2023-25

Agency Request Budget (ARB)

Section 2

DHS | Oregon Department of Human Services

Oregon
Kate Brown, Governor

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2023-25 Agency Request Budget
Director Fariborz Pakseresht, Department of Human Services

Everyone in every Oregon community deserves the opportunity to experience well-being. Having access to fundamental supports – like health care, safe housing, a strong community, economic stability and access to nutritious food – can provide the opportunity individuals and families need to thrive.

But not everyone has easy access to these supports. Many who live in Oregon – particularly people with disabilities; Black, Indigenous, and People of Color; and those experiencing low or no income – face persistent barriers that hinder people's ability to experience well-being, reach their potential and fully contribute to their communities. And while human services systems should exist to address these gaps, the fact is that legacies of racism and other forms of oppression have shaped these systems and created additional barriers.

At Oregon Department of Human Services (ODHS), our charge is to dismantle these barriers so that everyone in Oregon can access what they need to thrive. As an agency that serves more than one in three people in Oregon and provides supports at every stage of life, we are well positioned to do this work. But it requires a profound culture change throughout our systems. Historically, human services have been delivered through highly siloed programs – each with its own set of regulations and limited scope of services. Because it approaches people's needs in such a fragmented way, this model has required people to navigate multiple and complex programs to access the full range of necessary services, leaving many individuals and families behind in the process. It also has long frustrated the members of our human services workforce, who want to help people in more holistic and responsive ways.

To serve people and families equitably and effectively, we need a different approach – one that takes all aspects of people's well-being into consideration and puts their goals and lived experiences at the center of our decisions. We call this approach Building Well-being Together, and we are partnering with communities and organizations around the state to put it into practice. It involves listening intently to the communities we serve, breaking down the siloes that keep us from comprehensively meeting their needs and addressing the barriers that

disproportionately affect the well-being of Black, Indigenous, and People of Color; members of Oregon Tribal Nations; LGBTQIA2S+ Oregonians; people with disabilities; refugees and immigrants; people in rural communities; and those experiencing low or no income.

ODHS' 2023-25 Agency Request Budget is designed to advance the Building Well-being Together initiative through the coming biennium while laying the foundation for its long-term success. This will require investment in three key areas:

1. **Strengthening ODHS foundations –** building the capacity we need to serve our communities more equitably and effectively;

2. **Preparing for and responding to emergencies –** providing mass care, shelter, food, and water in times of disaster while investing year-round in agency and community preparedness; and

3. **Creating the future of ODHS and human services in Oregon –** working internally and externally to break down siloes, connect systems together and identify and bridge gaps in services, while acknowledging that people and communities are the experts in their own lives and partnering with them to design services that better support their needs and goals.

With the resources identified in this budget, ODHS can make significant strides toward Building Well-being Together with our communities, helping to ensure that all who live in Oregon, regardless of race, identity, age, disability or place, have the needed supports to achieve whole well-being for ourselves, our families and our communities.

This work cannot happen without the caring and commitment of tens of thousands of staff, both in ODHS and in our partner organizations, who provide services and support to children, adults, families and elders in communities throughout Oregon. Every day, these staff members bring their skill, dedication and compassion to some of the most difficult and emotional work in any industry. We owe them a great debt of gratitude.

On behalf of our employees, our partners and the 1.5 million Oregonians we serve, I respectfully submit ODHS' 2023-25 Agency Budget Request.

Sincerely,

Fariborz Pakseresht
Director, Oregon Department of Human Services

Oregon Department of Human Services

Overview

The mission of the Oregon Department of Human Services (ODHS) is to help Oregonians in their own communities achieve safety, well-being, and independence increasingly through locally informed, culturally appropriate, customer focused
Services and customer service provided at the State and/or Local level in a way that protects, empowers, respects choice, and preserves dignity of all Oregonians in need of ODHS services.

As described in more detail in the ODHS ARB Directors letter is based on advancing the Building Well-being Together initiative through investments in the following three key areas:

1. **Strengthening ODHS foundations –** building the capacity we need to serve our communities more equitably and effectively;

2. **Preparing for and responding to emergencies –** providing mass care, shelter, food, and water in times of disaster while investing year-round in agency and community preparedness; and

3. **Creating the future of ODHS and human services in Oregon –** working internally and externally to break down siloes, connect systems together and identify gaps in services. This includes engaging local communities impacted in the process. By analyzing these gaps, we can better identify and implement, including input from local communities to determine for any improvements or rule/statutory which pay include systemic barriers we are dedicated to dismantling. ODHS acknowledges that people and communities are the experts in their own lives and partnering with them to design services that better support their needs and goals will lead to better outcomes.

Funding

The ODHS Agency Request Budget provides ODHS a General Fund investment of $6.45 billion General Fund and $19.09 Billion total funds for the 2023-25 biennium.

ODHS 23-25	GF	OF	FF	TF	POS	FTE
LAB 21-23	4,807,184,398	942,725,953	11,359,676,823	17,109,587,174	10,454	10,274.43
ARB 23-25	6,449,147,865	647,045,147	11,997,685,682	19,093,878,694	12,634	11,886.72
Difference LAB - ARB	1,641,963,467	(295,680,806)	638,008,859	1,984,291,520	2,180	1,612.29
% Difference LAB - ARB	34.16%	-31.36%	5.62%	11.60%	20.85%	15.69%

DHS	GF	OF	FF	TF	POS	FTE
CSL 23-25	5,384,613,979	646,550,313	11,269,652,233	17,300,816,525	10,320	10,264.58
ARB 23-25	6,449,147,865	647,045,147	11,997,685,682	19,093,878,694	12,634	11,886.72
Difference CSL - ARB	1,064,533,886	494,834	728,033,449	1,793,062,169	2,314	1,622.14
% Difference CSL - ARB	19.77%	0.08%	6.46%	10.36%	22.42%	15.80%

Major changes from 19-21 LAB to CSL are driven mainly by:

- Roll up of 21-23 investments
- Phase out of one-time funding for nonrecurring expenditures
- Standard inflation
- Forecasted Cost per Case and Caseload changes including related staffing
- Backfill of General Fund for one-time revenues and capped federal fund grants
- Changes in Federal Medicaid Assistance Percentages (FMAP)
- Transfer of the Employment-Related Day Care and Inclusive Partners Programs from ODHS to DELC

Strategic Funding Investments and Adjustments

Descriptions of each major Policy Option Package (POP) and other Package investments/reductions are included in the appropriate programs budget narrative in the following sections of the ODHS ARB document. The list below is not in ODHS's priority order.

ODHS POPS at ARB	GF	OF	FF	TF	POS	FTE
101 - Infrastructure, Access and Emergency	97,401,189	-	144,367,410	241,768,599	113	98.75
102 - Homecare Workforce	2,750,496	-	642,128	3,392,624	16	12.00
103 - Address Systemic Poverty Issues	8,120,329	974,849	13,603,875	22,699,053	2	2.00
104 - Equitable Access and Wellbeing	12,810,269	-	7,422,761	20,233,030	67	33.50
105 - Healthier Oregon Program (HOP)	77,817,335	-	-	77,817,335	79	61.00
106 - Chief Data Office	541,637	-	361,092	902,729	3	3.00
107 - Program Integrity (OPI)	710,871	-	710,871	1,421,742	8	6.00
108 - Strengthening Chief Financial Office	1,963,062	538,569	1,308,722	3,810,353	14	11.50
109 - Ofc of Resiliency and Emergency Mgmt Staffing	7,722,411	-	5,148,257	12,870,668	48	48.00
110 - Human Resources Staffing Stabilization	3,608,496	-	2,405,719	6,014,215	33	24.75
111 - Local Leadership	5,659,062	4,090,720	3,682,094	13,431,876	53	39.75
112 - Ofc of Resiliency and Emergency Mgt 211	5,923,219	-	82,148	6,005,367	1	0.75
113 - Maintaining Critical Staffing	9,279,058	-	6,275,324	15,554,382	56	56.00
114 - Emergency Shelter and Feeding	35,000,000	-	-	35,000,000	-	-
115 - Refugee Program	8,639,164	-	1,200,599	9,839,763	8	7.00
116 - Grant Pgm for Community-Based Organizations	25,070,146	-	1,066,706	26,136,852	19	14.25
117 - Tribal Liaisons	2,343,419	-	503,737	2,847,156	15	11.25
118 - Child Safety	37,538,083	-	12,514,099	50,052,182	401	200.50
119 - Parent Alcohol & Drug Support Services	1,088,443	-	362,841	1,451,284	8	6.00
120 - CIRT and Safety Systems Analysis	1,110,809	-	370,293	1,481,102	8	6.00
121 - Family Preservation & Engagment	18,260,864	-	6,087,630	24,348,494	193	96.50
122 - FOCUS Expansion	16,480,000	-	-	16,480,000	-	-
123 - FC/Resource Parent Reimbursement Rates	70,328,175	-	42,206,045	112,534,220	-	-
124 - SSB & Child Support Payments Package	6,282,923	(8,871,551)	2,588,628	-	-	-
125 - ARPA Positions	1,501,711	-	1,501,711	3,003,422	14	14.00
126 - Model Employer	2,034,856	-	2,034,856	4,069,712	29	24.09
127 - ODDS-OTIS Joint Quality Improvement	2,480,898	-	1,325,380	3,806,278	20	16.79
128 - Child Welfare and IDD Parents	387,997	-	564,445	952,442	2	1.50
129 - ODDS Systems	889,698	-	8,007,245	8,896,943	29	29.00
130 - CME Service Equity and Capacity	39,739,037	-	39,794,953	79,533,990	-	-
131 - Children's Foster Care Rates	3,086,303	-	5,459,423	8,545,726	1	1.00
132 - Targeted Rate Increases	162,144,945	-	294,067,672	456,212,617	-	-
133 - Children's Residential/CIIS Workload Model	794,225	-	794,225	1,588,450	10	7.50
134 - Total Worker Health (OHSE)	1,045,327	1,713,278	626,807	3,385,412	8	6.25
135 - TANF Redesign	118,887,918	-	25,000,000	143,887,918	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	13,342,228	-	-	13,342,228	4	3.25
137 - Housing Sabilization Program Expansion	83,972,130	-	-	83,972,130	4	3.52
138 - Survivor Investment Partnership	32,236,635	-	-	32,236,635	2	1.76
139 - Local Food Purschasing Infrastructure	10,086,400	-	86,396	10,172,796	1	0.75
140 - Restaurant Meals Program	418,973	-	418,955	837,928	4	3.50
141 - Jackson County Demonstration	14,984,885	-	-	14,984,885	8	7.04
142 - Combined Eligibility Worker	53,889,008	-	38,789,711	92,678,719	615	461.25
143 - ONE Ongoing Maintenance	15,888,633	840,000	21,700,404	38,429,037	34	26.00
144 - Pay Equity for CILs	2,616,005	-	-	2,616,005	-	-
145 - RCDHH & VRCs	6,944,825	-	-	6,944,825	46	34.50
146 - Work Incentive Network (WIN)	3,211,060	-	-	3,211,060	1	0.75
147 - Business/Contracts Unit	461,616	-	-	461,616	3	2.25
148 - RSA Audit Report	1	-	-	1	-	-
201 - Medicaid Waiver Placeholder	2,481,243	-	3,384,508	5,865,751	32	12.80
202 - Basic Health Program	24,336,717	-	25,021,780	49,358,497	288	216.00
203 - Mainframe Migration/Provider & Client Pmt Sys	9,253,493	1,208,969	5,444,560	15,907,022	10	7.14
301 - ERDC Expansion - DELC companion	967,659	-	1,099,439	2,067,098	4	3.00

Conclusion

For the 23-25 biennium, the ARB invests in an array of services that promote safety, wellbeing, diversity and improving the economic sustainability, increasing safety, and achieving Wellbeing for some of Oregon's most Vulnerable. These investments will help ODHS meet the needs of Oregonians in this period of increasing diversity, change and growth.

Oregon Department of Human Services
Central Services

Overview

ODHS Central Services provide essential supports to ODHS programs, helping each achieve their vision, realize target outcomes, and advance the wider agency mission.

It consists of the Office of the Director and Policy including the Chief of Staff, Tribal Affairs, the Deputy Director, the Office of the Chief Financial Officer, the Office of Immigrant and Refugee Advancement, and the Governor's Advocacy Office. Central office also includes the Office of Equity and Multicultural Services (OEMS), the Office of Resilience and Emergency Management (OREM), the Office of Human Resources, the Central ODHS Budget, Planning and Analysis Office, the Public Affairs office which includes Government Relations, Public Records, Legal Unit and Communications, the Office of Program Integrity, the Office of Reporting Research, Analytics and Implementation, the Office of Business Information Services, the Office of Information Support Services and the Integrated Eligibilityand Medicaid Eligibility ONE Program Office. These offices provide essential business supports to programs in achieving the department and programs mission,vision, and outcomes.

The ODHS Central, budgets are structured and administered according to the following principles:

Control over major costs. ODHS centrally manages many major costs. ODHS also strongly supports and actively participates in statewide efforts to locate work across the enterprise and install performance management systems to perform administrative functions more efficiently and effectively.

ODHS continues with the Fundamental's map process, including Quarterly Performance Reviews. ODHS has an expectation of managers and all staff to bring forward ideas for process improvement.

ODHS is also in the initial stages of the Wellbeing project, including a dedicated focus of becoming a non-racist Agency, and looking at new inventive ways to look at how human services are delivered in 2022 and beyond. Being more customer centric and doing outreach to local communities, with an intentional focus on engaging marginalized and underserved communities.

Oregon Department of Human Services
Central Services

The ODHS Agency Request Budget (ARB) provides funding for Central Services at $232.0 million General Fund and $450.6 million Total funds:

Central	GF	OF	FF	TF	POS	FTE
2021-23 LAB	209,961,790	45,895,088	126,444,545	382,301,423	382	371.37
2023-25 ARB	232,018,376	50,573,784	167,963,533	450,555,693	613	580.51
Difference	22,056,586	4,678,696	41,518,988	68,254,270	231	209.14
Percent change	10.51%	10.19%	32.84%	17.85%	60.47%	56.32%

Major changes from 21-23 LAB to 23-25 ARB include mainly:

- Standard inflation
- Phase out of one-time funding for wildfires

Strategic Funding Investments and Adjustments

POPS at ARB	GF	OF	FF	TF	POS	FTE
106 - Chief Data Office	541,637	0	361,092	902,729	3	3.00
107 - Program Integrity (OPI)	710,871	0	710,871	1,421,742	8	6.00
108 - Strengthening Chief Financial Office	1,626,069	0	1,084,054	2,710,123	11	9.25
109 - Ofc of Resiliency and Emergency Mgmt Staffing	7,722,411	0	5,148,257	12,870,668	48	48.00
110 - Human Resources Staffing Stabilization	3,608,496	0	2,405,719	6,014,215	33	24.75
111 - Local Leadership	3,183,973	0	2,122,678	5,306,651	29	21.75
112 - Ofc of Resiliency and Emergency Mgt 211	5,923,219	0	82,148	6,005,367	1	0.75
113 - Maintaining Critical Staffing	9,011,101	0	6,007,367	15,018,468	55	55.00
114 - Emergency Shelter and Feeding	35,000,000	0	0	35,000,000	0	0.00
115 - Refugee Program	8,132,806	0	88,539	8,221,345	1	0.75
116 - Grant Pgm for Community-Based Organizations	24,017,060	0	1,011,403	25,028,463	13	9.75
117 - Tribal Liaisons	755,591	0	503,737	1,259,328	6	4.50
135 - TANF Redesign	305,860	0	458,791	764,651		
143 - ONE Ongoing Maintenance	13,935,445	840,000	20,286,095	35,061,540	16	12.50
201 - Medicaid Waiver Placeholder	1,266,800	0	1,900,200	3,167,000		
202 - Basic Health Program	1,370,126	0	2,055,189	3,425,315		
203 - Mainframe Migration/Provider & Client Pmt Sys	375,242	0	562,859	938,101	6	4.14
301 - ERDC Expansion - DELC companion	925,431	0	1,058,867	1,984,298	4	3.00

POP 106 – Chief Data Office

"Accurate and reliable data can improve quality of life for the people we serve. Accurate and easily available data can direct services to where they are needed. Accurate data can offer solutions to problems. Data even have the ability to address inequities and disproportionalities, given the resources necessary to identify, gather and maintain them. Data inconsistency negatively and disproportionately impact people and communities of color, Tribal members and communities, people with disabilities and members of the LGBTQIA2S+ community. On the ground level, data give our case workers access to accurate information so they can spend more time in direct service to people. Currently one limited duration employee is the data expert for the Oregon Department of Human Services – a complex agency serving one in three Oregonians.

This policy package creates a data office of three FTE and budget for contract services. The data office will: 1. Set and lead vision and standards for data collection, use, management, governance, ethics, and justice. 2. Manage compliance with Open Data mandates (ORS 276A.350-276A.371). 3. Lead the development of tools and culture to enable ODHS to better use data to plan, make decisions and deliver service. 4. Implement data quality, management, and integration practices to create the future of human services, reduce disproportionality and inequity, respond better to emergencies and disasters, and adopt REALD/SOGIE (Race, Ethnicity, Language and Disability/Sexual Orientation, Gender Identity and Gender Expression) standards.

If this POP is not funded, adverse effects include: first and foremost, slow service delivery, missed opportunities to focus services where they are needed most and the perpetuation of health inequities. If not funded, it will also adversely affect compliance with Open Data mandates; diminish the ability to identify and correct disproportionalities and inequities; and miss opportunities to streamline technology implementations due to continued siloed organization of data and related decision making. Lack of comprehensive data affects our ability to equitably serves Oregonians. "

POP 107 – Program Integrity (OPI)

"It is vitally critical that the Oregon Department of Human Services ensures services and benefits are provided to Oregonians with the highest level of accuracy and quality. It is also important that there are not overpayments and that those not eligible do not receive benefits, ensuring that people who do qualify receive benefits and supports.

This Office of Program Integrity (OPI) is responsible for this work. The office creates

quality control reviews that are shared with federal partners to fulfill the federal mandate and to internal ODHS programs for improvements in service to those populations in Oregon that have the most need.

However, due to increased federal requirements, which has increased staff work time significantly, federal, and internal reporting is at risk of not meeting required deadlines and could cause reporting errors. Inadequate staffing could lead to not meeting federal requirements and higher error rates which could cause sanctions and penalties, including program defunding. This could seriously impact the people ODHS serves – those most in need. The primary objective of the policy package is to maintain the Office of Program Integrity's (OPI) federally mandated quality control reviews for federal partners – (Children's Bureau, Food and Nutrition Services, Centers for Medicare and Medicaid) as well as internal partners – (Child Welfare, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF), Employment-Related Day Care (ERDC), Home and Community-Based Service (HCBS), and Medical Programs including Long-Term Care for APD). This also includes reviews to measure the efficiencies of each program and provide the Oregon Department of Human Services (ODHS) programs with current statistical information. "

POP 108 – Strengthening Chief Financial Officer

"Organizations need strong financial, budget, positions management and forecasting offices to be able to run effectively. During the past several years, the size and complexity of ODHS' work has increased, to ODHS Operations and budget has grown significantly. The changes have only been exacerbated by the pandemic and the influx of one-time funding. For example, ODHS is unique in that it has a very complicated financial structure; with more than 100 unique budget areas and more than 800 unique Labor Cost Codes, and thousands of other invoice codes.

Further, impacts of new programs and/or positions through the POP process, additional new or changed programs proposed in POPS (if funded), and/or changes to federal policy and/or changes to reporting requirement for the numerous federal fund sources will have an additional impact on complexity and level of work expected from the ODHS CFO Office. ODHS is unique, mainly due to the scale of positions it manages. This includes managing over 11,000 budgeted positions and over $17 billion in Total Funds. Further, due to the complexity of funding, tracking, forecasting and position management requests have continually become more complex and details. New changes/programs will also not just have an OIS impact. CFO offices will also be impacted by these changes.

However, the ODHS Office of the Chief Financial Officer (CFO) resources have remained practically unchanged for years. This Policy Option Package proposes an investment in new positions to oversee ODHS position management, financial revenue planning, clear several non-budgeted positions, enhance support for the Integrated Client Services database to keep up with changes in source systems and advance the work related to REALD and better harness the power of Geographic Information System (GIS) data (housed in ODHS ORRAI). This request would also help ODHS forecasts to be more easily understood by Legislators, Legislative Fiscal Office, our partners, and the public. This request addresses three ODHS priorities: Strengthening Foundations, Responding to Emergencies, Creating the Future of Human Services. Improve upon Race/Ethnicity identity information. "

POP 109 - Ofc of Resiliency and Emergency Management Staffing

The Office of Resiliency and Emergency Management (OREM) provides disaster services to all Oregonians. OREM was created in response to the 2020 wildfires, but its charge involves preparing for and responding to all types of emergencies, including the Cascadia Subduction Zone Earthquake, refugee crises, extreme weather events, and drought. OREM helps people be safe, resilient, and eventually self-sustaining. In the last two years OREM has responded to help people affected by excessive heat events, an ice storm, lack of safe drinking water, and a chemical leak. OREM has sheltered more than 4,400 wildfire survivors in over 60 hotels from Portland to Ashland; delivered more than 2 million hot meals, three times a day, seven days a week to wildfire survivors, sourced and delivered 500-gallon tanks to 200 people whose wells ran dry due to the recent drought in Klamath County; the list goes on.

While Oregon Department of Human Services is identified in state statute as the primary agency for providing Mass Care during disasters, OREM has been operating without legislatively approved funding since the wildfires of September 2020. In order to fulfill our statutory responsibilities and help Oregonians successfully prepare for and recover from disasters, OREM is requesting additional funding. The funds will allow us to continue program operations while expanding our efforts to partner with communities, Tribes, and community-based organizations to improve local disaster preparedness across the state. The policy package requests funding the existing staff to maintain as well as grow this essential program.

POP 110 - Human Resources Staffing Stabilization

"Oregon Department of Human Services is committed to becoming an antiracist organization that actively dismantles discriminatory systems and prioritizes equity in our work. ODHS Office of Human Resources (HR) plays a critical role in helping the agency

realize these aims. From recruitment and onboarding to training and compensation, HR is building a diverse human services workforce that is highly qualified, well supported at work, and representative of Oregon's communities. Every day, HR works to advance these and other agency priorities through effective services to customers, clients, and partners across all of ODHS' programs.

Yet current staffing levels are not sufficient to fully support agency strategy. Our training and development staff-to-employee ratio, for example, is approximately 1:1,660, while 1:350 is considered the industry standard. Meanwhile, staffing shortages across our Rapid Talent Acquisition, Recruitment, and Classification and Compensation teams have resulted in service delivery delays and are causing important strategic and analytical work to be postponed.

The purpose of this request is to create permanent positions in HR's Operations/ Organizational & Professional Development (Central Training), Rapid Talent Acquisition, Recruitment, and Classification & Compensation Teams and to provide HR with a Project Manager. These positions will:
• Support the long-term growth and development of agency managers and management teams through a robust professional development program that aligns with the Department of Administrative Services (DAS) Management Competency model;
• Improve efficiency and effectiveness related to recruitment, hiring, and onboarding while developing meaningful workforce analytics to inform future work;
• Meet the agency' operational and program goals; and
• Advance the HR Strategic Plan through intentional and effective project management."

POP 111 - Local Leadership
"Because ODHS serves Oregon communities, those communities should have meaningful input into the designs and delivery of our services. But ODHS currently lacks the community engagement capacity we need to make this a reality, which has significant equity and efficiency implications for our work.

This policy package will provide the staffing and other resources necessary to enable greater direct engagement with the communities served by ODHS, which will provide multiple opportunities to further the ODHS Equity North Star vision; lead with intersectionality to address the roots of systemic oppression; and make services, supports and well-being accessible to all. In addition, this policy package will deliver policies and programs that are equitable and improve community conditions. "

POP 112 - Ofc of Resiliency and Emergency Mgt 211

Imagine your home was just destroyed by a wildfire. You would need to know where to call to get help, to connect to resources, where to go for shelter, food, water. The community-based call center, 2-1-1, is a vital resource for people experiencing a disaster or needing human services. The Office of Resiliency and Emergency Management (OREM) is legally obligated to provide disaster services to all Oregonians. One of the most critical points of contact for OREM as an arm of ODHS is the 2-1-1.

During and immediately after the September 2020 wildfires there was a significant increase in 2-1-1 capacity to provide information about resources to those directly and indirectly impacted by the disaster. This policy package would provide funding to continue and expand the services offered by 2-1-1 to support the continued safety and security of emergency services and information through communications, outreach, and quality assurance.

Disasters such as wildfires, floods, extreme heat and cold are only increasing. Children, families, the elderly, and people with disabilities need to be able to call one central phone number to get help. This call center is also a trusted resources of communities most impacted by inequities. 2-1-1 needs to have increased capacity to help, especially in emergencies.

POP 113 - Maintaining Critical Staffing

ODHS is leading an agency-wide shift toward more collaborative, community- and person-centered human services. Encompassing change across our programs and at every level of our nearly 10,000-employee agency, the shift requires strategic and dedicated leadership, improved communication and transparency with partners, and a diverse, well-trained human services workforce. At the same time, the COVID-19 pandemic and other crises have contributed to historic demand for human services. To meet these compounding needs, ODHS has added key positions to agency offices. Without these positions, ODHS cannot effectively and efficiently carry out its three strategic priorities.

To ensure that Oregonians will continue see needed and global improvements in our human services systems, ODHS is requesting position authority and funding for 56 non-budgeted positions. These positions will continue mission-critical work including leading our enterprise-wide Building Well-being Together initiative; leading programs for people with intellectual and developmental disabilities; providing timely and transparent communication to elected officials, the media, partners, and the public; as well as employee recruitment, professional development, retention, and management.

POP 114 - Emergency Shelter and Feeding

"No one in Oregon should go even one day without shelter, food and water. Since the 2020 wildfires, the ODHS Office of Resilience and Emergency Management (OREM) has sheltered more than 4,400 survivors in over 60 motels and delivered more than two million hot meals to survivors, three times a day, seven days a week. There remain over 200 wildfire survivors who have lost their homes and are currently being sheltered through OREM services.

The last two years have been the most disaster-filled times in Oregon's history with ice storms, floods, drought, a chemical leak, and expansive wildfires.

When a disaster hits Oregon, OREM must be there to provide shelter, food, and water. Funding this Policy Option Package (POP) would allow the ODHS Office of Resilience and Emergency Management (OREM) to provide emergency shelter and feeding to people in Oregon displaced by disaster, through the next biennium."

POP 115 - Refugee Program

Oregon has a long tradition of welcoming refugees. Since 1975, nearly 70,000 forcibly displaced people have arrived in the state from all over the world. After resettling here, refugees contribute greatly to Oregon's economic vitality, cultural life, and social fabric. Today, Oregon is as committed as ever to welcoming refugees and helping them safely and successfully rebuild their lives – a commitment that's increasingly critical as the world's refugee population continues to grow to record numbers. Oregon Department of Human Services' Office of Resilience and Emergency Management (OREM) provides a comprehensive array of services to people in Oregon who are impacted by disasters and emergencies, including the sheltering, and feeding of refugees.

While we are currently supporting refugees through our existing infrastructure, the recent raising of the federal refugee admissions cap, coupled with the war in Ukraine and other crises around the world, translate into growing numbers of refugees who need our help. In addition to anticipated fiscal shortfall, these trends pose considerable risk to our ability to provide current levels of service. The funding provided by this policy package will facilitate food, shelter, and aid for displaced refugees who come to Oregon.

POP 117 - Tribal Liaisons

To respect and uphold the sovereignty of U.S. Tribal Nations, required consultation and engagement should occur in a consistent, coordinated, and equitable way. Effective

consultation and engagement will provide Tribal children, families and elders the access they need to service and supports from the Oregon Department of Human Services (ODHS). Lacking a formal structure, current engagement and collaborative efforts are often confusing and ineffective. Currently ODHS does not have a formal structure, uniform process or supports to do this work.

ODHS is requesting this policy option package to (1) adequately resource the ODHS Tribal Consultation Policy implementation structure and (2) add Self-Sufficiency Programs Tribal Liaisons positions. This request aligns with ODHS' strategic goals of strengthening foundations and creating the future of human services. Without the requested resources, members of Oregon's Nine Federally Recognized Tribes as well as Tribal members from out-of-state Tribal Nations will continue to be underrepresented in ODHS supports and services and disproportionally represented in its Child Welfare systems, where they face higher rates of family separation than the non-Tribal population.

This proposal adequately resources ODHS Tribal Consultation Policy efforts, supports all ODHS programs and brings ODHS into compliance with State and Federal requirements. Without the resources requested in this package, ODHS Self-Sufficiency Programs (SSP) will continue to lack the necessary staffing to carry out consistent engagement with Oregon Tribes at the local level. Tribal Leaders requested SSP hire or designate Tribal Liaisons who they can connect with regularly to ensure coordination happens in a way that supports Tribal families in accessing needed benefits and services. This proposal creates infrastructure for Tribal Engagement by funding eight Tribal Liaison positions and a manager.

POP 135 - TANF Redesign

Every child is filled with tremendous promise – and we have a shared obligation to foster that promise. That means supporting families in ways that maximize their capacity for strong, caring relationships, and reducing the financial stressors that can contribute to child neglect, involvement with child welfare systems, and other forms of childhood adversity.

This policy option package, developed with the TANF Redesign Partnership and the Poverty Relief Task Force, is an important step in that direction, helping families access more of the resources and financial flexibility they need to achieve well-being and economic stability. By increasing the monthly Temporary Assistance to Needy Families (TANF) cash grant to 50 percent of the Federal Poverty Limit, ending TANF time limits, and expanding program eligibility, the package represents a data-informed strategy for preventing child neglect and improving long-term outcomes for children. At a time when

Oregon families are facing rapidly rising costs of living and ongoing housing challenges, this upstream solution is needed more than ever.

POP 143 - ONE Ongoing Maintenance

Oregon implemented the ONE system to help process eligibility applications for food, housing, cash, childcare, and medical benefits for nearly 1.5 million Oregonians, the largest caseload in Oregon's history. With ONE we have created an opportunity for Oregonians to apply online, over the phone, through the mail or in person at any of our offices. Oregon has continued to invest in the ONE system since the initial release. But, like any system, there needs to be continued maintenance and then investment to meet the ever-changing needs of Oregonians and programs.

The ONE system needs to continue to evolve our operating system to support a more integrated effort. ONE is a new system that individuals and community are still learning about. Engagement with community is critical to our success as we move from a siloed to an equality approach and then shift to an equity framework and person-centered, outcome-based system. Dedicated staffing is critical to connect with community and partners. Improved and sustainable ONE system operational support helps ensure constituents will see accurate and timely eligibility determinations, which will result in better access to basic food, health, cash, and childcare benefits in some of the most critical individual and family situations.

This proposal would provide one-time funding for paying off the final deliverables from the contract related to the Integrated Eligibility Project, closing out the largest IT project's obligations from the history of Oregon. Funding would also support ongoing maintenance and operations services, staffing and service dollars for needed system modifications to more quickly meet consumers' needs, support training, system changes and building better equitable practices based on feedback we have had from partners across Oregon. This POP also pays for the additional licenses and support for the Centralized Abuse Management system that is supported by OEP.

POP 201- Medicaid Waiver Placeholder

We all want a state in which everyone has access to good health and well-being. This policy option package will allow the state to meaningfully improve health outcomes in communities who face historic and contemporary injustices, in alignment with Oregon Health Authority's goal of eliminating health inequities by 2030. ODHS is responsible for determining eligibility for state medical services, for the operation and maintenance of the ONE eligibility system, and for the delivery of long-term services and supports related to

Medicaid.

This policy package would fund ODHS for related costs if OHA-HPA-05 is approved, which will enable the Oregon Health Authority (OHA) to execute and implement the policy and program changes outlined in 1115 Medicaid demonstration waiver and approved by the Centers for Medicare and Medicaid Services (CMS). These demonstrations occur within a specific time horizon and can be extended if necessary. This package would allow ODHS to fulfill the implementation obligation necessary to review eligibility as required by the waiver. OHA is currently negotiating the next five-year 1115 waiver with the Centers for Medicare and Medicaid Services (CMS) and expects that negotiations will likely not conclude until September 30, 2022. Therefore, precise outcomes of the negotiation are uncertain and placeholder language regarding this waiver POP is needed for now.

POP 202 - Basic Health Program

Oregon recognizes that health care is fundamental to people's and families' well-being. This shared value was a key driver behind the Oregon Health Plan (OHP), which prior to the pandemic covered approximately 1 million people. During the pandemic, federal rule changes allowed hundreds of thousands of additional Oregonians to access health care coverage through OHP, and today the plan covers one in three Oregonians. Without state action, many of these newly covered Oregonians will lose their health coverage when the federal public health emergency (PHE) expires, erasing the important gains in coverage Oregon achieved during the PHE.

In 2022, the Oregon Legislature passed House Bill 4035 to fund the federally mandated redeterminations process and preserve short-term coverage for people who earn too much income for Medicaid, but not enough to afford other coverage. The bill also authorized the development of a sustainable, long-term solution in the form of a Basic Health Program (BHP). This policy package would direct necessary funding to Oregon Department of Human Services to finish the work of implementing the BHP and allow us to move forward with an effective redetermination process. Together, these actions will help ensure that eligible Oregonians have uninterrupted access to critical medical benefits for themselves and their families.

POP 203 - Mainframe Migration/Provider & Client Payment System

Everyone in Oregon deserves uninterrupted access to needed supports and to the income they earn at work. More than one million Oregonians count on the state's current mainframe platform to receive their benefit and provider payments. The COBOL programming code on the mainframe system dates to the 1970s and is increasingly

unsupported. Mainframe-proficient staff are shrinking in number and hard to replace, resulting in a variety of service and payment bottlenecks. If these problems are not resolved, there is increasing risk that the agency will be unable to make timely payments to Oregonians, potentially for an extended period.

Oregon Department of Human Services and the Oregon Health Authority are therefore jointly requesting the resources necessary to upgrade our mainframe platform and ensure continuity of payments and benefits for the people we serve. It is critical that we migrate all current mainframe functions to more modern, ideally cloud-based solutions. Doing so will help avoid the risk of service breakdowns caused by old software, bring ODHS and OHA technology into alignment with peer agencies, improve flow across interfacing information systems, and allow Oregon to achieve full benefit from its investments in the ONE eligibility system.

This investment proposes a strategy to plan for and implement a new payment system, move all remaining benefits currently determined on the mainframe to the ONE system, and develop a plan to decommission or archive remaining mainframe programs and data.

POP 301 - ERDC Expansion - DELC Companion

All children deserve supportive and nurturing places to learn and play while their parents are at work. Research indicates that quality childcare has a significant and positive impact on children's brain development, setting the stage for success later in life. But disparities persist when it comes to accessing quality childcare, with low-income families and families of color bearing most of the burden. We have a shared obligation to make sure that every child has the supports they need to reach their potential, and that means directly addressing this kind of disparity and promoting equitable access to childcare for all families.

Employment Related Day Care (ERDC) is a federal program, partially funded by the Child Care Development Block Grant (CCDG), that helps mitigate these disparities by providing low-income working families with childcare subsidies. In Oregon, ERDC represents the largest childcare subsidy program and was enhanced through House Bill 3073 (2021) which expanded program eligibility to include families with student parents and children who are documented. The ERDC program has also capped co-pays at no more than 7 percent of a family's income, as well as waived the co-pays of families at 100 percent of the federal poverty level to $0.

To continue our progress toward addressing longstanding inequities, the Early Learning Division (ELD) is introducing legislation in the 2023 Legislative Session to ensure that

children at risk of involvement or involved in Oregon's foster care and child welfare systems, children from families experiencing domestic violence, and houseless families have access to quality, affordable care. This expanded eligibility will allow more families to access critical childcare supports, promoting both healthy development for children and uninterrupted employment for parents.

Below is an overview of the offices within the Central Budget.

Office of the Director

The ODHS Director's Office is responsible for agency leadership, policy development, resource allocation, and administrative oversight for all programs, staff, and offices in ODHS in a manner that supports equitable outcomes for Oregon's diverse population. These functions are led by the Director and Deputy Director and coordinated by the Director Cabinet members, with the Governor's Office, the Oregon Legislature, state and federal agencies, Tribes, community partners, communities of color, LGBTQIA2S+ communities, local governments, advocacy and client groups, and the private sector. The Director and Deputy Director oversee Internal Audits and the Office of Training, Investigations and Safety, which provide shared services for both ODHS and OHA.

Chief of Staff

The Chief of Staff to the agency enables the Director to work most effectively with internal and external partners to fulfill commitments that achieve the agency's mission, goals, and outcomes. This is a strategic and facilitative role that requires a combination of focus and flexibility, as well as a willingness to play an active, behind-the-scenes role as the Director's trusted advisor.

Governor's Advocacy Office

The Governor's Advocacy Office (GAO) is the office of Human Services Ombuds. Ombuds (also "ombudsman" or "ombudsperson") are neutral or impartial conflict resolution practitioners who may provide confidential and informal assistance to ODHS clients and others affected by the Department's action or inaction. The GAO is a part of the ODHS Director's office and resolve issues and track trends on behalf of the ODHS Director. The office includes:

- ODHS Ombuds - the GAO has Ombuds dedicated to serving client and others with questions, concerns, and complaints about all ODHS programs and services.
- Foster Care Ombuds - the Foster Children's Bill of Rights requires that ODHS foster youth are enabled to make complaints and assert grievances

regarding their care, safety, or well-being.
- Client Civil Rights investigations - ODHS non-discrimination rules and policies require investigation of reports of discrimination.
- Oversight of the ODHS formal complaint process - by rule, the Department maintains a process for handling formal complaints. While complaints may be resolved locally, the GAO partners with supervisors to oversee this process.

Tribal Affairs

The Tribal Affairs Unit within the ODHS Director's Office is a team committed to all Oregon Tribal communities thriving mentally, physically, spiritually, and emotionally. Tribal Affairs works with all five ODHS programs to create and provide Tribally appropriate programming, services, policies, and support. Through Tribal consultation with Oregon's Nine Federally Recognized Tribes, ODHS ensures programming, services and policies meet the needs of Oregon Tribal communities.

Office of Immigrant and Refugee Advancement

The Oregon Legislature through SB 778 established the Office of Immigrant and Refugee Advancement (OIRA). Transferred to ODHS from the Governor's Office in 2022, OIRA is dedicated to identifying the gaps within existing structures and strives to promote the successful social, linguistic, educational, economic, and civic integration of Oregon's immigrant and refugee communities.

The office accomplishes its work through partnering with state agencies, community-based organizations, refugee resettlement agencies (RRAs) and immigrant and refugee advocacy groups to help coordinate strategies, create policy, develop programs, review legislation, develop tracking systems to monitor potential investments and efforts in the state, advocate that resources are being allocated equitably and effectively, and ultimately implement plans that aid in the advancement of immigrants and refugees across the state. The office conducts outreach and education and serves as a resource on state initiatives and programs to ensure equitable access for immigrants and refugees

Office of the Chief Financial Officer

The Office of the Chief Financial Officer provides optimal business services to ensure accountability, data-driven decisions, and stewardship of resources in support of the ODHS mission. This is done by:

- Working closely with ODHS and OHA programs and the OHA Chief Financial Officer to ensure culturally competent and equitable services and accurate, timely, and efficient recording and management of financial resources.

- Authorizing the redistribution of available resources to meet changing needs; and
- Establishing administrative controls.

This office also oversees budget, planning, and analysis functions for ODHS-based programs as well as coordination and leadership of the ODHS budget with the Governor's Office, Legislature, Department of Administrative Services, Legislative Fiscal Office, and ODHS partners.

Office of Human Resources

Human Resources (HR) enables the organization to equitably recruit, support and engage a diverse workforce in a collaborative partnership to foster an environment where employees maximize their potential to achieve the agency's mission. The office serves as a strategic partner to ODHS programs, providing proactive, comprehensive human resources services in alignment with agency and program mission and goals.

HR works closely with internal customers on workforce strategies that support agency and program strategies as well as a healthy workplace culture of ongoing development and feedback. Through these efforts, HR helps ensure that ODHS has the right people with the right skills, training, and support to do their work, now and in the future.

Budget, Planning and Analysis

This office functions as the central budget for ODHS based programs working under the guidance of the CFO. Main duties include: (1) development and preparation of the department's biennial budget documents and leadership of the ODHS budget with the Governor's Office, Legislature, Department of Administrative Services (DAS), Legislative Fiscal Office (LFO) and DHS partners; (2) initiating, coordinating and developing the department's budget rebalance plans and Legislative Emergency Board items; (3) providing fiscal analysis of proposed legislation and responses to inquiries regarding fiscal impacts of policy changes; and (4) providing management accurate budget and projections to assist in the management of the overall ODHS budget of over $17.1 billion total funds and over 10,450 budgeted positions.

Public Affairs Office

This office supports the ODHS mission by connecting Oregonians with the information they need to access, receive, or understand department services, and to collaborate with the department to advance human services in the state. Within the office, the **Communications** team helps engage the public in the work of ODHS, which leads to more effective and inclusive policy making. This includes implementing communication plans, coordinating social media and website content, writing direct notices to clients, and talking with the media and legislature. The communications team engages with diverse audiences, including employees, clients, legislators, advocacy and interest groups, providers and partners, local governments, state and federal agencies, policymakers, Oregon's Nine Federally Recognized Tribes, the news media, targeted audiences, and the wider public. The unit strives to use culturally relevant and linguistically competent communication practices to effectively reach Oregonians. Effective communication is the primary vehicle to demonstrate public transparency, accountability, and trust. The office also provides support to the department's priority projects as defined by the ODHS Director and executive team.

The Office of Public Affairs also includes the **Government Relations** unit. This unit advances the ODHS mission by ensuring that statutory, policy, and budget implications positively impact the Oregonians that we serve. The Government Relations team coordinates all ODHS legislative matters and works closely with the Governor's Office and key community, state, and federal partners. The team also supports field and central office staff by providing consultation and support related to legislative and policy changes. Staff in this unit support the director of ODHS, the directors of all agency programs, and operations in the field. Legislative work is conducted with the intent of eliminating existing inequities and promoting equitable outcomes, using a comprehensive equity lens.

The ODHS **Public Records** unit reviews, completes, and responds to public records requests from clients, the media, public entities, and individuals. With a focus on equitable service delivery, the unit focuses on consistency, transparency, and adherence to public records law across all programs within the agency. The centralized team affords the ODHS workforce and partner with streamlined responses for records requests and serves as a single point of contact for records-related questions.

The **Legal** unit, also housed in Public Affairs, manages all lawsuits, tort claims, and subpoenas related to ODHS program and operations. Staff in this unit provide expert consultation to ODHS field and central office staff and Department of Justice and Department of Administrative Services Risk Management in policy related to legal matters. The team ensures timely completion of the required judicial documents to move smoothly

through a complex legal matter.

Office of Equity and Multicultural Services

The Office of Equity and Multicultural Services (OEMS) provides leadership and direction in the integration of equity, diversity, and inclusion policies and initiatives throughout the agency. As an office that assists all ODHS program areas, OEMS has two main charges: The first is to guide the agency to ensure a diverse workforce with the cultural agility and language skills to serve the needs of all Oregonians, and the second is to help the agency work toward equitable outcomes for all populations using ODHS services. OEMS accomplishes this mission though policy making, strategic planning, quality improvement consulting, technical assistance, research, Employee Resource Groups (ERGs), Diversity Committees, community engagement, advocacy, ally-ship, partnerships, and continuous learning.

Office of Program Integrity

The Office of Program Integrity's mission is to support the Oregon Department of Human Services (ODHS) and Oregon Health Authority (OHA) by monitoring and measuring federal compliance, making recommendations, taking appropriate action, providing support, facilitating activities, training/coaching field staff, and reporting trends and statistics to ODHS and OHA leadership, stakeholders, and federal agencies.

Office of Reporting, Research, Analytics, and Implementation

The Office of Reporting, Research, Analytics, and Implementation (ORRAI) compiles reports, conducts research, analyzes data, implements research, and provides both enterprise-wide and inter-agency, program-level data. ORRAI provides mission-critical information to directors, legislators, partner agencies, and the public. The office utilizes predictive analytics, workload modeling, and ODHS and inter-agency program data to improve outcomes for children and families. The office translates data into information and develops practitioner tools to ensure decisions are data informed.

Office of Business Information Services

The Office of Business Information Services (OBIS) has primary responsibility for the Oregon Eligibility (ONE) system as well as the phone system for the ONE Customer Service Center that supports statewide eligibility operations. More than 1.5 million people in Oregon receive medical, food, cash, and childcare benefits through the ONE system, which represents the largest information technology system in the state of Oregon. The OBIS team evaluates and identifies opportunities to improve the ONE system and other enterprise IT systems such as the Centralized Abuse Management system. It is responsible

for ONE user testing and the ONE Helpdesk that supports more than 4,000 eligibility workers across the state. It includes a team that takes calls from people in Oregon who need technical assistance with the online portal for applying for or managing benefits in the ONE system.

Integrated Eligibility and Medicaid Eligibility Program Office

Integrated Eligibility and Medicaid Eligibility (IE/ME) Program Office was established to carry out the requirements of the Integrated Eligibility and MedicaidEligibility IT Project, which was fully implemented in February 2020. It is now responsible for oversight of the Oregon Eligibility (ONE) system, which allows Oregonians to apply for medical, cash, food, and childcare benefits in one place and enables a streamlined eligibility determination process across a range of benefit types. More than 1.5 million people in Oregon receive benefits through the ONE system.

Office of Resilience and Emergency Management (OREM)

The Office of Resilience and Emergency Management (OREM) focuses on the needs of people before, during and after disasters, reducing disaster impacts in times of crisis and investing in communities year-round to ensure greater resilience. OREM carries out ODHS' roles in Oregon's Comprehensive Emergency Management Plan as the primary agency for mass care, food and water in disaster situations and social services during recovery. The office centers equity in its work, ensuring that the goals and needs of vulnerable communities directly inform resilience plans and that our response systems effectively address disproportionate disaster impacts. OREM also assists other ODHS programs in preventing, mitigating, responding to, and recovering from natural, technical, and human-caused hazards.

OREM recognizes that being ready and quickly responsive hastens recovery. To achieve this, the office adheres to National Incident Management System standards and carries out a statewide strategy that aligns with the 2022-2026 Federal Emergency Management Agency (FEMA) Strategic Plan. Its staff are dispersed around the state to better identify local needs and enhance community-level relationships. To prepare for catastrophic events, OREM is:

- Establishing a mass care network consisting of public and private partners.
- Conducting exercises and drills around the state alongside local, state, federal and Tribal partners.
- Identifying needs and gaps in Oregon's mass care systems.
- Investing in county-level mass care capabilities.
- Helping to build local capacity for emergency preparedness
- Collaborating with a range of partners to advance resilience through education.

Oregon Department of Human Services
Shared Services and Statewide and Enterprise-wide Costs

Overview

Customer-driven shared services. When the agency split, ODHS and OHA agreed to maintain many infrastructure functions as shared services to prevent cost increases, maintain centers of excellence, and preserve standards that help the agencies work together.

ODHS Shared Services supports both ODHS and OHA by providing critical business services that are data-informed, accountable, and transparent. ODHS and Oregon Health Authority (OHA) govern their shared services through a board composed of operational leaders from the two agencies who ensure that shared services are prioritized and managed to support program needs. The board and its subgroups have established service level agreements and performance measures for each service, implemented recent budget cuts, moved staff in and out of shared services to rationalize service delivery, and begun implementing more integrated systems to support the performance of all our employees.

Shared Services are completely Other Funded and provide services to both ODHS and OHA. Funding for Shared Services is included in the Shared Services Funding portion of the Statewide and Enterprise-wide Costs (SAEC) budget in each agency.

ODHS Shared Services

The Agency Request Budget (ARB) for shared services is $178.0 million Other Funds with 764 positions and 750.25 FTE. The ARB for SAEC is $412.49 million General Fund and $764.83 million Total Fund.

SHARED SERVICES	GF	OF	FF	TF	POS	FTE
LAB 21-23	$ -	$ 178,008,753	$ -	$ 178,008,753	730	719.25
ARB 23-25	$ -	$ 196,016,595	$ -	$ 196,016,595	764	750.25
Diff.	$ -	$ 18,007,842	$ -	$ 18,007,842	34	31.00
% Diff.	0%	10%	0%	10%	5%	4%

SAEC	GF	OF	FF	TF	POS	FTE
LAB 21-23	363,005,121	52,778,382	241,278,088	657,061,591		
ARB 23-25	412,486,051	54,888,680	297,454,026	764,828,757		
Diff.	49,480,930	2,110,298	56,175,938	107,767,166		
% Diff.	14%	4%	23%	16%	0%	0%

Major changes between LAB and CSL include:

- Phase in of investments made in 2019-21
- Standard Inflation.

Strategic Funding Investments and Adjustments

Proposed investments in Shared services include:

Shared Services	GF	OF	FF	TF	POS	FTE
ARB Build - POPS	**-**	**6,905,709**	**-**	**6,905,709**	**39**	**29.50**
POP 108 - Strengthening Chief Financial Office	-	538,569		**538,569**	3	2.25
POP 111 - Local Leadership	-	3,963,960	-	**3,963,960**	24	18.00
POP 134 - Total Worker Health (OHSE)	-	1,655,715	-	**1,655,715**	8	6.25
POP 203 - Mainframe Migration/Provider & Client Pmt Sys	-	747,465	-	**747,465**	4	3.00

SAEC	GF	OF	FF	TF	POS	FTE
ARB Build - POPS	**12,735,660**	**645,827**	**7,292,592**	**20,674,079**	**-**	**-**
POP 108 - Strengthening Chief Financial Office	336,993	-	224,668	**561,661**	-	-
POP 111 - Local Leadership	2,475,089	126,760	1,559,416	**4,161,265**	-	-
POP 134 - Total Worker Health (OHSE)	1,045,327	57,563	626,807	**1,729,697**	-	-
POP 203 - Mainframe Migration/Provider & Client Pmt Sys	8,878,251	461,504	4,881,701	**14,221,456**	-	-

In some cases, the shared service investment is only part of the larger POP with the remainder in other program areas.

108 – Strengthening Chief Financial Officer

Organizations need strong financial, budget, position management. And an independent and transparent caseload forecast for ODHS and OHA. Resources need to dedicate to these purposes to ensure high quality, timely, accurate, Services both internally and externally.

During the past several years, the size and complexity of ODHS and OHA's work has increased. It has had impact on the workload per person in ODHS Central Offices as well as Shared offices.

Operations some of which include Finance, Budget, Imaging and records Management, Contracts. and other central and shared budget has grown significantly. The changes have only been exacerbated by the pandemic and the influx of one-time funding. For example, ODHS is unique in that it has a very complicated financial structure; with more than 100 unique budget areas and more than 800 unique Labor Cost Codes, and thousands of other

invoice codes.

Further, impacts of new programs and/or positions through the POP process, additional new or changed programs proposed in POPS (if funded), and/or changes to federal policy and/or changes to reporting requirement for the numerous federal fund sources will have an additional impact on complexity and level of work expected from the ODHS CFO Office. ODHS is unique, mainly due to the scale of positions it manages. ODHS manages over 10,000 positions, OHA over 5,000 budgeted positions. OFS Payroll ensures proper payment and funding of it for all 16,000 positions. Finance tracks and reports federal funding sources for both agencies with essentially the same number of staff prior to the split, processing almost $50 billion total funds in combined ODHS and OHA transactions.

The ODHS Office of the Chief Financial Officer (CFO) resources have remained practically unchanged for years. This Policy Option Package proposes an investment in new positions to oversee ODHS position management, financial revenue planning, clear several non-budgeted positions, enhance support for the Integrated Client Services database to keep up with changes in source systems and advance the work related to REALD and better harness the power of Geographic Information System (GIS) data (housed in ODHS ORRAI). This request would also help ODHS forecasts to be more easily understood by Legislators, Legislative Fiscal Office, our partners, and the public. This request addresses three ODHS priorities: Strengthening Foundations, Responding to Emergencies, Creating the Future of Human Services. Improve upon Race/Ethnicity identity information.

203 - Mainframe Migration/Provider & Client Payment System

Everyone in Oregon deserves uninterrupted access to needed supports and to the income they earn at work. More than one million Oregonians count on the state's current mainframe platform to receive their benefit and provider payments. The COBOL programming code on the mainframe system dates to the 1970s and is increasingly unsupported. Mainframe-proficient staff are shrinking in number and hard to replace, resulting in a variety of service and payment bottlenecks. If these problems are not resolved, there is increasing risk that the agency will be unable to make timely payments to Oregonians, potentially for an extended period. Oregon Department of Human Services and the Oregon Health Authority are therefore jointly requesting the resources necessary to upgrade our mainframe platform and ensure continuity of payments and benefits for the people we serve. It is critical that we migrate all current mainframe functions to more modern, ideally cloud-based solutions. Doing so will help avoid the risk of service

breakdowns caused by old software, bring ODHS and OHA technology into alignment with peer agencies, improve flow across interfacing information systems, and allow Oregon to achieve full benefit from its investments in the ONE eligibility system. This investment proposes a strategy to plan for and implement a new payment system, move all remaining benefits currently determined on the mainframe to the ONE system, and develop a plan to decommission or archive remaining mainframe programs and data.

111 – Local Leadership
Because ODHS serves Oregon communities, those communities should have meaningful input into the designs and delivery of our services. But ODHS currently lacks the community engagement capacity we need to make this a reality, which has significant equity and efficiency implications for our work.

This policy package will provide the staffing and other resources necessary to enable greater direct engagement with the communities served by ODHS, which will provide multiple opportunities to further the ODHS Equity North Star vision; lead with intersectionality to address the roots of systemic oppression; and make services, supports and well-being accessible to all. In addition, this policy package will deliver policies and programs that are equitable and improve community conditions.

134 - Total Worker Health (OHSE)
Every Oregon Department of Human Services and Oregon Health Authority employee has a right to work in a place free from recognized hazards as outlined in OSHA's General Duty Clause (OHSA 29 USC 651).

The overall mission of this department is to provide life safety and life sustaining services for employees and ensure they work in a healthy and safe work environment. Keeping our workforce safe, healthy, and ensuring well-being encourages less turnover, enhances work product, and can reduce the impact and cost of injuries and illness.

Staffing of safety, health, and wellness professionals with knowledge on total worker health concepts is vital in providing safety and well-being to employees and all Oregonians by assisting with design/development and implementation of occupation health, safety, and employee well-being activities.

While safety is a core value of both agencies, employees continually cite health and safety as challenges in meeting their job duties. Internal data metrics show that the agencies have experienced an increase in threats, workers compensation claims, and job burnout. This

Policy Option Package would apply a Total Worker Heath model which will further our compliance with OSHA regulations and further our compliance with the Governor's Executive Order on Wellness.

Overview of Shared Services

ODHS Shared Services contains the following key offices and programs:

Shared Services Administration provides leadership and direction for shared services and business continuity planning efforts for both ODHS and OHA.

The Budget Center provides budget planning, financial analysis, position management consultation, facilities and motor pool coordination, and technical budget support for ODHS and OHA. These services are provided for department leadership, programs, policy and field managers, staff, and external policymakers.

The Office of Forecasting, Research and Analysis provides accurate, timely, unbiased caseload forecasts and related research and analysis to support budgeting, policy development, identification and elimination of inequitable outcomes, and operational planning. OFRA maintains the Integrated Client Services data warehouse, which provides caseload forecasters and other researchers with data from multiple systems within ODHS and OHA, uniting individual person records from separate siloed enrollment systems into a cohesive whole, showing the interconnected patterns of human services as they are experienced by Oregonians in need.

The Office of Enterprise Data Analytics (OEDA) which conducts inter-agency research and advanced statistical modeling to answer cross agency and/or cross programmatic operational questions. The research analysts, economists, and information technology positions work among agencies to translate data into information; that information promotes data-informed decisions and improves outcomes for children and families. OEDA uses advanced analytics with human service organizations, health organizations, public health organizations, corrections, the courts, employment, housing, and education.

The Office of Financial Services provides leadership, fiscal policy direction, financial systems management, and coordination of core financial accounting, payroll, and financial reporting services for ODHS and OHA. Services include but are not limited to:

- Receipting, recording, and applying millions of dollars in state and federal revenue.
- Accounting for and disbursing resources to clients, providers, vendors, and contractors.
- Managing client trust accounts.
- Administering employee payroll and benefits to approximately 14,500 employees.
- Managing cash flow, completing federal draws, and reconciling Treasury accounts.
- Ensuring accounting transactions are accurately recorded, reconciled, and reported to state and federal partners.
- Compiling, reporting, and managing federal grant awards.
- Developing financial statements, completing tax reporting.
- Overseeing e-commerce programs including ACH and credit card payments and the SPOTS Visa program.
- Managing the federal Public Assistance Cost Allocation plan and process.
- Developing and managing financial systems including all sub-system interfaces; and ensuring a proper control environment is maintained.

The Office of Health, Safety & Employee Well-being (OHSW) provides services including employee occupational health and safety, workers' compensation tracking and program analysis, property loss tracking, threat management assessments and tracking, trauma-informed services, a suicide prevention program, administration of the Employee Assistance Program (EAP), and risk management. Work within these program areas includes the development and delivery of training, regulatory compliance monitoring, strategic planning, and legislative tracking. OHSW also maintains responsibility for statewide emergency management and recovery operations under the Oregon Emergency Operations Plan and the Oregon Recovery Plan and represents ODHS on the Oregon Emergency Response Council.

Background Check Unit

The Background Check Unit (BCU) provides a comprehensive background screening process to determine if an individual should be allowed to have access to vulnerable people, IT systems or client information. BCU also provides centralized support for FBI Criminal Justice Information Services (CJIS) clearance and training for ODHS and OHA staff. BCU is also Oregon's point of contact for processing out-of-state child protective service check requests in support of federal legislation.

BCU provides background check services and support to all ODHS and OHA divisions for employment purposes; for those who provide services or seek to provide services as a contractor, subcontractor, vendor, or volunteer; and for those who are employed by qualified entities that provide care and are licensed, certified, registered, or otherwise regulated by ODHS or OHA.

The Office of Facilities Management manages 2.7 million square feet of leased property for OHA and ODHS statewide. This includes support and management of over 160 offices on behalf of ODHS and OHA. This office is responsible for managing maintenance, remodeling, furniture acquisition and reconfiguration, staff relocations, coordination with DAS and state brokers on lease negotiations, and analysis of the costs and benefits of space utilization, ADA compliance, Trauma Informed spaces, and energy conservation.

The Office of Imaging and Records Management provides services tailored to business and program operational needs related to:

- Agencies' delegated authority regarding imaging and electronic and physical document and records management.
- Data entry and transmission of data to mainframe applications that generate payment to medical and childcare providers.
- Imaging and data capture of source documents into a central repository.
- Imaging and data capture of documents into electronic workflow, eliminating the need for the customer(s) to process physical documents.
- Archive storage of physical records.
- Tracking and shipping of archived records; and
- Destruction of physical documents/records per agreement and the Secretary of State's Office retention schedule.

The office converts more than three million pieces of paper – applications, bills, claims, checks, and more – each month, making information more readily available and saving money on storage costs.

The Office of Contracts and Procurement provides contract and procurement services for ODHS and OHA by procuring supplies and services in the most cost-effective manner through innovative and responsible solutions. The unit provides guidance, training, and support to meet contracting and procurement needs and assists agencies with supplier diversity programs that seek to include women- and minority-owned and emerging small businesses.

The Office of Investigations, Training and Safety ensures safety and protection to the more than 77,500 people per biennium who receive mental health, developmental disability, or children's therapeutic services in Oregon. The office consists of four primary functional units: Investigations, Children's Care Licensing, Contested Case – Administrative Law Judge Hearings, and Training and Transformation (TnT - which includes: Quality Management and Prevention, Policy and Legal, Data, and Investigator training). Together, these functional units provide services to several programs of ODHS and OHA that serve some of Oregon's most vulnerable citizens.

The Internal Audit and Consulting provides independent and objective information and consulting services for ODHS and OHA. The internal audit team reviews all areas of ODHS/OHA, including central operations and programs, field offices, and institutions. The unit provides other services such as consultation on internal controls and process improvement efforts, facilitation of risk assessment activities, coordination of external audits and tracking and follow-up on both internal and external audit findings.

The Office of Payment, Accuracy and Recovery identifies, establishes the extent of, and recovers monies owed to ODHS or OHA by clients, providers, and third-party payers for services provided by our state and federally funded health and human services programs. The office carries out these responsibilities in a customer sensitive manner and returns owed monies timely to agency programs. Its staff work in collaboration with agency programs to continuously improve the accuracy of provider and client payments and program integrity and to serve as a deterrent presence through working relationships with law enforcement and client and provider organizations, and by publicly communicating the outcomes of OPAR's fraud investigation and collection-related unit activities.

Publications and Creative Services manages the writing, design, development, printing, and distribution of ODHS and OHA publications for internal and external audiences, including those in accessible formats and multiple languages. This unit plays a central role in document translation services for both agencies. PCS provides consulting to plan professional quality print and digital publications that reflect ODHS and OHA style guidelines; edits and proofs materials created by staff experts and partners in their individual fields; and provides graphic design, layout, illustration, and form creation services.

Oregon Department of Human Services
Shared Services and Statewide and Enterprise-wide Costs

Overview of Statewide and Enterprise-wide Costs (SAEC)

ODHS has statewide assessments that include DAS charges such as the State Government Service Charge, Risk Assessment, and enterprise technology services Charges. Rent for all of ODHS is in the Facilities budget. This budget includes the computer replacement budget. The Shared Services funding is the revenue for the ODHS portion of ODHS and OHA shared services. When the agency split, ODHS and OHA agreed to share information technology, financial, investigations, and other services to avoid cost increases and permit a greater focus on improving performance and efficiency.

Debt services is to pay off Certificates of Participation or Q-Bond loans taken for major ODHS projects. Each service, both shared and assessed, are important for ODHS to attain its programmatic outcomes. It is critical to continue to look for efficiencies in our systems, processes, and staffing.

This budget also includes the costs of telecommunications, unemployment insurance, mass transit, administrative hearings, and limitation for a line of credit from the Treasury Department used for cash flow purposes at the end of the biennium.

Oregon Department of Human Services
Child Welfare Programs

Overview

The Child Welfare Vision for Transformation is based on a belief that children do best growing up in a family and on values related to honoring and supporting cultural wisdom, building community resilience and voice, and ensuring the self-determination of our communities of color and those who have historically experienced the worst outcomes.

The Child Welfare Division serves children and families who are facing challenges that can affect child safety and responds when children are subject to abuse and neglect. Skilled and diverse Child Welfare staff respond to reports of child abuse and neglect, helping to assess whether supports or services can be provided to the family to prevent the need for out-of-home care and coordinating foster care placement in cases where a child cannot be maintained safely at home. The primary goal is to keep children safe while providing equitable services to support timely and safe return to their families in cases where an out of home placement is necessary.

The Child Welfare Division's work encompasses the following areas:

1. Child Abuse Hotline
2. Child Safety Program
3. Child Fatality Review and Prevention Program
4. Family Preservation
5. Child and Family Well-Being Programs
6. Permanency Program
7. Program Design & Delivery
8. Federal Policy, Planning & Resources, and Child Welfare Policy

Other Central Office Programs and Focus Areas

Child Welfare is working to improve equity and inclusion in all aspects of our program and to provide inclusive, equitable and culturally responsive and appropriate services to children, young adults, and families. Additionally, Child Welfare is working with communities, Tribal Nations, and other child welfare partners to:

- Centering equity in all aspects of the work
- Creating more transparent and meaningful partnerships
- Sharing quality data and outcomes
- Including the voices of the community and those with lived Child Welfare experience in planning and in decision-making
- Creating a shared vision for how meaningful partnership will promote improved child and family outcomes

Child Welfare is constantly looking for ways to assess how policies, rules, organizational culture, and practices are contributing to inequitable outcomes. Among the division's priorities are:

- Better honoring the sovereignty of Oregon Tribal Nations,
- Re-envisioning and increasing the use of culturally relevant services and supports,
- Increasing the inclusion of and sharing power with those most impacted by child welfare systems and reviewing all policy, rules, and procedures for evidence of unintended contributors to equitable outcomes.

Funding

The Agency Request Budget (ARB) for Child Welfare is $1.13 billion General Fund and $1.78 billion total funds for the 23-25 biennium.

CW	GF	OF	FF	TF	POS	FTE
LAB 21-23	919,758,081	35,013,136	576,552,198	1,531,323,415	3,402	3,347.85
ARB 23-25	1,126,860,276	25,576,134	624,600,435	1,777,036,845	4,009	3,671.23
Difference LAB - ARB	207,102,195	(9,437,002)	48,048,237	245,713,430	607	323.38
% Difference LAB - ARB	22.52%	-26.95%	8.33%	16.05%	17.84%	9.66%

Major changes from 21-23 LAB to 23-25 ARB are driven mainly by:

- Standard inflation
- Forecasted Cost per Case and Caseload changes
- FF to GF fund shift related to changes in Federal Fund Match Rates
- General Fund backfill of capped federal fund sources

Strategic Funding Investments and Adjustments

The Child Welfare Division's mission is to ensure every child and family is empowered to live a safe, stable, and healthy life. This mission is based on a set of beliefs and core values:

- *We believe* our child welfare agency and its dedicated and diverse partners can better ensure people's safety, health, and well-being if they work in constant collaboration and proactively engage individuals, families, and communities.
- *We believe* children, youth and young adults do best growing up in a family.
- *We believe* when families and communities are strong, fewer children experience abuse and neglect.
- *We believe* earlier, less intrusive support for families means more children can remain safe and healthy at home and in school, where they can maintain the bonds and connections that are critical to their well-being, leading to better long-term outcomes for

children and young adults.

- *We believe* families and communities working together in a more proactive, holistic way will also help free up budget and staff resources. This allows ODHS and its partners to allocate resources in ways that have the greatest impact for children and young adults. Integrating services will mean less need for costly foster care, residential placements, and other crisis support, creating opportunities for more innovation, creative solutions, and new business models.

	GF	OF	FF	TF	Positions	FTE
POPs at ARB						
116 - Grant Pgm for Community-Based Organizations	135,396	-	55,303	190,699	1	0.75
118 - Child Safety	37,538,083	-	12,514,099	50,052,182	401	200.50
119 - Parent Alcohol & Drug Support Services	1,088,443	-	362,841	1,451,284	8	6.00
120 - CIRT and Safety Systems Analysis	1,110,809	-	370,293	1,481,102	8	6.00
121 - Family Preservation & Engagment	18,260,864	-	6,087,630	24,348,494	193	96.50
122 - FOCUS Expansion	16,480,000	-	-	16,480,000	-	-
123 - FC/Resource Parent Reimbursement Rates	70,328,175	-	42,206,045	112,534,220	-	-
124 - SSB & Child Support Payments Package	6,282,923	(8,871,551)	2,588,628	-	-	-
301 - ERDC Expansion - DELC companion	42,228	-	40,572	82,800	-	-

POP 116 Grant Pgm for Community-Based Organizations

An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.

POP 118 Increase Child Safety

Children thrive when they have safe and supportive family structures in which to grow up. According to Oregon's May Child Welfare Progress Report, about 4,000 times every month Child Protective Services staff engage with families to identify whether children are being exposed to an unmanaged safety threat. Key ingredients in achieving our Child Welfare Division's Vision for Transformation are accurate assessments of child safety and in-home support to prevent placements away from family and community, but Child Welfare needs more staff to ensure that every family receives in-depth assessment and that safety threats are accurately identified. Current staffing levels make it difficult for staff to meaningfully

engage with families, understand their specific needs, and develop customized safety plans – all tasks that require time, care, and skill. Without the staffing necessary to carry out these labor-intensive tasks, we may fail to identify safety issues and support families appropriately in addressing them, thus increasing the likelihood that a child will enter foster care – an often-traumatizing outcome that disproportionately affects Black and Native American families. A staffing investment is necessary to meet the goal in the Oregon Caseload Ratio Standards that each CPS caseworker is assigned no more than 7 new assessments per month (1:7 ratio). The investment will ensure critical caseworker capacity for family engagement, assessment, safety planning, and ongoing support – helping to make sure that children have the best chance of growing up in a safe and nurturing family.

POP 119 Parent Alcohol & Drug Support Services

Children do best when they grow up in a family within their community. However, substance use disorder (SUD) among parents is one of the greatest challenges to keeping children safe and healthy at home.

This POP aligns with recommendations from the Oregon Alcohol and Drug Policy Commission that aim to reduce Oregon's substance use disorder rate and increase Oregon's recovery rate. It builds capacity for the agency to better respond to the growing complexity of substance use disorder (SUD) among child welfare parents and creates capacity for building more consistent and efficient relationships with community partners and SUD treatment providers. When parents in the ODHS child welfare system can access treatment quicker, be supported in achieving recovery, and be assisted in sustaining their recovery from addiction, there will be fewer foster placements and improved child safety and family stability.

ODHS will also increase the internal expertise to respond to a variety of issues that combine with parental and adolescent SUD, including various mental health challenges and the need for clean and sober housing. This proposal will also grow expertise on drug testing, engaging parents, and partners, and sustaining community treatment relationships that work with parents and adolescents. These positions will also provide ODHS with needed consultation regarding resource family applicants who may have SUD histories or current use concerns. Estimated need: reclass 25 SSS-1s to SSS-2s and add 8 new positions.

POP 120 CIRT and Safety Systems Analysis

Preventing the maltreatment of children is core to the work of Child Welfare and to community well-being. Oregon created a Child Fatality Prevention & Review Program (CFPRP) to facilitate statutorily required reviews of child fatalities – conducted by Critical Incident Review Teams (CIRTs). Legislative changes to the criteria for conducting these

reviews have led to an increase in the number of CIRTs assigned. And with many CIRTs involving parental substance abuse, focused prevention strategies are critical to making system-wide improvements.

This proposal enhances the infrastructure and capacity of the CFPRP to develop and implement prevention strategies using qualitative and quantitative data from our most tragic outcomes in Child Welfare. This POP also would support the continued work around the federal Comprehensive Addiction and Recovery Act via and continuation of infant safety, maltreatment, and fatality prevention.

POP 121 Family Preservation & Engagement

Children do best growing up in a family that can provide love, support, cultural continuity, and cherished memories. For these reasons, ODHS Child Welfare Division's Vision for Transformation prioritizes supporting families and children at home and in their communities. While foster care is sometimes the only option for child safety, family separation is a traumatizing event. Child Welfare is actively building out its Family Preservation system, which is designed to spare children and families from the trauma of separation by incorporating the correct supports to manage safety in the home.

To move our Family Preservation efforts forward, Child Welfare needs additional staffing. New staff positions will be focused on family engagement, co-creation with families of case plans, and ongoing support to meet the goals identified in the case plan. These efforts will reduce the need for foster care and can help families stay –and thrive – together. Unless Family Preservation efforts are fully implemented across Child Welfare's 16 districts, we risk the continued overreliance on foster care as a means of managing safety, which translates into unnecessary family trauma and ongoing disproportionate impacts to Tribes and communities of color.

POP 122 FOCUS Expansion

Children deserve to grow up in their own communities, where their established connections with family, friends, teachers, and others can support their well-being. But children with complex needs are more likely to be placed outside their communities in order to receive specialized services. This proposal seeks to strengthen the well-being of Oregon families through intensive community-based support services for children with complex needs, allowing them to remain in their own communities in a resource home, relative care, or parent's home. These services will provide coaching, training and support to caregivers and individualized services specific to the child's needs to help keep the child in stable, community-based, and familial placements as well as reduce the risk of placement disruption, Temporary Lodging, and the use of higher levels of care, including residential

treatment.

This proposal, if approved, will allow for services to be developed throughout the state, including in rural communities. In the long term, these services will prevent unnecessary foster care placements, support families, improve the retention of resource parents, and ultimately save the state money through effective early intervention and partnerships with other systems. The services included in this proposal are Child Specific Caregiver Services, Response and Support Network (RSN), Community-based supports for Commercial Sexually Exploited Children (CSEC) youth and Multidimensional Transition Services. This proposal requests funding and resources necessary to implement, oversee and audit these services.

POP 123 FC/Resource Parent Reimbursement Rates

All children deserve to grow up in a family. If a child is not able to remain in their own home, we need resource families who are diverse and affirming and can provide the support a child needs within their communities. Resource families receive a monthly payment, but the rates for Foster Care have not been adjusted since 2018. In 2018, the rates were based on 56.5% of the cost of raising a child at the USDA rate. Cost of living and inflation rates have continued to climb.

The rate is intended to cover costs of food, shelter, clothing, school supplies, extracurricular activities, etc. for children in ODHS foster care. Resource Families have voiced to ODHS that the current rate does not cover the actual cost of caring for a child. The policy option package would bring the basic family foster care rate up to 80%-100% of the cost of care to raise a child. The rate would change at each biennium to include regular inflation and additionally, medical, and professional inflation. This would allow for increases every biennium. Increasing the rates could help attract and retain more resource families and help current resource families cover the cost of care.

POP 124 SSB & Child Support Payments Package

Child Support, Social Security Benefits (SSB), and Supplemental Security Income (SSI) provide valuable social insurance to children and families. However, children in foster care are not able to use those funds because they are used to supplement foster care costs. This makes it more difficult for families to overcome poverty and it perpetuates inequities. This POP proposes to conserve SSI, SSB and child support funds for youth in foster care and make the funds available in a savings account when they exit foster care. These funds will support reunification and help youth better support themselves as they transition into adulthood.

POP 301 ERDC Expansion - DELC companion

All children deserve supportive and nurturing places to learn and play while their parents are at work. Research indicates that quality childcare has a significant and positive impact on children's brain development, setting the stage for success later in life. But disparities persist when it comes to accessing quality childcare, with low-income families and families of color bearing most of the burden. We have a shared obligation to make sure that every child has the supports they need to reach their potential, and that means directly addressing this kind of disparity and promoting equitable access to childcare for all families. Employment Related Day Care (ERDC) is a federal program, partially funded by the Child Care Development Block Grant (CCDG), that helps mitigate these disparities by providing low-income working families with childcare subsidies.

In Oregon, ERDC represents the largest childcare subsidy program and was enhanced through House Bill 3073 (2021) which expanded program eligibility to include families with student parents and children who are documented. The ERDC program has also capped co-pays at no more than 7 percent of a family's income, as well as waived the co-pays of families at 100 percent of the federal poverty level to $0. To continue our progress toward addressing longstanding inequities, the Early Learning Division (ELD) is introducing legislation in the 2023 Legislative Session to ensure that children at risk of involvement or involved in Oregon's foster care and child welfare systems, children from families experiencing domestic violence, and houseless families have access to quality, affordable care. This expanded eligibility will allow more families to access critical childcare supports, promoting both healthy development for children and uninterrupted employment for parents.

Conclusion

We want to break the cycle that causes harm to individuals and drives Oregonians into expensive state-sponsored programs. Our strategies focus on helping ensure that Oregonians are safer in the future than they are today by increasing resources proven to result in the greatest reduction in overall risk. Though those strategies require some upfront, taxpayer investment, we are committed to being accountable for needed service delivery and performance metrics focused on improvements in the lives of those we serve and long-term reductions in the demand for state services. We know that abuse and neglect will never totally be eliminated, but we believe that Oregon should be a place where our children, are safe, and we believe our budget proposal will improve the state's ability to work with individuals and communities to achieve that goal, while reducing the demand for costly state services in the future.

Oregon Department of Human Services
Self Sufficiency Programs

Overview

Oregon Department of Human Services' Building Well-being Initiative (BWBI) is advancing a future where all who live in Oregon, regardless of race, identity, age, disability, or place, have the needed supports to achieve whole well-being for self, family, and community.

