



Rep. Justin Slaughter

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1 AMENDMENT TO HOUSE BILL 4621

2 AMENDMENT NO. _____. Amend House Bill 4621 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Substance Use Disorder Act is amended by
5 changing Section 5-23 as follows:

6 (20 ILCS 301/5-23)

7 Sec. 5-23. Drug Overdose Prevention Program.

8 (a) Reports.

9 (1) The Department may publish annually a report on
10 drug overdose trends statewide that reviews State death
11 rates from available data to ascertain changes in the
12 causes or rates of fatal and nonfatal drug overdose. The
13 report shall also provide information on interventions
14 that would be effective in reducing the rate of fatal or
15 nonfatal drug overdose and on the current substance use
16 disorder treatment capacity within the State. The report

1 shall include an analysis of drug overdose information
2 reported to the Department of Public Health pursuant to
3 subsection (e) of Section 3-3013 of the Counties Code,
4 Section 6.14g of the Hospital Licensing Act, and
5 subsection (j) of Section 22-30 of the School Code.

6 (2) The report may include:

7 (A) Trends in drug overdose death rates.

8 (B) Trends in emergency room utilization related
9 to drug overdose and the cost impact of emergency room
10 utilization.

11 (C) Trends in utilization of pre-hospital and
12 emergency services and the cost impact of emergency
13 services utilization.

14 (D) Suggested improvements in data collection.

15 (E) A description of other interventions effective
16 in reducing the rate of fatal or nonfatal drug
17 overdose.

18 (F) A description of efforts undertaken to educate
19 the public about unused medication and about how to
20 properly dispose of unused medication, including the
21 number of registered collection receptacles in this
22 State, mail-back programs, and drug take-back events.

23 (G) An inventory of the State's substance use
24 disorder treatment capacity, including, but not
25 limited to:

26 (i) The number and type of licensed treatment

1 programs in each geographic area of the State.

2 (ii) The availability of medication-assisted
3 treatment at each licensed program and which types
4 of medication-assisted treatment are available.

5 (iii) The number of recovery homes that accept
6 individuals using medication-assisted treatment in
7 their recovery.

8 (iv) The number of medical professionals
9 currently authorized to prescribe buprenorphine
10 and the number of individuals who fill
11 prescriptions for that medication at retail
12 pharmacies as prescribed.

13 (v) Any partnerships between programs licensed
14 by the Department and other providers of
15 medication-assisted treatment.

16 (vi) Any challenges in providing
17 medication-assisted treatment reported by programs
18 licensed by the Department and any potential
19 solutions.

20 (b) Programs; drug overdose prevention.

21 (1) The Department may establish a program to provide
22 for the production and publication, in electronic and
23 other formats, of drug overdose prevention, recognition,
24 and response literature. The Department may develop and
25 disseminate curricula for use by professionals,
26 organizations, individuals, or committees interested in

1 the prevention of fatal and nonfatal drug overdose,
2 including, but not limited to, drug users, jail and prison
3 personnel, jail and prison inmates, drug treatment
4 professionals, emergency medical personnel, hospital
5 staff, families and associates of drug users, peace
6 officers, firefighters, public safety officers, needle
7 exchange program staff, and other persons. In addition to
8 information regarding drug overdose prevention,
9 recognition, and response, literature produced by the
10 Department shall stress that drug use remains illegal and
11 highly dangerous and that complete abstinence from illegal
12 drug use is the healthiest choice. The literature shall
13 provide information and resources for substance use
14 disorder treatment.

15 The Department may establish or authorize programs for
16 prescribing, dispensing, or distributing opioid
17 antagonists for the treatment of drug overdose. Such
18 programs may include the prescribing of opioid antagonists
19 for the treatment of drug overdose to a person who is not
20 at risk of opioid overdose but who, in the judgment of the
21 health care professional, may be in a position to assist
22 another individual during an opioid-related drug overdose
23 and who has received basic instruction on how to
24 administer an opioid antagonist.

