



COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

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September 7, 2021

MEMORANDUM

TO: The Honorable Janet D. Howell
Chair, Senate Finance Committee

The Honorable Luke E. Torian
Chair, House Appropriations Committee

The Honorable Mark D. Sickles
Vice Chair, House Appropriations Committee

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

SUBJECT: Item 317.I. of the 2021 Appropriation Act

This report is submitted in compliance with the Virginia Acts of the Assembly – Chapter 552, Item 317.I. of the 2021 Appropriation Act, which states:

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.

KK/

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 2021

A Report to the Virginia General Assembly

October 1, 2021

Report Mandate:

Chapter 522, Item 317.1 of the 2021 Appropriation Act, stated, 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.

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 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.

In 2009, Virginia began using the SIS in the person-centered planning process to help identify preferences, skills, and life goals for individuals in the waivers supporting persons with intellectual disability. Currently, the Department of Behavioral Health and Developmental Services (DBHDS) uses the SIS to inform the person-centered plan for most individuals in the three Developmental Disabilities waivers, as well as to determine an individual's required level of support. For specific waiver services, there is a tiered provider reimbursement

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 1.8 million Virginians. Members have access to primary and specialty health services, inpatient care, dental, 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 more than 500,000 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.

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").

Effective September 5, 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, as well as persons 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.

The fifth annual SIS stakeholder workgroup meeting was held April 21, 2021. The year in review was April 15, 2020 – March 31, 2021. SIS data, processes, and means of communication were reviewed in the meeting.

SIS Level and Tier Data

Table 1: SIS Levels and Tiers for the Community Living Waiver by Primary DBHDS Regions
Community Living Waiver

CL	Tier	1	2		3		4			Total	Percent
	Level	1	2	D2*	3	4	5	6	7		
Primary DBHDS Region	1	142	686	39	78	965	119	281	176	2,486	21.5%
	2	46	479	32	84	701	61	165	137	1,705	14.8%
	3	70	531	28	74	957	123	255	185	2,223	19.2%
	4	111	756	63	94	990	96	168	168	2,446	21.2%
	5	79	638	33	67	1,314	167	238	155	2,691	23.3%
Total		448	3,090	195	397	4,927	566	1,107	821	11,551	100.0%
Percent		3.9%	26.8%	1.7%	3.4%	42.7%	4.9%	9.6%	7.1%	100.0%	

All counts are of individuals on Waiver in Active Status 3/31/2021.

*D2 - The individual has not yet been assessed. As such, their Level and Tier default to a 2 until they are assessed.

Table 2: SIS Levels and Tiers for the Family & Individual Supports Waiver by Primary DBHDS Regions
Family & Individual Supports Waiver

FIS	Tier	1	2		3		4			Total	Percent
	Level	1	2	D2*	3	4	5	6	7		
Primary DBHDS Region	1	88	233	79	30	193	13	69	45	750	22.2%
	2	61	211	174	37	222	24	77	58	864	25.6%
	3	47	139	30	32	119	14	54	19	454	13.4%
	4	69	188	100	22	133	8	35	31	586	17.3%
	5	56	255	26	24	268	18	50	27	724	21.4%
Total		321	1,026	409	145	935	77	285	180	3,378	100.0%
Percent		9.5%	30.4%	12.1%	4.3%	27.7%	2.3%	8.4%	5.3%	100.0%	

All counts are of individuals on Waiver in Active Status 3/31/2021.

*D2 - The individual has not yet been assessed. As such, their Level and Tier default to a 2 until they are assessed.

Table 3: SIS Levels and Tiers for the Building Independence Waiver by Primary DBHDS Regions
Building Independence Waiver

BI	Tier	1	2		3		4			Total	Percent
	Level	1	2	D2*	3	4	5	6	7		
Primary DBHDS Region	1	13	18	5	-	2	1	-	-	39	11.9%
	2	25	20	6	1	6	-	-	-	58	17.7%
	3	31	26	2	2	5	2	-	-	68	20.7%
	4	22	41	1	1	8	-	-	-	73	22.3%
	5	23	51	1	1	14	-	-	-	90	27.4%
Total		114	156	15	5	35	3	-	-	328	100.0%
Percent		34.8%	47.6%	4.6%	1.5%	10.7%	0.9%	0.0%	0.0%	100.0%	

All counts are of individuals on Waiver in Active Status 3/31/2021.

