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

June 21, 2024

STATE PLAN AMENDMENTS/WAIVERS

Table 1. State Plan Amendments and Waiver Approvals With Effective Dates between January 1, 2024 and July 1, 2024						
SPA Transmittal Number	**DESCRIPTION**	**STATUS**			**Target/ Actual Effective Date**	**Notes**
		Approval Date	**Date Submitted for CMS Review**	**In Development**		
DC-24-0001	Allows the District to reimburse specialists directly for time spent consulting a beneficiary's primary care provider about a condition directly related to the consulting provider's area of expertise. Also adds the Collaborative Care Services, based off the Collaborative Care Model (CoCM) as a new reimbursable service for primary care practices, including Federally Qualified Health Centers (FQHCs).	3.22.24	2.20.24		1.1.24	
DC-24-0002	Updates Medicaid reimbursement rates for physical therapy, occupational therapy, and speech-language therapy services under the home health benefit.	5.8.24	3.27.24		1.1.24	

Table 1. State Plan Amendments and Waiver Approvals With Effective Dates between January 1, 2024 and July 1, 2024						
SPA Transmittal Number	**DESCRIPTION**	**STATUS**			**Target/ Actual Effective Date**	**Notes**
		Approval Date	**Date Submitted for CMS Review**	**In Development**		
DC-24-0003	1) Provides assurances that the District is complying with new third party liability requirements authorized under the Consolidated Appropriations Act, 2022 and 2) provides clarity on the District's option to not adopt a new flexibility on creating liens for injury settlement proceeds attributable to future medical expenses.	2.21.24	1.3.24		2.1.24	
DC-24-0004	Updates reimbursement methodology for Rehabilitation Day Services and Psychosocial Rehabilitation (Clubhouse) Services and adds screening as a new service under the Mental Health Rehabilitative Services benefit. Renames Community Based Intervention Level 1, Multisystemic Therapy and adds a new service, Attachment and Biobehavioral Catchup, as a preventive service. Additionally, updates the structure of Methadone Services in Opioid Treatment Programs.	6.14.24	3.28.24		2.1.24	
DC-24-0005	Provides authority to continue to make ARPA 9817 Direct Care Supplemental payments through March 31, 2025 (the remainder of the ARPA period)	5.29.24	4.12.24		5.12.24	
DC-24-0006	Provides 12-months continuous eligibility to children under the age of 19.	3.15.24	1.31.24		1.1.24	
DC-24-0007	Makes COVID-19 changes to 1915(i) Housing Supportive Services case manager supervisor requirements and reassessment processes permanent.	5.2.24	4.2.24		5.12.24	

Table 1. State Plan Amendments and Waiver Approvals With Effective Dates between January 1, 2024 and July 1, 2024						
SPA Transmittal Number	**DESCRIPTION**	**STATUS**			**Target/ Actual Effective Date**	**Notes**
		Approval Date	**Date Submitted for CMS Review**	**In Development**		
DC-24-0010	Makes COVID-19 changes to My Health GPS permanent.	6.12.24	4.19.24		5.12.24	
DC-24-0012	Establishes an emergency interim payment methodology for certain providers affected by the Change Healthcare cybersecurity incident	6.13.24	4.10.24		2.1.24	

Table 2. State Plan Amendments Currently Under Review with the Centers for Medicare and Medicaid Services or Under Development with Anticipated Effective dates on or before July 1, 2024						
SPA Transmittal Number	**Description**	**Status**			**Target/Actual Effective Date**	**Notes**
		Approval Date	**Date Submitted for CMS Review**	**In Development**		
DC-24-0008	Establishes coverage of MTM services from July 1, 2024, forward. MTM services are a patient-centered service or group of services provided by a licensed pharmacist to a beneficiary to improve the therapeutic outcomes of that beneficiary.		5.14.24		7.1.24	
DC-24-0009	Permits the District of Columbia Medicaid Program to increase the PNA standard for eligible institutionalized long-term care residents and set annual increases tied to the federal Cost-Of-Living adjustment (COLA) published by the Social Security Administration.		5.21.24		5.12.24	
DC-24-0011	Provides a technical correction to the District of Columbia Medicaid State Plan on the reimbursement of public specialty hospitals.		5.14.24		4.1.24	

DC-24-0013	Permits the District of Columbia to establish a combination CHIP program to provide coverage through the Unborn Child option to immigrant pregnant individuals with income up to three hundred nineteen percent (319%) of the federal poverty level (consistent with federal Modified Adjusted Gross Income financial methodology), and who are not otherwise eligible for Medicaid.		5.17.24		10.1.23	
DC-24-0014	Delays the rebasing for reimbursements for Federally Qualified Health Centers to January 1, 2026, and every three (3) years, thereafter.			X	5.12.24	
DC-24-0016	Updates the reimbursement methodology for out-of-state nursing facilities.			X	6.1.24	

RULES

1. **INTENSIVE CARE COORDINATION (ICC) PROPOSED RULE** – Amends Chapter 52 of Title 29 DCMR These rules add Targeted Case Management, called ICC, as a new service provided under the District's Mental Health Rehabilitative Services (MHRS) benefit.

