



# Long-Term Care Facility - Approved Licensure Actions

Facility ID#	6009922	Licensee ID#	0028191	CCN#	145400	Region	6	Facility Type	Skilled/Intermediate (Part 300)	
Name	Westminster Village									
Address	2025 East Lincoln Street									
City	Bloomington							Zip Code	61701	
County	McLean									
The Division of Long-Term Care, Quality Assurance has approved the facility listed above for the following licensure action(s):										
<input type="checkbox"/> New Facility			<input type="checkbox"/> Replacement Facility			<input type="checkbox"/> Name Change Only		<input type="checkbox"/> Address Change		
<input type="checkbox"/> Change of Ownership			<input type="checkbox"/> Closure			<input type="checkbox"/> Licensee Name Change		<input checked="" type="checkbox"/> Bed Change		
<b>New Facility</b> - Effective Date of Initial Licensure: _____										
			Skilled		Sheltered Care		Community Living			
			Intermediate		ICF/DD		MC/DD			
			ASCU: Yes <input type="checkbox"/> No <input type="checkbox"/>		SMHRF		Total Beds			
<b>Change of Ownership</b> - Effective Date of Ownership: _____										
			Skilled		Sheltered Care		Community Living			
			Effective Date of Licensure: _____		Intermediate		ICF/DD		MC/DD	
					SMHRF		Total Beds			
New Facility Name: _____										
New Licensee ID#: _____			ASCU: Yes <input type="checkbox"/> No <input type="checkbox"/>							
<b>Replacement Facility</b> - Effective Date of Licensure: _____										
			Skilled		Sheltered Care		Community Living			
			New Facility Name: _____		Intermediate		ICF/DD		MC/DD	
			New Licensee ID#: _____		SMHRF		Total Beds			
<b>Facility Closure</b> - Effective Date of Closure: _____ Reason For Closure: _____										
<b>Facility Name Change</b> - Effective Date of Change: _____ New Facility Name: _____										
<b>Licensee Name Change</b> - Effective Date of Change: _____ New Licensee Name: _____										
<b>Address Change</b> - Effective Date of Change: _____ New Address: _____										
<b>Capacity/Level of Care</b> - Effective Date of Change: Feb 4, 2020										
					<b>From:</b>	Skilled	78	<b>To:</b>	Skilled	96
						Intermediate			Intermediate	
						Sheltered Care			Sheltered Care	
						Community Living			Community Living	
						ICF/DD			ICF/DD	
						MC/DD			MC/DD	
						SMHRF			SMHRF	
						Total Beds	78		Total Beds	96
Notes: _____										
_____										
_____										