



HFS

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Public Comment Notice - Home and Community Based Services Waiver

3/23/2026

The Illinois Department of Healthcare and Family Services (HFS) proposes to amend the Home and Community Based Services Waiver (HCBS) for Persons who are Medically Fragile, Technology Dependent (MFTD) – IL 0278.

The Purpose of this amendment is to:

1. Add Assessment by Occupational or Physical Therapist as a new waiver service in Appendix C-1/C-3. The service allows occupational and physical therapists to assess the customer's home environment to determine the need for adaptive equipment, assistive technology, and home accessibility modifications.
2. Modify the Adaptive Equipment service definition in Appendix C-1/C-3 in the following manner:
 - Remove the word "evaluation" from the 5th bullet as the cost for evaluations will now be a separate new service called Assessment by Occupational or Physical Therapist.
 - Add additional items available under this service:
 - Standers, adaptive car seats, adaptive swings, adaptive bicycles, adaptive stroller, bath/shower chair
 - Electric Hoyer Lift, fall recovery, and mobility aid
 - Adaptive utensils, cookware, and dishes
 - Trampoline, sensory floor mats
3. Modify the Assistive Technology service definition in Appendix C-1/C-3 in the following manner: Delete the first bullet point stating "the evaluation of the assistive technology needs of a customer...", as the cost for evaluations will now be a separate new service called Assessment by Occupational or Physical Therapist.
4. Modify Environmental Accessibility Adaptation service definition in Appendix C-1/C-3 to move the following language from the bottom of the definition to the beginning, in order to reduce stakeholder misunderstanding that this service still exists: EFFECTIVE 1/1/2025 per IL.0278.R06.02, Environmental Accessibility Adaptations is no longer a waiver service. The services previously grouped under the Environmental Accessibility Adaptations service umbrella are now separate services. The new separate services include:
 - Pest Control
 - Home Accessibility
 - Modifications Vehicle Modifications

5. Modify the Home Accessibility Modification service definition in Appendix C-1/C-3 in the following manner:
 - Added HCBS Taxonomy codes that had previously been omitted.
 - Adding the following sentence to the first paragraph, “A private residence may encompass more than one residence when there is a shared custody arrangement involving joint legal and physical custody”. This is being added to clarify that "private residence" considers shared custody arrangements and home accessibility modifications can be approved for more than one residence.
 - Add the following language to the 2nd paragraph, regarding the administrative claiming for Home Accessibility Modifications in case of death or failure to transition to community per State Medicaid Director letter Olmstead Update #3 dated July 25, 2000, and for consistency with the approved service definition for Vehicle Modifications: “In the event the customer dies before going home (or is determined to be unable to go home) after the expenses have been incurred, the State will claim these expenses as administrative costs at the administrative FFP rate for services which would have been necessary for relocation to have taken place when the customer has applied for waiver service; and has been found eligible for the waiver by the State but died or was determined unable to go home, before the actual delivery of the waiver service”.
 - Generators: Change from "purchase or repair" to "purchase, install, or repair.”
 - Add orbit lift and stair lift to the list of examples of home accessibility modifications.
 - Revise the 1st dot point of the 3rd paragraph (Ramps, house lifts...) to delete the verbiage “or leave home to access a bedroom or bathroom...” and change to "access areas within the home". The revised example is as follows: Ramps, house lifts, overhead lifts, or elevators necessary to enter or leave the home or to access any area within the home, including porch or stair lifts and hydraulic, manual, or electric lifts.
 - Delete the dot point “Replacement of floor covering; replacement or repair of stairs, windows, driveways, or sidewalk”, under the excluded adaptations or improvements in the 4th paragraph of the service definition.
6. Modify the Pest Control service definition in Appendix C-1/C-3 in the following manner:
 - Add “setting of traps” to the 2nd paragraph which details the allowable Pest Control activities.
 - Add the following language to the 4th paragraph, allowing the State administrative claiming for Pest Control services in case of death or failure to transition to community per State Medicaid Director letter Olmstead Update #3 dated July 25, 2000: “In the event the customer dies before going home (or is determined to be unable to go home) after the expenses have been incurred, the State will claim these expenses as administrative costs at the administrative FFP rate for services which would have been necessary for relocation to have taken place when the customer has applied for waiver service; and has been found eligible for the waiver by the State but died or was determined unable to go home, before the actual delivery of the waiver service.”
7. Add the following verbiage to the service definition for Placement Maintenance Counseling Services in Appendix C-1/C-3: Placement Maintenance Counseling is being removed as a waiver service as it is not necessary. Placement Maintenance Counseling is covered under EPSDT and/or the Medicaid State Plan.
8. Add the following verbiage to the service definition for Specialized Medical Equipment in Appendix C-1/C-3: Specialized Medical Equipment is being removed as a waiver service as it is not necessary. All equipment or supplies needed to maintain a customer in the home

and the coverage of operational and maintenance costs of equipment are available through EPSDT and/or the Medicaid State Plan or under Adaptive Equipment and Assistive Technology.

