PROCEDURE

Subject: Contribution to Costs of Residential Supports
Procedure No: 2021-DDA-PR01

Responsible Program or Office: Developmental Disabilities Administration
Effective Date: October 1, 2021
Number of Pages: 20

Supersedes: N/A

Cross References, Related Policies and Procedures, and Related Documents: D.C. Official Code § 7–761.05b (Contribution to costs of support); 29 DCMR §§ 13100 to 13102 and 13199 (Contribution to Costs of DDA Residential Supports), published at 65 DCR 13201 (Nov. 30, 2018); Contribution to Costs of Residential Supports Policy, 2021-DDA-POL01; Intake and Eligibility Determination Policy and Procedure; DDA ISP Distribution Procedure; Individual Support Plans Policies and Procedures; Personal Funds Policy and Procedure; DDA Formal Complaint System Policy and Procedures; DDA Imposition of Sanctions Policy and Procedure; DDA Transition Policy and Procedure

1. PURPOSE
The purpose of this procedure is to implement the Department on Disability Services (DDS), Developmental Disabilities Administration’s (DDA) Contribution to Costs of Residential Supports Policy.

2. APPLICABILITY
This policy applies to all people who apply for or receive residential supports from DDS, their legal and financial representatives, and all DDS staff, providers, and contractors.

3. DEFINITIONS
The following terms and phrases shall have the meanings ascribed:

Contribution to Costs of Residential Supports: full or partial payment by persons with intellectual disabilities or their estates for locally funded supports provided by DDA,
including cost of occupancy.

*Cost of Occupancy:* the cost of rent and utilities, other personal expenses, including food, clothing, and medical costs, supplies, furnishings, equipment, communications, and other non-Medicaid supports. Staffing is separate from, and not included in, the cost of occupancy.

*Formal Complaint:* the complaint of a person regarding DDA supports filed with either DDS or a provider through the DDA Formal Complaint System.

*Home and Community-Based Services (HCBS) Waiver for Individuals with Intellectual and Developmental Disabilities (IDD):* a D.C. Medicaid program, as approved by the D.C. Council and the Centers for Medicare and Medicaid Services (CMS), which funds home and community-based services and supports as an alternative to receiving services in an Intermediate Care Facility.

*Host Home:* Known in the HCBS IDD Waiver as Host Home Without Transportation Services (29 DCMR § 1915 et seq.), these services enable people to live in the community in family-type settings that support them to achieve their goals, participate in community life, and maintain their health.

*Relevant Financial Documentation:* Evidence of the income and assets of the person and the person’s spouse, if any, that DDA will use in calculating the amount of contribution to costs of residential supports. Examples include, but are not limited to: wages, checking and savings accounts, Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), Veteran Benefits, other statutory benefits, pensions, and earned income. Additional examples include, but are not limited to: unearned income, including worker’s compensation, insurance proceeds and death benefits, inheritances, dividends and interest, rental income and royalties, prizes, awards, and gambling proceeds, and awards for punitive and non-physical damages to the person (unless the result of D.C.’s care and treatment of that person).

*Request for Recalculation or Reconsideration:* the process by which a person may request a recalculation of the amount of the monthly contribution or reconsideration of DDA’s determination that the person is required to pay contribution to costs.
Residential Habilitation: Known in the HCBS IDD waiver as Residential Habilitation Services (29 DCMR § 1929 et seq.), these services are provided by an agency in a licensed group home serving four to six persons that is owned or leased and operated by the agency. Residential Habilitation is a blended service that provides habilitation, personal care, nursing, other residential supports, and transportation to the persons living in the home.

Residential Provider means an entity that provides Supported Living, Host Home Without Transportation, or Residential Habilitation Services through the HCBS IDD waiver or other locally funded residential services.

Residential Supports means items that make up the cost of occupancy for people who receive Supported Living, Host Home Without Transportation, or Residential Habilitation Services through the HCBS IDD waiver or other locally funded residential services.

