

ILLINOIS DEPARTMENT OF HUMAN SERVICES
DIVISION OF DEVELOPMENTAL DISABILITIES

FY 2013
PROGRAM MANUAL

Additional information regarding the developmental disabilities service system may be accessed via the Internet, at the Department of Human Services website:

<http://www.dhs.state.il.us/>

You may also contact the Division of Developmental Disabilities by phone at:

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AUTHORITY: Implementing Section 3 of the Community Services Act [405 ILCS 30/3], the Community Integrated Living Arrangements Licensure and Certification Act [210 ILCS 135], and Sections 15 and 15.2 of the Mental Health and Developmental Disabilities Administrative Act [20 ILCS 1705/15 and 15.2] and authorized by Section 9 of the Community Integrated Living Arrangement Licensure and Certification Act [210 ILCS 135/9], Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104].

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Section I

Introduction/Definitions/Overview of Services

Introduction

The Illinois Department of Human Services (DHS), Division of Developmental Disabilities' Program Manual is a guide to information about Illinois' developmental disabilities service system. In addition, this document provides supplementary contractual requirements for disability service providers under contract with DHS.

The Division of Developmental Disabilities (Division) has oversight for the Illinois system of programs and services specifically designed for individuals with developmental disabilities. DHS provides direct services to individuals with developmental disabilities and funds community services provided by local agencies.

The Division works as a partner with many local entities statewide to offer an extensive array of services which enable persons with developmental disabilities to reside with their families or in other community living situations, and to develop functional and occupational skills. DHS funds over 340 of these community service providers in every part of Illinois.

A system of comprehensive community service networks is in place to manage, by geographic area, state funds budgeted for developmental disabilities services. Network facilitators manage financial contracts and agreements with private Intermediate Care Facilities for Individuals with Developmental Disabilities (ICF/DDs) and coordinate community services with state-operated developmental centers. The Division develops policy and provides technical assistance and support to the networks.

The Division has administrative oversight and funds over 300 private Intermediate Care Facilities for Individuals with Developmental Disabilities (ICF/DD's) and Skilled Nursing Facilities for Pediatrics (SNF/Ped's). These residential settings in the community provide a continuous program of specialized and generic training, treatment, health services and related services that is directed toward the acquisition of the behaviors necessary for the individual to function with as much self determination and independence as possible and the prevention or deceleration of regression or loss of current optimal functional status (also known as active treatment). ICF/DD's may also offer nursing care and highly-structured programs.

The Division also manages the operations of residential services to individuals with developmental disabilities who reside in state-operated developmental centers (SODC's). These developmental centers generally provide residential services to persons with developmental disabilities who have a higher level of need, or to individuals in crisis. In addition, the SODC's provide an array of services and supports to assist individuals to reside in community living environments.

Definitions

Only individuals determined to have a developmental disability are eligible for services within the service system. A person is determined to have a developmental disability if the person has **Mental Retardation** or a **Related Condition**.

Mental Retardation refers to significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested before the age of 18 years. Significantly subaverage is defined as an intelligence quotient (IQ) of 70 or below on standardized measures of intelligence. This upper limit could be extended upward depending on the reliability of the intelligence test used.

A person with a **Related Condition** means an individual who has a severe, chronic disability that meets all of the following conditions:

- (a) It is attributable to--
 - (1) Cerebral palsy or epilepsy; or
 - (2) Any other condition, other than mental illness, found to be closely related to mental retardation because this condition results in impairment of general intellectual functioning or adaptive behavior similar to that of persons with mental retardation and requires treatment or services similar to those required for these persons.
- (b) It is manifested before the person reaches age 22.
- (c) It is likely to continue indefinitely.
- (d) It results in substantial functional limitations in three or more of the following areas of major life activity:
 - (1) Self-care.
 - (2) Understanding and use of language.
 - (3) Learning.
 - (4) Mobility.
 - (5) Self-direction.
 - (6) Capacity for independent living.

In addition, some programs require individuals to be eligible for federal matching funds under one of the Medicaid Home and Community-Based Services Waivers (HCBS Waivers). Criteria for HCBS Waiver eligibility are contained in the Home and Community-Based Services Waiver Provider Manual (Waiver Manual).

To determine Medicaid Home and Community-Based Services waiver eligibility, a Pre-Admission Screening (PAS) assessment by an Independent Service Coordination (ISC) agency is required for all individuals with developmental disabilities seeking covered services. The Provider shall not enroll individuals into Medicaid waiver services until completion of an assessment by PAS, issuance of a Department Award Memorandum, and completion of Medicaid enrollment.

Residential providers are required to remain operational year-round. The Department will fund those individuals being served by the Provider or for whom bed-hold funding is requested, consistent with the bed-hold policies established by the Department. The Provider shall comply with bed-hold policies and stipulations as issued by the Department. Payment will not be made for individuals receiving waiver services on dates when the individual is not enrolled in Medicaid unless the Division grants prior approval.

Overview of Services

Pre-Admission Screening (PAS) services are provided by agencies that act as the “front door” for entry into the developmental disabilities system. The role of the PAS process is to ensure compliance with applicable Federal and State laws, arrange for and conduct assessments, make necessary determinations regarding eligibility for services, educate individuals and families, and make referrals and provide linkage to appropriate and needed services. The PAS process prevents inappropriate admissions to long term care facilities (nursing facilities and Intermediate Care Facilities for persons with Developmental Disabilities [ICF/DDs]) and inappropriate enrollments in waiver programs.

The **Individual Service and Support Advocacy (ISSA)** program represents the Department’s interests in determining whether program services are being provided in the interest of and to the satisfaction of individuals receiving services; alerts the Division when monitoring and technical assistance are necessary; and provides support to individuals, guardians and providers in working through a variety of service issues, including those requiring conflict resolution, increased communication, and possible changes in support levels.

Independent Service Coordination (ISC) promotes service accessibility and continuity of care, and seeks to maximize an individual’s potential for independence, productivity and community integration. An independent service coordinator collects information on individuals seeking developmental disabilities services and enters the information on the Prioritization of Urgency of Need for Services (PUNS) database. An independent service coordinator ensures the completion of comprehensive assessments, development and implementation of an individual’s service plan, linkages to support services, and provision of on-going service monitoring and advocacy. Additional information can be found in Section IV, Program Descriptions.

Community Residential Services are provided in Intermediate Care Facilities for persons with developmental disabilities (ICF/DD’s), Specialized Living Centers (SLC’s), Skilled Nursing Facility-Pediatrics (SNF-Ped’s), Supported Living Arrangements (SLA’s), Special Home Placements [SHP’s], Home Individual Programs [HIP’s], Community Living Facilities,(CLF’s), Children’s Group Homes (CGH), Child Care

Institutions (CCI's), and Community-Integrated Living Arrangements (CILA's).

Day and Vocational Services include developmental training, regular work/sheltered employment, supported employment, adult day care, at home day services, and other day program. These services are provided by community-based agencies and organizations to individuals throughout Illinois. These services are designed to enhance a person's skill levels in the major life areas, work-related activities, and employment skills.

Individual and Family Support Services enable people with developmental disabilities to continue to reside in their own or family homes while receiving needed Department-funded support services, such as Respite, Family Assistance Program, Home-Based Support Services, and other in-home support services.

State Operated Developmental Centers (SODC's) provide intensive services that presently cannot be provided in family homes or in community-based residential programs for people with developmental disabilities, primarily mental retardation. Emphasis on assisting people to achieve their personal goals of living where and with whom they choose, coupled with the development of community resources over the past several years, has resulted in census reduction at the SODC's. In particular, the number of children and adolescents living in SODC's has been declining. These changes are consistent with national trends in residential services where focus has shifted to helping people remain in their homes or community-based residential programs.

Section II

Policies and Procedures

The Department's policies and procedures for service providers are contained within:

- DHS Community Services Agreement
- Division Attachment "A"
- Division Program Manual

Section III

Contract and Amendment Process

Contract

The DHS Community Services Agreement (CSA) between the Department and the Provider is generally referred to as the Agreement and consists of several parts:

- **DHS Community Services Agreement** containing the standard contract language used for all Department agreements.
- **Contract Attachment “A”** containing specific agreement requirements related to programs funded by the Division. In particular, Section II “Applicable Rules and Guidelines,” provides a listing of the Federal and State laws, rules, policies and procedures.
- **Contract** Exhibits showing the contract information, the type of services, the method of payment, the method of reconciliation, and contract deliverables.