25 (2) The Department may provide advice to State and
26 local officials on the growing drug overdose crisis,

1 including the prevalence of drug overdose incidents,
2 programs promoting the disposal of unused prescription
3 drugs, trends in drug overdose incidents, and solutions to
4 the drug overdose crisis.

5 (3) The Department may support drug overdose
6 prevention, recognition, and response projects by
7 facilitating the acquisition of opioid antagonist
8 medication approved for opioid overdose reversal,
9 facilitating the acquisition of opioid antagonist
10 medication approved for opioid overdose reversal,
11 providing trainings in overdose prevention best practices,
12 connecting programs to medical resources, establishing a
13 statewide standing order for the acquisition of needed
14 medication, establishing learning collaboratives between
15 localities and programs, and assisting programs in
16 navigating any regulatory requirements for establishing or
17 expanding such programs.

18 (4) In supporting best practices in drug overdose
19 prevention programming, the Department may promote the
20 following programmatic elements:

21 (A) Training individuals who currently use drugs
22 in the administration of opioid antagonists approved
23 for the reversal of an opioid overdose.

24 (B) Directly distributing opioid antagonists
25 approved for the reversal of an opioid overdose rather
26 than providing prescriptions to be filled at a

1 pharmacy.

2 (C) Conducting street and community outreach to
3 work directly with individuals who are using drugs.

4 (D) Employing community health workers or peer
5 recovery specialists who are familiar with the
6 communities served and can provide culturally
7 competent services.

8 (E) Collaborating with other community-based
9 organizations, substance use disorder treatment
10 centers, or other health care providers engaged in
11 treating individuals who are using drugs.

12 (F) Providing linkages for individuals to obtain
13 evidence-based substance use disorder treatment.

14 (G) Engaging individuals exiting jails or prisons
15 who are at a high risk of overdose.

16 (H) Providing education and training to
17 community-based organizations who work directly with
18 individuals who are using drugs and those individuals'
19 families and communities.

20 (I) Providing education and training on drug
21 overdose prevention and response to emergency
22 personnel and law enforcement.

23 (J) Informing communities of the important role
24 emergency personnel play in responding to accidental
25 overdose.

26 (K) Producing and distributing targeted mass media

1 materials on drug overdose prevention and response,
2 the potential dangers of leaving unused prescription
3 drugs in the home, and the proper methods for
4 disposing of unused prescription drugs.

5 (c) Grants.

6 (1) The Department may award grants, in accordance
7 with this subsection, to create or support local drug
8 overdose prevention, recognition, and response projects.
9 Local health departments, correctional institutions,
10 hospitals, universities, community-based organizations,
11 and faith-based organizations may apply to the Department
12 for a grant under this subsection at the time and in the
13 manner the Department prescribes. Eligible grant
14 activities include, but are not limited to, purchasing and
15 distributing opioid antagonists, hiring peer recovery
16 specialists or other community members to conduct
17 community outreach, and hosting public health fairs or
18 events to distribute opioid antagonists, promote harm
19 reduction activities, and provide linkages to community
20 partners.

21 (2) In awarding grants, the Department shall consider
22 the overall rate of opioid overdose, the rate of increase
23 in opioid overdose, and racial disparities in opioid
24 overdose experienced by the communities to be served by
25 grantees. The Department shall encourage all grant
26 applicants to develop interventions that will be effective

1 and viable in their local areas.

2 (3) (Blank).

3 (3.5) Any hospital licensed under the Hospital
4 Licensing Act or organized under the University of
5 Illinois Hospital Act shall be deemed to have met the
6 standards and requirements set forth in this Section to
7 enroll in the drug overdose prevention program upon
8 completion of the enrollment process except that proof of
9 a standing order and attestation of programmatic
10 requirements shall be waived for enrollment purposes.
11 Reporting mandated by enrollment shall be necessary to
12 carry out or attain eligibility for associated resources
13 under this Section for drug overdose prevention projects
14 operated on the licensed premises of the hospital and
15 operated by the hospital or its designated agent. The
16 Department shall streamline hospital enrollment for drug
17 overdose prevention programs by accepting such deemed
18 status under this Section in order to reduce barriers to
19 hospital participation in drug overdose prevention,
20 recognition, or response projects.

