

Questions and Answers from Provider Roundtable Presentation

April 22, 2026

Q1. How long is the “default 2” SIS score valid when a new Waiver recipient initiates service?

A1. Indefinitely

Q2. How can providers submit their service authorization when we do not get access to the ISP until 2 weeks before the ISP starts and can we upload the Part V pdf and submit the SA?

A2. It is recommended that Service Authorization requests be submitted at least 30 days before the individual’s ISP start date. DD Waiver Manual Chapter IV pg. 24 states, "To assure the provider that the individual is eligible and that services are authorized as requested, it is recommended that the required documents be submitted at least 30 working days prior to the requested start of services."

It is recommended that you contact the Support Coordinator (SC) and/or the SC’s supervisor to determine the cause of the delay. You can also add a note in WaMS on the same day documenting that you attempted to reach out to the SC or the CSB.

Q3. Many providers have outdated SIS assessments on file due to delays in scheduling updated SIS evaluations. Providers are concerned about whether having an outdated SIS makes them non-compliant, even if they have already requested a new assessment.

A3. This is not something DBHDS would consider as non-compliance. However, it is always recommended that providers request confirmation from the Support Coordinator of the date the JotForm was submitted to PCG (Public Consulting Group) for scheduling and keep that documentation in their records.

Q4. What is the name of the agency that schedules the SIS?

A4. Public Consulting Group (PCG) is the agency responsible for scheduling SIS assessments. Their staff are located throughout Virginia and in nearby states.

Q5. If a person has a legal guardian who wants to restrict certain rights, providers are not permitted to follow those restrictions unless they have been formally reviewed and approved through the appropriate decision-making or human rights processes? For example, if a guardian does not want the person to buy a soda during the day, the provider cannot enforce that restriction without proper authorization?

A5. If a legal guardian requests something that may be considered a restriction under the Human Rights regulations or the HCBS Settings Rule, then yes—there are specific processes and required approvals that must be followed

Human Rights:

You can reach out to your Regional Human Rights Advocate for questions or concerns- https://dbhds.virginia.gov/wp-content/uploads/2025/09/contact_info_map-2025.updatelogo.pdf

Office of Human Rights Restrictions, Behavioral Treatment Plans, and Restraints slide deck- https://dbhds.virginia.gov/wp-content/uploads/2026/03/Community_Restrict-BTPs-Restraints.2026.pdf

HCSB:

HCBS Modifications training- <https://dbhds.virginia.gov/wp-content/uploads/2025/05/HCBS-Modification-Training-2025-1-1.pdf>

HCBS for Providers- <https://dbhds.virginia.gov/wp-content/uploads/2024/03/2024ProviderTraining.pptx>

Q6. What is the status of the condensed DSP competencies?

A6. The pilot phase for the advanced competencies is complete, and we are currently updating the checklist based on the feedback received. The revised materials will be shared during a 30-day public comment period, which will begin soon, before the updates are finalized.

Q7. Can the number of providers (by type) and number of individuals served in each region be provided in future reviews of the OHR ANE data?

A7. OHR can work with the Office of Licensing on the number of licensed DD providers and with Waiver Services on the number of individuals with an authorization under one of the DD waivers for the period of time covered by the ANE data.

Q8. Is there a recording available of this Roundtable for us to refer to if needed?

A8. The recording is not available. However, the slide presentation and the Q & A from the PRT (Provider RoundTable) is posted at [Office of Provider Network Supports - Virginia Department of Behavioral Health and Developmental Services \(DBHDS\)](#)

Q9. Please speak about the relationship between TC (Therapeutic Consultation) services and other DD services, particularly when behavior plans are implemented and staff need to be trained in them?

A9. The behavior support plan is part of the individual's ISP, so all supporters—including providers of other DD services—must be trained on how to collect data and use the strategies in the plan. The behaviorist is responsible for training supporters, which includes explaining the strategies, modeling them, practicing them together, and offering feedback. Other DD providers should also share feedback with the behaviorist about what is and is

not working. Ongoing communication is essential, and everyone involved has an important role.

Q10. What is the ABA conference information again?

A10. <https://virginiaaba.org/annual-conference/>

Q11. Can you send a link to the common errors that are found in the reviews?

