

SB 909-2
(LC 2750)
4/2/25 (RH/ps)

Requested by Senator GELSER BLOUIN

**PROPOSED AMENDMENTS TO
SENATE BILL 909**

1 On page 1 of the printed bill, line 2, delete “and section”.

2 In line 3, delete “3, chapter 96, Oregon Laws 2024”.

3 Delete lines 5 through 24 and delete pages 2 through 5 and insert:

4 **“SECTION 1. In determining eligibility for medical assistance, as**
5 **defined in ORS 414.025, for an individual who is under 18 years of age**
6 **and has a physical disability or chronic illness that requires a hospital**
7 **or nursing home level of care, the Oregon Health Authority and the**
8 **Department of Human Services shall disregard the income of the**
9 **individual’s parents and consider only the income of the individual.**

10 **“SECTION 2. (1) The Oregon Health Authority shall:**

11 **“(a) Prescribe by rule the level of care criteria for admission to a**
12 **facility providing psychiatric services to individuals under 21 years of**
13 **age;**

14 **“(b) Adopt an assessment tool or functional needs assessment to**
15 **determine whether an individual meets the level of care criteria pre-**
16 **scribed under this subsection; and**

17 **“(c) Adopt an assessment tool or functional needs assessment to**
18 **establish the level of services necessary to support an individual who**
19 **meets the level of care criteria prescribed under this subsection to be**
20 **successful outside of an institutional setting.**

21 **“(2) An individual who meets the level of care criteria prescribed**

1 under subsection (1) of this section is eligible for medical assistance,
2 as defined in ORS 414.025, if home and community-based services are
3 necessary to prevent the individual from being placed in an institu-
4 tional setting.

5 “(3) An individual who has been determined to meet the level of
6 care criteria prescribed under subsection (1) of this section shall con-
7 tinue to meet the criteria if:

8 “(a) The provision of home and community-based services stabilized
9 the individual and removal of the home and community-based services
10 is likely to put the individual at risk of placement in an institutional
11 setting; or

12 “(b) The individual has been discharged from an institutional set-
13 ting and requires home and community-based services to prevent the
14 risk of returning to an institutional setting.

15 “SECTION 3. ORS 417.345 is amended to read:

16 “417.345. (1) The Medically Involved Home-Care Program is created in the
17 Department of Human Services. The department shall provide all State Plan
18 Medicaid and waived services available under state and federal law that
19 are necessary to enable a medically involved child to be cared for in the
20 child’s home. The waived services that must be available include but are
21 not limited to home nursing care, durable medical equipment and respite
22 care.

23 “(2) The department shall adopt by rule criteria for determining the need
24 for and extent of assistance to be provided to a medically involved child
25 enrolled in the Medically Involved Home-Care Program [*created by subsection*
26 *(1) of this section*]. The criteria shall include, but are not limited to, consid-
27 eration of:

28 “(a) The medical needs of the child;

29 “(b) The needs of any other family member with a disability or chronic
30 illness in the child’s home;

1 “(c) Family and community support available to the child and family
2 caregivers; and

3 “(d) The assistance necessary for the family to care for the child in the
4 child’s home, disregarding parental or legal guardian income.

5 “(3) [*Subject to limits on enrollment required by state or federal law,*] Ser-
6 vices offered through the Medically Involved Home-Care Program shall be
7 made available to children meeting the criteria established by the depart-
8 ment by rule. Priority for enrollment shall be given to:

9 “(a) A child transferring to the child’s home from nursing home place-
10 ment, foster care placement or other out-of-home placement;

11 “(b) A child living at home who is at risk of nursing home placement,
12 foster care placement or other out-of-home placement;

13 “(c) A child who does not otherwise qualify for medical assistance under
14 ORS chapter 414 and for whom the department pays family support payments
15 pursuant to ORS 430.215 that exceed \$10,000 per year; and

16 “(d) A child who is at risk of losing eligibility for medical assistance
17 under ORS chapter 414 due to a caregiver’s employment or an increase in a
18 caregiver’s earnings.

19 “[*(4) The department shall enroll no fewer than 125 medically involved*
20 *children in the Medically Involved Home-Care Program beginning January 1,*
21 *2008. The department shall enroll an additional 25 medically involved children*
22 *each calendar year thereafter, to the maximum number allowed by federal law*
23 *or under the terms of the federal approval.*]

24 “[*(5)*] (4) Moneys appropriated to the department for the Medically In-
25 volved Home-Care Program may not be used to supplant moneys appropriated
26 to the department for the Children’s Intensive In-Home Services program.

27 “[*(6)*] (5) As used in this section, ‘child’ means a person under 18 years
28 of age.

29 **“SECTION 4. (1) No later than January 1, 2026, the Oregon Health**
30 **Authority shall seek any waiver or other necessary approval from the**

1 Centers for Medicare and Medicaid Services to carry out the provisions
2 of sections 1 and 2 of this 2025 Act.

3 “(2) The authority shall notify the Legislative Counsel immediately
4 upon receipt of the approval or denial of each request under subsection
5 (1) of this section.

6 “SECTION 5. (1) Sections 1 and 2 of this 2025 Act become operative
7 on the date on which the Legislative Counsel receives notice of the
8 federal approval as provided under section 4 of this 2025 Act.

9 “(2) The Oregon Health Authority and the Department of Human
10 Services may take any action before the operative date specified in
11 subsection (1) of this section that is necessary for the authority and
12 the department to exercise, on and after the operative date specified
13 in subsection (1) of this section, all of the powers, duties and functions
14 conferred on the authority and the department under sections 1 and
15 2 of this 2025 Act.

16 “SECTION 6. This 2025 Act being necessary for the immediate
17 preservation of the public peace, health and safety, an emergency is
18 declared to exist, and this 2025 Act takes effect on its passage.”.