



## 104TH GENERAL ASSEMBLY

### State of Illinois

2025 and 2026

HB3761

Introduced 2/18/2025, by Rep. Lindsey LaPointe

#### SYNOPSIS AS INTRODUCED:

New Act

Creates the Hospitals and Homelessness Support Act. Requires the Office to Prevent and End Homelessness within the Department of Human Services to maintain on its publicly accessible website information on how a hospital or healthcare system may connect a patient experiencing homelessness or otherwise in a vulnerable housing situation with shelter and homeless support services for each continuum of care in the State. Requires the Department to ensure that the information required includes, for each continuum of care, any phone number, email address, physical address, primary agencies, or any other information that may be necessary for a person in that continuum of care territory to begin accessing shelter or other homelessness services. Requires the Department to include, where possible, a specific phone number that a hospital or health care facility may call and specific language to use. Requires the Department to also include on its website a way for the hospital or healthcare system to determine which continuum of care applies based on the physical location of the hospital or healthcare system. Requires other information, all of which must be added to the Department's website by October 31, 2025. Contains provisions concerning annual audits.

LRB104 11105 KTG 21187 b

1 AN ACT concerning State government.

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

4 Section 1. Short title. This Act may be cited as the  
5 Hospitals and Homelessness Support Act.

6 Section 5. Legislative findings.

7 (a) The General Assembly finds that there is a significant  
8 number of people experiencing homelessness in Illinois who are  
9 discharged or transferred from hospitals without adequate  
10 support or information pertaining to shelter and homeless  
11 support services. Too often, these Illinois residents are put  
12 back on the street with little connection to critical  
13 transitional care or support, including basic shelter. These  
14 Illinois residents who are experiencing homelessness  
15 frequently experience severe adverse health consequences,  
16 including death. According to a report prepared by the  
17 University of Illinois at Chicago and published by the  
18 Department of Public Health in July 2024, there were  
19 approximately 10,000 people experiencing "literal  
20 homelessness" in Illinois between 2017 and 2022, meaning that  
21 they were living in shelters, on the street, or in other places  
22 not meant for human habitation. Further, research demonstrates  
23 that people experiencing homelessness are at an increased risk

1 and severity for many acute and chronic health conditions,  
2 experiencing the effects of these health conditions 10 to 20  
3 years earlier than the general population, often resulting in  
4 premature death.

5 (b) The General Assembly further finds that, since the  
6 start of the COVID-19 pandemic, there has been an increase of  
7 36.6% in deaths of people experiencing homelessness, compared  
8 to a 6.1% increase in deaths for the general population over  
9 the same time period. Between 2017 and 2022, a total of  
10 1,428,984 visits from people experiencing homelessness were  
11 recorded in statewide hospital records. Approximately 15-20%  
12 of these visits were due to injuries, 28,860 of these visits  
13 were related to assaults, and 15,578 of these visits followed  
14 suicide attempts. The majority of people experiencing  
15 homelessness were discharged to "home" or "self-care," which  
16 includes a discharge to the streets, which can result in  
17 further negative health outcomes. According to the 2024 annual  
18 Point-in-Time Count and Survey Report conducted by the City of  
19 Chicago as directed by the United States Department of Housing  
20 and Urban Development (HUD), 18,836 Chicago residents were  
21 experiencing homelessness on January 25, 2024. Of this count,  
22 17,202 were residing in a shelter, while 1,634 were in an  
23 unsheltered location. According to the Office to Prevent and  
24 End Homelessness within the Department of Human Services, on  
25 any given night in Illinois, an estimated 25,806 people are  
26 experiencing literal homelessness - that is, living in

1 shelters and transitional housing programs, in parks and  
2 abandoned buildings, in cars and in barns. The 2024-2026 plan  
3 developed by the Illinois Interagency Task Force on  
4 Homelessness, led by the Office to Prevent and End  
5 Homelessness, estimates that 26,004 additional shelter,  
6 transitional, and permanent housing units are needed to make  
7 adequate shelter space and homeless support services available  
8 to every person experiencing homelessness. Accomplishing this  
9 goal would mean homelessness has been measurably "ended", or  
10 that homelessness would have reached "functional zero". It is  
11 clear that more capacity for shelter and housing, both  
12 transitional and permanent, is needed. It is also clear that  
13 more efficient and effective connections to existing shelter  
14 and homeless support services are needed.

15 (c) Research shows that there are persistent adverse  
16 health effects that individuals often endure after  
17 experiencing homelessness even for a short period of time.  
18 Research also shows that there are opportunities to improve  
19 systems of homelessness care in Illinois, in particular with  
20 hospitals due to the frequency of hospital visits for people  
21 experiencing homelessness. The healthcare system, the shelter  
22 and homeless support services system, housing providers, local  
23 governments, and the State all have a role to play in crafting  
24 solutions. Hospitals, homeless shelter and service providers,  
25 Medicaid managed care organizations, State agencies, and  
26 others, are all critical partners. It is paramount to ensure

1 that vulnerable populations, like those experiencing  
2 homelessness, are regularly and reliably connected to the  
3 services that they need, both in health care settings and  
4 afterward.

5 Section 10. Centralized information on continuum of care  
6 access.

7 (a) The Office to Prevent and End Homelessness within the  
8 Department of Human Services shall maintain on its publicly  
9 accessible website information on how a hospital or healthcare  
10 system may connect a patient experiencing homelessness or  
11 otherwise in a vulnerable housing situation with shelter and  
12 homeless support services for each continuum of care in the  
13 State. As used in this Section, "continuum of care" refers to  
14 the regional or local planning bodies mandated by U.S.  
15 Department of Housing and Urban Development that coordinate  
16 housing and services funding for homeless families and  
17 individuals.

18 (b) The Department shall ensure that the information  
19 required by subsection (a) of this Section includes, for each  
20 continuum of care, any phone number, email address, physical  
21 address, primary agencies, or any other information that may  
22 be necessary for a person in that continuum of care territory  
23 to begin accessing shelter or other homelessness services.  
24 Where possible, the Department shall include a specific phone  
25 number that a hospital or health care facility may call and

1 specific language to use.

2 (c) The Department shall also include on its website a way  
3 for the hospital or healthcare system to determine which  
4 continuum of care applies based on the physical location of  
5 the hospital or healthcare system.

6 (d) The information required by this Section shall be  
7 added to the Department's website no later than October 31,  
8 2025. During the month of January 2026, and every January  
9 thereafter, the information required by this Section shall be  
10 audited, with any necessary updates made no later than the  
11 31st of that month. During the month of July 2026, and every  
12 July thereafter, the information required by this Section  
13 shall be audited, with any necessary updates made no later  
14 than the 31st of that month.