



## DDS HCBS SITE REVIEW AND EXCEPTION REQUEST PROCESS

The Department of Developmental Services (DDS), consistent with the Centers for Medicare and Medicaid Services (CMS) Community Rule and DDS Policy #2014-1 (Home and Community Based Settings Policy, effective September 2, 2014), will not license, fund, or support new residential developments that isolate individuals receiving HCBS services from the broader community.

In limited circumstances, requests for review and approval (as outlined in Section F[b]) or requests for exception (as outlined in Section H) may be necessary. DDS will allow reviews and exceptions only for good cause.

### Review and Approval Requests under DDS Policy 2014-1, Section F(b)

*(capacity limit of four or fewer people in duplexes, triple-deckers, or free-standing homes side-by-side, adjacent, or on bordering lots)*

1. The provider agency may initiate a request for a review only after considering all relevant factors and determining that there is good cause for a review under Section F(b).
2. The provider agency will submit a review request through the [\*\*DDS HCBS Review and Exceptions Request Form \(click link to open\)\*\*](#), which will be routed to the Regional Director for review. The request must include:
  - a. Site location and description, including surrounding homes and capacities;
  - b. Current and requested capacity;
  - c. Justification for the review (e.g., specific individual or regional need);
  - d. Information about the population to be served, staffing, community access, and accessibility features; and
  - e. Any other relevant information.
3. The Regional Director will review the submission to ensure that sufficient information and justification have been provided. The Regional Director's forwarding of the completed request to OQE constitutes the Regional Director's written determination that good cause exists for a review.
4. Within seven (7) days after OQE determines that a submission is complete, OQE will forward the DDS HCBS Review Request Form as completed by the **Regional Director** to **the Assistant Commissioner for Field Operations** and the **Assistant Commissioner for Quality Management** for each to consider.
5. Within thirty (30) days, each Assistant Commissioner will review the request and indicate on the DDS HCBS form whether or not they agree good cause has been shown for approval and provide a rationale for their determination.
6. If both Assistant Commissioners find that good cause has been shown, DDS will grant the approval.
7. The Assistant Commissioner for Quality Management will notify all interested parties of the decision in writing.



## Exception Requests under DDS Policy 2014-1, Section H

*(requests for an exception to the Policy)*

1. The provider agency may initiate a request for an exception after considering all relevant factors and determining that there is good cause for an exception under Section H.
2. The provider agency must submit the exception request through the [\*\*DDS HCBS Review and Exceptions Request Form \(click link to open\)\*\*](#), which will be routed to the Regional Director for review. The request must include:
  - a. Site location and description, including surrounding homes and capacities;
  - b. Current and requested capacity;
  - c. Justification for the exception (e.g., specific individual or regional need);
  - d. Information about the population to be served, staffing, community access, and accessibility features; and
  - e. Any other relevant information.
3. The Regional Director will review the submission to ensure that sufficient information and justification have been provided. The Regional Director's forwarding of the completed request to OQE constitutes the Regional Director's written determination that good cause exists for review by the central office.
4. Within seven (7) days after OQE determines that a submission is complete, it will forward the submission to the **Deputy Commissioner**, the **Assistant Commissioner for Quality Management**, and the **General Counsel** for each to consider.
5. Within thirty (30) days, each reviewer will consider the submission, and each will indicate on the DDS HCBS form whether good cause has been shown for an exception, and each will provide a rationale for their opinion. If the Deputy Commissioner, the Assistant Commissioner for Quality Management, and the General Counsel all find that good cause has been shown, DDS will grant the exception. OQE will notify all interested parties of the decision.

## Final Provision

All exceptions granted under DDS Policy #2014-1 are contingent on continued compliance with the CMS HCBS Community Rule.