

# THE 988 IMPLEMENTATION ACT

SOMEONE TO CALL.  
SOMEONE TO COME.  
SOMEWHERE TO GO.



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LED BY  
CONGRESSMAN TONY CÁRDENAS

CONGRESSMAN  
**TONY CÁRDENAS**

# TABLE OF CONTENTS

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## **2 INTRODUCTION**

A Message from  
Congressman Cárdenas  
and Congressional co-  
leads

## **7 SUMMARY**

One-pager

## **8 WHAT IS THE CRISIS CONTINUUM OF CARE?**

## **9 THE 988 IMPLEMENTATION ACT**

Section by section

## **11 FREQUENTLY ASKED QUESTIONS**

## **12 ENDORSEMENTS**

Over 100 supporting  
organizations

## **15 ENDORSEMENTS**

Quotes from supporting  
organizations

## **20 SOCIAL MEDIA TOOLKIT**

Draft social media posts  
and graphics

# THE 988 IMPLEMENTATION ACT

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## MESSAGE FROM CONGRESSMAN TONY CÁRDENAS



In 2020, Congress recognized the importance of mental health and approved 988 as a nationwide calling code for mental health emergencies. 988 goes into effect in July of this year, meaning that every person anywhere in the country can call for specific help for themselves or a loved one.

There is no question 988 will change the trajectory of how we respond to those in crisis, but just a new number alone is not enough. I have heard from people from all across the country about this issue—students, parents and families, patients and medical professionals, law enforcement and judges, mental health advocates, civil rights leaders, elected officials and more. All of them have told me the same thing: when people in crisis call 988 for help, callers must be connected to the proper assistance they need, with the urgency and support they deserve.

When people call 911 for a medical emergency, they expect more than just someone to talk to on the phone. They expect trained professionals to be able to respond to their situation, wherever they may be, and to receive care at a hospital with an emergency room capable of attending to their needs. We should expect no less for mental health emergencies, and we can no longer afford to—especially since suicide is the tenth leading cause of death in the United States and rates continue to increase.

The good news is, we don't have to continue this way. The numbers on public opinion and financial benefit support this type of intervention, too: more than 80% of Americans believe mental health professionals should be the primary first responders for a mental health crisis, and more than 90% are supportive of 24/7 crisis centers. Taking care of people the right way also makes financial sense—comprehensive crisis services are providing 2 dollars of returns on every 1 dollar invested.

We have a historic opportunity to change the way mental health crises are treated in America. Families shouldn't have to weigh the risk of police encounters with a loved one if they call for help. Together we can work towards a future where mental health isn't seen as something criminal. My hope is that folks in need, anytime and anywhere, can call 988. And when they do, they'll find the support they need: whether it's someone to call, someone to come, or somewhere to go.

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## MESSAGE FROM CONGRESSIONAL CO-LEADS:

On Thursday, March 17, 2022, **Congressman Tony Cárdenas (D-CA)** led the introduction of the **988 Implementation Act** with **Congresswoman Doris Matsui (D-CA)**, **Congresswoman Lisa Blunt Rochester (D-DE)**, **Congressman Brian Fitzpatrick (R-PA)**, **Congressman Seth Moulton (D-MA)**, **Congresswoman Grace Napolitano (D-CA)**, **Congressman Don Beyer (D-VA)** and **Congressman Jamie Raskin (D-MD)**. The transformative, comprehensive legislation will change our crisis response to mental health emergencies. The 988 Implementation Act will provide federal funding and guidance for states to implement their crisis response infrastructure ahead of the July launch of the new national suicide prevention and mental health crisis hotline, 988.



People calling 988 in crisis may need to be connected to critical services — and Certified Community Behavioral Health Centers (CCBHCs) stand ready to answer that call. The CCBHC model has already proven successful in expanding access to integrated physical and behavioral health care, including 24/7 community-based crisis intervention for individuals with serious mental illnesses. For 988, CCBHCs are essential local resources equipped to dispatch mobile response teams to people in need, enabling our first responders to reduce reliance on emergency rooms and law enforcement for crisis stabilization.

I am proud to have my bill, the Excellence in Mental Health and Addiction Treatment Act of 2021, which is legislation that would allow every state to join the innovative CCBHC model, included in this important package. By working together and taking a comprehensive approach to 988 implementation, we can ensure that the hotline is expanding each states' capacity for crisis response.

**Congresswoman Doris Matsui (D-CA)**

Today, millions of Americans are struggling with worsening mental health. No matter their condition, too often, individuals don't have access to the behavioral health services that would address their needs. I am pleased to introduce the 988 Implementation Act which will help ensure that every person in crisis receives the right response in the right place every time and help us realize the promise of 988.