The Department will initiate the Agreement, make it available for the Provider for review and signature, obtain the Secretary’s signature and return a copy of the executed agreement to the Provider. The Agreement is not effective until signed by the Secretary.

Amendment Process

The Department will initiate a two-party signed amendment to the contract when:

- The Department adds services to the Provider’s program that are beyond the scope shown in Attachment “A”.

The Department will modify the contract by letter notification when:

- The Department revises the scope of services shown in the Exhibits to the Community Service Agreement; and/or
- The Department increases or decreases a fixed/maximum funding amount, for example: grant-funded programs, respite or Program 65H, (fee-for-service intermittent CILA) or adds program services.

Section IV
Program Descriptions

Screening, Advocacy & Service Coordination

Pre-Admission Screening (PAS) – 780
Individual Service and Support Advocacy (ISSA) – 50D
Independent Service Coordination (ISC) – 500
Bogard Service Coordination – 781

PROGRAM NAME: Pre-Admission Screening (PAS)

PROGRAM CODE: 780

FUNDING MECHANISM(S): X GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

Principal services offered through the Pre-Admission Screening (PAS) program include the provision of prior authorization for all individuals for whom there is a reasonable basis to suspect the presence of a developmental disability who request Medicaid-funded services or nursing facility services. Specific PAS functions include the following:

- Conducting and securing assessments to determine service eligibility;
- Education of individuals, guardians, and families about service opportunities, including generic and specialized services;
- Notices of determinations provided to individuals and guardians;
- Assistance with the choice process;
- Referral;
- Assistance with service selection and linkage;
- Assistance in preparation and approval of submissions to the Department of Human Services (DHS) for capacity and rate requests when necessary (e.g., CILA and purchase of service programs);
- Monitoring for four weeks following initiation of services; and
- Accessibility 24-hours per day, 365 days per year for individuals in times of crisis.

PAS activity is governed by the DD PAS Manual, the Waiver Manual, and the Department of Healthcare and Family Services' (formerly the Department of Public Aid) Universal Pre-Screening Rule (89 Ill. Adm. Code 140.642). PAS agencies must comply with these and related documents. The Department reserves the right to review and reverse all determinations by PAS agencies, in keeping with procedures and policies laid out in those documents and pertinent memoranda and policy statements issued by the Division and other governmental entities, such as the Department of Healthcare and Family Services.

ELIGIBILITY REQUIREMENTS:

Individuals for whom a reasonable basis exists to believe they have a developmental disability who are requesting Medicaid-funded DD services or nursing facility services.

PROGRAM NAME: Individual Service and Support Advocacy (ISSA)

PROGRAM CODE: 50D

FUNDING MECHANISM(S): _____ GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: The Individual Service and Support Advocacy (ISSA) program provides collaborative assistance to both individual recipients and their providers in order to enhance the delivery and effectiveness of service provision. (Refer to “ISSA Guidelines” and Waiver Manual for detailed program information.) Principal services offered through the ISSA program include the following:

- A minimum of four visits per year (approximately one per quarter), performed with the foreknowledge of the guardian (if applicable) and allocated according to the following guidelines:
 - one visit for participation in the Individual Service Plan (ISP);
 - one visit to either the individual’s residence or day program; and
 - one visit each to the individual’s residence and day program if the individual participates in a day program (if not, this visit may be to the person’s home), to complete Visiting Notes that assess whether program services are being provided in the interest of and to the satisfaction of individuals receiving the services, and to review the individual’s health, safety, and well-being;
- Collaborative facilitation, with service providers, of conflict resolution for matters of concern to the individual and/or guardian and provider, including satisfaction, health, safety, well-being, and development and implementation of the ISP;
- Referral to the DD network facilitator or Bureau of Transitional Services Representative for individuals discharged from an SODC within the past 12 months, for monitoring and/or technical assistance regarding unresolved matters of concern;
- Annual re-determination of waiver eligibility;
- Accessibility 24-hours per day, 365 days per year for individuals in times of crisis; and
- Review and verification of information submitted for the CILA program.
- Review and verification of Special Funding Requests and Staff Add-On Requests.

ELIGIBILITY REQUIREMENTS: Recipients of services must be members of the specific population. (See below.)

ELIGIBLE POPULATION: Persons served include the following:

- All persons enrolled in one of the Home and Community-Based Services Waivers, including members of the Bogard class;
- Members of the Bogard class in Intermediate Care Facilities for Persons with Developmental Disabilities (ICFs/DD), not including State-Operated Developmental Centers.

EXPECTED OUTCOMES: Persons receiving ISSA will receive the following:

- A minimum of four (4) visits per year to program recipients within indicated time frames and at specified locations;
- Collaborative facilitation, with service providers, of conflict resolution, when indicated and in timely fashion, for matters of concern to the individual and/or guardian and provider, including satisfaction, well-being, and programmatic issues;
- Appropriate and timely referral to the DD Network Facilitator, or Bureau of Transitional Services Representative for individuals discharged from an SODC within the past 12 months, for monitoring and/or technical assistance regarding unresolved matters of concern;
- Enhancement of individual recipient satisfaction, as evidenced by Consumer Satisfaction Survey longitudinal scores;
- Annual re-determination of waiver eligibility within required time frames;
- Review and verification of CILA rate information and
- Review and verification of Special Funding Requests and Staff Add-On Requests.

PROGRAM NAME: Independent Service Coordination

PROGRAM CODE: 500

FUNDING MECHANISM(S): X GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

The Independent Service Coordination (ISC) Program provides education, referral, and linkage services for children and adults with developmental disabilities. General ISC functions include:

- Intake;
- Education;
- Goal setting, referral and linkage to both generic and specialized services;
- Transportation to facilitate referrals and linkage;
- Planning (only in those instances where not otherwise provided by other programs)
- Crisis intervention

In addition, this ISC program covers the following specific responsibilities:

- Completion of Prioritization of Urgency of Need for Services (PUNS) database forms, as instructed by the Department, for all individuals in the assigned geographic area who seek inclusion in the database of unmet need
- Completion of mandated discharge, linkage and aftercare per 59 Ill. Adm. Code 125 (Discharge/Linkage/Aftercare).
- Participation in planning efforts for adolescents aging out of the public school system

ELIGIBILITY REQUIREMENTS: Persons eligible for ISC are:

1. Children who are seeking DD services (except admission to a Skilled Nursing Facility/Pediatric Services, which is handled by Pre-Admission Screening (PAS) and

2. Adults seeking developmental disabilities services whose service needs have not been determined or who are not eligible for PAS or waiver services. Independent Service Coordination is not intended to replace internal case management provided by direct service providers.

PRIORITY OR TARGET POPULATION: Due to limited funding, availability of services to individuals is prioritized as follows, in priority order, beginning with the most critical need:

- All individuals seeking completion of PUNS forms:

- Individuals subject to the provisions of 59 Ill. Adm. Code 125 (Discharge/Linkage/Aftercare), as needed by the Department to comply with this provision;
- Individuals for whom the Department requests involvement due to special circumstances;
- Adolescents aging out of the public school system;
- Individuals whose current services or living situations are unstable, and for whom service coordination services are not provided through other programs; and
- Individuals who are unable to access services who have few family or natural supports.

EXPECTED OUTCOMES: The Department will have an accurate database of individuals with unmet needs. Individuals will access developmental disabilities services appropriate to their needs, whether these are of a temporary, time-limited nature (e.g., information and referral) or of long-term duration (e.g., residential services). Individuals requiring mandated contacts will receive them.

PROGRAM NAME: Bogard Service Coordination

PROGRAM CODE: 781

FUNDING MECHANISM(S): X GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: The Bogard Service Coordination program provides the following services:

- Provision of assessments and reassessments of needs and goals;
- Coordination of the Individual Service Plan (ISP);
- Specialized Service facilitation and brokering for persons in nursing facilities;
- Development of natural support networks;
- Performance of activities to maintain or improve availability, accessibility, and quality of services;
- Assistance with the procurement of adaptive equipment through the Department of Healthcare and Family Services;
- Monitoring the implementation of the ISP, as well as the individual's health, safety and well-being, through site visits to residential and day program sites;
- Utilization of problem-solving procedures to achieve conflict resolution;
- Crisis Intervention;
- Provision of transportation to facilitate the selection of employment and residential services among other options; and
- Provision of the Bogard choice process, as directed in the Modified Bogard Consent Decree.

