#### **ANALYSIS**

### Item 17: Department of Human Services Home and Community Based Services

Analyst: Gregory Jolivette

**Request**: Acknowledge receipt of a report on home and community-based services.

Analysis: The budget report for HB 5026 (2023), which is the Department of Human Services' (DHS) primary budget bill for the 2023-25 biennium, included a budget note directing the agency to report to the Human Services Subcommittee of the Joint Committee on Ways and Means by January 1, 2024 on the status of the Home and Community Based Services (HCBS) spending plan. The information required for the report includes actual and projected expenditures, and a discussion of the outcomes associated with spending plan investments. This information serves two purposes. First, it allows the Legislature to monitor Oregon's progress toward meeting federal requirements under the American Rescue Plan Act (ARPA). Second, it will demonstrate how the HCBS spending plan investments have improved the state's HCBS delivery system.

DHS expects to fully expend the ARPA HCBS funds by the federal deadline of March 31, 2025, and the information in the report appears to support this at a high level. However, the report provides no information on program outcomes and only limited information on newly proposed initiatives. The Legislative Fiscal Office (LFO) therefore recommends that the agency submit a second report during the 2024 session to further substantiate that the agency is on target to meet the federal deadline and discuss how the investments have improved HCBS in Oregon.

<u>Background</u>: The American Rescue Plan Act provided temporary enhanced federal match for state Medicaid spending on home and community-based services. For the period of April 1, 2021 through March 31, 2022, states received a 10% increase in their federal medical assistance percentage (FMAP) to improve Medicaid home and community-based services. In Oregon, state and federal funding for Medicaid HCBS programs is provided through both DHS and the Oregon Health Authority (OHA), but mostly supports Intellectual and Developmental Disabilities and Aging and People with Disabilities programs in DHS. The agencies worked with stakeholders and program participants to identify ways to enhance services, which led to a HCBS spending plan that was approved in the 2021 legislative session.

The HCBS spending plan includes \$305.7 million General Fund across both DHS and OHA. This is the amount of General Fund the state saved as a result of the 10% enhanced FMAP and is therefore the amount ARPA requires the state to re-invest in HCBS by March 31, 2025. As many initiatives in the spending plan are eligible for federal matching funds, the state is expected to leverage \$508.6 million in federal funding, bringing total plan spending to an estimated \$814.3 million. The 2021-23 legislatively approved budget provided the estimated total funds required to fully execute the plan, with the understanding that any unspent funds would be carried forward to the 2023-25 legislatively adopted budget.

<u>Spending Plan Investments</u>: The spending plan initiatives generally fall into four broad categories: infrastructure, workforce, consumer benefits, and provider benefits. Infrastructure investments include, for example, enhanced marketing to grow the program infrastructure, grants for technology to combat

social isolation, and improvements in the collection of electronic education health records. Workforce investments include increased wages, services, benefits, and training. Consumer benefits include expanded access to advocacy training, flexible funds to address unique consumer needs, and expanded access to money management services, among others. Provider investments include one-time payments for service during the pandemic, and more support for collective bargaining and temporary rate increases. Attachments A and B in the agency report provide a complete list of the spending plan items.

Progress on Meeting Federal Requirement: According to the agency's report, as of October 31, 2023, DHS and OHA had spent a combined \$173.8 million General Fund, or 57% of the HCBS spending plan, which leaves a balance of \$131.9 million General Fund that needs to be spent by March 31, 2025. While the rate of spending suggests Oregon may be on course to meet the ARPA requirements, there are a couple of areas of potential concern. First, OHA is spending at a much slower pace than DHS. As of October 31, 2023, OHA had only spent \$1.1 million, or 5%, of the agency's total planned expenditures, whereas DHS had spent \$172.7 million, or 61%, of its total planned expenditures. Given that OHA is responsible for a relatively small portion of the HCBS spending plan (\$21.5 million), this may not be a significant issue, but the report does not provide an explanation for OHA's slow implementation. Second, no expenditures have been made for several DHS initiatives in the spending plan, and the report provides no explanation or a timeline for when those items will be implemented.

<u>Program Outcomes</u>: One of the key goals of home and community-based services is to enhance the quality of life and independence of people living in their home and community. The aim of the one-year increase in federal matching funds is to enhance, strengthen, and improve such services. The budget note directed the agency to describe the programmatic outcomes associated with the spending plan; however, no such information is included in the report. The report primarily describes how the funds are being spent. LFO recommends that the agency submit a subsequent report for consideration during the 2024 session to discuss the outcomes that demonstrate how the spending plan has improved, or will improve, HCBS in Oregon.

<u>New Initiatives</u>: Several initiatives in the spending plan ultimately had lower than planned costs, and others were subsequently modified from the initial plan based on review and feedback from the Centers for Medicare and Medicaid Services, which resulted in funding becoming available to be repurposed to meet the spending target. In its report, DHS identified new spending ideas with costs totaling \$13.2 million General Fund. However, the report provides no discussion of how these proposals were developed or why they represent the next best use of the available one-time funds. As such, an assessment of the efficacy of the spending plan revisions is difficult to make at this time. Consistent with reporting on program outcomes, LFO recommends that DHS also report additional details and justification for the newly proposed items.

**Recommendation**: The Legislative Fiscal Office recommends that the Joint Interim Committee on Ways and Means acknowledge receipt of the report and instruct the Department of Human Services, in collaboration with the Oregon Health Authority, to submit a follow-up report for consideration during the 2024 legislative session that includes additional details and justification for the new initiatives included in the spending plan and identifies program outcomes to demonstrate how the spending plan has strengthened and improved Oregon's HCBS delivery system.

#### 17 Department of Human Services Streepey

**Request:** Report on the status of the Home and Community-Based Services spending plan for the Department of Human Services Aging and People with Disabilities, Intellectual and Developmental Disabilities, and Child Welfare programs.

**Recommendation:** Acknowledge receipt of the report.

**Discussion:** The Budget Report for House Bill 5026 (2023), the Department of Human Services (ODHS) budget bill for the 2023-25 biennium, included the following budget note:

#### **Budget Note: Home and Community Based Services Investments**

The Department of Human Services shall provide a report to the Human Services Subcommittee of the Joint Committee on Ways and Means by January 1, 2024, on the status of the home and community-based services spending plan. The report shall include actual and projected expenditures for activities in the investment plan, and discuss outcomes associated with spending plan investments.

ODHS and the Oregon Health Authority (OHA) began implementing the Home and Community Based Services (HCBS) spending plan last biennium, which was made possible via a temporary enhanced Federal Medical Assistance Percentage (FMAP) rate of 10 percent, provided through the American Rescue Plan Act (ARPA) for certain Medicaid-eligible expenditures. The additional FMAP was earned beginning April 1, 2021, through March 31, 2022, and was intended to bolster state spending for HCBS during and after the COVID-19 pandemic.

The General Fund "freed up" for additional investment in eligible services is referred to as Section 9817 Funds. Section 9817 Funds represent the General Fund savings, due to the availability of the additional 10.0 percent FMAP under ARPA. When expenditures are paid using General Fund (Section 9817 Funds) they also qualify for a FMAP match, effectively leveraging state funds further. States are prohibited from supplanting state funds with the increased Federal Funds received due to this enhanced FMAP match rate. The prohibition of supplanting ensures the additional Federal Funds and General Fund savings are directed to HCBS. The Section 9817 Funds effectively serve as the maintenance of effort requirement for these additional Federal Funds, as they must be spent on HCBS. States have until March 31, 2025, to expend Section 9817 Funds for HCBS.

The original HCBS spend plan was approved by the Legislature during the 2021 Legislative Session, and ODHS and OHA received approval of the plan from the Centers for Medicare and Medicaid Services (CMS). The Departments are also required to submit quarterly reports on the HCBS plan to CMS. Since the original submission to the Legislature and CMS, ODHS has refined its estimates of specific investments costs. The tables included in this analysis are based on the most recent investment amounts

through October 2023; however, individual investment costs may differ from those presented previously.

In total, ODHS identified \$284.2 million in Section 9817 Funds, made available through additional FMAP earned from April 2021 through March 2022. To meet the maintenance of effort requirement, \$284.2 million represents the amount of General Fund dollars across the 2021-23 biennium and 2023-25 biennium (up until March 31, 2025) that must be spent on HCBS investments. In the 2021-23 biennium and through October 2023 in the current biennium, ODHS has spent \$172.7 million Section 9817 Funds, indicating a remaining \$111.5 million needs to be spent by the March 2025 deadline. Details on budget to actuals and the planned use of the remaining funds by program are shown in the following tables. The tables only represent Section 9817 dollars for HCBS items for ODHS. The total funds budget for ODHS is \$782.3 million, across 2021-23 and 2023-25, including the additional federal funds leveraged through Medicaid match. This represents a significant investment in HCBS providers, clients, and the workforce.

#### Aging and People with Disabilities (APD):

APD ARPA HCBS Spend Plan General Fund (Section 9817) Only	Total Budget		Total Actuals				
Spend Plan Description	General Fund		General Fund		General Fund		
GrandPads-PACE consumers				\$ 113,592		\$ -	
GrandPads-In-Home consumers	\$	158,310	\$	158,310	\$	-	
Performance Based Bonuses-PACE	\$	1,216,092	\$	1,216,092	\$	-	
LTC Workforce Development & Training Investments	\$	250,000	\$	-	\$	250,000	
Wage & Cost Study	\$	150,000	\$	69,795	\$	80,205	
Workforce Recruitment-Public Affairs Spec 3	\$	168,012	\$	37,573	\$	130,439	
Congregate meal sites - modernize infrastructure (Est 125 sites)	\$	3,125,000	\$	758,957	\$	2,366,043	
LTC HCBS capital improvement fund	\$	14,352,982	\$	10,539,348	\$	3,813,634	
CBC-Online infection prevention & control staff training curriculum (OCP)	\$	47,916	\$	47,916	\$	-	
Adult Day Centers-Start up costs not to exceed \$100,000 (Max 10)	\$	1,000,000	\$	-	\$	1,000,000	
Senior Centers - modernize & improve transportation (Limit \$50K per, approx. 175)	\$	4,543,281	\$	807,192	\$	3,736,089	
Innovation fund- improve the LT Services and Supports (LTSS) system	\$	3,000,000	\$	2,459,390	\$	540,610	
Statewide case management conference	\$	287,707	\$	137,707	\$	150,000	
Convert in-person training to online training to support case managers	\$	75,000	\$	-	\$	75,000	
Training development & delivery - LTSS providers on service equity (OHCA)	\$	345,000	\$	172,500	\$	172,500	
Performance based contracting-(Wage Add on)	\$	16,258,355	\$	16,258,355	\$	-	
Performance based contracting - AAAs meeting metrics - quality/quantity/WF diversity	\$	2,500,000	\$	1,250,000	\$	1,250,000	
Assistance to keep individuals out of crisis	\$	685,341	\$	269,655	\$	415,686	
Pursue an 1115 demo waiver to support family caregivers	\$	2,500,000	\$	26,349	\$	2,473,651	
Eliminating client contribution for in-home consumers	\$	1,187,500	\$	-	\$	1,187,500	
Expand Money Management Program to serve more individuals	\$	1,057,331	\$	167,819	\$	889,512	
Prevention of Lonely & socially isolated	\$	3,190,621	\$	-	\$	3,190,621	
Deaf/Blind individuals, State Plan Personal Care (SPPC) services	\$	-		-	\$	-	
Housing Assistance	\$	542,560	\$	1,809	\$	540,751	
\$500 to any HCW, active provider # on 12/1/21, payment changed to \$2,232.00	\$	9,436,695	\$	9,436,274	\$	421	
Enhance bargaining pot for Home Care Workers	\$	11,539,313	\$	11,539,313	\$	-	
Initial funding for healthcare trust for long term care workers	\$	-	\$	-	\$	-	
Workers' Benefits -Enhance services, available to HCWs.	\$	1,771,680	\$	1,771,680	\$	-	
One time payment of \$1000 per resident Adult Foster Homes	\$	1,037,923	\$	1,037,923	\$	-	
5% COVID enhancement Adult Foster Homes 5% rate increase from 7/1/21- 3/31/22	\$	331,812	\$	331,812	\$	-	
Enhance bargaining pot for Adult Foster Homes	\$	4,495,152	\$	4,495,152	\$	-	
5% COVID differential to HCBS providers	\$	885,353	\$	885,353	\$	-	
5% rate increase to APD HCBS providerssecond increase, on 7/1/22 is now 10%	\$	15,362,334	\$	15,362,334	\$	-	
\$500 per participant fee to Adult Day Service providers to help with restart of programs	\$	-	\$	-	\$	-	
Staff to Implement List	\$	341,969	\$	341,969	\$	-	
Connect to Care	\$	1,000,000	\$	-	\$	1,000,000	
Mental Health Early Intervention	\$	1,000,000	\$	-	\$	1,000,000	
Home Care Worker Consumer Matching Service	\$	1,000,000	\$	-	\$	1,000,000	
HCC DocuSIgn/Indeed Ads/Support to get through the process and mentoring	\$	750,000	\$	-	\$	750,000	
Workforce Recruitment Media	\$	1,000,000	\$	-	\$	1,000,000	
Adult Foster Home Recruitment	\$	125,000	\$	-	\$	125,000	
NurseLearn	\$	980,000	\$	-	\$	980,000	
Nurse Recruitment	\$	750,000	\$	-	\$	750,000	
Promoting Diversity in LTSS Leadership	\$	500,000	\$	-	\$	500,000	
RiseCNA Partnership	\$	885,356	\$	-	\$	885,356	
Community Integration Supports	\$	1,000,000	\$	-	\$	1,000,000	
HCBS Setting Requirement Engagement and Improvement Project	\$	750,000	\$	-	\$	750,000	
Direct Careworkers Engagement	\$	1,000,000	\$	-	\$	1,000,000	
Heros Project (APS)	\$	520,000	\$	-	\$	520,000	
Stress management support	\$	425,000	\$	-	\$	425,000	
Total	\$1	13,642,188	\$	79,694,169	\$3	33,948,019	

<sup>\*</sup>Some items have no budget as the plan has changed, though the items have been kept on the list. Actuals are for the 2021-23 biennium and through October 2023.

