



GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES

PROCEDURE	
Department on Disability Services	Subject: Remote Supports Services
Responsible Program or Office: Developmental Disabilities Administration	Procedure No.: 2025-DDA-PRO01
Effective Date: 10/1/2025 (IFS HCBS waiver) and 1/1/2026 (IDD HCBS waiver)	Number of Pages: 8
Supersedes: N/A	
Cross References, Related Policies and Procedures, and Related Documents: Remote Supports Services Policy; 29 DCMR §§ 1943 (Remote Supports Services for IDD HCBS waiver) and 9036 (Remote Supports Services for IFS HCBS waiver); 29 DCMR §§ 1907 (Individual Support Plan for IDD HCBS waiver) and 9004 (Individual Support Plan for IFS HCBS waiver); Person-Centered Planning Process and Individual Support Plans Policy; DDS Incident Management and Enforcement Policy and Incident Management and Enforcement Procedure; Human Rights Policy; Provider Human Rights Committee Procedure; 29 DCMR §§ 1941 (Assistive Technology Services for IDD HCBS waiver) and 9015 (Assistive Technology Services for IFS HCBS waiver); Assistive Technology Services Standard Operating Protocol; and Assistive Technology Services Workflow Standard Operating Protocol	

1. PURPOSE

The purpose of this procedure is to provide guidance on how the Developmental Disabilities Administration (“DDA”) of the Department on Disability Services (“DDS”) will ensure health and safety, support progress toward outcomes, and maximize independence through remote supports services delivery and the provision of assistive technology in accordance with the Medicaid Home and Community-Based Services (“HCBS”) Waivers for Persons with Intellectual and Developmental Disabilities (“IDD”) and for Individual and Family Support (“IFS”).

2. APPLICABILITY

This policy applies to people with intellectual or developmental disabilities seeking or receiving remotely delivered services and supports through DDA, DDA staff, DDA providers, DDA provider staff, and Quality Assurance and Performance Management Administration staff under the IDD and IFS HCBS waivers.

3. DEFINITIONS



- A. “On-Demand Active Support” means real-time oversight only when needed. This type of “as needed,” live, real-time support is typically initiated when a triggering event occurs (as from a sensor) indicating the need for immediate support.
- B. “Active Support” means real-time oversight during set times that are scheduled in advance. The remote support professional monitors the system in real time and responds immediately as needed.
- C. “Appropriately certified provider” means an entity that directly employs at least one Qualified Intellectual Disabilities Professional (“QIDP”) responsible for providing oversight of the provider organization’s remote delivery of services. The QIDP must be certified or credentialed in Enabling Technology through SHIFT or an equivalent program.
- D. “Assistive technology” or “AT” means an item, piece of equipment, service animal, or product system, whether acquired commercially in a completed form ready for end use, or modified, customized, or employed to increase, maintain, or improve functional capabilities and which can also support increased community inclusion, including in employment settings.
- E. “Drop-In” means the remote caregiver checks in at random times with the person to ensure their wellness and to determine if they need any assistance.
- F. “Enabling Technology” or “ET” means solutions that empower individuals to achieve greater independence and self-determination. It encompasses assistive technologies and solutions that enhance independence, autonomy, and communication, including during remote supports, ensuring individuals receive the necessary assistance in a safe and person-centered manner.
- G. “Individual Support Plan” or “ISP” means the plan that identifies the supports and services to be provided to the person and the evaluation of the person’s progress on an ongoing basis to assure that the person’s needs and desired outcomes are being met, based on what is important to and for the person, specifically including identifying the person’s interest in employment, identifying goals for community integration and inclusion, and determining the most integrated setting available to meet the person’s needs.
- H. “Monitoring base” means the offsite location from which a remote support professional supports a person.
- I. “On-call support person” means the caregiver or staff responsible for responding in the event of an emergency, when a person receiving remote support otherwise needs in-person assistance, or when the equipment used for the remote delivery of services stops working for any reason.



