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Concept Paper

NYC 988 – Behavioral health crisis intervention and response system

Purpose of the Proposed Request for Proposal (RFP)

In accordance with Section 3-16(j) of the New York City Procurement Policy Board (PPB) Rules, the New York City Department of Health and Mental Hygiene (“NYC Health” or “the agency”) is issuing this Concept Report in advance of issuing a Request for Proposals. Specifically, NYC Health is planning to issue an RFP for a vendor to operate the NYC-specific suicide prevention, crisis counseling, emotional and peer support, information and referral hotline, known as NYC 988. NYC 988 will be part of the national 988 Lifeline Network operated by Vibrant Emotional Health (formerly the Mental Health Association of New York City), through a grant from the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA). It will be an integral part of the NYC behavioral health crisis intervention and response system, as well as provider of non-crisis emotional and peer support, information and referral to ongoing behavioral health services and services that address the social determinants of behavioral health.

Background

NYC 988 is New York City’s local crisis center for free and confidential emotional support for New Yorkers in suicidal crisis or emotional distress. NYC 988 provides custom local care and resources consistent with national standards and best practices. NYC 988 is accessible via phone, text and internet-based communication 24 hours a day, 7 days a week, and 365 days a year (24/7/365).

The Contractor will answer inbound calls and texts to 988 from New York City as well as chats to [988Lifeline.org/chat](https://988lifeline.org/chat), consistent with the United States Federal Communications Commission (FCC) rules establishing 988 as the national three-digit number for people in crisis to connect with suicide prevention and mental health crisis counselors. The contractor’s system will need to interoperate and integrate with the National 988 system as per the [minimum standards for crisis contact centers](#), and will need to meet all NYC Office of Technology and Innovation (OTI) requirements for security and privacy.

Where New York City requirements, outlined below, go beyond federal and state requirements in terms of the array of services offered to inbound contacts such as peer support and non-crisis information and referral, the Contractor will be expected to meet the city standard.

Target Population

NYC 988 aims to serve people with behavioral health concerns, including social determinants of behavioral health, from New York City or about people in New York City (i.e., third parties on behalf of someone in NYC).

Program Description and Services

NYC 988 will offer an accessible point of entry to behavioral health services in NYC through six core services. All services will be provided via all modalities (calls, texts and chat) 24/7/365. The term contact refers to any inbound or outbound call, text or chat interaction to be handled by the contractor’s NYC 988 staff including but not limited to crisis contacts, information requests, referral assistance, and follow-up communications.



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NYC 988 will respond to transfers from 311 and 911 for people requiring behavioral health resources according to NYC HEALTH approved policies and procedures. The contractor will provide their updated full array of support, information and referral and crisis services to these contacts. NYC 988's core services are:

1. Crisis Counseling and Suicide Prevention
2. Peer Support
3. Information and Referral to Behavioral Health Services
4. Single Point of Access to Urgent Behavioral Health Services
5. Mobile friendly website with NYC 988 specific services
6. Follow up to ensure connection to care and/or troubleshoot around barriers to connection

Crisis Counseling and Suicide Prevention

NYC 988 will conduct risk assessments with all persons as needed, in accordance with national 988 standards and protocols. Based on the outcome of these assessments, NYC 988 will make appropriate referrals to relevant services, including but not limited to Emergency Medical Services (EMS), Mobile Crisis Teams (MCT), and other emerging or established crisis intervention services. This includes, but is not limited to, responding to callers calling from bridge telephone lines associated with the Metropolitan Transit Authority and the Port Authority, including NYC, Westchester, Rockland and Dutchess Counties.

Peer Support

In response to NYC specific needs that are not part of the national 988 standards, NYC 988 will offer peer support for persons seeking to connect with someone who has been trained to use her/his own lived experience with mental illness and/or substance use and those who have provided lived experience as a parent or primary caregiver. Using a NYC Health approved Peer Support Model, Peer Specialists and Family Peer Advocates will provide appropriate, compassionate, and effective support to persons who request peer support or those who may benefit from peer support such as people who frequently contact NYC 988. The policy and procedure manual will be developed by the provider and approved by NYC Health, and will specify criteria for peer support and family peer advocate.

Single Point of Access to Urgent Behavioral Health Services (e.g., Mobile Crisis Teams (MCT) and Co-Response Teams (CRT)

NYC 988 will connect people and referring providers to urgent crisis services. This includes determining whether persons would be more appropriately served by an emergency response and a transfer to 911. NYC 988 will implement a bi-directional transfer process with 911 according to NYC HEALTH specifications to connect people who contacted 988 to emergency services as appropriate, and likewise to accept people who contacted 911 to urgent mental health services as appropriate.

For urgent (not emergent) situations, NYC 988 will function as a single point of access to Mobile Crisis Teams (MCTs) and a referral source for Co-Response Teams (CRTs) citywide by determining eligibility, initiating the referral to the most appropriate team within designated timeframe. In addition to handling MCT and CRT



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referrals via phone, text and chat, providers may make referrals via online form submission on the NYC 988 **website that must be available 7 days per week during MCT hours of operation.**

Follow up by call/text/chat

NYC 988 will confirm connection to care for those individuals who consent to receive follow-up. NYC 988 will offer all people who contact them with the option of receiving follow-up calls/texts/chats reminders of first appointments and other promotional messaging, support while awaiting an appointment, follow-up on concerning/risky situations, and/or confirmations of connections to care (including with the person to confirm that the first appointment has taken place). This procedure for follow-up shall be defined in the NYC Health approved provider policy and procedure manual. This will include obtaining feedback from 911/EMS on the outcome of any transfers (i.e., escalations) to 911 where possible in agreement with stakeholder city agencies NYPD and FDNY.