#### Intellectual and Developmental Disabilities (I/DD):

I/DD ARPA HCBS Spend Plan General Fund (Section 9817) Only	, , , , , , , , , , , , , , , , , , , ,			Total Actuals		Remaining	
Spend Plan Description	General Fund		General Fund		General Fund		
Capacity Restoration and Expansion Grants	\$	10,500,000	\$	4,775,503	\$	5,724,497	
Diversity, Equity and Inclusion Grants	\$	5,400,000	\$	-	\$	5,400,000	
Emergency Response grants	\$	5,500,000	\$	-	\$	5,500,000	
Flexible grant funding to support people through CME's	\$	-	\$	-	\$	-	
ODDS/CME Grant Infrastructure	\$	11,123,360	\$	4,954,355	\$	6,169,005	
Family Network Restoration and Expansion	\$	350,000	\$	-	\$	350,000	
Information about I/DD services to people with I/DD and families	\$	1,000,000	\$	-	\$	1,000,000	
Develop resources and services for parents with an I/DD	\$	1,500,000	\$	-	\$	1,500,000	
Impact Oregon Enhancement	\$	500,000	\$	13,956	\$	486,044	
Eliminate client contribution	\$	-	\$	-	\$	-	
Maintenance and updates Provider Homes and Adult Foster Homes	\$	20,300,000	\$	-	\$	20,300,000	
Community Integration Project Homes	\$	2,000,000	\$	-	\$	2,000,000	
SACU Enhanced Funding	\$	1,026,000	\$	412,789	\$	613,211	
Infrastructure funding for contracted case management entities	\$	2,000,000	\$	-	\$	2,000,000	
Continue the Covid rate increase of 5% for non-bargained services	\$	8,452,354	\$	8,452,354	\$	0	
Implementation of the new Rate models		49,746,370	\$	44,300,051	\$	5,446,319	
Covid relief increase and one-time payment for Adult Foster Homes	\$	555,097	\$	555,097	\$	(0	
Enhance bargaining pot - For Adult Foster Homes	\$	1,392,226	\$	1,392,226	\$	0	
Provide a Covid relief payment for Personal Support Workers	\$	6,173,223	\$	6,172,344	\$	879	
Enhance bargaining pot - For Personal Support Workers	\$	6,579,930	\$	6,579,930	\$	-	
Personal Support Worker Training and Benefit Trusts	\$	2,491,514	\$	2,491,514	\$	-	
Licensing Staff	\$	-	\$	-	\$	-	
Expand LifeCourse and Individual Support Plan trainings	\$	375,000	\$	-	\$	375,000	
Blueprint Funding	\$	5,000,000	\$	-	\$	5,000,000	
Design a statewide crisis system for people with I/DD	\$	1,000,000	\$	-	\$	1,000,000	
Provider recruitment and retention fund	\$	12,824,402	\$	12,210,552	\$	613,850	
Fund to support advocacy by self-advocates	\$	1,000,000	\$	-	\$	1,000,000	
Restore funding for the Fairview Trust	\$	6,000,000	\$	-	\$	6,000,000	
Funding for HIPAA Compliant technology	\$	2,000,000	\$	-	\$	2,000,000	
Grants to PSW's with devices to access Electronic Visit Verification	\$	2,500,000	\$	-	\$	2,500,000	
Training to Child Welfare and Case Management Entities	\$	74,249	\$	-	\$	74,249	
Statewide training and technical assistance resource	\$	1,000,000	\$	-	\$	1,000,000	
Study to allow use of Rideshare	\$	125,000	\$	-	\$	125,000	
Medical/Clinical expertise for state staff	\$	1,000,000	\$	66,940	\$	933,060	
Enhancing access to the Oregon Intervention System (OIS)	\$	250,000	\$	-	\$	250,000	
Study for contracted case management entity funding options	\$	125,000	\$	-	\$	125,000	
Demographic data collection	\$	-	\$	-	\$	-	
Develop and Enhance the Information Technology Infrastructure	\$	_	\$	-	\$	-	
Healthcare	\$	-	\$	_	\$	_	
Total		169,863,725		92,377,610		77,486,115	

<sup>\*</sup>Some items have no budget as the plan has changed, though the items have been kept on the list. Actuals are for the 2021-23 biennium and through October 2023.

Child Welfare also had one item on the HCBS spend plan for a demonstration project for potentially eligible I/DD youth. The initiative had a total budget of \$0.7 million and has spent the complete budget as of October 2023.

OHA was not included in the budget note reporting requirement, though the Department does have a component of the State's HCBS plan and was asked by the Legislative Fiscal Office to provide an update after submission of the December 8, 2023, letter. OHA has a separate plan for the additional HCBS investments, though the items in the plan have not been implemented for the most part, with the exception of some investments related to collective bargaining and one-time hazard pay for Personal Care Attendants and Adult Foster Homes. OHA is in the process of refining their HCBS plan, which is \$17.9 million Section 9817 Funds, \$29.0 million total funds.

Both Departments have until March 31, 2025, to expend the remaining Section 9817 Funds and it is recommended the Departments work with the Department of Administrative Services Chief Financial Office and the Legislative Fiscal Office if there are anticipated issues in meeting the deadline with the current HCBS plan.



#### **Department of Human Services**

Office of the Director 500 Summer St. NE, E-15 Salem, OR 97301-1097

Voice: 503-945-5600

Fax: 503-581-6198

December 8, 2023

The Honorable Senator Elizabeth Steiner, Co-Chair
The Honorable Representative Tawna Sanchez, Co-Chair
Interim Joint Committee on Ways and Means
900 Court St. NE
H-178 State Capitol
Salem OR 97301

RE: Update on HCBS Funding Report per HB 5026

Dear Co-Chairpersons:

#### **Nature of the Request**

In House Bill 5026, the Legislature directed the Oregon Department of Human Services (ODHS) to:

The Department of Human Services shall provide a report to the Human Services Subcommittee of the Joint Committee on Ways and Means by January 1, 2024, on the status of the home and community-based services spending plan. The report shall include actual and projected expenditures for activities in the investment plan, and discuss outcomes associated with spending plan investments.

The American Rescue Plan Act of 2021 (ARP) section 9817 provided participating states a temporary ten percent increase in Medicaid funding for Home and Community Based Services (HCBS) beginning April 1, 2021 and ending March 31, 2022. States were required to submit a Spend Plan defining how the savings to state general funds would be reinvested into HCBS programs to enhance, expand, or strengthen those programs. States had to receive approval and must continue to provide quarterly updates to the Centers for Medicare and Medicaid Services (CMS). The saved state general funds must be expended by March 31, 2025. The Legislature approved ODHS' Spend Plan in the 2021 Legislative Session.

#### **Agency Action**

While many projects on the Spend Plan have been completed, ODHS continues to make progress on other Spend Plan projects and will be proposing new projects that support

The Honorable Senator Elizabeth Steiner, Co-Chair The Honorable Representative Tawna Sanchez, Co-Chair Interim Joint Committee on Way and Means December 8, 2023 Page 2

overarching goals identified in the original spend plan. A high-level summary for ODHS is included in the following table:

	Total Amount saved (Maint of Effort, required to spend)	How much has been spent to date, through 2021-23*			Remaining Amounts required to be spent in 2023-25				
	GF (Sec 9817)	GF (Sec 9817)	FF	TF	GF (Sec 9817)	FF	TF		
APD	\$113,642,188	\$73,914,763	\$173,405,303	\$247,320,066	\$39,727,425	\$32,081,017	\$71,808,442		
I/DD	\$169,863,725	\$90,324,404	\$233,074,032	\$323,398,437	\$79,539,321	\$59,597,916	\$139,137,236		
CW	\$670,000	\$550,000	\$0	\$550,000	\$120,000	\$0	\$120,000		
Total	\$284,175,913	\$164,789,167	\$406,479,336	\$571,268,503	\$119,386,746	\$91,678,933	\$211,065,678		
* information	n as of 10/31/23								

A full report with additional details will be provided to the Legislature no later than January 1, 2024.

Primary ARPA HCBS investments for Aging People and Disabilities (APD) included investments in provider rates to help providers rebound from COVID 19 and provider training, especially around diversity, equity, and inclusion. Funding also was provided to improve case management training and new services to improve individuals' safety and wellbeing. Investments in 2023-2025 will include more robust workforce recruitment, training and supports and supporting culture changes in providers to meet CMS increasing expectations.

For Intellectual and Developmental Disabilities (IDD) primary ARPA investments and projects during 2023 included grants to Case Management Entities to support development of emergency response infrastructure, grants open to all IDD service providers to support capacity restoration and expansion infrastructure, funding for medical/clinical expertise to provide consultation to support IDD infrastructure development, funding for contracted case management entities to develop infrastructure at the local level, and grants to self-advocates to support expanding access to advocacy efforts for individuals and families.

Child Welfare (CW) invested a small amount of ARPA funds in a demonstration project to develop provider capacity to deliver services and supports that are traditionally available to youth once they are determined to be eligible for services through IDD prior to and during that determination process. The goal was to determine if Child Welfare could support youth who may eventually become eligible for services through IDD in accessing services in the community and provide placement stability without the need for higher levels of care. This project is scheduled to end on 12/31/2023 and Child Welfare will further analyze the efforts

The Honorable Senator Elizabeth Steiner, Co-Chair The Honorable Representative Tawna Sanchez, Co-Chair Interim Joint Committee on Way and Means December 8, 2023 Page 3

for successes and lessons learned. Following the end of this project, Child Welfare will have no further investments through ARPA HCBS savings.

#### **Action Requested**

ODHS requests acknowledgement of this letter.

#### **Legislation Affected**

This recommended/requested action stays in line with the intent and direction in HB 5026.

If you have questions, please contact Rob Kodiriy at Rob.Kodiriy@odhs.oregon.gov.

Sincerely,

Fariborz Pakseresht

Faisler Papsenship

Director

Oregon Department of Human Services

Ec: Amanda Beitel, Legislative Fiscal Office

Gregory Jolivette, Legislative Fiscal Office

Kate Nass, Department of Administrative Services

Mike Streepey, Department of Administrative Services



Office of the Director



Tina Kotek, Governor

500 Summer Street NE Salem, OR 97301

January 2, 2024

The Honorable Senator Elizabeth Steiner, Co-Chair The Honorable Representative Tawna Sanchez, Co-Chair Interim Joint Committee on Ways and Means 900 Court St. NE H-178 State Capitol Salem, OR 97301

RE: Oregon Department of Human Services' Office of Aging and People with Disabilities (APD) and Office of Developmental Disabilities Services (ODDS) and the Oregon Health Authority's ARPA HCBS Report.

Dear Co-Chairpersons:

#### Nature of the Request

In HB 5026, the Legislature directed the Oregon Department of Human Services to report on the HCBS investments. Specifically, the budget note said:

"The Department of Human Services shall provide a report to the Human Services Subcommittee of the Joint Committee on Ways and Means by January 1, 2024, on the status of the home and community-based services spending plan. The report shall include actual and projected expenditures for activities in the investment plan, and discuss outcomes associated with spending plan investments."

The Oregon Department of Human Services and Oregon Health Authority submit this budget note report.

#### **Agency Action**

The American Rescue Plan Act of 2021, also called the COVID-19 Stimulus Package or American Rescue Plan (ARPA), is an economic stimulus bill that went into effect on March 11, 2021, to speed up the country's recovery from the economic and health effects of the COVID-19 pandemic and the ongoing recession.

Section 9817 of the ARPA provides qualifying states a temporary 10 percentage point increase to the federal medical assistance percentage (FMAP) for certain Medicaid expenditures for home and community-based services (HCBS). States could not reduce any services or rates that were in effect on April 1, 2021, and had to use state funds equivalent to the amount of federal funds attributable to the increased FMAP to implement or supplement the implementation of one or more activities to enhance, expand, or strengthen HCBS under the Medicaid program. The increased funding could not supplant state general funds. ODHS collaborated with OHA on submission of Oregon's Initial HCBS Spending Plan Projection and Initial HCBS Spending Narrative to CMS. Below is a summary for the ODHS and OHA General Fund status.

ODHS	Total Budget	Total Actuals*	Remaining			
	GF	GF	GF			
APD	\$ 113,642,188	\$ 79,694,169	\$ 33,948,019			
ODDS	\$ 169,863,725	\$ 92,377,610	\$ 77,486,115			
CW	\$ 669,473	\$ 669,473	\$ -			
ODHS Total	\$ 284,175,386	\$ 172,741,252	\$ 111,434,134			

<sup>\*</sup>As of October 31, 2023

OHA	Total Budget	Total Actuals*	Remaining
	GF	GF	GF
OHA Total	\$ 21,516,581	\$ 1,086,362	\$ 20,430,219

<sup>\*</sup>As of October 31, 2023

#### Status of federal review of the state's investment plan

On September 30, 2021, CMS granted partial approval to Oregon's initial state spending plan and spending narrative. CMS also requested additional information for specific items that have not yet received approval. ODHS and OHA provided the additional information and received final CMS approval in late 2021.

Actual expenditures continue to be updated. This means that funding throughout the spending plan may change. ODHS and OHA are committed to expending the MOE amount to meet the CMS deadline of March 31, 2025. The following provides details of the Spend Plan by program as of December 31, 2023. Attachments A (ODHS Budget to Actuals Status

Tables) and B (OHA Budget to Actuals Table) at the end of this report provide display by spending category.

