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The 988 Suicide and Crisis Lifeline Legislative Report for New York State

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The Commissioner of the Office of Mental Health (OMH), in consultation with the Commissioner of the Office of Addiction Services and Supports (OASAS), hereby presents this report which details the progress of the 988 Suicide and Crisis Lifeline in New York State. This report is required by Part EE of Chapter 57 of the Laws of 2022.

I. Background and Context

The 988 Suicide and Crisis Lifeline, formerly known as the National Suicide Prevention Lifeline, officially launched across the nation, in July 2022. The 988 Lifeline offers an accessible means of communication for millions of people experiencing emotional distress while de-stigmatizing seeking mental health support. Since the launch, New York State is a national leader in providing 988 Lifeline services.

As New York State concludes year three of 988, Contact Centers continue to meet the growing monthly demand from New Yorkers seeking support across the state. The 988 Lifeline is more than a suicide hotline—it provides an immediate connection to local crisis counselors specifically trained to assess and provide support for people experiencing emotional distress, mental health or substance use crises, and/or suicidal ideation. Likewise, the 988 Lifeline is a mechanism for individuals concerned for a friend or loved one in crisis. The 988 counselor will listen to the concerned individual, offer strategies on how to care for themselves while supporting someone in need, and provide support on where to access various referrals and resources in their community to assist their loved one through the crisis.

II. New York State 988 Contact Center Updates

In New York State, there are 14 Contact Centers operating 24/7 that are available to serve all 62 counties. Contact Centers have successfully been able to hire, train, and retain crisis counselors to meet monthly minimum key performance indicators and the demand of New Yorkers seeking crisis support. As call volume increases, Contact Centers work with OMH and the Lifeline's administrator Vibrant Emotional Health to ensure that proper protocols and workforce management are in place to meet the key performance indicators. New York State has in-state backup coverage for 51 of its 62 counties as seen in Figure 2. In the 11 counties lacking in-state backup coverage, 95.2 percent of calls were still answered in New York State, demonstrating the commitment to answering calls locally.

