

## **Formal Agenda**

### **DBHDS SIS-A 2nd Edition Advisory Group**

11:00AM-12:30PM – Tuesday April 16, 2024

Online Zoom Meeting (see link below)

#### **AGENDA**

11:00 Welcome and Housekeeping

11:05 Questions and Answers

11:10 Updates

11:15 Record Review

11:40 Preliminary Rate Tiers

12:05 Discussion

12:20 Next steps, Question/Feedback Form, and Survey

12:30 Adjournment

#### **Zoom Meeting Information**

Please click the link below to join the webinar:

<https://us06web.zoom.us/j/82115245851>

Or One tap mobile :

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Webinar ID: 821 1524 5851

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



Human Services  
Research Institute

# Virginia SIS-A 2nd Edition Advisory Group

April 2024

# Housekeeping

Some of the people in this meeting are advisory group members who will participate in the discussion. Everyone else is welcome to type questions in the chat or send your questions to [SIS@dbhds.virginia.gov](mailto:SIS@dbhds.virginia.gov).

Everyone's participation is voluntary. You do not need to participate in any discussion, polls, or chats.

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

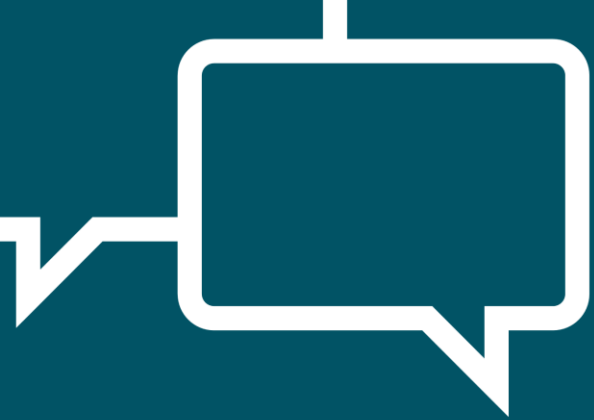
This meeting is being recorded, as a tool for advisory group members to watch later if they had to miss today.

Please mute yourself when you are not talking.

Please allow all advisory group members the opportunity to speak up! Limit comments to about 1 minute.

# Working Collaboratively

- Be solution-focused and provide supportive and constructive feedback. Let's keep focused on the end goal of updating the support levels/rate tiers
- Respect and listen, don't blame
- Assume good intentions
- When sharing verbally, try to keep response brief and wait, so that others have time to speak. If you want to share more, you can always type in the chat, add comments to the form, e-mail, or request a separate meeting to discuss
- This is an interactive meeting! We encourage you to participate!



# Agenda



**Updates**



**Record Review**



**Preliminary Rate Tiers**



**Next Steps**

# In the Advisory Group:

- You will hear about our upcoming plans for this project
- You will have opportunities to provide ideas and feedback about this project and what we recommend
- You can ask questions
- You will review our analysis and recommendations
- You can help us make sure that our plans work for people receiving services, their families, advocates, support coordinators, and providers

We will meet monthly from September 2023 through April 2024 for 90 minutes to 2 hours per meeting





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Department of Medical Assistance Services

Board

Board of Medical Assistance Services

Meeting: SIS-A® 2nd Edition Advisory Group Meeting 4 Electronic Access

Meeting Details

Date / Time	12/19/2023 12:00 pm	
Type	Electronic Only	
Electronic Access	Meeting time: 12:00-2:00 Electronic Access: <a href="https://us06web.zoom.us/j/81441194053">https://us06web.zoom.us/j/81441194053</a>	
Board Website	<a href="http://www.dmas.virginia.gov">http://www.dmas.virginia.gov</a>	
Agenda document	 <a href="#">Meeting Agenda 12/13/2023</a> (1034k)	
Minutes document	 <a href="#">Meeting minutes 1/9/2024</a> (458k) FINAL	
Disability Friendly? Yes	Deaf interpreter available upon request? Yes	

**Purpose of the meeting**  
Since 2015, DBHDS has used the Supports Intensity Scale® (SIS)® assessment to determine rates for specific services. The SIS assessment is changing and DBHDS has a project to update this model. DBHDS wants to hear from people receiving services and other interested people. DBHDS is working with an advisory group to support this project. The public is welcome to listen in on this advisory group meeting.

