

**Department of Health Care Finance
 Medical Care Advisory Committee (MCAC)
 State Plan Amendment (SPA) and Rulemaking Report
 June 26, 2019**

STATE PLAN AMENDMENTS

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENTATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Long Term Care Service and Supports (LTCSS) Assessment Process: PCA Services (DC 19-001)	Adds Licensed Independent Clinical Social Workers (LICSWs) as type of clinician allowed to conduct LTCSS functional eligibility assessments.	5/21/19			04/01/19	Amends Attachment 3.1-A and Attachment 3.1-B
Cost Based Reimbursement of Ambulances (DC 19-002)	Establishes cost-based reimbursement methodology for FEMS ambulances that will provide more adequate reimbursement to FEM for these services, including payment for trip, regardless of transport to hospital.		Expected Submission (6/27/19)	X	04/01/19	Supplement 4 to attachment 4.19B
Adult Hospice	Codifies existing DHCF standards for the delivery and reimbursement of adult hospice services and updates policies to align with federal requirements			X	FY19	Amends: (1) Supplement 1 to Attachment 3.1A, pages 22-24; (2) Supplement 1 to

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENTATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
	regarding payment rates for routine home care services and increase monitoring and oversight of delivery of hospice services.					Attachment 3.1B, pages 21-23; (3) Attachment 4.19B, pages 8-9
Pharmacist Administration Services	Proposes to authorize DHCF to reimburse pharmacists an administration fee for administering immunizations, vaccines, and anaphylaxis agents. Pharmacists would be able to directly administer these treatments for Medicaid beneficiaries.			X	FY20	Amends Supplement 1 to Attachment 3.1-A, pages 8-8a
Burial Funds	Proposes to establish limitations on the amount of burial funds that would be excluded from countable resources for individuals that are subject to a resource test.			X	FY20	Amends Supplement 8b to Attachment 2.6A
Elderly and Persons with Disabilities (EPD) 1915(c) Waiver Amendment	Removes ability for beneficiaries residing Assistant Living Facilities (ALFs) to receive Personal Care Aide (PCA) waiver services; removes underutilized physical therapy and occupational therapy services; removes duplicative performance measures; and updates/clarifies scope of			X	FY19-20	Amends EPD 1915(c) HCBS Waiver

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENTATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
	coverage for various existing services.					
Program of All-Inclusive Care for the Elderly (PACE)	Proposes to establish a PACE program in the District, make services covered under PACE available to eligible Medicaid beneficiaries who enroll in the program, and set criteria for becoming a PACE provider.			X	FY19-20	Amends: (1) Attachment 2.2A, page 11; (2) Section 3, pages 19c and 20c; (3) Attachment 3.1A, page 11; (4) Attachment 3.1B, page 9 Creates new: (1) Supplement 7 to Attachment 3.1A; (2) Supplement 4 to Attachment 3.1B
1115 Behavioral Health Transformation Demonstration	The demonstration application proposes Medicaid service and reimbursement changes with the goal of ensuring that Medicaid provides a broader continuum of behavioral health services and supports for individuals with an SMI/SED, SUD, or other behavioral health needs.			X	FY 20	

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENTATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
	*Clubhouse and CPEP policy initiatives are included under this demonstration.					
Pharmacy Lock-In/ DUR Requirements	Technical corrections to pharmacy lock-in language to better align with DHCF intent with regard to implementation; align with new requirements passed in SUPPORT ACT.			X	FY20	Amends Attachment 3.1A-B
Medicare Enrollment	Proposes a requirement to apply for Medicare as a condition of Medicaid eligibility for individuals that would be likely eligible for Parts A, B, or D.			X	10/1/20	Amends Attachment 2.6-A
ASARS/MHRS Technical Changes	Technical changes to ASARS and MHRS SPA to clarify requirements for utilization management and eligible providers.			X	FY 19-20	Amends Supplement 6 to 3.1A and Supplement 3 to 3.1B
Individuals with Intellectual & Developmental Disabilities (IDD) 1915(c) Waiver Amendment	Amendment to IDD waiver and corresponding rules, proposing minor revisions to certain covered services and also adding a self-direction option for multiple services.			X	FY20	Amends IDD 1915(c) HCBS Waiver

