PROPOSED AMENDMENTS TO SENATE BILL 21

- On page 1 of the printed bill, line 6, delete "choice" and insert "individual choices".
- In line 7, delete "competent" and insert "responsive".
- Delete lines 8 through 17 and insert:
- 5 "Whereas certain risk factors have been epidemiologically correlated to
- a greater need for and utilization of long term care services; and
- 7 "Whereas health system transformation is changing the landscape of the
- 8 health care delivery system and the long term care system is changing to
- 9 better coordinate health care, long term care and supportive services; and
- "Whereas this state has an obligation and an opportunity to engage in
- bold and innovative research and planning to meet the future demand for
- long term care and the individual choices of seniors and persons with disa-
- bilities; now, therefore,".
- Delete lines 19 through 29.
- On page 2, delete lines 1 through 44 and insert:
- "SECTION 1. (1) The Department of Human Services shall gather
- 17 research, data and other information to identify the principal social,
- 18 financial, medical and health risk factors that predict future utiliza-
- 19 tion of long term care services and supportive services. The depart-
- 20 ment shall analyze each factor by care setting, population and patient
- 21 **age.**

22

"(2) The department shall use the information obtained under sub-

- section (1) of this section to develop a plan for identifying the medical assistance recipients who have the principal social, financial, medical or other health risk factors and to develop strategies and interventions that are designed to address the risk factors or the underlying causes
- 4 that are designed to address the risk factors or the underlying causes
- of the risk factors in order to prevent or delay the recipients' need for long term care services.
- ----g ---- ---- -----

7

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

- "(3) The department shall also develop strategies:
- "(a) To work with coordinated care organizations and Medicare
 Advantage plans to improve care coordination and care management
 for individuals who undergo a medical event, or a change in condition,
 that is likely to lead to a need for long term care;
 - "(b) To expand access to respite care for in-home care providers and caregiving relatives and to address the need for short-stay respite care;
 - "(c) For the development and greater utilization of adult day center services to coordinate primary care assessments, monitor nutrition and socialization and promote health activities for individuals who are receiving long term care services;
 - "(d) To establish a comprehensive system of medication monitoring and health management for individuals who are receiving long term care services; and
 - "(e) For tracking and measuring inappropriate or avoidable inpatient and emergency department hospital utilization by individuals receiving long term care services.
 - "SECTION 2. (1) The Department of Human Services shall develop the plan, strategies and interventions described in section 1 of this 2013 Act, using a public process and in consultation with an advisory group that is composed of all key stakeholders, including but not limited to:
 - "(a) Consumers of home and community-based services and other long term care services;
 - "(b) Providers of long term care services; and

- "(c) Groups that advocate on behalf of seniors and persons with disabilities.
- "(2) The department shall report the plan, strategies and interventions developed under section 1 of this 2013 Act, in the manner provided in ORS 192.245, to the 2014 regular session of the Legislative Assembly.".

7