Legislative Update – May 16, 2023

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**DuPage County Legislative Committee**
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**Summary Key Bill List (of bills still moving through the legislative process):**

**Support:**
- HB 2811 (Johnson, D-East Moline) Establishes a Central Receiving Center Grant Pilot Program
- HB 3230 (LaPointe, D-Chicago/Fine, D-Glenview) Statewide Continuum of Behavioral Health Crisis/response services
- HB 3236 (Carroll, D-Northbrook/Holmes, D-Aurora) Prohibits installment loans of pet sales
- HB 3878 (Rashid, D-Berwyn) Establishes an IDHA Matching Funds program/affordable housing tax credit
- HB 3899 (Syed, D-Palatine) Provides Medicaid coverage of applied behavior analysis treatment (autism)
- HB 3900 (LaPointe, D-Chicago) Establishes Medicaid (hospital) presumptive eligibility for individuals in psychiatric crisis
- HB 3940 (Guerrero-Cuellar, D-Chicago/Cunningham, D-Chicago) Extension of the Emergency Telephone System Act
- SB 724 (Feigenholtz, D-Chicago/LaPointe, D-Chicago) Establishes the Interagency Children’s Behavioral Health Services Act
- SB 836 (Holmes, D-Aurora/Welch, D-Westchester) Creates the Paint Stewardship Act
- SB 837, Senate Floor Amendment #1 (Morrison, D-Deerfield) Establishes a Carpet Stewardship Pilot Program Act
- SB 1499 (Villa, D-West Chicago/Hirschauer, D-West Chicago) Companion Animal Forfeiture Act – enhanced penalties
- SB 1521 (Ellman, D-Naperville) Firearm storage (Ethan’s Law)
- SB 1555 (Koehler, D-Peoria) Creates the Packaging and Paper Products Stewardship Act

*(see page 2)*
Other Issues:

Central Receiving Center – Capital Request
Building an ideal behavioral health crisis system comprises an organized set of structures, processes, and services to meet all types of urgent and emergent behavioral health crisis needs of our population including “Someone to Call,” “Someone to Respond,” and “Somewhere to Go.”

A Central Receiving Center (CRC) is a single point of entry for individuals experiencing a mental health or substance use crisis. The purpose of the CRC is to stabilize the individual, properly assess, and transition to an appropriate level of care. The CRC will serve county residents in need of immediate mental health or substance use intervention at one location.

DuPage County is currently in the process of finalizing design plans to construct a CRC adjacent to the Health Department on the County Farm Road Wheaton Campus. Although the county has secured some initial funding, the county is seeking additional state funding for this model statewide initiative (please see attached fact sheet).

Restore LGDF Funding
Monies allocated under the Local Government Distributive Fund (LGDF), established in 1969 when the State of Illinois enacted an income tax, does not represent a “grant” from the state but rather a small share of income taxes paid by county residents that are returned on a per capita basis to support critical local services.

Under the original agreement with the state, units of local government were to receive 10% of total state income tax revenues which continued until 2011, when the state instituted a temporary income tax increase but failed to share the corresponding (increased) portion with local governments. In 2017, the General Assembly further reduced LGDF payments to local governments by 10% of state income tax revenues received, and in 2018, by another 5% of revenues received (to help balance the state budget).

As part of the Fiscal Year 2023 budget package, the General Assembly approved a modest one-time increase in local government’s total share of income tax proceeds, raising the amount distributed from the previous 6.06% of individual income tax collections to 6.16%, (for state fiscal year 2023 only), which translated into an annual increase of $133,632 for DuPage County.

DuPage County, together with our municipal partners and the Illinois State Association of Counties (ISACo), urge the Illinois General Assembly to restore the distribution of LGDF dollars to the agreed upon 10% share of income tax proceeds to local governments.

Expand Tourism/Economic Development Opportunities
Tourism is a major driver of economic activity, contributing billions of dollars to the State’s economy that welcomed over 110 million visitors last year. The Illinois Office of Tourism (under the Illinois
Department of Commerce & Economic Opportunity, DCEO) works with the (38) certified Convention and Visitors Bureaus statewide, including the DuPage Convention and Visitors Bureau (DCVB), to promote Illinois as a travel destination for meetings, conventions, domestic and international visitors as well as leisure travelers. In 2021, the tourism and hospitality industry employed nearly 400,000 people statewide.

