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Date: Tuesday, April 30, 2019 at 7:35 AM

**To:** Sen Gelser < <u>Sen.SaraGelser@oregonlegislature.gov</u>>, Sen MonnesAnderson

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Subject: Opposition to HB 3270A, Pilot to Increase Maximum Residents in Adult Foster Homes

April 30, 2019

TO: Senate Human Services Committee

FROM: Dr. Jim Davis, Executive Director,

Oregon State Council for Retired Citizens and United Seniors of

Oregon

Steve Weiss, President, Oregon State Council for Retired Citizens President, Oregon Consumer League

Jim McConnell, President, United Seniors of Oregon

## **RE:** Opposition to HB 3270A, Pilot to Increase Maximum Residents in Adult Foster Homes

The Oregon State Council for Retired Citizens, United Seniors of Oregon and the Oregon Consumer League strongly oppose HB 3270A, which would create a pilot and a transition to permitting seven residents (instead of the current limit of five) to reside in adult foster homes.

Senior and disability advocates have been opposing this type of legislation for decades. We understand that there are financial concerns with AFH operators, but such a significant policy change on the AFH resident maximum could potentially have grave effects on patient care. This concept needs to be more fully studied and evaluated before such a drastic change in policy is even piloted.

The Adult Care Home concept in the Oregon model is based on keeping seniors and people with disabilities out of institutions and in their own homes or "home-like settings" for as long as possible. Caring for seven adults who have long term support needs is way beyond what might be considered a "home-like setting". In most cases, it would require a larger home or residents doubling up in rooms, additional staffing, meals that would be less than "home-like" and other restrictions. In fact, this appears to be moving adult foster homes toward becoming "mini-institutions". Ironically, some advocates and providers thought even the current 5 residents to be excessive when adult foster homes were developed in the 1980s.

We need to stay faithful to the home and community-based system that we dreamed of 40 years ago, and find other economic solutions to the business needs of AFH providers, including drastic increases in reimbursement rates, which we strongly support. AFHs need to be adequately reimbursed, but this is not the way to accomplish that goal, nor does it make sense to pilot a bad idea.

We ask that there be a much more comprehensive stakeholder conversation before such a major change in policy even be tested in our community-based long term care system. Please oppose HB 3270A.