In alignment with the agency-wide BWBI, Self-Sufficiency Programs (SSP) is working toward a future where its services and resources are centered around whole-person well-being. This represents a fundamental shift from SSP's previous system-centered approach in which services and resources are primarily shaped by federal programs and funding sources like TANF and SNAP. As we move the person or family to the center of our work, federal programs like these become tools in a suite of resources to help families meet their basic needs and achieve economic stability. This approach acknowledges the complexity of needs that must be met if individuals and families are to thrive in our economic and social climate – including stable housing, affordable childcare, and adequate cash resources. Without these basic supports, individuals and families cannot be expected to exit poverty.

In Oregon, the burden of poverty is not equally shared: Communities of Color are disproportionally impacted as are residents of rural communities, women, youth, LGBTQ communities, people with disabilities, immigrants, and refugees.

SSP recognizes the structural racism and oppression embedded within our programs and is committed to addressing historic and current harms while working with impacted communities to transform these systems. With this transformation, individuals and families can not only reach stability but also have access to asset-building tools, generational wealth, and equal economic and social mobility opportunities.

The programs within SSP include:

- Supplemental Nutrition Assistance Program (SNAP) and related programs:
    - SNAP Employment and Training Program (STEP)
    - Able-Bodied Adults without Dependents (ABAWD) Program
    - SNAP Nutrition Education (SNAP-Ed)
- Commodities Supplemental Food Program (CSFP)
- The Emergency Food Assistance Program (TEFAP)

- Temporary Assistance for Needy Families (TANF) and related programs:
    - Job Opportunity and Basic Skills (JOBS) program
    - Family Support and Connections (FS&C)
    - State Family Pre-Supplemental Security Income (SSI) and Supplemental Security Disability Income (SSDI)
- Temporary Assistance for Domestic Violence Survivors (TA-DVS)
- Youth Services
- Child Care (moving to Division of Early Learning and Care in 2023)

Seeking Self-Sufficiency

SSP administers an array of programs to Oregonians experiencing low or no income. These benefits and services are aimed at helping individuals and families move out of poverty into economic stability. Historically, SSP's programs have operated within silos – each with its own unique resources, policies, processes, and systems. This approach has created a fractured service array and presents challenges to individuals and families as they navigate multiple programs and services. SSP is now taking steps to unify its service approach, thereby improving the accessibility and navigability of its programs. The launch of the ONE eligibility system and the Oregon Eligibility Partnership (OEP) represents the first wide-scale attempt to weave together department-wide services for individuals and families. We acknowledge that there is still a long way to go.

We also acknowledge that federal programs alone are not enough to move individuals and families into economic stability, a key social determinant of health. SSP needs added capacity and state investment to build policy and programs in partnership with impacted communities to better collaborate with community partners and our sister agencies to coordinate a comprehensive suite of services that meaningfully improve well-being for Oregonians.

SSP continues to see increased caseloads driven by the shortage of affordable housing, the COVID-19 pandemic, catastrophic wildfires, economic conditions, and a shortage of available and affordable childcare and attainable living-wage jobs. Recent forecasting data also predict that the current economic downturn will deepen these trends.[1]

[1] Parolin, Z. & Christopher Wimer (April 2020) Forecasting Estimates of Poverty during the COVID-19 Crisis. Center on Poverty and Social Policy at Columbia University Policy Brief available for download at https://static1.squarespace.com/static/5743308460b5e922a25a6dc7/t/5e9786f17c4b4e20ca02d16b/1586988788821/Forecasting-

SSP is committed to creating an integrated human service continuum of care that addresses these compounding trends and serves the holistic needs of individuals and families. To do this, we must think differently and creatively, listen more effectively to communities, and collaborate across multiple systems to create and coordinate services. We must also allocate more resources toward the most impacted communities to reduce systemic disparities. In other words, our work is larger than the programs we currently administer; we must focus on holistically improving the conditions in people's environments, from food security to housing security to wealth building.

The social determinants of health are foundational to the well-being of individuals and families[2] and SSP policies and programs must be structured to address that reality. In addition to maintaining and optimizing federal program administration, SSP is arranging our broader policy work around food security, housing security, economic and social mobility, equitable budgeting and implementation, and data. In our future vision, we are committed to investing in communities across all aspects of peoples' lives.

Funding

The Self Sufficiency Agency Request Budget (ARB) is $834.32 million General Fundand $5.23 billion total funds primarily driven by SNAP benefits.

Self Sufficiency	GF	OF	FF	TF	POS	FTE
LAB 21-23	564,979,504	227,814,723	4,274,009,675	5,066,803,902	2,787	2,764.93
ARB 23-25	834,321,875	2,507,797	4,390,430,144	5,227,259,816	3,782	3,523.84
Difference LAB - ARB	269,342,371	(225,306,926)	116,420,469	160,455,914	995	758.91
% Difference LAB - ARB	47.67%	-98.90%	2.72%	3.17%	35.70%	27.45%

Major changes from LAB to CSL are driven mainly by:

- Phase in of investments from 2021-23
- Phase out of one-time funding
- Standard inflation
- Mandated staffing increases
- Transfer of ERDC program from ODHS to DELC

Poverty-Estimates-COVID19-CPSP-2020.pdf

[2] Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved [date graphic was accessed], from https://health.gov/healthypeople/objectives-and-data/social-determinants-health

Oregon Department of Human Services
Aging and People with Disabilities Programs

Overview

The Department of Human Services Aging and People with Disabilities (APD) program mission is to help Oregonians in their own communities achieve well-being and independence through opportunities that protect, empower, respect choice, and preserve dignity.

The state of Oregon is a leader in long term care systems and was ranked number four nationally in AARP's latest ranking done in 2020. In 1981 Oregon received the first waiver nationwide for long term care services allowing Oregonians receiving Medicaid to choose services in their own home or their communities rather than an institutional such as a nursing home. In 2013, Oregon transitioned most of its services into the 1915(K) State Plan Option. The K Option provides significant benefits to the State in cost savings and allows Oregonians individual choices to best serve their needs. Oregonian's value receiving long term care services in a non-institutional setting with nearly 88% choosing alternatives that allow them to remain independent and safe.

Long Term Care Setting (as of Mar 2022)	**# of Recipients**	**% of LTC Caseload**
Nursing Facility	3,788	11.43%
In Home	17,339	52.30%
Community Based Setting	12,024	36.27%
Total	**33,151**	**100.00%**

Oregon's population is aging

The aging population is growing rapidly. The number of people 65 and older in the United States is expected to increase to 70 million by 2030, and to 88.5 million ─ or 20 percent of the population ─ in 2050.

The aging population in Oregon will continue to grow dramatically as more baby-boomers reach retirement age. In 2016, approximately 17 percent of Oregon's population was 65 years or older. By 2030, the percentage is expected to increase to nearly 20 percent. In addition, nearly 10 percent of Oregon's population that is younger than 65 is living with a disability. Further, in Oregon, people 85 years or older make up a small but rapidly growing group within the total population.

Guided by the ODHS Equity North Star, APD programs and services continue to evolve through a focus on equity and inclusion for individuals of all races, ethnicities, sexual

orientations, gender identities and expressions, disabilities, ages, geographic locations, and Tribal affiliations. By working closely with communities to design and deliver services, APD helps ensure that all of Oregon's older adults and people with disabilities have access to the supports they need to achieve and maintain whole well-being.

We have prepared a strategic budget to focus on continuing modernization and improvements to help Oregonians sustain long term care services, become more independent and safer.

Funding

The cost to operate the Aging and People with Disabilities (APD) Agency Request Budget (ARB) is $1.86 billion general fund and $5.28 billion total funds for the 2023-25 biennium.

APD	GF	OF	FF	TF	Positions	FTE
21-23 LAB	1,445,881,447	365,177,542	3,099,645,984	4,910,704,973	1,877	1,814.41
23-25 ARB	1,857,151,501	279,372,522	3,143,291,393	5,279,815,416	2,094	2,014.80
Difference LAB-ARB	411,270,054	(85,805,020)	43,645,409	369,110,443	217	200.39
% Difference LAB-ARB	28.4%	-23.5%	1.4%	7.5%	11.6%	11.0%

Major changes from LAB to ARB are driven mainly by:

- Phase In of rate increases and new programs from 21-23
- Phase Out of funding for one-time activities related to COVID-19
- Standard inflation
- Above Standard Inflation for In-Home, CBC and Nursing Facilities
- Forecasted Cost per Case and Caseload changes including AAA staff funding
- FF to GF fund shift related to changes in Federal Fund Match Rates
- Backfill of one-time ARPA funding for ongoing program activities

Strategic Funding Investments and Adjustments

The following Independence, Safety and Health investments are being proposed to improve services to Oregonians:

POPS at ARB	GF	OF	FF	TF	Positions	FTE
101 - Infrastructure, Access and Emergency	97,401,189	-	144,367,410	241,768,599	113	98.75
102 - Homecare Workforce	2,750,496	-	642,128	3,392,624	16	12.00
103 - Address Systemic Poverty Issues	8,120,329	974,849	13,603,875	22,699,053	2	2.00
104 - Equitable Access and Wellbeing	12,810,269	-	7,422,761	20,233,030	67	33.50
105 - Healthier Oregon Program (HOP)	34,021,811	-	-	34,021,811	13	11.50
116 - Grant Pgm for Community-Based Organizations	190,700	-	-	190,700	1	0.75
142 - Combined Eligibility Worker	8,387,530	-	5,842,627	14,230,157	56	42.00
202 - Basic Health Program	1,630,194	-	1,630,194	3,260,388	13	9.75
POP Total	165,312,518	974,849	173,508,995	339,796,362	281	210

POP 101 - Infrastructure, Access, and Emergency

A fully staffed and supported workforce ensures that services and supports are delivered to Oregonians in ways that achieve the respective missions of Oregon Department of Human Services (ODHS) and the Office of Aging and People with Disabilities (APD). Without a fully staffed workforce, Oregonians, including older adults and people with disabilities, may face barriers to services, resulting in poor health and life outcomes. The infrastructure requests in this policy option package would allow services and supports to become more accessible, and culturally and linguistically responsive to Oregon's diverse communities, ensure that APD can respond in emergency situations and natural disasters, and support a stable long-term care delivery system. Over a long period of time, these investments would create the foundation for older adults, people with disabilities, their families, and their communities to realize their ideals of well-being.

POP 102 - Homecare Workforce

The homecare workforce helps ensure that older adults and people with disabilities can achieve well-being through opportunities that protect, empower, respect choice, and preserve dignity. Without strong foundational supports in place through the Oregon Home Care Commission (OHCC), homecare providers – including homecare workers, personal support workers, and personal care attendants – may disengage from the workforce, which would negatively affect the consumers of these services. Conversely, when people feel supported in the work they do, they are more invested in positive outcomes, leading to improved job satisfaction and role retention.

The purpose of this policy option package is to strengthen human resources and training support through OHCC by establishing a permanent Provider Time Capture (PTC) team within the Office of Aging and People with Disabilities (APD) and creating an online service and dedicated phone number with live assistance to expand consumer/client access to information and resources. The overall package helps eliminate systemic barriers that adversely affect consumers, advocates, and providers; strengthens ODHS foundations; and builds toward a better future for the homecare workforce, consumers, and local office staff.

POP 103 - Address Systemic Poverty Issues

The cycle of poverty is often passed from one generation to the next. This means that children who grow up in impoverished households are more likely to live in poverty as adults. Beyond poverty, this intergenerational cycle often extends to access to resources such as education and healthcare. At ODHS, we understand that when people can access

the services they need, when they need them, they are more likely to experience positive health and well-being outcomes. This policy option package will create and support policy changes that conserve the financial resources of individuals in ways that promote dignity, equity, independence and reduce intergenerational poverty. The proposed policy changes allow the department to disregard tribal, commission and council income when determining eligibility for Medicaid based on age, blindness or disability; increase the Medicaid resource limit to reflect inflation that has not been updated since 1987 and index this resource limit to future inflation; increase the General Assistance housing assistance payment by connecting it to a percentage of the SSI payment standard; and by improve parity between Medicare Savings programs and the MAGI medical program income standard.

POP 104 - Equitable Access and Well Being

Everyone in Oregon deserves to access services that align with their personal, cultural, and ethnic identities and linguistic preferences. When people cannot access such services, they may avoid seeking help with things like health care, food security and other basic supports. Without these supports, individual and community well-being are put at risk of unmanaged health conditions, and insecurities in food, housing, and finance. This comprehensive policy option package assists ODHS/APD on achieving well-being and equity for older adults and people with disabilities with several component parts, each of which is interdependent with the others. It supports well-being by ensuring that individuals in Oregon have access to services that meet their cultural, ethnic, and linguistic needs through an intersectional lens that recognizes the various identities that comprise our aging and disability network.

POP 105 - Healthier Oregon Program (HOP)

Everyone in Oregon deserves access to the services they need, when they need them, to achieve well-being. More importantly, access to services needs to remain uninterrupted as people move through each stage of life and regardless of identity or place. Oregon Department of Human Services is requesting funding to provide long-term services and supports to eligible children and adults with disabilities regardless of their immigration status as directed by HB 3352, formerly called Cover All People, and renamed “Healthier Oregon”.

This POP includes continuation of funding for population enrolled during 2022 through initial implementation of the program (ages 19 to 26 and 55+) and expansion of the services to the remainder of the age groups, including children, starting July 1, 2023. It also asks for ongoing funding for staff to help individuals

access these services and supports, including case managers, and related staff who are critical to serving this population.

POP 116 - Grant Program for Community Based Organizations

An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.

POP 142 - Combined Eligibility Worker

We all want a state in which everyone can access the supports they need to thrive. In Oregon, the ONE eligibility system is key in making this a reality. As of May 2022, 1.5 million Oregonians access critical medical, food, cash, and childcare benefits through the ONE system – representing a historic level of need triggered in large part by the COVID-19 pandemic. We need to make sure that ONE operation has the necessary resources to process applications and administer benefits in a timely manner, because people can't thrive when they are facing interruptions in their ability to see a doctor, choosing between paying bills, or buying food, losing paid work in order to care for a child or are unable to afford necessities for their families.

Since its initial launch in 2020, the Oregon Eligibility Partnership has made significant improvements to business practices and computer systems in order to boost efficiency and maximize existing staff resources. Still, we don't have the staffing levels necessary to make sure everyone who is eligible gets what they need when they need it. Without these resources, vulnerable Oregonians may experience longer delays in applications processing, delays that can mean the difference between going hungry and having enough food for their families. Additionally, local businesses may see decreases in consumer spending stemming from delays in getting Supplemental Nutrition Assistance Program (SNAP) benefits out to families, and parents may face interruptions in their employment due to lack of needed childcare benefits.

In this policy option package, Oregon Department of Human Services is requesting position authority and funding for additional eligibility staff who will answer calls, assist people in person who are applying for or receiving benefits, process applications on a timely basis, and provide support to community partners who assist people in applying for benefits. These resources will help move the ONE system toward its goal of processing applications same day/next day and ensure Oregonians' timely access to benefits.

POP 202 - Basic Health Program

Oregon recognizes that health care is fundamental to people's and families' well-being. This shared value was a key driver behind the Oregon Health Plan (OHP), which prior to the pandemic covered approximately 1 million people. During the pandemic, federal rule changes allowed hundreds of thousands of additional Oregonians to access health care coverage through OHP, and today the plan covers one in three Oregonians. Without state action, many of these newly covered Oregonians will lose their health coverage when the federal public health emergency (PHE) expires, erasing the important gains in coverage Oregon achieved during the PHE.

In 2022, the Oregon Legislature passed House Bill 4035 to fund the federally mandated redeterminations process and preserve short-term coverage for people who earn too much income for Medicaid, but not enough to afford other coverage. The bill also authorized the development of a sustainable, long-term solution in the form of a Basic Health Program (BHP). This policy package would direct necessary funding to Oregon Department of Human Services to finish the work of implementing the BHP and allow us to move forward with an effective redetermination process. Together, these actions will help ensure that eligible Oregonians have uninterrupted access to critical medical benefits for themselves and their families.

Conclusion

For the 23-25 biennium, APD is proposing a package of services that promote safety and well-being for Oregon's older adults and people with disabilities. These investments will help ODHS meet the needs of Oregonians in this period of change and growth.

Oregon Department of Human Services
Intellectual and Developmental Disabilities Program

Overview

The Office of Developmental Disabilities Services (ODDS) provides support across the lifespan to Oregonians. ODDS, partners, and the developmental disabilities community come together to provide services, supports, and advocacy to empower Oregonians with intellectual and developmental disabilities to live full lives in their communities.

ODDS serves people with intellectual disabilities (IQ 75 or below) or developmental disabilities such as autism, Down syndrome, and cerebral palsy. These disabilities are lifelong and have a significant impact on a person's ability to function independently. Some people with I/DD may also have significant medical or mental health needs. Most people with I/DD meet Medicaid financial eligibility requirements.

The I/DD program fulfills its mission and carries out its responsibilities while adhering to the following values:

- Choice, self-determination, and person-centered practices
- Children and families together
- Health, safety, and respect
- Community inclusion and community living
- Strong relationships
- Service equity and access

ODDS worked with a diverse group of partners representing all areas of the intellectual/developmental disabilities (I/DD) service delivery system to develop a strategic plan that will guide its work for the next biennium and beyond. The strategic planning process resulted in a firm understanding that the person, their family, and the goals they want to achieve remain at the core of our system. As a result of this process, the agency also committed to develop a Service Equity Plan that includes reaching out to underserved populations, removing barriers to access, and providing services by staff who have appropriate cultural and linguistic capacities.

ODDS seeks to achieve the following strategic goals**:**

- Create a system that is sustainable and easy to use with effective communication and equitable access.
- Honor and support people to make their own choices about who they want to be and

what they want to do in their lives.
- Support equal opportunity for living options and meaningful employment in an integrated community setting.
- Provide families the amount and type of supports they need to raise their children at home, or when necessary, in another family home within their community.
- Support health and safety while people live rich, full lives.

History and Future State

Oregon is recognized nationally as an innovative leader in developing community-based services for persons with I/DD. Oregon is one of the few states that have no state- or privately-operated, institutional-level services specifically for people with developmental disabilities. In fact, the majority of persons with developmental disabilities in Oregon are served in their own home or their family's home.

The work of ODDS and its partners and stakeholders aims to achieve a self-directed, family-involved, individually focused, culturally appropriate, and sustainable approach to service. According to the 2020-21 National Core Indicators' National Adult Family Survey Report and National Child Family Survey Report, people with I/DD and their families report high levels of satisfaction with services when they have increased control, the ability to integrate into their home communities more fully, and the benefits of home and community life.

Ongoing input from our partners both nationally and in Oregon indicates that the number of people with I/DD-related needs is growing. There also is an increase in the number of people who need services that have co-occurring mental health needs or are coming from the corrections system. Efforts to ensure the long-term sustainability of ODDS programs and services will be essential in meeting these growing needs. To reach underserved and underrepresented communities, moreover, ODDS must continue its efforts to build a diverse workforce capable of delivering linguistically and culturally agile services.

Before COVID-19, the Direct Support Professional (DSP) workforce was in crisis with a national staffing shortage. COVID-19 made the situation worse. ODDS took numerous measures to recruit and retain workers throughout the pandemic, including rate increases for care workers and provider agencies, retention incentives, incentives for new care workers, and a recruitment campaign involving the launch of the Impact Oregon website. ODDS expects these workforce shortages to continue after the pandemic and will continue its efforts to increase this vital workforce.

Oregon Department of Human Services
Intellectual and Developmental Disabilities Program

In 2021, the Oregon Legislature funded HB 3352, formerly called Cover All People, and renamed Healthier Oregon, to ensure that more Oregonians can access comprehensive Oregon Health Plan benefits, including long-term services and supports. This program will allow I/DD eligible individuals, regardless of immigration status, to access needed home- and community-based services.

Funding

The Agency Request Budget (ARB) to operate the People with Intellectual & Developmental Disability (I/DD) program for the 2023-25 biennium is $1.93 billion in General Fund and $5.23 billion total funds.

I/DD	GF	OF	FF	TF	Positions	FTE
21-23 LAB	1,267,294,981	29,453,863	2,938,250,125	4,234,998,969	1,007	990.73
23-25 ARB	1,932,188,063	27,256,104	3,276,550,348	5,235,994,515	1,052	1,039.80
Difference	664,893,082	(2,197,759)	338,300,223	1,000,995,546	45	49
% Difference	52.5%	-7.5%	11.5%	23.6%	4.5%	5.0%

Major changes from LAB to ARB are driven mainly by:

- Phase In of rate increases from 21-23
- Standard inflation
- Forecasted Cost per Case and Caseload Program changes, including CDDP and Brokerage funding
- Changes in Federal Fund Match Rates
- Backfill of one-time ARPA funding for ongoing program activities
- Transfer of Inclusive Partners Program from DD Council to DELC

Strategic Funding Investments and Adjustments

With the ultimate goal of preventing or delaying access to the highest cost services within our system, we plan to direct funds to improve outcomes, expand on service innovations and strategically advance initiatives in the following areas:

- Stable and competent workforce for I/DD services through implementation of transparent rate models
- Case management system and IT improvements
- Increased home and community-based services reach
- Service capacity and service equity

POPs at 23-25 CSL	General Fund	Other Funds	Federal Funds	Total Funds	POS	FTE
105 - Healthier Oregon Program – Long-Term Services and Supports	$ 34,313,410	$ -	$ -	$ 34,313,410	-	-
113 - Maintaining Critical Staffing	$ 267,957	$ -	$ 267,957	$ 535,914	1	1.00
116 - Grant Program for Community-Based Organizations	$ 172,795	$ -	$ -	$ 172,795	1	0.75
125 - ARPA Positions	$ 1,501,711	$ -	$ 1,501,711	$ 3,003,422	14	14.00
126 - Model Employer	$ 2,034,856	$ -	$ 2,034,856	$ 4,069,712	29	24.09
127 - ODDS-OTIS Joint Quality Improvement	$ 2,480,898	$ -	$ 1,325,380	$ 3,806,278	20	16.79
128 - Child Welfare and IDD Parents	$ 387,997	$ -	$ 564,445	$ 952,442	2	1.50
129 - ODDS Systems	$ 889,698	$ -	$ 8,007,245	$ 8,896,943	29	29.00
130 - CME Service Equity and Capacity	$ 39,739,037	$ -	$ 39,794,953	$ 79,533,990	-	-
131 - Children's Foster Care Rates	$ 3,086,303	$ -	$ 5,459,423	$ 8,545,726	1	1.00
132 - Targeted Rate Increases	$ 162,144,945	$ -	$ 294,067,672	$ 456,212,617	-	-
133 - Children's Residential/CIIS Workload Model	$ 794,225	$ -	$ 794,225	$ 1,588,450	10	7.50

POP 105 Healthier Oregon Program – Long-Term Services and Supports

Everyone in Oregon deserves access to the services they need, when they need them, to achieve well-being. More importantly, access to services needs to remain uninterrupted as people move through each stage of life and regardless of identity or place. Oregon Department of Human Services is requesting funding to provide long-term services and supports to eligible children and adults with disabilities regardless of their immigration status as directed by HB 3352, formerly called Cover All People, and renamed "Healthier Oregon".

This POP includes continuation of funding for population enrolled during 2022 through initial implementation of the program (ages 19 to 26 and 55+) and expansion of the services to the remainder of the age groups, including children, starting July 1, 2023. It also asks for ongoing funding for staff to help individuals access these services and supports, including case managers, and related staff who are critical to serving this population.

POP 113 Maintaining Critical Staffing

ODHS is leading an agency-wide shift toward more collaborative, community- and person-centered human services. Encompassing change across our programs and at every level of our nearly 11,000-employee agency, the shift requires strategic and dedicated leadership, improved communication and transparency with partners, and a diverse, well-trained human services workforce. At the same time, the COVID-19 pandemic and other crises have contributed to historic demand for human services. To meet these compounding needs, ODHS has added key positions to agency offices. Without these positions, ODHS cannot effectively and efficiently carry out its three strategic priorities. To ensure that Oregonians will continue see needed and global improvements in our human services systems, ODHS is requesting position authority and funding for 56 non-budgeted positions.

These positions will continue mission-critical work including leading our enterprise-wide Building Well-being Together initiative; leading programs for people with intellectual and developmental disabilities; providing timely and transparent communication to elected officials, the media, partners, and the public; as well as employee recruitment, professional development, retention, and management.

POP 116 Grant Program for Community-Based Organizations

An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.

POP 125 ARPA Positions

Services provided by the Oregon Department of Human Services (ODHS) need to be reliable so those who depend upon them are not thrown into crisis by service disruptions. Funding from the American Rescue Plan Act (ARPA) allowed the Office of Developmental Disabilities Services (ODDS) to secure 57 temporary positions to meet the program's needs in the critical areas of program management and improvement. The expiration of all of these positions would result in the discontinuation of critical efforts related to ODDS' strategic work across programs, agencies and community organizations that ensure high-quality services and supports for individuals with intellectual and developmental disabilities (I/DD). ODDS proposes that14 of the 57 ARPA-funded limited duration (LD) positions be made permanent. These 14 full-time employees (FTE) will continue to provide ongoing support to the ODDS Policy, Training, Case Management Support Services, Operations and Portfolio Management units. This will allow ODDS to maintain the level of care and quality for services that people have come to depend upon over the past two years and also free managers of administrative work empowering them to better engage with community partners and move the needle on our strategic efforts instead of just trying to keep up.

POP 126 Model Employer

All people deserve equal access to employment opportunities that allow them to thrive as valued members of their communities. The state of Oregon is committed to fair employment practices and non-discrimination. Less than 1% of the state's workforce is comprised of people with intellectual and developmental disabilities (I/DD), because this population faces common, disability-based barriers when trying to access state employment. The Model Employer program is designed to hire people with I/DD into state service. This policy option package (POP) requests dedicated full-time equivalent (FTE) for positions for the Model Employer program. Providing this opportunity for people with I/DD to have access to state employment by removing common barriers faced by people with I/DD in the state hiring process and incentivizing hiring managers to utilize this process will increase access to state employment for people with I/DD.

POP 127 ODDS-OTIS Joint Quality Improvement

The Office of Developmental Disabilities Services' (ODDS) top priority is to ensure quality services for adults and children with intellectual and developmental disabilities (I/DD) that empower these individuals to live rich, full lives in their communities while providing for their health and safety. Timely and quality licensing practices and abuse investigations are critical in supporting the well-being, health, and safety of the vulnerable Oregonians we serve. The quality of foster home compliance has progressively decreased over the years as investigators have struggled with timeliness and quality screening of investigations conducted at the local level. As a result, individuals receiving services are at greater risk for abuse and neglect. Licensing is a large component to reducing risk and assuring providers are doing their important work in a high-quality way. By providing additional resources, ODDS and the Office of Training, Investigations and Safety (OTIS) will be able to provide meaningful and sustainable support to local offices and the communities they serve. We will be able to better focus on the important work of advancing the Oregon Department of Human Service's (ODHS) Building Well-being Together Initiative.

POP 128 Supported Parenting Waiver Service (IDD Parents and CW)

Our communities are stronger when parents are able to raise their children as independently as possible in their own or family homes. Parents with intellectual and developmental disabilities (I/DD) have long faced overwhelming challenges and have endured discrimination, while being failed by various systems that are intended to support them to have full lives with their children and families in their communities. ODDS proposes a new set of innovative services intended to support parents with I/DD more effectively and keep families together. These new services, "supported parenting" would provide person-centered support for parents with I/DD to raise their children independently in their

communities. ODDS requests to maintain permanent 2.0 FTEs that are currently temporary American Rescue Plan Act-funded positions for cross-systems coordination with Child Welfare (CW) and other systems to ensure optimal services to parents with I/DD and children involved in the CW system.

POP 129 ODDS Systems - Case Management and Provider Systems

In the 2020s, the ability to quickly, transparently, and effectively collect, share, analyze and communicate data is an essential component of providing equitable and accessible human services. The Office of Developmental Disabilities Services (ODDS) lacks a centralized data system to manage the case management services and supports it provides to roughly 32,000 people across Oregon. ODDS seeks position authority and funding to secure a case management system, a universal provider portal, and a robust agency provider system to improve provider reporting capabilities and to replace ODDS' antiquated ASPEN system that will be shut down in one year. These system upgrades will improve ODDS' service delivery on many levels, some of which include communications, quality assurance, licensing, data collection and equitable access to case management services and supports.

POP 130 Case Management Entity (CME) Service Equity and Capacity

All people with intellectual and developmental disabilities (I/DD) should have equitable access to the services and supports provided by the Office of Developmental Disabilities Services (ODDS) and its statewide partners. Under the umbrella of the Oregon Department of Human Services' (ODHS) Equity North Star vision and in its strategic plan, ODDS and its partners have committed to ensuring service equity throughout the service-delivery system. Case management entities (CMEs) serve a cornerstone function in the I/DD service-delivery system. CMEs serve as the front door to the system, perform eligibility assessments, provide adult protective services (APS) and foster care licensing functions, and connect people to services and resources through case management services. Because of the way CMEs are currently funded, they don't have sufficient resources to fully implement ODHS' service equity vision and to take local actions to ensure equitable access and services to individuals with I/DD and their families.

To ensure adequate resources for these critical functions and initiatives, ODDS requests CMEs be made whole by bringing their funding up to 100% of the full-time equivalent (FTE) allocation and funding identified in the workload model prior to Oregon Legislative Fiscal Office (LFO) consideration of 23–25 biennial funding or allocated FTE. ODDS also requests additional resources for the development and implementation of service equity strategies at the local level. This funding will ensure CMEs are resourced to meet the needs of the diverse communities they serve in an equitable and culturally agile way.

POP 131 Children's Foster Care Payments and Home Mods

All people, especially those who are most vulnerable, such as children with intellectual and developmental disabilities (I/DD), should have equitable access to the services offered by the Office of Developmental Disabilities Services (ODDS). ODDS is working to improve equity and access across all services and settings. Historically, children placed in ODDS-certified children's foster homes have not been able to access home-modification services that would allow for a foster home to be made more accessible, better meet the needs of the child, and ensure compliance with federal home- and community-based settings requirements.

This policy option package (POP) addresses this inequity and will implement a fair and equitable reimbursement strategy for children's foster care (CFC) providers based on a valid and reliable assessment tool. The new reimbursement strategy is aimed at increasing the provider network's capacity to meet the needs of children who cannot be served safely in their family home.

POP 132 Targeted Rate Increases

All people with intellectual and developmental disabilities (I/DD) deserve to live full lives as valued members in their communities and have access to the quality services and supports that empower them to do so. I/DD service providers have been severely impacted by workforce shortages, which have been exacerbated by the COVID-19 pandemic and other economic and inflationary pressures. Providers have been struggling to meet the needs of individuals they serve, because they are unable to offer competitive living wages to sufficiently recruit and retain workers during a time of extraordinary wage hikes and inflation. This policy option package (POP) implements targeted updates to the service rates assumptions with the most recent published data sources, such as the latest Bureau of Labor (BLS) data and Internal Revenue Service (IRS) mileage rate.

Ensuring provider rates remain updated to the most current cost information will ensure that Oregon's provider network remains robust and capable of attracting and retaining direct workforce, pay living wages to direct care workers and providing other supports to the workers that ultimately result in better quality and continuity of services for people with I/DD.

POP 133 Children's Residential/CIIS Workload Model

All people who depend upon services provided by the Oregon Department of Human Services deserve equitable access to quality support services, especially children with the highest level of care needs. Over the last several years, the Office of Developmental Disabilities Services (ODDS) children's case management programs – Children's Intensive

In-home Services (CIIS) and Children's Residential (CR) – have delivered services to children with the highest level of care needs in Oregon's intellectual and developmental disabilities (I/DD) system. Case managers in these units faced the added stressors of the pandemic and supporting critical program improvements while operating at a lower full-time equivalent (FTE) percentage than county-based contracted I/DD case management programs. This request is to fund CIIS and CR at a rate in alignment with the FTE% at county I/DD case management programs which equates to 10 additional positions as determined by the most recent workload model. Staffing that is more in alignment with the workload model will help ensure the high level of services necessary for children with most complex needs, compliance with Medicaid and state standards, and equitable person-centered services.

Conclusion

This proposal represents a substantive level of strategic planning that will allow the I/DD system to improve the quality of service it offers to Oregonians with intellectual/developmental disabilities and their families that support them. The primary focus is on sustainable, quality service programming that accounts for the short- and long-term budget realities that shape our implementation planning. Focusing our efforts on helping people with disabilities remain at home or in their community provides not only financial benefits, but better quality throughout their life. We are confident that this plan will maximize resources and strengthen the service system, enhancing its ability to produce results for those we serve.

Oregon Department of Human Services
Vocational Rehabilitation Programs

Overview

Vocational Rehabilitation (VR) is a state and federal program authorized by state law and the federal Rehabilitation Act of 1973 and amended in 1998 and in 2014 by the Workforce Innovation and Opportunity Act (WIOA).

VR staff work in partnership with Oregonians with disabilities, communities, and businesses to develop employment opportunities and provide individualized services to each eligible person.

Employment helps people with disabilities live independently, become involved in their communities, and live more engaged and satisfying lives.

VR helps Oregonians with disabilities gain employment through a variety of services. These include but are not limited to:

- Helping youth with disabilities transition to jobs as they become adults,
- Providing individualized counseling and supports to job seekers with disabilities to help overcome barriers to employment,
- Helping employers realize and receive the benefits of employing diverse people with disabilities, and
- Partnering with other state and local organizations that coordinate and provide equitable employment and workforce programs.

All working-age Oregonians who experience a disability and are legally entitled to work are potentially eligible for VR services. Individuals who experience a medical, cognitive, or psychiatric diagnosis that results in a functional impediment to employment are typically eligible. Recipients of Social Security disability benefits are presumed eligible for services.

Current Funding Levels

The Agency Request Budget (ARB) to operate the Vocational Rehabilitation (VR) program for the 2023-25 biennium is $54.12 million in General Fund and $162.37 million total funds.

VR	GF	OF	FF	TF	POS	FTE
LAB 21-23	36,303,474	8,584,466	103,496,208	148,384,148	269	265.89
ARB 23-25	54,121,723	10,853,531	97,395,803	162,371,057	320	306.29
Difference LAB - ARB	17,818,249	2,269,065	(6,100,405)	13,986,909	51	40.40
% Difference LAB - ARB	49.08%	26.43%	-5.89%	9.43%	18.96%	15.19%

Major changes from LAB to CSL are driven mainly by:

- Standard inflation
- Changes in Federal Reallotment funding
- Backfill use of one-time OF revenue

VR is funded through the U.S. Department of Education. It receives a formula-based grant with Match and Maintenance of Effort requirements. The match rate for Vocational Rehabilitation is 21.3 percent General Fund; 78.7 percent Federal Funds. For Independent Living the match rate is 10 percent General Fund; 90 percent Federal Funds. Grant dollars cannot be utilized by other programs. Program income, which is reinvested back into VR, includes Social Security reimbursement and Youth Transition Program grants.

Strategic Funding Investments and Adjustments

We have prepared a strategic budget to improve our programs effectiveness and enhance the program's ability to provide further employment outcomes for Oregonians. Continuous program improvements focus on return-on-investment through outcomes for our clients.

POPs at ARB	GF	OF	FF	TF	POS	FTE
116 - Grant Pgm for Community-Based Organizations	190,700	-	-	190,700	1	0.75
144 - Pay Equity for CILs	2,616,005	-	-	2,616,005	-	-
145 - RCDHH & VRCs	6,944,825	-	-	6,944,825	46	34.50
146 - Work Incentive Network (WIN)	3,211,060	-	-	3,211,060	1	0.75
147 - Business/Contracts Unit	461,616	-	-	461,616	3	2.25
148 - RSA Audit Report	1	-	-	1	-	-

POP 116 Grant Pgm for Community-Based Organizations

An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity

within human services statewide.

POP 144 Pay Equity for CILs

All workers deserve to earn a wage that meets their basic needs for housing, food, and family life. Yet, Oregon's seven Centers for Independent Living (CILs) have been unable to provide livable wages for its employees, many of whom have disabilities. As a result, turnover and vacancies are high, and CILs struggle to fulfill their federally mandated role in supporting Oregonians with disabilities. This policy package requests $2,616,005 to allow all seven CILs across Oregon to adopt and implement salary and benefit standards that create pay equity for staff who play a vital role in their communities — helping Oregonians with disabilities to gain greater self-sufficiency and ability to participate in community life.

POP 145 RCDHH & VRCs

Everyone benefits from the independence, self-sufficiency, and fulfillment that employment brings. Vocational Rehabilitation helps people with all disabilities find jobs that match their skills and interests so they can enjoy this benefit. Yet our reporting shows we are underserving part of the population we serve — people of color who are deaf or hard of hearing. This policy package will add 46 full-time positions so VR can provide linguistically and culturally responsive employment services to better serve people of color who are deaf and hard of hearing throughout the state.

POP 146 Work Incentives Network (WIN)

Through benefits planning services, the Work Incentives Network (WIN) empowers Oregonians with disabilities to make informed decisions about how employment may affect their public benefits. However, current demand for services far exceeds capacity, and Oregonians cannot get these comprehensive benefits planning services. This means people cannot confidently moving forward with employment goals due to the uncertainty of how that work may impact their benefits. The problem is amplified because wages have remained stagnant in the past decade. As a result, WIN struggles to recruit and retain Work Incentive Coordinators (WIC) who deliver these benefit services.

This policy package is designed to improve timeliness of benefits planning services for all Oregonians with disabilities, with a specific focus on improving services to historically underserved groups — youth, tribal communities, Spanish-speaking communities, and rural communities. To this end, Vocational Rehabilitation (VR) is requesting position authority and funding for 12 non-budgeted, full-time WIC

positions. In addition, VR is requesting an increase in the base rates for current and proposed contracted positions to keep up with increased cost of living and operational expenses.

POP 147 Business/Contracts Unit

Every person with disabilities deserves access to employment opportunities. Oregon Department of Human Services Vocational Rehabilitation (VR) helps Oregonians with disabilities find jobs through contracting with hundreds of local service providers around the state. However, the VR Business Operations team does not have enough staff to maintain current contracts and keep up with the increased demand for new contracts, particularly in rural and Tribal communities. As a result, VR is not able to offer full services to all Oregonians with disabilities, particularly those who live in historically underserved communities. This policy option package requests three FTE positions — two to administer contracts and one to support the Business Operations Manager in covering five program areas.

POP 148 RSA Audit Report

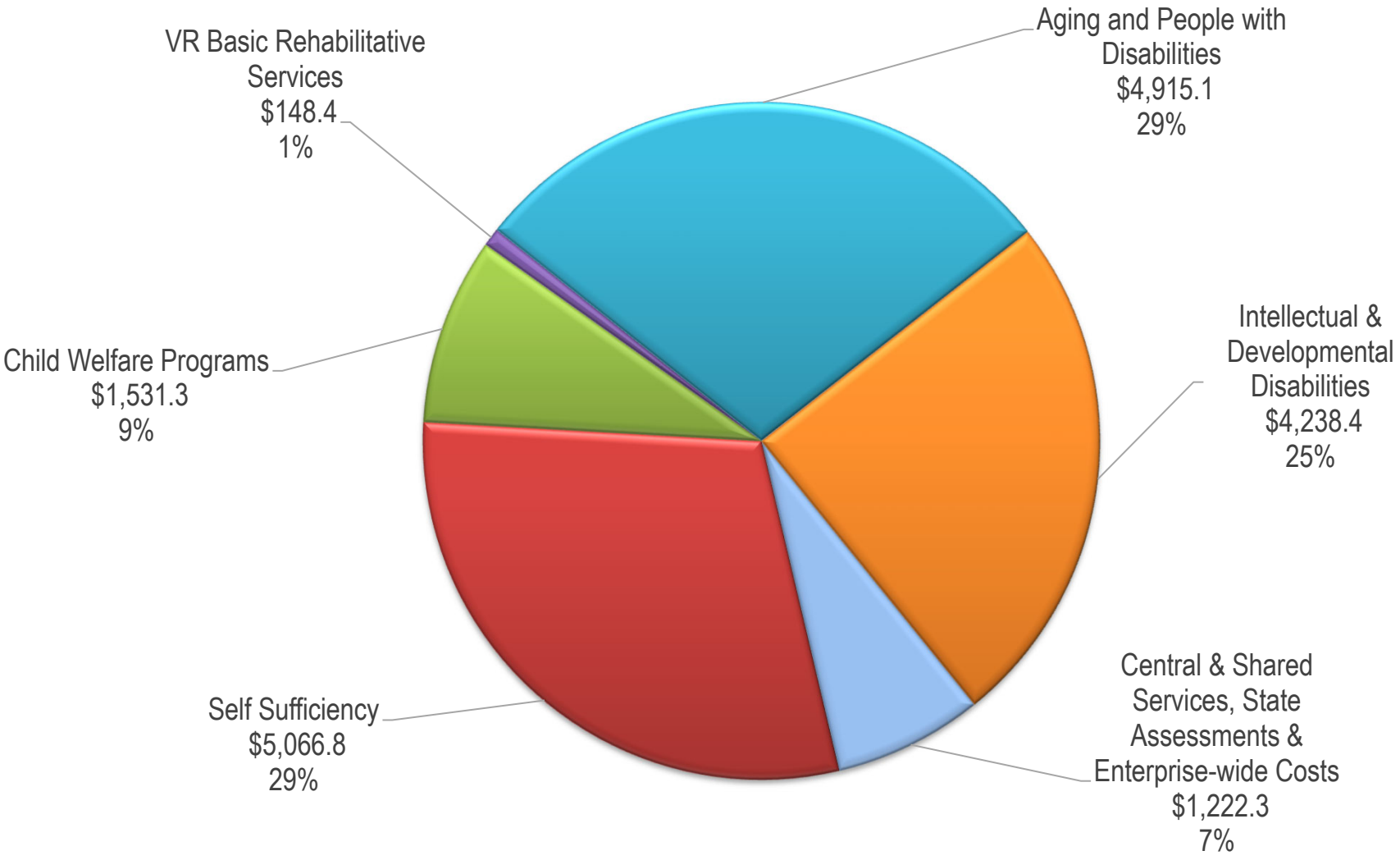
Placeholder. Early in 2022 the Rehabilitation Services Administration (RSA), VR's federal funders, came to Oregon to conduct a monitoring visit of Oregon Vocational Rehabilitation (VR). Two programs, the Youth Transition Program (YTP) and the Pre-Employment Transition Program (Pre-ETS), were evaluated in this monitoring process with RSA. YTP is a VR administrated program throughout the state. This program establishes contracts between local school districts and the VR program to deliver transition and employment related services to students with disabilities. Currently there are more than 220 schools participating in YTP. And the Pre-ETS Program is available and working with every school district in the state through contracts with local Education Service Districts and other Community Based Organizations. The goal of YTP and Pre-ETS is to assist students with disabilities to successfully transition from secondary school into postsecondary education or into competitive integrated employment. Although VR is still awaiting the final audit report from RSA, they indicated there are issues with how the YTP and Pre-ETS programs are operated. For instance, they indicated that VR has inappropriately sub-delegated some of its authority through a contract. Therefore, new VR positions will be needed to do the functions previously paid for through contract funding. This issue will be cost neutral but will require position authority. This PLACEHOLDER is included to allow for this, and other corrective actions required by the audit to be addressed. Once the final audit report is received, the POP will be updated.

Conclusion

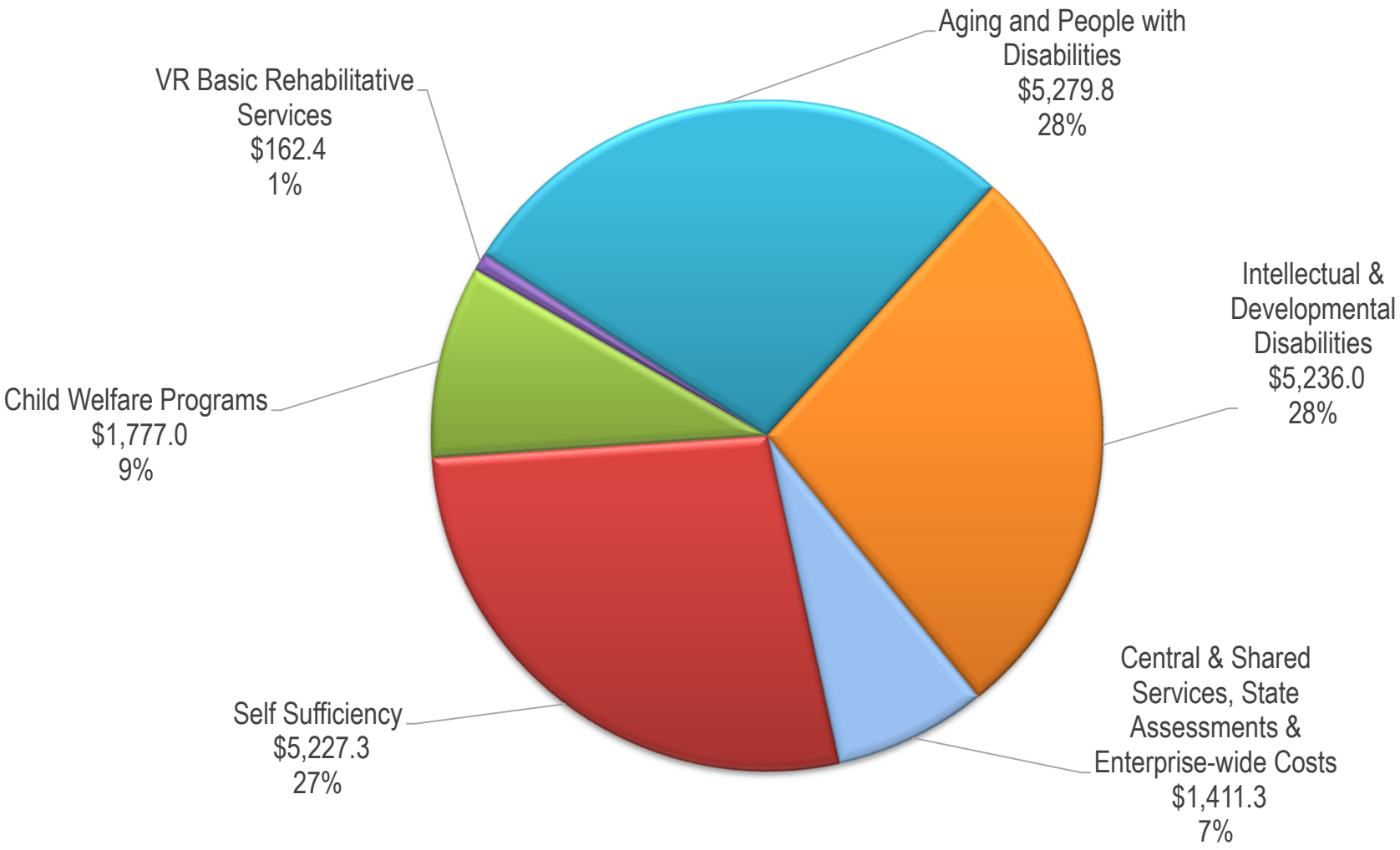
As the economy continues to recover from the impact of the pandemic, the focus on workforce development, employment and opportunity for *all* Oregonians will increase. The Vocational Rehabilitation program welcomes the opportunity to help the growing number of Oregonians with disabilities meet their employment goals,

This proposal represents the next phase of strategic investments required to leverage employment services to enhance the lives of Oregonians and contribute tolocal economies. VR will also continue to identify new ways to enhance its work with the Oregon Workforce Investment Board, Local Workforce Investment Boards, and the Workforce Policy cabinet in the implementation of the Oregon Workforce Talent Development Board's strategic plan and local board's efforts to better align economic and workforce development activities. All of these efforts will provide greater access for Oregonians who experience disabilities who are seeking competitive integrated employment. This is an intentional approach toequity for people with disabilities as the core mission for VR.

Oregon Department of Human Services
2021-23 Legislatively Approved Budget
Total Fund by Program Area
$ 17,122.3 million



Oregon Department of Human Services
2023-25 Agency Request Budget
Total Fund by Program Area
$ 19,093.8 million



Summary of 2023-25 Biennium Budget

Human Services, Dept. of
Department of Human Services
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-000-00-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	10,140	10,032.41	15,493,821,634	4,636,217,279	-	810,415,179	7,071,321,049	-	2,975,868,127
2021-23 Emergency Boards	314	242.02	1,615,765,540	170,967,119	-	132,310,774	606,487,647	-	706,000,000
2021-23 Leg Approved Budget	**10,454**	**10,274.43**	**17,109,587,174**	**4,807,184,398**	**-**	**942,725,953**	7,677,808,696	**-**	**3,681,868,127**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(154)	(29.77)	92,827,524	53,150,962	-	10,261,553	29,415,009	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			(11,790,521)	(9,733,755)	-	(2,056,766)	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**10,300**	**10,244.66**	**17,190,624,177**	**4,850,601,605**	**-**	**950,930,740**	7,707,223,705	**-**	**3,681,868,127**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(9,597,824)	(6,756,969)	-	(215,724)	(2,625,131)	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	14,049,151	7,611,608	-	1,842,641	4,594,902	-	-
Subtotal	**-**	**-**	**4,451,327**	**854,639**	**-**	**1,626,917**	1,969,771	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	12	12.00	318,553,559	124,864,917	-	3,854,009	189,834,633	-	-
022 - Phase-out Pgm & One-time Costs	-	(0.08)	(902,381,315)	(222,804,735)	-	(330,195,001)	(349,381,579)	-	-
Subtotal	**12**	**11.92**	**(583,827,756)**	**(97,939,818)**	**-**	**(326,340,992)**	(159,546,946)	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	862,106,969	303,265,405	-	23,383,681	535,457,883	-	-
State Gov"t & Services Charges Increase/(Decrease)			39,562,614	17,730,791	-	1,108,921	20,722,902	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
Subtotal	**-**	**-**	**901,669,583**	**320,996,196**	**-**	**24,492,602**	556,180,785	**-**	**-**
040 - Mandated Caseload									
040 - Mandated Caseload	35	35.00	(82,234,390)	(30,430,802)	-	(2,189,140)	(49,614,448)	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	467,056,429	-	(888,180)	(466,168,249)	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	(27)	(27.00)	(129,866,416)	(126,524,270)	-	(1,081,634)	(2,260,512)	-	-
Subtotal: 2023-25 Current Service Level	**10,320**	**10,264.58**	**17,300,816,525**	**5,384,613,979**	**-**	**646,550,313**	7,587,784,106	**-**	**3,681,868,127**

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
Subtotal: 2023-25 Current Service Level	**10,320**	**10,264.58**	**17,300,816,525**	**5,384,613,979**	**-**	**646,550,313**	7,587,784,106	**-**	**3,681,868,127**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**10,320**	**10,264.58**	**17,300,816,525**	**5,384,613,979**	**-**	**646,550,313**	7,587,784,106	**-**	**3,681,868,127**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	113	98.75	241,768,599	97,401,189	-	-	144,367,410	-	-
102 - Homecare Workforce	16	12.00	3,392,624	2,750,496	-	-	642,128	-	-
103 - Addressing Systemic Poverty Issues	2	2.00	22,699,053	8,120,329	-	974,849	13,603,875	-	-
104 - Equitable Access and Wellbeing	67	33.50	20,233,030	12,810,269	-	-	7,422,761	-	-
105 - Healthier Oregon Program (HOP)	79	61.00	77,817,335	77,817,335	-	-	-	-	-
106 - Chief Data Office	3	3.00	902,729	541,637	-	-	361,092	-	-
107 - Program Integrity (OPI)	8	6.00	1,421,742	710,871	-	-	710,871	-	-
108 - Strengthening Chief Financial Office	14	11.50	3,810,353	1,963,062	-	538,569	1,308,722	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	48	48.00	12,870,668	7,722,411	-	-	5,148,257	-	-
110 - Human Resources Staffing Stabilization	33	24.75	6,014,215	3,608,496	-	-	2,405,719	-	-
111 - Local Leadership	53	39.75	13,431,876	5,659,062	-	4,090,720	3,682,094	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	1	0.75	6,005,367	5,923,219	-	-	82,148	-	-
113 - Maintaining Critical Staffing	56	56.00	15,554,382	9,279,058	-	-	6,275,324	-	-
114 - Emergency Shelter and Feeding	-	-	35,000,000	35,000,000	-	-	-	-	-
115 - Refugee Program	8	7.00	9,839,763	8,639,164	-	-	1,200,599	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	19	14.25	26,136,852	25,070,146	-	-	1,066,706	-	-
117 - Tribal Liaisons	15	11.25	2,847,156	2,343,419	-	-	503,737	-	-
118 - Child Safety	401	200.50	50,052,182	37,538,083	-	-	12,514,099	-	-
119 - Parent Alcohol & Drug Support Services	8	6.00	1,451,284	1,088,443	-	-	362,841	-	-
120 - CIRT and Safety System Analysis	8	6.00	1,481,102	1,110,809	-	-	370,293	-	-
121 - Family Preservation & Engagement	193	96.50	24,348,494	18,260,864	-	-	6,087,630	-	-
122 - FOCUS Expansion	-	-	16,480,000	16,480,000	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	112,534,220	70,328,175	-	-	42,206,045	-	-
124 - SSB & Child Support Payments Package	-	-	-	6,282,923	-	(8,871,551)	2,588,628	-	-
125 - ARPA Positions	14	14.00	3,003,422	1,501,711	-	-	1,501,711	-	-
126 - Model Employer	29	24.09	4,069,712	2,034,856	-	-	2,034,856	-	-
127 - ODDS-OTIS Joint Quality Improvement	20	16.79	3,806,278	2,480,898	-	-	1,325,380	-	-
128 - Child Welfare and IDD Parents	2	1.50	952,442	387,997	-	-	564,445	-	-
129 - ODDS Systems	29	29.00	8,896,943	889,698	-	-	8,007,245	-	-
130 - CME Service Equity and Capacity	-	-	79,533,990	39,739,037	-	-	39,794,953	-	-
131 - Children's Foster Care Rates	1	1.00	8,545,726	3,086,303	-	-	5,459,423	-	-
132 - Targeted Rate Increases	-	-	456,212,617	162,144,945	-	-	294,067,672	-	-
133 - Children's Residential/CIIS Workload Model	10	7.50	1,588,450	794,225	-	-	794,225	-	-
134 - Total Worker Health (OHSE)	8	6.25	3,385,412	1,045,327	-	1,713,278	626,807	-	-
135 - TANF Redesign	-	-	143,887,918	118,887,918	-	-	25,000,000	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	4	3.25	13,342,228	13,342,228	-	-	-	-	-
137 - Housing Stabilization Program Expansion	4	3.52	83,972,130	83,972,130	-	-	-	-	-
138 - Survivor Investment Partnership	2	1.76	32,236,635	32,236,635	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	1	0.75	10,172,796	10,086,400	-	-	86,396	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
140 - Restaurant Meals Program	4	3.50	837,928	418,973	-	-	418,955	-	-
141 - Jackson County Demonstration	8	7.04	14,984,885	14,984,885	-	-	-	-	-
142 - Combined Eligibility Worker	615	461.25	92,678,719	53,889,008	-	-	38,789,711	-	-
143 - ONE Ongoing Maintenance	34	26.00	38,429,037	15,888,633	-	840,000	21,700,404	-	-
144 - Pay Equity for CILs	-	-	2,616,005	2,616,005	-	-	-	-	-
145 - RCDHH & VRCs	46	34.50	6,944,825	6,944,825	-	-	-	-	-
146 - Work Incentives Network (WIN)	1	0.75	3,211,060	3,211,060	-	-	-	-	-
147 - Business/Contracts Unit	3	2.25	461,616	461,616	-	-	-	-	-
148 - RSA Audit Report	-	-	1	1	-	-	-	-	-
201 - Medicaid Waiver Placeholder	32	12.80	5,865,751	2,481,243	-	-	3,384,508	-	-
202 - Basic Health Program	288	216.00	49,358,497	24,336,717	-	-	25,021,780	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	10	7.14	15,907,022	9,253,493	-	1,208,969	5,444,560	-	-
301 - ERDC Expansion - DELC companion	4	3.00	2,067,098	967,659	-	-	1,099,439	-	-
Subtotal Policy Packages	**2,314**	**1,622.14**	**1,793,062,169**	**1,064,533,886**	**-**	**494,834**	728,033,449	**-**	**-**
Total 2023-25 Agency Request Budget	**12,634**	**11,886.72**	**19,093,878,694**	**6,449,147,865**	**-**	**647,045,147**	8,315,817,555	**-**	**3,681,868,127**
Percentage Change From 2021-23 Leg Approved Budget	20.85%	15.69%	11.60%	34.16%	-	-31.36%	8.31%	-	-
Percentage Change From 2023-25 Current Service Level	22.42%	15.80%	10.36%	19.77%	-	0.08%	9.59%	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	1,042	1,032.33	1,092,852,820	529,503,798	-	221,478,915	341,870,107	-	-
2021-23 Emergency Boards	70	58.29	124,518,947	43,463,113	-	55,203,308	25,852,526	-	-
2021-23 Leg Approved Budget	**1,112**	**1,090.62**	**1,217,371,767**	**572,966,911**	**-**	**276,682,223**	367,722,633	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(8)	7.50	16,896,558	4,056,094	-	9,611,412	3,229,052	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			(11,790,521)	(9,733,755)	-	(2,056,766)	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**1,104**	**1,098.12**	**1,222,477,804**	**567,289,250**	**-**	**284,236,869**	370,951,685	**-**	**-**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(329,248)	(178,263)	-	(155,551)	4,566	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	1,904,701	1,077,592	-	507,717	319,392	-	-
Subtotal	**-**	**-**	**1,575,453**	**899,329**	**-**	**352,166**	323,958	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	1,953,634	988,265	-	96,362	869,007	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(98,900,529)	(97,636,870)	-	(122,430)	(1,141,229)	-	-
Subtotal	**-**	**-**	**(96,946,895)**	**(96,648,605)**	**-**	**(26,068)**	(272,222)	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	49,922,397	22,603,344	-	7,415,647	19,903,406	-	-
State Gov"t & Services Charges Increase/(Decrease)			39,562,614	17,730,791	-	1,108,921	20,722,902	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
Subtotal	**-**	**-**	**89,485,011**	**40,334,135**	**-**	**8,524,568**	40,626,308	**-**	**-**
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	2,129,880	1,482,520	-	(12)	647,372	-	-
Subtotal: 2023-25 Current Service Level	**1,104**	**1,098.12**	**1,218,721,253**	**513,356,629**	**-**	**293,087,523**	412,277,101	**-**	**-**

Human Services, Dept. of
DHS Central & Shared Services
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-010-00-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**1,104**	**1,098.12**	**1,218,721,253**	**513,356,629**	**-**	**293,087,523**	412,277,101	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**1,104**	**1,098.12**	**1,218,721,253**	**513,356,629**	**-**	**293,087,523**	412,277,101	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	3	3.00	902,729	541,637	-	-	361,092	-	-
107 - Program Integrity (OPI)	8	6.00	1,421,742	710,871	-	-	710,871	-	-
108 - Strengthening Chief Financial Office	14	11.50	3,810,353	1,963,062	-	538,569	1,308,722	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	48	48.00	12,870,668	7,722,411	-	-	5,148,257	-	-
110 - Human Resources Staffing Stabilization	33	24.75	6,014,215	3,608,496	-	-	2,405,719	-	-
111 - Local Leadership	53	39.75	13,431,876	5,659,062	-	4,090,720	3,682,094	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	1	0.75	6,005,367	5,923,219	-	-	82,148	-	-
113 - Maintaining Critical Staffing	55	55.00	15,018,468	9,011,101	-	-	6,007,367	-	-
114 - Emergency Shelter and Feeding	-	-	35,000,000	35,000,000	-	-	-	-	-
115 - Refugee Program	1	0.75	8,221,345	8,132,806	-	-	88,539	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	13	9.75	25,028,463	24,017,060	-	-	1,011,403	-	-
117 - Tribal Liaisons	6	4.50	1,259,328	755,591	-	-	503,737	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	8	6.25	3,385,412	1,045,327	-	1,713,278	626,807	-	-
135 - TANF Redesign	-	-	764,651	305,860	-	-	458,791	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	16	12.50	35,061,540	13,935,445	-	840,000	20,286,095	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	3,167,000	1,266,800	-	-	1,900,200	-	-
202 - Basic Health Program	-	-	3,425,315	1,370,126	-	-	2,055,189	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	10	7.14	15,907,022	9,253,493	-	1,208,969	5,444,560	-	-
301 - ERDC Expansion - DELC companion	4	3.00	1,984,298	925,431	-	-	1,058,867	-	-
Subtotal Policy Packages	**273**	**232.64**	**192,679,792**	**131,147,798**	**-**	**8,391,536**	53,140,458	**-**	**-**
Total 2023-25 Agency Request Budget	**1,377**	**1,330.76**	**1,411,401,045**	**644,504,427**	**-**	**301,479,059**	465,417,559	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	23.83%	22.02%	15.94%	12.49%	-	8.96%	26.57%	-	-
Percentage Change From 2023-25 Current Service Level	24.73%	21.19%	15.81%	25.55%	-	2.86%	12.89%	-	-

Summary of 2023-25 Biennium Budget

Human Services, Dept. of
DHS Central Services
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-010-40-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	340	335.61	300,008,829	185,729,161	-	2,706,143	111,573,525	-	-
2021-23 Emergency Boards	42	35.76	82,292,594	24,232,629	-	43,188,945	14,871,020	-	-
2021-23 Leg Approved Budget	**382**	**371.37**	**382,301,423**	**209,961,790**	**-**	**45,895,088**	126,444,545	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(3)	6.00	7,308,763	4,056,094	-	23,617	3,229,052	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**379**	**377.37**	**389,610,186**	**214,017,884**	**-**	**45,918,705**	129,673,597	**-**	**-**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(180,432)	(178,263)	-	(6,735)	4,566	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	725,550	438,790	-	9,444	277,316	-	-
Subtotal	**-**	**-**	**545,118**	**260,527**	**-**	**2,709**	281,882	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	941,507	477,612	-	14,542	449,353	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(97,558,031)	(96,882,031)	-	(100,000)	(576,000)	-	-
Subtotal	**-**	**-**	**(96,616,524)**	**(96,404,419)**	**-**	**(85,458)**	(126,647)	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	14,428,981	4,181,424	-	3,897,828	6,349,729	-	-
Subtotal	**-**	**-**	**14,428,981**	**4,181,424**	**-**	**3,897,828**	6,349,729	**-**	**-**

Human Services, Dept. of
DHS Central Services
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-010-40-00-00000

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	(22,512,072)	(8,449,178)	-	-	(14,062,894)	-	-
Subtotal: 2023-25 Current Service Level	**379**	**377.37**	**285,455,689**	**113,606,238**	**-**	**49,733,784**	122,115,667	**-**	**-**

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
Subtotal: 2023-25 Current Service Level	**379**	**377.37**	**285,455,689**	**113,606,238**	**-**	**49,733,784**	122,115,667	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**379**	**377.37**	**285,455,689**	**113,606,238**	**-**	**49,733,784**	122,115,667	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	3	3.00	902,729	541,637	-	-	361,092	-	-
107 - Program Integrity (OPI)	8	6.00	1,421,742	710,871	-	-	710,871	-	-
108 - Strengthening Chief Financial Office	11	9.25	2,710,123	1,626,069	-	-	1,084,054	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	48	48.00	12,870,668	7,722,411	-	-	5,148,257	-	-
110 - Human Resources Staffing Stabilization	33	24.75	6,014,215	3,608,496	-	-	2,405,719	-	-
111 - Local Leadership	29	21.75	5,306,651	3,183,973	-	-	2,122,678	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	1	0.75	6,005,367	5,923,219	-	-	82,148	-	-
113 - Maintaining Critical Staffing	55	55.00	15,018,468	9,011,101	-	-	6,007,367	-	-
114 - Emergency Shelter and Feeding	-	-	35,000,000	35,000,000	-	-	-	-	-
115 - Refugee Program	1	0.75	8,221,345	8,132,806	-	-	88,539	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	13	9.75	25,028,463	24,017,060	-	-	1,011,403	-	-
117 - Tribal Liaisons	6	4.50	1,259,328	755,591	-	-	503,737	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	764,651	305,860	-	-	458,791	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	16	12.50	35,061,540	13,935,445	-	840,000	20,286,095	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	3,167,000	1,266,800	-	-	1,900,200	-	-
202 - Basic Health Program	-	-	3,425,315	1,370,126	-	-	2,055,189	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	6	4.14	938,101	375,242	-	-	562,859	-	-
301 - ERDC Expansion - DELC companion	4	3.00	1,984,298	925,431	-	-	1,058,867	-	-
Subtotal Policy Packages	**234**	**203.14**	**165,100,004**	**118,412,138**	**-**	**840,000**	45,847,866	**-**	**-**
Total 2023-25 Agency Request Budget	**613**	**580.51**	**450,555,693**	**232,018,376**	**-**	**50,573,784**	167,963,533	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	60.47%	56.32%	17.85%	10.51%	-	10.19%	32.84%	-	-
Percentage Change From 2023-25 Current Service Level	61.74%	53.83%	57.84%	104.23%	-	1.69%	37.54%	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
2021-23 Leg Adopted Budget	702	696.72	167,299,992	-	-	167,299,992	-	-	-
2021-23 Emergency Boards	28	22.53	10,708,761	-	-	10,708,761	-	-	-
2021-23 Leg Approved Budget	**730**	**719.25**	**178,008,753**	**-**	**-**	**178,008,753**	-	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(5)	1.50	9,587,795	-	-	9,587,795	-	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**725**	**720.75**	**187,596,548**	**-**	**-**	**187,596,548**	-	**-**	**-**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(148,816)	-	-	(148,816)	-	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	489,236	-	-	489,236	-	-	-
Subtotal	**-**	**-**	**340,420**	**-**	**-**	**340,420**	-	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	62,861	-	-	62,861	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(21,866)	-	-	(21,866)	-	-	-
Subtotal	**-**	**-**	**40,995**	**-**	**-**	**40,995**	-	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	1,132,923	-	-	1,132,923	-	-	-
Subtotal	**-**	**-**	**1,132,923**	**-**	**-**	**1,132,923**	-	**-**	**-**

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2023-25 Current Service Level	**725**	**720.75**	**189,110,886**	**-**	**-**	**189,110,886**	-	**-**	**-**

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**725**	**720.75**	**189,110,886**	**-**	**-**	**189,110,886**	**-**	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**725**	**720.75**	**189,110,886**	**-**	**-**	**189,110,886**	**-**	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	3	2.25	538,569	-	-	538,569	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	24	18.00	3,963,960	-	-	3,963,960	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	-	-	-	-	-	-	-	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	8	6.25	1,655,715	-	-	1,655,715	-	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	-	-	-	-	-	-	-	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	4	3.00	747,465	-	-	747,465	-	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**39**	**29.50**	**6,905,709**	**-**	**-**	**6,905,709**	-	**-**	**-**
Total 2023-25 Agency Request Budget	**764**	**750.25**	**196,016,595**	**-**	**-**	**196,016,595**	-	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	4.66%	4.31%	10.12%	-	-	10.12%	-	-	-
Percentage Change From 2023-25 Current Service Level	5.38%	4.09%	3.65%	-	-	3.65%	-	-	-

Summary of 2023-25 Biennium Budget

Human Services, Dept. of | **Agency Request Budget**
State Assessments and Enterprise-wide Costs | **Cross Reference Number: 10000-010-50-00-00000**
2023-25 Biennium

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	-	-	625,543,999	343,774,637	-	51,472,780	230,296,582	-	-
2021-23 Emergency Boards	-	-	31,517,592	19,230,484	-	1,305,602	10,981,506	-	-
2021-23 Leg Approved Budget	**-**	**-**	**657,061,591**	**363,005,121**	**-**	**52,778,382**	241,278,088	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	-	-	-	-	-	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			(11,790,521)	(9,733,755)	-	(2,056,766)	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**-**	**-**	**645,271,070**	**353,271,366**	**-**	**50,721,616**	241,278,088	**-**	**-**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Non-PICS Personal Service Increase/(Decrease)	-	-	689,915	638,802	-	9,037	42,076	-	-
Subtotal	**-**	**-**	**689,915**	**638,802**	**-**	**9,037**	42,076	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	949,266	510,653	-	18,959	419,654	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(1,320,632)	(754,839)	-	(564)	(565,229)	-	-
Subtotal	**-**	**-**	**(371,366)**	**(244,186)**	**-**	**18,395**	(145,575)	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	34,360,493	18,421,920	-	2,384,896	13,553,677	-	-
State Gov"t & Services Charges Increase/(Decrease)			39,562,614	17,730,791	-	1,108,921	20,722,902	-	-
Subtotal	**-**	**-**	**73,923,107**	**36,152,711**	**-**	**3,493,817**	34,276,579	**-**	**-**

Human Services, Dept. of **Agency Request Budget**
State Assessments and Enterprise-wide Costs **Cross Reference Number: 10000-010-50-00-00000**
2023-25 Biennium

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	24,641,952	9,931,698	-	(12)	14,710,266	-	-
Subtotal: 2023-25 Current Service Level	**-**	**-**	**744,154,678**	**399,750,391**	**-**	**54,242,853**	290,161,434	**-**	**-**

Human Services, Dept. of
State Assessments and Enterprise-wide Costs
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-010-50-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**-**	**-**	**744,154,678**	**399,750,391**	**-**	**54,242,853**	290,161,434	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**-**	**-**	**744,154,678**	**399,750,391**	**-**	**54,242,853**	290,161,434	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	561,661	336,993	-	-	224,668	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	4,161,265	2,475,089	-	126,760	1,559,416	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	-	-	-	-	-	-	-	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	1,729,697	1,045,327	-	57,563	626,807	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	-	-	-	-	-	-	-	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	14,221,456	8,878,251	-	461,504	4,881,701	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**-**	**-**	**20,674,079**	**12,735,660**	**-**	**645,827**	7,292,592	**-**	**-**
Total 2023-25 Agency Request Budget	**-**	**-**	**764,828,757**	**412,486,051**	**-**	**54,888,680**	297,454,026	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	-	-	16.40%	13.63%	-	4.00%	23.28%	-	-
Percentage Change From 2023-25 Current Service Level	-	-	2.78%	3.19%	-	1.19%	2.51%	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
2021-23 Leg Adopted Budget	9,098	9,000.08	14,400,968,814	4,106,713,481	-	588,936,264	6,729,450,942	-	2,975,868,127
2021-23 Emergency Boards	244	183.73	1,491,246,593	127,504,006	-	77,107,466	580,635,121	-	706,000,000
2021-23 Leg Approved Budget	**9,342**	**9,183.81**	**15,892,215,407**	**4,234,217,487**	**-**	**666,043,730**	7,310,086,063	**-**	**3,681,868,127**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(146)	(37.27)	75,930,966	49,094,868	-	650,141	26,185,957	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**9,196**	**9,146.54**	**15,968,146,373**	**4,283,312,355**	**-**	**666,693,871**	7,336,272,020	**-**	**3,681,868,127**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(9,268,576)	(6,578,706)	-	(60,173)	(2,629,697)	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	12,144,450	6,534,016	-	1,334,924	4,275,510	-	-
Subtotal	**-**	**-**	**2,875,874**	**(44,690)**	**-**	**1,274,751**	1,645,813	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	12	12.00	316,599,925	123,876,652	-	3,757,647	188,965,626	-	-
022 - Phase-out Pgm & One-time Costs	-	(0.08)	(803,480,786)	(125,167,865)	-	(330,072,571)	(348,240,350)	-	-
Subtotal	**12**	**11.92**	**(486,880,861)**	**(1,291,213)**	**-**	**(326,314,924)**	(159,274,724)	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	812,184,572	280,662,061	-	15,968,034	515,554,477	-	-
Subtotal	**-**	**-**	**812,184,572**	**280,662,061**	**-**	**15,968,034**	515,554,477	**-**	**-**

Human Services, Dept. of
DHS Programs
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-00-00-00000

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
040 - Mandated Caseload									
040 - Mandated Caseload	35	35.00	(82,234,390)	(30,430,802)	-	(2,189,140)	(49,614,448)	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	467,056,429	-	(888,180)	(466,168,249)	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	(27)	(27.00)	(131,996,296)	(128,006,790)	-	(1,081,622)	(2,907,884)	-	-
Subtotal: 2023-25 Current Service Level	**9,216**	**9,166.46**	**16,082,095,272**	**4,871,257,350**	**-**	**353,462,790**	7,175,507,005	**-**	**3,681,868,127**

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**9,216**	**9,166.46**	**16,082,095,272**	**4,871,257,350**	**-**	**353,462,790**	7,175,507,005	**-**	**3,681,868,127**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**9,216**	**9,166.46**	**16,082,095,272**	**4,871,257,350**	**-**	**353,462,790**	7,175,507,005	**-**	**3,681,868,127**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	113	98.75	241,768,599	97,401,189	-	-	144,367,410	-	-
102 - Homecare Workforce	16	12.00	3,392,624	2,750,496	-	-	642,128	-	-
103 - Addressing Systemic Poverty Issues	2	2.00	22,699,053	8,120,329	-	974,849	13,603,875	-	-
104 - Equitable Access and Wellbeing	67	33.50	20,233,030	12,810,269	-	-	7,422,761	-	-
105 - Healthier Oregon Program (HOP)	79	61.00	77,817,335	77,817,335	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	1	1.00	535,914	267,957	-	-	267,957	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	7	6.25	1,618,418	506,358	-	-	1,112,060	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	6	4.50	1,108,389	1,053,086	-	-	55,303	-	-
117 - Tribal Liaisons	9	6.75	1,587,828	1,587,828	-	-	-	-	-
118 - Child Safety	401	200.50	50,052,182	37,538,083	-	-	12,514,099	-	-
119 - Parent Alcohol & Drug Support Services	8	6.00	1,451,284	1,088,443	-	-	362,841	-	-
120 - CIRT and Safety System Analysis	8	6.00	1,481,102	1,110,809	-	-	370,293	-	-
121 - Family Preservation & Engagement	193	96.50	24,348,494	18,260,864	-	-	6,087,630	-	-
122 - FOCUS Expansion	-	-	16,480,000	16,480,000	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	112,534,220	70,328,175	-	-	42,206,045	-	-
124 - SSB & Child Support Payments Package	-	-	-	6,282,923	-	(8,871,551)	2,588,628	-	-
125 - ARPA Positions	14	14.00	3,003,422	1,501,711	-	-	1,501,711	-	-
126 - Model Employer	29	24.09	4,069,712	2,034,856	-	-	2,034,856	-	-
127 - ODDS-OTIS Joint Quality Improvement	20	16.79	3,806,278	2,480,898	-	-	1,325,380	-	-
128 - Child Welfare and IDD Parents	2	1.50	952,442	387,997	-	-	564,445	-	-
129 - ODDS Systems	29	29.00	8,896,943	889,698	-	-	8,007,245	-	-
130 - CME Service Equity and Capacity	-	-	79,533,990	39,739,037	-	-	39,794,953	-	-
131 - Children's Foster Care Rates	1	1.00	8,545,726	3,086,303	-	-	5,459,423	-	-
132 - Targeted Rate Increases	-	-	456,212,617	162,144,945	-	-	294,067,672	-	-
133 - Children's Residential/CIIS Workload Model	10	7.50	1,588,450	794,225	-	-	794,225	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	143,123,267	118,582,058	-	-	24,541,209	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	4	3.25	13,342,228	13,342,228	-	-	-	-	-
137 - Housing Stabilization Program Expansion	4	3.52	83,972,130	83,972,130	-	-	-	-	-
138 - Survivor Investment Partnership	2	1.76	32,236,635	32,236,635	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	1	0.75	10,172,796	10,086,400	-	-	86,396	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	4	3.50	837,928	418,973	-	-	418,955	-	-
141 - Jackson County Demonstration	8	7.04	14,984,885	14,984,885	-	-	-	-	-
142 - Combined Eligibility Worker	615	461.25	92,678,719	53,889,008	-	-	38,789,711	-	-
143 - ONE Ongoing Maintenance	18	13.50	3,367,497	1,953,188	-	-	1,414,309	-	-
144 - Pay Equity for CILs	-	-	2,616,005	2,616,005	-	-	-	-	-
145 - RCDHH & VRCs	46	34.50	6,944,825	6,944,825	-	-	-	-	-
146 - Work Incentives Network (WIN)	1	0.75	3,211,060	3,211,060	-	-	-	-	-
147 - Business/Contracts Unit	3	2.25	461,616	461,616	-	-	-	-	-
148 - RSA Audit Report	-	-	1	1	-	-	-	-	-
201 - Medicaid Waiver Placeholder	32	12.80	2,698,751	1,214,443	-	-	1,484,308	-	-
202 - Basic Health Program	288	216.00	45,933,182	22,966,591	-	-	22,966,591	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	82,800	42,228	-	-	40,572	-	-
Subtotal Policy Packages	**2,041**	**1,389.50**	**1,600,382,377**	**933,386,088**	**-**	**(7,896,702)**	674,892,991	**-**	**-**
Total 2023-25 Agency Request Budget	**11,257**	**10,555.96**	**17,682,477,649**	**5,804,643,438**	**-**	**345,566,088**	7,850,399,996	**-**	**3,681,868,127**
Percentage Change From 2021-23 Leg Approved Budget	20.50%	14.94%	11.27%	37.09%	-	-48.12%	7.39%	-	-
Percentage Change From 2023-25 Current Service Level	22.15%	15.16%	9.95%	19.16%	-	-2.23%	9.41%	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	2,740	2,736.77	4,256,711,697	506,780,130	-	228,308,065	545,755,375	-	2,975,868,127
2021-23 Emergency Boards	47	28.16	810,092,205	58,199,374	-	(493,342)	46,386,173	-	706,000,000
2021-23 Leg Approved Budget	**2,787**	**2,764.93**	**5,066,803,902**	**564,979,504**	**-**	**227,814,723**	592,141,548	**-**	**3,681,868,127**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(26)	(6.71)	21,975,970	13,420,160	-	(4,643)	8,560,453	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**2,761**	**2,758.22**	**5,088,779,872**	**578,399,664**	**-**	**227,810,080**	600,702,001	**-**	**3,681,868,127**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(2,017,292)	(1,615,138)	-	(3,038)	(399,116)	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	5,982,815	3,639,895	-	11,053	2,331,867	-	-
Subtotal	**-**	**-**	**3,965,523**	**2,024,757**	**-**	**8,015**	1,932,751	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	7	7.00	55,249,760	28,147,220	-	-	27,102,540	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(259,410,209)	(21,115,533)	-	(225,319,071)	(12,975,605)	-	-
Subtotal	**7**	**7.00**	**(204,160,449)**	**7,031,687**	**-**	**(225,319,071)**	14,126,935	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	18,288,994	11,062,184	-	8,919	7,217,891	-	-
Subtotal	**-**	**-**	**18,288,994**	**11,062,184**	**-**	**8,919**	7,217,891	**-**	**-**