21 (4) In addition to moneys appropriated by the General
22 Assembly, the Department may seek grants from private
23 foundations, the federal government, and other sources to
24 fund the grants under this Section and to fund an
25 evaluation of the programs supported by the grants.

26 (d) Health care professional prescription of opioid

1 antagonists.

2 (1) A health care professional who, acting in good
3 faith, directly or by standing order, prescribes or
4 dispenses an opioid antagonist to: (a) a patient who, in
5 the judgment of the health care professional, is capable
6 of administering the drug in an emergency, or (b) a person
7 who is not at risk of opioid overdose but who, in the
8 judgment of the health care professional, may be in a
9 position to assist another individual during an
10 opioid-related drug overdose and who has received basic
11 instruction on how to administer an opioid antagonist
12 shall not, as a result of his or her acts or omissions, be
13 subject to: (i) any disciplinary or other adverse action
14 under the Medical Practice Act of 1987, the Physician
15 Assistant Practice Act of 1987, the Nurse Practice Act,
16 the Pharmacy Practice Act, or any other professional
17 licensing statute or (ii) any criminal liability, except
18 for willful and wanton misconduct.

19 (1.5) Notwithstanding any provision of or requirement
20 otherwise imposed by the Pharmacy Practice Act, the
21 Medical Practice Act of 1987, or any other law or rule,
22 including, but not limited to, any requirement related to
23 labeling, storage, or recordkeeping, a health care
24 professional or other person acting under the direction of
25 a health care professional may, directly or by standing
26 order, obtain, store, and dispense an opioid antagonist to

1 a patient in a facility that includes, but is not limited
2 to, a hospital, a hospital affiliate, or a federally
3 qualified health center if the patient information
4 specified in paragraph (4) of this subsection is provided
5 to the patient. A person acting in accordance with this
6 paragraph shall not, as a result of his or her acts or
7 omissions, be subject to: (i) any disciplinary or other
8 adverse action under the Medical Practice Act of 1987, the
9 Physician Assistant Practice Act of 1987, the Nurse
10 Practice Act, the Pharmacy Practice Act, or any other
11 professional licensing statute; or (ii) any criminal
12 liability, except for willful and wanton misconduct.

13 (2) A person who is not otherwise licensed to
14 administer an opioid antagonist may in an emergency
15 administer without fee an opioid antagonist if the person
16 has received the patient information specified in
17 paragraph (4) of this subsection and believes in good
18 faith that another person is experiencing a drug overdose.
19 The person shall not, as a result of his or her acts or
20 omissions, be (i) liable for any violation of the Medical
21 Practice Act of 1987, the Physician Assistant Practice Act
22 of 1987, the Nurse Practice Act, the Pharmacy Practice
23 Act, or any other professional licensing statute, or (ii)
24 subject to any criminal prosecution or civil liability,
25 except for willful and wanton misconduct.

26 (3) A health care professional prescribing an opioid

1 antagonist to a patient shall ensure that the patient
2 receives the patient information specified in paragraph
3 (4) of this subsection. Patient information may be
4 provided by the health care professional or a
5 community-based organization, substance use disorder
6 program, or other organization with which the health care
7 professional establishes a written agreement that includes
8 a description of how the organization will provide patient
9 information, how employees or volunteers providing
10 information will be trained, and standards for documenting
11 the provision of patient information to patients.
12 Provision of patient information shall be documented in
13 the patient's medical record or through similar means as
14 determined by agreement between the health care
15 professional and the organization. The Department, in
16 consultation with statewide organizations representing
17 physicians, pharmacists, advanced practice registered
18 nurses, physician assistants, substance use disorder
19 programs, and other interested groups, shall develop and
20 disseminate to health care professionals, community-based
21 organizations, substance use disorder programs, and other
22 organizations training materials in video, electronic, or
23 other formats to facilitate the provision of such patient
24 information.