Statutory Benefits: Includes, but is not limited to, SSI and SSDI, Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), and Temporary Assistance for Needy Families (TANF).

Supported Living: Known in the HCBS waiver as Supported Living Services (29 DCMR § 1934 et seq.), these services are provided by an agency in a home serving one to three persons. Supported Living is a blended service that covers habilitation, personal care, nursing, and other residential supports, and may be provided either with or without transportation.

Other Income: Includes, but is not limited to pensions, earned income, and unearned income, including worker's compensation, insurance proceeds and death benefits, inheritances, dividends and interest, rental income and royalties, prizes, awards, gambling proceeds, and awards for punitive and non-physical damages to the person (unless the result of the District's care and treatment of the person). “Other income” specifically includes railroad benefits and veteran benefits.

4. PROCEDURES

A. Information Provided at Intake

At intake, DDS shall inform people considering applying for DDA residential supports that D.C. law and regulations require people to pay contribution to costs for residential
supports. DDS will supply written information about how DDS calculates and collects the contribution to costs of residential supports as described in this procedure and the related policy. The materials shall make clear that a person’s contribution to costs of residential supports may equal, but shall not exceed, the actual cost of the person’s DDS residential supports. Additionally, DDS will not require a person to contribute from employment or other income more than the amount the person’s statutory benefits were reduced due to the person’s employment or other income, up to the person’s specific annual phased-in amount, if applicable.

B. Eligibility for Medicaid and Other Public Benefits

1. Each person applying for or receiving DDA supports shall apply for all public benefits for which the person is eligible and shall maintain eligibility for those benefits.

2. When a person applies for DDA supports, the Intake and Eligibility Unit (I&E) staff shall share information about Medicaid and other public benefits for which the person may be eligible. The I&E staff shall refer the person to the appropriate agencies or services so that the person can apply. The I&E staff will provide additional assistance as needed, including assistance with applying for Medicaid.

3. Once the person is receiving services, the residential provider shall assist with applying for and maintaining any public benefits for which the person may be eligible. For people who are over-resourced, this may include supporting a person to open an ABLE account, establish a special needs trust, or otherwise spend down funds.

C. People New to DDS Residential Supports – Calculating and Paying Contribution to Costs of Residential Supports

1. At intake, the I&E staff will explain that D.C. law and regulations require DDS to collect contribution to costs of residential supports from each person receiving DDA residential supports. After the person begins receiving residential supports, the Service Coordinator will discuss this information with the person every year at the person’s ISP meeting.
2. The Service Coordinator will calculate the person’s required contribution to costs of residential supports in accordance with the Contribution to Costs of Residential Supports Policy and this procedure.

3. The Service Coordinator will give the person and the person’s guardian and representative payee, if any, information that notes the seriousness and potential consequences for the person, such as termination of services, if he, she or they does not pay the required contribution to costs of residential supports.

4. The Service Coordinator will give the person and the person’s guardian and representative payee a written statement of the required contribution to costs of residential supports and an explanation of how it was calculated in the form of the ISP with Individual Financial Plan (IFP). The written statement will include information about how to request recalculation of the amount or reconsideration of the requirement to pay, how to file a Formal Complaint through the DDA Formal Complaint System, and how to obtain assistance from a DDA Rights and Advocacy Specialist or area legal services organization.

5. The person or the person’s representative payee will begin to pay contribution to costs of residential supports to the residential provider in the first month the person receives DDA residential supports. The person will continue to pay this amount monthly until DDA calculates a change and notifies the person and representative payee.

6. Where paying contribution to costs of residential supports would result in financial hardship for the person (for example, inability to pay costs of health insurance, prescription co-pays, childcare, etc.), the person, the guardian or person’s representative payee may request a reduced contribution at the sole discretion of the Deputy Director for DDA. The person must make the request to the Deputy Director for DDA within seven calendar days of the ISP meeting where the contribution to costs was calculated or recalculated, or within seven calendar days of the circumstances that gave rise to the hardship. The person also must provide written evidence of the financial hardship. The Deputy Director for DDA will provide a final written administrative decision to the person, which will include information
about the person’s right to challenge the decision by using the DDA Formal Complaint System as described in Section 4K2, below.

