



Oregon
Community
Brokerages

January 30, 2025

To: Sen Gelser-Blouin, Chair, Senate Committee on Human Services

From: Katie Rose, Executive Director, Oregon Community Brokerages

Re: Support for SB 725, capping caseloads for IDD case management at 1:30

Chair Gelser-Blouin and members of the committee,

Oregon Community Brokerages is comprised of the 14 Support Service Brokerages across Oregon. Collectively, we provide case management services to nearly 8,000 adults with intellectual and developmental disabilities (IDD) living in their own or family homes in every community throughout the state. We connect people with what matters to them and support them to make the important decisions and choices that shape lives.

Everyone needs someone in their corner. We all do better when we're navigating difficult or intimidating life situations alongside a trusted advocate. For many people with intellectual and developmental disabilities in Oregon, that person is their case manager. But what happens when that person is tasked with walking alongside dozens of other people? Our case management system for people with IDD has been stretched increasingly thin over the past decade. Workloads have grown each year while funding has not kept pace. We support SB 725 and the intent to center people with IDD and their desire for more responsive case management services.

We stand behind advocates with IDD sharing their truth and asking for what they need. Brokerages are founded on the principle that services are better when they are designed, implemented, and monitored by the people who use them. People want more from their current services, and their experiences are valid. We believe them, we defer to their knowledge of themselves and their needs, and we support this bill and this request because of that fundamental value.

IDD Case Management is not currently funded to meet this caseload ratio.

Brokerages join with CDDPs to comprise the network of case management entities that serve most Oregonians with IDD. Our Workload Model assumes caseload ratios for adults receiving in-home services that are close to the 1:30 number cited in SB 725. However, the Workload Model for IDD case management has never been fully funded, and it

currently sits at 86% funding. The cost for IDD case management grows each year as more people are served, but the percentage of the work that is funded has not kept up.

Even with full funding, there can and should be variation in the staffing structure from CME to CME around the state. Case management services are most effective when they can adapt to meet the needs of the people they serve and the conditions at hand. There are positions not funded by the Workload Model that enhance and make possible the work of Brokerages, including:

- Support staff who take administrative tasks out of the hands of case managers.
- Positions that focus on supporting self-advocates to engage in system design and direction, which is a hallmark of self-determination.
- Floating case management positions that are able to fill in when a case manager is out on leave or when there is turnover.
- Staffing patterns with varying caseload ratios to serve multiple counties across large geographic regions, yielding more efficient services overall.
- Quality Assurance work to ensure the accuracy of Medicaid billing and other mandated paperwork.

They often do this at the cost of slightly higher caseloads. But this flexibility is what creates value for people with IDD and helps us meet their needs. We would ask that flexibility be built into the implementation of this bill to allow for each program to create a staffing structure that works for the geography and for the people it serves.

We have other questions and concerns about how this ratio cap would be operationalized. As mostly small nonprofits, we hope that the realities of recruiting and hiring qualified staff, supporting personnel with leave, and serving shifting demographics can all be considered in the implementation of this ratio cap.

Case management efficacy is tied to provider skill and availability. Our Personal Agent case managers connect people to resources, including supporting them to recruit, interview, tour, and hire or retain direct service providers. Once in place, case managers work alongside providers to monitor that services are provided as authorized. That work becomes exponentially more difficult during the crisis of underfunding and scarcity impacting our agency providers of IDD direct services.

Thank you, Senate Committee on Human Services, for the opportunity to provide these comments in support of SB 725. Thank you to Senator Gorsek for sponsoring this bill, and thank you to the self-advocates who brought this concept forward to ask for what they need. We urge your support for this bill and adequate funding for IDD case management.