

## Service recipients and families

*November 16th, 2023, from 2:00-3:45ET*

Since 2015, DBHDS has used the Supports Intensity Scale (SIS)<sup>®</sup> assessment to determine rates for specific services. The SIS assessment is changing and DBHDS has a new project to update this model. DBHDS wants to hear from people receiving services and their families to learn about how this model might be improved. DBHDS is hosting a townhall meeting for people receiving services and their families on **November 16<sup>th</sup>, 2023, from 2:00-3:45ET**. You can join this meeting here: <https://us06web.zoom.us/j/86798659737>. We'll provide information about this project and ask questions of people in attendance. If you have any questions you'd like us to answer in this meeting please send them here: [https://docs.google.com/forms/d/e/1FAIpQLSc21y4XpMleJZ9AGWtPuiR8c1PeZr5r-luU8raVtq3JYmwsug/viewform?usp=sf\\_link](https://docs.google.com/forms/d/e/1FAIpQLSc21y4XpMleJZ9AGWtPuiR8c1PeZr5r-luU8raVtq3JYmwsug/viewform?usp=sf_link) or use the QR code below. You can also sign up to listen in on ongoing advisory group meetings using this link. If you are a support coordinator or a provider, please look for invites for support coordinator and provider meetings.



Please click the link below to join the webinar:

<https://us06web.zoom.us/j/86798659737>

Or One tap mobile :

+16694449171,,86798659737# US

+17193594580,,86798659737# US

Or Telephone:

Dial(for higher quality, dial a number based on your current location):

+1 669 444 9171 US

+1 719 359 4580 US

+1 720 707 2699 US (Denver)

+1 253 205 0468 US

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

+1 309 205 3325 US

+1 312 626 6799 US (Chicago)

+1 360 209 5623 US

+1 386 347 5053 US

+1 507 473 4847 US

+1 564 217 2000 US

+1 646 558 8656 US (New York)

+1 646 931 3860 US

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+1 301 715 8592 US (Washington DC)

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Webinar ID: 867 9865 9737

International numbers available: <https://us06web.zoom.us/j/86798659737>



Human Services  
Research Institute

# Virginia Support Levels/Tiers Informational Meetings

November 2023

# Housekeeping

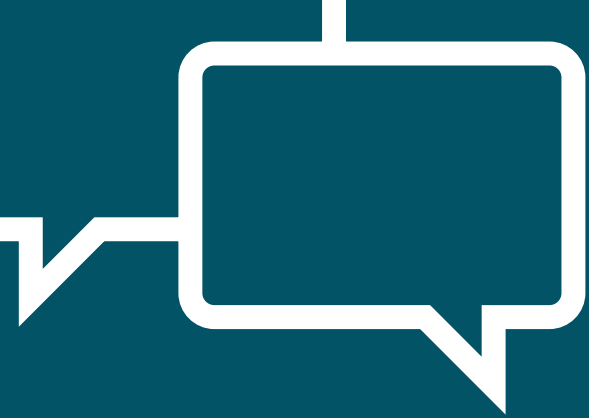
This meeting is about a DBHDS project to update the support levels and possibly rate tiers for people receiving services. If you have questions for DBHDS, please send them to [SIS@dbhds.virginia.gov](mailto:SIS@dbhds.virginia.gov)

We have lots of opportunities to participate, including raising your hand to speak, using chat, and using Mentimeter. We'll also provide you with a feedback form at the end of this meeting where you can submit additional comments

This meeting is hosted by HSRI and may not reflect the views of Virginia Department of Behavioral Health & Developmental Services (DBHDS)

Please mute yourself when you are not talking. If you want to speak raise your hand when there is an opportunity to reflect

Please allow all advisory group members the opportunity to speak up!



# Agenda

**5 minutes** Welcome and introductions to project team

**25 minutes** Overview of current support levels/tiered rates

**10 minutes** Changes to the SIS-A

**20 minutes** Overview of project

**25 minutes** Q&A from questions submitted previously

**15 minutes** Feedback from attendees on what is working well and what changes should be considered

**5 minutes** Next steps and survey

Adjournment



# Welcome and Introductions

# Meet Our Team – HSRI



**Jami Petner-Arrey**  
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Human Services  
Research Institute

Founded in 1976, the Human Services Research Institute (HSRI) is a national non-profit improving the availability and quality of supports for vulnerable populations, including children and adults with disabilities.

***We believe that all people and their families have the right to live, love, work, play and pursue their life aspirations in their community.***





# Meet Our Team – B&A



**Stephen Pawlowski**  
**Managing Director**

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# BURNS & ASSOCIATES

A DIVISION OF HEALTH MANAGEMENT ASSOCIATES

Since 2006 HMA–Burns has worked with states on the redesign of health care delivery and payment systems.