ELIGIBILITY REQUIREMENTS: The individual must be an adult with a developmental disability who has been designated in writing by DHS as a Bogard class member. Bogard class members are defined in the modified Bogard Consent Decree, pg.1, Section A., as persons, 18 years of age or older, with Developmental Disabilities (this term is further defined in Section III of the modified decree), who, on or after March 23, 1986, resided in an Intermediate Care or Skilled Nursing Facility in Illinois as a Medicaid recipient for a period of more than 120 days in the aggregate. No person first admitted to an Intermediate Care Facility or a Skilled Nursing Facility on or after April 1,1994, will be a member of the class.

ELIGIBLE POPULATION: Bogard class members who receive Bogard ISC services are those class members living in nursing facilities, nontraditional DD settings (such as State Operated Mental Health Centers, shelter care homes, their own or family homes, apartments without DD services), and State Operated Developmental Centers. (Note: Bogard class members who receive Individual Service and Support Advocacy services are those class members receiving waiver services [such as Community-Integrated Living Arrangement, Developmental Training or

Home-Based Support Services] or Intermediate Care Facilities for persons with Developmental Disabilities [not including State-Operated Developmental Centers.

EXPECTED OUTCOMES: Individuals will develop new skills and maintain existing ones through specialized services or active treatment, receive adaptive equipment as appropriate, live in appropriate community-based residential settings if they so choose, and receive service coordination on a regular basis.

Section IV
Program Descriptions

Residential Services

Intermediate Care Facilities / Developmental Disabilities (ICF/DD)
State Operated Developmental Centers (SODC)
Supported Living Arrangement (SLA) – 42D
Special Home Placement (SHP) – 41D
Home/Individual Placement (HIP) – 68D
Children’s Group Home (CHG) – 17D
Child Care Institution (CCI) – 19D
Community Living Facility (CLF) – 67D
Community Integrated Living Arrangement (CILA) – 60D, 61D, 65H

PROGRAM NAME: Intermediate Care Facility for Individuals with Developmental Disabilities
(ICF/DD)

PROGRAM CODE: N/A

FUNDING MECHANISM(S): GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

An ICF/DD is a residential facility of three or more persons, or a distinct part thereof, serving residents of which more than 50 percent have mental retardation or a related condition. Such facilities are licensed by the Department of Public Health as an Intermediate Care Facility for individuals who have a developmental disability or as a SNF/PED. The ICF/DD is a continuous program of specialized and generic training, treatment, health services and related services that is directed toward the acquisition of the behaviors necessary for the individual to function with as much self determination and independence as possible and the prevention or deceleration of regression or loss of current optimal functional status. It does not include services to maintain individuals who are able to function with little supervision or in the absence of a continuous program. ICF/DD's are certified by the federal Centers for Medicare and Medicaid Services to receive Medicaid payments. The individuals for whom such payments are made shall be receiving active treatment in accordance with 42 Code of Federal Regulations 483.440. (References: 42 CFR 440.150, 42 CFR 483.440(a), 89 Ill. Adm. Code 144 and 77 Ill. Adm. Code 350.)

ELIGIBILITY REQUIREMENTS:

Individuals who have mental retardation or a related condition and who have had a comprehensive evaluation covering physical, emotional, social and cognitive factors, conducted by an appropriately constituted interdisciplinary team, and who are in need of continuous habilitation services. (References: 42 CFR 440.150 and 77 Ill. Adm. Code 350.)

PRIORITY OR TARGET POPULATION:

Individuals who have mental retardation or a related condition and meet the criteria set forth in the Waiver Manual.

EXPECTED OUTCOMES:

Individuals will develop new living skills and maintain existing living skills.

PROGRAM NAME: State-Operated Developmental Centers

PROGRAM CODE: N/A

FUNDING MECHANISM(S): _____ GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

State-Operated Developmental Centers (SODCs) are specialized Intermediate Care Facilities/Developmental Disabilities (ICFs/DD) for persons with developmental disabilities who are unable to be served in a community setting due to intense behavioral and/or medical difficulties. Admission to one of the eight SODCs occurs only after a careful screening by the Pre-Admission Screening (PAS) agency and review by a team that includes the individual, guardian, family, current and prospective service providers, network staff from the Division and representatives from the SODC. Intensive services will be provided to the individual with the goal of restoring a community living situation for the person as quickly as possible. Essential to successful habilitation in an SODC is the participation in transitional services by the appropriate PAS agency and community service providers.

ELIGIBILITY REQUIREMENTS: Must have a developmental disability and require intensive supports/supervision not available in a community setting. Persons must be screened by a PAS agency, receive technical assistance through the DD Network Clinical and Administrative Review Team (CART), and be approved for admission by an SODC representative.

PRIORITY OR TARGET POPULATION: Individuals with developmental disabilities who are unable to have needs met in the community.

EXPECTED OUTCOMES: The individual will receive intensive services with the goal of restoring them to a living situation in the community as quickly as possible.

PROGRAM NAME: Supported Living Arrangement (SLA)

PROGRAM CODE: 42D

FUNDING MECHANISM(S): GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

A Supported Living Arrangement (SLA) is a residential program approved by the Division to help individuals reach a higher level of independent living. The SLA provides, through direct or consultative staff, minimum support, training and direction that enhance the individuals' skills and lead to total independence and social integration in the community. Individuals may live in their own apartments, shared apartments, single family homes, shared homes, apartment complexes, boarding houses, group homes or in congregate living arrangements. The function of the SLA is to normalize living conditions and, as far as possible, replicate home-style living as it exists in the community. This program is not being expanded.

ELIGIBILITY REQUIREMENTS: Not Applicable.

PRIORITY OR TARGET POPULATION: No placements are being made in this program.

EXPECTED OUTCOMES: Individuals will successfully integrate into the community by living in their own homes, working in the community, and participating in social activities in the community.

PROGRAM NAME: Special Home Placement (SHP)

PROGRAM CODE: 41D

FUNDING MECHANISM(S): ___ GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

A SHP residential program is provided in a home that is expected to provide an appropriate environment, adequately meeting physical, social, and intellectual needs of an individual with developmental disabilities. This is a family home that is licensed by DCFS and supervised by a child welfare agency if children are served. DHS approves adult homes. Up to five children or two adults may be served in each home. The program meets the needs of individuals who benefit from interaction in a family setting. SHP settings are foster care models, where an individual with developmental disabilities resides with a host family. This is a non-Medicaid, state-funded program.

ELIGIBILITY REQUIREMENTS:

Not Applicable. The program is not being expanded nor are vacancies being filled.

PRIORITY OR TARGET POPULATION:

No placements are being made in this program.

EXPECTED OUTCOMES:

Individuals will live in family homes while receiving services tailored to meet their needs.

PROGRAM NAME: Home Individual Program (HIP)

PROGRAM CODE: 68D

FUNDING MECHANISM(S): GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: A HIP residential program is provided in a family environment licensed by the Department of Children and Family Services if children are served, or approved by DHS if adults are served. The program allows resources to be used in response to the individual's developmental needs as identified by his or her Individual Service Plan (ISP). Day programs must be provided outside the residential setting. HIP settings are frequently host family models. This is a non-Medicaid, state-funded program.

ELIGIBILITY REQUIREMENTS: Not applicable. This program is not being expanded nor are vacancies being filled.

PRIORITY OR TARGET POPULATION: No placements are being made in this program.

EXPECTED OUTCOMES: Individuals will live in small, community-based residential settings while receiving services tailored to meet their needs.

PROGRAM NAME: Children's Group Home

PROGRAM CODE: 17D

FUNDING MECHANISM(S): _____ GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: Residential Services for children with developmental disabilities programs are designed to provide a structured environment to children and adolescents who cannot reside in their own home. Residential services are provided in a setting that is licensed by the Department of Children and Family Services as a Children's Group Home (CGH) (17D). CGH settings can serve no more than ten children. Children must be enrolled in a school program approved by the Illinois State Board of Education. Tuition is paid for by the local school district. Residential funding by the Division is infrequent and is usually provided only after in-home supports have been tried and have failed. For Child Group Home (CGH – 17D) services, the child must be determined eligible for the Residential Waiver for Children and Young Adults with Developmental Disabilities.

