**Section 1125.570 Service Accessibility**

The number of beds being established or added for each category of service is necessary to improve access for planning area residents.

a) Service Restrictions

The applicant shall document that at least one of the following factors exists in the planning area, as applicable:

1) The absence of the proposed service within the planning area;

2) Access limitations due to payor status of patients/residents, including, but not limited to, individuals with LTC coverage through Medicare, Medicaid, managed care or charity care;

3) Restrictive admission policies of existing providers;

4) The area population and existing care system exhibit indicators of medical care problems, such as an average family income level below the State average poverty level, or designation by the Secretary of Health and Human Services as a Health Professional Shortage Area, a Medically Underserved Area, or a Medically Underserved Population;

5) For purposes of this Section 1125.570 only, all services within the established radii outlined in 77 Ill. Adm. Code 1100.510(d) meet or exceed the occupancy standard specified in Section 1125.210(c).

b) Supporting Documentation

The applicant shall provide the following documentation, as applicable, concerning existing restrictions to service access:

1) The location and utilization of other planning area service providers;

2) Patient/resident location information by zip code;

3) Independent time-travel studies;

4) Certification of a waiting list;

5) Admission restrictions that exist in area providers;

6) An assessment of area population characteristics that document that access problems exist;

7) Most recently published IDPH Long Term Care Facilities Inventory and Data (see www.hfsrb.illinois.gov).

(Source: Amended at 42 Ill. Reg. 5610, effective March 7, 2018)