



Human Services
Research Institute

Virginia Support Levels/Tiers Informational Meetings

May 2024

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

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 and keep comments brief

Please keep all comments respectful and solution-focused

We will be answering questions as we are able through the Q&A feature. If you need more information, please see the FAQ attached to the meeting packet



Agenda

5 minutes Welcome and introductions to project team

15 minutes Overview of project

20 minutes Preliminary support levels

20 minutes Preliminary rate tiers

20 minutes Recommendations

20 minutes Q&A

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 – Buns & Associates



Stephen Pawlowski
Managing Director

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BURNS & ASSOCIATES

A DIVISION OF HEALTH MANAGEMENT ASSOCIATES

Since 2006, the health policy consulting firm Burns & Associates has been working with states on policy analysis, financial modeling, rate setting, program design, implementation, and evaluation.





A life of possibilities for all Virginians

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



Purpose of Today's Meeting

- DBHDS wants to collaborate with people who are interested in this project!
- Today we will discuss the preliminary support level/tier model for specific DBHDS services and provide updates on our project. We also hope to answer questions and get feedback
- The Human Services Research Institute (HSRI) and our partner, HMA–Burns, are supporting DBHDS in this project



Overview of Project

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 the Building Independence, Community Living, and Family and Individual Support Waivers
- We developed a support level model that relies on results from the Supports Intensity Scale[®] (SIS[®]), supplemental questions, and a document review verification process (for some people) to assign each person to a support level
- There are tiered rates for some services, primarily shared supports, that pay providers higher amounts when they serve people with higher needs to account for the costs of more intensive staffing. Support levels determine the rate tier

What You Need to Know Now

- DBHDS is going to continue using the SIS assessment for rate tiers
- The SIS is changing. It has been re-normed, along with other changes, including additional questions asked in the medical and behavioral sections of the assessment. These changes are called the SIS-A[®] 2nd Edition. These changes require us to update the current support level/rate tier model
- DBHDS is using advance questions (the new medical and behavioral questions) before transitioning to the SIS-A[®] 2nd Edition
- We are recommending changes to the support levels as part of this project

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 advance 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

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
- 1st Engagement Sessions
- Complete data analysis

Jan - June 2023

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

Implementation

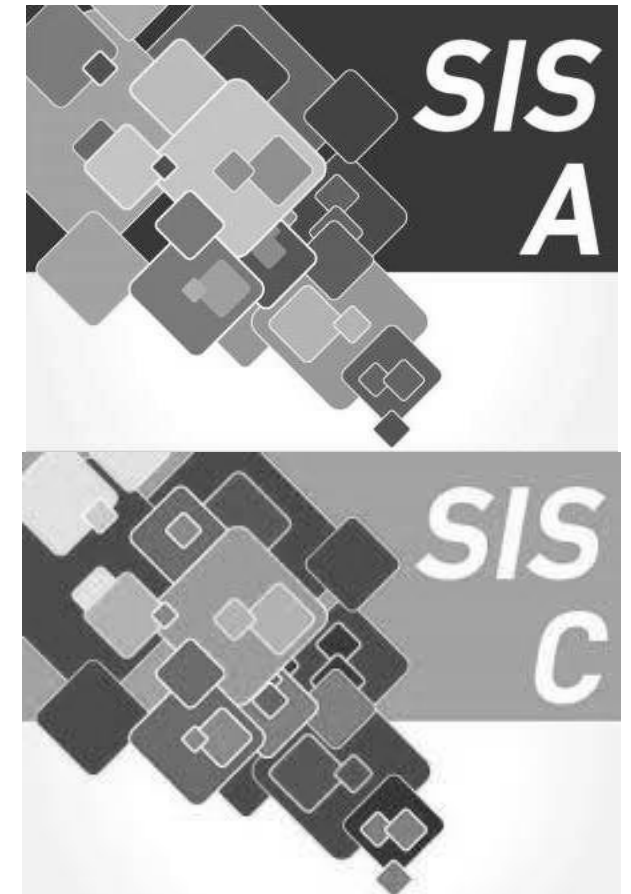
- Use of the SIS-A[®] 2nd Edition is tentatively scheduled to begin October 1, 2024
- After the SIS-A[®] 2nd Edition is implemented, it will take about four years for everyone to get assessed
- Consistent with current practices, people will retain their current level assignment until their next assessment



