

Here's a complete, Illinois-specific landscape of residential placements for people with intellectual and/or developmental disabilities (IDD). Options are grouped by setting and include: who licenses/funds them, what services they include, scale (locations/people), how admission works, and notable details.

Community-based (HCBS waiver) residential options

- 1) Community-Integrated Living Arrangement (CILA) – 24-hour “group home” (1–8 people)
 - What it is / license & funding. Small homes or apartments serving ≤8 people with onsite DSP (direct support professional) staff 24/7. Licensed/certified under the Community-Integrated Living Arrangements Licensure and Certification Act and Rule 115; services paid through the Adults with Developmental Disabilities 1915(c) HCBS waiver. ([Legal Information Institute](#), [Illinois Department of Human Services](#), [HFS](#))
 - Core services. Personal care and supervision, medication administration, habilitation/independent-living skills, community integration, transportation to day programs/work, nursing oversight, behavior supports per the Personal Plan. ([Illinois Department of Human Services](#), [Centers for Medicare & Medicaid Services](#))
 - Scale. As of 12/31/2024 Illinois reported 10,730 people living in CILA (24-hr, intermittent & host family combined). Location counts in the Statewide Transition Plan quality review show ~1,778 CILA locations reviewed for HCBS compliance (701 fully compliant + 805 non-HS CAP + 272 HS CAP; several closures noted), illustrating the statewide footprint of CILA homes. ([Illinois Department of Human Services](#), [Medicaid](#))
 - Admission pathway. Eligibility via Developmental Disabilities PAS/ISSA process; enrollment and selection through PUNS (the state waitlist) for waiver funding; Level of Need and person-centered planning drive exact services. ([Illinois Department of Human Services](#))
 - Notes. Rule 115 governs proximity/operations (updated recently) and defines variants below. ([Illinois Department of Human Services](#))
- 2) CILA – Intermittent / Family (a.k.a. supported/independent living)
 - What it is. Individuals live in their own apartment or with family; staff provide scheduled, less-than-24/7 supports (e.g., 2–40 hrs/wk) for budgeting, cooking, transportation, medication reminders, etc. Still licensed under Rule 115 and funded by the adult DD waiver. ([Legal Information Institute](#), [The Arc of Illinois](#))
 - Scale. Ligas tracking shows 905 people in intermittent CILA as of 12/31/2024 (by home size categories). ([Illinois Department of Human Services](#))
 - Admission pathway. Same as for 24-hour CILA (PAS/PUNS/waiver), driven by the Personal Plan. ([Illinois Department of Human Services](#))
- 3) CILA – Host Family / Shared Living
 - What it is. The person with IDD lives in the home of a host family (or non-related caregiver) who provides everyday support; the CILA agency supervises and funds the arrangement under Rule 115. ([Legal Information Institute](#))
 - Core services. Daily living support, community access, transportation, with nursing/behavioral supports as needed through the CILA provider. ([Legal Information Institute](#))
 - Scale. Ligas data show ~254 people in Host Family CILA as of 12/31/2024. ([Illinois Department of Human Services](#))
 - Admission pathway. PAS/PUNS/waiver, with host matching done by the provider agency. ([Illinois Department of Human Services](#))
- 4) Community Living Facility (CLF)
 - What it is / license & funding. A transitional residential setting (not a nursing/medical facility) licensed by IDPH under the Community Living Facilities Licensing Act (210 ILCS 35); IDHS/DD

funds CLF under the adult DD waiver when ≤16 residents (skill-training model aimed at eventual independent living). ([Illinois General Assembly](#), [HFS](#))

- Core services. Structured training in housekeeping, money management, social/community skills; participation in day services/employment is expected. ([Illinois Department of Human Services](#))
- Scale. Illinois' HCBS Statewide Transition Plan reviewed 16 CLF locations for HCBS compliance (3 fully compliant; others required CAPs), indicating a small, defined footprint. (A 2022–2023 advocate primer notes similar figures; provider addresses are confidential in HS lists.) ([Medicaid](#), [HFS](#))
- Admission pathway. PAS/waiver processes similar to CILA; CLF residents typically also attend Community Day Services. ([Illinois Department of Human Services](#))

5) Home-Based Services (HBS) – “live at home/in your own place”

