

TITLE 59: MENTAL HEALTH  
CHAPTER IV: DEPARTMENT OF HUMAN SERVICES

PART 132

~~MEDICAID~~ COMMUNITY MENTAL HEALTH SERVICES PROGRAM

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60 AUTHORITY: Implementing and authorized by the Community Services Act [405 ILCS 30]  
 61 and Section 15.3 of the Mental Health and Developmental Disabilities Administrative Act [20  
 62 ILCS 1705].

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64 SOURCE: Emergency rules adopted at 16 Ill. Reg. 211, effective December 31, 1991, for a  
 65 maximum of 150 days; new rules adopted at 16 Ill. Reg. 9006, effective May 29, 1992; amended  
 66 at 18 Ill. Reg. 15593, effective October 5, 1994; emergency amendment at 19 Ill. Reg. 9200,  
 67 effective July 1, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 16178, effective  
 68 November 28, 1995; amended at 21 Ill. Reg. 8292, effective June 25, 1997; recodified from the  
 69 Department of Mental Health and Developmental Disabilities to the Department of Human  
 70 Services at 21 Ill. Reg. 9321; amended at 22 Ill. Reg. 21870, effective December 1, 1998;  
 71 emergency amendment at 23 Ill. Reg. 4497, effective April 1, 1999, for a maximum of 150 days;  
 72 amended at 23 Ill. Reg. 10205, effective August 23, 1999; amended at 24 Ill. Reg. 17737,  
 73 effective November 27, 2000; amended at 26 Ill. Reg. 13213, effective August 20, 2002;  
 74 amended at 28 Ill. Reg. 11723, effective August 1, 2004; amended at 31 Ill. Reg. 9097, effective  
 75 July 1, 2007; emergency amendments at 31 Ill. Reg. 10159, effective July 1, 2007, for a  
 76 maximum of 150 days; amended at 31 Ill. Reg. 15805, effective November 8, 2007; amended at  
 77 32 Ill. Reg. 9981, effective July 1, 2008; emergency amendment at 35 Ill. Reg. 1128, effective  
 78 January 1, 2011, for a maximum of 150 days; emergency amendment repealed by emergency  
 79 rulemaking at 35 Ill. Reg. 7719, effective April 28, 2011; amended at 35 Ill. Reg. 8860, effective  
 80 May 26, 2011; amended at 36 Ill. Reg. 18582, effective December 13, 2012; amended at 38 Ill.  
 81 Reg. 15550, effective July 1, 2014; amended at 39 Ill. Reg. 13684, effective October 1, 2015;  
 82 former Part repealed at 43 Ill. Reg. 1046, and new Part adopted at 43 Ill. Reg. 1049, effective  
 83 January 1, 2019; emergency amendment at 45 Ill. Reg. 11877, effective September 16, 2021, for  
 84 a maximum of 150 days; amended at 46 Ill. Reg. 2937, effective February 4, 2022; emergency  
 85 amendment at 47 Ill. Reg. 12785, effective August 11, 2023, for a maximum of 150 days;  
 86 amended at 48 Ill. Reg. 918, effective December 29, 2023; emergency amendment at 48 Ill. Reg.

87 5799, effective March 28, 2024, for a maximum of 150 days; amended at 48 Ill. Reg. \_\_\_\_\_,  
88 effective \_\_\_\_\_.

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SUBPART B: CERTIFIED SPECIALTY PROVIDER (CSP)

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**Section 132.55 Personnel and Staffing Requirements**

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The CSP shall:

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- a) Establish and maintain a comprehensive set of personnel policies and procedures, minimally addressing hiring, training, evaluation, disciplining, termination, and other personnel matters related to staffing. Establish and maintain job descriptions detailing the duties and qualifications for all positions, including volunteers, interns and unpaid personnel. Establish and maintain individual personnel records for all personnel, paid and unpaid, minimally including the following components:

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- 1) Documentation of current education, experience, licensure and certification;

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- 2) Employment status of the individual (e.g., hire date, employee/contractor, termination date, etc.);

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- 3) Review of individual employee's performance within the last 12 months; and

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- 4) Documentation of training and continuing education units, as applicable.

