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HB 2547 – Housing with Services Testimony House Human Services and Housing Committee April 6, 2015

Chair Keny-Guyer and members of the Committee, thank you for the opportunity to testify before you today on HB 2547 – the housing and services bill. I am Ruth Gulyas, CEO of LeadingAge Oregon – the statewide association of not-for-profit and other mission-directed organizations dedicated to providing quality housing and services to the elderly. Our members include federally subsidized housing for low-income seniors as well as market rate senior housing, nursing homes, residential care, assisted living, home care agencies, continuing care retirement facilities known as CCRCs. With me is David Fuks, CEO of Cedar Sinai Park, who spearheaded the innovative Housing with Services Project in downtown Portland that served as impetus for this bill. David will talk about what the project is and what it is not, and why we need to support such programs going forward.

LeadingAge Oregon does not support the bill as written. The state needs to better understand the various types of housing and services models – both affordable and market rate - and associated issues before it creates any, if needed, additional regulation.

We support a comprehensive exploration of the various forms of housing with services through a Task Force or workgroup comprised of a balanced mix of housing and community-based service organizations as well as people residing in independent housing. Either needs to have a well-defined charge that includes a report back to the Legislature in 2016 with any resultant recommendations. Towards that end, the Department of Human Services has already established a workgroup that started meeting in January to do just that.

We believe we need to be looking at housing and services as programs within housing settings rather than viewing it from the institutional lens of licensed facilities. Housing with Services is not a facility – it is a community-based, population based approach to health management for persons residing in independent housing.

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Housing with Services models seek to more purposefully integrate and coordinate health and long term services and supports with the goal of improving health outcomes; decreasing utilization of hospital care and emergency rooms and delaying entry into long-term care.

We oppose any action to attempt to prevent the opening of additional Housing with Services facilities until recommendations of the Task Force or workgroup are adopted. We need to identify what "housing and services" is, we cannot prevent opening of a yet undefined program. Most importantly, there is a severe lack of affordable housing in Oregon. Oregon Housing and Community Services requires optional services as a condition of funding. There is and will continue to be both subsidized and market rate housing developed where people may choose to purchase services.

All publicly funded affordable housing, including housing with services models, are apartment buildings in which residents are living independently. The housing property is regulated and all residents sign leases and enjoy the rights and responsibilities of tenancy. Services may be offered at a building but tenancy does not require participation in services; services are optional. Rather than provide services directly, most affordable housing with services models work in partnership with respected community-based service providers to help residents manage their health.

There is growing evidence to support that people residing in subsidized housing have more chronic conditions, have a higher risk of being hospitalized, have higher health care costs, are more likely to be eligible for Medicaid and Medicare. We believe Oregon housing and services policy should support interventions to improve health among low-income seniors, and not create an unnecessary new layer of regulation that could stifle a promising model that is being looked at as a national model.

Thank you for the opportunity to testify on this bill. I would be happy to answer any questions.