

**Department of Health Care Finance  
 Medical Care Advisory Committee (MCAC)  
 State Plan Amendment (SPA) and Rulemaking Report**

**April 26, 2022 to June 15, 2022**

**STATE PLAN AMENDMENTS/WAIVERS**

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
<b>Postpartum Extension</b>	Extends postpartum coverage from 60 days after the end of a pregnancy until 12 months after the end of a pregnancy.	06.16.22			04.01.22	
<b>Supported Employment Services</b>	Creates new 1915(i) State Plan authority for supported employment for adults with SMI and SUD.	05.23.22			07.01.22	Amends the Medicaid State Plan via a 1915(i) SPA
<b>Alternative Benefit Plan (ABP)</b>	Adds coverage to the District's Alternative Benefit Plan Medicaid Expansion for routine patient costs in qualifying clinical trials.	05.05.22			01.01.22	

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
<b>Coverage of Routine Patient Costs Furnished in Connection with Clinical Trials</b>	Effectuates the coverage of routine patient costs incurred during qualified clinical trials, as required by the Consolidated Appropriations Act, 2021, Division CC, Title II, Section 210.	05.02.22			01.01.22	Adds Attachment 3.1A, page 12; Attachment 3.1B, page 10; and Attachment 4.19B, page 35
<b>FY 2023 Physician Supplemental Payment</b>	Continues periodic supplemental payments for Medicaid-enrolled physician groups, with at least five hundred (500) physicians that are members of the group, that contract with a public general hospital located in an economically underserved area of the District to deliver inpatient, emergency department, and intensive care physician services to Medicaid beneficiaries.		05.24.22		10.1.22	

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
<b>Appendix K #7</b>	Extends the date to pay out one-time supplemental payments available to eligible waiver providers employing Direct Support Professionals (DSPs) to September 30, 2022; allows payment for a one-time COVID-19 vaccination incentive payment to eligible waiver providers; allows payment for a hiring and retention incentive payment to eligible HCBS waiver providers; allows increased payment rates for RN and LPN services; allows increased per diem reimbursement rates to IDD waiver providers of Supported Living Daily (with or without transportation) and Residential Habilitation; and allows for the provision of participant-directed PCA in excess of 16 hours per day (up to 24 hours), when authorized in the participant's person-centered service plan for participants in the Services My Way program.		05.16.22		FY21	

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
<b>Integrated Online Application for Food, Cash, &amp; Medical Benefits</b>	Establishes an alternative, online combined application for food, cash, and medical benefits, which would allow individuals to apply for benefits in the District on a one-stop-shop basis and aligns with the recently approved integrated paper application for food, cash, and medical benefits.		07.14.21		07.26.21	Proposes an alternative online integrated application that aligns with the recently approved integrated paper application.
<b>Doula Services</b>	Adds doula services and a covered service under the Medicaid State Plan.			X	10.01.22	Anticipated submission date of on or before 07.15.22.
<b>DC People with Intellectual and Development Disabilities (IDD) Waiver Renewal</b>	Renews the waiver for an additional five (5) years, modifies the Developmental Disabilities (DD) criteria for waiver enrollment eligibility, updates specific services, adds new services, and sets reimbursement rates for proposed new services			X	10.01.22	Anticipated submission date of 07.15.22.

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
<b>DC Individual and Family Support (IFS) Waiver Amendment</b>	(1) Modifies the Developmental Disabilities (DD) criteria for waiver enrollment eligibility; (2) adds of new services; (3) sets payment rates for new services; (4) adds the option for participant-directed services (PDS); (5) modifies reimbursement methodology to include District-funded payment enhancements; and (6) modifies the waiver enrollment process.			X	10.01.22	Anticipated submission date of 07.15.22.
<b>1915(i) Income Disregard</b>	Will waive income eligibility restriction to disregard all income between statutory limit (150% FPL) and District income eligibility levels for Medicaid for all 1915(i) services in the District.			X	07.01.22	Anticipated submission date on or before 09.30.22.
<b>Mandatory COVID-19 SPA</b>				X	FY21	Must be submitted prior to the end of the PHE.
<b>COVID Vaccine Administration Rate Increase (Permanent Authority)</b>	Raises the vaccine administration rates from 80% of the Medicare rate to 100% of the Medicare rate			X	FY21	Amends Attachment 4.19B