25 (4) For the purposes of this subsection:

26 "Opioid antagonist" means a drug that binds to opioid

1 receptors and blocks or inhibits the effect of opioids
2 acting on those receptors, including, but not limited to,
3 naloxone hydrochloride or any other similarly acting drug
4 approved by the U.S. Food and Drug Administration.

5 "Health care professional" means a physician licensed
6 to practice medicine in all its branches, a licensed
7 physician assistant with prescriptive authority, a
8 licensed advanced practice registered nurse with
9 prescriptive authority, an advanced practice registered
10 nurse or physician assistant who practices in a hospital,
11 hospital affiliate, or ambulatory surgical treatment
12 center and possesses appropriate clinical privileges in
13 accordance with the Nurse Practice Act, or a pharmacist
14 licensed to practice pharmacy under the Pharmacy Practice
15 Act.

16 "Patient" includes a person who is not at risk of
17 opioid overdose but who, in the judgment of the physician,
18 advanced practice registered nurse, or physician
19 assistant, may be in a position to assist another
20 individual during an overdose and who has received patient
21 information as required in paragraph (2) of this
22 subsection on the indications for and administration of an
23 opioid antagonist.

24 "Patient information" includes information provided to
25 the patient on drug overdose prevention and recognition;
26 how to perform rescue breathing and resuscitation; opioid

1 antagonist dosage and administration; the importance of
2 calling 911; care for the overdose victim after
3 administration of the overdose antagonist; and other
4 issues as necessary.

5 (e) Drug overdose response policy.

6 (1) Every State and local government agency that
7 employs a law enforcement officer or fireman as those
8 terms are defined in the Line of Duty Compensation Act
9 must possess opioid antagonists and must establish a
10 policy to control the acquisition, storage,
11 transportation, and administration of such opioid
12 antagonists and to provide training in the administration
13 of opioid antagonists. A State or local government agency
14 that employs a probation officer, as defined in Section 9b
15 of the Probation and Probation Officers Act, or a fireman
16 as defined in the Line of Duty Compensation Act but does
17 not respond to emergency medical calls or provide medical
18 services shall be exempt from this subsection.

19 (2) Every publicly or privately owned ambulance,
20 special emergency medical services vehicle, non-transport
21 vehicle, or ambulance assist vehicle, as described in the
22 Emergency Medical Services (EMS) Systems Act, that
23 responds to requests for emergency services or transports
24 patients between hospitals in emergency situations must
25 possess opioid antagonists.

26 (3) Entities that are required under paragraphs (1)

1 and (2) to possess opioid antagonists may also apply to
2 the Department for a grant to fund the acquisition of
3 opioid antagonists and training programs on the
4 administration of opioid antagonists.

5 (Source: P.A. 101-356, eff. 8-9-19; 102-598, eff. 1-1-22.)

6 Section 10. The Pretrial Services Act is amended by
7 changing Sections 1, 1.5, 2, 3, 4, 5, 8, 9, 10, 12, 13, 14, 15,
8 17, 22, 24, 30, and 33 and by adding Sections 0.02, 0.03, and
9 0.04 as follows:

10 (725 ILCS 185/0.02 new)

11 Sec. 0.02. Definitions. In this Act:

12 "Director" means the Director of the Office of Statewide
13 Pretrial Services.

14 "Local pretrial services" means a pretrial services other
15 than the Office who is providing pretrial services.

16 "Pretrial services" means any providing services to the
17 circuit court as provided for in this Act, including the
18 Office.

19 "Office" means the Office of Statewide Pretrial Services.

