

Presentation to the 2025 Joint Ways and  
Means Subcommittee on Human Services

# Office of Aging and People with Disabilities

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Nakeshia Knight-Coyle, Ph.D.  
Director

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# Agenda: Day Two

- I. **Who we serve**
- II. Program and budget
- III. Key successes and challenges
- IV. Closing remarks

Office of Aging and  
People with Disabilities



# Program Highlight:

## Long-term Services and Supports



# Long-Term Services and Supports: why we do our work

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Provide critical, life sustaining supports for individuals who can no longer meet their own needs.



Help people remain as healthy and independent as possible.



Help people develop plans to meet their goals.

# Who we serve

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## Medicaid Long-Term Services and Supports

More than 57,000 supported in the two-year period ending June 2023.



## Oregon Project Independence – Classic

OPI-C enabled 1,850 people to stay in their own homes.



## Oregon Project Independence – Medicaid

OPI-M has helped more than 700 people in 8 months.



## Older Americans Act

Helped 71,301 people with meals, employment and more



# Care settings before and after waivers

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## Before

- States required to cover nursing facility (NF) care.
- People with low needs were served in nursing facilities.
- In 1980, APD applied for the **first waiver in the country** to serve individuals in non-institutional settings.
- Waivers require states to demonstrate:
  - No increased costs
  - No greater negative outcomes than if served in a nursing facility.

## After

- Today, most people in Oregon are served in home and community settings.
- Oregon has an array of service options.
- People get to choose where they receive their services.
- People can self-direct their services.
- Average cost of care is significantly less.


# Services available through Medicaid Long Term Services and Supports

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**In-home:** Services to help people stay independent and safe in their homes. Services can be for a short-term need, such as injury recovery, or long-term for many years.

**In a facility:** These include adult foster homes, assisted living, residential care facilities, nursing facilities and memory care communities.

**In the community:** May include meals, transportation or help managing chronic conditions. Services vary depending on location. Many people use community-based services together with in-home services.



Community support programs also includes the Program for All-Inclusive Care for the Elderly (PACE) and Adult Day Services.

# Nursing Facility services

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128  
nursing  
facilities in  
Oregon

## **Nursing facilities serve six or more residents and provide:**

- Licensed 24-hour supervised nursing care:
  - Short-term rehabilitative care following hospitalization
  - Long-term care for people who choose this level of care.
- Caregivers must be certified as nursing assistants
- State Board of Nursing must approve their training
- Nurses and certified nurse aides provide personal, therapeutic and nutritional care
- Nursing facilities serve Medicaid and non-Medicaid residents.



# Home and Community Based Services

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**2,068**  
HCBS licensed  
settings  
in Oregon

## Types of HCBS settings:

- In-home
- Adult Foster Homes
- Residential Care Facilities
- Assisted Living Facilities
- Specialized Living
- Adult Day Services

## Services usually include:

- Personal care
- Cognitive supports
- Meal preparation
- Shopping
- Housekeeping and laundry
- Social Isolation prevention
- Transportation
- Assistive technology
- Activities

## In-home consumers:

- Home delivered meals
- Environmental modifications
- Crisis supports
- Self-direction support