#### **ODDS Overview**

ODDS has made a significant progress in utilizing ARPA funding to strengthen home and community-based system capacity for people with intellectual and developmental disabilities over the course of 2023. Primary ARPA investments and projects during 2023 included grants to Case Management Entities to support development of emergency response infrastructure, grants open to all ODDS service providers to support capacity restoration and expansion infrastructure, funding for medical/clinical expertise to provide consultation to support ODDS infrastructure development, funding for contracted case management entities to develop infrastructure at the local level, and grants to self-advocates to support expanding access to advocacy efforts for individuals and families. Below are details of the ODDS ARPA funded projects.

#### **ODDS Completed Projects**

### ODDS #34 - Medical/Clinical expertise for the Office of Developmental Disabilities Services

Office of Developmental Disabilities Services supports children and adults with significant medical challenges and co-occurring behavioral health challenges. As a community-based system, we do not have expertise embedded in Office of Developmental Disabilities Services for consultation when medical or serious behavioral health issues arise. These issues may tie to eligibility for Intellectual/Developmental Disabilities services, or how to support someone in a community setting. Funding will be used to bring in short-term clinical support to establish a scope of work for a future, ongoing contract with a partner university or specialized clinic. This consultative expertise will be available for the benefit of individuals with complex medical and behavioral needs receiving 1915(k) and 1915(c) services through I/DD system. A contract with Oregon Health & Science University has been executed and this resource is currently available.

### ODDS #15 - Continue the Covid rate increase of 5% for non-bargained services.

Rate increase was in place through June 30, 2022.

Planned Funding: \$8,452,354 GF

### ODDS #16 - Maintain the increased funding to continue the overall 5% funding in the future rate models.

New rate models were rolled out on July 1, 2022.

Planned Funding: \$49,746,370 GF

### ODDS #17 - Provide a Covid relief increase and one-time payment for Adult Foster Home providers

A Covid related 5% payment increase for Adult Foster Home providers and a one-time flat payment of \$1000 per person served in each Adult Foster Home was agreed to through the collective bargaining process and was implemented on December 1, 2021.

Planned Funding: \$555,097 GF

#### ODDS #18 - Enhance bargaining pot

For Adult Foster Homes by \$5,000,000 (in addition to Governor Recommended Budget levels) – this additional funding was incorporated as part of the collective bargaining agreement and was implemented as a rate increase retroactive to 7/1/2021.

Planned Funding: \$1,392,226 GFFF

### ODDS #19 - Provide a Covid relief payment of \$2,261.99 for Personal Support Workers

Personal Support Workers provide vital in-home services to Oregonians with Intellectual/Developmental Disabilities who live independently or with family. In addition to the Provider Relief Funds available to Personal Support Workers through the financial management services entity, Office of Developmental Disabilities Services will make available a one-time payment of \$2,261.99 for each Personal Support Worker that worked between March 1, 2020, and February 28, 2021. Per the CBA this was implemented December 1, 2021.

Planned Funding: \$6,173,223 GF

### ODDS #20 - Enhance bargaining pot for Personal Support Workers by \$7.5 million (in addition to Governor Recommended Budget levels)

This additional funding has been incorporated as part of the collective bargaining agreement and was implemented on January 1, 2022.

Planned Funding: \$6,579,930 GF

### ODDS #21 – Personal Support Worker (PSW) Training and Benefit Trusts

Enhance the services to PSWs offered through the benefits and training trusts. Initiated September 1, 2021.

Planned Funding: \$2,491,514 GF

#### ODDS #26 - Provider recruitment and retention fund

In September 2021, ODDS issued \$10,000,000 in ARPA grants for staffing recruitment and retention to provider agencies to assist with staffing crisis. Providers completed spending in March 2022 and submitted a report of expenditures and any additional funding unspent.

Planned Funding: \$12,824,402 GF

#### **ODDS Projects in Process of Implementation**

#### **ODDS #1 - Capacity Restoration and Expansion Grants**

COVID-19 has had an extremely negative impact on capacity for all services in the Intellectual and Developmental Disability system. Prior to COVID, there were areas of the state that needed additional provider capacity which was made worse by the pandemic.

To date, ODDS has issued \$5,000,000 for Employment and Day Support Activities Providers who have been substantially impacted by COVID-19. This funding will be imperative to continuing to support people with Developmental Disabilities to go to work and maintain jobs in the community.

ODDS is in the process of issuing \$12,500,000 in funding to rebuild and expand capacity for all services due to the negative impact of the COVID-19 pandemic. ODDS received 109 completed applications requesting

January 2, 2024 Page **6** of **52** 

\$37,000,000 in funding. Forty-one proposals are currently being processed for awards.

Planned Funding: \$10,500,000 GF

#### **ODDS #2 - Diversity, Equity and Inclusion**

Funding will be used to support initiatives to address racism, bias, and disparity for people with Intellectual/Developmental Disability. Including implementation of community focused diversity and equity training, planning and implementation of community outreach events, training and technical assistance for providers to support LGBTQIA+, support for expanding existing community activities to fully include people with Intellectual/Developmental Disabilities, and Tribal relations.

ODDS is working with the Office of Contracts and Procurement to finalize the RFP for an introduction to ODDS training and is in the process of developing an RFP for Innovative Diversity, Equity and Inclusion grants.

Planned Funding: \$5,400,000 GF

#### **ODDS #3 - Emergency Response Grants**

This funding will be made available to all partners and providers to assist with preparation for a future emergency. Funding may be used to: purchase generators for residential homes or family homes, provide emergency kits for people in services, foster connections between Intellectual/Developmental Disability providers and local Emergency Response units, and to provide training on emergency preparedness. Funding will be issued to case management entities upon receipt of application beginning in December 2023. Case management entities will distribute equipment and supplies to participants to best meet individual and local needs.

Planned Funding: \$5,500,000 GF

#### **ODDS #5 - ODDS/CME ARPA Grant Infrastructure**

ODDS has hired limited duration staff to assist with the ARPA projects. Funding has been issued to CMEs for temporary positions to handle the workload impacts of initiating and completing ARPA projects.

Planned Funding: \$11,123,360 GF

#### **ODDS #5 - Impact Oregon Enhancement**

ODDS developed the Impact Oregon website and associated marketing campaign in partnership with partners to attract staff to work in the IDD field. Funding will be used to enhance this effort overall and to market specifically to attract clinicians - nurses, mental health professionals and behavioral professionals to the IDD field. A contract has been issued and the contractor is beginning work including sending out targeted surveys to assist with recruitment campaign efforts.

Planned Funding: \$500,000 GF

### ODDS #6 - Maintenance and updates Provider Homes and Adult and Children's Foster Homes

Group home agencies and Adult and Children's Foster Homes provide housing to individuals with Intellectual/Developmental Disability as part of the overall service. These homes are owned by the provider which excludes them from applying for Medicaid funding for capital improvements and accessibility modifications through the 1915(k). Funding will be used towards grants to provider owned group home agencies and Adult and Children's Foster Homes to make significant repairs and improve accessibility for the homes they own to improve the lives of people with Intellectual and Developmental Disabilities living in the home and those who may live in the home in the future. ODDS is currently in the process of reviewing grant applications and received 189 applications in September 2023.

Planned Funding: \$20,300,000 GF

#### **ODDS #7 - Community Integration Project (CIP) Homes**

The Community Integration Project was initiated with the closure of the Fairview Training Center over 20 years ago. The state provided funding to Housing Authorities to develop homes for use by Intellectual/Developmental Disability provider agencies for people transitioning out of Fairview. The homes were covered by bonds and while under bond, Office of Developmental Disabilities Services funded all maintenance and repairs for the homes. At this point, the bonds are being paid off. Office of Developmental Disabilities Services will use this funding to assess the long-term maintenance needs of Community Integration Project homes under bond and those no longer under the bond and use funding to perform that maintenance. This project will impact 194 homes.

Grant proposals are currently being reviewed by ODDS contracts.

Planned Funding: \$2,000,000 GF

### ODDS #8 - Infrastructure funding for contracted case management entities

This funding will help develop infrastructure at the local level by providing resources specifically for the 45 contracted case management entities. This funding will be used to encourage and incentivize contracted case management entities to engage in local initiatives that align with goals to improve, increase, and expand access to Intellectual/Developmental Disability services. Case Management contracts have been executed and second amendments will be processed soon.

Planned Funding: \$2,000,000 GF

#### **ODDS #10 - Blueprint Funding**

ODDS has engaged in a large project intended to reshape and enhance case management services in Oregon. This funding will be used to fund implementation of recommendations from the Blueprint.

Planned Funding: \$5,000,000 GF

### ODDS #11 - Design a statewide crisis system for people with Intellectual/ Developmental Disabilities

This funding will be used to procure an expert on crisis systems for people with Intellectual/Developmental Disabilities to assist Office of Developmental Disabilities Services and our partners in planning and design of a crisis system and provide supports for people who may be in crisis, such as guardianship to ensure they can continue to be served in their homes and other community-based service settings. This will require engagement and collaboration with partners including Oregon Health Authority, Coordinated Care Organizations and Child Welfare. We expect this funding to support development of a plan for implementation and possibly, initial costs needed for implementation. OHA and ODDS SACU are beginning to work on an integrated mental health model pilot and are in the process of developing a statement of work.

### **ODDS #12 - Funding for HIPAA Compliant technology for Case Management Entities**

With the pandemic, all services had to move to remote service models. This has proven successful for some individuals served and as we look to the future, we want the option for remote services to continue. This will also provide access to technology for residential settings to support efforts to decrease isolation during pandemics as called for in House Bill 2394 During the pandemic, the Health and Human Services did not enforce HIPAA requirements for remote services. ODDS is in the process of drafting the RFP for innovative technology grants. A contract with DocuSign has been executed and work is continuing to move forward.

Planned Funding: \$2,000,000 GF

### ODDS #13 - Cross-training and Technical Assistance for Child Welfare and Case Management Entities

This funding will provide staff to serve as liaisons between DD and CW in each program and to support placement and system navigation. We will also enhance cross-system training and learning opportunities for field staff in each program and expand resources for (foster) families serving children with I/DD to increase their understanding and skills. ODDS has hired two positions dedicated to supporting this initiative and is working to refine training.

Planned Funding: \$74,249 GF

#### ODDS #14 - Statewide training and technical assistance resource

This resource is designed to provide technical assistance at the regional and local level and would focus on: content-knowledge and timely interpretation based on local/regional culture and backgrounds, provide general family resources for individuals and families who are not yet eligible, provide outreach to other agencies about Intellectual/Developmental Disabilities services such as school districts, focus on local capacity building, specifically developing provider types needed for the region and developing culturally responsive providers. ODDS is in the process of developing an interagency agreement with the Oregon Department of Education.

### ODDS #16 - Enhancing and expanding access to the Oregon Intervention System

Enhancing and expanding access to the Oregon Intervention System (OIS) - OIS is Office of Developmental Disabilities Services' approved curriculum for prevention and intervention. Office of Developmental Disabilities Services has initiated a Request for Proposal for operation of the Oregon Intervention System. Additional funding is needed to refresh and update the curriculum and expand access to the training for behavioral support professionals, direct care staff and family caregivers. The Oregon Intervention System (OIS) enhances community living for individuals who exhibit challenging behaviors by providing education and training to the persons designated to support them thereby preventing a need for a non HCBS setting. ODDS has reviewed proposals and is in the process of issuing the notice of award.

Planned Funding: \$250,000 GF

#### **ODDS #6 - Family Network Restoration and Expansion**

This funding will be used to conduct a study and evaluation of the overall approach to the Department-funded Family Networks in order to identify existing best practices in peer/family supports and opportunities for improvements including but not limited to creative ways to meet the needs of individuals receiving services and their families, strengthen supports to diverse communities, including historically marginalized and underserved groups, create and expand capacity of culturally specific Networks. ODDS is working with the Office of Contracts and Procurement to finalize the scope of work.

Planned Funding: \$350,000 GF

### ODDS #7 - Provide reliable information about IDD services to people with IDD and families

This funding will be used to create an easily accessible information resource for families and people with IDD. We will make the resources easily accessible, culturally, and linguistically appropriate and supportive of the values of Oregon's IDD system. ODDS has executed a contract for the first phase of this work with a focus on website development.

#### ODDS #8 - Develop resources and services for parents with IDD

In partnership with Child Welfare, this funding will be used to develop resources, training materials and ultimately specialized services for parents with IDD. This will include support in adaptation of CW assessments and practices to meet needs of children and parents with disabilities. The goal will be to help parents learn parenting skills, so they are better able to parent their child/children. Additional training will include healthy relationship training. Outcomes will be tracked to support future efforts to secure similar funding if the initiative is successful. ODDS is working to finalizing scope of work language.

Planned Funding: \$1,500,000 GF

#### ODDS #23 - Expand Life Course and Individual Support Plan trainings

Life Course is the framework we will be incorporating into the Individual Support Planning process through the redesign effort. This funding will be used to expand training opportunities and delivery options on the Life Course for families and self-advocates and build a network of local leaders trained on the framework that can serve as a local resource. We will support trainings that are culturally responsive and meet the diverse needs of the audience, including funding of peer delivered models. We will also expand access to trainings on the Life Course framework for all provides to support person-centered approaches that focus on each person's goals and community inclusion beyond formal Medicaid-funded services. ODDS is in the process of developing scope of work language.

Planned Funding: \$375,000 GF

#### ODDS #26 - Fund to support advocacy by self-advocates

Oregon wants to expand access to advocacy trainings, meetings, and events for people with Intellectual/Developmental Disabilities. This funding will support creative ideas for expanding access to advocacy efforts for people with Intellectual/Developmental Disabilities. Payments may support any of the following: funding for local self-advocacy organizations, support for travel costs to meetings and trainings and marketing materials in multiple languages for self-advocacy organizations. ODDS is currently accepting grant proposals through January 26, 2024.