Preliminary Support Levels

Getting a Support Level

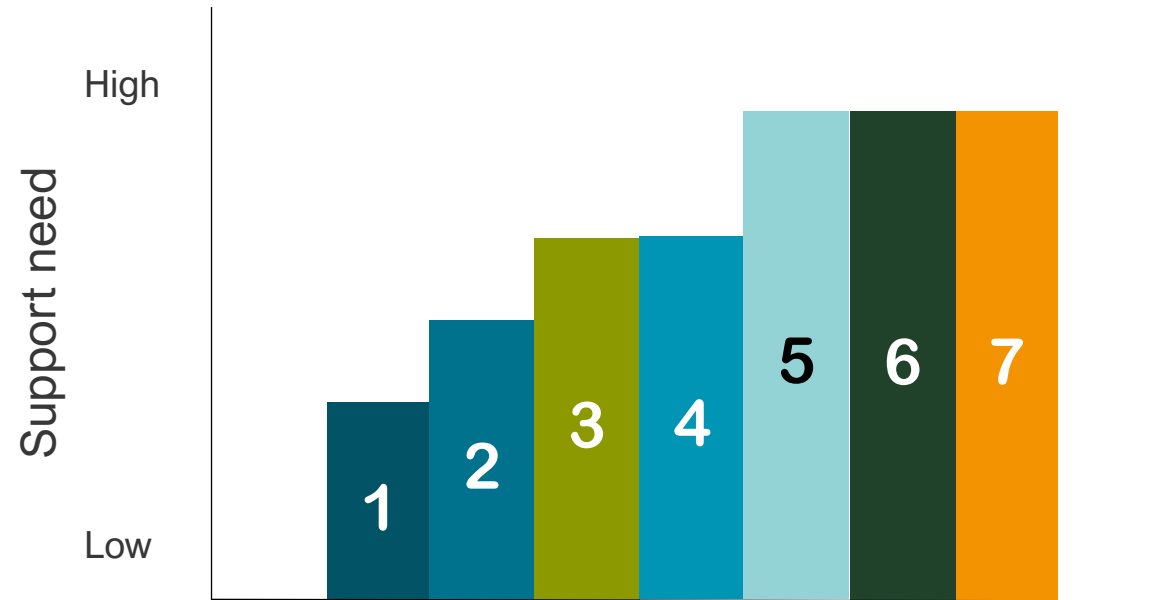
- Supports Intensity Scale® (SIS) Adult (SIS-A) or Child (SIS-C)
- Each person over 16 takes a SIS-A® assessment, and some children under 16 take a SIS-C® assessment
- SIS-A measures support needed for home living, community living, lifelong learning, work, health and safety, social activities, and advocacy
- 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
 - SQs indicate whether someone requires document review verification
- 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

