

TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES
SUBCHAPTER d: MEDICAL PROGRAMS

PART 146
SPECIALIZED HEALTH CARE DELIVERY SYSTEMS

SUBPART A: AMBULATORY SURGICAL TREATMENT CENTERS

Section

- 146.100 General Description
- 146.105 Definitions
- 146.110 Participation Requirements
- 146.115 Records and Data Reporting Requirements
- 146.125 Covered Ambulatory Surgical Treatment Center Services
- 146.130 Reimbursement for Services

SUBPART B: SUPPORTIVE LIVING PROGRAM (SLP) SETTINGS

Section

- 146.200 General Description
- 146.205 Definitions
- 146.210 Structural Requirements
- 146.215 SLP Participation Requirements
- 146.220 Resident Participation Requirements
- 146.225 Reimbursement for Medicaid Residents
- 146.230 Services
- 146.235 Staffing
- 146.240 Resident Contract
- 146.245 Assessment and Service Plan and Quarterly Evaluation
- 146.250 Resident Rights
- 146.255 Discharge
- 146.260 Grievance Procedure
- 146.265 Records and Reporting Requirements
- 146.270 Quality Assurance Plan
- 146.275 Monitoring
- 146.280 Non-Compliance Action
- 146.285 Voluntary Surrender of Certification
- 146.290 Geographic Groups
- 146.295 Emergency Contingency Plan
- 146.300 Waivers
- 146.305 Reporting of Suspected Abuse, Neglect and Financial Exploitation
- 146.310 Facility Management of Resident Funds

SUBPART C: STATE HEMOPHILIA PROGRAM

Section

- 146.400 Definitions
- 146.410 Patient Eligibility
- 146.420 Hemophilia Treatment Centers
- 146.430 Comprehensive Care Evaluation
- 146.440 Home Transfusion Arrangements
- 146.450 Obligations of the Department

SUBPART D: CHILDREN'S COMMUNITY-BASED HEALTH CARE CENTERS

Section

- 146.500 General Description
- 146.510 Definitions
- 146.520 Participation Requirements
- 146.530 Records and Data Reporting Requirements
- 146.540 Covered Children's Community-Based Health Care Center Services
- 146.550 Reimbursement for Services
- 146.560 Individuals Eligible for Services Provided in a Children's Community-Based Health Care Center
- 146.570 Prior and Post Approval of Services

SUBPART E: SUPPORTIVE LIVING PROGRAM (SLP) SETTINGS
WITH DEMENTIA CARE UNITS

Section

- 146.600 General Description
- 146.610 Structural Requirements
- 146.620 Participation Requirements
- 146.630 Resident Participation Requirements
- 146.640 Services
- 146.650 Reimbursement for Medicaid Residents
- 146.660 Staffing
- 146.670 Assessment and Service Plan and Quarterly Evaluation
- 146.680 Monitoring
- 146.690 Reporting Requirements
- 146.700 Resident Rights
- 146.710 Discharge

SUBPART F: BIRTH CENTERS

Section	
146.800	General Description
146.810	Participation Requirements
146.820	Record Requirements
146.830	Covered Birth Center Services
146.840	Reimbursement of Birth Center Services

SUBPART G: SPECIALIZED MENTAL HEALTH REHABILITATION FACILITIES

Section	
146.900	General Provisions
146.910	Reimbursement

SUBPART H: MEDICALLY COMPLEX FOR THE DEVELOPMENTALLY DISABLED FACILITIES

Section	
146.1000	Applicability of This Part
146.1001	MC/DD Service Criteria
146.1005	Determination of Program (Active Treatment) Costs
146.1010	Inspection of Care and Rate Setting Appeal Process
146.1015	Exceptional Care Needs of Clients with Developmental Disabilities
146.1020	Specialized Care – Behavior Development Programs
146.1025	Specialized Care – Health and Sensory Disabilities
146.1030	Functional Needs
146.1035	Reimbursement for Program (Active Treatment) Costs in Residential Facilities for Clients with Developmental Disabilities

146.TABLE A	Guidelines for Determining Levels of Functioning
146.TABLE B	Standardized Adaptive Functional Assessment

AUTHORITY: Implementing and authorized by Articles III, IV, V, VI and Section 12-13 of the Illinois Public Aid Code [305 ILCS 5].