D. People Currently Receiving DDS Residential Supports — Calculating and Paying Contribution to Costs of Residential Supports

1. For a person currently receiving DDS residential supports (in connection with Supported Living, Host Home Without Transportation or Residential Habilitation Services under the HCBS IDD waiver) who is not already paying his, her or their full contribution to costs of residential supports, following the effective date of this procedure, at the person’s next ISP meeting or six-month ISP review meeting, the Service Coordinator will explain that D.C. law and regulations require DDS to collect contribution to costs of residential supports from each person receiving this type of DDA supports.

2. The Service Coordinator will calculate the person’s required contribution to costs of residential supports and inform the person that he, she or they will be required to begin making monthly payments in six months.

3. For a person receiving DDA residential supports as of the effective date of this procedure who has not been paying contribution to costs of residential supports and has income other than public benefits, DDA will phase in the person’s required contribution to costs $100 per month in the first year and then increasing by $50 per month each successive year (e.g. $100 per month in the first year, $150 per month in the second year) until the person reaches retirement age of 65. For a person who is 65 or older, the amount will increase annually by the current D.C. Consumer Price Index (CPI) (available at: https://www.bls.gov/regions/mid-atlantic/news-release/consumerpriceindex_washingtondc.htm) until the person reaches and is paying the maximum required contribution to costs of residential supports.

4. The Service Coordinator will give the person and the person’s guardian and representative payee information that notes the seriousness and outlines the potential consequences for the person, such as termination of services, if he, she or they does not accurately report his, her or their income and pay his, her or their required contribution to costs of residential supports.
5. The Service Coordinator will give the person and the person’s guardian and representative payee a written statement of the required contribution to costs of residential supports and an explanation of how it was calculated in the form of the ISP with IFP. The written statement will include information about how to request recalculation of the amount or reconsideration of the requirement to pay, how to file a Formal Complaint through the DDA Formal Complaint System, and how to obtain assistance from a DDA Rights and Advocacy Specialist or area legal services organization.

6. The person or the person’s representative payee will begin to pay contribution to costs of residential supports six months following the person’s ISP effective date. The person will continue to pay this amount monthly until DDS calculates a change and notifies the person and the person’s representative payee.

7. Where paying contribution to costs of residential supports would result in financial hardship for the person (for example, inability to pay costs of health insurance, prescription co-pays, childcare, etc.), the person, the guardian or person’s representative payee may request a reduced contribution at the sole discretion of the Deputy Director for DDA. The person must make the request to the Deputy Director for DDA within seven calendar days of the ISP meeting where the contribution to costs was calculated or recalculated, or within seven calendar days of the circumstances that gave rise to the hardship. The person also must provide written evidence of the financial hardship. The Deputy Director for DDA will provide a final written administrative decision to the person, which will include information about the person’s right to challenge the decision by using the DDA Formal Complaint System as described in Section 4K2, below.

E. Specific Contribution to Costs Calculations and Examples

DDA will use the following formulas for calculating each person’s required monthly contribution to costs of residential supports:

1. A person whose only income is SSI, SSDI, or any other statutory benefits, shall:
a. Keep $100 of the benefits each month as a personal needs allowance; and
b. Pay the rest of the monthly statutory benefits from all benefits as the required contribution to costs of residential supports.
c. For example, Sally is not working and receives SSI. As of January 2021, the maximum SSI is $794. Sally would pay $694 in contribution to costs of residential supports. She would keep $100 of the SSI as her personal needs allowance.
d. For example, Leon receives $1,500 in monthly SSDI benefits. He would pay $1,400 in contribution to costs of residential supports. He would keep $100 of the SSDI as his personal needs allowance.