#### **ODDS #27 - Restore funding for the Fairview Trust**

The Fairview Trust is now with the Oregon Community Foundation. Its purpose is to support housing options for people with Intellectual/Developmental Disabilities. With this funding, we will restore the \$6,000,000 General Fund that was cut during the economic downturn in the 1990s and enhance the funding to expand access to housing options for people with Intellectual/Developmental Disabilities. This funding can also to go to support development of "smart homes" that increase independence for people with Intellectual/Developmental Disabilities. ODDS is working to finalize a contract with the Oregon Community Foundation.

Planned Funding: \$6,000,000 GF

#### ODDS #33 - Study to allow use of Rideshare

Lack of access to transportation continues to be a barrier for people with Intellectual/Developmental Disabilities. Office of Developmental Disabilities Services would like to expand access to transportation by allowing use of ride sharing services for people with Intellectual/Developmental Disabilities. A number of challenges have prevented use of these services for people with Intellectual/Developmental Disabilities. This funding will be used to initiate a study of other states use of these services with the goal of adding them as approved providers to our Medicaid authorities. ODDS has conducted research and is in the process of contingency planning around this effort.

Planned Funding: \$125,000 GF

#### ODDS #13 - Stabilization and Crisis Unit (SACU) enhanced funding

The state operated Stabilization and Crisis Unit (SACU) will utilize the enhanced funding made available through ARPA to support the Direct Support Crisis Specialist (DSCS) workforce and make enhancements to improve services for people living at SACU. ODDS has issued frontline worker payments. The SACU training department attended a National Human Services Development Conference in October 2023. Funding is continuing to be spent out towards safety apparel, training, generators and other emergency preparedness supplies and kits.

### ODDS #30 - Grants to provide Personal Support Workers with devices to access

#### **Electronic Visit Verification**

A 2017 federal law requires all states to implement Electronic Visit Verification for in home workers. Office of Developmental Disabilities Services implemented its Electronic Visit Verification system in 2020 but use of the system amongst Personal Support Workers remains low. Lack of access to a smart device to log into Electronic Visit Verification to record work hours is a barrier. These funds will provide an alternative EVV compliant option to Personal Support Workers who lack access so they can log into the system to record their time.

This project is currently in progress with a telephonic solution; we are awaiting the contract execution to begin.

#### **APD Overview**

APD focused their Long-Term Care Investment Package on enhanced rates for wages in assisted living, memory care, skilled nursing facilities, and in-home care services; workforce development and training; and capital improvement programs. It supported infrastructure improvements in service delivery for senior centers, nutrition programs, and adult day centers. APD also developed new services for individuals to ensure their well-being. APD used an outcomes-focused approach and used various data when making programmatic decisions.

Future investments include funding existing programs that have shown measurable success and funding new programs to address emergent issues. One example is the identification of a downward trend in older adults and people with disabilities receiving COVID and flu vaccines. In response, APD is developing a vaccine outreach campaign and provider support programs to respond to upcoming respiratory season and will increase the number of on-site vaccine clinics within ALFs, RCFs, and NFs for the 2024-25 respiratory season. Additionally, APD continues to expand and make investments in workforce recruitment, development and training, both internally and within the caregiver workforce.

#### **APD Completed Projects**

#### APD #1 - Deploy GrandPad technologies to the Program of All-Inclusive Care for the Elderly (PACE) participants

This project provided GrandPad technologies to Program for All Inclusive Care of the Elderly (PACE) participants enrolled in Providence ElderPlace (PEP) to support telehealth and access to virtual meetings, as well as to increase social connections and reduce isolation. To date, a total of 338 PACE participants have received a GrandPad. Providence ElderPlace has seen increased engagement with their clinics during the pilot. 68 percent of these individuals are still using these GrandPads. This project is complete.

Planned Funding: \$113,592 GF

### APD #2 - Deploy GrandPad technologies to in-home consumers served by Aging and People with Disabilities (APD)

This project provided GrandPad technologies to APD in-home consumers to increase social connections and reduce isolation. A total of 357 GrandPads were given to individuals receiving services in-home. A wait list

was obtained if a tablet became available for another to use. An analysis of the impact shows that 100 percent of participants feel that the GrandPad was beneficial to them and approximately 86 percent indicated a positive impact on their emotional well-being. This project is complete.

Planned Funding: \$158,310 GF

#### APD #3 - Performance-based bonuses for PACE organizations

APD developed performance-based criteria for the largest PACE organization, Providence Elder Place (PEP). The new performance measures incentivized improvements in PEPs performance related to race and ethnicity. The change was negotiated with PEP and the language was added to contracts. As of December 8, 2023, PEP is currently meeting 4 of 5 key performance metrics. The project is complete.

Planned Funding: \$\$1,216,092 GF

#### APD # 5 - Wage and Cost Study of Long Term Care Providers

APD contracted with the Institute on Aging at Portland State University to conduct a wage and cost study focused on assisted living, residential care and memory care communities. The report was finalized in late 2022. The study included collecting data from care-related staff and community partners to identify challenges associated with working in these facilities. The data gathered informed the Legislature in 2023 and assisted providers, consumers, and agency staff in understanding the average wages paid to staff and the total cost to provide care. Additional funding was used from other ARPA sources.

Planned Funding: \$139,590 GF

### APD # 9 - Online infection prevention and control training curriculum for Community Based Care

APD partnered with Oregon Care Partners to develop high quality, evidence-based infection prevention and control training curriculum and made that training accessible to long term care facility staff at no cost to assure staff competency in infection prevention and control practices. The investment fulfilled ODHS requirement to make available online pre-service staff training defined on HB 2600 (2019). It also supports advanced training curriculum for the facility-designed infection control point person. This project has been completed.

Planned Funding: \$47,916 GF

#### APD # 13 - 2023 APD/AAA Statewide Case Management Conference

The goal of this project was to create a conference to support, empower, motivate and educate APD and Area Agency on Aging (AAA) case management professionals across the state. The conference was held in June 2023 and offered both in-person and remote options. This event was successful with about 700 participants reporting a 91percent level of satisfaction from in person attendees, and 76 percent for virtual attendees.

Planned Funding: \$150,000 GF

#### APD #21 - Expand the Oregon Money Management Program

The Oregon Money Management Program (OMMP) provides support to individuals who can no longer manage their own funds or who have been financially exploited. To expand the program to serve more individuals, APD used these funds to add OMMP as a service in the Medicaid State Plan, allowing Medicaid eligible individuals to access the services. Additionally, funding was provided to OMMP contractors to allow them to serve more pre-Medicaid eligible individuals to prevent the possibility of institutionalization. This project is complete, though it is now a permanent part of the APD service array. With the expansion, 600 Medicaid eligible individuals are being served.

Planned Funding: \$1,00,000 GF

### APD #24 - Housing support services for individuals receiving APD inhome services

Access to, and maintaining access to, affordable housing is a critical issue for older adults and people with disabilities. This project allowed APD to amend the 1915(c) in January 2022 to provide Housing Support Services statewide. This new program is a permanent additional to the APD service system with a goal to assist Medicaid service individuals with obtaining and maintaining housing. There are currently 17 Housing Navigators statewide through contracting with the Area Agencies on Aging and several internal APD staff. In 2023, over 300 individuals were served. Housing Support Services include, but are not limited to:

- Conducting a housing assessment identifying individuals' preferences related to housing and needs for support to maintain housing;
- Budgeting for housing/living expenses;
- Accessing sources of income necessary for rent;

- Home management;
- Establishing credit; and
- Understanding and meeting obligations of tenancy.

Planned Funding: \$550,000 GF

### APD #25 – One-time \$2,261.99 payment to Home Care Workers (HCWs)

Description: The initial intent of this funding was to provide a one-time payment of \$500 to any Home Care Worker who worked between March 1, 2020 and February 28, 2021 during the COVID-19 pandemic. During collective bargaining this amount was increased to \$2,261.99. Payments were made to eligible HCWs on December 1, 2021.

Planned Funding: \$9,436,695 GF

### APD #26 - Enhance bargaining pot for Home Care Workers in addition to the amount in GRB

Enhancing the bargaining pot allowed Oregon to provide competitive wages to Home Care Workers (HCW) to help address workforce shortage concerns. New rates and benefits were in effect throughout the biennium. This included two wage increases, additional benefits, and creation of new wage differentials for HCWs who are trained and are serving high need individuals.

Planned Funding: \$11,539,313 GF

### APD #28 - Enhance services, benefits, and training opportunities available to Home Care Workers

This project provides ongoing training and supports for Homecare workers and improves outcomes for individuals receiving in-home supports from these workers. This project is complete and administered via a joint trust with benefits authorized by the trust's board.

Planned Funding: \$1,771,695 GF

### APD #29 - One-time payment of \$1,000 per resident to Adult Foster Homes

The COVID-19 pandemic was extremely challenging for long term services and supports providers, including Adult Foster Homes. Unfortunately, these providers did not receive special funding. This funding was used to provide

Adult Foster Home providers a one-time payment for all residents who were served from March 1, 2020 through February 28, 2021, during COVID-19 pandemic. The amount was collectively bargained with SEIU and payments were issued on December 1, 2021.

Planned Funding: \$1,037,923 GF

### APD #30 - Provide a temporary 5 percent COVID rate increase for Adult Foster Homes

As mentioned above, COVID-19 was an extremely challenging time for Adult Foster Homes. This funding provided a temporary 5 percent rate increase from July 1, 2021 through March 31, 2022 to Adult Foster Homes who continued to operate during the COVID-19 pandemic. Payments were issued for the new rate starting on December 1, 2021. Retroactive payments for the July through November period were processed in 2022.

Planned Funding: \$331,812 GF

### APD #31 - Enhance bargaining pot for Adult Foster Homes by \$5,000,000 in addition to GRB levels

Enhancing the bargaining pot for Adults Foster Homes allows for competitive wages for employees, and for homes to remain open during the COVID-19 pandemic. It also encourages new individuals to become Adult Foster Home owners to help address medical and personal care concerns for individuals in need. With the assistance of this increased bargaining pot funding, ODHS was able to increase rates for adult foster home in a second increase in the biennium. This new rate was effective on April 1, 2022.

Planned Funding: \$4,495,152 GF

### APD #32 - Provide a 5% COVID differential to Assisted Living Facilities, Residential Care, Memory Care, and In-Home Agencies

APD proposed a 5 percent rate increase for Community Based Care facilities (CBCs) for July 1, 2021, through March 31, 2022, to assist these providers in weathering the effects pandemic. Additional payments were needed to help address workforce shortage concerns and increased costs specifically related to the COVID-19 pandemic. These rate changes were implemented timely, and the timeframe was extended to June 30, 2023, through legislative direction.

Planned Funding: \$885,353 GF

### APD #33 - Provide a 5% increase to Assisted Living Facilities, Residential Care, Memory Care, and In-Home Agencies

This increase for CBCs was an additional 5 percent effective on July 1, 2021 and July 1, 2022. Additional payments for these provider types were needed to help address workforce shortage concerns. The increased rates allowed the identified providers to offer competitive wages. With legislative direction, this amount was increased to 10 percent and was extended through June 30, 2023. This has been fully implemented.

Planned Funding: \$15,362,334 GF

# APD #35 – Expand the number of staff to adequately oversee the identified enhancements, expansions, and strengthening under section 9817(b) of the ARP

APD identified that they needed additional staff to complete the work proposed in the spend plan. APD asked for position authority for two Principle Executive Manager D Level, four Operation and Policy Analyst 3, three Training and Development Specialist 2, two Training and Development Specialist 1, one Executive Support Specialist 2, and one Office Specialist 2 positions. These positions were classified as limited duration and classification reviews delayed hiring meaning very few positions were filled.

Planned Funding: \$341,959 GF

#### **APD Projects in Process of Implementation**

#### **APD #6 - Workforce Recruitment**

Description: APD hired one limited duration Public Affairs Specialist 3 to begin to shift the public narrative on direct care workers, celebrate current work, promote well-being, and inspire the next generation of care workers and support staff. This project is ongoing. However, some of the highlights of this work include:

- Support for the Oregon Home Care Commission Provider Recruitment Pilot Project and Workforce Collaborative including creation of an animated video with diverse and inclusive imagery.
- An APD Case Manager recruitment video focused on a "Day in the Life" of an APD case manager video. The video is available in American Sign Language, English, Russian, and Spanish

- Adult Foster Home Provider Recruitment Toolkit including flyers, tri-fold pamphlets, FAQs and recruitment videos.
- Caregiving Campaign Recruitment including a caregiver video.

Planned Funding: \$37,573 GF

### APD #7 - Grant funding up to \$25,000 to congregate meal sites to help modernize infrastructure

APD provided grants to existing congregate meal sites to modernize their infrastructure and make their sites more accessible and welcoming. As of December 8, 2023, there have been a total of 35 awards. APD is working with additional senior centers and Oregon Tribes to spend the remaining funds. A few examples of how the funds were used include:

- The purchase of new kitchen equipment and appliances.
- Upgrade of the physical plant or repairs/remodeling.
- Improvement of the dining experience through the purchase of cold storage, kitchen supplies, and other items.

Planned Funding: \$3,125,000 GF

#### APD #8 - Long term care capital improvement fund

This project provided funding to licensed care facilities to address issues that were highlighted through COVID-19 and natural disasters for Home and Community-Based Services compliant programs to keep residents and workers safe and to create good-paying jobs. Improvements include HVAC and air quality systems, backup power sources, room configurations to improve infection prevention, upgrading fire suppression systems, and virtual visit technology. APD issued administrative rules in OAR 411-062. As of December 5, 2023, approximately 180 projects were completed and \$11,500,000 was reimbursed to providers. Additional projects are still underway and final invoices are due not later than January 31, 2024.