SOURCE: Old Part repealed at 14 Ill. Reg. 13800, effective August 15, 1990; new Part adopted at 20 Ill. Reg. 4419, effective February 29, 1996; emergency amendment at 21 Ill. Reg. 13875, effective October 1, 1997, for a maximum of 150 days; amended at 22 Ill. Reg. 4430, effective February 27, 1998; emergency amendment at 22 Ill. Reg. 13146, effective July 1, 1998, for a maximum of 150 days; amended at 22 Ill. Reg. 19914, effective October 30, 1998; amended at 23 Ill. Reg. 5819, effective April 30, 1999; emergency amendment at 23 Ill. Reg. 8256, effective July 1, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 13663, effective November 1, 1999; amended at 24 Ill. Reg. 8353, effective June 1, 2000; emergency amendment at 26 Ill. Reg. 14882, effective October 1, 2002, for a maximum of 150 days; amended at 27 Ill. Reg. 2176,

effective February 1, 2003; emergency amendment at 27 Ill. Reg. 10854, effective July 1, 2003, for a maximum of 150 days; amended at 27 Ill. Reg. 18671, effective November 26, 2003; emergency amendment at 28 Ill. Reg. 12218, effective August 11, 2004, for a maximum of 150 days; emergency amendment at 28 Ill. Reg. 14214, effective October 18, 2004, for a maximum of 150 days; amended at 29 Ill. Reg. 852, effective January 1, 2005; emergency amendment at 29 Ill. Reg. 2014, effective January 21, 2005, for a maximum of 150 days; amended at 29 Ill. Reg. 4360, effective March 7, 2005; expedited correction at 29 Ill. Reg. 14127, effective March 7, 2005; amended at 29 Ill. Reg. 6967, effective May 1, 2005; amended at 29 Ill. Reg. 14987, effective September 30, 2005; amended at 30 Ill. Reg. 8845, effective May 1, 2006; amended at 31 Ill. Reg. 5589, effective April 1, 2007; emergency amendment at 31 Ill. Reg. 5876, effective April 1, 2007, for a maximum of 150 days; amended at 31 Ill. Reg. 11681, effective August 1, 2007; amended at 33 Ill. Reg. 11803, effective August 1, 2009; emergency amendment at 36 Ill. Reg. 6751, effective April 13, 2012, for a maximum of 150 days; amended at 36 Ill. Reg. 13885, effective August 27, 2012; amended at 37 Ill. Reg. 17624, effective October 28, 2013; expedited correction at 38 Ill. Reg. 4518, effective October 28, 2013; amended at 38 Ill. Reg. 13255, effective June 11, 2014; amended at 38 Ill. Reg. 13893, effective June 23, 2014; amended at 38 Ill. Reg. 15152, effective July 2, 2014; emergency amendment at 38 Ill. Reg. 15713, effective July 7, 2014, for a maximum of 150 days; amended at 38 Ill. Reg. 23768, effective December 2, 2014; emergency amendment at 39 Ill. Reg. 6945, effective May 1, 2015 through June 30, 2015; emergency amendment at 42 Ill. Reg. 13733, effective July 2, 2018, for a maximum of 150 days; emergency amendment to emergency rule at 42 Ill. Reg. 16311, effective August 13, 2018, for the remainder of the 150 days; emergency expired November 28, 2018; amended at 42 Ill. Reg. 16731, effective August 28, 2018; emergency amendment at 42 Ill. Reg. 17935, effective September 24, 2018, for a maximum of 150 days; emergency expired February 20, 2019; amended at 43 Ill. Reg. 6803, effective May 28, 2019; Subpart B and Subpart E recodified at 43 Ill. Reg. 7014; amended at 44 Ill. Reg. 2331, effective January 15, 2020; emergency amendment at 44 Ill. Reg. 12825, effective July 17, 2020, for a maximum of 150 days; amended at 44 Ill. Reg. 19760, effective December 11, 2020; amended at 45 Ill. Reg. 5877, effective April 26, 2021; amended at 45 Ill. Reg. 8319, effective June 28, 2021; amended at 45 Ill. Reg. 10015, effective July 26, 2021; amended at 47 Ill. Reg. 18051, effective November 21, 2023; amended at 48 Ill. Reg. 895, effective December 27, 2023; amended at 49 Ill. Reg. 10270, effective July 23, 2025; amended at 50 Ill. Reg. _____, effective _____.

