

ORA envisions communities where people with disabilities live rich, fulfilling and inclusive lives.

Oregon Rehabilitation Association (ORA) Testimony Senate Committee on Human Services and Early Childhood Invited Testimony on eXPRS billing Chris Burnett, Executive Director February 10, 2015, 3: pm, HR B

Who is ORA and why do we care about this issue? The Oregon Rehabilitation Association (ORA) is a professional membership association that represents, supports and advocates for members as they partner with families and individuals with intellectual and developmental disabilities to lead full and inclusive lives. ORA members include Albertina Kerr, Eastco Diversified Services and Sunrise Enterprises. We represent the full spectrum of Oregon providers – Community Developmental Disabilities Programs (CDDP's), Brokerages, comprehensive services, employment and small community inclusion and housing providers.

We have a list of priority goals we are working on in 2015 but **the inability of providers to efficiently and effectively submit bills for the services they provide is one of our primary concerns.** It's what we hear about most from our members. The crisis cuts across all types of providers large and small, metro and rural.

Thank you for your interest in addressing an issue that has been developing over years, as you will hear in others testimony, but it has escalated to the point of endangering the sustainability of providers and their ability to continue providing an array of supports to individuals with developmental/intellectual disabilities.

It has taken a painfully long time to get DHS's attention on this issue. If you had not received an impassioned plea for help from Seth Johnson, Executive Director of Opportunity Foundation and an ORA Board member, we might not be here today. His communication to you was clear and well stated.

"...agencies have increased administrative staff by as many as 3 new full time staff to be able to bill for their delivered services. Agencies report that a process which used to take 4-8 hours per month now takes as many as 400 hours, depending on the number of people served and the number of new staff hired to enter data. ALL agencies have seen enormous increases in the administrative time and burden associated with billing. There is a simple solution. If the state ODDS/DHS would enable the system to accept uploaded spreadsheets, all the same required data could be gathered and entered in the same 4-8 hours while meeting the new mandated levels of data delivery."

Providers are being asked to use an outdated, overloaded software tool that was never meant to carry the workload of today's system. It is also concerning that while DHS knows the billing system is broken there is no backup. Providers have no alternative but to stumble along with a dysfunctional IT system and wait months to be paid.

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Why is the workload different? As you may know, the entire system of supports has been upended and changed at nearly every level. It is the implementation of the Community First Choice Plan (also call the "K Plan"), Home and Community Based Services (HCBS) Waiver changes, significant changes to Oregon Administrative Rules for virtually every service delivery element, employment policy changes, changes to service definitions, billing increment changes (from monthly to daily to hourly to 15 minute increments) are keeping providers in a state of chaos. Providers have accepted that change is at hand but the difficulties of billing in eXPRS are making it difficult to implement them and stay in business. They have been challenged by inconsistent information, frequently changing policy direction and what seems like a lack of understanding of the ripple effect of disjointed system changes.

We raised this issue in November of 2014 in a letter (attached to my testimony) to then ODDS Director Trisha Baxter and incoming Office of Developmental Disabilities (ODDS) Director Lilia Teninty that included a list of possible remedies. Both Trisha and Lilia, and now Don Erickson, inherited this system wide problem and have shown an interest in resolving it but remain hindered by the bureaucratic process of DHS. We secured a meeting with DHS Director Kelley-Siel, ODDS Director Teninty and COO Erickson late in 2014 to discuss concerns and to request as an interim step that time limited fiscal relief be provided while a solution to the billing bottleneck was developed.

While Director Kelley-Siel indicated every resource would be dedicated to solving the problem we have yet to see any proposals for time limited fiscal relief for providers. The issue also never made it to her list of priorities shared in a recent overview given at a recent House Human Services and Housing Committee.

We did, however, spend a half day in January meeting with DHS IT staff and provider IT and billing staff to walk through the problems they are experiencing. While that meeting was helpful it also revealed that DHS IT staff had not fully investigated our first ask – the option of a spreadsheet upload. This was disappointing, but a few days later we were informed that after further discussion an upload might be an option, but it would be months away and require pilot testing, etc. While a step in the right direction, it is still doesn't address the significant investment providers are making in trying to get paid – something that time limited fiscal relief could address.

Hopefully I provided a broad view of the depth and urgency of this issue. Those testifying after me will drill down to the details of this long standing problem so you might better understand why we need help.

I sincerely appreciate your willingness to shine a light on this problem. Thank you for this opportunity and I'm happy to answer any questions you may have.

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