ELIGIBILITY REQUIREMENTS: Parent/guardian must be a resident of the State of Illinois. The child must be enrolled in a school program approved by the Illinois State Board of Education. A determination must have been made and documented in the Individual Education Plan by the child's interdisciplinary team that the child's needs cannot be met without the provision of a residential setting outside the family home. The parent/guardian must agree that the child's educational, social, emotional, and or habilitative needs require the provision of residential services outside the home. The child must be determined to have a developmental disability. Application must be completed before age 17 years and six months.

Individuals must be screened for eligibility and offered an informed choice by a DHS-designated Pre-Admission (PAS) agency prior to receiving services. Individuals must be enrolled in the Children's Residential Medicaid waiver if placement will occur in a CGH – 17D setting. If receiving services through another Medicaid waiver, the individual must choose to receive services through the DD Medicaid waiver and can not be enrolled in any other Medicaid waiver including DHS Division of Rehabilitation Services, Department on Aging, or the Department of Healthcare and Family Services (DHFS)/ Division of Specialized Services for Children Medically-Fragile Technology-Dependent Waiver.

PRIORITY OR TARGET POPULATION: Children with a developmental disability with an immediate, long term need due to unexpected loss of current residence, physical or sexual abuse, neglect, incapable care-giver, or loss of a care-giver.

EXPECTED OUTCOMES: Children will receive services and supports in a safe environment and will eventually return home to family or move to a less restrictive community setting.

PROGRAM NAME: Child Care Institution Programs

PROGRAM CODE: 19D

FUNDING MECHANISM(S): _____ GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: Residential Services for children with developmental disabilities programs are designed to provide a structured environment to children and adolescents who cannot reside in their own home. Residential services are provided in a setting that is licensed by the Department of Children and Family Services as a Residential School/Child Care Institution (CCI)(19D). CCI settings are licensed to serve more than ten children. Children must be enrolled in a school program approved by the Illinois State Board of Education. Tuition is paid for by the local school district. Residential funding by the Division is infrequent and is usually provided only after in-home supports have been tried and have failed.

ELIGIBILITY REQUIREMENTS: Parent/guardian must be a resident of the State of Illinois. The child must be enrolled in a school program approved by the Illinois State Board of Education. A determination must have been made and documented in the Individual Education Plan by the child's interdisciplinary team that the child's needs cannot be met without the provision of a residential setting outside the family home. The parent/guardian must agree that the child's educational, social, emotional, and or habilitative needs require the provision of residential services outside the home. The child must be determined to have a developmental disability. Application must be completed before age 17 years and six months. Individuals must be screened for eligibility and offered an informed choice by a DHS-designated Pre-Admission (PAS) agency prior to receiving services.

Individuals living in a CCI (19D) setting are not eligible for services and supports under the adult DD Medicaid waiver.

PRIORITY OR TARGET POPULATION: Children with a developmental disability with an immediate, long term need due to unexpected loss of current residence, physical or sexual abuse, neglect, incapable care-giver, or loss of a care-giver.

EXPECTED OUTCOMES: Children will receive services and supports in a safe environment and will eventually return home to family or move to a less restrictive community setting.

PROGRAM NAME: Community Living Facility (CLF)

PROGRAM CODE: 67D

FUNDING MECHANISM(S): GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: A CLF is a residential setting licensed by the Department of Public Health that serves individuals with developmental disabilities in skill training programs that provide guidance, supervision, training and other assistance, with the goal of eventually assisting these individuals in moving to independent living. These programs include housekeeping, money management, social skills, and community living skills. Individuals are required to participate in day activities, such as vocational training, sheltered workshops or regular employment. A CLF shall not be a nursing or medical facility and shall house no more than 20 residents, excluding staff, except as provided for in Section 18 of the Community Living Facilities Licensing Act [210 ILCS 35/18]. (Reference: 77 Ill. Adm. Code 370.240) The Department continues to support these programs and vacancies are filled.

ELIGIBILITY REQUIREMENTS: Adults age 18 and over who have a mild or moderate developmental disability and who have been determined, by an appropriate evaluation, to have a reasonable potential for returning to their own homes or leading independent lives. Such persons shall not require prenatal or maternity care, unless adequate prenatal and other medical services from community sources are not available to them; shall not require mental health treatment or have serious mental or emotional problems; shall not be destructive to property or self; shall not require nursing or personal care other than oversight and supervision; shall not have a communicable disease including active tuberculosis. (Reference: 77 Ill. Adm. Code 370.520) Individuals must be screened for eligibility and offered an informed choice by a DHS-designated Pre-Admission (PAS) agency prior to receiving services. Individuals must be enrolled in the adult Medicaid waiver if placement will occur in an in-state, CLF that serves 16 or fewer individuals (i.e. a waiver CLF site).

Individuals must be screened for eligibility and offered an informed choice by a DHS-designated Pre-Admission (PAS) agency prior to receiving services.

PRIORITY OR TARGET POPULATION: Adults age 18 and over who have a mild or moderate developmental disability and who are enrolled in the adult Medicaid waiver (for waiver CLF sites).

EXPECTED OUTCOMES: Percentage of individuals who achieve sufficient independence to return to their own homes or lead independent lives.

PROGRAM NAME: Community-Integrated Living Arrangement (CILA)

PROGRAM CODE: 60D, 61D, 65H

FUNDING MECHANISM(S): _____ GRANT ___X___ FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: A flexible living arrangement for adults with a developmental disability that focuses on the service needs of the individual in his or her home or a community setting where eight or fewer individuals live together under the supervision of a licensed agency. CILA services are provided in compliance with 59 Ill. Adm. Code 115 (Standards and Licensure Requirements for Community-Integrated Living Arrangements). The Department continues to support programs 61D and 65H although these programs are not being expanded and vacancies are not being filled. Program 60D is being expanded as appropriations permit.

ELIGIBILITY REQUIREMENTS: Individuals served in this program must be determined to have a developmental disability. Must not be a danger to self or others, as defined in the Procedures Manual for Developmental Disabilities Pre-Admission Screening Agencies.

Individuals must be screened for eligibility and offered an informed choice by a DHS-designated Pre-Admission (PAS) agency prior to receiving services.

If receiving services through another Medicaid waiver, the individual must choose to receive services through the adult DD Medicaid waiver and can not be enrolled in any other Medicaid waiver including Department of Rehabilitation Services, Department of Aging, or the Department of Healthcare and Family Services (DHFS) Division of Specialized Services for Children Medically-Fragile Technology-Dependent Waiver.

PRIORITY OR TARGET POPULATION CRITERIA: Individuals must meet the residential priority population criteria outlined in the Waiver Manual or be selected from the PUNS database based on available funding.

EXPECTED OUTCOMES: Individuals will live in small, community-based residential settings as alternatives to institutions while receiving services tailored to meet their needs. Some individuals eventually may move from 24 hour supports to less intensive supports as a result of habilitation received in CILA.

Section IV
Program Descriptions

Day Services

Developmental Training (DT) – 31A, 31U, 31S
Regular Work / Sheltered Employment (RW) - 38U
Supported Employment (SEP) – 36G, 36U, 39G, 39U
**Other Day Program; Adult Day Care; At-Home Day Program – 30U, 35U,
37U**

PROGRAM NAME: Day Program-Developmental Training (DT)

PROGRAM CODE: 31A, 31U, 31S

FUNDING MECHANISM(S): GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

Developmental Training (DT) is a program of day habilitation that focuses on the development of and enhancement of daily adaptive living skills and economic self-sufficiency. Typical activities should be functional and performed at the natural time and in the natural environment, properly sequenced, and be developmentally and age appropriate. Such activities include fine and gross motor development, attention span development, safety, problem solving, grooming, dressing skills, toileting, eating, communications, reduction of maladaptive behavior and promotion of adaptive behavior, quantitative skills, and capacity for independent living. Developmental Training also enhances an individual's ability to engage in productive work activities through a focus on professional development, which includes such habilitative goals as cooperation, attendance, productive capacity, and task completion. DT is governed by 59 Ill. Adm. Code 119 (Minimum Standards for Certification of Developmental Training Programs). This program provides the opportunity to participate in productive work and to be compensated for that work in accordance with the Fair Labor Act of 1938 (29 U.S.C. 208).