Staffing and Technical Expectations

At a minimum, the contractor's staffing pattern will support a 90% answer rate for all inbound contacts, calls, text and chats daily and the transmission of 90% of referrals to the most appropriate Mobile Crisis Teams within 10 minutes of concluding the call, text or chat or receiving the online form that initiated the referral. There should be dedicated 988 staff to each modality (call, text, chat, online MCT form) on all shifts including staff to comply with the follow-up expectations of 988. The staffing pattern will support the ability of NYC 988 to connect all contacts to a peer specialist or counselor who speaks English or Spanish 24/7/365.

The contractor must be certified by Vibrant Emotional Health as a 988 Lifeline crisis center, or be able to demonstrate the ability to become a certified 988 Lifeline crisis center and apply for certification. The Contractor must itself, and require its subcontractors to, apply strict security and confidentiality safeguards with respect to the data generated through the services performed on behalf of NYC Health, if any, let as a result of this contract and shall hold such data strictly confidential in accordance with all applicable Federal, state and local laws, rules, and regulations applicable thereto. The Contractor's information and technology division must comply with NYC Health security requirements and must comply with security protocols promulgated by the NYC Health's Division of Information Technology (DIT). Subcontracted partnerships that capture the range of modalities and functions described here are acceptable to meet all the service needs. All such subcontract arrangements require pre-approval by NYC Health.

Program Operations & Supervision

NYC 988 contact center staff will answer 988 contacts from or about NYC according to the national 988 routing methodology. All NYC 988 staff, including their partners and subcontractors delivering NYC 988 services will operate according to a NYC Health approved and regularly updated policy and procedure manual that includes the full scope of services.

The Contractor will provide an opportunity for all contacts to complete a consumer feedback survey at the end of each call, text or chat, in addition to having the option to agree to complete a survey prior to the call onset. The feedback survey should be brief but allow for feedback in all service areas.



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Anticipated Program Evaluation & Reporting

The Contractor will collect and report on all aspects of the services outlined in this scope. All NYC 988 staff, including their partners and subcontractors delivering NYC 988 services, will operate and provide reports, as defined in the NYC Health, approved Evaluation, Reporting and Data Management manual. Such reports would be supplied on a monthly basis and annual basis as follows:

Monthly Reporting

The Contractor will provide their monthly response to the NY 988 Crisis Contact Centers Survey for the NYC 988 contact center to NYC Health. In addition to the monthly NY 988 Crisis Contact Survey data, NYC 988 will provide a supplemental monthly report to NYC Health, which would include but not be limited to the following data points:

- Number of referrals to each child and adult mobile crisis team in NYC broken out by the mode through which the situation requiring MCT referral came to the attention of NYC 988 (call, text, chat, online form)
- Number of referrals to child and adult mobile crisis teams in each borough of NYC, broken out by the mode through which the situation requiring MCT referral came to the attention of NYC 988 (call, text, chat, online form)
- The total number of referrals to child and adult mobile crisis teams in NYC, broken out by the mode through which the situation requiring MCT referral came to the attention of NYC 988 (call, text, chat, online form)
- The average length of time between concluding a call, text, chat that initiated an MCT referral or receiving an online MCT referral form to transmitting that referral to the most appropriate Mobile Crisis Team
- The number of peer support calls/text/chat; including transferred calls to peer support line, number of answered calls by peer support specialists and answer rate in percentage.
- Results of consumer feedback survey, total and by mode
- The number, nature and resolution of grievances received about NYC 988

Annual Reporting

The Contractor will provide an annual report to NYC Health which includes all the data points provided in the supplemental monthly report, by month, as well annual totals for each of the data points provided in the supplemental monthly report.

Proposed Term of the Contract

NYC Health anticipates that the term of the contract resulting from this RFP will be 6 years in duration, contingent on the availability of funding. As of the release date of this Concept Report, the anticipated contract start date is July 1, 2027.



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Proposed Procurement Timeline

The proposed RFP would be issued through the PASSPort system, and proposals will only be accepted through PASSPort. It is anticipated that the RFP issuance date will be in Winter 2025/2026, with proposals due 45-60 after the RFP issuance date, and anticipated award decisions in Fall 2026.

Planned Method of Evaluating Proposals

NYC Health anticipates that proposals will be evaluated based on: the extent to which proposers demonstrate relevant organizational experience; the proposed approach to the scope of services; the proposed approach to data management, monitoring and reporting; demonstration of organizational capacity and qualifications; and the proposed approach to budget management.

Funding Information

NYC Health anticipates awarding up to one (1) contracts from the RFP. NYC Health estimates that the maximum annual value of the contract will be \$22,000,000, subject to funding availability.

Use of PASSPort and Prequalification.

To respond to this future RFP and all other Human/Client Services RFPs, organizations must have an account and an Approved PASSPort HHS Accelerator PQL qualification status in PASSPort. Prequalification applications and proposals in response to RFPs will ONLY be accepted through PASSPort. If you do not have a PASSPort account or Approved PASSPort HHS Accelerator PQL Application, please visit nyc.gov/passport to get started. If you have any questions about your PASSPort HHS Accelerator PQL status or for assistance with creating a PASSPort account, please go to <https://www.nyc.gov/site/mocs/about/help.page>.

Contact Information /Deadline for Questions/Comments

Written comments on this Concept Report are invited by January 29, 2026. Please email RFP@health.nyc.gov and indicate "988 Concept Report Comments" in the subject line of the email.