20 (725 ILCS 185/0.03 new)

21 Sec. 0.03. Office of Statewide Pretrial Services;
22 establishment. There is established in the judicial branch of
23 State government an office to be known as the Office of

1 Statewide Pretrial Services. This office shall be under the
2 supervision and direction of a Director who shall be appointed
3 by a vote of a majority of the Illinois Supreme Court Justices
4 for a 4-year term and until a successor is appointed and
5 qualified. The Director shall adopt rules, instructions, and
6 orders, consistent with this Act, further defining the
7 organization of this office and the duties of its employees.
8 The Illinois Supreme Court shall approve or modify an
9 operational budget submitted to it by the Office of Statewide
10 Pretrial Services and set the number of employees each year.

11 (725 ILCS 185/0.04 new)

12 Sec. 0.04. Powers and duties.

13 (a) The Office shall provide pretrial services as provided
14 in Section 7 to circuit courts or counties without existing
15 pretrial services agencies.

16 (b) The Office shall develop, establish, adopt, and
17 enforce uniform standards for pretrial services in this State.

18 (c) The Office may:

19 (1) hire and train State employed pretrial personnel;

20 (2) establish qualifications for pretrial officers as
21 to hiring, promotion, and training;

22 (3) establish a system of training and orientation for
23 local pretrial services agencies;

24 (4) Develop standards and approve employee
25 compensation schedules for local pretrial services

1 agencies;

2 (5) establish a system of uniform forms;

3 (6) develop standards for a system of recordkeeping
4 for local pretrial services agencies;

5 (7) gather statistics and develop research for
6 planning of pretrial services in Illinois;

7 (8) establish a means of verifying the conditions for
8 reimbursement under this Act for local pretrial services
9 agencies and develop criteria for approved costs for
10 reimbursement;

11 (9) monitor and evaluate all pretrial programs
12 operated by local pretrial services agencies;

13 (10) review and approve annual plans submitted by
14 local pretrial services agencies; and

15 (11) establish such other standards and regulations
16 and do all acts necessary to carry out the intent and
17 purposes of this Act.

18 (725 ILCS 185/1) (from Ch. 38, par. 301)

19 Sec. 1. Pretrial services shall be provided by a local
20 pretrial services agency or the Office. The pretrial services
21 agency shall provide ~~Each circuit court shall establish a~~
22 ~~pretrial services agency to provide the~~ circuit court with
23 accurate background data regarding the pretrial release of
24 persons charged with felonies and effective supervision of
25 compliance with the terms and conditions imposed on release.

1 (Source: P.A. 84-1449.)

2 (725 ILCS 185/1.5)

3 Sec. 1.5. Framework facilitating the hiring and training
4 of new State-employed pretrial services personnel to serve
5 circuit courts or counties without existing pretrial services
6 agencies. Notwithstanding anything in this Act to the
7 contrary, the Office shall hire ~~Supreme Court is encouraged to~~
8 ~~establish a framework that facilitates the hiring and train~~
9 ~~training of~~ new State-employed pretrial services personnel to
10 serve circuit courts or counties without existing pretrial
11 services agencies, as required by Section 1. Nothing in this
12 amendatory Act of the 103rd General Assembly shall be
13 constructed to invalidate, diminish, or otherwise interfere
14 with any collective bargaining agreement or representation
15 rights under the Illinois Public Labor Relations Act, if
16 applicable.

17 (Source: P.A. 102-694, eff. 1-7-22.)

18 (725 ILCS 185/2) (from Ch. 38, par. 302)

19 Sec. 2. Local pretrial ~~Pretrial~~ services agencies may be
20 independent divisions of the circuit courts accountable to the
21 chief judge or his designee for program activities. The
22 agencies shall be supervised by a program director appointed
23 by the chief judge and removable for cause. The chief judge or
24 his designee shall have the authority to hire, terminate or

1 discipline local pretrial services ~~agency~~ personnel on
2 recommendation of the program director.

3 (Source: P.A. 84-1449.)

