



## Agenda/Notes

Office of Governor Tina Kotek

RJC Health Equity and Human Services Committee

October 15, 2025 – Zoom

3:00 – 4:30 pm

Moderator – Javier Cervantes

### MEMBERS

X	Annie Valtierra-Sanchez	X	Jackie Leung	X	Matt Newell-Ching
X	Bahaa Wanly	X	Jeremiah Rigsby	X	Melinda Del Rio
X	Coi Vu		Josie Silverman-Mendez	X	Tae-Sun Kim
X	Dolores Martinez	X	Leslie Gregory		
E	Elizur Bello	X	Marin Arreola		

### OTHER ATTENDEES

	Andre Bealer	X	Yasmin Solorio	X	Javier Cervantes
X	Kristina Narayan	X	April Rohman	X	Rachel Currans-Henry
	KC LeDell	X	Matt Kinshella, ODHS	X	Sejal Hathi, OHA
X	Ashley Thirstrup, OHA	X	Matt Sprague, OHA	X	Maria Waters, OHA
		X	Hilde Hinkel, OHA		

Topic/Lead	Notes/Main Points	Decisions/Action Items
<b>Welcome &amp; Introduction</b>	<i>Co-chair Marin initiates meeting at 3:05pm. New committee member Leslie Gregory, Right to Health, provides welcome.</i>	
<b>Update on RJC Priorities &amp; September Leg Days Advocacy, Marin</b>	<p><b>Javier:</b> Folks on the legislative advocacy group, would you like to share on your recent conversations with legislators?</p> <p><b>Melinda:</b> A lot focusing on cutting things. Talked about RJC priorities.</p> <p><b>Marin:</b> Talked about Coordinated Care Organization issues, traditional healthcare workers - it was clear the trauma and anxiety they [legislators] are carrying. They will support our priorities based on current climate based on what they can and can't do. Will be challenging next few years.</p> <p><b>Leslie:</b> did the West Coast Health Alliance get addressed?</p> <p><b>Marin:</b> Not in our conversations.</p>	
<b>Meet &amp; Greet with Dr. Sejal Hathi, OHA Director</b>	<p><b>Dr. Hathi:</b> Dealing with current federal changes and fiscal challenges. Working as a leadership team to distill OHA work to a small number of focus areas. Where we can have the greatest impact on which efforts to</p>	

Meet & Greet with  
Dr. Sejal Hathi,  
OHA Director  
(Continued)

accelerate and put our shoulder behind the work. To do what matters most and well. Our north start still remains, our 20/30 goal.

**Marin:** What's your plan with new Rural health transformation funds?

**Dr. Hathi:** Preparing to apply for rural health transformation grant, which CMS has made available at the start of next month. Under this program, we would receive \$100M a year to shore up, sustain and strengthen rural health access. Many partners gave input on where to focus our efforts and leveraging that feedback to our application to CMS. CMS does have a headline to identify awardees at the end of the year. We are likely envisioning a two-part process, with the first shoring up existing infrastructure – as they are really suffering at this moment and we need to ensure doors are open and maintain access to care. We are also wanting transformational and regional access to move the needle on structural and access challenges to behavioral health and maternity care – a lot we aspire to do as a state that maybe this funding can help us make a dent on. Reviewing it as a two-part process.

**Leslie:** What can we expect from Oregon's place in the West Coast Health Alliance? We are excited to do all we can to equip Oregonians with information they need. We are laser focused on vaccines. Our intent is to defend science, maintain access, safeguard and protect our collective community's public health. We know the communities disproportionately impacted by this disinformation are our priority populations.

**Tae-Sun:** You talked about transformative proposals to transform rural health. Do you have one or two examples that could be considered as transformative?

**Dr. Hathi:** From the about 250 responses, we heard Oregonians want to see maternity deserts addressed, shortages in providers, behavioral health, and shoring up investment in digital infrastructure, telehealth – especially telehealth in rural areas. Interested in any numbers that addressed those core needs – technology, sites of care, innovative recruitment and incentive models, relocating providers to rural, housing programs for trainees and providers, role of AI and decreasing administrative burden. Lots of uses for these dollars and interested in seeing how we can create greatest impact depending on what CMS chooses to fund.

**HR1 Impacts to Oregon:  
Communication & Community Engagement Planning, OHA & ODHS  
Identify opportunities (i.e., how, and when) for RJC-HEHSC to provide feedback**

*Ashley Thirstrup shares slides "Communications and Engagement Planning for HR1"*

**Ashley:** Slide 3 is more for a takeaway.  
One provision – planned parenthood was banned from marketplace provision. Working with legislature, Governor's Office, and Planned Parenthood affiliates to figure out a path forward.

Anticipated Oregon will receive \$100M for five years, not enough to replace what we will be losing but will help rural communities. On marketplace side, beginning Jan 1<sup>st</sup> some non-citizens will no longer be eligible to receive premium tax credits.

Agency goals are: Keep people covered, reduce inequities and harm to people we serve, and adhere to federal mandates.

HR1 Implementation workstreams, working with ODHS and Gov Office – working closely. We worked on a DAS memo that lists federal fund impacts.

<https://www.oregon.gov/das/Financial/Documents/Federal-Impact-HR1-Initial-Analysis.pdf>

Folks who will be most impacted by HR1: Rural residents, working families, people with disabilities immigrant and refugees, families with mixed legal status, caregivers. It will be harder for folks to stay insured with additional requirements in place due to HR1.

**Max Sprague:** Working together through recurring partner and member engagement webinar. Next meeting is Nov 18<sup>th</sup>. Sign up:  
[https://www.zoomgov.com/webinar/register/WN\\_QRVxhTy1RzWRH3r48gz9Dw?utm\\_medium=email&utm\\_source=govdelivery#/registration](https://www.zoomgov.com/webinar/register/WN_QRVxhTy1RzWRH3r48gz9Dw?utm_medium=email&utm_source=govdelivery#/registration)

Want to ensure we are adapting as fast as we can and also bring our partners along with us. Community engagement is hard and there is distrust. Infrastructure needs and gaps: rapid transcreation of materials into multiple languages, real time translation is difficult, want to ensure we meet digital accessibility standards.

