



COMMONWEALTH of VIRGINIA
Department of Medical Assistance Services

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MEMORANDUM

TO: The Honorable Janet D. Howell
Co-Chairman, Senate Finance Committee

The Honorable Luke Torian
Chairman, House Appropriations Committee

Daniel Timberlake
Director, Department of Planning and Budget

FROM: Karen Kimsey
Director, Virginia Department of Medical Assistance Services

SUBJECT: Item 317 I of the 2020 Appropriation Act

This report is submitted in compliance with the Virginia Acts of the Assembly – Chapter 1289, Item 317 I of the 2020 Appropriation Act, which states:

Pursuant to Item 317(I) of the 2020 Appropriation Act, the Department of Medical Assistance Services, in collaboration with the Department of Behavioral Health and Developmental Services, shall convene a stakeholder workgroup, to meet at least once annually, with representatives of the Virginia Association of Community Services Boards, the Virginia Network of Private Providers, the Virginia Association of Centers for Independent Living, Virginia Association of Community Rehabilitation Programs (VaACCSES), the disAbility Law Center of Virginia, the ARC of Virginia, and other stakeholders including representative family members, as deemed appropriate by the Department of Medical Assistance Services. The workgroup shall: (i) review data from the previous year on the distribution of the SIS levels and tiers by region and by waiver; (ii) review the process, information considered, scoring, and calculations used to assign individuals to their levels and reimbursement tiers; (iii) review the communication which informs individuals, families, providers, case managers and other appropriate parties about the SIS tool, the administration, and the opportunities for review to ensure transparency; and (iv) review other information as deemed necessary by the workgroup. The department shall report on the results and recommendations of the workgroup to the General Assembly by October 1 of each year.

Should you have any questions or need additional information, please feel free to contact me at (804) 786-8099.

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Enclosure

Pc: The Honorable Daniel Carey, M.D., Secretary of Health and Human Resources

Annual: The Impact of Implementing the Supports Intensity Scale® to Determine Individuals' Supports Levels and Reimbursement Tiers in the DD Waivers – FY 2020

A Report to the Virginia General Assembly

October 1, 2020

Background

The Supports Intensity Scale® (SIS®) is a nationally-recognized assessment tool that measures the intensity of support required for a person with a developmental disability in their personal, work-related, and social activities. Based on the results of a SIS® assessment, individuals in the Commonwealth's Developmental Disabilities (DD) waivers are assigned to one of seven support levels, generally least to most support. The SIS® was tested and refined by the American Association on Intellectual and Developmental Disabilities (AAIDD) over a five year period from 1998 to 2003.

Report Mandate:

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In 2009, Virginia began using the SIS® in the person-centered planning process. Currently, the Department of Behavioral Health and Developmental Services (DBHDS) uses the SIS® to inform the person-centered plan for most individuals in the DD waivers, as well as to determine an individual's required level of support. Effective September 1, 2019 DBHDS contracted with two SIS® vendors, Ascend/Maximus and Telligen, to administer the SIS® by trained assessors. Both are nationally recognized for specializing in assessments for persons with physical disabilities and complex medical conditions, and persons

About DMAS and Medicaid

DMAS's mission is to improve the health and well-being of Virginians through access to high-quality health care coverage.

DMAS administers Virginia's Medicaid and CHIP programs for more than 1.5 million Virginians. Members have access to primary and specialty health services, inpatient care, behavioral health as well as addiction and recovery treatment services. In addition, Medicaid long-term services and supports enable thousands of Virginians to remain in their homes or to access residential and nursing home care.

Medicaid members historically have included children, pregnant women, parents and caretakers, older adults, and individuals with disabilities. In 2019, Virginia expanded the Medicaid eligibility rules to make health care coverage available to over 400,000 newly eligible, low-income adults.

Medicaid and CHIP (known in Virginia as Family Access to Medical Insurance Security, or FAMIS) are jointly funded by Virginia and the federal government under Title XIX and Title XXI of the Social Security Act. Virginia generally receives a dollar-for-dollar federal spending match in the Medicaid program. Medicaid expansion qualifies the Commonwealth for a federal funding match of no less than 90 percent for newly eligible adults, generating cost savings that benefit the overall state budget.

with behavioral health, intellectual, and developmental disabilities. Both have been designated as a Quality Improvement Organization-Like Entity (QIO-like Entity) by CMS since 2007 and 2014, respectively. For specific waiver services, there is a tiered provider reimbursement structure that aligns with an individual's support level (e.g., higher reimbursement for services provided to individuals in need of a greater level of support - the determination of support is called a "support level" and the determination of reimbursement is called a "tier").

