



Oregon's Voice for Long Term Care & Senior Housing

February 11, 2025

Senate Committee on Health Care
Oregon State Capitol
900 Court St. NE
Salem, OR 97302

Re: OHCA Supports SB 296

Chair Patterson, Vice Chair Hayden, and Members of the Committee,

Oregon Health Care Association (OHCA) represents more than 90 percent of long term care providers across the state. Our members include nursing facilities/post-acute care, assisted living, residential care, and memory care communities, as well as in-home care agencies. We are committed to serving all older adults and people with disabilities in need of long term services and supports, as well as those caregivers and clinical staff who care for them.

We are grateful for the work of the Joint Task Force on Hospital Discharge Challenges over the last 18 months and were aligned with its guiding principles: That recommendations be consensus, reduce discharge delays, be patient-centered and considerate of the needs of housing insecure individuals, and are actionable in a manner that does not shift backlogs to other parts of the care continuum. If fully implemented and appropriately funded, the policies and directives put forward in SB 296 would provide meaningful outcomes for Oregon's health care system and help the post-acute sector better partner with hospitals and other social service providers to serve Oregonians.

There are four components of SB 296 that we urge lawmakers to prioritize this session:

1. Remove systemic barriers to access Medicaid long term services and supports (Sections 1 & 2):

- a. A root cause of hospital discharge delays uncovered by the Task Force was getting individuals assessed and approved for Medicaid. Determination delays can cause stress and adverse care outcomes for consumers and providers alike. We are pleased to see the bill focus on improvements in these areas. From our perspective, a successful outcome would be for most Medicaid applications to be

approved or denied within a 10-day period for individuals awaiting discharge from a hospital. For applications that cannot be expeditiously resolved, we would like to see the state adopt a triage framework that allows for timely determination given the current resources allocated for this work. Given the volume of work, meeting these outcomes will likely require the Legislature to make needed investments on agency staff and resources.

- b. We would offer a note of caution Section 2(h), which directs ODHS and OHA to explore the concept of implementing presumptive eligibility for long term services and supports. Presumptive eligibility must be structured in a manner that guarantees long term care providers will not be saddled with unpaid debts if individuals presumed to be eligible are admitted into facilities and are then determined to be ineligible for Medicaid-covered long term care services and supports. Unlike hospital settings, many long term care communities serve as an individual's home. This contingency could potentially be addressed by establishing a state fund to cover those costs, but it is not clear how that would be structured or if there are General Fund resources available for this purpose.

2. Waiving or streamlining Medicaid LTSS asset testing (Section 3):

- a. We are supportive of moving forward with reforming Oregon's Medicaid asset-limits as a matter of equity and access for all low-income Oregonians. Streamlining asset testing for eligibility determinations could also have added value by enabling Oregon to adopt more automated eligibility determination systems, improving productivity and capacity of case managers, and making the enrollment process friendlier and more accessible for families.

3. Enhance regulatory alignment and reduce disincentives (Section 4):

- a. Long term care facilities are highly regulated by state and federal rules. Some of these rules constrain admission and care for residents with complex care needs. Today's regulatory system does not incentivize providers to serve the kind of high-acuity residents that hospitals are challenged to discharge. Preventing undue burden and cultivating a more collaborative regulatory environment will allow providers to deliver effective, high quality care while moving patients through the care continuum in a safe and efficient manner. We support the Task Force recommending an assessment of regulations with the goal of ascertaining whether policies could better align with the evolving needs of individuals seeking care in our long-term care system. Completing this assessment and acting upon its results is even more imperative as the state explores new and innovative models of care developed with this population in mind.

4. Extend Oregon's Post-Hospital Extended Care Benefit (Section 6):

- a. Extending the post-hospital extended care benefit under the Oregon Health Plan would be of value to consumers and the acute and post-acute care systems. We support extending the benefit to align with the maximum length of a Medicare-covered to stay to 100 days.

Thank you for the opportunity to provide feedback on SB 296 and urge your support of this measure with the additional clarifications outlined above.

Sincerely,

Libby Batlan

Senior Vice President of Government Relations
Oregon Health Care Association