



Dear Chair Jama, Vice-Chair Starr, and Members of the Senate Rules Committee,

Thank you for the opportunity to submit testimony. My name is Brenda Linden and I represent Dungarvin Oregon, a provider of essential services to individuals with IDD across Oregon. I am writing in strong opposition to SB 1505.

SB 1505 does not deliver meaningful wage increases for direct care workers. Instead, it creates a new regulatory structure that delays real investment, shifts authority away from the Legislature, and places additional risk and administrative burden squarely on providers, without providing the funding necessary to support the mandates it would create.

Oregon does not lack information about the needs of the direct care workforce. In 2025, DHS completed an independent rate and wage study identifying a \$530 million funding gap and estimating that nearly \$800 million in General Fund investment is needed simply to bring home and community-based IDD direct care wages to approximately \$23.20 per hour. SB 1505 does not close this gap. It offers process instead of pay, and structure instead of solutions.

Of particular concern is the shift to target IDD providers specifically, rather than addressing workforce challenges comprehensively across long-term services and supports. This narrowing unfairly singles out a sector that is already underfunded, highly regulated, and operating at the margins of sustainability. IDD providers are not the cause of low wages, chronic underinvestment is.

SB 1505 also grants an unelected board sweeping and open-ended authority over employment practices, authority that traditionally and appropriately resides with the Legislature. The bill would allow the Board to establish enforceable workplace mandates without corresponding funding, exposing providers to legal, financial, and operational risk. These mandates could extend far beyond wages to include benefits, scheduling, staffing ratios, grievance procedures, training requirements, and other employment practices, all enforceable through litigation.

For providers, this represents a blank check for regulation without resources. For the people who rely on IDD services, it represents instability, service disruption, and increased risk as providers struggle to comply with unfunded requirements in an already strained system.

If the goal is to meaningfully support Oregon's direct care workforce, the solution is clear: direct legislative investment in rates and wages. Creating additional regulatory layers without funding does not raise wages, does not stabilize the workforce, and does not protect services.

I urge the Committee to reject SB 1505 and instead focus on solutions that directly invest in workers, preserve legislative oversight, and protect the stability of essential IDD services across Oregon.

Thank you for your time and consideration.

Respectfully,

Brenda Linden
State Director, Dungarvin Oregon

SB 1505 Delays, Rather Than Delivers, Meaningful Wage Investment



SB 1505 isn't about increased wages for workers.



SB 1505 fails to prioritize investing directly in wage increases.



SB 1505 provides false wage and benefit standards that mean nothing if not funded by the Legislature.

SB 1505 Offers Process, Not Pay, for Oregon's Direct Care Workforce

The Legislature doesn't need a Board to tell you these wages need real meaningful investment—DHS recently completed a study and published an independent report in 2025 that identified a \$530 million funding gap for home and community based IDD workers—estimating a total investment needed of \$800M in general funds just to bring this direct care workforce to \$23.20 an hour. See APD-ODDS Rate and Wage Study Findings and Recommendations.

SB 1505 Grants the Board Unlimited Authority Over Employment Practices

LC 38 allows an unelected board—not the Legislature—to make new employment and workplace laws for home and community care services and settings.

SB 1505 Is A Blank Check for Workplace Regulation

SB 1505 grants the Board open-ended authority to create workplace mandates that are enforceable through lawsuits. This authority could extend to working conditions such as mandated health insurance or other minimum benefits, predictive scheduling, staffing ratios, labor peace agreements, PTO/PSL pay out requirements, accrual of sick leave and utilization, unpaid Leave, overtime caps, hours of work, discipline, grievance-arbitration, seniority pay/hiring/job openings, vacancy hiring and advertising, accommodations, performance evaluations, use of phone/vehicle, background checks, employee registries, or training.

¹https://www.healthmanagement.com/wp-content/uploads/Rate-and-Wage-study-plain-language-executive-summary_EN.pdf

**SB 1505
Misses the Mark on
Raising Wages for
Direct Care Workers**



**VOTE NO
ON SB 1505**



Amanda Dalton on behalf of Oregon Resource Association
Jack Dempsey, on behalf of Community Providers Association of Oregon