- What it is. A monthly individual budget under the Children's or Adults with DD waiver to hire Personal Support Workers (PSWs) and purchase supports while the person lives with family or in their own home (not a licensed residence). Self-Direction Assistance helps with hiring/training PSWs. ([Illinois Department of Human Services](#), [HFS](#))
- Core services (flexibly purchased). PSW hours, nursing/behavioral therapies, respite, assistive tech/adaptations, employment supports, remote supports—tailored to the Personal Plan and within the monthly budget (adult budget caps are set by statute/waiver). ([The Arc of Illinois](#), [HFS](#))
- Scale. HBS is a major modality statewide (DDD presentations show thousands served); precise current counts vary year-to-year. ([The Arc of Illinois](#))
- Admission pathway. PAS/PUNS → waiver selection → person-directed budget and PSW enrollment. ([Illinois Department of Human Services](#))

6) Children's Group Home (CGH) & Special Home Placement (SHP)

- What they are / license & funding. CGH homes serve children/youth (age 3–21) who cannot live at home, licensed by DCFS (Title 89 Parts 401/403/404) and funded through the Children's Residential DD Waiver. SHP are family-style homes (for children—DCFS licensed—and for adults—DDD-approved) providing a homelike setting with habilitation. ([Illinois General Assembly](#), [Illinois Department of Human Services](#))
- Core services. 24-hr supervision, habilitation, nursing/medication administration, school coordination, behavior supports, family engagement. ([Illinois Department of Human Services](#))
- Scale. Illinois' HCBS Statewide Transition Plan reviewed 27 CGH locations (with 6 fully compliant at the time; others on CAPs). SHP counts are smaller and managed within the waiver. ([Medicaid](#))
- Admission pathway. DCFS licensure + DDD PAS; for waiver funding, eligibility is through the Children's Residential DD Waiver (separate from the Children's Support Waiver for in-home services). ([HFS](#))

Institutional settings (non-HCBS)

7) Intermediate Care Facility for Individuals with Intellectual/Developmental Disabilities (ICF/IID, a.k.a. ICF/DD)

- What it is / regulation. A federal Medicaid institutional benefit (42 CFR Part 483; CMS State Operations Manual) providing active treatment with 24-hr nursing oversight and habilitation in licensed congregate facilities; licensed/certified by IDPH and surveyed for federal participation. ([eCFR](#), [Centers for Medicare & Medicaid Services](#))
- Core services. Nursing and personal care, active treatment/habilitation, behavior/therapy services, day programming (often Developmental Training), transportation. ([Centers for Medicare & Medicaid Services](#))
- Scale. IDPH conducts annual/biannual surveys statewide (e.g., 148 annual health surveys in 2024), underscoring a substantial network of ICF/IIDs in Illinois. (IDHS lists ICF/IID providers statewide; the

public list shows hundreds of entries.) ([Illinois Department of Public Health](#), [Illinois Department of Human Services](#))

- Admission pathway. PAS screening is required to prevent inappropriate ICF/IID admission; residents may also transition to HCBS (CILA) via person-centered planning. ([Illinois Department of Human Services](#))

8) Medically Complex for the Developmentally Disabled (MC/DD) facilities

- What they are / license. Illinois-specific IDPH license (MC/DD Act, 210 ILCS 46) for facilities serving children or adults with complex medical needs (e.g., ventilators, intensive nursing). Examples include Alden Village Health Facility, Marklund Children's Home, Exceptional Care, etc. ([Illinois General Assembly](#), [Illinois Department of Human Services](#))
- Core services. Skilled nursing, respiratory care, therapies, personal care; some provide pediatric long-term care. ([Illinois Department of Human Services](#))
- Scale. State directories list a limited number of MC/DD providers (the IDHS page lists several named facilities). ([Illinois Department of Human Services](#))
- Admission pathway. PAS screening; clinical justification for MC/DD level of care; Medicaid coverage via long-term-care program (HFS). ([Illinois Department of Human Services](#))

9) State-Operated Developmental Centers (SODCs)

- What they are. Large state-run institutions for people with IDD who have significant medical/behavioral needs; 7 facilities currently operate: Choate (Anna), Ludeman (Park Forest), Fox (Dwight), Mabley (Dixon), Kiley (Waukegan), Murray (Centralia), Shapiro (Kankakee). ([Illinois Department of Human Services](#))
- Core services. 24-hr nursing/medical care, habilitation, behavioral health, therapies, education/vocational services on campus. ([Illinois Department of Human Services](#))
- Scale. IDHS "By the Numbers" notes ~1,600 people live in Illinois SODCs. ([Illinois Department of Human Services](#))
- Admission pathway. PAS; placement is typically reserved for high-acuity, safety, or forensic needs; there is ongoing quality/transformation oversight. ([Illinois Department of Human Services](#))

