



## 102ND GENERAL ASSEMBLY

### State of Illinois

2021 and 2022

HB5866

Introduced 1/4/2023, by Rep. Will Guzzardi

#### SYNOPSIS AS INTRODUCED:

New Act

Creates the 9-8-8 Suicide and Crisis Lifeline Task Force Act. Provides that the 9-8-8 Suicide and Crisis Lifeline Task Force shall be composed of 12 appointed members and the State's Chief Behavioral Health Officer, or his or her representative. Provides that the 2 Task Force co-chairs shall appoint experts to contribute and participate in the Task Force as nonvoting members. Provides for meetings of the Task Force and responsibilities relating to examination of the first year of implementation and use of the 9-8-8 Suicide and Crisis Lifeline in Illinois. Requires the development of an action plan with specified recommendations to be filed with the Governor and General Assembly by December 31, 2023. Includes legislative findings. Repeals the Act on January 1, 2025. Effective immediately.

LRB102 30019 AWJ 42210 b

1 AN ACT concerning 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 9-8-8  
5 Suicide and Crisis Lifeline Task Force 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  
13 is the 11th leading cause of death for all Illinoisans. In  
14 2021, 1,488 Illinois lives were lost to suicide, and an  
15 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  
18 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 three-digit  
22 dialing code for a national suicide prevention and mental  
23 health hotline, meant to offer 24-hours-a-day, 7-days-a-week

1 access to trained counselors who can help people experiencing  
2 mental-health-related distress.

3 (5) Congress delegated to the states significant  
4 decision-making responsibility for structuring and funding the  
5 states' 9-8-8 call center networks.

6 (6) States had limited data on which to base their initial  
7 decisions because the Substance Abuse and Mental Health  
8 Services Administration's projections of future increases in  
9 call volumes varied widely, and there was no national  
10 best-practice model for the number and organization of 9-8-8  
11 call centers.

12 (7) The Substance Abuse and Mental Health Services  
13 Administration described the 2022 launch of 9-8-8 as being  
14 just the first step toward reimagining our country's mental  
15 health crisis system and stipulated that long-term  
16 transformation will rely on the willingness of states and  
17 territories to build and invest strategically in every level  
18 of the continuum of mental health crisis care over the next  
19 several years.

20 (8) In 2023, the General Assembly and other state leaders  
21 can assess the first year of operations of the 9-8-8 call  
22 center system, identify legislative solutions to any funding  
23 and programmatic gaps that are emerging, and set the course  
24 for Illinois to eventually lead the country in providing  
25 quality and accessible 9-8-8 care and in connecting  
26 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  
4 mental health crisis care in Illinois.

5 (10) 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  
8 as a trusted resource in the State.

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 Task Force.

16 (a) The 9-8-8 Suicide and Crisis Lifeline Task Force is  
17 created. The Task Force shall be composed of the following  
18 voting members:

19 (1) 4 members of the House of Representatives, 2  
20 appointed by the Speaker of the House of Representatives  
21 and 2 appointed by the Minority Leader of the House of  
22 Representatives;

23 (2) 4 members of the Senate, 2 appointed by the  
24 President of the Senate and 2 appointed by the Minority  
25 Leader of the Senate;

1           (3) a representative from the Department of Human  
2           Services, Division of Mental Health, appointed by the  
3           Governor;

4           (4) a representative from the Department of Public  
5           Health, appointed by the Governor;

6           (5) a representative from the Department of Healthcare  
7           and Family Services, appointed by the Governor;

8           (6) a representative from the Department of Insurance,  
9           appointed by the Governor; and

10          (7) the State's Chief Behavioral Health Officer, or  
11          his or her representative.

12          (b) The Speaker of the House of Representatives and the  
13          President of the Senate shall appoint one co-chair from each  
14          chamber of the General Assembly, selecting from the 8 members  
15          appointed under paragraphs (1) and (2) of subsection (a).

16          (c) The 2 co-chairs shall select expert participants, who  
17          will be nonvoting members, to contribute to and participate in  
18          this Task Force. Expert participants shall include, at a  
19          minimum:

20               (1) service providers from regional and statewide  
21               9-8-8 call centers;

22               (2) providers, or representatives of providers, of  
23               community-based mobile crisis response services, including  
24               representation from both urban and nonurban settings;

25               (3) a representative of an organization that advocates  
26               for people with mental health conditions or substance use

1 disorders, or both health conditions and substance use  
2 disorders;

3 (4) a representative of an organization that operates  
4 an Illinois social services helpline or crisis line other  
5 than 9-8-8;

6 (5) more than one individual with personal or  
7 family-lived experience of a mental health condition or  
8 substance use disorder;

9 (6) a representative of the University of Illinois at  
10 Chicago involved in providing research and analytical  
11 support to the State's 9-8-8 operations; and

12 (7) a representative with expertise in 9-1-1 call  
13 center protocols and operations.

