

## **Formal Agenda**

### **DBHDS SIS-A 4th Edition Advisory Group**

11:00AM-12:30PM – Thursday February 22, 2024

Online Zoom Meeting (see link below)

#### **AGENDA**

11:00 Welcome and Housekeeping

11:05 Questions and Answers

11:15 Reminders

11:20 Preliminary General Support Need Levels

11:30 Discussion

11:45 Preliminary Medical/Behavioral Levels

12:15 Discussion

12:40 Next steps, Question/Feedback Form, and Survey

12:45 Adjournment

#### **Zoom Meeting Information**

Please click the link below to join the webinar:

<https://us06web.zoom.us/j/84006146212>

Or One tap mobile :

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Human Services  
Research Institute

# Virginia SIS-A 2nd Edition Advisory Group

February 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).

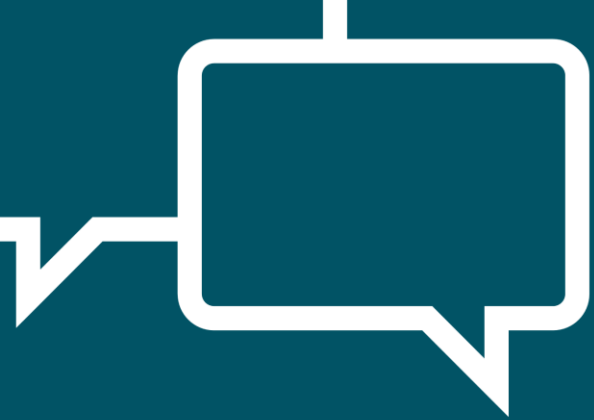
This meeting is being recorded, as a tool for advisory group members to watch later if they had to miss today.

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



**Reminders**



**Preliminary General Support Need Levels**



**Preliminary Medical/Behavioral  
Support Need levels**



**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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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: <https://us06web.zoom.us/j/81441194053>

Board Website <http://www.dmas.virginia.gov>

Agenda document  [Meeting Agenda 12/13/2023](#) (1034k)

Minutes document  [Meeting minutes 1/9/2024](#) (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







# Reminders

# Reminders

- People are assigned to a support level based on Supports Intensity Scale<sup>®</sup> (SIS-A<sup>®</sup>) scores, along with the supplemental questions, and document review verification for some people. These support levels are matched to rate tiers for shared services.
- The SIS is changing. It has been re-normed, along with other changes. These changes are called the SIS-A 2nd Edition. These changes require us to reconsider the current support level/rate tier model.
- DBHDS is using advance questions before transitioning to the SIS-A 2nd Edition so that we can analyze these changes.
- We are planning to recommend changes to support levels/rate tiers.

# Project Activities

1

## Consult people

- Advisory group
- Key informant interviews
- Engagement sessions

2

## Analyze changes to support levels/rate tiers

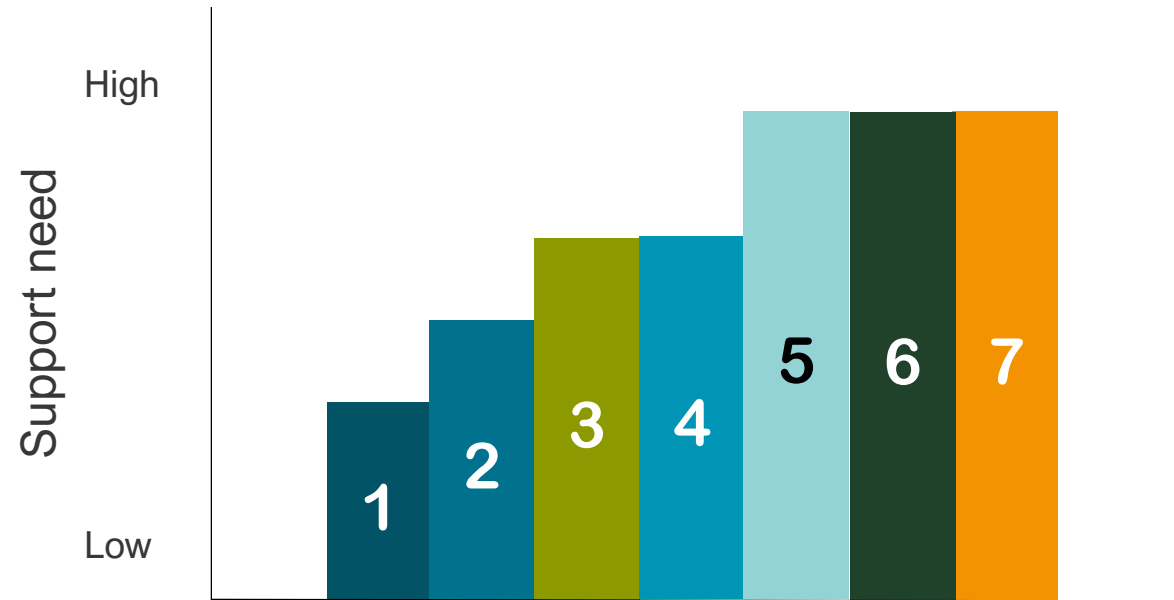
- Review supplemental questions and verification process
- Analyze the new SIS scoring and the advanced questions
- Analyze the rate tiers
- Test out the proposed changes with a record review