i. New York State Coverage Maps

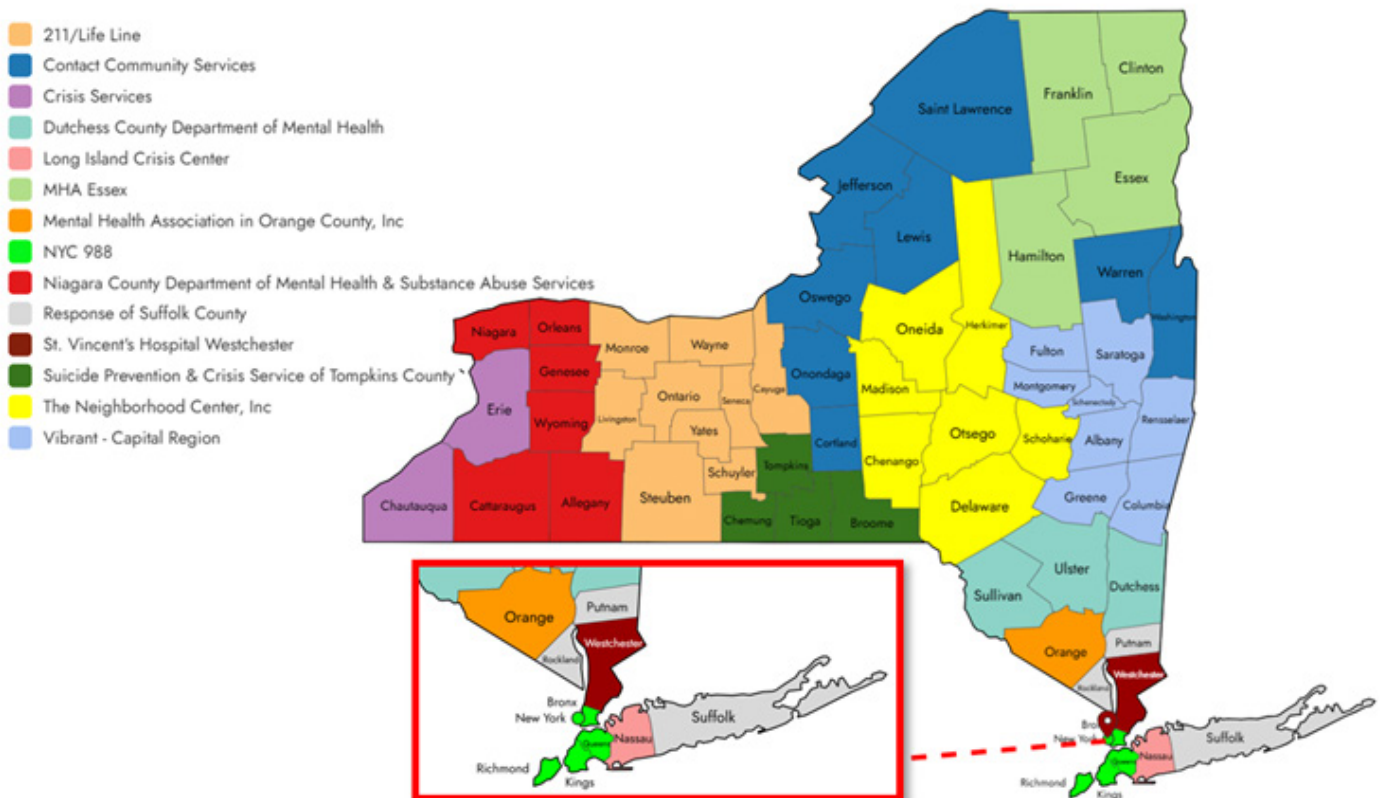


Figure 1 Contact Center County Coverage Map

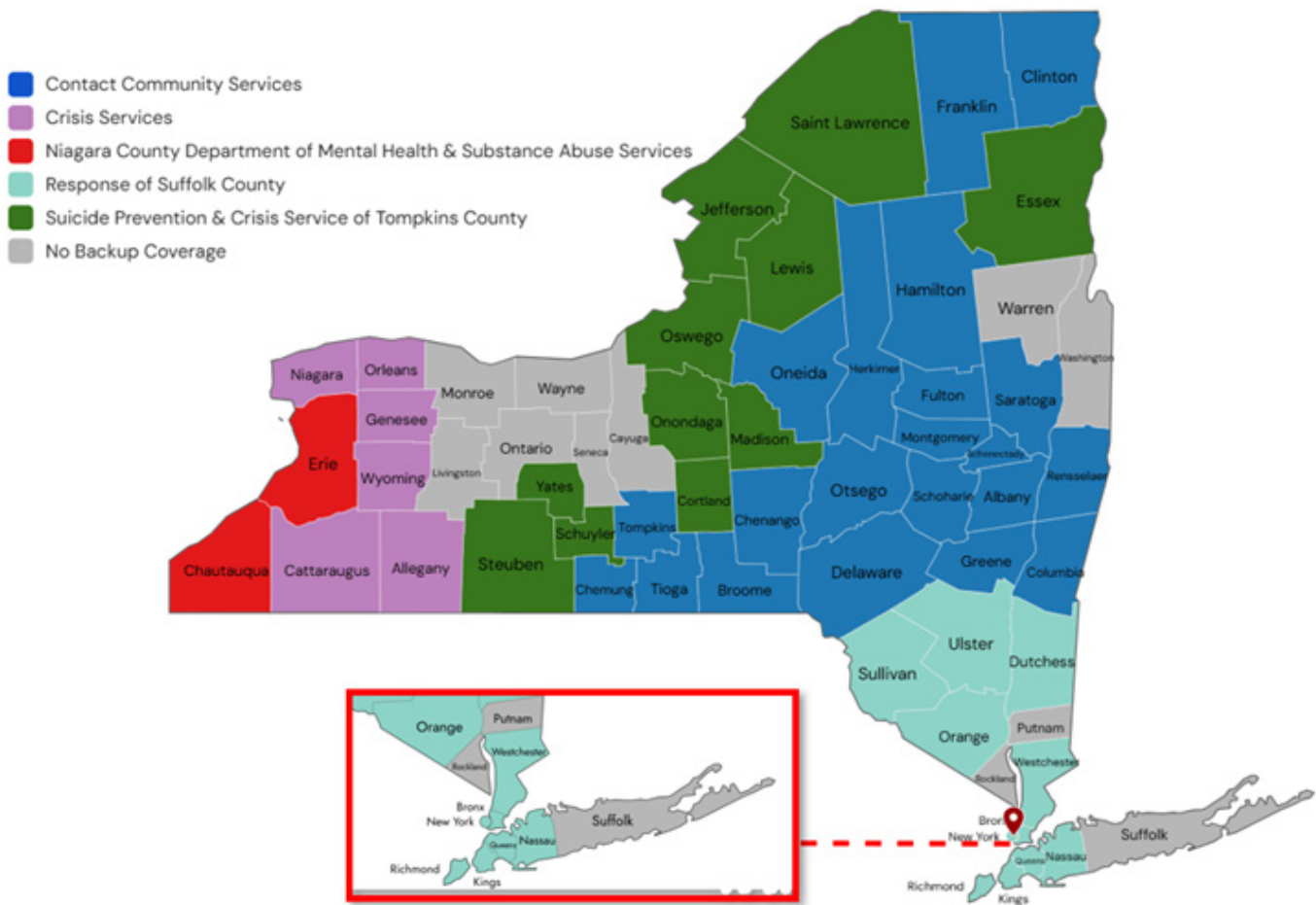


Figure 2 Contact Center Backup County Coverage Map

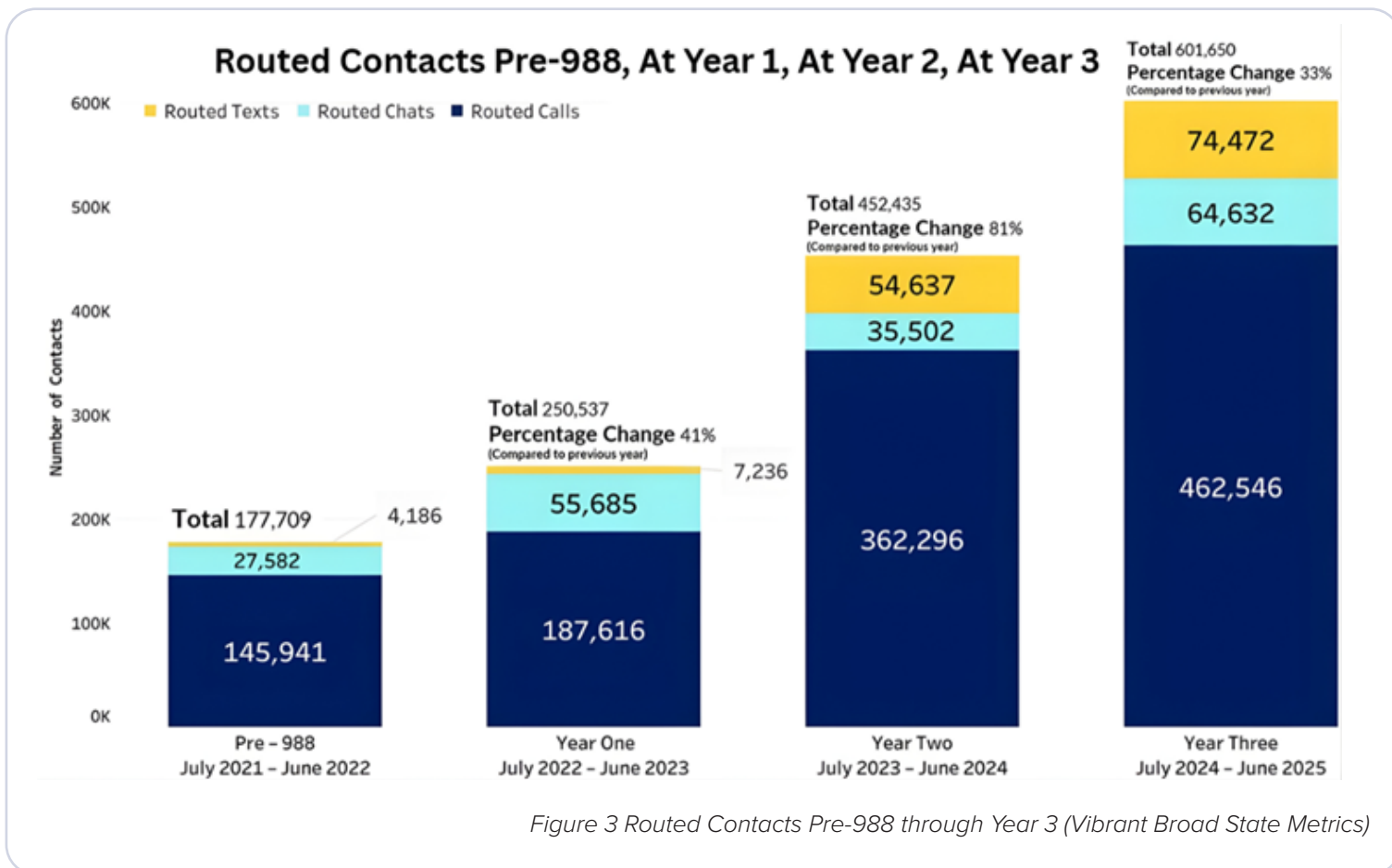
III. Data Collection and Metrics for New York State 988 Contact Centers

