

DEPARTMENT OF HEALTH  
HEALTH REGULATION & LICENSING  
ADMINISTRATION

PROCEDURES TO OBTAIN A LICENSE TO OPERATE A  
GROUP HOME FOR PERSONS WITH INTELLECTUAL  
DISABILITIES.

Revised November 2011



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
Department of Health

Health Regulation  
& Licensing Administration



Dear Applicant:

Thank you for your interest in joining a provider community dedicated to offering quality services to residents within the District of Columbia. It is our sincerest hope that your desire to assist persons with developmental disabilities will be a positive and rewarding experience. This brochure provides a step-by-step guide for opening a Group Home for Persons with Intellectual Disabilities in the District of Columbia. The process requires a coordinated effort between the Department on Disability Services, the DC Fire and Emergency Services, and this office. Each office implements its mandated regulatory and oversight functions. We look forward to a long and lasting working relationship and if you require any further assistance with this process please contact Louis Woodard, Supervisory Social Worker, Intermediate Care Facilities Division on (202) 724-8800.

Sincerely,

*Sharon H. Mebane*

Sharon H. Mebane  
Program Manager  
Intermediate Care Facilities Division

An Applicant Must Complete Steps 1 Through 13 To Obtain A License To Operate A  
Group Home For Persons with Intellectual Disabilities  
(Title 22, DC Municipal Regulations, Chapter 35)

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*Step 1:* Make application for a Certificate of Occupancy (C of O) at the location listed below (facilities with 7 or more residents):

Department of Consumer and Regulatory Affairs  
1100 4<sup>th</sup> Street, SW  
Washington, DC 20024  
Phone: (202) 442-4400

*Note: The C of O must be issued in the name of the perspective operator.*

*Step 2:* Obtain an application form for a Group Home for Persons with Intellectual Disabilities by calling or visiting the location listed below:

Department of Health  
Health Regulation & Licensing Administration  
899 North Capitol Street, NE  
2<sup>nd</sup> Floor  
(202) 724-8800

You may also visit our website at [www.doh.dc.gov](http://www.doh.dc.gov) and/or

<http://hrla.doh.dc.gov/hrla/cwp/view,a,1384,q,573800,hrlaNav,%7C33257%7C.asp>

*Step 3:* To obtain information and to submit required documents to be considered as a referral agency for persons with mental retardation, contact:

Department on Disability Services  
Community Based Services  
1125 15th Street, NW  
8th Floor  
(202) 730-1619

*Step 4:* Contact the D. C. Fire Marshal's Office at (202) 727-2135 or 727-1973 to arrange for a group home licensure inspection.

If the applicant anticipates participating in the Medicaid program as an Intermediate Care Facility for Persons with Intellectual Disabilities, this information must also be provided to the Fire Marshal's Office to ensure that applicable Life Safety Code requirements are used in conjunction with District of Columbia requirements when verifying compliance.

*Step 5:* Submit a completed licensure application package to the mailing address listed in Step 2.

The required items include:

- Copy of C of O
- Completed notarized application
- License Fee (*check or money order made payable to DC Treasurer*)
- Clean Hand Act Certification form
- Insurance Verification Form (*Applicants are encouraged to have insurance agencies forward the form directly to the licensure agency – mailing address listed in Step 2 above or by fax at (202) 442-9430*)
- An original Certificate of Good Standing, if applicable (*The Certificate can be obtained from the DCRA, Office of Corporations, mailing address listed in Step 1*)
- Form DC – 1513 Ownership and Control Interest (*required if the applicant anticipates participating in the Medicaid program as an Intermediate Care Facility for Persons with Intellectual Disabilities*)

*Step 6:* Initial licensure inspection: The applicant will be notified of the date and time of the initial licensure inspection by the Intermediate Care Facilities Division.

*Step 7:* If deficiencies are identified during the initial licensure inspection, a Statement of Deficiencies and Plan of Correction Report will be prepared and forwarded to the Applicant within 10 days of the survey's completion.

*Step 8:* The Applicant is required to submit a documented Plan of Correction, within 10 days of the date the Statement of Deficiencies was received that details how the deficiencies were corrected. The applicant has 30 days from the date of inspection to correct the deficiencies.

*Step 9:* Surveyors may conduct a follow-up visit upon receipt of a Plan of Correction to verify corrections, if required.

*Step 10:* If an applicant fails to submit a Plan of Correction or fails to correct the deficiencies within 30 days of receipt of the deficiencies, the application will be denied. If an application is denied, an applicant must reapply.

- Step 11:* If the application is approved, the Intermediate Care Facilities Division shall issue an initial 90-day provisional license. Permission is given at this time to admit clients.
- Step 12:* Surveyors will conduct an unannounced onsite visit prior to the expiration of the provisional license to verify continued compliance.
- Step 13:* If the facility is in full or substantial compliance with the requirements, a regular license for one (1) year will be issued.

*If an applicant also desires to participate in the Medicaid program as an Intermediate Care Facility for Persons with Intellectual Disabilities, the instructions listed in Steps 14 through 20, listed below must be followed.*

- Step 14:* An applicant desiring to participate in the Medicaid program as an Intermediate Care Facility for Persons with Intellectual Disabilities should contact the following office to begin the Medicaid budget application process. This step can be initiated concurrently with the licensure process referenced above.

Department of Health Care Finance  
Office of Audit and Finance  
899 North Capitol Street, NE, 6<sup>th</sup> Floor  
(202) 442-9079

- Step 15:* The group home provider must submit a letter of request, to the agency referenced in Step 2 to obtain an initial certification survey.
- Step 16:* Initial Certification Survey: Subsequent to the admission of one or more clients, an unannounced initial certification inspection will be conducted.
- Step 17:* If deficiencies are identified during the initial certification survey, a Statement of Deficiencies and Plan of Correction Report will be prepared and forwarded to the applicant.
- Step 18:* The provider submits its documented Plan of Correction, within 10 days or sooner of the date of receipt, with completion dates that details how the deficiencies were corrected.
- Step 19:* Surveyors may conduct a follow-up visit upon receipt of a Plan of Correction to verify corrections, if required.
- Step 20:* The Intermediate Care Facilities Division shall notify the provider that it has met the requirements for initial Medicaid Certification and will forward its recommendation to the Department of Health Care Finance

and the Department on Disability Services. The ICFD will also issue a regular one (1) year license.