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State/Territory Name: **District of Columbia**

State Plan Amendment (SPA) #: **23-0009**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

August 28, 2023

Melisa Byrd
Medicaid Director
Department of Health Care Finance
441 4th Street, N.W., 9th Floor, South
Washington, DC 20001

Re: District of Columbia State Plan Amendment (SPA) 23-0009

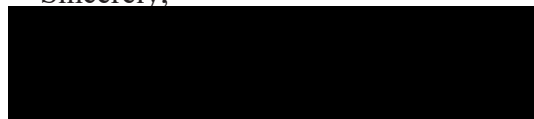
Dear Director Byrd:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0009. This amendment proposes to add provider types and services for children and adolescents under age 21 who need autism spectrum disorder (ASD) services.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that District of Columbia Medicaid SPA 23-0009 was approved on August 25, 2023, with an effective date of October 1, 2023.

If you have any questions, please contact Dan Belnap at 215-861-4273 or via email at Dan.Belnap@cms.hhs.gov.

Sincerely,



James G. Scott, Director
Division of Program Operations

cc: Mario Ramsey, DHCF

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER: 23-0009	2. STATE: District of Columbia
3. PROGRAM IDENTIFICATION: Title XIX of the Social Security Act		

TO: Regional Administrator Centers for Medicare & Medicaid Services Department of Health and Human Services	4. PROPOSED EFFECTIVE DATE: October 1, 2023
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5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN
 AMENDMENT TO BE CONSIDERED AS NEW PLAN
 AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)


6. FEDERAL STATUTE/REGULATION CITATION: § 1905(a) of the Social Security Act; 42 U.S.C. §1396d(a)	7. FEDERAL BUDGET IMPACT: FFY24: \$ 3,368,317.00 FFY25: \$ 3,425,578.00
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Supplement 1 to Attachment 3.1-A, pp. 6b – 6hg Supplement 1 to Attachment 3.1-B, pp. 5b – 5hg Attachment 4.19-B, Part 1: p. 26.3	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Supplement 1 to Attachment 3.1-A, p. 6b Supplement 1 to Attachment 3.1-B, pp. 5b – 5c
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10. SUBJECT OF AMENDMENT:
Autism Spectrum Disorder (ASD) Services

11. GOVERNOR'S REVIEW (Check One)


GOVERNOR'S OFFICE REPORTED NO COMMENT
 OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
D.C. Act: 22-434

12. SIGNATURE OF STATE AGENCY OFFICIAL 	16. RETURN TO Melisa Byrd Senior Deputy Director/Medicaid Director Department of Health Care Finance 441 4 th Street, NW, 9 th Floor, South Washington, DC 20001
13. TYPED NAME Melisa Byrd	
14. TITLE Senior Deputy Director/Medicaid Director	
15. DATE SUBMITTED June 28, 2023	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED June 28, 2023	18. DATE APPROVED August 25, 2023
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PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL October 1, 2023	20. SIGN 
21. TYPED NAME James G. Scott	22. TITLE Director, Division of Program Operations

23. REMARKS

Box 8: State authorized pen and ink change on 08/11/2023

School-Based Health (SBH) (Continued)

Specialized Transportation. Transportation services that require a specially equipped vehicle, or the use of specially adapted school bus or van to ensure a recipient is taken to and from the recipient's residence for school-based health services and are available to Medicaid-eligible beneficiaries for whom the transportation services are medically necessary and documented in an IEP/IFSP. Authorized transportation services must be provided on the same date of service that a Medicaid covered service required by the student's IEP/IFSP is received and will only be claimed when a beneficiary has a specific school-based health service on the date the transportation service is provided. Transportation services are described in Attachment 3.1-D of the D.C. State Plan for Medical Assistance. Providers of transportation services include direct services personnel, e.g. bus drivers, attendants, etc. who are employed or contracted by District of Columbia Public Schools (DCPS) or District of Columbia Public Charter Schools (DCPCS).

Speech-Language Pathology. Services and screenings provided to eligible children by a qualified speech pathologist in accordance with 34 C.F.R. § 300.34(c)(15). Providers shall meet the qualification requirements of 42 C.F.R. § 440.110.