**Congresswoman Lisa Blunt Rochester (D-DE)**





# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## MESSAGE FROM CONGRESSIONAL CO-LEADS:



Now more than ever, it is imperative that we provide crucial support and expand resources for the millions of those struggling with mental health in our country. As Co-Chair of the Bipartisan Addiction and Mental Health Task Force, I proudly support the 988 Implementation Act, which will bolster the behavioral health crisis continuum of care nationwide and ensure that the lifesaving 988 Suicide Prevention Hotline is successfully implemented.

**Congressman Brian Fitzpatrick (R-PA)**

The United States is facing a mental health crisis—made worse by two years of pandemic-induced trauma. My bill to make 9-8-8 the national hotline number for mental health emergencies was a critical step toward destigmatizing mental health and making care more accessible. I'm proud to co-sponsor Congressman Cárdenas' implementation legislation, which will give states the support they need to make 9-8-8 a reality. We're long overdue to provide this service to Americans looking for a reliable, free place to turn during mental health emergencies.

**Congressman Seth Moulton (D-MA)**



With the July 2022 target implementation date fast approaching, we must ensure that a crisis services continuum—consisting of call centers, mobile crisis units, and crisis stabilizations programs—is solidified in all states. This immediate intervention increases the ability of individuals to recover from crises and assists to keep them out of future crises, and I am pleased our bill provides funding for the full crisis services continuum. We must all spread the word to individuals and the media, not only so they are aware of 9-8-8, but to help continue to reduce stigma. I am proud to join my colleagues in introducing this legislation to help save lives.

**Congresswoman Grace Napolitano (D-CA)**

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## MESSAGE FROM CONGRESSIONAL CO-LEADS:

My colleagues and I have worked on a bipartisan basis for years to designate 9-8-8 as the simple, easy-to-use number for the National Suicide Prevention Hotline. Now that this effort has been successful, it is essential that we support and fund an effective rollout to educate the nation about this important resource. Our comprehensive legislation would help make this effort successful, and do so much to help mental health and suicide prevention efforts in this country. It is time for Congress to get this done.

**Congressman Don Beyer (D-VA)**



“A mental health crisis is plaguing our country, and far too often those struggling to keep themselves safe from the ravages of depression, anxiety and other crippling mental health crises have nowhere to go for help. The mental health of a people may not matter under an autocracy that treats its population like replaceable parts in a machine, but mental health is paramount in a strong democracy. I'm proud to help introduce the 988 Implementation Act to give our people a lifeline in their most difficult times. Thank you to my colleagues Congressman Cárdenas, Congresswoman Matsui, Congresswoman Napolitano, Congressman Moulton,

Congresswoman Blunt Rochester, Congressman Fitzpatrick and Congressman Beyer for their visionary commitment to the mental health of all Americans.

**Congressman Jamie Raskin (D-MD)**

# THE 988 IMPLEMENTATION ACT

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## THE PROBLEM:

Right now, Americans are forced to call the police or go to hospital emergency rooms when experiencing a mental health or substance use crisis. In July 2022, a national 3-digit calling code for mental health emergencies, 988, will go live, but almost every state is struggling to implement it without federal support.



Suicide is now the 2nd leading cause of death for people ages 10-34



Americans with untreated mental illness are 16 times more likely to be killed by law enforcement



It costs 23% less for a mobile crisis team to respond to a crisis call instead of police

## THE SOLUTION:

**The 988 Implementation Act**, introduced by **Congressman Tony Cárdenas**, provides federal funding and guidance for states to implement their 988 and crisis response infrastructure that relies on trained mental health specialists instead of armed law enforcement.

## THE DEEP DIVE:

Evidence shows us that, to be truly effective, crisis services must operate in a linked fashion. There must be someone to call, someone to come, and somewhere to go if it's needed. The 988 Implementation Act provides federal support, guidance and funding for states to enact 988 and crisis services. These measures will ensure that it's not just a number to call but a resource to connect to services on the ground, including trained first responders and crisis centers. The 988 Implementation Act:

- Solidifies funding for the 988 national hotline and a national backup system to ensure 24/7 access.
- Provides funding for **community-based crisis response**, including **call centers**, **mobile crisis teams** and **crisis centers**.
- Supports crisis **workforce development** with increased funding for **training** and scholarship opportunities.
- Increases access to care by requiring all **health insurance plans to cover crisis services**.
- Allows all states the opportunity to establish **certified community behavioral health clinics** (CCBHCs), which provide comprehensive mental health and substance use services.
- Implements a national suicide prevention **awareness campaign** in partnership with a wide array of stakeholders.
- Provides technical assistance for states to **implement crisis services** and supports research for continuous quality improvement.