*D2 - The individual has not yet been assessed. As such, their Level and Tier default to a 2 until they are assessed.

During the fifth annual SIS stakeholder workgroup meeting, the *Distribution of SIS Levels by Primary DBHDS Regions and Type of Waiver* data were reviewed. The results of the distribution of SIS levels were similar to the results from April 14, 2020: the majority of individuals on the Community Living Waiver (CL) are in level 4/tier 3, while the majority for both the Family & Individual Supports Waiver (FIS) and Building Independence (BI) waivers are in level 2/tier 2.

While these tables represent a snapshot in time, it appears that the one area of significant change from previous years was a decrease across all three waivers in the number of individuals whose SIS status is the Default SIS Level (D2). The D2 SIS Level is given until an individual's initial SIS assessment is completed. The CL percentage for 2021 was 1.7% vs. 2.4 in 2020, FIS was 12.1% vs. 22.4, and BI was 4.6% vs. 11.5%. This decrease is a reflection of the work done by the vendors, support coordinators, families, and DBHDS to schedule and complete initial SIS assessments in an increasingly timely manner, which is a positive outcome.

Table 4: SIS Levels and Tiers for the Community Living Waiver by Birth Age
Community Living Waiver

CL	Tier	1	2		3		4			Total	Percent
	Level	1	2	D2*	3	4	5	6	7		
Birth Age	< 5.0	-	-	-	-	-	-	-	-	-	0.0%
	>= 5.0, <11.0	1	10	2	2	7	4	8	3	37	0.3%
	>=11.0, <16.0	6	26	14	14	60	24	35	24	203	1.8%
	>=16.0, <23.0	37	232	67	89	361	53	142	179	1,160	10.0%
	>=23.0, <41.0	211	1,280	60	213	1,879	217	462	405	4,727	40.9%
	>=41.0, <65.0	174	1,297	44	73	2,036	187	326	176	4,313	37.3%
	>=65.0, <75.0	13	205	7	6	456	62	96	28	873	7.6%
	>=75.0, <85.0	6	38	1	-	111	16	35	6	213	1.8%
>=85.0	-	2	-	-	17	3	3	-	25	0.2%	
Total		448	3,090	195	397	4,927	566	1,107	821	11,551	100.0%
Percent		3.9%	26.8%	1.7%	3.4%	42.7%	4.9%	9.6%	7.1%	100.0%	

All counts are of individuals on Waiver in Active Status 3/31/2021.

*D2 - The individual has not yet been assessed. As such, their Level and Tier default to a 2 until they are assessed.

Table 5: SIS Levels and Tiers for the Family & Individual Supports Waiver by Birth Age
Family & Individual Supports Waiver

FIS	Tier	2			3		4			Total	Percent
	Level	1	2	D2*	3	4	5	6	7		
Birth Age	< 5.0			5						5	0.1%
	>= 5.0, <11.0	1	8	57	8	43	7	15	21	160	4.7%
	>=11.0, <16.0	13	40	107	11	81	16	26	42	336	9.9%
	>=16.0, <23.0	49	225	120	63	194	22	69	74	816	24.2%
	>=23.0, <41.0	207	632	97	60	543	28	139	42	1,748	51.7%
	>=41.0, <65.0	49	112	16	3	65	4	33	1	283	8.4%
	>=65.0, <75.0	2	9	7		6		3		27	0.8%
	>=75.0, <85.0					3				3	0.1%
>=85.0	-	-	-	-	-	-	-	-	-	-	0.0%
Total		321	1,026	409	145	935	77	285	180	3,378	100.0%
Percent		9.5%	30.4%	12.1%	4.3%	27.7%	2.3%	8.4%	5.3%	100.0%	

All counts are of individuals on Waiver in Active Status 3/31/2021.

*D2 - The individual has not yet been assessed. As such, their Level and Tier default to a 2 until they are assessed.

