

Presentation to the 2025 Joint Ways and Means Subcommittee on Human Services

Office of Aging and People with Disabilities

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March 25, 2025

Agenda: Day Two

- I. Who we serve
- II. Program and budget
- III. Key successes and challenges
- IV. Closing remarks

Office of Aging and People with Disabilities



Program Highlight: Long-term Services and Supports



Long-Term Services and Supports: why we do our work







Provide critical, life sustaining supports for individuals who can no longer meet their own needs.

Help people remain as healthy and independent as possible.

Help people develop plans to meet their goals.

Who we serve

Medicaid Long-Term Services and Supports

More than 57,000 supported in the twoyear period ending June 2023.



Oregon Project
Independence – Classic
OPI-C enabled 1,850
people to stay in their
own homes.



Oregon Project
Independence – Medicaid
OPI-M has helped more than
700 people in 8 months.



Older Americans Act

Helped 71,301 people with meals, employment and more



Care settings before and after waivers

Before

- States required to cover nursing facility (NF) care.
- People with low needs were served in nursing facilities.
- In 1980, APD applied for the first waiver in the country to serve individuals in non-institutional settings.
- Waivers require states to demonstrate:
 - No increased costs
 - No greater negative outcomes than if served in a nursing facility.

After

- Today, most people in Oregon are served in home and community settings.
- Oregon has an array of service options.
- People get to choose where they receive their services.
- People can self-direct their services.
- Average cost of care is significantly less.

Services available through Medicaid Long Term Services and Supports

In-home: Services to help people stay independent and safe in their homes. Services can be for a short-term need, such as injury recovery, or long-term for many years.

In a facility: These include adult foster homes, assisted living, residential care facilities, nursing facilities and memory care communities.

In the community: May include meals, transportation or help managing chronic conditions. Services vary depending on location. Many people use community-based services together with in-home services.

Community support programs also includes the Program for All-Inclusive Care for the Elderly (PACE) and Adult Day Services.

Nursing Facility services

nursing facilities in Oregon

Nursing facilities serve six or more residents and provide:

- Licensed 24-hour supervised nursing care:
 - Short-term rehabilitative care following hospitalization
 - Long-term care for people who choose this level of care.
- Caregivers must be certified as nursing assistants
- State Board of Nursing must approve their training
- Nurses and certified nurse aides provide personal, therapeutic and nutritional care
- Nursing facilities serve Medicaid and non-Medicaid residents.

Home and Community Based Services

2,068
HCBS licensed settings in Oregon

Types of HCBS settings:

- In-home
- Adult Foster Homes
- Residential Care Facilities
- Assisted Living Facilities
- Specialized Living
- Adult Day Services

Services usually include:

- Personal care
- Cognitive supports
- Meal preparation
- Shopping
- Housekeeping and laundry
- Social Isolation prevention
- Transportation
- Assistive technology
- Activities

In-home consumers:

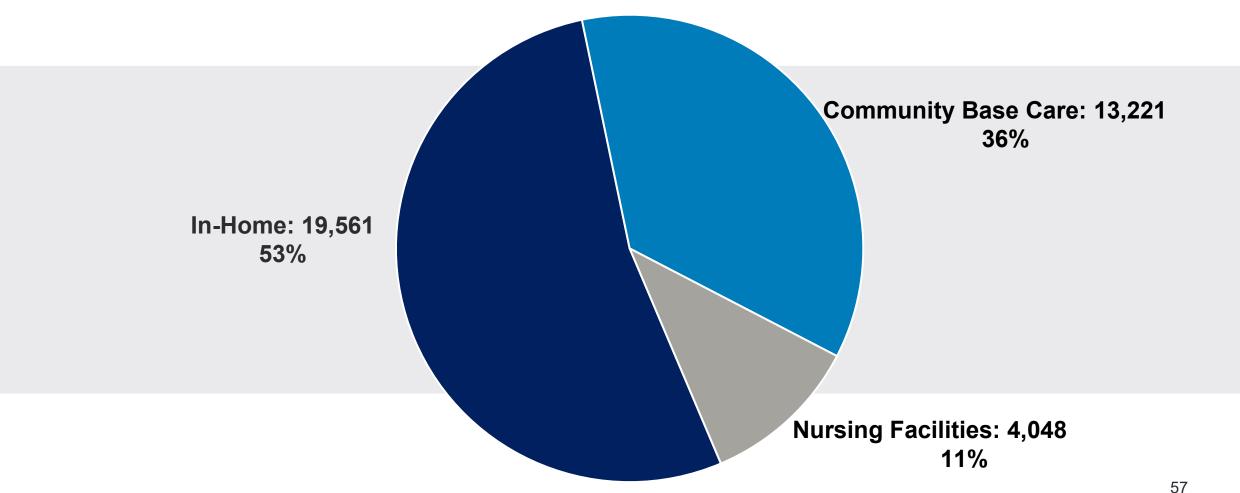
- Home delivered meals
- Environmental modifications
- Crisis supports
- Self-direction support