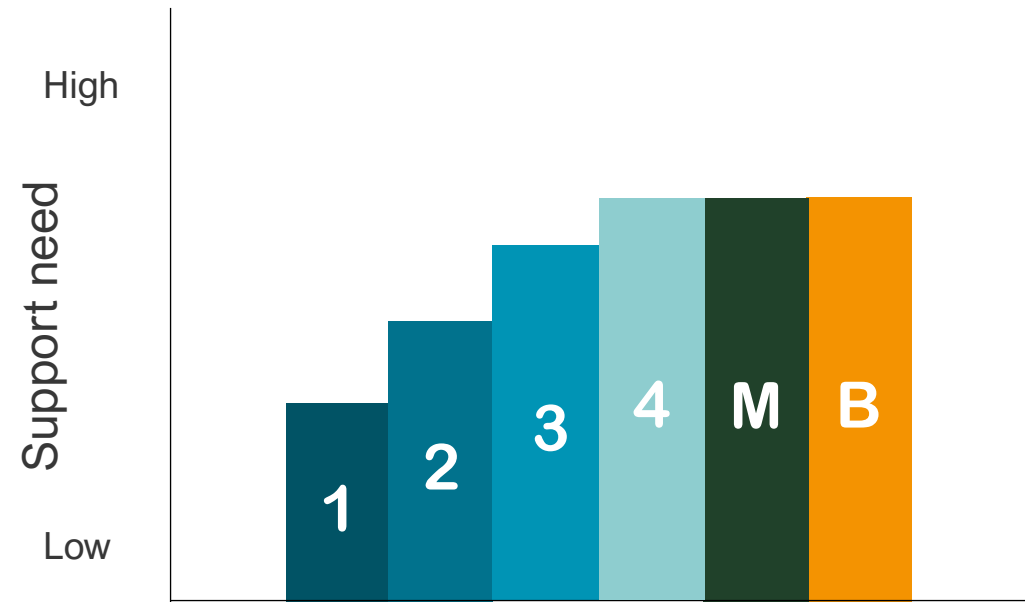
Current Support Levels



Data Analysis

- We had demographic data from 17,459 people receiving services from 7/1/21 to 6/30/23
- We had 17,178 SIS-A[®] assessments conducted between 1/1/18 and 12/15/23
- We rescored assessments by applying SIS-A[®] 2 Edition norming to subscale scores
- Medical and Behavioral levels were developed separately using data on advance 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
 - 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

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, no extraordinary behavioral needs
- B** Extraordinary behavioral support need