ELIGIBILITY REQUIREMENTS:

For Programs 31A and 31U, an individual must be enrolled in the adult Medicaid waiver and must meet the Criteria for Participation of Individuals in Rule 119.205. For Program 31S, the individuals must reside in an SODC.

PRIORITY OR TARGET POPULATION CRITERIA:

For Program 31U, individuals who have been identified to not currently be receiving any support services from the Division or the Division of Rehabilitation Services (except vocational rehabilitation services). With this population, if requests exceed available capacity, the State will prioritize based on the support service priority populations in the Waiver Manual. For Program 31S, the individual must reside in an SODC and be able to participate in an off-campus community DT program.

EXPECTED OUTCOMES:

Outcomes should be based on progress towards resolution of identified needs as outlined in the Individual Service Plan. These outcomes may include the following:

- Progress in acquisition of basic living skills;
- Reduction in maladaptive behavior with corresponding increase in adaptive behavior;

- Increase in attaining skills;
- Progress toward acquisition of vocational skills;
- Movement toward becoming a worker who is compensated commensurately with the task either with or without a job coach;
- Movement toward productive work in an integrated work setting in which non-disabled workers are also employed; and
- Maintenance or increase in level of program satisfaction by the individual as evidenced by agency or State-level surveys of elements of satisfaction.

PROGRAM NAME: Regular Work/Sheltered Employment

PROGRAM CODE: 38U

FUNDING MECHANISM(S): __GRANT __X__ FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

Regular Work/Sheltered Employment provides long-term employment in a sheltered environment for individuals whose functional levels require supervision but are not precluded from future movement into a Supported Employment position or a competitive employment position. Regular Work/Sheltered Employment provides general work supervision, including direction and on-the-job training in such areas as work expectations, workplace behavior, compliance to workplace safety standards, production and task completion. This program provides the opportunity to participate in productive work and to be compensated for that work in accordance with the Fair Labor Act of 1938 (29 U.S.C. 208).

ELIGIBILITY REQUIREMENTS: This program (38U) is provided to individuals 18 years or older determined to have a developmental disability that possess basic workplace skills. Often these skills have been developed in a Developmental Training program. Prior approval is required from the Division in order to provide and bill for 38U services.

PRIORITY OR TARGET POPULATION: Individuals with a developmental disability who have minimal or no need for Developmental Training and who desire work in a setting that is not integrated physically or socially with the general community.

EXPECTED OUTCOMES: The program enables an individual to develop and improve work attitudes, social behaviors, skill acquisition and productive earning ability. Remuneration is for work commensurate with the task. The individual may remain in the program indefinitely or transition to other programs such as Supported Employment.

PROGRAM NAME: SUPPORTED EMPLOYMENT (SEP)

PROGRAM CODE: 36G, 36U, 39G, 39U

FUNDING MECHANISM(S): ___ GRANT ___X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: The supported employment program provides the necessary supports and services to assist individuals with developmental disabilities to work for compensation in a variety of community-integrated work environments in which persons without disabilities are also employed. The program is designed to promote regular interaction with persons without disabilities who are not paid care givers or service providers. Supported employment may be provided in individual placements or in group settings of no more than eight individuals with disabilities. Remuneration for work commensurate with the task is expected.

ELIGIBILITY REQUIREMENTS: For Programs 36U, 36G, 39U and 39G (FFS), the individual must be enrolled in the adult Medicaid waiver. Funding for Programs 36U, 36G, 39U, and 39G will be made available only if Division of Rehabilitation Services funding is not available on a prior approval basis.

PRIORITY OR TARGET POPULATION: Eligible individuals who have a basic level of work skills and who require job coach services to work in an integrated environment.

EXPECTED OUTCOMES: It is expected that individuals in the Supported Employment program will need fewer supports over time, that they will see their incomes rise over time, and that they will progress into full-time competitive employment. It is expected that individuals will make minimum wage or more.

PROGRAM NAME: Other Day Program, Adult Day Care, At Home Day Program

PROGRAM CODE: 30U, 35U, 37U

FUNDING MECHANISM(S): GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: Other Day Program (30U) provides a structured individualized program of community habilitation activities for individuals for whom the more traditional day program is not appropriate and who choose to participate in a variety of alternative day activities.

Adult Day Care (35U) program provides direct support and supervision of adults 60 years of age and older. Intervention and activities of adult day care promote physical well being and fitness, socialization and tasks that stress the maintenance of coordination skills, as well as reducing the rate of loss of current skills that normally accompany the physical aspect of the aging process. All providers of Adult Day Care (35U) must be contracted with the Illinois Department on Aging.

At Home Day Program (37U) provides a structured individualized program of in-home and community habilitation activities for individuals who are unable to participate in out-of-home day programs due to medical or behavioral issues, or who are over age 60 and choose not to participate in an out-of-home day program.

ELIGIBILITY REQUIREMENTS: Individuals must be determined to have a developmental disability and must be enrolled in the adult DD Medicaid waiver. Prior approval is required from the Division in order to provide and bill for these services.

PRIORITY OR TARGET POPULATION: In order to participate in Programs 30U and 37U, individuals must reside in a CILA setting. For Program 35U, individuals must be enrolled in an adult waiver option.

EXPECTED OUTCOMES: Receiving services through Programs 30U, 35U, or 37U will decrease the need for institutional placement or other types of long term residential support services by providing skills that promote independence in daily living and economic self-sufficiency. Additionally, receiving Program 35U services will enable individuals to maintain or improve their current functioning or ability level by decelerating regression or loss of optimal levels.

Section IV Program Descriptions

Other Support Services

**In Home Respite, Residential Respite, Group Respite – 87D, 89D, 880
Family Assistance Program - 69**

**Home Based Support Services HBS Service Facilitation, Caregivers, HBS
Personal Support, SLS Nursing – RN, SLS Nursing Service – LPN, SLS
Transportation, SLS Personal Emergency Response – 55A, 55B, 55D, 55N,
55P, 55T, 55W**

**Therapies: Behavior Intervention and Treatment; Behavior Counseling–
Individual and Group; Behavior Therapy–Individual and Group; Waiver
Physical Therapy, Waiver Occupational Therapy, Waiver Speech Therapy, –
56U, 57U, 57G, 58U, 58G, 52P, 52O, 52S**

**Bogard Specialized Services – 75A-76Z
Demonstration/Special Projects – 450
Dental Services – 400
Epilepsy – 250
Related Supports – 73D**

**Adaptive Equipment, Assistive Technology, Home
Accessibility Modifications, Temporary Intensive Staffing,
Vehicle Modifications – 53E, 53T, 53H, 53D, 53R, 53V**

CILA Startup, Crisis Services – 53B and 53C

PROGRAM NAME: In-Home Respite, Residential Respite, Group Respite

PROGRAM CODE: 87D, 89D, 880

FUNDING MECHANISM(S): X GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

The In-Home Respite (87D FFS) program provides intensive or non-intensive support services to help maintain individuals in their homes. The Residential Respite (89D FFS) program provides short-term stays for individuals in a residential setting that is licensed, certified or approved and is appropriate for their needs. Supervision and care for children and adults in a group setting for a portion of the day, typically before and/or after school or day program, is offered through the Group Respite (880 GIA) program. This program also provides social interaction and increased inclusion and exposure to the community.

ELIGIBILITY REQUIREMENTS: Individuals must be determined to have a developmental disability. Individuals enrolled in DD residential services are not eligible to receive respite services.

PRIORITY OR TARGET POPULATION: Preference for In-Home Respite is given to adults and children age twelve or older who need care because of their developmental disability, and children ages eleven and younger whose developmental disability requires care by a worker with special skills or training beyond the skills and training required of any worker qualified to care for non-disabled children.

EXPECTED OUTCOMES: A decrease in the need for institutional placement or other types of long-term residential support services by assisting the individual or the family in maintaining in-home residence.

PROGRAM NAME: Family Assistance Program

PROGRAM CODE: 69

FUNDING MECHANISM(S): X GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: This program provides a monthly cash stipend for the eligible child and his/her family. The stipend is to be used to assist with the cost of caring for a child with a developmental or mental disability. The monthly stipend may be used for such things as respite care, medical expenses, therapies, counseling, and home remodeling to make it more accessible for the child. These are just a few of the ways families may utilize the Family Assistance Program.