High need consumers:

- Behavior supports
- Nurse delegation
- Ventilator supports

Increasingly people served in home or communitybased settings





Older Americans Act (OAA)

17,253
people received
home delivered
meals in Oregon
in 2024

- Federally funded program that provides supports to people aged 60 and older.
- APD sub-grants funds to 16 Area Agencies on Aging.
- OAA services include, but are not limited to:
 - Nutrition services including home delivered meals
 - Legal services and advocacy
 - Information, assistance and referral to resources
 - National Family Caregiver Support Program.



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Long-term services and supports core programs and funding sources

Medicaid services:

1915(k) State Plan

1915(c) Waiver

State Plan Services

Oregon Project Independence – Medicaid

Non-Medicaid services:

Older Americans Act

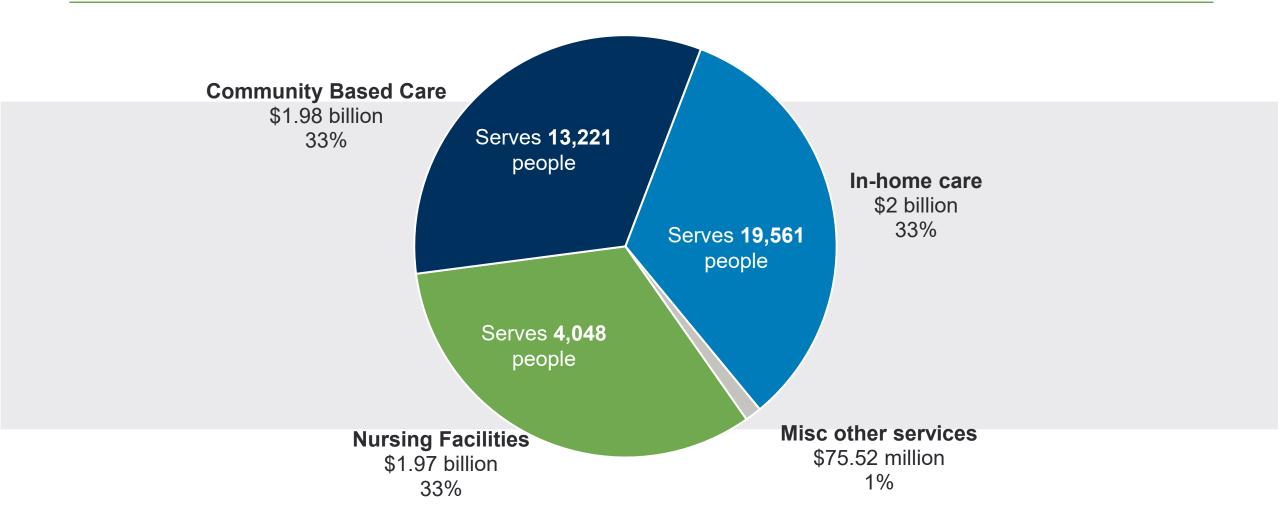
Oregon Project Independence - Classic



APD Program: Long-term services and supports



APD Program: Medicaid funding by services



