**Section 144.5 Determination of Program (Active Treatment) Costs**

a) The Department reimburses residential facilities for program costs associated with the delivery of active treatment to individuals with developmental disabilities, according to information obtained during each facility's most recent Inspection of Care (IOC) Review. Facilities affected by this Part are those certified as Intermediate Care Facilities for the Mentally Retarded (ICF/MR) and licensed as:

1) intermediate care facilities for individuals with developmental disabilities (ICF/DD) (including specialized living centers (SLC));

2) long term care facilities for residents under 22 years of age (hereinafter referred to as SNF/PED); and

3) intermediate care facilities for individuals with developmental disabilities of 16 beds or less (ICF/DD-16) (including small scale facilities with four or six beds).

b) IOC Review assessments of 100% of the Medicaid residents are conducted in these facilities by the Department of Public Health every 12 months. These will be conducted in accordance with federal regulations at 42 CFR 456, Subpart I. Program rate determination is based upon IOC Review criteria and Specialized Care needs as described in Sections 144.125 and 144.150 in conjunction with the reimbursement methodology found at Section 144.275.

c) Reimbursable services under this Section do not include services to maintain generally independent individuals who are able to function with little supervision or in the absence of a continuous active treatment program.

(Source: Amended at 18 Ill. Reg. 16619, effective October 27, 1994)