

**Department of Health Care Finance & Department on Disability Services**  
**Proposed Transition Plan for the**  
**Home and Community-Based Waiver for**  
**Persons with Intellectual and Developmental Disabilities**

The Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS) published regulations in the Federal Register on January 16, 2014, effective March 17, 2014, which, among other things, changed the definition of home and community-based services settings for Home and Community Based Services (HCBS) Waivers. The new rules also require that, at the time HCBS Waiver amendments are submitted to CMS, the Department of Health Care Finance (DHCF) and the Department on Disability Services (DDS) must also develop and submit a transition plan identifying how the HCBS Waiver will be brought into compliance with the new outcome-oriented definition of home and community-based services settings. The following is the initial proposed transition plan for the District of Columbia (D.C.) HCBS Waiver for Persons with Intellectual and Developmental Disabilities (IDD Waiver).

Scope

At the time of drafting, D.C. supports approximately 1580 people to live in the community through its IDD Waiver. Of those, 1005 people receive residential supports through the following services:

Supported Living:	746 people
Residential Habilitation:	147 people
Host Home:	85 people

The vast majority of those residential supports are provided in D.C. or within a 25 mile radius of the City.

Additionally, D.C. provides day and vocational supports through the IDD Waiver as follows:

Day Habilitation:	631 people
Employment Readiness:	398 people
Supported Employment:	160 People
Individualized Day Supports:	0 People (Enrollment will begin in March 2014)

As with residential supports, the vast majority of those supports are provided in D.C., or within a 25 mile radius of the City.

## Evaluation of Current Home and Community Based Settings & Submission of Additional Transition Plans

### *Residential Supports*

D.C. will conduct a thorough evaluation, in accordance with the CMS Transition Plan Toolkit, released on March 17, 2014, to determine whether each setting in which residential supports are provided is consistent with the characteristics of a home and community-based (HCB) setting. This evaluation will be completed no later than March 20, 2015, one (1) year from the date CMS released guidance and the accompanying Toolkit on the new definition of home and community-based services settings as applied to residential supports.

D.C. will invite stakeholders to participate in a workgroup to review the HCBS waiver and implementing Medicaid regulations, the Provider Certification Review (PCR) requirements, its Human Care Agreements (HCA), and other state requirements to ensure alignment with the new definition of HCB settings, and to recommend revisions as needed. As a result of this evaluation, D.C. will identify any needed revisions to the regulations and/ or other state requirements. D.C. will also identify any residential settings in which further evaluation is warranted, and conduct an on-site evaluation, as needed.

Once this evaluation is completed, D.C. will develop a proposal with a timeline and milestones for any required regulatory or practice revisions, and for any settings that do not meet HCB characteristics to conform with the HCBS rule. For any substantive changes proposed, D.C. will provide public notice, seek comment and revise accordingly, as required by the regulation. D.C. intends to submit this proposal and, if required, any justification or evidence that would refute the presumption that certain settings do not meet HCB characteristics to CMS by March 20, 2015, one year from the date CMS released the guidance.

### *Day and Vocational Supports*

D.C. will conduct a thorough evaluation, in accordance with the forthcoming guidance from CMS, to determine whether each setting in which day and vocational supports are provided is consistent with the characteristics of a home and community-based setting. This evaluation will be completed within one (1) year from the date CMS releases guidance on the new definition of home and community-based services settings as applied to day and vocational supports. As with the assessment of residential settings, D.C. will invite stakeholders to participate in a workgroup to review the HCBS waiver and implementing Medicaid regulations, the PCR requirements, and other state requirements to ensure alignment with the new definition of HCB settings, and to recommend revisions as needed. As a result of this evaluation, D.C. will identify any needed revisions to the regulations and/ or other state requirements. D.C. will also identify any day or

vocational settings in which further evaluation is warranted, and conduct an on-site evaluation, as needed.

D.C. will develop a proposal based on the evaluations with a timeline and milestones for any required waiver, regulatory, policy or practice revisions, and for any settings that do not meet HCB characteristics to conform with the HCBS rule. For any substantive changes proposed, D.C. will provide public notice, seek comment and revise accordingly, as required by the regulation. D.C. intends to submit this proposal and, if required, any justification or evidence that would refute the presumption that certain settings do not meet HCB characteristics to CMS within one year from the date CMS releases the guidance for day and vocational settings.