4 (725 ILCS 185/3) (from Ch. 38, par. 303)

5 Sec. 3. Pretrial services shall be provided by the Office
6 ~~The functions of the pretrial services agency shall be~~
7 ~~assigned to the Department of Probation and Court Services or~~
8 ~~other arm of the court~~ where the volume of criminal
9 proceedings does not justify the establishment of a local
10 pretrial services agency ~~separate division.~~

11 (Source: P.A. 84-1449.)

12 (725 ILCS 185/4) (from Ch. 38, par. 304)

13 Sec. 4. All local pretrial services agency personnel shall
14 be full-time employees supervised by the director and, except
15 for secretarial staff, subject to the hiring and training
16 requirements established by the Office ~~Supreme Court~~ as
17 ~~provided in "An Act providing for a system of probation, for~~
18 ~~the appointment and compensation of probation officers, and~~
19 ~~authorizing the suspension of final judgment and the~~
20 ~~imposition of sentence upon persons found guilty of certain~~
21 ~~defined crimes and offenses, and legalizing their ultimate~~
22 ~~discharge without punishment", approved June 10, 1911, as~~
23 ~~amended.~~

24 (Source: P.A. 84-1449.)

1 (725 ILCS 185/5) (from Ch. 38, par. 305)

2 Sec. 5. The compensation for local pretrial services
3 agency personnel shall be commensurate with salaries and other
4 benefits accorded probation department employees.

5 (Source: P.A. 84-1449.)

6 (725 ILCS 185/8) (from Ch. 38, par. 308)

7 Sec. 8. In addition to the foregoing, local pretrial
8 services agencies may with the approval of the chief judge
9 provide one or more of the following services to the circuit
10 court:

11 (a) Supervise compliance with the terms and conditions
12 imposed by the courts for appeal bonds; and

13 (b) Assist in such other pretrial services activities as
14 may be delegated to the agency by the court.

15 (Source: P.A. 84-1449.)

16 (725 ILCS 185/9) (from Ch. 38, par. 309)

17 Sec. 9. Pretrial services agencies shall have standing
18 court authority to interview and process all persons charged
19 with non-capital felonies either before or after first
20 appearance if the person is in custody. The chief judge and
21 program director of the pretrial services agency may establish
22 interviewing priorities where resources do not permit total
23 coverage, but no other criteria shall be employed to exclude

1 categories of offenses or offenders from program operations.

2 (Source: P.A. 84-1449.)

3 (725 ILCS 185/10) (from Ch. 38, par. 310)

4 Sec. 10. The chief judge and program director of the local
5 pretrial services agency shall continuously assess the
6 benefits of agency intervention before or after the first
7 appearance of accused persons. In determining the best
8 allocation of available resources, consideration shall be
9 given to current release practices of first appearance judges
10 in misdemeanor and lesser felony cases; the logistics of
11 pre-first appearance intervention where decentralized
12 detention facilities are utilized; the availability of
13 verification resources for pre-first appearance intervention;
14 and the ultimate goal of prompt and informed determinations of
15 pretrial release conditions.

16 (Source: P.A. 84-1449.)

17 (725 ILCS 185/12) (from Ch. 38, par. 312)

18 Sec. 12. Interviews shall be individually conducted by
19 agency personnel in facilities or locations which assure an
20 adequate opportunity for discussion, consistent with security
21 needs.

22 The chief judge or his designee shall maintain a
23 continuous liaison between the pretrial services agency
24 ~~director~~ and the sheriff, or other affected law enforcement

1 agencies, to assure that pretrial services interviewers have
2 prompt access consistent with security and law enforcement
3 needs to all prisoners after booking.

4 (Source: P.A. 84-1449.)

5 (725 ILCS 185/13) (from Ch. 38, par. 313)

6 Sec. 13. Information received from the arrested person as
7 a result of the agency interview shall be recorded on uniform
8 interview forms created by the Office.

9 (Source: P.A. 84-1449.)