2. A person who receives SSI, SSDI, or any other statutory benefits, as well as income from work or other sources, shall:

a. Keep $100 of the benefits each month as a personal needs allowance;
b. Pay the rest of the statutory benefits in partial payment of the contribution to costs of residential supports; and
a. From employment or other income, contribute to the costs of residential supports an amount equal to the amount the person’s SSI, SSDI, or any other statutory benefits have been reduced due to employment.
c. For example, Max is working and earns $750 per month. As of January 2021 the maximum SSI benefit is $794. Due to his income, the Social Security Administration (SSA) uses its formula to reduce Max’s SSI to $400 (a reduction of $394). Max would pay $300 in SSI + $394 in employment income = $694 in contribution to costs of residential supports. He would keep $100 in SSI as his personal needs allowance + $356 in remaining employment income = $456.

3. A person who works and earns too much to receive statutory benefits such as SSI or SSDI, shall:

a. Pay from employment or other income the current maximum monthly SSI amount minus $100.
b. As of January 2021, this would be $794 - $100 = $694 in contribution to costs of residential supports.
c. For example, Jackie is working and earns $2,000 per month. She does not receive any statutory benefits. Jackie would pay $694 in contribution to costs of residential supports.
residential supports. She would keep the remainder of her employment income, $1,306.

4. A person who resides in a Host Home and receives less than or equal to the current maximum SSI amount, shall:

a. Keep $100 of the benefits each month as a personal needs allowance and pay the rest of the benefits in contribution to costs of residential supports.

b. For example, Ben lives in a host home, is not currently working and receives SSI. As of January 2021 the maximum SSI is $794. He would pay $694 in contribution to costs of residential supports. He would keep $100 of SSI as his personal needs allowance.

5. A person who resides in a Host Home and receives more than the current maximum monthly SSI payment from any income source shall:

a. Keep $100 of the benefits each month as a personal needs allowance; and

b. Contribute the current maximum monthly SSI payment amount minus $100 and keep any remaining funds.

c. For example, Florence receives $794 in SSI. In some months, Florence works part-time or receives small gifts of money, but not enough to reduce her monthly SSI benefit. Florence would keep $100 every month from SSI as a personal needs allowance. She would pay $694 a month in contributions to costs of residential supports and keep the other money she earns or receives as gifts.

6. A person who has a spouse, who both receive residential supports, shall:

a. Each keep $100 of the benefits each month as a personal needs allowance; and

b. Pay the rest of the statutory benefits in full or partial payment (if statutory benefits were reduced due to employment) of the required contribution to costs of residential supports; and

c. From employment or spousal income, contribute to the costs of residential supports an amount equal to the amount the couple’s SSI, SSDI, or any other statutory benefits have been reduced due to employment.
d. For example, Charlene and Roberto are married and both receive residential supports from DDA. Charlene’s employment income is $200 per month and Roberto’s employment income is $700 per month, or $900 total. The SSA reduced the couple’s combined SSI benefit from the 2021 maximum married SSI benefit of $1,191 to $575 per month. Charlene and Roberto shall:

i. Keep $100 each of their SSI benefit each month as a personal needs allowance, or $200 total; and

ii. Pay the rest of their statutory benefits, or $375 per month, in partial payment of their required contribution to costs of residential supports; and

iii. Pay the rest of their contribution to costs of residential supports from their employment or other income to make up the amount that their statutory benefits have been reduced due to employment. They would pay $1,191 (2021 maximum married SSI amount) minus $575 (monthly SSI amount they actually receive) = $616, with $284 remaining ($900 – $ 616).

iv. Charlene and Roberto would pay $375 per month in SSI and $616 in employment or other income as contribution to costs of residential supports, or $991 total. They would keep $200 of SSI as their personal needs allowance and $284 in employment income, or $484 total.

