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Department on
Disability Services

Home and Community-Based Services (HCBS) Individual and Family Support (IFS) Waiver Renewal Public Forum

Department on Disability Services

Friday, May 23, 2025

HCBS Waiver Effective Date

- **IFS Waiver Renewal**
 - October 1, 2025



Proposed Changes

The District is proposing to continue all utilized services and supports for people currently enrolled in the District's Home and Community-Based Services (HCBS) Individual and Family Support (IFS) Waiver Program. The District is also proposing to add telehealth service delivery and Assistive Technology ongoing – Extension service.



Proposed Changes

1. Service changes to include a new service delivery and modifying the scope of specific services.
2. Systemic changes that relate to modifying staff training requirements and qualifications, HCBS settings qualifications training requirements and person-centered plan development for Service Coordinators, QIDP/QDDP qualifications and requirements, and the modification and removal of performance measures.
3. Set reimbursement rates for the proposed modified service and DSP living wage rates.

IFS Waiver Renewal Snapshot

- Assistive Technology
- Behavior Supports
- Creative Arts Therapies
- Day Habilitation
- Employment Readiness
- In-Home Supports
- Personal Emergency Response System (PERS)
- Participant-Directed Services/ *My Life, My Way* Program
- Remote Supports Services/Telehealth Services
- DSP Qualifications

- Performance measure for annual physical examination
- Removal of performance measures
- QIDP/QDDP qualifications and requirement of a human services degree and continuing education courses
- Qualifications training/competency requirements for HCBS Settings criteria and person-centered plan development for Service Coordinators
- DC living wage adjustment rate for DSPs



Proposed Service Changes:

Assistive Technology



The District is proposing to modify Assistive Technology services. For each assistive technology that costs under \$1,000, there will be a requirement for a technology plan, when an assessment is not required, based on the person's support team justification of need in the Individual Support Plan (ISP).

The District is proposing to clarify for persons enrolled in the waiver between the ages of 18 and 21 years old who need assistive technology for medical/health-related needs must utilize Early Periodic Screening and Diagnostic Treatment (EPSDT) services under the Medicaid State Plan before accessing assistive technology under the waiver.



Proposed Service Changes:

Assistive Technology (Continued)

The District is proposing to modify provider qualifications for assistive technology services in which only professionals within a provider organization who are not licensed Assistive Technology Specialists, Occupational Therapists, Physical Therapists or Speech, Hearing, and Language clinicians will be required to obtain certification through SHIFT's Enabling Technology Integration Specialist (ETIS) program to provide assistive technology services.

This District is also proposing to modify the support team planning process for assistive technology services to incorporate the inclusion of clinicians whose specialty is in the area in which technologies are recommended to ensure appropriate assessments and technologies are per the persons identified clinical needs and increases the persons independence, applicable to the person.

Proposed Service Changes: Assistive Technology (Continued)



The District is also proposing to modify Assistive Technology allowable goods to allow the inclusion of newer, more innovative technologies to ensure the waivers keep pace with advances in assistive devices and technologies that enhance independence and quality of life for people with disabilities.

The District is also proposing to clarify the acquisition of Assistive Technology devices by adding subscriptions to acquire technology. Subscribing to assistive technology refers to a model where a person can pay a recurring fee (monthly, annually, etc.) to access assistive technology, if this is an available option, rather than purchasing it outright. This model allows for continuous improvements, updates, and maintenance without requiring full reinvestment in new devices or software.

The District is proposing to add an extension service and procedure code for Assistive Technology ongoing services which will require justification for additional services.

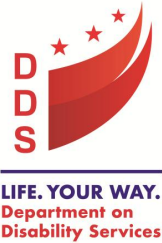


Proposed Service Changes: Behavior Supports

The District is proposing to add the Licensed Professional Art Therapist (LPAT) credential as a qualified licensure to provide paraprofessional behavioral support services and clarify services for tier 3- intensive behavioral supports and correct language. Modifications will include changing the reference of participants to reflect persons and to reflect the following for Tier 3-Intensive Behavioral Supports:

- This service provides up to 100 hours per year (plus up to 52 hours of counseling service) to assist a person who exhibits behavior that is extremely challenging and frequently complicated by medical or mental health factors. This level of service is for a person who exhibits behaviors that, due to their frequency, severity, or intensity, pose a threat to the person's health or safety or to the health and safety of others. Behavior support services for a person in Tier 3 may incorporate one or more restrictive measures.