10 (725 ILCS 185/14) (from Ch. 38, par. 314)

11 Sec. 14. The pretrial services agency shall, after
12 interviewing arrestees, immediately verify and supplement the
13 information required by the uniform interview form before
14 submitting its report to the court. Minimum verification shall
15 include the interviewee's prior criminal record, residency,
16 and employment circumstances. The chief judge or his designee
17 shall assist the pretrial services agency ~~program director~~ in
18 establishing and maintaining cooperation with the circuit
19 clerk and law enforcement information systems to assure the
20 prompt verification of prior criminal records.

21 (Source: P.A. 84-1449.)

22 (725 ILCS 185/15) (from Ch. 38, par. 315)

23 Sec. 15. Verified and supplemental information assembled

1 by the pretrial services agency shall be recorded on a uniform
2 reporting form established by the Office ~~Supreme Court~~.

3 (Source: P.A. 84-1449.)

4 (725 ILCS 185/17) (from Ch. 38, par. 317)

5 Sec. 17. Reports shall be in writing, signed by an
6 authorized representative of the pretrial services agency, and
7 prepared on the uniform reporting form. Copies of the report
8 shall be provided to all parties and counsel of record. If the
9 report is filed with the court, the court shall deny public
10 access to the report.

11 (Source: P.A. 84-1449.)

12 (725 ILCS 185/22) (from Ch. 38, par. 322)

13 Sec. 22. If so ordered by the court, the pretrial services
14 agency shall prepare and submit for the court's approval and
15 signature a uniform release order on the uniform form
16 established by the Office ~~Supreme Court~~ in all cases where an
17 interviewee may be released from custody under conditions
18 contained in an agency report. Such conditions shall become
19 part of the conditions of pretrial release. A copy of the
20 uniform release order shall be provided to the defendant and
21 defendant's attorney of record, and the prosecutor.

22 (Source: P.A. 101-652, eff. 1-1-23.)

23 (725 ILCS 185/24) (from Ch. 38, par. 324)

1 Sec. 24. Where functions of the local pretrial services
2 agency have been delegated to a probation department or other
3 arm of the court ~~under Section 3~~, their records shall be
4 segregated from other records. Two years after the date of the
5 first interview with a pretrial services agency
6 representative, the defendant may apply to the chief circuit
7 judge, or a judge designated by the chief circuit judge for
8 these purposes, for an order expunging from the records of the
9 pretrial services agency all files pertaining to the
10 defendant.

11 (Source: P.A. 84-1449.)

12 (725 ILCS 185/30) (from Ch. 38, par. 330)

13 Sec. 30. Records and statistics shall be maintained by
14 local pretrial services agencies of their operations and
15 effect upon the criminal justice system, with monthly reports
16 submitted to the circuit court and the Office ~~Supreme Court~~ on
17 a uniform statistical form developed by the Supreme Court.

18 (Source: P.A. 84-1449.)

19 (725 ILCS 185/33) (from Ch. 38, par. 333)

20 Sec. 33. The Office ~~Supreme Court~~ shall pay from funds
21 appropriated to it for this purpose 100% of all approved costs
22 for pretrial services, including pretrial services officers,
23 necessary support personnel, travel costs reasonably related
24 to the delivery of pretrial services, space costs, equipment,

1 telecommunications, postage, commodities, printing and
2 contractual services. Costs shall be reimbursed monthly, based
3 on an annual ~~a~~ plan and budget approved by the Office ~~Supreme~~
4 ~~Court~~. No department may be reimbursed for costs which exceed
5 or are not provided for in the approved annual plan and budget.
6 ~~The Mandatory Arbitration Fund may be used to reimburse~~
7 ~~approved costs for pretrial services.~~

8 (Source: P.A. 94-91, eff. 7-1-05; 94-839, eff. 6-6-06; 95-331,
9 eff. 8-21-07; 95-707, eff. 1-11-08.)

10 (725 ILCS 185/6 rep.)

11 Section 15. The Pretrial Services Act is amended by
12 repealing Section 6.

13 Section 99. Effective date. This Act takes effect upon
14 becoming law, except that Sections 10 and 15 take effect on
15 July 1, 2025."