Planned Funding: \$11,106,846 GF

### APD #10 - Provide startup costs not to exceed \$100,000 to develop more adult day centers in Oregon with a maximum of 10 new centers

APD ranks as the lowest state when it comes the number of adult day centers. This project provided funding to expand the number of adult day centers in Oregon to serve more individuals. As of December 7, 2023, six applicants have passed the application process and one is still in review.

ODHS is working with these proposers toward certification and finalizing the grant agreements.

### Planned Funding: \$1,000,000 GF APD #11 - Allocate funding for senior centers to modernize and improve transportation availability

Transportation for older adults and people with disabilities always ranks high as an unmet need. This project is providing funding to support senior centers in providing needed transportation to individuals. As of December 8, 2023, there have been a total of 17 awards. APD is working with additional senior centers and Oregon Tribes to spend the remaining funds. A few examples of how the funds were used include:

- Vehicles, such as ADA accessible vehicles and passenger vans;
- Wheelchair lifts for fleet vans and wheelchair racks for fleet vehicles;
   and
- GPS, tablets, back-up cameras, and monitors for fleet vehicles.

Planned Funding: \$3,750,000 GF

# APD #12 - Allocate \$3,000,000 to establish an innovation fund to improve the Long Term Services and Supports system and reserve \$2,000,000 on efforts to promote service equity and cultural competence in the long term care system

This project is providing funding to support organizations to develop or support culturally responsive and innovative strategies, programs, and approaches. Strategies can include training and education, communication engagement strategies, nutritional and meal programs, and collaboration and partnership with local and regional health systems to improve access to care. A total of 12 organizations received innovation funds. Most contracts ended 6/30/2023, but some are still in process. Organizations receiving funds include:

- Mental Health Association of Oregon
- The Immigrant & Refugee Community Organization
- Providence Portland Medical Foundation
- Minds in Motion Initiative
- Legacy Emanuel Hospital and Health Center
- Lane Council of Governments
- Kathleen Humphries PhD
- Ecumenical Ministries of Oregon

- Community Action Team Inc. of Columbia County, Oregon
- Community Action Program of East Central Oregon
- Cascade AIDS Project
- AntFarm
- African Family Holistic Health Organization

Planned Funding: \$3,000,000 GF

### APD #14 - Convert in-person training to online training to support case managers

APD traditionally has provided in-person Core Case Management (CCM) Training requiring new case managers to wait to receive necessary training. This project was developed to convert the in-person training to online, on-demand training modules that will allow new case managers to begin training immediately, learn at their own pace, and provide a foundation of fundamental concepts to build upon in future training. This is a comprehensive online training program (50 modules) with guided tutorials and an interactive workbook/guide for new case managers. This project is still in process with an expectation that all the modules will be finalized and available in April 2024.

Planned Funding: \$75,000 GF

#### APD #15 - Training of LTSS providers on service equity

APD contracted with the Oregon Health Care Association to develop and deliver equity training for Long Term Services and Supports (LTSS) providers. Most of this project is complete as of June 2023. Programs and events included:

- Quality Summit DEI Focused Education-2 full-day event
- DEI Lunch and Learn Education Series- 4 one-hour sessions
- Annual Convention DEI Training Track- 1 multi-session training track
- DEI Leadership Academy- 2 events
- On-Site DEI Intensive Consultancy Pilot

Planned Funding: \$175,000 GF

# APD #16 - Establish a \$20,000,000 performance based contracting fund to incentivize community care facilities to achieve quality, staffing and compensation benchmarks.

This project was used to fund a "Wage Add-on" program for community-based care facilities. The program provided a ten percent increase to their Medicaid rate if they had a starting wage of \$15 or higher for their direct care workforce. APD adopted administrative rules and a total of 562 Community-Based Care (CBC) providers successfully enrolled in the program. Due to the success of the program, expenditures are higher than expected.

Planned Funding: \$16,258,355 GF

### APD #17 - Establish a \$2,500,000 performance based contracting fund for Area Agencies on Aging (AAAs) meeting certain metrics

The project provided additional funding for AAAs to incentivize the AAAs to meet equity related benchmarks. It included contract changes to include specific equity deliverables, including tracking and developing plans to meet equity demographic standards for consumers served and the staff employed at the AAA. All 16 AAAs met the new metrics.

Projected Funding: \$1,250,000 GF

## APD #18 – Provide funding to address unique needs that keep individuals out of crisis and maintain their ability to live in their own home

Funding to address housing related needs not covered under the 1915(k) State Plan option or 1915(c) Waiver. Examples of such allowed expenditures include repairing well pumps, repairing furnaces, and assisting with transportation back to Oregon when a consumer needs assistance in returning to Oregon from another state. This project was implemented in 2022. As of December 6, 2023, a total of 667 individuals were served helping them maintain their ability to stay in their own home.

Planned Funding: \$500,000 GF

#### APD #20 - Eliminate the client contribution for in-home consumers

Previously, consumers living in their own home had to pay for a portion of their services. This frequently consumers to refuse or reduce critical services, especially with the rising costs of housing. APD was able to eliminate the client contribution for individuals receiving services in-home

under APD's 1915(c) Waiver. The elimination of the client contribution for in-home consumers increased the ability to afford housing to remain in their own home. APD implemented this change on January 1, 2022. However, due to coding errors, expenditures have not yet been reported. This will be corrected in the 2023-2025 biennium.

Planned Funding: \$1,187,500 GF

# APD #23 - Amend current Oregon Administrative Rule to allow Deaf/Blind individuals who qualify for Medicaid to receive State Plan Personal Care (SPPC) services

Oregon has limited services for Deaf/Blind individuals, typically they do not qualify for Medicaid long term services and supports because of strict eligibility criteria. This funding was initially intended to support changes to the Medicare State Plan Personal Care. However, based on recommendations from the Oregon Deaf and Hard of Hearing Advisory Committee, APD determined that half the funding should be used to expand SPPC eligibility, and half the funding should be used to develop a new Co-Navigator option to support individuals who do not qualify for Medicaid but need assistance to navigate their daily lives. The SPPC benefit has been expanded but the Co-Navigator program should be implemented in mid-2024. An RFP for the co-navigator is underway.

Planned Funding: 1,431,000 GF

#### APD Projects that that are in process or are being modified:

#### **APD #4 - Workforce Development and Training**

Description: This funding has been repurposed to fund the Wage and Cost Study required in the HB 5506 Budget Note. This reallocation still meets the original intent. Work is currently underway with a final report due September 2024.

Planned Funding: \$250,000 GF

### APD #19 - Provide funding to pursue an 1115 demonstration waiver to support family caregivers

APD filed the 1115 Demonstration waiver application in late 2021. The waiver will allow APD to expand Oregon Project Independence and add more intensive supports for family caregivers. APD is still waiting for a final decision from the Centers for Medicare and Medicaid Services (CMS).

January 2, 2024 Page **25** of **52** 

CMS has indicated that they expect to approve the request in December 2023.

Planned Funding: \$2,500,000 GF

#### APD #22 - Address social isolation for APD in-home consumers

Older adults and people with disabilities are at a disproportionally high risk of being lonely and socially isolated. APD is continuing to work on administrative rules and system coding to make the program a reality in the Medicaid system.

Planned Funding: \$3,190,621 GF

#### **New APD Projects Based on Available Funding**

The following projects are dependent upon Legislative and CMS approval and the availability of HCBS funding.

#### **APD #36 - Caregivers Communication Campaign**

Locating and hiring caregivers to serve in long term services and supports systems continues to be a barrier to serving Oregonians. APD intends to contract with a national website, directcarecareers.com, to assist with this work. This website has been established to provide matching between home and community base services providers seeking staff and applicants. The website, a special project by Advancing States, recruits for all settings. APD will use these funds for non-institutional, community-based settings. APD will also use this website to meet the mandates in SB 1556. The APD project team met in Dec 2023 and project planning has started.

Planned Funding: \$950,000 GF

#### APD #37 - Mental Health Early Intervention

Many older adults and people with disabilities experience depression that does not rise to level of mental health treatment. However, evidence shows that early intervention and prevention programs are effective in reducing the effects of depression in these populations. APD has had funding since 2013 biennium to provide evidenced-based intervention programs. However, the available funding has not kept pace with demand so this funding will allow APD to do a second round of contracts to serve more individuals. APD has worked with community partners to better define the contract expectations and the request for proposals should be posted

January 2, 2024 Page **26** of **52** 

shortly.

Planned Funding: \$1,000,000 TF/GF

#### APD #38 - Homecare Worker/Consumer Matching Service

APD consumers struggle to find homecare workers that are available to meet their needs. Though there are registries available to help, there is still a missing step in aligning needs such as the schedule the consumer needs with the availability of workers. APD proposes to contract with an outside vendor to assist with that detailed, in-person matching.

Planned Funding: \$1,000,000 GF

#### APD #39 - Support potential workers to become Homecare Workers

Some individuals find the process of becoming a Homecare Worker difficult and they often do not go all the way through the process. APD intends to expand the use of easy on-line applications, virtual recruiting platforms and developing a mentoring process. A pilot is currently under way and this additional funding will allow for statewide expansion.

Planned Funding: \$750,000 GF

#### APD #40 - Homecare Worker Recruitment

APD intends to purchase professionally developed workforce recruitment efforts including media, on-line recruitment, and other ways. The goal is that this project, in addition to the projects listed above, will reduce the number of consumers who have been unable to find a caregiver. An internal team has started meeting and a RFP should be released in early 2024.

Planned Funding: \$1,000,000 GF

#### **APD #41 – Adult Foster Home Recruitment and Quality Initiatives**

An additional area of concern is that the APD adult foster home (AFH) capacity continues to decrease. These AFHs serve some of APD's most complex consumers. Without sufficient capacity individuals will be left without the providers they need to ensure their health and safety. These initiatives are currently in development:

Media outreach is being developed to reach new AFHs providers who
typically learn about the AFH opportunity through family and friends.
Unfortunately, word of mouth is no longer sufficient to help bring on

the needed AFHs. This project will provide funding to initiate efforts similar to the recruitment efforts above. An internal team has started meeting and a RFP should be released in early 2024.

- APD is working on expanding capacity of AFHs in underserved geographies (net gain of 120 beds).
- APD is adding 6 ventilator-capable AFHs (30 vent beds).
- Development of a technical assistance (TA) webinar series to support the roughly 1,400 adult foster home providers that care for more than 6,000 older adults and people with disabilities is underway. The goals of the TA series are to improve quality, person-centered service delivery, and AFH provider experience. Planning is underway and development should occur by the end of 2024.

Planned Funding: \$650,000 GF

#### APD #42 - NurseLearn Training

APD has contracted with Elderwise, an expert LTSS organization, to provide additional training and support for nurses serving in CBC settings to improve quality of nursing care, increase recruitment and retention, improve resident outcomes, and increase training and job placement pipelines for nursing students.

Planned Funding: \$1,865,356 GF

### **APD #43 - Gerontological Nurse Recruitment**

APD has previously used ARPA State and Local Fiscal Recovery Funds to support efforts to recruit, train and support gerontological nurses. Based on that success, APD intends to support the partnership between the Oregon Health Care Association, the University of Portland School of Nursing and the University of Nebraska Medical College Gerontological Nurse Online Prep Program. This project will fund gerontological nursing certification scholarship program and expansion of long-term care facility clinical sites for University of Portland nursing student trainees. Contract amendments are underway.

Planned Funding: \$750,000 GF

### APD #44 - Promoting Diversity in LTSS Leadership

Direct care workers are disproportionately represented by people of color but are often absent in leadership roles within long term services and supports providers. This project aims to address this disparity head on; developing strategies to recruit and retain individuals of color in leadership roles in Oregon. APD will be working with community partners to develop an implementation plan for this initiative.

Planned Funding: \$500,000 GF

#### **APD #45 - Community Integration Supports**

CMS is increasingly clear that they expect a higher level of community integration than has been traditional in the APD system. Provider rates do not compensate providers for one-on-one activities nor direct supports in the community. APD intends to pilot a new model of support that addresses this consumer. APD will be engaging with consumers, advocates, providers, and community partners to help design this new pilot.

Planned Funding: \$1,000,000 GF

### APD #46 - HCBS Setting Requirement Improvement Project

CMS recently completed a site visit to ODHS and OHA licensed facilities to determine the state's compliance with the Home and Community Based Services setting requirements. In the report that followed, CMS highlighted areas of concern that needed remediation. APD will be in compliance by June 30,2024. However, it has become clear that the APD system must more fully embrace the changes. This funding will support APD's efforts to move our system to that place where everyone fully understands and implements HCBS requirements as a standard way of doing business. APD is working on an initial plan, will can input from community partners and an RFP will be introduced in early 2024.

Planned Funding: \$500,000 GF

### APD #47 - Direct Care Worker Engagement

Description: Drawing from the Oregon-specific recommendations made in September 2022 by PHI International in their commissioned report Strengthening and Stabilizing the Direct Care Workforce in Oregon. Recommendation #1- Engage direct-care workers in developing strategies and solutions. New program currently in development

Planned Funding: \$750,000 GF

### **APD #48 – HEROES Project (APS)**

Oregon APS is participating in a rare opportunity to be part of a feature length-documentary on the Heroes of Adult Protection (HOAPS). We anticipate this project will strengthen our community outreach efforts, raise awareness about adult abuse, explore challenges that are faced by APS and highlight everyday people who take the risk to report abuse each day. The outreach efforts will include professionals in allied fields, policy makers, community members, legislators; all accomplished through conferences, outreach efforts and industry specific symposiums.