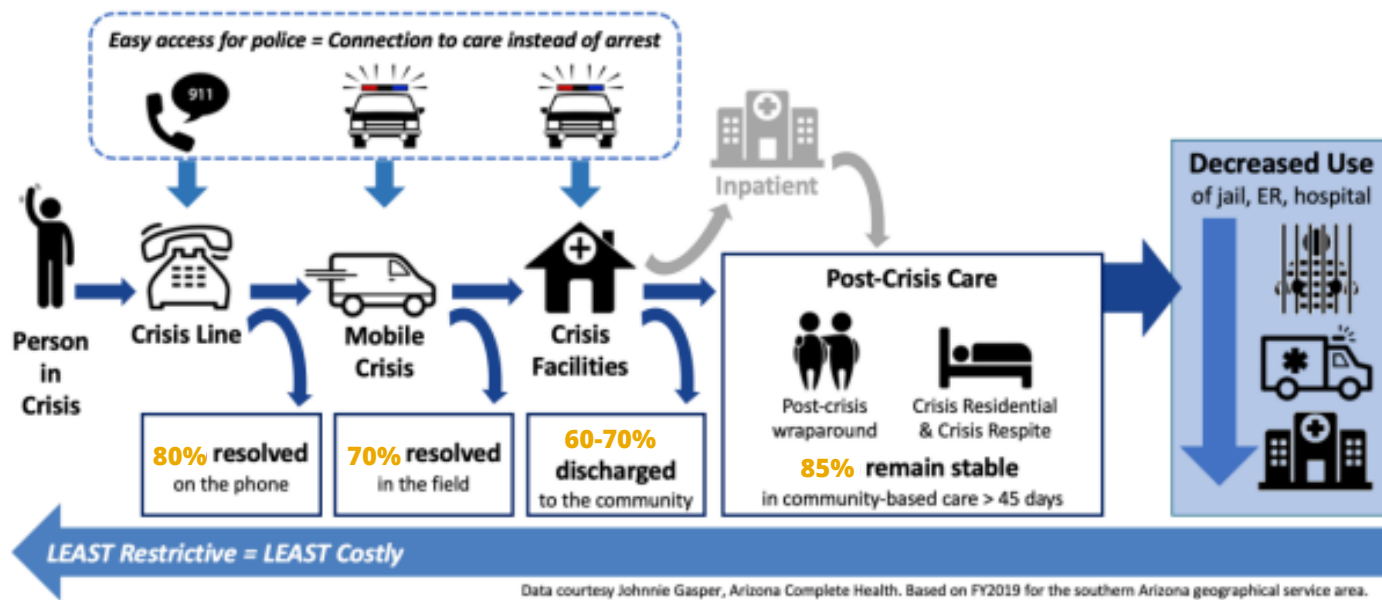
# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## WHAT IS THE CRISIS CONTINUUM OF CARE?

Just like other emergency medical services, to be truly effective, crisis services must operate in a linked fashion or continuum. There must be someone to call, someone to come, and somewhere to go. The 988 Implementation Act provides federal support, guidance and funding for states to enact 988 and crisis services, to ensure that it's not just a number you call but a resource to connect you to services on the ground, including trained first responders and crisis centers when needed.

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



### Key Elements

- 24/7 crisis hotlines via call centers and warm lines
- Mobile crisis services
- Short term crisis centers
- Connection to community service

### Benefits of Comprehensive Crisis Services

- Improves outcomes and saves lives
- Keeps people out of the emergency room and hospital
- Reduces reliance on law enforcement for behavioral health needs
- Increases access to mental health and substance use disorder services
- Reduces costs over time



# THE 988 IMPLEMENTATION ACT

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## SECTION BY SECTION

### **Substance Abuse and Mental Health Services Administration**

- **Behavioral Health Crisis Coordinating Office:** Authorizes \$10 million for a Behavioral Health Crisis Coordinating Office to support state and local 988 and crisis service implementation. This office will identify and distribute best practice standards, provide technical assistance to local partners and support research and quality improvement.
- **National Suicide Prevention Lifeline:** Increases the authorization ceiling for the existing line-item to \$240 million, to ensure that 988 offers a timely 24/7 response nationwide. Ensures that 988 is accessible and responsive to all callers, including non-English speakers and individuals who are deaf and hard of hearing, and offers specialized services for youth, veterans, LGBTQ individuals, people of color, people with disabilities and other underserved populations.
- **Regional/Local Lifeline Call Center Program:** Authorizes a free-standing line-item for \$441 million that would provide federal funding (for the first time) for technology, training and operations for the 250+ regional/local lifeline call centers across the country, which are essential for providing a local response to callers in crisis.
- **Mental Health Block Grant Crisis Care Set-aside:** Permanently authorizes the \$2.235 billion in MHBG funding appropriated through the combined Consolidated Appropriations Act and the American Rescue Plan allocations. Includes and authorizes the 10% set aside for crisis services.
- **Mental Health Crisis Response Partnership Pilot Program:** Authorizes \$100 million for a new pilot program for communities to create or enhance existing mobile crisis response teams, composed of licensed counselors, clinical social workers, physicians, paramedics, crisis workers and/or peers. Teams must respond to people in crisis and provide stabilization and referral to behavioral health services and supports.
- **Suicide Prevention Media Campaign (H.R. 2682):** Authorizes \$10 million for a national suicide prevention media campaign, including increasing awareness of suicide prevention resources such as 988. The campaign will include culturally competent material tailored for all ages in consultation with state officials, mental health professionals, first responders, patient advocacy organizations, individuals with lived experience and other appropriate groups.