***HMA–Burns offers customized, innovative approaches to the financing and delivery of healthcare and human services.***





Mission: A life of possibilities for all Virginians.

Vision: Supporting individuals by promoting recovery, self-determination, and wellness in all aspects of life.



# In Today's Meeting we Will:

- DBHDS wants to collaborate with people who are interested in this project!
- Discuss the current support level/tier model for specific DBHDS services and a project that is working to update that model. Today's meeting is intended to provide background information about the project and to get feedback
- The Human Services Research Institute (HSRI) and our partner HMA–Burns are supporting DBHDS in this project



# Overview of Current Support Levels/Tiered Rates

# Background of Support Level/Rate Tiers

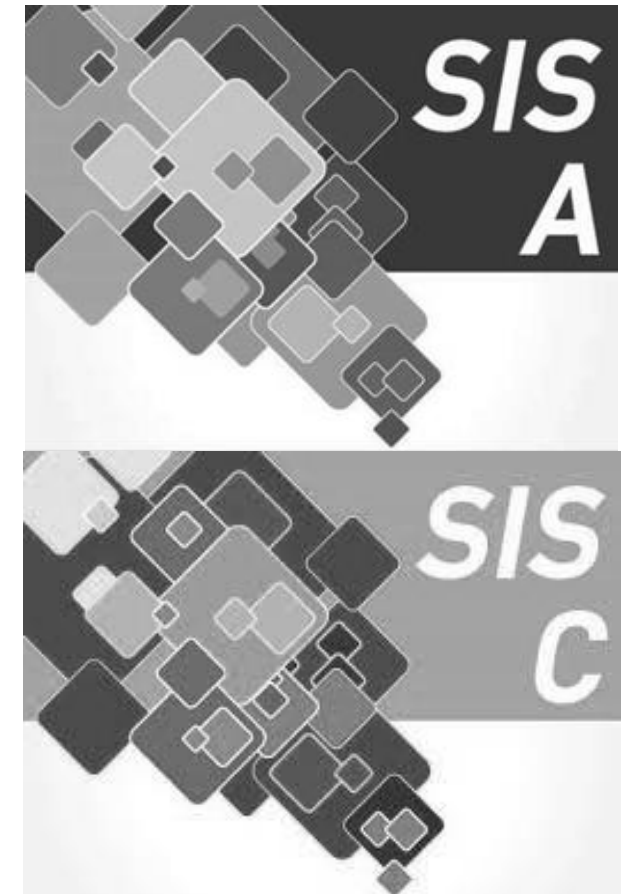
- In 2013, HSRI and our partners, Burns & Associates, were contracted to work with DBHDS to develop support levels and rate tiers for people using waiver services on all three waivers
- We developed a support level model that relies on results from the Supports Intensity Scale<sup>®</sup> (SIS<sup>®</sup>), supplemental questions, and a document review verification process (for some people) to assign each person to a support level
- For services with tiered rates, support levels are used to determine the tier
- Support levels are not used for individual budgets or service limits

# DBHDS Selected the SIS to:

- Make sure that rates for shared services are matched to people's support needs
- Allow for fair and equitable rates across the state
- Have more meaningful information about support needs for person centered planning
- Ensure that support levels and rate tiers match what is in the person's plan (documented medical, behavioral, and other supports)
- Use data for analysis

# Getting a Support Level

- Supports Intensity Scale® (SIS) Adult (SIS-A) or Child (SIS-C)
- Each person over 16 takes a SIS-A assessment, and some children under 16 take a SIS-C assessment
- SIS-A measures support needed for home living, community living, lifelong learning, employment, health and safety, social activities, and protection and advocacy
- SIS-C measures support needed for home living, community & neighborhood, school participation, school learning, health & safety, social activities, and advocacy










