Increase Access to the Full 988 Crisis Response System

Contact volume has increased for 988 – the nationwide, free 24/7 lifeline to call, text, or chat – since its three-digit launch in 2022, and continued improvements are needed to ensure the best possible access to care for all.[i] AFSP urges increased access to 988 services and the crisis continuum of care via workforce expansion and insurance coverage.

The Facts

1 in 4 adults with any mental illness report an unmet need for mental health treatment.[ii]

Nearly half of the U.S. population lives in a mental health professional shortage area.[iii]

Variety across insurance plans often leaves gaps in coverage for crisis services.[iv]

AFSP Recommendations

- **Invest in recruitment and retention of 988 contact center, mobile crisis response, and stabilization/respite facility volunteers and staff to meet rising demand**
- **Expand coverage for crisis services across Medicaid, Medicare, TRICARE, and private insurance plans**

Background

- The Substance Abuse and Mental Health Services Administration (SAMHSA) recommends crisis services be comprehensive and integrated to provide continuity of care from the onset of crisis through stabilization; the full continuum of crisis services includes someone to contact, someone to respond, and a safe place for help[v]
- Many states are facing a workforce shortage in all behavioral healthcare settings – several states are implementing policies to address these shortages through loan repayments, expanding the types of providers that offer services (e.g., paraprofessionals and peer support specialists), flexible working conditions, and more[vi]
- Per federal law, all private plans (employer or marketplace) must cover required behavioral health services, including crisis response; however, despite laws regulating insurance, individuals often pay more out-of-pocket for mental health care than physical health care[vii viii]
- Medicaid is the largest payer for behavioral health services in the United States – the Centers for Medicare and Medicaid (CMS) recommend states cover the entire crisis care continuum, yet only 11 states and Washington, D.C., cover all three components under Medicaid[ix x]

Expanding affordable access to the full 988 crisis response system ensures that every person who reaches out can connect with appropriate, timely, and high-quality crisis care.

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