



Amanda Dalton
Oregon Resource Association
Opposition to HB 3838 -3 Amendment

Community Providers Offer These Services

Supported Living

Supported Living Services assist people to live independently in their own home, providing support in all aspects of their lives based on their needs and desires.



Since moving into Supported Living and having her own apartment, Jennifer has prospered in her independence. Jennifer said "I love having the independence and freedom I have now, and not having staff breathing down my back all the time. I love that I have more space for myself and get to do all the things I

24-Hour Residential

24-hour Residential Services assist people to live in their own home or with several housemates providing support in all aspects of each person's life 24-hours per day.



"Having supportive staff is needed for my life. They help me with things I struggle with, like making decisions on what to eat and Shana helps me go on vacations I have dreamt about. They are not just helpers they are advocates."

Employment Services

Employment Services assist people to identify career interests and to obtain and maintain employment.



"During my career as a job coach, I have had the privilege of witnessing many individuals overcome barriers at their employment and attain mastery of their job. Not only does this give them some financial independence, but they learn skills that will set them up for future

Community Living Support

Community Living Support Services assist people to learn a specific skill or to make identified connections in their communities.



"I love pictures and take photography class. Thanks to my DSP's encouragement, training and support I now learned how to use an iPhone that has a camera and now know how to take lots of pictures for my photography class. I have won many "picture

What do Community IDD Providers do?

Community Providers are Medicaid Certified non-profit organizations and other entities that act as state partners to provide services to people with intellectual, developmental and other disabilities. Providers receive a Service Payment for each person based on their support needs and are restricted by Medicaid rules and funds from legislature. The Service Payments are determined by a state approved rate model.

Key Elements of Service

Housing

Providers who offer 24-hour Residential Services or Supported Living assist people to obtain and maintain housing. The majority of people in these services are reliant on Social Security disability payments and are low income. Most would become houseless if they did not receive this assistance.

Providers assist people to identify and obtain low income housing assistance, as available. Many providers offer rental supplements or assistance.

Behavioral Health

Most of the people who receive these services experience coexisting disorders so providers assist people to manage a variety of mental health issues in addition to their intellectual and developmental disability.

Support provided includes assisting the person to obtain and access psychiatric assistance or therapy, obtaining and taking medication and creating and following behavior support plans.

Without these services, many people would end up in restrictive and costly services like psychiatric wards or jail.

Direct Support

Providers hire and supervise Direct Support Professionals (DSPs) to provide crucial support to adults and children experiencing intellectual, developmental and other disabilities.

Their work includes managing significant medical needs, challenging behaviors, personal hygiene, and support to maintain employment and make real connections in the community.

DSPs support people in all aspects of their lives which includes making life and death decisions for people with significant needs.

