Submitter:	Jim Davis
On Behalf Of:	Or St Cn for Retired Citizens-United Seniors
Committee:	Senate Committee On Human Services
Measure:	SB1077

I'm Dr. Jim Davis representing United Seniors of Oregon and Oregon State Council for Retired Citizens. I want to express our strong support for SB 1077, which would better clarify the role of the Oregon Medicaid Advisory Committee (MAC), amending MAC statutes to state that the MAC should equally prioritize both the health care and the long term care sides of Medicaid.

Senior/disability advocates have become increasingly concerned that the MAC has evolved into a state committee that, although exemplary in their support of OHP clients, has adopted a more limited perspective on Medicaid, completely prioritizing the health care side of Medicaid (OHP) and essentially ignoring issues affecting seniors and people with disabilities on the long term care side of Medicaid.

I had the honor of serving 3 terms as a founding member of the Oregon Medicaid Advisory Committee under Governor Kitzhaber in the 1990s. At that time, we clearly understood MAC to be an entity that represented both sides of Medicaid. Myself and other senior/disability advocates on the committee made sure that there was adequate reporting, discussion and response to issues on the long term care side of Medicaid.

However, times appear to have changed. Upon review of the MAC charter, past annual reports, selected MAC minutes, communications and other materials, it would seem that MAC barely considers Medicaid long term care issues to be a priority or even under their purview. I find it very concerning that our state Medicaid committee essentially disregards one the nation's exemplary Medicaid long term care systems, limiting itself to dealing only with OHP Medicaid health care issues.

For 4 decades, Oregon has built a Medicaid-based senior and disability long term care service system that is considered a national model for in-home and community-based care, providing the most independent living environment for seniors and persons with disabilities through continuum of care options. With all the historic implications of the Oregon Medicaid Long term Care model and its impact on tens of thousands of Oregonians, I remain puzzled as to why the MAC has ignored this system and the critical issues it presents for seniors and people with disabilities. When OHP, public health and mental health became the Oregon Health Authority (OHA), it should not have resulted in the MAC ignoring the other side of Medicaid as if it no longer existed.

I do understand that the MAC fulfills federal obligations for OHP and that it has long

leaned toward prioritizing OHP, and with good results. But it is time for the MAC to also acknowledge, embrace and support the excellent Medicaid long term services through the Oregon Department of Human Services/Aging and People with Disabilities. The very fact that a major part of MAC's mission is to advise ODHS, who oversees the long term care Medicaid system, would indicate that the MAC has some responsibility to respond to all Medicaid services in the state, and not just those housed in the OHA. This is an unfortunate disconnect that needs to end.

The MAC needs to update its mission and reorganize its priorities to include programs, services and issues that affect both sides of Medicaid, especially those dealing with long term care services for seniors and people with disabilities.

We urge your support of SB 1077.