7. A person who receives DDA residential supports and lives with a spouse who does not receive DDA residential supports shall:

a. Keep $100 of his, her or their benefits each month as a personal needs allowance; and

b. Pay the rest of his, her or their half of the statutory benefits in partial payment of the person’s required contribution to costs of residential supports; and

c. From employment or spouse’s income, contribute to the costs of residential supports an amount equal to half of the amount the couple’s SSI, SSDI, or any other statutory benefits have been reduced due to employment.

d. For example, Fredrick and Emilio are married, and Frederick receives residential supports through DDA while Emilio does not. Frederick’s employment income is $200 per month and Emilio’s employment income is $700 per month, or $900 total. The SSA reduced the couple’s combined SSI benefit to $550 per month. In 2021, the maximum married SSI benefit amount is $1,191. Frederick shall:
i. Keep $100 of his SSI benefit each month as a personal needs allowance; and

ii. Pay the rest of his half of the SSI benefit, or $175 per month ($550 divided by two, minus $100), in partial payment of his required contribution to costs of residential supports; and

iii. Pay the rest of his contribution to costs of residential supports from his employment or spouse’s income to make up half of the amount that the couple’s statutory benefits have been reduced due to employment. He would pay $1,191 (2021 maximum married SSI amount) minus $550 (monthly SSI amount they actually receive) = $641 divided by two = $320.50.

iv. Frederick would pay $175 per month in SSI and $320.5 in employment or spousal income as contribution to costs of residential supports, or $495.50 total.

v. Frederick would keep $100 as his personal needs allowance. Emilio would keep $275, which is his half of the SSI benefit. The couple would keep $579.50 from total employment income ($900 total monthly income minus $320.50 paid by Frederick in contribution to costs of residential supports). The couple would keep $100 + $275 + 579.50 = $954.50 total each month.

8. For the purpose of calculating contribution to costs of residential supports, DDS will credit a person for the amount the person’s SSI, SSDI, or other statutory benefits are reduced due to a previous over-payment by the SSA. For example, John is not currently working. His only income is SSI, so he would ordinarily be eligible for the full $794 SSI maximum benefit. However, John worked in the past and received an SSI overpayment, so now John receives $644 per month in SSI benefits and $150 is recouped by the SSA. John would pay $544 in contribution to costs of residential supports. He would keep $100 of SSI as his personal needs allowance.

F. Income and Assets Used to Determine Contribution to Costs of Residential Supports

1. A person’s SSI, SSDI, and any other public benefits eligibility letter(s) must be uploaded into MCIS with the benefits amount(s) entered.

2. The person, or the person’s guardian or representative payee must regularly provide to DDS the person’s public benefits award letters or sign a release to permit DDS to
access the public benefits award letters annually.

3. The Service Coordinator, in consultation with the interdisciplinary team, will create the IFP including the established contribution to costs of residential supports formulas. As part of the initial intake process, and at least annually as part of the person’s ISP and IFP process, DDA collects the following documentation to assist in the development of the person’s IFP:

   a. Wages;
   b. Other earned income, including from self-employment;
   c. Checking and savings accounts;
   d. Social Security income, whether SSI or SSDI;
   e. Veteran’s benefits;
   f. Other statutory benefits, whether federal or local;
   g. Pensions or retirement accounts;
   h. Unearned income including worker’s compensation benefits, rental income, and deposit records, receipts or statements for any private assistance or financial support received from family members such as living allowances or stipends;
   i. Insurance proceeds and death benefits;
   j. Inheritances;
   k. Investments, including real estate, dividends and interest;
   l. Rental income and royalties;
   m. Prizes, awards and gambling proceeds;
   n. Award for punitive and non-physical damages to a person (unless the result of the District of Columbia’s care and treatment of that person); and
   o. Other income and assets of the person not listed in the above categories.

4. For people who are married, the calculation of contribution to costs will be based upon half of the total maximum SSI benefits the couple would receive. In 2021, the maximum SSI benefits for a married couple are $1,191 per month. A married person’s individual share of that is half or $595.50.