Proposed Service Changes: Creative Arts Therapies



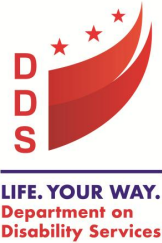
The District is proposing to modify Creative Arts Therapies services annual limit for units in the IFS Waiver, as the maximum number of allowable units decrease as the living wage increases (LWI) for services, which can exceed the current annual cap for creative arts therapies services. The annual monetary cap will be removed, effective January 1, 2026.



Proposed Service Changes: Day Habilitation

The District is proposing to clarify traditional Day Habilitation services allowable staffing ratio descriptions in the IFS Waiver to include changing the language to reflect the staff-to-person ratio, as indicated in the persons Individual Support Plan (ISP) and Plan of Care (POC), to 1:1 or 1:4 for day habilitation and 1:3 for small day habilitation.

Proposed Service Changes: Employment Readiness



The District is proposing to clarify traditional Employment Readiness services allowable staffing ratio descriptions in the IFS Waiver to include updating the language to reflect the staff-to-person ratio, as indicated in the persons Individual Support Plan (ISP) and Plan of Care (POC), to 1:1 or 1:4 for employment readiness.

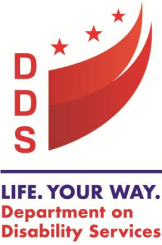


Proposed Service Changes: In-Home Supports

The District is proposing to modify In-Home Supports services criteria for support hours of forty (40) to fifty-six (56) per week. Forty (40) or more hours per week of in-home supports to meet goal-oriented needs will be considered based on assessed need. People can receive 40 or more hours of in-home supports per week if they have significant needs and meet the criteria of support with ADLs, behavioral support, medical/health, safety and risk, and level of independence, as justified and documented in outcomes and goals in the ISP and in-home supports plan.

Requested in-home supports hours must directly support goals outlined in the ISP. The hours must be proportionate to the time needed to work on objectives or activities, ensuring the hours match the complexity of the tasks.

Proposed Service Changes: Personal Emergency Response System (PERS)



The District is proposing to remove Personal Emergency Response System (PERS) as a standalone service from the IFS Waiver, as PERS is currently a service option under Assistive Technology services.



Proposed Service Changes: DSP and PDW Qualifications

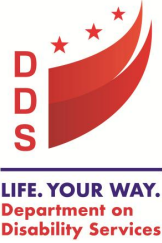


The District is proposing to remove the requirement for Direct Support Professionals (DSPs) and Participant-Directed Workers (PDWs) to have proof of COVID vaccinations, and for PDWs to have a high school diploma or general equivalency degree.



Proposed Service Changes:

Participant-Directed Services (PDS)



The District is proposing to modify Participant-Directed Services (PDS) by updating the training requirements for Participant-Directed Workers (PDW) when providing Companion, Individualized Day Supports, and Respite services. PDW required trainings will include, but not limited to, the following:

- CPR and First Aid (certification)
- Incident Management
- Specified DDS Phase I Trainings that are accessible via an online training platform
- Competency-based training in infection control procedures consistent with the requirements of the Occupational Safety and Health Administration, U.S. Department of Labor regulations
- Customized training provided by the participant and/or the participant's authorized representative that is related to the participant's functional needs and goals as outlined in the Individual Support Plan (ISP)



Proposed Service Changes:

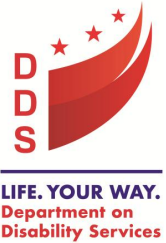
Participant-Directed Services (PDS)

(Continued)

The District is also proposing to modify PDW qualifications to remove barriers in providing self-directed services. The following qualifications will be required:

- Is 18 years old or older
- Possess an active CPR and First Aid certificate and ensure that the CPR and First Aid certifications are renewed every two (2) years, with CPR certification and renewal via an in-person class for skills component and through an approved online platform for the instructional component
- Complete and pass a criminal background check in accordance with the Health-Care Facility Unlicensed Personnel Criminal Background Check Act of 1998, effective April 13, 2002 (D.C. Law 14-98; D.C. Official Code §§ 44-551 et seq.)
- Have an individual NPI number obtained from the National Plan and Provider Enumeration System (NPPES)
- Must register NPI number and complete application for PDWs in the Provider Data Management System (PDMS)
- Receive customized training provided by the participant and/or the participant's authorized representative that is related to the participant's functional needs and goals as outlined in the ISP
- Not be a participant in the My Life, My Way program
- Attend a training needed to address the unique support needs of the individual as detailed in their Plan of Care
- Provide a record of completion of DDA trainings
- Has a valid driver's license and the required insurance if transportation will be provided
- Has a valid Social Security number and be legally authorized to work in the United States
- Has signed a Medicaid provider agreement with DHCF to provide IFS waiver services
- Be able and willing to perform the service-related responsibilities outlined in the participants' ISP
- Able to read, write and understand instructions and communicate with you; and Has agreed to provide the services outlined in my Individual Support Plan (ISP) and PDS budget that are to be performed by PDWs
- Record of completion of competency-based training in infection control procedures consistent with the requirements of the Occupational Safety and Health Administration, U.S. Department of Labor regulations at §29 CFR 1910.1030
- Obtain annual documentation from a physician or other health professional that he or she is free from tuberculosis

Proposed Service Changes: Participant-Directed Services (PDS) (Continued)



The District is proposing to clarify PDWs providing in-home supports services to participants are not required to provide transportation.

The District is also proposing to clarify the training requirement for CPR and First Aid for PDWs as it is not specified how the certifications can be completed, whether in-person or virtually. Hybrid courses are allowed if the skills component (practice and physical training) is in-person and instructor led, and the instructional component (knowledge-based) can be completed through an approved online platform.



Proposed Service Changes: Participant-Directed Services (PDS) (Continued)

The District is also proposing to clarify the staffing ratio of the PDS delivery option for the following services:

- Individualized Day Supports (IDS) 1:1
- Companion 1:1

The District is also proposing to clarify the Service Coordinators involvement in informing the participant of the PDS budget allowable funds. Service Coordinators are not responsible for informing participants of their PDS budget monthly allocation amount as this information is provided by the Support Broker entity.

Proposed Service Changes:



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Individual-Directed Goods and Services (IDGS)

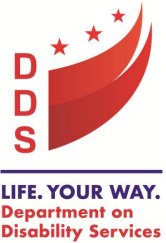
The District is proposing to modify Individual-directed goods and services (IDGS) by removing the non-medical transportation requirement for individuals and vendors providing IDGS as transportation is not an allowable good or service.

The District is proposing to clarify the IDGS annual cap of \$2,500 per ISP year, which is inclusive of the IFS Waiver \$75,000 annual budget cap.

The District is proposing to modify the requirement of IDGS. IDGS will only be available to IFS waiver participants who are enrolled in the Participant-Directed Services (PDS)/*My Life, My Way* program and receiving at least one of the following services: In-Home Supports, IDS 1:1, or Companion 1:1.



Proposed Service Changes: Remote Supports Services



The District is proposing to add remote supports services delivery to be available for In-Home Supports waiver services at a staff-to-person ratio of 1:6.

The District is also proposing to modify the amount of time in-home supports can be delivered remotely by increasing the limit from 20% and cannot be offered 100% of the time the person receives the service weekly.