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## SECTION BY SECTION

### **Health Resources Services Administration**

- **HRSA Capital Development Grants:** Broadens eligibility for capital projects to include crisis receiving and stabilization programs as well as call centers. Recipients of these grants would be required to demonstrate working relationships with local mental health and substance use care providers in their community.
- **Expand behavioral health workforce training programs:** Authorizes \$15 million for crisis service workforce development through the HRSA Behavioral Health Workforce Education and Training (BHWET) Program, SAMHSA Minority Fellowship Program (MFP), HRSA Graduate Psychology Education (GPE) Program. Specifies National Health Service Corp eligible sites to include crisis call centers, mobile crisis teams and crisis receiving and stabilization programs.

### **Department of Health and Human Services**

- **Behavioral Health Crisis Services Expansion Act (H.R. 5611 & S. 1902):** Sets standards for crisis services. Institutes coverage by all health insurance plans so that everyone has access to mental health and substance use disorder crisis response services.

### **Social Security Act Amendments: Medicaid**

- **State Crisis Care Option:** Supports state implementation of 988 and crisis services by extending and expanding federal Medicaid financing (FMAP) for regional/local 988 call center operations, mobile crisis teams, and crisis centers.
- **IMD Amendments:** Clarifies that the IMD payment prohibition on long-term residential care does not apply to short-term crisis stabilization services run by community-based programs. Requires CMS to issue guidance and collect data on crisis stabilization programs, including length of stay, facility size, diversion from law enforcement and incarceration, and other relevant categories.
- **Excellence in Mental Health and Addiction Treatment Expansion Act (H.R. 4323 & S. 2069):** Expands the existing 10 state Medicaid certified community behavioral health clinic (CCBHC) demonstration to permit any state to authorize 988/CCBHC partnerships. Participating CCBHCs must help dispatch mobile crisis teams and administer crisis stabilization programs in states and counties where they operate.

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## FREQUENTLY ASKED QUESTIONS

### **What is 988?**

Going live in July 2022, 988 will be a new three-digit emergency calling code for behavioral health crises, accessible 24/7, anywhere in the United States.

### **What services will 988 provide to callers and texters in crisis?**

The goal is for those who call 988 to get assistance on a wide range of issues, including suicide and other mental health crisis counseling and stabilization, substance use services, family and child conflicts, school-based crisis interventions and resource connection and referrals. Unfortunately, at this point, available services will be dependent on the ability of each state or local jurisdiction to implement this infrastructure.

### **How will this transition help our communities?**

Right now, Americans are forced to call the police for immediate assistance with a mental health or substance use crisis, and a 2021 poll found that the majority of Americans are afraid of what might happen to them or their loved ones if they call 911 during a mental health emergency. These fears aren't unfounded—a police encounter with a civilian is 16 times more likely to result in that person's death if they have an untreated mental illness, and that rate is even higher for people of color. 988 will change the trajectory of how we respond to those in crisis.

### **What are states doing to prepare for 988?**

States are doing their best to prepare for 988 but many have said they are scrambling to implement the infrastructure to provide services in time for the July 2022 deadline and do not have the resources to implement a reliable response for 988 callers. As of January 2022, only four states have been able to pass a bill with funding, and many have made no legislative progress at all.

### **Why do we need to invest in 988?**

To be truly effective, crisis services must operate in a linked fashion with someone to call, someone to come and somewhere to go. For example, if you have a medical emergency, such as a heart attack, you have someone to call—911. Then there's someone to come—an ambulance with paramedics. Finally, there's somewhere to go—a hospital or emergency room where you can get additional care. To achieve improved health outcomes and reduce system costs, crisis services must also have a 3-part approach, including the 988 hotline, mobile crisis teams with mental health specialists trained for the job, and crisis centers. Unfortunately, available 988 services across the United States vary dramatically at the local and state levels depending on their ability to fund and implement crisis care infrastructure.

### **What is the 988 Implementation Act?**

This bill provides federal support, guidance and funding for states to enact 988 and crisis services, to ensure that it's not just a number you call but a resource to connect you to services on the ground, including trained first responders and crisis centers when needed.

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Someone to Call. Someone to Come. Somewhere to Go.

## SUPPORTING ORGANIZATIONS

The 988 Implementation Act is supported by over 100 organizations including mental health advocates, clinical and medical professionals, law enforcement, state and local government officials, civil rights advocates, veterans and more.