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENTATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Individual & Family Services (IFS) 1915(c) Waiver	Proposes to create a new Individual & Family Support (IFS) waiver and corresponding rule, which will include all of the services in the ID/DD waiver as well as two additional services: education support services and participant-directed goods & services.			X	FY20	Creates new IFS 1915(c) HCBS Waiver

RULES

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development	
Health Care Benefit Grants (Final)	Revises DHCF grantmaking rules to comply with District law and incorporate federal guidance on cost principals for nonprofits.	5/31/2019			Amends Section 1807 of Chapter 18 of Title 29 DCMR
My Health GPS (Final)	Make programmatic and reimbursement changes to the District’s My Health GPS program by adding a third PMPM rate to support development and maintenance of the annual care plan; amending the beneficiary risk stratification process; and delaying implementation of the pay-for- performance program.	4/29/2019			Amends Chapter 102 of Title 29 DCMR
Medically Needy Spend Down (Proposed Rule)	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 Section 9515 of chapter 95 of Title 29 DCMR
Telemedicine	Responds to public comments on 3 rd E&P; proposed expansion of telemedicine services to additional DBH-certified providers.		X		Amends Chapter 9 of Title 29 DCMR
Health Information Exchange (Final)	Established the District of Columbia Health information exchange; governs the voluntary registration and designation of HIE entities in the District of Columbia and set forth guidance to regulate the efficient and secure transmission of Health-related information according to		X		Amends Title 29 of the DCMR by Adding Chapter 87

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development	
	nationally recognized standards for DC HIE participants.				
Long Term Care Service and Supports (LTCSS) Assessment Process: EPD Waiver (2nd Emergency & Proposed)	Updates LTCSS assessment process to align with the new standardized needs-based assessment tool utilized by the District, and to add Licensed Independent Clinical Social Worker (LICSW) as a provider type allowed to conduct the LTCSS assessment, as was recently authorized by the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services in its approval of DHCF's Elderly and Persons with Physical Disabilities HCBS Waiver; and revises standards governing provider attestations of beneficiary's health status.			X	Amends Section 989 of Chapter 9 and Section 4201 of Chapter 42 of Title 29 DCMR
Elderly and Persons with Disabilities (EPD) Waiver (Proposed)	Updates EPD Waiver rules to align with corresponding waiver amendment as follows: Removes ability for beneficiaries residing Assistant Living Facilities (ALFs) to receive Personal Care Aide (PCA) waiver services; removes underutilized physical therapy and occupational therapy services; removes duplicative performance measures; and updates/clarifies scope of coverage for various existing services.			X	Amends Chapter 42 of Title 29 DCMR
Medicaid Reimbursement for Health Home Services (Final)	Proposes to update standards for the delivery of and reimbursement for adult's hospice services, enabling DHCF to maintain compliance with new federal requirements regarding payment rates for routine home care services and increase monitoring and oversight of delivery of hospice services.	Expected Publication (7/05/19)			Amends Chapter 69 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development	
Nursing Facilities Reimbursement Methodology (Final)	Redesigns reimbursement methodology for nursing facilities, including new quality measures and potential for value-based purchasing.			X	Amends Chapter 65 of Title 29 DCMR
Long Term Care Service and Supports (LTCSS) Assessment Process: PCA Services (Final)	Adds Licensed Independent Clinical Social Workers (LICSWs) as type of clinician allowed to conduct LTCSS functional eligibility assessments.			X	Amends Section 5003 of Chapter 50 of Title 29 DCMR
FSMHC (E&P)	Establishes authority for the transfer of oversight of free-standing mental health clinics (FSMHCs) from DHCF to DBH in an effort to consolidate oversight of BH services to DBH.	10/01/2019		X	Amends Chapter 8 of Title 29 of the DCMR
TEFRA/Katie Beckett (Final)	Clarifies eligibility standards for "TEFRA/Katie Beckett" eligibility group receiving HCBS services in lieu of institutional care.			X	Creates new Section 9512 of Chapter 95 of Title 29 DCMR
Aged, Blind and Disabled (Emergency and 2nd Proposed)	Clarifies the eligibility requirements for the ABD eligibility group and sets forth requirements on the application and renewal process.			X	Amends Chapter 95 of Title 29 of DCMR by adding new Section 9513
Adult Hospice (Emergency and Proposed)	Codifies existing DHCF standards for the delivery and reimbursement of adult hospice services and updates policies to align with federal requirements regarding payment rates for routine home care services and increase monitoring and oversight of delivery of hospice services.			X	Creates new Section 939 of Chapter 9 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development	
Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) (Emergency and 2nd Proposed)	Revises DMEPOS coverage limitations to comply with federal requirements that prohibit DHCF from limiting use of the equipment and services to a home/residential setting.			X	Amends Section 997 of Chapter 9 of Title 29 DCMR
Cost Based Reimbursement of Ambulances (Emergency and Proposed)	Establishes cost-based reimbursement methodology for FEMS ambulances that will provide more adequate reimbursement to FEMS for these services, including payment for a trip, regardless of transport to hospital.			X	Creates New Chapter (104) to Title 29 of the DCMR
Alliance Eligibility and Unjust Convictions (Emergency and Proposed)	Updates and streamlines eligibility rules for Alliance program to provide greater parity with MAGI Medicaid eligibility process. Establishes new category to provide health care and behavioral health services to individuals that were unjustly convicted and imprisoned.			X	Amends Chapter 33 of Title 22-B of the DCMR
Excess Resources and Burial Funds (Emergency and Proposed)	Proposes a process for individuals that are otherwise eligible for Medicaid but over the resource limit to reduce their resources to the resource limit; 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 of the DCMR
Physician Supplemental Payments (Final)	Provides quarterly supplemental payments to qualifying physician groups that deliver services in a hospital located in an underserved area.			X	Amends Chapter 9 of the DCMR.

