**Section 140.566 Out-of-State Placement**

Residents of Illinois who have been determined as requiring long term care placement should be placed in an Illinois facility.

a) The Department of Public Aid (DPA) or the Department of Mental Health and Developmental Disabilities (DMHDD) may make payment for care of a client in an out-of-state facility if:

1) the client is a resident of Illinois in accordance with DPA residency requirements, and

2) placement within Illinois cannot be obtained, and

3) prior approval has been given by the agency which will fund the placement, whether DPA or DMHDD, or the funding agency's designee.

b) Payment to out-of-state facilities will be negotiated based on the intensity of the services required, and will take into consideration:

1) the rate for medical assistance clients requiring the same level of care that is paid by the state in which the facility is located, and

2) the private pay rate in the facility, and

3) the Illinois Statewide average rate for medical assistance clients requiring a similar level of care.

c) Payment cannot be approved for clients who made their own arrangements for care in facilities in other states if an appropriate bed is available in Illinois.

d) Payment cannot be approved if a client or the family prefers placement in an out-of-state facility in order to stay near the home community, or near to family or for other personal reasons.

e) Annually, placement of a client in an out-of-state facility will be re-evaluated to ensure placement is still appropriate.

f) Payment for care in an out-of-state facility may be approved for a client who becomes ill while temporarily out of Illinois.

(Source: Amended at 20 Ill. Reg. 14845, effective October 31, 1996)