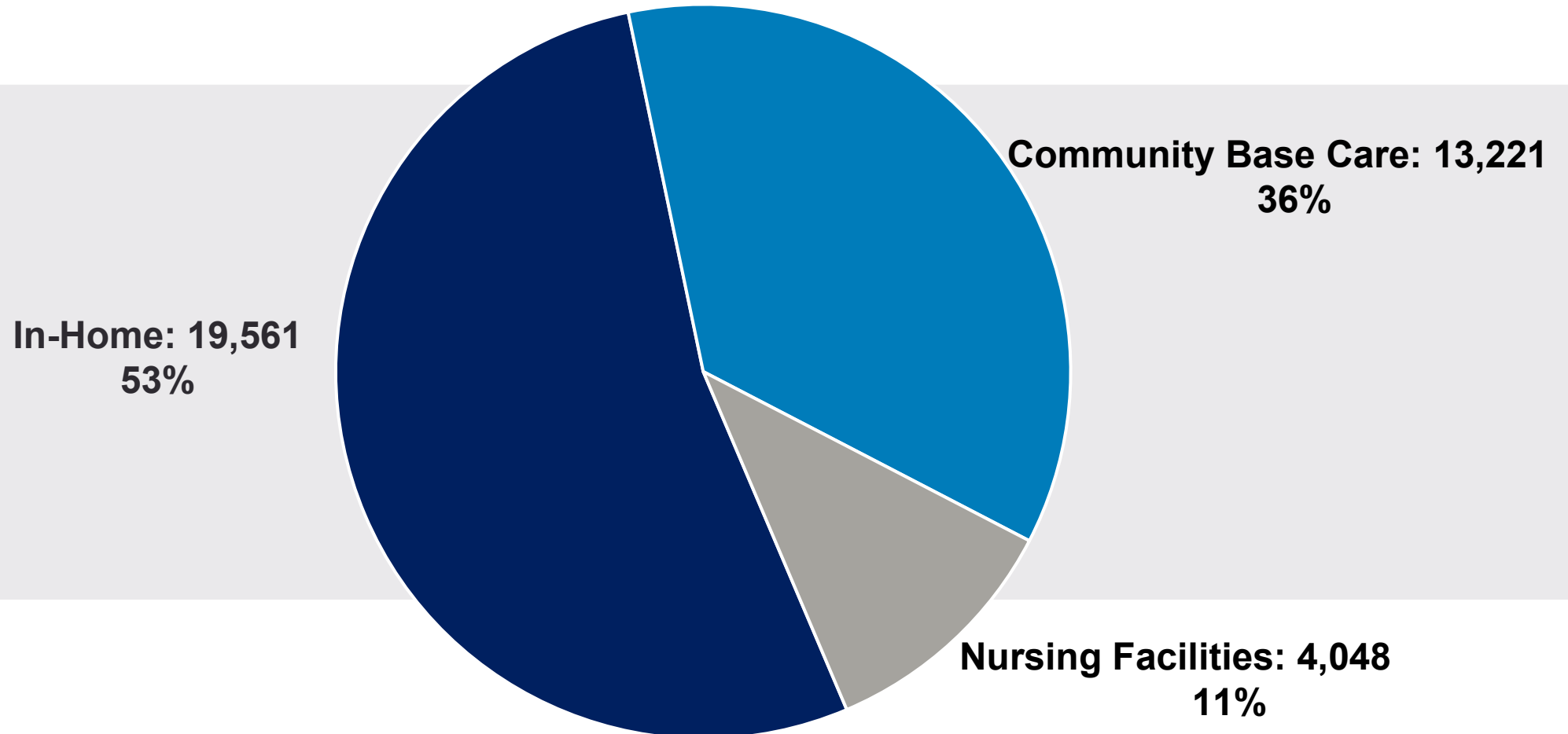
## High need consumers:

- Behavior supports
- Nurse delegation
- Ventilator supports

# Increasingly people served in home or community-based settings

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## 2025-2027 Forecasted Caseload



# Older Americans Act (OAA)

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**17,253**  
people received  
home delivered  
meals in Oregon  
in 2024

- Federally funded program that provides supports to people aged 60 and older.
- APD sub-grants funds to 16 Area Agencies on Aging.
- OAA services include, but are not limited to:
  - Nutrition services including home delivered meals
  - Legal services and advocacy
  - Information, assistance and referral to resources
  - National Family Caregiver Support Program.

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# Long-term services and supports core programs and funding sources

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## Medicaid services:

1915(k) State Plan

1915(c) Waiver

State Plan Services

Oregon Project  
Independence – Medicaid

## Non-Medicaid services:

Older Americans Act

Oregon Project  
Independence - Classic

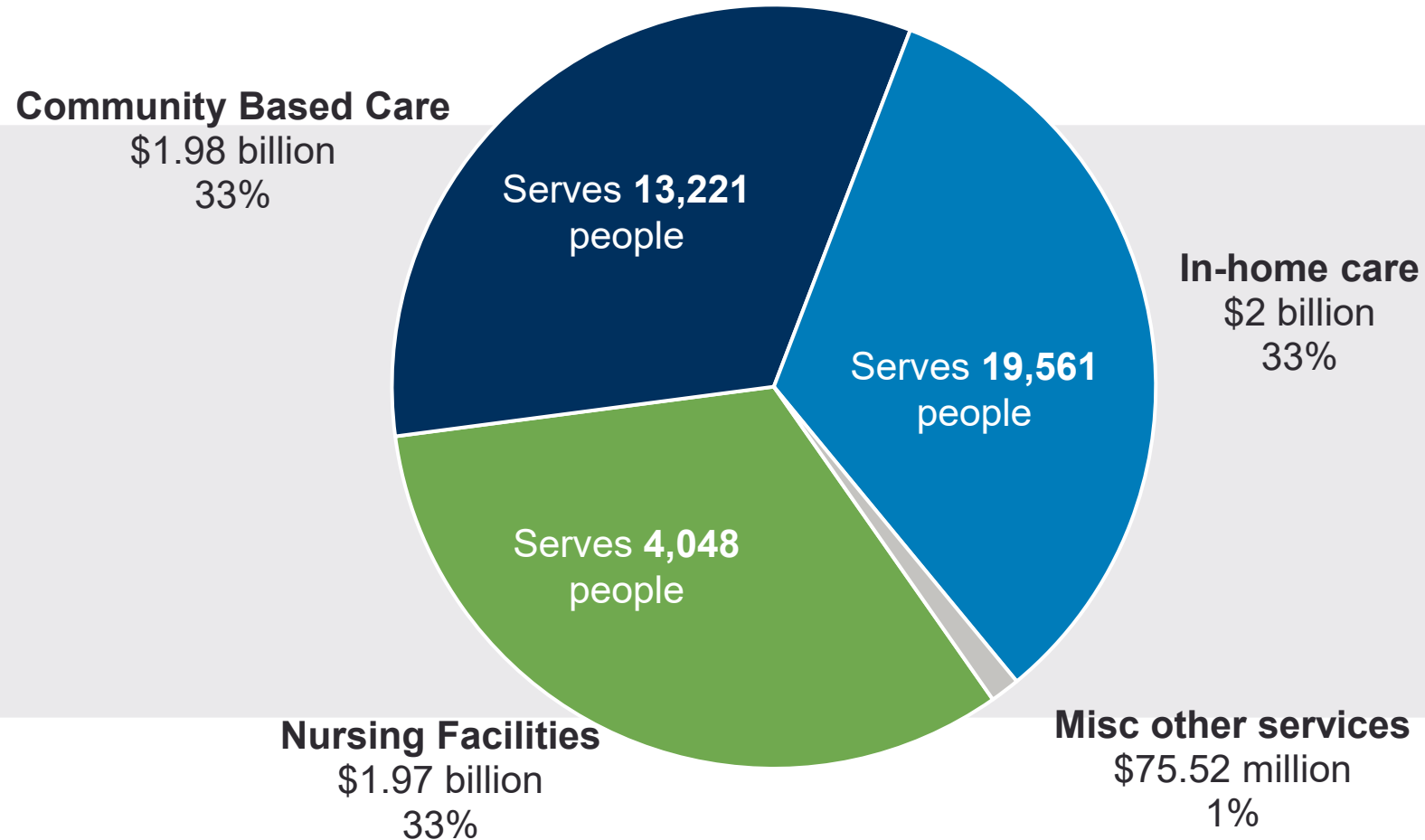


# APD Program: Long-term services and supports



# APD Program: Medicaid funding by services

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# APD Program: Medicaid funding split detail

	General Funds	Other Funds	Federal Funds	Total	Projected Monthly Caseload
Nursing Facilities	\$558,648,634	\$235,892,684	\$1,176,631,643	\$1,971,172,961	4,033
				<b>33% of funding</b>	
Community Based Care	\$718,451,307	\$16,109,942	\$1,251,573,725	\$1,986,134,974	13,221
				<b>33% of funding</b>	
In-home Care	\$742,287,418	\$6,571,424	\$1,256,407,772	\$2,005,266,614	22,017
				<b>33% of funding</b>	
Misc. other services	\$22,297,288	\$2,148,828	\$51,072,031	\$75,518,147	varies
				<b>1% of funding</b>	

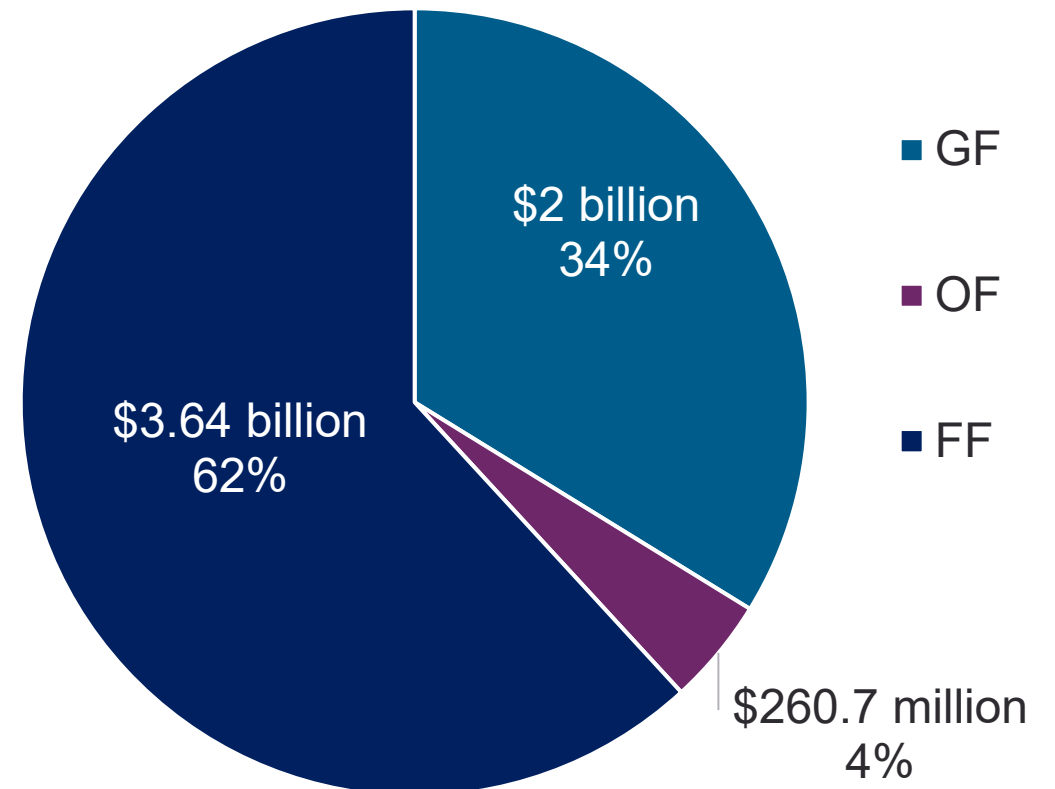


# LTSS: Funding streams and policy direction

Federal policy significantly impacts the delivery of Long-term Services and Supports:

- Most funds are from Medicaid and Older Americans Act.
- For continued federal financial participation, APD must abide by federal regulations.
- Major federal changes:
  - New HCBS Access Rules
  - Revised Older Americans Act regulations
  - First ever national Adult Protective Services regulations.