1. American Academy of Child and Adolescent Psychiatry
2. American Academy of Community Psychiatry (AACP)
3. American Association of Emergency Psychiatry (AAEP)
4. American Association for Marriage and Family Therapy (AAMFT)
5. American Association of Suicidology
6. American Association on Health and Disability
7. American Association for Psychoanalysis in Clinical Social Work
8. **American Counseling Association**
9. **American College Health Association (ACHA)**
10. American College of Physicians (ACP)
11. **American Foundation for Suicide Prevention (AFSP)**
12. American Group Psychotherapy Association
13. American Mental Health Counselors Association
14. American Occupational Therapy Association
15. **American Paramedic Association**
16. **American Psychiatric Association (APA)**
17. American Psychiatric Nurses Association
18. **American Psychological Association**
19. **American Society of Addiction Medicine (ASAM)**
20. Anxiety and Depression Association of America
21. Association for Ambulatory Behavioral Healthcare
22. Behavioral Health Foundation
23. Behavioral Health Link
24. California Medical Association
25. California State Association of Counties
26. California State Association of Psychiatrists
27. Centerstone
28. Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)
29. **CIT International**
30. Clinical Social Work Association
31. College of Psychiatric and Neurologic Pharmacists (CPNP)
32. Confederation of Independent Psychoanalytic Societies
33. Connections Health Solutions
34. Crisis Residential Association
35. Crisis Text Line
36. Depression and Bipolar Support Alliance (DBSA)
37. Detroit Disability Power
38. Drug Policy Alliance
39. Eating Disorders Coalition for Research, Policy & Action
40. Education Development Center

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## SUPPORTING ORGANIZATIONS

41. Emergency Nurses Association
42. Fountain House
43. GLMA: Health Professionals Advancing LGBTQ Equality
44. Global Alliance for Behavioral Health and Social Justice
45. **Human Rights Campaign**
46. Inseparable
47. **International Association of Emergency Medical Services Chiefs (IAEMSC)**
48. International OCD Foundation
49. International Society for Psychiatric Mental Health Nurses
50. Jewish Federations of North America (JFNA)
51. Latino Mental Health Advocacy Concilio
52. **League of United Latin American Citizens (LULAC)**
53. Legal Action Center (LAC)
54. Maternal Mental Health Leadership Alliance
55. Meadows Mental Health Institute
56. **Mental Health America (MHA)**
57. **Mental Health Liaison Group (MHLG)**
58. NAADAC, the Association for Addiction Professionals
59. **National Alliance for Mental Illness (NAMI)**
60. National Alliance to Advance Adolescent Health
61. National Association for Behavioral Healthcare (NABH)
62. **National Association for Rural Mental Health (NARMH)**
63. National Association of Addiction Treatment Providers (NAATP)
64. **National Association of Counties (NACo)**
65. National Association of County Behavioral Health and Developmental Disability Directors
66. National Association of Pediatric Nurse Practitioners
67. **National Association of Peer Supporters (N.A.P.S.)**
68. **National Association of Social Workers (NASW)**
69. **National Association of State Alcohol and Drug Abuse Directors (NASADAD)**
70. **National Association of State Directors of Developmental Disabilities Services**
71. **National Association of State Mental Health Program Directors (NASMHPD)**
72. National Board for Certified Counselors (NBCC)
73. National Co-Responder Consortium
74. **National Council for Mental Wellbeing**
75. **National Criminal Justice Association**
76. National Eating Disorders Association
77. **National Education Association (NEA)**
78. National EMS Management Association
79. National Federation of Families
80. National League for Nursing
81. Network of Jewish Human Service Agencies
82. **Police, Treatment, and Community Collaborative (PTACC)**
83. Postpartum Support International
84. RI International



# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## SUPPORTING ORGANIZATIONS

85. REDC Consortium
86. Sandy Hook Promise
87. Schizophrenia and Psychosis Action Alliance
88. SMART Recovery
89. Sibling Leadership Network
90. Technical Assistance Collaborative (TAC)
91. **Trust for America's Health**
92. **The American Legion**
93. The American Network of Community Options & Resources (ANCOR)
94. The Arc Michigan
95. The Arc Community Advocates
96. **The Center for Law and Social Policy (CLASP)**
97. The Jed Foundation
98. **The Kennedy Forum**
99. The Miles Hall Foundation
100. The Steinberg Institute
101. **The Trevor Project**
102. **The Vera Institute of Justice**
103. Treatment Advocacy Center
104. Treatment Alternatives for Safe Communities (TASC)
105. **Vibrant Emotional Health**
106. **Wounded Warrior Project**

# THE 988 IMPLEMENTATION ACT

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## ENDORISING QUOTES

Wounded Warrior Project's most recent Annual Warrior Survey indicated that nearly one in four post-9/11 warriors who responded had suicidal thoughts in the past 12 months. The need for immediate access to high-quality mental health support is clear. The 9-8-8 Implementation Act stands to ensure that care is more readily available in times of crisis, and Wounded Warrior Project supports this important step to help prevent suicide.