DuPage County has 16,000 hotel rooms and last year, sent $22 million in state hotel/motel tax receipts to Springfield yet the DuPage Convention and Visitors Bureau (as a capped bureau), received only $1.5 million in return from the State Local Tourism Convention Bureau grant (that also required a $750,000 local match). These dollars are critical to the success of local bureaus to attract meetings, conventions, tour groups and sporting events.

DuPage County supports two requests submitted to the Illinois General Assembly by the DuPage Convention & Visitors Bureau:

1. **Establish a Chicago Plus $5 million grant program for (4) state-certified convention and visitor bureaus adjacent to the City of Chicago (Chicago Southland, Chicago North Shore, Meet Chicago Northwest, and the DuPage Convention & Visitor Bureaus) to market and sell their service areas to generate increased hotel/motel occupancy and travel throughout the region. All four of these bureaus have experienced three consecutive years of decreased hotel tax collections.**

2. **Extend for one more year the 25% local match requirement** for state-certified convention and visitor bureaus (previously 50%) of state tourism dollars received. This will free up much needed revenues for bureaus still recovering from losses due to the pandemic.
BUILDING AN IDEAL BEHAVIORAL HEALTH CRISIS SYSTEM OF CARE FOR DUPAGE COUNTY

CRITICAL STEP | CENTRAL RECEIVING CENTER

A Behavioral Health Crisis System is more than a single crisis program. It is an organized set of structures, processes, and services that are in place to meet all types of urgent and emergent behavioral health crisis needs in a defined population or community, effectively and efficiently.

A CONTINUOUS JOURNEY

DuPage County Health Department has been on a continuous journey building an infrastructure to support key components of an ideal crisis system, “someone to call, someone to respond, and somewhere to go”.

The Central Receiving Center completes the next critical step in this journey by ensuring individuals experiencing a behavioral health crisis have somewhere to go that is safe, medically appropriate, and always available.

WHAT IS A CENTRAL RECEIVING CENTER?

Single Point of Entry
A single point of entry for individuals experiencing a mental health or substance use crisis.

Easy Access
Easily accessible location for law enforcement, emergency personnel, and families to have a timely drop off for evaluation.

Rapid Assessment and Stabilization
Needs are evaluated and individuals are treated or transitioned to an appropriate level of care within 24 hours.

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BUILDING AN IDEAL BEHAVIORAL HEALTH CRISIS SYSTEM

Every person receives the right service, in the right place, every time.

Provide a single point of access for law enforcement officers, EMS, and family members to drop-off individuals experiencing a MH/SU crisis.

Destigmatize individuals with mental health and/or substance use disorders.

Provide a safe alternative to law enforcement and individuals experiencing a MH/SU crisis.

Appropriately detox or transport individuals who are experiencing acute withdrawal from a substance use disorder to an ER.

Reduce the inappropriate utilization of hospital emergency departments by diverting individuals with mental health and/or substance use disorders.

Provide an efficient and effective use of existing resources.

WHY DO WE NEED A CENTRAL RECEIVING CENTER?

Provide a single point of access for law enforcement officers, EMS, and family members to drop-off individuals experiencing a MH/SU crisis.

Destigmatize individuals with mental health and/or substance use disorders.

Provide a safe alternative to law enforcement and individuals experiencing a MH/SU crisis.

With increased reimbursements from the State of Illinois for providing crisis behavioral health care through Medicaid, direct billing for services is estimated to account for approximately 30-50% of the revenue needed to support the expenses in addition to DCHD operating budget.

Partnership funding will be needed and ideally obtained through support from other mental health partners, including health systems, municipalities, townships, and private foundations.

LOGISTICAL/OPERATIONAL CONSIDERATIONS

The Central Receiving Center will be located at 115 County Farm Road in Wheaton on the DuPage County Health Department campus. This location is centrally located within the county and in close proximity to discharge locations (correctional center, crisis residential services, acute hospital needs).

Capital Investment: Estimated to be $25 Million
DCHD secured $5M in funding through State capital resources by Former State Representative Deb Conroy.
DCHD secured $1M in federal funding through Congressman Sean Casten.
DCHD and DuPage County are working to identify funding to invest in Crisis services expansion.
DCHD is working to identify funding to support operations.
It is anticipated construction/renovation work could begin in 2023 with a potential opening of this facility in late 2024 or early 2025.