**Meeting Scope**

Public hearing to receive comment on a proposed stage

General business of the board







# Updates

# Project Activities

1

## Consult people

- Advisory group
- Key informant interviews
- Engagement sessions

2

## Analyze changes to support levels/rate tiers

- Review supplemental questions and verification process
- Analyze the new SIS scoring and the advanced questions
- Analyze the rate tiers
- Test out the proposed changes with a record review

3

## Recommend changes to support levels/rate tiers

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

# Informational Meetings

## **Service Recipients & Families**

Held Wednesday April 10<sup>th</sup> 6:00-8:00pm EST

## **Support Coordinators**

Held Thursday April 4<sup>th</sup> from 3:00-5:00pm EST

Over 100 people joined!

## **Providers**

Held Tuesday April 9<sup>th</sup> from 1:00-3:00pm EST

Over 100 people joined!

# Updates to the Timeline

- We are extending the project slightly from ending in April to ending in June
- We have rescheduled one advisory group meeting (from March to May)
- We will be adding another informational session in May to share the final proposal
- Implementation of the SIS-A<sup>®</sup> 2nd Edition is tentatively scheduled to begin October 1, 2024. After the SIS-A<sup>®</sup> 2nd Edition is implemented, it will take about four years for everyone to get assessed and receive a new support level and/or rate tier, as applicable. Until October 1, 2024, people will continue to participate in the SIS as scheduled and will not be reassessed until their next assessment is due or they qualify for a reassessment

# 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

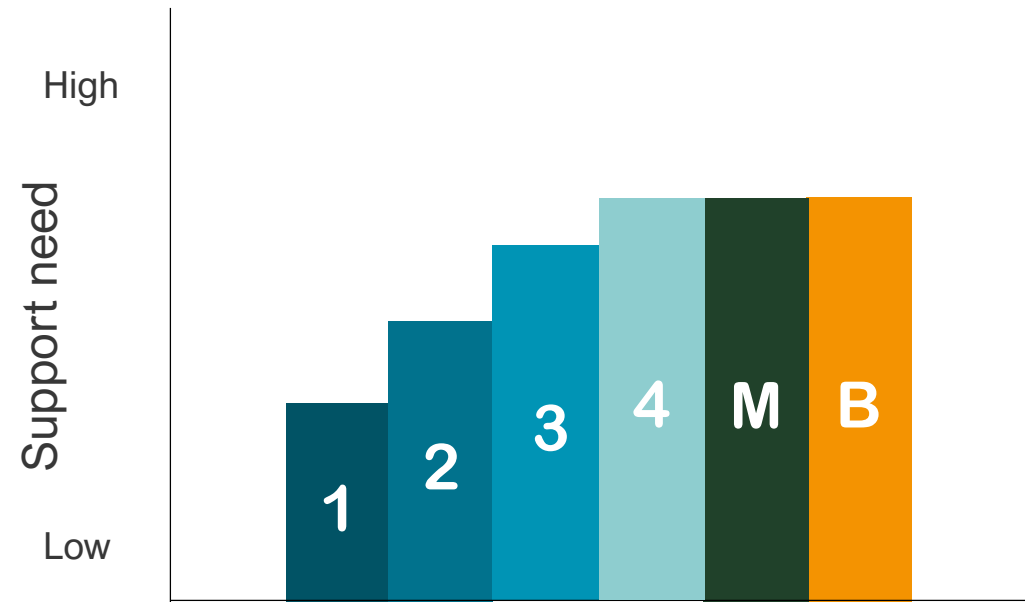
## Jan.-June 2024

- Continue Advisory Group meetings
- 2<sup>nd</sup> & 3<sup>rd</sup> Engagement Sessions
- Test proposed changes
- Recommend final changes
- Complete implementation & communication plan



# Record Review

# Preliminary Support Levels



- 1** Low general support need, no extraordinary medical or behavioral needs
- 2** Moderate general support need, no extraordinary medical or behavioral needs
- 3** High general support need, no extraordinary medical or behavioral needs
- 4** Very high general support need, no extraordinary medical or behavioral needs
- M** Extraordinary medical support need
- B** Extraordinary behavioral support need

# Record Review Asks

The goal of record review is to make sure that the proposed support levels will accurately describe most people's needs when implemented.