- J. “Outcome Monitoring Plan” is a structured evaluation approach that clearly defines the person’s desired outcomes. It includes the identification of specific goals and objectives related to remote supports, such as increased independence, improved communication, or enhanced daily living skills. The plan establishes the appropriate tools and methods for routine tracking of progress toward identified outcomes, such as surveys, observations, or data analysis.
- K. “Person-Centered” means a framework for: (1) identifying and addressing a person’s needs in the context of personal goals, preferences, community and family supports, financial resources, and other areas important to the person; (2) identifying and addressing a person’s needs in the context of health and safety and other areas important for the person while supporting the person to become a contributing member of the community; and (3) maximizing independence and the ability to engage in the self-direction of services. A Person-Centered framework treats each person with dignity and respect and empowers them to develop their own goals based on what is important to and for them.
- L. “Remote Supports” means the provision of covered Remote Supports Services by a Remote Support Professional of a remote support provider who is at a remote location and is engaged with the person through assistive technology that uses live, two-way communication. This term refers not to a particular service, but to a method of service delivery with specialized rates distinct from in-person service delivery rates. Accordingly, “remote supports” are services delivered remotely. Remote supports include Telehealth as a subcategory (see Telehealth Services definition below.)
- M. “Remote Support Professional” or “RSP” means the staff who will be providing the services remotely.
- N. “Remote support provider” means the appropriately certified provider identified in the ISP as the provider of remote supports services.
- O. “Remote Support Vendor” or “RSV” means any national entity or organization that provides an RSP. This entity provides the RSP and equipment while a local provider delivers in-person supports.
- P. “Scheduled Check-in” can be applicable to residential and non-residential services provided remotely. A remote support professional checks in with the person at scheduled times to provide supports or services. These are typically centered around supports with activities of daily living, identified outcomes, and/or conducting wellness checks.
- Q. “Telehealth” is the provision of professional, therapeutic, clinical and wellness services delivery for the evaluation, treatment, and education by staff of an appropriate provider who are engaged with individual(s) virtually through equipment



with the capability for live, two-way interactive communication. Telehealth is a subcategory under Remote Supports, with specific exemptions.

- R. “Telehealth provider” is the appropriate professional who meets all waiver and state licensure or certification requirements to deliver telehealth-based services, including clinical, therapeutic, and wellness interventions. This includes but is not limited to licensed behavioral health professionals, speech-language pathologists, occupational therapists, registered nurses, and credentialed assistive technology specialists.

4. PROCEDURES

A. Education and Outreach

The DDS shall maintain a Tool Kit on Remote Supports and Assistive Technology to educate persons supported, their families, and others on how Remote Supports are delivered and how Remote Supports can help them achieve greater independence. Persons interested in receiving Remote Supports may contact their Service Coordinators or their providers at any time to request them. A person’s interest in Remote Supports will be assessed at least annually as part of the ISP process.

B. Scope of Remote Supports and Telehealth Services

	Focus:	Includes:
Remote Supports Services	Focuses on supporting independence and daily activities via remote supports and assistance.	Supported Living Periodic & Daily, Employment Readiness, Day Habilitation, Supported Employment, and In-Home Supports.
Telehealth Services	Covers <u>professional</u> , clinical, wellness, and therapeutic services delivered remotely. Telehealth <u>is</u> exempt from <u>on-call/backup responder staff</u> , Risk Assessment, Monitoring Base, and SHIFT.	Creative Arts Therapies (including art, dance, drama, and music), Behavioral Supports, Occupational Therapy, Speech,/Hearing/and Language, Family Training, Parenting Supports, Wellness Services (including bereavement counseling), Fitness Training, Nutrition Evaluation and Consultation, Sexuality Education), and Assistive Technology Assessment.

C. Person-Centered Planning for Remote Supports Services



- I. Individual Support Planning and Remote Supports Services Needs Assessment
 - a. As part of the initial ISP assessments and 6 months prior to the annual ISP review, the person supported and their team will complete a guided discussion of the person's interest in Remote Supports and AT and utilize the "Assessing Interest in Remote Supports or Assistive Technology" screening tool to make a determination regarding referral. If the person is interested in developing greater independence through Remote Supports or in using AT to achieve identified outcomes, the person and his or her support team shall identify the most appropriate setting for Remote Supports and/or AT in accordance with the DDA Most Integrated Settings Policy.
 - b. In selecting a provider, the person or the person's representative may choose between an appropriately certified provider and a Remote Support Vendor. If the person or the person's representative selects a Remote Support Vendor, the current provider, or, if the person is receiving services for the first time, a selected local provider, shall subcontract with the Remote Support Vendor and serve as the "provider of record." In its capacity as the provider of record, the local provider shall be responsible for providing oversight to ensure that the Remote Support Vendor complies with all applicable regulations, policies, and procedures. The local provider shall, in this regard, be subject to all DDS policies governing the imposition of sanctions, the review of provider performance, and the prevention, reporting, and investigation of Reportable Incidents and Serious Reportable Incidents.
 - c. Consistent with the Assistive Technology Services Workflow Standard Operating Protocol, any technology identified for the person will be acquired through the Assistive Technology Services under the applicable HCBS waiver.
- II. Remote Supports Assessment and Planning for Supported Living Services
 - a. Upon receipt of an authorization for Supported Living Services delivered remotely, the selected provider shall review the person's ISP and any supporting documentation, including but not limited to any Behavioral Support Plans, Person-Centered Thinking Tools, and Discovery Tools, as applicable, to conduct an Assessment and develop the Remote Support Plan.
 - b. The Assessment must be completed to ensure technology solutions or support strategies have been identified to address any risk areas or support needs currently being met in person that will need to be addressed when the person receives services remotely. The remote support provider or their designee shall meet with the person, observe the person in the environments in which the technology will be utilized, and, when appropriate, meet their primary caregiver and other team members, to develop a Remote Support Plan. This observation and these meetings may take place virtually.
- III. Remote Supports Planning for all Remote Supports Services