5. At the meeting to review the calculation of the person’s required contribution to costs of residential supports, the person’s support team will collaboratively develop the IFP and the Service Coordinator will calculate the person’s contribution to costs
of residential supports using the person’s public benefits award letters.

6. The Service Coordinator will provide the ISP and IFP, including the contribution to costs of residential supports calculations, to the person and the person’s residential provider, legal guardian, and representative payee in accordance with the DDA ISP Distribution Procedure.

7. An IFP resulting in a required contribution to costs of residential supports by a person will be reviewed and approved by the Supervisory Service Coordinator (SSC) as part of the ISP.

8. Once the Supervisory Service Coordinator approves the ISP, DDS Operations will make all necessary adjustments in the supports budget in MCIS and in the residential provider’s purchase orders to allow for the change in invoicing amounts.

9. The calculations in the IFP shall serve as the determination of the person’s required contribution to costs of residential supports until the IFP changes through the ISP process after the person or provider notifies DDA of significant income changes that affect the person’s public benefits amounts and submits supporting documents that show the change.

G. Responsibilities: the Person Pays, the Residential Provider Collects

1. The person is responsible for paying the required contribution to costs of residential supports. If the person has a representative payee, then the representative payee is responsible for ensuring that the person pays to the provider the contribution to costs of residential supports (whether from statutory benefits or employment or other income, or both) and receives a personal needs allowance, if applicable. The residential provider is responsible for collecting contribution to costs of residential supports from the person on a monthly basis. Accordingly, the assigned Contract Administrator shall reduce DDA’s payments to the residential provider by the amount of the person’s contribution to costs of residential supports.

2. Whenever possible, DDS and the residential provider will arrange for the person to pay some of his, her or their own bills directly from the monthly contribution to
costs of residential supports payment, rather than the person paying the full contribution amount to the provider and the provider paying these costs. This should be done both as a habilitation matter and for the person to establish a history of credit. For example, if a person owes $683 to the provider in contribution to costs, and the person’s phone costs approximately $45 per month, the provider and person could work together to put the phone bill in the person’s own name, and the person could pay the $45 per month directly to the phone company, and pay $683 - $45 = $638 to the provider. The support team will agree to this arrangement in advance and amend the IFP accordingly, and provide ongoing coordination and support to the person.

H. Adjusting Contribution to Costs Based on Changes to a Person’s Public Benefits

1. When a person experiences any change in monthly income that affects the person’s public benefits (such as an increase in income that reduces the person’s SSI), the person or guardian, and the residential provider, are required to notify DDA through the Service Coordinator within seven calendar days and submit supporting documentation (examples include an SSI or SSDI benefits change letter).

2. Upon notification and receipt of the required supporting documentation, DDA shall recalculate the person’s contribution to costs of residential supports. The DDA Service Coordinator will schedule an ISP amendment meeting within 30 calendar days, and complete a revised IFP within 45 calendar days. Any revised IFP will be filed in MCIS as an ISP amendment and be sent to the person and the person’s support team in accordance with the ISP Distribution Procedure.

I. Provider Options If the Person, or the Person’s Representative Payee, Does Not Pay Contribution to Costs of Residential Supports

Where a residential provider is required to collect contribution to costs of residential supports, the provider has options if the person does not pay the required amount, in collaboration with the Service Coordinator and the assigned Quality Resource Specialist (QRS) or Contract Administrator.
1. If the reason for non-payment is a change in the person’s income or assets (for example, loss of job), the person or provider shall forward supporting documentation (for example, job termination notice or statement of account) to the Service Coordinator and request amendment of the IFP to change the person’s required contribution to costs of residential supports, if appropriate.

