



**Date:** July 15, 2024

**Re:** Summary of home modification provisions by Oregon Health Authority and Oregon Department of Human Services

Home safety and accessibility can be a significant barrier for timely hospital discharge for many patients. Often, being in the comfort of their home is the best place of recovery and yet it must be done safely; with the ability to access care and have any needs they may have in their activities of daily living met. This is what is referred to as Home and Community-based Services (HCBS). Unmet home modification needs can be a deterrent to patients being discharged to their home instead of a post-acute care setting. The Oregon Health Authority (OHA) and the Oregon Department of Human Services (ODHS) have several programs in which home modification and accessibility needs can be met. These include the Health-Related Services spending distributed by Community Care Organizations (CCO's), the current ODHS 1915k Waiver, the current OHA 1915i Waiver. In addition, there is a durable medical equipment (DME) provision of the Oregon Health Plan which will be discussed in further detail below and an explanation of the 1915i Waiver in regards to home modifications. The challenging part with these available resources for home modification is the care coordination and system navigation required for patients to access some of these supports.

Community Care Organization (CCO's) are not required to provide housing modification services as part of the health-related services (HRS) spending and per CMS, the state is not allowed to dictate, if and how CCO's use HRS. With that being said, all CCO's do provide housing supports and services through HRS. Details regarding CCO's HRS spending can be found in the [2022 HRS Spending Summary Report](#). Housing services in HRS can include accessibility as well as other housing improvements such as appliances, furniture, utility assistance, rent assistance, temporary housing etc. What is missing from the report which is pertinent for this taskforce is whether these housing modifications were specifically provided to patients who were recently discharged from a hospital or post-acute care setting. OHA would need to complete additional data analysis and potentially additional data gathering to ascertain the extent to which HRS home modification funding was specifically provided to people recently discharged from the hospital; allowing them to safely continue their recovery within their own homes. It must be noted, that asking CCO's to provide this level of data would be a significant ask as it is not included in the current data they provide to OHA. This would be a large undertaking and would require significant authority to do so. In addition, it must also be noted, that HRS at the OHP member level is not available for Open Card (fee-for-service) members due to this funding coming from CCO's global budgets, and therefore excludes some from receiving this home modification resource.

In addition to HRS, the current [ODHS 1915k Waiver](#) includes provisions for home modifications through the Department of Aging and People with Disabilities (APD) and Office of Developmental Disabilities Services. These are referred to as environmental modifications which cannot exceed \$5000 and must be tied to supporting activities of daily living (ADLs), instrumental activities of daily living (IADLs), and/or health-related tasks. Exceptions on the cap may be made to address identified needs. Additionally, home repairs may be made if the housing issues prevent ADL/IADL from being safely performed. The goal of this funding is to promote self-management of health conditions at home, replacing the need for human assistance or to assist the individual in remaining in their home safely.

Another possible source of home modification funding is through the [durable medical equipment \(DME\)](#) provision of the Oregon Health Plan which enables providers to prescribe DME's that can include things like hospital beds, grab bars etc. This provision does not include significant modifications to the residence but can assist in providing equipment to aid in safety and accessibility for people discharging to their own homes.

The [OHA 1915i Waiver](#) provides an additional pathway for eligible populations to access housing supports but this waiver specifically states that it cannot be used for housing modifications. These housing supports include providing skills coaching and assistance in securing benefits not “capital costs related to the development or modification of housing”.