Table 6: SIS Levels and Tiers for the Building Independence Waiver by Birth Age
Building Independence Waiver

BI	Tier	2			3		4			Total	Percent
	Level	1	2	D2*	3	4	5	6	7		
Birth Age	< 5.0	-	-	-	-	-	-	-	-	-	0.0%
	>= 5.0, <11.0	-	-	-	-	-	-	-	-	-	0.0%
	>=11.0, <16.0	-	-	-	-	-	-	-	-	-	0.0%
	>=16.0, <23.0	7	5	1	1	-	-	-	-	14	4.3%
	>=23.0, <41.0	73	92	9	3	22	2	-	-	201	61.3%
	>=41.0, <65.0	27	53	4	1	11	1	-	-	97	29.6%
	>=65.0, <75.0	7	6	1	-	1	-	-	-	15	4.6%
	>=75.0, <85.0	-	-	-	-	1	-	-	-	1	0.3%
>=85.0	-	-	-	-	-	-	-	-	-	0.0%	
Total		114	156	15	5	35	3	-	-	328	100.0%
Percent		34.8%	47.6%	4.6%	1.5%	10.7%	0.9%	0.0%	0.0%	100.0%	

All counts are of individuals on Waiver in Active Status 3/31/2021.

*D2 - The individual has not yet been assessed. As such, their Level and Tier default to a 2 until they are assessed.

SIS Distribution by Birth Age and Waiver was added this year at the request of last year's workgroup members. The most salient takeaway from these tables is that the majority of individuals in each waiver are in the 23 – 41 year old age range. These results mirror the 2020 Birth Age and Waiver report which was sent to workgroup members shortly after last year's meeting, so once again there is consistency over time.

SIS Processes

Throughout the last year, SIS assessments continued to be completed as virtual assessments. DMAS Medicaid Memos supported this effort, and both vendors swiftly and smoothly transitioned from face-to-face to the virtual platform and continued to complete assessments. The AAIDD research brief (Thompson & Carlson, 2020), which was released in October, 2020, posted to the DBHDS website last fall, and reviewed again by the Stakeholder Group for this meeting, compared face-to-face interviews conducted April - May 2019 to virtual interviews conducted April - May 2020 for the express purpose of determining if results from virtually conducted assessments are reliable. Virginia's participation in the research is compelling because during the timespan covered, DBHDS moved from one vendor to two vendors. AAIDD compared the following data: during the first year (April - May 2019) Ascend completed 928 face-to-face SIS

assessments and during the second year (April - May 2020) 1130 virtual assessments were completed by both vendors combined (Ascend & Telligen). Despite the change to a dual vendor system and the increase in number of SISs completed, AAIDD found nearly identical results via virtual assessments as with face-to-face. The report concluded that, “The findings from this study strongly suggest that jurisdictions should have confidence in the results of *SIS-A* assessments that were conducted virtually in 2020.” It is noteworthy that, for Virginia, the study found that “the scores collected during the two conditions were essentially identical.”

A workgroup member commented that some respondents did express a preference for virtual SIS assessments.

Table 7: SIS Standard Operating Procedure (SOP) Review Requests
SIS Standard Operating Procedure (SOP) Review Requests

	4/15/20 – 3/31/2021	5/1/2019 - 4/15/2020	3/1/2018-4/30/2019
Submitted in Error*	130 (104 were blank)	14	9
SIS SOP Review Requests Submitted	146	20	16
Under Review	0	0	6
Requests Reviewed	16	26	10
Review Results			
SIS SOP Reassessments Approved	3	5	1 (Interview commenced ½ hr prior to scheduled start time)
SIS SOP Review Closed	146	21	9

The workgroup received and reviewed *SIS Standard Operating Procedure (SOP) Review Requests* (Table 7) for the past year. Of significance is the number of SOP Review Requests received. This is attributed to the fact that DBHDS is now receiving the SIS Satisfaction Survey vs. the vendors themselves. Both vendors provide the SIS Standard Operating Procedures (SOP) and the SIS Satisfaction survey prior to the scheduled assessment. Initially, when DBHDS took over the SIS Satisfaction Survey, both forms were sent out in the same communication. This seems to have led to some confusion as evidenced by SOP Review Requests being returned without being completed along with Satisfaction Surveys. The forms have since been placed into separate mailings.

Of the 146 SOPs received, 104 were considered blank, i.e., no items identified for review. 16 received were reviewed as SOP requests; three were approved. The final outcomes are in line with the year-to-year results.