On April 22, 2020, the Department of Medical Assistance Services (DMAS) and DBHDS held their fourth meeting with the stakeholder workgroup associated with this legislative directive. The group includes the DD Association representatives noted in the mandate, as well as the Virginia Board for People with Disabilities, the Virginia Sponsored Residential Services Provider Group, a training center family advocate, and families representing each reimbursement tier and region of the state. SIS® data, processes, and means of communication were reviewed in the meeting.

SIS® Level and Tier Data

During the workgroup meeting, distributions of SIS® support levels and tiers by waiver and DBHDS primary region, effective 4/14/2020, were presented. At the request of the workgroup, the distributions were further analyzed to reflect level/tier assignments by age and then forwarded to members.

Table 1: SIS® Levels and Tiers for the Community Living Waiver by Developmental Services Regions

Community Living Waiver

CL	Tier	1	2		3		4			Total	Percent
	Level	1	2	D2*	3	4	5	6	7		
DS Region	Central	127	846	49	109	1,041	86	182	176	2,616	22.9%
	Eastern	101	705	54	75	1,272	122	216	125	2,670	23.4%
	Northern	140	857	70	123	994	71	231	162	2,648	23.2%
	Southwestern	67	473	48	83	824	99	235	186	2,015	17.6%
	Western	80	419	52	54	538	39	194	99	1,475	12.9%
Total		515	3,300	273	444	4,669	417	1,058	748	11,424	100.0%
Percent		4.5%	28.9%	2.4%	3.9%	40.9%	3.7%	9.3%	6.5%	100.0%	

D2* ("Default 2"): Those individuals who are new to waiver and for whom a SIS® has not yet been completed

Table 2: SIS® Levels and Tiers for the Family and Individual Support Waiver by Developmental Services Regions

Family & Individual Supports Waiver

FIS	Tier	1	2		3		4			Total	Percent
	Level	1	2	D2*	3	4	5	6	7		
DS Region	Central	59	162	102	18	93	4	34	23	495	17.8%
	Eastern	46	176	101	23	184	12	38	13	593	21.4%
	Northern	92	246	252	41	202	17	88	57	995	35.8%
	Southwestern	26	91	79	21	79	7	36	15	354	12.7%
	Western	38	105	89	12	62	2	21	11	340	12.2%
Total		261	780	623	115	620	42	217	119	2,777	100.0%
Percent		9.4%	28.1%	22.4%	4.1%	22.3%	1.5%	7.8%	4.3%	100.0%	

D2* Those individuals who are new to waiver and for whom a SIS® has not yet been completed

Table 3: SIS® Levels and Tiers for the Building Independence Waiver by Developmental Services Regions

Building Independence Waiver

BI	Tier	1	2		3		4			Total	Percent
	Level	1	2	D2*	3	4	5	6	7		
DS Region	Central	20	49	6	1	5	-	-	-	81	24.5%
	Eastern	16	51	6	-	15	-	-	-	88	26.7%
	Northern	26	26	11	1	5	-	-	-	69	20.9%
	Southwestern	25	30	7	-	4	2	-	-	68	20.6%
	Western	9	6	8	-	-	1	-	-	24	7.3%
Total		96	162	38	2	29	3	-	-	330	100.0%
Percent		29.1%	49.1%	11.5%	0.6%	8.8%	0.9%	0.0%	0.0%	100.0%	

D2* Those individuals who are new to waiver and for whom a SIS® has not yet been completed

Comparing the 2019 data to the 2020 data, it was noted that the distributions were similar from year to year, leading to the conclusion that there is a high degree of consistency over time.

SIS® Processes

Changes in SIS® assessment practices necessitated by COVID-19 and approved by AAIDD were reviewed with the workgroup. These practices, which permit “virtual interviews” are delineated in a revised version of “SIS® Standard Operating Procedures and Review Process COVID-19 Version 03 30 20” and in “DBHDS SIS® Vendor Protocols COVID-19 03 27 20,” both of which are available on the DBHDS website.