New York State 988 Contact Centers work closely with the OMH Bureau of Crisis, Emergency, and Stabilization Initiatives and the OMH Office of Population Health and Evaluation to submit monthly data using the REDCap self-report survey on the following metrics:

- Demographics (gender, age, race/ethnicity, language, military status)
- Primary presenting concern
- Suicidal ideation and experience
- Homicidal ideation and experience
- Imminent risk/emergency dispatch
- Third party imminent risk
- Outcomes/ Referrals and Transfers
- Follow-up
- How they heard about 988
- Workforce Development

In addition to the REDCap self-report survey, New York State receives data directly from the administrator of the 988 Lifeline through the Okta Exchange Database. These data report the call, chat, and text volume in New York State as well as answer rates, speed to answer, and Contact Center-specific data that are not publicly available such as calls answered from each county and various quality assurance metrics of 988 contacts. The data also report the volume of callers from New York State connecting directly with the national specialty subnetwork lines, the Veteran's Crisis Line and the dedicated Spanish line.

ii. Volume Trends Over Time



New York State received a total of 1,304,622 routed contacts between July 2022 (year one of 988) to the end of June 2025 (year three of 988). Routed contacts are a call, chat, or text that is sent to a Contact Center to connect with a crisis counselor after the help seeker listens to the welcome greeting or completes the pre-chat or pre-text survey. As demonstrated in Figure 3, calls represented 78 percent of the total volume, followed by chats at 12 percent, and texts at 9 percent. The average annual growth rate is 52 percent, with the largest growth occurring from year one to year two at 81 percent. This growth can be attributed to the transition of NYC Well to NYC 988, which significantly increased the volume of contacts originating in New York City. Throughout the evolution of 988 over the years, public awareness of this resource has gained traction in communities. From year one (July 2023 – June 2024) to year three (July 2024 – June 2025), a 33 percent growth aligns with the increased awareness from the '988: We Hear You' community education and awareness campaign, which launched statewide in September 2024.

iii. Year 3 Utilization of 988 Lifeline and Key Performance Indicators

Key Performance Indicators	July 2023 – June 2024	July 2024 – June 2025	Percent Change
Routed Calls	386,377	484,810	25%
Answered Calls	346,422	438,990	27%
Average In-State Answer Rate	90%	91%	1%
Average Speed to Answer Calls	40 seconds	36 seconds	-10%
Average Talk Time	15 minutes, 10 seconds	14 minutes, 30 seconds	-4%
Average Abandonment Rate	10%	9%	-1%
Routed to National Backup	9,147 (2.4% of calls routed)	11,059 (2.3% of calls routed)	-0.1%

Table 1 Difference in Utilization of 988 from Y2 to Y3 per Vibrant Exchange

New York State 988 Contact Centers continue to experience significant call volume increases and have improved in every key performance indicator for year three with the exception of average speed to answer. With higher call volume, a slower average speed of answering is expected. There were approximately 92,000 more answered calls in year three than in year two—all while the answer rate continued to increase. The average speed to answer continues to trend in a positive direction with a 10 percent decrease in time spent waiting for calls to connect to a trained crisis counselor locally. The New York State average talk time is aligned with the national average of 13 minutes and 48 seconds. As the 988 Contact Centers strengthen their workforce and enhance their capacity to respond to increasing call volumes, the abandonment rate of calls and the percentage of calls routed to National Backup steadily decreased.

iv. Year 3 REDCap Data and Demographics

The REDCap survey gathers aggregate demographic information, reasons for calling, and outcome data during the reporting year.

REDCap Metrics	July 2023 - June 2024	July 2024 - June 2025
Resolved on Call	172,886	190,723
Non-transactional Calls	101,842	139,579
Referrals to Community Resources	15,858	17,214
Referrals to Outpatient Services	8,137	9,048
Transferred to 911	339	469

Table 2 Comparison of REDCap Metrics between Year 2 and Year 3

New York State 988 Contact Centers feature dedicated crisis counselors who are able to make appropriate referrals to outpatient services and community resources, thereby resolving calls with the least restrictive interventions. This helps avoid the use of 911 or law enforcement, which poses concerns for advocates seeking to minimize this type of involvement in behavioral health crisis response. Since 988 began in 2022, fewer than one percent of calls require 911 or law enforcement involvement annually.

As awareness of 988 increases, so have the number of calls that are non-transactional in nature or do not involve assisting individuals in emotional distress or seeking support for a mental health or substance use concern. Non-transactional calls include wrong numbers, prank calls, hang ups, sexually explicit calls or others that do not involve helping individuals in distress.

Top Reasons for Contacting 988 (July 2022 — June 2025)



Figure 4 Top Reasons for Contacting 988 by Year via REDCap

The 988 Lifeline is a voluntary and anonymous resource; therefore, Contact Centers are only capable of reporting the demographic information that is voluntarily shared at the time of contact.