APD Program: Medicaid funding split detail

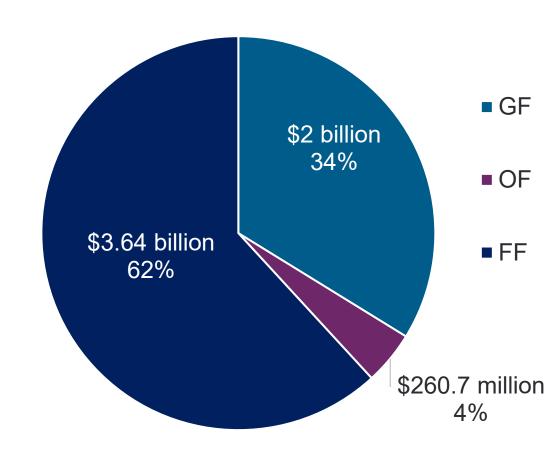
	General Funds	Other Funds	Federal Funds	Total	Projected Monthly Caseload	
Nursing Facilities	\$558,648,634	\$235,892,684	\$1,176,631,643	\$1,971,172,961	4,033	
				33% of funding	4,033	
Community Based Care	\$718,451,307	\$16,109,942	\$1,251,573,725	\$1,986,134,974	13,221	
				33% of funding		
In-home Care	\$742,287,418	\$6,571,424	\$1,256,407,772	\$2,005,266,614	22,017	
				33% of funding		
Misc. other services	\$22,297,288	\$2,148,828	\$51,072,031	\$75,518,147	Vorion	
				1% of funding	varies	

LTSS: Funding streams and policy direction

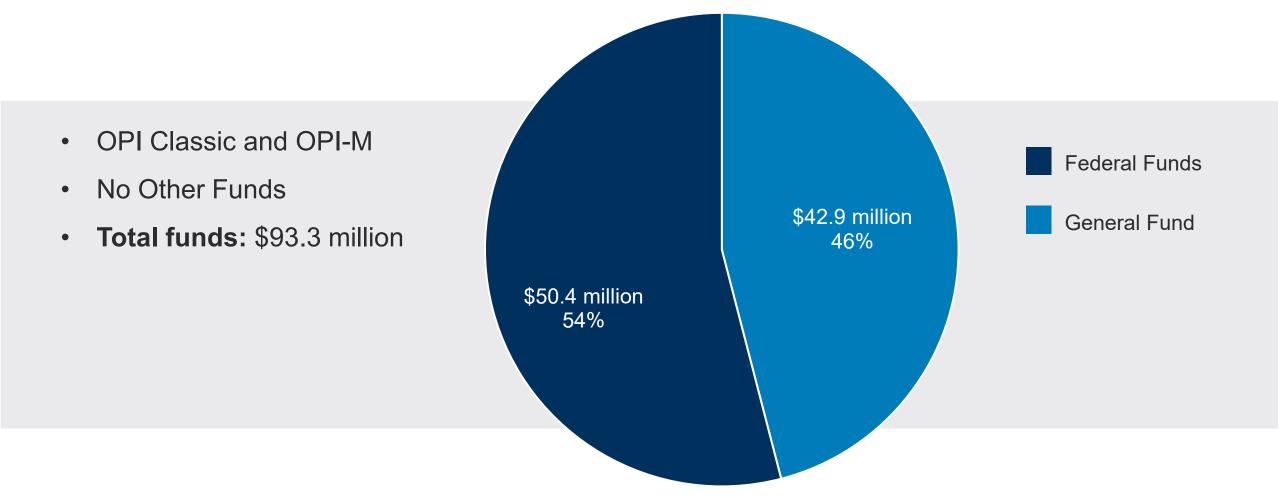
Federal policy significantly impacts the delivery of Long-term Services and Supports:

- Most funds are from Medicaid and Older Americans Act.
- For continued federal financial participation, APD must abide by federal regulations.
- Major federal changes:
 - New HCBS Access Rules
 - Revised Older Americans Act regulations
 - First ever national Adult Protective Services regulations.