Workgroup members received a DBHDS summary of the disposition of SIS® Standard Operating Procedure Review requests (requests in response to perceived violations in the SIS® Standard Operating Procedures and Review Process, from individuals or their caregivers). Between 5/1/2019 and 4/15/2020, 20 SIS® Review requests were received with 16 of these closed, four approved, and none awaiting disposition. An additional 14 were submitted erroneously, i.e., the submitter understood the form was required, thought it was a satisfaction survey, or the form was submitted by an ineligible party, and resulted in no action taken by DBHDS. For the same period, 27 SIS® Reassessment Requests (based on a significant and sustained change in the person’s support needs of at least six months) were submitted to DBHDS by support coordinators. Of these, nine reassessments were approved and eight were completed (one reassessment interview was not needed because the record was reviewed and approved for an increase in level and tier through a separate process, known as Verification Review). The level/tier changes that resulted from these reassessments were as follows: 75% of persons experienced an increase in level/tier, 25% experienced no change in level/tier, and 0% experienced a reduction in level/tier.

These findings suggest two things: first, a relatively low number of Standard Operating Procedures violations occur and when they do they are addressed promptly with a new SIS® assessment. Second, the SIS® Reassessment process is working as intended, i.e., where documentation showed an increase in needed supports, a majority of individuals were assessed to be in need of an increased reimbursement level/tier. During the same period, the DBHDS Regional Supports Unit, which supports the SIS® process in Virginia, received 22 other SIS® related inquiries, which were addressed via education and guidance.

The workgroup was apprised of changes in DBHDS contracts with SIS® vendors. Effective September 1, 2019, Virginia contracted with two SIS® vendors to complete SIS® assessments in their respective regions; Ascend/Maximus in DBHDS Regions 3 and 5, and Telligen in Regions 1, 2 and 4. Progress toward integration of Telligen was shared. Activity reports from both vendors, the “*Maximus Virginia SIS® Activity Report April 2019-March 2020*” and “*Telligen VA SIS® Program Report to SIS® Stakeholders Workgroup*,” with the results of Interviewer Reliability and Qualification Reviews and Satisfaction Survey results were provided.

DBHDS shared that, in the interest of increased transparency, the “*SIS® Index and Profile form*,” also referred to as the SIS® booklet, is now offered to respondents for use during the interview. In addition, DBHDS created a document with

SIS® section headings, as well as the number of items in each section, which may be used to track the progress of the interview by respondents.

Communications Regarding the SIS®

Standard communications to individuals and families regarding the SIS® include an introductory letter about the SIS®, its requirement for continued participation in the DD waiver, and educational materials. These are sent to “new to waiver” individuals and guardians. A similar letter is sent to those who have had a SIS® and are in need of another.

DBHDS reported that all efforts to host an interactive version of the “*SIS® Individual and Family Respondent Presentation*” have failed due to IT security concerns. Instead, the presentation is being reformatted to a static version so it can be posted on the DBHDS website. Support Coordinator SIS® Training was provided to 788 participants via 6 webinar sessions in December 2019 and January 2020. DBHDS reported that a similar training is being designed for providers.

In response to a request from last year’s meeting, DBHDS developed and shared a proposed document titled “*SIS® and the ISP Process*” that would be provided to individuals and family members before and after the SIS® explaining the role of the SIS® in the Individual Planning Process. In addition, DBHDS developed and shared an alternative process to the current SIS® Satisfaction Survey that is currently provided and collected by SIS® vendors. In the proposed method, the DBHDS SIS® Satisfaction Survey would be made available to respondents by SIS® vendors in advance of the interview. Surveys would be submitted to DBHDS and results tallied and communicated to the public by that agency. Feedback from the workgroup to both proposals was positive.

Summary

DMAS and DBHDS received and acted upon valuable recommendations from the 2019 and 2020 meetings of the SIS® Workgroup. These resulted in enhanced communication with the individual and family members about the relationship of the SIS® to the Individual Services Plan and the DD waiver services reimbursement Level and Tier. The workgroup provided approval for a change in the method by which the SIS® Satisfaction Survey is administered and analyzed, leading to more reliable results. Finally, the workgroup provided the impetus for analysis of trends related to the reimbursement level and tier based on the individual’s age at the time of the SIS®.

A comparison of data regarding individuals’ support needs levels and related reimbursement tiers shows a high degree of consistency across the past four years. As a result of this and a formal study conducted in 2018, affirming individuals’ stability in levels across time, the permanent DD waivers regulations, when they are finalized, will reflect a change from a three to a four year cycle for adults 22 years and older.