

#### **Gina Gibson**

#### Sr. Director, Behavioral Health Bamboo Health

This article is sponsored by Bamboo Health. In this Voices interview, Behavioral Health Business sits down with Gina Gibson, Senior Director of Behavioral Health Solutions at Bamboo Health, to reflect on three years of 988 and how crisis response is evolving into a more unified, tech-enabled system. Gibson shares insights on infrastructure improvements, funding challenges, and the role of data in care continuity. She also highlights what's needed to strengthen crisis support and where the industry is headed in 2026.

Editor's note: This interview has been edited for length and clarity.

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## Q: Behavioral Health Business:

Looking back on the past three years since the launch of 988 – what progress have you seen?

**Gina Gibson:** Progress falls into three key categories: increased access and utilization of 988, dedicated funding and public awareness.

First, the 200+ 988 Suicide & Crisis Lifeline (988) centers have done a fantastic job handling more than 17 million calls, texts and chats routed since the launch in 2022. Nationally, call centers are responding to more of those contacts, resulting in faster assessments and time to care for individuals in need, according to performance data from SAMHSA.

A significant technical advancement has been adding general location routing for voice calls and texts. This allows contacts to be routed to the nearest 988 center based on the caller's general location rather than their phone number's area code. That shift helps connect people with local centers that can access nearby resources.

In terms of funding, 11 states, including the U.S. Virgin Islands, have passed legislation for a 988 telecom fee comparable to the 911 fee. An additional five states have implemented recurring state appropriations to support 988 operations.

Lastly, public awareness has grown significantly. More targeted marketing campaigns have helped drive recognition. According to a July NAMI-Ipsos poll, about 74% of Americans are now aware of 988, up from just 44% two months after the line launched in 2022. That's a huge improvement.



# Q: Behavioral Health Business:

What areas of opportunity still exist?

**Gibson:** There's been a lot of meaningful progress, but several challenges remain, starting with funding. While some states have taken steps forward, funding for 988 continues to be inconsistent and unevenly distributed across the country.

Another major hurdle is the enforcement of mental health parity. Getting commercial insurance health plans on board continues to be difficult and often creates barriers to care.

Even though awareness of 988 has improved, many people still don't know when to call 988 versus 911. Continued coordination between those systems is essential to ensure the right professionals are dispatched, no matter where the call originates.

There's also an opportunity to expand services beyond 988 itself by building out the broader behavioral healthcare continuum. That means increasing the number and types of downstream services that can support individuals in the most appropriate, least restrictive setting, as close to home as possible.

Of course, none of that is feasible without the workforce to support it. The behavioral health workforce shortage remains a critical issue, with about one-third of the U.S. population living in designated mental health professional shortage areas, primarily in rural areas and among those supporting special populations.

Lastly, there are ongoing challenges around technology. Some organizations still struggle to identify the right tools for their systems, and others face barriers to integrating new platforms into their existing tech infrastructure. Finding the right technology and the right integration partner continue to be key opportunities for improvement.



#### Q: Behavioral Health Business:

How can communities work better to address these areas of opportunity?

**Gibson:** A lot of it comes down to coordinated planning. Communities need to align around shared goals and objectives—that's what enables them, in some cases, to pool resources, including funding. It also requires expanding the definition of "community" beyond traditional geographic boundaries. That means looking to comparable states, regions or counties that have successfully tackled similar challenges. Reach out, learn from their strategies and adapt what works.

Another key piece is investing in real-time technology. With the ongoing workforce shortage, communities must streamline operational processes wherever possible. Technology that is embedded in existing workflows can help facilitate secure data sharing and generate actionable insights that improve service delivery. In today's environment, those tools aren't just helpful but essential.



### Q: Behavioral Health Business:

Why should crisis services and technology be a part of a state or county's overall behavioral health strategy?

**Gina Gibson:** Contacting 988 isn't the only way someone enters the behavioral health system. A person might go to their primary care provider for a routine checkup, and a behavioral health concern might be flagged. Law enforcement may encounter someone in crisis and transport them to a community-based evaluation center. Someone else might walk into an emergency department on their own, seeking help.

Individuals can touch the system in multiple places over time, coming into contact with the system during what we call pivotal moments. Without a connected technology platform, an individual's care team cannot see the full picture. They may not know the individual was just at the ED two days after a doctor's visit or that the individual had a crisis interaction at a different location. Connecting those dots is critical to any behavioral health system of care, and the best way to do that is with a technology platform built for integration and interoperability.

That's precisely what the Bamboo Intelligence Hub™ is designed to do. It allows care teams to identify and connect individuals to the right services, securely share data across providers and generate actionable insights that inform care at the individual and system levels.

It also gives states, counties and regions a complete view of their behavioral health continuum. Leaders can assess provider effectiveness, identify service gaps and make data-informed care planning and resource allocation decisions.

The Bamboo Intelligence Hub offers a longitudinal view of each person's care journey, including acute and post-acute admissions, discharges, and transfer notifications. It supports crisis events and digital closed-loop referrals, alerts care teams to justice involvement and—where authorized—surfaces real-time data on controlled substances for prescribers, dispensers, and their delegates.

By aggregating pivotal care moments and touchpoints, the Bamboo Intelligence Hub streamlines the next best actions, strengthens care coordination, and helps eliminate silos. Ultimately, it allows the workforce to focus on what matters most: supporting the individual in front of them.



### Q: Behavioral Health Business:

What does the future of crisis funding look like?

**Gibson:** That's tricky, because changes are definitely coming, especially to traditional federal block grant funding.

States, counties and regions will need to advocate for sustainable funding sources, particularly in areas where there is no 988 telecom fee or legislative appropriation in place. It's about sustaining the downstream core services that support individuals after that first call or contact.

One emerging opportunity is the use of opioid settlement funds. While those funds are tied to opioid-related litigation, they're not limited to opioid treatment. They can be used to support co-occurring opioid use disorder and mental health or substance use disorders, call center operations, referral networks and even technology infrastructure. That opens up new possibilities for investment in crisis response systems.

Ultimately, it will take creativity. States will need to collaborate across agencies to develop blended or braided funding strategies that integrate multiple sources in a coordinated, sustainable way.



### Q: Behavioral Health Business:

What is next for crisis care in general?

**Gibson:** The future of crisis care depends on breaking down silos and continuing to move toward a truly integrated system.

To improve someone's quality of life, we need to get them the care they need, when they want it, as close to home as possible, and in the least restrictive, most appropriate setting. And to do that effectively, providers need a complete, holistic view of the individual.

That means integrating behavioral and physical health, better coordination between 911 and 988, and ensuring interoperability between existing and emerging software platforms. That way, data is shared, care teams are informed and the system as a whole can support the next best decision for each individual.



#### Q: Behavioral Health Business: Finish this sentence:

#### In 2026, the behavioral health space will be defined by...

"...creativity and innovation.

The field will continue evolving through creative problem-solving and innovative technology, like our Bamboo Intelligence Hub, that supports true whole-person care. That means addressing physical health, behavioral health and social needs together, and using data to close service gaps, track performance and increase transparency across the system.

Whether measuring contract outcomes or simply understanding how supports and services are being used, this level of visibility will be key to advancing the future of behavioral healthcare."