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
<b>Burial Funds/ Excess Resources Financial Eligibility</b>	Establishes limitations on the amount of burial funds that would be excluded from countable resources for individuals that are subject to a resource test.			X	FY21	Amends Supplement 8b to Attachment 2.6A
<b>Unborn Child/ Pregnant Woman Children's Health Insurance Program (CHIP)</b>	Provides CHIP eligibility to unborn children of pregnant women during the prenatal period of undocumented immigrant mothers who are not eligible or enrolled in other health coverage.			X	FY23	Creates a new CHIP State Plan
<b>Medication Therapy Management (MTM)</b>	Establishes MTM as a service delivered by pharmacists.			X	FY23	

## RULES

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
<b>Final Rule – Housing Supportive Services (HSS)</b>	Establishes rules to reimburse for HSS services for beneficiaries who are or are at risk of homelessness.	06.03.22			Adds new Chapter 103 to Title 29 DCMR
<b>Final Rule – Program for All-Inclusive Care for the Elderly (PACE)</b>	Establishes standards governing eligibility criteria for participants, covered services, conditions of participation for providers, reimbursement, data collection, reporting requirements, and quality improvement for the District PACE program.	06.03.22			Adds new Chapter 88 to Title 29 DCMR
<b>Final Rule – Health Care Safety Net Administration</b>	Amends rules governing the DC Healthcare Alliance rules to conform to funded statutory changes to the Alliance program and streamline the program with Medicaid.	05.06.22			Amends Chapter 33, Subtitle B, Title 22 DCMR
<b>Final Rule – Home and Community-Based Services Waiver for Individuals with Intellectual and Developmental Disabilities (Proposed)</b>	Proposes changes to the standards governing cost reporting to clarify that ID/DD Waiver providers must use cost report templates designated by DHCF and to require expenditures reported on the cost reports to comply, unless specified otherwise by DHCF, with the allowable cost principles in the Medicare Principles of Reimbursement			X	Amends Chapter 19 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
<b>Final Rule – Medically Needy Spend Down (Emergency and Second Proposed)</b>	Clarifies the eligibility factors for medically needy individuals whose income exceeds the maximum income for their eligibility category but are otherwise eligible for Medicaid, and details the medically needy spend down process for medically needy individuals to become eligible for Medicaid.			X	Creates new Sections 9515 and 9516 of chapter 95 of Title 29 DCMR
<b>Final Rule – Other Licensed Providers (Emergency and Proposed)</b>	Permits the District Medicaid program to enroll additional licensed providers (psychologists, licensed independent clinical social workers, licensed professional counselors and licensed marriage and family therapists).			X	Amends Chapter 9 of Title 29 DCMR
<b>Final Rule – Home and Community-Based Services Waiver for Individual and Family Support (IFS) (Second Emergency and Proposed)</b>	Establishes standards governing eligibility criteria for participants, covered services, conditions of participation for providers, reimbursement, data collection, reporting requirements, and quality improvement for the District IFS Waiver program.			X	Adds new Chapter 90 to Title 29 DCMR
<b>Final Rule – Postpartum Extension (Emergency and Proposed)</b>	Extends the District Medicaid program’s postpartum coverage period from sixty (60) days to twelve (12) months.			X	Amends Chapters 95 and 100 of Title 29 DCMR



TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
<b>MAGI-Based Income Methodology Update (Emergency and Proposed)</b>	Updates the Medicaid eligibility rules governing MAGI-based income methodology to comply with federal legislative changes from the Tax Cuts and Jobs Act, the Bipartisan Budget Act of 2018, and the HEALTHY KIDS Act, as outlined in the CMS State Health Official Letter 19-003.	06.03.22			Amends section 9506 of Chapter 95 of Title 29 DCMR
<b>Final Rule – Immigrant Children’s Program Eligibility Rule</b>	Clarifies eligibility level for ICP at levels comparable to Medicaid/CHIP for children (319% FPL for children 0-18 and 216% FPL for children 19-20, with additional 5% income disregard)			X	Amends Chapter 73 of Title 29 DCMR
<b>Dual Eligible Special Needs Plan (D-SNP) Combined Rulemaking (Emergency and Proposed)</b>	Establishes Dual Eligible Special Needs Programs under the District Dual Choice Program.		X		Adds new Chapter 57 and amends Chapters 97 and 102 of Title 29 DCMR
<b>Services My Way Program</b>	Clarifies requirements that all participant-directed workers enroll as providers with DHCF and include their NPIs on the claims submitted to DHCF for payment.		X		Amends Chapter 101 to Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
<b>Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) (Third Proposed)</b>	Updates reimbursement standards for DMEPOS; clarifies the settings in which covered DMEPOS may be provided; and adds a face-to-face encounter requirement for Medicaid coverage of DMEPOS.		X		Amends Chapter 9 of Title 29 DCMR
<b>Adult Substance Abuse Rehabilitative service (ASARS)/Mental Health Rehabilitation Services (MHRS) (Emergency and Proposed)</b>	Proposes changes to ASARS and MHRS rulemakings to clarify requirements for utilization management and qualified providers.		X		Amends rules at Chapters 52 and 91 of Title 29 DCMR
<b>Supportive Employment Services</b>	Provides home- and community-based services under Section 1915(i) of the Social Security Act and permits the District Medicaid program to establish therapeutic and vocational support services to enable individuals with either a serious mental illness or SUD to find and sustain employment.		X		Promulgates rules at Chapter 107 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
<b>Behavioral Health Stabilization and Transition Planning</b>	Establishes and describes steps to take when non-hospitalization emergency response is required for an individual struggling to manage their psychiatric or substance use related symptoms, and establishes transition planning services for beneficiaries stepping down from certain institutional treatment settings.		X		Promulgates rules at Chapters 106 and 108 of Title 29 DCMR
<b>Medicaid Applications and Fair Hearings Rights</b>	Removes the requirement that the application be complete to be processed; clarifies the written notice that the Department sends to the applicant when supplementary information is needed for an eligibility determination to be made; and clarifies fair hearing processes, including: the automatic scheduling of an administrative review of an adverse action prior to a fair hearing.		X		Amends Chapter 95 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
<b>Excess Resources and Burial Funds (Emergency and Proposed)</b>	Clarifies methods for counting resources for individuals subject to a resource test (KB, ABD, individuals applying for/receiving LTCSS); and establishes limitations on the amount of burial funds that would be excluded from countable resources for individuals that are subject to a resource test.			X	Amends Chapters 95 and 98 of Title 29 DCMR
<b>Pharmacy Lock-In/ DUR Requirements (Emergency and Proposed)</b>	Makes technical corrections to pharmacy lock-in language to better align with DHCF intent with regard to implementation; align with new requirements passed in SUPPRORT ACT.			X	Amends Chapter 27 of Title 29 DCMR
<b>Home Health Services</b>	Clarifies that home health aide services rates are to be adjusted annually to comply with the Living Wage.			X	Amends Chapter 99 of Title 29 DCMR
<b>Reasonable Compatibility</b>	Consistent with CMS public health emergency unwinding policy recommendations, raises the reasonable compatibility standard from ten percent (10%) to twenty percent (20%).			X	Amends Chapter 95 of Title 29 DCMR