14 (d) Members and expert participants shall serve without  
15 compensation and are responsible for the cost of all  
16 reasonable and necessary travel expenses connected to Task  
17 Force business.

18 Task Force members shall be appointed by June 1, 2023. The  
19 Task Force must convene its first meeting by July 1, 2023 and  
20 may meet at other times at the call of a co-chair appointed  
21 under subsection (b). Expert participants shall be selected by  
22 the Task Force co-chairs before the first meeting. The Task  
23 Force may establish committees that address specific issues or  
24 populations and may select expert participants to serve on  
25 committees as needed. The Department of Human Services will  
26 provide administrative and other support to the Task Force.

1           (e) If a vacancy occurs in the Task Force membership or  
2 the expert participant membership, the vacancy shall be filled  
3 in the same manner as the original appointment for the  
4 remainder of the term of the Task Force.

5           Section 15. Responsibilities; action plan.

6           (a) The Task Force has the following responsibilities:

7           (1) to review existing information about the first  
8 year of 9-8-8 call center operations in Illinois,  
9 including, but not limited to, state-level and  
10 county-level use data, progress around the federal  
11 measures of success determined by the Substance Abuse and  
12 Mental Health Services Administration, and research  
13 conducted by any State-contracted partners around cost  
14 projections, best practice standards, and geographic  
15 needs;

16           (2) to review the recommendations and decisions of  
17 previous State-led workgroups on transforming the mental  
18 health crisis response system, including, but not limited  
19 to, the 9-8-8 Stakeholder Coalition and Subcommittees  
20 convened in 2021 and the Statewide Advisory Committee and  
21 Regional Advisory Committees established under the  
22 Community Emergency Services and Support Act;

23           (3) to review other states' models and emerging best  
24 practices around structuring 9-8-8 call center networks,  
25 with an emphasis on promoting high-quality phone

1 interventions, coordination with other crisis lines and  
2 crisis services, and connection to community-based support  
3 for those in need;

4 (4) to review governmental infrastructures created in  
5 other states to promote sustainability and quality in  
6 9-8-8 call centers and crisis system operations;

7 (5) to review changes and new initiatives that have  
8 been advanced by the Substance Abuse and Mental Health  
9 Services Administration and Vibrant Emotional Health since  
10 Illinois launched 9-8-8 in July 2022, such as new training  
11 curricula for call takers and new technology platforms;

12 (6) to consider testimony from call-center personnel,  
13 providers, and advocates about strengths, weaknesses, and  
14 service gaps in Illinois; and

15 (7) to develop an action plan with recommendations to  
16 the Governor and General Assembly that include the  
17 following:

18 (A) a future structure for a network of 9-8-8 call  
19 centers in Illinois that will best promote equity,  
20 quality, and connection to care;

21 (B) metrics that Illinois should use to measure  
22 the success of our statewide system in promoting  
23 equity, quality, and connection to care and a system  
24 to measure those metrics, considering the metrics  
25 imposed by the Substance Abuse and Mental Health  
26 Services Administration as only a starting point for



1 measurement of success in Illinois;

2 (C) a plan to sustainably fund a statewide 9-8-8  
3 call center network under subparagraphs (A) and (B) in  
4 fiscal year 2025 and beyond, which shall identify  
5 potential funding sources, future funding amounts, and  
6 a mechanism by which funding needs can be calculated;

7 (D) recommendations to further fund and strengthen  
8 the rest of Illinois' behavioral health services and  
9 crisis assistance programs based on lessons learned  
10 from 9-8-8 use; and

11 (E) recommendations on a long-term governmental  
12 infrastructure to provide advice and recommendations  
13 necessary to sustainably implement and monitor the  
14 progress of the 9-8-8 Suicide and Crisis Lifeline in  
15 Illinois and to make recommendations for the statewide  
16 improvement of behavioral health crisis response and  
17 suicide prevention services in the State.

18 The action plan shall be approved by a majority of  
19 Task Force members who are voting members.

20 (b) The Task Force shall complete and file the action plan  
21 with the Governor and General Assembly by no later than  
22 December 31, 2023.

23 (c) Nothing in the action plan filed under this Section  
24 shall be construed to supersede the recommendations of the  
25 Statewide Advisory Committee or Regional Advisory Committees  
26 created by the Community Emergency Services and Support Act.

1           Section 20. Repeal. This Act is repealed on January 1,  
2           2025.

3           Section 99. Effective date. This Act takes effect upon  
4           becoming law.