

# 988: The New Mental Health Crisis Emergency Number

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# What is 988?

- A three-digit universal dialing code for suicide prevention, substance use and mental health crisis
- Builds on/replaces the 1-800 number for the National Suicide Prevention Lifeline (now known as 988 Suicide & Crisis Lifeline)
- Offers the promise of a new response to people in crisis—*but only if states act to create a 988 crisis response system*

**Goal:** 988 is an entry point to a reimagined crisis system



# Our Current Crisis Response

The lack of available mental health response means people in crisis, their families and their communities face avoidable trauma and tragedy.

**2 million**

2M times each year,  
people with mental  
illness are booked into  
the nation's jails

**100,000+**

100,000+ people died of  
a drug overdose in  
a 12-mo. period

**47,000+**

Over 47,000 people  
died by suicide in 2021

# What's Possible: Crisis Care National Guidelines

From the Substance Abuse and Mental Health Services Administration  
National Guidelines for Behavioral Health Crisis Care

## 24/7 crisis call centers "SOMEONE TO TALK TO"

- Trained in responding to behavioral health crises
- Available by text/chat
- Coordinate services and dispatch mobile crisis



## Mobile crisis teams "SOMEONE TO RESPOND"

- De-escalate situations
- Transport to crisis stabilization or connect to other services
- Staffed by behavioral health professionals, including peer support specialists

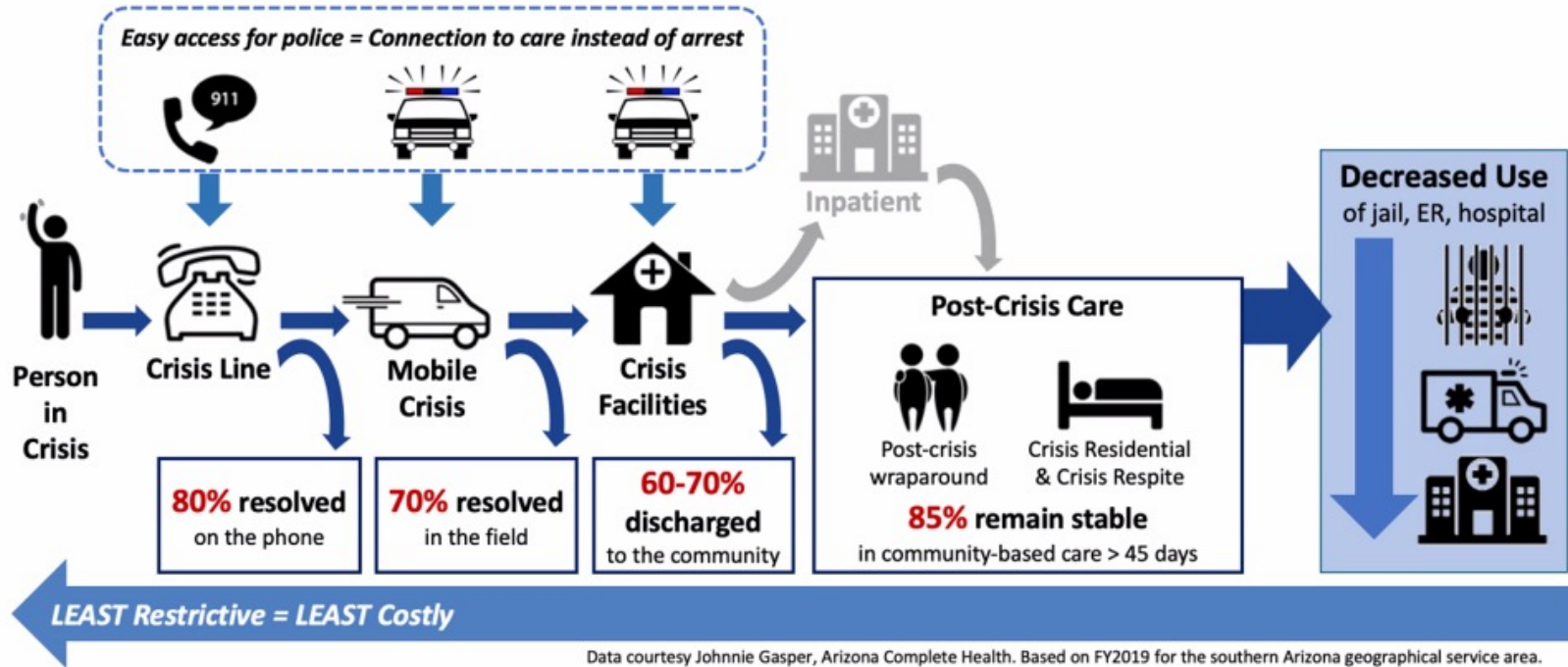


## Crisis stabilization "SOMEWHERE TO GO"

- Capacity to diagnose and provide initial stabilization and observation
- Connect to follow-up care with a "warm hand-off"