Human Services, Dept. of
Self Sufficiency - Program
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-01-00-00000

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
040 - Mandated Caseload									
040 - Mandated Caseload	47	47.00	9,403,238	5,826,461	-	-	3,576,777	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	586,984	-	-	(586,984)	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	(24)	(24.00)	(127,926,690)	(126,178,472)	-	(146)	(1,748,072)	-	-
Subtotal: 2023-25 Current Service Level	**2,791**	**2,788.22**	**4,788,350,488**	**478,753,265**	**-**	**2,507,797**	625,221,299	**-**	**3,681,868,127**

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**2,791**	**2,788.22**	**4,788,350,488**	**478,753,265**	**-**	**2,507,797**	625,221,299	**-**	**3,681,868,127**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**2,791**	**2,788.22**	**4,788,350,488**	**478,753,265**	**-**	**2,507,797**	625,221,299	**-**	**3,681,868,127**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	66	49.50	9,482,114	9,482,114	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	7	6.25	1,618,418	506,358	-	-	1,112,060	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	2	1.50	363,495	363,495	-	-	-	-	-
117 - Tribal Liaisons	9	6.75	1,587,828	1,587,828	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	143,123,267	118,582,058	-	-	24,541,209	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	4	3.25	13,342,228	13,342,228	-	-	-	-	-
137 - Housing Stabilization Program Expansion	4	3.52	83,972,130	83,972,130	-	-	-	-	-
138 - Survivor Investment Partnership	2	1.76	32,236,635	32,236,635	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	1	0.75	10,172,796	10,086,400	-	-	86,396	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	4	3.50	837,928	418,973	-	-	418,955	-	-
141 - Jackson County Demonstration	8	7.04	14,984,885	14,984,885	-	-	-	-	-
142 - Combined Eligibility Worker	559	419.25	78,448,562	45,501,478	-	-	32,947,084	-	-
143 - ONE Ongoing Maintenance	18	13.50	3,367,497	1,953,188	-	-	1,414,309	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	32	12.80	2,698,751	1,214,443	-	-	1,484,308	-	-
202 - Basic Health Program	275	206.25	42,672,794	21,336,397	-	-	21,336,397	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**991**	**735.62**	**438,909,328**	**355,568,610**	**-**	**-**	83,340,718	**-**	**-**
Total 2023-25 Agency Request Budget	**3,782**	**3,523.84**	**5,227,259,816**	**834,321,875**	**-**	**2,507,797**	708,562,017	**-**	**3,681,868,127**
Percentage Change From 2021-23 Leg Approved Budget	35.70%	27.45%	3.17%	47.67%	-	-98.90%	19.66%	-	-
Percentage Change From 2023-25 Current Service Level	35.51%	26.38%	9.17%	74.27%	-	-	13.33%	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
2021-23 Leg Adopted Budget	-	-	-	-	-	-	-	-	-
2021-23 Emergency Boards	-	-	-	-	-	-	-	-	-
2021-23 Leg Approved Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	-	-	-	-	-	-	-
Estimated Cost of Merit Increase				-	-	-	-	-	-
Base Debt Service Adjustment				-	-	-	-	-	-
Base Nonlimited Adjustment				-	-	-	-	-	-
Capital Construction				-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	-	-	-	-	-	-	-
Subtotal	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	-	-	-	-	-	-	-	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	-	-	-	-	-	-	-	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Total 2023-25 Agency Request Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	-	-	-	-	-	-	-	-	-
Percentage Change From 2023-25 Current Service Level	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
2021-23 Leg Adopted Budget	-	-	-	-	-	-	-	-	-
2021-23 Emergency Boards	-	-	-	-	-	-	-	-	-
2021-23 Leg Approved Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	-	-	-	-	-	-	-
Estimated Cost of Merit Increase				-	-	-	-	-	-
Base Debt Service Adjustment				-	-	-	-	-	-
Base Nonlimited Adjustment				-	-	-	-	-	-
Capital Construction				-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	-	-	-	-	-	-	-
Subtotal	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	-	-	-	-	-	-	-	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	-	-	-	-	-	-	-	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Total 2023-25 Agency Request Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	-	-	-	-	-	-	-	-	-
Percentage Change From 2023-25 Current Service Level	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	-	-	-	-	-	-	-	-	-
2021-23 Emergency Boards	-	-	-	-	-	-	-	-	-
2021-23 Leg Approved Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	-	-	-	-	-	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	-	-	-	-	-	-	-
Subtotal	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

Human Services, Dept. of
Permanency
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-04-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	-	-	-	-	-	-	-	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	-	-	-	-	-	-	-	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Total 2023-25 Agency Request Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	-	-	-	-	-	-	-	-	-
Percentage Change From 2023-25 Current Service Level	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
2021-23 Leg Adopted Budget	-	-	-	-	-	-	-	-	-
2021-23 Emergency Boards	-	-	-	-	-	-	-	-	-
2021-23 Leg Approved Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	-	-	-	-	-	-	-
Estimated Cost of Merit Increase				-	-	-	-	-	-
Base Debt Service Adjustment				-	-	-	-	-	-
Base Nonlimited Adjustment				-	-	-	-	-	-
Capital Construction				-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	-	-	-	-	-	-	-
Subtotal	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
116 - Grant Pgm for Community-Based Organizations	-	-	-	-	-	-	-	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	-	-	-	-	-	-	-	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Total 2023-25 Agency Request Budget	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	-	-	-	-	-	-	-	-	-
Percentage Change From 2023-25 Current Service Level	-	-	-	-	-	-	-	-	-

Summary of 2023-25 Biennium Budget

Human Services, Dept. of | **Agency Request Budget**
VR - Basic Rehabilitative Services | **Cross Reference Number: 10000-060-07-00-00000**
2023-25 Biennium

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	262	261.04	125,269,611	35,731,323	-	4,964,436	84,573,852	-	-
2021-23 Emergency Boards	7	4.85	23,114,537	572,151	-	3,620,030	18,922,356	-	-
2021-23 Leg Approved Budget	**269**	**265.89**	**148,384,148**	**36,303,474**	**-**	**8,584,466**	103,496,208	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(3)	(0.85)	1,781,709	589,781	-	88,164	1,103,764	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**266**	**265.04**	**150,165,857**	**36,893,255**	**-**	**8,672,630**	104,599,972	**-**	**-**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(203,868)	(48,831)	-	(2,843)	(152,194)	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	182,628	66,561	-	12,913	103,154	-	-
Subtotal	**-**	**-**	**(21,240)**	**17,730**	**-**	**10,070**	(49,040)	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	3	3.00	4,440,142	11,383	-	3,751,200	677,559	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(10,000,000)	-	-	-	(10,000,000)	-	-
Subtotal	**3**	**3.00**	**(5,559,858)**	**11,383**	**-**	**3,751,200**	(9,322,441)	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	4,362,091	1,875,148	-	319,631	2,167,312	-	-
Subtotal	**-**	**-**	**4,362,091**	**1,875,148**	**-**	**319,631**	2,167,312	**-**	**-**

Human Services, Dept. of
VR - Basic Rehabilitative Services
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-07-00-00000

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	1,900,000	-	(1,900,000)	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2023-25 Current Service Level	**269**	**268.04**	**148,946,850**	**40,697,516**	**-**	**10,853,531**	97,395,803	**-**	**-**

Human Services, Dept. of
VR - Basic Rehabilitative Services
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-07-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**269**	**268.04**	**148,946,850**	**40,697,516**	**-**	**10,853,531**	97,395,803	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**269**	**268.04**	**148,946,850**	**40,697,516**	**-**	**10,853,531**	97,395,803	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	1	0.75	190,700	190,700	-	-	-	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	2,616,005	2,616,005	-	-	-	-	-
145 - RCDHH & VRCs	46	34.50	6,944,825	6,944,825	-	-	-	-	-
146 - Work Incentives Network (WIN)	1	0.75	3,211,060	3,211,060	-	-	-	-	-
147 - Business/Contracts Unit	3	2.25	461,616	461,616	-	-	-	-	-
148 - RSA Audit Report	-	-	1	1	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	-	-	-	-	-	-	-	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**51**	**38.25**	**13,424,207**	**13,424,207**	**-**	**-**	-	**-**	**-**
Total 2023-25 Agency Request Budget	**320**	**306.29**	**162,371,057**	**54,121,723**	**-**	**10,853,531**	97,395,803	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	18.96%	15.19%	9.43%	49.08%	-	26.43%	-5.89%	-	-
Percentage Change From 2023-25 Current Service Level	18.96%	14.27%	9.01%	32.99%	-	-	-	-	-

Summary of 2023-25 Biennium Budget

Human Services, Dept. of
Aging and People with Disabilities APD
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-08-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	1,817	1,772.34	4,673,966,479	1,436,480,080	-	295,125,683	2,942,360,716	-	-
2021-23 Emergency Boards	60	42.07	236,738,494	9,401,367	-	70,051,859	157,285,268	-	-
2021-23 Leg Approved Budget	**1,877**	**1,814.41**	**4,910,704,973**	**1,445,881,447**	**-**	**365,177,542**	3,099,645,984	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(52)	2.14	18,520,534	10,280,464	-	544,731	7,695,339	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**1,825**	**1,816.55**	**4,929,225,507**	**1,456,161,911**	**-**	**365,722,273**	3,107,341,323	**-**	**-**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(1,442,476)	(813,743)	-	(21,292)	(607,441)	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	2,257,732	482,993	-	1,301,687	473,052	-	-
Subtotal	**-**	**-**	**815,256**	**(330,750)**	**-**	**1,280,395**	(134,389)	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	99,214,838	34,497,947	-	6,447	64,710,444	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(396,983,854)	(102,545,785)	-	(100,656,500)	(193,781,569)	-	-
Subtotal	**-**	**-**	**(297,769,016)**	**(68,047,838)**	**-**	**(100,650,053)**	(129,071,125)	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	471,186,695	155,315,031	-	13,286,933	302,584,731	-	-
Subtotal	**-**	**-**	**471,186,695**	**155,315,031**	**-**	**13,286,933**	302,584,731	**-**	**-**

Human Services, Dept. of
Aging and People with Disabilities APD
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-08-00-00000

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
040 - Mandated Caseload									
040 - Mandated Caseload	(12)	(12.00)	(160,780,667)	(51,975,394)	-	(1,376,620)	(107,428,653)	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	202,544,341	-	134,745	(202,679,086)	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	(2,658,721)	(1,828,318)	-	-	(830,403)	-	-
Subtotal: 2023-25 Current Service Level	**1,813**	**1,804.55**	**4,940,019,054**	**1,691,838,983**	**-**	**278,397,673**	2,969,782,398	**-**	**-**

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
Subtotal: 2023-25 Current Service Level	**1,813**	**1,804.55**	**4,940,019,054**	**1,691,838,983**	**-**	**278,397,673**	2,969,782,398	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**1,813**	**1,804.55**	**4,940,019,054**	**1,691,838,983**	**-**	**278,397,673**	2,969,782,398	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	113	98.75	241,768,599	97,401,189	-	-	144,367,410	-	-
102 - Homecare Workforce	16	12.00	3,392,624	2,750,496	-	-	642,128	-	-
103 - Addressing Systemic Poverty Issues	2	2.00	22,699,053	8,120,329	-	974,849	13,603,875	-	-
104 - Equitable Access and Wellbeing	67	33.50	20,233,030	12,810,269	-	-	7,422,761	-	-
105 - Healthier Oregon Program (HOP)	13	11.50	34,021,811	34,021,811	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	1	0.75	190,700	190,700	-	-	-	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	56	42.00	14,230,157	8,387,530	-	-	5,842,627	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	13	9.75	3,260,388	1,630,194	-	-	1,630,194	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**281**	**210.25**	**339,796,362**	**165,312,518**	**-**	**974,849**	173,508,995	**-**	**-**
Total 2023-25 Agency Request Budget	**2,094**	**2,014.80**	**5,279,815,416**	**1,857,151,501**	**-**	**279,372,522**	3,143,291,393	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	11.56%	11.04%	7.52%	28.44%	-	-23.50%	1.41%	-	-
Percentage Change From 2023-25 Current Service Level	15.50%	11.65%	6.88%	9.77%	-	0.35%	5.84%	-	-

Summary of 2023-25 Biennium Budget

Human Services, Dept. of | **Agency Request Budget**
Intellectual & Devlpmnt'l Disabilities - I/DD | **Cross Reference Number: 10000-060-09-00-00000**
2023-25 Biennium

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	938	934.81	3,854,399,491	1,237,078,491	-	22,825,621	2,594,495,379	-	-
2021-23 Emergency Boards	69	55.92	380,599,478	30,216,490	-	6,628,242	343,754,746	-	-
2021-23 Leg Approved Budget	**1,007**	**990.73**	**4,234,998,969**	**1,267,294,981**	**-**	**29,453,863**	2,938,250,125	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(59)	(43.48)	72,489	(277,061)	-	24,753	324,797	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**948**	**947.25**	**4,235,071,458**	**1,267,017,920**	**-**	**29,478,616**	2,938,574,922	**-**	**-**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(618,596)	(238,973)	-	(36,162)	(343,461)	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	1,263,529	518,467	-	15,311	729,751	-	-
Subtotal	**-**	**-**	**644,933**	**279,494**	**-**	**(20,851)**	386,290	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	137,358,024	47,185,446	-	-	90,172,578	-	-
022 - Phase-out Pgm & One-time Costs	-	(0.08)	(128,359,238)	(1,256,547)	-	(3,347,000)	(123,755,691)	-	-
Subtotal	**-**	**(0.08)**	**8,998,786**	**45,928,899**	**-**	**(3,347,000)**	(33,583,113)	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	252,732,717	78,387,152	-	1,349,740	172,995,825	-	-
Subtotal	**-**	**-**	**252,732,717**	**78,387,152**	**-**	**1,349,740**	172,995,825	**-**	**-**

Human Services, Dept. of
Intellectual & Devlpmnt'l Disabilities - I/DD
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-09-00-00000

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	138,325,807	51,867,438	-	-	86,458,369	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	240,893,328	-	877,075	(241,770,403)	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	(3)	(3.00)	(1,410,885)	-	-	(1,081,476)	(329,409)	-	-
Subtotal: 2023-25 Current Service Level	**945**	**944.17**	**4,634,362,816**	**1,684,374,231**	**-**	**27,256,104**	2,922,732,481	**-**	**-**

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
Subtotal: 2023-25 Current Service Level	**945**	**944.17**	**4,634,362,816**	**1,684,374,231**	**-**	**27,256,104**	2,922,732,481	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**945**	**944.17**	**4,634,362,816**	**1,684,374,231**	**-**	**27,256,104**	2,922,732,481	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	34,313,410	34,313,410	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	1	1.00	535,914	267,957	-	-	267,957	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	1	0.75	172,795	172,795	-	-	-	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	-	-	-	-	-	-	-	-	-
119 - Parent Alcohol & Drug Support Services	-	-	-	-	-	-	-	-	-
120 - CIRT and Safety System Analysis	-	-	-	-	-	-	-	-	-
121 - Family Preservation & Engagement	-	-	-	-	-	-	-	-	-
122 - FOCUS Expansion	-	-	-	-	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	-	-	-	-	-	-	-
124 - SSB & Child Support Payments Package	-	-	-	-	-	-	-	-	-
125 - ARPA Positions	14	14.00	3,003,422	1,501,711	-	-	1,501,711	-	-
126 - Model Employer	29	24.09	4,069,712	2,034,856	-	-	2,034,856	-	-
127 - ODDS-OTIS Joint Quality Improvement	20	16.79	3,806,278	2,480,898	-	-	1,325,380	-	-
128 - Child Welfare and IDD Parents	2	1.50	952,442	387,997	-	-	564,445	-	-
129 - ODDS Systems	29	29.00	8,896,943	889,698	-	-	8,007,245	-	-
130 - CME Service Equity and Capacity	-	-	79,533,990	39,739,037	-	-	39,794,953	-	-
131 - Children's Foster Care Rates	1	1.00	8,545,726	3,086,303	-	-	5,459,423	-	-
132 - Targeted Rate Increases	-	-	456,212,617	162,144,945	-	-	294,067,672	-	-
133 - Children's Residential/CIIS Workload Model	10	7.50	1,588,450	794,225	-	-	794,225	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	-	-	-	-	-	-	-	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	-	-	-	-	-	-	-
Subtotal Policy Packages	**107**	**95.63**	**601,631,699**	**247,813,832**	**-**	**-**	353,817,867	**-**	**-**
Total 2023-25 Agency Request Budget	**1,052**	**1,039.80**	**5,235,994,515**	**1,932,188,063**	**-**	**27,256,104**	3,276,550,348	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	4.47%	4.95%	23.64%	52.47%	-	-7.46%	11.51%	-	-
Percentage Change From 2023-25 Current Service Level	11.32%	10.13%	12.98%	14.71%	-	-	12.11%	-	-

Summary of 2023-25 Biennium Budget

Human Services, Dept. of
Child Welfare Programs
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-10-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2021-23 Leg Adopted Budget	3,341	3,295.12	1,490,621,536	890,643,457	-	37,712,459	562,265,620	-	-
2021-23 Emergency Boards	61	52.73	40,701,879	29,114,624	-	(2,699,323)	14,286,578	-	-
2021-23 Leg Approved Budget	**3,402**	**3,347.85**	**1,531,323,415**	**919,758,081**	**-**	**35,013,136**	576,552,198	**-**	**-**
2023-25 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(6)	11.63	33,580,264	25,081,524	-	(2,864)	8,501,604	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2023-25 Base Budget	**3,396**	**3,359.48**	**1,564,903,679**	**944,839,605**	**-**	**35,010,272**	585,053,802	**-**	**-**
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(4,986,344)	(3,862,021)	-	3,162	(1,127,485)	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	2,457,746	1,826,100	-	(6,040)	637,686	-	-
Subtotal	**-**	**-**	**(2,528,598)**	**(2,035,921)**	**-**	**(2,878)**	(489,799)	**-**	**-**
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	2	2.00	20,337,161	14,034,656	-	-	6,302,505	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(8,727,485)	(250,000)	-	(750,000)	(7,727,485)	-	-
Subtotal	**2**	**2.00**	**11,609,676**	**13,784,656**	**-**	**(750,000)**	(1,424,980)	**-**	**-**
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	65,614,075	34,022,546	-	1,002,811	30,588,718	-	-
Subtotal	**-**	**-**	**65,614,075**	**34,022,546**	**-**	**1,002,811**	30,588,718	**-**	**-**

Human Services, Dept. of
Child Welfare Programs
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-10-00-00000

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	(69,182,768)	(36,149,307)	-	(812,520)	(32,220,941)	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	21,131,776	-	-	(21,131,776)	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2023-25 Current Service Level	**3,398**	**3,361.48**	**1,570,416,064**	**975,593,355**	**-**	**34,447,685**	560,375,024	**-**	**-**

Human Services, Dept. of
Child Welfare Programs
2023-25 Biennium

Agency Request Budget
Cross Reference Number: 10000-060-10-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2023-25 Current Service Level	**3,398**	**3,361.48**	**1,570,416,064**	**975,593,355**	**-**	**34,447,685**	560,375,024	**-**	**-**
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2023-25 Current Service Level	**3,398**	**3,361.48**	**1,570,416,064**	**975,593,355**	**-**	**34,447,685**	560,375,024	**-**	**-**
080 - E-Boards									
081 - June 2022 Emergency Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	**-**	**-**	**-**	**-**	**-**	**-**	-	**-**	**-**
Policy Packages									
101 - Infrastructure, Access and Emergency	-	-	-	-	-	-	-	-	-
102 - Homecare Workforce	-	-	-	-	-	-	-	-	-
103 - Addressing Systemic Poverty Issues	-	-	-	-	-	-	-	-	-
104 - Equitable Access and Wellbeing	-	-	-	-	-	-	-	-	-
105 - Healthier Oregon Program (HOP)	-	-	-	-	-	-	-	-	-
106 - Chief Data Office	-	-	-	-	-	-	-	-	-
107 - Program Integrity (OPI)	-	-	-	-	-	-	-	-	-
108 - Strengthening Chief Financial Office	-	-	-	-	-	-	-	-	-
109 - Ofc of Resiliency and Emergency Mgt Staffing	-	-	-	-	-	-	-	-	-
110 - Human Resources Staffing Stabilization	-	-	-	-	-	-	-	-	-
111 - Local Leadership	-	-	-	-	-	-	-	-	-
112 - Ofc of Resiliency and Emergency Mgt 211	-	-	-	-	-	-	-	-	-
113 - Maintaining Critical Staffing	-	-	-	-	-	-	-	-	-
114 - Emergency Shelter and Feeding	-	-	-	-	-	-	-	-	-
115 - Refugee Program	-	-	-	-	-	-	-	-	-

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
116 - Grant Pgm for Community-Based Organizations	1	0.75	190,699	135,396	-	-	55,303	-	-
117 - Tribal Liaisons	-	-	-	-	-	-	-	-	-
118 - Child Safety	401	200.50	50,052,182	37,538,083	-	-	12,514,099	-	-
119 - Parent Alcohol & Drug Support Services	8	6.00	1,451,284	1,088,443	-	-	362,841	-	-
120 - CIRT and Safety System Analysis	8	6.00	1,481,102	1,110,809	-	-	370,293	-	-
121 - Family Preservation & Engagement	193	96.50	24,348,494	18,260,864	-	-	6,087,630	-	-
122 - FOCUS Expansion	-	-	16,480,000	16,480,000	-	-	-	-	-
123 - FC/Resource Parent Reimbursement Rates	-	-	112,534,220	70,328,175	-	-	42,206,045	-	-
124 - SSB & Child Support Payments Package	-	-	-	6,282,923	-	(8,871,551)	2,588,628	-	-
125 - ARPA Positions	-	-	-	-	-	-	-	-	-
126 - Model Employer	-	-	-	-	-	-	-	-	-
127 - ODDS-OTIS Joint Quality Improvement	-	-	-	-	-	-	-	-	-
128 - Child Welfare and IDD Parents	-	-	-	-	-	-	-	-	-
129 - ODDS Systems	-	-	-	-	-	-	-	-	-
130 - CME Service Equity and Capacity	-	-	-	-	-	-	-	-	-
131 - Children's Foster Care Rates	-	-	-	-	-	-	-	-	-
132 - Targeted Rate Increases	-	-	-	-	-	-	-	-	-
133 - Children's Residential/CIIS Workload Model	-	-	-	-	-	-	-	-	-
134 - Total Worker Health (OHSE)	-	-	-	-	-	-	-	-	-
135 - TANF Redesign	-	-	-	-	-	-	-	-	-
136 - Youth Experiencing Homelessness Pgm Expansion	-	-	-	-	-	-	-	-	-
137 - Housing Stabilization Program Expansion	-	-	-	-	-	-	-	-	-
138 - Survivor Investment Partnership	-	-	-	-	-	-	-	-	-
139 - Local Food Purchasing Infrastructure	-	-	-	-	-	-	-	-	-

Description	*Positions*	*Full-Time Equivalent (FTE)*	*ALL FUNDS*	*General Fund*	*Lottery Funds*	*Other Funds*	*Federal Funds*	*Nonlimited Other Funds*	*Nonlimited Federal Funds*
140 - Restaurant Meals Program	-	-	-	-	-	-	-	-	-
141 - Jackson County Demonstration	-	-	-	-	-	-	-	-	-
142 - Combined Eligibility Worker	-	-	-	-	-	-	-	-	-
143 - ONE Ongoing Maintenance	-	-	-	-	-	-	-	-	-
144 - Pay Equity for CILs	-	-	-	-	-	-	-	-	-
145 - RCDHH & VRCs	-	-	-	-	-	-	-	-	-
146 - Work Incentives Network (WIN)	-	-	-	-	-	-	-	-	-
147 - Business/Contracts Unit	-	-	-	-	-	-	-	-	-
148 - RSA Audit Report	-	-	-	-	-	-	-	-	-
201 - Medicaid Waiver Placeholder	-	-	-	-	-	-	-	-	-
202 - Basic Health Program	-	-	-	-	-	-	-	-	-
203 - Mainframe Migration/Provider & Client Pmt Sys	-	-	-	-	-	-	-	-	-
301 - ERDC Expansion - DELC companion	-	-	82,800	42,228	-	-	40,572	-	-
Subtotal Policy Packages	**611**	**309.75**	**206,620,781**	**151,266,921**	**-**	**(8,871,551)**	64,225,411	**-**	**-**
Total 2023-25 Agency Request Budget	**4,009**	**3,671.23**	**1,777,036,845**	**1,126,860,276**	**-**	**25,576,134**	624,600,435	**-**	**-**
Percentage Change From 2021-23 Leg Approved Budget	17.84%	9.66%	16.05%	22.52%	-	-26.95%	8.33%	-	-
Percentage Change From 2023-25 Current Service Level	17.98%	9.21%	13.16%	15.51%	-	-25.75%	11.46%	-	-

PROGRAM PRIORITIZATION FOR 2023-2025

Agency Name: Oregon Department of Human Services

2023-25 Biennium **Agency Number: 10000**

Agency-Wide Priorities for 2023-25 Biennium

1	2	3	4a	4c	4d	5	6	7	8	10	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)		**Agency Initials**	**Program or Activity Initials**	**Program or Activity Initials (DCR)**	**Sub-DCR**	**Program Unit/Activity Description**	**Identify Key Performance Measure(s)**	**Primary Purpose Program-Activity Code**	**GF**	**OF**	**FF**	**NL-FF**	**TOTAL FUNDS**	**Pos.**	**FTE**	**New or Enhanced Program (Y/N)**	**Included as Reduction Option (Y/N)**	**Legal Req. Code (C, D, FM, FO, S)**	**Legal Citation**	**Explain What is Mandatory (for C, FM, and FO Only)**	**Comments on Proposed Changes to CSL included in Agency Request**
Agcy	**Prgm/ Div**																				
			CW	Foster Care	Foster Care Prevention	Provides services to safely support children in their own homes and support family stability.	Timeliness and permanency of child reunification	12	2,547,569	27,686	10,386,487	0	$ 12,961,742	0	0.00	N	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Foster Family Shelter Care	A limited term payment provided to a certified family when a child or young adult in the legal or physical custody of the Department moves to a certified family's home from a placement with a BRS provider and there is no current level of care determination - paid for the first 20 days to allow time for the CANS to be administered.		12	5,170,576	103,318	4,506,100	0	$ 9,779,994	0	0.00	N	Y	FM	ORS 418.015	All - see program unit/activity description	POP 123 FC/Resource Parent Reimbursement Rates POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Regular Foster Care	Temporary out-of-home care provided by a relative caregiver or general applicant foster parent who has been authorized to provide care to a child or young adult in the legal or physical custody of the Department.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	99,125,818	5,017,113	66,440,107	0	$ 170,583,038	0	0.00	N	N	FM	ORS 418.015	All - see program unit/activity description	POP 123 FC/Resource Parent Reimbursement Rates POP 124 SSB & Child Support Payments Package
			CW	Community Based Domestic Violence Services		DHS makes grants available to domestic violence and sexual assault service providers throughout Oregon. These providers offer crisis lines, crisis response, emergency shelter and other related services to survivors of sexual assault, survivors of domestic violence, and their children, in a culturally and linguistically appropriate manner.	Absence of repeat maltreatment	12	537,146	4,332,777	3,732,930	0	$ 8,602,853	0	0.00	N	Y		ORS 409.290 to 409.300		
			CW	Residential Care	Residential Treatment	Behavioral Rehabilitation Services (BRS) and therapuetic foster care for children with high needs.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	60,171,341	1,458,146	48,056,967	0	$ 109,686,454	0	0.00	N	Y	FM	ORS 418.015	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Residential Care	FOCUS Children	Child specific contracts for out-of-state placements and additional supports to assure children's needs are being met while they are in care.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	30,137,990	62,107	5,927	0	$ 30,206,024	0	0.00	N	Y	FM	ORS 418.015	All - see program unit/activity description	POP 122 FOCUS Expansion POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Personal Care	Specific services provided to a child with a chronic medical condition, with medical needs requiring specialized care, or with a physically handicapping condition requiring care and assistance in most domains of daily functioning.	Teen suicide, Absence of repeat maltreatment	12	3,925,805	75,073	5,776,248	0	$ 9,777,126	0	0.00	N	Y	FM	ORS 418.015	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			SSP	TA Domestic Violence Services		The TA-DVS program provides temporary financial assistance and support to families affected by domestic violence during crisis or emergent situations when other resources are not available. TA-DVS is used to help the domestic violence survivor and the children address their safety concerns and stabilize their living situation, reducing the likelihood of the survivor returning to the abuser. The TA-DVS Benefits are 100% federally funded by the TANF Program.	TANF re-entry, TANF family stability, Absence of repeat maltreatment	12	1,469	0	3,449,430	0	$ 3,450,899	0	0.00	N	N	FO	45 CFR 260.31 (b) & ORS 411.117 (1) (e)		
			SSP	TA-DVS Advocates		DHS contracts with local Domestic Violence Sexual Assault agencies to provide co-located Certified Domestic Violence (DV) Advocates in Self-Sufficiency and Child Welfare offices. The goal of the Co-located DV Advocates Program is to improve outcomes and stability for families experiencing domestic violence through services including but not limited to: safety planning, risk and fatality assessment, shelter services, support in referrals to other community resources such as housing, mental health services, counseling, peer support groups, etc		12	45,998,471	0	0	0	$ 45,998,471	0	0.00	N	N	S	ORS 411.117 (1) (c)		POP 138 Survivor Investment Partnership
			CW	Community Based Sexual Assault Victims Fund		DHS makes grants available to domestic violence and sexual assault service providers throughout Oregon. These providers offer crisis lines, crisis response, emergency shelter and other related services to survivors of sexual assault, survivors of domestic violence, and their children, in a culturally and linguistically appropriate manner.		12	94,626	605,216		0	$ 699,842	0	0.00	N	Y		ORS 409.273 to 409.285		
			CW	Tribal Programs		General Fund portion of foster care maintenance payments and payment for BRS placements for children in Tribal custody.		12	1,326,560	9,956	4,762,579	0	$ 6,099,095	0	0.00	N	N		ORS 418.015		POP 124 SSB & Child Support Payments Package
			APD	APD Program	Oregon Supplemental Income Program (OSIP)	OSIP offers cash and medical assistance to eligible clients who qualify by meeting means tested income and resource requirements.		12	14,120,022	0	0	0	$ 14,120,022	0	0.00	N	N	FO	ORS 410.070	All - see program unit/activity description	none
			APD	APD Program	In-home Program	In-home services are the cornerstone of Oregon's community-based care system. For older adults or people with physical disabilities, the ability to live in their own homes is compromised by the need for support in regular activities of daily living. For more than 25 years, Oregon has created options to meet people's needs in their own homes. All options are funded with support of the Medicaid program through home- and community-based waivers or state plan options. Oregon has been able to create cost-effective programs that meet people's needs in their homes and other community settings using these options and spared Oregonians from the unnecessary use of much higher cost services, primarily offered in nursing facilities. Services to older adults and people with physical disabilities are designed to support assistance with fundamental activities of daily living (ADLs), such as mobility, cognition, eating, personal hygiene, dressing, toileting and bathing. To receive in-home services, an individual must be financially eligible for Medicaid. A case manager works with the client and together they identify needs and develop a plan for the in-home services.		12	485,475,923	4,197,619	853,852,262	0	$ 1,343,525,804	0	0.00	Y	N	FO	ORS 410.070	All - see program unit/activity description	POP 101 - Infrastructure and Emergency POP 105 - The Healthier Oregon Program (HOP)
			APD	APD Program	Community-Based Care Facilities	These include a variety of 24-hour care settings and services to provide an alternative to nursing facilities. Services include assistance with activities of daily living, medication oversight and social activities. Services can include nursing and behavioral supports to meet complex needs. State and federal guidelines related to health and safety of these facilities have to be met.		12	560,227,083	15,255,627	1,012,320,598	0	$ 1,587,803,308	0	0.00	Y	Y	FO	ORS 410.070	All - see program unit/activity description	POP 101 - Infrastructure and Emergency POP 105 - The Healthier Oregon Program (HOP)

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

2023-25 Biennium **Agency Number: 10000**

Agency-Wide Priorities for 2023-25 Biennium

1	2	3	4a	4c	4d	5	6	7	8	10	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)		**Agency Initials**	**Program or Activity Initials**	**Program or Activity Initials (DCR)**	**Sub-DCR**	**Program Unit/Activity Description**	**Identify Key Performance Measure(s)**	**Primary Purpose Program-Activity Code**	**GF**	**OF**	**FF**	**NL-FF**	**TOTAL FUNDS**	**Pos.**	**FTE**	**New or Enhanced Program (Y/N)**	**Included as Reduction Option (Y/N)**	**Legal Req. Code (C, D, FM, FO, S)**	**Legal Citation**	**Explain What is Mandatory (for C, FM, and FO Only)**	**Comments on Proposed Changes to CSL included in Agency Request**
Agcy	**Prgm/ Div**																				
			APD	APD Program	Nursing Facilities	Institutional services for older adults and people with physical disabilities are provided in nursing facilities licensed and regulated by DHS. Nursing facilities provide individuals with skilled nursing services, housing, related services and ongoing assistance with activities of daily living. Oregon has led the nation since 1981 in the development of lower cost alternatives to institutional (nursing facility) care. Home- and community-based alternatives to nursing facility services emphasize independence, dignity and choice and offer needed services and supports at lower costs than medical models.		12	309,020,644	167,717,821	742,472,292	0	$ 1,219,210,757	0	0.00	N	Y	FM	ORS 410.070	All - see program unit/activity description	POP 105 - The Healthier Oregon Program (HOP)
			I/DD	I/DD Program	K Plan Services (Incudes community living supports (CLS))	K-Plan or Community First Choice Option (CFCO) provides a broad range of home and community-based servcies and supports for people with disabilities, including those with I/DD. Most used servce under the K-Plan is Attendant Care which provices support for people to perform activities of daily living and instrumental activities of daily living (ADL/IADL), which may include skills training in those areas. With CFCO, this is the primary service available to people with I/DD. Attendant care services and are generally categorized based on the setting in which the person lives. Services that now fall under attendant care include: • In-home supports for children and adults • Children's intensive in-home services • 24-hour services. • Group home for children and adults • Adult and child foster care • Supported living (adults only) • Day supports • Stabilization and Crisis Unit (SACU) Other servcies provided under the K-plan include environmental safety modifications, assistive technoogy, behavioral consultation, transportation.	People with disabilities in community settings	12	1,473,496,732	9,280,791	2,685,910,540	0	$ 4,168,688,063	0	0.00	Y	Y	FO	42 CFR 441 s	All - see program unit/activity description	POP 105 - Healthier Oregon Program (HOP) POP 131 - Children's Foster Care Rates POP 132 - Targeted Rate Increases
			I/DD	I/DD Program	Waiver Services - Employment First (no CSL)	These services have been strengthened and improved as part of the important Employment First initiative. I/DD has restructured employment services to encourage integrated, competitively paid employment for people with I/DD. Employment services are no longer bundled with attendant care services, they have been broken out into discrete services to support people as they learn about, find and maintain employment. Employment services are not offered through the CFCO, they remain available through the Medicaid waiver. Employment services include: Employment path; job discovery; Job development; Job coaching and Small-group supported employment.	People with disabilities in community settings	12	69,394,250	0	97,170,712	0	$ 166,564,962	0	0.00	Y	Y	FO	EO 15-01 https://www.oregon.gov/DHS/EMPLOYMENT/EMPLOYMENT-FIRST/Documents/Executive%20Order%2015-01.pdf	All - see program unit/activity description	POP 132 - Targeted Rate Increases
			I/DD	I/DD Program	Waiver Services - No Employment	1915c Waivers include Adult HCBS Waiver, Children's HCBS Wiaver and three model Wiavers for children under 18 with complex needs: Medically Involved Children's Model Waiver, Medically Fragile Model Waiver, and Behavioral Model Waiver. These waivers primary servcie is case management that is furnished to assist individuals in gaining access to needed medical, social, educational and other services. Waiver Case Management includes the following assistance: assessment and periodic reassessment of individual needs, development (and periodic revision) of a specific care plan, referral and related activities, and monitoring and follow-up activities. Other 1915c Wiaver servcies include environmental safety modifications, vehicle modifications, family training, specialized medical supplies, and direct nursing servcies (for adults only).	People with disabilities in community settings	12	24,351,596	5,821,280	33,977,159	0	$ 64,150,035	0	0.00	Y	Y	FO	42 CFR 441 Subpart G https://www.ecfr.gov/cgi-bin/text-idx?SID=ee1d5a7b4341f1514069eca301e17436&mc=true&node=pt42.4.441&rgn=div5	All - see program unit/activity description	N/A
			I/DD	I/DD Program	Stabilization and Crisis Unit (k plan group homes)	SACU is a 24-hour service provided under the CFCO. SACU provides a safety net for Oregon's most vulnerable, intensive, medically and behaviorally challenged people with I/DD. SACU provides services when no other community-based option is available for a person. This includes persons with I/DD coming out of the Oregon State Hospital, corrections systems, and from crisis situations where counties and private providers cannot meet the needs of the person to ensure their health and safety. SACU focuses on supporting people in community-based settings and enabling them to return to less intensive service levels as quickly as possible. SACU provides 24-hour residential and day supports to people with I/DD from across the state who have significant medical or behavioral needs. The services are provided in licensed five-bed group homes.	People with disabilities in community settings	12	61,741,550	1,629,436	108,288,853	0	$ 171,659,839	745	744.92	N	Y	FO	42 CFR 441 s	All - see program unit/activity description	N/A
			CW	Foster Care	Independent Living Services	Helps youth who are, or were, in foster care to become self-sufficient adults. Gives an opportunity for youth to learn valuable skills necessary to make a successful transition from state or tribal care to living independently.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	9,986,478	56,300	5,841,456	0	$ 15,884,234	0	0.00	Y	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Nursing Assessments	Every child receives an intake nursing assessment by a DHS contracted nurse shortly after entering foster care. This assessment assures the child has all prescribed medication and assistive devices and is second set of eyes assuring safety. The contracted nurse also works with the foster/relative care provider to assure they have a clear understanding of the child's needs and can expedite referral to a physical, dental or mental health assessment when necessary.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	1,095,593	6,071	1,355,706	0	$ 2,457,370	0	0.00	Y	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

2023-25 Biennium **Agency Number: 10000**

Agency-Wide Priorities for 2023-25 Biennium

1	2	3	4a	4c	4d	5	6	7	8	10	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)		**Agency Initials**	**Program or Activity Initials**	**Program or Activity Initials (DCR)**	**Sub-DCR**	**Program Unit/Activity Description**	**Identify Key Performance Measure(s)**	**Primary Purpose Program-Activity Code**	**GF**	**OF**	**FF**	**NL-FF**	**TOTAL FUNDS**	**Pos.**	**FTE**	**New or Enhanced Program (Y/N)**	**Included as Reduction Option (Y/N)**	**Legal Req. Code (C, D, FM, FO, S)**	**Legal Citation**	**Explain What is Mandatory (for C, FM, and FO Only)**	**Comments on Proposed Changes to CSL included in Agency Request**
Agcy	**Prgm/ Div**																				
			CW	Foster Care	Other Medical	Other Medical is used to pay for services to help guide good case planning when the services are not covered by Medicaid or private health insurance, such as: Parent/Child Interaction, Sibling Interaction, Urinalysis Drug Testing, Psychosexual Evaluations, etc.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	6,062,482	7,493		0	$ 6,069,975	0	0.00	N	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Client Transportation	Client Transportation is used to fund transportation related to visitation, medical appointments, court hearings, etc.	Timeliness and permanency of child reunification	12	9,076,076	94,494	3,856,363	0	$ 13,026,933	0	0.00	Y	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	IV-E FC and Admin Reimbursements	Title IV-E Waiver project is Leveraging Intensive Family Engagement (LIFE). LIFE services include intensive family finding efforts to create and strengthen relationships with kith and kin, structured case planning meetings that are strengths based; trauma informed; culturally responsive, and family driven, and referrals to parent mentors who can facilitate the family's navigation through the system to help shorten the lengths of stay for children predicted to stay in the system for more than 3 years.	Timeliness and permanency of child reunification	12	0	0	10,783,684	0	$ 10,783,684	0	0.00	Y	N	FO	ORS 419A and 419B	All - see program unit/activity description	N/A
			CW	Foster Care	Foster Care Services	Contracted services to support the recruitment and retention of good foster families.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	20,490,220	512	1,226,533	0	$ 21,717,265	0	0.00	Y	Y	FO	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Interstate Compacts	The Interstate Compact for the Placement of Children (ICPC) Program processes requests for placement across state lines in the context of dependency cases and in private placements, ensuring that legal and administrative requirements are met so that children are placed in safe and appropriate permanent homes. In addition, field-based specialized ICPC workers complete home studies for Oregon families across the state who are seeking placement of their relative children from another state's foster care program.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	630,826	5,192	308,770	0	$ 944,788	0	0.00	N	N	FO	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	In-Home Safety and Reunification Services		This program provides culturally appropriate intensive, short term services to families with children who can remain safely in their homes, and to children and families who are safely reunited. ISRS provides a combination of safety and strengths-based services that lead to lasting safety changes within the family. These services are time limited and are complemented by SPRF services for families in need of longer term or more intensive services.		12	4,442,509	61,976	18,920,888	0	$ 23,425,373	0	0.00	N	Y	FO	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Addiction & Recovery Services		Services in Washington, Clackamas and Lane counties that allow parents who have just completed residential treatment for their addiction to stabilize in their communities in settings that are alcohol and drug free and staff supported. Decreases foster care costs as chidlren stay with their parents. Family Support Teams are a combination of contracted staff with expertise in addiction treatment and intervention and Child Welfare caseworkers responding to parents with substance use disorders. Service providers include addictions counselors and peer level supports known as 'outreach workers' housed in Child Welfare branches for immediate access by caseworkers and families.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification. Absence of repeat maltreatment	12	3,282,391	48	4,845,658	0	$ 8,128,097	0	0.00	N	Y	FO	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	System of Care		System of Care funds support Oregon's most vulnerable children by providing local child welfare offices with the flexibility to purchase specific services to meet a family's specific needs to assure the safety, permanency and well-being of their child(ren). Services are identified and planned for through family engagement and involvement in case planning. Whenever possible, shared funding of custom-designed services is achieved through collaboration with community partners.	Absence of repeat maltreatment	12	9,967,396	33,421	3,296,235	0	$ 13,297,052	0	0.00	N	Y	FO	ORS 418.015	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Strengthen, Presrvg & Reunfg Families (SPRF)		The Strengthening Preserving and Reunifying Families law (ORS 418.575-418.598) allows funding for an array of services for families through collaboration between DHS and local community partners. The Department has developed outcome-based contracts for services to specifically address the needs of children and families who come to the attention of child welfare through a screened in report of abuse or neglect. These outcome based contracts are foundational for an overall ability to report on results associated with SPRF services and funding.		12	22,284,554	0	0	0	$ 22,284,554	0	0.00	Y	Y	FO	ORS 418.575	All - see program unit/activity description	N/A
			CW	Guardianship Assistance		Guardianship Assistance is intended to help prevent a child from remaining in foster care when reunification with parents and adoption are not appropriate permanency options. Guardianship assistance supports relatives assuming legal guardianship by providing financial and medical assistance until the child/young adult is 18 years of age, to guardians who are not able to meet their child's needs without assistance.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	26,141,961	99,517	27,194,636	0	$ 53,436,114	0	0.00	N	N	FO	Social Security Act, Section 473; ORS 418.330; ICWA	All - see program unit/activity description	POP 123 FC/Resource Parent Reimbursement Rates
			CW	Adoption Assistance		Adoption Assistance is intended to help prevent a child from remaining in foster care when they cannot be safely returned to parent(s), and provides financial and medical assistance unti the child/young adult is 18 years of age, to adoptive parents who are not able to meet the child/young adult's needs without assistance.	Timely adoption, Timeliness and permanency of child reunification	12	90,345,287	60,631	99,890,209	0	$ 190,296,127	0	0.00	N	N	FM	Public Law 96-272; Public Law 105-89; Social Security Act , Section 473; ICWA	All - see program unit/activity description	POP 123 FC/Resource Parent Reimbursement Rates POP 124 SSB & Child Support Payments Package
			CW	Post Adoption-Services		Post Adoption Services support adoptive parents and guardians through training, specialized support, mentoring, etc.	Timely adoption, Timeliness and permanency of child reunification	12	506,390	3,067,582	1,063,584	0	$ 4,637,556	0	0.00	N	Y	FO	ORS 419A and 419B	All - see program unit/activity description	N/A

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Agency Name: Oregon Department of Human Services

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Agcy	**Prgm/ Div**																				
			SSP	Supplemental Nutrition Asst. Program	EBT SNAP	SNAP offers food assistance to low-income individuals and families to help meet their nutritional needs. Benefits to participants are 100 percent federally funded; however, the administration of the program requires a 50 percent state match. Approximately one in five Oregonians receive food assistance through SNAP. SNAP is an important and constantly growing anti-poverty program. Recent research has shown that SNAP benefits reduce the depth and severity of poverty, and have a particularly strong effect on reducing child poverty. SNAP benefits add about $1.1 billion dollars per year to the Oregon Economy including rural Oregon. Self-Sufficiency offices across the state serve the majority of the SNAP population. Elderly persons (60 and older) plus persons with disabilities who require services are assisted by Aging and People with Disabilities (APD) Program offices and their contracted: Area Agencies on Aging, Disability Services Offices and Councils of Government.	Food stamp utilization, Food stamp accuracy	12	0	0	0	3,589,534,623	$ 3,589,534,623	0	0.00	N	N	FM	SNAP is guided by federal legislation found in the "Farm Bill" authorized by the Agricultural Act of 2014 (P.L. 113-79, Feb. 7,2014). Program policy is reauthorized every five years through the Farm Bill.	All - see program unit/activity description	N/A
			SSP	Supplemental Nutrition Asst. Program	SNAP Cashout	SNAP offers food assistance to low-income individuals and families to help meet their nutritional needs. Benefits to participants are 100 percent federally funded; however, the administration of the program requires a 50 percent state match. Approximately one in five Oregonians receive food assistance through SNAP. SNAP is an important and constantly growing anti-poverty program. Recent research has shown that SNAP benefits reduce the depth and severity of poverty, and have a particularly strong effect on reducing child poverty. SNAP benefits add about $1.1 billion dollars per year to the Oregon Economy including rural Oregon. Self-Sufficiency offices across the state serve the majority of the SNAP population. Elderly persons (60 and older) plus persons with disabilities who require services are assisted by Aging and People with Disabilities (APD) Program offices and their contracted: Area Agencies on Aging, Disability Services Offices and Councils of Government.	Food stamp utilization, Food stamp accuracy	12	0	0	0	92,333,504	$ 92,333,504	0	0.00	N	N	FM	SNAP is guided by federal legislation found in the "Farm Bill" authorized by the Agricultural Act of 2014 (P.L. 113-79, Feb. 7,2014). Program policy is reauthorized every five years through the Farm Bill.	All - see program unit/activity description	N/A
			APD	Disability Determination Services Program		People with disabilities may be able to qualify for one of two federal disability programs: Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI). These programs are governed by the federal Social Security Administration (SSA). Oregon performs this work on behalf of the Social Security Administration under contract. DDS employs over 200 employees and has a budget of over $60M.			0	0	21,892,974	0	$ 21,892,974	0	0.00	N	N	FM	N/A		N/A
			SSP	Supplemental Nutrition Asst. Program	SNAP Employment and Training	Oregon is federally required to offer a limited companion employment and training program. SNAP participants may be enrolled in one of the following programs: Oregon Food Stamp Employment Transition (OFSET) program and the Able-Bodied Adults Without Dependents (ABAWD) program. More comprehensive services are provided through the 50/50 employment and training program, referred to in Oregon as SNAP Training and Employment Program (STEP).	Food stamp utilization, Food stamp accuracy	12	821,143	0	11,241,573	0	$ 12,062,716	0	0.00	N	N	FM	This program is mandated by federal legislation found in the Food and Nutrition Act of 2008, authorized by the 2008 Farm Bill.	All - see program unit/activity description	N/A
			SSP	Supplemental Nutrition Asst. Program	SNAP Ed	SNAP Ed provides direct education services to SNAP participants in every county in Oregon. Through its Hub model, Oregon reached 371,220 participants (combination of direct education, social marketing and PSE interventions). SNAP-Ed's social marketing initiative "Food Hero" has an evidence-based website, recipes and PSE interventions that support low-income audiences in making healty choices on a limited budget. SNAP-Ed is 100% Federal Funds.			0	0	15,329,085	0	$ 15,329,085	0	0.00	N	N	FM	This program is mandated by federal legislation found in the Food and Nutrition Act of 2008, authorized by the 2008 Farm Bill.	All - see program unit/activity description	N/A

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Agency-Wide Priorities for 2023-25 Biennium

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Agcy	**Prgm/ Div**																				
			SSP	Supplemental Nutrition Asst. Program	SNAP Outreach 50%	SNAP Outreach to potentially eligible household who are not currently accessing SNAP benefits is part of Oregon's plan. priorities include messaging the need to complete and return necessary paperwork and retention of their Oregon Trail Cards (Oregon's EBT card). The education component of the plan also includes stretching food budgets, utilizing locally available resources and assist by educating people about reporting changes. Currently there are 15 Outreach contracted partners that work closely with local DHS offices. This State Plan has a 50% Federal reimbursement for contractors.			92,509	0	1,632,546	0	$ 1,725,055	0	0.00	N	N	FM	This program is mandated by federal legislation found in the Food and Nutrition Act of 2008, authorized by the 2008 Farm Bill.	All - see program unit/activity description	N/A
			SSP	Food Assistance	TEFAP, CSFP, OHRF, OHTF	The Emergency Food Assistance Program (TEFAP) is a federally funded program that helps supplement the diets of low-income Americans, including elderly people, by providing them with emergency food assistance at no cost. The Oregon Food Bank is primary grantee in Oregon and works with the Oregon Food Bank network to deliver services across Oregon. The Commodity Supplemental Food Program (CSFP) provides nutritious commodities to help meet the nutritional needs of low-income elderly persons (aged 60 or older) in Oregon. Through local agencies, each participant receives a monthly package of commodities. There are currently 7 Regional Food Banks who contract with roughly 100 pantries that distribute the food boxes. The Oregon Hunger Response Fund is an allocation from the Legislature to the Oregon Food Bank to help build infrastructure and transport food to food pantries and other important efforts to support the Food Bank and Food Bank Networks. Oregon Housing and Community Services, with legislative approval, transferred the Oregon Hunger Response Fund (OHRF) to the Department of Human Services effective 10/1/2015. Oregon Hunger Task Force (OHTF) is a 28-seat task force that is directed to "serve as an advocate for hungry persons," studying the problem of hunger, making recommendations, and helping local communities implement changes. Working with partners throughout Oregon, the task force has since worked to promote community awareness, compile research, develop proposals for government action, and conduct outreach to expand participation in nutrition programs.	Food stamp utilization, Food stamp accuracy	12	23,814,086	0	3,896,817	0	$ 27,710,903	0	0.00	N	N	FM	7 CFR Part 247 and 250; Emergency Food Assistance Act of 1983;FNS Instructions 716-3, 410-1, and 113-1; Oregon Revised Statutes 458.530; Title VI of the Civil Rights Act of 1964 (42 U.S.C. § 2000d et seq.)	All - see program unit/activity description	POP 139 Local Food Purchasing
			SSP	Family Support and Connections		Provides supports to prevent children in the TANF program from entering the child welfare system. Home visiting and community-based services are some of the interventions used to build on family strengths and address family functioning issues.	TANF re-entry, TANF family stability	12	311,039	0	18,824,571	0	$ 19,135,610	0	0.00	N	N	FO	Title II of the Child Abuse Prevention and Treatment Act (CAPTA), as amended by P.L. 111-320, authorizes grant funds to be released to the states and names the program Community-Based Grants for the Prevention of Child Abuse and Neglect (CBCAP).	All - see program unit/activity description	N/A

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Agcy	**Prgm/ Div**																				
			SSP	Cash Assistance	TANF Basic	TANF is a collection of programs directed at improving the lives of very low-income Oregon families with children. It is a critical safety net program for families with children living in extreme poverty and helps families from a variety of diverse backgrounds to address their most basic needs. TANF provides eligible families with cash assistance, connections to support and community resources, case management, and employment and training services. Families typically use TANF funds to prevent homelessness and to help with other factors contributing to family instability. The goal of the program is to help families address barriers, gain skills and access employment opportunities to become self-sufficient. TANF is a collection of programs directed at improving the lives of very low-income Oregon families with children. It is a critical safety net program for families with children living in extreme poverty and helps families from a variety of diverse backgrounds to address their most basic needs. TANF provides eligible families with cash assistance, connections to support and community resources, case management, and employment and training services. Families typically use TANF funds to prevent homelessness and to help with other factors contributing to family instability. The goal of the program is to help families address barriers, gain skills and access employment opportunities to become self-sufficient.	TANF re-entry, TANF family stability	12	115,389,556	358,400	168,140,049	0	$ 283,888,005	0	0.00	Y	Y	FO	The TANF program is authorized under Title IV-A of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Act, as amended by the Work Opportunity Reconciliation Act of 199 (PRWORA), and the Deficit Reduction Act of 2005. State Statue chapters are 411 and 412.	All - see program unit/activity description	POP 135 - TANF Redesign
			SSP	Cash Assistance	TANF UN	employment opportunities to become self-sufficient. The State Family Pre-SSI/SSDI (SFPSS) Program is designed to assist TANF-eligible individuals with disabilities obtain Social Security disability benefits through the Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) programs. The program serves individuals who are not required to participate in the JOBS program. The program provides families with a cash grant, professional assistance with Social Security Administration (SSA) applications and appeals as well as case management services. Once a client is awarded SSI benefits, the department recovers a portion of the payments it made to the family during the application process	TANF re-entry, TANF family stability	12	62,489,877	640	4,406,400	0	$ 66,896,917	0	0.00	N	Y	FO	State Statutes Chapters 411 and 412.	All - see program unit/activity description	POP 135 - TANF Redesign
			SSP	Cash Assistance	State Family Pre SSI/SSDI	from the client's initial SSI lump-sum payment. Most adults must meet additional requirements to receive TANF services.	TANF re-entry, TANF family stability	12	776,748	843,376	275,400	0	$ 1,895,524	0	0.00	N	Y	FO	State Statutes Chapters 411 and 412.	All - see program unit/activity description	N/A
			SSP	JOBS Contracts/Support Services Activities	TANF Programs	The JOBS program provides employment, education, skill-building and family stability services to individuals of families receiving TANF assistance. Individuals participate in JOBS to gain skills necessary to join the workforce and retain employment.	TANF re-entry, TANF family stability	12	12,100,662	451,439	81,423,400	0	$ 93,975,501	0	0.00	Y	N	FO	State Statutes Chapters 411 and 412.	All - see program unit/activity description	N/A
			I/DD	I/DD Program	Other Services (Includes Housing)	The I/DD Community Housing Program assists persons with developmental disabilities to live successfully in community housing that is affordable and safe and contributes to their independence and quality of life. I/DD Community Housing supports services to persons with developmental disabilities by overseeing the property management of homes developed for the former Fairview State Training Center residents, develops and manages funds eligible for home modification for IDD individuals, coordinating the operation of the Fairview Community Housing Trust that was established with revenue from the sale of Fairview and providing technical assistance to individuals, families, brokerages, and counties regarding housing issues faced by persons with developmental disabilities and best practices to implement solutions.	People with disabilities in community settings	12	8,346,597	3,262,865	379,188	0	$ 11,988,650	0	0.00	N	Y	FO	42 CFR 441 s	All - see program unit/activity description	POP 128 - Child Welfare and IDD Parents
			VR	VR - Basic Rehabilitative Services		These are basic services provided to individuals whose disabilities present a potential barrier to employment. A rehabilitation counselor conducts a comprehensive assessment to evaluate vocational potential, including diagnostic and related services necessary for the determination of eligibility for services as well as the nature and scope of services to be provided. Vocational counseling and guidance builds on this assessment and helps the client identify a vocational goal. The counselor, in partnership with the client, develops an individualized plan for employment and authorizes	Vocational rehabilitation services employment	12	18,936,280	9,742,259	36,552,817	0	$ 65,231,356	0	0.00	Y	Y	FO	29 U.S.C. 796c and 29 U.S.C 796e-2	All - see program unit/activity description	116 - Grant Prgm for CBO, 145 - RCDHH/VRC's, 146 - WIN (Wrk Incent Netwrk) , 148 - RSA Audit
			VR	State Independent Living Council (SILC)		This funding supports the seven Centers for Independent Living through out the state of Oregon. Centers for Independent Living are designed to help individuals who experience disabilities achieve personal goals for independence and participation in their families and communities.	Vocational rehabilitation services employment	12	4,790,257	0	738,328	0	$ 5,528,585	0	0.00	N	Y	FO	29 U.S.C. 796d	All - see program unit/activity description	POP 144 - Pay Equity for CILS,

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			APD	APD Program	Other Services	The Centers for Medicare and Medicaid Services (CMS) requires DHS to coordinate with Medicare in many areas and clients need help accessing other programs for which they are eligible. The federal Medicare program is the most common program clients need assistance with. APD determines client eligibility and submits client data to CMS for two Medicare-related programs: Medicare buy-in and Medicare Part D low-income subsidy. APD served more than 130,000 clients in these two programs over one year. These programs help low-income beneficiaries with their cost-sharing requirements. Securing this coverage also ensures Medicare remains in a "first payor" status, ultimately saving the state's Medicaid program significant money.		12	15,592,678	4,961,352	28,226,119	0	$ 48,780,149	0	0.00	Y	Y	FO	ORS 410.070	All - see program unit/activity description	POP 103 - Address Systemic Poverty Issues
			APD	APD Program	Older Americans Act	Services and supports provided to individuals under the Older Americans Act (OAA) provide vital assistance designed to prevent or delay entry into Medicaid-funded long-term care such as In-Home or 24-hour residential services. The OAA is a Federal law that set out a national aging network structure consisting of the U.S. Administration on Aging (AoA) now part of the Administration for Community Living, State Units on Aging (DHS/Aging and People with Disabilities program), and Area Agencies on Aging (AAAs). The OAA authorizes funding and services through this network to serve older individuals in their homes and communities, through local entities. All individuals, aged 60 or older, regardless of income are eligible to receive services but the programs are targeted towards those in greatest social or economic need. A specific focus on how to better serve diverse populations of older adults across race/ethnicity, sexual orientation, gender, veteran status, and other intersecting categories are essential with the continually changing demographics of Oregon.		12	3,126,863	0	36,329,539	0	$ 39,456,402	0	0.00	N	Y	FO	ORS 410.070	All - see program unit/activity description	N/A
			APD	APD Program	Oregon Project Independence	This is a state-funded program offering in-home services and related supports to individuals 60 years of age and older or people who have been diagnosed with Alzheimer's or a related dementia disorder. Approximately 5,000 Oregonians are served in this program. It represents a critical element in Oregon's strategy to prevent or delay individuals from leaving their own homes to receive services in more expensive facility-based settings, or depleting their personal assets sooner than necessary and accessing more expensive Medicaid health and long-term service benefits. The program was expanded by the 2005 Oregon Legislature to include younger adults with disabilities. In 2014 and 2015 a pilot program was funded expanding the program to adults ages 19-59 with physical disabilities. Through this pilot more than 500 individuals have been served. OPI is administered statewide by local Area Agencies on Aging (AAAs). Many areas have waiting lists due to high demand and limited program funding. Client eligibility is determined by an assessment of functional ability and natural supports related to activities of daily living. Typical services include assistance with housekeeping, bathing, grooming, health care tasks, meal preparation, caregiver respite, chore services, adult day services and transportation. The OPI program has no financial asset limitations for clients. A sliding fee scale is applied to clients with net monthly income between 100 and 200 percent of the federal poverty level (FPL) to pay toward the cost of service. A small group with income above 200 percent of FPL pays the full rate for services provided. Generally, this is because they benefit from the case management; ongoing support and monitoring, in addition to the actual purchased services.		12	30,546,542	0	36,266,961	0	$ 66,813,503	0	0.00	N	Y	S	ORS 410.410		N/A
			SSP	Refugee Program		The program serves individuals and families who fled persecution in their country of origin and were legally admitted for resettlement by the United States government. Refugees and people who have been granted asylum access the program for financial, employment-related and acculturation services. The program guides refugees toward economic stability through employment as early as possible. The program serves only those persons in immigration categories approved by the Federal Office of Refugee Resettlement (ORR).		12	4,480,600	0	6,554,623	0	$ 11,035,223	0	0.00	N	N	FM	ORS 411.060, 409.010(2) ©, 409.010(2)(h)	All - see program unit/activity description	N/A
			SSP	Cash Assistance	TANF Transition	Services are available to families who transition from TANF cash benefits to employment. These programs include allowing families to make more money before closing the TANF grant, a reduced copay for childcare, and three months of supportive cash benefits once the TANF has closed. These services are intended to provide a glide path for families as they transition to employment and help ease the burden of the costs related to this change.	TANF re-entry, TANF family stability	12	3,644,213	0	0	0	$ 3,644,213	0	0.00	N	N	FO	State Statutes Chapters 411 and 412.	All - see program unit/activity description	N/A
			SSP	Youth Services		My Future - My Choice program is an age-appropriate, medically accurate, sexual health education program. This service supports community prevention efforts to help families break the generational connection to public assistance. The program expands on the historical teen pregnancy prevention program to provide education and tools for youth to resist multiple risk-taking behaviors. DHS partners with the Oregon Department of Education and the My Future - My Choice Advisory Committee to develop and implement the program.		12	15,869,955	0	1,420,424	0	$ 17,290,379	0	0.00	N	N	FO	The Title V Federal Abstinence Education Program Grant	All - see program unit/activity description	POP 136 - Youth Experiencing Homelessness

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			SSP	SUD Childcare		The Department of Education, Early Learning Division (ELD) supported contracts with Substance Use Disorder (SUD) treatment clinics to cover child care for parents in treatment for several years. Due to changes in the funding source, 2014 Reauthorization of the Child Care Development Block Grant, ELD was no longer able to leverage these funds to support the contracts. Department of Human Services (DHS) worked closely with the SUD facilities, ELD, Child Welfare, and Oregon Health Authority to create the DHS SUD child care program to allow for continued support for the SUD facilities and the families they serve. DHS leveraged TANF Federal funding to support the contracts to cover child care needs for families in SUD treatment. The TANF funding allows DHS to cover the cost of care for up to 4 months while the families apply for a TANF grant and work with their local DHS worker to create a case plan that includes SUD treatment. Once a case plan is in place the child care is covered through the local DHS JOBS support service payment budgets.		12	0	0	900,000	0	$ 900,000	0	0.00	N	N	FO	45 CFR 260.31 (b) & ORS 411.117 (1) (e)		N/A
			SSP	Other Family Support		Other Family Supports provides services to families not fitting into other program areas. For CSL, this budget only includes the Culturally Responsive Tax program. POPs would add Housing Stabilization and a Demonstration project for Jackson Co.		12	104,312,684				$ 104,312,684	0	0.00	Y	N	S	2022 OR Laws, Chapter 67		POP 137 - Housing Stabilization Program Expansion, POP 141 Jackson Co. Demonstration
			CW	Adoption Supports		Adoptions finalized in an Oregon court for a child who is not in the custody of the Department of Human Serivces. DHS provides background checks and files petitions and provides adoption assistance for eligible private adoptions. Contracted adoption agencies provide placement reports for independent adoptions as assigned by DHS. They also complete home studies when assigned by DHS. Contractors provide assisted search services for the Adoption Search & Registry Program, search for eligible birth and adoptive persons.	Timely adoption, Timeliness and permanency of child reunification	12	732,413	343,244	747,887	0	$ 1,823,544	0	0.00	N	Y	FO	ORS 109.309	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Contracted Adoption Services		Contrators provide adoption committee presentation, placement, adoption supervision and finalization services.	Timely adoption, Timeliness and permanency of child reunification	12	2,154,712	0	1,800,940	0	$ 3,955,652	0	0.00	N	Y	FO	ORS 419A and 419B	All - see program unit/activity description	N/A
			CW	Child Care for Foster Parents		$375 per month per child reimbursement to foster parents when all foster parents work outside of the home.		12	55,504	7,611,624	5,417,365	0	$ 13,084,493	0	0.00	N	N	FM	ORS 418.015		POP 124 SSB & Child Support Payments Package
									3,879,562,252	246,662,402	6,342,089,919	3,681,868,127	14,150,182,700	745	744.92						

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

2023-25 Biennium **Agency Number: 10000**

Agency-Wide Priorities for 2023-25 Biennium

1	2	3	4a	4c	4d	5	6	7	8	10	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)		**Agency Initials**	**Program or Activity Initials**	**Program or Activity Initials (DCR)**	**Sub-DCR**	**Program Unit/Activity Description**	**Identify Key Performance Measure(s)**	**Primary Purpose Program-Activity Code**	**GF**	**OF**	**FF**	**NL-FF**	**TOTAL FUNDS**	**Pos.**	**FTE**	**New or Enhanced Program (Y/N)**	**Included as Reduction Option (Y/N)**	**Legal Req. Code (C, D, FM, FO, S)**	**Legal Citation**	**Explain What is Mandatory (for C, FM, and FO Only)**	**Comments on Proposed Changes to CSL included in Agency Request**
Agcy	**Prgm/ Div**																				
			CW	Foster Care	Foster Care Prevention	Provides services to safely support children in their own homes and support family stability.	Timeliness and permanency of child reunification	12	2,547,569	27,686	10,386,487	0	$ 12,961,742	0	0.00	N	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Foster Family Shelter Care	A limited term payment provided to a certified family when a child or young adult in the legal or physical custody of the Department moves to a certified family's home from a placement with a BRS provider and there is no current level of care determination - paid for the first 20 days to allow time for the CANS to be administered.		12	5,170,576	103,318	4,506,100	0	$ 9,779,994	0	0.00	N	Y	FM	ORS 418.015	All - see program unit/activity description	POP 123 FC/Resource Parent Reimbursement Rates POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Regular Foster Care	Temporary out-of-home care provided by a relative caregiver or general applicant foster parent who has been authorized to provide care to a child or young adult in the legal or physical custody of the Department.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	99,125,818	5,017,113	66,440,107	0	$ 170,583,038	0	0.00	N	N	FM	ORS 418.015	All - see program unit/activity description	POP 123 FC/Resource Parent Reimbursement Rates POP 124 SSB & Child Support Payments Package
			CW	Community Based Domestic Violence Services		DHS makes grants available to domestic violence and sexual assault service providers throughout Oregon. These providers offer crisis lines, crisis response, emergency shelter and other related services to survivors of sexual assault, survivors of domestic violence, and their children, in a culturally and linguistically appropriate manner.	Absence of repeat maltreatment	12	537,146	4,332,777	3,732,930	0	$ 8,602,853	0	0.00	N	Y		ORS 409.290 to 409.300		
			CW	Residential Care	Residential Treatment	Behavioral Rehabilitation Services (BRS) and therapuetic foster care for children with high needs.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	60,171,341	1,458,146	48,056,967	0	$ 109,686,454	0	0.00	N	Y	FM	ORS 418.015	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Residential Care	FOCUS Children	Child specific contracts for out-of-state placements and additional supports to assure children's needs are being met while they are in care.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	30,137,990	62,107	5,927	0	$ 30,206,024	0	0.00	N	Y	FM	ORS 418.015	All - see program unit/activity description	POP 122 FOCUS Expansion POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Personal Care	Specific services provided to a child with a chronic medical condition, with medical needs requiring specialized care, or with a physically handicapping condition requiring care and assistance in most domains of daily functioning.	Teen suicide, Absence of repeat maltreatment	12	3,925,805	75,073	5,776,248	0	$ 9,777,126	0	0.00	N	Y	FM	ORS 418.015	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			SSP	TA Domestic Violence Services		The TA-DVS program provides temporary financial assistance and support to families affected by domestic violence during crisis or emergent situations when other resources are not available. TA-DVS is used to help the domestic violence survivor and the children address their safety concerns and stabilize their living situation, reducing the likelihood of the survivor returning to the abuser. The TA-DVS Benefits are 100% federally funded by the TANF Program.	TANF re-entry, TANF family stability, Absence of repeat maltreatment	12	1,469	0	3,449,430	0	$ 3,450,899	0	0.00	N	N	FO	45 CFR 260.31 (b) & ORS 411.117 (1) (e)		
			SSP	TA-DVS Advocates		DHS contracts with local Domestic Violence Sexual Assault agencies to provide co-located Certified Domestic Violence (DV) Advocates in Self-Sufficiency and Child Welfare offices. The goal of the Co-located DV Advocates Program is to improve outcomes and stability for families experiencing domestic violence through services including but not limited to: safety planning, risk and fatality assessment, shelter services, support in referrals to other community resources such as housing, mental health services, counseling, peer support groups, etc		12	45,998,471	0	0	0	$ 45,998,471	0	0.00	N	N	S	ORS 411.117 (1) (c)		POP 138 Survivor Investment Partnership
			CW	Community Based Sexual Assault Victims Fund		DHS makes grants available to domestic violence and sexual assault service providers throughout Oregon. These providers offer crisis lines, crisis response, emergency shelter and other related services to survivors of sexual assault, survivors of domestic violence, and their children, in a culturally and linguistically appropriate manner.		12	94,626	605,216		0	$ 699,842	0	0.00	N	Y		ORS 409.273 to 409.285		
			CW	Tribal Programs		General Fund portion of foster care maintenance payments and payment for BRS placements for children in Tribal custody.		12	1,326,560	9,956	4,762,579	0	$ 6,099,095	0	0.00	N	N		ORS 418.015		POP 124 SSB & Child Support Payments Package
			APD	APD Program	Oregon Supplemental Income Program (OSIP)	OSIP offers cash and medical assistance to eligible clients who qualify by meeting means tested income and resource requirements.		12	14,120,022	0	0	0	$ 14,120,022	0	0.00	N	N	FO	ORS 410.070	All - see program unit/activity description	none
			APD	APD Program	In-home Program	In-home services are the cornerstone of Oregon's community-based care system. For older adults or people with physical disabilities, the ability to live in their own homes is compromised by the need for support in regular activities of daily living. For more than 25 years, Oregon has created options to meet people's needs in their own homes. All options are funded with support of the Medicaid program through home- and community-based waivers or state plan options. Oregon has been able to create cost-effective programs that meet people's needs in their homes and other community settings using these options and spared Oregonians from the unnecessary use of much higher cost services, primarily offered in nursing facilities. Services to older adults and people with physical disabilities are designed to support assistance with fundamental activities of daily living (ADLs), such as mobility, cognition, eating, personal hygiene, dressing, toileting and bathing. To receive in-home services, an individual must be financially eligible for Medicaid. A case manager works with the client and together they identify needs and develop a plan for the in-home services.		12	485,475,923	4,197,619	853,852,262	0	$ 1,343,525,804	0	0.00	Y	N	FO	ORS 410.070	All - see program unit/activity description	POP 101 - Infrastructure and Emergency POP 105 - The Healthier Oregon Program (HOP)
			APD	APD Program	Community-Based Care Facilities	These include a variety of 24-hour care settings and services to provide an alternative to nursing facilities. Services include assistance with activities of daily living, medication oversight and social activities. Services can include nursing and behavioral supports to meet complex needs. State and federal guidelines related to health and safety of these facilities have to be met.		12	560,227,083	15,255,627	1,012,320,598	0	$ 1,587,803,308	0	0.00	Y	Y	FO	ORS 410.070	All - see program unit/activity description	POP 101 - Infrastructure and Emergency POP 105 - The Healthier Oregon Program (HOP)

