



February 5, 2026

Chair Nosse, Vice Chairs Nelson & Diehl, and Members of the Committee:

My name is Amber Myre and I serve as the Executive Director of Living Opportunities, a nonprofit organization who has been serving individuals with developmental disabilities in Southern Oregon for over 50 years. Over that time, we have supported thousands of individuals and families through a wide range of service models, policy shifts, and system reforms. Our work has consistently centered on one core principle: ensuring individuals with I/DD receive the supports they need to live safe, independent, and meaningful lives in their communities.

To be clear, our opposition to Section 14 of HB 4040 is not rooted in a belief that parents should not be compensated for supporting children with complex needs, nor do we believe that most parents would misuse this model. In fact, we support the current flexibility within the CEN program that allows parents to be paid as Direct Support Professionals, an option that has proven to be important and necessary for families within the I/DD system, while still preserving employer oversight, accountability, and the choice and self-determination of the child receiving paid supports that are essential when serving medically fragile and behaviorally complex minors.

However, HB 4040 does not simply add flexibility for families. It removes currently required agency oversight, relies on a PSW employment model that concentrates authority and limits independent supervision, introduces statutory ambiguity, and advances without a clear understanding of fiscal impact. While the bill adds procedural requirements and directs future rulemaking, it weakens existing safeguards that protect children, families, and the broader developmental disabilities service system.

Eliminating Agency Employment Removes a Critical Safeguard: Section 14(3)(A)

HB 4040 allows a parent provider to be employed as either a Direct Support Professional or a Personal Support Worker, removing the requirement for agency employment.

Agency employment provides supervision, corrective action, incident response, documentation review, and enforceable accountability. Case management and rulemaking cannot replace an employer's daily authority, under existing rules, in-person contact between a case manager and a child may occur as infrequently as once per year. For children with very high needs, this shift materially weakens protections.

The structural differences between DSP and PSW models are summarized in Appendix A.

Ambiguous Statutory Language Create Avoidable Risk: Section 14(8)(C)(C) And (D)

HB 4040 repeatedly uses the term "caregivers" without defining it, despite otherwise distinguishing between Direct Support Professionals, Personal Support Workers, parent providers, and nonparent caregivers.

Undefined roles introduce ambiguity into training, objection rights, and provider selection. In a high-risk service system, this leads to inconsistent rulemaking, uneven enforcement, and confusion for families and providers.

The PSW Employment Model Limits Independent Oversight: Section 14(8)(H)

Under the PSW model, the person receiving services, or their legal representative, is the employer. For minors, this often means the parent(s) is simultaneously the employer, the paid provider, and the primary decision-maker. Even with the best intentions, the lack of separation between these roles creates conflicts that are exceptionally difficult to identify and monitor—particularly for nonverbal children or those with complex medical or behavioral needs under the CEN program.

Agency-based DSP models separate service delivery from employment authority and provide independent verification of hours and compliance. PSW models rely largely on self-reporting and retrospective review, increasing program integrity and compliance risk.

Child Objection Provisions are Not Realistic for This Population: Section 14(8)(D) And (C)(B)

HB 4040 requires a process for children to object to a caregiver and training for children to self-advocate.

For many children with very high medical or behavioral needs, including those with limited communication, these provisions are aspirational. Provider agencies currently serve as the independent safeguard when children cannot safely self-advocate against their own parents' authority. **HB 4040 reduces that protection.**

Fiscal Impact Remains Unclear

HB 4040 identifies no clear fiscal impact for section 14, despite authorizing new rulemaking, oversight, appeals, and reporting obligations.

Absent a full fiscal analysis, claims of efficiency or savings are speculative. Historically, models with reduced oversight generate higher downstream costs through crisis response, service disruption, and administrative remediation.

Given these factors, I respectfully urge you to remove Section 14 of HB 4040.

Sincerely,

Amber Myre

Living Opportunities

Appendix A: DSPs vs PSWs in Oregon— Why the Difference Matters

The PSW model is designed for stable situations where the person receiving services, or their representative, can act as the employer. DSP models provide the safeguards and reliability required for individuals with complex medical or behavioral needs. These distinctions are central to understanding the risks posed by the parent PSW provisions in HB 4040, Section 14.

	PERSONAL SUPPORT WORKERS (PSWs)	DIRECT SUPPORT PROFESSIONALS (DSPs)
PROVIDER MODEL	Independent provider who delivers direct support services to an individual based on their needs and preferences	Agency-led support with varying levels of involvement
WHO EMPLOYS THE WORKER	The individual receiving services or their designated proxy	A licensed provider agency
OVERSIGHT & SUPERVISION	No agency supervision Case managers provide guidance but do not supervise daily work Case manager contacts once a month; only one in-person visit required annually	Supervision, management accountability, required backup staffing, and compliance with Oregon Administrative Rules
HIRING & MANAGEMENT	The person hires, trains, schedules, and manages performance Workers may already know the person or hired through tools such as Carina Represented by SEIU	Shared or agency-led hiring, training, scheduling, and management Agencies cannot require families to schedule or fill staffing gaps HR support provided
TRAINING REQUIREMENTS	Background check and Carewell orientation Access to optional training through the Oregon Home Care Commission	Background checks, onboarding, and at least 12 required training hours annually, up to 24 depending on model Specialized training for complex needs
PAYROLL & PAYMENT	Payroll, taxes, and payment handled through PPL (Public Partnerships, LLC) PSW hours entered in eXPRS	Payroll and billing handled by the provider agency
ACCOUNTABILITY STRUCTURE	Performance management handled by the person or proxy with limited external enforcement	Clear agency accountability, corrective action processes, and regulatory oversight

SERVICE SCOPE	Hourly attendant care and task-based supports determined by the person	Daily living supports, skill development, health and safety, community integration, and required service documentation
BEST FIT WHEN	Needs are stable and predictable, and the person or proxy can manage employer responsibilities	Needs are complex, behavioral, or medical and require consistency, supervision, and risk management
PRIMARY STRENGTH	Maximum autonomy and flexibility for the person	Strong safeguards, consistency, and system accountability
PRIMARY TRADE-OFF	Fewer formal safeguards and limited external oversight	More structured decision-making but significantly higher protections and reliability

Why the Difference Matters

Choice is essential, but so are safeguards. DSP and PSW roles are not interchangeable. Matching the right provider model to a person's needs protects safety, stability, and long-term outcomes while honoring person-centered choice.