Process

- No Agency Engagement
 - No meetings
 - No analysis
 - No testimony

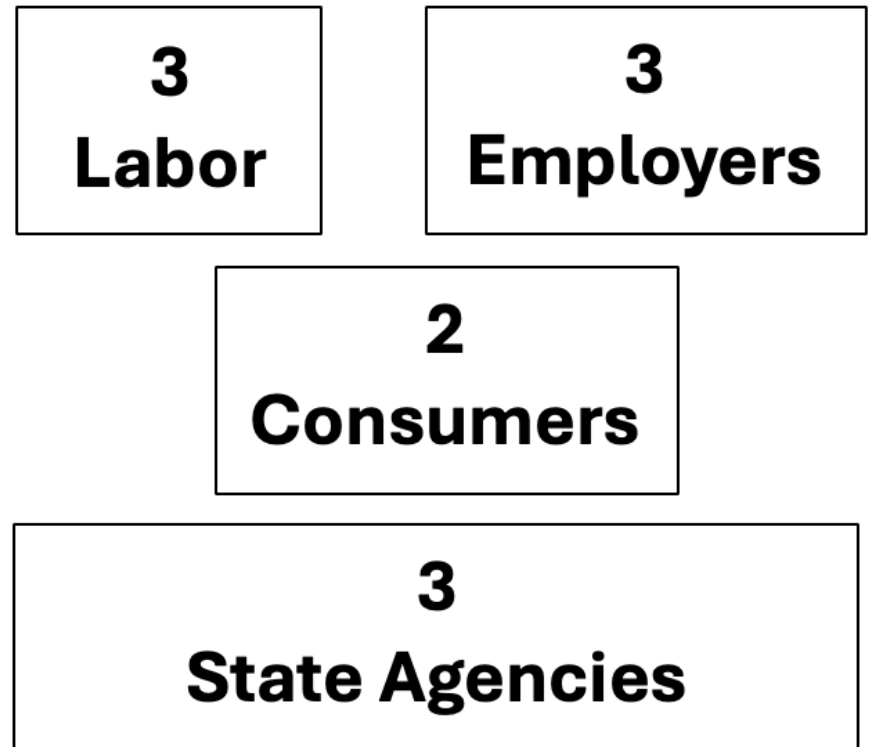
Board Make-up

- 11 Members
- Simple Majority Vote
 - 6 majority

Care Settings Regulated:

- 3 “(A) In-home care services;
- 4 “(B) Attendant care services;
- 5 “(C) Supported living services;
- 6 “(D) Adult foster homes;
- 7 “(E) Residential care facilities, including facilities with a memory
- 8 care endorsement under ORS 443.886 and assisted living facilities;
- 9 “(F) Residential training facilities or residential training homes;
- 10 “(G) Developmental disability child foster homes;
- 11 “(H) Domiciliary care facilities; and
- 12 “(I) Community-based structured housing.

Pg. 5, lines 3-12



SEIU 2023-25 CBA

Collective Bargaining Agreement



Between
The Department of
Administrative Services,
on Behalf of the State of
Oregon and the Oregon
Home Care Commission



And
Service Employees
International Union
Local 503, Oregon Public
Employees Union

NEW Letter of Agreement – MARKETING ADMINISTRATIVE RULE, RATE STUDY & AGENCY WITH CHOICE

- Requires the State to conduct a public rule making **process to create rules prohibiting certain types of solicitation of current Providers and current Consumers by Private Agencies**. Rules would include enforcement mechanisms.
- **Bars the State from advocating for any additional rate increases for Private Agencies** during the term of our contract.
- Requires APD/ODDS/OHA to coordinate Agency budget request across programs to **ensure equitable planning and distribution of funds for workers completing the same work**.
- **Requires ODHS to support the Union's efforts to create a new Provider type, Agency with Choice, where the Consumer and the contracted Agency are joint employers.**
- **Requires the State** to create materials and undertake a marketing campaign to **recruit new bargaining unit Providers.**

Rate Study:

The State will not advocate for additional rate increases for In-Home Attendant Care Provider Agencies for the 2023-2025 biennium in any program until completion of the legislatively mandated rate study is finalized, projected completion in September 2024, to ensure equitable planning and distribution of funds for workers completing the same work.

The State will coordinate Agency budget request based on the finding of the rate study and coordinated requests across all Home and Community Based Service programs.

Fiscal ‘Safety Valve’ – Not Real

-2 Amendment:

21 “(c) Consult with the Bureau of Labor and Industries, the Depart-
22 ment of Human Services and any other relevant state agencies, to
23 determine whether a proposed minimum standard will require any in-
24 crease to state funding levels or otherwise result in an increase in the
25 fiscal obligations of the state.

26 “(4)(a) If the board determines that a proposed minimum standard
27 will require any increase to state funding levels or otherwise result in
28 an increase in the fiscal obligations of the state, the board shall report
29 to the Legislative Assembly and to the Governor the increase in
30 funding needed to implement the standard.