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

2023-25 Biennium — Agency Number: 10000

Agency-Wide Priorities for 2023-25 Biennium

1	2	3	4a	4c	4d	5	6	7	8	10	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)		**Agency Initials**	**Program or Activity Initials**	**Program or Activity Initials (DCR)**	**Sub-DCR**	**Program Unit/Activity Description**	**Identify Key Performance Measure(s)**	**Primary Purpose Program-Activity Code**	**GF**	**OF**	**FF**	**NL-FF**	**TOTAL FUNDS**	**Pos.**	**FTE**	**New or Enhanced Program (Y/N)**	**Included as Reduction Option (Y/N)**	**Legal Req. Code (C, D, FM, FO, S)**	**Legal Citation**	**Explain What is Mandatory (for C, FM, and FO Only)**	**Comments on Proposed Changes to CSL included in Agency Request**
Agcy	**Prgm/ Div**																				
			APD	APD Program	Nursing Facilities	Institutional services for older adults and people with physical disabilities are provided in nursing facilities licensed and regulated by DHS. Nursing facilities provide individuals with skilled nursing services, housing, related services and ongoing assistance with activities of daily living. Oregon has led the nation since 1981 in the development of lower cost alternatives to institutional (nursing facility) care. Home- and community-based alternatives to nursing facility services emphasize independence, dignity and choice and offer needed services and supports at lower costs than medical models.		12	309,020,644	167,717,821	742,472,292	0	$ 1,219,210,757	0	0.00	N	Y	FM	ORS 410.070	All - see program unit/activity description	POP 105 - The Healthier Oregon Program (HOP)
			I/DD	I/DD Program	K Plan Services (Incudes community living supports (CLS))	K-Plan or Community First Choice Option (CFCO) provides a broad range of home and community-based servcies and supports for people with disabilities, including those with I/DD. Most used servce under the K-Plan is Attendant Care which provices support for people to perform activities of daily living and instrumental activities of daily living (ADL/IADL), which may include skills training in those areas. With CFCO, this is the primary service available to people with I/DD. Attendant care services and are generally categorized based on the setting in which the person lives. Services that now fall under attendant care include: • In-home supports for children and adults • Children's intensive in-home services • 24-hour services. • Group home for children and adults • Adult and child foster care • Supported living (adults only) • Day supports • Stabilization and Crisis Unit (SACU) Other servcies provided under the K-plan include environmental safety modifications, assistive technoogy, behavioral consultation, transportation.	People with disabilities in community settings	12	1,473,496,732	9,280,791	2,685,910,540	0	$ 4,168,688,063	0	0.00	Y	Y	FO	42 CFR 441 s	All - see program unit/activity description	POP 105 - Healthier Oregon Program (HOP) POP 131 - Children's Foster Care Rates POP 132 - Targeted Rate Increases
			I/DD	I/DD Program	Waiver Services - Employment First (no CSL)	These services have been strengthened and improved as part of the important Employment First initiative. I/DD has restructured employment services to encourage integrated, competitively paid employment for people with I/DD. Employment services are no longer bundled with attendant care services, they have been broken out into discrete services to support people as they learn about, find and maintain employment. Employment services are not offered through the CFCO, they remain available through the Medicaid waiver. Employment services include: Employment path; job discovery; Job development; Job coaching and Small-group supported employment.	People with disabilities in community settings	12	69,394,250	0	97,170,712	0	$ 166,564,962	0	0.00	Y	Y	FO	EO 15-01 https://www.oregon.gov/DHS/EMPLOYMENT/EMPLOYMENT-FIRST/Documents/Executive%20Order%2015-01.pdf	All - see program unit/activity description	POP 132 - Targeted Rate Increases
			I/DD	I/DD Program	Waiver Services - No Employment	1915c Waivers include Adult HCBS Waiver, Children's HCBS Wiaver and three model Wiavers for children under 18 with complex needs: Medically Involved Children's Model Waiver, Medically Fragile Model Waiver, and Behavioral Model Waiver. These waivers primary servcie is case management that is furnished to assist individuals in gaining access to needed medical, social, educational and other services. Waiver Case Management includes the following assistance: assessment and periodic reassessment of individual needs, development (and periodic revision) of a specific care plan, referral and related activities, and monitoring and follow-up activities. Other 1915c Wiaver servcies include environmental safety modifications, vehicle modifications, family training, specialized medical supplies, and direct nursing servcies (for adults only).	People with disabilities in community settings	12	24,351,596	5,821,280	33,977,159	0	$ 64,150,035	0	0.00	Y	Y	FO	42 CFR 441 Subpart G https://www.ecfr.gov/cgi-bin/text-idx?SID=ee1d5a7b4341f1514069eca301e17436&mc=true&node=pt42.4.441&rgn=div5	All - see program unit/activity description	N/A
			I/DD	I/DD Program	Stabilization and Crisis Unit (k plan group homes)	SACU is a 24-hour service provided under the CFCO. SACU provides a safety net for Oregon's most vulnerable, intensive, medically and behaviorally challenged people with I/DD. SACU provides services when no other community-based option is available for a person. This includes persons with I/DD coming out of the Oregon State Hospital, corrections systems, and from crisis situations where counties and private providers cannot meet the needs of the person to ensure their health and safety. SACU focuses on supporting people in community-based settings and enabling them to return to less intensive service levels as quickly as possible. SACU provides 24-hour residential and day supports to people with I/DD from across the state who have significant medical or behavioral needs. The services are provided in licensed five-bed group homes.	People with disabilities in community settings	12	61,741,550	1,629,436	108,288,853	0	$ 171,659,839	745	744.92	N	Y	FO	42 CFR 441 s	All - see program unit/activity description	N/A
			CW	Foster Care	Independent Living Services	Helps youth who are, or were, in foster care to become self-sufficient adults. Gives an opportunity for youth to learn valuable skills necessary to make a successful transition from state or tribal care to living independently.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	9,986,478	56,300	5,841,456	0	$ 15,884,234	0	0.00	Y	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Nursing Assessments	Every child receives an intake nursing assessment by a DHS contracted nurse shortly after entering foster care. This assessment assures the child has all prescribed medication and assistive devices and is second set of eyes assuring safety. The contracted nurse also works with the foster/relative care provider to assure they have a clear understanding of the child's needs and can expedite referral to a physical, dental or mental health assessment when necessary.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	1,095,593	6,071	1,355,706	0	$ 2,457,370	0	0.00	Y	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

2023-25 Biennium **Agency Number: 10000**

Agency-Wide Priorities for 2023-25 Biennium

1	2	3	4a	4c	4d	5	6	7	8	10	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)		**Agency Initials**	**Program or Activity Initials**	**Program or Activity Initials (DCR)**	**Sub-DCR**	**Program Unit/Activity Description**	**Identify Key Performance Measure(s)**	**Primary Purpose Program-Activity Code**	**GF**	**OF**	**FF**	**NL-FF**	**TOTAL FUNDS**	**Pos.**	**FTE**	**New or Enhanced Program (Y/N)**	**Included as Reduction Option (Y/N)**	**Legal Req. Code (C, D, FM, FO, S)**	**Legal Citation**	**Explain What is Mandatory (for C, FM, and FO Only)**	**Comments on Proposed Changes to CSL included in Agency Request**
Agcy	**Prgm/ Div**																				
			CW	Foster Care	Other Medical	Other Medical is used to pay for services to help guide good case planning when the services are not covered by Medicaid or private health insurance, such as: Parent/Child Interaction, Sibling Interaction, Urinalysis Drug Testing, Psychosexual Evaluations, etc.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	6,062,482	7,493		0	$ 6,069,975	0	0.00	N	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Client Transportation	Client Transportation is used to fund transportation related to visitation, medical appointments, court hearings, etc.	Timeliness and permanency of child reunification	12	9,076,076	94,494	3,856,363	0	$ 13,026,933	0	0.00	Y	Y	FM	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	IV-E FC and Admin Reimbursements	Title IV-E Waiver project is Leveraging Intensive Family Engagement (LIFE). LIFE services include intensive family finding efforts to create and strengthen relationships with kith and kin, structured case planning meetings that are strengths based; trauma informed; culturally responsive, and family driven, and referrals to parent mentors who can facilitate the family's navigation through the system to help shorten the lengths of stay for children predicted to stay in the system for more than 3 years.	Timeliness and permanency of child reunification	12	0	0	10,783,684	0	$ 10,783,684	0	0.00	Y	N	FO	ORS 419A and 419B	All - see program unit/activity description	N/A
			CW	Foster Care	Foster Care Services	Contracted services to support the recruitment and retention of good foster families.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	20,490,220	512	1,226,533	0	$ 21,717,265	0	0.00	Y	Y	FO	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Foster Care	Interstate Compacts	The Interstate Compact for the Placement of Children (ICPC) Program processes requests for placement across state lines in the context of dependency cases and in private placements, ensuring that legal and administrative requirements are met so that children are placed in safe and appropriate permanent homes. In addition, field-based specialized ICPC workers complete home studies for Oregon families across the state who are seeking placement of their relative children from another state's foster care program.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	630,826	5,192	308,770	0	$ 944,788	0	0.00	N	N	FO	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	In-Home Safety and Reunification Services		This program provides culturally appropriate intensive, short term services to families with children who can remain safely in their homes, and to children and families who are safely reunited. ISRS provides a combination of safety and strengths-based services that lead to lasting safety changes within the family. These services are time limited and are complemented by SPRF services for families in need of longer term or more intensive services.		12	4,442,509	61,976	18,920,888	0	$ 23,425,373	0	0.00	N	Y	FO	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Addiction & Recovery Services		Services in Washington, Clackamas and Lane counties that allow parents who have just completed residential treatment for their addiction to stabilize in their communities in settings that are alcohol and drug free and staff supported. Decreases foster care costs as chidlren stay with their parents. Family Support Teams are a combination of contracted staff with expertise in addiction treatment and intervention and Child Welfare caseworkers responding to parents with substance use disorders. Service providers include addictions counselors and peer level supports known as 'outreach workers' housed in Child Welfare branches for immediate access by caseworkers and families.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification. Absence of repeat maltreatment	12	3,282,391	48	4,845,658	0	$ 8,128,097	0	0.00	N	Y	FO	ORS 419A and 419B	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	System of Care		System of Care funds support Oregon's most vulnerable children by providing local child welfare offices with the flexibility to purchase specific services to meet a family's specific needs to assure the safety, permanency and well-being of their child(ren). Services are identified and planned for through family engagement and involvement in case planning. Whenever possible, shared funding of custom-designed services is achieved through collaboration with community partners.	Absence of repeat maltreatment	12	9,967,396	33,421	3,296,235	0	$ 13,297,052	0	0.00	N	Y	FO	ORS 418.015	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Strengthen, Presrvg & Reunfg Families (SPRF)		The Strengthening Preserving and Reunifying Families law (ORS 418.575-418.598) allows funding for an array of services for families through collaboration between DHS and local community partners. The Department has developed outcome-based contracts for services to specifically address the needs of children and families who come to the attention of child welfare through a screened in report of abuse or neglect. These outcome based contracts are foundational for an overall ability to report on results associated with SPRF services and funding.		12	22,284,554	0	0	0	$ 22,284,554	0	0.00	Y	Y	FO	ORS 418.575	All - see program unit/activity description	N/A
			CW	Guardianship Assistance		Guardianship Assistance is intended to help prevent a child from remaining in foster care when reunification with parents and adoption are not appropriate permanency options. Guardianship assistance supports relatives assuming legal guardianship by providing financial and medical assistance until the child/young adult is 18 years of age, to guardians who are not able to meet their child's needs without assistance.	Timely adoption, Absence of repeat maltreatment, Timeliness and permanency of child reunification	12	26,141,961	99,517	27,194,636	0	$ 53,436,114	0	0.00	N	N	FO	Social Security Act, Section 473; ORS 418.330; ICWA	All - see program unit/activity description	POP 123 FC/Resource Parent Reimbursement Rates
			CW	Adoption Assistance		Adoption Assistance is intended to help prevent a child from remaining in foster care when they cannot be safely returned to parent(s), and provides financial and medical assistance unti the child/young adult is 18 years of age, to adoptive parents who are not able to meet the child/young adult's needs without assistance.	Timely adoption, Timeliness and permanency of child reunification	12	90,345,287	60,631	99,890,209	0	$ 190,296,127	0	0.00	N	N	FM	Public Law 96-272; Public Law 105-89; Social Security Act , Section 473; ICWA	All - see program unit/activity description	POP 123 FC/Resource Parent Reimbursement Rates POP 124 SSB & Child Support Payments Package
			CW	Post Adoption-Services		Post Adoption Services support adoptive parents and guardians through training, specialized support, mentoring, etc.	Timely adoption, Timeliness and permanency of child reunification	12	506,390	3,067,582	1,063,584	0	$ 4,637,556	0	0.00	N	Y	FO	ORS 419A and 419B	All - see program unit/activity description	N/A

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

2023-25 Biennium — Agency Number: 10000

Agency-Wide Priorities for 2023-25 Biennium

1 Priority (ranked with highest priority first) Agcy	2 Prgm/ Div	3 Agency Initials	4a Program or Activity Initials	4c Program or Activity Initials (DCR)	4d Sub-DCR	5 Program Unit/Activity Description	6 Identify Key Performance Measure(s)	7 Primary Purpose Program-Activity Code	8 GF	10 OF	12 FF	13 NL-FF	14 TOTAL FUNDS	15 Pos.	16 FTE	17 New or Enhanced Program (Y/N)	18 Included as Reduction Option (Y/N)	19 Legal Req. Code (C, D, FM, FO, S)	20 Legal Citation	21 Explain What is Mandatory (for C, FM, and FO Only)	22 Comments on Proposed Changes to CSL included in Agency Request
			SSP	Supplemental Nutrition Asst. Program	EBT SNAP	SNAP offers food assistance to low-income individuals and families to help meet their nutritional needs. Benefits to participants are 100 percent federally funded; however, the administration of the program requires a 50 percent state match. Approximately one in five Oregonians receive food assistance through SNAP. SNAP is an important and constantly growing anti-poverty program. Recent research has shown that SNAP benefits reduce the depth and severity of poverty, and have a particularly strong effect on reducing child poverty. SNAP benefits add about $1.1 billion dollars per year to the Oregon Economy including rural Oregon. Self-Sufficiency offices across the state serve the majority of the SNAP population. Elderly persons (60 and older) plus persons with disabilities who require services are assisted by Aging and People with Disabilities (APD) Program offices and their contracted: Area Agencies on Aging, Disability Services Offices and Councils of Government.	Food stamp utilization, Food stamp accuracy	12	0	0	0	3,589,534,623	$ 3,589,534,623	0	0.00	N	N	FM	SNAP is guided by federal legislation found in the "Farm Bill" authorized by the Agricultural Act of 2014 (P.L. 113-79, Feb. 7,2014). Program policy is reauthorized every five years through the Farm Bill.	All - see program unit/activity description	N/A
			SSP	Supplemental Nutrition Asst. Program	SNAP Cashout	SNAP offers food assistance to low-income individuals and families to help meet their nutritional needs. Benefits to participants are 100 percent federally funded; however, the administration of the program requires a 50 percent state match. Approximately one in five Oregonians receive food assistance through SNAP. SNAP is an important and constantly growing anti-poverty program. Recent research has shown that SNAP benefits reduce the depth and severity of poverty, and have a particularly strong effect on reducing child poverty. SNAP benefits add about $1.1 billion dollars per year to the Oregon Economy including rural Oregon. Self-Sufficiency offices across the state serve the majority of the SNAP population. Elderly persons (60 and older) plus persons with disabilities who require services are assisted by Aging and People with Disabilities (APD) Program offices and their contracted: Area Agencies on Aging, Disability Services Offices and Councils of Government.	Food stamp utilization, Food stamp accuracy	12	0	0	0	92,333,504	$ 92,333,504	0	0.00	N	N	FM	SNAP is guided by federal legislation found in the "Farm Bill" authorized by the Agricultural Act of 2014 (P.L. 113-79, Feb. 7,2014). Program policy is reauthorized every five years through the Farm Bill.	All - see program unit/activity description	N/A
			APD	Disability Determination Services Program		People with disabilities may be able to qualify for one of two federal disability programs: Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI). These programs are governed by the federal Social Security Administration (SSA). Oregon performs this work on behalf of the Social Security Administration under contract. DDS employs over 200 employees and has a budget of over $60M.			0	0	21,892,974	0	$ 21,892,974	0	0.00	N	N	FM	N/A		N/A
			SSP	Supplemental Nutrition Asst. Program	SNAP Employment and Training	Oregon is federally required to offer a limited companion employment and training program. SNAP participants may be enrolled in one of the following programs: Oregon Food Stamp Employment Transition (OFSET) program and the Able-Bodied Adults Without Dependents (ABAWD) program. More comprehensive services are provided through the 50/50 employment and training program, referred to in Oregon as SNAP Training and Employment Program (STEP).	Food stamp utilization, Food stamp accuracy	12	821,143	0	11,241,573	0	$ 12,062,716	0	0.00	N	N	FM	This program is mandated by federal legislation found in the Food and Nutrition Act of 2008, authorized by the 2008 Farm Bill.	All - see program unit/activity description	N/A
			SSP	Supplemental Nutrition Asst. Program	SNAP Ed	SNAP Ed provides direct education services to SNAP participants in every county in Oregon. Through its Hub model, Oregon reached 371,220 participants (combination of direct education, social marketing and PSE interventions). SNAP-Ed's social marketing initiative "Food Hero" has an evidence-based website, recipes and PSE interventions that support low-income audiences in making healty choices on a limited budget. SNAP-Ed is 100% Federal Funds.			0	0	15,329,085	0	$ 15,329,085	0	0.00	N	N	FM	This program is mandated by federal legislation found in the Food and Nutrition Act of 2008, authorized by the 2008 Farm Bill.	All - see program unit/activity description	N/A

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

2023-25 Biennium — Agency Number: 10000

Agency-Wide Priorities for 2023-25 Biennium

1 Priority (ranked with highest priority first) Agcy	2 Prgm/ Div	3 Agency Initials	4a Program or Activity Initials	4c Program or Activity Initials (DCR)	4d Sub-DCR	5 Program Unit/Activity Description	6 Identify Key Performance Measure(s)	7 Primary Purpose Program-Activity Code	8 GF	10 OF	12 FF	13 NL-FF	14 TOTAL FUNDS	15 Pos.	16 FTE	17 New or Enhanced Program (Y/N)	18 Included as Reduction Option (Y/N)	19 Legal Req. Code (C, D, FM, FO, S)	20 Legal Citation	21 Explain What is Mandatory (for C, FM, and FO Only)	22 Comments on Proposed Changes to CSL included in Agency Request
			SSP	Supplemental Nutrition Asst. Program	SNAP Outreach 50%	SNAP Outreach to potentially eligible household who are not currently accessing SNAP benefits is part of Oregon's plan. priorities include messaging the need to complete and return necessary paperwork and retention of their Oregon Trail Cards (Oregon's EBT card). The education component of the plan also includes stretching food budgets, utilizing locally available resources and assist by educating people about reporting changes. Currently there are 15 Outreach contracted partners that work closely with local DHS offices. This State Plan has a 50% Federal reimbursement for contractors.			92,509	0	1,632,546	0	$ 1,725,055	0	0.00	N	N	FM	This program is mandated by federal legislation found in the Food and Nutrition Act of 2008, authorized by the 2008 Farm Bill.	All - see program unit/activity description	N/A
			SSP	Food Assistance	TEFAP, CSFP, OHRF, OHTF	The Emergency Food Assistance Program (TEFAP) is a federally funded program that helps supplement the diets of low-income Americans, including elderly people, by providing them with emergency food assistance at no cost. The Oregon Food Bank is primary grantee in Oregon and works with the Oregon Food Bank network to deliver services across Oregon. The Commodity Supplemental Food Program (CSFP) provides nutritious commodities to help meet the nutritional needs of low-income elderly persons (aged 60 or older) in Oregon. Through local agencies, each participant receives a monthly package of commodities. There are currently 7 Regional Food Banks who contract with roughly 100 pantries that distribute the food boxes. The Oregon Hunger Response Fund is an allocation from the Legislature to the Oregon Food Bank to help build infrastructure and transport food to food pantries and other important efforts to support the Food Bank and Food Bank Networks. Oregon Housing and Community Services, with legislative approval, transferred the Oregon Hunger Response Fund (OHRF) to the Department of Human Services effective 10/1/2015. Oregon Hunger Task Force (OHTF) is a 28-seat task force that is directed to "serve as an advocate for hungry persons," studying the problem of hunger, making recommendations, and helping local communities implement changes. Working with partners throughout Oregon, the task force has since worked to promote community awareness, compile research, develop proposals for government action, and conduct outreach to expand participation in nutrition programs.	Food stamp utilization, Food stamp accuracy	12	23,814,086	0	3,896,817	0	$ 27,710,903	0	0.00	N	N	FM	7 CFR Part 247 and 250; Emergency Food Assistance Act of 1983;FNS Instructions 716-3, 410-1, and 113-1; Oregon Revised Statutes 458.530; Title VI of the Civil Rights Act of 1964 (42 U.S.C. § 2000d et seq.)	All - see program unit/activity description	POP 139 Local Food Purchasing
			SSP	Family Support and Connections		Provides supports to prevent children in the TANF program from entering the child welfare system. Home visiting and community-based services are some of the interventions used to build on family strengths and address family functioning issues.	TANF re-entry, TANF family stability	12	311,039	0	18,824,571	0	$ 19,135,610	0	0.00	N	N	FO	Title II of the Child Abuse Prevention and Treatment Act (CAPTA), as amended by P.L. 111-320, authorizes grant funds to be released to the states and names the program Community-Based Grants for the Prevention of Child Abuse and Neglect (CBCAP).	All - see program unit/activity description	N/A

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

2023-25 Biennium — Agency Number: 10000

Agency-Wide Priorities for 2023-25 Biennium

1	2	3	4a	4c	4d	5	6	7	8	10	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)		**Agency Initials**	**Program or Activity Initials**	**Program or Activity Initials (DCR)**	**Sub-DCR**	**Program Unit/Activity Description**	**Identify Key Performance Measure(s)**	**Primary Purpose Program-Activity Code**	**GF**	**OF**	**FF**	**NL-FF**	**TOTAL FUNDS**	**Pos.**	**FTE**	**New or Enhanced Program (Y/N)**	**Included as Reduction Option (Y/N)**	**Legal Req. Code (C, D, FM, FO, S)**	**Legal Citation**	**Explain What is Mandatory (for C, FM, and FO Only)**	**Comments on Proposed Changes to CSL included in Agency Request**
Agcy	**Prgm/ Div**																				
			SSP	Cash Assistance	TANF Basic	TANF is a collection of programs directed at improving the lives of very low-income Oregon families with children. It is a critical safety net program for families with children living in extreme poverty and helps families from a variety of diverse backgrounds to address their most basic needs. TANF provides eligible families with cash assistance, connections to support and community resources, case management, and employment and training services. Families typically use TANF funds to prevent homelessness and to help with other factors contributing to family instability. The goal of the program is to help families address barriers, gain skills and access employment opportunities to become self-sufficient.	TANF re-entry, TANF family stability	12	115,389,556	358,400	168,140,049	0	$ 283,888,005	0	0.00	Y	Y	FO	The TANF program is authorized under Title IV-A of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Act, as amended by the Work Opportunity Reconciliation Act of 199 (PRWORA), and the Deficit Reduction Act of 2005. State Statue chapters are 411 and 412.	All - see program unit/activity description	POP 135 - TANF Redesign
			SSP	Cash Assistance	TANF UN	TANF is a collection of programs directed at improving the lives of very low-income Oregon families with children. It is a critical safety net program for families with children living in extreme poverty and helps families from a variety of diverse backgrounds to address their most basic needs. TANF provides eligible families with cash assistance, connections to support and community resources, case management, and employment and training services. Families typically use TANF funds to prevent homelessness and to help with other factors contributing to family instability. The goal of the program is to help families address barriers, gain skills and access employment opportunities to become self-sufficient.	TANF re-entry, TANF family stability	12	62,489,877	640	4,406,400	0	$ 66,896,917	0	0.00	N	Y	FO	State Statutes Chapters 411 and 412.	All - see program unit/activity description	POP 135 - TANF Redesign
			SSP	Cash Assistance	State Family Pre SSI/SSDI	The State Family Pre-SSI/SSDI (SFPSS) Program is designed to assist TANF-eligible individuals with disabilities obtain Social Security disability benefits through the Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) programs. The program serves individuals who are not required to participate in the JOBS program. The program provides families with a cash grant, professional assistance with Social Security Administration (SSA) applications and appeals as well as case management services. Once a client is awarded SSI benefits, the department recovers a portion of the payments it made to the family during the application process from the client's initial SSI lump-sum payment.	TANF re-entry, TANF family stability	12	776,748	843,376	275,400	0	$ 1,895,524	0	0.00	N	Y	FO	State Statutes Chapters 411 and 412.	All - see program unit/activity description	N/A
			SSP	JOBS Contracts/Support Services Activities	TANF Programs	Most adults must meet additional requirements to receive TANF services. The JOBS program provides employment, education, skill-building and family stability services to individuals of families receiving TANF assistance. Individuals participate in JOBS to gain skills necessary to join the workforce and retain employment.	TANF re-entry, TANF family stability	12	12,100,662	451,439	81,423,400	0	$ 93,975,501	0	0.00	Y	N	FO	State Statutes Chapters 411 and 412.	All - see program unit/activity description	N/A
			I/DD	I/DD Program	Other Services (Includes Housing)	The I/DD Community Housing Program assists persons with developmental disabilities to live successfully in community housing that is affordable and safe and contributes to their independence and quality of life. I/DD Community Housing supports services to persons with developmental disabilities by overseeing the property management of homes developed for the former Fairview State Training Center residents, develops and manages funds eligible for home modification for IDD individuals, coordinating the operation of the Fairview Community Housing Trust that was established with revenue from the sale of Fairview and providing technical assistance to individuals, families, brokerages, and counties regarding housing issues faced by persons with developmental disabilities and best practices to implement solutions.	People with disabilities in community settings	12	8,346,597	3,262,865	379,188	0	$ 11,988,650	0	0.00	N	Y	FO	42 CFR 441 s	All - see program unit/activity description	POP 128 - Child Welfare and IDD Parents
			VR	VR - Basic Rehabilitative Services		These are basic services provided to individuals whose disabilities present a potential barrier to employment. A rehabilitation counselor conducts a comprehensive assessment to evaluate vocational potential, including diagnostic and related services necessary for the determination of eligibility for services as well as the nature and scope of services to be provided. Vocational counseling and guidance builds on this assessment and helps the client identify a vocational goal. The counselor, in partnership with the client, develops an individualized plan for employment and authorizes	Vocational rehabilitation services employment	12	18,936,280	9,742,259	36,552,817	0	$ 65,231,356	0	0.00	Y	Y	FO	29 U.S.C. 796c and 29 U.S.C 796e-2	All - see program unit/activity description	116 - Grant Prgm for CBO, 145 - RCDHH/VRC's, 146 - WIN (Wrk Incent Netwrk) , 148 - RSA Audit
			VR	State Independent Living Council (SILC)		This funding supports the seven Centers for Independent Living through out the state of Oregon. Centers for Independent Living are designed to help individuals who experience disabilities achieve personal goals for independence and participation in their families and communities.	Vocational rehabilitation services employment	12	4,790,257	0	738,328	0	$ 5,528,585	0	0.00	N	Y	FO	29 U.S.C. 796d	All - see program unit/activity description	POP 144 - Pay Equity for CILS,

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

2023-25 Biennium — Agency Number: 10000

Agency-Wide Priorities for 2023-25 Biennium

1 Priority (ranked with highest priority first) Agcy	2 Prgm/ Div	3 Agency Initials	4a Program or Activity Initials	4c Program or Activity Initials (DCR)	4d Sub-DCR	5 Program Unit/Activity Description	6 Identify Key Performance Measure(s)	7 Primary Purpose Program-Activity Code	8 GF	10 OF	12 FF	13 NL-FF	14 TOTAL FUNDS	15 Pos.	16 FTE	17 New or Enhanced Program (Y/N)	18 Included as Reduction Option (Y/N)	19 Legal Req. Code (C, D, FM, FO, S)	20 Legal Citation	21 Explain What is Mandatory (for C, FM, and FO Only)	22 Comments on Proposed Changes to CSL included in Agency Request
			APD	APD Program	Other Services	The Centers for Medicare and Medicaid Services (CMS) requires DHS to coordinate with Medicare in many areas and clients need help accessing other programs for which they are eligible. The federal Medicare program is the most common program clients need assistance with. APD determines client eligibility and submits client data to CMS for two Medicare-related programs: Medicare buy-in and Medicare Part D low-income subsidy. APD served more than 130,000 clients in these two programs over one year. These programs help low-income beneficiaries with their cost-sharing requirements. Securing this coverage also ensures Medicare remains in a "first payor" status, ultimately saving the state's Medicaid program significant money.		12	15,592,678	4,961,352	28,226,119	0	$ 48,780,149	0	0.00	Y	Y	FO	ORS 410.070	All - see program unit/activity description	POP 103 - Address Systemic Poverty Issues
			APD	APD Program	Older Americans Act	Services and supports provided to individuals under the Older Americans Act (OAA) provide vital assistance designed to prevent or delay entry into Medicaid-funded long-term care such as In-Home or 24-hour residential services. The OAA is a Federal law that set out a national aging network structure consisting of the U.S. Administration on Aging (AoA) now part of the Administration for Community Living, State Units on Aging (DHS/Aging and People with Disabilities program), and Area Agencies on Aging (AAAs). The OAA authorizes funding and services through this network to serve older individuals in their homes and communities, through local entities. All individuals, aged 60 or older, regardless of income are eligible to receive services but the programs are targeted towards those in greatest social or economic need. A specific focus on how to better serve diverse populations of older adults across race/ethnicity, sexual orientation, gender, veteran status, and other intersecting categories are essential with the continually changing demographics of Oregon.		12	3,126,863	0	36,329,539	0	$ 39,456,402	0	0.00	N	Y	FO	ORS 410.070	All - see program unit/activity description	N/A
			APD	APD Program	Oregon Project Independence	This is a state-funded program offering in-home services and related supports to individuals 60 years of age and older or people who have been diagnosed with Alzheimer's or a related dementia disorder. Approximately 5,000 Oregonians are served in this program. It represents a critical element in Oregon's strategy to prevent or delay individuals from leaving their own homes to receive services in more expensive facility-based settings, or depleting their personal assets sooner than necessary and accessing more expensive Medicaid health and long-term service benefits. The program was expanded by the 2005 Oregon Legislature to include younger adults with disabilities. In 2014 and 2015 a pilot program was funded expanding the program to adults ages 19-59 with physical disabilities. Through this pilot more than 500 individuals have been served. OPI is administered statewide by local Area Agencies on Aging (AAAs). Many areas have waiting lists due to high demand and limited program funding. Client eligibility is determined by an assessment of functional ability and natural supports related to activities of daily living. Typical services include assistance with housekeeping, bathing, grooming, health care tasks, meal preparation, caregiver respite, chore services, adult day services and transportation. The OPI program has no financial asset limitations for clients. A sliding fee scale is applied to clients with net monthly income between 100 and 200 percent of the federal poverty level (FPL) to pay toward the cost of service. A small group with income above 200 percent of FPL pays the full rate for services provided. Generally, this is because they benefit from the case management; ongoing support and monitoring, in addition to the actual purchased services.		12	30,546,542	0	36,266,961	0	$ 66,813,503	0	0.00	N	Y	S	ORS 410.410		N/A
			SSP	Refugee Program		The program serves individuals and families who fled persecution in their country of origin and were legally admitted for resettlement by the United States government. Refugees and people who have been granted asylum access the program for financial, employment-related and acculturation services. The program guides refugees toward economic stability through employment as early as possible. The program serves only those persons in immigration categories approved by the Federal Office of Refugee Resettlement (ORR).		12	4,480,600	0	6,554,623	0	$ 11,035,223	0	0.00	N	N	FM	ORS 411.060, 409.010(2) ©, 409.010(2)(h)	All - see program unit/activity description	N/A
			SSP	Cash Assistance	TANF Transition	Services are available to families who transition from TANF cash benefits to employment. These programs include allowing families to make more money before closing the TANF grant, a reduced copay for childcare, and three months of supportive cash benefits once the TANF has closed. These services are intended to provide a glide path for families as they transition to employment and help ease the burden of the costs related to this change.	TANF re-entry, TANF family stability	12	3,644,213	0	0	0	$ 3,644,213	0	0.00	N	N	FO	State Statutes Chapters 411 and 412.	All - see program unit/activity description	N/A
			SSP	Youth Services		My Future - My Choice program is an age-appropriate, medically accurate, sexual health education program. This service supports community prevention efforts to help families break the generational connection to public assistance. The program expands on the historical teen pregnancy prevention program to provide education and tools for youth to resist multiple risk-taking behaviors. DHS partners with the Oregon Department of Education and the My Future - My Choice Advisory Committee to develop and implement the program.		12	15,869,955	0	1,420,424	0	$ 17,290,379	0	0.00	N	N	FO	The Title V Federal Abstinence Education Program Grant	All - see program unit/activity description	POP 136 - Youth Experiencing Homelessness

PROGRAM PRIORITIZATION FOR 2023-25

Agency Name: Oregon Department of Human Services

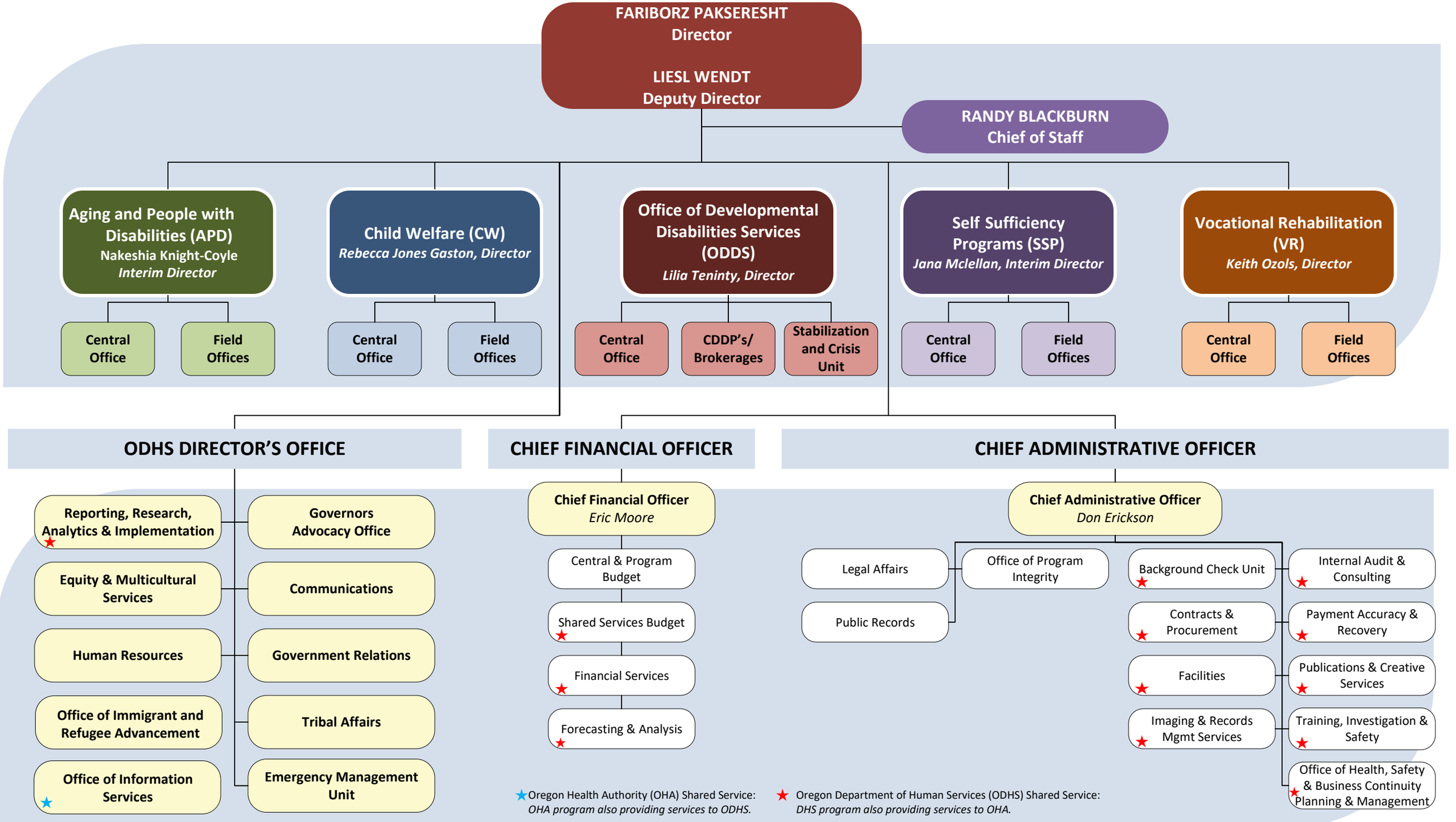
2023-25 Biennium **Agency Number: 10000**

Agency-Wide Priorities for 2023-25 Biennium

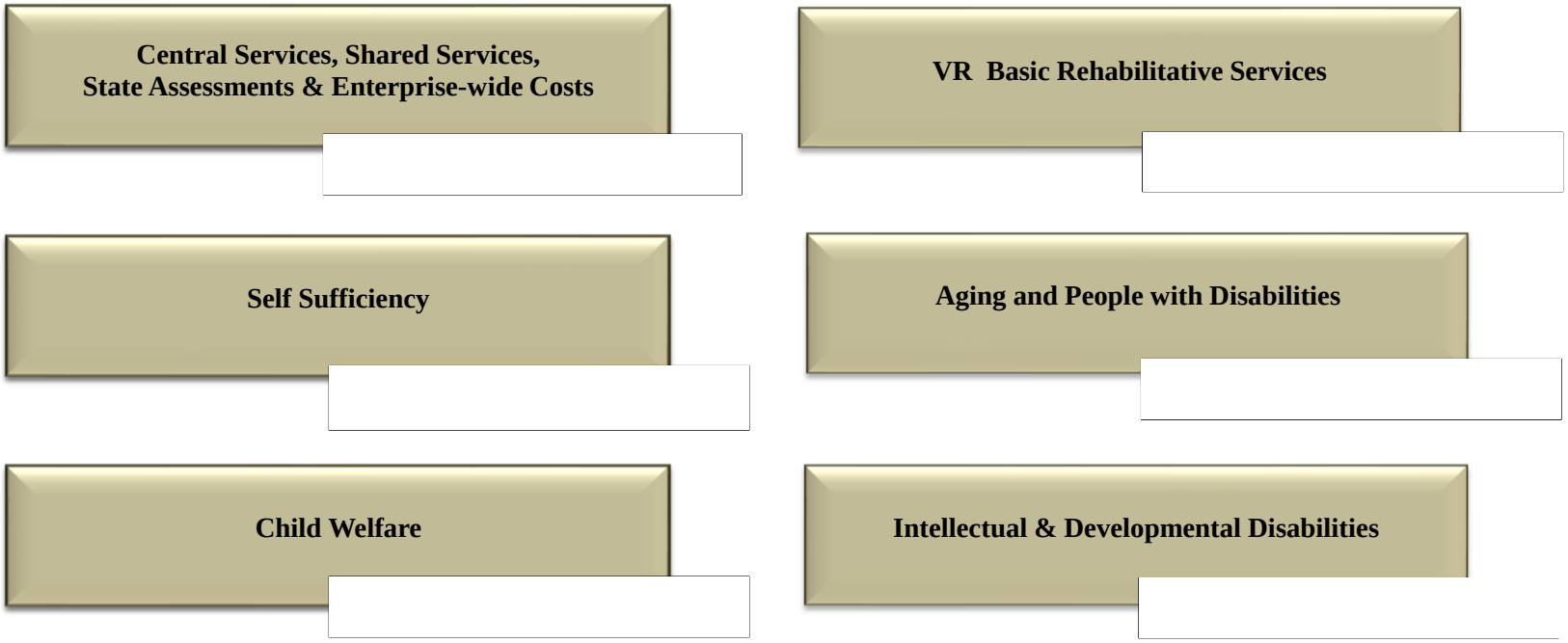
1	2	3	4a	4c	4d	5	6	7	8	10	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)		**Agency Initials**	**Program or Activity Initials**	**Program or Activity Initials (DCR)**	**Sub-DCR**	**Program Unit/Activity Description**	**Identify Key Performance Measure(s)**	**Primary Purpose Program-Activity Code**	**GF**	**OF**	**FF**	**NL-FF**	**TOTAL FUNDS**	**Pos.**	**FTE**	**New or Enhanced Program (Y/N)**	**Included as Reduction Option (Y/N)**	**Legal Req. Code (C, D, FM, FO, S)**	**Legal Citation**	**Explain What is Mandatory (for C, FM, and FO Only)**	**Comments on Proposed Changes to CSL included in Agency Request**
Agcy	**Prgm/ Div**																				
			SSP	SUD Childcare		The Department of Education, Early Learning Division (ELD) supported contracts with Substance Use Disorder (SUD) treatment clinics to cover child care for parents in treatment for several years. Due to changes in the funding source, 2014 Reauthorization of the Child Care Development Block Grant, ELD was no longer able to leverage these funds to support the contracts. Department of Human Services (DHS) worked closely with the SUD facilities, ELD, Child Welfare, and Oregon Health Authority to create the DHS SUD child care program to allow for continued support for the SUD facilities and the families they serve. DHS leveraged TANF Federal funding to support the contracts to cover child care needs for families in SUD treatment. The TANF funding allows DHS to cover the cost of care for up to 4 months while the families apply for a TANF grant and work with their local DHS worker to create a case plan that includes SUD treatment. Once a case plan is in place the child care is covered through the local DHS JOBS support service payment budgets.		12	0	0	900,000	0	$ 900,000	0	0.00	N	N	FO	45 CFR 260.31 (b) & ORS 411.117 (1) (e)		N/A
			SSP	Other Family Support		Other Family Supports provides services to families not fitting into other program areas. For CSL, this budget only includes the Culturally Responsive Tax program. POPs would add Housing Stabilization and a Demonstration project for Jackson Co.		12	104,312,684				$ 104,312,684	0	0.00	Y	N	S	2022 OR Laws, Chapter 67		POP 137 - Housing Stabilization Program Expansion, POP 141 Jackson Co. Demonstration
			CW	Adoption Supports		Adoptions finalized in an Oregon court for a child who is not in the custody of the Department of Human Serivces. DHS provides background checks and files petitions and provides adoption assistance for eligible private adoptions. Contracted adoption agencies provide placement reports for independent adoptions as assigned by DHS. They also complete home studies when assigned by DHS. Contractors provide assisted search services for the Adoption Search & Registry Program, search for eligible birth and adoptive persons.	Timely adoption, Timeliness and permanency of child reunification	12	732,413	343,244	747,887	0	$ 1,823,544	0	0.00	N	Y	FO	ORS 109.309	All - see program unit/activity description	POP 124 SSB & Child Support Payments Package
			CW	Contracted Adoption Services		Contrators provide adoption committee presentation, placement, adoption supervision and finalization services.	Timely adoption, Timeliness and permanency of child reunification	12	2,154,712	0	1,800,940	0	$ 3,955,652	0	0.00	N	Y	FO	ORS 419A and 419B	All - see program unit/activity description	N/A
			CW	Child Care for Foster Parents		$375 per month per child reimbursement to foster parents when all foster parents work outside of the home.		12	55,504	7,611,624	5,417,365	0	$ 13,084,493	0	0.00	N	N	FM	ORS 418.015		POP 124 SSB & Child Support Payments Package
									3,879,562,252	246,662,402	6,342,089,919	3,681,868,127	14,150,182,700	745	744.92						

OREGON DEPARTMENT OF HUMAN SERVICES (ODHS)

LAST UPDATED 04/15/2022



OREGON DEPARTMENT OF HUMAN SERVICES
2021-23 Legislatively Approved Budget
Budget Structure



OREGON DEPARTMENT OF HUMAN SERVICES
2023-25 Agency Request Budget Structure

Oregon Department of Human Services

Central Services, Shared Services, State Assessments & Enterprise-wide Costs

1,377 Pos / 1,330.76 FTE

VR Basic Rehabilitative Services

320 Pos / 306.29 FTE

Self Sufficiency

3,782 Pos / 3,523.84 FTE

Aging and People with Disabilities

2,094 Pos /2,014.80 FTE

Child Welfare

4,009 Pos / 3,671.23 FTE

Intellectual & Developmental Disabilities

1,052 Pos / 1,039.80 FTE

Summary Cross Reference Number	*Cross Reference Description*	*2019-21 Actuals*	*2021-23 Leg Adopted Budget*	*2021-23 Leg Approved Budget*	*2023-25 Agency Request Budget*	*2023-25 Governor's Budget*	*2023-25 Leg. Adopted Budget*
010-40-00-00000	**DHS Central Services**						
	General Fund	95,045,398	185,729,161	209,961,790	232,018,376	-	-
	Other Funds	38,940,051	2,706,143	45,895,088	50,573,784	-	-
	Federal Funds	154,292,539	111,573,525	126,444,545	167,963,533	-	-
	All Funds	288,277,988	300,008,829	382,301,423	450,555,693	-	-
010-45-00-00000	**DHS Shared Services**						
	Other Funds	152,358,658	167,299,992	178,008,753	196,016,595	-	-
010-50-00-00000	**State Assessments and Enterprise-wide Costs**						
	General Fund	282,234,241	343,774,637	363,005,121	412,486,051	-	-
	Other Funds	12,590,033	51,472,780	52,778,382	54,888,680	-	-
	Federal Funds	178,735,455	230,296,582	241,278,088	297,454,026	-	-
	All Funds	473,559,729	625,543,999	657,061,591	764,828,757	-	-
060-01-00-00000	**Self Sufficiency - Program**						
	General Fund	455,016,515	506,780,130	564,979,504	834,321,875	-	-
	Other Funds	160,228,245	228,308,065	227,814,723	2,507,797	-	-
	Federal Funds	3,266,771,735	3,521,623,502	4,274,009,675	4,390,430,144	-	-
	All Funds	3,882,016,495	4,256,711,697	5,066,803,902	5,227,259,816	-	-
060-02-00-00000	**Safety**						
	General Fund	21,751,874	-	-	-	-	-
	Other Funds	8,774,158	-	-	-	-	-

Summary Cross Reference Number	*Cross Reference Description*	*2019-21 Actuals*	*2021-23 Leg Adopted Budget*	*2021-23 Leg Approved Budget*	*2023-25 Agency Request Budget*	*2023-25 Governor's Budget*	*2023-25 Leg. Adopted Budget*
060-02-00-00000	**Safety**						
	Federal Funds	37,970,715	-	-	-	-	-
	All Funds	68,496,747	-	-	-	-	-
060-03-00-00000	**Well Being**						
	General Fund	147,617,070	-	-	-	-	-
	Other Funds	22,384,659	-	-	-	-	-
	Federal Funds	93,389,721	-	-	-	-	-
	All Funds	263,391,450	-	-	-	-	-
060-04-00-00000	**Permanency**						
	General Fund	86,762,133	-	-	-	-	-
	Other Funds	2,747,342	-	-	-	-	-
	Federal Funds	101,932,695	-	-	-	-	-
	All Funds	191,442,170	-	-	-	-	-
060-06-00-00000	**Child Welfare Program Delivery and Design**						
	General Fund	488,066,273	-	-	-	-	-
	Other Funds	9,229,417	-	-	-	-	-
	Federal Funds	242,635,596	-	-	-	-	-
	All Funds	739,931,286	-	-	-	-	-
060-07-00-00000	**VR - Basic Rehabilitative Services**						
	General Fund	33,757,802	35,731,323	36,303,474	54,121,723	-	-

Summary Cross Reference Number	*Cross Reference Description*	*2019-21 Actuals*	*2021-23 Leg Adopted Budget*	*2021-23 Leg Approved Budget*	*2023-25 Agency Request Budget*	*2023-25 Governor's Budget*	*2023-25 Leg. Adopted Budget*
060-07-00-00000	**VR - Basic Rehabilitative Services**						
	Other Funds	5,211,609	4,964,436	8,584,466	10,853,531	-	-
	Federal Funds	84,181,929	84,573,852	103,496,208	97,395,803	-	-
	All Funds	123,151,340	125,269,611	148,384,148	162,371,057	-	-
060-08-00-00000	**Aging and People with Disabilities APD**						
	General Fund	1,092,166,709	1,436,480,080	1,445,881,447	1,857,151,501	-	-
	Other Funds	296,816,735	295,125,683	365,177,542	279,372,522	-	-
	Federal Funds	2,511,163,519	2,942,360,716	3,099,645,984	3,143,291,393	-	-
	All Funds	3,900,146,963	4,673,966,479	4,910,704,973	5,279,815,416	-	-
060-09-00-00000	**Intellectual & Devlpmnt'l Disabilities - I/DD**						
	General Fund	934,829,975	1,237,078,491	1,267,294,981	1,932,188,063	-	-
	Other Funds	41,767,915	22,825,621	29,453,863	27,256,104	-	-
	Federal Funds	2,216,762,070	2,594,495,379	2,938,250,125	3,276,550,348	-	-
	All Funds	3,193,359,960	3,854,399,491	4,234,998,969	5,235,994,515	-	-
060-10-00-00000	**Child Welfare Programs**						
	General Fund	-	890,643,457	919,758,081	1,126,860,276	-	-
	Other Funds	-	37,712,459	35,013,136	25,576,134	-	-
	Federal Funds	-	562,265,620	576,552,198	624,600,435	-	-
	All Funds	-	1,490,621,536	1,531,323,415	1,777,036,845	-	-

Summary Cross Reference Number	*Cross Reference Description*	*2019-21 Actuals*	*2021-23 Leg Adopted Budget*	*2021-23 Leg Approved Budget*	*2023-25 Agency Request Budget*	*2023-25 Governor's Budget*	*2023-25 Leg. Adopted Budget*
TOTAL AGENCY							
	General Fund	3,637,247,990	4,636,217,279	4,807,184,398	6,449,147,865	-	-
	Other Funds	751,048,822	810,415,179	942,725,953	647,045,147	-	-
	Federal Funds	8,887,835,974	10,047,189,176	11,359,676,823	11,997,685,682	-	-
	All Funds	13,276,132,786	15,493,821,634	17,109,587,174	19,093,878,694	-	-

Oregon Department of Human Services
2023-25 Legislatively Adopted Budget
Revenue Narrative

Forecast methods and assumptions

Revenues for the Oregon Department of Human Services comes from funding sources classified as the state General Fund, Other Funds and Federal Funds. Three major methodologies are used to project revenues for the department:

- The category of expenditures based on estimated Average Daily Populations (ADP) and Cost per Case (CPC) is primarily used for federal entitlement grants.
- Grant cycles and where they fall within the biennium are considered for block grants. Assumptions based on the results of prior grant averaging and the anticipated effect of the federal budget process both are used to project the amount of funds that will be received.
- The historical receipt trends method is used for Other Funds sources such as collections of overpayments and fees unless the agency has additional information, such as anticipated special projects that would increase revenue or a temporary need for additional staff that will change the projections for a specific time period.

ODHS projects revenue based on assumptions that take into account:

- Essential packages that adjust the existing base budget to the 2023-2025 Current Service Level Budget (CSL). Essential packages include phasing program changes in or out, one-time costs, Department of Administrative Services inflation factor, mandated caseload changes, and any needed fund shifts;
- Applicable federal funding limits and requirements, including the availability of state funds to meet matching or maintenance of effort (MOE) requirements;
- Changes in federal policies that affect federal revenue available to ODHS programs;
- Expected non-mandated program caseload changes; and
- Recent changes in state or federal statutes and regulations that affect the availability or timing of revenue receipts.

Significant known federal revenue changes or risk factors

Sequestration & Reauthorization

The possibility of sequestration being implemented at the federal level could cause a significant impact in federal funding for programs related to Child Welfare, Self Sufficiency and Vocational Rehabilitation. Additionally, there are federal programs up for reauthorization that could also impact funding.

Self Sufficiency Program

Temporary Assistance for Needy Families (TANF)

An $8 million TANF penalty for FFY2007 has been levied by the federal government. ODHS lost its appeal but has not received final instructions on how and when the penalty will take effect. This is a $8 million impact to ODHS TANF funds that must be filled with General Fund.

Additionally, if the agency does not meet certain federal requirements for monitoring clients' work, a penalty causes the maintenance of effort requirement to increase an additional 5 percent of the base. This means that rather than the maintenance of effort being set at 75 percent of the base year, it is set at 80 percent of the base year.

Child Care and Development Fund (CCDF)

The Deficit Reduction Act (DRA) reauthorized CCDF for five years and increased appropriations requiring additional state matching funds. The programs within ODHS that have been historically funded by CCDF are being transferred to the Department of Early Learning and Care (DELC) effective June 30, 2023. Therefore, this funding source is no longer applicable beginning the 2023-2025 biennium.

Targeted case management (TCM)

The DRA contains a more stringent definition for TCM services, while third-party liability language has been changed to reflect that any legally responsible entity can be considered a third-party resource payer before Medicaid pays. Any program that currently uses Medicaid and has another funding source may be at risk for Medicaid reductions. The TCM statute allows the rules of third-party liability to determine if Medicaid will cover

services that are normally provided under another program authority, including resources available through SS programs.

Child Welfare Changes and Risk Factors

The Family First Prevention Services Act (FFPSA), Public Law 115-123, became law on February 9, 2018. Effective dates varied, depending on the provision of the law. Among other things, FFPSA amended Title IV-E foster care to create new optional prevention funding and place payment limits on child caring institutions (certain residential care placements). To assist with transitioning to FFPSA, the Family First Transitions Act, P.L. 116-94, became law on December 20, 2019. This act modified the requirements for IV-E prevention services, authorized funding for transition grants, and authorized grants to provide funding certainty for states that were operating Title IV-E waivers. The Family First Transition Act funding is provided over FFY 2020 and FFY 2021, to be spent by the end of FFY 2025. These one-time grants will assist states to transition to more preventative services. The Family First Prevention Services Act itself will have a large impact on Child Welfare services and funding. These laws also impacted Adoption Assistance IV-E eligibility and IV-E eligibility for Residential Treatment settings, as well as for Prevention Services.

Change in Eligibility Title IV-E Adoption Assistance

P.L. 110-351 created "Applicable Child[1]" criteria, whereby nearly all children became eligible by FFY 2018, regardless of income. FFPSA delayed this for children ages 0-2 until 6/30/24.

Change in Eligibility Title IV-E Foster Care Reimbursement

The Family First Transitions Act, P.L. 116-94 limits IV-E reimbursement for certain Residential Care placements that do not meet the law's criteria. Residential facilities must meet the requirements as a Qualified Residential Treatment Program (QRTP) in order for IV-E funding to be used beyond the first 14 days for IV-E eligible children in residential care placements.

[1] The state general fund savings from this provision is mandated to be used to invest in additional child welfare services.

Children and Families Services Review Penalty
The state did not meet its negotiated Program Improvement Plan measurement goals for Safety Outcome 2 and Permanency Outcome 1, so the Administration on Children and Families is withholding $1,682,626 in federal financial participation (FFP) for the outcomes remaining out of substantial conformity for FFY 2021. The funds withheld are based on the state's title IV-B allotments and title IV-E expenditure data provided for the period beginning with Federal Fiscal Year (FFY) 2016. In accordance with 45 CFR 1355.36(b)(5)(i), this amount represents one percent of the pool of funds subject to withholding for each outcome and systemic factor for which a penalty is applicable. This pool of funds includes the state allotment of title IV-B funds for each of the years to which the withholding applies and an amount equivalent to ten percent of the state's federal claims for title IV-E foster care administrative costs for each year funds are to be withheld, as required by 45 CFR 1355.36(b)(4).

Continued noncompliance with the outcome measures represents a biennial risk of up to $3.37 million depending on the ongoing performance.

Title IV-E Family First Prevention Services Act (FFPSA)
FFPSA has many parts with different effective dates. The focus here is to describe the funding for prevention services. The start date for prevention services is linked to the start date for the residential care placement requirements. The provisions are effective 10/01/19 but may be delayed at the state's option for up to two years. The services are for children who meet the state's definition as a "candidate for foster care," pregnant or parenting foster youth in need of the services, and the parents or kin caregivers of these children and youth. Services include certain mental health, substance abuse and in-home parenting services. A certain proportion of the services must meet evidence-based practice standards. In general, the state may provide the services for up to 12 months, but on a case-by-case basis may provide services for additional 12-month periods. The federal share is 50% until 2027 (where it moves to the FMAP rate) and states are required to meeting a maintenance of effort as well as evidence-based practice standards.

Temporary Assistance for Needy Families

TANF is a federal block grant to states that operates according to four overarching purposes, one of which is to provide assistance to needy families with children so that the children can live in their own homes or the homes of relatives. For children removed from their homes due to abuse and neglect by their parents, TANF can be used to provide financial assistance and an array of services to support children living with non-parent caregivers. In addition, federal law allows states to use TANF dollars to cover programs and activities a state had conducted under its pre-1996 (pre-TANF) Emergency Assistance program. Since this is a block grant, funding increases are not possible. This runs the risk of creating revenue shortages or additional need for General Fund as the Child Welfare or Self-Sufficiency programs change.

Aging and People with Disabilities (APD) and Intellectual & Developmental Disabilities (I/DD)

Targeted case management (TCM)

The DRA provides a more stringent definition of TCM services. Any program that currently uses Medicaid and has another funding source may be at risk of Medicaid reductions. The TCM statute allows the rules of third-party liability to determine if Medicaid will cover services that are normally provided under another program authority, which could include Intellectual and Developmentally Disabled programs (I/DD). Before ODHS would be required to stop providing TCM services, viable third-party providers would need to be found to provide or pay for equivalent case management services.

Long-term care reform

The DRA increased the look-back period (the period during which the disposition of assets is reviewed to determine eligibility for services) from three to five years. This change in long-term care asset determinations is a greater administrative burden because staff are required to review more client documents; additionally, the change increases technical assistance and training requirements.

K-Plan and Plan of Care

APD and I/DD implemented the K Plan and the Plan of Care in Biennium 13-15. The K Plan is a Medicaid state plan option that allows Oregon to provide home and community-based services and supports while receiving a six

percent increase in federal medical assistance funds for those services. Plan of Care in the I/DD program will replace the need for General Fund allotments to County Developmental Disability Programs and Brokerages allowing all providers to bill on a fee for service basis.

ODHS Major Funding Sources

The following section identifies the major funding sources for ODHS. All references to a grant "Title" are references to the originating statute in the federal Social Security Act.

Federal Funds:

Child Welfare Program

Federal dollars for child welfare services come from a variety of sources, some dedicated exclusively to child welfare activities, including Titles IV-B and IV-E of the Social Security Act. Other federal programs allow for spending on child welfare activities but are designed for broader purposes or populations. These include the Temporary Assistance for Needy Families (TANF) program, the Social Services Block Grant (SSBG), and Medicaid. These federal funding streams are often referred to as either "dedicated" or "non-dedicated" sources of child welfare funding, based on whether they are designed exclusively to support child welfare activities. In addition, states may also use federal "child income"-related funding streams for child welfare purposes, including Supplemental Security Income (SSI) and Social Security benefits, as well as U.S. Department of Veterans Affairs funds and child support dollars.

The principal sources of federal funds dedicated to child welfare activities derive from Titles IV-B and IV-E of the Social Security Act.

<u>Title IV-B of the Social Security Act</u>

There are two major programs under Title IV-B of the Social Security Act:

Subpart 1 (Stephanie Tubbs Jones Child Welfare Services)
The Stephanie Tubbs Jones Child Welfare Services (CWS) program is a discretionary grant program (meaning that it must go through the annual Congressional appropriations process, and the amount of money allocated to the program can be changed from year to year) that funds a range of child welfare services. Eligible populations are families and children in need of child welfare services. Eligibility determinations for individuals are not required. Services include services and activities to prevent abuse and neglect; preserve and reunite families; promote safety, permanence, and well-being of children in foster care or adoptive placements; and maintain a qualified workforce.

Subpart 2 (MaryLee Allen Promoting Safe and Stable Families)
MaryLee Allen Promoting Safe and Stable Families is a mandatory grant program that enables states to develop and operate coordinated programs of family support, family preservation, family reunification, and adoption promotion services. Families and children are eligible if they need services to assist them to stabilize their lives, strengthen family functioning, prevent out-of-home placement of children, enhance child development and increase competence in parenting abilities, facilitate timely reunification of the child, and promote appropriate adoptions. Eligibility determinations for individuals are not required. Services include services for family preservation, family support, family reunification, and adoption promotion and support – each of these areas must receive at least 20% of the funding. There is also a 10% admin cap. This grant also includes dollars set aside for the following purposes: improving caseworker visits; improving outcomes of children affected by parental abuse of methamphetamine or other substances, court improvement programs; and research, evaluation, training, and technical assistance.

Title IV-E of the Social Security Act
The largest federal funding stream dedicated to child welfare purposes, Title IV-E of the Social Security Act is a mandatory program that provides support to states through four main programs: (1) foster care, (2) adoption assistance, (3) guardianship assistance, and (4) the John H. Chafee Foster Care Program for Successful Transition to Adulthood (the "Chafee Program") and now (5) optional prevention services. Except for the Chafee Program, the Title IV-E programs operate as open-ended entitlements, meaning states can receive federal reimbursement for every eligible claim they submit with no cap or upper limit. The projection of revenue is based on estimated

Average Daily Populations (ADP) and Cost per Case (CPC). The change in expected revenue is based on the caseload forecast showing a change in cases, as well as the child eligibility rate.

For Administrative charges, the projection of revenue is based on use of time and effort and other measures. Federal financial participation is available at the Medicaid FMAP rate for administrative costs based on the overall child eligibility rate at the rate of 50 percent for administrative expenditures necessary for the proper and efficient administration of the Title IV-E state plan. The state's cost allocation plan identifies which administrative costs are allocated and claimed under this program. Federal financial participation also is available at the rate of 75 percent for the costs of training related to all supported programs for staff, court personnel and prospective or current foster or adoptive parents or and members of the state licensed, or approved child-care institutions providing care to foster and adopted children receiving Title IV-E assistance.

All training activities and costs funded under Title IV-E must be included in the state agency's training plan that is part of the Child Welfare services plan. Administrative costs and Training costs federal share is modified by the overall child's IV-E eligibility rate.

The Family First Prevention Services Act (FFPSA), Public Law 115-123, became law on February 9, 2018. Effective dates varied, depending on the provision of the law. Among other things, FFPSA amended Title IV-E foster care to create new optional prevention funding and place payment limits on child caring institutions (certain residential care placements). To assist with transitioning to FFPSA, the Family First Transitions Act, P.L. 116-94, became law on December 20, 2019. This act modified the requirements for IV-E prevention services, authorized funding for transition grants, and authorized grants to provide funding certainty for states that were operating Title IV-E waivers. The funding was provided over FFY 2020 and FFY 2021.

Foster Care Maintenance Payments, Administration and Training
It is important to note that not all children in foster care are eligible for the Title IV-E foster care program. Rather, a specific set of requirements must be met for a state to be able to make a claim for federal reimbursement on that child's behalf. The percentage of children in out-of-home placements for which a state receives Title IV-E

reimbursement for foster care maintenance payments is known as the state's "foster care penetration rate" or foster care eligibility rate. Data show that the national foster care penetration rate has declined over time, which is not surprising given that a qualifying child must meet eligibility requirements for the now-defunct Aid to Families with Dependent Children (AFDC) program, at 1996 levels. Children are eligible if a child is in out-of-home placement who would have been considered needy in the homes from which they were removed (based on measures in place in 1996 under the Aid to Families with Dependent Children program), who entered care through a judicial determination or voluntary placement, and who are in licensed or approved placements. Services covered are room and board payments to out-of-home care providers for eligible children, clothing and personal incidental needs, selected transportation costs, and childcare for foster parents.

Foster care administrative costs covers administrative expenditures necessary for the administration of the IV-E state plan. Examples of allowable costs: Case planning, management and review (including caseworker salaries to carry out these activities) for IV-E eligible children, eligibility determinations, licensing of foster homes and institutions, and foster parent recruitment, and other overhead and administrative activities required under the IV-E program.

Foster care training costs can be for public and private child welfare agency staff, prospective and current foster parents, and court personnel. This is generally limited to individuals working with IV-E eligible children.

Title IV-E Family First Prevention Services Act

As noted above, FFPSA has many parts with different effective dates. The focus here is to describe the funding for prevention services. The start date for prevention services is linked to the start date for the residential care placement requirements. The provisions are effective 10/01/19 but may be delayed at the state's option for up to two years. Children who meet the state's definition as a "candidate for foster care," pregnant or parenting foster youth in need of the services, and the parents or kin caregivers of these children and youth are eligible for services. Services covered certain mental health, substance abuse and in-home parenting services. A certain proportion of the services must meet evidence-based practice standards. In general, the state may provide the services for up to 12 months, but on a case-by-case basis may provide services for additional 12-month periods.

Title IV-E Adoption Assistance Payments, Administration & Training Costs

The Title IV-E Adoption Assistance Program reimburses states for expenditures in three categories: (1) adoption assistance payments on behalf of eligible children, (2) adoption placement services and administrative costs related to adoptions from foster care, and (3) expenses related to training for staff and adoptive parents.

Prior to FFY 2010, children adopted from foster care who have "special needs" (as determined by the state) and who (1) would have been considered needy in the homes from which they were removed (based on measures in place in 1996 under the AFDC program), (2) are eligible for SSI, (3) are children whose cost in a foster care setting are included in the IV-E foster care maintenance payment being made on behalf of their minor parents, or (4) were eligible for IV-E adoption assistance in a previous adoption but whose adoptive parents died or their parental rights to the children were terminated. P.L. 110-351 created "Applicable Child[2]" criteria, whereby nearly all children became eligible by FFY 2018, regardless of income. FFPSA delayed this for children ages 0-2 until 6/30/24. Adoption assistance payments are made to adoptive parents, and payment of non-recurring expenses incurred in connection with the adoption of a child also receive Federal match.

Adoption administrative costs covers administrative expenditures necessary for the administration of the IV-E state plan. Examples of allowable costs: placement costs and other administrative activities related to IV-E adoption; recruitment of adoptive parents; and non-recurring adoption expenses, including court costs, attorney fees, and other related expenses.

Adoption training costs can be for public and private child welfare agency staff, prospective and current adoptive parents, and court personnel are covered. This is generally limited to individuals working with IV-E eligible children

Title IV-E Guardianship Assistance, Administration & Training Costs

[2] The state general fund savings from this provision is mandated to be used to invest in additional child welfare services.

The Fostering Connections Act gave states the option to operate a Title IV-E Guardianship Assistance Program (GAP), which provides federal reimbursements for: (1) kinship guardianship assistance payments to relatives who become the legal guardians of children for whom the relatives previously served as foster parents, (2) applicable guardianship placement and administrative costs, and (3) expenses related to training for staff and guardians.

Children are eligible for IV-E Guardianship Assistance if they are exiting foster care to legal guardianships with relatives meeting the following conditions: (1) the child has been eligible for Title IV-E foster care maintenance payments while residing for at least six consecutive months in the home of the prospective relative guardian, (2) the state or tribe has determined that the permanency options of being returned home or adoption are not appropriate for the child, (3) the child demonstrates a strong attachment to the prospective guardian and the prospective guardian is committed to caring permanently for the child, and (4) for children who have attained the age of 14, the child has been consulted regarding the kinship guardianship arrangement. Beneficiaries may also be siblings of eligible children placed in the same kinship guardianship arrangement.

Guardianship administrative costs are administrative expenditures necessary for the administration of the IV-E state plan. Examples of allowable costs: placement activities and other administrative activities related to IV-E guardianship; non-recurring guardianship expenses including court costs, attorney fees, and other related expenses.

Guardianship training costs can be for public and private child welfare agency staff, prospective and current guardians, and court personnel. This is generally limited to individuals working with IV-E eligible children

<u>The John H. Chafee Foster Care Program for Successful Transition to Adulthood; Education and Training Vouchers (ETV)</u>

The John H. Chafee Foster Care Program for Successful Transition to Adulthood allocates funding to states under Title IV-E for expenses related to activities that prepare youth transitioning out of the foster care system (or those who have already transitioned) for self-sufficiency after leaving the agency's care. The Chafee Program operates as a capped entitlement, with the education and training voucher component receiving discretionary funding. States receive Chafee dollars allocated at an amount proportional to their share of the foster care population in the United

States. For Chafee, youth who experienced foster care at age 14 or older, left foster care for adoption or guardianship after attaining age 16, and former foster care recipients up to 21 years are eligible. States that provide foster care for up to age 21 may extend Chafee services up to age 23. Services include Life skills training programs; services to improve educational outcomes, job readiness, and employment; personal and emotional supports (e.g., mentoring); substance abuse prevention; preventive health activities; and for youth age 18-23 who are no longer in foster care, housing expenses and financial assistance. For ETV, youth who experienced foster care at age 14 or older, who have aged out of foster care, or who have been adopted or left for kinship guardianship from the public foster care system after age 16. Services include vouchers up to $5,000 per year for post-secondary education or vocational training.

Temporary Assistance for Needy Families

TANF is a federal block grant to states that operates according to four overarching purposes, one of which is to provide assistance to needy families with children so that the children can live in their own homes or the homes of relatives. For children removed from their homes due to abuse and neglect by their parents, TANF can be used to provide financial assistance and an array of services to support children living with non-parent caregivers. In addition, federal law allows states to use TANF dollars to cover programs and activities a state had conducted under its pre-1996 (pre-TANF) Emergency Assistance program. Families with children in need of assistance, as determined by the state, are eligible for services. For child welfare funding, children must either be in out-of-home placements or have an open child welfare case and be receiving in-home services.

Social Services Block Grant

SSBG is a flexible source of federal funds provided to states in support of a diverse set of five overarching policy goals, including preventing neglect, abuse or exploitation of children and adults. Multiple SSBG service categories are related to child welfare services, and foster care services are one of the largest areas of SSBG expenditures. Other examples of areas related to child welfare include adoptive services, case management, counseling services, home-based services, housing services, information and referral, prevention and intervention, protective services for children, special services for youth at risk, and substance abuse services. Oregon chooses to use SSBG for Child Welfare and to support the Youth Experiencing Homelessness Program in Self-Sufficiency.

Medicaid

Medicaid is a federal-state health care financing program that provides health insurance to millions of low-income individuals. Children who are eligible for Title IV-E foster care, adoption, or guardianship assistance are automatically eligible for Medicaid. States have the option to extend Medicaid coverage to non-Title-IV-E eligible children, and most states do so. Children who are Title IV-E eligible (whether for foster care maintenance payments, adoption assistance, or kinship guardianship assistance) are categorically eligible for Medicaid. Additional low-income and disabled children are eligible on state-specific basis but within federal mandates. States have the option to extend Medicaid to non-IV-E eligible adopted children or former foster youth age 18-21. In addition to funding basic health care services, Medicaid can also be used to support certain activities related to child welfare, such as being used to fund services related to child welfare including targeted case management, rehabilitative services, Medicaid-funded therapeutic foster care, and administrative costs associated with these options. The projection of revenue is based on estimated Average Daily Populations (ADP) and Cost per Case (CPC) for Administrative charges, use of time and effort and other measures.

Family Violence Prevention grant

The Family Violence grant is a discretionary grant that supports states in the establishment, maintenance and expansion of programs and projects to prevent incidents of family violence as well as programs that provide immediate shelter and related assistance for victims of family violence and their dependents. This grant is used in support of the Domestic Violence program.

This grant currently funds ODHS Child Welfare programs. The projection of revenue is based on grant cycle.

Other Federal Child Welfare Funds

In addition to the primary sources described above, states can use a variety of other federal grants and awards for child welfare purposes. These include dollars from the Child Abuse Prevention and Treatment Act, the Adoption Opportunities and Adoption Incentives program, and numerous other vehicles designed for broader purposes (such as the Child Care Development Fund and the Victims of Crime Act).

In 23-25 there is still revenue from several one-time Federal grants to support child welfare services, with the grants from Federal COVID-19 related bills. These include: IV-B subpart 2 grant from the Consolidated Appr Act the Child Abuse and Neglect Prevention Act (CAPTA) COVID Supplemental Award ARPA grant, and the Family Violence Prevention Service Act Award from the ARPA bill. In most cases the funding must be spent by 9/30/2025.

Self Sufficiency Program

Federal dollars for self-sufficiency services come from a variety of sources. Some of the funding is dedicated to specific programs and activities within Self-Sufficiency to offer assistance to low-income families. Programs that may allow spending on child welfare activities are title IV-A of the social security act, Temporary Assistance to Needy Families (TANF) and the Child Care and Development Fund (CCDF) under section 418 of title IV-A. Families involved with self-sufficiency programs may also be involved with child welfare, this involvement does not limit the family's ability to receive benefits such as SNAP, Employment and Training Services, Child Care and TANF.

<u>Temporary Assistance to Needy Families - Title IV-A of the Social Security Act</u>

The TANF program is authorized under Title IV-A of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), and the Deficit Reduction Act of 2005.

Eligible Population: To qualify for TANF a one or two parent family must be under the required income limit for the family size, such as a family of three must be below 36 percent of the Federal Poverty Limit (FPL). Eligible children are under age 18 or 18 if attending full-time secondary school. A significant portion of the TANF eligibility criteria is determined by the state and in state statute chapters 411 and 412.

Eligible Services or Costs: TANF provides eligible families with cash assistance, connections to support and community resources, case management, and employment and training services.

Services and activities of the program are to engage families in becoming self-sufficient by helping them address challenges, gain skills, and access employment opportunities. Both the TANF federal block grant and MOE expenditures must be spent in a manner reasonably calculated to meet one of the four federally-mandated TANF purposes which are: 1) provide assistance to needy families; 2) end dependence of needy parents by promoting job preparation, work and marriage; 3) prevent and reduce out-of-wedlock pregnancies, and 4) encourage and maintain family formations or activities that were in the state's AFDC (Aid to Families with Dependent Children plan on September 30, 1995 or August 21, 1996).

Type of Funding: The TANF program is funded primarily through the TANF Federal block grant and general fund dollars. The TANF block grant requires a minimum state expenditure level, known as Maintenance of Effort (MOE), it does not require state share matching.

Temporary Assistance for Domestic Violence Survivors (TA-DVS)

This program provides temporary financial assistance and support to families affected by domestic violence. TA-DVS provides up to $1,200, over a 90-day period, funds are used to address safety concerns such as relocating, rent, utilities, etc.

The TANF eligible refugees receive cash assistance and services paid with TANF funding, and all other refugees are served with ORR funds, which are federal funds. (8 U.S.C. 1522)

Refugee Services Program

This program can serve only those persons in immigration categories approved by the Federal Office of Refugee Resettlement (ORR): Refugees, Asylees, Cuban/Haitian entrants and parolees, Amerasians, victims of human trafficking (international) and certain family members, and Iraqi/Afghan Special Immigrant Visa holders.

Eligible Population: Refugee's that have been in the U.S. as a refugee for less than eight months or attained the qualifying status within the past 8 months. Income limits apply and individuals are at least 18 years old.

Eligible Services or Costs: Cash Assistance, SNAP and Medical benefits, family needs assessment, direct c case management assistance.

Type of Funding: The Refugee Program is authorized and operates under the Federal Immigration and Nationality Act and the Refugee Act (8 U.S.C. 1522). The Refugee Program operates as a public assistance program under ORS 411.060, 409.010(2) (c), and 409.010(2) (h). During the initial resettlement period, the Refugee Program serves two different populations of refugees: those refugees who are eligible for Temporary Assistance for Needy Families (TANF) and those refugees who are eligible for ORR-funded services. The TANF eligible refugees receive cash assistance and services paid with TANF funding, and all other refugees are served with ORR funds, which are federal funds. (8 U.S.C. 1522)

United States Department of Agriculture, Supplemental Nutrition Assistance Program (SNAP, under Food and Nutrition Services)

SNAP is funded by federal legislation found in the "Farm Bill" authorized by The Agricultural Act of 2014 (P.L. 113-79, Feb 7, 2014). Program policy is reauthorized every five years through the Farm Bill.

Eligible Population: Families who have an income of less than 185% of the Federal Poverty Level. Eligibility criteria primarily determined at the Federal level.

Eligible Services or Costs: SNAP provides supplemental food benefit dollars to low-income families, seniors, single adults, people with disabilities, and children to help purchase food to meet their nutritional needs. Currently, one in six Oregonians receive these benefits. Other services and programs beyond food subsidy can be administered using SNAP funding. These include nutrition education, outreach services, disaster SNAP and employment and training.

Type of Funding: SNAP benefits are 100 percent federally funded. Oregon is responsible for 50 percent of the administrative costs. Oregon’s portion of the administrative costs for SNAP comes from the State General Fund.

Pandemic Electronic Benefits Transfer (P-EBT)
This program provides additional SNAP funding to support families and children affected by school closures during the COVID-19 pandemic.

SNAP Employment and Training programs opportunities for individuals:

Able Bodied Adults without Dependents (ABAWD): Is a SNAP employment and training program for individuals between the ages of 18-49 who do not meet the exemption criteria. Participants receive employment related and support services. If a non-exempt individual chooses not to participate the SNAP benefit is limited to three months over a 36-month period. The SNAP time limit requirements are in effect in Multnomah, Washington, Clackamas, Benton, Lane, Marion, Clatsop, Deschutes, Jackson, Linn, Polk, Tillamook, Lincoln and Yamhill counties.