Race (July 2024 — June 2025)

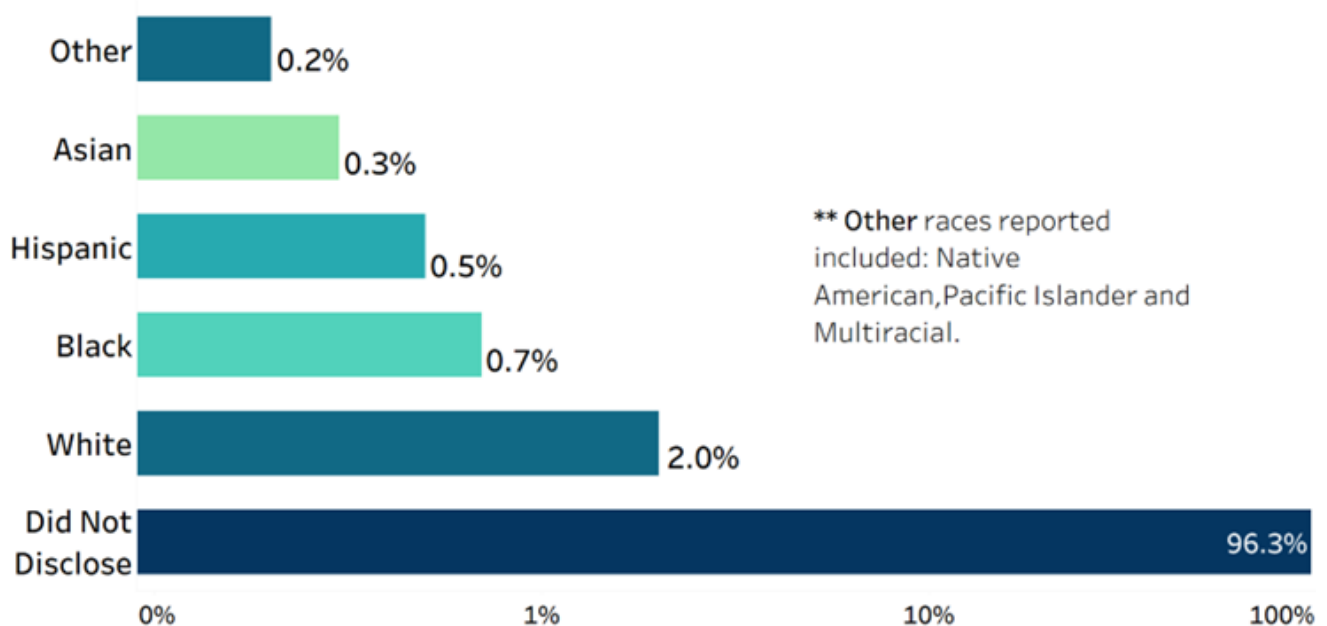


Figure 5 Race Demographic for 988 Calls via REDCap

Age Group Distribution (July 2022 — June 2025)

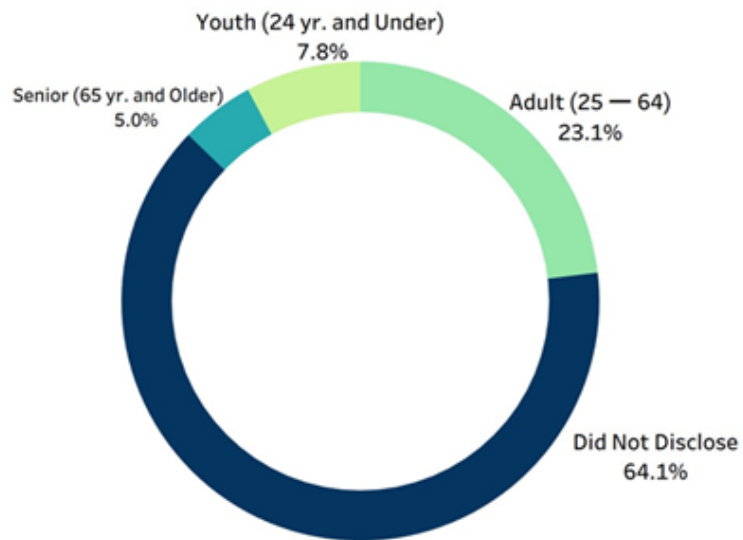


Figure 6 Age Distribution for 988 Calls via REDCap

Gender Distribution (July 2022 — June 2025)