# Alignment of crisis services toward common goals *care in the least restrictive (and least costly) setting*



# Federal Action to Create 988

P.L. 116-172, National Suicide Hotline Designation Act, passed in 2020:

1. Created universal, 3-digit number for mental health crises and suicide prevention:

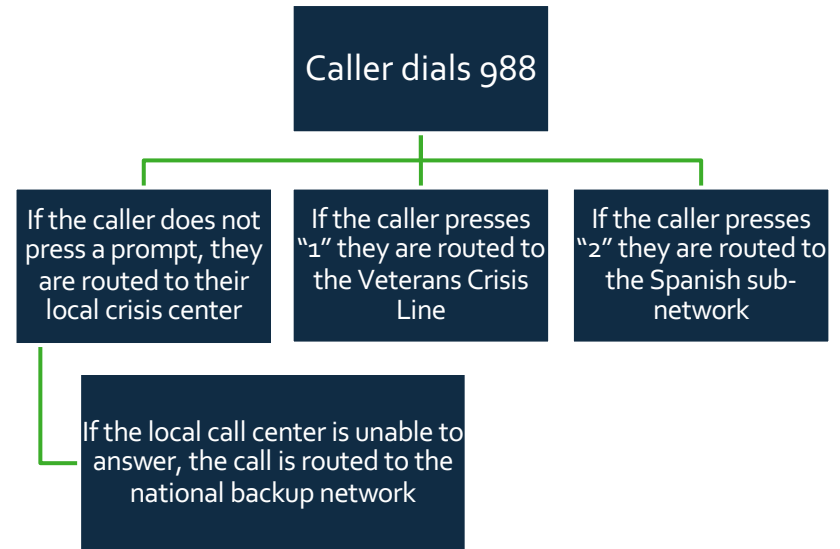
“9–8–8 is designated as the universal telephone number within the United States for the purpose of the national suicide prevention and mental health crisis hotline system operating through the National Suicide Prevention Lifeline...”

2. Reimagined crisis response to include crisis call centers, mobile crisis outreach and stabilization:

Allows states to collect fees on telecommunications bills to ensure “the efficient and effective routing of calls made to . . . 9–8–8” and “personnel and the provision of acute mental health, crisis outreach and stabilization services by directly responding to the 9–8–8 national suicide prevention and mental health crisis hotline.”

# How does 988 work?

- Operates through existing National Suicide Prevention Lifeline (launched in 2005)
- Funded by SAMHSA, administered by Vibrant Emotional Health
- Free, confidential, 24/7/365
- Calls routed to ~200 local crisis centers
- In 2021, roughly 3.6M contacts
- **Available via phone, text or chat (988lifeline.org)**



# Contacts estimated to double in Year 1



3.6M → 7.2M contacts



In August, **45%** increase over August 2021  
(152,000 *additional* contacts)



# What's the difference between 911 and 988 for mental health crises?

## 911

- Calls answered by operators
- Operator collects information
- Uses information to dispatch fire, police or emergency medical services (EMS)
- *Millions of calls for mental health crises are made to 911 annually*

## 988

- Calls answered by trained crisis counselors
- Counselor supports caller, deescalates situation, identifies any urgent medical needs (resolves 80-98% of crises over phone/text/chat)
- Ideally, counselors are able to dispatch mobile crisis teams to respond when in-person response needed
- *Estimated 7.2 million contacts in year one*

Systems should have standard operating procedures to transfer between 911 and 988 where appropriate.

# What happened on July 16, 2022?

1. **Everyone** can text or chat 988, no matter where they live
2. Their call will **direct to the 988 Suicide & Crisis Lifeline** network
3. The Lifeline is focused on a **range of mental health, substance use and suicide crises** and helping people in any type of emotional distress

If we don't act further, we'll have a number (988) that is easy for everyone to remember to access the Lifeline, like 911.