- B. Family Planning Services and Supplies for individuals of childbearing age are provided with no limitations.
- C. **Autism Spectrum Disorder (ASD) Services**

General Provisions:

Autism Spectrum Disorder (ASD) services are services necessary to screen, diagnose, and treat behavioral, social interaction, communication, and physical conditions associated with ASD, as defined in the most recent edition of the American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders. ASD services are available to Medicaid beneficiaries under the age of twenty-one (21). Pursuant to 42 C.F.R. Section 440.130(c), ASD services are provided as preventive services and must be recommended by a physician or other licensed practitioner of the healing arts within his or her scope of practice under state law. Services include the following:

- Screening;
- Diagnostic Evaluation;
- Treatment Planning; and
- ASD treatment services.

ASD treatment services must be identified in a treatment plan as further described under 4.C.iii.

Qualified Practitioners:

Services shall be furnished by practitioners as identified in 4.C.i. through iii, and shall comply with: (1) the District's Medicaid provider screening and enrollment requirements, as applicable; and (2) the District's statutory and regulatory licensing and scope of practice requirements, or the applicable scope of practice or professional practices act within the jurisdiction where services are provided, as applicable.

Services:i. Screening:

- a. Scope: Beneficiaries who are displaying signs of ASD or are at risk of having ASD may be screened using a screening tool that is supported by clinical best practices or emerging best practices, as medically necessary. If further evaluation is necessary after screening, a referral may be made (by one of the qualified practitioners listed in 4.C.i.b.1-7 of this section) for a diagnostic evaluation.
- b. Qualified practitioners: The screening shall be completed by one of the following:
 1. Physician;
 2. Physician assistant who is working under the supervision of a physician;
 3. Psychologist;
 4. Psychologist associate who is working under the supervision of a psychologist;
 5. Licensed professional counselor;
 6. Licensed independent clinical social worker (LICSW); or
 7. Advance practice registered nurse (APRN).

ii. Diagnostic Evaluation:

- a. Scope: A diagnostic evaluation is a comprehensive review of a child's cognitive, speech language, behavioral, fine motor, adaptive, and social functioning. The diagnostic evaluation shall be completed using a validated assessment tool or instrument. The diagnostic evaluation shall indicate whether evidence-based ASD services are medically necessary and recognized as therapeutically appropriate.
- b. Qualified practitioners for diagnostic evaluations: A diagnostic evaluation shall be completed by one of the following qualified practitioners ("diagnosing providers"):
 1. Physician (including a psychiatrist);
 2. Physician assistant under the supervision of a physician;
 3. Psychologist;
 4. Psychologist associate under the supervision of a psychologist;
 5. Licensed professional counselor;

6. LICSW; or
7. APRN.

iii. Development of Treatment Plan

a. Scope: After an ASD diagnosis is determined through a diagnostic evaluation, a qualified practitioner shall develop an appropriate treatment plan that is individualized to meet the specific need of the beneficiary and help the beneficiary reach functional and meaningful outcomes. The qualified practitioner who completes the treatment plan may develop the treatment plan in collaboration with a multidisciplinary team (as described in 4.c.iii.b), depending on the need of the child.

1. The treatment plan must:

- A. Be completed and reviewed every six (6) months and adjusted as appropriate based on data collected by the diagnosing provider or the treating qualified practitioner (described under 4.C.iii.b) to maximize the effectiveness of services;
- B. Be individualized to meet the specific need of the beneficiary and help the beneficiary reach functional meaningful outcomes;
- C. Be centered on the beneficiary's and family's needs and goals;
- D. Include, at a minimum, the following:
 - i. Identify long, intermediate, and short-term goals that are measurable, and expected outcomes to determine if treatment services are effective;
 - ii. Identify specific service type with the recommended amount, frequency, and setting and duration of evidence-based ASD services;
 - iii. Include outcome measurement assessment criteria that will be used to measure achievement of objectives;
 - iv. Identify whether services are consistent with evidence-based ASD interventions; and
 - v. Identify the frequency at which the beneficiary's progress is reported, and identify the individual providers responsible for delivering the services; and
- E. Be submitted to DHCF every six (6) months for review and prior approval, along with the screening, diagnostic evaluation, and supporting clinical documentation.

- b. Qualified practitioners: treatment plans may be developed either by the same qualified practitioner identified as a diagnosing provider under 4.C.ii.b of this section who completes the diagnostic evaluation, or by treating qualified practitioners that are referred for treatment services, as described under 4.C.iv. Depending on the need of the child, the treatment plan may be developed in collaboration with a multidisciplinary team, who may include but not be limited to:
1. Physician (including a psychiatrist);
 2. Physician assistant who works under the supervision of a physician;
 3. Psychologist;
 4. Psychologist associate who works under the supervision of a psychologist;
 5. Speech language pathologist and audiologist;
 6. Speech language pathology assistant who is under the supervision of a speech language pathologist; or
 9. APRN.
- iv. ASD Treatment Services: ASD treatment services must be identified in a treatment plan and include services and interventions that have been identified as evidence-based by nationally recognized research reviews and/or other nationally recognized substantial scientific and clinical evidence.

