

Current and ongoing cross-agency work regarding 1915 services and screening processes

Enhancing Home and Community-Based Services (HCBS) Access Roadmap

July 2024



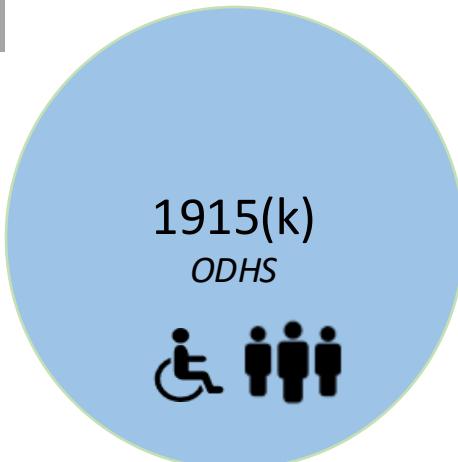
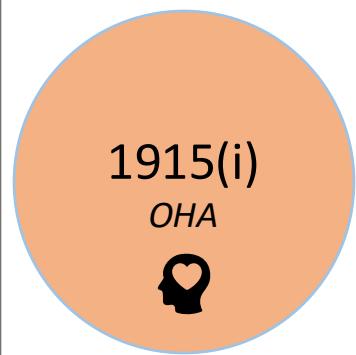
Services provided through 1915 Medicaid Waiver Overview

- 1915k
 - State plan option authorized under the Affordable Care Act and allows Oregon to provide home and community-based services and supports while receiving a six percent increase in federal medical assistance funds for those services.
 - Serves individuals with intellectual and developmental disabilities and those in need of nursing facility level of care.
 - Administered through Office of Aging and People with Disabilities (APD).
- 1915i
 - Allows Oregon to use matching federal Medicaid funding for Home-Based Habilitation, Behavioral Habilitation and Psychosocial Rehabilitation services.
 - Serves qualified recipients 21 years of age or older who have been diagnosed with a chronic mental illness.
 - Administered through the Oregon Health Authority.



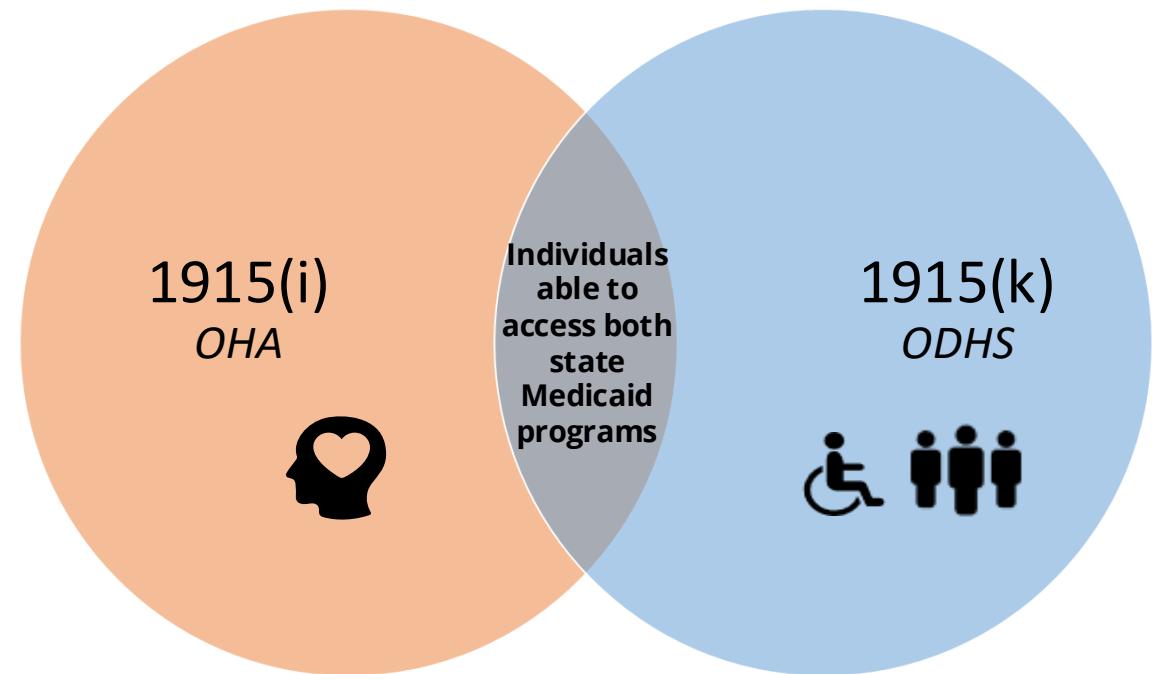
Current Eligibility system:

Referral for individual with behavioral health needs



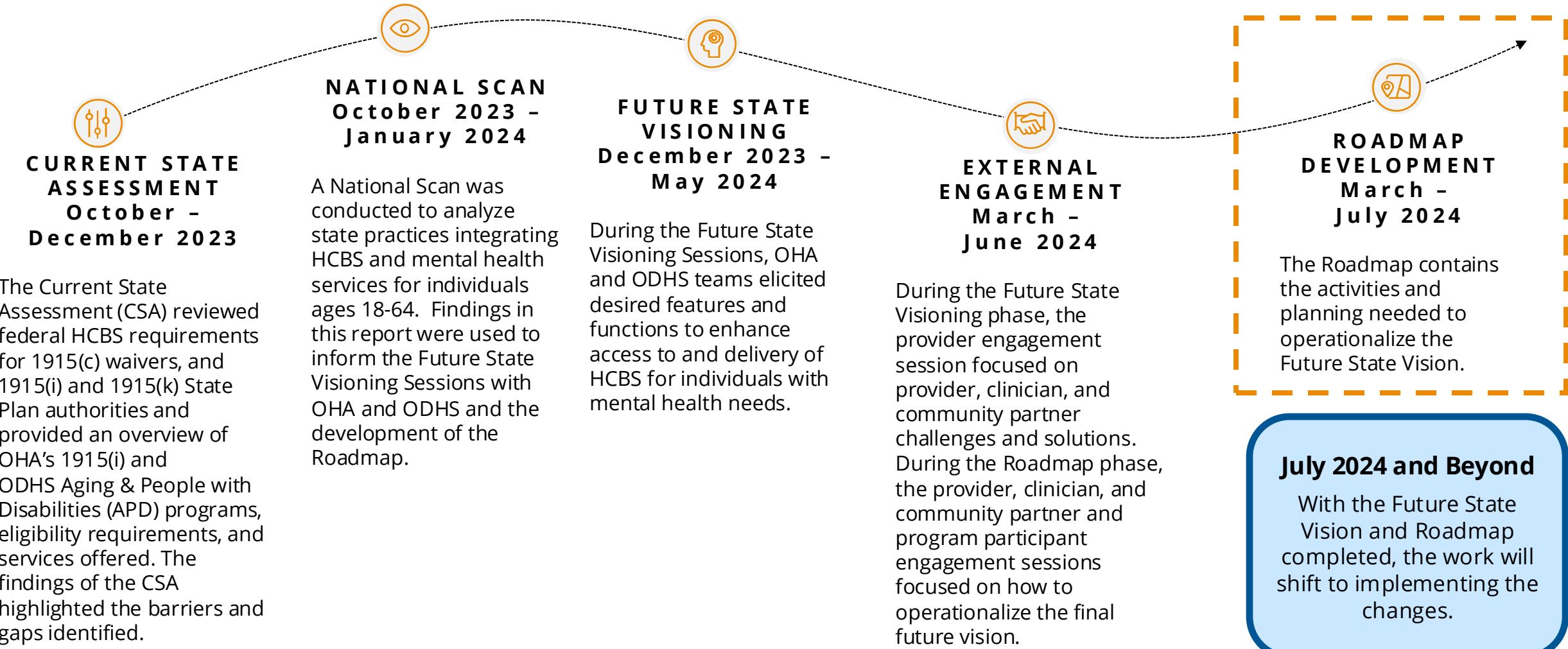
Future State Vision system:

Referral for individual with behavioral health needs



Path to Future State Vision and Roadmap Development

Oregon Health Authority (OHA) and Oregon Department of Human Services (ODHS) have been diligently working on understanding the current barriers and gaps to HCBS access for individuals with mental health needs, scanning select states to understand potential solutions to these barriers and challenges and defining a Future State Vision. From here, the work continues external engagement and roadmap development.



ARPA Initiatives Overview

OHA and ODHS aim to spend American Rescue Plan Act (ARPA) funds on Home and Community-Based (HCBS)-related initiatives by March 2025. A summary of the initiatives is included below.

OHA-led Initiatives

Enterprise Case/Care Management (CM) System to increase data sharing capabilities across agencies and providers.
Total funds: \$13M

Comprehensive Level of Service Determination Assessment Tool that can be used across OHA/ODHS to support the Independent and Qualified Agent (IQA) and 1915(i) HCBS providers.
Total funds: \$2M

Hospital Pilot; collaboration with APD and hospitals during the assessment tool rollout to enhance visibility and assess functionality for individuals with complex needs. Total funds: \$2M

Co-occurring & Provider Expansion Pilot to improve accessibility to assessments through increased collaboration with community partners.
Total funds: \$6M

Quality and Access to Care Improvements; communications services and engagement sessions to increase provider awareness and receive feedback about the HCBS program. Total funds: \$4M

Evaluation of Investments & Continuous Improvement; evaluation of the impact and effectiveness of ARPA spending to enhance the HCBS program.
Total funds: \$2M

ODHS-led Initiatives

Home Care Worker (HCW)/Personal Care Attendant (PCA)—Consumer Matching Service to assist with detailed, in-person matching of participants with personal care attendants.
Total funds: \$1M

HCW/PCA Navigation to develop a new process to assist potential workers in navigating the process to become a HCW or PCA.
Total funds: \$2M

HCW/PCA Recruitment to improve recruitment mechanisms contributing to a more robust HCW/PCA workforce.
Total funds: \$2M

Adult Foster Home (AFH) Recruitment to improve recruitment mechanisms supporting recruitment and retention of AFHs.
Total funds: \$2M

Medium-Term Activities: Overview

In the 25-27 biennium, OHA and ODHS will continue to implement activities already in progress and will start work on more significant projects.

PHASE 1	PHASE 2
July 1, 2025 – June 30, 2026	July 1, 2026 – June 30, 2027
<ul style="list-style-type: none">• Develop change management plan for new initiatives• Develop new recruitment and retention strategies• Evaluate funding and billing/rate information• Evaluate for WPC tenets• Implement a Grant Management System• Evaluate, enhance, and operationalize referral processes• Support transitions from Oregon State Hospital• Evaluate and expand contracts with service providers• Develop a capacity dashboard• Identify pilot projects• Adopt a consistent documentation system	<ul style="list-style-type: none">• Evaluate OARs to support workforce capacity• Evaluate program and financial eligibility information• Review existing waivers for equity impacts• Evaluate existing systems to enable information exchange across agencies• Understand how the Choice Model can be used to support individuals in need• Develop a shared regulatory and licensing framework• Implement outcomes-based metrics• Tailor services to community needs (e.g., improved coverage in rural and frontier areas)• Create data governance strategy

Note: Solutions not completed during the short-term will continue in the medium-term.