

SB 136 A STAFF MEASURE SUMMARY

Senate Committee On Human Services

Action Date: 04/09/25

Action: Do pass with amendments and requesting referral to Ways and Means. (Printed A-Engrossed.)

Vote: 3-2-0-0

Yeas: 3 - Gelser Blouin, Prozanski, Reynolds

Nays: 2 - Linthicum, Nash

Fiscal: Fiscal impact issued

Revenue: No revenue impact

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Meeting Dates: 2/11, 4/3, 4/9

WHAT THE MEASURE DOES:

The measure requires the Department of Human Services (ODHS) to revoke the license, certificate, or endorsement of certain providers of services or residential care for individuals with intellectual or developmental disabilities (IDD) under certain circumstances. The measure further authorizes ODHS to revoke, suspend, or impose conditions on the license, certificate, or endorsement of a provider if it finds that there is a risk to health, safety, rights, or welfare of individuals served.

Detailed Summary:

- Requires ODHS to revoke the license, certificate, or endorsement of an agency, adult foster home, or developmental disabilities child foster home that serves individuals with IDD in response to certain violations.
- Specifies the violations and minimum ineligibility periods, including
 - one year if a responsible person denies ODHS access to a facility or an individual receiving services,
 - one year if a responsible person interferes with or manipulates records,
 - three years if a responsible person's persistent or egregious actions or failures resulted in or could result in death or serious harm.
- Authorizes ODHS to revoke, suspend, or impose conditions on the license, certificate, or endorsement of a provider if ODHS finds that a provider's operations place the health, safety, rights, or welfare of individuals at risk.
- Directs ODHS to adopt rules prescribing ineligibility periods related to other violations, including
 - repeated rights violations,
 - failure to make mandatory abuse reports,
 - repeated substantiated abuse allegations,
 - failure to complete corrective actions plans,
 - repeated failure to provide access to care,
 - repeated failure to document and report incidents as required by law, and
 - repeated failure to adequately train and supervise employees.

ISSUES DISCUSSED:

- Requirements for providers under the Community First Choice option
- Regulatory authority of the Department of Human Services (ODHS) to enforce requirements
- Mandated exclusion periods
- Effect of federal excluded provider list
- Providers facing criminal investigations
- Current authority of ODHS to penalize providers

EFFECT OF AMENDMENT:

This summary has not been adopted or officially endorsed by action of the committee.

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The amendment replaces the measure.

BACKGROUND:

The Department of Human Services (ODHS), through the Office of Developmental Disability Services (ODDS), manages home and community-based services (HCBS) for individuals with intellectual and developmental disabilities (IDD) under [Medicaid's Community First Choice](#) option, or "K Plan," as provided by [sections 1915\(c\) and 1915\(k\) of the federal Social Security Act](#) and [section 2401 of the Affordable Care Act](#). Oregon is one of five states to provide these services to individuals with IDD under its state Medicaid plan. Under the [K Plan](#), individuals with IDD whose needs would otherwise qualify them for an institutional level of care are instead able to receive services from local providers in their homes and communities. Depending on the services provided, providers must either be licensed, endorsed, or certified by ODHS or the Oregon Health Authority in order to provide HCBS under the state Medicaid plan. Providers of HCBS for individuals with IDD include adult foster care, group homes for adults and children, adult day centers, and in-home care providers, which are regulated by ODHS under [OAR chapter 411](#).

The Inspector General of the U.S. Department of Health and Human Services is [authorized](#) by [sections 1128 and 1156](#) of the Social Security Act to temporarily or permanently exclude certain individuals or entities from participating in federally funded health programs, which applies to all programs funded through Medicaid. Generally, this applies to individuals who have been convicted of certain crimes or committed other offenses relating to abuse, fraud, or making false statements. The Inspector General maintains a [List of Excluded Individuals/Entities](#) to inform the public about exclusion decisions.