Planned Funding: \$520,000 GF

#### APD #49 - APD Staff Training and Support

The impact of COVID and the public health unwinding continue to add additional stress to APD staff. APD is partnering with entities who understand how to help organizations and individuals manage stress in extremely challenging times. Training and support will be offered to local and central office staff. The intent is to improve well-being and assist in retention of staff.

Planned Funding: \$350,000 GF

# APD #50 - LGBTQ+ APS Outreach, Social Isolation Prevention and Staff Training

APD's groundbreaking research into the experiences and needs of LGBTQIA2S+ identified critical areas that need to be improved to address these gaps and barriers. In collaboration with community partners, Tribes and community members, APD intends to invest ARPA HCBS funding to support the following projects:

- Development of a statewide public education and outreach campaign related to abuse and protective services. Focus will be on groups experiencing disproportionate rates of abuse and discrimination. Barriers to reporting will be addressed such as systemic discrimination, historical distrust of governmental agencies and reporting and fear of retaliation.
- Addressing social isolation through Area Agencies on Aging and tribal partners statewide. Consultant and technology vendors will provide programming, technical assistance, training and equipment.
- Development of mandatory LGBTQIA2S+ training for APD and offer

to OEP staff through contract to develop or purchase of existing training.

Planned Funding: \$3,500,000 GF

#### **APD #51 - Vaccine Outreach and LTSS Provider Support**

APD has identified a direct downward trend in older adults and people with disabilities receiving COVID and flu vaccines. In response, APD is developing a vaccine outreach information campaign and provider support programs to respond to upcoming respiratory season. The population health team intends to actively assist with increasing the number of on-site vaccine clinics within ALFs, RCFs, and NFs for the 2024-25 respiratory season. The estimated budget will support pharmacies to support smaller and/or rural facilities.

Planned Funding: \$250,000 GF

# APD #52 – Modernizing APD's person centered service planning system and processes

APD's person centered service planning processes were created in the 1990s. Those processes have not kept pace with new expectations. Prior to COVID, APD had embarked on a process to adapt the Charting the LifeCourse framework to serve older adults and people with disabilities. APD needs to reengage with this work and intends to contract with the University of Missouri to help chart out an implementation plan.

Planned Funding: \$800,000 GF

### **APD Removed Project Plans**

## APD #27 - Provide seed funding toward a new healthcare trust for long term care workers

This project was unable to be funded through APD. Other funds were provided to OHA under SB 800 to implement this concept. Funding is being reapportioned to other projects.

Planned Funding: \$0 GF

## APD #34 - Provide a \$500 per participant fee to Adult Day Service providers to help with the restart of programs.

Adult Day Service providers were not able to fully operate for most of the COVID-19 pandemic. Additional funding was needed to better support the

January 2, 2024 Page **31** of **52** 

health outcomes of individuals accessing these services. All 16 Adult Day Service providers in Oregon received these payments but the expenditures can't be reported to CMS until coding is resolved.

Planned Funding: to be determined

### **Child Welfare Spending Plan**

Child Welfare invested a small amount of ARPA funds in a demonstration project to develop provider capacity to deliver services and supports that are traditionally available to youth once they are determined to be eligible for services through ODDS prior to and during that determination process. The goal was to determine if Child Welfare could support youth who may eventually become eligible for services through ODDS in accessing services in the community and provide placement stability without the need for higher levels of care. This project is scheduled to end on December 31, 2023and Child Welfare will further analyze the efforts for successes and lessons learned. Following the end of this project, Child Welfare will have no further investments through ARPA savings.

Actual Spend Plan: \$670,000

### **Oregon Health Authority Spending Plan**

#### **OHA Infrastructure – Innovation Fund**

Allocate \$2,250,000 to establish an innovation fund to improve the behavioral health system. Reserve \$1,000,000 on efforts to promote service equity and cultural competence in the behavioral health residential system.

Planned Funding: \$2,250,000 GF

#### **OHA Infrastructure – Provider Service Equity**

Allocate \$500,000 to support training development and delivery for providers on service equity.

Planned Funding: \$250,000 GF

#### **OHA Infrastructure – Performance Based Contracting**

Establish a \$3,000,000 performance based contracting fund to incentivize Substance Use Disorder (SUD) and Mental Health (MH) providers to achieve quality/staffing/compensation benchmarks jointly established via partner/accountability process.

Planned Funding: \$898,200 GF

#### **OHA Infrastructure - HSD Staff**

OHA estimates a need for 2 Principle Executive Manager E positions, four Operations and Policy Analysts 3 positions, two Training and Development Specialists 2 positions, one Executive Support Specialist position and one Office Support 2 position.

Planned Funding: \$658,925 GF

### **OHA Infrastructure - Technology**

Funding for HIPAA Compliant technology for CMEs and providers. With the pandemic, all services had to move to remote models. This has proven successful for some individuals served and as we look to the future, we want the option for remote services to continue. This will also provide access to technology for residential settings to support efforts to decrease isolation during pandemics as called for in HB2394 During the pandemic, the HHS did not enforce HIPAA requirements for remote services. When the Public Health Emergency ends, we want to ensure these services can

January 2, 2024 Page **33** of **52** 

continue with the use of appropriate HIPAA technology.

Planned Funding: \$500,000 GF

#### OHA Infrastructure – New assessment tool

Allocate funding for a contractor to develop new assessment tool and comprehensive person-centered service plan and training for IQA, providers, etc.

Planned Funding: \$125,000 GF

### **OHA Infrastructure – Rideshare Study**

Study to allow use of Rideshare. Lack of access to transportation continues to be a barrier for people with BH and SUD needs. HSD would like to expand access to transportation by allowing use of ride sharing services. A number of challenges have prevented use of these services. HSD will use this funding to initiate a study of other states use of these services with the goal of adding them as approved providers to our Medicaid authorities.

Planned Funding: \$12,500 GF

#### OHA Infrastructure - Individuals with Disabilities Education Act Data

Build on existing data captures for Individuals with Disabilities Education Act health related services billed to Medicaid to include service documentation and records in a statewide system for electronic education health related records would not exceed 3 million dollars and would be a huge benefit to having all of the child's health related services provided in public education programs and settings. The amount for this Information Technology (IT) project will include design meetings with Oregon Department of Education (ODE), partner school districts, medically licensed staff providing services, and licensing boards to ensure documentation components are compliant with state and federal rules and regulations governing Individuals with Disabilities Education Act (IDEA), Rehabilitation Act of 1973 section 504, OHA Medicaid and scope of practice governed by licensing boards. Will also include testing, roll out and training.

Planned Funding: \$1,250,000 GF

# OHA Infrastructure - Medical/Clinical expertise for Health Systems Division (HSD)

HSD supports children and adults with significant medical challenges and

co-occurring behavioral health challenges. As a community-based system, we do not have expertise embedded in our system for consultation when medical or serious behavioral health issues arise. These issues may tie to eligibility for BH or SUD services, or how to support someone in a community setting. We will use this funding to bring in short-term clinical support to establish a scope of work for a future, ongoing contract with a partner university or specialized clinic. This funding also includes resources for development of accessible health and wellness resources for people with BH/SUD needs and referral database for those resources for individuals, families, CMEs and providers.

Planned Funding: \$1,000,000 GF

#### **OHA Infrastructure- Develop and Enhance the IT Infrastructure**

Funding to initiate or expand current IT infrastructure projects. The specific projects planned for this funding include:

- Expand the Employment Outcome Survey website to include publicly available, easy to access opening/vacancy information for other types of service providers.
- Work with APD/ODDS and SEIU to develop a HCW/PSW/PCA portal that will allow a worker to be approved to be both a PSW, HCW and PCA at the same time, rather than needing to navigate separate processes.
- Base funds to use for another Advanced Planning Doc to CMS to initiate a Provider Training Module for the various type of Agency Providers contracting with ODHS and OHA.

The current system used is a federal system that ODHS or OHA cannot modify. This could also be a combined HSD/DD/APD effort.

Planned Funding: \$2,500,000 GF

#### **OHA Services/Benefits - Crisis Services**

On a daily basis, Oregon Health Authority, Behavioral Health (OHA, BH) encounters unique situations with the consumers we serve. They often face barriers in life that we are unable to address due to regulatory limitations. Health Systems Division (HSD) proposes establishing a pot of \$1,500,000 to address unique needs that keep individuals out of crisis. HSD BH will track expenditures and be able to report on usage to monitor need and effectiveness. PSRB (Psychiatric Security Review Board)/Sex Offender Treatment/Community Supervision for criminal behaviors not related to

January 2, 2024 Page **35** of **52** 

medical/behavioral needs.

Planned Funding: \$1,500,000 GF

## OHA Services/Benefits - Expand Oregon's Money Management Program (OMMP) to serve more individuals

OHA determined that APD's expansion of the OMMP would greatly serve other individuals served by OHA. Therefore, OHA joined in the expansion of OMMP from Medicaid eligible individuals.

Planned Funding: \$125,000 GF

#### **OHA Services/Benefits - Social Isolation**

People with Behavioral Health and SUD needs are at high risk of being socially isolated and lonely. The National Core Indicators for Aging and People with Disabilities survey reports that many individuals receiving Medicaid services report feeling isolated from friends and family and feel lonely. This investment would purchase additional weekly service hours as determined by conducting the UCLA Loneliness Scale. Individuals scoring 6-9 would be eligible for additional service hours every week. These services could be provided by peer support specialists.

Planned Funding: \$1,500,000 GF

### **OHA Services/Benefits – Housing and Transition Supports**

Housing for individuals receiving BH services continues to be a barrier to helping individuals transition to homes of their own. While HSD cannot pay rent or subsidize direct housing, HSD can provide supports to individuals who need assistance in finding and maintaining housing. HSD would provide the services to individuals transitioning to, or living in the community, including but not limited to: Conduct a housing assessment identifying individual's preferences related to housing and needs for support to maintain housing, budgeting for housing and living expenses, assist individuals to view and acquire housing. Develop an individualized housing support plan based upon the housing assessment. Communicate the individual's disability/condition, accommodations needed, and components of emergency procedures involving the property manager. Community Transition Services cover expenses necessary to enable individuals to obtain an independent, community-based living setting. Specifically, allowable expenses may include deposits required to obtain a lease on an apartment or home; essential household furnishings required

to occupy and use a community domicile, including furniture, window coverings, food preparation items, and bed/bath linens; set-up fees or deposits for utility or service access, moving expenses; necessary home accessibility adaptations; and activities to assess need, arrange for, and procure needed resources.

Planned Funding: \$208,351 GF

# OHA Services/Benefits - Flexible grant funding to support people through Community Mental Health Programs (CMHPs)

In difficult and unexpected situations, people with Behavioral Health needs and their families need access to small amounts of flexible funding to prevent negative outcomes. Outcomes will be tracked to support future efforts to secure similar funding if the initiative is successful. Examples from recent years include:

- Funding for emergency housing after an evacuation.
- Funding to support purchase technology for remote support and communication with families and providers.
- One-time assistance to maintain or secure housing.
- Emergency relief care.

Planned Funding: \$1,000,000 GF

### OHA Services/Benefits - Fund to support advocacy by self-advocates

Oregon wants to expand access to advocacy trainings, meetings and events for people with BH and SUD needs. This funding will support creative ideas for expanding access to advocacy efforts. Payments may support:

- Funding for local self-advocacy organizations.
- Support for travel costs to meetings and trainings.
- Marketing materials in multiple languages for self-advocacy organizations.

Planned Funding: \$200,000 GF

#### **OHA Services/Benefits – Home Delivered Meals**

OHA will provide Home Delivered Meals to individuals receiving 1915(i) Home and Community-Based Services.

Planned Funding: \$254,619 GF

## **OHA Providers - Payments, Training and Equipment – Personal Care Attendant**

Enhance bargaining pot for Personal Care Attendants by \$1,001,450 (in addition to GRB levels). Rates were updated after collective bargaining.

Planned Funding: \$1,001,450 GF

## OHA Providers — Enhance services, benefits and training opportunities available to Personal Care Attendants

This funding was provided to the trusts that serve homecare workers, personal support workers and personal care attendants.

Planned Funding: \$730,586 GF

## OHA Providers - Payments, Training and Equipment- Adult Foster Home

Onetime payment of \$1000 per resident to any Adult Foster Home who served residents between 3/1/20-2/28/21. Ultimately requires bargaining.

Planned Funding: \$234,430 GF

## **OHA Providers - Payments, Training and Equipment – Temporary COVID Rate**

Provide a temporary COVID enhancement of 5% from July 1, 2021 – March 31, 2022 for Adult Foster homes. This was collectively bargained and implemented.

Planned Funding: \$688,366 GF

# OHA Providers- Payments, Training and Equipment - Enhance bargaining pot for Adult Foster Homes

OHA proposed an enhanced bargaining pot by adding \$750,821 in addition to GRB levels for AFHs.

Planned Funding: \$750,821 GF

### **OHA Providers - Payments, Training and Equipment - EVV Grants**

OHA proposed funding to establish grant to provide Personal Care Attendants with devices to access EVV. A 2017 federal law requires all states to implement Electronic Visit Verification (EVV) for in home workers. Lack of access to a smart device to log into EVV to record work hours may January 2, 2024 Page **38** of **52** 

be a barrier. These funds will provide devices to PCAs who lack access so they can log into the system to record their time.

Planned Funding: \$50,000 GF

## OHA Information and Referral - Provide reliable information about Agency services to people with BH and SUD needs and their families

Oregon's BH and SUD service system is decentralized with information about our core values, resources and variety of services available, provided through numerous local entities. We have heard from families that this makes it difficult to find reliable, consistent information about agency services and supports. This funding will be used to create an easily accessible information resource for individuals and families. We will make the resources easily accessible, culturally and linguistically appropriate and supportive of the values of Oregon's BH and SUD system.