**Jose Ramos**, *Vice President of Government and Community Relations*, **Wounded Warrior Project**

We know that 988 can be a gateway to ensure people in mental health crisis receive a mental health response. NAMI is deeply grateful to Reps. Cárdenas, Beyer, Blunt Rochester, Fitzpatrick, Moulton, Napolitano and Raskin for their leadership in introducing the 988 Implementation Act. This bill would provide communities with much-needed resources to make this vision a reality by supporting 24/7 local crisis call centers, mobile crisis response, and crisis stabilization facilities – someone to talk to, someone to respond and somewhere to go. It would also create national standards for crisis care – setting the stage for equitable response across the country. We call for the swift passage of this critical legislation.

**National Alliance on Mental Illness (NAMI)**

9-8-8 is on track to support millions of people each year in times of mental health crisis, and we must seize on the opportunity of its implementation to transform our nation's crisis response system and invest in specialized services for marginalized communities, including LGBTQ youth. The 9-8-8 Implementation Act will help change the narrative around crisis care in the United States and improve outcomes for LGBTQ youth and their families by expanding access to non-punitive, humane responses to mental and behavioral health crises. Thank you to Congressman Cárdenas and original sponsors for championing this important legislation and for amplifying the unique mental health challenges faced by LGBTQ youth and people of color.

**Preston Mitchum (he/him)**, *Director of Advocacy and Government Affairs*, **The Trevor Project**

Effectively implementing 988 is vital to building a comprehensive behavioral and mental health crisis response system in our country to confront the national mental health crisis. The 988 Implementation Act provides critical investments to the launch the new three-digit hotline and build infrastructure for call centers, mobile crisis teams, and stabilization facilities, support the behavioral health workforce, and provide necessary resources to expand and enhance crisis response across the country. AFSP is grateful to Representatives Cárdenas, Blunt Rochester, Raskin, Fitzpatrick, Napolitano, Moulton, Beyer, and Matsui for their leadership on this important bill.

**Laurel Stine, J.D., M.A.**, *Senior Vice President for Public Policy*, **American Foundation for Suicide Prevention**

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## ENDORISING QUOTES

The addiction and overdose crisis continues to ravage communities and families across this nation, and overdose deaths have surged to all-time highs. The 9-8-8 Implementation Act would help launch a comprehensive mental health and substance use crisis response system that can connect individuals with evidence-based addiction treatment and support. It will save lives. ASAM thanks Representative Cárdenas and all the bill's sponsors for their leadership on this critical legislation.

**Dr. Brian Hurley**, *President-Elect*, **the American Society of Addiction Medicine (ASAM)**.

The Police, Treatment, and Community Collaborative (PTACC), the national voice of the field of deflection, fully supports the 988 Implementation Act as part of our nation's path forward to better respond to people with mental health challenges. We know from research that one-third of people with severe mental illness have their first contact with mental health treatment through an encounter with law enforcement, despite mental health not being causal to crime. This is exactly where this 988 legislation will do some very good work to create much needed connections to care that, if implemented in communities, when possible, bypasses police contact for a clinical response instead. This bill will help develop community services, reduce unnecessary interactions with the justice system, and bring in peers with lived experience. Together, these will make our communities safer and get everybody to a better place.

**Police, Treatment, and Community Collaborative (PTACC)**

LULAC strongly supports the 988 Implementation Act. This measure will provide much-needed funding and community-building approaches to improve vital infrastructure for mental health services. A stronger safety net is needed to support and sustain underserved communities across the country. We cannot overstate the need for expanding access to mental health services for all. Latinos are more likely to receive mental health care at inadequately equipped primary care facilities. These centers lack the needed resources to address their most severe mental health challenges. This bill by Rep. Tony Cardenas draws attention to the vicious cycle when people needing care are instead confronted by law enforcement, leading to incarceration through the judicial system, or death. We can do better, and the 988 Implementation Act is an important step forward.

**Sindy Benavides**, *Chief Executive Officer*, **the League of United Latin American Citizens (LULAC)**

9-8-8 will increase access to the life-saving resources and support provided by the National Suicide Prevention Lifeline and associated crisis centers. This comprehensive legislation provides the important infrastructure framework to ensure crisis centers have the resources needed to provide emotional support by call, chat, and text to individuals in crisis anywhere in the United States.

**Kimberly Williams**, *President and CEO of Vibrant Emotional Health*, **the Administrators of the Lifeline**

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## ENDORISING QUOTES

For over 50 years, law enforcement, via 911, has been the default response for Americans experiencing a behavioral health emergency—greatly contributing to the criminalization of mental illness in this country. The 988 Implementation Act will finally change that narrative by ushering in a more compassionate emergency crisis response system designed to stabilize people and connect them to care. This is good for everyone.