Support Level Distributions

Current Support Levels



Preliminary 6 Support Levels



This includes only people who responded to the advance questions – 2,155 people

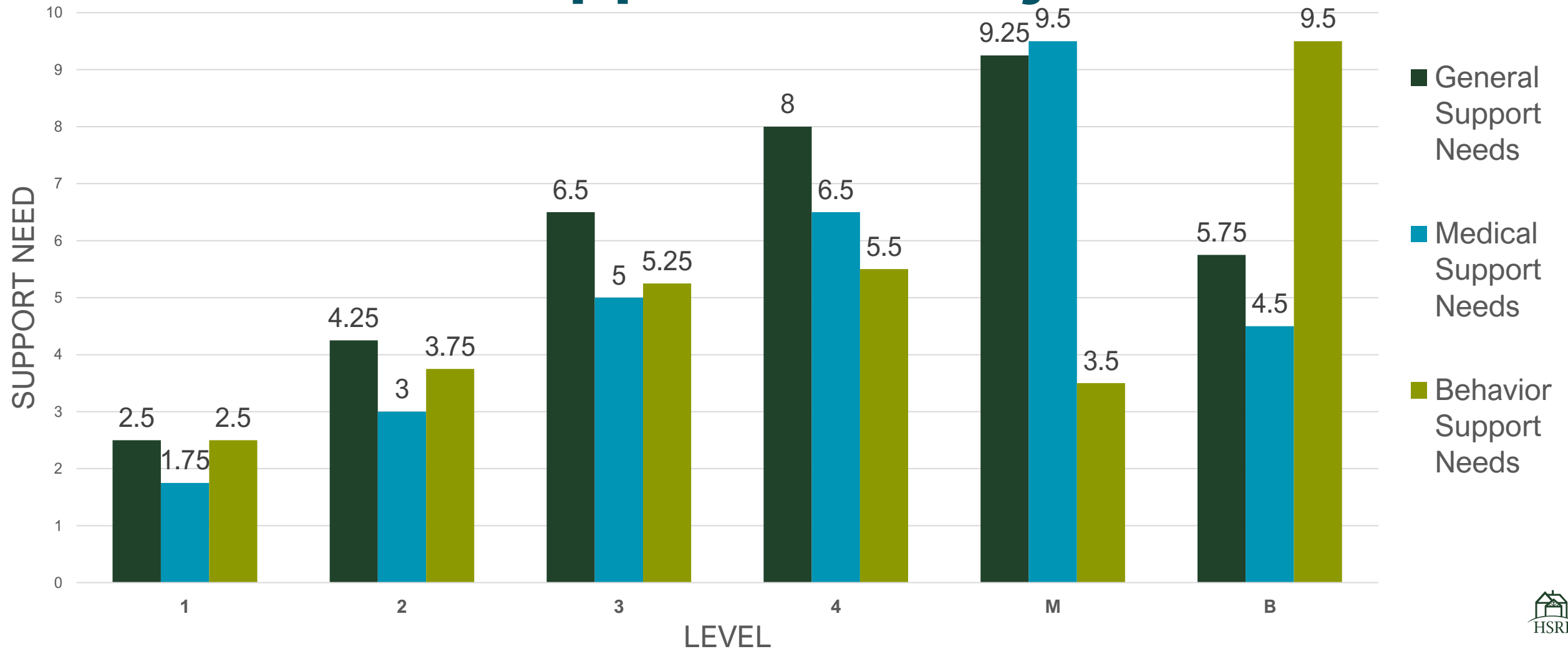
How We Tested Support Levels

- We conducted a record review to confirm whether the preliminary model fits the needs of people receiving services
- Following our analysis of thousands of assessments, we reviewed records for 127 people who receive services
- The people whose records were reviewed included people across living settings and who receive services with tiered rates
- We answered questions about the persons support needs to determine whether:
 - People were assigned to the correct support level
 - Support levels included people with similar needs

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 to adjust preliminary support level criteria based on record review results

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



Our Analysis Supports



Using all sections and subsections of the SIS, including the Support Needs Index



Using 4 general support needs levels, with separate medical and behavioral levels, as in the current model



Keeping the behavioral criteria the same, even though one additional question will be included in the score



Adjusting the medical criteria higher and including all items in SIS Section 1A, which means 9 additional questions are included in the score

Key Takeaways from this Proposal

- Our proposal for general support need levels includes all sections and subsections of the SIS-A[®] 2nd Edition
- Most people will remain in the comparable support level. If this framework was implemented:
 - About 74% of people would stay in the comparable support level
 - 8% of people will decrease in support level
 - 18% of people will increase in support level
- The proposed changes impact people similarly across waivers, disability, and age



Preliminary Rate Tiers

Getting a Rate Tier

- For services with tiered rates, the person's tier is based on their assigned support level
- Services with tiered rates:
 - Community engagement
 - Group day support
 - Group home
 - Independent living
 - Sponsored residential support
 - Supported living residential

Current Rate Tiers

Tier	Level	Description
1	1	Mild Support Needs 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.
2	2	Moderate Support Needs 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.
3	3	Mild/Moderate Support Needs with Some Behavioral Support Needs 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.
3	4	Moderate to High Support Needs 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.
4	5	Maximum Support Needs 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.
4	6	Intensive Medical Support Needs 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.
4	7	Intensive Behavioral Support Needs 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 and 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 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, no extraordinary behavioral needs
4	B	Extraordinary behavioral support need

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 assumptions, since most people remain in the same rate tier

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 based on how tiers will change for the people that they serve
- Total annual spending on tiered services will increase



Recommendations

How we Formed Recommendations

Data analysis

Key informant
interviews

Review of
policy/documents

Lessons learned
from other
jurisdictions

Feedback from
the Advisory
Group

Feedback from
informational
meetings

Considerations

- We haven't finalized our recommendations, transition plan, or communications plan
- As we finalize these we may add to or alter what we share today

Recommendations



Recommendations

- Scheduling Assessments
- Assessment Process
- Supplemental Questions
- Using the SIS
- System Analysis
- Evaluation



Transition

- Adjust Policy
- Implement Support Levels
- Test Support Levels
- Secure Funding



Communication

- Communicating Changes
- Education

Not Recommending Changes To:

- Current children's support levels
- Standard Operating Procedures (SOP) for the SIS
- SIS reassessment request process (except to ensure that reassessments are sought when there are changes noted in the RAT)
- Customized rate process



Q&A





Next Steps

What's Next?

- Finalizing Recommendations, Transition Plan, and Communications Plan

Got More to Share?



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 or scan the QR code for the form.



Questions/Comments



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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

If you need help from DBHDS, please e-mail SIS@dbhds.virginia.gov




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