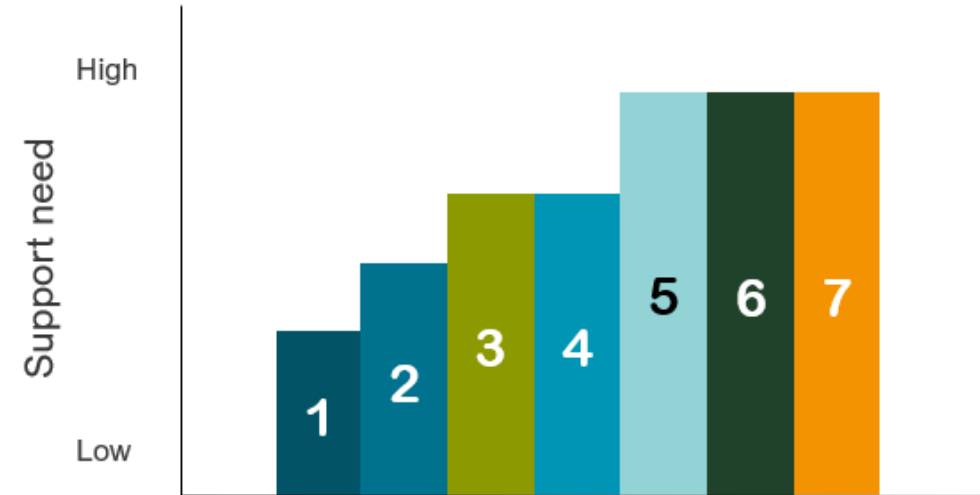


# Getting a Support Level

- Supplemental Questions (SQs)
  - SQs ask about severe medical and safety risks, and risks of self-injury
  - SQs are used to indicate that someone may have extraordinary needs that are verified later
- Document Review Verification
  - Verification is a process to confirm what is reported in the SIS assessment including extraordinary medical/behavioral needs that are indicated in supplemental questions
  - Records and documents are reviewed by a committee that confirms responses to the SQs
  - People who have extraordinary needs are assigned to the highest support levels

# Getting a Rate Tier

Reimbursement Tier 1		<b>Mild Support Needs</b> Individuals have some need for support, including little to no support need for medical and behavioral challenges. They can manage many aspects of their lives independently or with little assistance.
Reimbursement Tier 2		<b>Moderate Support Needs</b> Individuals have modest or moderate support needs, but little to no need for medical and behavioral supports. They need more support than those in Level 1, but may have minimal needs in some life areas.
Reimbursement Tier 3		<b>Mild/Moderate Support Needs with Some Behavioral Support Needs</b> Individuals have little to moderate support needs as in Levels 1 and 2. They also have an increased, but not significant, support needed due to behavioral challenges.
		<b>Moderate to High Support Needs</b> Individuals have moderate to high need for support. They may have behavioral support needs that are not significant but range from none to above average.
Reimbursement Tier 4		<b>Maximum Support Needs</b> Individuals have high to maximum personal care and/or medical support needs. They may have behavioral support needs that are not significant but range from none to above average.
		<b>Intensive Medical Support Needs</b> Individuals have intensive need for medical support but also may have similar support needs to individuals in Level 5. They may have some need for support due to behavior that is not significant.
		<b>Intensive Behavioral Support Needs</b> Individuals have intensive behavioral challenges, regardless of their support needs to complete daily activities or for medical conditions. These adults typically need significantly enhanced supports due to behavior.



**Support levels are matched to rate tiers**

# Getting a Rate Tier

The following services have tiered rates:

- Community engagement
- Group day support
- Group home
- Independent living
- Sponsored residential support
- Supported living residential

# Getting Services

- People may find out what their support level is from their support coordinator
- People engage in their person-centered planning process
- People can choose the services that they would like in their plan. If they select tiered services, their providers will be paid the tier that matches their support level
- Providers can apply for a customized rate for people whose needs outweigh the resources available within the rate structure, if the person meets certain eligibility requirements



# Changes to the SIS-A

# The SIS-A<sup>®</sup> 2nd Edition

- DBHDS is going to continue to use the SIS
- The SIS-A is changing, the changes are called the SIS-A 2<sup>nd</sup> Edition
  - There are changes to demographic section
  - There are 6 new medical questions and adjustments to others
  - There is 1 new behavioral question
  - The scoring is different (standard scores)
  - Some sections and subsections have been renamed
  - Some of the questions have been reworded
- These changes require us to update the current support levels/rate tiers
- The SIS-A 2<sup>nd</sup> Edition will not be used until this project is complete, and the framework is updated

# What's Changing?

- Instead of switching to the SIS-A 2<sup>nd</sup> Edition right away, DBHDS is using advanced questions
- The advanced questions are the new questions in the medical and behavioral sections of the SIS-A 2<sup>nd</sup> Edition that have been added to the SIS-A assessment
- The advanced questions will allow DBHDS to collect data on how people answer the advanced questions before DBHDS changes to the SIS-A 2<sup>nd</sup> Edition



# Overview of Project



# Consult People

- Convene an advisory group
  - We've met twice
  - We will meet 6 more times throughout the course of this project, monthly through early next year
  - We have interviewed several key informants from DBDHS and Department of Medical Assistance Services (DMAS)
- Host virtual engagement sessions with:
  - People using services and their families
  - Support coordinators
  - Providers

# Analyze Changes to the Support Levels/Rate Tiers

- Review supplemental questions and verification process
- Analyze the new SIS scoring and the advanced questions
  - Propose any needed changes to the support levels
- Analyze the rate tiers
  - Propose any needed changes to the rate tiers
- Test out the proposed changes with a record review