Planned Funding: \$50,000 GF

#### **OHA Information and Referral**

Develop resources and services for parents with BH and SUD needs - There is a growing need for resources, training and services that are specific to parents with BH and SUD needs. In partnership with Child Welfare/Oregon Youth Authority/Criminal Justice (CJ), this funding will be used to develop resources, training materials and ultimately specialized services for these parents. This will include support in adaptation of CW assessments and practices to meet needs of children and parents with BH and SUD issues. The goal will be to help parents learn skills, so they are better able to parent their child/children. Additional training will include healthy relationship training. HSD will work with Child Welfare/OYA/CJ to create crosssystem support and access to these resources. Outcomes will be tracked to support future efforts to secure similar funding if the initiative is successful.

Planned Funding: \$89,820 GF

#### **OHA Information and Referral**

Allocate funding to develop website and marketing campaign in partnership with partners to attract people to work in the BH/SUD system. Funding would be used to develop this effort to attract

January 2, 2024 Page **39** of **52** 

clinicians, nurses, mental health professionals, behavioral professionals and SUD professionals to expand the pool of providers in the BH/SUD system. This will be similar to the Impact Oregon website and marketing campaign developed by ODDS to attract specific professionals to work in the IDD system.

Planned Funding: \$50,000 GF

#### **OHA Providers Benefit**

Provide a one-time payment of \$2262 to any Personal Care Attendant who worked between March 1, 2020 and February 28, 2021.

Planned Funding: \$161,974 GF

### **Legislation Affected**

Not applicable. ODHS and OHA request funding appropriation and limitation adjustments through the regular rebalance process.

### **Action Requested:**

ODHS and OHA request acknowledgement of receipt of report.

If you have questions, please contact:

Jane-ellen Weidanz at <u>Jane-Ellen.Weidanz@odhs.oregon.gov</u> for APD Anna Lansky at <u>anna.s.lansky@odhs.oregon.gov</u> for I/DD Vivian Levy at <u>Vivian.Levy@oha.oregon.gov</u> for OHA

Sincerely,

Fariborz Pakseresht

Failer Parserest

**ODHS** Director

David Baden

Interim OHA Director

CC: Amanda Beitel, Legislative Fiscal Office
Gregory Jolivette, Legislative Fiscal Office
Matt Stayner, Legislative Fiscal Office
Kate Nass, Department of Administrative Services
Mike Streepey, Department of Administrative Services
Patrick Heath, Department of Administrative Services

### **Attachment A. ODHS Budget to Actuals Status Tables**

IDD ARPA HCBS Spend Plan			
General Fund (Section 9817)			
Only	Total Budget	Total Actuals	Remaining
Capacity Restoration and			
Expansion Grants	\$ 10,500,000	\$ 4,775,503	\$ 5,724,497
Diversity, Equity and Inclusion			
Grants	\$ 5,400,000	\$ -	\$ 5,400,000
Emergency Response grants	\$ 5,500,000	\$ -	\$ 5,500,000
Flexible grant funding to support			
people through CME's	\$ -	\$ -	\$ -
ODDS/CME Grant Infrastructure	\$ 11,123,360	\$ 4,954,355	\$ 6,169,005
Family Network Restoration and			
Expansion	\$ 350,000	\$ -	\$ 350,000
Provide reliable information about			
I/DD services to people with I/DD	<b>A</b> 4 000 000		<b>A</b> 4 000 000
and families	\$ 1,000,000	\$ -	\$ 1,000,000
Develop resources and services	Φ 4 500 000		Φ 4 500 000
for parents with an I/DD	\$ 1,500,000	\$ -	\$ 1,500,000
Impact Oregon Enhancement	\$ 500,000	\$ 13,956	\$ 486,044
Eliminate client contribution	\$ -	\$ -	\$ -
Maintenance and updates Provider			
Homes and Adult Foster Homes	\$ 20,300,000	\$ -	\$ 20,300,000
Community Integration Project	Φ 0.000.000		Φ 0000000
Homes	\$ 2,000,000	\$ -	\$ 2,000,000
SACU Enhanced Funding	\$ 1,026,000	\$ 412,789	\$ 613,211
Infrastructure funding for			
contracted case management	Ф 2.000.000		Ф 2.000.000
entities  Continue the Covid rate increase	\$ 2,000,000	\$ -	\$ 2,000,000
	Φ 0.4E0.0E4	¢ 0.450.254	\$ 0
of 5% for non-bargained services	\$ 8,452,354	\$ 8,452,354	\$ 0
Implementation of the new Rate	\$ 49,746,370	\$ 44,300,051	\$ 5,446,319
models Provide a Covid relief increase and	φ 49,740,370	\$ 44,300,031	\$ 5,440,519
one-time payment for Adult Foster			
Home providers	\$ 555,097	\$ 555,097	\$ 0
Enhance bargaining pot - For Adult	Ψ 555,031	ψ 555,031	Ψ
Foster Homes	\$ 1,392,226	\$ 1,392,226	\$ 0
Provide a Covid relief payment for	Ψ 1,002,220	Ψ 1,002,220	Ψ
Personal Support Workers	\$ 6,173,223	\$ 6,172,344	\$ 879
Enhance bargaining pot - For	Ψ 0,170,220	Ψ 0,172,044	Ψ 013
Personal Support Workers	\$ 6,579,930	\$ 6,579,930	\$ -
Personal Support Worker Training	Ψ 0,010,000	Ψ 0,070,000	Ψ
and Benefit Trusts	\$ 2,491,514	\$ 2,491,514	\$ -
and Donoill Tradio	Ψ 2,701,017	Ψ 2,401,014	Ψ

Licensing Staff	\$ -	\$ -	\$ -
Expand LifeCourse and Individual			
Support Plan trainings	\$ 375,000	\$ -	\$ 375,000
Blueprint Funding	\$ 5,000,000	\$ -	\$ 5,000,000
Design a statewide crisis system			
for people with I/DD	\$ 1,000,000	\$ -	\$ 1,000,000
Provider recruitment and retention			
fund	\$ 12,824,402	\$ 12,210,552	\$ 613,850
Fund to support advocacy by self-			
advocates	\$ 1,000,000	\$ -	\$ 1,000,000
Restore funding for the Fairview			
Trust	\$ 6,000,000	\$ -	\$ 6,000,000
Funding for HIPAA Compliant			
technology	\$ 2,000,000	\$ -	\$ 2,000,000
Grants to provide Personal			
Support Workers with devices to			
access Electronic Visit Verification	\$ 2,500,000	\$ -	\$ 2,500,000
Cross-training and Technical			
Assistance for Child Welfare and			
Case Management Entities	\$ 74,249	\$ -	\$ 74,249
Statewide training and technical			
assistance resource	\$ 1,000,000	\$ -	\$ 1,000,000
Study to allow use of Rideshare	\$ 125,000	\$ -	\$ 125,000
Medical/Clinical expertise for			
Office of Developmental			
Disabilities Services	\$ 1,000,000	\$ 66,940	\$ 933,060
Enhancing and expanding access			
to the Oregon Intervention System			
(OIS)	\$ 250,000	\$ -	\$ 250,000
Study for contracted case			
management entity funding options	\$ 125,000	\$ -	\$ 125,000
Demographic data collection	\$ -	\$ -	\$ -
Develop and Enhance the			
Information Technology			
Infrastructure	\$ -	\$ -	\$ -
Healthcare	\$ -	\$ -	\$ -
Total	\$ 169,863,725	\$ 92,377,610	\$ 77,486,115

APD ARPA HCBS Spend Plan General Fund (Section 9817) Only	Total Budget	Total Actuals	Remaining
GrandPads-PACE consumers	\$ 113,592	\$ 113,592	\$ -
GrandPads-In-Home consumers	\$ 158,310	\$ 158,310	\$ -
Performance Based Bonuses- PACE	\$ 1,216,092	\$ 1,216,092	\$ -

LTC Workforce Development &			
Training Investments	\$ 250,000	¢ -	\$ 250,000
Wage & Cost Study	\$ 139,590	\$ - \$ 69,795	\$ 69,795
Workforce Recruitment-Public	Ψ 100,000	Ψ 05,135	Ψ 05,135
Affairs Spec 3	\$ 37,573	\$ 37,573	\$ -
Congregate meal sites - modernize	Ψ 01,010	Ψ 31,313	Ψ
infrastructure (Est 125 sites)	\$ 3,125,000	\$ 758,957	\$ 2,366,043
LTC HCBS capital improvement	Ψ 0,120,000	Ψ 700,007	Ψ 2,000,010
fund	\$ 11,106,846	\$ 10,539,348	\$ 567,498
CBC-Online infection prevention &	Ψ 11,100,010	Ψ 10,000,010	ψ σσι, ισσ
control staff training curriculum			
(OCP)	\$ 47,916	\$ 47,916	\$ -
Adult Day Centers - Start up costs	,	,	
not to exceed \$100,000 (Max 10)	\$ 1,000,000	\$ -	\$ 1,000,000
Senior Centers - modernize &			
improve transportation (Limit \$50K			
per, approx. 175)	\$ 3,750,000	\$ 807,192	\$ 2,942,808
Innovation fund- improve the LT			
Services and Supports (LTSS)			
system	\$ 3,000,000	\$ 2,459,390	\$ 540,610
Statewide case management			
conference	\$ 150,000	\$ 137,707	\$ 12,293
Convert in-person training to online			
training to support case managers	\$ 75,000	\$ -	\$ 75,000
Training development & delivery -			
LTSS providers on service equity			
(OHCA)	\$ 175,000	\$ 172,500	\$ 2,500
Performance based contracting-			
incentivize CBCs to achieve			
quality/staffing/compensation	<b>A</b> 40.050.055	<b>A</b> 40.050.055	
benchmarks (Wage Add on)	\$ 16,258,355	\$ 16,258,355	\$ -
Performance based contracting -			
AAAs meeting metrics -	Ф 4.0F0.000	Ф 4.050.000	Φ.
quality/quantity/WF diversity	\$ 1,250,000	\$ 1,250,000	\$ -
Assistance to keep individuals out	Ф 500,000	ф 000 0FF	ф 000 04E
of crisis	\$ 500,000	\$ 269,655	\$ 230,345
Pursue an 1115 demo waiver to	¢ 2500,000	ф <u>26.240</u>	¢ 0.470.654
support family caregivers	\$ 2,500,000	\$ 26,349	\$ 2,473,651
Eliminating client contribution for in-home consumers	\$ 1,187,500	\$ -	\$ 1,187,500
Expand Money Management	\$ 1,187,500	Ψ -	\$ 1,187,500
Program to serve more individuals	\$ 1,000,000	\$ 167,819	\$ 832,181
Prevention of Lonely & socially	Ψ 1,000,000	Ψ 101,019	ψ 002,101
isolated	\$ 3,190,621	\$ -	\$ 3,190,621
iodiatea	ψ 0,100,021	_ Ψ -	Ψ 0,100,021

Doof/Dlind individuals who qualify						
Deaf/Blind individuals who qualify						
for Medicaid to receive State Plan						
Personal Care (SPPC) services	Φ 4	404.000	<b>ው</b>		φ.	4 404 000
external to home (Amend Waiver)	<b>\$</b> 1	,431,000	\$	-	\$	1,431,000
Provide supports to those in need						
of assistance in finding and	•		•	4 000	_	<b>-</b> 40 404
maintaining housing	\$	550,000	\$	1,809	\$	548,191
One time payment of \$500 to any						
Home Care Worker who worked						
between 3/1/20-2/28/21; active						
provider # on 12/1/21, payment						
changed to \$2,261.99	\$ 9	,436,695	\$	9,436,274	\$	421
Enhance bargaining pot for Home						
Care Workers by \$7.5M GF	\$ 11	,539,313	\$	11,539,313	\$	-
Seed funding towards a new						
healthcare trust for long term care						
workers (SB800)	\$	-	\$	-	\$	-
Workers' Benefits - Enhance						
services, benefits and training						
opportunities available to HCWs.	\$ 1	,771,680	\$	1,771,680	\$	-
One time payment of \$1,000 per						
resident Adult Foster Home who						
served residents between 3/1/20 -						
2/28/21; active provider # 12/1/21	\$ 1	,037,923	\$	1,037,923	\$	-
5% COVID enhancement Adult		,				
Foster Homes 5% rate increase						
from 7/1/21- 3/31/22	\$	331,812	\$	331,812	\$	-
Enhance bargaining pot for Adult		,		,	•	
Foster Homes	\$ 4	,495,152	\$	4,495,152	\$	-
5% COVID differential to Assisted	- <del>-</del>	, , -	-	,, -	*	
Living, Residential Care, Memory						
Care, In-Home Agencies effective						
7/1/21-3/31/22; revised end date						
now 6/30/23.	\$	885,353	\$	885,353	\$	_
5% rate increase to Assisted		000,000			<b>—</b>	
Living, Residential Care, Memory						
Care, In-Home Agencies effective						
7/1/21 and 7/1/22; revised, second						
increase, on 7/1/22 is now 10%.	\$ 15	5,362,334	\$	15,362,334	\$	_
Provide a \$500 per participant fee	ΨΙ	7,002,007	Ψ	10,002,004	Ψ	
(est. 300) to Adult Day Service						
providers to help with restart of						
1 -	\$	_	\$	_	\$	_
Programs Staff to Implement List		341,969	\$	341,969	\$	-
	φ	341,808	Φ	341,909	Ф	-
Caregivers Communication	φ 4	000 000	ተ		φ.	4 000 000
Campaign - DirectCare Careers	\$ 1	,000,000	\$	-	\$	1,000,000