ASD treatment services, as appropriate, include:

- Applied Behavior Analysis (ABA) Therapy; and
- Psychological Services.

a. ABA Therapy

1. Scope: ABA therapy services are targeted, evidence-based interventions that include the design, implementation, and evaluation of environmental modifications using stimuli and consequences to produce socially significant improvement in behavior, including direct observation, measurement, and functional analysis of the relationship between environment and behavior and skills.
2. Qualified practitioners: ABA therapy shall be delivered by the following practitioners:
 - A. Psychologist;
 - B. LICSW;
 - C. Speech Language Pathologist and Audiologist; and
 - D. A practitioner who is certified by the Behavior Analyst Certification Board (BACB) and meets all required training and educational requirements set forth by the BACB, which shall include:

- i. Board Certified Behavior Analyst (BCBA), who must also comply with the District's Medicaid screening and enrollment requirements;
- ii. Board Certified Behavior Analyst-Doctoral (BCBA-D), who must also comply with the District's Medicaid screening and enrollment requirements;
- iii. Registered Behavior Technician (RBT) who is working under the supervision of a BCBA, BCBA-D, or BCaBA; and
- iv. Board Certified Assistant Behavior Analyst (BCaBA) who is working under the supervision of a BCBA or BCBA-D.

b. Psychological Services

1. Scope: psychological services may include:

- A. Obtaining, integrating, and interpreting information about child behavior and child and family conditions related to learning, mental health, and development;
- B. Administration and interpretation of psychological or other appropriate developmental screening, assessment, or diagnostic impressions;
- C. Assessment and diagnosis of social or emotional development of the child;
- D. Cognitive behavioral therapy;
- E. Individual, group, or family counseling with the parents and other family members, including appropriate skill-building activities; or
- F. Family training, education, and support provided to assist the family of the child in understanding the special needs of the child as related to development, behavior or social-emotional functioning, and enhancement of the child's development.

2. Qualified practitioners: psychological services shall be delivered by the following practitioners:

- A. Physician (including psychiatrist);
- B. Physician assistant who works under the supervision of a physician;
- C. Psychologist;
- D. Psychologist associate who works under the supervision of a psychologist;
- E. LICSW; or
- F. Licensed professional counselor.

5. Physicians' Services Whether Furnished in the Office, the Patient's Home, a Hospital, a Skilled Nursing Facility or Elsewhere
 - A. Elective procedures requiring general anesthesia will be provided only when performed in a facility accredited for such procedures.
 - B. Surgical procedures for cosmetic purpose (except for emergency repair of accidental injury) will be provided only by prior authorization issued by the State Agency.
 - C. Medicaid payment is prohibited for services connected with providing methadone treatment to patients addicted to narcotics unless such treatment is rendered by providers specifically authorized to do so by the Addiction Prevention and Recovery Administration in the Department of Health.
 - D. Gastric bypass surgery requires written justification and prior authorization.
 - E. Assistant surgeon services require prior authorization by the State Agency.

School-Based Health (SBH) (Continued)

Skilled Nursing. Services and screenings rendered by practitioners as defined in 42 C.F.R. § 440.60 and any amendments thereto. These services include the administration of physician ordered medications or treatments to qualified children who require such action during the school day in accordance with the IEP/IFSP.

Specialized Transportation. Transportation services that require a specially equipped vehicle, or the use of specially adapted school bus or van to ensure a recipient is taken to and from the recipient's residence for school-based health services and are available to Medicaid-eligible beneficiaries for whom the transportation services are medically necessary and documented in an IEP/IFSP. Authorized transportation services must be provided on the same date of service that a Medicaid covered service required by the student's IEP/IFSP is received and will only be claimed when a beneficiary has a specific school-based health service on the date the transportation service is provided. Transportation services are described in Attachment 3.1-D of the D.C. State Plan for Medical Assistance. Providers of transportation services include direct services personnel, e.g. bus drivers, attendants, etc. who are employed or contracted by District of Columbia Public Schools (DCPS) or District of Columbia Public Charter Schools (DCPCS).