**Marin:** How do you plan to engage with CBO and community partners to get information out to people?

**Max:** Partner engagement packets, FAQ's, encouraging that they are bringing us questions and feedback.

Staff to share sign up for Federal Response Webinar  
(next meeting is Nov 18<sup>th</sup>)

HR1 Impacts to Oregon:  
Communication &  
Community  
Engagement Planning,  
OHA & ODHS  
(Continued)

Looking for anything we can find to bring folks in.

**Annie:** Communication is important. That's something we want to hear from the agency. There's many different priorities, talking about gender affirming care – SOJI and Real ID data may not be what OHA is using given everything. Having real time feedback from communities like who has been seen and how priorities are changing for communities will be helpful. Those who are working with communities will be crucial with how investments might need to shift. Thank you.

**Max:** Definity something we are looking at. Taking into account the concerns of the community – absolutalthey right, cannot let people vanish. If we step back, and avoid these real time data gathering or try to move away, it's not a message we want and look for more and better ways to get data to ensure we are listening and remain aware of what's happening to address real time needs our communities are facing.

*Maria Waters, OHA, shares slides "Engagement & Communications for HR1"*

**Maria Waters:** Rural communities will be hit the hardest for SNAP cuts. HR1 has four major areas of impact:

1. Individuals and families, less money to buy food.
2. Cost shifts to the state. Administrative share increase, payment error rate and benefit cost sharing.
3. Eligibility workload - work requirements expanding, policy changes and training needs, client outreach and support.
4. Oregon's food economy.

ODHS staff work will increase – reviewing additional work requirements and more frequently. HR1 shifts a lot of the funding away from the federal government and to the states. When folks lose SNAP benefits, it disrupts our food economy and ecosystem. Everything from demand on food banks to grocers, farmers, suppliers.

HR1 was passed July 1<sup>st</sup>. New SNAP rules relating to Able Bodied Adults Without Dependents (ABAWD), energy assistance-based standard utility allowance, non-citizen SNAP eligibility.

Communications via ODHS: broad awareness campaigns through media, ODHS channels, tailored

HR1 Impacts to Oregon:  
Communication &  
Community  
Engagement Planning,  
OHA & ODHS  
Identify opportunities  
(Continued)

resources for partners to support people in Oregon through changes, direct messaging to customers that reflect plain language, equity and trauma informed principles.

We learned from COVID that folks don't want to go to several places to hear messaging. Because of federal changes moving rapidly, we may not be able to follow our community engagement approach as ideally we could – just dependent on timeline in order to get information out in a timely manner. We are doing what we can to improve experience by sharing information out jointly with ODHS and our other agencies.

We are engaging culturally specific communities. Built a new reporting tool that helps identify community needs. Identifies key themes and trends, taking note of specific concerns relating to gaps and equity impacts, we are tracking actions via our programs. Want to respond to growing equity concerns. One direct outcome is we heard early on that our messaging wasn't making it to our front-facing staff that was easily usable and we are pivoting with how we are deploying that experience. Will be distributing weekly toolkit with updated talking points, key dates, and access to ppt slides, so we can improve quality control of information being shared and empowering more folks to speak on the changes.

The Office of Immigrant and Refugee Advancement (OIRA) is our center point for delivering culturally specific news and ensure coordination. Resources on the website include talking points to community members in English and Spanish.

**Matt Kinshella:** Starting today with partners, as of right now, we cannot issue SNAP funds for November until federal government shutdown ends. Will work diligently to get the word out.

**Matt Newell-Ching:** For ABAWD waivers that would be terminated early, is the state looking to take legal action to overturn that decision.

**Rachel:** Can't speak to that point on the litigation but are looking at the timelines and how we implement, our default is we are starting October 1.

**Matt Newell-Ching:** Is there an assurance with timelines for 2900 refugee and asylees, in the event that USDA scrutinizes that with quality control and

<p>HR1 Impacts to Oregon: Communication &amp; Community Engagement Planning, OHA &amp; ODHS Identify opportunities (Continued)</p>	<p>overpayments where they don't have to pay those?</p> <p><b>Rachel:</b> Have not landed our final legal analysis there.</p> <p><b>Matt Newell-Ching:</b> Do we know how ODHS will define health exemptions for work requirements?</p> <p><b>Rachel:</b> We do not. Will say that part of what we need to work on together is not having to make people go through double the paperwork and have to do it only once relating to work requirements for SNAP</p> <p><b>Coi Vu:</b> Immigrant and refugees and asylees, who are not permanent residents, are those who will be affected, is that correct?</p> <p><b>Maria Waters:</b> Still getting clarity there. Working with the Dept. of Justice.</p> <p><b>Coi Vu:</b> Refugees get benefits are going from 8 months to 6 months, correct?</p> <p><b>Rachel:</b> There have been changes I believe to three months but can pull together specific impacts we have done and framing to populations.</p> <p><b>Coi Vu:</b> How are folks reporting their work experience, education, etc. to stay qualified? I'm Executive Director of Coalition of Community Health Clinics – how do we have volunteers at our clinics to help our patients and communities stay eligible. Good conversation to have with CBO and nonprofits - we do a lot of trainings specifically community health workers. Trying to be creative about this, want to make sure there are many opportunities as possible for folks losing eligibility.</p> <p><b>Rachel:</b> We have existing processes but cant speak to all the detail to that but I hear your message on making things easier for people.</p> <p><b>Marin:</b> How does the committee provide you feedback as changes keep happening?</p> <p><b>Rachel:</b> Updates will come more frequently than the meetings. Will try to streamline and centralize via talking points.</p>	
<p><b>Medicaid Principles – Review &amp; Feedback, Kristina</b></p>	<p><i>Update is postponed due to time. Meeting concludes 4:36pm</i></p>	

## Meeting Materials

<https://www.oregon.gov/das/Financial/Documents/Federal-Impact-HR1-Initial-Analysis.pdf>



10.15.25 OHA  
Update for RJC re HR



10.15.25 ODHS  
Update for RJC re HR

## Zoom Chat

15:02:58 From Javier Cervantes, Gov. Office (El, He, Him, His) to Hosts and panelists:

Agenda

1. Welcome & Introductions, Marin (5 mins)

a. New Committee Member: Leslie Gregory, Right to Health, Founder/Director

2. Update on RJC Priorities & September Leg Days Advocacy, Marin (5 mins)

3. HR 1 Impacts to Oregon: Communication & Community Engagement Planning, OHA & ODHS (40 minutes)

a. Identify opportunities (i.e., how, and when) for RJC-HEHSC to provide feedback

4. Medicaid Principles – Review & Feedback, Kristina (10 minutes)

5. Meet & Greet with Dr. Sejal Hathi, OHA Director (30 minutes)

15:04:10 From Javier Cervantes, Gov. Office (El, He, Him, His) to Hosts and panelists:

RJC-Health Equity Human Services Committee Agenda-October 15 at 3 PM

1. Welcome & Introductions, Marin (10 mins)

a. New Committee Member: Leslie Gregory, Right to Health,  
Founder/Director

2. Update on RJC Priorities & September Leg Days Advocacy, Marin (5 mins)

3. Meet & Greet with Dr. Sejal Hathi, OHA Director (20 minutes)

4. HR 1 Impacts to Oregon: Communication & Community Engagement Planning, OHA & ODHS (40 minutes)

a. Identify opportunities (i.e., how, and when) for RJC-HEHSC to provide  
feedback

5. Medicaid Principles – Review & Feedback, Kristina (10 minutes)

15:38:43 From kristina narayan\* OR Gov to Hosts and panelists:

this is a great slide for the when people are impacted, which raises the question of when folks need to know

15:45:07 From Bahaa Wanly to Hosts and panelists:

can you share your slides at some point?

15:45:16 From kristina narayan\* OR Gov to Hosts and panelists:

we'll get them out

15:48:49 From Ashley Thirstrup (she/her), OHA to Hosts and panelists:

Here is the DAS document that covers the estimated impacts of HR1 across Oregon: <https://www.oregon.gov/das/Financial/Documents/Federal-Impact-HR1-Initial-Analysis.pdf>

15:51:18 From leslieg to Hosts and panelists:

Gender affirming care is HUGE here at OI but i need to hop off d/t a patient concern. Lots of stories here and would love to go into further

15:52:55 From leslieg to Hosts and panelists:

I'm so sorry to have to go - so honored and impressed to be with you all!

15:59:36 From Bahaa Wanly to Hosts and panelists:

I need to hop off. But I am wondering if you are projecting a surge ?

15:59:51 From Bahaa Wanly to Hosts and panelists:

how will this be managed?

16:01:27 From Ashley Thirstrup (she/her), OHA to Hosts and panelists:

Thank you, Annie. Really critical points

16:05:05 From kristina narayan\* OR Gov to Hosts and panelists:

If we're running short on time, i can capture the last item at the next meeting.

16:28:13 From Ashley Thirstrup (she/her), OHA to Hosts and panelists:

Thank you, all! Appreciate the opportunity to join.

16:36:33 From Dolores Martinez to Hosts and panelists:

Thank you for all the information and updates!

16:36:43 From Jackie L to Hosts and panelists:

thanks

16:36:47 From Max Sprague to Hosts and panelists:

Thank you all!

16:36:58 From Matt Kinshella (he/him) to Hosts and panelists:

Thank you all

16:37:04 From Maria Waters (ODHS) to Hosts and panelists:

It was a pleasure to be with all of you. Thank you for the space to share.



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October 15, 2025

# Communications and Engagement Planning for HR1

**Health Equity and Human Services subcommittee**

Ashley Thirstrup, Chief of Staff/External Relations Division Director

Max Sprague, Communications Director



# Agenda

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- 1** HR1 implementation timeline
- 2** Impacts on Oregon
- 3** Engagement and communications approach
- 4** Questions

# Effective dates for Medicaid and Marketplace provisions

## January 1

- Removal of advanced premium tax credit repayment caps
- Non-citizens with incomes > 100% federal poverty level and under 5 - year bar are no longer eligible to receive premium tax credits
- Stricter pre-enrollment income verification and special enrollment period verification \*
- Changes to actuarial value to permit less generous plans \*
- Gender affirming care not allowed as an Essential Health Benefit but state requirements remain in effect.

## January 1

- Refugees and asylees no longer eligible to receive premium tax credits
- Shortened open enrollment period must start no later than Nov. 1 and end no later than Dec. 31.

## January 1

- Ending automatic re-enrollment starting in the 2028 open enrollment period

\* Pending final decision on *City of Columbus v Kennedy*.

2025

2026

2027

2028

2029

## July 4

- E&E Final Rule prohibitions
- Delay NF Staffing Ratio rule implementation
- Prohibits lower provider taxes based on volume; prohibits taxes at higher rate for Medicaid units of service
- State directed payment (SDP) cap at 100% for new SDPs
- Planned Parenthood banned from Medicaid participation

## December 31

- Application deadline for Rural Health Transformation funding

## July 4

- End Planned Parenthood ban

## October 1

- Regular Federal Medicaid Assistance Percentage (FMAP) for emergency services
- End of Medicaid/Children's Health Insurance Program funds for certain non-citizens
- New provider taxes and increases before 6/4/25 prohibited

## December 31

- Conduct redeterminations every 6 months

## January 1

- Implementation date for work requirements
- Limit retroactive coverage
- Required standard process to update address information
- Verify eligibility quarterly against Death Master file quarterly
- 1115 Waiver Budget Neutrality requirement codified

## October 1

- Provider tax cap reduced by a half percentage point per year until 3.5% reached

## January 1

- Home equity limit allowable for long-term care seekers
- State directed payments reduce by 10 percentage points per year until no greater than 100% of Medicare levels

## July 1

- New home and community-based services (HCBS) waiver option

## October 1

- Copayments required (exp. Adults, >100% federal poverty level)

## October 1

- Eliminates option to waive disallowance of federal funds associated with "excess" improper payments

