



GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES

POLICY	
Department on Disability Services	Subject: ICF/IID Level of Care Determination
Responsible Program or Office: Developmental Disabilities Administration	Policy Number: 2023-DDA-POL002
Date of Approval by the Director: 7/13/2023	Number of Pages: 4
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Supersedes Policy Dated: January 1, 2015	
Cross References, Related Policies and Procedures, and Related Documents: DDA Intake and Eligibility Policy and Procedure; Level of Need Assessment and Screening Tool Policy; Re-Determination of Eligibility for DDA Services Procedure	

1. PURPOSE

The purpose of this policy is to define the criteria by which the Department on Disability Services (“DDS”), through its Developmental Disabilities Administration (“DDA”), will make Level of Care determinations for a person to participate in the supports offered by Intermediate Care Facilities for Individuals with Intellectual Disabilities (“ICF/IID”) and the Persons with Intellectual and Developmental Disabilities (“IDD”) and Individual and Family Support (“IFS”) Home and Community-Based Services (“HCBS”) Waiver programs.

2. APPLICABILITY

This policy applies to all DDA employees, subcontractors, providers/vendors, consultants, volunteers, and governmental agencies that support people with IDD receiving services as part of the DDA Service Delivery System funded by DDA or the Department of Health Care Finance (“DHCF”).

3. AUTHORITY

The authority for this policy is established in DDS as set forth in D.C. Law 16-264, the “Department on Disability Services Establishment Act of 2006,” effective March 14, 2007 (D.C. Official Code § 7-761.01 *et seq.*), as amended; D.C. Law 2-137, the “Citizens with Intellectual Disabilities Constitutional Rights and Dignity Act of 1978,” effective March 3, 1979 (D.C. Official Code § 7-1301.01 *et seq.*), as amended; 29 DCMR §§ 1902.1(e) and 1902.4, as amended; and 29 DCMR §§ 9002.1(e) and 9002.4, as amended.



4. POLICY

It is the policy of DDA to:

- A. Complete an initial evaluation of the need for the level of care provided in an ICF/IID when there is a reasonable indication that the person might need the services in the near future, unless the person receives home and community-based services. This evaluation shall review a person's condition to determine:
 - 1. If the person requires the level of care provided in an ICF/IID; and
 - 2. Whether the person, but for the provision of waiver services, would otherwise be institutionalized in such a facility;
- B. Conduct periodic reevaluation, at least annually, of each person receiving home and community-based services to determine if the person continues to need the level of care provided and would, but for the provision of waiver services, otherwise be institutionalized in an ICF/IID; and
- C. Offer alternatives when a person is determined to be likely to require the level of care provided in an ICF/IID. The person and the person's guardian or representative will be:
 - 1. Informed of any feasible alternatives available under the IDD and IFS HCBS waiver programs; and
 - 2. Given the choice of either institutional or home and community-based services.

5. RESPONSIBILITY

The responsibility for this policy is vested in the DDS Director. The implementation of this policy is the responsibility of the DDS Deputy Director for DDA.

6. CRITERIA

Under 29 DCMR § 1902.4 (IDD HCBS waiver program) and 29 DCMR § 9002.4 (IFS HCBS waiver program), a person meets the level of care determination if one of the following criteria has been met:

- A. The person's primary disability is an intellectual disability with an intelligence quotient ("IQ") of 59 or less; or
- B. The person's primary disability is an intellectual disability with an IQ of 60-70, taking into account the standard error of measurement, and the person has at least one of the following conditions:
 - 1. Mobility deficits;
 - 2. Sensory deficits;
 - 3. Chronic health needs;



4. Behavior challenges;
 5. Autism;
 6. Cerebral Palsy;
 7. Epilepsy; or
 8. Spina Bifida; or
- C. The person's primary disability is an intellectual disability with an IQ of 60-70, taking into account the standard error of measurement, or the person has a developmental disability, either of which results in substantial functional limitations in at least three of the following major life activities:
1. Self-care;
 2. Understanding and use of language;
 3. Functional academics;
 4. Social skills;
 5. Mobility;
 6. Self-direction;
 7. Capacity for independent living; or
 8. Health and Safety.

7. STANDARDS

The following are the standards by which DDS will evaluate compliance with this policy:

- A. Persons who are found eligible for DDA services are persons who have been determined to have a diagnosis of an intellectual disability and/or developmental disability.
- B. The Eligibility Determination Unit ("EDU") will complete the DC Level of Need Assessment and Screening Tool ("DC LON"), which is a comprehensive assessment tool used to document a person's health, developmental and mental health diagnoses, and support needs in all major life activities, to determine the level of care determination criteria specified in (6B) 1-8, and (6C) 1-8 above.
- C. EDU will complete the DC LON based on information obtained in the DDA Intake application, medical records, social work history, psychological evaluations, school records, allied health evaluations, vocational evaluations, direct observations, and other available background information and interviews. The DC LON provides an assessment of the person's functional, developmental, behavioral, social, health, and nutritional needs, which is required by an ICF/IID program to determine if admission to that specific program is appropriate.
- D. The "additional conditions" specified in the level of care determination criteria in (6B) 2, 3, 5, 6, 7, 8 are found in the DC LON at questions 15 and 16. The criteria for (6B) 1 is considered met if the person receives a score of 1 or higher on the Mobility scale in the DC LON Summary Report, and (6B) 4 is considered met if the person receives a



- score of 2 or higher on the PICA, Behavior, or Psychiatric scale in the DC LON Summary Report.
- E. The criteria for substantial functional limitations in the following major life activities specified in the level of care criteria in (6C) are considered met by the following scores in the DC LON Summary Report:
1. Self-Care - Score of 3 or higher in Personal Care;
 2. Understanding and use of language - Score of 1 or higher in Communication;
 3. Functional academics - refer to the psychological evaluation;
 4. Social skills - Score of 3 or higher in Social Life;
 5. Mobility - Score of 1 or higher in Mobility;
 6. Self-direction - Score of 1 or higher in Comprehension and Understanding;
 7. Capacity for independent living – Score of 2 or higher in Daily Living; and
 8. Health and safety – Score of 2 or higher in either Health or Safety).
- F. When a person served by DDA has chosen and is accepted by an ICF/IID program, DDA will submit documentation substantiating the person's intellectual or developmental disability (e.g., medical evaluation, psychological evaluation, allied health evaluations, etc.), the DC LON, the DC LON Summary Report, and Form 1728 to DHCF's Quality Improvement Organization.
- G. For the ICF/IID program and the approved IDD and IFS HCBS waiver programs, under 42 C.F.R. § 441.302(c)(2), the level of care must be re-determined on an annual basis. The DC LON is completed prior to the team's review of the Individual Support Plan and will be utilized to redetermine the level of care criteria.
- H. The level of care re-determination shall be conducted more frequently than annually if there is evidence of a significant change in the person's condition or circumstances that may necessitate a change in services.
- I. The provider is responsible for completing the physician's certification for level of care redetermination. Additionally, the provider must preserve the person's recertification documents in the collection of records maintained by the provider.
- J. The DDA Waiver Unit shall complete the level of care re-determination prior to authorizing the new waiver Plan of Care.



Andrew P. Reese, Director

July 13, 2023
Date