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development	
Pharmacy Lock-In/ DUR Requirements	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
Provider Screening & Enrollment/Change of Ownership (CHOW)	Proposes updates to improve and clarify the Medicaid provider screening and enrollment processes; and proposes broad policy governing notification, treatment of liabilities, provider agreements, etc. when a Medicaid enrolled health care facility/provider changes ownership.			X	Amends Chapter 94 of Title 29 DCMR
Program of All-Inclusive Care for the Elderly (PACE)	Proposes to establish a PACE program in the District, make services covered under PACE available to eligible Medicaid beneficiaries who enroll in the program, and set criteria for becoming a PACE provider.			X	Creates a new Chapter 88 of Title 29 DCMR
Medicare Enrollment	Proposes a requirement to apply for Medicare as a condition of Medicaid eligibility for individuals that would be likely eligible for Parts A, B, or D.			X	Amends Chapter 95 of Title 29 DCMR
Pharmacist Administration Services	Proposes to authorize DHCF to reimburse pharmacists an administration fee for administering immunizations, vaccines, and anaphylaxis agents. Pharmacists would be able to directly administer these treatments for Medicaid beneficiaries.			X	Amends Chapter 27 of Title 29 DCMR
ASARS/MHRS Technical Changes	Technical changes to ASARS and MHRS rulemakings to clarify requirements for utilization management and qualified providers.			X	

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development	
Electronic Visit Verification	Proposes changes to DCMR and State Plan to implement electronic visit verification systems for personal care services and home health services mandated by CURES Act in December 2016.			X	Amends Chapter 19 of Title 29 DCMR
Individuals with Intellectual & Developmental Disabilities (IDD) 1915(c) Waiver Amendment	Amendment to IDD waiver and corresponding rules, proposing minor revisions to certain covered services and also adding a self-direction option for multiple services.			X	Amends Chapter 19 of Title 29 DCMR
Individual & Family Services (IFS) 1915(c) Waiver	Proposes to create a new Individual & Family Support (IFS) waiver and corresponding rule, which will include all of the services in the ID/DD waiver as well as two additional services: education support services and participant-directed goods & services.			X	