would become a kind of three-party call within the system.

It's very similar concept if I want to call a particular phone number to a video-enabled device and I want to connect directly but I can skip the relay step and just call video-to-video. So, if I enable my video and I contact someone who has the same capability but is hearing and does not know sign language, that is a particular issue that is under discussion right now in our group. So, what does that call flow look like?

One of the things that we are discussing is if I am calling out to a hearing person, whether it be me or them, either party would be able to - quote - pull in an interpreter as necessary or a relay service. The interpreter would be able to see both participants in the call and interpret. So, it's similar to a three-way call concept.

Right now, if you want a VRS call, you must have a three-party call. Right now, a video call is only point-to-point, but there are particular scenarios where this may be an option. It is a complicated issue on how that can go forward particularly as we're talking about NG911. But it's a wonderful question and thank you for asking. It is under discussion.

Jacquelyne Flemming: Thank you.

Marilyn Jones: Any questions on the phone for Matt and David?
Betty Sanders, Charter.

Betty Sanders: Just to build off of that, when you say relay service, I'm assuming you're still talking about the existing relay

services that we have in place today. Not advocating anything new to replace those.

David Bahar: No. That's correct.

Marilyn Jones: Thank you, Matt and David. So, let's move to our next presentation from the North American Portability Management LLC. That presentation is going to be made by Tim Kagele.

DISCUSSION OF THE NORTH AMERICAN PORTABILITY MANAGEMENT LLC REPORT

Tim Kagele: Thank you, Marilyn. Good afternoon ladies and gentlemen of the NANC. As Marilyn said, my name's Tim Kagele. I work for Comcast. I am a co-chair of the North American Portability Management LLC. I share that responsibility with my AT&T colleague Teresa Patton.

Just as a quick refresher. The role and responsibility of the NAPM is to provide contractual and administrative oversight to the local number portability administrator, currently iconectiv. We know them as the NPAC operator.

Before I get into the NAPM's report, I will put in a shameless recruiting plug. For those carriers in the room and/or associations that are interested in joining the NAPM LLC, please feel free to reach out to Teresa and I and we'll be happy to walk you through the onboarding process.

Lastly, for those of you that were in this room, about this time last year you will note that probably the nature of the NAPM's reports to the NANC were very different. So I would remind the audience that

coming up on May 25th will be the first anniversary of the conversion to iconectiv's new NPAC. We're very, very pleased as co-chairs on behalf of the NAPM to share with the industry that the NPAC has been working exceptionally well and the vendor relationship has been very solid. I just wanted to make a couple of brief remarks before I get into the report.

I'll begin with statements of work and contractual amendments. Fairly routine here. With respect to Neustar, Neustar as you know is the outgoing NPAC vendor. As part of that wrap-up with the old vendor, there were a series of ongoing contractual obligations that they were required to meet. We're very pleased to say that Neustar has substantially met all of their continuing obligations. I believe there may be one remaining obligation they will settle up in the next week or two, but essentially they are compliant with their contractual obligations.

In terms of iconectiv, Statement of Work 20 amends the master services agreement or MSA Exhibit E pricing specifically for certain help desk services and allows for an application fee for new providers of telecommunications-related services or PTRS user applications. That was approved by the NAPM.

Statement of Work 21 amends the MSA Section 6.1.2.2.4 and the corresponding Exhibit J-1 user agreement to clarify permitted uses in conditions of certain NPAC data such as sharing the NPA/NXX associated with the LRN of a telephone number and clarify that service provider

name associated with the SPID of a telephone number is not either user data or derived data. That was also approved by the NAPM.

And then lastly, with respect to SOW's and amendments, as reported at the last quarterly NANC meeting, the NAPM and iconectiv had been in discussion about allowing use of certain NPAC data elements by external parties such as banking to allow for sort of three-party validation to combat account takeover fraud. So we're very pleased that we have reached conceptual alignment around that idea and the NAPM has directed iconectiv to prepare a statement of work that would embody that concept and create a new ancillary service for users such as the banking industry.

The next item pertains to the contract implementation committee or CIC and, again in partnership with the vendor iconectiv, the CIC has reviewed four finding reports of providers of telecommunications-related services or PTRS users that are not service providers to validate the need for NPAC data access. And those were approved.

Finally, in terms of general review, just a reminder, I think at the last quarterly NANC report we had a vacancy in the secretary position. We're pleased that Laura Dalton from Verizon has been elected to fill that open secretary role. So currently your officers are Teresa Patton with AT&T as co-chair, myself as co-chair, and as treasurer Joy McConnell-Couch from CenturyLink, and then Laura with Verizon as secretary. On the last page you'll find the co-chairs' contact information should you have reason to reach out and talk with

us. So, let me pause there to see if there are any questions from the room. Chris.