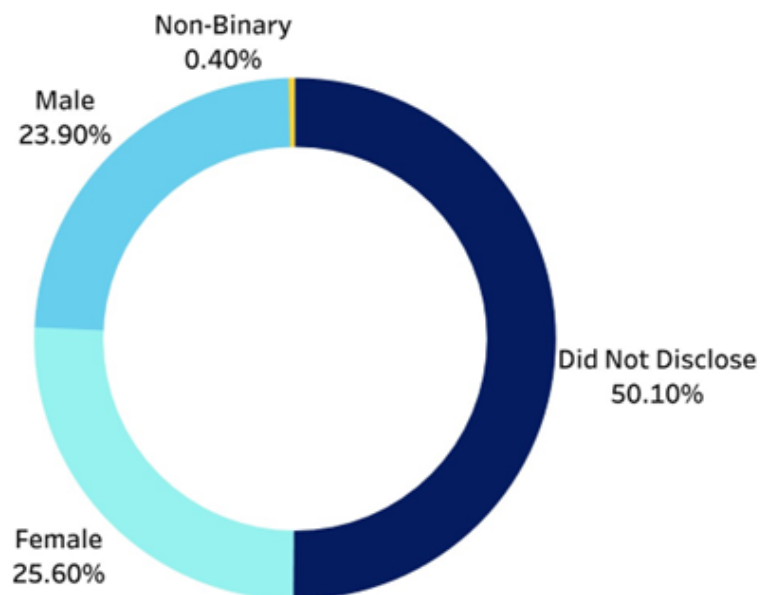
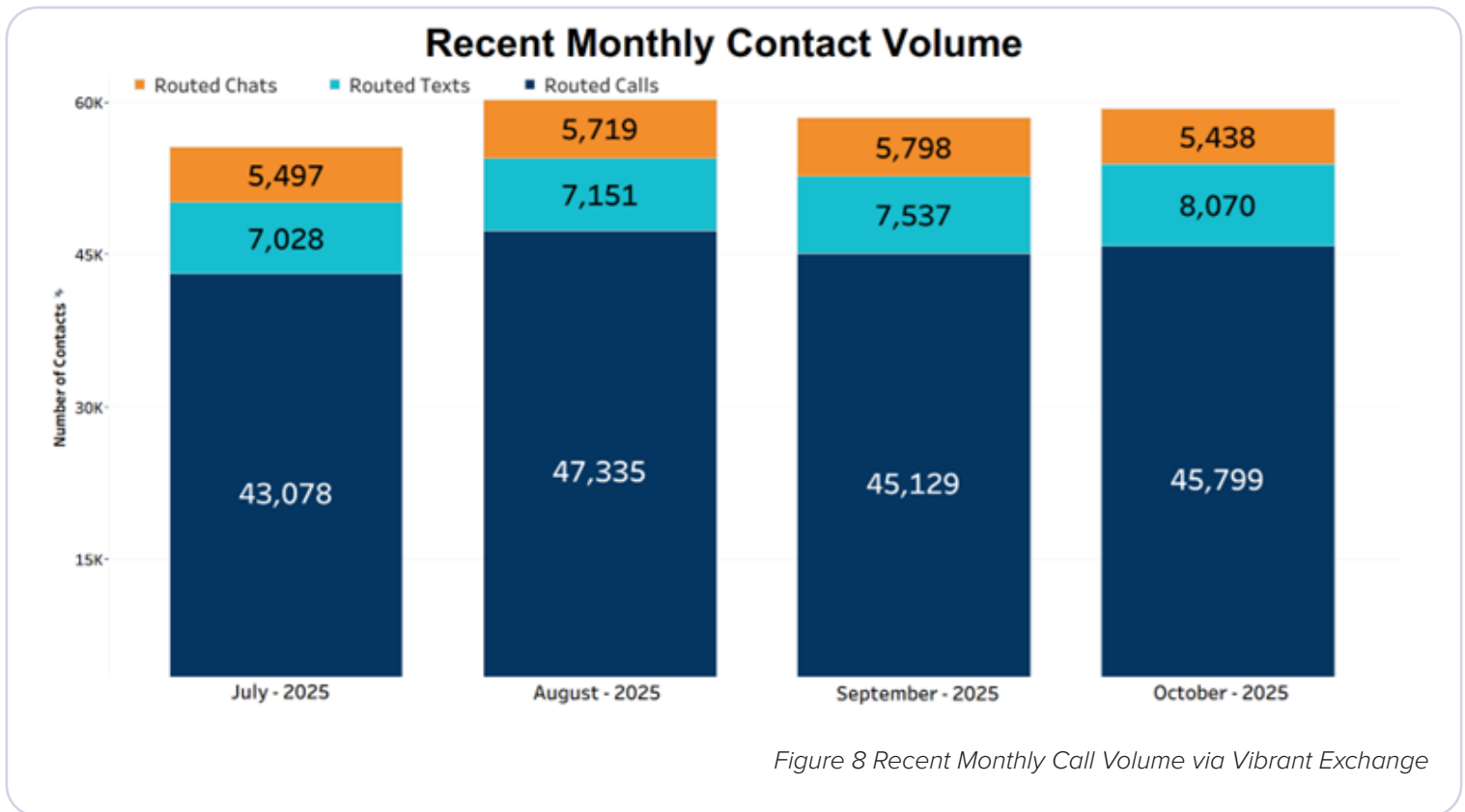


Figure 7 Gender Distribution for 988 Calls via REDCap

v. Most Recently Reported Data (July – October 2025)



New York State has received more than 230,000 contacts in the first four months of 988’s fourth year. This includes 181,341 calls, 29,786 texts and 22,452 chats.

In 2025, an average of 5,729 calls from New Yorkers were routed to the LGBTQ+ youth 988 ‘press 3’ option. On July 17, 2025, this option was eliminated by the Substance Abuse and Mental Health Services Administration (SAMHSA). Despite this change, 988 Contact Centers are continuing to provide support to LGBTQ+ youth and young adults. When requested callers can be referred to the Trevor Project for LGBTQ+ specific crisis care.

Please note: Prior to publication of this report, on April 21, 2026, U.S. Secretary of Health and Human Services Robert F. Kennedy Jr. testified before Congress that the Department is “working on getting [the LGBTQ+ line] up now” indicating that they will be relaunching the specialized 988 service after its discontinuation in 2025. New York State is actively working to ensure that continued and equitable access to 988 services for this population exists.

IV. Mobile Crisis

An effective behavioral health crisis response system includes the capacity to respond to, de-escalate, and follow-up on crises. OMH continues to develop and enhance New York’s crisis response system across the continuum of care, including crisis residential programs, crisis stabilization centers, comprehensive psychiatric emergency programs or ‘CPEPs,’ and mobile crisis services. An integral part of strengthening the crisis response system is strengthening the partnership between 988 and mobile crisis. Increased coordination between 988 and mobile crisis helps efficiency by minimizing transfers and supporting timely dispatch of mobile crisis services. Thus, 988

is working towards becoming a single point of access for mobile crisis referrals. Call centers accounted for 10,529 mobile crisis referrals between July 2024 and June 2025, according to data provided by mobile crisis providers, making them the largest referral source accounting for more than 20 percent of referrals. Approximately 91% of 988 referrals to mobile crisis are attributed to New York City. Mobile crisis and 988 continue to explore pathways to enhance the integration of 988 and Mobile Crisis services throughout the rest of state.

Mobile crisis services are a critical part of the crisis service continuum as they divert individuals from unnecessary interactions with law enforcement and reduce excessive emergency room use and nonessential hospitalizations. In April 2024, OMH began collecting monthly data reports from the designated mobile crisis teams in New York State through a REDCap survey. OMH's Office of Population Health and Evaluation worked closely with the Bureau of Crisis, Emergency and Stabilization Initiatives to train all mobile crisis teams on the data collection methodology.

The mobile crisis specific data included in this report are reflective of the date range July 1, 2024 – June 30, 2025.

Fifty-two (52) designated mobile crisis providers were asked to complete the monthly data survey. The average survey response rate for the data included in this report is 83.9 percent. The number of individuals engaged by mobile crisis teams was 42,673. Mobile crisis teams coordinated transport of individuals to crisis intervention services or other behavioral health crisis services 450 times; of these responses, 241 were transported to crisis stabilization centers, 33 to crisis residences, and 176 to behavioral health treatment providers. Mobile crisis teams had a total of 8,718 responses that led to transport to an emergency department; of these, 3,790 transports were to a CPEP.

As reasonably ascertainable, mobile crisis providers report the age, gender, and ethnicity of individuals contacted, transported, or transferred by each mobile crisis team. Individuals aged 22 to 44 years old continue to represent the most frequently engaged group, accounting for 39.42 percent of all mobile crisis responses.