2. At the first occurrence where the person does not pay contribution to costs of residential supports, within five calendar days, the residential provider shall notify DDS and interview the person and the person’s guardian, representative payee, or other designated representative to determine the reason for nonpayment. If the interview does not yield a valid reason for non-payment of the full amount (see item 1, immediately above), the provider shall send notice to the person and the person’s guardian, representative payee, or other designated representative, as well as the Service Coordinator, the Contract Administrator, and the QRS detailing the amount owed and requesting immediate payment. The notice will inform the person that in 30 calendar days, the provider plans to reduce some ancillary expenses (for example, the person’s communications, cable, clothing, and furniture allowances) by the amount owed in a manner which does not negatively impact the person’s health or safety or the living situation of others receiving DDA residential supports living in the same unit. The notice will also explain the person’s option for challenging the provider’s decision, typically by using the provider’s complaint process.

   a. A provider may not reduce a person’s staffing to recoup a person’s unpaid contribution to costs of residential supports or seek funds from the person’s monthly personal needs allowance.

   b. A person, or the person’s representative payee, who fully pays contribution to costs debt to the provider may request to reestablish the residential supports that the provider had reduced or stopped.

3. For a first or occasional late or non-payment of a person’s required contribution to costs of residential supports, the residential provider will make up to three efforts to collect the owed amount from the person responsible for paying. The person who receives residential supports will continue to owe past amounts until the amounts owed are paid in full.
4. If DDS has paid a residential provider because the person did not pay the required contribution to costs amount, and the person then pays the provider, the provider owes DDS and is required to pay within seven business days.

5. DDS may seek to collect the amounts the person owes from the person or the person’s representative payee or trustee.

6. Where the person refuses to pay or has a pattern of non-payment of required amounts, the residential provider may move to discharge the person from residential supports in accordance with the DDA Transition Policy and Procedure and 29 DCMR § 1912. The person continues to be eligible for HCBS IDD Waiver services and DDS must follow the procedures in the HCBS IDD Waiver for changing or terminating any approved service under 29 DCMR § 1912, including appeal rights and the requirement for the provider to continue services until the appeal is resolved. Notwithstanding the pendency of any appeals, the person will continue to owe monthly contribution to costs of residential supports.

7. If the person does not pay the owed contribution to costs of residential supports, then after three months of non-payment DDS may begin the process of terminating the person from receiving DDS residential supports in accordance with the Contribution to Costs of Residential Supports Policy and this procedure. Where a person is therefore unable to receive residential supports, the practical result may be an HCBS IDD waiver residential service termination. DDS will provide 30 days’ written notice of the person’s due process rights to appeal prior to terminating any services to the person. The Service Coordinator will convene an ISP meeting to offer In-Home Supports or Supported Living Services (staffing only) to the person in a non-DDS funded home prior to terminating residential services and supports.

8. DDS may seek to have a representative payee or guardian who fails to comply with this procedure and its accompanying policy removed and replaced. A person’s failure, or the person’s representative payee’s failure, to comply with D.C. legal and regulatory requirements to provide accurate information about the person’s income and assets or to pay contribution to costs of residential supports may result in reporting to the Social Security Administration, discontinuation of DDS residential supports or legal action by the District of Columbia.
J. Tracking of Contribution Amounts and Collections

1. The Quality Assurance and Performance Management Administration (QAPMA) shall conduct at least annual reviews of a sampling of people who are required to pay contribution to costs of residential supports and their respective residential providers. This includes analyzing records on payment, collection, handling, and reporting of funds. Residential providers shall track, maintain, and review each person’s personal funds in accordance with the DDS Personal Funds Policy and Procedure.

2. QAPMA review may include an examination of the documents reflecting all funds collected by the service provider, the handling and deposit of the person’s funds into any accounts, and the justification and documentation for use of the funds. Residential providers shall maintain accurate and complete records regarding the use of all contribution to costs of residential supports funds for every person receiving services.

3. QAPMA will enter a note in the Provider tab in MCIS referencing this review and confirming the accuracy of the calculations of contribution to costs of residential supports, the accuracy and proper IFP authorization of the amount collected by the provider, and the appropriateness of the provider’s use of the collected funds. Where QAPMA’s findings are to the contrary, the note should list the corrective actions being taken by DDS. The QAPMA Financial Auditor will notify the person, the residential provider, and the person’s guardian and representative payee.