9. Revise the first sentence in the Limits section for Nurse Training in Appendix C-1/C-3 to add “per child”.
10. Update the Provider Qualifications – Other Standard section in Appendix C-1/C-3 to add the following language (that providers must) “Be in good standing in accordance with OA policy” for the following Provider Types: Respite - Children's Community-Based Health Care Center and Approved Nursing Agency; Adaptive Equipment - Equipment Vendors; Assistive Technology - Equipment Vendors; Certified Nursing Assistant (CNA) - DSCC Approved Nursing Agency; Environmental Accessibility Adaptations – Contractor; Family Training – Approved Service Agency and OA Approved Nursing Agency; Home Accessibility Modifications – Contractor; In-Home Shift Nursing - DSCC Approved Nursing Agency; Nurse Training - OA Approved Nursing Agency; Pest Control; Vehicle Modifications - Equipment Vendor and Installer.
11. Add clarifying language to the 1st paragraph in Appendix C-2-e, to state: "Relatives/legal guardians employed by a Home Nursing Agency approved by the MA and OA, may be paid for providing respite services if they do not live/reside in the same home as the customer lives."
12. Update Appendices C-5, D-1-d, D-1-d-ii, and D-2-a to reflect changes resulting from the 3.7 software change.
13. Update Appendix C Quality Improvement - Performance Measures C1, C2, C3, and C4 to change the Responsible Party for data collection/generation to the OA and change the Data Source to OA reports.
14. Revise Performance Measure D7 to change the sampling approach to 100%.
15. Revise Appendices A-2-b, D-1-g, and D-2-a remove references to the MA doing desk audits of customer records and replace with the following language: The MA will conduct validation reviews of the OA's quality assurance reviews by pulling a sample of records reviewed by the OA. The MA will review in order to ensure comparable findings between MA and OA reviewers.
16. Update Appendices F-3-a, F-3-b, and F-3-c to include Operating Agency's grievance procedures required by the federal Access Rule implementation deadline of 7/1/2026.
17. Delete Performance Measure G7, as it was a duplicate of Performance Measure G6.
18. Add the required remediation action for Performance Measure G9, which was inadvertently missing from the previous waiver version.
19. Add the following language to Appendix H-1-a: The MA will conduct validation reviews of the OA's quality assurance reviews by pulling a sample of records reviewed by the OA. The MA will review in order to ensure comparable findings between MA and OA reviewers.
20. Add language in Appendix I-2-a for the new service Assessment by an Occupational or Physical Therapist. The rate of \$111 per visit (up to 2 hours). This rate is the same as the

State Plan rate.

21. Change the sampling approach for Performance Measures I1 and I3 from 100% to representative sampling with a 95% confidence level with a +/- 5% margin of error.
22. Update Appendix J-2-d for cost estimates for the new waiver service Assessment by an Occupational or Physical Therapist.

HFS seeks public input on this proposed waiver amendment through two separate statements of public notice:

- 1) An electronic public notice is posted on the HFS website at <https://hfs.illinois.gov/info/legal/publicnotices.html>
- 2) A non-electronic public notice may be viewed at the Department of Human Services (DHS) local offices (except in Cook County). In Cook County, the notice may be reviewed at the Office of the Director, Illinois Department of Healthcare and Family Services, 401 South Clinton Street, 1st Floor, Chicago, Illinois.

How to obtain a copy of the proposed waiver amendment:

A hard copy of the proposed waiver amendment may be downloaded and printed from the HFS website at <https://hfs.illinois.gov/medicalclients/hcbs.html> or may be requested by calling 217/524-4148. Copies are also available at the following locations:

- Healthcare and Family Services
201 South Grand Avenue East
Springfield, IL 62763
- Healthcare and Family Services
401 South Clinton
Chicago, IL 60607

How to submit public comments:

HFS is accepting public input regarding this proposed amendment for a 30-day public comment period from 3/23/2026 through 4/22/2026. Those interested in providing input are asked to email feedback to the HFS email address at HFS.HCBSWaiver@illinois.gov or mail their written input to:

Illinois Department of Healthcare and Family Services
ATTN: Waiver Operations Management
201 South Grand Avenue East, 2FL
Springfield, IL 62763

State feedback on public comments:

A summary of the public notice and comments will be incorporated into the waiver amendment. The summary will include modifications to the initial waiver amendment and the

reasons why the State of Illinois adopted or did not adopt specific comments or recommendations.