Age Group Distribution (July 2024 — June 2025)

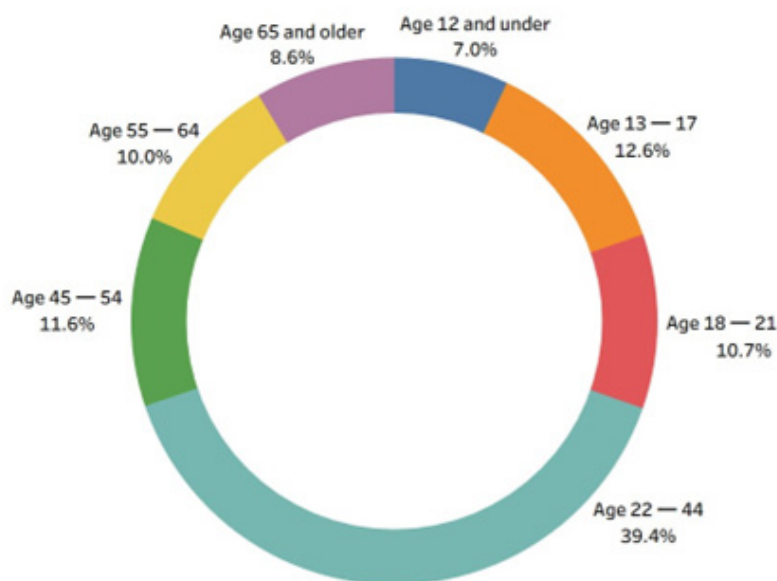


Figure 9 Age Distribution of Mobile Crisis Users in NYS

Females were the most frequently engaged gender accounting for 49.65 percent of mobile crisis responses, followed by males (48.98 percent), transgender individuals (0.99 percent), and non-binary individuals (0.38 percent).

Gender Distribution (July 2024 — June 2025)

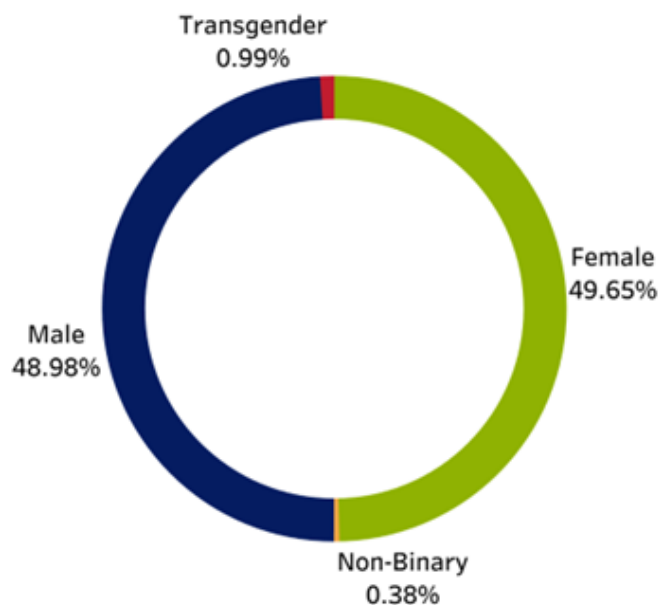


Figure 10 Gender Distribution of Mobile Crisis Users in New York State

By race and ethnicity, White, Non-Hispanic individuals were the most frequently engaged group accounting for 41.27 percent of mobile crisis responses. Black, non-Hispanic individuals accounted for 29.91 percent of responses, followed by Hispanic or Latino individuals (16.37 percent), other (6.31 percent), Multiracial (2.95 percent), Asian (2.51 percent), American Indian or Alaska Native (0.40 percent), and Native Hawaiian or Other Pacific Islander (0.28 percent).

Race (July 2024 — June 2025)

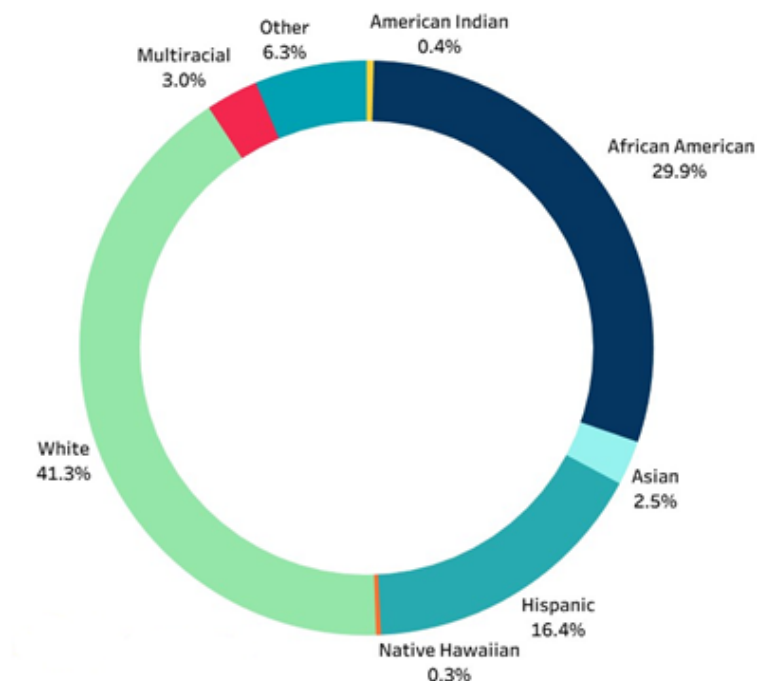


Figure 11 Race and Ethnicity Distribution of Mobile Crisis Users in New York State

Mobile crisis teams have demonstrated they are effective at de-escalating crises in the community without law enforcement when not deemed necessary. Of the 42,673 individuals engaged by mobile crisis teams, mobile crisis teams requested law enforcement response 4,273 times. Less than 1 percent of mobile crisis responses (61) resulted in a transfer to the custody of law enforcement.