SNAP Training and Employment Program (STEP): STEP is known nationally as the SNAP 50/50, this program provides employment-related services to SNAP participants who voluntarily choose to pursue employment and training resources. Contracted, service providers draw down 50 percent federal funds with their own 50 percent non-federal match to provide services in their organizations in over 80 total sites to the populations they serve. There are some support services available to participants.

Community-Based Grants for the Prevention of Child Abuse and Neglect (CBCAP)
Title II of the Child Abuse Prevention and Treatment Act (CAPTA), as amended by P.L. 111-320, authorizes grant funds to be released to the states and names the program Community-Based Grants for the Prevention of Child Abuse and Neglect (CBCAP). The grant requires a 20 percent match of State General Funds. This grant helps fund the Family Supports & Connections program.

The CBCAP grant awards additional leveraged funds each year based on a formula giving credit for the previous year's contribution of state General Fund dollars. In addition, individual contracted programs in the ODHS districts add leveraged funds on the local level from agency donations, grants and fundraising.

My Future My Choice – Title V Federal Abstinence Education Program

The "My Future-My Choice" program includes age-appropriate, medically accurate sexual health education curriculum and services for sixth and seventh grade, and a high school leadership and mentor component. These services support community prevention efforts to enable TANF families in breaking the generational dependence on public assistance.

Eligible Population: Youth in sixth and seventh grade.
Eligible Services or Costs: Youth Services include sexual health education, leadership and mentor programs. These services support community prevention efforts to enable Temporary Assistance for Needy (TANF) families to break the generational dependence on public assistance
Type of Funding: The Title V Federal Abstinence Education Program grant provides annual funding. ODHS submits a request for funding each year and continued funding is contingent on federal budget approval.

The Emergency Food Assistance Program (TEFAP)

This program helps supplement the diets of low-income Americans, including elderly people, by providing them with emergency food assistance at no cost. The Oregon Food Bank is the primary grantee in Oregon.

Eligible population: low income Americans in need of emergency food assistance.

Eligible Services or Costs: The amount of food each state receives out of the total amount of food provided is based on the number of unemployed persons and the number of people with incomes below the poverty level in the state. States provide the food to local agencies they have selected. Generally, this is food banks, they distribute the food to local organizations such as soup kitchens and food pantries. States also provide

the food to other types of local organizations, such as community action agencies, which distribute the foods directly to low-income households.

Type of Funding: 100% Federal funded

Commodity Supplemental Foods Program (CSFP)

The program works to improve the health of low-income elderly persons at least 60 years of age by supplementing their diets with nutritious USDA Foods. Currently all of the service delivery is occurring through partnerships with the Oregon Food Bank.

Eligible population: Low-income person at least age 60 and above.

Eligible services and Cost: Supplementing diets with nutritious USDA foods.

Type of funding: 100% Federal funds

Medicaid

Medicaid is a federal-state health care financing program that provides health insurance to millions of low-income individuals. Self-Sufficiency staff are responsible for determining Medicaid eligibility through the ONE eligibility system. In addition to funding basic health care services, Medicaid can also be used to support certain activities related to self-sufficiency, such as targeted case management and administrative costs associated with performing Medicaid eligibility. The projection of revenue for TCM and administrative costs are based on use of time and effort and other measures.

Aging and People with Disabilities (APD) and Intellectual & Developmental Disabilities (I/DD)

Medicaid (Title XIX)

Medicaid provides reimbursement to states for medical care and related services to low income and other medically needy individuals. This includes financing for:

- Health care services provided under the Oregon Health Plan;
- Private insurance premium;
- Long-term care in institutional and community-based care settings;
- Some client care provided in state hospitals;
- Residential treatment services to adults and youth;
- Central administration of alcohol and drug programs;
- Medical and non-medical transportation for Medicaid eligible individuals;
- Family planning services for individuals not enrolled in the Oregon Health Plan; and
- Uncompensated care provided by hospitals serving a high proportion of Medicaid and uninsured individuals.

State General Funds or Other Funds must be used to match federal Medicaid dollars for administration and direct service payments. The administration match rate is primarily 50 percent. A 75 percent federal fund match is available for skilled professional medical personnel, certification of nursing facilities, and related information systems activities, including the Medicaid Management Information System (MMIS) computer system support and Preadmission Screening and Resident Review (PASRR) activities. The cost of services and supplies for Family Planning is matched at 90 percent.

Most services in Oregon are provided through seven Medicaid programs that require waivers of federal requirements. The Oregon Health Plan is the largest of these waiver programs. ODHS must obtain approval from the federal Centers for Medicare and Medicaid Services (CMS) to make changes to its Medicaid program whether the changes are Medicaid state plan services or waiver services. This approval process can be lengthy, sometimes affecting the timing of program changes and the receipt of associated federal revenues.

Medicaid currently funds services in all ODHS programs. The projection of revenue is based on estimated Average Daily Populations (ADP) and Cost per Case (CPC) for Administrative charges, use of time and effort and other measures.

Medicaid XIX Local Match

The Intellectual & Developmental Disabilities (I/DD) program matches Medicaid Title XIX funds with funds or services from transit districts, community developmental disability programs and others for providing enhanced non-medical transportation and administrative costs.

American Rescue Plan Funding for Medicaid Home and Community Based Services (One time only for 21-23)
Enhanced funding from the Centers for Medicare & Medicaid Services (CMS), provided through the American Rescue Plan Act of 2021 (ARPA), to increase access to home and community-based services (HCBS) for Medicaid beneficiaries. These benefits provide critical services to older adults and individuals with disabilities, allowing them to receive health services in their homes and communities, rather than in nursing homes and other institutions. The intent of the added federal resource was to increase health equity in Medicaid beneficiaries' access to HCBS, positive health outcomes, and community integration. Both, Aging and People with Disabilities and Intellectual and Developmental Disabilities programs, were able to leverage an additional 10% federal funds through the 3rd quarter for qualifying Home and Community Base service expenditures. The General Fund savings resulting from the additional 10% is required to be reinvested back into HCBS by March 31, 2025.

Older Americans Act
Funds are allocated to Oregon annually through the Older Americans Act. The Aging and People with Disabilities (APD) program allocates program funds by a federally approved population formula to the 17 area agencies on aging. Emphasis is placed on serving the most economically and socially needy persons 60 years of age and older. There is a 15 percent match requirement of which 10% is met by area agencies on aging and 5% from state sources through local funds, in-kind and Oregon Project Independence (OPI) allocations.

- State administration funds provide for state plan administration. There is a 25 percent match requirement met with OPI funds.
- Title III funds provide for support services such as transportation, legal assistance, in-home care, and congregate and home-delivered meals programs. The act allows for provision of in-home services for frail individuals to prevent premature institutionalization and preventive health services for elderly clients in rural areas. Title III also provides funding for family caregiver support and training and services to prevent abuse

of the elderly. The match requirement ranges from 15 to 25 percent depending on whether the funds are paying for administration or program expenditures.

- Title V programs subsidize part-time paid community service work for low-income persons, aged 55 and over and job training skill. There is a 10 percent match requirement, which is met by the program operators.
- Title VII funding provides support for the long-term care ombudsman and prevention of elder abuse, neglect and exploitation. No match is required for Title VII.
- The Nutrition Services Incentive Program grant (NSIP) supplements Title III-C local funds to provide nutrition services to eligible Older Americans Act participants. Funds are 100 percent federal. No match is required.

This grant currently funds APD programs. The projection of revenue is based on actual and projected federal awards.

Nutrition Services Incentive Program (NSIP)

The Nutrition Services Incentive Program grant (NSIP) supplements Title III-C and local funds to provide nutrition services to eligible Older Americans Act participants. Funds are 100 percent federal. No match is required.

This grant currently funds APD programs through Area Agencies on Aging. Projection is based on history of fund awards from the U.S. Administration on Aging.

Developmentally Disabled Service Act (DDSA)

Congress sets a national allocation determining the amount of annual funding for this grant, which is administered by the Developmental Disabilities (DD) Council in partnership with ODHS. Program expenditures are limited to programs for clients with developmental disabilities and are guided by a state plan submitted to the federal government. There is a 5 percent limit on administrative expenditures except for expenditures by the DD Council.

This grant currently funds ODHS Intellectual & Developmental Disabilities programs. The projection of revenue is expenditures-based using estimated Average Daily Populations (ADP) and Cost per Case (CPC). Federal law

requires a state or local match, most of which can be in-kind.

Oregon Disability Determination Services (DDS)
Oregon Disability Determination Services (DDS) provides timely and accurate eligibility determinations for Oregon citizens applying for Social Security disability benefits. Although the disability program, as part of the Social Security Administration (SSA), is administered by the federal government, state agencies make the initial medical determination of disability. The Oregon DDS currently has more than 200 staff and is 100 percent federally funded.

Vocational Rehabilitation Program

Rehabilitation Act grants (US Department of Education)
The Rehabilitation Act grants are the major funding source for programs provided through Vocational Rehabilitation Services. Rehabilitation Act grants currently fund ODHS VR – Basic Rehabilitative Services programs. The projection of revenue is based on grant cycle.

Section 110 (Basic 110 Grant)
Basic 110 Grant, which is available to assist people with disabilities in becoming employed, is a formula grant based on the state's population and per capita income. The funds available to Oregon are divided between Vocational Rehabilitation (84.4 percent) and the Commission for the Blind (15.6 percent). These federal funds must be matched with state funds. Under the new Workforce Investments and Opportunities Act, 15% of this grant must be set aside to be spent on pre-employment transitions services for youth.

Section 633 (Title VI-C grant for supported employment)
This grant assists the state in developing programs with public and private agencies for training and services leading to supported employment for individuals with severe disabilities. This grant under the new Workforce Investments and Opportunities Act must set aside 50% for services to the most severely disabled youth. The 50% set aside must be matched with 10% non-federal fund expenditures. The remaining 50% of the grant is 100 percent

federal funds and does not require state match.

Section 711 (Independent Living Rehabilitation, Part B)
Independent living rehabilitation funds support the state Independent Living Council and Independent Living Centers. This grant has a required 10% match.

Assistive technology
The Assistive Technology Act of 1998 supports state efforts to improve the provision of assistive technology (AT). Grant funds allow implementation of programs designed to meet the AT needs of individuals with disabilities, including plans that improve access to and acquisition of AT devices and services for individuals with disabilities.

This grant is a revenue source of the Oregon Disabilities Council, which was transferred to Vocational Rehabilitation (VR) within the VR – Basic Rehabilitative Services program in the 2007-09 biennium.

Other Funds

Title IV-A (sec. 418)– Child Care and Development Fund (CCDF)
The Child Care and Development Block Grant (CCDBG) is administered by the Department of Health and Human Services, Administration for Children and Families Office of Child Care. The Department of Early Learning and Care (DELC) is designated as the lead agency in Oregon to administer these funds. CCDF funding was previously transferred from DELC to ODHS and came in as Other Funds. This revenue was used to support the Employment Related Day Care (ERDC) program. The ERDC program is transferred from ODHS to DELC effective June 30, 2023; therefore, this funding source will no longer be a major Other Funds source for ODHS beginning 2023-25.

Care of state wards
Trust recoveries are Other Funds collected from Social Security Administration (SSA), Social Security Insurance (SSI) and child support payments and used to reimburse the state for the maintenance cost of children in care. Trust recoveries come from collection of SSI disability payments, child support payments and SSA death and survivor

benefits. Trust recoveries are used to reimburse Federal and General Funds to match Title IV-E, TANF-EA or Title XIX federal funds.

Trust recoveries currently fund Child Welfare (CW) and Intellectual & Developmental Disabilities (I/DD) programs. The projection of revenue is based on caseload trends and historical receipt trends.

Collection of overpayments

Overpayment recoveries are recovered program dollars incorrectly paid to or for clients through client error or fraud. Recovery may be made in any of several program areas including food stamps, child-care, public assistance cash and public assistance grant reductions. The projection for these revenues is developed using past performance, inflation and changes in caseloads and regulations as indicators of future trends. Public assistance recoveries are applied against program expenditures during the month of the recovery. Food stamp and child-care overpayment recoveries are budgeted as Other Funds. Currently these funds also support programs in the CW and APD programs. The projection of revenue is based on historic receipt trends.

Client account collections estate recoveries

Other Funds are collected from the estates of clients to reimburse previous cost of care. Collections are used to reimburse cost and offset both the Title XIX program cost and General Fund costs.

Currently funds APD programs. The projection of revenue is based on estimated Average Daily Populations (ADP) and Cost per Case (CPC). Revenues are projected to increase as a result of increased receipts.

Child Welfare Domestic violence receipts

Enacted in 1981, marriage license fees are dedicated to fund the domestic violence program. The marriage license fee is currently $25. Legislation directed that the unitary tax and the criminal fines and assessments account provide additional funding for this program. Expenditures are limited to the amount of revenue actually received.

Domestic violence receipts currently are in Child Welfare; however, it is expended through community provider

grants in partnership with the Department of Justice. The projection of revenue is based on historical receipt trends for marriage license fees and Department of Revenue projections for criminal fines and assessments accounts.

Fees and premiums

The CW program collects fees for adoption home study and registry, and adoption search services.

- Independent Adoption Placement Reports cost $800; $675 passes through to private agencies.
- The fee for registration with the mutual consent registry is $25. This registry allows individuals who have been a party to adoption access to other party information where both parties have registered and consented to disclosure.
- The non-identifying registry allows registrants to provide genetic, social and health history only for use in the adoption registry. The cost for this registry is $45.
- The cost of an adoption assisted search is $400 for the first search request and $200 for subsequent search requests. This allows individuals to request the agency's assistance in locating biological family members.

Applicable Child Savings Other Fund

This funding is general fund savings accrued through the 'applicable child' provision of P.L. 110-351 that delinked the title IV-E Adoption Assistance program from the Aid to Families with Dependent Children (AFDC) requirements. This is general fund savings that otherwise would have been spent to support Adoption Assistance for children with a finalized adoption, absent the federal law change. Federal law required states to reinvest this savings into Child Welfare (but not supplant existing services). This requirement was met by the implementation of SB 102 (2017): Relating to Adoption Applicable Child Savings Fund, enabling the State to carry forward General Fund savings as Other Fund across biennia. Thirty percent of the funding must be spent on post-adoption or prevention services (no more than 10% on prevention services) and 70% can be spent on any services allowable under IV-B. As of the 17-19 biennium Child Welfare created a Child Care for Foster Parent program. All children in foster care are eligible to have their child-care costs reimbursed up to $375 a month. Post-Adoption services were also provided at a level meeting the spending requirements.

Additional Other Fund Sources for Child Welfare
There are several smaller Other Fund grants, such as funding from the Department of Transportation for foster youth driver's education, SPOTS Visa rebates, and donated fund.

Local school funding for rehabilitation services
Other Funds from local schools are used as the 21.3 percent state match needed for the Basic 110 Grant for rehabilitation services which is funded with 78.7 percent federal funds. The Youth Transition Project (YTP) is a collaborative program with school districts that assists youth with disabilities in their transition from school to the community work force.

The projection of revenue is capped based on agreements with schools.

Long-term care facilities tax
The current tax rate is set to collect up to 6 percent of resident service revenues of non-exempt long-term care facilities. Revenue projections are based on previous years' cost reports, current year tax reports, and a growth factor. At present, the agency collects approximately $16 million per quarter in Other Funds through this tax. The federal match is approximately $26 million per quarter. Provider tax dollars are used to offset general fund expenditures for nursing facility services.

Quality of Care Fund
During the 2009 Legislative Session, HB 2442 required the establishment of the Quality of Care Fund and increases in fee schedules for adult foster homes, residential care and assisted living facilities, as well as increases in state civil penalties. Revenue collected from APD and I/DD licensing fees and civil penalties are dedicated to promoting quality of care and life in long-term care settings, including enhancement and maintenance of long-term care facility licensing and regulatory activities and additional training and technical assistance for facilities.

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-000-00-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Other Selective Taxes	116,381,077	149,242,048	149,242,048	150,510,271	-	-
Business Lic and Fees	9,640,327	2,822,383	2,848,813	2,848,813	-	-
Non-business Lic. and Fees	16,439	-	-	-	-	-
Charges for Services	181,343	349,760	349,760	349,760	-	-
Admin and Service Charges	209,830,776	-	-	-	-	-
Care of State Wards	8,420,620	19,860,835	16,331,150	7,168,515	-	-
Fines and Forfeitures	4,009,269	-	-	-	-	-
General Fund Obligation Bonds	31,790,000	-	-	-	-	-
Interest Income	4,517,789	237,515	237,515	237,515	-	-
Sales Income	5,900	-	-	-	-	-
Donations	144,735	-	-	-	-	-
Grants (Non-Fed)	419,511	-	-	-	-	-
Other Revenues	100,437,556	376,876,288	508,365,286	481,486,988	-	-
Transfer In - Intrafund	-	10,844,421	10,844,421	11,466,920	-	-
Transfer from General Fund	1,197,532	17,553,312	18,283,040	19,050,927	-	-
Tsfr From Human Svcs, Dept of	11,835,293	-	-	-	-	-
Tsfr From Administrative Svcs	52,365,024	38,750,000	55,058,000	-	-	-
Tsfr From Revenue, Dept of	2,758,007	2,876,601	2,876,601	3,273,913	-	-
Tsfr From Military Dept, Or	54,271,374	-	-	-	-	-
Tsfr From Oregon Health Authority	130,998	-	-	-	-	-
Tsfr From HECC	75,344	-	-	-	-	-
Tsfr From Education, Dept of	141,144,800	211,335,929	211,335,929	-	-	-
Tsfr From Transportation, Dept	6,769	50,000	50,000	50,000	-	-
Tsfr From Labor and Ind, Bureau	179,447	-	-	-	-	-

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-000-00-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Tsfr From Nursing, Bd of	1,196,174	1,413,254	1,413,254	1,427,387	-	-
Transfer Out - Intrafund	-	(10,844,421)	(10,844,421)	(11,466,920)	-	-
Transfer to Other	(2,212,001)	-	-	-	-	-
Tsfr To Long Term Care Ombud	(105,600)	-	-	-	-	-
Total Other Funds	**$748,638,503**	**$821,367,925**	**$966,391,396**	**$666,404,089**	**-**	**-**
Federal Funds						
Federal Funds	6,134,306,468	7,085,905,453	7,692,393,100	8,332,451,244	-	-
Tsfr From Consumer/Bus Svcs	-	1,813,619	1,813,619	-	-	-
Transfer to Counties	(1,834,179)	-	-	-	-	-
Tsfr To Administrative Svcs	(137,275)	(184,048)	(184,048)	(191,778)	-	-
Tsfr To Judicial Dept	(1,899,966)	(2,213,975)	(2,213,975)	(2,389,986)	-	-
Tsfr To Public Def Svcs Comm	(9,000,000)	(14,000,000)	(14,000,000)	(14,000,000)	-	-
Tsfr To Or Youth Authority	(28,843,022)	-	-	-	-	-
Tsfr To Consumer/Bus Svcs	(96,776)	-	-	-	-	-
Tsfr To HECC	-	-	-	(51,925)	-	-
Tsfr To Blind, Comm	(48,422)	-	-	-	-	-
Tsfr To Housing and Com Svcs	(4,776,550)	-	-	-	-	-
Total Federal Funds	**$6,087,670,278**	**$7,071,321,049**	**$7,677,808,696**	**$8,315,817,555**	**-**	**-**
Nonlimited Federal Funds						
Federal Funds	2,800,165,775	2,975,868,127	3,681,868,127	3,681,868,127	-	-
Total Nonlimited Federal Funds	**$2,800,165,775**	**$2,975,868,127**	**$3,681,868,127**	**$3,681,868,127**	**-**	**-**

Oregon Department of Human Services
Central and Shared Services
and State Assessments and Enterprise-wide Costs

ODHS Mission
To help Oregonians in their own communities achieve safety, well-being and independence through opportunities that protect, empower, respect choice, and preserve dignity.

About Central and Shared Services
ODHS Central Services provide essential supports to ODHS programs, helping each achieve their vision, realize target outcomes, and advance the wider agency mission.

The mission of OHA | ODHS Shared Services is to provide critical business services that are data-informed, accountable, and transparent. ODHS and Oregon Health Authority (OHA) govern their shared services through a board composed of operational leaders from the two agencies who ensure that shared services are prioritized and managed to support program needs. The board and its subgroups have established service level agreements and performance measures for each service, implemented recent budget cuts, moved staff in and out of shared services to rationalize service delivery, and begun implementing more integrated systems to support the performance of all our employees.

ODHS Central Services Offices

- *Office of the Director*

The ODHS Director's Office is responsible for agency leadership, policy development, resource allocation, and administrative oversight for all programs, staff, and offices in ODHS in a manner that supports equitable outcomes for Oregon's diverse population. These functions are led by the Director and Deputy Director and coordinated by the Director Cabinet members, with the Governor's Office, the Oregon Legislature, state and federal agencies, Tribes, community partners, communities of color, LGBTQIA2S+ communities, local governments, advocacy and client groups, and the private sector. The Director and Deputy Director oversee

Internal Audits and the Office of Training, Investigations and Safety, which provide shared services for both ODHS and OHA.

The Office of the Director houses the following units:

Chief of Staff

The Chief of Staff to the agency enables the Director to work most effectively with internal and external partners to fulfill commitments that achieve the agency's mission, goals, and outcomes. This is a strategic and facilitative role that requires a combination of focus and flexibility, as well as a willingness to play an active, behind-the-scenes role as the Director's trusted advisor.

Office of the Chief Financial Officer

The Office of the Chief Financial Officer provides optimal business services to ensure accountability, data-driven decisions, and stewardship of resources in support of the ODHS mission. This is done by:

- Working closely with ODHS and OHA programs and the OHA Chief Financial Officer to ensure culturally competent and equitable services and accurate, timely, and efficient recording and management of financial resources.
- Authorizing the redistribution of available resources to meet changing needs; and
- Establishing administrative controls.

This office also oversees budget, planning, and analysis functions for ODHS-based programs as well as coordination and leadership of the ODHS budget with the Governor's Office, Legislature, Department of Administrative Services, Legislative Fiscal Office, and ODHS partners.

Office of Immigrant and Refugee Advancement

The Oregon Legislature through SB 778 established the Office of Immigrant and Refugee Advancement (OIRA). Transferred to ODHS from the Governor's Office in 2022, OIRA is dedicated to identifying the gaps within existing structures and strives to promote the successful social, linguistic, educational, economic, and civic integration of Oregon's immigrant and refugee communities.

The office accomplishes its work through partnering with state agencies, community-based organizations, refugee resettlement agencies (RRAs) and immigrant and refugee advocacy groups to help coordinate strategies, create policy, develop programs, review legislation, develop tracking systems to monitor potential investments and efforts in the state, advocate that resources are being allocated equitably and effectively, and ultimately implement plans that aid in the advancement of immigrants and refugees across the state. The office conducts outreach and education and serves as a resource on state initiatives and programs to ensure equitable access for immigrants and refugees.

Governor's Advocacy Office

The Governor's Advocacy Office (GAO) is the office of Human Services Ombuds. Ombuds (also "ombudsman" or "ombudsperson") are neutral or impartial conflict resolution practitioners who may provide confidential and informal assistance to ODHS clients and others affected by the Department's action or inaction. The GAO is a part of the ODHS Director's office and resolve issues and track trends on behalf of the ODHS Director. The office includes:

- ODHS Ombuds - the GAO has Ombuds dedicated to serving client and others with questions, concerns, and complaints about all ODHS programs and services.
- Foster Care Ombuds - the Foster Children's Bill of Rights requires that ODHS foster youth are enabled to make complaints and assert grievances regarding their care, safety, or well-being.
- Client Civil Rights investigations - ODHS non-discrimination rules and policies require investigation of reports of discrimination.
- Oversight of the ODHS formal complaint process - by rule, the Department maintains a process for handling formal complaints. While complaints may be resolved locally, the GAO partners with supervisors to oversee this process.

Tribal Affairs

The Tribal Affairs Unit within the ODHS Director's Office is a team committed to all Oregon Tribal communities thriving mentally, physically, spiritually, and emotionally. Tribal Affairs works with all five ODHS programs to create and provide Tribally appropriate programming, services, policies, and support. Through Tribal consultation with Oregon's Nine Federally Recognized Tribes, ODHS ensures programming, services and policies meet the needs of Oregon Tribal

communities.

- *Office of Budget, Planning and Analysis*

This office functions as the central budget for ODHS based programs working under the guidance of the CFO. Main duties include: (1) development and preparation of the department's biennial budget documents and leadership of the ODHS budget with the Governor's Office, Legislature, Department of Administrative Services (DAS), Legislative Fiscal Office (LFO) and DHS partners; (2) initiating, coordinating and developing the department's budget rebalance plans and Legislative Emergency Board items; (3) providing fiscal analysis of proposed legislation and responses to inquiries regarding fiscal impacts of policy changes; and (4) providing management accurate budget and projections to assist in the management of the overall ODHS budget of over $17.1 billion total funds and over 10,450 budgeted positions.

- *Office of Business Information Services*

The Office of Business Information Services (OBIS) has primary responsibility for the Oregon Eligibility (ONE) system as well as the phone system for the ONE Customer Service Center that supports statewide eligibility operations. More than 1.5 million people in Oregon receive medical, food, cash, and childcare benefits through the ONE system, which represents the largest information technology system in the state of Oregon. The OBIS team evaluates and identifies opportunities to improve the ONE system and other enterprise IT systems such as the Centralized Abuse Management system. It is responsible for ONE user testing and the ONE Helpdesk that supports more than 4,000 eligibility workers across the state. It includes a team that takes calls from people in Oregon who need technical assistance with the online portal for applying for or managing benefits in the ONE system.

- *Office of Equity and Multicultural Services*

The Office of Equity and Multicultural Services (OEMS) provides leadership and direction in the integration of equity, diversity, and inclusion policies and initiatives throughout the agency. As an office that assists all ODHS program areas, OEMS has two main charges: The first is to guide the agency to ensure a diverse workforce with the cultural agility and language skills to serve the needs of all Oregonians, and the second is to help the agency work toward equitable outcomes for all populations

using ODHS services. OEMS accomplishes this mission though policy making, strategic planning, quality improvement consulting, technical assistance, research, Employee Resource Groups (ERGs), Diversity Committees, community engagement, advocacy, ally-ship, partnerships, and continuous learning.

- *Office of Human Resources*

Human Resources (HR) enables the organization to equitably recruit, support and engage a diverse workforce in a collaborative partnership to foster an environment where employees maximize their potential to achieve the agency's mission. The office serves as a strategic partner to ODHS programs, providing proactive, comprehensive human resources services in alignment with agency and program mission and goals.

HR works closely with internal customers on workforce strategies that support agency and program strategies as well as a healthy workplace culture of ongoing development and feedback. Through these efforts, HR helps ensure that ODHS has the right people with the right skills, training, and support to do their work, now and in the future.

- *Office of Integrated Eligibility (Oregon Eligibility Partnership)*

The Oregon Eligibility Partnership (OEP) is responsible for oversight of the Oregon Eligibility (ONE) system, which allows Oregonians to apply for medical, cash, food, and childcare benefits in one place and enables a streamlined eligibility determination process across a range of benefit types. More than 1.5 million people in Oregon receive benefits through the ONE system.

The OEP team is responsible for providing equitable and holistic eligibility determinations that allow people to receive accurate and timely determinations and to access critical resources. The team supports more than 4,000 staff across Oregon who determine eligibility through the ONE system.

- *Office of Program Integrity*

The Office of Program Integrity's mission is to support the Oregon Department of Human Services (ODHS) and Oregon Health Authority (OHA) by monitoring and measuring federal compliance, making recommendations, taking appropriate action, providing support, facilitating activities, training/coaching field staff, and reporting

trends and statistics to ODHS and OHA leadership, stakeholders, and federal agencies.

- *Office of Public Affairs*

This office supports the ODHS mission by connecting Oregonians with the information they need to access, receive, or understand department services, and to collaborate with the department to advance human services in the state. Within the office, the **Communications** team helps engage the public in the work of ODHS, which leads to more effective and inclusive policy making. This includes implementing communication plans, coordinating social media and website content, writing direct notices to clients, and talking with the media and legislature. The communications team engages with diverse audiences, including employees, clients, legislators, advocacy and interest groups, providers and partners, local governments, state and federal agencies, policymakers, Oregon's Nine Federally Recognized Tribes, the news media, targeted audiences, and the wider public. The unit strives to use culturally relevant and linguistically competent communication practices to effectively reach Oregonians. Effective communication is the primary vehicle to demonstrate public transparency, accountability, and trust. The office also provides support to the department's priority projects as defined by the ODHS Director and executive team.

The Office of Public Affairs also includes the **Government Relations** unit. This unit advances the ODHS mission by ensuring that statutory, policy, and budget implications positively impact the Oregonians that we serve. The Government Relations team coordinates all ODHS legislative matters and works closely with the Governor's Office and key community, state, and federal partners. The team also supports field and central office staff by providing consultation and support related to legislative and policy changes. Staff in this unit support the director of ODHS, the directors of all agency programs, and operations in the field. Legislative work is conducted with the intent of eliminating existing inequities and promoting equitable outcomes, using a comprehensive equity lens.

The ODHS **Public Records** unit reviews, completes, and responds to public records requests from clients, the media, public entities, and individuals. With a focus on equitable service delivery, the unit focuses on consistency, transparency, and adherence to public records law across all programs within the agency. The centralized team affords the ODHS workforce and partner with streamlined responses for records requests and serves as a single point of contact for records-

related questions.

The **Legal** unit, also housed in Public Affairs, manages all lawsuits, tort claims, and subpoenas related to ODHS program and operations. Staff in this unit provide expert consultation to ODHS field and central office staff and Department of Justice and Department of Administrative Services Risk Management in policy related to legal matters. The team ensures timely completion of the required judicial documents to move smoothly through a complex legal matter.

- *Office of Reporting, Research, Analytics, and Implementation*

The Office of Reporting, Research, Analytics, and Implementation (ORRAI) compiles reports, conducts research, analyzes data, implements research, and provides both enterprise-wide and inter-agency, program-level data. ORRAI provides mission-critical information to directors, legislators, partner agencies, and the public. The office utilizes predictive analytics, workload modeling, and ODHS and inter-agency program data to improve outcomes for children and families. The office translates data into information and develops practitioner tools to ensure decisions are data informed.

- *Office of Resilience and Emergency Management*

The Office of Resilience and Emergency Management (OREM) focuses on the needs of people before, during and after disasters, reducing disaster impacts in times of crisis and investing in communities year-round to ensure greater resilience. OREM carries out ODHS' roles in Oregon's Comprehensive Emergency Management Plan as the primary agency for mass care, food and water in disaster situations and social services during recovery. The office centers equity in its work, ensuring that the goals and needs of vulnerable communities directly inform resilience plans and that our response systems effectively address disproportionate disaster impacts. OREM also assists other ODHS programs in preventing, mitigating, responding to, and recovering from natural, technical, and human-caused hazards.

OREM recognizes that being ready and quickly responsive hastens recovery. To achieve this, the office adheres to National Incident Management System standards and carries out a statewide strategy that aligns with the 2022-2026 Federal Emergency Management Agency (FEMA) Strategic Plan. Its staff are dispersed around the state to

better identify local needs and enhance community-level relationships. To prepare for catastrophic events, OREM is:

- Establishing a mass care network consisting of public and private partners.
- Conducting exercises and drills around the state alongside local, state, federal and Tribal partners.
- Identifying needs and gaps in Oregon's mass care systems.
- Investing in county-level mass care capabilities.
- Helping to build local capacity for emergency preparedness
- Collaborating with a range of partners to advance resilience through education.

ODHS Shared Services Offices

- *Background Check Unit*

The Background Check Unit (BCU) provides a comprehensive background screening process to determine if an individual should be allowed to have access to vulnerable people, IT systems or client information. BCU also provides centralized support for FBI Criminal Justice Information Services (CJIS) clearance and training for ODHS and OHA staff. BCU is also Oregon's point of contact for processing out-of-state child protective service check requests in support of federal legislation. BCU provides background check services and support to all ODHS and OHA divisions for employment purposes; for those who provide services or seek to provide services as a contractor, subcontractor, vendor, or volunteer; and for those who are employed by qualified entities that provide care and are licensed, certified, registered, or otherwise regulated by ODHS or OHA.

- *Budget Center*

This area provides budget planning, financial analysis, position management consultation, facilities and motor pool coordination, and technical budget support for ODHS and OHA. These services are provided for department leadership, programs, policy and field managers, staff, and external policymakers.

- *Office of Contracts and Procurement*

The Office of Contacts and Procurement (OC&P) supports all offices of ODHS, OHA, and the Home Care Commission by procuring supplies and services in the most cost-effective manner through innovative and responsible solutions. The unit provides guidance, training, and support to meet contracting and procurement needs and assists agencies with supplier diversity programs that seek to include women- and minority-owned and emerging small businesses.

- *Office of Enterprise Data Analytics*

The 2015 Oregon legislature created the Oregon Enterprise Data Analytics (OEDA) unit to conduct inter-agency research. The legislation encouraged the expansion of data informed decisions throughout state government. The research analysts, economists, and information technology positions work among agencies to translate data into information; that information promotes data-informed decisions and improves outcomes for children and families. OEDA uses advanced analytics with human service organizations, health organizations, public health organizations, corrections, the courts, employment, housing, and education.

- *Office of Facilities Management*

This office provides the management and oversight of all facility and leasing related matters for ODHS and OHA administrative offices, branch offices, and other facilities statewide. Its staff and operations support the departments' missions by ensuring that buildings are safe and universally accessible and by maintaining and operating buildings, telecommunications, and physical infrastructure in a cost-effective, sustainable, and environmentally responsible manner. The office collaborates with both ODHS and OHA leadership to develop long-term strategic plans for the facilities needs of both organizations.

OFS manages 2.7 million square feet of leased property for OHA and ODHS statewide. This includes support and management of over 160 offices on behalf of ODHS and OHA. This office is responsible for managing maintenance, remodeling, furniture acquisition and reconfiguration, staff relocations, coordination with DAS and state brokers on lease negotiations, and analysis of the costs and benefits of space utilization, ADA compliance, Trauma Informed spaces, and energy conservation.

- *Office of Financial Services*

The Office of Financial Services (OFS) provides leadership, fiscal policy direction, financial systems management, and coordination of core financial accounting, payroll, and financial reporting services for ODHS and OHA. Services include but are not limited to:

  - Receipting, recording, and applying millions of dollars in state and federal revenue.
  - Accounting for and disbursing resources to clients, providers, vendors, and contractors.
  - Managing client trust accounts.
  - Administering employee payroll and benefits to approximately 14,500 employees.
  - Managing cash flow, completing federal draws, and reconciling Treasury accounts.
  - Ensuring accounting transactions are accurately recorded, reconciled, and reported to state and federal partners.
  - Compiling, reporting, and managing federal grant awards.
  - Developing financial statements, completing tax reporting.
  - Overseeing e-commerce programs including ACH and credit card payments and the SPOTS Visa program.
  - Managing the federal Public Assistance Cost Allocation plan and process.
  - Developing and managing financial systems including all sub-system interfaces; and ensuring a proper control environment is maintained.

The size, scope, and complexity of the financial structure of these agencies is the most complex in the state of Oregon. Currently OFS is responsible for more than 20 interfaced financial systems, 35 treasury accounts, 200 funds (state, federal, other, lottery), 400 program areas, 800 SPOTS Visa cards, and grants/fees (funding sources).

The office reports to the ODHS OCFO and the OHA CFO.

- *Office of Forecasting and Research and Analysis*

Office of Forecasting and Research and Analysis (OFRA) supports ODHS and OHA by providing accurate, timely, unbiased caseload forecasts and related research and analysis to support budgeting, policy development, identification and elimination of inequitable outcomes, and operational planning. OFRA maintains the Integrated Client Services data warehouse, which provides caseload forecasters and other researchers with data from multiple systems within ODHS and OHA, uniting individual person records from separate siloed enrollment systems into a cohesive whole, showing the interconnected patterns of human services as they are experienced by Oregonians in need. This unit reports to the ODHS Office of the Chief Financial Officer (OCFO).

- *Office of Health, Safety & Employee Well-being*

This office provides services including employee occupational health and safety, workers' compensation tracking and program analysis, property loss tracking, threat management assessments and tracking, trauma-informed services, a suicide prevention program, administration of the Employee Assistance Program (EAP), and risk management. Work within these program areas includes the development and delivery of training, regulatory compliance monitoring, strategic planning, and legislative tracking. OHSW also maintains responsibility for statewide emergency management and recovery operations under the Oregon Emergency Operations Plan and the Oregon Recovery Plan and represents ODHS on the Oregon Emergency Response Council.

- *Office of Imaging and Records Management*

This office provides services tailored to business and program operational needs related to:

  - Agencies' delegated authority regarding imaging and electronic and physical document and records management.
  - Data entry and transmission of data to mainframe applications that generate payment to medical and childcare providers.
  - Imaging and data capture of source documents into a central repository.
  - Imaging and data capture of documents into electronic workflow, eliminating the need for the customer(s) to process physical documents.
  - Archive storage of physical records.
  - Tracking and shipping of archived records; and

- Destruction of physical documents/records per agreement and the Secretary of State's Office retention schedule.

The office converts more than three million pieces of paper – applications, bills, claims, checks, and more – each month, making information more readily available and saving money on storage costs.

- *Office of Internal Audit and Consulting*

This unit provides independent and objective information and consulting services for ODHS and OHA. The internal audit team reviews all areas of ODHS/OHA, including central operations and programs, field offices, and institutions. The unit provides other services such as consultation on internal controls and process improvement efforts, facilitation of risk assessment activities, coordination of external audits and tracking and follow-up on both internal and external audit findings.

- *Office of Payment Accuracy and Recovery*

OPAR is responsible for identifying, establishing the extent of, and recovering monies owed to ODHS or OHA by clients, providers, and third-party payers for services provided by our state and federally funded health and human services programs. The office carries out these responsibilities in a customer sensitive manner and returns owed monies timely to agency programs. Its staff work in collaboration with agency programs to continuously improve the accuracy of provider and client payments and program integrity and to serve as a deterrent presence through working relationships with law enforcement and client and provider organizations, and by publicly communicating the outcomes of OPAR's fraud investigation and collection-related unit activities.

- *Office of Training Investigations and Safety (OTIS)*

This office ensures safety and protection to the more than 77,500 people per biennium who receive mental health, developmental disability, or children's therapeutic services in Oregon. The office consists of four primary functional units: Investigations, Children's Care Licensing, Contested Case – Administrative Law Judge Hearings, and Training and Transformation (TnT - which includes: Quality Management and Prevention, Policy and Legal, Data, and Investigator training). Together, these

functional units provide services to several programs of ODHS and OHA that serve some of Oregon's most vulnerable citizens, including:

- Adults and children with intellectual/developmental disabilities.
- Adults with mental illness.
- Adults with substance abuse disorder (SUD) in residential settings.
- Aging adults and people with disabilities; and
- Children and young people under the age of 21 living in residential settings, other Child Caring Agencies, or in school or daycare settings.

- *Publications and Creative Services*

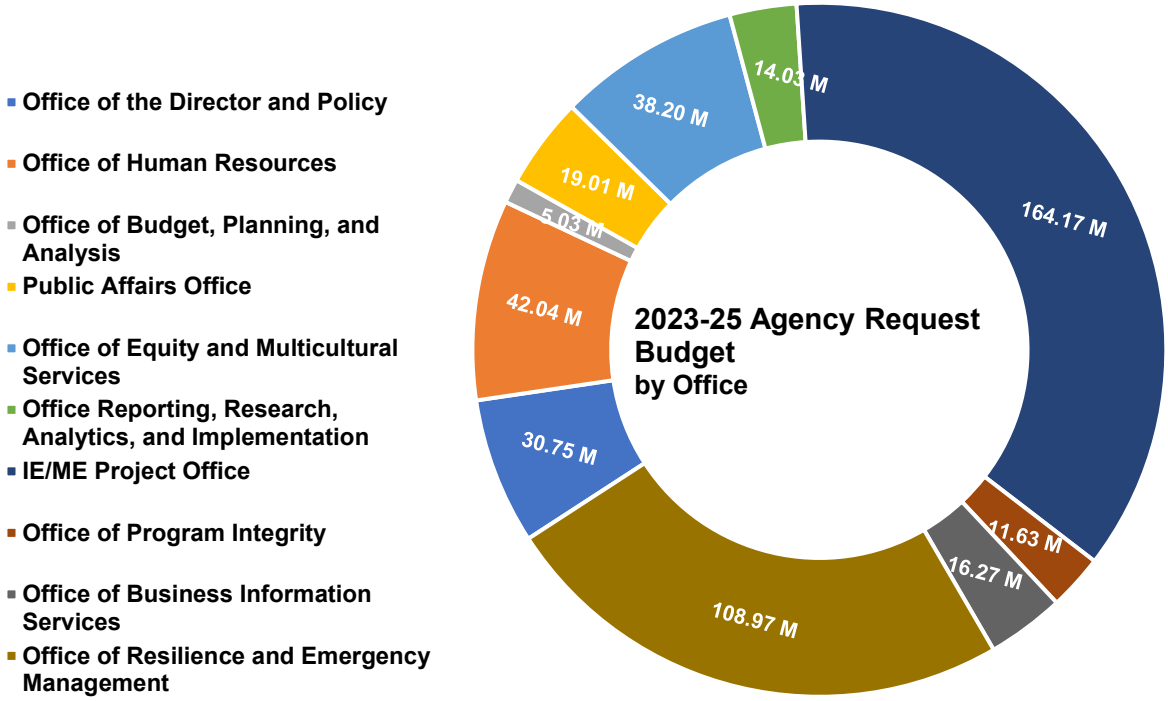
Publications and Creative Services (PCS) manages the writing, design, development, printing, and distribution of ODHS and OHA publications for internal and external audiences, including those in accessible formats and multiple languages. This unit plays a central role in document translation services for both agencies. PCS provides consulting to plan professional quality print and digital publications that reflect ODHS and OHA style guidelines; edits and proofs materials created by staff experts and partners in their individual fields; and provides graphic design, layout, illustration, and form creation services.

- *State Assessments and Enterprise-wide Costs*

ODHS also has statewide assessments that include Department of Administrative Services charges such as the State Government Service Charge, Risk Assessment and State Data Center Charges. Rent for all of ODHS is in the Facilities budget. IT Direct is for all computer replacement needs. The Shared Services funding is the revenue for the ODHS portion of ODHS | OHA Shared Services and Debt services is to pay off Certificates of Participation or Q-Bond loans taken for major ODHS projects. Each service, both shared and assessed, are important for ODHS to attain its programmatic outcomes.

Oregon Department of Human Services: Central Services

Primary Long-Term Focus Area: Excellence in State Government
Secondary Long-Term Focus Area: N/A
Program Contact: Eric Moore



Program Overview

Oregon Department of Human Services Central Services' budget consists of the following:

- Office of the Director.
- Office of Budget, Planning, and Analysis.
- Office of Business Information Services.
- Office of Equity and Multicultural Services.
- Office of Human Resources.
- Office of Integrated Eligibility (Oregon Eligibility Partnership).
- Office of Program Integrity.

- Office of Public Affairs.
- Office of Reporting, Research, Analytics, and Implementation; and
- Office of Resilience and Emergency Management.

These offices provide essential supports to ODHS programs in achieving departmental and programmatic missions, visions, and outcomes.

Program Funding Request

	General Fund	Other Funds	Federal Funds	Total Funds	Positions	FTE
2021-23 LAB	209,961,790	45,895,088	126,444,545	382,301,423	382	371.37
2023-25 ARB	232,018,376	50,573,784	167,963,533	450,555,693	613	580.51
Difference	22,056,586	4,678,696	41,518,988	68,254,270	231	209.14
Percent change	10.5%	10.2%	32.8%	17.9%	60.4%	56.3%

Program Description

Office of the Director

The ODHS Director's Office is responsible for agency leadership, policy development, resource allocation, and administrative oversight for all programs, staff, and offices in ODHS in a manner that supports equitable outcomes for Oregon's diverse population. These functions are led by the Director and Deputy Director and coordinated by the Director Cabinet members, with the Governor's Office, the Oregon Legislature, state and federal agencies, Tribes, community partners, communities of color, LGBTQIA2S+ communities, local governments, advocacy and client groups, and the private sector. The Director and Deputy Director oversee Internal Audits and the Office of Training, Investigations and Safety, which provide shared services for both ODHS and OHA.

The Director's Office includes the following units:

Chief of Staff

The Chief of Staff to the agency enables the Director to work most effectively with internal and external partners to fulfill commitments that achieve the agency's mission, goals, and outcomes. This is a strategic and facilitative role

that requires a combination of focus and flexibility, as well as a willingness to play an active, behind-the-scenes role as the Director's trusted advisor.

Office of the Chief Financial Officer
The Office of the Chief Financial Officer provides optimal business services to ensure accountability, data-driven decisions, and stewardship of resources in support of the ODHS mission. This is done by:

- Working closely with ODHS and OHA programs and the OHA Chief Financial Officer to ensure culturally competent and equitable services and accurate, timely, and efficient recording and management of financial resources.
- Authorizing the redistribution of available resources to meet changing needs; and
- Establishing administrative controls.

This office also oversees budget, planning and analysis functions for ODHS-based programs as well as coordination and leadership of the ODHS budget with the Governor's Office, Legislature, Department of Administrative Services, Legislative Fiscal Office, and ODHS partners.

Office of Immigrant and Refugee Advancement
The Oregon Legislature through SB 778 established the Office of Immigrant and Refugee Advancement (OIRA). Transferred to ODHS from the Governor’s Office in 2022, OIRA is dedicated to identifying the gaps within existing structures and strives to promote the successful social, linguistic, educational, economic, and civic integration of Oregon’s immigrant and refugee communities.

The office accomplishes its work through partnering with state agencies, community-based organizations, refugee resettlement agencies (RRAs) and immigrant and refugee advocacy groups to help coordinate strategies, create policy, develop programs, review legislation, develop tracking systems to monitor potential investments and efforts in the state, advocate that resources are being allocated equitably and effectively, and ultimately implement plans that aid in the advancement of immigrants and refugees across the state. The office conducts outreach and education and serves as a resource on state initiatives and programs to ensure equitable access for immigrants and refugees.

Governor's Advocacy Office

The Governor's Advocacy Office (GAO) is the office of Human Services Ombuds. Ombuds (also "ombudsman" or "ombudsperson") are neutral or impartial conflict resolution practitioners who may provide confidential and informal assistance to ODHS clients and others affected by the Department's action or inaction. The GAO is a part of the ODHS Director's office and resolve issues and track trends on behalf of the ODHS Director. The office includes:

- ODHS Ombuds - the GAO has Ombuds dedicated to serving client and others with questions, concerns, and complaints about all ODHS programs and services.
- Foster Care Ombuds - the Foster Children's Bill of Rights requires that ODHS foster youth are enabled to make complaints and assert grievances regarding their care, safety, or well-being.
- Client Civil Rights investigations - ODHS non-discrimination rules and policies require investigation of reports of discrimination.
- Oversight of the ODHS formal complaint process - by rule, the Department maintains a process for handling formal complaints. While complaints may be resolved locally, the GAO partners with supervisors to oversee this process.

Tribal Affairs

The Tribal Affairs Unit within the ODHS Director's Office is a team committed to all Oregon Tribal communities thriving mentally, physically, spiritually, and emotionally. Tribal Affairs works with all five ODHS programs to create and provide Tribally appropriate programming, services, policies, and support. Through Tribal consultation with Oregon's Nine Federally Recognized Tribes, ODHS ensures programming, services and policies meet the needs of Oregon Tribal communities.

Office of Budget, Planning and Analysis

This office functions as the central budget for ODHS based programs working under the guidance of the CFO. Main duties include: (1) development and preparation of the department's biennial budget documents and leadership of the ODHS budget with the Governor's Office, Legislature, Department of Administrative Services (DAS), Legislative Fiscal Office (LFO) and DHS partners; (2) initiating, coordinating and developing the department's budget rebalance plans and Legislative Emergency Board items; (3) providing fiscal analysis of proposed legislation and responses to inquiries regarding fiscal impacts

of policy changes; and (4) providing management accurate budget and projections to assist in the management of the overall ODHS budget of over $17.1 billion total funds and over 10,450 budgeted positions.

Office of Business Information Services

The Office of Business Information Services (OBIS) is responsible for ensuring ODHS program and policy integrity in Enterprise IT Projects and in operations and maintenance efforts. OBIS specialize in standards and practices of Business Analysis and User Acceptance Testing Services related to Enterprise IT solutions. OBIS support the ODHS mission and program integrity through the following services:

- Provides collaboration and strategic planning with State, Agency, Program and other related business and IT organizations regarding governance, priority and resource management of IT projects and enhancement, as related to State and ODHS Business Information Services
- Provides vendor, contract, and budgetary oversight, as directed, for some Enterprise IT projects and operations and maintenance solutions, as defined
- Design and application of Enterprise level business analytic and testing service standards and practices
- Provides centralized Business Analytic support to Enterprise level IT projects and enhancements
- Provides centralized Business Analysis and User Acceptance Testing services for the Oregon Eligibility system
- Provides a scalable central BA and UAT model for other IT solutions, as defined

Collaborates with all other agency Business Support Units (BSUs), Business Information Service units (BISs) and other to promote best practices, process improvement and increased program integrity across all Business Analytic services bridge the gap between IT solutions and business need. They assist ODHS program policymakers maximize strategic use of technology, while defining clarity and precision in our business solutions. Rigorous Business Analytics and system testing improve our projects, systems and increase program integrity across our Enterprise.

Office of Equity and Multicultural Services

The Office of Equity and Multicultural Services (OEMS) provides leadership and direction in supporting equity, diversity, and inclusion initiatives throughout the

agency. OEMS guides systemic changes to both internal workforce developments as well as improve service delivery to all Oregonians. The goals of the office include reducing service disparities in all program areas; ensuring a diverse and culturally competent workforce; removing barriers to a welcoming work environment; and improving life outcomes for all ODHS clients.

Office of Human Resources
Human Resources serves as a strategic partner to our staff, providing proactive, comprehensive human resources services, in alignment with agency and programs' mission and goals. This office works closely with internal customers and management on workforce strategies that support agency and program needs and strategies and building a healthy workplace culture of ongoing development and feedback to ensure the agency has a diverse workforce with the skills, training, and support to do their work, now and in the future.

Office of Integrated Eligibility (Oregon Eligibility Partnership)
The Oregon Eligibility Partnership (OEP) is responsible for oversight of the Oregon Eligibility (ONE) system, which allows Oregonians to apply for medical, cash, food, and childcare benefits in one place and enables a streamlined eligibility determination process across a range of benefit types. More than 1.5 million people in Oregon receive benefits through the ONE system.

The OEP team is responsible for providing equitable and holistic eligibility determinations that allow people to receive accurate and timely determinations and to access critical resources. The team supports more than 4,000 staff across Oregon who determine eligibility through the ONE system.

Office of Program Integrity (OPI)
OPI conducts analysis and tests to determine whether ODHS is implementing programs in the way they were designed, and trains caseworkers based on their findings to improve program integrity. The office conducts operational and case reviews as well as field visits, many mandated by federal law, to determine how accurately each program is making eligibility and other program determinations.

Office of Public Affairs
The Public Affairs Office is made up of three work units: Communications, Legislative, and Legal. The office provides ODHS with unified support and coordination in community outreach and communication, legislative action, and

strategy.

Communications Unit
This office supports the agency mission by providing accurate information to employees, clients, legislators, community partners, interest groups, providers, local governments, state and federal agencies, policymakers, news media, targeted audiences, and the public. Effective communication is the primary vehicle to demonstrate public transparency, accountability, and trust. The office also provides support to the department's priority projects as defined by the Director and executive team.

Government Relations Unit
This unit serves the agency's mission by ensuring that statutory, policy and budget initiatives positively impact Oregonians. The government relations team coordinates ODHS legislative matters with, and provides timely and transparent communications to, the Oregon Legislature, Governor's Office, and key community partners. The unit also supports field and central office staff, providing consultation and support in legislative and policy changes, primarily working with central office staff on policy development for program services. During a legislative session, this unit tracks, assigns, reviews, and focuses on policy implications related to ODHS programs and operations. Staff in this unit support the director of ODHS, the directors of all ODHS programs and district managers in field offices. Legislative work is conducted with the intent of eliminating existing inequities and promoting equitable outcomes, using a comprehensive equity focus.

Public Records Unit
The ODHS Public Records Unit centrally tracks, processes, and responds to record requests from media, individuals (and/or their representatives) and public entities. PRU processes a consistent average of 600 requests per month and serves requestors Monday through Friday with an online portal being available 24/7. The unit focuses on consistency, transparency, and adherence to state, federal and Public Records Law.

The project to centralize public records was prioritized under the 2019 Executive Order for Child Welfare which included improving compliance with Oregon Public Records Law. Compliance with Public Records Law includes meeting statutory time frames, communicating with requestors timely and thoroughly, and citing applicable state and federal laws in correspondence.

The unit currently processes a mix of public record requests and requests from individuals (or their representatives) for their own records. PRU has agreements with each program area on which type of individual record requests are handled by PRU and which are handled by the program.

To provide exceptional customer service and accurate and timely decisions, PRU partners with ODHS programs, Oregon Health Authority, Law Enforcement Agencies, Department of Administrative Services and Department of Justice. The costs of The Public Records Unit are predominantly for staff and equipment. There is also a cost to maintain and enhance the Adobe Experience Manager used to track and process record requests.

Legal Unit
This unit manages all lawsuits, tort claims, and subpoenas related to ODHS programs and operations. Staff in this unit provide consultation to ODHS field and central office staff, Department of Justice (DOJ) and Department of Administrative Services (DAS) Risk Management in policy related to legal matters. This team ensures timely completion of the required judicial documents to move smoothly through complicated legal matters.

Office of Reporting, Research, Analytics, and Implementation
The Office of Reporting, Research, Analytics, and Implementation (ORRAI) creates reports, conducts research, analyzes data, implements research, and provides caseload/workload estimates for all programs. ORRAI provides mission critical information to the director and executive staff, program directors, legislators, partner agencies, and the public. The office translates data into information and develops practitioner tools to ensure decisions are data informed. The Office is reliant on predictive analytics to improve outcomes for children and families. ORRAI also implements an equity analysis to identify inequities and progress towards equitable outcomes, as well as to inform agency programs and decision-making.

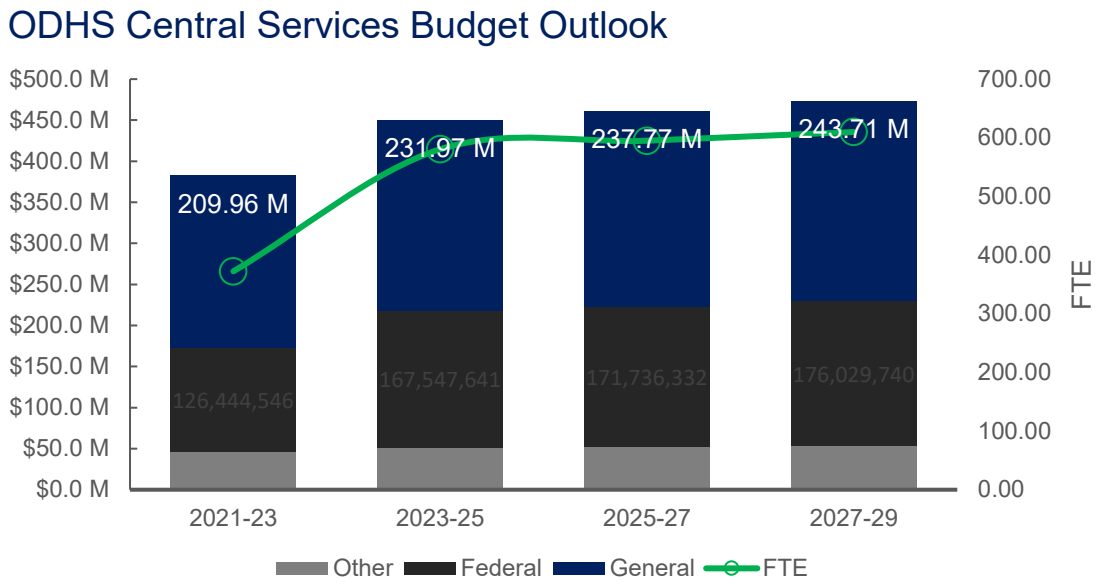
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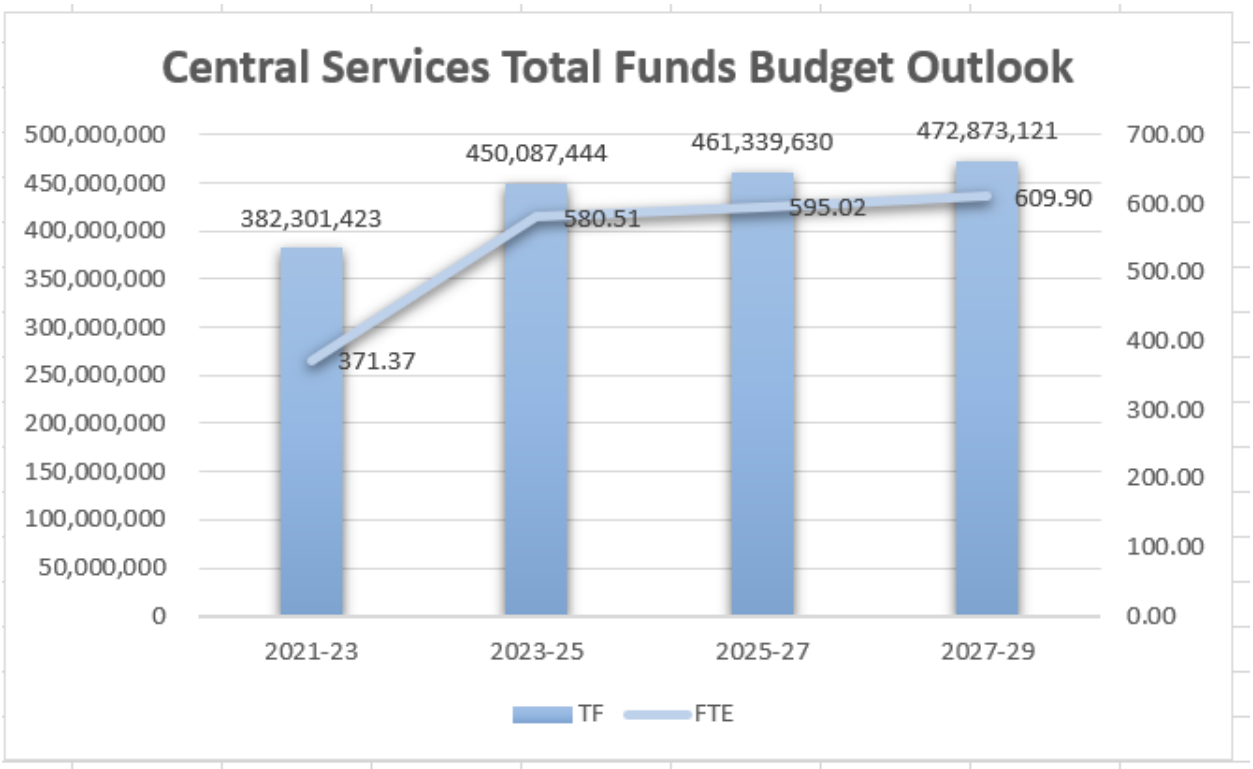
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- Establishing a mass care network consisting of public and private partners.
- Conducting exercises and drills around the state alongside local, state, federal and Tribal partners.
- Identifying needs and gaps in Oregon's mass care systems.
- Investing in county-level mass care capabilities.
- Helping to build local capacity for emergency preparedness
- Collaborating with a range of partners to advance resilience through education.

Program Justification and Link to Focus Areas





Central Services provide critical leadership and business supports necessary to achieve the mission of the agency: helping Oregonians achieve well-being and independence through opportunities that protect, empower, respect choice, and preserve dignity. Central Services include the cost of ODHS Budget, Planning and Analysis, the Director, Governor's Ombudsmen, Legislative and Communications & support, Diversity and Dedicated Human Resources.

The ODHS Central Services budgets are structured and administered according to the following principles:

- ***Control over major costs***

The department centrally manages many major costs. Some of these costs, like many DAS charges, are essentially fixed to the agency. Others, like facility rents, are managed centrally to control the costs. Also, the department strongly supports and actively participates in statewide efforts to locate work across the enterprise and install performance management systems to perform administrative functions more efficiently and effectively.

- ***Performance management system***

The department uses a performance management system containing the following key elements:

- A clear statement of the outcomes ODHS must achieve,
- Descriptions of the processes ODHS uses to achieve its outcomes,
- Measures of success for each outcome and process,
- Owners for each measure,
- Written "breakthrough" strategies for each initiative that will significantly improve outcomes and processes,
- A quarterly, all-day, all-leadership review of progress on each measure and strategy, and
- Best practices in installing performance management require specific skills – especially in project management, LEAN tools, data analysis, and professional development of managers. ODHS has reallocated resources and used savings to make some of these investments, but it must increase these skills as much more needs to be done.

Program Performance

Legal Unit

	This measure counts the number of subpoenas, tort claims, lawsuits, and PJRs received by the ODHS Legal Unit to be managed and handled. It is important for workload management, staffing levels and an indicator if additional resources are needed.			
Fiscal Year	Subpoenas Received	Tort Claims Received	Lawsuits Received	PJRs Received
July 2013 - June 2014	211	86	37	10
July 2014 - June 2015	158	89	28	7
July 2015 - June 2016	171	77	43	15
July 2016 - June 2017	189	78	40	15
July 2017 - June 2018	247	102	36	40
July 2018 - June 2019	208	131	39	68
July 2019 - June 2020	195	122	38	49
July 2020 - June 2021	222	60	19	49
July 2021 - May 2022	213	93	34	29
TOTALS	1814	838	314	282

Tort claims are a 60-day timeline for response with agreement from DAS Risk Management on extension. Lawsuits/PJRs operate under court timelines for DOJ to respond. The ODHS Legal Unit also operates under those timelines. It is not tracked as DOJ is the responder and can file for extensions or parties can agree to extending timelines. Expunction work and manual tracking began in 1/1/2022 with the new statutory change.

The Oregon expunction statutes were amended in 2021 to require a juvenile department initiated automatic expunction process for youths with a juvenile record. As of January 2022, all juvenile departments are required to initiate an automatic expunction for any youth with a juvenile department record who turns age 18 on or after 1/2022. Court issued expunctions have remained steady at an estimated 3 court orders per month statewide with a 21 day from receipt compliance requirement.

Currently only two small jurisdictions (Klamath and Benton) are regularly complying with the new requirements for youths turning age 18 on or after 1/2022. For those jurisdictions we receive an average of 5 expunction letters per month. It is estimated that if all juvenile jurisdictions, including the larger jurisdictions of Multnomah, Clackamas, Washington, Lane, and Marion, regularly comply with the statutory automatic expunction requirement, ODHS will receive an average of 100 expunction letters per month. This means that the backlog in most juvenile department jurisdictions will hit ODHS in the coming months and through the first half of 2023, increasing the average

exponentially. We do not have reliable estimates for this number during the "catch-up" phase during the first half of 2023 to clear backlogs.

Prior to January 2022 approval of applications for expunction of juvenile records were not automatic. As of January 2022, Senate Bill 575 makes approval of requests for expunction of juvenile records by those persons reaching age 18 prior to January 2022 automatic. ODHS will receive expunction letters on all expunction requests directing ODHS to expunge the subject activities that brought the then minors under the juvenile departments' jurisdiction. The attorney advising the juvenile departments on the new "automatic expunction on request" process anticipates average monthly requests to increase. Using a conservative 25% of all eligible "automatic expunction on request" cases the estimated increase is 25 expunction letters that ODHS will need to process per month.

Rules Programs: Rules Coordinators serve all programs, the public, community partners, work with Legislative Coordinators, rule writers, managers to develop the rules and filings. The Rules Program Manager serves the Rules Coordinators, rule writers, management and leadership with rulemaking process, consistency, and policies to support the rules program – and guides the public to the processes and program. Based on the previous two years, ODHS filed a total of 1179 rules. Estimate a similar amount filed for the next biennium. Note: there was an influx of rules filed due to Covid-19 changes to rule. Rules filed in 2021: 354 Permanent, 288 Temporary for a total: 642. Rules filed in 2020: 368 Permanent, 169 Temporary for a total: 537.

Public Records Unit

ODHS Public Records Unit					
Number of record requests received					
	2019	**2020**	**2021**	**2022**	**23-25 projections**
	*3365	6580	*5009	*3308	6720 per year
This measure counts the number of record requests received by PRU to be processed. It is important for workload management, staffing levels and an indicator if additional resources are needed.					
Counts with an * are less than a full year of data. 2019 - PRU was not formed until mid 2019. 2021 - a data integrity issue was discovered in AEM, count is for 8 months. 2022 is through June 15. Average monthly requests received is about 560 for a total projection of 6720 per year.					
Quality of service provided					
	2019	2020	2021	2022	23-25 projections
% of Department of Justice appeals upheld	no data	81%	80%	no data	85%
Currently this measure is calculated based on the percentage of DOJ appeals where PRU's decision is upheld. In the future, PRU will have a formal quality assurance plan with metrics. Quality assurance is important to ensure compliance with state and federal law as well as to identify training needs and					
Timeliness of service provided					
	2019	**2020**	**2021**	**2022**	**23-25 projections**
	no data	99%	98%	98%	99%
Public record requests have 5 day and 15 day statutory deadlines. This metric captures the percentage of requests that are processed within those timeframes or a timely extension letter is provided to the requestor. Timeliness is important to ensure compliance with Public Records Law timeline requirements and customer service to requestors. Timeliness measure is also important					
Cost per service unit					
	2019	**2020**	**2021**	**2022**	**23-25 projections**
					3,450,592
Projections taken from Public Affairs Financials April 2022					

Enabling Legislation/Program Authorization

ORS 409.010

Funding Streams

- Allocated Costs – Costs benefiting more than one federal or state program are charged to a cost allocation pool. The allocating grant numbers accumulate costs until the monthly cost allocation process is run.
- Direct Charge – Costs benefiting a single federal or state program are charged directly to the grant number representing the program. There is no additional allocation for these costs.
- Monthly Process – The process runs each month based on actual accumulated costs. On a monthly basis, statistics are generated to complete the allocation process. The cost allocation pools are cleared each month by the operation of the cost allocation process to transfer the costs to the final grant and cost objective.
- Federal Financial Participation (FFP) Calculation – After costs are allocated to final cost objectives, ODHS calculates and records the level of Federal Financial Participation for the specific grant.

Funding Justification and Significant Changes to CSL

There were fifteen policy option packages included in Central Services' Governor's Budget.

PACKAGE NO.	PACKAGE TITLE				
106	**Chief Data Office**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
541,637	0	361,092	902,729	3	3.00
PACKAGE DESCRIPTION "Accurate and reliable data can improve quality of life for the people we serve. Accurate and easily available data can direct services to where they are needed. Accurate data can offer solutions to problems. Data even can address inequities and disproportionalities, given the resources necessary to identify, gather and maintain them. Data inconsistency negatively and disproportionately impact people and communities of color, Tribal members and communities, people with disabilities and members of the LGBTQIA2S+ community. On the ground level, data give our case workers access to accurate information so they can spend more time in direct service to people. Currently one limited duration employee is the					

data expert for the Oregon Department of Human Services – a complex agency serving one in three Oregonians.
This policy package creates a data office of three FTE and budget for contract services. The data office will: 1. Set and lead vision and standards for data collection, use, management, governance, ethics, and justice. 2. Manage compliance with Open Data mandates (ORS 276A.350-276A.371). 3. Lead the development of tools and culture to enable ODHS to better use data to plan, make decisions and deliver service. 4. Implement data quality, management, and integration practices to create the future of human services, reduce disproportionality and inequity, respond better to emergencies and disasters, and adopt REALD/SOGIE (Race, Ethnicity, Language and Disability/Sexual Orientation, Gender Identity and Gender Expression) standards.
If this POP is not funded, adverse effects include: first and foremost, slow service delivery, missed opportunities to focus services where they are needed most and the perpetuation of health inequities. If not funded, it will also adversely affect compliance with Open Data mandates; diminish the ability to identify and correct disproportionalities and inequities; and miss opportunities to streamline technology implementations due to continued siloed organization of data and related decision making. Lack of comprehensive data affects our ability to equitably serves Oregonians. "

PACKAGE NO.	PACKAGE TITLE				
107	**Program Integrity (OPI)**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
710,871	0	710,871	1,421,742	8	6.00

PACKAGE DESCRIPTION
"It is vitally critical that the Oregon Department of Human Services ensures services and benefits are provided to Oregonians with the highest level of accuracy and quality. It is also important that there are not overpayments and that those not eligible do not receive benefits, ensuring that people who do qualify receive benefits and supports.
This Office of Program Integrity (OPI) is responsible for this work. The office creates quality control reviews that are shared with federal partners to fulfill the

federal mandate and to internal ODHS programs for improvements in service to those populations in Oregon that have the most need.
However, due to increased federal requirements, which has increased staff work time significantly, federal, and internal reporting is at risk of not meeting required deadlines and could cause reporting errors. Inadequate staffing could lead to not meeting federal requirements and higher error rates which could cause sanctions and penalties, including program defunding. This could seriously impact the people ODHS serves – those most in need. The primary objective of the policy package is to maintain the Office of Program Integrity's (OPI) federally mandated quality control reviews for federal partners – (Children's Bureau, Food and Nutrition Services, Centers for Medicare and Medicaid) as well as internal partners – (Child Welfare, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF), Employment-Related Day Care (ERDC), Home and Community-Based Service (HCBS), and Medical Programs including Long-Term Care for APD). This also includes reviews to measure the efficiencies of each program and provide the Oregon Department of Human Services (ODHS) programs with current statistical information. "

PACKAGE NO.	PACKAGE TITLE				
108	**Strengthening Chief Financial Office**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
1,626,069	0	1,084,054	2,710,123	11	9.25

PACKAGE DESCRIPTION
"Organizations need strong financial, budget, positions management and forecasting offices to be able to run effectively. During the past several years, the size and complexity of ODHS' work has increased, to ODHS Operations and budget has grown significantly. The changes have only been exacerbated by the pandemic and the influx of one-time funding. For example, ODHS is unique in that it has a very complicated financial structure; with more than 100 unique budget areas and more than 800 unique Labor Cost Codes, and thousands of other invoice codes.

Further, impacts of new programs and/or positions through the POP process, additional new or changed programs proposed in POPS (if funded), and/or changes to federal policy and/or changes to reporting requirement for the numerous federal fund sources will have an additional impact on complexity and level of work expected from the ODHS CFO Office. ODHS is unique, mainly due to the scale of positions it manages. This includes managing over 11,000 budgeted positions and over $17 billion in Total Funds. Further, due to the complexity of funding, tracking, forecasting and position management requests have continually become more complex and details. New changes/programs will also not just have an OIS impact. CFO offices will also be impacted by these changes.
However, the ODHS Office of the Chief Financial Officer (CFO) resources have remained practically unchanged for years. This Policy Option Package proposes an investment in new positions to oversee ODHS position management, financial revenue planning, clear several non-budgeted positions, enhance support for the Integrated Client Services database to keep up with changes in source systems and advance the work related to REALD and better harness the power of Geographic Information System (GIS) data (housed in ODHS ORRAI). This request would also help ODHS forecasts to be more easily understood by Legislators, Legislative Fiscal Office, our partners, and the public. This request addresses three ODHS priorities: Strengthening Foundations, Responding to Emergencies, Creating the Future of Human Services. Improve upon Race/Ethnicity identity information. "

PACKAGE NO.	PACKAGE TITLE				
109	**Ofc of Resiliency and Emergency Mgt Staffing**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
7,722,411		5,148,257	12,870,668	48	48.00

PACKAGE DESCRIPTION
The Office of Resiliency and Emergency Management (OREM) provides disaster services to all Oregonians. OREM was created in response to the 2020 wildfires, but its charge involves preparing for and responding to all types of emergencies, including the Cascadia Subduction Zone Earthquake, refugee crises, extreme weather events, and drought. OREM helps people be safe, resilient, and eventually self-sustaining. In the last two years OREM has responded to help people affected by excessive heat events, an ice storm, lack of safe drinking water, and a chemical

leak. OREM has sheltered more than 4,400 wildfire survivors in over 60 hotels from Portland to Ashland; delivered more than 2 million hot meals, three times a day, seven days a week to wildfire survivors, sourced and delivered 500-gallon tanks to 200 people whose wells ran dry due to the recent drought in Klamath County; the list goes on. While Oregon Department of Human Services is identified in state statute as the primary agency for providing Mass Care during disasters, OREM has been operating without legislatively approved funding since the wildfires of September 2020. To fulfill our statutory responsibilities and help Oregonians successfully prepare for and recover from disasters, OREM is requesting additional funding. The funds will allow us to continue program operations while expanding our efforts to partner with communities, Tribes, and community-based organizations to improve local disaster preparedness across the state. The policy package requests funding the existing staff to maintain as well as grow this essential program.

PACKAGE NO.	PACKAGE TITLE				
110	**Human Resources Staffing Stabilization**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
3,608,496	0	2,405,719	6,014,215	33	24.75

PACKAGE DESCRIPTION

"Oregon Department of Human Services is committed to becoming an antiracist organization that actively dismantles discriminatory systems and prioritizes equity in our work. ODHS Office of Human Resources (HR) plays a critical role in helping the agency realize these aims. From recruitment and onboarding to training and compensation, HR is building a diverse human services workforce that is highly qualified, well supported at work, and representative of Oregon's communities. Every day, HR works to advance these and other agency priorities through effective services to customers, clients, and partners across all of ODHS' programs.

Yet current staffing levels are not sufficient to fully support agency strategy. Our training and development staff-to-employee ratio, for example, is approximately 1:1,660, while 1:350 is considered the industry standard. Meanwhile, staffing shortages across our Rapid Talent Acquisition, Recruitment, and Classification

and Compensation teams have resulted in service delivery delays and are causing important strategic and analytical work to be postponed.
The purpose of this request is to create permanent positions in HR's Operations/Organizational & Professional Development (Central Training), Rapid Talent Acquisition, Recruitment, and Classification & Compensation Teams and to provide HR with a Project Manager. These positions will:
• Support the long-term growth and development of agency managers and management teams through a robust professional development program that aligns with the Department of Administrative Services (DAS) Management Competency model.
• Improve efficiency and effectiveness related to recruitment, hiring, and onboarding while developing meaningful workforce analytics to inform future work.
• Meet the agency' operational and program goals; and
• Advance the HR Strategic Plan through intentional and effective project management."

PACKAGE NO.	PACKAGE TITLE				
111	**Local Leadership**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
3,183,973	0	2,122,678	5,306,651	29	21.25

PACKAGE DESCRIPTION
"Because ODHS serves Oregon communities, those communities should have meaningful input into the designs and delivery of our services. But ODHS currently lacks the community engagement capacity we need to make this a reality, which has significant equity and efficiency implications for our work.
This policy package will provide the staffing and other resources necessary to enable greater direct engagement with the communities served by ODHS, which will provide multiple opportunities to further the ODHS Equity North Star vision; lead with intersectionality to address the roots of systemic oppression; and make services, supports and well-being accessible to all. In addition, this policy package will deliver policies and programs that are equitable and improve community conditions. "

PACKAGE NO.	PACKAGE TITLE				
112	**Ofc of Resiliency and Emergency Mgt 211**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
5,923,219	0	86,148	6,005,367	1	0.75

PACKAGE DESCRIPTION

Imagine your home was just destroyed by a wildfire. You would need to know where to call to get help, to connect to resources, where to go for shelter, food, water. The community-based call center, 2-1-1, is a vital resource for people experiencing a disaster or needing human services. The Office of Resilience and Emergency Management (OREM) is legally obligated to provide disaster services to all Oregonians. One of the most critical points of contact for OREM as an arm of ODHS is the 2-1-1. During and immediately after the September 2020 wildfires there was a significant increase in 2-1-1 capacity to provide information about resources to those directly and indirectly impacted by the disaster. This policy package would provide funding to continue and expand the services offered by 2-1-1 to support the continued safety and security of emergency services and information through communications, outreach, and quality assurance. Disasters such as wildfires, floods, extreme heat and cold are only increasing. Children, families, the elderly, and people with disabilities need to be able to call one central phone number to get help. This call center is also a trusted resources of communities most impacted by inequities. 2-1-1 needs to have increased capacity to help, especially in emergencies.