## Support Levels

- Do general support needs increase from low to high?
- Do people assigned to medical and behavioral levels have extraordinary needs?
- Do people in the same support level have similar support needs?

## Support Level Descriptions

- Do descriptions accurately reflect support needs?
- How can descriptions be improved?



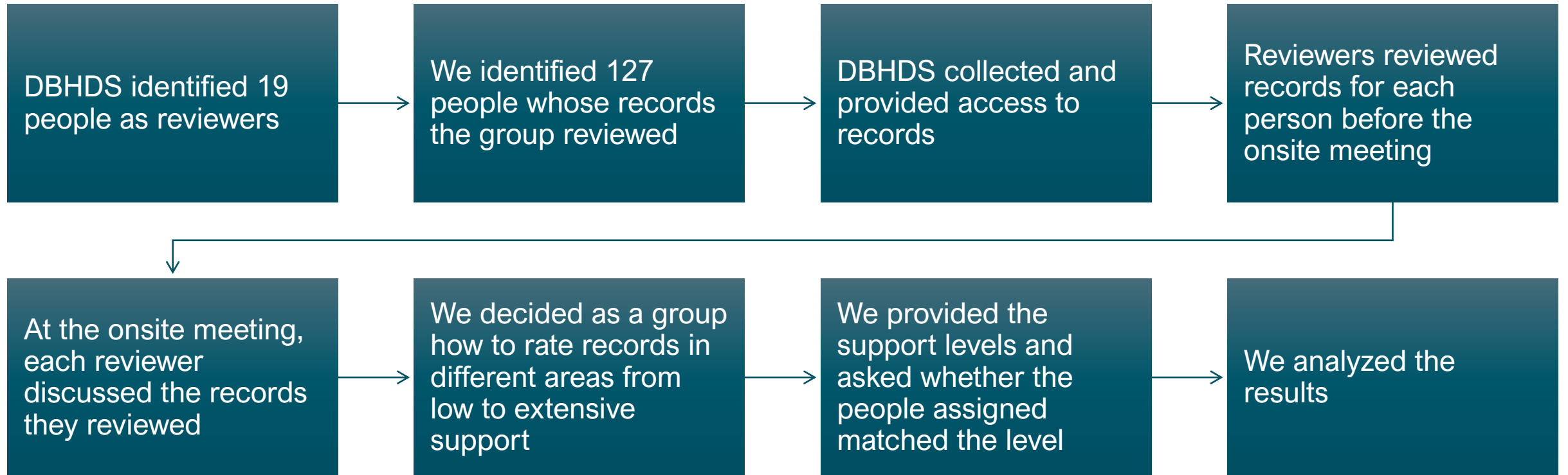
# Record Review Approach

Select a sample of people's records to review for deeper exploration

Review in-depth, detailed information about each person to understand their needs

Classify needs independently of the support level and analyze

# Record Review Steps



# Whose Records were Reviewed?

We reviewed records for people across all proposed support levels and living settings, who used a range of services with tiered rates

Support Level	Number of People
1	20
2	24
3	20
4	19
M	22
B	22
<b>Total</b>	<b>127</b>

# We Reviewed Support Needs for:

- **General Support Needs**

- Home living activities
- Community living activities
- Health and safety activities
- Lifelong learning activities
- Work activities
- Social activities
- Advocacy activities

