1 AN ACT concerning government.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 1. Short title. This Act may be cited as the 9-8-8
- 5 Suicide and Crisis Lifeline Workgroup Act.
- 6 Section 5. Findings. The General Assembly finds that:
- 7 (1) In the summer of 2022, 31% of Illinois adults
- 8 experienced symptoms of anxiety or depression more than half
- 9 of the days of each week, which is an increase of 20% since
- 10 2019.
- 11 (2) Suicide is the third leading cause of death in
- 12 Illinois for young adults who are 15 to 34 years of age, and it
- is the 11th leading cause of death for all Illinoisans. In
- 14 2021, 1,488 Illinois lives were lost to suicide, and an
- estimated 376,000 adults had thoughts of suicide.
- 16 (3) Historically, people in Illinois and nationwide have
- 17 had few and fragmented options to call upon during a mental
- health crisis and have relied upon 9-1-1 and various privately
- 19 funded crisis lines for help.
- 20 (4) In July 2022, Illinois joined the nation in launching
- 21 the 9-8-8 Suicide and Crisis Lifeline, a universal 3-digit
- 22 dialing code for a national suicide prevention and mental
- 23 health hotline, meant to offer 24-hour-a-day, 7-day-a-week

- access to trained counselors who can help people experiencing mental health-related distress.
 - (5) Congress delegated to the states significant decision-making responsibility for structuring and funding the states' 9-8-8 call center networks.
 - (6) States had limited data on which to base their initial decisions because the Substance Abuse and Mental Health Services Administration's projections of future increases in call volumes varied widely, and there was no national best-practice model for the number and organization of 9-8-8 call centers.
 - Administration described the 2022 launch of 9-8-8 as being just the first step toward reimagining our country's mental health crisis system and stipulated that long-term transformation will rely on the willingness of states and territories to build and invest strategically in every level of the continuum of mental health crisis care over the next several years.
 - (8) In 2023, the General Assembly and other State leaders can assess the first year of operations of the 9-8-8 call center system, identify legislative solutions to any funding and programmatic gaps that are emerging, and set the course for Illinois to eventually lead the country in providing quality and accessible 9-8-8 care and in connecting individuals with the mental health resources necessary to

- 1 sustain long-term recovery.
- 2 (9) The launch of the 9-8-8 Suicide and Crisis Lifeline
- 3 has created a once-in-a-generation opportunity to improve
- mental health crisis care in Illinois.
- 5 Illinois' success or failure in building a
- 6 high-quality call center network in the initial years will be
- 7 an important factor in determining whether 9-8-8 is perceived
- as a trusted resource in the State. 8
- 9 (11)Illinois' success or failure in building a
- 10 high-quality 9-8-8 call center network will disproportionately
- 11 affect Black, Brown, and other marginalized residents who are
- 12 most likely to rely on crisis services to access mental health
- 13 care and are most likely to be criminalized or harmed by the
- 14 existing crisis response system.
- 15 Section 10. Suicide and Crisis Lifeline Workgroup.
- 16 (a) The Department of Human Services, Division of Mental
- Health, shall convene a working group that includes: 17
- 18 (1) bicameral, bipartisan members of the General
- 19 Assembly;
- 20 (2) at least one representative from the Department of
- 21 Human Services, Division of Substance Use Prevention and
- 22 Recovery; the Department of Public Health; the Department
- 23 of Healthcare and Family Services; and the Department of
- 24 Insurance;
- (3) the State's Chief Behavioral Health Officer; 25

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1	(4)	the	Director	of	the	Children's	Behavioral	Health
2	Transformation Initiative;							

- (5) service providers from the regional and statewide 9-8-8 call centers;
- (6) representatives of organizations that represent people with mental health conditions or substance use disorders;
- (7) representatives of organizations that operate an Illinois social services helpline or crisis line other than 9-8-8, including veterans' crisis services;
- (8) more than one individual with personal or family lived experience of a mental health condition or substance use disorder;
- 14 (9) experts in research and operational evaluation;
 15 and
 - (10) and any other person or persons as determined by the Department of Human Services, Division of Mental Health.
- 19 (b) On or before December 31, 2023, the Department of
 20 Human Services, Division of Mental Health, shall submit a
 21 report to the General Assembly regarding the Workgroup's
 22 findings under Section 15 related to the 9-8-8 call system.
- 23 Section 15. Responsibilities; action plan.
- 24 (a) The Workforce has the following responsibilities:
- 25 (1) to review existing information about the first

year of 9-8-8 call center operations in Illinois, including, but not limited to, state-level and county-level use data, progress around the federal measures of success determined by the Substance Abuse and Mental Health Services Administration, and research conducted by any State-contracted partners around cost projections, best-practice standards, and geographic needs;

- (2) to review other states' models and emerging best practices around structuring 9-8-8 call center networks, with an emphasis on promoting high-quality phone interventions, coordination with other crisis lines and crisis services, and connection to community-based support for those in need;
- (3) to review governmental infrastructures created in other states to promote sustainability and quality in 9-8-8 call centers and crisis system operations;
- (4) to review changes and new initiatives that have been advanced by the Substance Abuse and Mental Health Services Administration and Vibrant Emotional Health since Vibrant transitioned to 9-8-8 in July 2022, such as new training curricula for call takers and new technology platforms;
- (5) to consider input from call center personnel, providers, and advocates about strengths, weaknesses, and service gaps in Illinois; and

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- (6) to develop an action plan with recommendations to 1 2 the General Assembly that include the following: (A) a future structure for a network of 9-8-8 call 3 centers in Illinois that will best promote equity, quality, and connection to care; (B) metrics that Illinois should use to measure 6 7 the success of our statewide system in promoting equity, quality, and connection to care and a system 8 9 to measure those metrics, considering the metrics 10 imposed by the Substance Abuse and Mental Health 11 Services Administration as only a starting point for 12 measurement of success in Illinois; 13
 - (C) recommendations to further fund and strengthen the rest of Illinois' behavioral health services and crisis assistance programs based on lessons learned from 9-8-8 use; and
 - (D) recommendations on a long-term governmental infrastructure to provide advice and recommendations necessary to sustainably implement and monitor the progress of the 9-8-8 Suicide and Crisis Lifeline in Illinois and to make recommendations for the statewide improvement of behavioral health crisis response and suicide prevention services in the State.

The action plan shall be approved by a majority of Workgroup members.

(b) Nothing in the action plan filed under this Section

- shall be construed to supersede the recommendations of the 1
- 2 Statewide Advisory Committee or Regional Advisory Committees
- created by the Community Emergency Services and Support Act. 3
- Section 20. Repeal. This Act is repealed on January 1, 4
- 5 2025.
- Section 99. Effective date. This Act takes effect upon 6
- 7 becoming law.