Speech-Language Pathology. Services and screenings provided to eligible children by a qualified speech pathologist in accordance with 34 C.F.R. § 300.34(c)(15). Providers shall meet the qualification requirements of 42 C.F.R. § 440.110;.

B. Family Planning Services and Supplies for individuals of childbearing age are provided with no limitations.

C. **Autism Spectrum Disorder (ASD) Services**

General Provisions:

Autism Spectrum Disorder (ASD) services are services necessary to screen, diagnose, and treat behavioral, social interaction, communication, and physical conditions associated with ASD, as defined in the most recent edition of the American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders. These EPSDT services are available to Medicaid beneficiaries under the age of twenty-one (21) under the Preventive Services benefit at section 1902(a)(13)(c) of the Social Security Act. Services include the following:

- Screening;
- Diagnostic Evaluation;
- Treatment Planning; and

- ASD treatment services.

ASD treatment services must be identified in a treatment plan as further described under 4.C.iii.

Qualified Practitioners:

Services shall be furnished by practitioners as identified in 4.C.i. through iii, and shall comply with: (1) the District's Medicaid provider screening and enrollment requirements, as applicable; and (2) the District's statutory and regulatory licensing and scope of practice requirements, or the applicable scope of practice or professional practices act within the jurisdiction where services are provided, as applicable.

Services:

i. Screening:

- a. Scope: Beneficiaries who are displaying signs of ASD or are at risk of having ASD may be screened using a screening tool that is supported by clinical best practices or emerging best practices, as medically necessary. If further evaluation is necessary after screening, a referral may be made (by one of the qualified practitioners listed in 4.C.i.b.1-7 of this section) for a diagnostic evaluation.
- b. Qualified practitioners: The screening shall be completed by one of the following:
 1. Physician;
 2. Physician assistant who is working under the supervision of a physician;
 3. Psychologist;
 4. Psychologist associate who is working under the supervision of a psychologist;
 5. Licensed professional counselor;
 6. Licensed independent clinical social worker (LICSW); or
 7. Advance practice registered nurse (APRN).

ii. Diagnostic Evaluation:

- a. Scope: A diagnostic evaluation is a comprehensive review of a child's cognitive, speech language, behavioral, fine motor, adaptive, and social functioning. The diagnostic evaluation shall be completed using a validated assessment tool or instrument. The diagnostic evaluation shall indicate whether evidence-based ASD services are medically necessary and recognized as therapeutically appropriate.
- b. Qualified practitioners for diagnostic evaluations: A diagnostic evaluation shall be completed by one of the following qualified practitioners ("diagnosing providers"):

1. Physician (including a psychiatrist);
2. Physician assistant under the supervision of a physician;
3. Psychologist;
4. Psychologist associate under the supervision of a psychologist;
5. Licensed professional counselor;
6. LICSW; or
7. APRN.

iii. Development of Treatment Plan

- a. Scope: After an ASD diagnosis is determined through a diagnostic evaluation, a qualified practitioner shall develop an appropriate treatment plan that is individualized to meet the specific need of the beneficiary and help the beneficiary reach functional and meaningful outcomes. The qualified practitioner who completes the treatment plan may develop the treatment plan in collaboration with a multidisciplinary team (as described in 4.c.iii.b), depending on the need of the child.

1. The treatment plan must:
 - A. Be completed and reviewed every six (6) months and adjusted as appropriate based on data collected by the diagnosing provider or the treating qualified practitioner (described under 4.C.iii.b) to maximize the effectiveness of services;
 - B. Be individualized to meet the specific need of the beneficiary and help the beneficiary reach functional meaningful outcomes;
 - C. Be centered on the beneficiary's and family's needs and goals;
 - D. Include, at a minimum, the following:
 - i. Identify long, intermediate, and short-term goals that are measurable, and expected outcomes to determine if treatment services are effective;
 - ii. Identify specific service type with the recommended amount, frequency, and setting and duration of evidence-based ASD services;
 - iii. Include outcome measurement assessment criteria that will be used to measure achievement of objectives;
 - iv. Identify whether services are consistent with evidence-based ASD interventions; and