# Agency Goals



Keep people covered

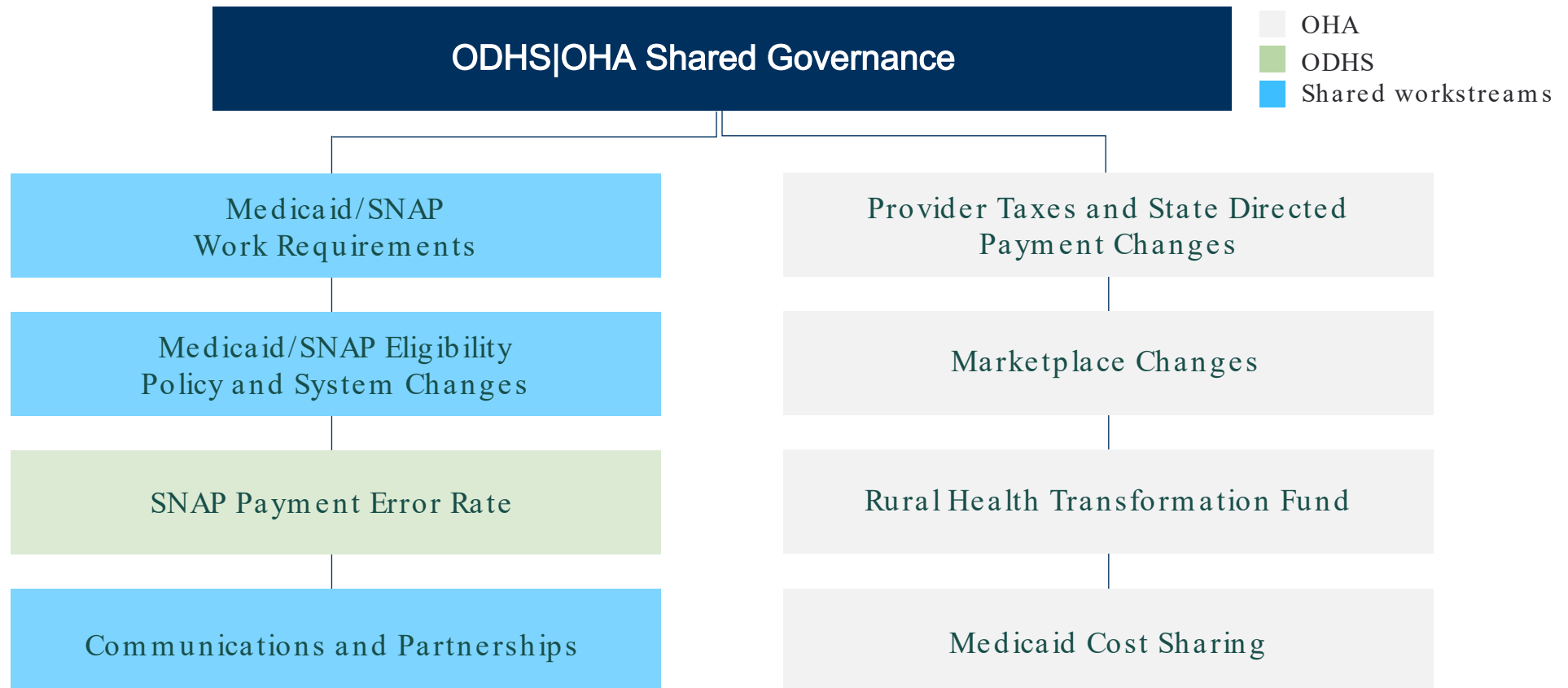


Reduce inequities and harm to the people we serve



Adhere to federal mandates

# HR1 Implementation workstreams

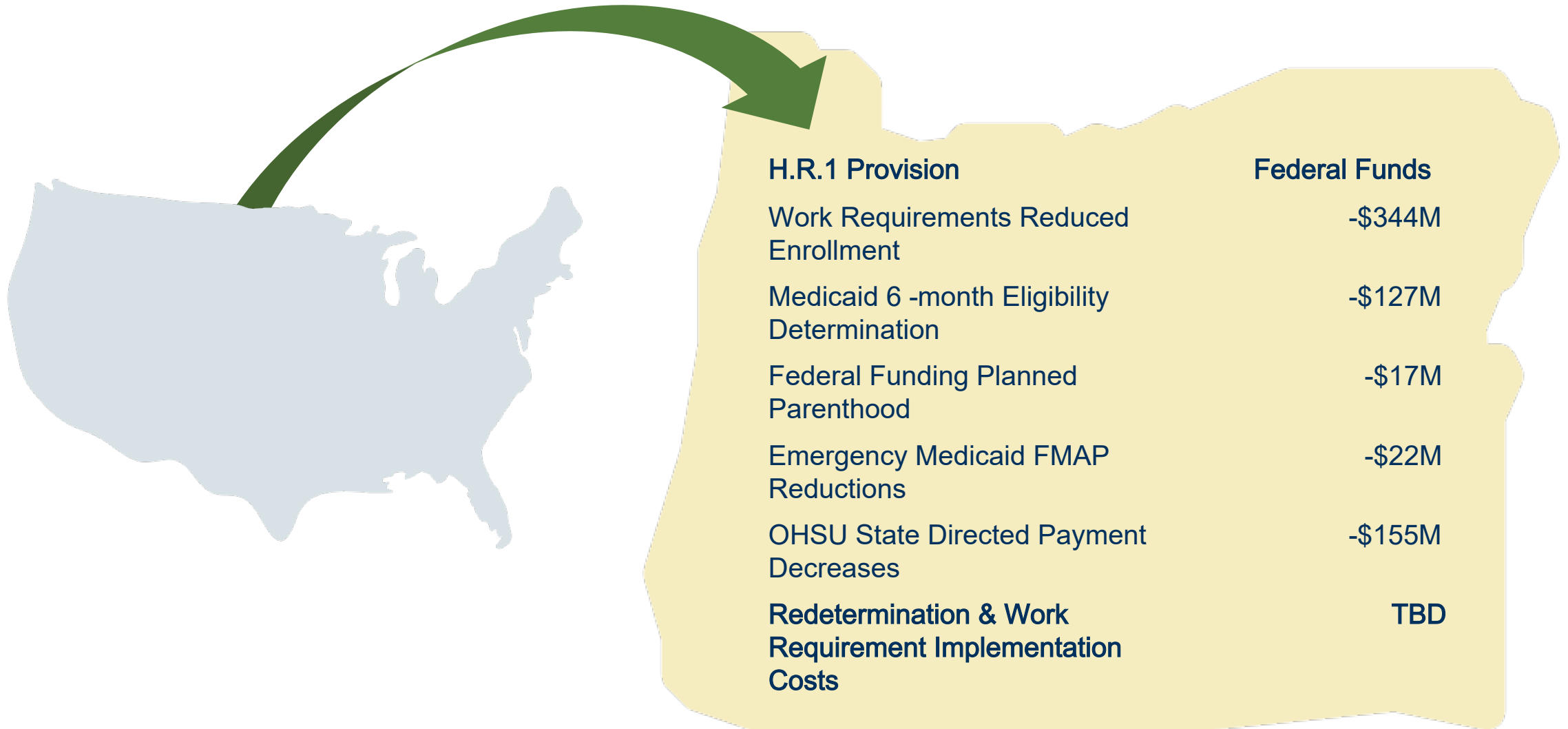


**Other impacted functions and areas embedded in workstreams:**

Tribal Affairs, CCO Operations, OHP Bridge, Healthier Oregon Program, Budget, LTSS, Evaluation, etc.