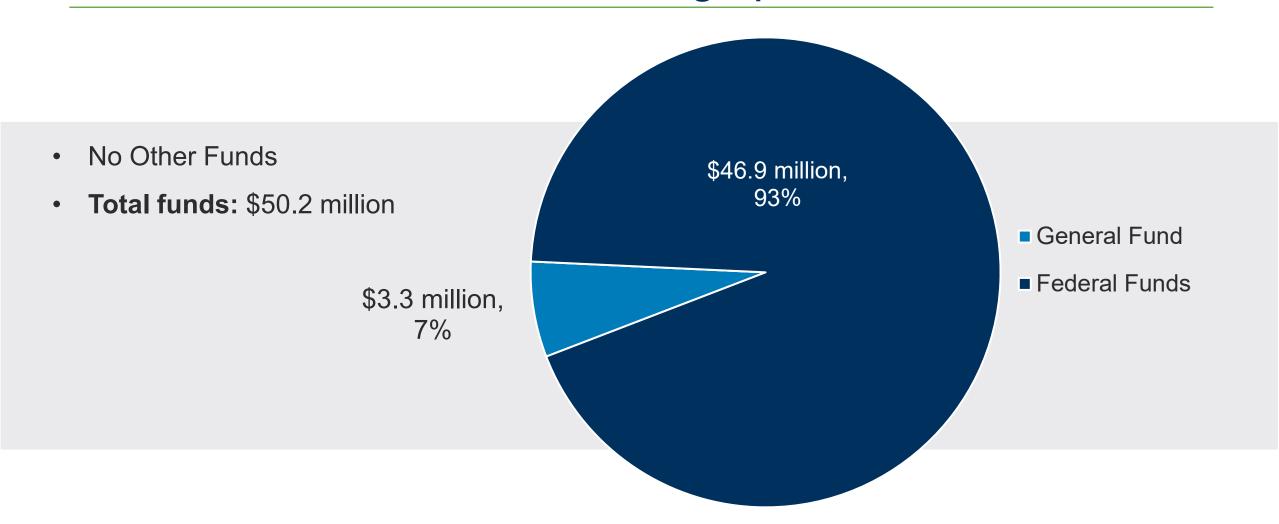
LTSS Budget by Fund Type



Oregon Project Independence: funding split



Older Americans Act: funding split



Major cost drivers: Long-term services and supports



Fluctuating Federal Medical Assistance Percentage (FMAP) rates

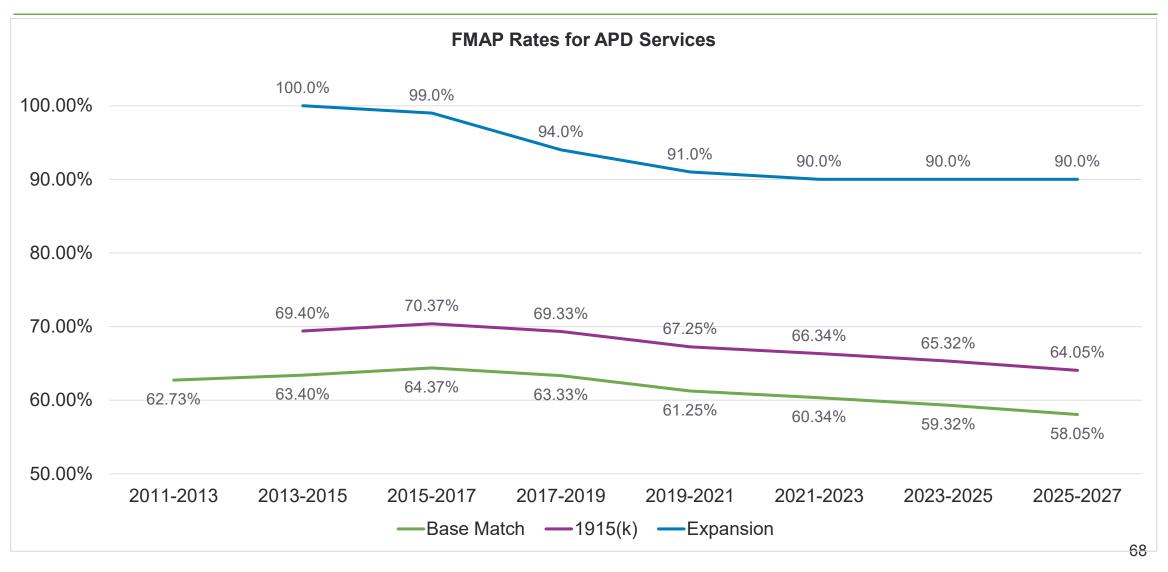


Increasing longterm care caseload forecast

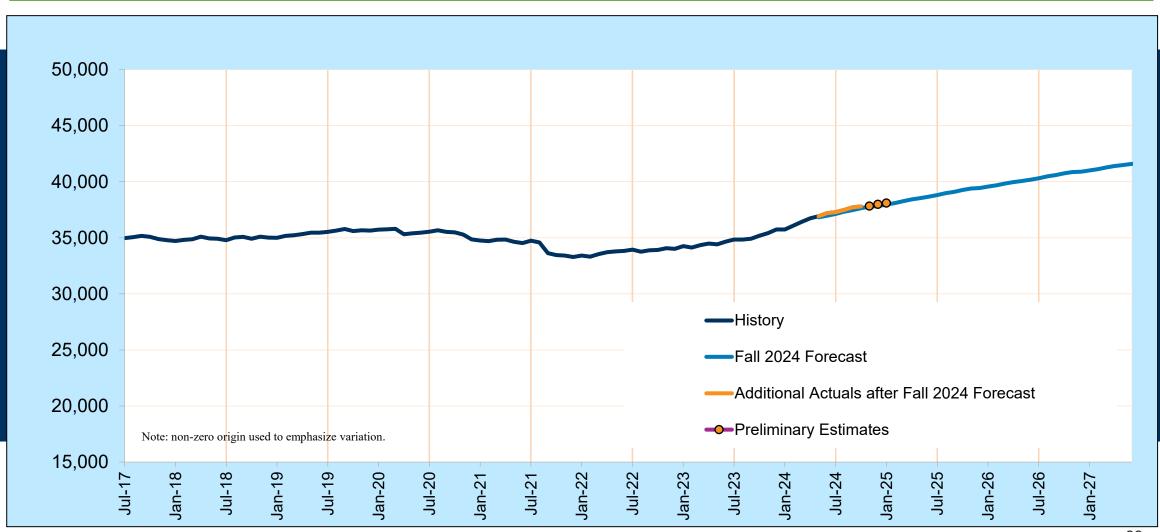


Increasing provider rates

Medicaid Match Rates



APD caseload forecast



Cost per Case by Care Setting



70

Long-term care delivery system

Provider type	Description	Number of providers	
Nursing Facilities	24-hour supervised nursing care; caregivers must be certified nursing assistants (CNA)	128	
Assisted Living Facilities	Serves 6+; registered nurse not present 24/7; CNA not required	237	
Residential Care Facilities	Serves 6+; registered nurse not present 24/7; staff are not certified	330	
Memory Care endorsed facilities	Staff trained in dementia care provide specialized services in a secure setting	258	
Adult Foster Homes	Single-family home with 1-5 residents	1,224	
Program for All-Inclusive Care for the Elderly	Provides all LTSS and health care through a capitated model	1	
Adult Day Services	Certified – not licensed	18	
In-home care agencies and homecare workers	Homecare worker (HCW) - training required In-home care agencies (IHCA) - licensed by PHD, caregiver training required	20,383 HCWs 125 IHCAs	

Barriers that limit access to services

Medicaid, for individuals with disabilities and older adults:







Since 1987, resources cannot be higher than \$2,000.

After age 55, all benefits are subject to estate recovery.

Medicare and some insurances do not cover long term services and supports.

Care is unaffordable for most older adults

The average income for an older adult in Oregon is \$4,996 per month. This is:

- \$2,254 too much for Medicaid
- \$856 too little for the average Community Based Care Facility

The gap between Medicaid eligibility and the cost of care means most older adults who need care cannot get it.



Financial Eligibility

Program	Income Limit	Resource Limit
OSIP-M Medicaid	\$967	\$2,000
300% of SSI (Long-Term Care Medicaid)	\$2,901	\$2,000
MAGI Adult Medicaid	\$1,800	No Limit

Service priorities

Service Priority Levels (SPL) are intended to prioritize those most in need:

SPL 1 is the **most** impaired

SPL 18 is the **least** impaired

Case managers assess for Activities of Daily Living:

- Mobility
- Eating
- Elimination
- Cognition
- Bathing
- Dressing
- Grooming
- Personal Hygiene

Assistance levels are determined by:

- Frequency
- Assistance types (e.g., hands-on assistance)

Individuals are assessed as:

- Independent
- Minimal Assist
- Assist
- Substantial Assist
- Full Assist

LTSS eligibility and services

Medicaid LTSS

- Serves SPL 1-13
- Medicaid funded
- Must need help with one or more of the following:
 - Elimination
 - Mobility (ambulation and transfer)
 - Eating
 - Cognition

Served by APD and Type B Area Agencies on Aging.

