# SB 725: Case Management Ratios

# Summary

Senate Bill 725 requires the Office of Developmental Disabilities Services (ODDS) to adopt by rule a minimum staffing ratio of 30 individuals with intellectual or developmental disabilities (I/DD) to one case manager.

# **Case Management Information**

## Oregon's Case Managers for Individuals with I/DD

A case manager is a qualified professional responsible for delivering person-centered case management services. Case managers are employed in one of the following roles:

- As a personal agent at a Brokerage, serving adults that live in their own or family home
- As a services coordinator at a Community Developmental Disabilities Program (CDDP) serving adults or children living in any setting
- As a services coordinator at the Department for children with intensive support needs and children living in residential settings

#### 2025 I/DD Case Management Enrollment Totals

Case Management Provider	Brokerage	CDDP	ODHS
Individuals served	7,892	31,099	638

#### **Case Management Services**

Case management encompass an array of activities designed to meet the specific needs of children and adults with intellectual and developmental disabilities (I/DD) in Oregon, as the foundation of the I/DD service system. Case management is person-centered, supporting individuals' specific life circumstances, needs, and preferences. The core case management responsibilities include:

- Assessing support needs including activities of daily living, instrumental activities of daily living, risks, behavior-, and health-related needs
- Developing and updating an Individual Support Plan (ISP) or Annual Plan in partnership with individuals and teams of their choice
- Providing information and referrals for needed services and community resources
- Monitoring the effectiveness of services and supports provided, including monitoring safety, satisfaction, and progress toward desired outcomes

#### **Spotlight on Monitoring**

Case managers are required to monitor services for each person on their caseload at least quarterly, and monthly for people with higher risks or specific needs. These contacts occur in person, on the phone, or virtually depending on a person's preferences with at least one in-person visit required

annually. Regular monitoring provides an opportunity to reassess goals and adjust the ISP to ensure that services remain aligned with the person's needs and preferences. Monitoring includes reviewing all incident reports, reviewing emergency department visits, coordinating with other service systems, and follow up to ensure issues are resolved.

## **Caseload sizes**

A statewide survey conducted in 2021<sup>1</sup> showed that 87% of community partners either agree or strongly agree that there should be "a consistent maximum caseload size for individual case managers, for all case management entities statewide." Oregon's case managers have a wide range of caseload ratios, from as few as 25 to as many as 82.

As of 2022, 20 states (44%) had set caseload ratios while 25 states (56%) did not<sup>2</sup>. Ten states have caseload ratios fewer than 1:35 and eight have ratios between 1:40 and 1:45.

## **Current Case Management Funding**

Case management funding is based on a workload model that has assumed caseload ratios based on age, service setting and estimated time available to provide case management services. The time available to provide services starts with a full work year (2,080 hours) and then subtracts time to account for paid leave, staff and supervisory meetings, authorized breaks, administrative tasks, and training.

As of 2022<sup>3</sup>, the workload model assumes one case manager for every:

- 31.5 adults in foster care
- 27 adults in-home
- 38 adults in 24 hour res
- 48 adults in supported living
- 41 adults in case management only

- 20 children in in-home
- 15 children in foster care
- 53 children in 24 hour res
- 12 children in family support
- 229 children in case management only

An across-the-board 1:30 case manager:individual ratio would have a significant fiscal impact. A fiscal impact statement from ODHS will be prepared if this committee seeks to advance the bill.

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<sup>&</sup>lt;sup>1</sup> <u>https://www.oregon.gov/odhs/idd/Documents/odds-blueprint-project-recommendations-en.pdf</u>

<sup>&</sup>lt;sup>2</sup> <u>https://www.nasddds.org/wp-content/uploads/2022/09/MedicaidCaseManagement.pdf</u>

<sup>&</sup>lt;sup>3</sup> <u>https://www.oregon.gov/odhs/providers-partners/idd/Documents/2023-01-cme-rate-study-report.pdf</u>