# OHA: H.R.1 and 2025 -27 federal funds impact

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# Working Together to Support Oregonians Most Impacted by H.R.1

Who will be most impacted by House Resolution 1 (H.R.1)?

Rural residents

Working families

People with disabilities

Immigrants and refugees

Families with mixed legal status

Caregivers



# Intentional Partner Engagement

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- Initial focus on work requirements, six-month redeterminations, and Rural Health Transformation Fund opportunity
  - ❑ Direct outreach to impacted partners (Community Partners, Marketplace partners, partners providing eligibility navigation, etc.)
  - ❑ Partner input and public comment on Rural Health Transformation framework

## Purpose

- Shared understanding and input on systems changes and impacts
- Input on and refinement of Rural Health Transformation framework

# Working Together through Recurring Partner and Member Engagement

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- ODHS | OHA Forward Together Federal Response webinar
  - ❑ Recent webinar: September 30
  - ❑ Next webinar: November 18
- Medicaid Advisory Committee (MAC)
  - ❑ Recent meeting: September 17
  - ❑ Next meeting: October 29
- Beneficiary Advisory Committee (BAC)
  - ❑ Recent meeting: September 5
  - ❑ Next meeting: October 22

**Purpose:** Share information, answer questions, understand partner needs



# Communications and Engagement

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- Ensure OHP members, partners, the public and media have timely, relevant information throughout the rollout of H.R.1 mandates.
- Identify the key dates, details and deadlines that need to be communicated and in what timeframe.
- Deliver communications in accessible formats, with plain language and language-appropriate messaging to OHP members and partners.
- Guide people to foundational resources and information, like OHA's federal response [web page](#).

# Constraints

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- Reduced federal funding for Medicaid
- State funds will be required for implementation costs
- Operational costs will increase
- Systems impacts are significant
- Other priorities and programs may be delayed or not implemented
- Decisions may have to be made quickly, impacting engagement
- Communities may be reluctant to engage

# Infrastructure needs and gaps

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- Rapid transcreation of materials into multiple languages
- Ability to engage partners in other languages
- Remediation and design to meet digital accessibility standards

# How to stay informed

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Web page: Monitoring Federal Changes and any Impacts on Oregon

<https://www.oregon.gov/oha/Pages/Federal-Changes.aspx>

Newsletter: Oregon Health News

<https://www.oregon.gov/oha/erd/pages/oregon-health-news.aspx>

Social Media

- Instagram: [@oregonhealthauthority](https://www.instagram.com/oregonhealthauthority)
- Facebook: [facebook.com/OregonHealthAuthority](https://www.facebook.com/OregonHealthAuthority)
- LinkedIn: [linkedin.com/company/oregon-health-authority](https://www.linkedin.com/company/oregon-health-authority)



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# Questions

# **Racial Justice Council**

## **Health Equity and Human Services Subcommittee**

Engagement & Communications for HR1

**Maria Waters, Federal Response Engagement Lead**

Oct. 15, 2025

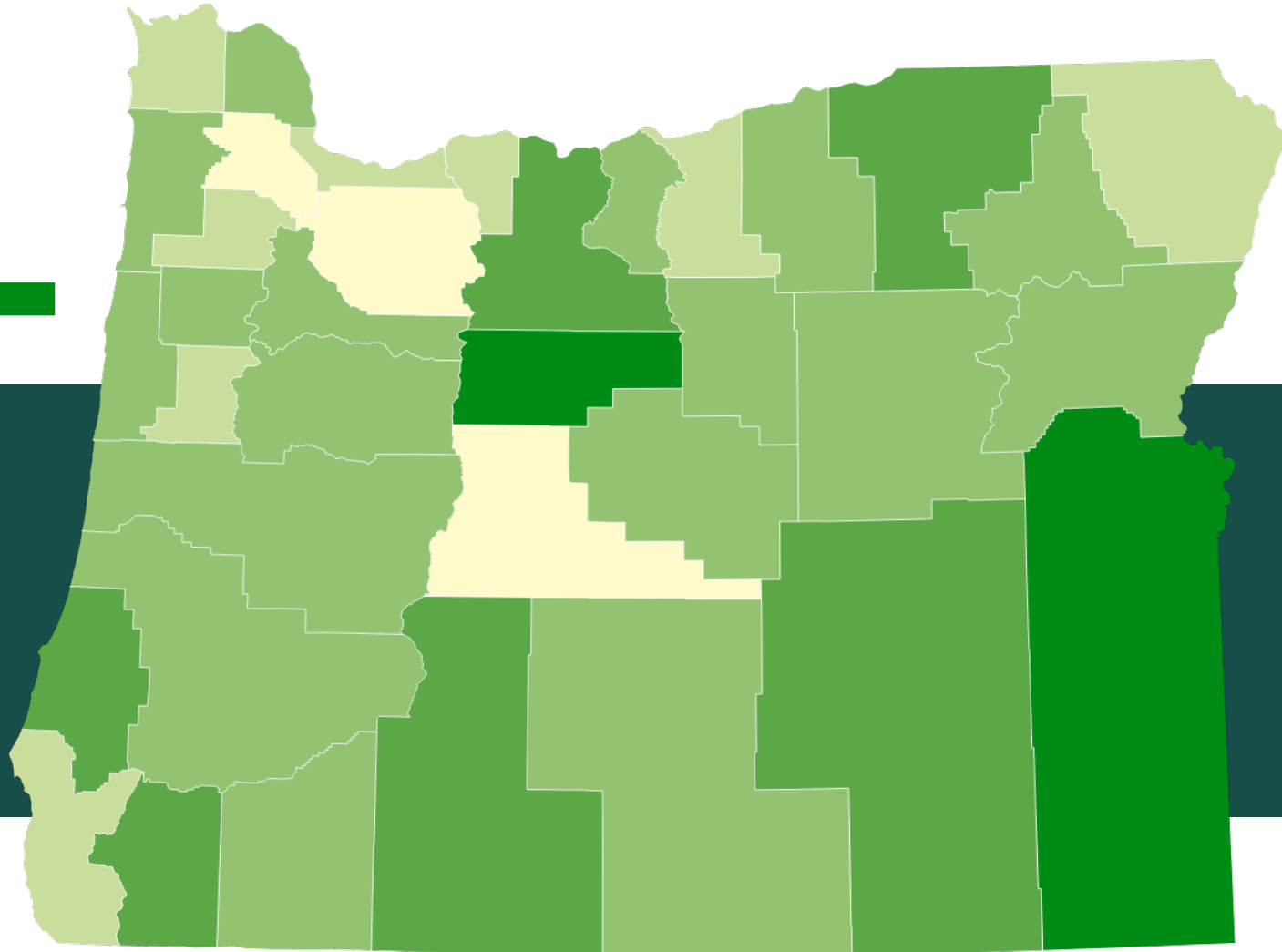
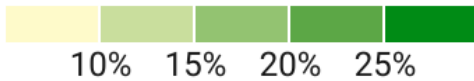
# Agenda