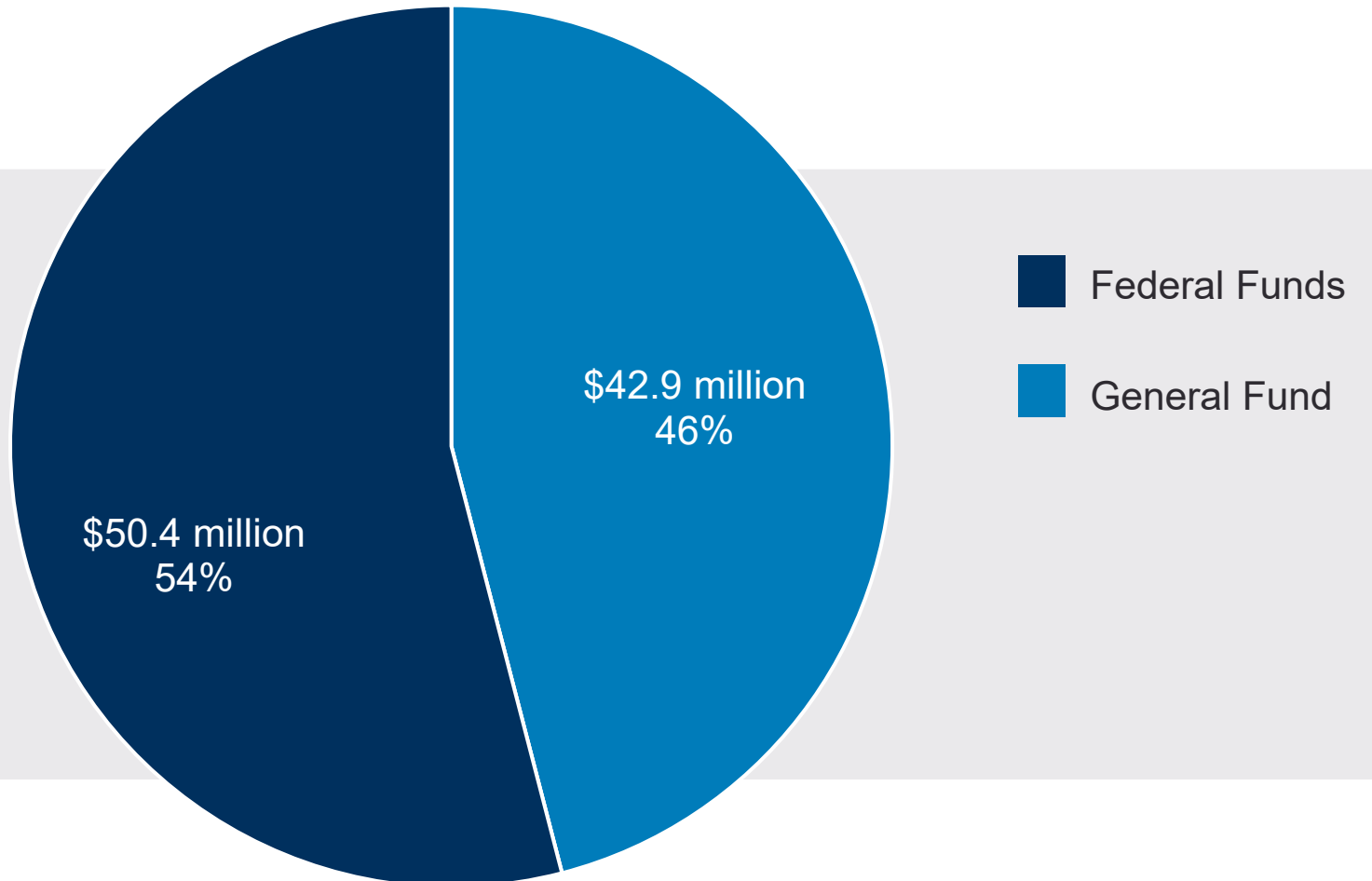
LTSS Budget by Fund Type



# Oregon Project Independence: funding split

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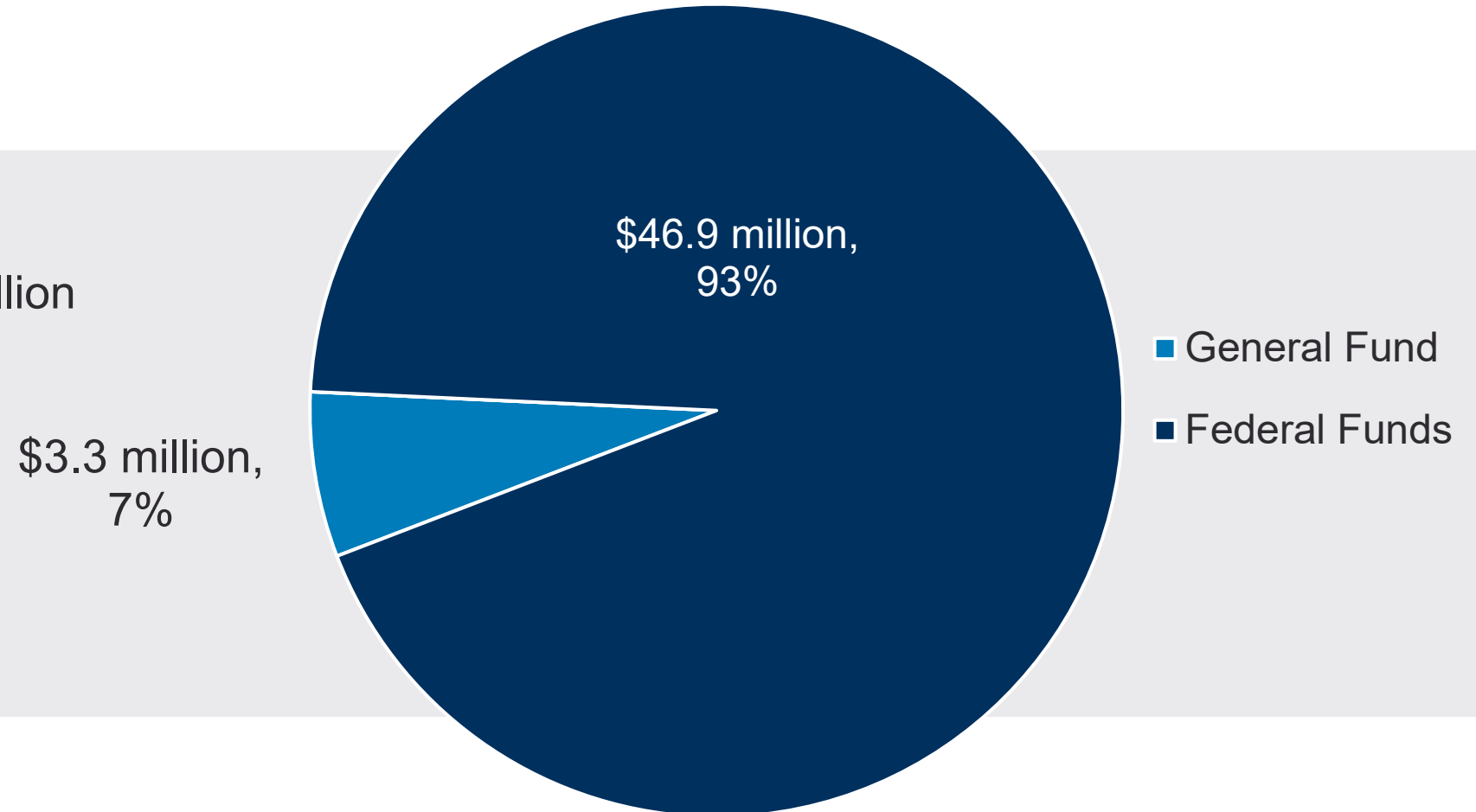
- OPI Classic and OPI-M
- No Other Funds
- **Total funds:** \$93.3 million



# Older Americans Act: funding split

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- No Other Funds
- **Total funds:** \$50.2 million



# Major cost drivers: Long-term services and supports

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Fluctuating Federal Medical Assistance Percentage (FMAP) rates

