



OFFICE OF THE GOVERNOR

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SPRINGFIELD, ILLINOIS 62706

JB PRITZKER
GOVERNOR

September 8th, 2021

Representative Batinick
24047 W. Lockport St.
Plainfield, IL 60544

Dear Representative Mark Batinick,

Thank you for your thoughts and proposals throughout this pandemic. Constructive discourse with other Illinois elected leaders has been very helpful, and I value your efforts to engage in it.

Regional differences have been a feature of the COVID-19 pandemic. We can see it even now nationwide – as the transmission of the Delta variant slows in some parts of the country and hastens in others – just as we have time and time again in the last 18 months. We also see it when we look at statewide vaccination progress, where communities with high uptake rates tend to conceal those that are struggling to keep their neighborhoods safe.

That's why local considerations have been a very important part of Illinois' pandemic response. As you'll remember, regional metrics guided our state from the spring of 2020 into the season of widespread vaccine availability. As cases and hospitalizations dropped significantly in every region last spring, the entire state of Illinois entered the Restore Illinois plan's Phase 5, marking the full reopening of all industries, on June 11th, 2021.

Unfortunately, every time we think we have become familiar with the R naught and the percent of cases that lead to hospitalizations, this virus mutates. By late July, large areas of the country were in the thrusts of one of the pandemic's worst waves of new cases yet. With students and teachers preparing for the beginning of the school year, the Centers for Disease Control recommended universal indoor masking for all teachers, staff, students, and visitors to K-12 schools, regardless of vaccination status, later adding universal indoor masking recommendations in all areas of substantial or high transmission [which the CDC tracks on a by-county basis](#).

For weeks now, and still at the time of this writing, every single county in Illinois falls into those categories.

When the Illinois' statewide school masking requirement was announced, I made it clear that this requirement could change for the better as the situation evolves. That could include a significant reduction in transmission, the availability and utilization of vaccines for school-aged children under 12, an improving vaccination rate for children 12 to 17 and for adults that interact with the school community, and/or additional guidance from the CDC. As for the statewide indoor mask mandate, I have repeatedly said that once Illinois has established a consistent downward trend on this current wave, we could reevaluate what the current recommendations are from the CDC and return to mask

recommendations instead of a mandate. The experts are still evaluating how Delta and other new variants impact the spread of this virus and what that means for this current wave of substantial new cases, hospitalizations and deaths. Creating rigid metrics in this changing landscape wouldn't result in safer communities. While I wish I could provide a specific end date for the sake of convenience for all of us, this virus' danger to people is diminished as our deterrence of it improves. The CDC as well as the leading epidemiologists, virologists, immunologists and other experts have been clear that vaccinations and masks are two of the most effective tools we have to keep each other safe during a surge of the virus.

In the short-term, it's simply not feasible to operate using positivity rates on a day-by-day, county-by-county basis. As you yourself said, a county's transmission rates are impacted by every county that borders it – and in the world of statistics, that means a few extra negative tests could throw a small population county in and out of mitigations on a whim. It would be inaccurate, unfair and unworkable for example to tell kids that masks can be off on Tuesday only to put them back on by Thursday – and that chaos would be our reality until we might reach herd immunity as a state and as a nation.

Specifically to your second suggestion: while many have proposed innumerable ways to slice Illinois' 57,000 square miles — by townships, cities, counties or regions — given that pandemic is a health emergency, my administration has been guided by a focus on healthcare availability for all our state's residents, specifically guided by the IDPH Emergency Medical Service regions, with some minor adjustments as suggested by members of the General Assembly last year. These are the same regions that set parameters for ambulance drivers and hospital collaborations. Using the existing medical regional breakdown allows our public health professionals when necessary to manage and monitor capacity in an existing framework. The state has tried to set a baseline of pandemic mitigations with the understanding that, as necessary, local governments can provide additional health mitigation measures that work best for each community. We continue to encourage them to do so.

Again, I appreciate your willingness to reach out and share your ideas and perspective. You've offered constructive thoughts during the pandemic, some have been workable and adopted. Working together will help us all make progress. With widespread vaccination as our greatest tool – we will find our way.

Sincerely,

A handwritten signature in black ink, appearing to read "JB Pritzker", with a stylized, overlapping flourish at the end.

Governor JB Pritzker