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- Overview of impacts to Supplemental Nutrition Assistance Program (SNAP)
- Engagement and communications approach
- Discussion

# 1 in 6 Oregonians participate in SNAP

Percentage of households receiving SNAP by county



**757,000**  
Oregonians

**450,000**  
Households

*Map graphic based on American Community Survey 5-Year data (2017-2021) as presented by the [Food Research & Action Center](#).*



# H.R.1 and SNAP: Four major areas of impact

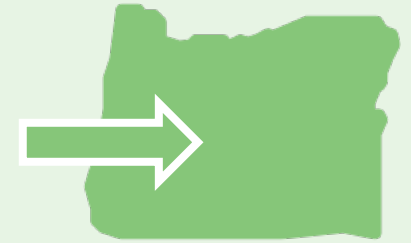
## Individuals and families

- Less money to buy food
- More hoops to jump through



## Cost shifts to the state

- Administrative share increase
- Payment error rate and benefit cost sharing



## Eligibility workload

- Work requirements
- Policy changes and training needs
- Client outreach and support



## Oregon's food economy

- Less money to grocers, farmers, and other food workers
- Increased demand on food banks and pantries



# Timeline view: H.R.1 SNAP effective dates

## July 4: New SNAP rules approved

- ABAWD\* SNAP\*\* work requirements and waivers
- Availability of energy assistance-based Standard Utility Allowance\*\*\*
- Non-citizen SNAP eligibility

2025

## October 1

- New SNAP rules implemented
- Nutrition education (SNAP-Ed) funding eliminated

2026

## October 1

- New state administrative cost share comes into effect, increasing state share from 50% to 75%

2027

## October 1

- Re-evaluation of SNAP allotment (Thrifty Food Plan)
- SNAP error rate-based cost sharing comes into effect; Oregon pays up to 15% of benefit\*\*\*\*

*\*Able-bodied adults without dependents*

*\*\*Supplemental Nutrition Assistance Program*

*\*\*\*Must be implemented no later than November 1, 2025*

*\*\*\*\*Based on Oregon's current 14% SNAP payment error rate*

# Working together to support Oregonians H.R. 1 most impacts

## Who will be most impacted by House Resolution (H.R.) 1?

Rural  
residents

Working  
families

People with  
disabilities

Immigrants  
and  
refugees

Families  
with mixed  
legal status

Caregivers



# Communications

Informing, equipping a wide range of messengers to communicate and support residents



Broad awareness campaigns through media, ODHS channels



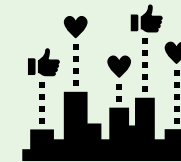
Tailored resources for partners to support people in Oregon through changes



Direct messaging to customers that reflects plain language, equity and trauma informed principles