Related / adjacent residential settings (not DD-waiver placements, but sometimes used)

10) Skilled Nursing Facilities (SNFs) / Nursing Facilities (NFs)

- What they are. Licensed under the Nursing Home Care Act and certified under federal NF rules; some accept residents with IDD when nursing needs are primary; not funded as DD HCBS. ([eCFR](#))
- Note on fit. PAS screening is required; people with IDD who meet nursing facility level of care may reside in NFs, but DDD generally prioritizes HCBS (HBS/CILA/CLF) or ICF/IID/MC/DD when habilitation is the central need. ([Illinois Department of Human Services](#))

11) Supportive Living Program (SLP) – Persons with Disabilities

- What it is. Illinois' Medicaid SLP (assisted-living-style) primarily serves older adults; there is also a track for adults 22–64 with disabilities. SLP is not a DD-waiver service, and not all SLPs are clinically appropriate for IDD. ([Legal Information Institute](#), [HFS](#))

How people get in (admission criteria & pathway – quick reference)




1. Diagnosis & functional eligibility for DD services (per IL Mental Health & Developmental Disabilities Code and DDD policy). ([Illinois General Assembly](#))
2. PAS/ISC screening (DDPAS-10) to determine appropriate setting and waiver vs. ICF/IID/MC/DD, plus development of the Personal Plan. ([Illinois Department of Human Services](#))
3. If HCBS is appropriate, PUNS selection is the typical gateway to DD-waiver funding (Adults with DD Waiver; Children's Support or Children's Residential Waiver). ([Illinois Department of Human Services](#), [HFS](#))




Provider universe & scale – what we can say with public data






- CILA people served: 10,730 total (24-hr, intermittent, host family) as of Dec 31, 2024. ([Illinois Department of Human Services](#))
- CILA locations: ~1,778 sites reviewed in the HCBS Statewide Transition Plan (compliance status varies; numbers fluctuate as sites open/close). ([Medicaid](#))
- CLF locations: 16 reviewed statewide in the HCBS STP (a small slice of the system). ([Medicaid](#))
- CGH locations: 27 reviewed statewide (children's waiver). ([Medicaid](#))
- ICF/IID network: IDPH surveyed 148 facilities in 2024 (annual health surveys), indicating a large network; IDHS also publishes a public ICF/IID provider list. (Illinois also operates MC/DD facilities for medically complex needs.) ([Illinois Department of Human Services](#))
- SODCs: 7 state-operated developmental centers with ~1,600 people residing statewide. ([Illinois Department of Human Services](#))

Practical notes when comparing options

- Intensity & regulation: MC/DD and ICF/IID are institutional levels with heightened clinical/nursing standards; CILA/CLF/CGH are HCBS settings emphasizing community integration and habilitation. ([eCFR](#), [Centers for Medicare & Medicaid Services](#))
 - Size & integration: Illinois caps CILA to ≤8 residents (Rule 115), and the state tracks clustering and HCBS compliance (heightened scrutiny, CAPs). ([Legal Information Institute](#), [Medicaid](#))
 - Day services: Many residents (CILA, CLF, ICF/IID) also attend Community Day Services (CDS)/Developmental Training or employment; DDD posts statewide CDS provider lists. ([Illinois Department of Human Services](#))
 - Oversight: Multiple agencies share oversight—IDHS/DDD (licensing CILAs via BALC, waiver operations), IDPH (ICF/IID, MC/DD licensure/certification), HFS (Medicaid policy/rates), DCFS (children's residential). ([Illinois Auditor General](#), [HFS](#))
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- Here's the color-coded Illinois IDD Residential Placement Comparison Matrix — I've grouped and shaded the rows by *level of integration* for quick scanning:
-  Community-integrated – Person lives in typical neighborhoods, with supports
-  Hybrid / transitional – Some community integration, more structured or limited settings
-  Institutional – Campus-based or facility-based, less community integration