A11. The common citations are listed in the PRT Agenda that was sent out with the registration, It is also found in the slide presentation on our webpage. [Office of Provider Network Supports - Virginia Department of Behavioral Health and Developmental Services \(DBHDS\)](#)

Q12. Regarding skill building, can it be "each day he/she attends"?

A12. Please reach out to your assigned Community Resource Consultant: [Provider Network Supports CRC Contact Chart](#)

Q13. Does the CFI support parents of adults as well? Is your support available for the entire state?

A13. Contact dvyarbrough@vcu.edu Dana Yarbrough 877-567-1122 or cfihelpline@vcu.edu to make a referral or ask questions about CFI support

Q14. For TC (Therapeutic Consultation) services, do day support providers need to incorporate the BSP into the Part V, or can they write “see BSP”?

A14. Yes, include the Behavior Support Plan in Part V to show the person’s current needs. However, you do not need to rewrite the entire BSP in that section. You can simply note, “See Behavior Support Plan,” and indicate where the plan is located.

Q15. Does PA (Personal Assistance) services qualify for customized rate for an individual that is total care?

A15. No, Customized Rate is not available for PA services.

Q16. Could you please provide slides for customized rate information.?

A16. Yes, slides will be available at [Office of Provider Network Supports - Virginia Department of Behavioral Health and Developmental Services \(DBHDS\)](#)
If you have questions later, you can contact me directly carrie.ottoson@dbhds.virginia.gov

Q17. What are the regulations for TC (Therapeutic Consultation)?

A17. <https://law.lis.virginia.gov/admincode/title12/agency30/chapter122/section550/>
Section B.2.d addresses allowable activities for this service. Please contact nathan.habel@dbhds.virginia.gov for further information.

12VAC35-105-810. Behavioral treatment plan.

A written behavioral treatment plan may be developed as part of the individualized services plan in response to behavioral needs identified through the assessment process. A behavioral treatment plan may include restrictions only if the plan has been developed according to procedures outlined in the human rights regulations. A behavioral treatment plan shall be developed, implemented, and monitored by employees or contractors trained in behavioral treatment.

Q18. How do I get additional information on Supported Decision Making?

A18. DBHDS Supported Decision-Making webpage <https://dbhds.virginia.gov/supported-decision-making-supported-decision-making-agreements/>.

Direct links to resource documents for Supported Decision-Making-

[Rights When I Turn 18](#)

[6 Steps for Making a Decision](#)

[Ways to Get Help with Making Decisions](#)

[Understanding Decision-Making Support Options in Virginia \(guide\)](#)

For questions about Supported Decision-Making, Supported Decision-Making Agreements, or alternatives to guardianship please contact Sara D. Thompson, Supported Decision-Making Community Resource Consultant Lead, at sara.thompson@dbhds.virginia.gov 804-869-0591.

Virginia now formally recognizes Supported Decision-Making Agreements as an alternative to more restrictive, substitute decision-making options, such as legal guardianships. (Virginia Code § 37.2-31)

Q19. Are the providers expected to request a SIS for the individuals or is this a task for the Support Coordinator?

A19. This is a task that the Support Coordinator is responsible for.

Q20. What if the SIS results do not reflect the support needed for the individual? how should a provider proceed?

A20. If you have six months of documentation showing that the SIS no longer reflects the individual's current needs, the Support Coordinator may submit a reassessment request using that six months of data.

Q21. Will the provider be able to back bill if SA (Service Authorization) isn't approved by the start date?

A21. Providers and SCs can request a reconsideration, however, appropriate justification as to why a reconsideration is needed.

Q22. Which date should be used to determine the 30-day advance SA submission requirement—the date the provider sends the plan to the Support Coordinator, or the date the Support Coordinator submits it to DBHDS?

A22. It is recommended that SCs hold ISP meetings 6 weeks prior to the start of the new ISP year.

Q23. Is there a document that outlines how the SIS are scored?

A23. There is a report on our website [Waiver Information for Individuals and Families - Virginia Department of Behavioral Health and Developmental Services \(DBHDS\)](#) There is also a guide to SIS Scoring and Levels and Tiers printed on every SIS.

Q24. Do we have any updates to slot allocation?

A24. There is currently no signed state budget. Once the budget is approved, and if any slots are funded, an allocation memo will be issued.

Q25. Are new provider applications still being reviewed?

A25. Applications are still being reviewed by the Office of Licensing. Contact them for further information.