Supports for staff for customer contacts



Utilize feedback, data and best practice to adapt plans, messaging and products

# Engagement and communications objectives

**Clear, culturally appropriate communications and engagement opportunities**



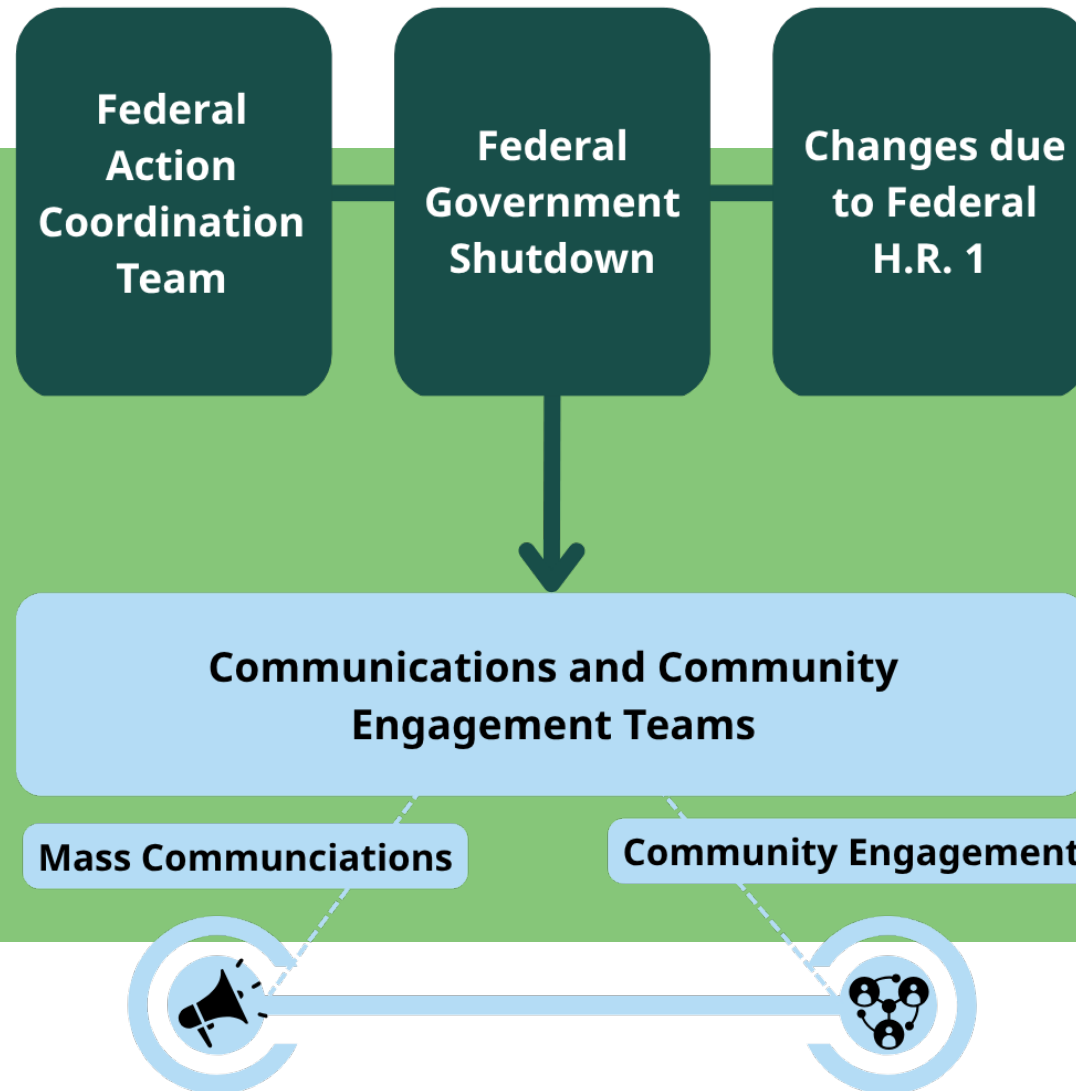
**Keep as many people as possible connected to the benefits and services they are eligible to receive**

**Provide resources for people when benefits are reduced or lost**



**Build partner and customer understanding of how federal changes impact ODHS programs and services**

# Communications and engagement approach



# Engaging culturally specific communities

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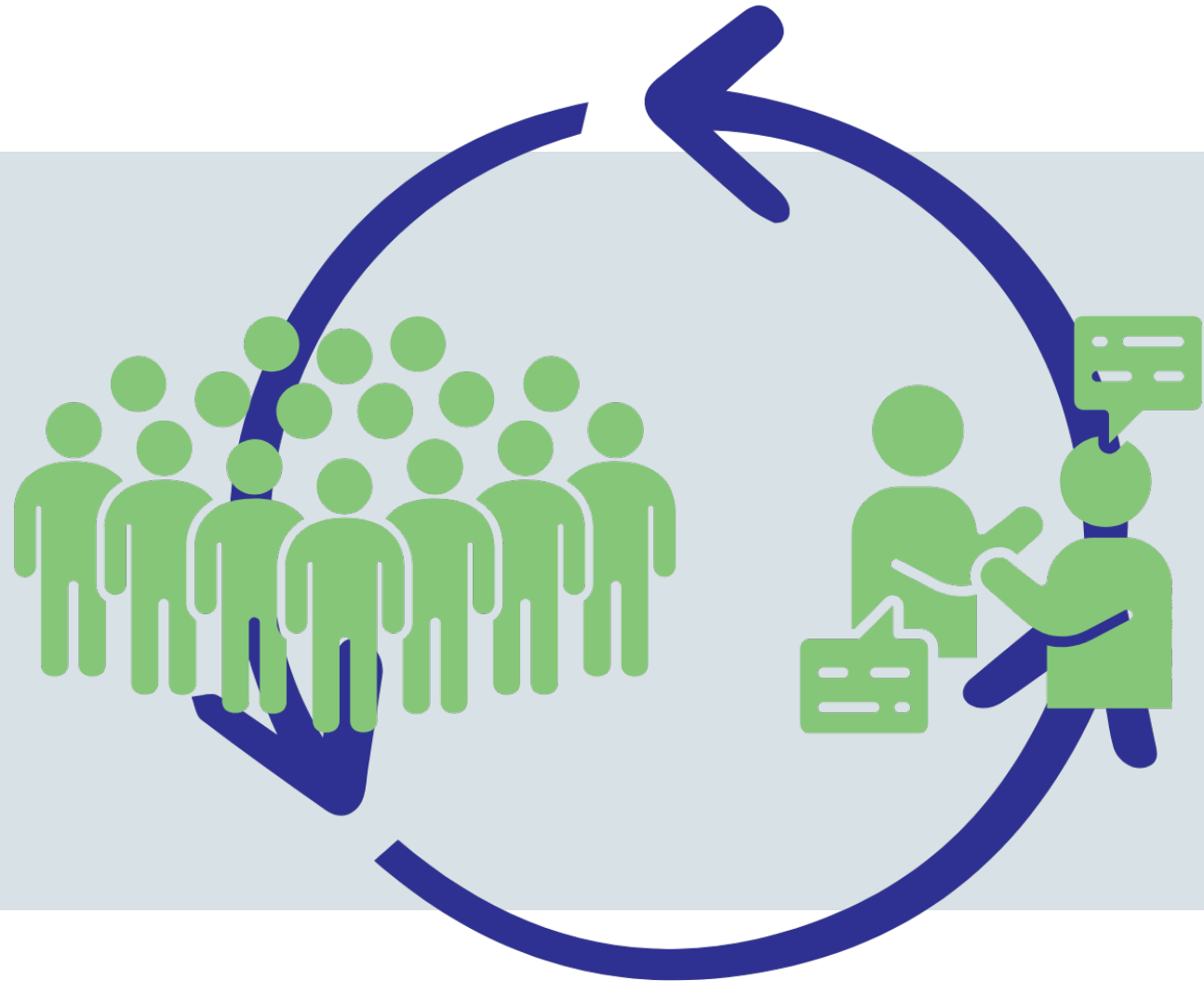
**Reporting tool  
helps identify  
community  
needs**