   Notice of proposed rulemaking submitted to EOM on 3.22.24.

2. **BEHAVIORAL HEALTH PHYSICIAN EMERGENCY AND PROPOSED RULE** – Amends that amends Chapter 9 of Title 29 DCMR to add reimbursement for interprofessional consultation reimbursement and collaborative care services reimbursement.

   Notice of Emergency and Proposed Rulemaking submitted to EOM on 4.1.24.

3. **INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES (IDD) WAIVER FINAL RULE** – Amends Chapter 19 of Title 29 of DCMR. These rules implement the expansion of services to persons with developmental disabilities and correspond with an IDD Waiver renewal sent to CMS for approval on July 18, 2022, with an October 1, 2022, effective date. These rules are necessary to align requirements in regulation with those changes approved by CMS in the corresponding IDD Waiver renewal.

   The Notice of Second Emergency and Proposed Rulemaking was published in the *D.C. Register* on 3.15.24. DHCF submitted the Final Rulemaking to EOM on 6.7.24.

4. **INDIVIDUALS AND FAMILY SUPPORTS (IFS) WAIVER FINAL RULE** – Amends Chapter 90 of Title 29 of DCMR. These rules implement expansion of services to persons with developmental disabilities in accordance with the amendments to the Department on Disability Services Establishment Act of 2006 made by the Developmental Disability Eligibility Reform Amendment Act of 2022, effective May 18, 2022 (D.C. Law 24-117; D.C. Official Code § 7-761.01 et seq.), and to align requirements in regulation with changes in a corresponding IFS Waiver Amendment approved by CMS, effective October 1, 2022.

   The Notice of Second Emergency and Proposed Rulemaking was published in the *D.C. Register* on 3.8.24. DHCF submitted the Final Rulemaking to EOM on 6.7.24.

5. **BEHAVIORAL HEALTH FINAL RULE** – These rules amend Title 29 DCMR. This rulemaking will amend Chapters 45 and 52 of Title 29 DCMR to reflect new behavioral services and changes to existing behavioral health services as a result of the District including behavioral health services under Medicaid managed care.

The Proposed Rulemaking was published in the *D.C. Register* on 3.15.24. DHCF submitted the Final Rulemaking to EOM on 5.16.24.

6. **ELDERLY AND INDIVIDUALS WITH PHYSICAL DISABILITIES WAIVER FINAL RULE** – This rule amends Chapter 42 of Title 29 DCMR. In accordance with the changes proposed in the approved waiver renewal effective February 7, 2022, and other amendments to the waiver. This rulemaking also modifies the scope of covered waiver services, clarifies restrictions related to participant enrollment and provider reimbursement, and updates requirements for service providers under the EPD Waiver program.

   The Notice of Second Emergency and Proposed Rulemaking was published in the *D.C. Register* on 3.29.24. DHCF anticipates submitting the Final Rulemaking to EOM by 7.08.24.

7. **AUTISM SPECTRUM DISORDER FINAL RULE** – These rules establish Chapter 110 of Title 29 DCMR on Medicaid reimbursable autism spectrum disorder services. These rules correspond to an amendment to the District's State Plan for Medical Assistance which was approved by the Centers for Medicare and Medicaid Services with an effective date of October 1, 2023. This rule also identifies provider types that are eligible to deliver Medicaid-covered ASD services, including new provider types who are eligible to deliver ABA therapy and are certified by the Behavior Analyst Certification Board.

   A Notice of Emergency and Proposed Rulemaking was published in the September 1, 2023, *D.C. Register*. DHCF anticipates submitting the final rulemaking to EOM on or about July 15, 2024.

8. **CONTINUOUS ELIGIBILITY PROPOSED RULE** – These rules amend Chapter 95 of Title 29 DCMR. The rules establish continuous eligibility for children under age nineteen (19), with limited exceptions, effective January 1, 2024, as required by federal law.

   DHCF anticipates submitting the rulemaking to EOM on or about July 15, 2024.

9. **THIRD PARTY LIABILITY EMERGENCY AND PROPOSED RULE –** These rules amend Chapter 14 of Title 29 DCMR in its entirety. These rules make changes to third party liability requirements consistent with CMS's State Medicaid Director Letter (SMDL) #23-02, *Third Party Liability in Medicaid: State Compliance with Changes Required in Law and Court Rulings*, on liens on Medicaid beneficiaries for jury settlement proceeds, prohibiting a third party liability payer's ability to refuse payment for a service solely on the basis that the service did not receive prior authorization under the third party payer's rules, , and specifying that a third party payer must respond within sixty (60) days of receiving a DHCF inquiry regarding a health care claim.

   DHCF anticipates submitting a rulemaking to EOM on or about August 15, 2024.