- v. Identify the frequency at which the beneficiary's progress is reported, and identify the individual providers responsible for delivering the services; and
- E. Be submitted to DHCF every six (6) months for review and prior approval, along with the screening, diagnostic evaluation, and supporting clinical documentation.
- b. Qualified practitioners: treatment plans may be developed either by the same qualified practitioner identified as a diagnosing provider under 4.C.ii.b of this section who completes the diagnostic evaluation, or by treating qualified practitioners that are referred for treatment services, as described under 4.C.iv. Depending on the need of the child, the treatment plan may be developed in collaboration with a multidisciplinary team, who may include but not be limited to:
 1. Physician (including a psychiatrist);
 2. Physician assistant who works under the supervision of a physician;
 3. Psychologist;
 4. Psychologist associate who works under the supervision of a psychologist;
 5. Speech language pathologist and audiologist;
 6. Speech language pathology assistant who is under the supervision of a speech language pathologist; or
 9. APRN.
- iv. ASD Treatment Services: ASD treatment services must be identified in a treatment plan or plan of care if services are provided through a home health agency (as described under 4.C.iii.a.1), and include services and interventions that have been identified as evidence-based by nationally recognized research reviews and/or other nationally recognized substantial scientific and clinical evidence.

ASD treatment services, as appropriate, include:

- Applied Behavior Analysis (ABA) Therapy; and
- Psychological Services.

a. ABA Therapy

1. Scope: ABA therapy services are targeted, evidence-based interventions that include the design, implementation, and evaluation of environmental modifications using stimuli and consequences to produce socially significant improvement in behavior, including direct observation, measurement, and functional analysis of the relationship between environment and behavior and skills.
2. Qualified practitioners: ABA therapy shall be delivered by the following practitioners:

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 - B. LICSW;
 - C. Speech Language Pathologist and Audiologist; and
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 - i. Board Certified Behavior Analyst (BCBA), who must also comply with the District's Medicaid screening and enrollment requirements;
 - ii. Board Certified Behavior Analyst-Doctoral (BCBA-D), who must also comply with the District's Medicaid screening and enrollment requirements;
 - iii. Registered Behavior Technician (RBT) who is working under the supervision of a BCBA, BCBA-D, or BCaBA; and
 - iv. Board Certified Assistant Behavior Analyst (BCaBA) who is working under the supervision of a BCBA or BCBA-D.
- b. Psychological Services
- 1. Scope: psychological services may include:
 - A. Obtaining, integrating, and interpreting information about child behavior and child and family conditions related to learning, mental health, and development;
 - B. Administration and interpretation of psychological or other appropriate developmental screening, assessment, or diagnostic impressions;
 - C. Assessment and diagnosis of social or emotional development of the child;
 - D. Cognitive behavioral therapy;
 - E. Individual, group, or family counseling with the parents and other family members, including appropriate skill-building activities; or
 - F. Family training, education, and support provided to assist the family of the child in understanding the special needs of the child as related to development, behavior or social-emotional functioning, and enhancement of the child's development.
 - 2. Qualified practitioners: psychological services shall be delivered by the following practitioners:
 - A. Physician (including psychiatrist);

- B. Physician assistant who works under the supervision of a physician;
 - C. Psychologist;
 - D. Psychologist associate who works under the supervision of a psychologist;
 - E. LICSW; or
 - F. Licensed professional counselor.
5. Physicians' Services Whether Furnished in the Office, the Patient's Home, a Hospital, a Skilled Nursing Facility or Elsewhere
- A. Elective procedures requiring general anesthesia will be provided only when performed in a facility accredited for such procedures.
 - B. Surgical procedures for cosmetic purpose (except for emergency repair of accidental injury) will be provided only by prior authorization issued by the State Agency.
 - C. Medicaid payment is prohibited for services connected with providing methadone treatment to patients addicted to narcotics unless such treatment is rendered by providers specifically authorized to do so by the Addiction Prevention and Recovery Administration in the Department of Health.
 - D. Gastric bypass surgery requires written justification and prior authorization.
 - E. Assistant surgeon services require prior authorization by the State Agency.

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES

28. Early Periodic Screening, Diagnosis and Treatment (EPSDT) Services (Continued)

Reimbursement Methodology for Autism Spectrum Disorder (ASD) Services

- I. The Department's fee schedule for ASD services is based on federal and District requirements, nationally-recognized coding systems, medical practice, and the relative value of services. Except as otherwise noted in the plan, state developed fees are the same for both governmental and private providers.
- II. The agency's fees are set as of October 1, 2023 and are effective for services provided on or after that date. Fees may be updated annually and shall be published on the Medicaid website at <https://www.dc-medicaid.com/>.