SUBPART G: SPECIALIZED MENTAL HEALTH REHABILITATION FACILITIES

Section 146.910 Reimbursement

- a) Facilities licensed under Specialized Mental Health Rehabilitation Act of 2013 shall be reimbursed at:
 - 1) The rate in effect on June 30, 2014, less \$7.07 for each facility previously licensed under the Nursing Home Care Act on June 30, 2013;

- 2) The rate in effect on June 30, 2013 for each facility licensed under the Specialized Mental Health Rehabilitation Act on June 30, 2013;
 - 3) Effective for services provided on or after July 1, 2017, the rate in effect on June 30, 2017 increased by 2.8%;
 - 4) Effective for services provided on or after July 1, 2018, the rate in effect on June 30, 2018 increased by 4%; or,
 - 5) Effective for services provided on or after July 1, 2022, the rate in effect on June 30, 2022, increased by 5%.
 - 6) Effective for services provided on or after October 1, 2022, providers outside of the Chicago metro area will have their rates increased to reflect the Chicago area regional wage factor.
- b) Any adjustment in the support component or the capital component for facilities licensed by the Department of Public Health under the Nursing Home Care Act shall apply equally to facilities licensed by the Department of Public Health under the Specialized Mental Health Rehabilitation Act of 2013.
- 1) Beginning January 1, 2025, the real estate tax component of the payment rate shall be updated using the 2022 long term care site property tax bill included with the facility's 2023 cost report that has been filed with the department.
 - 2) The per diem rate shall be computed by dividing the allowable facility 2022 real estate tax bill costs reported in the 2023 cost report inflated to the midpoint of the rate year by the total number of patient days reported in the same cost report. Computation of the real estate tax component shall be based on capital days as defined in Section 140.570(b)(3).
- c) Notwithstanding the provisions set forth in 89 Ill. Adm. Code 153, facilities licensed under the Specialized Mental Health Rehabilitation Act of 2013 shall receive a payment in the amount of \$29.43 per licensed bed, per day, for the period beginning June 1, 2014 and ending June 30, 2014.
- d) Facilities licensed or provisionally licensed under the Specialized Mental Health Rehabilitation Act of 2013 on or before June 1, 2018 will be reimbursed for therapeutic visits that have been indicated by an interdisciplinary team as therapeutically beneficial at the following:

- 1) Effective for dates of service June 4, 2018 through July 26, 2018, therapeutic visits are reimbursed at a rate of 75% of the facility's rate as of June 4, 2018.
 - 2) Effective for dates of service on or after July 27, 2018 through June 30, 2020, therapeutic visits are reimbursed at a rate of 75% of the facility's rate as of July 27, 2018.
 - 3) Effective for dates of service on or after July 1, 2020, therapeutic visits are reimbursed at a rate of 75% of the facility's current rate.
 - 4) Facilities may not be reimbursed for more than 10 consecutive days of therapeutic visits and no more than 20 days of therapeutic visits per State fiscal year.
- e) Notwithstanding the provisions set forth in 89 Ill. Adm. Code 153 and in addition to the rate for recovery and rehabilitation, facilities licensed under the Specialized Mental Health Rehabilitation Act of 2013 shall receive an additional payment in the amount, as follows:
- 1) Effective for dates of service on or after July 1, 2019, a payment of *no less than \$10 per day, per single room occupancy rate*.
 - 2) Effective for dates of service on or after July 1, 2022, an additional *payment of no less than \$5 per day, per single room occupancy will be added to the existing \$10 additional per day, per single room occupancy rate for a total of at least \$15 per day, per single room occupancy*.
 - 3) Effective for dates of service on or after July 1, 2022, *an additional rate for dual-occupancy rooms will be no less than \$10 per day, per Medicaid-occupied bed, in each dual-occupancy room*. Under this subsection (e)(3), *"dual-occupancy room" means a room that contains 2 licensed beds*. [210 ILCS 49/5-107]
 - 4) Beginning on January 1, 2024, a payment of no less than \$10.50 per day, per single room occupancy shall be added to the existing \$15.00 additional per day, per single room occupancy rate for a total of at least \$25.50 per day, per single room occupancy.~~The add-on amounts under subsections (e)(1), (e)(2), and (e)(3) will not be applied to leave-of absence days.~~
 - 5) Beginning January 1, 2024, a payment of no less than \$4.50 per day, per dual-occupancy room shall be added to the existing \$10.00 additional per day, per dual-occupancy room rate for a total of at least \$14.50, per

Medicaid-occupied bed, in each dual-occupancy room.~~Effective for dates of service on or after November 1, 2022, a \$32 add-on to the facility rate for providers who:~~

~~A) Prior to November 1, 2022, had at least half of their facility rooms with 3 or more licensed beds; and~~

~~B) After November 1, 2022, reduced the number of licensed beds in all rooms to 2 licensed beds or fewer.~~

6) Beginning on January 1, 2025, a payment of no less than \$10 per day, per single room occupancy shall be added to the existing \$25.50 additional per day, per single room occupancy rate for a total of at least \$35.50 per day, per single room occupancy.

7) Beginning January 1, 2025, a payment of no less than \$8.75 per day, per dual-occupancy room shall be added to the existing \$14.50 additional per day, per dual-occupancy room rate for a total of at least \$23.25, per Medicaid-occupied bed, in each dual-occupancy room.

8) The add-on amounts under subsections (e)(1), (e)(2), (e)(3), (e)(4), (e)(5), (e)(6) and (e)(7) will not be applied to leave of absence days.

9) Effective for dates of service on or after November 1, 2022, a \$32 add-on to the facility rate for providers who:

A) Prior to November 1, 2022, had at least half of their facility rooms with 3 or more licensed beds; and

B) After November 1, 2022, reduced the number of licensed beds in all rooms to 2 licensed beds or fewer.

10) Beginning January 1, 2025, there shall be a separate per diem add-on paid solely and exclusively to facilities licensed under this Act that are licensed for only single occupancy rooms and have reduced their licensed capacity. No facility licensed under this Act shall be eligible for these payments if the facility contains any rooms that house more than a single occupant and have failed to reduce the facilities' licensed capacity. The payment shall be a per diem add-on payment. All add-on rates shall be based upon the new licensed capacity.

A) For facilities with less than 100 licensed beds, the add-on payment shall result in a rate not less than \$240 per day.

B) For facilities with 100 licensed beds to 130 licensed beds, the add-on payment shall result in a rate not less than \$230 per day.

C) For facilities with more than 130 licensed beds, the add-on payment shall result in a rate of not less than \$220 per day.

11) Effective for dates of service on or after July 1, 2025, an additional interim payment rate may be negotiated with the Department and paid to any facility that is reducing capacity within the facility to all single occupant rooms. Such interim rate shall reflect the reduction in census during the transition to single occupant rooms as well as the length of time necessary to transition individuals to community settings. The additional interim rate will be dependent on continued compliance with an agreed upon transition plan.

(Source: Amended at 50 Ill. Reg. _____, effective _____)