**Patrick J. Kennedy**, *former U.S. Rep. and founder of The Kennedy Forum*

The 988 Implementation Act would make significant and necessary investments to scale local crisis services and ensure that those who call 988 can readily access appropriate and timely care. These important investments would also reduce costly emergency department boarding and divert patients with severe mental disorders away from the criminal justice system and into appropriate treatment and care. It is essential that communities have the support necessary to serve those experiencing mental health crises after the 988 hotline goes live this July. APA is proud to endorse this important and much needed legislation.

**American Psychiatric Association**

This groundbreaking bill advances three of Mental Health America’s most important goals: deflecting people in crisis to health care and not law enforcement, building community resources and well-being, and comprehensively addressing mental health and substance use crisis,” said Mental Health America, . “It will help to ensure that people experiencing a behavioral health crisis get a community-based health response and are deflected away from unnecessary involvement with the criminal justice systems. It provides resources to help communities to build out their own local comprehensive systems, and requires all public and private insurance programs to cover crisis services.

**Schroeder Stribling**, *President and CEO, Mental Health America*

This legislation elevates the focus and importance needed to implement 988 for phone, text and chat services. Crisis Text Line supports this bipartisan bill to provide resources and guidance for states implementing this historic change in accessing the continuum of crisis care.

**Courtney Gallo Hunter**, *VP of Public Policy and Advocacy, Crisis Text Line*

An effective, widely accessible mental health crisis system that supports the 988 National Suicide Prevention Lifeline will help connect residents to lifesaving services and strengthen the behavioral health care continuum,” said National Association of Counties Executive Director Matthew Chase. “We applaud Representative Cardenas for introducing this important legislation and call on Congress to swiftly pass the bill.

**National Association of Counties**

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## ENDORISING QUOTES

The 988 Implementation Act is a comprehensive, visionary bill that moves our nation closer to fulfilling the promise of 988 ensuring that anyone, anywhere, anytime – who is experiencing a mental health emergency - can receive the care they need. While 988 is slated to launch this summer, it will take time, immense resources, and leadership to adequately resource the service so that it meets the needs of communities across the country. That's why we at Centerstone applaud the bipartisan team advancing this bill in their leadership and vision to move our nation closer to meeting that promise, a promise of 24/7 equitable and effective emergency mental health care access, for all Americans.

**David C. Guth, Jr., CEO, Centerstone**

RI International is proud to support the introduction of the 988 Implementation Act and applauds Congressman Cárdenas, Congressman Fitzpatrick, Congresswoman Blunt Rochester, Congresswoman Matsui, Congresswoman Napolitano, Congressman Moulton, Congressman Beyer and Congressman Raskin for their leadership. This bill lays the groundwork to stand up the mental health and substance use crisis care continuum across the country, and with the rapidly approaching July 2022 implementation deadline for the three-digit "988" dialing code for the National Suicide Prevention Lifeline, the 988 Implementation Act is a crucial step to ensuring we are ready to realize the promise of 988

**David Covington, LPC, MBA, President and CEO, RI International**

We are very supportive of the 988 Implementation Act as this legislation comprehensively supports the continued development of the crisis continuum across the country as well as enhancing sustainability of these critical services for states and territories.

**Dr. Brian Hepburn, Executive Director, National Association of State Mental Health Program Directors**

Implementing 9-8-8 will require sustained investment to expand the capacity of mental health and substance use crisis response systems. Dedicated support must be made available every step of the way – from the national lifeline and regional and local call centers to mobile crisis response programs and community-based organizations offering on-the-ground treatment. We applaud this effort to bolster our nation's crisis response infrastructure and expand proven community-based mental health and substance use services so anyone calling 9-8-8 has someone to talk to, someone to come to them and somewhere to go.

**Chuck Ingolia, President and CEO, National Council for Mental Wellbeing**



# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## ENDORISING QUOTES

Crisis Intervention Team (CIT) programs are dedicated to reforming crisis response systems to make them the most compassionate, most effective, and the least intrusive in the lives of persons who experience mental health crises. CIT International fully supports the 9-8-8 National Suicide Prevention Lifeline Implementation Act, which will help build an infrastructure that allows an option for persons in crises to receive help directly from mental healthcare services. This in turn will begin to reduce the burden that has been placed on law enforcement to respond to all crisis calls for services, whether warranted or not. Law enforcement will always have a role to play in any crisis response system; however, this act will begin to allow law enforcement services to fulfill the appropriate role of support and only when warranted.