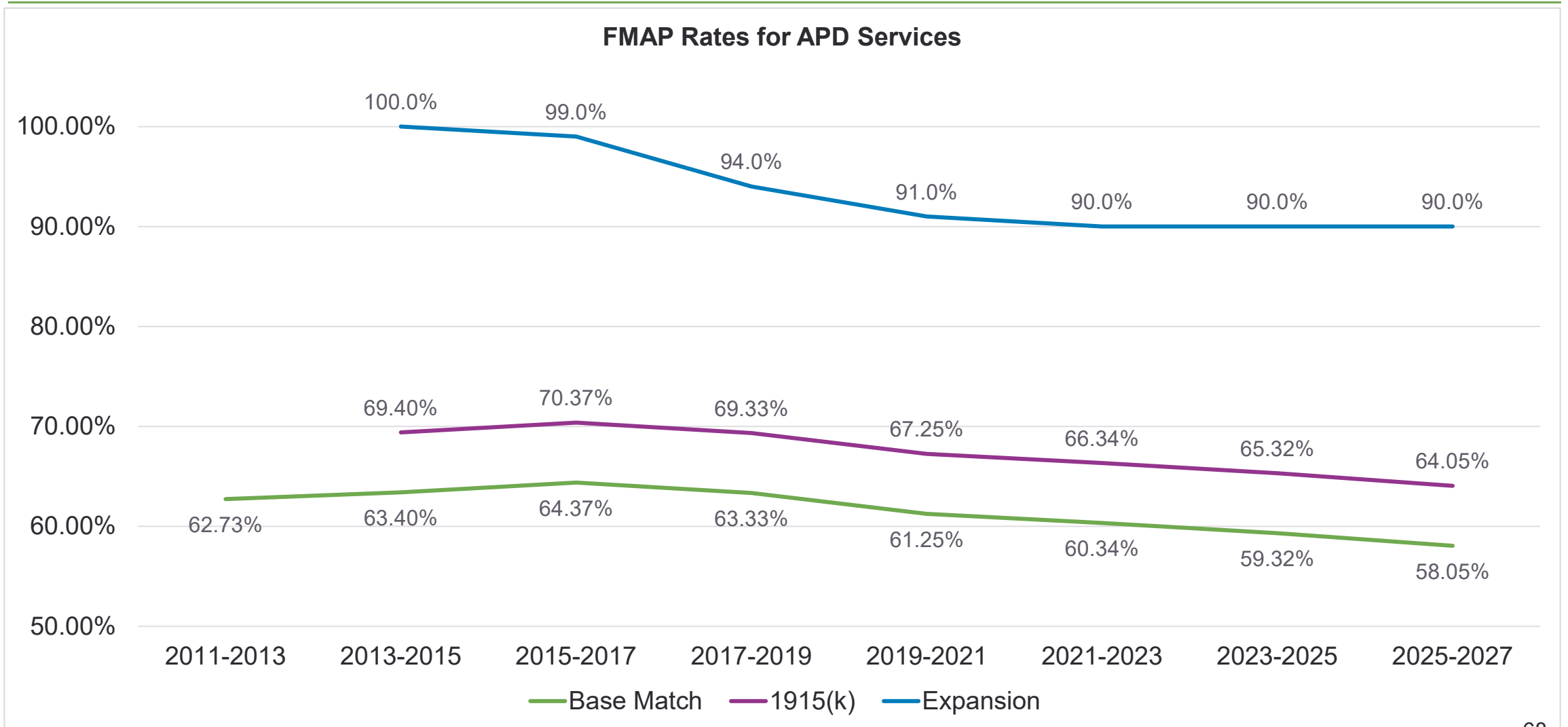


Increasing long-term care caseload forecast

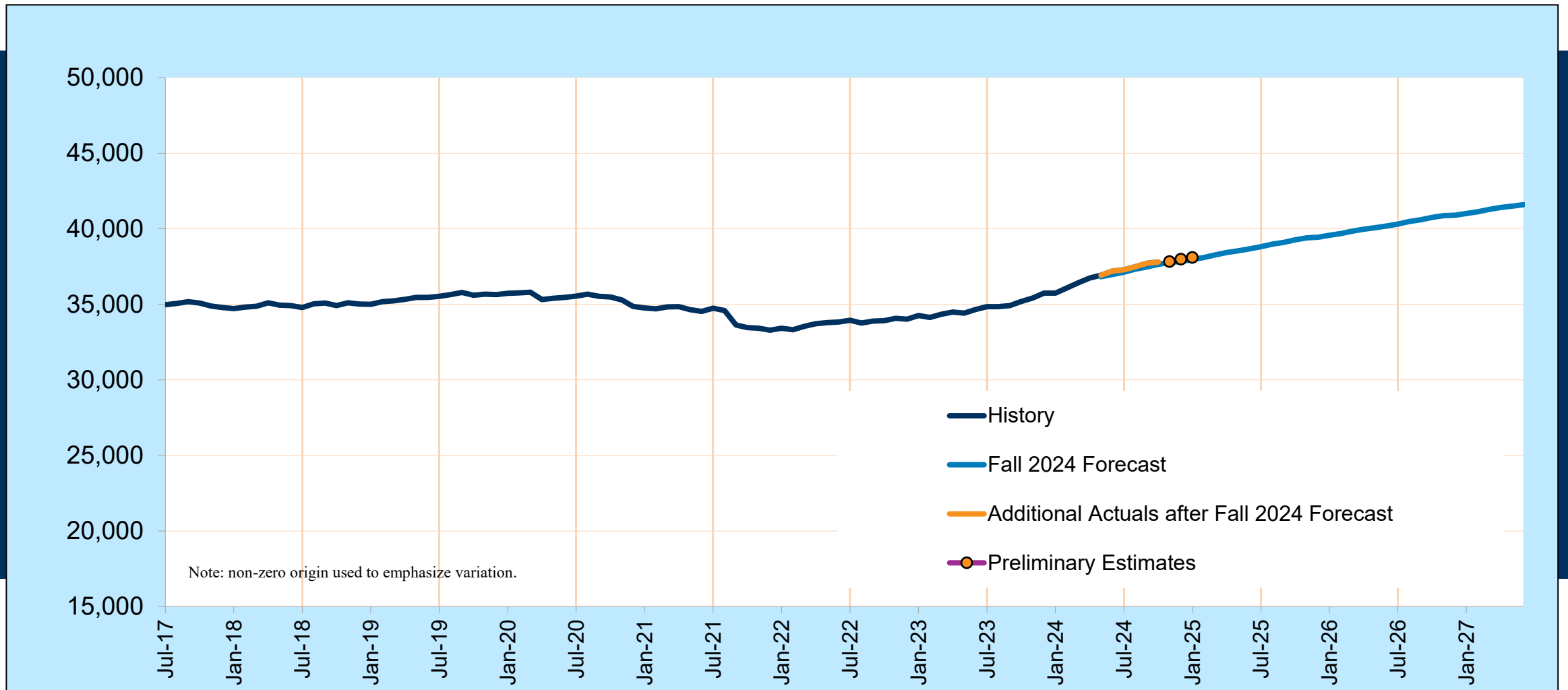


Increasing provider rates

# Medicaid Match Rates



# APD caseload forecast



# Cost per Case by Care Setting



# Long-term care delivery system

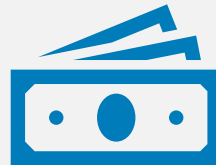
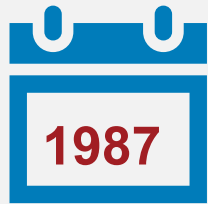
Provider type	Description	Number of providers
<b>Nursing Facilities</b>	24-hour supervised nursing care; caregivers must be certified nursing assistants (CNA)	128
<b>Assisted Living Facilities</b>	Serves 6+; registered nurse not present 24/7; CNA not required	237
<b>Residential Care Facilities</b>	Serves 6+; registered nurse not present 24/7; staff are not certified	330
<b>Memory Care endorsed facilities</b>	Staff trained in dementia care provide specialized services in a secure setting	258
