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Date: March 11, 2025

To: Chair Gelser Blouin, Vice-Chair Linthicum  
and Members of the Senate Committee on Human Services

From: LeadingAge Oregon

Subject: Opposition to SB 34 - Requires the Department of Human Services to study long term care.

LeadingAge Oregon is an association of housing and long-term care providers, and we have concerns about Sections 2 and 4 of the proposed -1 Amendment of SB 34. Since approximately 90% of our members are nonprofits, they already operate with significant transparency through IRS 990 filings, which publicly disclose key details such as board composition, financials, and operational information on platforms like Guidestar and the IRS website.

Section 2 of the -1 Amendment directs the Department of Human Services (ODHS) to study whether additional ownership and operational disclosures are needed. We are concerned about potential duplication, as providers already disclose extensive information. Adding more reporting requirements may not provide meaningful value to consumers but would increase administrative burdens.

Rather than imposing new disclosure mandates, we recommend supporting consumers by helping them understand and utilize existing information. In our experience, families and residents select care providers based on location, bed availability, and payer source, not on business or operational details such as land ownership or contracted services.

At LeadingAge Oregon, we strongly support transparency efforts, but instead of requiring providers to submit redundant or expanded operational details, we urge ODHS to explore ways to better present and communicate existing data to older adults and their families. We'd like to see the state make information more accessible and consumer-friendly, rather than inundating consumers with complex data that is unlikely to influence or improve their decision-making.

One of the most concerning provisions in the -1 Amendment is Section 4, which considers allowing public input before ODHS approves ownership changes. Given the financial and regulatory pressures facing providers, several nonprofit long-term care facilities in our membership have had to sell to for-profit entities to remain operational. Requiring public comment would add another barrier to an already complex and highly regulated transition process.

Further, it is unclear how public input would enhance the ownership approval process or how ODHS would utilize the public comments. Instead, it risks causing delays that could disrupt operations, workforce stability, and resident care.

Rather than broadly expanding disclosure mandates, we recommend that ODHS first conduct a study to determine what specific consumer information is most valuable. Much of this information already exists and is reported to both the State and CMS, yet it is not presented in a way that is easily accessible, meaningful, or useful to consumers.

Let's focus on making data more consumer-friendly so that older adults and their families can make informed choices without being overwhelmed.

We appreciate your time and consideration of these concerns and welcome the opportunity to discuss potential amendments to refine Sections 2 and 4.

Respectfully submitted,

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LeadingAge Oregon