- a. The provider shall develop the Remote Support Plan within thirty (30) calendar days of receipt of the referral for Remote Supports. If the team rejects the Remote Support Plan, upon receiving notification, the provider shall update the plan and resubmit the Plan to the team with the requested modifications within seven (7) business days.
- b. The Remote Support Plan shall meet the criteria outlined in the Enabling Technology Toolkit and include, in pertinent part, the following components:
 1. A justification statement that explains how Remote Supports benefit the person, promote independence, assist in achieving outcomes, and assure health and safety. The statement must also justify the need for any other services, such as the need for AT (in the case of AT, in part to support equipment acquisition);
 2. An outline of any Remote Support Plan support strategies for any applicable Important To or For categories related to the person supported, including, as applicable: Medical & Health; Dietary; Behavioral; Leaving Home & Visitation; Communication Preferences; Vision; Kitchen Safety; Smoke & Carbon Alarms; Remote Support System Outages; Likes/ Dislikes; Medications; Other Technologies; Risk Areas; System Off Requests; employment or on-the-job supports; training needed to successfully utilize the technology; and identified outcomes and measures of progress toward the desired outcomes;
 3. A description of: (a) the required Remote Supports equipment's function, purpose, features, and general location in the person's residence; and (b) personal and family knowledge of how to use equipment (*e.g.*, how to turn equipment on and off, how to request assistance remotely, etc.);
 4. A description of initial and ongoing training strategies for the person supported, support staff, and, if applicable, family members;
 5. A schedule of when which types of Remote Supports (*e.g.*, Active Support, On-Demand Active Support, Scheduled Check-In, or Drop-In) will be provided;
 6. A detailed back-up plan for residential-base, employment-based remote supports, and behavior supports in the event of system failure (*e.g.*, equipment malfunction, cellular back-up for WiFi, power outage, circumstantial need for in-person intervention), including a detailed emergency response plan in the event that the person needs an in-person response to their location. The emergency response plan can include natural supports or paid supports and should include, at a minimum, a list of three (3) backup contacts with telephone numbers, listed in the order that the Remote Support staff should call each number if and when it is needed;
 7. The response time for situations requiring an in-person staff response to a person's residence, per the requirements defined by the person's team, but not to exceed thirty (30) minutes;
 8. If the use of Remote Supports in the Remote Support Plan will likely affect the privacy and ability to use a shared living space of a person



receiving services at the same residence, an informed consent form in accordance with 29 DCMR § 1943.11 (IDD HCBS waiver) that explains how the relevant Remote Supports and/or AT may affect each relevant person's privacy and ability to use a shared living space, signed by each person at the residence receiving services other than the person receiving Remote Support and/or AT;

9. The person and support team's generally preferred means of communication; and
10. The implementation of remote supports will be monitored consistent with the waiver assurances and the applicable IDD HCBS waiver rules.

IV. Remote Support Plan Consent

- a. The provider team shall discuss and obtain the informed written consent of the person receiving support or the person's representative. The discussion shall include:
 1. The duration of the person's consent;
 2. How the person can revoke consent;
 3. The list of devices facilitating Remote Supports, including the location of the devices in the home and their intended uses;
 4. The expected benefits of the Remote Support Plan;
 5. The expected risks of the Remote Support Plan;
 6. The selected RSV, if applicable;
 7. The selected provider of record;
 8. The signature of the person served and/or the person's representative; and
 9. The signature of a representative of the remote service provider's Human Rights Committee establishing the Committee's approval of the Remote Support Plan.
- b. For Remote Supports involving the use of audio or video equipment that permits remote supports staff to view activities or listen to conversations in the residence shall not be provided until the person who receives the service or the person's representative, and each person who lives with him or her, or their representative, is fully informed and provides written informed consent in accordance with 29 DCMR §§ 1943.11 (IDD HCBS waiver) and 9036.11 (IFS HCBS waiver).

- V. The remote provider shall implement the Remote Support Plan within 120 calendar days of the person's request to receive Remote Supports Services, with "implementation" including the training of the person and their Direct Service Professional on the use of the technology and Remote Support Plan.

D. Quality, Ongoing Evaluation, and Reporting



- I. Remote Supports Services delivery will be documented consistent with the rules of the applicable IDD and IFS HCBS waivers.
- II. The provider of record shall have policies and procedures governing data retention, battery and cellular back-up standards, latency, the regulation and permissibility of latency levels, and system testing.
- III. All remote support plans shall be approved by the provider's Human Rights Committee prior to forwarding to the IDT to protect the civil, human, and legal rights of the person supported.