Chris Drake: Thank you, Tim. One, on behalf of iconectiv, thank you for that acknowledgment in your introductory remarks. I echo that it's been a pleasure with the NAPM and to make this a successful transition and we're very pleased to be coming up on our anniversary. Thank you.

Tim Kagele: Thank you for that. Okay. Any questions on the bridge? Thank you, Marilyn.

Marilyn Jones: Thank you, Tim. Our final report would be from the Secure Telephone Identity Governance Authority by Brent Struthers.

DISCUSSION OF THE SECURE TELEPHONE IDENTITY GOVERNANCE AUTHORITY

Brent Struthers: Good afternoon. I'm Brent Struthers with the Secure Telephone Identity Governance Authority. I will apologize profusely in that this report will include no references to top 10 hits, or any rapper, or pop stars. It'll be a little bit boring, I apologize for that.

The STI-GA last updated the NANC on its progress in December. Since that report, the STI-GA has continued to make progress and we remain on schedule to meet the deadlines recommended in the CATA Working Group report of February 4th. Responses to the RFP for the STI-PA, the policy administrator, were received. The STI-GA is reviewing those responses and we're on target to select a policy

administrator in May 2019. The STI-GA will continue to update the NANC on its work at future meetings. That is the sum total of our report.

Marilyn Jones: Great. Thank you, Brent. Any questions? On the phone, any questions? Okay, thank you. I appreciate it.

Okay, let's move to our public comments and participations. Steve Johnson from Neustar, you have something?

PUBLIC COMMENTS AND PARTICIPATION

Steven Johnson: I'm actually with Trusted. The question, not quite clear as to whether the permanent disconnect reports, May 12th and June 13th, whether there would be an extension on time. And so just seeking to clarify. That is the only question I have.

Marilyn Jones: I'm sorry I don't follow.

Steven Johnson: One of the reports mentioned there was focused more on the three-digit from the same group that is involved with the reassigned number database. It sounds like the reassigned number database is on track to be released back to the FCC on June 13th. But there was a mention that there was also focus by the same group first on the three-digit, the 911 type of discussions. So, it wasn't clear whether that would on track for June 13th or not relative to the requirements from the FCC in that regard.

Carolee Hall: This is Carolee Hall with the NAOWG. I think we've got two things going on. The May 13th that you're referring to, I believe that is for the numbers database. And then the N11 is the May 11th. I mean April 11th, excuse me. Yes, yes. So, April 11th

for the N11 and May 13th for the NANC report to the FCC on N11. The other one was the reassigned numbers database.

Steven Johnson: Yes, for June 13th.

Marilyn Jones: Right. And typically the working group provides the NANC a draft report 30 days before the report is due to the FCC, right.

Carolee Hall: Does that clarify it for you?

Steven Johnson: So those are on track is what you're saying.

Carolee Hall: That is correct.

Steven Johnson: Okay. Thank you very much. I appreciate it.

Marilyn Jones: Yes, at the microphone.

Mary Lovejoy: Thank you. My name is Mary Lovejoy. I'm with ACA Connects, formerly the American Cable Association. When I was listening to the reassigned numbers database presentation, there was a list of all the members on the subcommittee that's working on the TRD. I noticed that there are no small providers or small provider representatives on that subcommittee. I was wondering, first, if you have done anything to seek comment from small providers or, second, whether you're planning to add any new members to that subcommittee. Small providers are likely to be disproportionately burdened by any new requirements, so I think it's important to get their input on how the process should work to minimize burdens.

Marilyn Jones: This is Marilyn from the FCC. We are reviewing one application now. We have some follow-up questions so that application is still pending. Other than that, we haven't had any interest from any of the small providers. We haven't reached out to any.

Mary Lovejoy: Do you have a timeline on that application?

Marilyn Jones: I can speak with you afterwards.

Mary Lovejoy: Okay. Thanks.

Marilyn Jones: Okay. Thank you. On the bridge?

Female Voice: Anyone on the bridge?

Marilyn Jones: Is someone on the bridge who has a question?

Bridget White: Yes. This is Bridget White with USConnect, and the USConnect companies are rural overall carrier. And I am on the NAOWG with the reassigned number database. I believe that was the question?

Marilyn Jones: Yes. Thank you for that.

Bridget White: Yes. You're welcome.

Marilyn Jones: Thank you, Bridget.

Bridget White: You're very welcome.

Marilyn Jones: USConnect. Okay. That completes the public participations.

OTHER BUSINESS

The only other business we have is I do want to update everyone we're going to be having a conference call to deliberate on the N11 report and one to deliberate on the NNP report. We're still working those dates, so stand by. We should have information on those soon. I will have to release a public notice and get the 15 days of publication in the *Federal Register* summary within the next week or so we should have more information about that shortly.

Other than that, our next NANC meeting is tentatively scheduled for June 20th. This meeting is adjourned. See you all in June.