# Community coordination

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**Reaching  
people where  
they are**

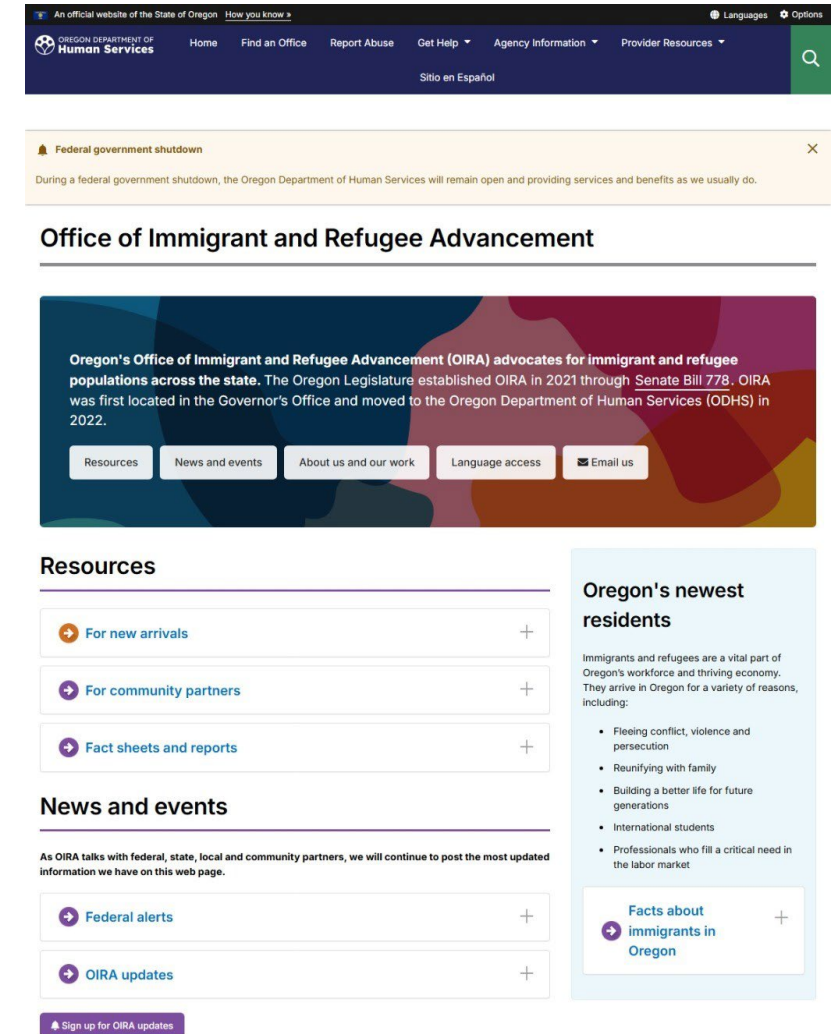




# Office of Immigrant and Refugee Advancement

## Proactive outreach and engagement to partners supporting immigrant and refugee communities

- Held a partner roundtable on Sept. 29, 2025 to preview SNAP eligibility changes
- Presenting to partner groups and forums for immigrant and refugee families
- Assisting getting materials to individuals and families in trusted ways
- Asking for community to share ripple effects, gaps and what they are hearing: [OIRA.INFO@odhsoha.Oregon.gov](mailto:OIRA.INFO@odhsoha.Oregon.gov)
- Monthly newsletter and website resources



# Resources: Forward Together Oregon Webinar

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Register for the Forward Together Oregon webinar for partners hosted by ODHS and OHA

- Nov. 18, 2025 from 10 to 11 a.m. Pacific
- Spanish, Somali, and American Sign Language interpretation provided
- Register:  
[https://www.zoomgov.com/webinar/register/WN\\_QRVxhTy1RzWRH3r48gz9Dw#/registration](https://www.zoomgov.com/webinar/register/WN_QRVxhTy1RzWRH3r48gz9Dw#/registration)



# Resources: Websites

## Public Web Pages in English and Spanish

### Updates about Federal Changes

ODHS News

Visit the ODHS Newsroom

Community Partner Meetings

Director's Messages

Social Media

Contacts

Media Inquiries

[Español](#)

Oregon Department of Human Services (ODHS) is actively assessing federal changes and actions for any impact that they have on Oregon. ODHS will continue supporting everyone who calls Oregon home in their journey to achieve well-being.

[Current status](#)[Immigration help](#)[Other resources](#)[Stay informed](#)

### Current status

Sep. 30, 2025

A federal budget was approved in July 2025 that will significantly affect key programs that support people in Oregon, including the Supplemental Nutrition Assistance Program (SNAP) and the state's Medicaid program, the Oregon Health Plan (OHP). These changes shift more cost and responsibility to the state, putting additional pressure on already stretched systems.

#### Key impacts

**SNAP:** 1 in 6 Oregonians rely on food benefits. Under the new law, Oregon will need to contribute an estimated **\$385 million annually** to maintain current service levels.

**OHP:** Covering 1 in 3 Oregonians, including half of the state's children, OHP may face a reduction of up to **\$10 billion in federal Medicaid funding** over the next decade. ODHS staff help people apply for OHP and determine program eligibility.

ODHS is working closely with the Oregon Health Authority (OHA) and Governor Kotek's office to analyze the full impact. The Governor has said that the state budget cannot fill all the gaps and that difficult decisions are ahead. Guidance around making changes is being developed.

#### What you should know

- People should continue to apply for and use the benefits and services they qualify for. They don't need to wait.
- Federally required changes to SNAP eligibility begin Oct. 1, 2025. These changes will affect three main groups of SNAP participants: households receiving utility assistance, able-bodied adults ages 18 through 64 with no children under age 14 in their SNAP group, and certain lawfully present immigrants. The changes won't happen to everyone at once — they will roll out over the next year.
  - [News release](#)
  - [Talking points](#)

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## Stay Informed



Federal policies may impact the services and supports the Oregon Department of Human Services provides. Stay connected with us to receive timely updates.

### 01. Federal updates webpage

For the latest information on how federal changes may affect ODHS programs and services, scan the QR codes or visit [oregon.gov/odhs/news/pages/federal-updates.aspx](https://oregon.gov/odhs/news/pages/federal-updates.aspx).



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