- **Exceptional Medical Support Needs**

- **Exceptional Behavioral Support Needs**

# How did We Review Support Needs?

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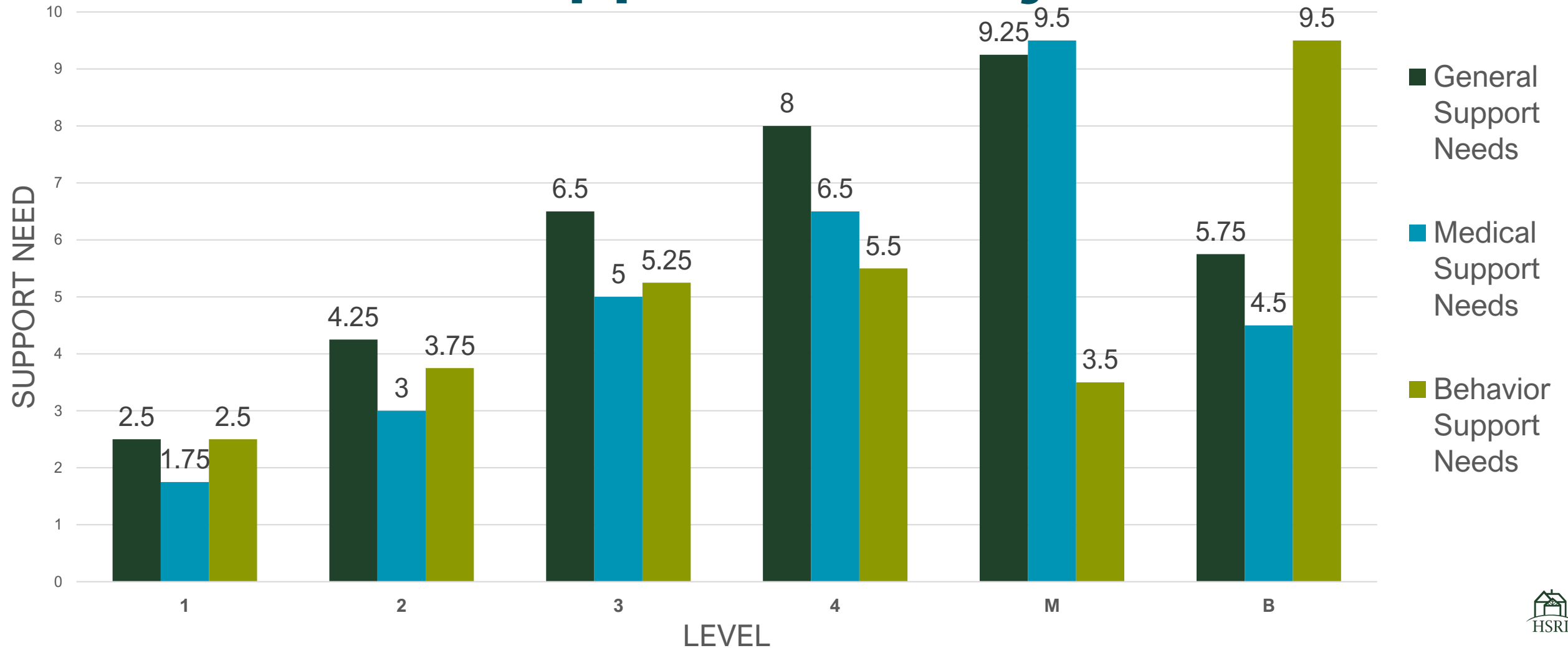
<b>None</b>	The adult does not require any support in this area.
<b>Low</b>	The adult requires no support, monitoring, or verbal/gestural prompting for this support area. They may have a few intensive needs, but their support most often looks like prompting or supervision.
<b>Moderate</b>	The adult requires verbal/gestural prompting or partial physical assistance for this support area. They may require more or less assistance for some aspects of the support area. However, considered across all supports in this area the needs are more than prompting but not substantial. The majority of participants have moderate needs in most areas.
<b>High</b>	The adult mostly requires partial physical assistance or full physical assistance for this support area. This support may be a combination of prompting, supervision, and physical assistance but full physical assistance must be needed for at least some portion of the activities within this support area. At least some support is needed at all times the adult is engaging in the activities in this support area.
<b>Extensive</b>	The adult requires complete or almost complete physical support for most, if not all, aspects of this support area. Focused and dedicated support is needed at all times the adult is engaging in the activities in this support area.