Proposed Service Changes: Remote Supports Services (Continued)



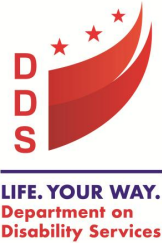
The District is proposing to modify the waiver services that will be provided through remote supports services, which will focus on supporting independence and daily activities delivered remotely to include the following services:

- In-Home Supports
- Day Habilitation
- Employment Readiness
- Supported Employment



Proposed Service Changes:

Remote Supports Services (Continued)



The District is proposing to modify the definition of Scheduled Check-ins to “remote caregiver checks-in with the person at scheduled times to provide supports or services. These are typically centered around the person’s identified outcomes or can be a simple wellness check.”

The District is also proposing to modify the requirements for the monitoring base and sensor alerts, and it will be required for residential-based services only, and the on-call/backup responder staff requirement will be required for supported employment and residential-based remote supports services only.



Proposed Service Changes:

Remote Supports Services (Continued)



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The District is proposing to modify the requirement for providers to be SHIFT certified to implement remote supports services. The SHIFT Enabling Technology Integration Specialist (ETIS) certification requirement will apply only to remote supports residential-based services to include In-Home Supports, and employment-based services to include Employment Readiness and Supported Employment.

The updated requirement from “ETIS-certified **staff must be employed by a SHIFT Accredited Service Provider**” to “ETIS-certified **staff must be employed by a DDS Service Provider**”, relaxes the previous requirement that the provider organization itself be SHIFT-accredited in addition to ensuring their staff responsible for oversight of remote support service delivery be ETIS certified. Now, it's sufficient for the provider to be approved by DDS, as long as they have an active ETIS-certified staff responsible for oversight of Remote Support service delivery.



Proposed Service Changes:



Remote Supports Services (Continued)

The District is proposing to modify remote supports services to limit the remote support risk assessment and plan requirement to apply only to residential-based services to include In-Home Supports, and employment-based services to include Employment Readiness and Supported Employment.



Proposed Service Changes:

Telehealth Services

The District is proposing to add telehealth services as a subcategory to remote supports services and modify the waiver services that will be provided through telehealth services, which will cover clinical and therapeutic services delivered remotely to include the following services:

- Assistive Technology Assessment
(New)
- Behavioral Supports
- Creative Arts Therapies (including art, dance, drama, and music)
- Family Training
- Occupational Therapy
- Parenting Supports
- Speech, Hearing, and Language Services
- Wellness Services (including Bereavement Counseling, Fitness Training, Nutrition Evaluation/Consultation, and Sexuality Education)

Telehealth service rates will remain unchanged and will continue to align with the rates previously established for remote supports services.

Proposed Systemic Changes



The District is proposing the following changes and systems improvements to improve performance measures and comply with statutory requirements:

- **Appendix B:**
 - Clarify Qualified Intellectual Disabilities Professional (QIDP)/Qualified Developmental Disabilities Professional (QDDP) qualifications and requirement of a human services degree and continuing education courses.
 - Modify the *My Life, My Way* program training and qualification requirements for Participant-Directed Workers (PDWs).
- **Appendix C:**
 - Remove the following performance measure:
 - (a) Number of non-licensed/non-certified providers that adhered to wavier requirements;



Proposed Systemic Changes

- **Appendix D:**
 - Add qualifications training or competency requirements for HCBS settings criteria and person-centered plan development for Service Coordinators.
- **Appendix G:**
 - Modify the performance measure of the requirement for persons who reside in natural home settings in the IFS Waiver to have an annual physical examination.
 - Remove the following performance measures:
 - (a) Percentage Mortality Review Committee (MRC) death investigations completed; and
 - (b) Percentage of behavior support plans (BSP) approved by DDS Restrictive Control Review Committee (RCRC);

Proposed Systemic Changes

- **Appendix I: Reimbursement Changes**

- Add the DC living wage adjustment rate for DSPs. The District will be adjusting the DSP living wage rate to 117.6%, effective January 1, 2026, contingent upon funding availability.
- Remove the following performance measures:
 - (a) Percent of claims for IFS waiver services denied by MMIS; and
 - (b) Percentage of provider payment rates that are consistent with rate methodology approved in the approved waiver application.

- **Appendix J:**

- Add Creative Arts Therapies services and rates.
- Add billing rate for Assistive Technology ongoing – Extension waiver service.

QUESTIONS



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