Less than 1 Percent of Mobile Crisis Responses Resulted in a Transfer to the Custody of Law Enforcement

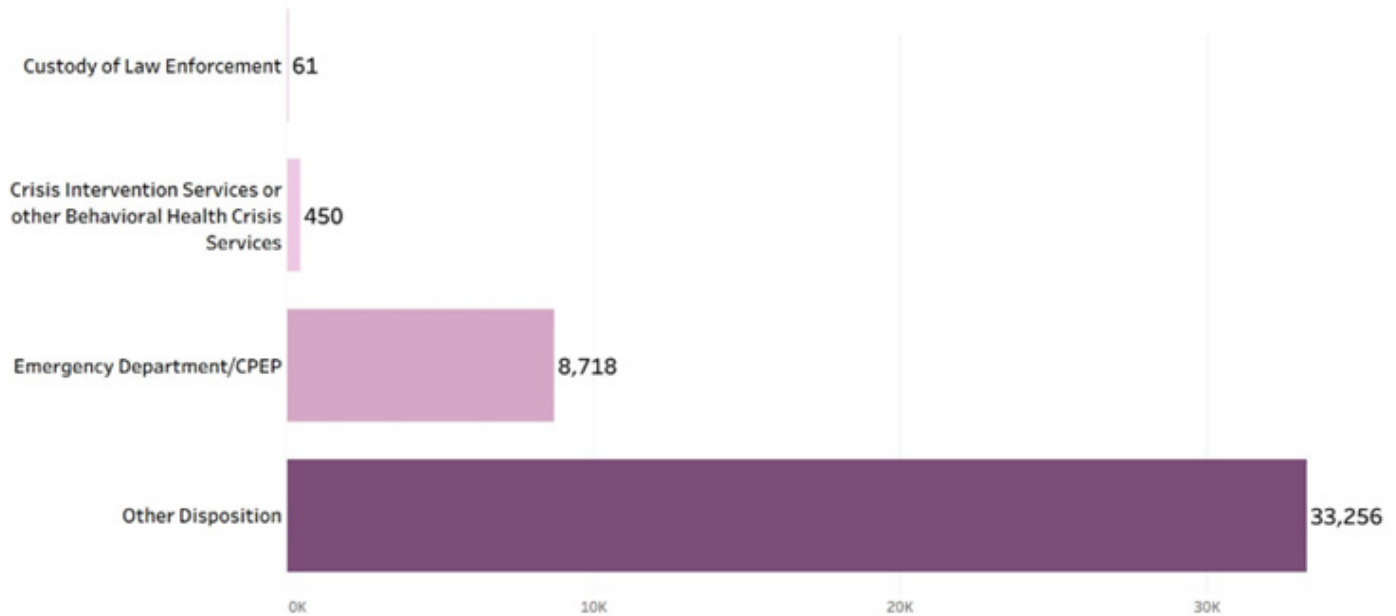


Figure 12 Mobile Crisis Responses Resulting in Transfer to Custody

At this time, reporting of all mobile crisis data are aggregate, so correlations between outcomes and specific identifying information such as age, gender, and ethnicity, cannot be assessed.

The Daniel's Law Task Force was established under Chapter 57 of the New York State laws of 2023 to examine behavioral health crisis response in the state and across the country with specific attention to the goal of supporting trauma-informed, community and public health-based crisis response and diversion. In December 2024, the Daniel's Law Task Force issued its final report, outlining recommendations to support a health-led response to behavioral crises. The Task Force called for establishing a defined response protocol for behavioral health crises, including enhancing the interoperability of 911 and 988 with local communities and statewide systems, and establishing a Behavioral Health Crisis Technical Assistance Center. Consistent with the FY 2026 Enacted Budget, OMH released a Request for Proposal in October 2025 to fund the expansion and/or creation of community behavioral health crisis response pilot programs in urban, suburban, and rural areas.

V. Follow-Up Care

Follow-up care continues to be a priority for New York State 988 Contact Centers. Follow-up services reduce suicide risk, support people in crisis, and are a cost-effective intervention, especially when contrasted with the cost of law enforcement, emergency medical services, and hospital utilization. It is the intention of OMH to ensure that follow-up care is offered and available to all individuals who contact 988.

In New York State, Contact Centers operationalize follow-ups in a variety of ways. Some Contact Centers utilize phone systems that help identify which callers have consented to follow-up after the initial 988 contact. Some Contact Centers have dedicated staff specifically to track and conduct follow-up calls, while other Contact Centers reported offering additional training for crisis counselors on how best to conduct follow-ups for callers who have

expressed specific needs. In many instances, follow-up is used to ensure that the individual was able to connect successfully with the referred services provided in the initial 988 contact. The expectation of offering follow-ups to 100 percent of individuals who contact 988 will remain a priority for the next several years.

VI. Georouting

In April 2024, the Federal Communications Commission published a notice of proposed rulemaking to require all wireless carriers to implement georouting for calls to 988. On Sept. 17, 2024, georouting went live with two of the three major U.S. wireless carriers: T-Mobile and Verizon. On March 4, 2025 the third major wireless carrier, AT&T, implemented georouting. Georouting is a way of directing wireless phone calls locally without including the caller's precise location information in the transferred call data. When a person calls the 988 Lifeline, their call is automatically routed to the 988 Contact Center nearest their physical location by pinging the three cellphone towers that are closest at the time of the call. With georouting, the routing and service provider do not receive detailed information about the exact 'pinpoint' location of callers. This update to 988 enhances the relevance and quality of care available to each caller by ensuring that the crisis counselors answering the call are well-versed in the specific communities' services and resources available to the caller. To further improve the 988 Lifeline's local support services, on Oct. 16, 2025 the FCC published a final rule that all text providers must have georouting implemented by April 2027.

VII. 988 Awareness Across New York State:

i. Community Engagement

OMH's Crisis, Emergency and Stabilization Initiatives Bureau has staff dedicated to community engagement activities to establish relationships with crisis providers, community members, stakeholders, and advocates across every community in New York State. The community engagement specialist works in tandem with the OMH communications manager from the OMH Suicide Prevention Center of New York to spread awareness of the critical 988 resource available to all New Yorkers. These individuals educate the community, constituents, schools, and mental health providers on 988 and the other services in the crisis continuum available to New Yorkers. Additionally, they receive direct feedback from the communities to incorporate into the policy development of crisis services.