3








## Recommend changes to support levels/rate tiers

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

# Current Support Levels



# Current Rate Tiers

Reimbursement Tier 1		<p><b>Mild Support Needs</b></p> <p>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.</p>
Reimbursement Tier 2		<p><b>Moderate Support Needs</b></p> <p>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.</p>
Reimbursement Tier 3		<p><b>Mild/Moderate Support Needs with Some Behavioral Support Needs</b></p> <p>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.</p>
		<p><b>Moderate to High Support Needs</b></p> <p>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.</p>
Reimbursement Tier 4		<p><b>Maximum Support Needs</b></p> <p>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.</p>
		<p><b>Intensive Medical Support Needs</b></p> <p>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.</p>
		<p><b>Intensive Behavioral Support Needs</b></p> <p>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.</p>



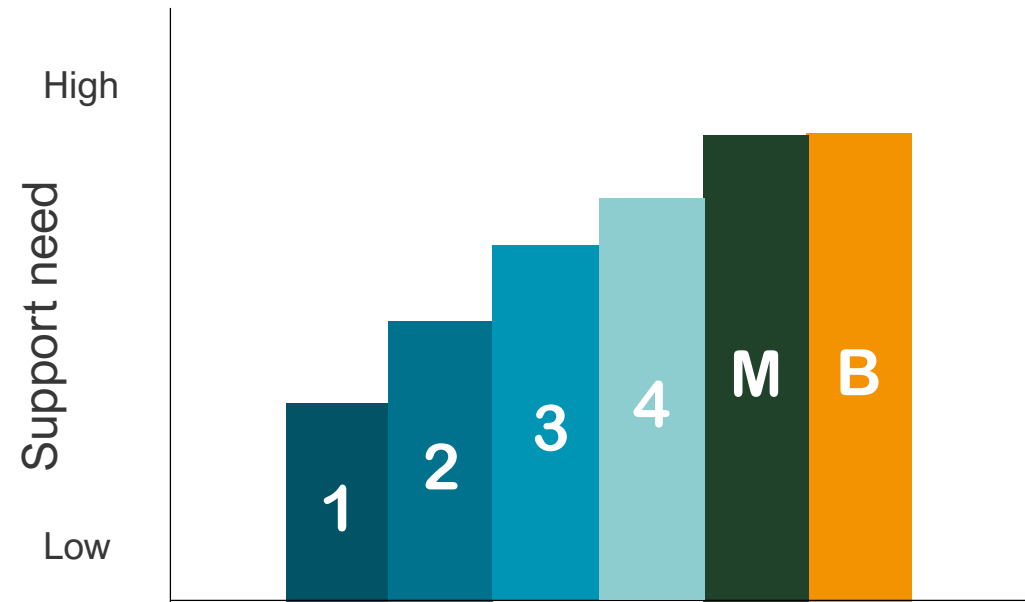


# Preliminary General Support Need Levels

# Data Used in this Analysis

- Demographic data from 17,459 people receiving services from 7/1/21 to 6/30/23
- 17,178 SIS-A assessments conducted between 1/1/18 and 12/15/23
- To prepare data for analysis we:
  - Rescored assessments by applying SIS-A 2 Edition norming to subscale scores
  - Initially applied current medical and behavioral criteria

# Proposed 6-Level Framework



- 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



# Preliminary General Support Need Levels

Our analysis supports



Using 4 general support needs levels, as in the current model



Using all subsections of Section 2 (Supports Needs Index) of the SIS



Developing Medical and Behavior Support Levels separately

# Key Takeaways from this Proposal

- Our proposal for general support need levels includes all Section 2 (Support Needs Index) of the SIS-A 2nd Edition
- Most people will remain in the same, or a comparable, support level
- The impact of proposed changes so far impact people similarly (across waiver type, disability type, and age)