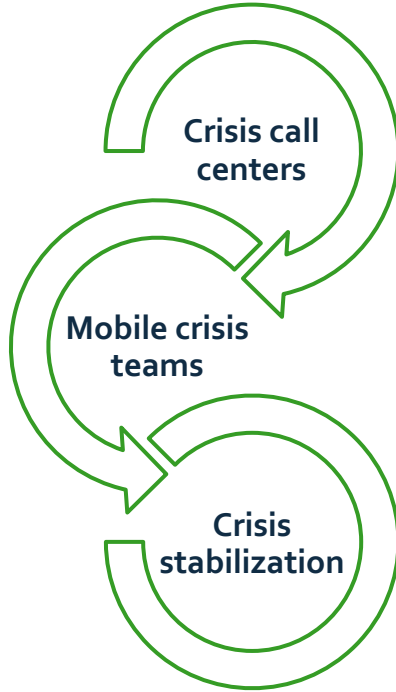
**988 is only the  
first step...**

## What Won't Change Unless Policymakers Act

- ☒ Call centers will continue to operate with existing, limited resources despite the anticipated increase in volume
- ☒ Mobile crisis teams are not available in every community – which also means law enforcement remains the likely in-person response to someone in crisis in many places
- ☒ Crisis stabilization options are available in few communities, leading people to cycle in and out of emergency departments and jails, with few places to turn for short-term, intensive care
- ☒ The crisis services available to people contacting 988 will vary community-by-community

# Where are we today?

ONLY IN  
CERTAIN  
AREAS



UNDERFUNDED



VERY  
LIMITED  
AVAILABILITY

July 16 is not our finish line: We have much more work to do in the months and years to come.

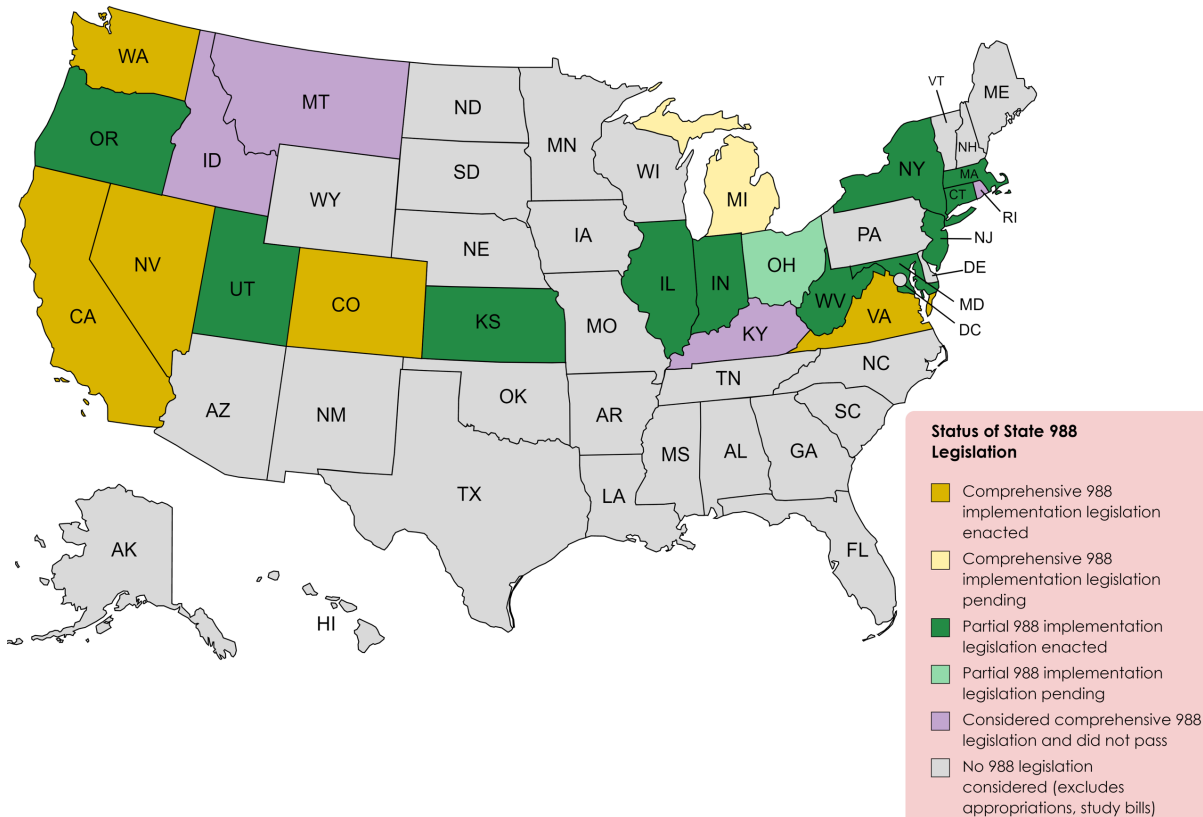
# States must act

**Goal:** Pass state legislation implementing an infrastructure to support the new 988 crisis line and related services

*\*Note some of the elements below may be enacted through regulation and/or agency policy instead of legislation*