-3 Amendment:

28 “(c) Ensure that the Bureau of Labor and Industries, the Depart-
29 ment of Human Services and any other relevant state agency are
30 provided an opportunity, upon request by any such entity, to conduct

1 a fiscal impact analysis to determine whether a proposed minimum
2 standard will require any increase to state funding levels or otherwise
3 result in an increase in the fiscal obligations of the state.

26 “(e) Establish requirements for itemized statements regarding de-
27 ductions from wages that meet or exceed the requirements under ORS
28 652.610, including a requirement that such statements are timely pro-
29 vided to a labor organization.”
30 “(3) Before establishing any minimum standards under this section,

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**Pay stubs redacted to protect personal privacy

SEIU State Bargaining 2025:

Employee Safety

We proposed these concepts on safety:

- Article 133 – Domestic Violence, Sexual Assault, Stalking or Human Trafficking Victim Leave: Removes requirement for exhaustion of all forms of paid leave prior to use. Records under this article are confidential. Notice provided to victims if perpetrator is returned to work.
- We also proposed two new letters of agreement to protect people's identity. One would ensure that people do not need to use their full names unless legally necessary for State business. The other would prevent the State from sharing worker's pronouns in information requests from outside the state.

Source: <https://seiu503.org/state-bargaining-2025/>

Enforcement

6 “**SECTION 8. Investigative authority.** In order to determine any
7 facts relevant to matters concerning implementation of and compli-
8 ance with the minimum standards established by the Home and
9 Community-Based Services Workforce Board under section 5 of this
10 2025 Act the Commissioner of the Bureau of Labor and Industries may
11 conduct investigations, issue subpoenas and subpoenas duces tecum,
12 administer oaths, obtain evidence and take testimony to the same ex-
13 tent that the commissioner may exercise such authority with respect
14 to the bureau’s duties as described under ORS 651.060.

29 “**SECTION 10. Remedies.** (1) No sooner than 90 days after a rule
30 establishing a minimum standard under section 5 of this 2025 Act takes

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1 effect, a worker from the home and community-based services
2 workforce or a labor organization may seek relief for an alleged vio-
3 lation of a minimum standard established by the Home and
4 Community-Based Services Workforce Standards Board under section
5 5 of this 2025 Act by:

6 “(a) Commencing a civil action in the circuit court of appropriate
7 jurisdiction for injunctive relief, damages or other appropriate equi-
8 table relief against any person alleged to have violated a minimum
9 standard; or

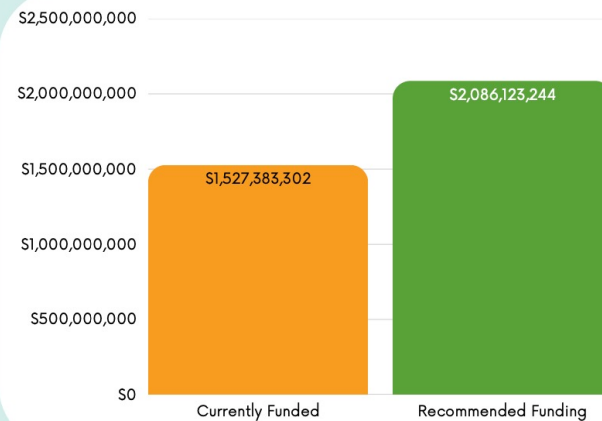
10 “(b) Filing a complaint with the Commissioner of the Bureau of
11 Labor and Industries in the manner provided by ORS 659A.820, not
12 later than one year after the date of the alleged violation. In addition
13 to any other penalty provided by law, the Commissioner of the Bureau
14 of Labor and Industries may assess a civil penalty under ORS 183.745
15 not to exceed \$1,000 for each violation of a minimum standard adopted
16 by the board under section 5 of this 2025 Act.

17 “(2) Upon prevailing in an action under this section, the plaintiff
18 may recover actual damages and the court shall award reasonable at-
19 torney fees and costs to the prevailing plaintiff.

