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Dr. Charlene Williams

Director of the Department of Education

TO: Chair Frederick & Members of the Senate Education Committee

DATE: May 9, 2025

FROM: Zoe Larmer, Government Relations Director

RE: Questions posed during HB 2670 public hearing

Chair Frederick and Members of the Senate Education Committee,

Thank you so much for the opportunity to share more information. We are more than happy to continue providing information to you on our work and look forward to our continued partnership on behalf of all Oregon students. Please do not hesitate to reach out to me if you need further clarification.

With gratitude,
Zoe Larmer

Question: Could we get more information about HB 2670 as ODE interprets the bill?

The Oregon Department of Education (ODE) commends the intention behind HB 2670 to guarantee that no student is deprived of the support they need. At this time, we are unaware of any instances indicating that students have been denied services or have experienced delays in accessing the support they need via the current definitions.

HB 2670 proposes to redefine the IDEA disability category currently termed “Traumatic Brain Injury” (TBI) by adopting an expansive medical definition of brain injury, as codified in ORS 410.750. This definition would encompass brain injuries from any source, internal or external, thereby broadening the eligibility for this traditionally low-incidence category. For example, students with various medical conditions (e.g., neurological disorders, cerebrovascular accident, aneurysm, anoxic brain injury, brain tumor, anxiety, depression, obsessive-compulsive disorder, post-traumatic stress disorder) experience changes in their brains that impair one or more critical functions listed in ORS 410.750. These changes could be classified as “damage to the brain from an internal source,” potentially making these students eligible for the Brain Injury category under HB 2670.



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These students undoubtedly deserve support; they are already potentially eligible under existing IDEA categories, such as Emotional-Behavior Disability or Other Health Impairment (OHI).

Adopting HB 2670 could significantly expand the number of students eligible for the Brain Injury category in special education. As a low-incidence category, students eligible for TBI also qualify for Regional Inclusive Services (RIS). Extensive efforts have been made to update the funding formula for RIS, and these efforts could be adversely affected if the number of students eligible for TBI increases due to the new, broader definition.

It is important to clarify that the concern is not about denying support to students with internal brain injuries. These students are already potentially eligible under existing disability categories. Note too that eligibility for special education, regardless of category, requires a comprehensive evaluation and must be determined on the same timeline. Eligibility under every category requires the eligibility determination to be made within 60 school days.

The Legislature has options to address named concerns by individuals.

1. The clearest and most helpful solution to address the issue would likely be to require the Department to provide guidance and technical assistance around students with an internal brain injury being potentially eligible for special education and related services under OHI, among other categories, as applicable.
2. The Legislature could require the State Board of Education to adopt a rule regarding internal brain injuries, which would then be included within the OHI definition.
3. The Legislature could choose to explicitly include internal brain injuries within the OHI category, which the State Board of Education could then adopt by rule. An example of such specification exists in ORS 343.035(1)(d), which includes blindness within the category of visual impairment.

If the Legislature wants to ensure this intent to support all students with brain injuries, regardless of source, it could amend the bill to update ORS 343.035(1)(h) to read “Other health impairment, including internal brain injuries.” This amendment would make their inclusion explicit without altering the definition and potential incidence of TBI.



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OHI is not a low-incidence category, so expanding the number of students eligible for OHI would not impact the work being done to stabilize the RIS funding formulas and sustain this vital program. Students with internal brain injuries eligible under OHI would still receive all necessary services and supports to ensure a free appropriate public education (FAPE), as determined by their Individualized Education Program (IEP) team.

All students should receive the support they need, and students with internal brain injuries can already receive that support through an existing category without fundamentally altering the definition and potential incidence of TBI. ODE offers the above solutions to address the intent behind the bill.