**Section 240.1020 Interim Services**

Interim services are CCP services provided to participants age 60 and over on an interim basis, dependent upon the participant's presumptive eligibility and following prescreening of the participant.

a) Presumptive eligibility shall be based upon the following criteria:

1) A referral has been received from a participant age 60 or over, or from the participant's authorized representative, following prescreening.

2) Notification has been received by the CCU from a hospital or from a participant/authorized representative or agency in the community that the participant is at imminent risk of nursing facility placement within three calendar days.

3) The DON to determine need for long-term services and supports has been administered.

4) The participant/authorized representative has provided declared information on all other CCP eligibility requirements.

5) The participant/authorized representative has signed a Participant Agreement and Consent Form.

6) After presumptive eligibility has been determined, the CCU shall notify the provider within the next business day and services will start within two business days.

b) When presumptive eligibility has been determined and interim services are approved in accordance with the person-centered plan of care, services shall be initiated by the provider to the participant within two work days after the date of notification to the provider of the participant's presumptive eligibility.

c) A comprehensive assessment shall be administered in the residence of the participant by the CCU.

1) When the assessment is not conducted in the community, the CCU will make the follow-up home visit within 15 calendar days after the date of the participant's discharge.

2) When the assessment is conducted in the community, the CCU will make the follow-up home visit within 30 calendar days after the date of the interim assessment.

3) The formal determination of eligibility for CCP services shall be completed within 90 calendar days after the date of receipt of the referral.

d) Interim services may continue up to a maximum of 90 calendar days after the date of referral, pending finalization of the formal determination of eligibility by the CCU. Services shall be denied at any time during the 90 calendar day interim service period:

1) if evidence of ineligibility, based upon any eligibility requirement, is determined;

2) if the participant/authorized representative fails to cooperate in the determination of eligibility process;

3) as specified in Section 240.660, in the event that a participant's eligibility cannot be determined due to the participant's/authorized representative's failure to provide accurate and verifiable documentation regarding eligibility within 90 calendar days after the date of receipt of the referral; or

4) if a person-centered plan of care cannot be developed that adequately meets the participant's determined needs (see Section 240.920(n)).

e) Notification of eligibility or ineligibility shall be provided in writing. If eligibility is denied, provision of interim services shall cease on the date of receipt by the provider of the Participant Agreement – Person-Centered Plan of Care.

(Source: Amended at 48 Ill. Reg. 11053, effective July 16, 2024)