The re-norming of the Supports Intensity Scale – the primary determinant of an individual's tier assignment – by the assessment's publisher required BHDDH (and other states that use the SIS to assign levels/tiers) to update the criteria used to assign tiers. In addition to ensuring the statistical rigor of the update tier criteria, BHDDH sought to reasonably match the existing assessment framework, minimize the number of individuals who would have any tier changes, and ensure that, for those who would experience a tier change, minimize the number that would decrease. The resulting assessment framework creates six tiers (compared to the current five):

Brief Tier Description	Current Tier	Updated Tier	Impact
Mild Support Needs	A	A	No impact (continues to be Tier A)
Moderate Support Needs	B	B	No impact (continues to be Tier B)
Significant Support Needs	C	C1	No impact other than labeling (Tier C1 will be equal to current Tier C)
Significant Support Needs	D	C2	No impact other than labeling (Tier C2 will be equal to current Tier D)
Extraordinary Medical Needs	D	D	Increase (value of Tier D increased to match Tier E)
Extraordinary Behavioral Needs	E	E	No impact (continues to be Tier E)

As the table shows, the tiers are largely unchanging[1], though there are some labeling changes to ensure conformity with the State's Medicaid Section 1115 waiver:

- There are no changes in the labeling or values of the tier packages for Tiers A, B, and E.
- The existing Tier C will be re-labeled Tier C1 with no changes to the value of the tier package.
- Tier D is currently comprised of two separate groups of individuals: 1) those with the most significant support needs but no extraordinary medical or behavioral needs, and 2) those with extraordinary medical needs.
    - Those with the most significant support needs but no extraordinary medical or behavioral needs will be assigned to Tier C2 with a tier package equal to the current Tier D package. *This is a labeling change only; this group of individuals will receive the same budgets as they currently have.*
    - Those with extraordinary medical needs will continue to be in the group labeled Tier D, but their tier package will be increased to match the current Tier E package. That is, although the label remains the same, the budget for this group will increase. Although provider payment rates and tier packages will be identical for Tiers D and Tier E, BHDDH intends to maintain separate codes to allow for thorough reporting.

[1] Note that the value of tier packages is slightly reduced due to the exclusion of service coordination funds associated with the transition to conflict-free case management.