ELIGIBILITY REQUIREMENTS: Not Applicable. The program is not being expanded nor are vacancies being filled.

PRIORITY OR TARGET POPULATION: No placements are being made in this program. Instead the Department is focusing resources on the new Children's Support Waiver.

EXPECTED OUTCOMES: Families will be able to continue to care for children in their own homes.

PROGRAM NAME: Home-Based Support Services (HBS)

PROGRAM CODE: See Below

FUNDING MECHANISM(S): _____ GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION:

Home-Based Support Services (HBS) is an option within the Adult Medicaid Waiver and the Children's Support Waiver. HBS includes any of the individually-designed, separately covered services, or assessment of the need for these services, to assist individuals to live in a private family home or a private house or apartment that they own or lease. Home-Based Support Services are tailored to meet individuals' evolving needs and preferences for supports, without having to leave their homes.

Individuals and their guardians may choose from the particular array of separate HBS services, up to a monthly dollar cost maximum set by DHS, that best meets the evolving needs of the individual. All services provided must be for the direct benefit of the individual and must be directly related to their disability.

Services and Supports include the following:

SERVICES AVAILABLE TO BOTH ADULTS AND CHILDREN:

- Service Facilitation (to develop and coordinate the service plan) (55A)
- Personal Support (55D)
- Behavior Intervention and Treatment from a licensed or approved professional (56U)
- Training for Unpaid Caregivers (55B)
- Adaptive Equipment (53E) * +
- Assistive Technology (53T) * +
- Home Accessibility Modifications (53H) * +
- Vehicle Modifications (53V) * +

ADDITIONAL SERVICES AVAILABLE TO ADULTS ONLY

- Nursing, RN (55N)
- Nursing, LPN (55P)
- Transportation (limited to no more than \$500 per month) (55T)
- Personal Emergency Response System (55W)
- Developmental Training (31U)
- Supported Employment(39U, 36U, 39G, 36G) *

Regular Work/Sheltered Employment (38U) *
Adult Day Care (35U) *
Behavior Therapy, and Counseling from a licensed professional (58U, 58G, 57U,
57G)
Speech, Physical and Occupational Therapies (52S, 52P, 52O) *
Temporary Intensive Staff (53D) *
CILA Startup (53B) 60D only
Temporary Crisis Services (53C) * +
Temporary Crisis Services (53R) 60D only

Note: Services and supports marked with a star (*) require prior approval.
Services and supports marked with a plus (+) are in addition to the
monthly dollar cost maximum

ELIGIBILITY REQUIREMENTS: Individuals who meet all of the following criteria are eligible for HBS:

- Enrolled in the adult Medicaid waiver or the Children's Support Waiver;
- Need an array of services to remain in the home and avoid or delay residential services;
- Not receiving any other DHS-funded developmental disability services, except out-of-home respite (89D) or Vocational Rehabilitation services from DHS' Division of Rehabilitation Services (DRS).

All services received must be included in the HBS array and within the HBS monthly or annual dollar cost maximum.

PRIORITY OR TARGET POPULATION: Individuals who have been identified to not currently be receiving any support services from the Division or the Division of Rehabilitation Services, (except out-of-home respite or vocational rehabilitation services). With this population, if requests exceed available capacity, the State will select individuals from the PUNS database.

EXPECTED OUTCOMES: Individuals will receive supports and services needed to remain successfully within their own homes, maintaining and enhancing functional skills, thereby delaying or preventing out-of-home placement.

PROGRAM NAME: Therapies: Behavior Intervention and Treatment; Behavior Counseling–
Individual and Group; Behavior Therapy–Individual and Group; Waiver Physical Therapy,
Waiver Occupational Therapy, Waiver Speech Therapy
OFFICE PROGRAM CODES: 56U, 57U, 57G, 58U, 58G, 52P, 52O, 52S

FUNDING MECHANISM(S): GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: Behavior Intervention and Treatment (56U) includes ongoing behavioral assessment, functional analysis, development of positive intervention strategies and techniques, participation in individual service/support plan development, training of family, direct support and other workers on the specifics of the individual's plan, and monitoring the effectiveness of the interventions.

Behavior Counseling (57U & 57G) means a treatment approach in which one or more mental health staff meet with one or more individuals in ongoing periodic formal sessions, and use relationship skills to promote the individuals' abilities to deal with daily living issues associated with their emotional, cognitive or behavioral problems using a variety of supportive and re-educative techniques.

Behavior Therapy (58U & 58G) means a treatment approach in which one or more professionals deliberately establish a relationship with one or more individuals seen simultaneously, if applicable, in ongoing periodic formal sessions with the goal of ameliorating or reducing the symptoms of emotional, cognitive or behavioral disorder and promoting positive emotional, cognitive and behavioral development. Behavior Counseling and Behavior Therapy include both direct contact time and participating in development of the individual service plan.

Waiver Physical Therapy, Occupational Therapy and Speech Therapy (52P, 52O, 52S) consist of the evaluation and/or treatment of persons with disabilities by the various methods within the scope and practice of physical therapy, occupational therapy and speech therapy as described respectively in the Illinois Physical Therapy Act (225 ILCS 90/); the Illinois Occupational Therapy Practice Act (225 ILCS 75/); and the Illinois Speech-Language Pathology and Audiology Practice Act (225 ILCS 220/). These therapies must be provided by licensed therapists or licensed/certified therapist assistants consistent with the practice acts.

ELIGIBILITY REQUIREMENTS: For 56U, the individual must be enrolled in one of the DD Medicaid waivers. For all other therapy services, the individual must be enrolled in the Adult DD Waiver. For Programs 56U, 57U, 57G, 58U and 58G, services must be based on behavioral assessments documenting the need for the service, must be included in the service plan, and must be approved by the service planning team. For Programs 52P, 52O and 52S, waiver funding may

be used for these services only if Medicaid State Plan funding is not available for the individual and prior approval is received from the Division.

PRIORITY OR TARGET POPULATION: These services are provided only to individuals who are also receiving other waiver services.

EXPECTED OUTCOMES: For Programs 56U, 57U, 57G, 58U and 58G, individuals will improve behavioral functioning. Services will be diminished in frequency, intensity and/or duration and will eventually be eliminated completely.

For Program 52P, 52O and 52S, the individual will improve or maintain his or her current functioning or ability level.

PROGRAM NAME: Bogard Specialized Services

OFFICE PROGRAM CODES: 75A-76Z

FUNDING MECHANISM(S): GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: Bogard Specialized Services are aggressive, accountable, competent, and knowledgeable interactions that are habilitative in nature and directed toward meeting the individual's wants and needs. The services must have functional outcomes and be based upon an Individual Service Plan (ISP) that is developed through the cooperative efforts of an Interdisciplinary Team (IDT), that includes the Bogard class member and the guardian, if applicable. These services should take advantage of all opportunities that exist in the natural environments which make up the individual's day. Bogard Specialized Services are governed by the Modified Consent Decree and all pertinent guidelines.

ELIGIBILITY REQUIREMENTS:

The individual must be an adult with a developmental disability who has been designated in writing by DHS as a Bogard class member. Bogard class members are defined in the modified Bogard Consent Decree, pg.1, Section A., as persons, 18 years of age or older with Developmental Disabilities (this term is further defined in Section III of the modified decree), who, on or after March 23, 1986, resided in an Intermediate Care or Skilled Nursing Facility in Illinois as a Medicaid recipient for a period of more than 120 days in the aggregate. No person first admitted to an intermediate care facility or a skilled nursing facility on or after April 1, 1994, will be a member of the class.

PRIORITY OR TARGET POPULATION: Bogard class members residing in nursing facilities whose functioning can be enhanced or maintained by Specialized Services.

EXPECTED OUTCOMES:

- Bogard class members residing in nursing facilities will become more independent, self-sufficient, self-reliant, and able to achieve their fullest potential.
- Bogard class members residing in nursing facilities will learn and maintain the skills that they want and need to know.

PROGRAM NAME: Demonstration/Special Project

PROGRAM CODE: 450

FUNDING MECHANISM(S): X GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: Services offered will be negotiated with the Division. This program code is used to support a variety of programs that offer unique services or trial services, sometimes on a time-limited basis.