**CIT International**

The Sibling Leadership Network provides siblings of individuals with disabilities the information, support, and tools to advocate with their brothers and sisters and to promote the issues important to them and their entire families. We applaud the work of Congressman Cárdenas and the 988 Implementation Act, which will help provide individuals with disabilities necessary services during a crisis. It is not enough to establish a 988 phone number to be called for those in crisis, communities across the country need resources and support to implement culturally competent and compassionate crisis care. SLN is proud to endorse this vital legislation.

**Sibling Leadership Network**

As the voice for college student health and wellness, representing more than 700 institutions and their 7,500 health and wellness and higher education professionals, ACHA applauds Congressman Cárdenas for recognizing the need for comprehensive support and guidance in order for states to enact their 988 systems with the full continuum of crisis services. When dealing with crisis services, ACHA members know how important a tool such as this can be in addressing the risk of suicide on our college campuses, which is tragically the second leading cause of death for people between ages 10 and 34.

**James Wilkinson, CEO, American College Health Association**

**SOCIAL MEDIA**

**TOOLKIT**

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## SUGGESTED SOCIAL MEDIA POSTS

### Hashtags

#Fund988  
#988Implementation  
#RethinkCrisisCare  
#SomeoneToCall, #SomeoneToCome, #SomewhereToGo

### Accounts to tag

@RepCardenas	@RepMoulton	@RepRaskin
@DorisMatsui	@RepBrianFitz	@RepDonBeyer
@gracenapolitano	@RepLBR	

### Graphics

For graphics, click [here](#).

### General

- “When Americans begin calling 988 this July, real help must be available. The 988 Implementation Act will ensure that when someone calls for help, they’ll find the support they need, whether it’s someone to call, someone to come or somewhere to go.”
- “When 988 goes into effect this July, we’ll have a historic opportunity to change the way mental health and substance crises are addressed in America.

The 988 Implementation Act will ensure that it’s not just a number you call, but a resource to connect you to services on the ground.”

- “When you call 911, an ambulance with EMTs and paramedics arrive, and they take you to the hospital if needed.

When you call 988, there must be more than just someone to talk to. The 988 Implementation Act will ensure you get the help you need with resources on the ground.”

- “In 2020, Congress approved 988 as a 24/7 nationwide calling code for mental health emergencies.

Dedicating a number for people in crisis won’t help if we fail to provide them with resources on the ground. The 988 Implementation ensures Americans can access services when they need them.”

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## SUGGESTED SOCIAL MEDIA POSTS

### Criminal Justice Reform & Law Enforcement

- “Law enforcement officers agree that they're often not the best equipped to respond to a mental health emergency. The 988 Implementation Act provides the funding and resources needed to ensure mental health professionals are the first on the scene.”
- “80% of Americans believe mental health professionals should be the primary first responders for a mental health crisis. If we #Fund988, we'll make sure that happens.”
- “Let's be clear: Being mentally ill is not a crime. Being suicidal is not a crime. Having a substance use disorder is not a crime.

We need to stop criminalizing mental illness and get people in crisis the help they need. The 988 Implementation Act does that and more.”

- “When armed law enforcement officers respond to a mental health emergency, the person in crisis is 16 times more likely to be killed.

We can avoid unjust tragedies by funding crisis response teams so they can be the first at the scene.”

- “We spend billions when we criminalize mental illness.

With the 988 Implementation Act, we can get people in the crisis the help they need instead of putting them in handcuffs.”

### States

- “Americans shouldn't have to rely on law enforcement for mental health emergencies.

The 988 Implementation Act will help states establish crisis response systems for a timely, 24-7 response to callers in crisis.”

- “States shouldn't have to struggle to implement 988 without federal support.

The 988 Implementation Act gives states the resources and funding needed to get people in crisis the emergency services they need when they call.”

- “When Americans begin dialing 988 this summer, we have an opportunity to make sure real-time help and services are available to anyone in need. The #988Implementation Act will give states the funding to ensure this transformation is fully realized.”

# THE 988 IMPLEMENTATION ACT

Someone to Call. Someone to Come. Somewhere to Go.

## SUGGESTED SOCIAL MEDIA POSTS

### Overdose prevention and substance use services

- “More than 100,000 people have died in America from overdoses that might have been prevented..

The 988 Implementation Act will support services for people experiencing a substance related crisis so that they get the help they need.”

- “People shouldn’t be worried about calling for help if they are experiencing or witnessing an overdose.

The 988 Implementation Act will save lives by ensuring that trained professionals are ready to respond during a mental health or substance-related crisis”

### Veterans

- “The 988 Implementation Act will improve access and clarity in times of crisis for Veterans, which is why it is supported by the Wounded Warrior Project and the American Legion.”
- “Wounded Warrior Project’s annual survey found that nearly 1 in 4 post-9/11 veterans have had suicidal thoughts in the past 12 months.

The 988 Implementation Act ensures that care is more readily available in times of crisis for our veterans.”



## Contact Us

2438 Rayburn House Office Building  
Washington, DC 20515  
phone: (202) 225-6131

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