PACKAGE NO.	PACKAGE TITLE				
113	**Maintaining Critical Staffing**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
9,011,101	0	6,007,367	15,018,468	55	55

PACKAGE DESCRIPTION

ODHS is leading an agency-wide shift toward more collaborative, community- and person-centered human services. Encompassing change across our programs and at every level of our nearly 10,000-employee agency, the shift requires strategic and dedicated leadership, improved communication and transparency with partners, and a diverse, well-trained human services workforce. At the same time, the COVID-19 pandemic and other crises have contributed to historic demand for human services. To meet these compounding needs, ODHS has added key positions to agency offices. Without these positions, ODHS cannot effectively and efficiently carry out its three strategic priorities. To ensure that Oregonians will continue see needed and global improvements in our human services systems, ODHS is requesting position authority and funding for 56 non-budgeted positions. These positions will continue mission-critical work including leading our enterprise-wide Building Well-being Together initiative; leading programs for people with intellectual and developmental disabilities; providing timely and transparent communication to elected officials, the media, partners, and the public; as well as employee recruitment, professional development, retention, and management.

PACKAGE NO.	PACKAGE TITLE				
114	**Emergency Shelter and Feeding**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
35,000,000			35,000,000		

PACKAGE DESCRIPTION

No one in Oregon should go even one day without shelter, food, and water. Since the 2020 wildfires, the ODHS Office of Resilience and Emergency Management (OREM) has sheltered more than 4,400 survivors in over 60 motels and delivered more than two million hot meals to survivors, three times a day, seven days a week. There remain over 200 wildfire survivors who have lost their homes and are currently being sheltered through OREM services. The last two years have been the most disaster-filled times in Oregon's history with ice storms, floods, drought, a chemical leak, and expansive wildfires. When a disaster hits Oregon, OREM must be there to provide shelter, food, and water. Funding this Policy Option

Package (POP) would allow the ODHS Office of Resilience and Emergency Management (OREM) to provide emergency shelter and feeding to people in Oregon displaced by disaster, through the next biennium.

PACKAGE NO.	PACKAGE TITLE				
115	**Refugee Program**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
8,132,806	0	89,539	8,221,345	1	0.75

PACKAGE DESCRIPTION

Oregon has a long tradition of welcoming refugees. Since 1975, nearly 70,000 forcibly displaced people have arrived in the state from all over the world. After resettling here, refugees contribute greatly to Oregon's economic vitality, cultural life, and social fabric. Today, Oregon is as committed as ever to welcoming refugees and helping them safely and successfully rebuild their lives – a commitment that's increasingly critical as the world's refugee population continues to grow to record numbers. Oregon Department of Human Services' Office of Resilience and Emergency Management (OREM) provides a comprehensive array of services to people in Oregon who are impacted by disasters and emergencies, including the sheltering, and feeding of refugees. While we are currently supporting refugees through our existing infrastructure, the recent raising of the federal refugee admissions cap, coupled with the war in Ukraine and other crises around the world, translate into growing numbers of refugees who need our help. In addition to anticipated fiscal shortfall, these trends pose considerable risk to our ability to provide current levels of service. The funding provided by this policy package will facilitate food, shelter, and aid for displaced refugees who come to Oregon.

PACKAGE NO.	PACKAGE TITLE

116	Grant Pgm for Community-Based Organizations				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
24,017,060	0	1,011,403	25,028,963	13	9.75

PACKAGE DESCRIPTION

An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.

PACKAGE NO.	PACKAGE TITLE				
117	**Tribal Liaisons**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
755,591	0	503,737	1,259,328	6	4.50

PACKAGE DESCRIPTION

To respect and uphold the sovereignty of U.S. Tribal Nations, required consultation and engagement should occur in a consistent, coordinated, and equitable way. Effective consultation and engagement will provide Tribal children, families and elders the access they need to services and supports from the Oregon Department of Human Services (ODHS). Lacking a formal structure, current engagement and collaborative efforts are often confusing and ineffective. Currently ODHS does not have a formal structure, uniform process or supports to do this work. ODHS is requesting this policy option package to (1) adequately

resource the ODHS Tribal Consultation Policy implementation structure and (2) add Self-Sufficiency Programs Tribal Liaisons positions. This request aligns with ODHS' strategic goals of strengthening foundations and creating the future of human services. Without the requested resources, members of Oregon's Nine Federally Recognized Tribes as well as Tribal members from out-of-state Tribal Nations will continue to be underrepresented in ODHS supports and services and disproportionally represented in its Child Welfare systems, where they face higher rates of family separation than the non-Tribal population. This proposal adequately resources ODHS Tribal Consultation Policy efforts, supports all ODHS programs and brings ODHS into compliance with State and Federal requirements. Without the resources requested in this package, ODHS Self-Sufficiency Programs (SSP) will continue to lack the necessary staffing to carry out consistent engagement with Oregon Tribes at the local level. Tribal Leaders requested SSP hire or designate Tribal Liaisons who they can connect with regularly to ensure coordination happens in a way that supports Tribal families in accessing needed benefits and services. This proposal creates infrastructure for Tribal Engagement by funding eight Tribal Liaison positions and a manager.

PACKAGE NO.	PACKAGE TITLE				
135	**TANF Redesign**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
305,860	0	458,791	764,651	0	0

PACKAGE DESCRIPTION

Every child is filled with tremendous promise – and we have a shared obligation to foster that promise. That means supporting families in ways that maximize their capacity for strong, caring relationships, and reducing the financial stressors that can contribute to child neglect, involvement with child welfare systems, and other forms of childhood adversity. This policy option package, developed with the TANF Redesign Partnership and the Poverty Relief Task Force, is an important step in that direction, helping families access more of the resources and financial flexibility they need to achieve well-being and economic stability. By increasing the monthly Temporary Assistance to Needy Families (TANF) cash grant to 50 percent of the Federal Poverty Limit, ending TANF time limits, and expanding

program eligibility, the package represents a data-informed strategy for preventing child neglect and improving long-term outcomes for children. At a time when Oregon families are facing rapidly rising costs of living and ongoing housing challenges, this upstream solution is needed more than ever.

PACKAGE NO.	PACKAGE TITLE				
143	**ONE Ongoing Maintenance**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
13,935,445	840,000	20,286,095	35,061,540	16	12.50

PACKAGE DESCRIPTION

Oregon implemented the ONE system to help process eligibility applications for food, housing, cash, childcare, and medical benefits for nearly 1.5 million Oregonians, the largest caseload in Oregon's history. With ONE we have created an opportunity for Oregonians to apply online, over the phone, through the mail or in person at any of our offices. Oregon has continued to invest in the ONE system since the initial release. But, like any system, there needs to be continued maintenance and then investment to meet the ever-changing needs of Oregonians and programs. The ONE system needs to continue to evolve our operating system to support a more integrated effort. ONE is a new system that individuals and community are still learning about. Engagement with community is critical to our success as we move from a siloed to an equality approach and then shift to an equity framework and person-centered, outcome-based system. Dedicated staffing is critical to connect with community and partners. Improved and sustainable ONE system operational support helps ensure constituents will see accurate and timely eligibility determinations, which will result in better access to basic food, health, cash, and childcare benefits in some of the most critical individual and family situations. This proposal would provide one-time funding for paying off the final deliverables from the contract related to the Integrated Eligibility Project, closing out the largest IT project's obligations from the history of Oregon. Funding would also support ongoing maintenance and operations services, staffing and service dollars for needed system modifications to more quickly meet consumers' needs, support training, system changes and building

better equitable practices based on feedback we have had from partners across Oregon. This POP also pays for the additional licenses and support for the Centralized Abuse Management system that is supported by OEP.

PACKAGE NO.	PACKAGE TITLE				
201	**Medicaid Waiver Placeholder**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
1,266,800	0	1,900,200	3,167,000	0	0

PACKAGE DESCRIPTION

"We all want a state in which everyone has access to good health and well-being. This policy option package will allow the state to meaningfully improve health outcomes in communities who face historic and contemporary injustices, in alignment with Oregon Health Authority's goal of eliminating health inequities by 2030. ODHS is responsible for determining eligibility for state medical services, for the operation and maintenance of the ONE eligibility system, and for the delivery of long-term services and supports related to Medicaid.

This policy package would fund ODHS for related costs if OHA-HPA-05 is approved, which will enable the Oregon Health Authority (OHA) to execute and implement the policy and program changes outlined in 1115 Medicaid demonstration waiver and approved by the Centers for Medicare and Medicaid Services (CMS). These demonstrations occur within a specific time horizon and can be extended if necessary. This package would allow ODHS to fulfill the implementation obligation necessary to review eligibility as required by the waiver. OHA is currently negotiating the next five-year 1115 waiver with the Centers for Medicare and Medicaid Services (CMS) and expects that negotiations will likely not conclude until September 30, 2022. Therefore, precise outcomes of the negotiation are uncertain and placeholder language regarding this waiver POP is needed for now."

PACKAGE NO.	PACKAGE TITLE				
202	**Basic Health**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
1,370,126	0	2,055,189	3,425,189	0	0

PACKAGE DESCRIPTION

Oregon recognizes that health care is fundamental to people's and families' well-being. This shared value was a key driver behind the Oregon Health Plan (OHP), which prior to the pandemic covered approximately 1 million people. During the pandemic, federal rule changes allowed hundreds of thousands of additional Oregonians to access health care coverage through OHP, and today the plan covers one in three Oregonians. Without state action, many of these newly covered Oregonians will lose their health coverage when the federal public health emergency (PHE) expires, erasing the important gains in coverage Oregon achieved during the PHE. In 2022, the Oregon Legislature passed House Bill 4035 to fund the federally mandated redeterminations process and preserve short-term coverage for people who earn too much income for Medicaid, but not enough to afford other coverage. The bill also authorized the development of a sustainable, long-term solution in the form of a Basic Health Program (BHP). This policy package would direct necessary funding to Oregon Department of Human Services to finish the work of implementing the BHP and allow us to move forward with an effective redetermination process. Together, these actions will help ensure that eligible Oregonians have uninterrupted access to critical medical benefits for themselves and their families.

PACKAGE NO.	PACKAGE TITLE				
203	**Mainframe Migration/Provider & Client Pmt Sys**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
375,242	0	562,859	938,101	6	4.14

PACKAGE DESCRIPTION

Everyone in Oregon deserves uninterrupted access to needed supports and to the income they earn at work. More than one million Oregonians count on the state's current mainframe platform to receive their benefit and provider payments. The COBOL programming code on the mainframe system dates to the 1970s and is increasingly unsupported. Mainframe-proficient staff are shrinking in number and hard to replace, resulting in a variety of service and payment bottlenecks. If these problems are not resolved, there is increasing risk that the agency will be unable to make timely payments to Oregonians, potentially for an extended period. Oregon Department of Human Services and the Oregon Health Authority are therefore jointly requesting the resources necessary to upgrade our mainframe platform and ensure continuity of payments and benefits for the people we serve. It is critical that we migrate all current mainframe functions to more modern, ideally cloud-based solutions. Doing so will help avoid the risk of service breakdowns caused by old software, bring ODHS and OHA technology into alignment with peer agencies, improve flow across interfacing information systems, and allow Oregon to achieve full benefit from its investments in the ONE eligibility system. This investment proposes a strategy to plan for and implement a new payment system, move all remaining benefits currently determined on the mainframe to the ONE system, and develop a plan to decommission or archive remaining mainframe programs and data.

PACKAGE NO.	PACKAGE TITLE				
301	**ERDC Expansion - DELC companion**				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
925,431	0	1,058,867	1,984,297	4	3.00

PACKAGE DESCRIPTION

All children deserve supportive and nurturing places to learn and play while their parents are at work. Research indicates that quality childcare has a significant and positive impact on children's brain development, setting the stage for success later in life. But disparities persist when it comes to accessing quality childcare, with low-income families and families of color bearing most of the burden. We have a shared obligation to make sure that every child has the supports they need to reach their potential, and that means directly addressing this kind of disparity and promoting equitable access to childcare for all families. Employment Related Day

Care (ERDC) is a federal program, partially funded by the Child Care Development Block Grant (CCDG), that helps mitigate these disparities by providing low-income working families with childcare subsidies. In Oregon, ERDC represents the largest childcare subsidy program and was enhanced through House Bill 3073 (2021) which expanded program eligibility to include families with student parents and children who are documented. The ERDC program has also capped co-pays at no more than 7 percent of a family's income, as well as waived the co-pays of families at 100 percent of the federal poverty level to $0. To continue our progress toward addressing longstanding inequities, the Early Learning Division (ELD) is introducing legislation in the 2023 Legislative Session to ensure that children at risk of involvement or involved in Oregon's foster care and child welfare systems, children from families experiencing domestic violence, and houseless families have access to quality, affordable care. This expanded eligibility will allow more families to access critical childcare supports, promoting both healthy development for children and uninterrupted employment for parents.

Department of Human Services: Shared Services

Primary Long Term Focus Area: Excellence in State Government
Secondary Long Term Focus Area: N/A
Program Contact: Eric Moore, (503) 884-4701

DHS Shared Services	GF	OF	FF	TF	POS	FTE
Shared Services Administration		2,365,890		2,365,890	6	6.00
Budget Center		5,112,636		5,112,636	14	14.00
Office of Forecasting & Research Analysis		4,882,563		4,882,563	15	14.25
Office of Financial Services		37,533,895		37,533,895	159	157.07
Office Facilities Management		8,717,564		8,717,564	38	35.79
Imaging & Records Management Svcs		17,709,175		17,709,175	84	83.09
Office of Contracts & Procurement		19,082,246		19,082,246	70	66.00
Office of Training, Investigations & Safety		25,295,132		25,295,132	88	87.45
Internal Audit and Consulting		3,351,031		3,351,031	11	10.97
Office of Payment Accuracy & Recovery		38,317,325		38,317,325	157	157.00
Publications and Creative Services Office		6,847,046		6,847,046	29	29.00
Background Check Unit		20,210,337		20,210,337	68	66.88
Oregon Enterprise Data and Analytics		3,571,800		3,571,800	12	12.00
Occupation Health, Safety & Employee Well-being		3,019,955		3,019,955	13	10.75
DHS Shared Services Total	**-**	**196,016,595**	**-**	**196,016,595**	**764**	**750.25**

Program Overview

When ODHS and OHA split, the agencies agreed to retain many functions as shared services to prevent cost increases, maintain centers of excellence, and preserve standards that help the agencies work together.

ODHS Shared Services supports ODHS and OHA by providing essential business services through collaborative partnerships and informed decision making so that ODHS and OHA can achieve their missions and navigate their visions.
ODHS Shared Services operates by the following guiding principles:

- Educate, advocate, innovate
    - Educate – Provide customers clarity regarding the scope of business services available and the fundamental business operations of the agencies. Ensuring programs have knowledge about business processes, budget elements and operational components for each service.

    - Advocate – Recommend, negotiate and encourage collaborative engagement on behalf of ODHS/OHA Shared service programs and customers to support clarity of business needs, requests, and questions.
    - Innovate – Use our collective expertise, through an agile approach, to meet customers where they are at and guide them towards solutions that meet their needs (what they want, where they want it, when they want it, how they want it and delivered by who they desire.) Reduce and remove barriers by leaning and integrating systems while maximizing return on investment for those functions within our scope.
- Equity through outcome parity
    - Equity through outcome – Ensure Shared and Central Services customers are provided with access to what they need to be successful in their desired goals. Parity in this context refers to comparable outcomes regardless of intersectional challenges.
- Customer centered
    - Starting with the end user perspective – Truly understanding the customer, so we can anticipate their wants and needs, understand their communication preferences, create meaningful experiences, and build lasting relationships.

ODHS Shared Services Administration provides leadership and direction for our offices. Shared Services Administration works with the Shared and Central Service managers to maintain updated service level agreements that define and guide the service array and delivery for each unit and ensures that all services and business practices are conducted in a culturally responsive and equitable manner.

Program Funding Request

SHARED SERVCES	GF	OF	FF	TF	POS	FTE
LAB 21-23	-	178,008,753	-	178,008,753	730	719.25
ARB 23-25	-	196,016,595	-	196,016,595	764	750.25
Difference LAB - ARB	-	18,007,842	-	18,007,842	34	31.00
% Difference LAB - ARB		10.12%		10.12%	4.66%	4.31%

Program Description

ODHS Shared Services contains the following key offices and programs:

Shared Services Administration
This office provides leadership and direction for the Shared Services offices.

The goals of the Shared Services offices are to:

- Implement standardized business practices that are used throughout ODHS/OHA;
- Increase the efficiency, effectiveness, and coordination of administrative services through the consolidation of functions across ODHS/OHA;
- Provide relevant information and recommendations regarding budget, forecasting and analysis of policy issues;
- Ensure effectiveness and efficiency in program management and measurement of results;
- Develop clear, concise information to support effective decision-making;
- Work effectively across ODHS/OHA to ensure department policies are incorporated and appropriately reflected in both agencies' budgets; and
- Provide reliable caseload and cost-per-case forecasts for all major programs, incorporating impacts of policy changes, changing demographics and any other relevant information available.

Administrative Rule Program
This office supports all ODHS and OHA programs, many of which are joint federal and state programs. It is responsible for working with agency leadership and cross-division teams to develop and implement policies and processes that promote transparency in, and public access to, the rulemaking process, and to increase the standardization of the rulemaking process across each agency. The office provides leadership, training, and support for ODHS|OHA rulemaking coordinators and works with those coordinators to improve the readability of agency rules while ensuring compliance with federal and state requirements. The office assists with and performs, on a limited basis, each step of the rulemaking process for the agencies.

Background Check Unit (BCU)
The Background Check Unit provides a comprehensive background screening process to determine if an individual should be allowed to have access to

vulnerable people, IT systems or client information. BCU also provides centralized support for FBI Criminal Justice Information Services (CJIS) clearance and training for ODHS and OHA staff. BCU is also Oregon's point of contact for processing out-of-state child protective service check requests in support of federal legislation.

Budget Center
This office provides program and administrative budget planning, financial analysis and technical budget support for ODHS and OHA. These services are provided for department and program leadership, policy and field managers, staff and external policymakers:

- Monthly and quarterly budget financial services
- Budget and position tracking and reporting services
- Legislative fiscal coordination
- Budget and position technical assistance and training
- Shared Services budget committee staffing

Office of Contracts and Procurement (OC&P)
This office provides contract and procurement services for ODHS and OHA by making purchases, conducting solicitations, and preparing and processing contracts with other government agencies, businesses, and service providers.

There are approximately 560 ODHS/OHA program personnel who work directly with OC&P to put contracts in place which support both agencies. Additionally, there are approximately 1,000 ODHS/OHA administrative support personnel who require OC&P services related to purchases supporting ODHS/OHA business operations.

Office of Enterprise Data Analytics (OEDA)
The Oregon Legislature created OEDA in 2015. The office produces evidence-based, actionable information though inter-agency research to improve the lives of Oregonians. They collaborate across state agencies such as OHA, Oregon Youth Authority, the Departments of Employment and Housing and others to create useful insights.

Office of Facilities Management (OFM)

The Facilities Center is a shared service office that provides Facilities functions for ODHS/OHA. The office acquires and administers leases and contracts for approximately 165 ODHS/OHA facilities statewide; coordinates construction, remodeling and modifications of facilities to meet service delivery needs; plans and manages modular furniture installations; monitors energy use; manages mail and parcel delivery; plans, develops, installs, and repairs ODHS/OHA telecommunications systems; audits the ODHS/OHA telephone bills; and conducts detailed research and analysis of phone systems to determine the most appropriate systems for both agencies' operations.

Facilities Management works with community colleges, cities and county governments to deliver its services. It also helps ODHS/OHA managers, staff and community partners develop and organize offices to meet the service delivery needs. Services include:

- Acquisition and administration of ODHS/OHA leases and contracts for an estimated 165 leased facilities statewide;
- Coordination of construction and remodeling of leased facilities, facilities project management; and
- Plans modifications of workspace to accommodate changes in program service delivery needs.

Telecommunications administers the ODHS/OHA telecommunications. Services include:

- Planning, development and installation of telecommunications systems in 165 buildings statewide;
- Upgrading and repairing current systems;
- Telephone billing audits; and
- Detailed research and analyses of phone systems to determine the most appropriate systems for the department's operations.

Office of Financial Services (OFS)

This office provides accounting services, administers employee benefits and payroll, prepares financial reports, and collects funds owed to ODHS and OHA. This office provides accurate, accountable and responsive financial management and business services to ODHS and OHA clients, providers, vendors, stakeholders and employees in support of both agencies' missions and in compliance with state

laws and federal policies, rules and regulations. OFS is organized by functional area with the goal of maximizing operational efficiency. OFS works closely with the DAS State Controller's Division, other state agencies and the federal government.

The **Accounts Receivable Unit** produces invoices, collects funds due back to ODHS/OHA, and provides ODHS/OHA Accounts Receivable collection data annually to the Legislative Fiscal Office (LFO). This unit also receives, and processes garnishments levied on the department.

The **Receipting Unit** deposits all negotiable instruments received by ODHS/OHA; accurately records the revenue and reduction of expense transactions into SFMA for these receipts, as well as from credit card and ACH activity in ODHS/OHA Treasury accounts.

The **Disbursements and Travel Unit** processes invoices for goods and services including rent, utilities, supplies, interagency services, SPOTS VISA and travel claims for ODHS/OHA employees and other authorized non-state individuals.

The **Contract Payments Unit** processes contract payments for services with providers and local governments, ensures payments are within contract limitations, and processes contract settlements as needed.

The **Payroll Unit** processes agency payroll data and ensures that each employee of ODHS/OHA receives proper compensation in pay and benefits for work done.

The **Strategic Systems Unit** takes financial data from the various ODHS/OHA proprietary payment and receipting systems, converts the data and interfaces the data into SFMA. Interfaced transactions include payments, payment cancellations, accounts receivable and recoupments. This unit is also responsible for the SFMA structures and cash flow management,

The **Management Reporting and Cost Allocation Unit** develops, maintains and implements the department-wide cost allocation plan to allocate indirect administrative expenditures to federal, state and other sources; and provides data management support to internal customers as well as division support in the monitoring of budget to actual reporting.

The **Statewide Financial Reporting and Trust Accounting Unit** prepares annual financial report information for inclusion in the statewide Combined Annual Financial Report; manages trust accounts.

The **Reconciliation Unit** completes all reconciliation reports, compares results in SFMA, the State Treasury and ODHS/OHA proprietary systems.

The **Federal and Grant Reporting Unit** maintains, analyzes reviews and reports on various grant types such as entitlement, block and categorical grants; and submits, receipts, and distributes federal draw requests for federal expenditure disbursements.

The **Portland Accounting Unit** provides accounting services for Public Health Division (PHD) programs including accounts payable, monitoring sub-contractor expenditures, cash receipting, accounts receivable, audit coordination, and grant financial review and reporting.

The **Internal Control and Policy Unit** monitors system security and control structure. Forgery Services Section handles and researches overpayments, forged, counterfeit and altered checks.

Office of Forecasting, Research and Analysis (OFRA)

This office provides client caseload forecasting services for ODHS and OHA. The Office of Forecasting, Research and Analysis assists program managers in determining projected need for services and to develop the budget to address these needs; anticipating changes in federal and other funding streams that may affect the ability to provide services; assuring compliance with federal funding regulations and requirements; managing appropriation allotments and cash flow throughout the biennium; providing analysis and estimates to respond to inquiries from internal and external parties; and providing information and assistance in managing the ODHS/OHA budgets during the biennium.

Client caseload forecasting encompasses the production of semi-annual caseload forecasts for various ODHS programs (divisions); the monitoring of actual client counts compared to the forecast; and the tracking and researching of local, state and national trends affecting client caseloads.

Office of Health, Safety and Employee Well-being

ODHS|OHA employees are critical in maintaining continued service to our consumers. Keeping our workforce safe and healthy and supporting their overall well-being encourages less turnover, enhances work product and can reduce the impact and cost of injuries and illness, thereby helping to control healthcare costs and disruption to family and community life. OHSE provides direction and leadership through a suite of services designed to reduce risk to our employees,

volunteers, clients and stakeholders and ultimately provide a workplace that is free from recognized hazards and supports employee well-being.

Areas of focus include Occupational health and safety compliance (Including Case Management of WC and Liability claims), Wellness, Workplace Incident Response and Threat Management. Focusing our approach and emphasizing Total Worker Health has competitive advantages as it relates to recruitment, retention, employee satisfaction, community engagement and reputation and a sustainable workforce culture. This evidence based, proven approach has been documented in long term studies and is the basis of the National Institute for Occupational Safety and Health (NIOSH) and the Centers for Disease Control (CDC) Total Worker Health approach and is part of PEBBs 2020 Wellness Initiative and aligns with the Governors Executive Order on Wellness and the ODHS/OHA Strategic Wellness Plan.

Office of Imaging and Records Management Services (IRMS)
This office provides document and records management services for ODHS and OHA through imaging, electronic workflow, data entry, archiving and retention services, including:

- Data capture services for billing claims related to medical and dental services, hospitals, nursing homes, in-home services, home-delivered meals and childcare;
- Imaging services related to Oregon Health Plan applications, SNAP applications, Senior Prescription Drug applications, ODHS case management files, Human Resources documents, checks, hearing documents, intentional program violations, childcare, medical claims, sterilization consent forms, Financial Services documents, and client case records; and
- Electronic and physical records archival, retrieval and coordination of destruction services.

This office electronically images more than 300,000 documents each month. IRMS provides images of checks to Financial Services to allow for timely receipt and deposit of funds and provides images to the Background Check Unit to assist in expediting retrieval of records to answer provider questions.

IRMS also receives an average of 29,000 paper claims and checks each month for data capture. Most are for medical and dental services, hospitals, nursing homes, in-home services, home-delivered meals, and childcare. IRMS provides data and images, which allow SNAP programs, Oregon Health Plan and Oregon Health Authority staff to answer provider and client questions regarding eligibility and payment. The Electronic Document Management System (EDMS) electronically images documents and stores the images on a Storage Area Network (SAN), providing a single repository resulting in immediate accessibility to all authorized ODHS/OHA staff throughout the state of Oregon.

Internal Audits and Consulting (IAC)
This unit provides independent and objective information about ODHS and OHA operations, programs and activities to help management make informed decisions and improve services. The unit assists management through reviews of ODHS/OHA programs and activities, ensuring effective and efficient use of resources to achieve the department's goals and outcomes. The unit performs independent audits and reviews, which encompass:

- Reliability and integrity of financial and operational information,
- Effectiveness and efficiency of operations,
- Safeguarding of assets,
- Evaluation of management controls (which may be related to investigations of alleged misconduct and illegal activities), and
- Compliance with laws and regulations, contracts, and grant awards.

These services are important because they help decrease the amount of fraud, waste and abuse; ensure the reliability and integrity of financial and operational information; ensure effectiveness and efficiency of operations; ensure adequacy of internal controls to prevent or minimize alleged misconduct and illegal activities; and ensure compliance with laws and regulations, contracts and grant awards.

Office of Payment Accuracy and Recovery (OPAR)
This office provides recovery services for ODHS and OHA by identifying and recovering moneys paid in error to clients or providers; investigating allegations of fraudulent activities; investigating and recovering state funds expended for services when a third party should have covered the service and the recovery of claims made by a client; and recovering funds from the estates of Medicaid recipients for the cost of cash and medical benefits provided.

OPAR strives to improve program integrity, payment accuracy and financial recovery on behalf of many ODHS/OHA programs (SNAP, Medicaid, Temporary Assistance to Needy Families (TANF), Child Care, and others). Specific services provided include:

- Audits and investigations
- Establishment of overpayment debts and collection of those debts
- Facilitation of third-party recoveries
- Identification of third-party resources
- Assistance to ODHS field staff with data integrity issues
- Recovery of Medicaid, Clawback and General Assistance funds from estates of deceased clients

Office of Training Investigations and Safety (OTIS)
This office conducts investigations and provides protective services in response to reported abuse and neglect of seniors and people with physical disabilities; adults with developmental disabilities or mental illness; and children receiving residential treatment services. The types of abuse we investigate may include physical, sexual, verbal and financial abuse; neglect, involuntary seclusion, and wrongful restraint.

Publication and Creative Services (PCS)
This section manages the writing, design, development, printing and distribution of ODHS and OHA publications for internal and external audiences, which includes alternate formats and alternate languages. Provides consulting to plan professional quality publications that reflect ODHS and OHA style guidelines; edit and proof materials created by staff experts and partners in their individual fields; provide graphic design, layout, original and digital illustration, forms creation, graphic artwork and Web and electronic materials.

Safeguards & Privacy Services Office
The ODHS Safeguards and Privacy Services Office (SPSO) supports ODHS|OHA programs to develop and improve business systems, provide key services, communicate, and collaborate with partners and communities, and ensure the public trust in sharing and systems while providing awareness and solutions to achieve compliance with federal and Oregon privacy and security laws, rules and policies. The SPSO collaborates with and serves Federal, state, Tribal, and local

government partners, private for-profit and non-profit organizations, local communities, contractors, providers, and client/consumers.

SPSO helps customers develop more efficient systems, data-sharing and research collaborations, and services assisted by data-sharing. SPSO assists customers to identify innovative approaches to sharing that maintain privacy and security compliance while building service capacity, braiding local community and agency resources, and freeing resources for other program growth by more efficient sharing of data sets and assets for broader eligibility determination and person-centered service delivery across programs and agencies.

Part of the SPSO work involves identifying and advocating for removal of policy, procedural and operational barriers created by institutional bias that place undue burdens or curtail beneficial data-sharing with or on the behalf of traditionally marginalized communities ODHS|OHA serve

Lastly the SPSO promotes coordination of data protection and recovery, and data-sharing between ODHS|OHA partners during emergencies and disasters. Guidance includes working with Emergency Management to meet requirements for CJIS and other high security information use in emergency planning and response.

Trauma Aware Program

The Trauma Aware Program honors equity as foundational to our role as a human services agency and is committed to integrating equity into all we do. The Trauma Aware Program subscribes to the elements of the ODHS Equity North Star and honors Tribal Nations which moves our organization towards becoming an agency free of racism, discrimination, and bias. The Trauma Aware Program works in partnership with the ODHS Office of Equity and Multicultural Services the RiSE initiative (ODHS culture change initiative), the OHA Office of Equity and Inclusion and the Public Health Office of Equity. Additionally, the Trauma Aware Program identifies the State of Oregon's Diversity, Equity and Inclusion Action Plan as a priority and engaging in the Roadmap: The Path to Implementing the Diversity, Equity, and Inclusion Action Plan.

Trauma informed care practices, equity, and building resiliency are critical to our workforce, our service recipients and all Oregonians. This proposal works in partnerships with trauma informed processes to enhance an organizational culture of safety and wellness. Trauma informed care practices and building resiliency are

critical to our workforce, our service recipients, and all Oregonians. Resiliency and Wellbeing is also a part of the work of the Trauma Aware Program. Data shows that engagement in employee wellness is linked to greater employee retention. It is also documented that even if an employee does not participate in wellness or wellbeing programs or activities, employees have greater loyalty and believe in their employer. As we create the future of human services in Oregon, it is essential to invest in the wellbeing and resiliency of our employees.

Volunteer Services
Housed within Shared Services Administration, the Volunteer Program engages individuals in our communities who want to donate their time to improve the lives of others. The mission of the Volunteer Program is to help achieve the goals and outcomes of ODHS through integrating the work of state and community partners. The program provides on-the-job skills, training, and experience to individuals seeing to further their self-development and careers, making it essential to the Governor's Economic Recovery Plan, specifically Action 5, Creating Opportunities for Oregonians. The program also supports the agency's community engagement efforts as well as Self-Sufficiency Programs' Work Experience program, where clients receiving services volunteer to gain valuable on-the-job experience.

Program Justification

ODHS Shared Services administration (SSA) provides leadership and direction that creates the foundation and facilitate the integration of equity, well-being, service and inclusion throughout our offices. SSA is striving to create a service equity committee in effort to align with OEMS' guidance to support our agency work toward equitable outcomes our staff and for all populations using ODHS services. SSA accomplishes our mission though policymaking, service level agreements, strategic planning, consulting, research, advocacy, and continuous learning

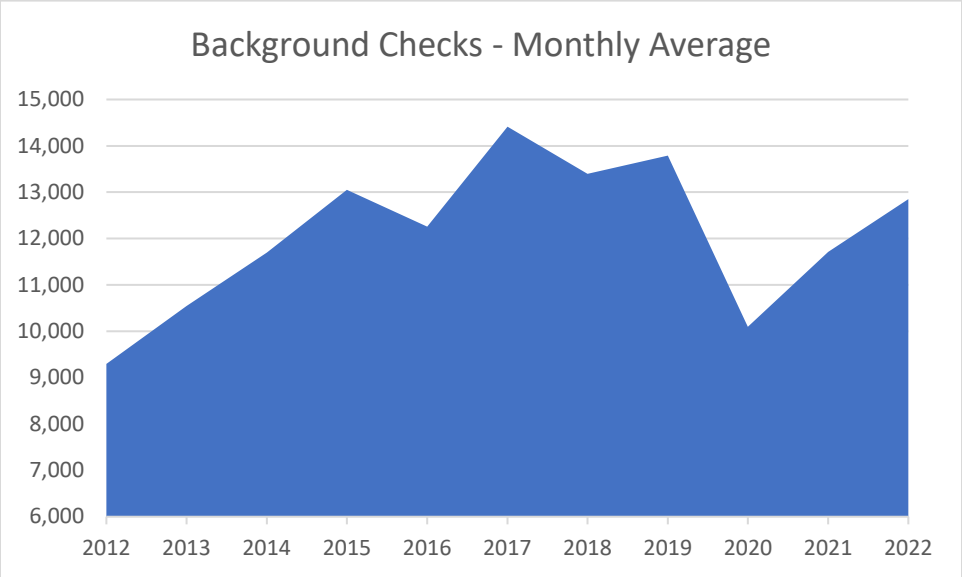
ODHS SSA provides critical program supports necessary to achieve the mission of the agency: Helping Oregonians achieve well-being and independence through opportunities that protect, empower, respect choice and preserve dignity.

Program Performance

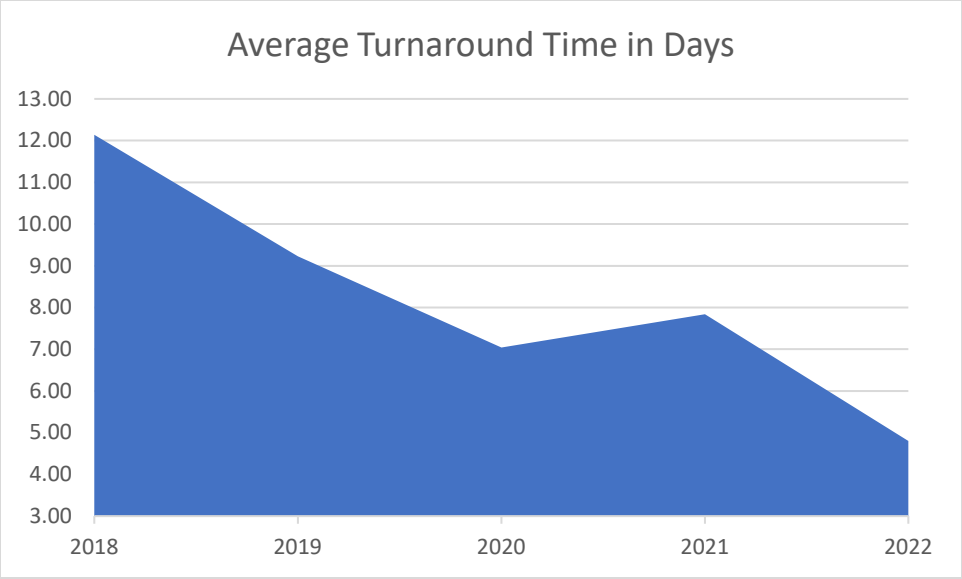
Background Check Unit

The Background Check Unit process background check requests for providers of care across ODHS and OHA.

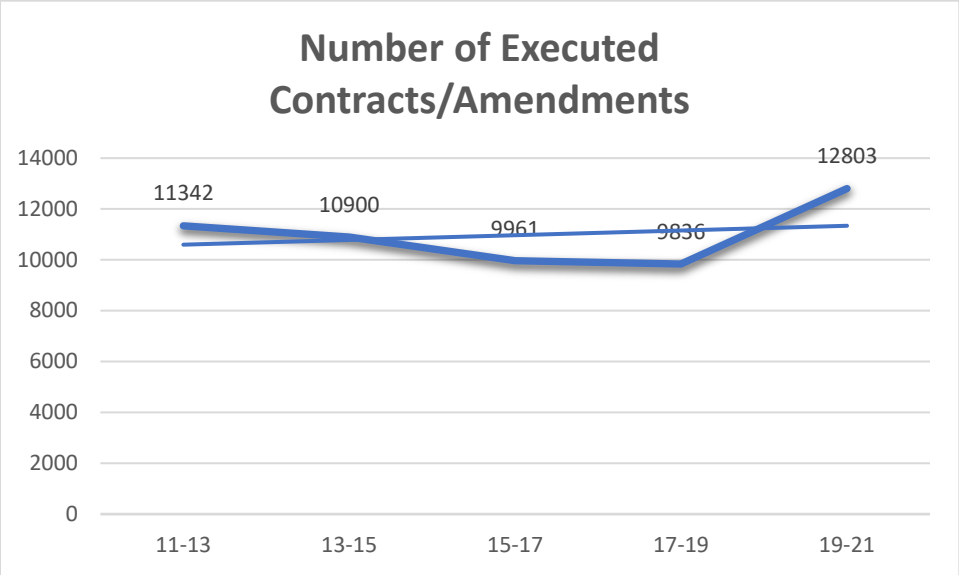
- Background Checks per Year

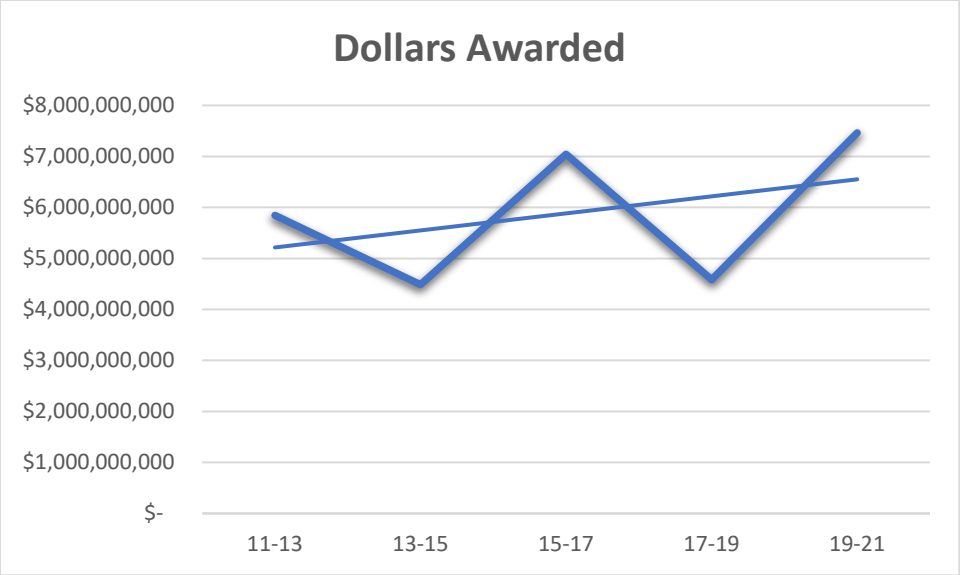


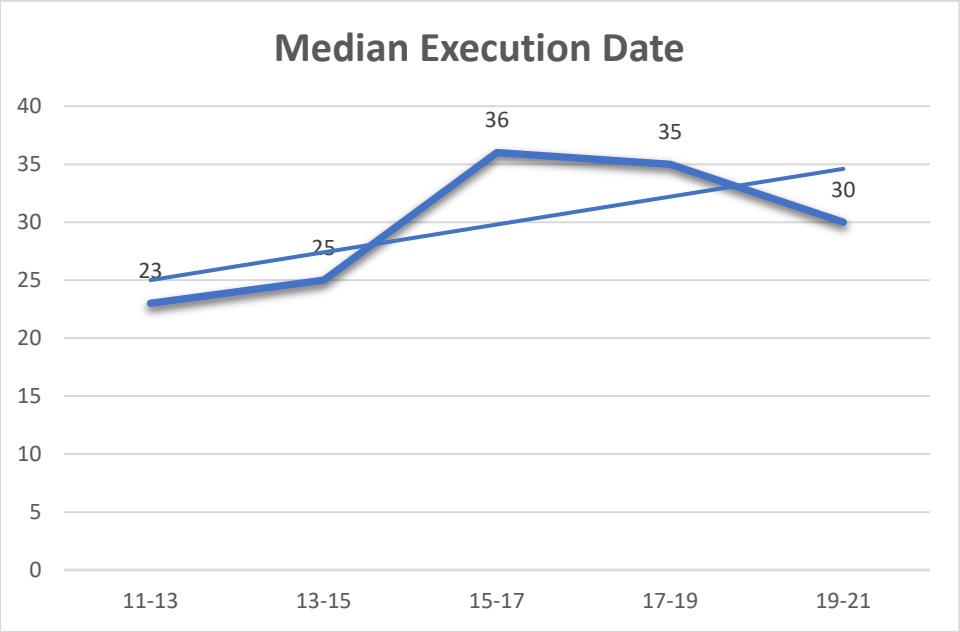
- Quality of Services Provided: Quality is measured based on the percentage of background check determinations overturned by the Office of Administrative Hearings. The goal is 2% or less being overturned:
  - 2022 (to date): 0.87%
  - 2021: 1.9%
  - 2020: 1.1%
- Timeliness of completion of background checks



Office of Contracts and Procurement

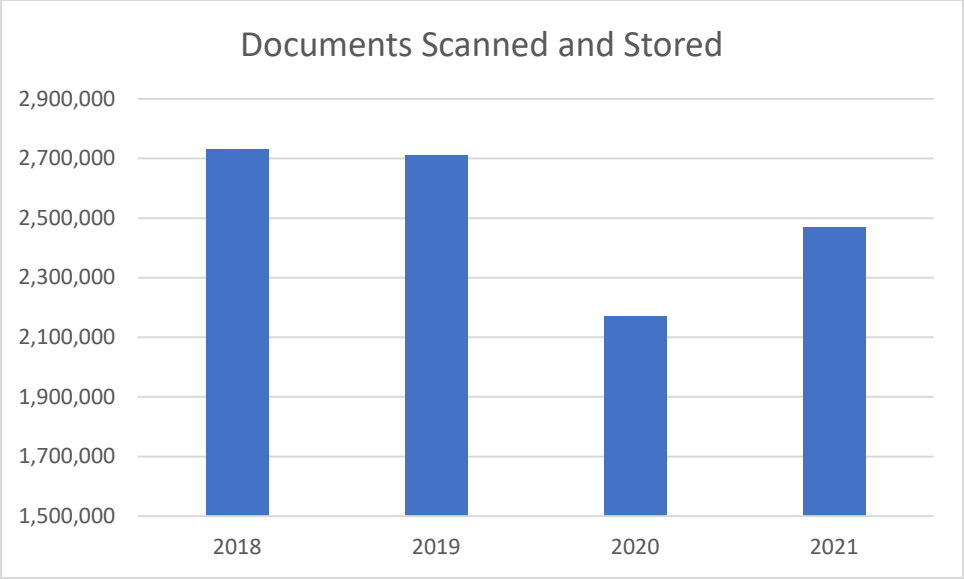




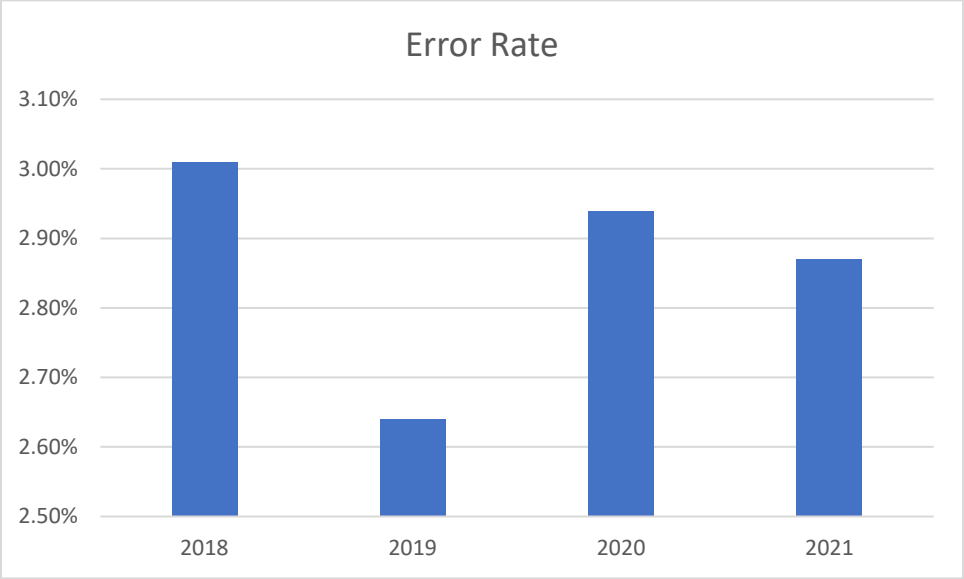


Imaging and Records Management Services
Imaging & Records Management Services provides electronic and physical document and records management in central repositories to support records retention, eligibility services, and provider payments.

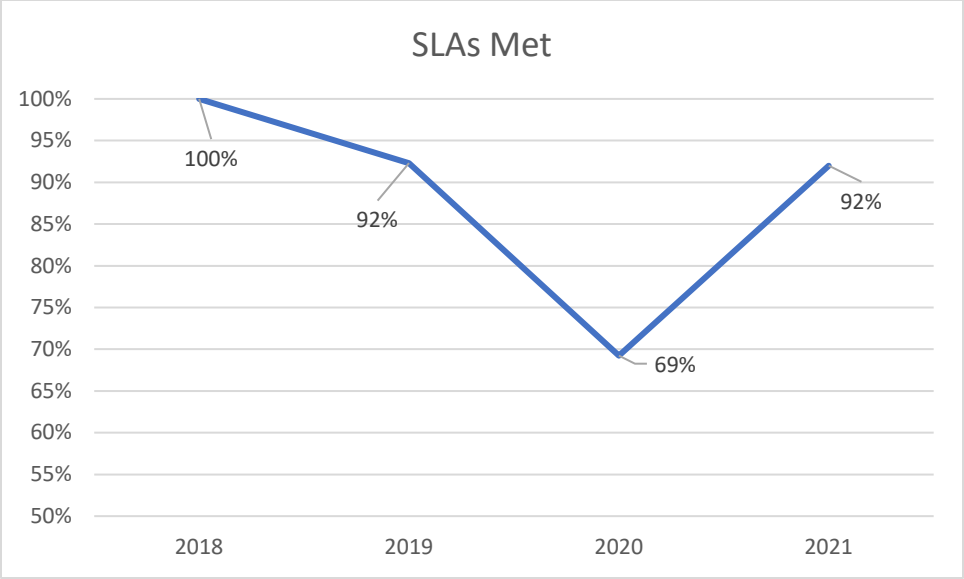
- Documents scanned and physically stored per Year:



- Quality of Services Provided: IRMS determines the quality of its services based on internal quality assurance (QA) activities and customer feedback. The goal is a 2% or less error rate:



- Timeliness of service provided: IRMS hold specific Service Level Agreements with customer for specific bodies of work. This measure is the percentage of SLAs that have been met:



Internal Audits and Consulting

Internal Audits/Consults Completed by FY

FY16-17	FY17-18	FY18-19	FY19-20	FY20-21
7	6	4	5	7

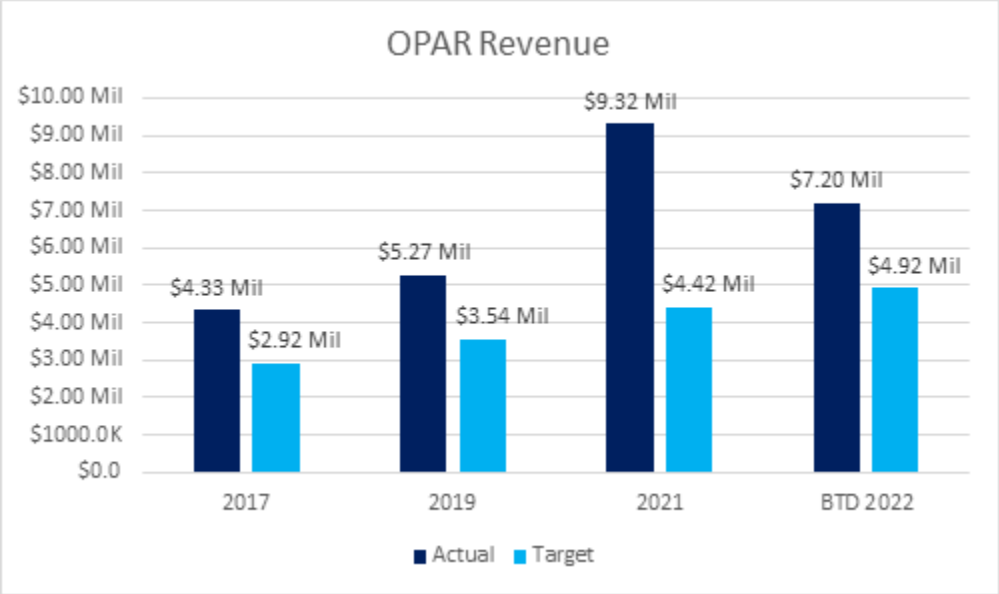
Office of Facilities Management

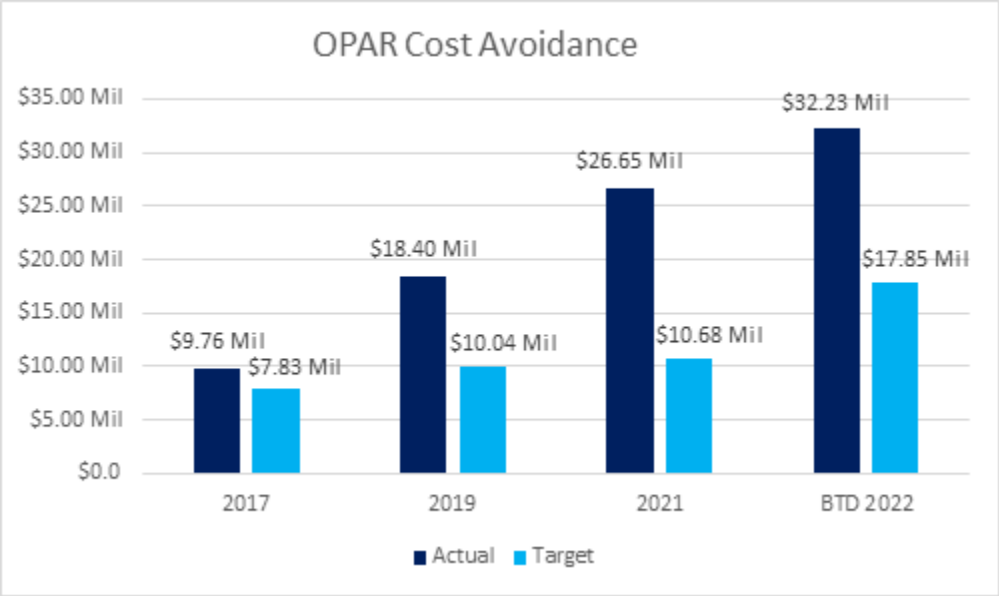
#	Item	Totals	Metric / Description	Cost
1	**# People Served:**	14,500	Approximate total of DHS-OHA Employees Served annually.	NA
2	**Items Produced (see *below*)**	-	-	-
2.a	*# of Offices*	177 office Locations	Leased locations that support the work of DHS-OHA employees.	NA
2.b	*2022 Total Square Feet of Leased Space*	3,455,008	This is the total square footage of DHS-OHA leased space, cost shown is recurring monthly.	$5,385,690
2.c	*Enhancements (Ergonomic modifications, Space Utilization based upon bulk of most common work order requests)*	5,690	Ergonomic adjustments aid in promoting a healthy work environment. Space utilization relates to configuring or reconfiguring offices to better suit employees and guests. Programs typically pay these costs.	NA
2.d	*Janitorial Services*	20 contracted vendors provide janitorial services for DHS-OHA offices	Cleaning services provided in all DHS-OHA offices to ensure an healthy, clean work environment, cost shown is recurring monthly.	$487,651
2.e	*Building Maintenance*	Approximately 708 OFM requests to landlords to complete building maintenance items. Most requests are for plumbing, lighting and HVAC maintenance.	Facilities oversight that ensures timely resolution to issues that are the responsibility of the leased building's landlord/ownership. Costs are paid by landlord.	NA
2.f	*Utilities*		The setup and maintenance to ensure utilities such as electricity, natural gas, water and sewage and waste disposal	$306,370
3	Quality of Services	~ 80% Customer Approval	Based upon passive surveys submitted by staff	-
4	Timeliness of Provided Services	18 Days average completion of typical OFM work	Facilities work and timing to complete are impacted by many factors, often out of our direct control	-
5	# of Work Orders	See Below	Facilities Work Order Requests made by DHS-OHA office management. These requests include a wide-variety of work. Most frequently, they are for ergonomic adjustments or office reconfugurations to add, reduce or restructure office cubicles. Most work orders are paid by the requesting programs	-

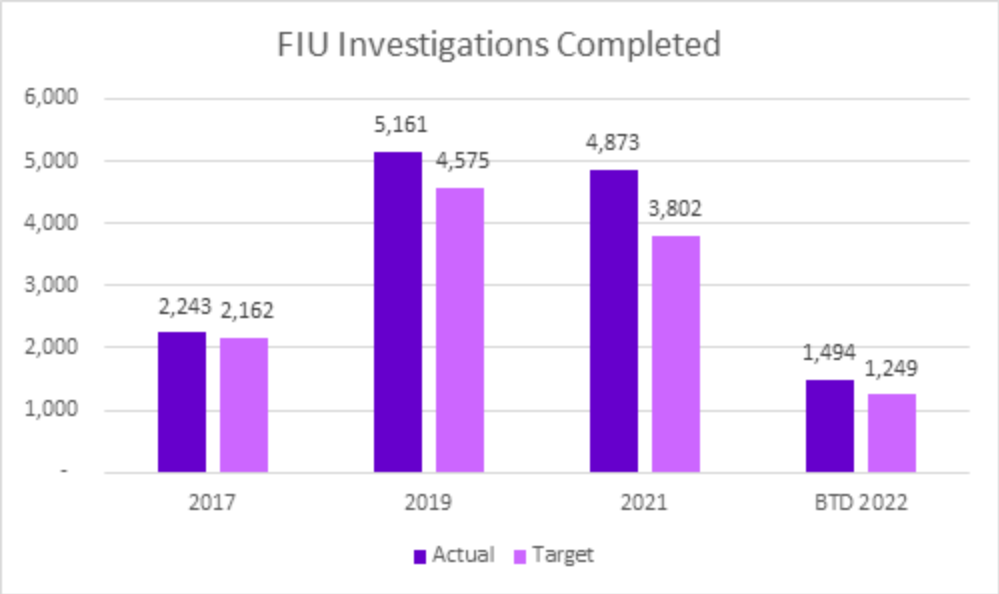
OFM Work Order Data

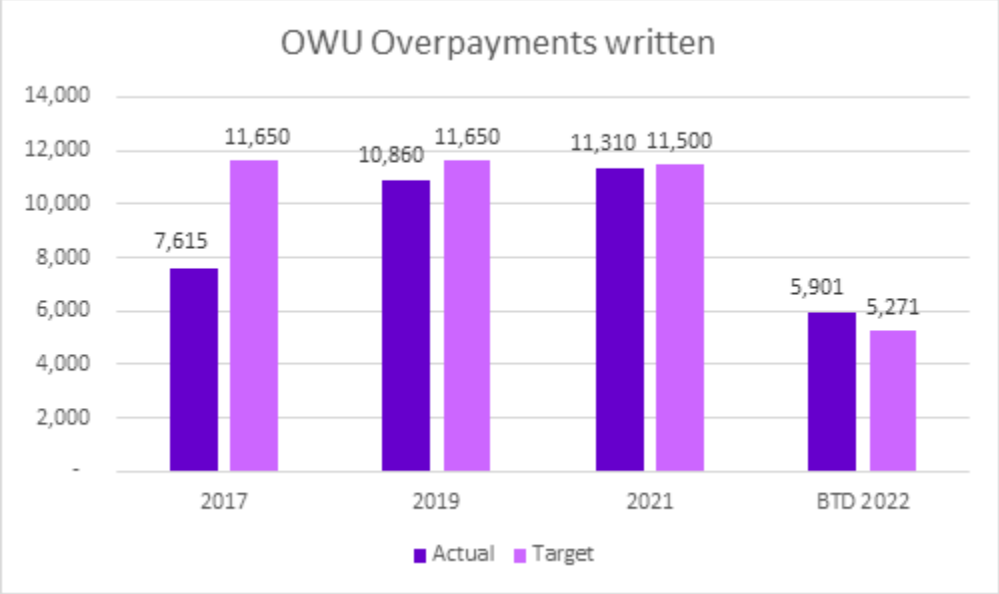
Year	# of Work Orders Received	# Completed	Avg. Completion Rate (In Days)
2012	196	196	17
2013	250	250	16
2014	244	244	22
2015	182	182	16
2016	202	202	18
2017	95	95	16
2018	1255	1255	17
2019	1540	1540	20
2020	850	850	17
2021	553	553	24
2022	323	323	16
Total	**5690**	**5690**	**18 Days**

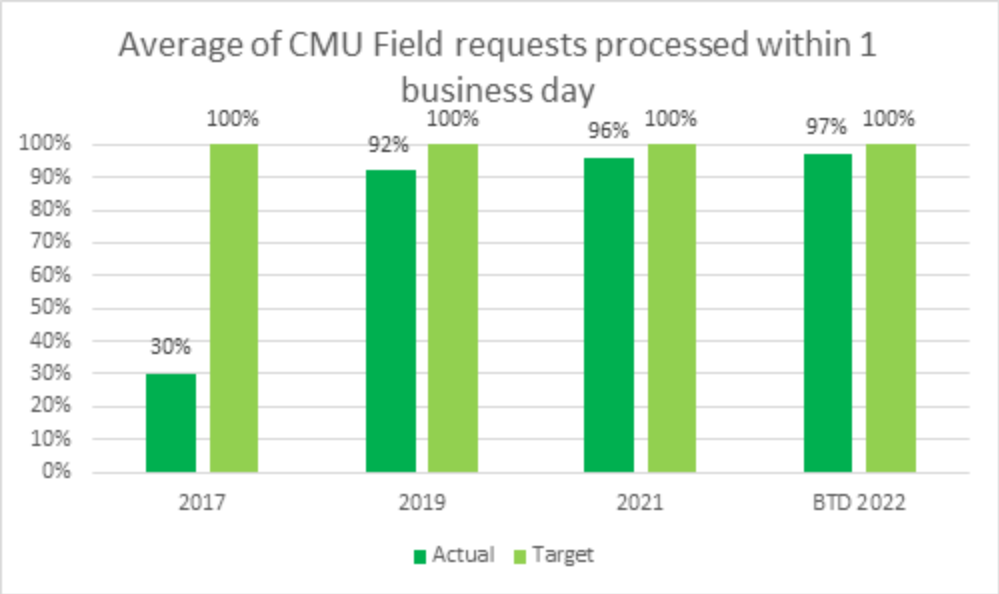
Office of Payment Accuracy and Recovery

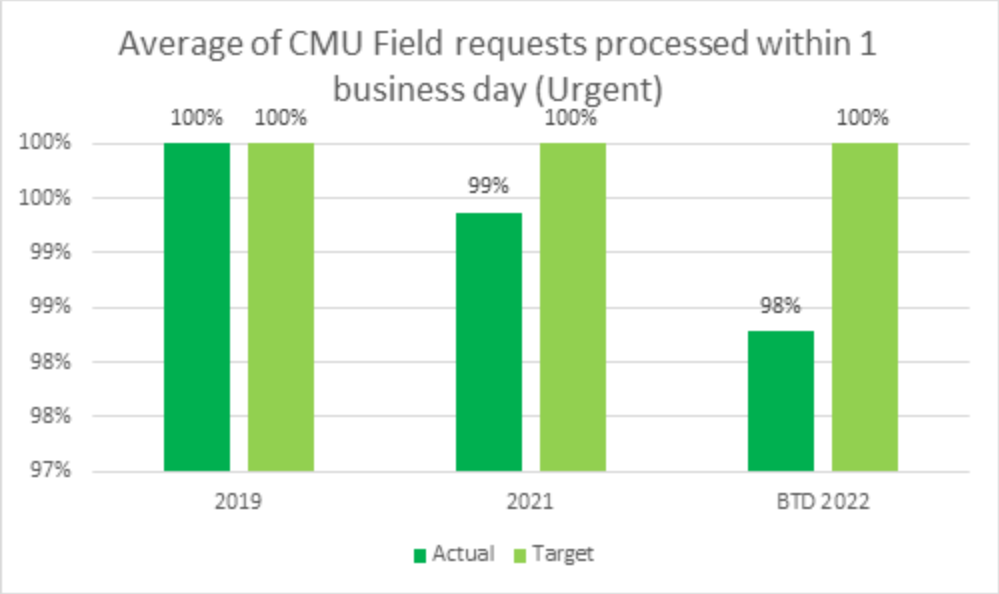


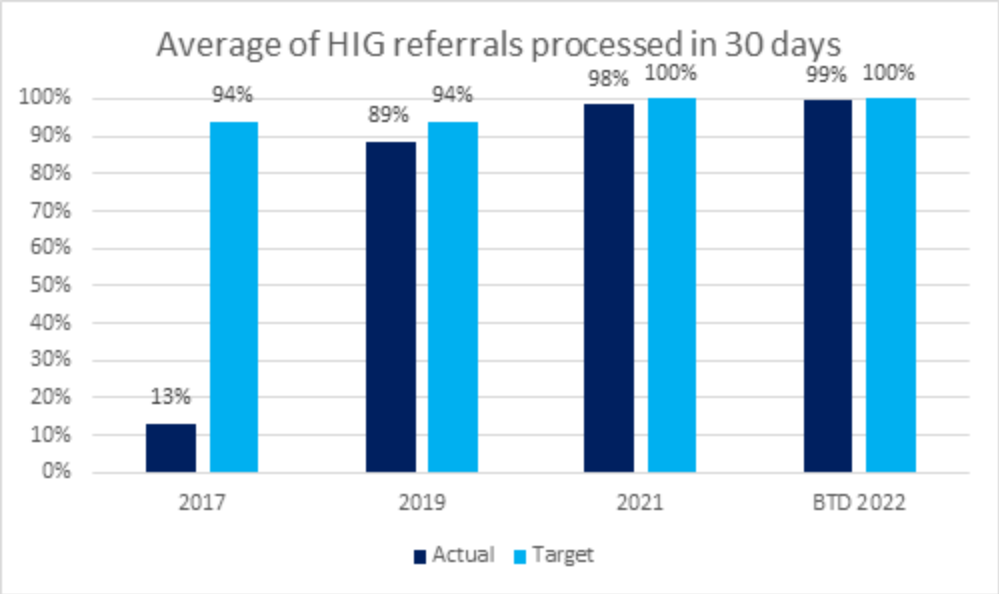



FIU Investigations Completed
6,000
5,000
4,000
3,000
2,000
1,000
-
2,243
2,162
5,161
4,575
4,873
3,802
1,494
1,249
2017
2019
2021
BTD 2022
Actual
Target


OWU Overpayments written
14,000
12,000
10,000
8,000
6,000
4,000
2,000
-
7,615
11,650
10,860
11,650
11,310
11,500
5,901
5,271
2017
2019
2021
BTD 2022
Actual
Target

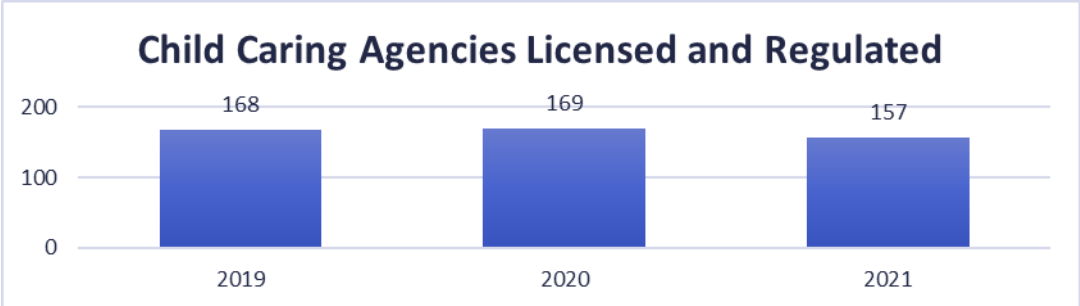

Average of CMU Field requests processed within 1 business day
100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%
30%
100%
92%
100%
96%
100%
97%
100%
2017
2019
2021
BTD 2022
Actual
Target

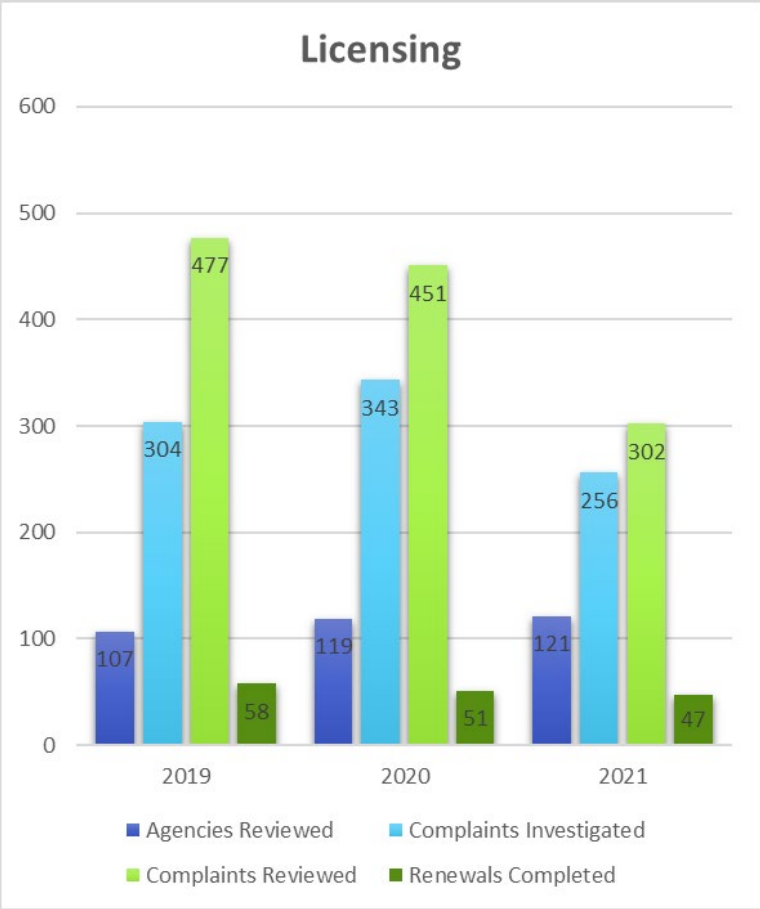

Average of CMU Field requests processed within 1 business day (Urgent)
100%
100%
99%
99%
98%
98%
97%
100%
100%
100%
99%
98%
100%
2019
2021
BTD 2022
Actual
Target

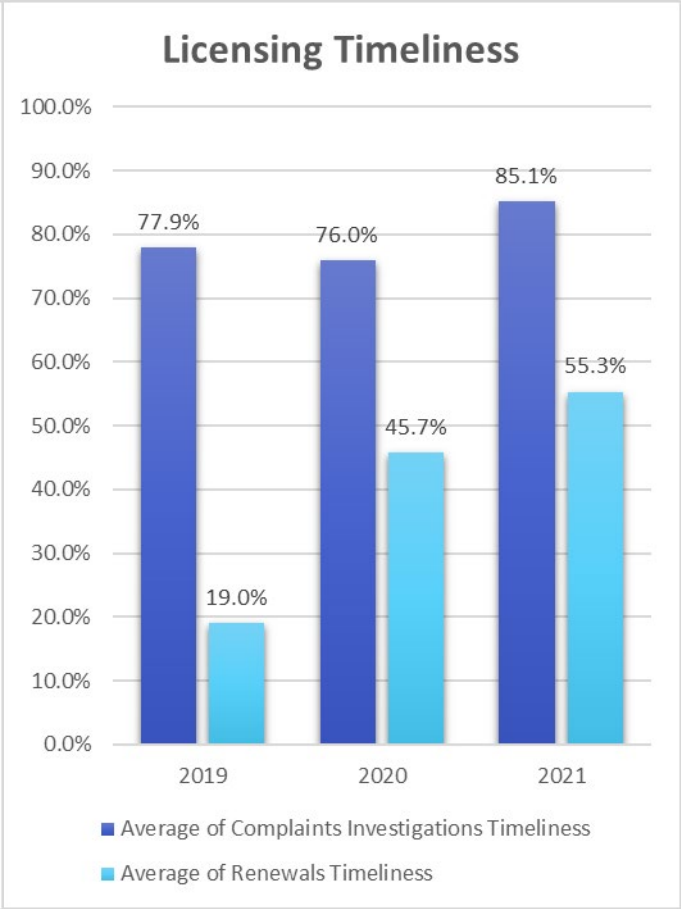


Office of Training, Investigations and Safety

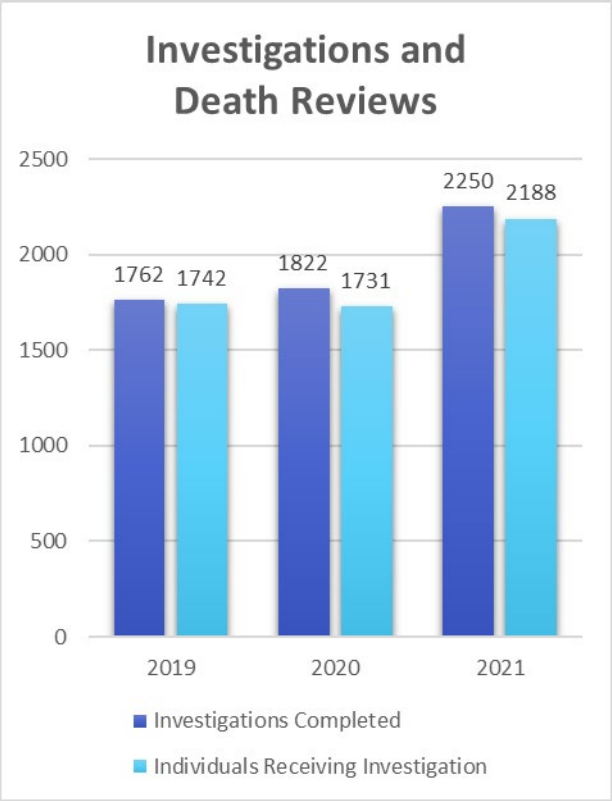
Children's Care Licensing (CCLP)
Unit Purpose: The Children's Care Licensing Program is responsible for ensuring the safety and well-being of children while they are in the care of a Child Caring Agency (CCA). The CCLP's work includes reviewing CCAs for compliance with statutory and administrative rule standards, responding to complaints, providing protective services, and coordinating with other State offices to ensure child safety.