**THIS WORKFORCE CAN'T AFFORD
TO WAIT ANY LONGER. REAL
INVESTMENT IS NEEDED TODAY.**



FUNDING GAP: \$558,739,942



STABILIZE THE DSP WORKFORCE. DON'T LET OREGON'S IDD SERVICE SYSTEM FALL FURTHER BEHIND.



Oregon's community providers have been underfunded for decades and face an unprecedented crisis of increased demand, high turnover and stagnant wages that don't recognize cost of living increases, longevity incentives or the actual cost of benefits.

In 2023, the Legislature directed DHS to prepare a Rate & Wage Study further evaluating home and community-based service delivery systems. The study reviewed wages and payment rates for Home and Community-Based Service (HCBS) providers who work in people's homes, group homes, foster homes and residential care facilities.

The report, released in January of 2025, is the first time a figure can be attached to answer what is needed to stabilize this workforce and ensure the system doesn't fall further behind. **A cost of \$558M.**

OUR ASK FOR THE 2025-27 OREGON BUDGET: FULLY FUND THE RATE & WAGE STUDY RECOMMENDATIONS

And at a minimum, to ensure community provider organizations and their workers don't fall further behind, targeted investments are needed:

- **Ensure a minimum wage for all Direct Support Professionals (DSPs) of \$25 per hour**
- **Tie wages and benefits in community provider rate models to an annual inflator so when costs and minimum wage goes up so does this payment**
- **Provide longevity pay to reward those Direct Support Professionals and Managers that have stayed in the IDD system**

Oregon Rate & Wage Study

Oregon Rate and Wage Study

In 2023, the Oregon Legislature asked the Oregon Department of Human Services (ODHS) to carry out a rate and wage study. The study focused on providers of in-home and residential care for individuals served by the ODHS Office of Aging and People with Disabilities (APD) and the ODHS Office of Developmental Disabilities Services (ODDS). The types of providers evaluated were:

- APD-licensed adult foster homes and ODDS-certified foster homes
- Adult Day Services and Day Support Activities
- Assisted Living Facilities
- Residential Care Facilities
- Discovery
- In-Home Services and Attendant Care
- Job Coaching and Development
- Small Group Supported Employment
- Specialized Living Program
- 24-Hour Residential

ODHS hired Burns & Associates, part of Health Management Associates (HMA), to conduct the rate and wage study. A final report with recommendations was provided to the O

Background

Tens of thousands of Oregonians with disabilities and older Oregonians depend on direct-care workers for help with daily tasks, managing their health, accessing the community and staying independent. People may receive care in their own homes, foster homes, assisted living facilities, group homes, adult day programs and other community settings.

State and federal Medicaid funds pay for these services. The decision to change how much providers are paid is up to the Oregon Legislature.

In 2023, the Oregon Legislature directed the Oregon Department of Human Services (ODHS) to conduct a study of payment rates for service providers. The study focuses on services provided through the ODHS Office of Aging and People with Disabilities (APD) and the ODHS Office of Developmental Disabilities Services (ODDS). The purpose of the study was to find ways to ensure the state can meet the growing demand for services.

Based on these findings, the study recommends:

- Establishing transparent rate models to reflect current costs of delivering services.
- Standardizing total compensation for direct care workers across systems, services and service delivery models by:
 - Raising the average wage for direct care workers employed by agencies to \$23.20 per hour, which would equal about \$48,000 annually, and including funding for comprehensive benefits.
 - Increasing base wages for self-employed direct care workers by \$4.50 per hour to match these new payment models.
- Creating a new requirement for agencies to report direct-care worker wages and benefits, staffing levels, and other data. This data would show how agencies use their payments and inform future rate changes.

Source: https://www.healthmanagement.com/wp-content/uploads/Rate-and-Wage-study-plain-language-executive-summary_EN.pdf