Mental Health Early Intervention	\$ 1,000,000	\$ -	\$ 1,000,000
HCW/Consumer Matching Service	\$ 1,000,000	\$ -	\$ 1,000,000
Support potential workers to			
become Homecare Workers	\$ 792,206	\$ -	\$ 792,206
Workforce Recruitment Media	\$ 1,000,000	\$ -	\$ 1,000,000
Adult Foster Home Recruitment			
and Quality Initiatives	\$ 650,000	\$ -	\$ 650,000
NurseLearn	\$ 1,865,356	\$ -	\$ 1,865,356
Gero Nurse Recruitment			
(UoP/OHCA)	\$ 750,000	\$ -	\$ 750,000
Promoting Diversity in LTSS			
Leadership	\$ 500,000	\$ -	\$ 500,000
Community Integration Supports	\$ 1,000,000	\$ -	\$ 1,000,000
HCBS Setting Requirement			
Engagement and Improvement			
Project	\$ 500,000	\$ -	\$ 500,000
Direct Careworkers Engagement	\$ 750,000	\$ -	\$ 750,000
HEROES Project (APS)	\$ 520,000	\$ -	\$ 520,000
APD Staff Training and Support	\$ 350,000	\$ -	\$ 350,000
LGBTQ+ APS Outreach, Social			
Isolation Prevention and Staff			
Training	\$ 3,500,000	\$ -	\$ 3,500,000
Vaccine Outreach and LTSS			
Provider Support	\$ 250,000	\$ -	\$ 250,000
Modernizing APD's person			
centered service planning system			
and processes	\$ 800,000	\$ -	\$ 800,000
Total	\$ 113,642,188	\$ 79,694,169	\$ 33,948,019

CW ARPA HCBS Spend Plan General Fund (Section 9817) Only	Total Budget	T	otal Actuals	Re	emaining
CW Demonstration Project for					
potentially eligible I/DD Youth	\$ 669,473	\$	669,473	\$	-
Total	\$ 669,473	\$	669,473	\$	-

### **Attachment B. OHA Budget to Actual Status Table**

OHA ARPA HCBS Spend Plan	Total Dudget	Total Actuals	Demoining
General Fund (Section 9817) Only	Total Budget	Total Actuals	Remaining
Allocate \$2,250,000 to establish an			
innovation fund to improve the			
behavioral health system. Reserve			
\$1,00,000 on efforts to promote service			
equity and cultural competence in the	<b>#0.050.000</b>	Φ0	<b>#0.050.000</b>
behavioral health residential system.	\$2,250,000	\$0	\$2,250,000
Allocate \$500,000 to support training			
development and delivery for providers	<b>#050.000</b>	Φ0	<b>#050.000</b>
on service equity.	\$250,000	\$0	\$250,000
Establish a \$3,000,000 performance			
based contracting fund to incentivize			
SUD (Substance Use Disorder) and MH			
(Mental Health) providers to achieve			
quality/staffing/ compensation			
benchmarks jointly established via	<b>#</b> 000 000	ФО.	<b>#</b> 000 000
partner/accountability process.	\$898,200	\$0	\$898,200
On a daily basis, OHA BH (Oregon			
Health Authority, Behavioral Health)			
encounters unique situations with the			
consumers we serve. They often face			
barriers in life that we are unable to			
address due to regulatory limitations.			
HSD (Health Systems Division)			
proposes establishing a pot of			
\$1,500,000 to address unique needs			
that keep individuals out of crisis. HSD			
BH will track expenditures and be able			
to report on usage to monitor need and			
effectiveness. PSRB (Psychiatric			
Security Review Board)/Sex Offender			
Treatment/Community Supervision for			
criminal behaviors not related to	<b>#4 500 000</b>	ФО.	<b>#4 500 000</b>
medical/behavioral needs.	\$1,500,000	\$0	\$1,500,000
Expand successful Money Management	<b>#</b> 405.000	ФО.	<b>#405.000</b>
Program to serve more individuals.	\$125,000	\$0	\$125,000
People with Behavioral Health and SUD			
needs are at high risk of being socially			
isolated and lonely. The National Core			
Indicators for Aging and People with			
Disabilities survey reports that many	<b>64 FOO OOO</b>	<b>ው</b> ዕ	<b>04 500 000</b>
individuals receiving Medicaid services	\$1,500,000	\$0	\$1,500,000

	T		1
report feeling isolated from friends and			
family and feel lonely. This investment			
would purchase additional weekly			
service hours as determined by			
conducting the UCLA Loneliness Scale.			
Individuals scoring 6-9 would be eligible			
for additional service hours every week.			
These services could be provided by			
peer support specialists.			
Housing for individuals receiving BH			
services continues to be a barrier to			
helping individuals transition to homes			
of their own. While HSD cannot pay			
rent or subsidize direct housing, HSD			
can provide supports to individuals who			
· ·			
need assistance in finding and			
maintaining housing. HSD would			
provide the services to individuals			
transitioning to, or living in the			
community, including but not limited to:			
Conduct a housing assessment			
identifying individual's preferences			
related to housing and needs for			
support to maintain housing, budgeting			
for housing/living expenses, Assist			
individual to view and acquire housing.			
Develop an individualized housing			
support plan based upon the housing			
assessment. Communicate the			
individual's disability/condition,			
accommodations needed, and			
components of emergency procedures			
involving the property manager.			
Community Transition Services cover			
expenses necessary to enable			
individuals to obtain an independent,			
community-based living setting.			
Specifically, allowable expenses may			
include: deposits required to obtain a			
lease on an apartment or home;			
essential household furnishings			
required to occupy and use a			
community domicile, including furniture,			
window coverings, food preparation			
items, and bed/bath linens; set-up fees			
or deposits for utility or service access,	\$208,351	\$0	\$208,351
or deposite for drinky of our vice decode,	Ψ200,001	ΨΟ	Ψ=00,001

moving expenses; necessary home accessibility adaptations; and activities to assess need, arrange for, and procure needed resources. New 1915(i) service.			
Provide a one-time payment of			
\$2,261.99 to any Personal Care			
Attendant who worked between 3/1/20-	<b>*</b> 4 0 4 0 <del>-</del> 4	<b>*</b> 4 <b>*</b> 4 <b>* * * *</b>	•
2/28/21. Ultimately requires bargaining.	\$161,974	\$161,974	\$0
Enhance bargaining pot for Personal			
Care Attendants by \$1,001,450 (in	<b>04.004.450</b>	<b>#04.055</b>	<b>#</b> 000 <b>7</b> 05
addition to GRB levels).	\$1,001,450	\$61,655	\$939,795
Enhance services, benefits and training			
opportunities available to Personal Care			
Attendants. Administered via joint trust	\$720 F06	\$0	\$720 F96
with benefits authorized by board.	\$730,586	ΦΟ	\$730,586
One time payment of \$1,000 per resident to any Adult Foster Home who			
served residents between 3/1/20-			
2/28/21. Ultimately requires bargaining.	\$234,430	\$173,118	\$61,312
Adult Foster Homes: Provide a	Ψ234,430	Ψ173,110	Ψ01,312
temporary COVID enhancement of 5%			
from 7/1/21- 3/31/22. Enhance			
bargaining pot for Adult Foster Homes			
by \$750,821 (in addition to GRB levels)	\$1,439,187	\$689,614	\$749,573
HSD estimates a need for 2 Principle	* , ==,	* 1	+ -,-
Executive Manager Es, four Operations			
and Policy Analysts 3s, two Training			
and Development Specialists 2s,			
one Executive Support Specialist and			
one Office Support 2.	\$658,925	\$0	\$658,925
Flexible grant funding to support people			
through Community Mental Health			
Programs (CMHPs) - In difficult and			
unexpected situations, people with			
Behavioral Health needs and their			
families need access to small amounts			
of flexible funding to prevent negative			
outcomes. Examples from recent years include:			
1) funding for emergency housing after			
an evacuation			
2) funding to support purchase	\$1,000,000	\$0	\$1,000,000
=/ .a.ranig to support paronass	ψ1,500,000	ΨΟ	Ψ1,000,000

technology for remote support and communication with families and providers 3) one-time assistance to maintain or secure housing 4) emergency relief care outcomes will be tracked to support			
future efforts to secure similar funding if the initiative is successful.			
Provide reliable information about Agency services to people with BH and SUD needs and their families - Oregon's BH and SUD service system is decentralized with information about our core values, resources and variety of services available, provided through numerous local entities. We have heard from families that this makes it difficult to find reliable, consistent information about agency services and supports. This funding will be used to create an easily accessible information resource for individuals and families. We will make the resources easily accessible, culturally and linguistically appropriate and supportive of the values of			
Oregon's BH and SUD system.	\$50,000	\$0	\$50,000
Develop resources and services for parents with BH and SUD needs - There is a growing need for resources, training and services that are specific to parents with BH and SUD needs. In partnership with Child Welfare/Oregon Youth Authority/Criminal Justice (CJ), this funding will be used to develop resources, training materials and ultimately specialized services for these parents. This will include support in adaptation of CW assessments and practices to meet needs of children and parents with BH and SUD issues. The goal will be to help parents learn parenting skills so they are better able to parent their child/children. Additional training will include healthy relationship			
training. HSD will work with Child	\$89,820	\$0	\$89,820

Welfare/OYA/CJ to create cross-system support and access to these resources. Outcomes will be tracked to support future efforts to secure similar funding if the initiative is successful.			
Allocate funding to develop website and marketing campaign in partnership with partners to attract people to work in the BH/SUD system. Funding would be used to develop this effort to attract clinicians, nurses, mental health professionals, behavioral professionals and SUD professionals to expand the pool of providers in the BH/SUD system. This will be similar to the Impact Oregon website and marketing campaign developed by ODDS to attract specific professionals to work in			
the IDD system.	\$50,000	\$0	\$50,000
We will also allocate funding for a contractor to develop new assessment tool and comprehensive personcentered service plan and training for			
IQA, providers, etc.	\$125,000	\$0	\$125,000
Fund to support advocacy by self-advocates - Oregon wants to expand access to advocacy trainings, meetings and events for people with BH and SUD needs. This funding will support creative ideas for expanding access to advocacy efforts. Payments may support:  1) funding for local self-advocacy organizations 2) support for travel costs to meetings and trainings 3) marketing materials in multiple languages for self-advocacy			
organizations	\$200,000	\$0	\$200,000
Funding for HIPAA Compliant technology for CMEs and providers - With the pandemic, all services had to move to remote models. This has proven successful for some individuals served and as we look to the future, we			
want the option for remote services to	\$500,000	\$0	\$500,000

continue. This will also provide access to technology for residential settings to support efforts to decrease isolation during pandemics as called for in HB2394 During the pandemic, the HHS did not enforce HIPAA requirements for remote services. When the Public Health Emergency ends, we want to ensure these services can continue with the use of appropriate HIPAA technology.			
Grants to provide Personal Care Attendants with devices to access EVV - A 2017 federal law requires all states to implement Electronic Visit Verification (EVV) for in home workers. HSD will implement its EVV system in 2021. Lack of access to a smart device to log into EVV to record work hours may be a barrier. These funds will provide devices to PCAs who lack access so they can log into the system to record their time.	\$50,000	<b>\$</b> 0	\$50,000
Study to allow use of Rideshare - Lack of access to transportation continues to be a barrier for people with BH and SUD needs. HSD would like to expand access to transportation by allowing use of ride sharing services. A number of challenges have prevented use of these services. HSD will use this funding to initiate a study of other states use of these services with the goal of adding them as approved providers to our		÷0	
Medicaid authorities.  Build on existing data captures for Individuals with Disabilities Education Act health related services billed to Medicaid to include service documentation and records in a statewide system for electronic education health related records would not exceed 3 million dollars and would be a huge benefit to having all of the child's health related services provided	\$12,500	\$0	\$12,500
in public education programs and	\$1,250,000	\$0	\$1,250,000

settings. The amount for this Information Technology (IT) project will include design meetings with Oregon			
Department of Education (ODE), partner school districts, medically			
licensed staff providing services, and licensing boards to ensure			
documentation components are compliant with state and federal rules			
and regulations governing Individuals			
with Disabilities Education Act (IDEA), Rehabilitation Act of 1973 section 504,			
OHA Medicaid and scope of practice governed by licensing boards. Will also			
include testing, roll out and training.			
Provide Home Delivered Meals to individuals receiving 1915(i) Home and			
Community-Based Services	\$254,619	\$0	\$254,619
Medical/Clinical expertise for HSD - HSD supports children and adults with			
significant medical challenges and co-			
occurring behavioral health challenges.			
As a community-based system, we do			
not have expertise embedded in our			
system for consultation when medical			
or serious behavioral health issues			
arise. These issues may tie to eligibility for BH or SUD services, or how to			
support someone in a community			
setting. We will use this funding to bring			
in short-term clinical support to			
establish a scope of work for a future,			
ongoing contract with a partner			
university or specialized clinic. This			
funding also includes resources for development of accessible health and			
wellness resources for people with			
BH/SUD needs and referral database			
for those resources for individuals,			
families, CMEs and providers.	\$1,000,000	\$0	\$1,000,000
Develop and Enhance the IT			
Infrastructure - Funding to initiate or expand current IT infrastructure			
projects. The specific projects planned			
for this funding include:	\$2,500,000	\$0	\$2,500,000

Total	\$ 21,516,581	\$ 1,086,362	\$ 20,430,219
Amount of GF to be reallocated	\$ 3,476,538	\$ -	\$ 3,476,538
HSD/DD/APD effort.			
could also be a combined			
that ODHS or OHA cannot modify. This			
current system used is a federal system			
contracting with ODHS and OHA. The			
the various type of Agency Providers			
initiate a Provider Training Module for			
Advanced Planning Doc to CMS to			
4) base funds to use for another			
navigate separate processes.			
same time, rather than needing to			
both a PSW, HCW and PCA at the			
will allow a worker to be approved to be			
develop a HCW/PSW/PCA portal that			
3) work with APD/ODDS and SEIU to			
types of service providers			
opening/vacancy information for other			
available, easy to access			
Survey web-site to include publicly			
1) expand the Employment Outcome			