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# What We Learned

- Overall general support needs increase in support levels 1-4 and the medical level
- The medical level was rated the highest for medical support needs
- The behavioral level was rated the highest for behavioral support needs
- No strong indicator for adjusting any further based on record review results

# Ratings of General, Medical, and Behavioral Support Need by Level












# Preliminary Rate Tiers

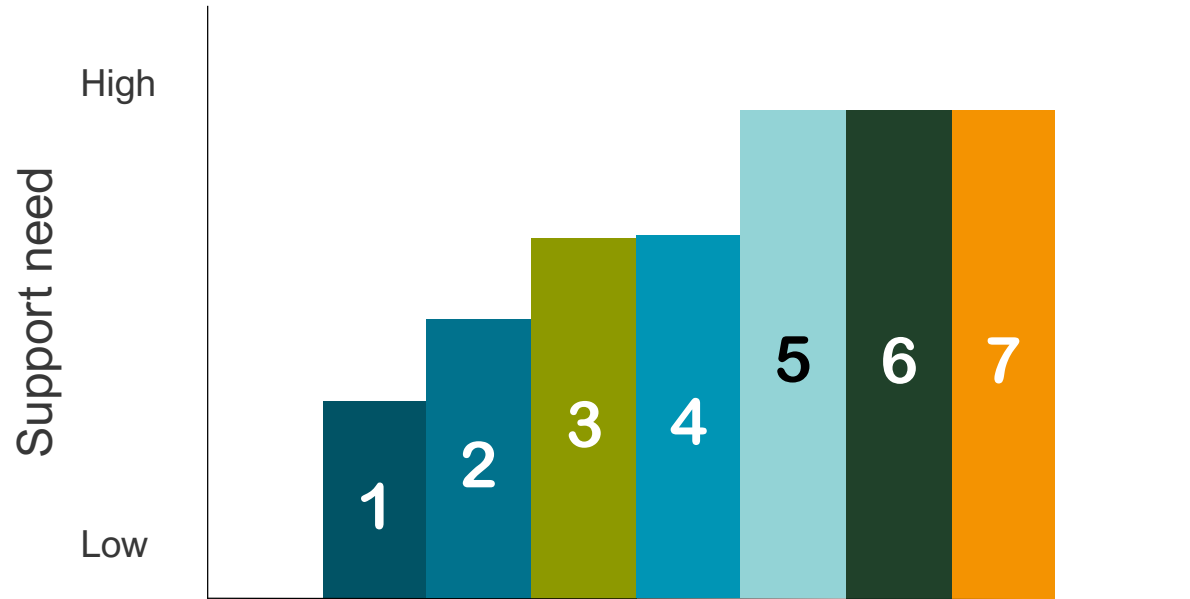


# Getting a Rate Tier

- For services with tiered rates, the person's tier is based on their assigned support level
- The following services have tiered rates:
  - Community engagement
  - Group day support
  - Group home
  - Independent living
  - Sponsored residential support
  - Supported living residential
- We did not engage in a rate study as part of this project

# Current Rate Tiers

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.



# Data Analysis

- We had demographic data from 17,459 people receiving services from 7/1/21 to 6/30/23
- We had claims data from 17,459 people receiving services from 7/1/21 to 6/30/23 including:
  - Amounts paid for all tiered rate services
  - Current tier assignments
  - Current rates
- We assigned tiers by matching preliminary levels to preliminary tiers in the same way that they are matched today
- We reviewed the overall composition of people within each tier to assess whether staffing ratios may be adjusted
- We analyzed the fiscal impact of preliminary changes

