

(BPD)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State/Territory: District of Columbia

Citation
42 CFR
430.10

As a condition for receipt of Federal funds
under title XIX of the Social Security Act,
the

DEPARTMENT OF HEALTH CARE FINANCE
(Single State Agency)

Submits the following State plan for the
medical assistance program, and hereby
agrees to administer the program in
accordance with the provisions of this State
plan, the requirements of titles XI and XIX
of the Act, and all applicable Federal
regulations and other official issuances of
the Department.

(BPP)

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42 CFR
431.10
AT-79-29

1.1 Designation and Authority

- (a) The DEPARTMENT OF HEALTH CARE FINANCE is the single State agency designated to administer or supervise the administration of the Medicaid program under title XIX of the Social Security Act. (All references in this plan to "the Medicaid agency" mean the agency named in this paragraph).

ATTACHMENT 1.1-A is a certification signed by the State Attorney General identifying the single state agency and citing the legal authority under which it administers or supervises administration of the program.

TN No. _____
Supersedes TN No. _____

Approval Date

APR 28 2009

Effective Date

10/01/08

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Citation
Section
1902 (a)
of the Act

1.1 (b) The State agency that administered or supervised the administration of the plan approved under title X of the Act as of January 1, 1965, has been separately designated to administer or supervise the administration of that part of this plan which relates to blind individuals.

 Yes. The State agency so designated is

This agency has a separate plan covering that portion of the State Plan under title XIX for which it is responsible.

 X Not applicable. The entire plan under title XIX is administered or supervised by the State agency named in paragraph 1.1(a).

(BPP)

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Citation
Intergovernmental
Cooperation
Act of 1968

1.1(c)

Waivers of the single State agency requirement which are currently operative have been granted under authority of the Intergovernmental Cooperation Act of 1968.

Yes. ATTACHMENT 1.1-B describes these waivers and the approved alternative organizational arrangements

Not applicable. Waivers are no longer in effect.

Not applicable. No waivers have ever been granted.

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1.1(d)

The agency named in paragraph 1.1 (a) has responsibility for all determinations of eligibility for Medicaid under this plan.

Determinations of eligibility for Medicaid under this plan are made by the agencies specified in ATTACHMENT 1.2-B. There is a written agreement between the agency named in paragraph 1.1 (a) and other agencies making such determinations for specific groups covered under this plan. The agreement defines the relationships and active responsibilities of the agencies.

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1.1 (e) All other provisions of this plan are administered by the Medicaid agency except for those functions for which final authority has been granted to a Professional Standards Review Organization under Title XI of the Act.

(f) All other requirements of 42 CFR 431.10 are met.

(BPP)

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Citation
42 CFR 431.11
AT-79-29

1.2 Organization for Administration

- (a) ATTACHMENT 1.2-A contains a description of the organization and functions of the Medicaid agency and an organization chart of the agency.
- (b) Within the State agency, the DEPARTMENT OF HEALTH CARE FINANCE has been designated as the medical assistance unit. ATTACHMENT 1.2-A contains a description of organization and functions of the medical assistance unit and an organization chart of the unit.
- (c) ATTACHMENT 1.2-C contains a description of the kinds and numbers of professional medical personnel and supporting staff used in the administration of the plan and their responsibilities.
- (d) Eligibility determinations are made by State or local staff of an agency other than the agency named in paragraph 1.1(a). ATTACHMENT 1.2-B contains a description of the staff designated to make such determinations and the functions they will perform.

____ Not applicable. Only staff of the agency named in paragraph 1.1(a) make such determinations.

(BPP)

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Citation
42 CFR 431.50(b)
AT-79-29

1.3 Statewide Operation

The plan is in operation on a Statewide basis in accordance with all requirements of 42 CFR 431.50.

The plan is State administered.

The plan is administered by the political subdivisions of the State and is mandatory on them.

(BPP)

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Citation
42 CFR
431.12(b)
AT-78-90

1.4 State Medical Care Advisory Committee

There is an advisory committee to the Medicaid agency director on health and medical care Services established in accordance with and meeting all the requirements of 42 CFR 431.12.

42 CFR
438.104

- [X] The State enrolls recipients in MCO, PIHP, PAHP, and/or PCCM programs. The State assures that it complies with 42 CFR 438.104 (c) to consult with the Medical Care Advisory Committee in the review of managed care marketing materials.

(MB)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

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Citation 1.5 Pediatric Immunization Program
1928 of the
Act

1. The State has implemented a program for the distribution of pediatric vaccines to program-registered providers for the immunization of federally vaccine-eligible children in accordance with section 1928 as indicated below.

a. The State program will provide each vaccine-eligible child with medically appropriate vaccines according to the schedule developed by the Advisory Committee on Immunization Practice and without charge for the vaccines.

b. The State will outreach and encourage a variety of providers to participate in the program and to administer vaccines in multiple settings, e.g., private health care providers, providers that receive funds under Title V of the Indian Health Care Improvement Act, health programs or facilities operated by Indian tribes, and maintain a list of program-registered providers.

c. With respect to any population of vaccine-eligible children a substantial portion of whose parents have limited ability to speak the English language, the State will identify program-registered providers who are able to communicate with this vaccine-eligible population in the language and cultural context which is most appropriate.

d. The State will instruct program-registered providers to determine eligibility in accordance with section 1928(b) and (h) of the Social Security Act.

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Citation
1928 of the
Act

1.5 Pediatric Immunization Program
(continued)

- e. The State will assure that no program-registered provider will charge more for the administration of the vaccine than the regional maximum established by the Secretary. The State will inform program-registered providers of the maximum fee for the administration of vaccines.
- f. The State will assure that no vaccine-eligible child is denied vaccines because of inability to pay an administration fee.
- g. Except as authorized under section 1915 (b) of the Social Security Act or as permitted by the Secretary to prevent fraud or abuse, the State will not impose any additional qualifications or conditions, in addition to those indicated above, in order for a provider to qualify as a program-registered provider.

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Citation
1928 of the
Act

1.5 Pediatric Immunization Program
(continued)

2. The State has not modified or repealed any Immunization Law in effect as of May 1, 1993 to reduce the amount of health insurance coverage of pediatric vaccines.
3. The State Medicaid Agency has coordinated with the State Public Health Agency in the completion of this preprint page.
4. The State agency with overall responsibility for the implementation and enforcement of the provisions of section 1928 is:

State Medicaid Agency

State Public Health Agency