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- b) Upon hire, perform sufficient background checks for all employees, volunteers, interns, unpaid personnel, or other individuals who are agents of the CSP or CMHC. At a minimum, the review shall include:

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- 1) Searching the Illinois Department of Public Health's (DPH) Health Care Worker Registry concerning the person. If the Registry has information substantiating a finding of abuse or neglect against the person, the provider shall not employ ~~them~~him or her in any capacity.

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- 2) Performing background checks in compliance with requirements set forth in the Health Care Worker Background Check Act [225 ILCS 46] and in DPH rules at 77 Ill. Adm. Code 955.

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- 3) Reviewing the Provider Sanctions List, provided by the HFS Office of Inspector General (HFS-OIG), to ensure the provider is not on the list of

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sanctioned providers. The CSP/CMHC shall not employ or contract with any provider found on the List.

c) The provisions of Section 132.55(b), except for subsection (b)(3), do not apply to Peer Support Workers (PSWs) providing services as part of a Violence Prevention Community Support Team (VP-CST) pursuant to 89 Ill. Adm. Code 140.453. PSWs delivering VP-CST must meet the background check requirements outlined in 89 Ill. Adm. Code 140.TABLE P.

de) Annually, at a minimum, comply with all requirements set forth in the Health Care Worker Background Check Act and in DPH rules.

ed) Ensure that all assessment activities and subsequent individual treatment plans are developed with the active involvement of a QMHP and the clinical review of an LPHA.

fe) Ensure management and oversight of all treatment staff by a QMHP. Management and oversight may be face to face or virtual, to include group supervision as well as supervision by teleconference and videoconference. All treatment staff must have access to a QMHP who is available for immediate consultation and supervision of treatment services.

gf) All staff shall receive, at a minimum, one hour of supervision per month delivered face to face, or by teleconference or videoconference.

1) Group supervision is acceptable and the size of the group shall be conducive to the topic being discussed.

2) Supervision must be documented in a written record.

3) LPHAs are not required to have supervision under this Section.

4) QMHPs must be supervised by an LPHA. MHPs and RSAs must be supervised by, at a minimum, a QMHP.

(Source: Amended at 48 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

SUBPART C: CERTIFIED COMPREHENSIVE  
COMMUNITY MENTAL HEALTH CENTER (CMHC)

**Section 132.80 Personnel and Staffing Requirements**

172 Establish and maintain an organizational structure that includes a staffing structure and  
173 management system consistent with the following:

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- 175 a) Employ a full-time LPHA to oversee and direct the clinical functions of the  
176 CMHC;
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  - 178 b) Maintain staff with training and credentialing to provide interdisciplinary person-  
179 centered care, evidence based/informed practices, developmentally appropriate  
180 trauma informed care, and culturally and linguistically responsive services.  
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  - 182 c) When good cause is established by the organization, an exception to the full-time  
183 status of the LPHA may be granted by the Department in accordance with the  
184 process and criteria outlined in this subsection (c).  
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    - 186 1) The organization shall submit a request for consideration of waiver to the  
187 Department detailing the reasons for the request.  
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    - 189 2) The organization shall provide a detailed staffing plan that includes the  
190 number and credential levels of all staff providing direct services that  
191 include a calculation of the hours of clinical supervision necessary to meet  
192 the requirements of Section 132.55(ge)(4).  
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    - 194 3) The organization shall provide a projected number of individuals to be  
195 served on annual basis and calculation of the hours required for provision  
196 of clinical oversight and direction of all clinical functions related to those  
197 services. This calculation shall be based on a needs assessment of the  
198 service area completed by the organization.  
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    - 200 4) The organization shall propose a staffing equivalency for clinical  
201 oversight and direction by the LPHA that is sufficient to meet the needs  
202 identified in Section 132.80(c)(2) and (3).  
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    - 204 5) The organization shall describe a plan to ensure access to clinical direction  
205 and oversight of an LPHA by less-credentialed staff in the event of  
206 emergent situations.  
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    - 208 6) Request for an exception must be submitted to the Department for  
209 consideration at least 30 calendar days prior to the anticipated need for the  
210 exception.  
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212 (Source: Amended at 48 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)