



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
**DEPARTMENT ON DISABILITY SERVICES**

DDS TRANSMITTAL #18-12

**TO:** Developmental Disabilities Administration (DDA) Home and Community Based Services Waiver Providers for the Following Services: Supported Living, Supported Living with Transportation, Host Home, Residential Habilitation, Day Habilitation, Day Habilitation 1:1, Small Group Day Habilitation, Individualized Day Supports, Companion, Supported Employment, Small Group Supported Employment, Employment Readiness, and Employment Readiness 1:1

**CC:** DDA, Quality Assurance and Performance Management Administration (QAPMA)

**FROM:** Erin Leveton, Deputy Director for QAPMA

**DATE:** December 21, 2018

**RE:** Revised Provider Certification (PCR) Policy and PCR Guide

Today the District of Columbia Department on Disability Services (DDS) releases a revised Provider Certification Review (PCR) Policy, 2018-DDS-POL003, and PCR Guide, effective immediately. This policy supersedes the Provider Certification Review Policy, 2013-DDS-POL013 (January 1, 2015), and the PCR Guide supersedes the previous version from Fiscal Year 2014 (effective date January 1, 2014).

Below are highlights of key changes, but please do review the revised Policy and Guide carefully:

- Added to the list of Vocational/Day Supports subject to PCR are Day Habilitation (Small Group), Employment Readiness 1:1, and Companion Services.
- Annual Home and Community Based Services assessments for services that are required to comply with the HCBS setting requirements have been added to the Guide. The tools for these assessments are PCR indicators that have been identified to measure these requirements and are conducted either within the PCR annual review or at the one year anniversary for services with a bi-annual certification. Any indicator found to be not met requires a corrective action plan (CAP).
- The Post Failure Assessment has been added to the Guide. When a provider has failed a service and a recommendation by DDS for termination of the Medicaid Provider Agreement has been made, the PCR team conducts a Post Failure Assessment every 6 months, while the determination regarding termination by DHCF is processed. The Post Failure Assessment indicators measure the provider's ability to keep people safe and healthy and ensure that the person's ISP is implemented. No score or CAP is required, and the report is sent to the Deputy Director of Quality Assurance and Performance Management Administration for review and dissemination.



- When a document appears to be missing, the PCR team member will ask the provider to obtain the document with a stated time specification, for the document to be considered for review. Documents presented outside the time specification may not be considered due to time constraints of the review schedule.
- An additional requirement for an Excellent rating is achieving 100% on all HCBS settings indicators for services that come under CMS’s HCBS settings requirements.
- If the provider does not achieve a “Satisfactory” rating on the initial PCR visit, a follow up visit will be conducted within 30-60 days.
- Providers that receive an “Unsatisfactory” or “Needs Improvement” rating for a specific service on the initial PCR may be placed on the Do Not Refer list for a hold on referrals, transitions in progress or admissions to that service.
- Providers with a history of consecutive ratings on the initial review that are in the “Needs Improvement” and/or “Unsatisfactory” categories will be limited to a provisional six-month certification after satisfactorily passing a follow-up PCR, when an annual certification would have been achieved if consecutive “Needs Improvement” and/or “Unsatisfactory” ratings were not present.
- Added flexibility around sanctions for providers with a history of consecutive ratings on the initial review that are in the “Needs Improvement” and/or “Unsatisfactory” categories. Instead of an automatic recommendation for termination of the provider’s Medicaid license, DDS may conduct a Certification Review Panel review of quality indicators for the review period in question.
  - a. When a follow-up PCR is recommended by the Panel and the provider achieves a “Satisfactory” rating at the follow up review, the provider will receive a provisional six month certification.
  - b. When the Panel recommends termination of a provider certification, the provider will be: a) placed on Enhanced Monitoring; b) closed to new admissions of any kind; and c) referred to DHCF for termination of the Medicaid Provider Agreement for the service(s). No further PCR will be conducted during the termination proceedings. An assessment of health and safety concerns will be conducted by the PCR team every six months during this time period.
- When providers receive below 50% on initial review or fail to achieve 80% in overall and critical indicator categories by the end of the PCR review process for any service, that service will be referred to DDS Certification Review Panel. The panel will review the PCR scores, and other quality measures that the provider has established. Based on this review the panel will recommend either to proceed with the review, issue provisional certification, or recommend termination of the service to DHCF.



- Appeal process steps are laid out in linear fashion to make the appeal process clearer as to when and to whom appeals are directed for review and determination.

If you have questions, please contact Barbara Stachowiak MS ARNP, Director HCBS Provider Certification Reviews, Liberty Healthcare Corp., [Barbara.stachowiak@dc.gov](mailto:Barbara.stachowiak@dc.gov), (202) 730-1702 or (202) 570-0056 (cell).

DDS thanks the Home and Community Based Services Advisory Committee for reviewing and providing feedback on these documents.

As we near the end of the year, I thank you for all you do for the people we support and wish you and your families happy holidays and a happy and healthy new year.