<b>Adult Foster Homes</b>	Single-family home with 1-5 residents	1,224
<b>Program for All-Inclusive Care for the Elderly</b>	Provides all LTSS and health care through a capitated model	1
<b>Adult Day Services</b>	Certified – not licensed	18
<b>In-home care agencies and homecare workers</b>	Homecare worker (HCW) - training required In-home care agencies (IHCA) - licensed by PHD, caregiver training required	20,383 HCWs 125 IHCA



# Barriers that limit access to services

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Medicaid, for individuals with disabilities and older adults:



Since 1987, resources cannot be higher than \$2,000.

After age 55, all benefits are subject to estate recovery.

Medicare and some insurances do not cover long term services and supports.

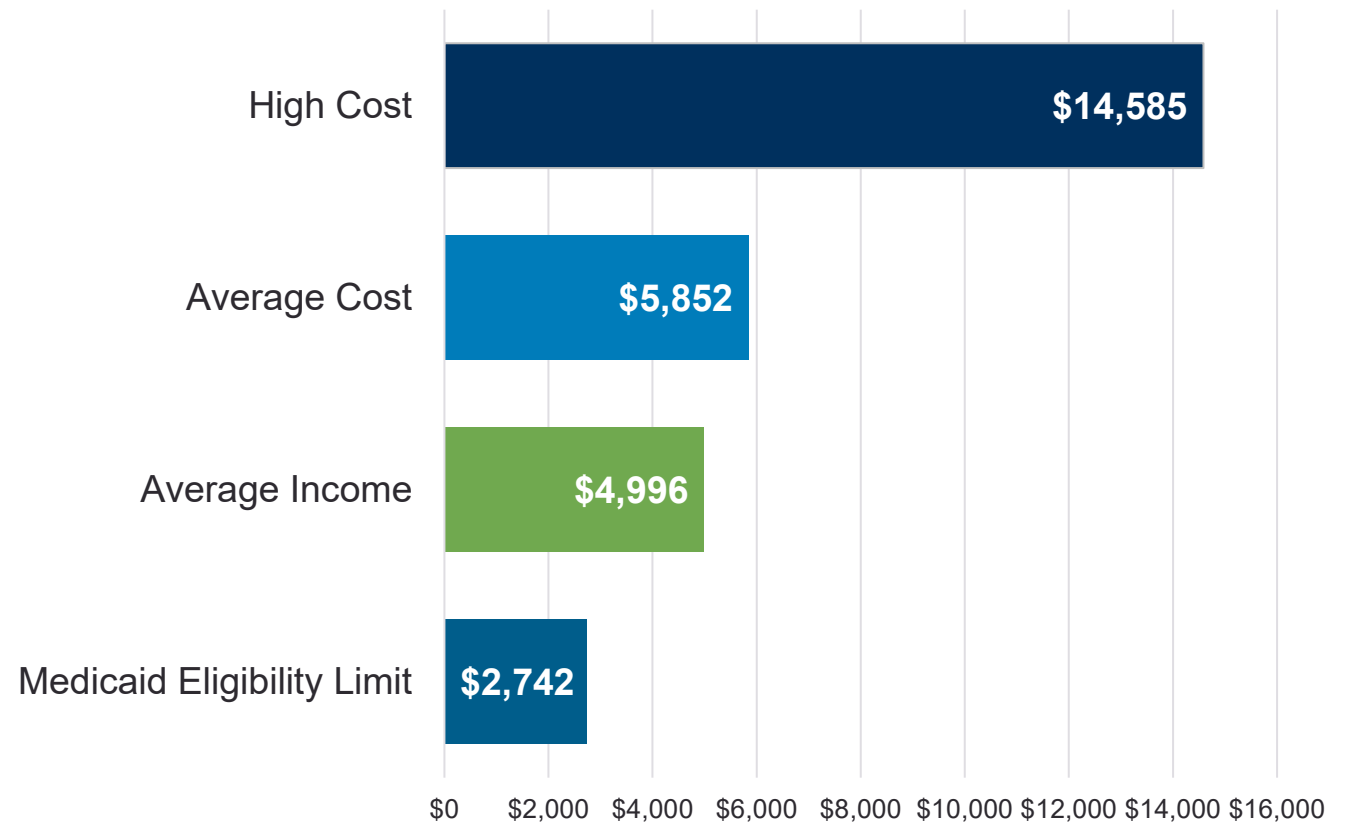
# Care is unaffordable for most older adults