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Frequently Asked Questions

What is a Central Receiving Center (CRC)?
• A CRC is a single point of entry for individuals experiencing a mental health or substance use crisis. It creates an opportunity to divert those with misdemeanor charges with unmet mental health or substance use needs to appropriate care and reduce the number of people brought to jail.
• A CRC is considered a 23/59 program and Individuals will be evaluated and transitioned to an appropriate level of care within 23 hours and 59 minutes (no overnight stays).
• A CRC can be considered an emergency room for behavioral health issues.

Why do we need a CRC?
• When someone you care about needs help because they are experiencing a mental health and/or substance use crisis, the Central Receiving Center provides a safe, caring, and medically appropriate alternative to an emergency room or jail.
• A Central Receiving Center (CRC) will reduce hospital emergency room visits and unnecessary 911 calls and incarcerations by providing an efficient and effective use of existing resources.

From January 2017-March 2022, there were an average of:
• 570 drug related ED visits per quarter at DuPage County Hospitals
• 1,471 alcohol related ED visits per quarter at DuPage County Hospitals
• 6,238 mental health related ED visits per quarter at DuPage County Hospitals
• 1,705 suicide related ED visits per quarter at DuPage County Hospitals

What are the goals of a CRC?
• Provide a single point of access for law enforcement officers, EMS, and family members to drop-off individuals experiencing a MH/SU crisis.
• Destigmatize individuals with mental health and/or substance use disorders.
• Provide a safe alternative to law enforcement and individuals experiencing a MH/SU crisis.
• Appropriate setting for lower level detox or transport for individuals who are experiencing acute withdrawal from a substance use disorder to an ER.
• Reduce the inappropriate utilization of hospital emergency departments by diverting individuals with mental health and/or substance use disorders.
• Provide an efficient and effective use of existing resources.

Where will the CRC be located?
• The Central Receiving Center will be located at 115 County Farm Road in Wheaton on the DuPage County Health Department campus. This location is centrally located within the county and in close proximity to discharge locations (correctional center, crisis residential services, acute hospital needs).

Who will the CRC serve?
• The CRC will serve DuPage County residents in need of immediate mental health or substance use intervention. Individuals will be able to access resources provide by the CRC at one location and be provided with real time evaluations.

Who is not eligible for care at the CRC?
• Individuals who are an imminent safety risk to themselves or others
• Individuals who are a violent criminal offender

Who will benefit from the CRC?
Individuals in Crisis
• Provide one location to have mental health and substance use needs evaluated in real time for DuPage County residents.

Law Enforcement
• Provides a single point of access to drop off individuals experiencing a crisis, reducing time spent on calls.

EMS
• Provide a timely, medically appropriate alternative to hospital emergency departments.

Hospital Systems
• Reduce inappropriate utilization of hospital emergency departments.

Community as a Whole
• The CRC is a resource to the entire community and anyone in need of immediate mental health or substance use intervention.

What services will be provided at the CRC?
What is the difference between Crisis Stabilization and the Central Receiving Center models of care?

### Crisis Stabilization (aka Crisis Residential or Crisis Respite)
- Short term residential treatment that provides immediate care to individuals 18+ experiencing a mental health crisis but not requiring an inpatient level of care.
- Voluntary stay that averages 3-5 days.
- Services offered:
  - Evaluation
  - Short term stabilization- group and individual brief therapy, care coordination, case management
  - Psychiatric evaluation and medication management
  - Linkage to continued treatment upon discharge

Crisis stabilization can be a level of care referral from a CRC.

### Central Receiving Center
- A single point of entry for individuals experiencing a mental health or substance use crisis.
- Opportunity to divert those with misdemeanor charges with unmet mental health or substance use needs to appropriate care and reduce the number of people brought to jail
- Easily accessible location for law enforcement, emergency personnel to have a timely drop off for evaluation
- Considered a 23/59 program (no overnight stays).
- Needs are evaluated and transitioned to an appropriate level of care within 24 hours
- Services offered:
  - 24/7 crisis intervention, assessment, and evaluation
  - Referral and warm hand off to most appropriate level of care
  - Linkage to ongoing community resources