

HB 4012 A STAFF MEASURE SUMMARY

Carrier: Sen. Gelser Blouin

Senate Committee On Human Services, Mental Health and Recovery

Action Date: 02/22/22

Action: Do pass the A-Eng bill.

Vote: 4-0-1-0

Yeas: 4 - Gelser Blouin, Kennemer, Lieber, Sollman

Exc: 1 - Robinson

Fiscal: Has minimal fiscal impact

Revenue: No revenue impact

Prepared By: C. Ross, LPRO Analyst

Meeting Dates: 2/22

WHAT THE MEASURE DOES:

Directs the Department of Human Services (DHS) to collaborate with the Oregon Health Authority (OHA) and the Oregon Youth Authority (OYA) to evaluate rate structures for child caring agencies and make recommendations to the legislature by February 28, 2023, to improve long-term workforce sustainability, as specified. Repeals January 2, 2024. Directs OHA to conduct a labor market study at least once per biennium to determine Medicaid reimbursement rates for private nurses for medically fragile children and to seek approval to adjust said rates by July 1, 2023, and annually thereafter by July 1st. Takes effect 91st day after adjournment *sine die*.

ISSUES DISCUSSED:

- Workforce shortages, turnover, retention and recruitment
- Provider rates and rate structures

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

High turnover is common in the child welfare profession, which can increase employer costs and contribute to disruptions in the continuity of service experienced by children and their families. Annual child welfare staff turnover nationwide for the past 15 years has been estimated at 20-40 percent by the Child Welfare Information Gateway. In 2022, child welfare staff turnover in Oregon was reportedly 40-60 percent, according to the Oregon Alliance. A 2017 study by the National Wraparound Initiative found that child welfare professionals frequently cited low pay as a major cause of turnover: salaries are considered too low for the level of skill required and the stress involved, and often, compensation is not competitive within local economies. In 2018, the Secretary of State audited Child Welfare administered by the Department of Human Services (DHS) and found chronic understaffing, overwhelming workloads, and high turnover.

House Bill 4012 A directs ODHS to collaborate with the Oregon Health Authority (OHA) and the Oregon Youth Authority (OYA) to evaluate and make recommendations to the legislature on provider rate structures for child caring agencies. The measure also directs OHA to conduct a labor market study to determine Medicaid reimbursement rates for private duty nurses who care for medically fragile children and seek approval to make adjustments on an annual basis.