The average income for an older adult in Oregon is \$4,996 per month. This is:

- \$2,254 **too much** for Medicaid
- \$856 **too little** for the average Community Based Care Facility

The gap between Medicaid eligibility and the cost of care means most older adults who need care cannot get it.

### Monthly LTSS Costs Versus Income



# Financial Eligibility

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Program	Income Limit	Resource Limit
OSIP-M Medicaid	\$967	\$2,000
300% of SSI (Long-Term Care Medicaid)	\$2,901	\$2,000
MAGI Adult Medicaid	\$1,800	No Limit

# Service priorities

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Service Priority Levels (SPL) are intended to prioritize those most in need:

**SPL 1** is the **most** impaired

**SPL 18** is the **least** impaired

## Case managers assess for Activities of Daily Living:

- Mobility
- Eating
- Elimination
- Cognition
- Bathing
- Dressing
- Grooming
- Personal Hygiene

## Assistance levels are determined by:

- Frequency
- Assistance types (e.g., hands-on assistance)

## Individuals are assessed as:

- Independent
- Minimal Assist
- Assist
- Substantial Assist
- Full Assist

# LTSS eligibility and services

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## Medicaid LTSS

- Serves SPL 1-13
- Medicaid funded
- Must need help with one or more of the following:
  - Elimination
  - Mobility (ambulation and transfer)
  - Eating
  - Cognition

Served by APD and Type B Area Agencies on Aging.

## OPI - Classic

- Serves SPL 1-18
- State General Funds only
- Area Agencies on Aging make decisions on who they serve.

## OPI - Medicaid

- Serves SPL 1-18
- Medicaid funded
- Expanded services
- Serve more people
- Consumers jointly served by APD and Area Agencies on Aging.

<b>Medicaid LTSS Services</b>	<b>1915(K)/1915(C)</b>	<b>OPI-M</b>	<b>SPPC</b>
Personal care for ADL and IADL Support	X	X	X
Long-term care community nursing	X	X	X
Money Management Services	X		X
Crisis services	X	X	
Environmental Modifications	X	X	
Social isolation prevention	X	X	
Community transportation	X	X	
Assistive Technology	X	X	
Adult Day Services	X	X	
Case Management Services	X	X	
Risk assessment and monitoring	X	X	
Major clean up and safety mitigation (Chore services)	X	X	X
Emergency Response systems	X	X	X
Training and Support for self-direction	X	X	
Transition services	X		
Skills building	X		
Behavior supports	X		
Unpaid caregiver education and support		X	
Health promotion and prevention		X	
Special Medical Equipment & Supplies		X	

**“I love my case manager, I don’t know what I would do without her.”**

– Margaret, APD consumer



**“To get them the help that they need is the best thing in the world.”**

– Marina, APD Case Manager

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# Long Term Services and Supports: Key 2023-25 successes

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HCBS Spend Plan with American Rescue Plan Act (ARPA) investments

House Bill 3396: Created the Task Force on Hospital Discharge Challenges

Senate Bill 420: Oregon Brain Injury Program

Began implementation for Agency with Choice

Rate and Wage Study

Money management supports and social isolation prevention programs

Oregon Project Independence – Medicaid

Homecare worker and adult foster home recruitment campaigns



# HCBS Access Rule: New Reporting Requirements

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2026

- Rate Transparency
- Grievance Process

2027

- Person Centered Service Planning
- Critical Incidents
- Access Reporting

2028

- New Assessment
- Quality Measures

2030

- Direct Care Worker Compensation



Questions?

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Thank you.