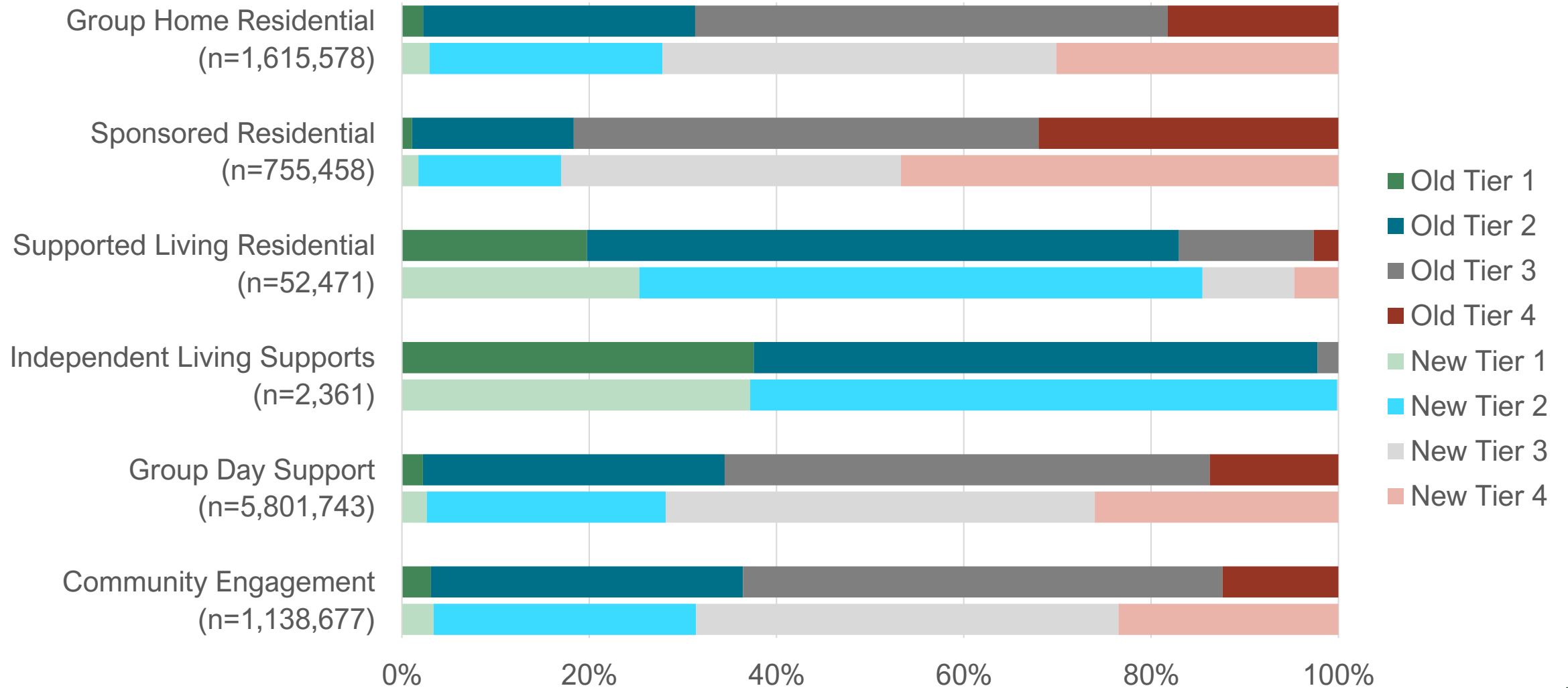
# Preliminary Rate Tiers

Tier	Support Level	Support Level Descriptions
1	1	Low general support need, no extraordinary medical or behavioral needs
2	2	Moderate general support need, no extraordinary medical or behavioral needs
3	3	High general support need, no extraordinary medical or behavioral needs
4	4	Very high general support need, no extraordinary medical or behavioral needs
4	M	Extraordinary medical support need
4	B	Extraordinary behavioral support need

# Distribution of Paid Units by Tier

	Total Units	Distribution by Proposed Tier				Comparison to Current Tier		
		Tier 1	Tier 2	Tier 3	Tier 4	% Same	% Inc.	% Dec.
Community Engagement	1,138,677	3.4%	28.0%	45.1%	23.5%	75.5%	20.2%	4.3%
Group Day Support	5,801,743	2.7%	25.5%	45.8%	26.0%	73.0%	22.6%	4.4%
Group Home Residential	1,615,578	2.9%	24.9%	42.0%	30.1%	74.3%	20.3%	5.4%
Sponsored Residential	755,458	1.8%	15.2%	36.3%	46.7%	76.8%	19.3%	3.9%
Supported Living Residential	52,471	25.3%	60.1%	9.8%	4.7%	71.3%	11.4%	17.4%
Independent Living Supports	2,361	37.2%	62.7%	0.1%	0.0%	93.2%	2.8%	4.0%

