



An Advocate's Guide to the Proposed Budget Cuts to Programs for Seniors and People with Disabilities

1. What is being proposed? Why would anyone propose cuts to programs for seniors and people with disabilities?

In order to be prepared for possibly lower revenue available than was anticipated for the last half of the 2011-13 biennium, all state agencies were required to submit proposals to the Governor and Legislature that provided potential budget cuts to reduce their budget by 3.5%, 7% and up to 10.5%. All agencies in state government were required to complete these lists and hit those targets in proposals regardless of what kinds of impacts those proposals could potentially have if implemented. These "Reduction Options" lists are posted on the legislative website.

No decisions have been made on what will be cut if there are reductions necessary but the lists show what would be considered. The Department of Human Services created the lists for seniors and people with disabilities. You can find the lists on the o4ad website under 'documents'.

2. What programs are proposed as options for budget cuts?

The potential cuts for programs serving seniors and people with disabilities are very severe. Due to previous cuts in programs for these vulnerable populations, there is no longer any area left to cut that will not impact the clients directly. The cuts that would impact services directly include:

Elimination of Oregon Project Independence in the first tier of cuts

- Eliminate adult day services in the first tier of cuts
- Eliminate home delivered meals provided by Medicaid in the first tier of cuts
- Reducing staffing for AAA's that provide Medicaid services – reducing their ability to meet the needs of Medicaid clients and those seeking Medicaid services in the first tier of cuts – and lose over 60 FTE and their jobs. This could include financial eligibility, case management, adult protective services or diversion/transition staff in Area Agencies
- Limit total in-home hours of care for Medicaid clients to 80 hours in the second tier of cuts, 60 or 40 hours in the third tier of cuts

3. Will I or my friends/family lose services?

We hope not. But it is possible. It is hard to say at this point. If the cuts on these lists that affect services and the staff that help individuals become eligible for those services and develop the care plans, then services and clients will be impacted. At this time, we cannot predict how this will turn out but advocacy is critical to be sure legislators know that these cuts cannot be an option. This is too heavy of a burden to place on Oregon's seniors and people with disabilities. These proposals impact life and death for individuals. And there is no safety net – cuts would simply leave these people without help.

4. **What will happen to Oregon Project Independence?**

Oregon Project Independence continues to be suggested as an option for cutting even though it continues to show tremendous cost savings to the state, helps individuals manage chronic health conditions, keeps people off of the significantly more costly Medicaid system altogether or delays premature entrance to entitlement programs.

OPI has been proposed for elimination as a part of the first tier of cuts, which would result in all current OPI clients losing services under this program and being forced to make difficult decisions to enter the Medicaid system at an **immediately higher cost to the state general fund** or potentially wait until they decline in health to a point of severity that would require more costly interventions. Seniors who are currently on the wait lists of OPI would be forced to then look at Medicaid for help in retaining their independence.

OPI has a role in health system transformation as a cost effective, proven strategy to help individuals manage chronic health conditions, avoid more costly acute care interventions and prevent premature and/or unnecessary entrance into the Medicaid system. Elimination of this program will only further limit opportunities for cost savings in the health care and long term care system and most importantly, will gravely endanger current clients.

5. **Who will decide if and which cuts are made to the budget and programs?**

The February legislative session will be where decisions are made about the state of the budget and how to manage any deficits that may exist. There will be another revenue forecast on February 8th that will give legislators a look and what the budget status will be in the last half of the biennium. If cuts are needed to balance the budget, legislators will then begin deliberation of potential cuts in Ways & Means committees throughout February and pass final budget cuts before they gavel out at the end of the session. All legislators will have a vote on budget cuts and Ways & Means members will be intimately involved in this process. You can find a list of legislators and their committees on the legislative website: www.leg.state.or.us - Committees.

6. **What can I do?**

There is a lot you can do. Join our advocacy network to receive the latest information on what's happening at the capitol and with the budget. Let your local Area Agency on Aging and/or Advisory Council know you want to advocate. We can help you get involved with our legislators!

Email O4AD – info@o4ad.org or call us: 503-463-8692 to get involved. We need your help now more than ever to protect services to Oregon's seniors and people with physical disabilities. Our advocates provide a critical voice for Oregon's seniors and people with disabilities.

Ask your neighbors, family and friends to be involved. Make your voice heard this session to be sure that our seniors and people with disabilities aren't asked to carry the budget load for the state of Oregon.

O4AD will keep you informed about status of the budget deliberations and will give practical ideas about things that you can do to help during the next Legislative Session.

Join our advocacy network at www.o4ad.org.

For more information, please contact Nicole Palmateer Armstrong, O4AD. nicole@o4ad.org or 503-463-8692.