# Potential Changes to the Support Levels

- Based on initial analysis to date HSRI may recommend changes to
  - Which sections of the SIS are used
  - The number of support levels
  - The scores that are used to assign support levels
  - When this model is implemented, some people will stay in the same support levels while others will change support levels

# Potential Rate Tier Changes

- DBHDS is **not** evaluating rate model cost assumptions
- However, after initial work is complete on the development of the support levels, the potential need for other changes to the rate tiers will be evaluated
  - How rate tiers align to support levels (e.g., there may be fewer support levels, but the same number of tiers)
  - Changes to the staffing assumptions in the rate models
    - For example, if the number of individuals in Tier 1 were to increase, that would suggest higher average needs in this group (because individuals formerly in a higher tier are now in Tier 1), necessitating more staffing
    - Or, if the number of individuals in Tier 4 were to increase, that would suggest lower average needs in this group (because individuals formerly in a lower tier are now in Tier 4), reducing staffing needs
- Following the development of the support levels, we may determine that there are no changes needed to the existing reimbursement rates

# Potential Rate Tier Changes

- After developing potential changes to support levels, the impact on funded staffing levels (and total payments) across the system will be evaluated
  - For example, if there is a shift to lower tiers, funded staffing levels (and overall payments) would be reduced if the rate model assumptions are not revised (opposite result could also be true)
  - Example for five-bed group homes shows that, based on this fictional change in tier distributions, funded hours would decline by three percent

	Based on Current Criteria			Based on Revised Criteria*		
	# of Individuals*	Hrs. Funded per Person per Week	Total Hours Funded per Week	# of Individuals*	Hrs. Funded per Person per Week	Total Hours Funded per Week
Tier 1	50	56.6	2,830	100	56.6	5,660
Tier 2	350	64.6	22,610	400	64.6	25,840
Tier 3	450	72.6	32,670	400	72.6	29,040
Tier 4	150	87.0	13,050	100	87.0	8,700
<b>Total</b>	<b>1,000</b>		<b>71,160</b>	<b>1,000</b>		<b>69,240</b>

\* The distribution figures are not real figures (and no revised criteria has been developed), but are shown for illustrative purposes.

# Recommend Changes to Support Level/Rate Tiers

- Propose final recommendations
- Develop a transition plan
- Develop a communication plan to help support the implementation

# Timeline



## April-June 2023

- Begin Contract Work
- Background research

## July-Sept. 2023

- Establish Advisory Group
- Key Informant Interviews
- Begin data analysis

## Oct.-December

- Continue Advisory Group meetings
- 1<sup>st</sup> Engagement Sessions
- Complete data analysis

## Jan.-April 2023

- Continue Advisory Group meetings
- 2<sup>nd</sup> Engagement Sessions
- Test proposed changes
- Recommend final changes
- Complete implementation & communication plan



Q&A







# Feedback



# Next Steps

# What's Next?

- As part of these meetings, we are meeting with people receiving services and their families, support coordinators, and providers
- We are holding public advisory group meetings that you are welcome to listen in on. You can sign up by using the QR code on the next page. Our next meeting is November 30<sup>th</sup>
- We're continuing analysis and will complete this analysis in the coming months
- We will be offering another meeting after we complete this analysis, be on the lookout for more information

# Upcoming Outreach

## **Service Recipients & Families**

November 16<sup>th</sup>, 2023

2:00-3:45ET

<https://us06web.zoom.us/j/86798659737>

## **Support Coordinators**

November 16<sup>th</sup>, 2023

10:00-11:45ET

<https://us06web.zoom.us/j/88919982957>

## **Providers**

November 15<sup>th</sup>, 2023

11:00-12:45ET

<https://us06web.zoom.us/j/84440901176>

# What's Next?



If you want to ask a question or share feedback, please use this link: [https://docs.google.com/forms/d/e/1FAIpQLSc21y4XpMleJZ9AGWtPuiR8c1PeZr5r-luU8raVtq3JYmwsug/viewform?usp=sf\\_link](https://docs.google.com/forms/d/e/1FAIpQLSc21y4XpMleJZ9AGWtPuiR8c1PeZr5r-luU8raVtq3JYmwsug/viewform?usp=sf_link) or scan for the form.



**Questions/Comments**



Human Services  
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# Please Take Our Survey Thank you!

Please use our form for questions/feedback. If you need help related to these meetings reach out [Jodi Franck jfranck@hsri.org](mailto:jfranck@hsri.org)

If you need help from DBHDS, please e-mail [SIS@dbhds.virginia.gov](mailto:SIS@dbhds.virginia.gov)