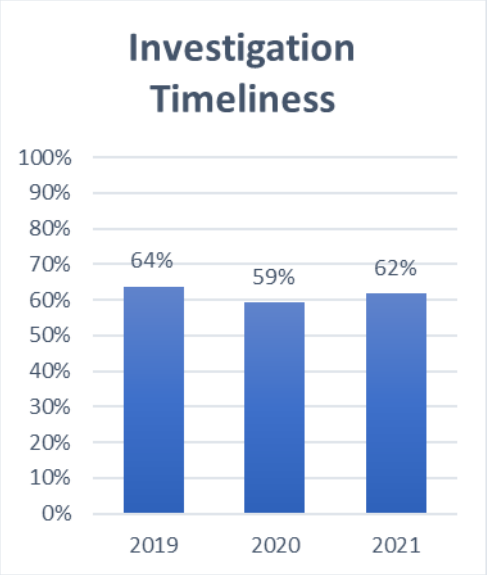



Licensing
600
500
400
300
200
100
0
107
304
477
58
119
343
451
51
121
256
302
47
2019
2020
2021
Agencies Reviewed
Complaints Investigated
Complaints Reviewed
Renewals Completed


Licensing Timeliness
100.0%
90.0%
80.0%
70.0%
60.0%
50.0%
40.0%
30.0%
20.0%
10.0%
0.0%
77.9%
19.0%
76.0%
45.7%
85.1%
55.3%
2019
2020
2021
Average of Complaints Investigations Timeliness
Average of Renewals Timeliness

Investigations (IU)
Unit Purpose: The Investigations Unit is responsible for assuring protective services are offered or provided, and investigations are commenced, in response to the reported abuse and neglect of adults who receive mental health and/or developmental disability services, and children in Child Caring Agencies, day care, and school settings. More information can be found on the OTIS Digital Data Book page: https://www.oregon.gov/dhs/pages/otis.aspx

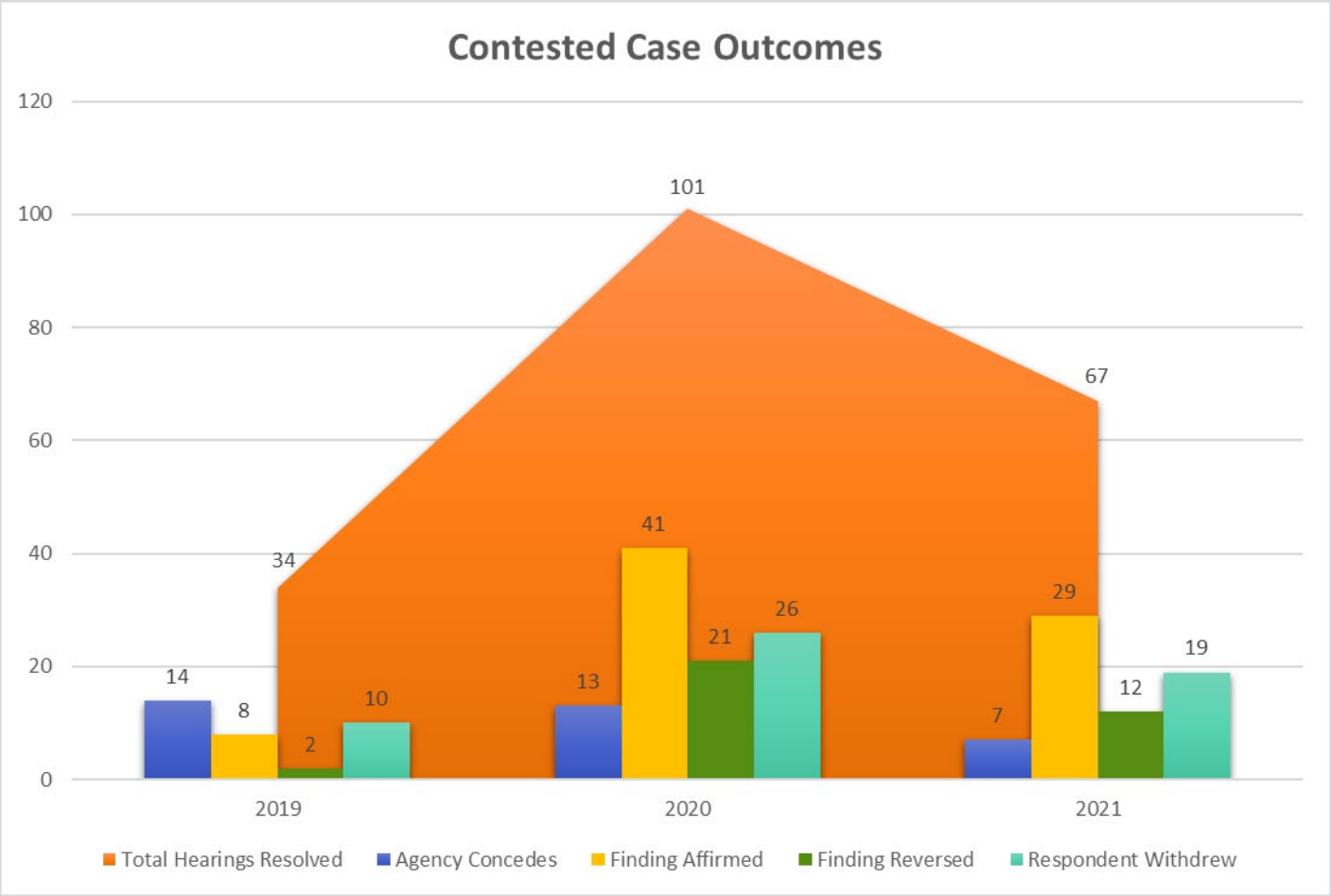




*Death reviews are not included in timeliness metric

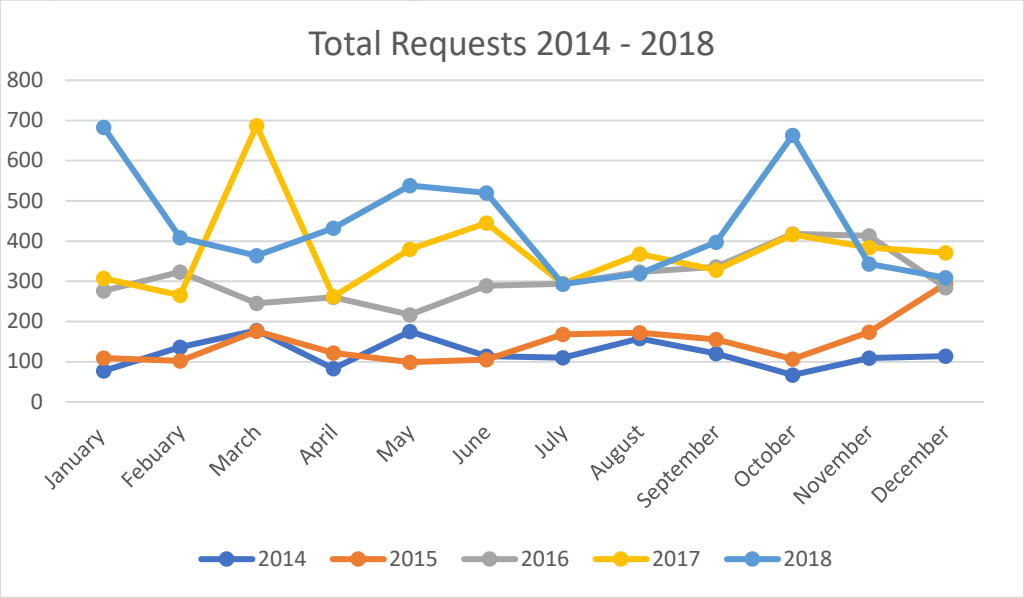
Contested Case - Appeals Team (ATEAM)

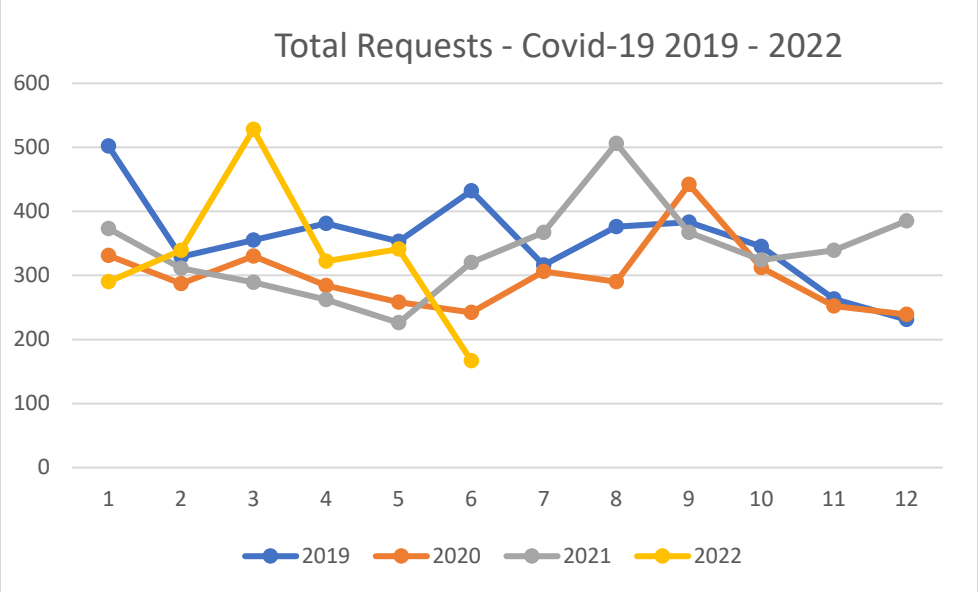
Unit Purpose: The ATEAM is responsible for ensuring due process is followed and the agency is properly represented during an appeal of a final order. The ATEAM's work includes reviewing investigative reports and substantiated allegations of abuse being contested to assure fairness and to prepare the case and witnesses and represent the agency at hearing.

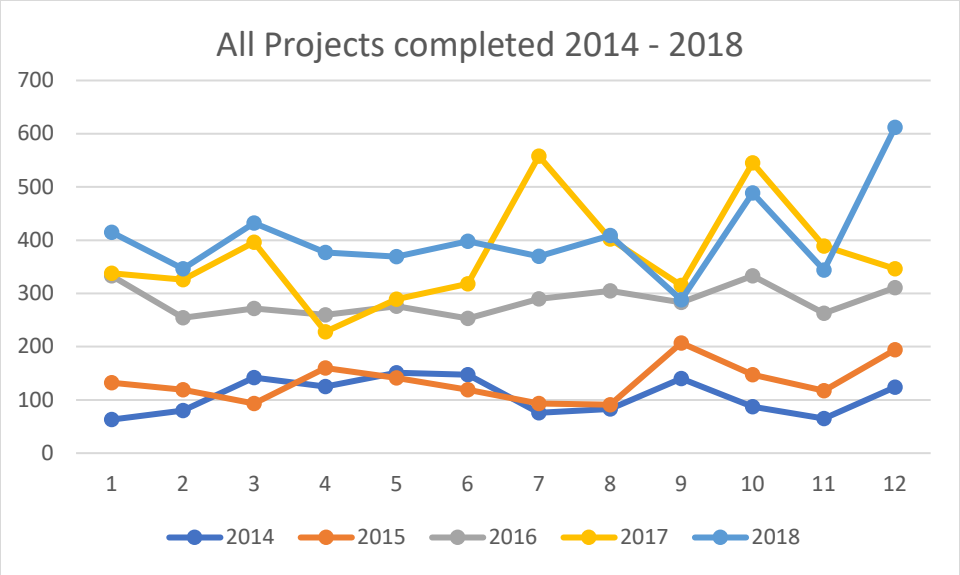


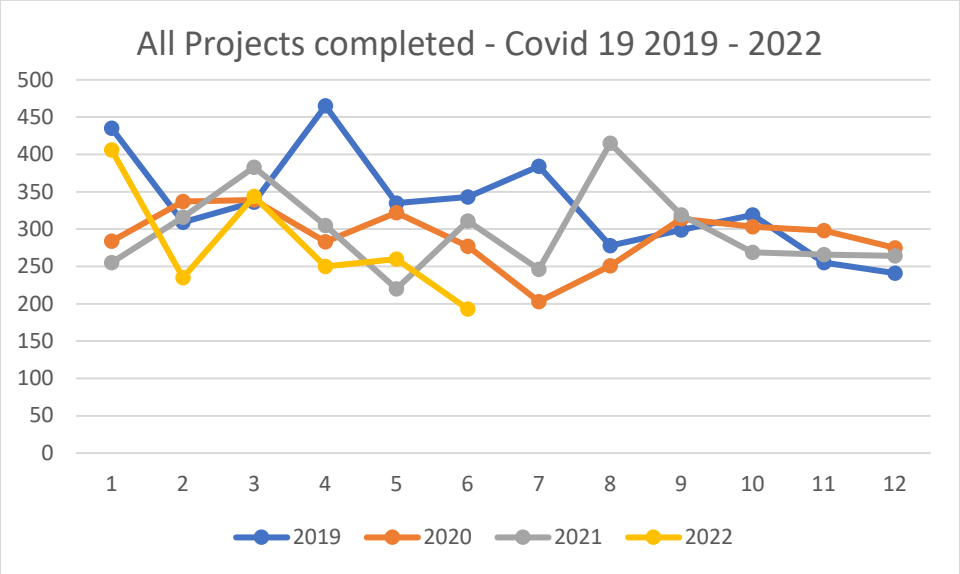
Publications and Creative Services

Projects Received and Completed






All Projects completed 2014 - 2018
700
600
500
400
300
200
100
0
1
2
3
4
5
6
7
8
9
10
11
12
2014
2015
2016
2017
2018


All Projects completed - Covid 19 2019 - 2022
500
450
400
350
300
250
200
150
100
50
0
1
2
3
4
5
6
7
8
9
10
11
12
2019
2020
2021
2022

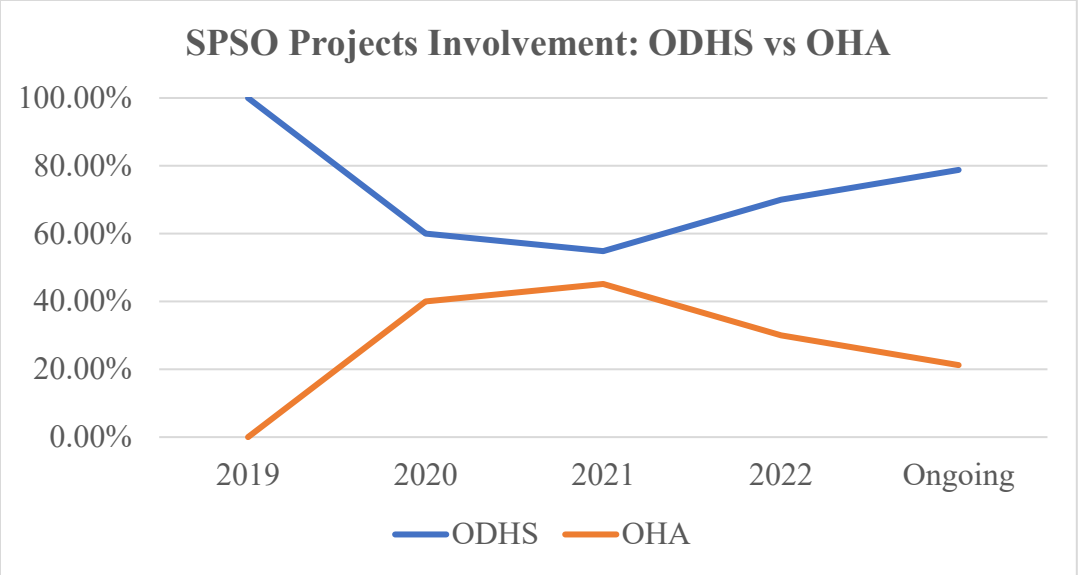
Safeguards & Privacy Services
The following statistics per work type include annual data for 2019-2021, and data to date as of June 23 for 2022.

PROJECT COMPLETIONS
Project work statistics account for both project management and project involvement. Project types include the following:

- Business Operations: Projects where business processes and tools are being changed or developed in order to streamline processes, reduce costs, meet a developing or future need, increase service equity, and/or improve emergency response and business continuity.
- CJIS Outsourcing: Providing project management for acquisition of CJIS outsourcing approval from Oregon State Police (OSP) for ODHS|OHA contractors developing or with access to CJIS systems and networks. Work includes all contractual processes, documentation, clearances and training necessary for outsourcing approval.
- Compliance: Projects required to improve and maintain compliance to Federal and Oregon privacy and security laws, policies and requirements.
- IT: IT projects to improve or expand delivery of services, service equity, accountability and transparency for customers and partners.
- Policy: Projects involving development of policy and procedures to meet present or future needs, and improve best practice.

Table 1: Project Completions by Year and Project Type

	Business Operations	CJIS Outsourcing	Compliance	IT	Policy	Total
2019	0	0	1	0	0	1
2020	1	0	5	2	0	8
2021	6	0	6	6	1	19
2022	1	0	8	0	0	9
Ongoing	1	4	22	3	0	30
Total	9	4	42	11	1	67



CONTRACT AND SECURITY REVIEWS

SPSO performs reviews of contracts to both ensure that required privacy and security language is included, as well as to consult business options related to language and framing requirements, processes, and procedures expected of a contractor. The SPSO also holds language accountability for contracts involving 3rd party background checks versus contracts using language that uses Background Check Unit (BCU) for background checks.

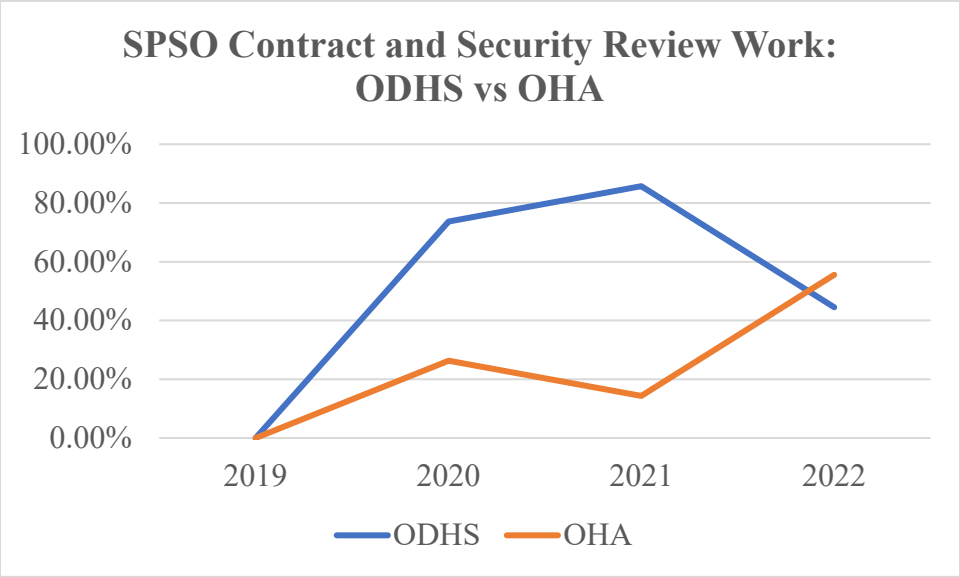
Types of reviews involved include:

- Contract Review: Review of privacy and security language as relates to the intended services. This includes referral to BCU when services require a BCU background check.
- Contract Review + CJIS Security: A contract review with additional assistance in applying the right level of CJIS security requirements and exhibits.
- Security Review: When a program intends to change OC&P language library template for 3rd party checks, SPSO problem-solves with the program involved on how best to achieve desired effects while maintaining the best security posture.
- Solicitation Development: Working with a program to develop solicitation requirements for a CJIS project.
- Contract Template Development: Assisting OC&P to develop new language library templates to meet Federal privacy and security requirements.

Table 2: Contract and CJIS Security Reviews by Year and Review Type

	Contract Review	Contract Review and CJIS Security	Security Review	Solicitation Development	Contract Template Development	Total
2019	0	0	0	0	0	0
2020	84*	0	1	0	2	87*
2021	2	4	0	1	0	7
2022	3	2	3	0	0	8
Total	89*	6	4	1	2	102

*These contract reviews were completed as part of a multi-month retrospective analysis of open contracts needing specific CJIS-related language. These are not indications of typical contract review traffic.



TECHNICAL ASSISTANCE AND CONSULTATION

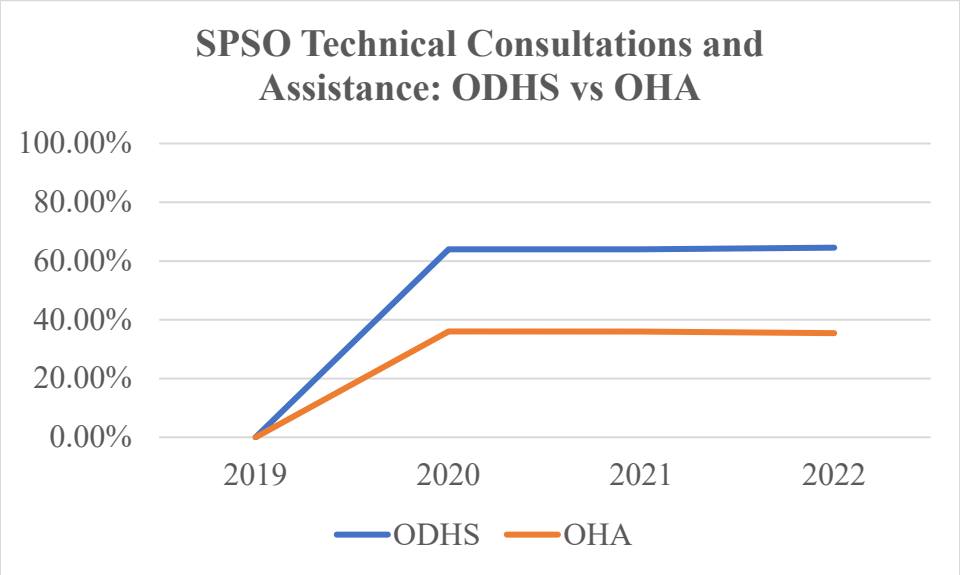
SPSO regularly provides a variety of consultatory services to ODHS|OHA staff, local offices, and programs due to business needs, privacy and security concerns, or more detailed work when business tools or procedures are necessary. Categories include:

- Technical Assistance: Consultation where a business product (guidance document, set of requirements, form, etc.) is required to assist the program need.

- Technical Consultation: Discussion(s) with the individual, local office or program to problem-solve or provide business resources and referrals to meet their business or privacy/security need.
- Education & Awareness: Article, transmittal, or other form of communication for sharing via OWL, Discover, OHA Staff News or presentation that increases awareness about scams, fraud, social engineering or other privacy and security topics.

Table 3: Technical Assistance and Consultation

	Technical Assistance	Technical Consultation	Education & Awareness	Total
2019	1	1		2
2020	5	154	17	176
2021	32	692	24	748
2022 to Date	4	110	5	119
Total	42	957	46	1045



AUDIT FINDING CLOSURES

SPSO assists the Information Security and Privacy Office (ISPO) and ODHS|OHA programs as a contributor and/or coordinator to successfully close or mitigate findings from Federal and Oregon audits. SPSO collaborated in closing 26 CJIS-related findings during 2021, and closed a recent IRS finding in April 2022. While the finding is closed, SPSO is currently coordinating efforts of ODHS and OHA

Human Resources to implement hiring process changes necessary to avoid future IRS findings.

Volunteer Services

Year	Number of Volunteers	Hours	Miles	Hourly Value of Volunteers	Total Value of Volunteer Time
2008	711	186,043	2,177,356	$17.84	$3,319,010
2009	1219	317,855	2,391,999	$18.47	$5,870,784
2010	1252	349,567	2,971,836	$18.85	$6,589,351
2011	1277	323,464	3,373,603	$19.33	$6,252,562
2012	1137	305,490	3,547,026	$21.14	$6,458,068
2013	1024	289,676	3,295,742	$21.35	$6,184,590
2014	828	232,420	3,659,834	$21.99	$5,110,927
2015	725	196,757	3,148,830	$22.75	$4,476,235
2016	643	165,867	3,005,655	$24.15	$4,005,691
2017	590	175,398	3,101,975	$24.89	$4,365,675
2018	511	130,748	2,424,762	$25.40	$3,321,011
2019	357	61,059	676,990	$26.39	$1,611,347
2020	177	23,758	241,502	$28.22	$670,451
2021	98	18,179	203, 032	$29.95	$544,461
2022 to-date	114	5,425	50,751	$29.95	$162,478

Customer-driven shared services
When the agency split, ODHS and OHA agreed to maintain many administrative functions as shared services to prevent cost increases, maintain centers of excellence, and preserve standards that help the agencies work together.

Shared Governance
ODHS and OHA govern their shared services through committees composed of operational leaders of the two agencies. This approach ensures shared services are prioritized and managed to support program needs. The committee and its subgroups have established service level agreements and performance measures for each service, implemented recent budget cuts selectively, moved staff in and out of shared services to rationalize service delivery, and started implementing more integrated systems to support the performance of all our employees.

Best practices in installing performance management require specific skills - especially in project management, Lean tools, data analysis, and professional development of managers. ODHS has reallocated resources and used savings to make some of these investments, but in order to increase these skills much more needs to be done.

Enabling Legislation/Program Authorization
ORS 409.010

Funding Streams
Funding streams are billed through an approved cost allocation plan. The model contains a billing allocation module and a grant allocation module.

The billing allocation module allocates Shared Service costs to the two agencies. The billing module allocates costs to customers within each agency. It does not allocate costs directly to Federal grants.

The grant allocation module allocates costs within ODHS to State and Federal grants. These costs include those directly incurred by ODHS, Shared Service costs allocated to ODHS by the billing allocation module, and external costs allocated to ODHS by other State agencies.

Both modules allocate aggregated costs on a monthly basis and use similar allocation methods.

Funding Justification, Significant Changes and Comparison to 23-25 CSL

SHARED SERVICES	GF	OF	FF	TF
CSL 23-25	$ -	$ 189,110,886	$ -	$ 189,110,886
ARB 23-25	$ -	$ 196,016,595	$ -	$ 196,016,595
Diff.	$ -	$ 6,905,709	$ -	$ 6,905,709
% Diff.	0%	4%	0%	4%

Shared Services	GF	OF	FF	TF	POS	FTE
ARB Build - POPS	**-**	**6,905,709**	**-**	**6,905,709**	**39**	**29.50**
POP 108 - Strengthening Chief Financial Office	-	538,569		**538,569**	3	2.25
POP 111 - Local Leadership	-	3,963,960	-	**3,963,960**	24	18.00
POP 134 - Total Worker Health (OHSE)	-	1,655,715	-	**1,655,715**	8	6.25
POP 203 - Mainframe Migration/Provider & Client Pmt Sys	-	747,465	-	**747,465**	4	3.00

108 – Strengthening Chief Financial Office

Organizations need strong financial, budget, positions management and forecasting offices to be able to run effectively. During the past several years, the size and complexity of ODHS' work has increased, to ODHS Operations and budget has grown significantly. The changes have only been exacerbated by the pandemic and the influx of one-time funding. For example, ODHS is unique in that it has a very complicated financial structure; with more than 100 unique budget areas and more than 800 unique Labor Cost Codes, and thousands of other invoice codes.

Further, impacts of new programs and/or positions through the POP process, additional new or changed programs proposed in POPS (if funded), and/or changes to federal policy and/or changes to reporting requirement for the numerous federal fund sources will have a additional impact on complexity and level of work expected from the ODHS CFO Office. ODHS is unique, mainly due to the scale of positions it manages. This includes managing over 11,000 budgeted positions and over $17 billion in Total Funds. Further, due to the complexity of funding, tracking, forecasting and position management requests have continually become more complex and details. New changes/programs will also not just have an OIS impact. CFO offices will also be impacted by these changes.

However, the ODHS Office of the Chief Financial Officer (CFO) resources have remained practically unchanged for years. This Policy Option Package proposes an investment in new positions to oversee ODHS position management, financial revenue planning, clear several non-budgeted positions, enhance support for the Integrated Client Services database to keep up with changes in source systems and

advance the work related to REALD and better harness the power of Geographic Information System (GIS) data (housed in ODHS ORRAI). This request would also help ODHS forecasts to be more easily understood by Legislators, Legislative Fiscal Office, our partners and the public. This request addresses three ODHS priorities: Strengthening Foundations, Responding to Emergencies, Creating the Future of Human Services. Improve upon Race/Ethnicity identity information.

111 – Local Leadership
Because ODHS serves Oregon communities, those communities should have meaningful input into the designs and delivery of our services. But ODHS currently lacks the community engagement capacity we need to make this a reality, which has significant equity and efficiency implications for our work.
This policy package will provide the staffing and other resources necessary to enable greater direct engagement with the communities served by ODHS, which will provide multiple opportunities to further the ODHS Equity North Star vision; lead with intersectionality to address the roots of systemic oppression; and make services, supports and well-being accessible to all. In addition, this policy package will deliver policies and programs that are equitable and improve community conditions.

134 - Total Worker Health (OHSE)
Every Oregon Department of Human Services and Oregon Health Authority employee has a right to work in a place free from recognized hazards as outlined in OSHA's General Duty Clause (OHSA 29 USC 651).

The overall mission of this department is to provide life safety and life sustaining services for employees and ensure they work in a healthy and safe work environment. Keeping our workforce safe, healthy and ensuring well-being encourages less turnover, enhances work product and can reduce the impact and cost of injuries and illness.

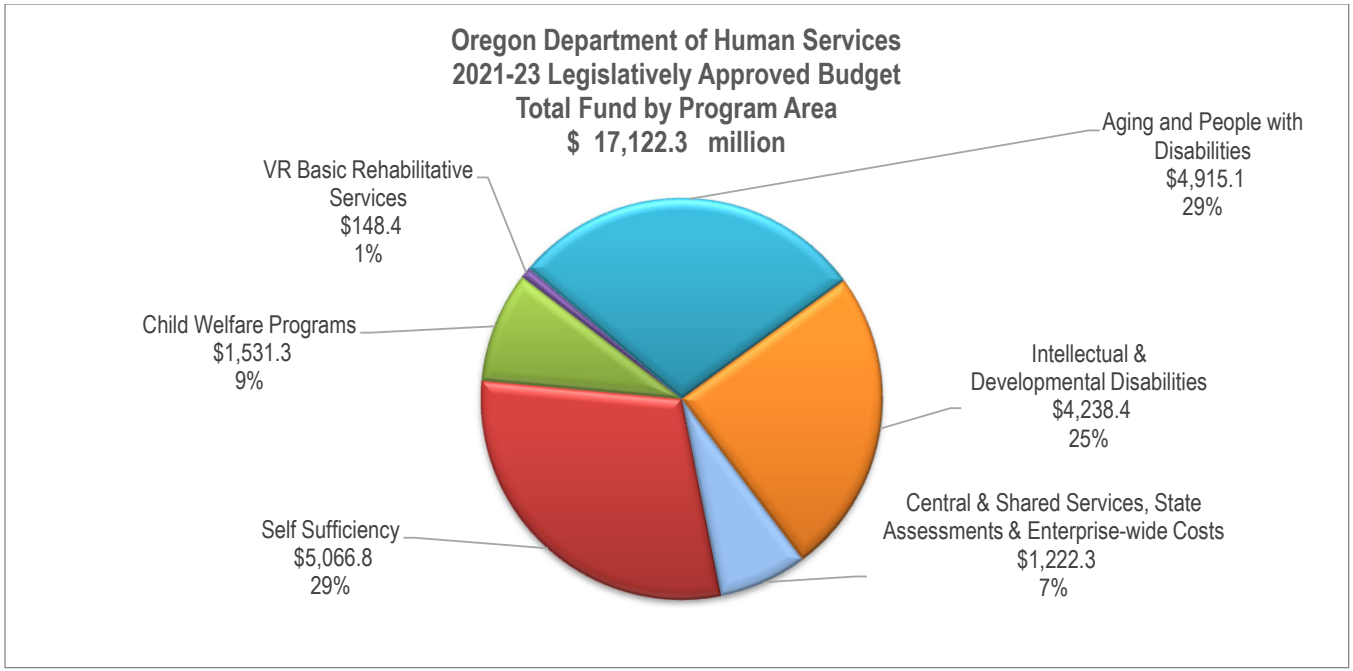
Staffing of safety, health and wellness professionals with knowledge on total worker health concepts is vital in providing safety and well-being to employees and all Oregonians by assisting with design/development and implementation of occupation health, safety and employee well-being activities.

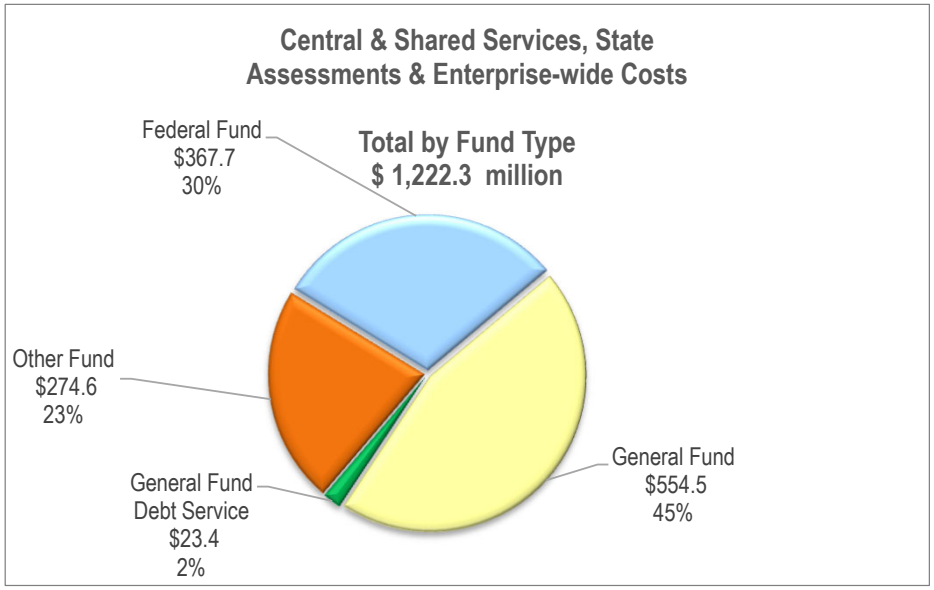
While safety is a core value of both agencies, employees continually cite health and safety as challenges in meeting their job duties. Internal data metrics show that the agencies have experienced an increase in threats, workers compensation

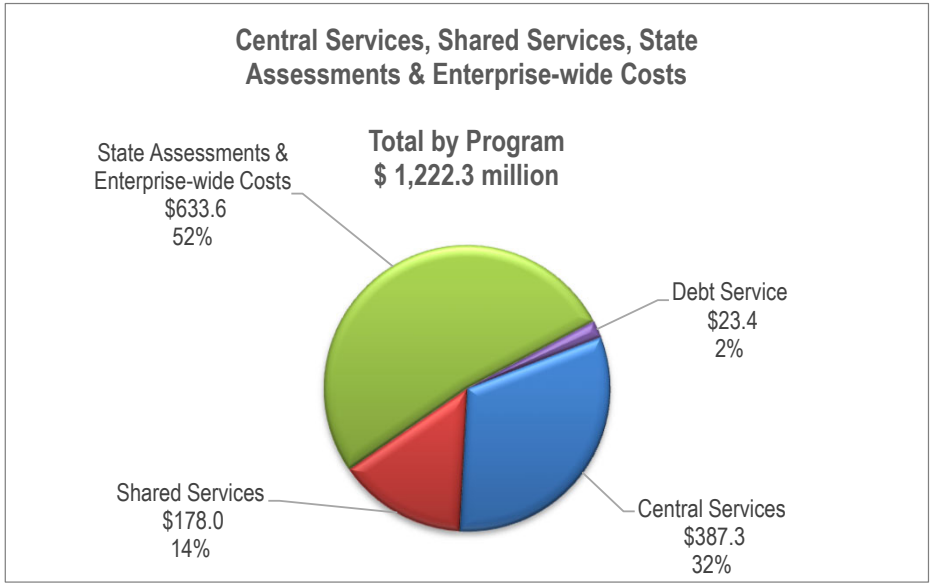
claims, and job burnout. This Policy Option Package would apply a Total Worker Heath model which will further our compliance with OSHA regulations and further our compliance with the Governor's Executive Order on Wellness.

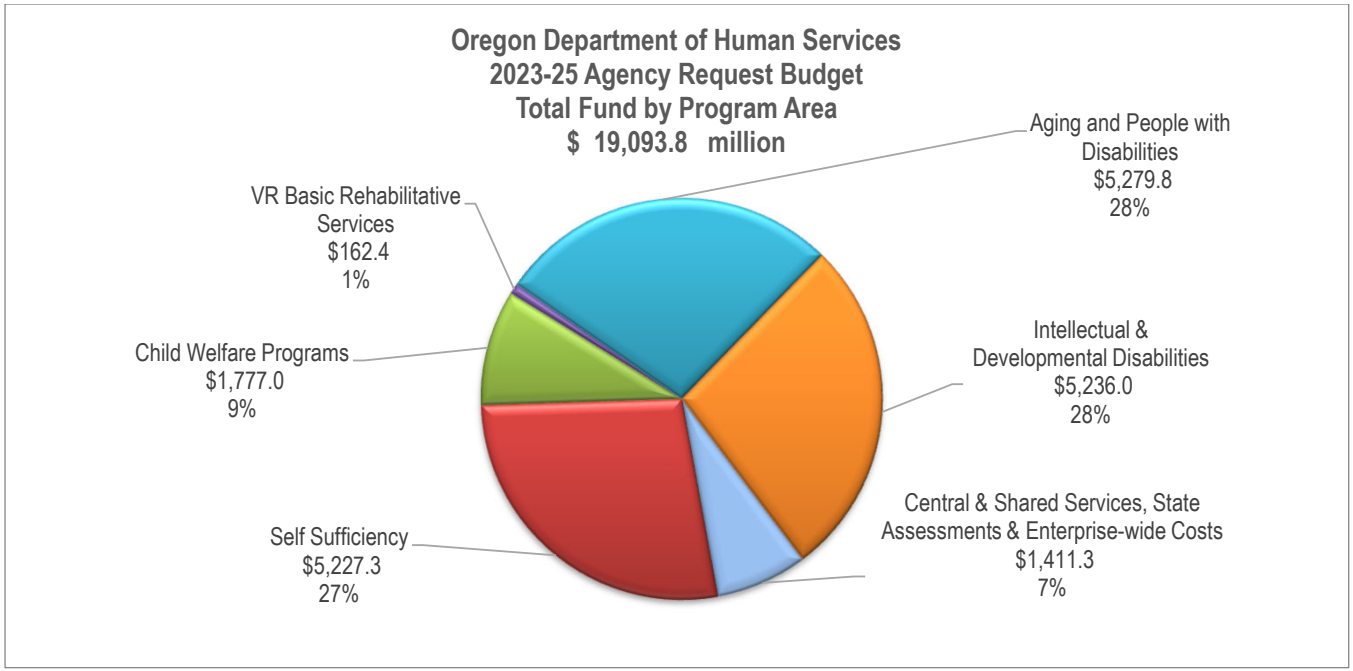
203 - Mainframe Migration/Provider & Client Pmt Sys

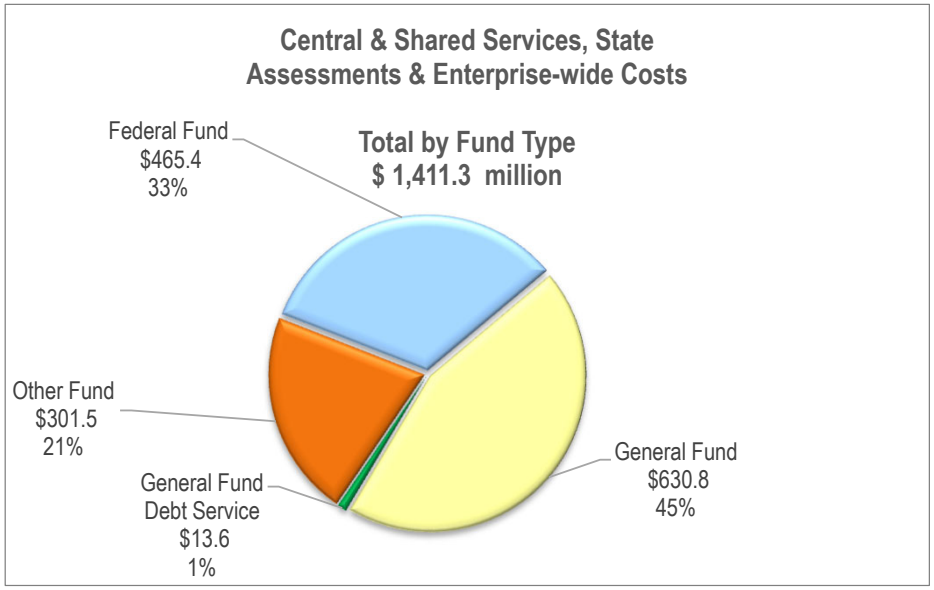
Everyone in Oregon deserves uninterrupted access to needed supports and to the income they earn at work. More than one million Oregonians count on the state's current mainframe platform to receive their benefit and provider payments. The COBOL programming code on the mainframe system dates to the 1970s and is increasingly unsupported. Mainframe-proficient staff are shrinking in number and hard to replace, resulting in a variety of service and payment bottlenecks. If these problems are not resolved, there is increasing risk that the agency will be unable to make timely payments to Oregonians, potentially for an extended period. Oregon Department of Human Services and the Oregon Health Authority are therefore jointly requesting the resources necessary to upgrade our mainframe platform and ensure continuity of payments and benefits for the people we serve. It is critical that we migrate all current mainframe functions to more modern, ideally cloud-based solutions. Doing so will help avoid the risk of service breakdowns caused by old software, bring ODHS and OHA technology into alignment with peer agencies, improve flow across interfacing information systems, and allow Oregon to achieve full benefit from its investments in the ONE eligibility system. This investment proposes a strategy to plan for and implement a new payment system, move all remaining benefits currently determined on the mainframe to the ONE system, and develop a plan to decommission or archive remaining mainframe programs and data.

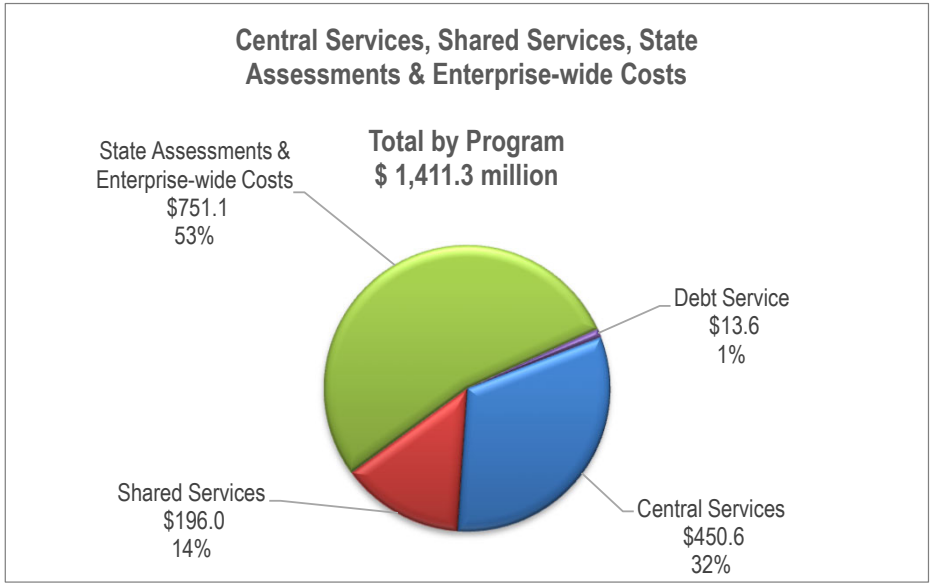

Oregon Department of Human Services
2021-23 Legislatively Approved Budget
Total Fund by Program Area
$ 17,122.3 million
Aging and People with Disabilities
$4,915.1
29%
Intellectual & Developmental Disabilities
$4,238.4
25%
Central & Shared Services, State Assessments & Enterprise-wide Costs
$1,222.3
7%
Self Sufficiency
$5,066.8
29%
Child Welfare Programs
$1,531.3
9%
VR Basic Rehabilitative Services
$148.4
1%


Central & Shared Services, State Assessments & Enterprise-wide Costs
Total by Fund Type
$ 1,222.3 million
Federal Fund
$367.7
30%
General Fund
$554.5
45%
General Fund Debt Service
$23.4
2%
Other Fund
$274.6
23%


Central Services, Shared Services, State Assessments & Enterprise-wide Costs
Total by Program
$ 1,222.3 million
State Assessments & Enterprise-wide Costs
$633.6
52%
Debt Service
$23.4
2%
Central Services
$387.3
32%
Shared Services
$178.0
14%


Oregon Department of Human Services
2023-25 Agency Request Budget
Total Fund by Program Area
$ 19,093.8 million
Aging and People with Disabilities
$5,279.8
28%
Intellectual & Developmental Disabilities
$5,236.0
28%
Central & Shared Services, State Assessments & Enterprise-wide Costs
$1,411.3
7%
Self Sufficiency
$5,227.3
27%
Child Welfare Programs
$1,777.0
9%
VR Basic Rehabilitative Services
$162.4
1%


Central & Shared Services, State Assessments & Enterprise-wide Costs
Total by Fund Type
$ 1,411.3 million
Federal Fund
$465.4
33%
General Fund
$630.8
45%
General Fund Debt Service
$13.6
1%
Other Fund
$301.5
21%


Central Services, Shared Services, State Assessments & Enterprise-wide Costs
Total by Program
$ 1,411.3 million
State Assessments & Enterprise-wide Costs
$751.1
53%
Debt Service
$13.6
1%
Central Services
$450.6
32%
Shared Services
$196.0
14%

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-010-00-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Business Lic and Fees	306,053	-	-	-	-	-
Charges for Services	177,448	-	-	-	-	-
Admin and Service Charges	162,650,188	-	-	-	-	-
Fines and Forfeitures	2,654	-	-	-	-	-
General Fund Obligation Bonds	31,790,000	-	-	-	-	-
Interest Income	799,481	-	-	-	-	-
Donations	5,000	-	-	-	-	-
Other Revenues	3,667,326	221,478,915	276,682,223	301,479,059	-	-
Tsfr From Administrative Svcs	4,467,911	-	-	-	-	-
Tsfr From Oregon Health Authority	30,998	-	-	-	-	-
Total Other Funds	**$203,897,059**	**$221,478,915**	**$276,682,223**	**$301,479,059**	**-**	**-**
Federal Funds						
Federal Funds	361,871,021	341,870,107	367,722,633	465,417,559	-	-
Tsfr To Or Youth Authority	(28,843,022)	-	-	-	-	-
Total Federal Funds	**$333,027,999**	**$341,870,107**	**$367,722,633**	**$465,417,559**	**-**	**-**

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-010-40-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Business Lic and Fees	306,053	-	-	-	-	-
Charges for Services	177,448	-	-	-	-	-
Admin and Service Charges	1,272,865	-	-	-	-	-
General Fund Obligation Bonds	31,790,000	-	-	-	-	-
Interest Income	799,396	-	-	-	-	-
Donations	5,000	-	-	-	-	-
Other Revenues	2,267,995	2,706,143	45,895,088	50,573,784	-	-
Tsfr From Administrative Svcs	2,329,594	-	-	-	-	-
Total Other Funds	**$38,948,351**	**$2,706,143**	**$45,895,088**	**$50,573,784**	**-**	**-**
Federal Funds						
Federal Funds	154,292,544	111,573,525	126,444,545	167,963,533	-	-
Total Federal Funds	**$154,292,544**	**$111,573,525**	**$126,444,545**	**$167,963,533**	**-**	**-**

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-010-45-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Admin and Service Charges	150,253,534	-	-	-	-	-
Fines and Forfeitures	2,654	-	-	-	-	-
Interest Income	85	-	-	-	-	-
Other Revenues	47,869	167,299,992	178,008,753	196,016,595	-	-
Tsfr From Administrative Svcs	2,044,531	-	-	-	-	-
Tsfr From Oregon Health Authority	10,000	-	-	-	-	-
Total Other Funds	**$152,358,673**	**$167,299,992**	**$178,008,753**	**$196,016,595**	**-**	**-**
Federal Funds						
Federal Funds	28,843,022	-	-	-	-	-
Tsfr To Or Youth Authority	(28,843,022)	-	-	-	-	-
Total Federal Funds	**-**	**-**	**-**	**-**	**-**	**-**

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-010-50-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Admin and Service Charges	11,123,789	-	-	-	-	-
Other Revenues	1,351,462	51,472,780	52,778,382	54,888,680	-	-
Tsfr From Administrative Svcs	93,786	-	-	-	-	-
Tsfr From Oregon Health Authority	20,998	-	-	-	-	-
Total Other Funds	**$12,590,035**	**$51,472,780**	**$52,778,382**	**$54,888,680**	**-**	**-**
Federal Funds						
Federal Funds	178,735,455	230,296,582	241,278,088	297,454,026	-	-
Total Federal Funds	**$178,735,455**	**$230,296,582**	**$241,278,088**	**$297,454,026**	**-**	**-**

Oregon Department of Human Services
Self-Sufficiency Programs

Program Overview

Oregon Department of Human Services' Building Well-being Initiative (BWBI) is advancing a future where all who live in Oregon, regardless of race, identity, age, disability, or place, have the needed supports to achieve whole well-being for self, family, and community.

In alignment with the agency-wide BWBI, Self-Sufficiency Programs (SSP) is working toward a future where its services and resources are centered around whole-person well-being. This represents a fundamental shift from SSP's previous system-centered approach in which services and resources are primarily shaped by federal programs and funding sources like TANF and SNAP. As we move the person or family to the center of our work, federal programs like these become tools in a suite of resources to help families meet their basic needs and achieve economic stability. This approach acknowledges the complexity of needs that must be met if individuals and families are to thrive in our economic and social climate – including stable housing, affordable childcare, and adequate cash resources. Without these basic supports, individuals and families cannot be expected to exit poverty.

In Oregon, the burden of poverty is not equally shared: Communities of Color are disproportionally impacted as are residents of rural communities, women, youth, LGBTQ communities, people with disabilities, immigrants, and refugees.

SSP recognizes the structural racism and oppression embedded within our programs and is committed to addressing historic and current harms while working with impacted communities to transform these systems. With this transformation, individuals and families can not only reach stability but also have access to asset-building tools, generational wealth, and equal economic and social mobility opportunities.

Equity North Star

The path to this envisioned future is guided by the ODHS Equity North Star, which

puts race and intersectionality at the center of our decisions and positions communities as shapers of ODHS policies, programs, and delivery strategies. SSP recognizes that solutions must be grounded in the lived experience of families and the balance of decision-making power must be shifted to communities who are most affected. Accordingly, SSP will leverage community engagement efforts to identify shared concerns and community-driven solutions. SSP will act with intentionality, humility, curiosity, and respect while ensuring affected communities' access to complete information and ability to influence the outcomes.

Community-driven accountability mechanisms will create greater transparency and invite disempowered groups to shape the future of SSP and its services. Rather than expanding the reach and resources of the agency itself, SSP will invest in partners who are rooted in community and already performing invaluable work. Together with our partners, SSP is committed to addressing the roots of systemic oppression and aligning services and resources around a more equitable future.

Program Goals

SSP will:

- Ground solutions and change in the lived experience of individuals and families
- Seek to understand differences in culture to better design programs and policy in culturally responsive ways
- Engage individuals, families, and communities in systems change, recognizing and supporting their leadership
- Use a trauma-informed lens and center all dimensions of health (physical, mental, emotional, intellectual, social, spiritual, generational, environmental, occupational) in decision-making

Program – Current State

SSP administers an array of programs to Oregonians experiencing low or no income. These benefits and services are aimed at helping individuals and families move out of poverty into economic stability. Historically, SSP's programs have operated within silos – each with its own unique resources, policies, processes, and systems.

This approach has created a fractured service array and presents challenges to individuals and families as they navigate multiple programs and services. SSP is now taking steps to unify its service approach, thereby improving the accessibility and navigability of its programs. The launch of the ONE eligibility system and the Oregon Eligibility Partnership (OEP) represents the first wide-scale attempt to weave together department-wide services for individuals and families. We acknowledge that there is still a long way to go.

We also acknowledge that federal programs alone are not enough to move individuals and families into economic stability, a key social determinant of health. SSP needs added capacity and state investment to build policy and programs in partnership with impacted communities, and to better collaborate with community partners and our sister agencies to coordinate a comprehensive suite of services that meaningfully improve well-being for Oregonians.

The programs within SSP include:

- Supplemental Nutrition Assistance Program (SNAP) and related programs:
    - SNAP Employment and Training Program (STEP)
    - Able-Bodied Adults without Dependents (ABAWD) Program
    - SNAP Nutrition Education (SNAP-Ed)
- Commodities Supplemental Food Program (CSFP)
- The Emergency Food Assistance Program (TEFAP)
- Temporary Assistance for Needy Families (TANF) and related programs:
    - Job Opportunity and Basic Skills (JOBS) program
    - Family Support and Connections (FS&C)
    - State Family Pre-Supplemental Security Income (SSI) and Supplemental Security Disability Income (SSDI)
- Temporary Assistance for Domestic Violence Survivors (TA-DVS)
- Youth Services

- Child Care (moving to Division of Early Learning and Care in 2023)

Program – Future State

SSP continues to see historic caseloads driven by the shortage of affordable housing, the COVID-19 pandemic, catastrophic wildfires, economic conditions, and a shortage of available and affordable childcare and attainable living-wage jobs. Recent forecasting data also predict that the current economic downturn will deepen these trends.[1]

SSP is committed to creating an integrated human service continuum of care that addresses these compounding trends and serves the holistic needs of individuals and families. To do this, we must think differently and creatively, listen more effectively to communities, and collaborate across multiple systems to create and coordinate services. We must also allocate more resources toward the most impacted communities to reduce systemic disparities. In other words, our work is larger than the programs we currently administer; we must focus on holistically improving the conditions in people's environments, from food security to housing security to wealth building.

The social determinants of health are foundational to the well-being of individuals and families[2] and SSP policies and programs must be structured to address that reality. In addition to maintaining and optimizing federal program administration, SSP is arranging our broader policy work around food security, housing security, economic and social mobility, equitable budgeting and implementation, and data. In our future vision, we are committed to investing in communities across all aspects of peoples' lives.

Benefits Overview

- Supplemental Nutritional Assistance Program (SNAP)

[1] Parolin, Z. & Christopher Wimer (April 2020) Forecasting Estimates of Poverty during the COVID-19 Crisis. Center on Poverty and Social Policy at Columbia University Policy Brief available for download at https://static1.squarespace.com/static/5743308460b5e922a25a6dc7/t/5e9786f17c4b4e20ca02d16b/1586988788821/Forecasting-Poverty-Estimates-COVID19-CPSP-2020.pdf

[2] Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved [date graphic was accessed], from https://health.gov/healthypeople/objectives-and-data/social-determinants-health

SNAP offers food aid to individuals and families experiencing low income to help meet their nutritional needs. SNAP benefits are 100 percent federally funded; however, administration of the program requires a 50 percent state match. Approximately one in five Oregonians receive food benefits through SNAP.

Adults 60 and older and people with disabilities who are receiving SNAP in Oregon are served by SSP in partnership with the Aging and People with Disabilities (APD) program and their contracted partners (Area Agencies on Aging (AAAs), Disability Services Offices, and Councils of Government).

SNAP is the largest food security program in Oregon and the United States. Recent research has shown that SNAP benefits reduce the depth and severity of poverty and improve diet-related chronic health conditions, lowering medical costs for the individual and the state.[3] SNAP benefits add approximately $1.1 billion per year to the Oregon economy, benefiting both urban and rural communities.[4] Oregon's Double Up Food Bucks program supports our efforts to stretch SNAP food dollars further for SNAP households. $20 in SNAP can be matched up to $20 in fresh fruit and veggies at participating farmer's markets across the state. Families can find a participating market at doubleuporegon.org.

Oregon is federally required to offer an Employment and Training (E&T) program to assist SNAP households in obtaining skills, training, and work or experience, which in turn increases their ability to secure and maintain living-wage employment. Oregon has two voluntary SNAP E&T programs: the SNAP Training and Employment Program (STEP) – nationally called the SNAP 50/50 program – and the Able-Bodied Adults Without Dependents (ABAWD) program. The ABAWD program establishes time limits for SNAP participants aged 18 to 49 who can work, do not have a child under 18 as part of their SNAP case and do not live in a waived

[3] Steven Carlson and Brynne Keith-Jennings, "SNAP Is Linked with Improved Nutritional Outcomes and Lower Health Care Costs," Center on Budget and Public Policies, January 17, 2018, https://www.cbpp.org/research/food-assistance/snap-is-linked-with-improved-nutritional-outcomes-and-lower-health-care
Barbara A. Laraia, "Food Insecurity and Chronic Disease," Advances in Nutrition: An International Review Journal, 4(2):203-212, 2013, https://doi.org/10.3945/an.112.003277

[4] Calculation based on internal ODHS data and source: Patrick Canning and Brian Stacy, "The Supplemental Nutrition Assistance Program (SNAP) and the Economy: New Estimates of the SNAP Multiplier," United States Department of Agriculture, July 2019, https://www.ers.usda.gov/webdocs/publications/93529/err-265.pdf?v=6395.4

area.[5]

Oregon SNAP encompasses several additional programs including the SNAP Nutrition Education (SNAP-Ed) program, which is active in all 36 counties. ODHS oversees SNAP-Ed program and planning, and Implementing Agencies deliver programming and work directly in communities. The state's singular Implementing Agency is Oregon State University Extension Service (OSU ES). Partners at OSU ES live and work in the diverse communities SNAP-Ed serves, including Tribal communities across the state.

The focus of SNAP-Ed is directed at school-aged children, with strategic initiatives and supports aimed at serving older adults, Federally Recognized Tribes and other Tribal communities in Oregon, Black communities, and other communities of color.

- Commodities Supplemental Food Program (CSFP)

This federal program provides a prescribed nutritious commodity package each month to help meet the needs of older adults experiencing low income. Food packages are distributed through local agencies and include canned fruits and vegetables, canned meat, poultry and other protein items, and grain products such as pasta and rice. While CSFP food packages do not provide a complete diet, they are a good source of the nutrients many older adults experiencing food insecurity struggle to access, helping these adults combat poor health conditions and avoid hospitalizations and nursing home placements.[6] Recipients are also offered the opportunity to receive nutrition education instruction and information, often in their preferred language and with culturally appropriate recipes.

- The Emergency Food Assistance Program (TEFAP)

This federal program helps supplement the diets of Oregonians experiencing low income by providing emergency food and nutrition assistance at no cost. The amount

[5] The law allows states to ask FNS to temporarily waive the ABAWD time limit based on evidence showing that an area has an unemployment rate of over 10 percent or does not have a sufficient number of jobs. An ABAWD time limit waiver does not waive the general SNAP work requirements. Source: https://www.fns.usda.gov/snap/ABAWD/waivers

[6] Ziliak, J., Gundersen, C. (August 2021). The Health Consequences of Senior Hunger in the United States: Evidence from the 1999-2016 NHANES. Report for Feeding America. Available from Feeding America: https://www.feedingamerica.org/sites/default/files/2021-08/2021%20-%20Health%20Consequences%20of%20Senior%20Hunger%201999-2016.pdf

of food Oregon receives is based on the number of unemployed persons and the number of people with incomes below the federal poverty level. Oregon SSP provides funding to purchase USDA commodities – as well as administrative funds to support statewide food distribution – to the Oregon Food Bank (OFB), the state's distributing agency. OFB works with a cooperative network of regional food banks, partner agencies and programs to distribute emergency food to families.

- Temporary Assistance for Needy Families (TANF)

The TANF program provides cash benefits and job support services to families with children experiencing deep poverty. These benefits are designed to help meet a family's basic needs while they find or prepare for work. In 2022, the Oregon Legislature approved a series of investments put forward by SSP to improve TANF access and cash supports, including:

- A permanent end to full-family sanctions which deny cash to entire families when the caretaker is "noncompliant" with program requirements,
- A reinvestment of Oregon's TANF reserves into tri-annual clothing allowances that will enable parents to buy seasonally appropriate clothing for their children, and
- Increasing the resource limit to allow more families to access TANF.

SSP also convenes a weekly collaborative session with community partners and Tribal nations to ensure that impacted communities are leading and shaping Oregon's TANF program.

- Job Opportunity and Basic Skills (JOBS)

JOBS is the employment and training component of TANF. It provides services for family stabilization, well-being, education, and employment readiness. Family coaches meet with families and connect them to local services such as work experience and on-the-job training; English language classes; high school, GED, and college degree programs; parenting classes; and medical, mental health, or substance treatment programs.

- Family Support and Connections (FS&C)

FS&C provides support to families experiencing low income to increase protective

factors and decrease risks associated with child abuse and neglect. Protective factors include nurturing and attachment, knowledge of parenting and child and youth development, parental resilience, social connections, and concrete support for parents. Identifying protective factors helps parents find resources, supports and coping strategies that support effective parenting even in times of stress, increasing the well-being of children and families. Front-end support and primary and secondary prevention services are used to build upon family strengths, address family functioning, and develop skills that lead to self-sufficiency and reduce the need for Child Welfare intervention.

In 2022, the Oregon Legislature approved expansion of FS&C funded by TANF Federal Funds, providing an additional $7.3 million dollars to reach more families. With this increased funding, FS&C will expand eligibility requirements and support, intentionally increase cultural responsiveness in services, onboard culturally specific organizations, and center parent voice in program design. This expansion will allow FS&C to serve more families, prioritizing Black, Indigenous, and families of color.

- State Family Pre-Supplemental Security Income (SSI) and Supplemental Security Disability Income (SSDI)

State Family Pre-SSI/SSDI provides temporary cash assistance, case management, and professional-level support to TANF-eligible adults and their families. The program is available to participants who have been assessed by the program's disability analysts. The program is voluntary but provides additional staff resources for those selected to participate. Selected individuals must sign an interim assistance agreement to repay the adult portion of their State Family Pre-SSI/SSDI grant back to the state when they are found eligible for federal disability program benefits. State Family Pre-SSI/SSDI expenditures are funded with state only, non-Maintenance of Effort dollars.

- Temporary Assistance to Domestic Violence Survivors (TA-DVS)

TA-DVS provides short-term financial assistance and support services to families with children affected by domestic violence when other resources are not available. TA-DVS is used to help domestic violence survivors and their children address their safety concerns and stabilize their living situation. This reduces the likelihood of the survivor returning to the domestic violence situation and can prevent life-threatening

situations. This program also includes safety planning and connection to community resources.

- Survivor Investment Partnership (SIP)

SIP provides flexible financial assistance to survivors of domestic and sexual violence and builds capacity to expand SSP's support for survivors through collaboration with Tribal nations and culturally specific domestic violence sexual assault (DVSA) providers. SIP includes intergovernmental agreements (IGA) with the Nine Federally Recognized Tribes in Oregon, contracts with culturally specific DVSA providers, and flexible funding for survivors that enables supports beyond what ODHS programs can provide. SIP funding allows survivors to access needed supports safely within their communities in a culturally responsive way.

- Refugee Program

The Refugee Program serves individuals and families who have fled persecution in their country of origin and were legally admitted for resettlement by the United States. A collaborative effort between ODHS and partner Refugee Resettlement Agencies (RRAs), the program helps refugees and those eligible for refugee services to successfully resettle in Oregon by providing case management, financial, medical, employment, and acculturation services.

The Refugee Program began significant rebuilding efforts following the 2020 election and change in administrative direction regarding immigrants and refugees. Crises in Afghanistan and Ukraine have also necessitated the expansion of the Refugee Program's efforts and collaborations with ODHS' Office of Resilience and Emergency Management, as well as the state's RRAs.

- Youth Services

My Future - My Choice (MFMC)

MFMC is an age-appropriate, medically accurate, comprehensive, trauma-informed, and inclusive sexual health education program developed for the 6th grade. It can be delivered with the support of trained high school peer educators and meets all Oregon sexual health education standards. It supports sexual violence prevention and teen pregnancy prevention efforts to help reduce the need for public assistance in the future. ODHS partners with the Oregon Department of Education, the My Future -

My Choice Advisory Committee, and the Teen Advisory Board to further develop and implement the program.

Youth Experiencing Homelessness Program (YEHP)

YEHP provides services and supports to unaccompanied youth and young adults under the age of 24 without shelter and who are not able to safely reside with a parent or guardian. The program administers funding to local nonprofit providers across the state providing shelter services, drop-in and outreach services, job development and mentoring services, and housing supports such as host homes and transitional living programming. ODHS partners with a cross-system advisory group to coordinate statewide policy and planning to address the needs of youth experiencing homelessness.

In 2021, ODHS in collaboration with the Corporation for Supportive Housing (CSH) released the results of a statewide analysis that examined the need and pipeline for housing and services for youth experiencing or at risk of experiencing homelessness.[7] Unique in the study was a comprehensive effort to recruit and engage youth across the state with lived experience of homelessness to inform and design housing and services programs that may receive state funding. The project was born from the 2020 session of the Oregon Legislature after a proposed bill requested a study to better understand the level of investment required to address statewide housing and service gaps for young people.

Child Care Eligibility

In 2021, the Oregon Legislature passed House Bill 3073, establishing a new early learning agency – the Department of Early Learning and Care (DELC) – that consolidates all childcare programs and early care and education programs in one place, effective July 2023. This consolidation includes the Employment Related Day Care program (ERDC), a childcare subsidy program previously housed in ODHS SSP.

ERDC assists families with childcare costs. The program has a dual generational goal of helping families maintain stable employment and education while helping children access high-quality childcare, thus increasing their likelihood of success in school.

[7] https://www.oregon.gov/dhs/CHILDREN/Homeless-Youth/Documents/CSH-YH-Needs.pdf

Families in this program pay a share of the childcare cost, called the copay. The amount of the copay is based on a sliding scale using family size and income. Families may qualify for childcare assistance while they are attending school, searching for a job after a lay-off or temporary loss of employment, or during periods of medical leave.

ERDC also works with providers and other childcare partners across the state to help families find and keep high-quality childcare, improve the availability of quality childcare in Oregon, and develop resources for families and childcare providers.

ODHS has worked closely with the Early Learning Division to implement policies introduced as part of House Bill 3073 and to ensure a smooth transition of ERDC that is seamless for families and providers. After the transition to DELC, ODHS will continue to determine family eligibility for the program through the ONE system.

- Design and Implementation

Design and Implementation (D&I) provides program direction, guidance, planning, implementation, and training. D&I staff coordinate closely with central SSP office staff in Salem as well as service delivery offices across the state, with the goal of increasing Oregonians' access to holistic, person- and equity-centered, and community-based services, programs, and supports.

D&I works closely with Child Welfare and collaborates with other agencies and statewide initiatives to align and improve cross-program work. D&I's efforts help ensure effective service delivery and improve accessibility for the individuals and families for whom these services are designed. Current cross-agency or cross-program collaborations include efforts related to domestic violence, housing, substance use disorder and mental health treatment, vocational rehabilitation, health care, and education. D&I emphasizes participant and community voice and centers the culture and language needs of those served. D&I staff develop and research methods to better understand the communities served through enhanced data collection and analysis related to race, ethnicity, language, and disability.

Service Delivery Structure

To help Oregonians across the state get the benefits and assistance they need, SSP offers local service delivery offices across the state, satellite locations, and virtual

eligibility centers (for support by telephone). This structure allows staff to offer personalized services to Oregonians in the way they want to be served. The ONE system allows for the sharing of work by staff across the state, providing equity in access to services as well as supporting the goal of delivering benefits on a same day/next day basis.

SSP has 16 districts with a total of 80 offices, including virtual eligibility centers and satellite locations. The SSP workforce serves customers in twenty-one different languages including English, enhancing the program's ability to meet the needs of Oregonians, and reflecting the demographics of diverse communities across Oregon.

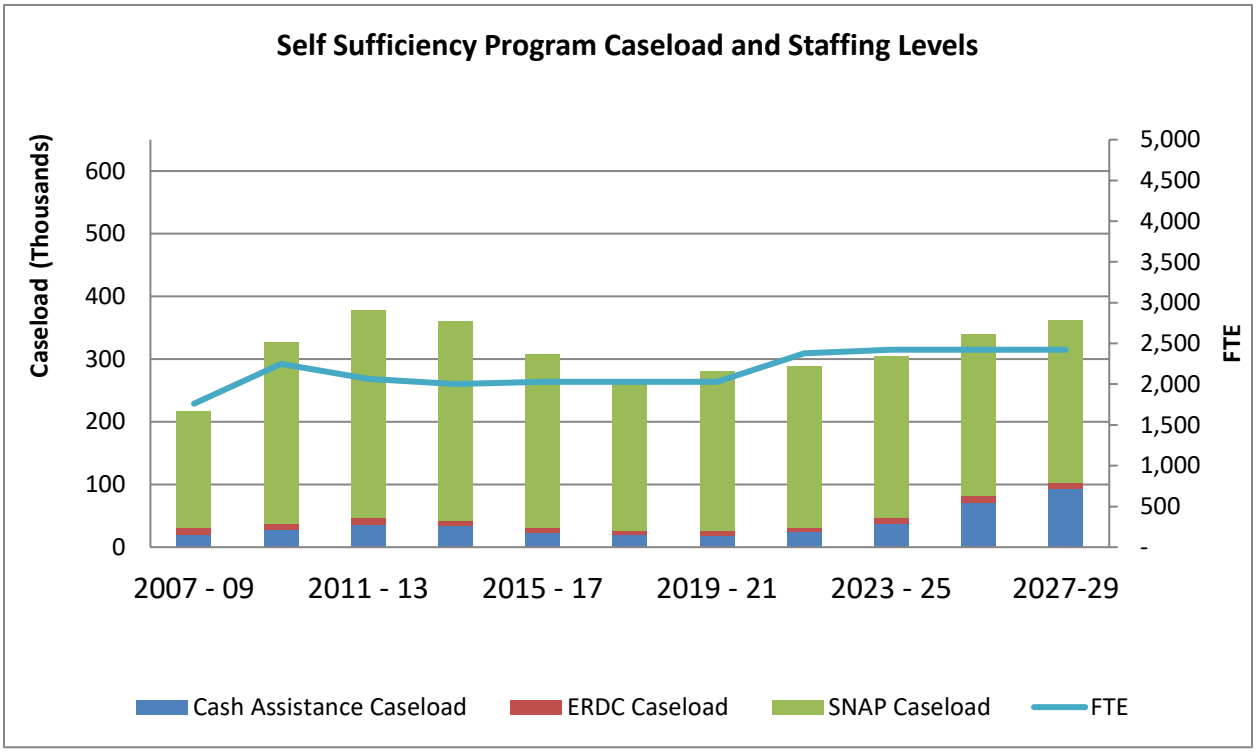
Self-Sufficiency Training Unit (SSTU)

SSTU provides training and professional development for staff to develop the technical and interpersonal skills necessary for success their roles. Trainings are based on position competencies and adhere to the Department of Administrative Services (DAS) Training Standards.

When ODHS' Oregon Eligibility Partnership (OEP) was launched in January 2022 to support a single delivery eligibility system, a training component was included. SSTU will work closely with OEP to transition positions that specifically support eligibility training, while at the same time balancing the training needs of SSP. SSTU will continue to provide new-hire and ongoing training to Family Coaches, Engagement Specialists, and Operations Managers while supporting additional training needs as they emerge. SSTU collaborates with Child Welfare efforts regarding Family Preservation and developing values-based training that is trauma-informed and supports Oregon's diverse communities.

Oregon Department of Human Services: Self-Sufficiency Design and Delivery

Primary Long-Term Focus Areas:	Strengthening our foundations, responding to emergencies, and creating the future of human services
Secondary Long-Term Focus Areas:	ODHS Equity North Star, community engagement
Program Contact:	Ivonne Lopez, Self-Sufficiency Programs Deputy Director



Program Overview

Self-Sufficiency Programs (SSP) Design and Delivery ensures resources and services reach all communities across Oregon through service design, planning implementation, training, and reporting. Design and Delivery oversees eligibility and benefit personnel needed for the issuance of SSP benefits and services to

support a diverse population experiencing low-income and in need of economic supports and self-sufficiency services to meet their basic needs.

SSP provides individuals and families in Oregon essential services in their own communities using the ONE system and in partnership with OEP. Client demand for in-person and virtual services drives SSP staffing levels.

Major cost drivers for SSP's Delivery and Design personnel need are federal or state program mandates, economic conditions affecting caseload size – such as the number of Oregonians needing assistance – personnel turnover, related training and travel costs, work efforts required to provide services, and personnel packages such as position cost and infrastructure improvements.

Program Funding Request

Self Sufficiency Delivery & Design Total						
Self Sufficiency Design & Delivery	**GF**	**OF**	**FF**	**TF**	**Pos**	**FTE**
LAB 21-23	290,002,867	808,144	195,140,314	485,951,325	2,379	2,358.31
ARB 23-25	305,435,346	818,539	216,381,475	522,635,360	2,423	2,415.25
Difference	15,432,479	10,395	21,241,161	36,684,035	44	56.94
Percentage change	5.32%	1.29%	10.89%	7.55%	1.85%	2.41%

Self Sufficiency Delivery						
Self Sufficiency Delivery	**GF**	**OF**	**FF**	**TF**	**Pos**	**FTE**
LAB 21-23	260,969,201	323,232	172,491,615	433,784,048	2,250	2,233.11
ARB 23-25	271,805,365	339,797	191,315,672	463,460,834	2,270	2,268.88
Difference	10,836,164	16,565	18,824,057	29,676,786	20	35.77
Percentage change	4.15%	5.12%	10.91%	6.84%	0.89%	1.60%

Self Sufficiency Design						
Self Sufficiency Design	**GF**	**OF**	**FF**	**TF**	**Pos**	**FTE**
LAB 21-23	29,033,666	484,912	22,648,699	52,167,277	129	125.20
ARB 23-25	33,629,981	478,742	25,065,803	59,174,526	153	146.37
Difference	4,596,315	(6,170)	2,417,104	7,007,249	24	21.17
Percentage change	15.83%	-1.27%	10.67%	13.43%	18.60%	16.91%

Program Description

Design and Implementation (D&I)

D&I provides program direction, guidance, consultation, planning, implementation and training. D&I staff serve as a link between operations in service delivery offices across Oregon and the SSP central office teams in Salem. D&I coordinates between the two areas with the goal of increasing Oregonians' access to holistic,

person- and equity-centered, and community-based services, programs, and supports.

D&I works closely with other ODHS programs and collaborates with many agencies and statewide initiatives to align and improve cross-program work. D&I's efforts ensure effective and sustainable service delivery that improves accessibility for the individuals and families SSP serves. Current cross-agency and cross-program collaborations include efforts related to domestic violence, housing, substance use disorder and mental health treatment, vocational rehabilitation, health care, family preservation and education. D&I emphasizes participant and community voice and centers the culture and language needs of those served. D&I staff develop and research methods to better understand the communities served through enhanced data collection and analysis related to race, ethnicity, language, and disability.

Self-Sufficiency Training Unit

The Self-Sufficiency Training Unit (SSTU) provides training and professional development for staff to develop the technical and interpersonal skills necessary for success in their roles. Trainings are based on position competencies and adhere to the Department of Administrative Services (DAS) Training Standards.

When ODHS' Oregon Eligibility Partnership (OEP) was launched in January 2022 to support a single eligibility delivery system, a training component was included. SSTU is working closely with OEP to transition positions that specifically support eligibility training while balancing the training needs of SSP. SSTU will continue to provide new-hire and ongoing training to Family Coaches, Engagement Specialists, and Operations Managers and support emergent training needs. SSTU collaborates with Child Welfare on Family Preservation efforts and in the development of values-based training that is trauma-informed and supports Oregon's diverse communities.

Service Delivery Structure

To help individuals and families across the state get the benefits and assistance they need, SSP has service delivery offices in every county across the state, satellite locations, and virtual eligibility centers for support by telephone. This structure allows staff to offer personalized services to clients in the way they want to be served. The ONE Oregon Eligibility system allows for the sharing of work by staff across the state, providing equity in access to services as well as supporting the goal of delivering benefits on a same day/next day basis.

SSP has 16 districts with a total of 80 offices, including virtual eligibility centers and satellite locations. The SSP workforce serves customers in twenty-one different languages including English, reflecting the diverse demographics of communities across Oregon.

Program Justification

Strengthening our Foundations

Staff efforts strengthen ODHS foundations through collaborations that continually improve the delivery of basic needs programs, including financial assistance, food assistance, medical insurance (referral only), child care, domestic violence services, employment and training, refugee and youth services. Staff also respond to disaster program delivery when needed and as identified as eligible by federal programs.

SSP staff coordinate with Child Welfare to work with families that have or are at risk of having Child Welfare involvement to increase family stability and keep children and parents together whenever possible. D&I collaborates with Child Welfare and community partners in designing the least intrusive, most family-centered and culturally responsive service delivery.

Additional collaborations have been built around domestic violence, housing, alcohol, drug and mental health treatment, workforce development, vocational rehabilitation, health care, and education with community partners and Tribal nations.

ODHS Equity North Star

SSP Design and Delivery is guided by the ODHS Equity North Star – with the goal that all who live in Oregon, regardless of race, identity or place, have the resources and support they need to achieve whole well-being for themselves, their families, and their communities. SSP staff work to provide services and resources to clients that support their goals in achieving well-being, basic health, safety and independence.

Insufficient and ill-designed resources and supports disproportionately impact people with disabilities, Oregon Tribal nations, Black individuals and families, and other people of color. To ensure resources and services support impacted communities, it is vital to build and maintain an infrastructure that supports family stability and engagement.

Program Performance

SSP uses a Management System to prioritize, connect, enable and drive all work in a way that ensures every resource connects back to our goals and every employee receives the maximum authority to act to achieve those goals. In 2019, the Oregon Legislature approved new SSP Key Performance Measures (KPMs). Connecting to economic stability – a key social determinant of health – the KPMs track the following outcomes for SSP clients:

1. Housing stability
2. Food security
3. Living wages
4. Hope/self-efficacy

SSP's Fundamentals Map outlines the program's mission critical functions and operating principles. Operating and Supporting Processes each have their own distinct Process Measures. Process and Outcome measures described in the map are reviewed through a Quarterly Target Review (QTR) process to help SSP manage, make decisions, and understand the "why" behind our efforts. Disaggregated measures help SSP track the programs' ability to meet the needs of all populations served and to make necessary improvements. In addition to the four Key Performance Measures, SSP's work is evaluated based on the following:

<u>Operating Processes</u>

OP1 Fostering community and partner relationships
OP2 Developing and maintaining resources
OP3 Determining eligibility
OP4 Developing and supporting participant goals
OP5 Engaging individuals

<u>Supporting Processes</u>

SP1 Developing and implementing policy
SP2 Evaluating and improving performance
SP3 Managing business operations
SP4 Retaining a strong and professional internal workforce

<u>Outcome Measures</u>

O1 Highly engaged, skilled, professional workforce
O2 Workforce reflects communities
O3 Strong sustainable and outcome-oriented community relationship
O4 Improved economic stability
O5 Safe, stable, attached families
O6 Increased family goal attainment
O7 Awareness and access to services
O8 External customer satisfaction

In alignment with the agency-wide BWBI, the SSP's Fundamentals Map and the Key Performance, Process and Outcome Measures it contains, assist the program in understanding how we can build a future where all our services and resources are centered around whole-person well-being.