ELIGIBILITY REQUIREMENTS: The individual must be determined to have a developmental disability.

PRIORITY OR TARGET POPULATION: Target population will be negotiated with the Division on a case by case basis.

EXPECTED OUTCOMES: Expected outcomes will be negotiated with the Division on a case by case basis.

PROGRAM NAME: DENTAL SERVICES

PROGRAM CODE: 400

FUNDING MECHANISM(S): X GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: This program provides dental care to children and adults and promotes:

- A comprehensive array of dental care services;
- Long-term dental hygiene through prevention and training (i.e., reducing gum disease, tooth decay, and tooth loss);
- Immediate dental care needs of the target population who are unable to secure dental care and services in traditional community settings because of their disability; and
- Sharing and disseminating information and technical assistance to others serving individuals with disabilities.

ELIGIBILITY REQUIREMENTS: The individual must be determined to have a developmental disability.

PRIORITY OR TARGET POPULATION: Individuals who have a developmental disability and cannot secure appropriate dental services in other community settings.

EXPECTED OUTCOMES: It is expected that individuals served in this program will receive dental services that they otherwise would be unable to obtain.

PROGRAM NAME: Epilepsy

PROGRAM CODE: 250

FUNDING MECHANISM(S): X GRANT FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: This program provides client and family support services for individuals diagnosed with epilepsy, their families, and the community at large. The support services included in this program are: (a) information and referral; (b) comprehensive case management; (c) counseling; (d) assistance in managing financial needs; (e) support groups and; (f) medical liaison services designed specifically to assist an individual who has epilepsy. These services may be provided at any location where the individual lives, works, or receives services such as community agency, the individual's residence, the individual's workplace, or any other community setting.

ELIGIBILITY REQUIREMENTS: The individual must be determined to have a developmental disability with epilepsy as a related condition.

PRIORITY OR TARGET POPULATION: Children or adults who have a developmental disability with epilepsy as a related condition, their families, and the community at large.

EXPECTED OUTCOMES: This program assists participants in managing the debilitating effects of epilepsy, preserving their community living arrangement, and maximizing their independence. This program also assists in establishing a broader understanding of epilepsy within the community at large.

PROGRAM NAME: Related Support

PROGRAM CODE: 73D

FUNDING MECHANISM(S): ___ GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: The Related Support program (73D) provides funds for staffing and services in a community setting. Documentation that all other resources and funding available have been exhausted is required for Program 73D.

ELIGIBILITY REQUIREMENTS: Not Applicable. The program is not being expanded nor are vacancies being filled.

PRIORITY OR TARGET POPULATION: No placements are being made in this program.

EXPECTED OUTCOMES: Individuals will continue to live in their current community setting through the receipt of these services.

PROGRAM NAME: Adaptive Equipment, Home Accessibility Modifications,
Temporary Intensive Staffing, Vehicle Modifications

PROGRAM CODE: 53E, 53H, 53D, 53R, 53V

FUNDING MECHANISM(S): _____ GRANT X FEE-FOR-SERVICE

NARRATIVE DESCRIPTION: Adaptive Equipment (53E) includes devices, controls, or appliances that enable individuals to increase their ability to perform activities of daily living, or to perceive, control or communicate with the environment in which they live.

Home Accessibility modifications (53H) include those physical adaptations to the home that are necessary to ensure the health, welfare, and safety of the individual as it relates to their developmental disability, or which enable the individual to function with greater independence in the home. Modifications to the home shall be covered only when they are necessary to prevent institutional placement, to deinstitutionalize an individual, or to enable the individual to participate in specialized habilitative services for individuals with developmental disabilities.

Vehicle modifications (53V) include vehicle adaptations such as lifts, door or seating modifications, and safety/security modifications that assist individuals with developmental disabilities in transporting.

Temporary intensive staffing in a Developmental Training program (53D) and temporary intensive staffing in a CILA (53R) provide funding for additional time-limited staffing to provide temporary intensive supports for individuals currently receiving services who have a time-limited immediate need for intensive staffing.

ELIGIBILITY REQUIREMENTS: For Programs 53D, 53R, 53E, 53H and 53V, the individual must currently be receiving other waiver services.

Additionally, Program 53H is applicable only to CILA sites owned and operated by the provider agency, the private residence of an individual with DD or the family home where the individual with DD resides.

For Program 53V, the vehicle must be owned by the individual with DD or the family of the individual with DD with whom they reside. Program 53V funding is not available for vehicles owned or operated by the provider agency.

For Programs 53D and 53R, the individual must be enrolled in a Division funded adult waiver residential (60D - CILA) or day program (31U – DT).

Prior approval from the Division is required for Programs 53E, 53H, 53D, 53R, and 53V.

PRIORITY OR TARGET POPULATION: Programs 53E, 53H and 53V are provided only to individuals who are also receiving other waiver services.

Programs 53D and 53R are provided to individuals enrolled in an adult waiver residential (60D - CILA) or day program (31U – DT) funded by the Division.

EXPECTED OUTCOMES: The individuals served by these programs will increase their ability to function in the environment in which they live and will improve or maintain their current functioning or ability level.

Section V **Deliverables/Costs/Payment**

Deliverables

All services are expected to have functional and measurable data concerning services provided by funds awarded. The Provider must submit any and all data required by rule or by the Department. The deliverables and their definitions are detailed in the Division's Attachment "A" and this Program Manual.

Costs

Funding for each program is based upon a Department-approved level for services detailed in the Program Manual and/or the Division's Attachment "A". The funding level for each program is shown in the Exhibits to the Community Service Agreement. The Department is not liable for costs incurred by the provider that are not approved. Except as otherwise stated, or provided for in the Attachment "A" Cover Sheet, no payment for extra charges, supplies or expenses will be made without prior written approval from the Department.

Payment

Provider services will be paid under the following terms and conditions, depending on the type of service covered under the Agreement. Service types are as follows:

Fee-for-service programs receive payment at a Department-approved rate subsequent to delivery of services. A specific description of this funding mechanism can be found in Attachment "A".

Some Fee-for-service programs receive payment at a negotiated rate. An example includes HBS Personal Support (55D) services.

Grant programs receive all or part of the program funding in advance of the actual delivery of services in prospective monthly payments except where otherwise noted in the provider agreement. A specific description of this funding mechanism can be found in Attachment "A".

Payment for fee-for-service and grant programs is contingent upon funds being made available by the General Assembly and Governor.

Section VI Provider Responsibilities

Funded providers are expected to be in full compliance with all laws, rules, policies, procedures and mandates specified in the Community Services Agreement, Attachment "A", other Administrative Rules and all other referenced documents. It is the responsibility of the Provider to notify the Division of any difficulty in meeting these contractual obligations.

Section VII Department Responsibility

- Division Network staff shall act as the liaison between the contracting parties.
- Division staff shall assist in the monitoring, evaluating, or auditing of provider services.
- The Division shall provide on-going monitoring of provider services and funding.
- The Division shall inform provider agencies of any new DHS (or Division) policies, procedures and guidelines.
- The Division shall develop and facilitate the dissemination of new Division policies, procedures, and guidelines.
- The Division will develop and provide training opportunities as it deems necessary.
- The Division will establish levels of reimbursement for programs covered under the Community Service Agreement, Division Attachment "A".

Section VIII Support Services

Providers may request technical assistance by contacting the Division Network Facilitator for their area.

Section IX Billing Instructions

Billing instructions can be found in the Reporting of Community Services (ROCS) manual for all fee for service programs which can be obtained at the following internet address: <http://www.dhs.state.il.us/> under the Provider Tab. At that address, click on Software Manuals. Instructions regarding registration for File Transfer Protocol (FTP)

can be obtained at the above address by clicking on http://www.dhs.state.il.us/OneNetLibrary/27896/documents/By_Division/MentalHealth/I_TSA-Instructions.pdf For technical software/computer issues, requests for assistance can be e-mailed to Dhs.Rocs@Illinois.gov

Section X

Program Monitoring

The Provider will make available to the Secretary of the Department of Human Services or the Secretary's designee, access to data, records and all facilities in which service or administrative operations are performed to ensure compliance with the terms and conditions of the Agreement. The Department will monitor compliance with the conditions specified in the Agreement or herein. Monitoring will be conducted by staff within various offices of the Department, including but not limited to, the Division, the Bureau of Accreditation, Licensure and Certification; Office of Inspector General; and the Office of Contracts Administration. In addition, the Department of Healthcare and Family Services (formerly the Department of Public Aid) may monitor on a sample basis agencies that are enrolled as providers under one of the Home and Community-Based Services Waivers for Persons with Developmental Disabilities.