4. DDS retains authority to audit actions and records of any residential provider related to the collection of contribution to costs actions at any time.

5. If a person dies while owing contribution to costs amounts, DDS will turn the matter over to the D.C. Office of the Attorney General, which may pursue collecting the owed amounts from the person’s estate, including all savings or other accounts.

K. Notice and Right to Appeal
At the ISP meeting where it is determined that the person is required to make a monthly contribution to costs of residential supports, the Service Coordinator shall give the person information about his, her or their appeal options:

1. The person or the person’s guardian, representative payee, or other representative may request a recalculation or reconsideration of the amount of the monthly contribution or reconsideration of DDA’s determination that the person is required to pay contribution to costs. This request may be verbal or in writing to the person’s Service Coordinator.

   a. A person who requests recalculation or reconsideration must state the facts and legal basis, if applicable, for the disagreement with DDS’s calculated contribution to costs and also timely submit supporting evidence to DDA.

   b. The person may choose to designate a family member, friend, attorney, or any other representative to request recalculation or reconsideration from DDS on his, her or their behalf. The person may also request and receive help from the DDA Office of Rights and Advocacy.

   c. The person may obtain assistance from a legal services organization, and the appeal information given to the person must include the name, address, and telephone number of local legal services organizations such as Quality Trust for Individuals with Disabilities and Disability Rights DC at University Legal Services.

   d. The person’s required contribution to costs will not change while a request for recalculation or reconsideration is pending. However, if the DDA Deputy Director determines that the person owes additional contribution to costs of residential supports amounts, the person shall be liable for the additional amount and be required to pay it.

   e. Within 30 days of receipt of a person’s request for reconsideration or recalculation, the DDA Deputy Director will provide a final written administrative decision to the person and the person’s representative, if any. The final written decision shall include information about the person’s right to file an appeal to challenge the decision in D.C. Superior Court within 30 days after the person receives the final written decision, or by using the DDA Formal Complaint System.
2. The person may file a complaint using the DDA Formal Complaint System. Examples of complaints include an initial complaint about the calculation of the amount of the contribution to costs of residential supports, a complaint about DDA or the residential provider’s application of the Contribution to Costs of Residential Supports Policy or Procedure to the person, or a complaint that is an appeal of the DDA Deputy Director’s final written decision about recalculation or reconsideration (above).

   a. The Formal Complaint must be consistent with the DDA Formal Complaint System policy and procedures, which specify that a person has 90 days to file a formal complaint unless a waiver of that filing deadline is granted by the DDS Director.

   b. The person may file a Formal Complaint with the residential provider or with the DDS Complaint Coordinator. A Formal Complaint regarding the amount of the contribution to costs of residential supports should be brought to DDS, whereas a Formal Complaint regarding how the payment is made or the provider’s actions in the event of a non-payment should be brought to the provider. If the complaint is against the provider, the person must first file the Formal Complaint with the provider, unless the person requests and receives a DDS Director determination that the person has a good faith fear of retaliation from the provider if the person files the complaint through the provider’s complaint process.

   c. The person may designate any representative or supporter to file a Formal Complaint on the person’s behalf. The person may choose to designate an informal supporter or a formal supporter using a Supported Decision-Making Agreement from the D.C. Disability Services Reform Amendment Act of 2018.

   d. If a person files an action in the D.C. Superior Court or the OAH, the person may not also file a duplicate Formal Complaint in the DDA Formal Complaint System.

   e. At the end of the Formal Complaint System process, the DDS Director will issue a final decision. The Complaint Coordinator will give notice of the person’s right to appeal the final decision to OAH, including information about how to file an appeal, appeals deadlines, the right to have a representative of the person’s own choosing, and information about possible free legal assistance.

   f. If a decision is reached that the person owes funds, the person will be required to pay them within 30 days. Similarly, if it is determined that the person overpaid
his, her or their contribution, those funds shall be returned to the person within 30 days.