# Reflections





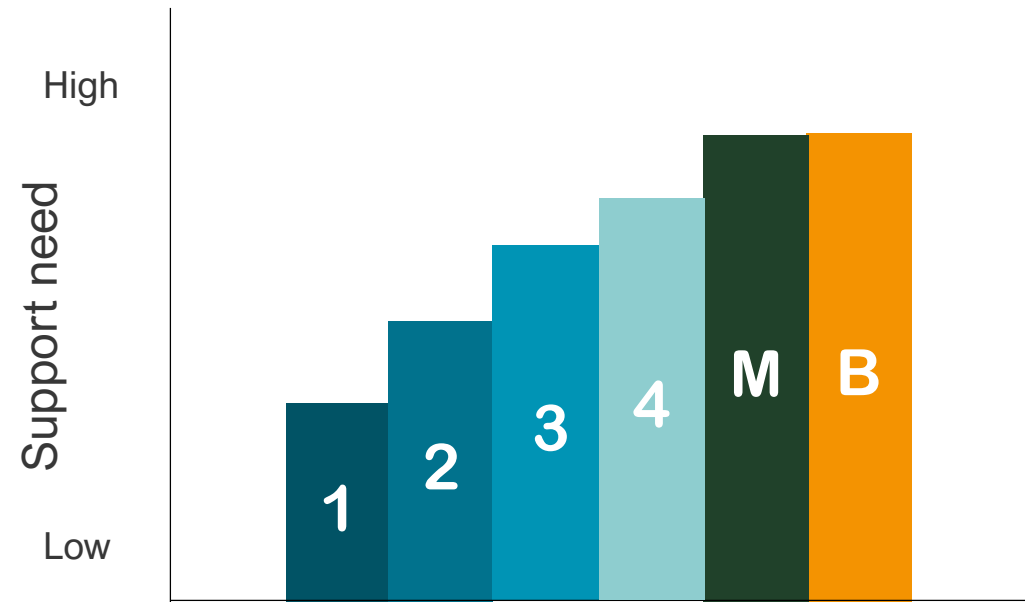
# Preliminary Medical/Behavioral Levels



# Current Medical & Behavioral Levels

- Medical and behavioral levels are reserved for people with the highest medical and behavioral support needs
- People can be assigned to medical and behavioral levels in two different ways.
- People can be assigned to medical and behavioral levels either by
  - Having high scores in section 1A or 1B (for most, but not all items)
  - Certain responses to supplemental questions confirmed by the document verification committee

# Proposed 6-Level Framework



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# Medical Advance Questions

- Advance questions are used to collect data on the new medical SIS-A 2nd Edition questions
- 2,151 people had responses to advance questions
- 854 people reported having at least some supports needs related to one or more of the new medical questions
- We have completed analysis on these advance questions

# Behavioral Advance Questions

- Advance questions are being used to collect data on the new behavioral SIS question
- 2,155 people had responses to the behavioral advance question
- 399 people reported having at least some supports needs related to the new behavioral question
- We have completed analysis on this advance question



# Data Used in this Analysis

- Demographic data from 17,459 people receiving services from 7/1/21 to 6/30/23
- 17,178 SIS-A assessments conducted between 1/1/18 and 12/15/23
- Data analysis preparation
  - Used advance questions to calculate SIS-A 2nd Edition medical and behavioral score totals

# Considerations

- These frameworks are preliminary– more analysis as well as record review may lead to adjustments. We plan to test some of the changes as part of the record review process.
- Analysis for tiers has not been conducted yet and may result in changes in how support levels are matched to rate tiers

# Proposed Behavioral Criteria

- 399 people of 2,155 people had a “1” or “2,” indicating need in newly identified areas
- Our proposal is to keep the behavioral criteria the same, this will allow people more opportunity to score into the behavioral support level

# Proposed Medical Criteria

- 854 people of 2,151 who had response to the advance questions had a “1” or “2,” indicating need in newly identified areas
- Our proposal is to adjust the medical criteria score higher, but also allow for calculating the score by using all of the items in the SIS Section 1A Medical
- With this proposal, people will have 9 more questions that will be used to calculate their medical level score than are used today, increasing opportunity to be assigned to the medical level
- Of the 183 people with advance questions in current level 6, 83% (n = 151) will be in proposed medical level

# Verification into Medical Level

- We checked on who will flag for verification of people who responded to the advance questions
- These results are comparable to the percent of people whose records are verified today
- Note that this criteria may be adjusted

	Total population	Advance questions sample
Flagged for verification	2,602 (15%)	371 (17%)
Not flagged	14,576 (85%)	1,785 (83%)
Total	17,178 (100%)	2,156 (100%)

# Proposed 6-Level Framework

- If this framework was implemented:
  - 74% of the people who responded to the advance questions would stay in the same, or a comparable support level
  - 8% of the people who responded to the advance questions will decrease in support level
  - 18% of the people who responded to the advance questions will increase in support level

# Support Level Distributions Comparing Current/Proposed Model - Advance Questions

## Current Support Levels



## Proposed 6-Level Framework



These numbers reflect

# Reflections





# Next Steps

- We will be able to propose new support levels and new criteria for the support levels
- We will review reimbursement rates for potential changes
- We will have another round of informational meetings coming soon
- We will test our proposal with a record review and may make adjustments
- We will finalize this model after the record review



# Next Steps

# 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

# 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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