The Division will share with the Provider any findings arising from the monitoring activities by the Division for review and corrective action. The Provider shall submit corrective action plans to the Division as requested, and shall comply with plans of correction approved or imposed by the Division. Monitoring may consist of, but is not limited to, the following:

- Reviews of all required licenses and certifications;

- Reviews of all provider service and funding plans;

- Reviews of direct service provision;

- Reviews of alleged and substantiated cases of abuse and neglect;

- Reviews of provider quality assurance, records and activities including provider reviews of medication error;

- On-site reviews of client records, personnel files, agency and program policies and procedures, and financial records;

- On-site observations and interviews of clients, guardians, and agency staff (including, but not limited to, program supervisory and direct care staff);

Reviews of electronic data submissions and verification of data submissions or data accepted in lieu of electronic submission; and

Reviews of utilization patterns

Review training records

Review of follow up to CART recommendations, if applicable

Section XI

Program Budget

All Providers are expected to have a board-approved budget on file as part of standard operating procedures. Agency Plans are required as described in Section IV of Attachment "A".

Section XI Appendix State Authoritative Sources

As the Provider, in addition to State and Federal rules and regulations governing the programs you deliver you are responsible for complying with all of the State sources below, if applicable:

- [Illinois Charitable Trust Act\(760ILCS55\)](http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=2127&ChapterID=61) -
(<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=2127&ChapterID=61>)
- [Business Corporation Act \(805 ILCS 5\)](http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=2273&ChapterID=65) -
(<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=2273&ChapterID=65>)
- [Executive Orders](http://www2.illinois.gov/gov/Pages/ExecOrders.aspx) - (<http://www2.illinois.gov/gov/Pages/ExecOrders.aspx>)
- Administrative Orders
- [Administrative Order: #1](http://www.illinois.gov/publicincludes/statehome/gov/documents/AO-2010-1.pdf) -
(<http://www.illinois.gov/publicincludes/statehome/gov/documents/AO-2010-1.pdf>)
- [Illinois Emergency Budget Act of Fiscal Year 2011 SB3660 Enrolled](http://www.ilga.gov/legislation/96/SB/09600SB3660enr.htm) -
(<http://www.ilga.gov/legislation/96/SB/09600SB3660enr.htm>)
- [Illinois Administrative Code](http://www.ilga.gov/commission/jcar/admincode/titles.html) -
(<http://www.ilga.gov/commission/jcar/admincode/titles.html>"><http://www.ilga.gov/commission/jcar/admincode/titles.html>)
- Contractual Services defined
- [State Finance Act \(30 ILCS 105/15a\)](http://www.ilga.gov/legislation/ilcs/documents/003001050K15a.htm) -
(<http://www.ilga.gov/legislation/ilcs/documents/003001050K15a.htm>"><http://www.ilga.gov/legislation/ilcs/documents/003001050K15a.htm>)
- Professional and Artistic Services defined
- [Illinois Procurement Code \(30 ILCS 500/1-15.60\)](http://www.ilga.gov/legislation/ilcs/documents/003005000K1-15.60.htm) -
(<http://www.ilga.gov/legislation/ilcs/documents/003005000K1-15.60.htm>)
- Purchasing, Contracting and Leasing
- [Illinois Procurement Code \(30 ILCS 500/1-1 et seq.\)](http://www.ilga.gov/legislation/ilcs/ilcs5.asp?ActID=532&ChapterID=7) -
(<http://www.ilga.gov/legislation/ilcs/ilcs5.asp?ActID=532&ChapterID=7>)
- [44 Ill. Adm. Code Part 1](http://www.ilga.gov/commission/jcar/admincode/044/04400001sections.html) -
(<http://www.ilga.gov/commission/jcar/admincode/044/04400001sections.html>)
- Contract filing and late filing affidavits
- [Illinois Procurement Code \(30 ILCS 500/20-80\)](http://www.ilga.gov/legislation/ilcs/documents/003005000K20-80.htm) -
(<http://www.ilga.gov/legislation/ilcs/documents/003005000K20-80.htm>)
- Lease of office and storage space and facilities
- [Civil Administrative Code of Illinois \(20 ILCS 405/405-300\)](http://www.ilga.gov/legislation/ilcs/documents/002004050K405-300.htm) -
(<http://www.ilga.gov/legislation/ilcs/documents/002004050K405-300.htm>)
- Fair Employment Practices
- [Ill. Const. \(1970\) art. 1, sec. 17](http://www.ilga.gov/commission/lrb/con1.htm), -
(<http://www.ilga.gov/commission/lrb/con1.htm>)

- Governmental Ethics
- [Illinois Governmental Ethics Act \(5 ILCS 420/1-101 et seq.\)](http://www.ilga.gov/legislation/ilcs/ilcs5.asp?ActID=129&ChapterID=2) -
(<http://www.ilga.gov/legislation/ilcs/ilcs5.asp?ActID=129&ChapterID=2>)
- [State Officials and Employees Ethics Act \(5 ILCS 430 et seq.\)](http://www.ilga.gov/legislation/ilcs/ilcs5.asp?ActID=2529&ChapterID=2) -
(<http://www.ilga.gov/legislation/ilcs/ilcs5.asp?ActID=2529&ChapterID=2>)
- Expenditure Authority
- [SAMS \(Section 11\)](http://www.apps.ioc.state.il.us/ioc-pdf/SAMSMasterManualMaster.pdf) - (<http://www.apps.ioc.state.il.us/ioc-pdf/SAMSMasterManualMaster.pdf> - (pg. 392))
- Contract Signatures
- [SAMS procedure 15.20.95](http://www.apps.ioc.state.il.us/ioc-pdf/SAMSMasterManualMaster.pdf) - (<http://www.apps.ioc.state.il.us/ioc-pdf/SAMSMasterManualMaster.pdf> - (pg. 665))
- Payment for Goods and Services
- [State Prompt Payment Act \(30 ILCS 540/1 et seq.\)](http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=539&ChapterID=7) -
(<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=539&ChapterID=7>)
- State Contracts
- [Business Enterprise for Minorities, Females, and Persons with Disabilities Act \(30 ILCS 575/0.01 et seq.\)](http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=550&ChapterID=7) -
(<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=550&ChapterID=7>)
- Human Services Provider Contracts
- [Human Services Provider Bond Reserve Payment Act \(30 ILCS 435/15\)](http://www.ilga.gov/legislation/ilcs/documents/003004350K15.htm) -
(<http://www.ilga.gov/legislation/ilcs/documents/003004350K15.htm>)
- Requirement to Purchase from Department of Corrections
- [Unified Code of Corrections \(730 ILCS 5/3-12-7\)](http://www.ilga.gov/legislation/ilcs/documents/073000050K3-12-7.htm) -
(<http://www.ilga.gov/legislation/ilcs/documents/073000050K3-12-7.htm>)
- Child Care Service Contracts (Only Applicable to Child Care Contracts)
- [State Agency Employees Child Care Services Act \(30 ILCS 590/1 et seq.\)](http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=554&ChapterID=7)
(<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=554&ChapterID=7>)
- Purchase of Recyclable Products or Supplies
- [Illinois Solid Waste Management Act \(415 ILCS 20/3\)](http://www.ilga.gov/legislation/ilcs/documents/041500200K3.htm) -
(<http://www.ilga.gov/legislation/ilcs/documents/041500200K3.htm>)
- Change Orders in Public Contracts
- [Criminal Code \(720 ILCS 5/33E-9\)](http://www.ilga.gov/legislation/ilcs/documents/072000050K33E-9.htm) -
(<http://www.ilga.gov/legislation/ilcs/documents/072000050K33E-9.htm>)
- Invoice Voucher Certification Clause
- [State Finance Act \(30 ILCS 105/9.04\)](http://www.ilga.gov/legislation/ilcs/documents/003001050K9.04.htm) -
(<http://www.ilga.gov/legislation/ilcs/documents/003001050K9.04.htm>)