Table 8: SIS Reassessment Requests
SIS Reassessment Requests

SIS Reassessment Requests 4/16/2020 thru 3/31/2021						
	Group Home	Sponsored Residential	Other Services	Total	Concern which Prompted Request for Reassessment: <u>Medical</u> or <u>Behavioral</u>	
Total	27	27	10	64	26	18
Approved	13	5	4	22	11	6
Percent Approved	48%	19%	40%	35%	Medical = 42%	Behavior = 33%

Level/Tier Outcome for Approved Reassessments		
Requests Approved	22	
Reassessment Interviews Completed	20	(2 approved requests have not yet occurred)
Increase in Level/Tier	17	77%
No Change in Level/Tier	3	14%
Decrease in Level/Tier	0	0%

SIS Reassessment Requests (Table 8) are submitted for review when a significant and sustained increase/decrease in medical and/or behavioral support needs or a sustained and significant change in any two Life/Activity Domains occur for a period of six months. There was an increase in the total number of reassessment requests submitted for 2021 (64 vs. 27 in 2020). DBHDS continued to approve close to the same number of requests (35% vs. 33% 2020). 26 records were reviewed for exceptional medical concerns and 18 for exceptional behavioral concerns. Of those, 42% of medical requests were approved and 33% of behavioral requests were approved. 17 of 22 approved requests resulted in an increase in the level and tier, while three remained unchanged. As of the meeting date, two individuals were still awaiting SIS reassessments. There was a request that next year's report show the number of reassessments which are requested per waiver type. For this last year, all of the requests but two were for individuals who had Community Living (CL) waivers. The other two individuals were receiving supports through the Family and Individuals Supports (FIS) waiver.

Communications Regarding the SIS

Multiple opportunities for SIS observations occurred in partnership with AAIDD Trainer and lead trainers from each vendor. The observations were conducted as Periodic Drift Reviews (PDRs), allowing the assessment to be used to identify areas of strengths and areas of needed improvement for the individual assessor. Opportunity for pre- and post-interview meetings with the interviewer also provided time for the assessor to ask any questions. The post-interview meeting also offers the assessor immediate feedback. In addition, DBHDS participated with AAIDD during joint SIS vendor trainings and was able to communicate directly with assessors. This provided DBHDS a platform to share the positive observations made during PDRs, as well as areas needing improvement, provide tips for SIS assessments, roll out a new documentation process for assessors, and answer any questions.

On July 1, 2020 DBHDS began collecting the *SIS Satisfaction Survey*. As mentioned previously, prior to this date, vendors collected and shared with DBHDS what they felt necessary. Now, DBHDS reviews all surveys and comments, as well as posts a quarterly summary report about elements of the Satisfaction Survey on its website. The collected SIS Satisfaction Surveys continue to report overall high satisfaction with the SIS assessment process, but a common trend emerged referring to the length of time to complete an assessment. While the assessment itself cannot be changed or shortened, these comments resulted in DBHDS working with both vendors and AAIDD on methods to reduce time spent during the AAIDD licensed, standardized assessment.

DBHDS reviewed with the workgroup members the new SIS cycle of assessments schedule as expressed in the recently finalized DD Waivers regulations. It is as follows: completion of a new SIS every four years for those individuals who are 22 years of age and older, every three years for those individuals who are 16 years of age through 21 years of age, and every two years for individuals five years through 15 years of age when the child is using a tiered service. Public comments about the DD waivers regulations were discussed during the workgroup meeting. In particular, some commenters had expressed concern about the extension of time between assessments for adults 22 years and older, fearing that alterations in individuals' needs would take longer to be captured by a level/tier change. Members were reminded of the study (Stierer & Hankins, 2018) completed prior to the move to the four year rotation, which supports the new schedule. In addition, if any individual has a significant and sustained increase/decrease in medical and/or behavioral support need and/or a sustained and significant change in any two Life/Activity Domains for a period of six months, a SIS Reassessment Request may be submitted for DBHDS review. DBHDS has consistently approved SIS reassessment requests corroborated by documented changes in supports provided and the person-centered plan.

Summary

The administration of the SIS continues to show a great deal of consistency over time in level/tier assignment, satisfaction, and rates of approval of SOP and Reassessment Reviews. There has been a concerted effort this year to listen and respond to desired changes expressed through Satisfaction Surveys of those participating in the SIS. In particular, DBHDS staff have heard concerns about the length of time to complete the SIS and are undertaking efforts to reduce that time, while still maintaining the continuity of a product that is used for person-centered planning and determining support needs levels and related reimbursement tiers. PDR observations have allowed DBHDS staff and AAIDD Trainer to observe and provide immediate feedback to the observed assessors. These observations resulted in the assessor receiving immediate feedback and the information gathered is often used for joint vendor trainings. The benefit to the Commonwealth is that the quality of SIS assessments across the two vendors remains high.