OPI - Classic

- Serves SPL 1-18
- State General Funds only
- Area Agencies on Aging make decisions on who they serve.

OPI - Medicaid

- Serves SPL 1-18
- Medicaid funded
- Expanded services
- Serve more people
- Consumers jointly served by APD and Area Agencies on Aging.

Medicaid LTSS Services	1915(K)/1915(C)	OPI-M	SPPC
Personal care for ADL and IADL Support	X	Х	Х
Long-term care community nursing	Х	Х	Х
Money Management Services	X		X
Crisis services	X	X	
Environmental Modifications	X	X	
Social isolation prevention	X	Х	
Community transportation	X	X	
Assistive Technology	X	X	
Adult Day Services	Х	Х	
Case Management Services	X	Х	
Risk assessment and monitoring	X	X	
Major clean up and safety mitigation (Chore services)	Х	Х	Х
Emergency Response systems	Х	Х	Х
Training and Support for self-direction	X	X	
Transition services	X		
Skills building	X		
Behavior supports	X		
Unpaid caregiver education and support		Х	
Health promotion and prevention		Х	
Special Medical Equipment & Supplies		Х	

"I love my case manager, I don't know what I would do without her."

Margaret, APD consumer



"To get them the help that they need is the best thing in the world."

- Marina, APD Case Manager

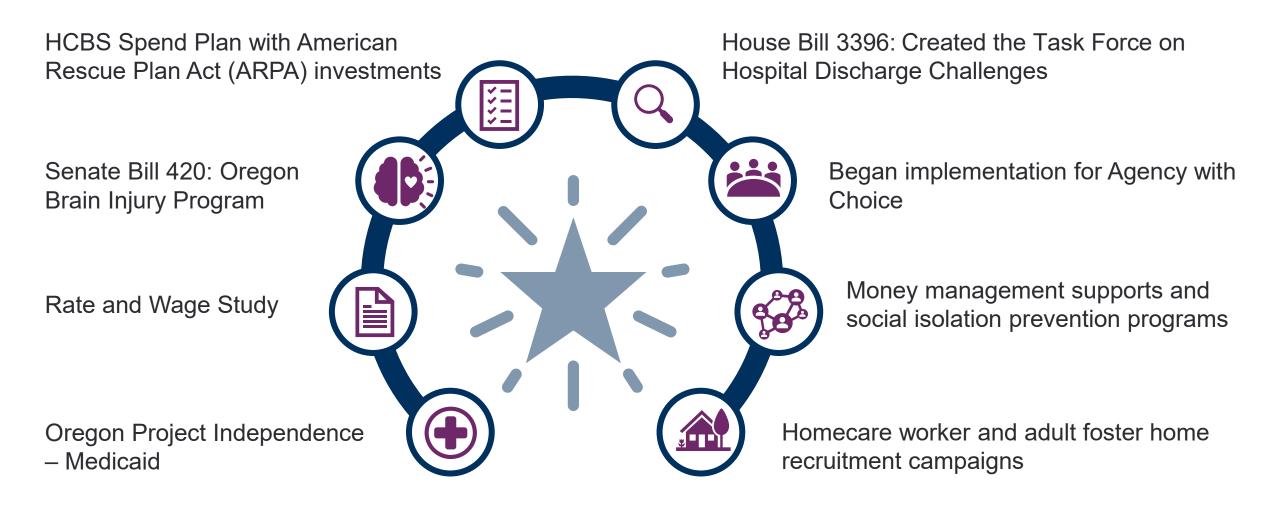
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Long Term Services and Supports: Key 2023-25 successes



HCBS Access Rule: New Reporting Requirements



- RateTransparency
- Grievance Process

- Person Centered
 Service Planning
- Critical Incidents
- Access Reporting

- New Assessment
- **Quality Measures**
- Direct Care Worker Compensation



Thank you.