- Pass state legislation that:
  - Includes a funding mechanism, such as monthly fees on phone bills
  - Defines requirements for 988 crisis response services across the state
  - Provides additional resources to support crisis services
  - Creates oversight, coordination and reporting mechanisms to ensure smooth implementation and accountability

# 988 Crisis System State Legislation



Find the latest on status of state 988 legislation at NAMI's [ReimagineCrisis.org/map](https://ReimagineCrisis.org/map)

## State 988 Legislation Thus Far

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**7 states** created 988 Advisory Bodies (CA, MA, OR, IL, KS, UT, WA)

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**5 states** have 988 telecom fees: CA AB 988 (\$0.08-.30); CO SB 21-154 (capped at \$0.30); NV SB 390 (capped at \$0.35); VA SB 1302 (\$0.12); WA HB 1477 (\$0.24)

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**30 states** have passed appropriations for at least one of the 3 core crisis services (call centers, mobile crisis teams and/or crisis stabilization): AL, CA, CO, CT, FL, GA, ID, IL, IL, KS, KY, LA, MD, MD, MI, MN, MS, MO, NJ, NM, NY, NC, OR, RI, SC, SD, UT, VT, WA, WY

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**4 states** have required a study of 988 and broader crisis care system (AL, NE, NY, MS)

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**3 states** have passed 988 legislation impacting commercial insurance (CA, NJ & WV)

# State Planning Happening Around 988 & Crisis Services

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Aligning/combining/ adding to existing state call center capacity

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Building up culturally competent, diverse workforce

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Passing legislation/funding for call centers, mobile crisis teams and crisis stabilization

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Determining how law enforcement and crisis services will work together

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Oversight/advisory boards with lived experience



# Identifying Funding Streams/Gaps

- Local call centers are funded by state & local funding and grants, and often staffed in part by volunteers
  - Some states are investing more than others
  - **\$105M** to build up staffing across states and territories' local crisis call centers in early 2022 – about **20%** of estimated local funding need for call centers
- Mobile crisis teams and crisis stabilization are not always covered by insurance
  - Both have significant start-up costs/costs not billable to insurance
- This needs to be braided funding – federal, state & local – and insurance coverage

# Broad Public Support for Crisis Services

## (June 2022)

**4 in 5**

**86%** believe that when someone is in a mental health or suicide crisis, they should receive a mental health response — not a police response

**91%**

of Americans support the creation of 24/7 mental health, alcohol/drug, and suicide crisis call centers

**85%**

of people support state funding for 988 call centers and crisis response services. **83%** support federal funding

**Nearly 3 in 4**

would be willing to pay a monthly fees on their phone bill to support 988

*The 988 survey was conducted by Ipsos using KnowledgePanel® of the American general population (ages 18+). Interview dates: May 20-23, 2022*

*Number of interviews: 2,045. Margin of error: +/-2.3 percentage points at the 95% confidence level.*

*<https://www.nami.org/Press-Media/Press-Releases/2022/NAMI-Poll-Finds-Public-Unaware-of-988-Before-July-Launch-but-Supportive-of-Policies-to-Improve-Crisi>*

# Top Issues of Concern for 988 Crisis Services



- Availability
  - Funding
  - Insurance coverage
  - Workforce
- Policymaker awareness
- Public awareness

# How to Get Involved

- Find out who's in charge of 988 planning in your state
  - Did legislation pass to create a Task Force/Study or 988 Advisory Body?  
Examples: NE, AL, MS, TX; WA law's CRIS committee
  - Is your State Mental/Behavioral Health, Public Health, or other agency taking the lead on a 988-implementation coalition or committee?
    - Is there a financing or insurance workgroup?
  - Are there 988 advocacy coalitions in place?
- Connect with your NAMI State Organization, [found here](#)
- Is the state agency/division responsible for Medicaid and commercial insurance looped into 988 planning and implementation efforts?

# Additional Resources

- 988 hub: [www.reimaginecrisis.org](http://www.reimaginecrisis.org)
- State 988 legislation: [ReimagineCrisis.org/map](http://ReimagineCrisis.org/map)
- Advocate for crisis services: [nami.org/crisisadvocacy](http://nami.org/crisisadvocacy)
- NAMI 988 crisis response system video:  
[https://youtu.be/gXEvzH\\_iF8U](https://youtu.be/gXEvzH_iF8U)

 Follow us on Twitter: [@NAMIAdvocacy](https://twitter.com/NAMIAdvocacy)

- Find state-level monthly 988 data by visiting <https://988lifeline.org/our-network/>, then navigate to the "**State-based monthly reports**" option