As 988 awareness increases, OMH receives more invitations to community events. The program's community engagement specialist attended 96 events during this reporting year, up from 32 in the previous year. Some of the events attended include the New York State Fair, New York State Fire & Emergency Services Health, Wellness, & Safety Symposium, Mental Health in Communities of Color Symposium, Busti Church of God Rural Health & Wellness Fair, and a Military Family Resource Event. The community engagement specialist also works with partners in the community to spread information about 988 and crisis services by distributing 988-branded promotional items and reading materials. OMH has fulfilled and distributed 857 promotional material requests to all 62 counties in New York State to share with their communities. The events and promotional education packages delivered reach many different high-risk groups, including youth, young adults, first responders, veterans, working aged men, LGBTQ+ individuals, and rural communities.

Contact Centers also take proactive measures to engage with the communities they serve and spread 988 awareness by participating in local events, presentations and collaborations. One contact Center serving Long Island has educated more than 9,000 students in local classrooms and 6,000 members of their community on 988.

ii. 988 Awareness Campaign

On Sept. 8, 2024, SAMHSA commemorated the first annual '988 Day' to raise awareness about the 988 Suicide and Crisis Lifeline nationwide. Locally in New York State, Governor Hochul launched a \$5 million statewide '988: We Hear You' Awareness Campaign, strengthening the message of hope and support available to all New Yorkers.

Using data collected by the Office of Prevention and the Suicide Prevention Center, certain high-risk communities that are at an increased risk of suicide were identified to have a dedicated emphasis on ensuring the information on 988 reaches these communities. Black and Latinx youth, LGBTQ+ young adults, first responders, healthcare professionals, and older rural men are groups who receive tailored messaging on the availability of 988 for support during times of distress.

Campaign advertisements are featured on billboards, at Stewarts Shops, and appear on Telemundo, LinkedIn, Facebook, Netflix, Hulu, and other social media platforms, as well as music streaming platforms, and sporting platforms designed to reach a large target audience.

The first year of the campaign garnered more than 650 million impressions across all platforms. The campaign surpassed the original expectation of 589 million impressions. Over the course of the campaign, more than 1.2 million clicks directed people to New York State's 988 website; video advertisements were viewed more than 37.5



Figure 14 988 Banner in NYC Subway



Figure 13 Kiosk in Palisades Mall, West Nyack, New York

million times. Since the launch of the campaign, the volume of 988 contacts has increased by 17 percent for calls, 18 percent for texts, and 100 percent for chats. The prominent increase for 988 chat can be attributed to the prevalence of the 'chat now' option featured in social media advertisements and the QR code to initiate a chat with a 988 counselor highlighted in media graphics.

The '988: We Hear You' campaign received first place in the Integrated Marketing Campaigns category in the 2025 Capital Region MARCOM Awards which are given to not-for-profits, government entities, and marketing agencies, spotlighting powerful, thought-provoking campaigns that carry a message. This campaign has marshaled collective effort, ideas, and passion to improve awareness and use of the 988 Suicide and Crisis Lifeline.

Audience	Impressions
General Population	493,162,651
Young Adults 18-25	60,586,025
Teens 13-17	52,670,430
First Responder	30,374,955
Health Care Professionals	13,478,950
Total	650,273,011

Table 3. NYS 988 Year 1 Awareness Campaign Impression Totals

The continuation of the statewide 988 awareness campaign is expected to launch with refreshed content this year. This campaign is estimated to garner nearly 502 million impressions through streaming TV, cable TV, social media, and out-of-home advertisements such as signage at sporting events, billboards, and bus side banners. The Year 2 campaign will have a special emphasis on the following populations identified in the New York State Suicide Prevention State Plan, including working aged men, rural communities, teens/young adults, first responders, and LGBTQIA+ individuals in addition to general population awareness.

VIII. Enhanced Partnerships with 911 and Law-Enforcement

OMH has been strengthening reciprocal relationships with law enforcement, public safety answering points, and other emergency response affiliates throughout the implementation and coordination of the 988 Lifeline in New York State. This effort to de-escalate and build relationships is evident by the data in the REDCap survey showing that only 469 of the 601,650 contacts routed were transferred to 911 for additional assistance (0.08 percent).

There are 174 unique public safety answering points across the state, in comparison to 14 Contact Centers. Some Contact Centers have formalized a process for engaging with these points and developing memorandums of understanding to easily connect with 911 emergency services and so 911 can connect non-emergency calls to 988. Some Contact Centers have operationalized this by embedding a 988 counselor within public safety answering points. Others have trained staff on protocols of how to transfer callers from 911 to 988 if it has been identified the caller does not need police, fire, ambulance, and is not suicidal with a plan. With the individual caller's permission, the 911 dispatcher provides the 988-crisis counselor with a summary of the call to transfer to 988 and provide pertinent information and ensure the caller and 988 crisis counselors have established a connection before disconnecting from the line. Data-driven, best practices for 988-911 interoperability are in the early phases, and such data metrics are still being established in New York State through initiatives with the OMH Office of Population Health and Evaluation (OPHE) and the Behavioral Health Crisis Technical Assistance Center (BHCTAC) Funding

As 988 continues to grow, dedicated and sustainable funding is critical to continue building capacity while maintaining the ability to meet key performance indicators. The funding proposed by the Governor and supported by the Legislature has supported the Contact Centers in the advancement of their crisis response practices and will continue to support their growth and connectivity to additional components of the crisis response system. The FY 2026 Budget provides \$60 million for 988, up from \$35 million in FY 2023. This critical increase in investment has aided the Contact Centers in supporting and expanding their ability to respond to high-risk populations across the state during their time of crisis and beyond through follow-up and community linkage.

In 2022, OMH was awarded \$7.2 million over two years through SAMHSA'S Notice of Funding Opportunity, FFY 2022 cooperative agreements for states and territories to build Local 988 capacity and support the initial implementation of 988. This funding increased by an additional \$2 million as OMH applied for and was awarded a supplemental opportunity to support workforce expansion and follow-up capacities at the Contact Centers. In 2023, OMH also applied for and was granted a no-cost extension post-award amendment of 12 months for this funding which was distributed to Contact Centers between April 2022 through April 2025.

OMH is in the final year of an additional 2023 SAMHSA cooperative agreement for states and territories. The goal of this agreement is to improve local 988 capacity to increase workforce support at the Contact Centers, improve communication of 988 services to both the general public and high-risk populations, and expand on post-988-contact support connections, including mobile crisis outreach and stabilization services. This grant ends September 2026 with an award of \$34.1 million to support 988 expansion, community education and marketing, and connection with the other components of the comprehensive crisis response system.