# Distribution of Paid Units by Tier



# Our Analysis Supports



Assigning support levels to rate tiers in the same way that they are matched today (e.g., support level 1 to tier 1)



Maintaining current rates, and rate components, since most people remain in the same rate tier



Increased costs to implement these changes

# Key Takeaways from this Proposal

- Support levels will be matched to the same tier as today
- After completing the SIS-A 2nd Edition most people will remain in the same tier as today
- Most providers delivering tiered services will experience an increase in total payments, but the impact varies by provider due to how tiers will change for the people that they serve
- Once everyone has transitioned to the SIS-A<sup>®</sup> 2nd Edition, total annual spending on tiered services will increase



# Reflections



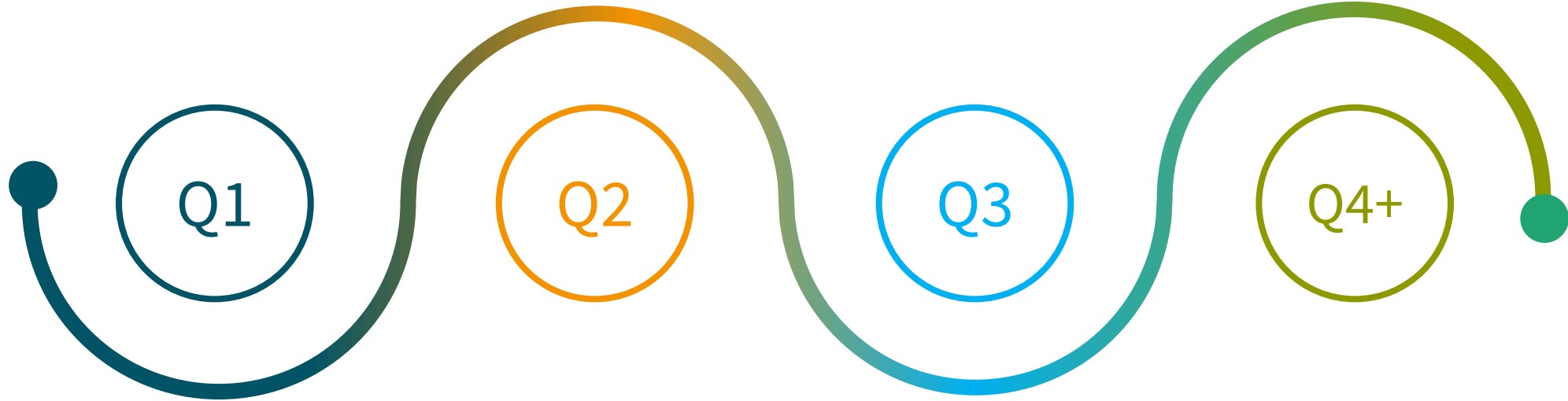


# Next Steps

# Next Steps

- We will be preparing our final recommendations
- We will be developing a transition plan
- We will be developing a communication plan
- We'll meet with you all one more time

# Timeline



## April-June 2023

- Begin Contract Work
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# What's Next?



- If you're listening in and have used your e-mail for this meeting, we'll add your e-mail to the next meeting invite (optional, of course)
- If you want to ask a question or share feedback, please use this link:  
[https://docs.google.com/forms/d/e/1FAIpQLSc21y4XpMleJZ9AGWtPuiR8c1PeZr5-luU8raVtq3JYmwsug/viewform?usp=sf\\_link](https://docs.google.com/forms/d/e/1FAIpQLSc21y4XpMleJZ9AGWtPuiR8c1PeZr5-luU8raVtq3JYmwsug/viewform?usp=sf_link) or scan for the form.



**Questions/Comments**



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# 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)

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