Setting Type	Licensing / Oversight	Typical Size & Setting	Core Services Provided	Funding Source(s)	Estimated Number of Locations / People	Admission Pathway & Criteria	Notable Pros / Cons
 CILA – 24-Hour	IDHS/DDD (Rule 115), Community-Integrated Living Arrangements Licensure & Certification Act	1–8 people in a house or apartment with 24/7 DSP staffing	Personal care, habilitation, medication administration, community integration, transportation, nursing & behavioral supports	Medicaid Adults with DD Waiver	~1,778 sites; ~10,730 people (all CILA types combined)	PAS/ISC screening, DD eligibility, PUNS selection, person-centered plan	Pro: High integration, individualized supports. Con: Staffing shortages may limit community participation
 CILA – Intermittent	Same as above	Individual or shared apartment; staff visits scheduled (2–40 hrs/wk)	Skills training, budgeting, cooking, med reminders, limited personal care	Medicaid Adults with DD Waiver	Included in CILA totals; ~905 intermittent residents	Same as above	Pro: More independence Con: Less on-site support; risk for isolation
 CILA – Host Family / Shared Living	Same as above	Person lives with non-relative caregiver/family	Daily living supports, community inclusion, transportation; provider oversight	Medicaid Adults with DD Waiver	~254 residents	Same as above, plus host matching process	Pro: Family-like environment. Con: Matching challenges; limited availability

Setting Type	Licensing / Oversight	Typical Size & Setting	Core Services Provided	Funding Source(s)	Estimated Number of Locations / People	Admission Pathway & Criteria	Notable Pros / Cons
 Community Living Facility (CLF)	IDPH – Community Living Facilities Licensing Act	≤16 residents in a group setting; transitional skills focus	Independent living skills, personal care, day program participation	Medicaid Adults with DD Waiver	~16 locations	PAS/ISC, waiver slot, transitional readiness	Pro: Emphasis on independence training. Con: Few facilities statewide
 Home-Based Services (HBS)	IDHS/DDD waiver administration	Individual's own home or family home	Personal Support Workers, respite, therapies, assistive tech, adaptations	Medicaid Adults with DD Waiver / Children's Support Waiver	Thousands served statewide (varies annually)	PAS/ISC, waiver selection, budget allocation	Pro: Max independence, flexible use of funds. Con: Requires strong family/self-management
 Children's Group Home (CGH)	DCFS licensing (Title 89), DDD oversight	3–10 youth, 24/7 staffing	Personal care, habilitation, school coordination, behavior support	Medicaid Children's Residential DD Waiver	~27 locations	DCFS licensing, PAS/ISC, waiver slot	Pro: Child-focused supports. Con: Limited number; may be far from family
 Special Home Placement (SHP)	DCFS (children) or DDD-approved (adults)	Family-style home with 1–4 residents	Daily living support, habilitation, community access	Medicaid Waivers	Small footprint	PAS/ISC, match process	Pro: Homelike, individualized. Con: Limited availability statewide
 ICF/IID	IDPH licensure & federal CMS certification	Varies from 4-bed to 100+ bed congregate	24/7 nursing, habilitation, therapies, active treatment	Medicaid institutional benefit	~148 facilities surveyed annually	PAS/ISC; meet ICF/IID level of care	Pro: High staffing ratios, nursing care. Con: Less community

Setting Type	Licensing / Oversight	Typical Size & Setting	Core Services Provided	Funding Source(s)	Estimated Number of Locations / People	Admission Pathway & Criteria	Notable Pros / Cons
							Integration; institutional
■ MC/DD Facility	IDPH – MC/DD Act	Small to mid-size facility for medically complex residents	Skilled nursing, respiratory care, therapies	Medicaid LTC	Limited number statewide (named providers)	PAS/ISC; medical need documented	Pro: Specialized medical supports. Con: Institutional; limited provider choice
■ State-Operated Developmental Center (SODC)	IDHS-operated	Large campus; 150–400 residents per site	Nursing, habilitation, therapies, vocational/educational services	State & Medicaid institutional funding	7 facilities; ~1,600 residents	PAS/ISC; reserved for high-acuity/safety/forensic needs	Pro: Intensive care capacity. Con: Institutional setting; DOJ scrutiny
■ Skilled Nursing Facility (SNF/NF)	IDPH licensure, CMS certification	50–200+ residents	Skilled nursing, therapies	Medicaid/Medicare LTC	Statewide network	PAS/ISC; primary nursing needs	Pro: Medical supports. Con: Not IDD-focused
■ Supportive Living Program (SLP – Disabilities)	IDPH & HFS oversight	Apartment-style with onsite support	Personal care, meals, social activities	Medicaid SLP program	Limited sites for 22–64 age group	Functional eligibility; Medicaid	Pro: Assisted-living style. Con: Few disability-specific sites; not DD waiver

Here's the Integration Spectrum chart showing each Illinois IDD residential placement plotted from most community-integrated (score 10) to most institutional (score 1). This makes it easy to visualize the relative independence, medical intensity, and community inclusion of each setting.

