

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Illinois

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES—
OTHER TYPE OF CARE—BASIS FOR REIMBURSEMENT

PAYMENT POLICY FOR RESERVING BEDS IN INPATIENT FACILITIES

- 07/02 ~~Bed reserve is allowed for all Medicaid group care residents of nursing facilities as follows:~~
- 08/04 ~~Payment for bed reserve is allowed for hospitalization and home visits. All bed reserve requests must:~~
- ~~◆ Be authorized by a physician~~
 - ~~◆ Be limited to residents who desire to return to the same facility; and~~
 - ~~◆ Be limited to facilities that have a 93 percent or higher occupancy level and of that occupancy level, 90 percent or higher shall be Medicaid eligible.~~
- 08/04 ~~Payment for bed reserve is allowed for resident hospitalization not exceeding ten (10) days per hospital stay. The day the resident is transferred to the hospital is the first day of the reserve period.~~
- 07/02 ~~Payment for bed reserve is allowed for a home visit when a physician indicates the home visit is therapeutically beneficial for the resident. Bed reserve is limited to seven (7) consecutive days in a calendar month or ten (10) nonconsecutive days within a calendar month. Home visits may be extended with the approval of the Department.~~
- ~~Bed reserve days for home visits are computed on a midnight basis. If a resident is in the facility any part of the day, it is not counted as a bed reserve day and the facility will receive the resident's current Medicaid per diem.~~
- 07/02 ~~Payment for approved bed reserve is a daily rate of 75 percent of a resident's current Medicaid per diem.~~
- ~~In no facility is the number of vacant beds to be less than the number of beds identified for residents allowed bed reserve. The number of vacant beds in the facility must be equal to or greater than the number of residents allowed bed reserve.~~
- 07/12 For dates of service on or after July 1, 2012, no bed reserve payment shall be made for persons residing in a nursing facility.

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METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES—
OTHER TYPE OF CARE—BASIS FOR REIMBURSEMENT

08/93 PAYMENT POLICY FOR RESERVING BEDS IN INPATIENT FACILITIES
Payment for bed reserve in ICF/DD facilities is allowed for hospitalization and therapeutic visits. All bed reserve requests must:

- Be authorized by the interdisciplinary team (IDT); ~~and~~
- Be limited to residents who desire to return to the SAME facility; ~~and~~

07/12 • For dates of service on or after July 1, 2012, be for persons who are under 21 years of age.

Payment for bed reserve is allowed for resident hospitalization not exceeding forty-five consecutive days per hospital stay. The day the resident is transferred to the hospital is the first day of the reserve period. Payment for approved bed reserves during resident hospitalization is a daily rate at:

- 100% of a facility's Medicaid per diem for the first ten days of an admission;
- 75% of a facility's Medicaid per diem for days 11 through 30;
- 50% of a facility's Medicaid per diem for days 31 to 45.

Payment for bed reserve is allowed for a therapeutic visit when the IDT indicates the visit is therapeutically beneficial for the resident. There is no limit on reserve days for such approved visits.

Bed reserve days for therapeutic visits are computed on a midnight basis. If a resident is in the facility any part of the day, it is not counted as a bed reserve day and the facility will receive the resident's current Medicaid per diem.

Payment for approved therapeutic visit bed reserve is a daily rate of:

- 100% of the facility's Medicaid per diem for a period not to exceed 10 days per State fiscal year; and
- 75% of the facility's Medicaid per diem for a period which exceeds 10 days per State fiscal year.

In no facility is the number of vacant beds to be less than the number of beds identified for residents allowed bed reserve. The number of vacant beds in the facility must be equal to or greater than the number of residents allowed bed reserve.

12/95 ~~Bed reserves for nursing facilities must have postpayment approval from the Department based on satisfying the above requirements.~~ Postpayment approval for bed reserves is not required for ICF/DD facilities.

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MEDICAL ASSISTANCE PROGRAM

Citation Condition or Requirement

42 CFR 447.40

4.19 (c) Payment is made to reserve a bed during a recipient's temporary absence from an inpatient facility.

AT-78-90

Yes, for children under 21 years of age residing in ICF/DD. The State's policy is described in Attachment 4.19-C.

No.

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Supersedes

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