Enabling Legislation:

SSP must act in accordance with a variety of mandates from federal law and the Oregon constitution. SNAP and Medicaid are federally mandated programs. TANF is a federal block grant program. It is authorized under Title IV-A of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), and the Deficit Reduction Act of 2005. A significant portion of the TANF eligibility criteria is codified in State statute chapters 411 and 412. ODHS has statutory authority to administer the ERDC program through ORS 409.010(2) (c), 411.141 and 418.485. Family Support and Connections services are authorized through the Title II of the Child Abuse Prevention and Treatment Act (CAPTA), as amended by P.L. 111-320.

Funding Streams:

Funding for personnel for Program Delivery and Design is determined through Random Moment Sampling Surveys to identify which programs are being worked on in the moment and the funding split for administration of the program. With RMSS, field delivery staff are required at random intervals to indicate the time spent on various activities to determine the level of federal funding which directly supports our ability to provide Self Sufficiency Program services. The funding is a mixture of Federal and General Funds that cover the work done by the employees to support the programs that they work in. The main grant used is SNAP Administration funded 50 percent Federal and 50 percent General Funds. TANF funds are also used.

Funding Justification and Significant Changes from CSL to ARB

There are several policy option package investments in the ARB, in addition to the regular essential packages that are part of the normal budget build process.

PACKAGE NO.	PACKAGE TITLE:				
115	REFUGEE PROGRAM (DES)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
506,358		1,112,060	1,618,418	7	6.25

PACKAGE DESCRIPTION:

Oregon has a long tradition of welcoming refugees. Since 1975, nearly 70,000 forcibly displaced people have arrived in the state from all over the world. After resettling here, refugees contribute greatly to Oregon's economic vitality, cultural life and social fabric. Today, Oregon is as committed as ever to welcoming refugees and helping them safely and successfully rebuild their lives – a commitment that's increasingly critical as the world's refugee population continues to grow to record numbers. Oregon Department of Human Services' Office of Resilience and Emergency Management (OREM) provides a comprehensive array of services to people in Oregon who are impacted by disasters and emergencies, including the sheltering and feeding of refugees. While we are currently supporting refugees through our existing infrastructure, the recent raising of the federal refugee admissions cap, coupled with the war in Ukraine and other crises around the world, translate into growing numbers of refugees who need our help. In addition to anticipated fiscal shortfall, these trends pose considerable risk to our ability to provide current levels of service. The funding provided by this policy package will facilitate food, shelter, and aid for displaced refugees who come to Oregon.

PACKAGE NO.	PACKAGE TITLE:				
116	GRANT PGM FOR COMMUNITY-BASED ORGANIZATIONS (DEL)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
190,700			190,700	1	0.75

PACKAGE DESCRIPTION:

An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.

PACKAGE NO.	PACKAGE TITLE:				
117	TRIBAL LIASONS (DES)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
1,587,828			1,587,828	9	6.75
PACKAGE DESCRIPTION:					
To respect and uphold the sovereignty of U.S. Tribal Nations, required consultation and engagement should occur in a consistent, coordinated, and equitable way. Effective consultation and engagement will provide Tribal children, families and elders the access they need to services and supports from the Oregon Department of Human Services (ODHS). Lacking a formal structure, current engagement and collaborative efforts are often confusing and ineffective. Currently ODHS does not have a formal structure, uniform process or supports to do this work. ODHS is requesting this policy option package to (1) adequately resource the ODHS Tribal Consultation Policy implementation structure and (2) add Self-Sufficiency Programs Tribal Liaisons positions. This request aligns with ODHS' strategic goals of strengthening foundations and creating the future of human services. Without the requested resources, members of Oregon's Nine Federally Recognized Tribes as well as Tribal members from out-of-state Tribal Nations will continue to be underrepresented in ODHS supports and services and disproportionally represented in its Child Welfare systems, where they face higher rates of family separation than the non-Tribal population. This proposal adequately resources ODHS Tribal Consultation Policy efforts, supports all ODHS programs and brings ODHS into compliance with State and Federal requirements. Without the resources requested in this package, ODHS Self-Sufficiency Programs (SSP) will continue to lack the necessary staffing to carry out consistent engagement with Oregon Tribes at the local level. Tribal Leaders requested SSP hire or designate Tribal Liaisons who they can connect with regularly to ensure coordination happens in a way that supports Tribal families in accessing needed benefits and services. This proposal creates infrastructure for Tribal Engagement by funding eight Tribal Liaison positions and a manager.					

PACKAGE NO.	PACKAGE TITLE:				
136	YOUTH EXPERIENCING HOMELEESSNESS PGM EXPANSION (DES)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
740,728			740,728	4	3.25

PACKAGE DESCRIPTION:

Every young person deserves safe, stable housing. And yet every night in Oregon, thousands of unaccompanied young people go to sleep in tents, abandoned buildings, makeshift shelters, or on the couches of friends or strangers – all without the security of a home or family. We have a shared obligation to support youth who are experiencing homelessness, helping them not only to find housing, but also to access the wider array of services they need to achieve well-being and reach their full potential. Oregon Department of Human Services' Youth Experiencing Homelessness Program (YEHP) partners with impacted youth, community organizations, and state agencies in an effort to provide these services, help youth secure housing, and prevent homelessness among youth across the state. To do this work effectively, ODHS is requesting the staff and other resources necessary to (1) enhance youth-homelessness programming and maintain recent investments, (2) continue a Direct Cash Transfer pilot project for youth experiencing homelessness, (3) support the Statewide Youth Advisory Board, and (4) provide paid internships for youth with lived experience in homelessness. Together, these program investments will expand YEHP's reach to rural and Tribal communities, increase impacted youths' involvement in service design, and build a continuum of services that effectively meets the unique and often complex needs of the individuals we serve.

PACKAGE NO.	PACKAGE TITLE:				
137	HOUSING STABILIZATION PROGRAM EXPANSION (DES)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
847,105			847,105	4	3.52

PACKAGE DESCRIPTION:

Housing is a key social determinant of health. Safe, stable and affordable housing gives families a strong foundation and improves their chances of achieving their employment, education, health and parenting goals. But families in Oregon regularly relay to Self-Sufficiency Programs staff that the existing network of subsidies and resources are insufficient to achieve housing stability. Communities of color, moreover, face disproportionate barriers to affordable housing access, which increases disparities in well-being outcomes. Oregon's Housing Stabilization Program (HSP), in operation since 1999, contracts with Community Action Agencies to provide short-term housing benefits to families. This program could be substantially more effective in housing intervention and as a tool to achieve equitable outcomes. This policy option package proposes to expand HSP to be more effective and culturally responsive. It entails increasing funding available to community-based organizations to build a network of housing navigators and provide financial housing assistance dollars to Oregonians experiencing low income; expanding eligibility criteria for HSP to include any Self-Sufficiency Programs participant; creating a Landlord Incentive Fund to increase affordable housing inventory; and creating new contracting opportunities for HSP in ways that prioritize culturally specific organizations. This package also proposes the transfer of HSP from Oregon Housing and Community Services to Oregon Department of Human Services, where more capacity exists for administering an expansion of this scale.

PACKAGE NO.	PACKAGE TITLE:				
138	SURVIVOR INVESTMENT PARTNERSHIP (DES)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
423,635			423,635	2	1.76

PACKAGE DESCRIPTION:

Everyone deserves to be safe from violence in their homes and communities. But in Oregon and nationally, domestic violence is an ongoing threat to people's well-being – particularly in communities that have been subject to historic oppressions and disproportionate economic stress. Research and community input tell us that we can provide better domestic violence advocacy, prevention and support services to survivors in these populations by creating more culturally responsive local service arrays and by providing the financial supports necessary for them to exit violent situations. By addressing the current gaps, we can ensure that survivors of domestic violence and sexual assault (DVSA) have access to these critical supports no matter where they live or what community they belong to. Oregon Department of Human Services is proposing an expansion of the Survivor Investment Partnership (SIP) to address these gaps. SIP was developed in partnership with Tribes and communities of color, DVSA service providers and survivors of DVSA, and established by the Legislature in 2021. But current funding constraints prevent us from providing survivors with equitable supports statewide. This package requests funding to enable the delivery of culturally responsive advocacy services and impactful financial support, as well as expanded resourcing for the co-located domestic violence advocates program that serves people through Self-Sufficiency Programs and Child Welfare offices throughout the state.

PACKAGE NO.	PACKAGE TITLE:				
139	LOCAL FOOD PURCHASING INFRASTRUCTURE (DES)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
86,400		86,396	172,796	1	0.75

PACKAGE DESCRIPTION:

No one in Oregon should go hungry. But data show that one in four Oregonians need to use a food bank each quarter to get enough food for themselves and their families. And Black- and Latinx-headed households are twice as likely to be hungry as white families.

Since the COVID-19 pandemic there have been food shortages due to supply chain issues, labor shortages and now increases in the cost of foods. The ongoing disruption in federal food assistance is deepening the crisis for Oregon's food bank network, hindering their ability to provide enough food for people who are seeking assistance but don't always qualify for federal food programs.

With strategic investments, we can provide enough food so our neighbors don't go hungry – and we can support our local farmers and communities in the process. ODHS is seeking a $10,172,796 investment over the biennium to help create a more flexible Local Food Purchasing Infrastructure through the Oregon Food Bank network that will stabilize and supplement federal food dollars.

General Fund dollars would give the current network greater flexibility to invest in local economies for the purchase of fresh, nutritious culturally-specific foods. The network includes 20 regional food banks in Oregon and more than 1,400 food assistance sites. The current federal funding is not able to reach all food sites in the larger statewide network and some federal funding is capped at levels that cannot be amended.

The rapid cancelations of federally purchased foods during the last two years has caused hardship and gaps in Oregon's food infrastructure. As part of the reinvestment in locally grown food and use of general funding, the program will be able to increase the number of sites and customers that cannot be served through current federal food programming.

PACKAGE NO.	PACKAGE TITLE:				
140	RESTAURANT MEALS PROGRAM (DES)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
418,973		418,955	837,928	4	3.50

PACKAGE DESCRIPTION:

Everyone should have access to the food they need. Supplemental Nutrition Assistance Program (SNAP) food benefits help ensure that families have enough food – a critical ingredient in reducing health disparities and helping families achieve economic stability. Nearly two-thirds of SNAP participants are children, older adults or people with disabilities. But having a SNAP card to use at groceries doesn't remove all barriers to food access; older adults, people with disabilities and people who are houseless may not have a place to store, prepare or cook food.

In March 2022, the Supplemental Nutrition Assistance Program (SNAP) served 704,068 people. Of those, 156,432 reported living with a disability and 117,240 were aged 60 or older. The SNAP program is nationally anticipating an increase in older adults accessing food benefits. As ODHS continues its efforts to improve food access and diet-related health conditions for priority populations, we must also prepare to meet the increased need triggered by that coming demographic shift.

The Restaurant Meal Program (RMP) option for states allows ODHS to partner with restaurants to become authorized retailers for Electronic Benefit Transfer (EBT), which means that EBT card holders can use their card at participating restaurants to purchase hot meals at a lower cost than the general public. The program addresses needs of priority populations, including people with disabilities, older adults, and people experiencing homelessness, by offering a broader range of options to address food needs in communities.

Funding new positions to run this program is critical for Oregon to launch and maintain the program. We have no ability to support the federal and local development of this program without the position investment. The Restaurant Meal Program takes dedicated time and effort to work with districts, vendors, retailers, community partners and SNAP participants.

PACKAGE NO.	PACKAGE TITLE:				
141	JACKSON COUNTY DEMONSTRATION (DES)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
1,384,885			1,384,885	8	7.04

PACKAGE DESCRIPTION:

When disasters strike, we need to make sure that families and communities have the supports they need to recover and rebuild their lives. These critical supports must extend beyond the food, shelter, and medical care provided in the immediate aftermath of disasters to include services that facilitate survivors' transitions to long-term well-being. Oregon Department of Human Services Self-Sufficiency Programs is requesting the resources necessary to sustain and further develop a comprehensive, integrated health and human services delivery system at four sites in Jackson County that are currently serving families impacted by the 2020 wildfires. Investments will be made in four areas: continued onsite services and property management; local ODHS staffing resources; a lead organization to identify service needs, manage projects, collect data and coordinate local CBOs; and a tailored service array to meet resident needs.

Department of Human Services: Virtual Eligibility Center – OHP unit

Primary Long Term Focus Area: Accurate and equitable one eligibility program determinations

Secondary Long Term Focus Area: Timely call times and benefit issuance

Program Contact: Nathan Singer

Phone number: 503-269-8913

Program Overview

The OHP unit makes up a portion of ODHS' State and Contract staff who make eligibility determinations for OregonEligibility (ONE) programs. ONE programs include any of the eligibility in the system, including Medical Assistance, Food Assistance, Cash, and Child Care. These staff are primarily assigned to our Virtual Eligibility Center (VEC), which takes statewide calls and works on application submitted online. They are part of a larger network which includes local APD and SSP offices and Type B Transfer AAAs who all determine eligibility for benefits statewide. These units currently serve the highest caseload in Oregon history with almost 1.5 million individuals receiving some level of benefit(s). Throughout this VEC and OHP unit will be used synonymously.

Program Funding Request

Self Sufficiency OHP						
Self Sufficiency OHP	**GF**	**OF**	**FF**	**TF**	**Pos**	**FTE**
LAB 21-23	49,044,305	33,653	115,996,216	165,074,174	408	406.62
ARB 23-25	138,783,517	35,403	174,686,224	313,505,144	1,359	1,108.59
Difference	89,739,212	1,750	58,690,008	148,430,970	951	702
Percentage change	182.98%	5.20%	50.60%	89.92%	233.09%	172.64%

Program Description

The VEC staff respond to client inquiries about their applications and coverage for Medical, Food Assistance, Cash, and Child Care eligibility. They are the voice and primary ambassadors for these programs, providing clients' resource by telephone or the clients preferred method of contact. Customers typically inquire for information about their application status, information on their benefits and coordination of other benefits or services. They also call to make changes in their personal information that may affect their eligibility.

These staff and our system of ONE program eligibility serve some of Oregon's most vulnerable populations, taking applications online, through the mail, over the phone, or in an office. These staff focus on honoring how an individual or Oregonian requesting benefits chooses to engage with us, and on bringing the right people to where they are versus making Oregonians navigate three agencies and five different divisions.

Currently we serve almost 1.5 million individuals, with about 48 percent of individuals submitting applications online through our statewide applicant portal. This includes every generation of individuals from newborns to individuals seeking long-term care or eligibility for end-of-life Hospice care. We have provided more benefit dollars for food assistance through pandemic and emergency allotments than any previous period. This unit specifically also does additional work to support Heritage Native Americans and our sovereign tribal nations.

This unit also supports work within ODHS' Oregon Eligibility Partnership, which is the program area bringing eligibility information together across agencies, so staff have a single accountable spot for direction around eligibility operations and has responsibility for many supportive functions for one programs such as maintaining the ONE system, coordinating governance, phone system, operational direction, quality assurance and hearings, etc. Note: some of these areas currently reside in other budget areas.

This unit and our staff currently are supporting a historic caseload. The percentage of staff to cases and support to do this work is the highest ratio of cases per worker we have ever seen, and the need to unwind the pandemic will bring unparalleled operational pressure which will cause longer call times and delays in benefits and backlogs. ODHS's requests in these budgets are critical to ensuring Oregonians

can receive accurate and timely benefits determinations that are provided in an equitable fashion.

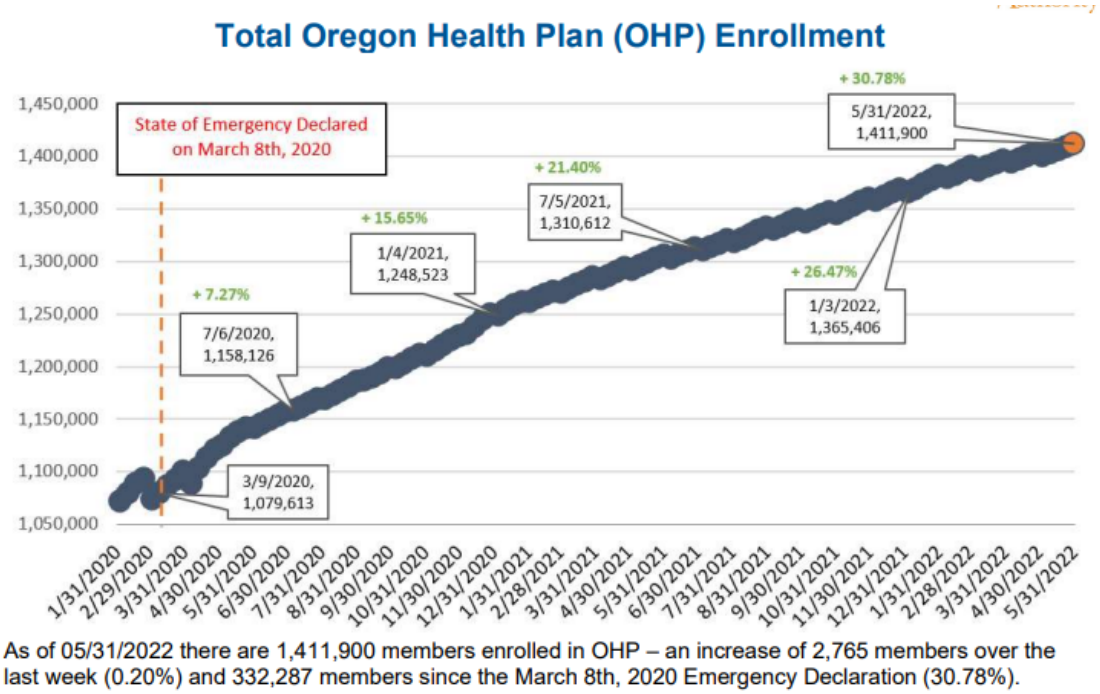
Program Justification

This program is the front door for many Oregonians and individuals looking for benefits to support where they are, what their goals are, and to sustain and provide basic health, safety, and independence. This program is essential to our core work, providing individuals benefits, but also has the opportunity to improve equity, already being the first system to capture REAL+D information, making changes to honor actual name versus legal name, and providing a single system which can be used by different groups to serve Oregonians however they choose. This program and these staff support community partners and individuals applying through multiple languages to receive services in a more person-centered manner.

Program Performance

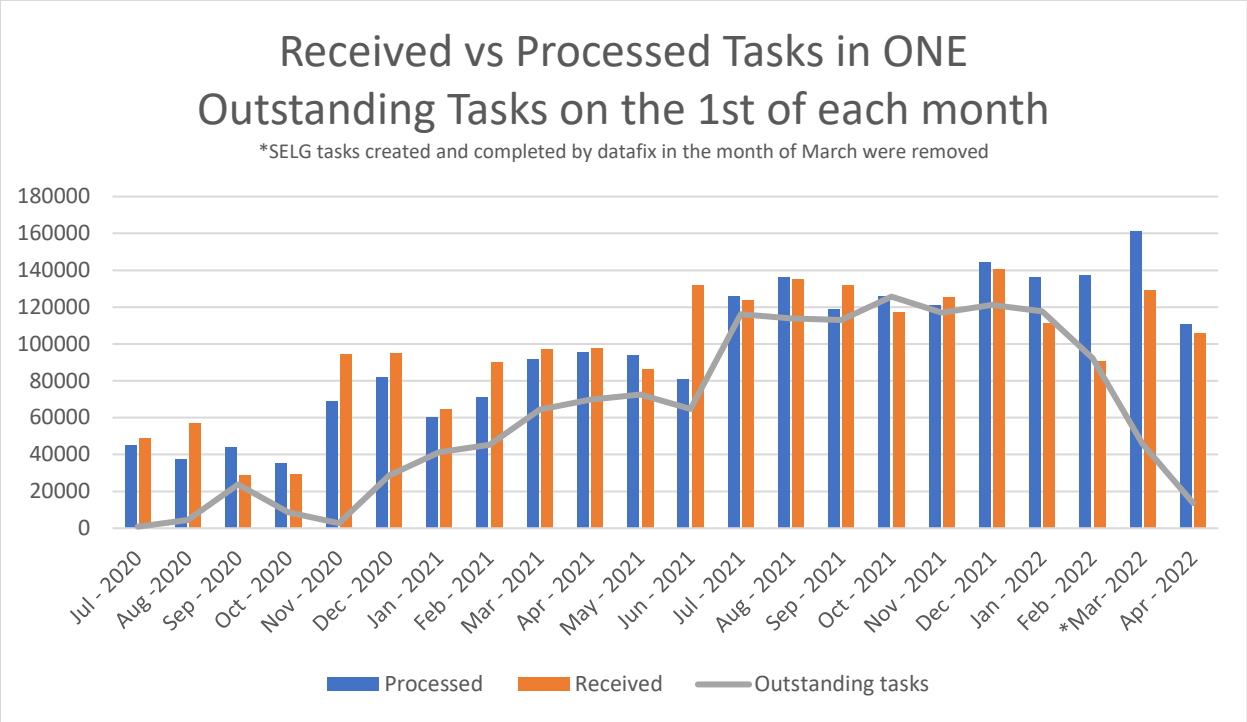
The VEC staff answer calls from individuals across the State and calling on behalf of individuals from other States needing assistance with applying for, redetermining, and support eligibility decision making for Medical, Food Assistance, Cash, and Child Care benefits.

Oregon has seen historic growth in our OHP caseload and continued growth in applications. As of the end of 2021 Oregon was receiving for Medical, Food Assistance, Cash, and Child Care benefits on average 67,000 new applications requesting benefits, 130,000 redeterminations coming due, and over 100,000 changes each month. Below is the growth of OHP alone since the pandemic.



As of 05/31/2022 there are 1,411,900 members enrolled in OHP – an increase of 2,765 members over the last week (0.20%) and 332,287 members since the March 8th, 2020 Emergency Declaration (30.78%).

From July 2020 through April 2022 Oregon received over 2,131,801 tasks to take some action around a new application, redetermination, or change to someone's eligibility within the ONE system. During that time the team have been able to process 2,124,005 of those tasks. The graph below shows the impact of tasks processed and received. It is important to note that redeterminations for medical had no negative action associated with them during the PHE, and so tasks could be closed for those and other SNAP related tasks during this time in order to assist with keeping up with the historic volume of cases.

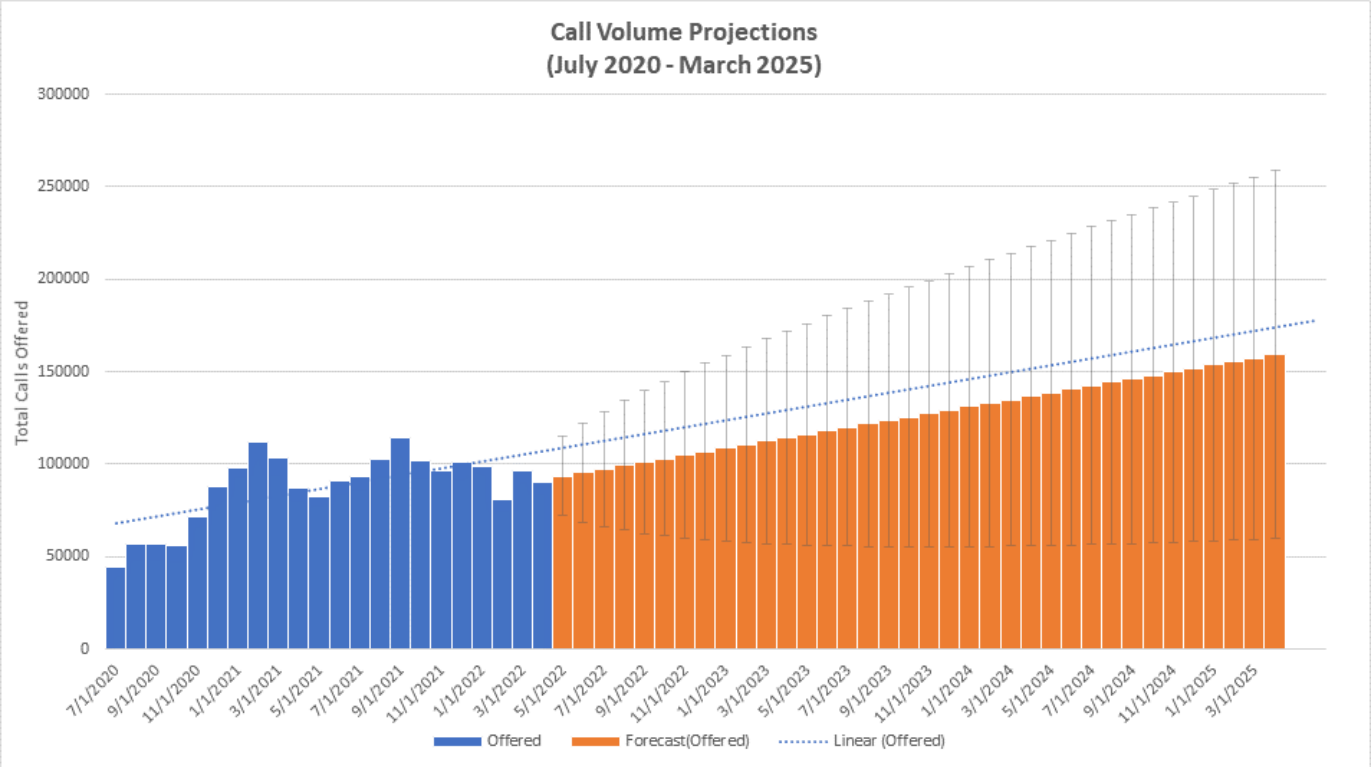


During a similar timeframe the VEC 800 number received 1,924,548 calls, staff were able to answer 1,074,642 of those calls. Note: individuals may have hung up due to wait times or calls may have disonnected prior to being able to answer, local offices also receive calls from individuals around eligibility and those calls are not includded in these numbers. During this timeframe the average wait time was 19 minutes for calls answered, average maximum wait time for calls answered was 2 hours and 5 minutes, and the average answer rate was 56%. It is important to note that the group answering these calls have not been receiving additional staff for growth or were reflected in the Department's eligibility workload model since transferring back from OHA, and has the highest caseload to worker ratio of any of our eligibility areas and is the highest since the ODHS first started reporting on those ratios decades ago.

Date	Received	Answered	Average Wait	Max Wait	Answer Rate
7/1/2020	44606	23939	0:19:23	2:20:40	53.67%
8/1/2020	57136	25489	0:26:56	2:30:41	44.61%
9/1/2020	57144	31497	0:19:54	2:00:00	55.12%
10/1/2020	56138	37861	0:09:45	1:35:42	67.44%
11/1/2020	71518	44831	0:13:11	1:12:30	62.68%
12/1/2020	87612	54341	0:14:39	1:38:58	62.02%
1/1/2021	98111	50845	0:20:58	1:51:25	51.82%
2/1/2021	112333	58603	0:20:52	2:02:30	52.17%
3/1/2021	103529	62231	0:16:14	1:39:57	60.11%
4/1/2021	87140	45617	0:22:51	2:15:32	52.35%

5/1/2021	82163	45502	0:21:08	2:14:04	55.38%
6/1/2021	90816	52918	0:18:14	2:07:56	58.27%
7/1/2021	93620	51138	0:21:04	2:24:32	54.62%
8/1/2021	102617	49854	0:27:49	2:27:59	48.58%
9/1/2021	114642	48901	0:32:56	2:36:42	42.66%
10/1/2021	101630	55145	0:19:58	2:33:16	54.26%
11/1/2021	96329	48635	0:21:22	2:31:40	50.49%
12/1/2021	101011	47491	0:23:55	2:33:38	47.02%
1/1/2022	98480	52681	0:21:25	2:34:01	53.49%
2/1/2022	80981	56595	0:11:17	1:32:42	69.89%
3/1/2022	96786	69992	0:08:54	1:32:40	72.32%
4/1/2022	90206	60536	0:11:04	1:46:38	67.11%

Based on the call volume, caseload growth, and our work we expect call volume to grow. Below is a graphical representaiton of forecasted call colume growth over the next several years.



Enabling Legislation/Program Authorization

This program and the requirements to do eligibility are from CFR and ORS.

Funding Streams

This program is funded from a cost allocation of federal funds from CMS and FNS, as well as general fund for programs not eligible for federal funds such as ERDC, TANF, or GF portions of Healthier Oregon or Veteran and COFA dental programs.

Funding Justification and Significant Changes from CSL to ARB

There are several policy option package investments in the ARB, in addition to the regular essential packages that are part of the normal budget build process.

PACKAGE NO.	PACKAGE TITLE:				
105	HEALTHIER OREGON PROGRAM (HOP)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
9,482,114			9,482,114	66	49.50
PACKAGE DESCRIPTION: Everyone in Oregon deserves access to the services they need, when they need them, to achieve well-being. More importantly, access to services needs to remain uninterrupted as people move through each stage of life and regardless of identity or place. Oregon Department of Human Services is requesting funding to provide long-term services and supports to eligible children and adults with disabilities regardless of their immigration status as directed by HB 3352, formerly called Cover All People and renamed "Healthier Oregon". This POP includes continuation of funding for population enrolled during 2022 through initial implementation of the program (ages 19 to 26 and 55+) and expansion of the services to the remainder of the age groups, including children, starting July 1, 2023. It also asks for ongoing funding for staff to help individuals access these services and supports, including case managers, and related staff who are critical to serving this population.					

PACKAGE NO.	PACKAGE TITLE:				
116	GRANT PGM FOR COMMUNITY-BASED ORGANIZATIONS				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
172,795			172,795	1	0.75

PACKAGE DESCRIPTION:

An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.

PACKAGE NO.	PACKAGE TITLE:				
142	COMBINED ELIGIBILITY WORKER				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
45,501,478		32,947,084	78,448,562	559	419.25

PACKAGE DESCRIPTION:

We all want a state in which everyone can access the supports they need to thrive. In Oregon, the ONE eligibility system is key in making this a reality. As of May 2022, 1.5 million Oregonians access critical medical, food, cash, and child care benefits through the ONE system – representing a historic level of need triggered in large part by the COVID-19 pandemic. We need to make sure that ONE operations has the necessary resources to process applications and administer benefits in a timely manner, because people can't thrive when they are facing interruptions in their ability to see a doctor, choosing between paying bills or buying food, losing paid work in order to care for a child or are unable to afford necessities for their families. Since its initial launch in 2020, the Oregon Eligibility Partnership has made significant improvements to business practices and computer systems in order to boost efficiency and maximize existing staff resources. Still, we don't have the staffing levels necessary to make sure everyone who is eligible gets what they need when they need it. Without these resources, vulnerable Oregonians may experience longer delays in applications processing, delays that can mean the difference between going hungry and having enough food for their families. Additionally, local businesses may see decreases in consumer spending stemming from delays in getting Supplemental Nutrition Assistance Program (SNAP) benefits out to families, and parents may face interruptions in their employment due to lack of needed child care benefits. In this policy option package, Oregon Department of Human Services is requesting position authority and funding for additional eligibility staff who will answer calls, assist people in person who are applying for or receiving benefits, process applications on a timely basis, and provide support to community partners who assist people in applying for benefits. These resources will help move the ONE system toward its goal of processing applications same day/next day and ensure Oregonians' timely access to benefits.

PACKAGE NO.	PACKAGE TITLE:				
143	ONE ONGOING MAINTENANCE				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
1,953,188		1,414,309	3,367,497	18	13.50

PACKAGE DESCRIPTION:

Oregon implemented the ONE system to help process eligibility applications for food, housing, cash, childcare and medical benefits for nearly 1.5 million Oregonians, the largest caseload in Oregon's history. With ONE we have created an opportunity for Oregonians to apply online, over the phone, through the mail or in person at any of our offices. Oregon has continued to invest in the ONE system since the initial release. But, like any system, there needs to be continued maintenance and then investment to meet the ever-changing needs of Oregonians and programs. The ONE system needs to continue to evolve our operating system to support a more integrated effort. ONE is a new system that individuals and community are still learning about. Engagement with community is critical to our success as we move from a siloed to an equality approach and then shift to an equity framework and person-centered, outcome-based system. Dedicated staffing is critical to connect with community and partners. Improved and sustainable ONE system operational support helps ensure constituents will see accurate and timely eligibility determinations, which will result in better access to basic food, health, cash, and childcare benefits in some of the most critical individual and family situations.

This proposal would provide one-time funding for paying off the final deliverables from the contract related to the Integrated Eligibility Project, closing out the largest IT project's obligations from the history of Oregon. Funding would also support ongoing maintenance and operations services, staffing and service dollars for needed system modifications to more quickly meet consumers' needs, support training, system changes and building better equitable practices based on feedback we have had from partners across Oregon. This POP also pays for the additional licenses and support for the Centralized Abuse Management system that is supported by OEP.

PACKAGE NO.	PACKAGE TITLE:				
201	WAIVER 115				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
1,214,443		1,484,308	2,698,751	32	12.80

PACKAGE DESCRIPTION:

We all want a state in which everyone has access to good health and well-being. This policy option package will allow the state to meaningfully improve health outcomes in communities who face historic and contemporary injustices, in alignment with Oregon Health Authority's goal of eliminating health inequities by 2030. ODHS is responsible for determining eligibility for state medical services, for the operation and maintenance of the ONE eligibility system, and for the delivery of long-term services and supports related to Medicaid.

This policy package would fund ODHS for related costs if OHA-HPA-05 is approved, which will enable the Oregon Health Authority (OHA) to execute and implement the policy and program changes outlined in 1115 Medicaid demonstration waiver and approved by the Centers for Medicare and Medicaid Services (CMS). These demonstrations occur within a specific time horizon and can be extended if necessary. This package would allow ODHS to fulfill the implementation obligation necessary to review eligibility as required by the waiver. OHA is currently negotiating the next five-year 1115 waiver with the Centers for Medicare and Medicaid Services (CMS) and expects that negotiations will likely not conclude until September 30, 2022. Therefore, precise outcomes of the negotiation are uncertain and placeholder language regarding this waiver POP is needed for now.

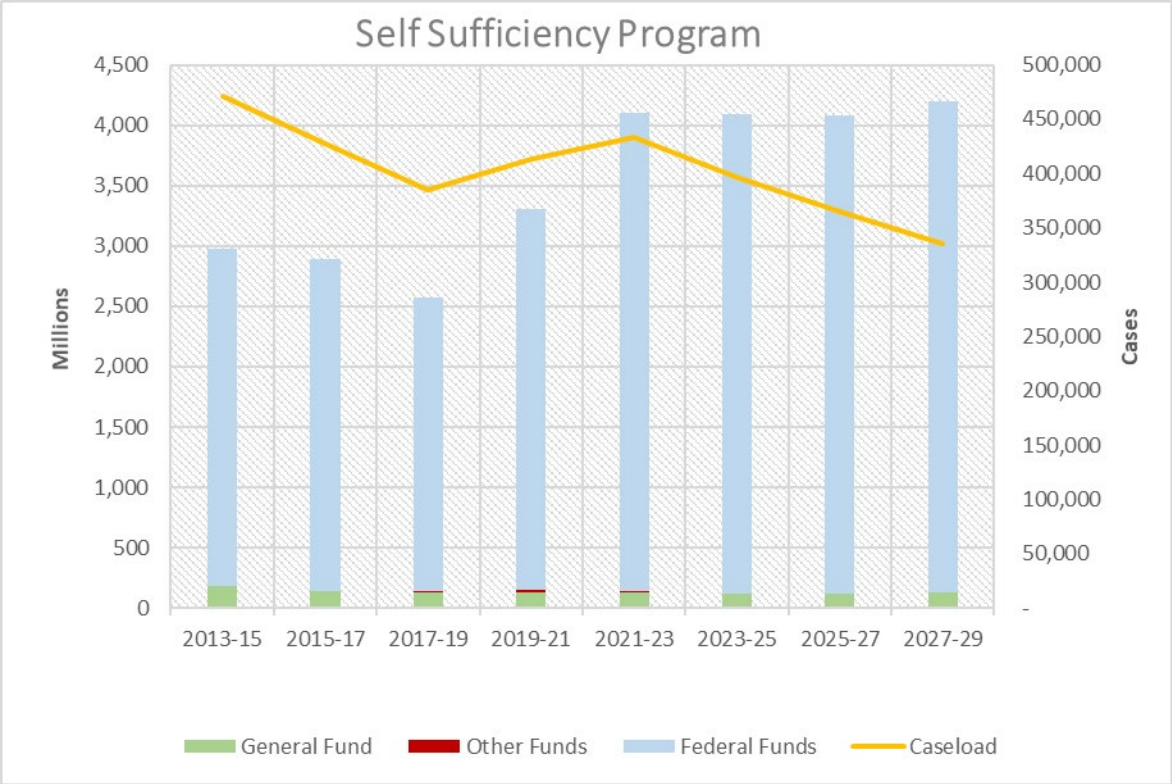
PACKAGE NO.	PACKAGE TITLE:				
202	Basic Health				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
21,336,397		21,336,397	42,672,794	275	206.25

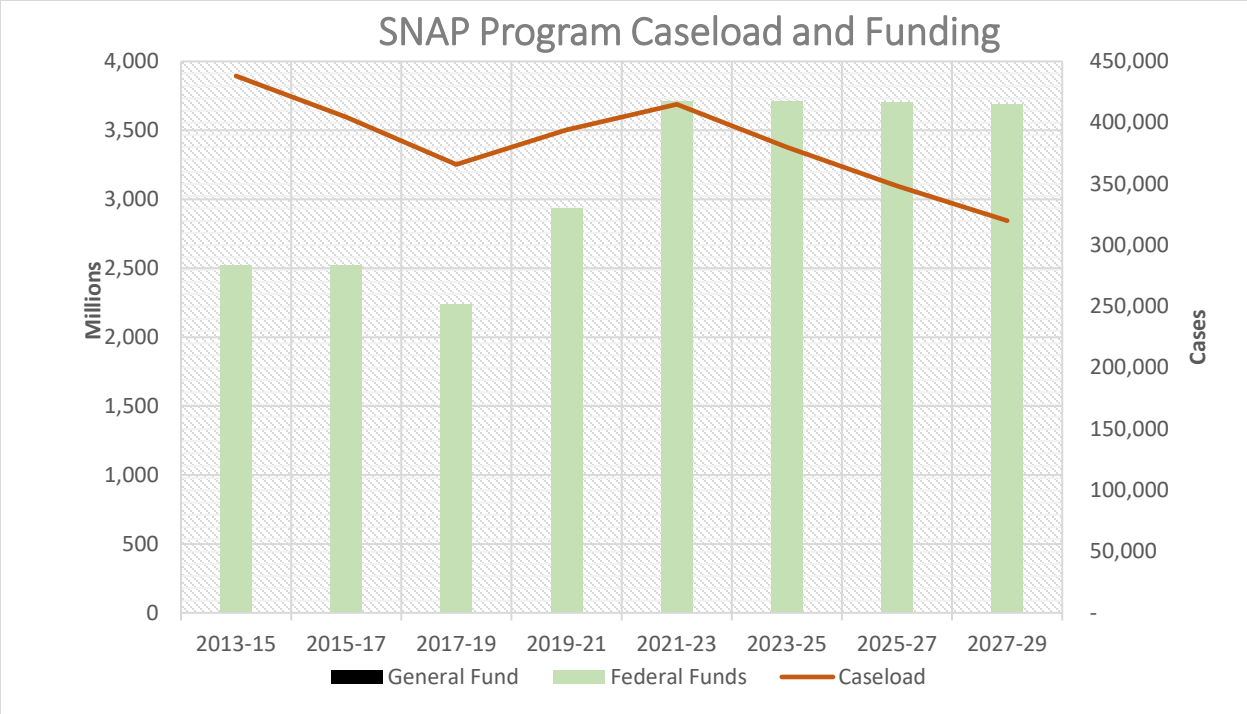
PACKAGE DESCRIPTION:

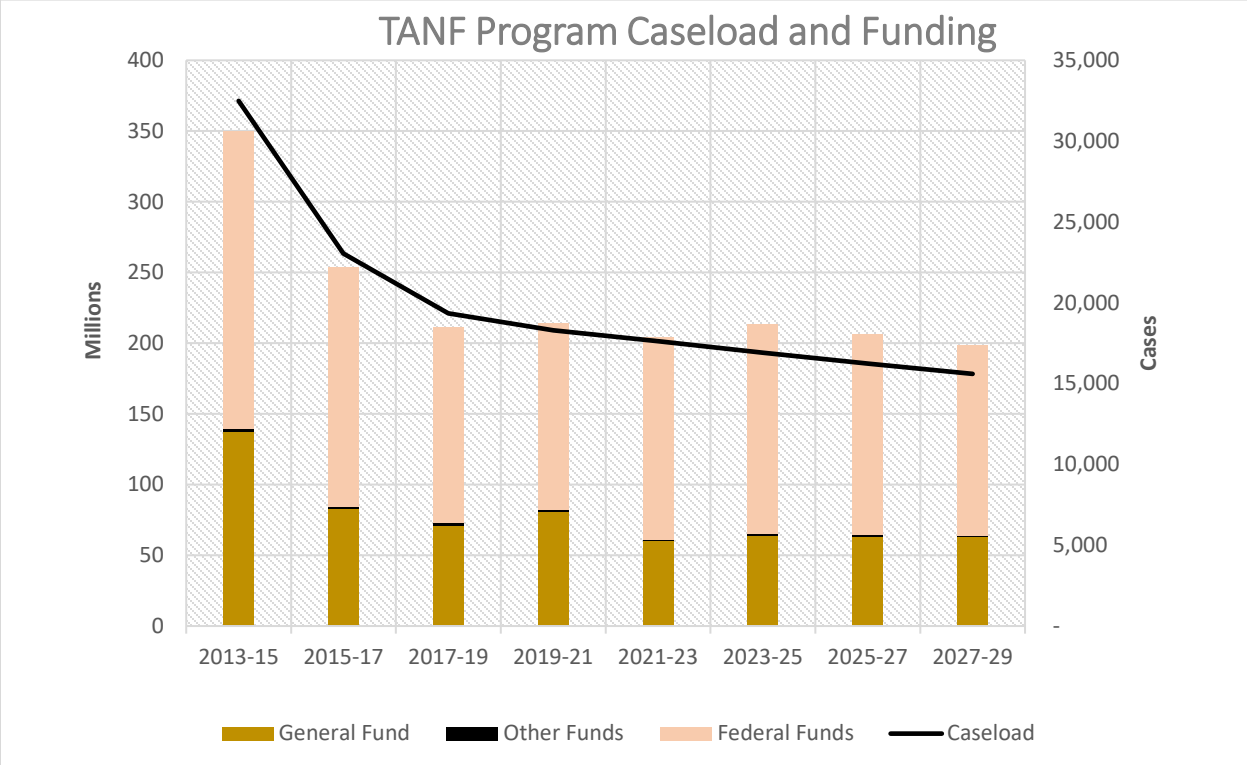
Oregon recognizes that health care is fundamental to people's and families' well-being. This shared value was a key driver behind the Oregon Health Plan (OHP), which prior to the pandemic covered approximately 1 million people. During the pandemic, federal rule changes allowed hundreds of thousands of additional Oregonians to access health care coverage through OHP, and today the plan covers one in three Oregonians. Without state action, many of these newly covered Oregonians will lose their health coverage when the federal public health emergency (PHE) expires, erasing the important gains in coverage Oregon achieved during the PHE. In 2022, the Oregon Legislature passed House Bill 4035 to fund the federally-mandated redeterminations process and preserve short-term coverage for people who earn too much income for Medicaid, but not enough to afford other coverage. The bill also authorized the development of a sustainable, long-term solution in the form of a Basic Health Program (BHP). This policy package would direct necessary funding to Oregon Department of Human Services to finish the work of implementing the BHP and allow us to move forward with an effective redetermination process. Together, these actions will help ensure that eligible Oregonians have uninterrupted access to critical medical benefits for themselves and their families.

Oregon Department of Human Services: Self-Sufficiency Programs

Primary Long-Term Focus Area:	Strengthening our foundations, responding to emergencies, and creating the future of human services
Secondary Long-Term Focus Area:	ODHS Equity North Star, community engagement
Program Contact:	Claire Seguin, Self-Sufficiency Programs Deputy Director







Program Overview

During the Oregon Legislature's 2022 session, Oregon Department of Human Services (ODHS) formally introduced three agency-wide goals – strengthening our foundations, responding to emergencies, and creating the future of human services. These goals have set the tone – and the primary long-term focus area – for Self-Sufficiency Programs' (SSP) efforts and legislative priorities. In addition, SSP is guided by the ODHS Equity North Star[1] and by the agency's Building Well-being Initiative (BWBI) to advance a future that all who live in Oregon, regardless of race, identity, or place, have the resources and support they need to achieve whole well-being for themselves, their families, and their communities.

SSP recognizes that our efforts must be grounded in the lived experience of individuals and families in Oregon, and the balance of decision-making power must be shifted to communities who are most affected. Accordingly, SSP will leverage community engagement efforts to identify shared concerns and community-driven solutions. SSP will act with intentionality, humility, curiosity, and respect while ensuring affected communities' access to complete information and ability to influence the outcomes.

SSP uses a Management System to prioritize, connect, enable and drive all work in a way that ensures every resource connects back to our goals and every employee receives the maximum authority to act to achieve those goals. In 2019, the Oregon Legislature approved new SSP Key Performance Measures (KPMs). Connecting to economic stability – a key social determinant of health – the KPMs track the following outcomes for SSP clients:

1. Housing stability
2. Food security
3. Living wages
4. Hope/self-efficacy

SSP's Fundamentals Map outlines the program's mission critical functions and operating principles. Operating and Supporting Processes each have their own distinct Process Measures. Process and Outcome measures described in the map are reviewed through a Quarterly Target Review (QTR) process to help SSP manage, make decisions, and understand the "why" behind our efforts. Disaggregated measures help SSP track the programs' ability to meet the needs of all populations served and to make necessary improvements. In addition to the four Key Performance Measures, SSP's work is evaluated based on the following:

[1] https://www.oregon.gov/dhs/DHSNEWS/Documents/ODHS-Equity-North-Star.pdf

Operating Processes

OP1 Fostering community and partner relationships
OP2 Developing and maintaining resources
OP3 Determining eligibility
OP4 Developing and supporting participant goals
OP5 Engaging individuals

Supporting Processes

SP1 Developing and implementing policy
SP2 Evaluating and improving performance
SP3 Managing business operations
SP4 Retaining a strong and professional internal workforce

Outcome Measures

O1 Highly engaged, skilled, professional workforce
O2 Workforce reflects communities
O3 Strong sustainable and outcome-oriented community relationship
O4 Improved economic stability
O5 Safe, stable, attached families
O6 Increased family goal attainment
O7 Awareness and access to services
O8 External customer satisfaction

In alignment with the agency-wide BWBI, the SSP's Fundamentals Map and the Key Performance, Process and Outcome Measures it contains, assist the program in understanding how we can build a future where all our services and resources are centered around whole-person well-being.

Program Funding Request

Self Sufficiency Program				
	GF	OF	FF	TF
21-23 LAB	225,932,332	226,972,926	3,962,873,145	4,415,778,403
23-25 ARB	390,103,012	1,653,855	3,999,362,445	4,391,119,312
Diff	164,170,680	(225,319,071)	36,489,300	(24,659,091)
%Diff	72.7%	-99.3%	0.9%	-0.6%

Program Description: Temporary Assistance for Needy Families

Program Contact: Annette Palmer

Temporary Assistance for Needy Families (TANF) is a public cash assistance program for children and their parent or caretaker experiencing low income. TANF is supported by both TANF Federal Funding and State General Funds. The program is designed to offer families assistance to meet their basic needs while they work toward economic stability. In addition to the cash portion of the program, TANF provides a wide range of services and programs, some of which include:

- Support services to assist with urgent needs like rent and utilities, and general needs like clothing and transportation for skill development and employment.
- Jobs Participation Incentive (JPI) program, a state funded employment program that provides an additional $10.00 in SNAP benefits to families with children.
- Employment Payments, a cash program provided to families with TANF benefits closed due to employment. Payments are spread over a three-month period following the closure of TANF benefits.
- State funded Pre-Supplemental Security Income (SFP) program, provides cash assistance, case management and professional level support assistance with the Social Security Administration application process.

Program Justification

Strengthening our Foundations

The program administers day-to-day operations and delivery of TANF benefits and services to eligible families living in poverty and connects families to community resources and contracted services. Families can take part in personalized assessments to assist in goal development and exploration of pathways to economic stability and a future beyond self-sufficiency program benefits. Transitional services are provided, lessening the benefit cliff often associated with leaving TANF.

Responding to Emergencies

Throughout the COVID-19 public health emergency (PHE), TANF program eligibility processes and rules were amended to minimize additional program

impacts on families. The COVID-19 PHE provided an opportunity for Oregon's TANF program to look at future readiness and response tactics in times of crisis.

Creating the Future of Human Services, ODHS Equity North Star

SSP is engaging in a redesign of the state's TANF program, collaborating with advocates, contracted partners, Tribal partners and individuals with lived experience to build a robust and equitable infrastructure. The redesign will ensure community is involved at every step of program design, delivery, and implementation with families at the center of decision making. Community listening sessions and other engagement practices guarantee the voices of families currently receiving TANF – and who have received TANF in the past – will be woven throughout the program's future design.

Community Engagement

The TANF program works with Tribal Nations and community partners to provide appropriate services to current TANF participants and as part of the ongoing TANF redesign process. The TANF program continues to invest funds into efforts that maximize benefit dollars targeted at building participant development in work related activities, identifying and building on skills, and leveraging community collaborations to provide solid foundations that lead to employment retention and advancement. Community engagement and lived experience voices are valued to develop and deliver a more equitable program.

Program Performance

TANF program performance is measured using the following Self-Sufficiency measures:

OP2 - Core resources available
OP3 - Timely issuance of SNAP benefits and all benefits
OP4 - Assessments completed
OP4 - Participants with active plan steps
OP5 - Participant show rate to appointments
OP5 - Family/Participant involvement
OP5 - Customer interaction reflect service equity
SP1 - Developing and implementing policy
SP2 - Accuracy of benefits SNAP, TANF, ERDC
SP3 - Program spending with SSP spending Plan
O2 - Workforce parity to communities

O4 - Living wage jobs
O7 - Eligible <18-year-olds receiving TANF

Enabling Legislation

The TANF program is authorized under Title IV-A of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), and the Deficit Reduction Act of 2005. A significant portion of the TANF eligibility criteria is codified in state statute chapters 411 and 412.

Program Description: Refugee Program

Program Contact: Annette Palmer

The Refugee Program serves individuals and families in immigration categories approved by the Federal Office of Refugee Resettlement (ORR): Refugees, Asylees, Cuban/Haitian entrants and parolees, Amerasians, victims of human trafficking (international) and certain family members, Iraqi/Afghan Special Immigrant Visa holders, and certain Parolees. The program provides cash assistance and medical assistance to refugees who are ineligible for Temporary Assistance for Needy Families (TANF) cash assistance and Medicaid. The program partners with Refugee Resettlement Agencies (RRA) and nonprofit community-based organizations to provide additional services.

Resettlement services are comprehensive. Initial resettlement and case management services are delivered by RRAs located in the Portland and Salem areas, where many refugees first seek services. These services may include essential tasks such as picking up refugees at the airport, finding them a place to live and helping to furnish their home with the necessities. Employment-related services are delivered by the Immigrant and Refugee Community Organization (IRCO). IRCO services include job search assistance, employment acculturation, pre-employment training, English language classes, citizenship and naturalization assistance.

Those served through the Refugee Program come from all over the world. During FFY 2021, Oregon's Refugee Program assisted people from 25 different countries. Most refugees who are resettled in the U.S. speak little to no English. Limited English capacity is expected and integrated into Refugee Program services.

Program Justification

Strengthening our Foundations

The Refugee Program administers benefits and services offered to refugees once they arrive in the U.S. Cash and medical assistance, employment services and acculturation services provide needed supports for refugees to restart their lives in the U.S. The Refugee Program works in collaboration with other ODHS programs, resettlement agencies, the Social Security Administration and community-based organizations to ensure families and individuals receive needed services and have a strong support system.

Responding to Emergencies

As overseas emergencies and disasters occur, many people seek protection in the U.S. The Refugee Program provides benefits and services while working with ODHS' Office of Resilience and Emergency Management (OREM), local resettlement agencies, community-based organizations and other government agencies to provide effective assistance to refugee communities. These collaborations are vital to ensuring families and individuals receive emergent services quickly.

Creating the Future of Human Services

The Refugee Program is expanding its contracted provider network to include more community-based organizations alongside the state's resettlement agencies. This brings a broad service array and additional culturally specific services to refugee communities. The Refugee Program is working collaboratively with Oregon's Office of Immigrant and Refugee Advancement to further develop and evolve the future of the program.

ODHS Equity North Star

Refugees coming to the U.S. have faced oppression and persecution in their country of origin. The Refugee Program aims to provide benefits and services with equity, accessibility and a trauma-informed approach. ODHS collaborates with RRAs and community organizations to support refugees. RRA staff and community partners represent a diverse population from a variety of cultures, and many have experienced the resettlement process firsthand as refugees themselves.

Community Engagement

The Refugee Program works directly with community-based organizations, RRAs, ODHS district offices and attends in-person and virtual listening sessions to hear

directly from Oregon's communities and refugees about their needs and experiences. Collaboration and information meetings occur frequently and are need-based. This is ensures ongoing dialogs and collaborations are in place to serve the refugee populations more equitably in Oregon.

Program Performance

The Refugee Program is not currently included in SSP's QTR measures and outcomes due to historic program structure and computer system integration. The program is in the process of building and maintaining data dashboards and updating its data collection system to broaden the scope of information that can be gathered. These additions will move the Refugee Program toward building QTR measures.

Enabling Legislation/Program Authorization

The Refugee Program is authorized and operates under the Federal Immigration and Nationality Act and the Refugee Act (8 U.S.C. 1522). The Refugee Program operates as a public assistance program under ORS 411.060, 409.010(2) (c), and 409.010(2) (h).

Program Description: Domestic Violence Programs

Program Contact: Kirstin Holman

SSP Domestic Violence Programs include three unique programs that support domestic violence and sexual assault (DVSA) survivors in crisis, provide ongoing safety planning and connect survivors to DVSA experts.

Temporary Assistance for Domestic Violence Survivors (TA-DVS)

TA-DVS provides short-term financial assistance, safety planning and connection to community resources for families affected by domestic violence when other resources are not available. TA-DVS is used to help domestic violence survivors and their children address their safety concerns and stabilize their living situation. This reduces the likelihood of the survivor returning to the domestic violence situation and can prevent life-threatening situations.

Co-located Domestic Violence (DV) Advocates Program

The Co-located DV Advocates Program contracts with local DVSA nonprofit agencies. DVSA advocates are housed in Child Welfare (CW) and Self-Sufficiency

(SSP) Offices to provide confidential advocacy services to ODHS survivors and staff.

Survivor Investment Partnership (SIP)

SIP provides flexible financial assistance to survivors of domestic and sexual violence and builds capacity to expand the agency's collaborative efforts for survivors with Oregon Tribal Nations and culturally specific DVSA providers. SIP funding allows for survivors to access needed supports safely within their communities in a culturally responsive way.

Program Justification

Strengthening our Foundations, Responding to Emergencies

By providing financial and community support to help survivors gain stability away from the domestic violence situation, SSP's Domestic Violence Programs strengthen foundations of the individuals, families and communities we serve. These programs respond to emergencies every day as survivors seek services during crisis periods of experiencing and fleeing domestic violence.

Creating the Future of Human Services

Developing and enhancing programs such as SIP to meet the needs of survivors in their own communities, works toward creating the future of human services by empowering communities and survivors to navigate their safety in a trauma-informed, equitable and culturally appropriate way.

ODHS Equity North Star

Domestic Violence Programs partner with communities to develop programs which strive to make services accessible to underserved, culturally specific populations. The SIP program was developed to provide funding to Confederated Tribes of Oregon, as well as culturally specific DVSA organizations, to give communities autonomy on how best to provide services for their members.

Community Engagement

Community engagement in all our Domestic Violence Programs continues to be prioritized, including quarterly meetings with co-located advocates both statewide and on a local level, ongoing collaboration with Oregon Confederated Tribes and culturally diverse community members, as well as meetings, trainings and advanced education opportunities provided to staff who support families in crisis.

Program Performance

At this time, no formal QTRs exist for SSP's Domestic Violence Programs due to the unique circumstances and confidentiality of survivors. Staff supporting the program's domestic violence support efforts continue to work on developing measures that will provide data on program efficacy.

Enabling Legislation

Temporary Assistance for Domestic Violence Survivors (TA-DVS)

Domestic violence emergency assistance, also known as TA-DVS, is mandated under ORS 411.117 (1) (e). Federal authorization through the TANF block grant includes use of the TANF funds to meet non-recurrent, short-term benefits to address specific crisis situations, including domestic violence. (See 45CFR 260.31 (b))

Co-located Domestic Violence Advocates Program

This program is enabled by HB 5030-A of the 2011 Oregon Legislative Assembly Joint Committee on Ways and Means. The bill includes funding for contracted domestic violence specialists in ODHS office.

Survivor Investment Partnership (SIP)

SIP is enabled by SB 5529 of the 2021 Oregon Legislative Assembly Joint Committee on Ways and Means. The bill includes funding to contract with Confederated Tribes in Oregon and culturally specific DVSA organizations to provide DVSA services to survivors. This flexible funding can be used to address safety needs not able to be supported through TA-DVS. The bill also funds three positions within ODHS to implement the SIP program.

Program Description: Employment and Training Programs

Program Contact: John Briscoe

SSP Employment and Training Programs include the TANF Job Opportunity and Basic Skills (JOBS) program, SNAP Training and Employment Program (STEP), and the Able-Bodied Adults Without Dependents (ABAWD) program. Each of these offers a variety of employment and training services to TANF and SNAP participants, including stabilization, well-being, training and education, job preparation and employment placement services.

JOBS Basic and JOBS Separate State Program Services

The JOBS Program is funded through a combination of TANF Federal Funding and State General Fund. Due to restrictions of TANF Federal Funding, services to some participants are provided fully through State General Fund. JOBS services are offered by contracted local service providers. Participants are eligible for payments from ODHS to help families stabilize and engage in a personal development plan.

SNAP Employment & Training

The SNAP Employment and Training Programs – STEP and ABAWD – are funded by a combination of SNAP Federal Funding, State General Fund, and local investment which pulls down additional federal funds. State General Fund investment allows for expanded support service payments. SNAP Employment and Training services are offered by contracted local service providers. Participants are eligible for payments to help engage in their personal employment plan.

Program Justification

Creating the Future of Human Services

Employment and training services utilize a family engagement model. Using a person-centered, trauma-informed model encourages empowerment and ownership of a person's plan to achieve personal stabilization and self-sufficiency. Oregon's Employment and Training Programs are recognized nationally and have been used as models for setting future program redesign federally.

ODHS Equity North Star

Employment and training services provide streamlined access to people experiencing low income, offering holistic supports to close opportunity gaps. These services make it possible for TANF and SNAP participants to get individualized support needed to build a pathway to economic mobility. Oregon's TANF and SNAP participants represent the state's diversity. Program services are

designed to ensure activities are accessible to all, are culturally appropriate, are delivered with service equity and include diverse representation among providers.

Community Engagement

Employment and Training services have benefitted from community focus groups, with an emphasis on prioritizing participant voice and identifying gaps between current services and community needs. Employment and Training services have been expanded upon based on the needs expressed in such forums. Employment and Training will continue to evaluate policies and program design based on community voice.

Program Performance

Employment and Training program performance is measured using the following Self-Sufficiency measures:

OP2 - Core resources available
OP4 - Participants with active plan steps
OP5 - Family/Participant involvement
O4 - Living wage jobs

Enabling Legislation

Temporary Assistance for Needy Families

The TANF program is authorized under Title IV-A of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), and the Deficit Reduction Act of 2005. A significant portion of the JOBS program is codified in State statute chapters 411 and 412.

SNAP Employment and Training

The SNAP Employment and Training program is mandated by Federal legislation currently found in the 2018 Agricultural Improvement Act signed in 2019.

Program Description: Employment Related Day Care

Program Contact: Kirstin Holman

The Employment Related Day Care (ERDC) program helps families experiencing low income pay for quality child care. Child care helps parents stay employed and gain self-sufficiency by assisting with the consistent child care parents need to remain on the job. Quality child care provides a stable space for children to learn and build upon key developmental milestones while their parents are away at work and prepares them for kindergarten and beyond.

HB 3073 from Oregon's 2021 legislative session moves the ERDC program to the newly created Department of Early Learning and Care (DELC). The transfer consolidates state-run child care subsidy programs into one agency, bringing greater program alignment and better access for families. The legislation included expansion and enhancements to the ERDC program. ODHS will be collaborating with the Early Learning Division to move the program and implement significant policy updates by July 1, 2023. ODHS will continue to assess program eligibility through the ONE system.

Availability of subsidized child care is a federal requirement for Oregon's Child Care Development Fund (CCDF) federal funding. CCDF funding maintains Oregon's child care licensing system.

Program Justification

Creating the Future of Human Services

ODHS holds contracts with various school districts to pay for child care while teen parents are completing their high school diplomas and/or GEDs; program enhancements will bring teen parents into the eligible population within ERDC with the transition to DELC. This will allow all teen parents across the state the same access to quality care while they complete high school or their GED.

Future enhancements include interlinking ERDC with TANF JOBS related child care. Families who come to qualify for ERDC after receiving child care assistance through TANF JOBS support services payments will be able to obtain and maintain employment by securing child care before their job stability is put at risk by interlinking these programs.

In ERDC's transition to DELC, eligibility criteria will be expanded to allow for students to access child care subsidy without the requirement to be employed. Presently, students of higher education can only qualify for ERDC if they are

working, and their student hours are limited to the number of their employment hours. This expansion will allow for students of higher education as well as teen parents completing their high school diploma or GED to have provision of child care coverage.

Additionally, families will have the opportunity to access child care assistance through ERDC when unable to work due to caring for their child's needs, such as a child's illness. Families will also be able to qualify at initial certification when on leave for medical reasons – for example, maternity leave when another child is in care with a provider.

ODHS Equity North Star

The ERDC program serves families from a variety of cultural and linguistic backgrounds in urban and rural communities who need assistance covering child care costs through subsidy payments to a chosen child care provider. By building and sustaining connections to child care and early education programs as well as safety net programs, this approach provides broader access and outreach opportunities to connect with Oregonians with an array of child care needs.

Policy changes are being made to the ERDC program in its transition to the Department of Early Learning and Care to allow for eligibility to undocumented children. Current policy does not allow for this population to be eligible for child care subsidy despite child care need.

Community Engagement

Child care subsidy programs engage with child care providers and provider unions with the goal of giving additional stability to Oregon's child care provider base, including both licensed programs and facilities as well as license-exempt home-based care, commonly referred to as "family, friend, and neighbor care." All provider types can become listed and approved for payment through ODHS/DELC to be paid on behalf of eligible families receiving subsidy.

Program Performance

ERDC program performance is measured by the eligible working families receiving ERDC (<6 and 6 to <13).

Enabling Legislation

The ERDC program is authorized under the Code of Federal Regulations Title 45 Public Welfare, Subtitle A Department of Health and Human Services, Subchapter A General Administration, Part 98 Child Care and Development Fund (CCDF). The Department of Education, Early Learning Division is currently Oregon's lead agency for CCDF and transfers approximately 70% of CCDF funds to ODHS to maintain the child care subsidy program.

A significant portion of the ERDC program is codified in State statute chapters 329.

Program Description: Food and Nutrition Programs

Program Contact: Heather Miles

Supplemental Nutrition Assistance Program (SNAP)

The Oregon Department of Human Services (ODHS) administers the federal Supplemental Nutrition Assistance Program (SNAP) which provides a food benefit and additional services to Oregonians that meet financial and non-financial eligibility criteria. Program benefits are 100% Federal Funds and program administration is 50% Federal and 50% General Fund. Most of the administration funding is allocated towards Eligibility Workers to ensure benefit eligibility and issuance is responsive and timely.

SNAP EBT

SNAP benefits are issued monthly onto an Electronic Benefit Transfer card (EBT) for households to use to purchase eligible foods at USDA Food and Nutrition Service (FNS) approved retailers/vendors and farmer's markets. Oregon SNAP uses the vendor FIS Solutions to support timely delivery of electronic benefits onto Oregon EBT cards through ONE system interfaces.

SNAP Cash Out

To qualify for SNAP Cash Out, all individuals in the household must be considered disabled or aged 65 and older and residing in Clackamas, Columbia, Multnomah and Washington counties. Qualifying households receive their monthly allotment as cash on their EBT card or through direct

deposit. This is a federally approved program option that cannot be expanded beyond these four Oregon counties but is 100% funded for benefit issuance.

SNAP Nutrition Education

Oregon's SNAP Nutrition Education (SNAP-Ed) program is administered through a partnership with Oregon State University Extension Services (OSU-EXT). SNAP-Ed is an evidence-based federal grant-funded program that helps people lead healthy, active lives by working alongside people to identify ways to make their SNAP dollars stretch, how to shop for and cook healthy meals, and how to stay physically active.

SNAP Outreach

SNAP Outreach passes through federal funding to 13 contracted community agencies statewide to support activities that distribute information about SNAP, dispel myths and offer application assistance to individuals. Contracted community partners may request up to 50% federal reimbursement for costs related to SNAP Outreach allowable activities which expands the reach of the SNAP and reduces barriers to accessing the program.

Food Assistance

The Emergency Food Assistance Program (TEFAP) and Commodity Supplemental Food Program (CSFP) are federal food assistance programs wherein ODHS partners with the Oregon Food Bank network to administer food assistance across the state through local food pantries and food boxes.

Program Justification

Strengthening our Foundations

Oregon SNAP continues to focus on increasing awareness and participation for the program to ensure that access and availability of services are provided in a timely and accurate manner. Where possible, TEFAP and CSFP program funding is used to purchase and distribute more locally grown, fresh, nutrient dense and culturally specific foods throughout Oregon. Leveraging federal food dollars through program funding means that any General Fund allocations can stretch the program

reach beyond the federal investment and is not duplicative of federal food orders. TEFAP and CSFP programming help support Oregon's larger food infrastructure and reaches program recipients beyond other food programming like SNAP.

Responding to Emergencies

SNAP provides food assistance through disaster and COVID-19 pandemic-related food programs such as Emergency Allotment (EA) benefits, Disaster SNAP (DSNAP) and Pandemic EBT (PEBT). TEFAP can provide the Disaster Household Distribution (DHD) program in the event of a state disaster. This program can temporarily increase food resources in affected communities through food pantries prior to the activation of Disaster SNAP.

Creating the Future of Human Services

SNAP benefits help to reduce hunger as part of Oregon's larger food network and are an integral part of strengthening an individual/household's ability to navigate temporary or larger scale crisis. The SNAP-Ed State Plan is 100% federally funded block grant that is used to provide evidence-based services to increase SNAP participants awareness of stretching food dollars, increasing awareness of healthy options, increasing knowledge and understanding that supports increased physical activity and to work with community partners to build healthier and stronger community foundations.

ODHS Equity North Star

In 2021, 1 in 6 Oregonians on average received SNAP benefits across all age ranges, race and ethnicity and disabilities. The program continues to pursue waivers and state options that increase the program's reach to underserved populations. SNAP EBT and SNAP Cash Out increase access and improve connections for all SNAP participants, ensuring that flexibility and usage of the program is supported through benefit delivery systems.

Culturally specific workgroups have been implemented for SNAP-Ed to address needs for under-represented communities including older adults, Tribal partners, Pacific Islander, Latinx and African Heritage communities. TEFAP and CSFP ensure that additional food resources are available throughout the state's 20 regional food banks and 1,400 food pantries in the food bank network.

Program Performance

SNAP

The program is measured through state and federal standards for timely issuance of benefits (new and recertifications), accuracy of benefit calculations, and ease of accessibility and connection to services. Evaluation is assessed in Self-Sufficiency measures OP2, OP3, SP1, SP2, O4, O7 and O8.

SNAP EBT

The program is measured through state and federal standards for timely issuance of benefits (new and recertifications), accuracy of benefit calculations, and ease of accessibility and connection to services. Evaluation is assessed in Self-Sufficiency measures OP3, SP1, SP2, SP3, O7 and O8.

SNAP Cash Out

The program is measured through state and federal standards for timely issuance of benefits (new and recertifications), accuracy of benefit calculations, and ease of accessibility and connection to services. Evaluation is assessed in Self-Sufficiency measures OP3, SP1, SP2, O7 and O8.

SNAP-Ed

SNAP-Ed performance is measured through state and federal standards that are part of an evidence-based national framework. These measures are not currently part of the ODHS measures but there are connecting elements that can demonstrate links.

SNAP Outreach

SNAP Outreach activities are incorporated into the agencies broader service array which better connects individuals to supports the family in reaching goals. Evaluation is assessed in Self-Sufficiency measures OP3, SP1, SP2, SP3, O7 and O8.

Food Assistance

TEFAP and CSFP performance is evaluated throughout the year in a combination of program funding evaluation and onsite evaluation for quality control of food storage and oversight per federal regulations. Evaluation is assessed partly in Self-Sufficiency measure SP3.

Enabling Legislation

SNAP is guided by federal legislation found in the "Farm Bill" authorized by The Agricultural Act of 2014 (P.L. 113-79, Feb 7, 2014). Program policy is reauthorized every five years through the Farm Bill.

Program Description: Family Support and Connections

Program Contact: Xochitl Esparza

Family Support and Connections (FS&C) is a child abuse and neglect primary and secondary prevention program that provides a wide array of contracted services to TANF eligible families including home visits, resource brokering and parenting classes. In 2022, the Oregon Legislature approved an expansion to include families receiving SNAP benefits. FS&C is intended for eligible families who may be at risk for involvement with the child welfare system.

Program Justification

Strengthening our Foundations

FS&C focuses on building safer, healthier communities by promoting its goal of increasing protective factors and promoting child and family health and well-being. By achieving this goal, the program supports the community in reducing or preventing children from families experiencing low income from entering the child welfare system.

Research consistently demonstrates children and young people have better outcomes when they remain safely in their homes while receiving services and allowing them to maintain ties with their family, friends, schools and communities.[2] By supporting family preservation and prevention, FS&C is a critical part of Oregon's service continuum, supporting existing agency and state efforts such as the 2020-2024 Healthier Together Oregon plan and the CW Vision for Transformation.

ODHS Equity North Star

[2] Child Welfare Information Gateway. Children's Bureau/ACYF/ACF/HHS (April 2021). "In-Home Services to Strengthen Children and Families." Available at: https://www.childwelfare.gov/pubPDFs/inhome_services.pdf

Recent research suggests investments in prevention go beyond protecting children from maltreatment to preventing maltreatment's devastating consequences.[3] It is recognized that racial disparities in child welfare impact Black, Indigenous, and families with lower socioeconomic status disproportionately.

To better implement cultural responsiveness in service delivery and increase outreach and access to FS&C services prioritizing Black, Indigenous, People of Color, and rural communities, designated funding is allocated for FS&C providers to be used for what may be needed in the community such as hiring staff representative of the diversity of the local community, purchasing culturally specific curriculum, and utilizing translation and interpretation services for materials and communication needs. Furthermore, with the funding increase approved in 2022, FS&C is pursuing expanded access and outreach for these populations offering the funding opportunity to culturally specific organizations and Oregon Tribal Nations.

Community Engagement

FS&C program staff work within the existing community structure to coordinate referrals and deliver direct services where gaps or needs exist for a family. This includes collaboration with Self Sufficiency (SSP) and Child Welfare (CW) program staff and contracted and other community partners.

FS&C contracted providers organize local core teams to coordinate program delivery and services. Each district's program is guided by local steering committees comprised of representatives from SSP, Child Welfare, and public and private partners that may include local service providers, consumer parents, advocates, faith-based representatives, persons with disabilities and members of the public. Steering committees must include cultural diversity in the district they serve. Steering committees provide advice, guidance, and support for the FS&C Core Team concerning program requirements such as, planning and implementation, overcoming barriers to services, community relations and advocacy, process improvement and goal setting.

Program Performance

The primary performance measure for FS&C is the percentage of children entering foster care who received TANF and or SNAP 60 days prior to foster care entry. Because the families FS&C serves are connected to TANF and/or SNAP, they may

[3] https://www.childwelfare.gov/pubPDFs/cm_prevention.pdf

be included in SSP's Key Performance Measures: living wage jobs, housing stability, food security, self-efficacy/hope.

Enabling Legislation

Title II of the Child Abuse Prevention and Treatment Act (CAPTA), as amended by P.L. 111-320, authorizes grant funds to be released to the states and names the program Community-Based Grants for the Prevention of Child Abuse and Neglect (CBCAP). The grant requires a 20 percent match of State General Fund dollars.

The TANF program is authorized under Title IV-A of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), and the Deficit Reduction Act of 2005.

Youth Experiencing Homelessness Program

Program Contact: Xochitl Esparza

The Youth Experiencing Homelessness Program (YEHP) provides services and supports to unaccompanied youth and young adults under the age of 24 without shelter who are not able to safely reside with a parent or guardian. The program administers funding to local nonprofit providers across the state providing shelter services, drop-in and outreach services, job development and mentoring services, and housing supports such as host homes and transitional living programming. ODHS partners with a cross-system advisory group to coordinate statewide policy and planning to address the needs of youth experiencing homelessness.

Program Justification

Creating the Future of Human Services

YEHP is testing new ways to address youth homelessness such as deploying Direct Cash Transfers to young people and providing the necessary supports so that they can safely meet their housing needs. Additionally, the program is creating the structure necessary to create a Youth Advisory Board so that young people routinely inform program design for YEHP and sister agencies serving youth.

ODHS Equity North Star

National estimates provide that approximately one in 30 youth (aged 13-17) and one in 10 young adults (aged 18-25) experience homelessness over the course of a year.[4] Black, Indigenous, youth of color and LGBTQ2S+ youth experience higher rates of homelessness.

Community Engagement

ODHS convenes a Youth Experiencing Homelessness Advisory Committee involving the Youth Development Division, the Housing and Community Services Department, the Department of Education, the Oregon Youth Authority among other agencies and nonprofit organizations to develop a comprehensive and coordinated approach to services and support for youth experiencing homelessness and their families.

In 2021, ODHS in collaboration with the Corporation for Supportive Housing (CSH) released the results of a statewide analysis that examined the need and pipeline for housing and services for youth experiencing or at risk of experiencing homelessness.[5] Unique in the study was a comprehensive effort to recruit and engage youth across the state with lived experience of homelessness to inform and design housing and services programs that may receive state funding. The project was born from the 2020 session of the Oregon Legislature after a proposed bill requested a study to better understand the level of investment required to address statewide housing and service gaps for young people.

Program Performance

YEHP measures are included in contracts with youth-serving community-based organizations. Several contracts include measures related to permanent connections for youth, education, well-being and housing stability.

Enabling Legislation/Program Authorization

Oregon State Statute 417.799 gives ODHS responsibility for coordinating statewide planning for delivery of services to youth experiencing homelessness.

[4] Dworsky, A., Gitlow, E., Horwitz, B., & Samuels, G. M. (2019). *Missed opportunities: Pathways from foster care to youth homelessness in America*. Chicago, IL: Chapin Hall at the University of Chicago.

[5] https://www.oregon.gov/dhs/CHILDREN/Homeless-Youth/Documents/CSH-YH-Needs.pdf

My Future-My Choice

Program Contact: Bill Baney

Program Description

The My Future-My Choice (MFMC) program includes age appropriate, medically accurate sexual health education curriculum and services for middle school students and a high school leadership and mentor component. MFMC's goals are to promote sexual risk avoidance as the healthiest choice for young people, increase knowledge of sexual health and promote the benefits of delaying sexual activity using a positive youth development framework.

MFMC seeks to support higher risk youth populations who experience elevated rates of sexually transmitted illnesses (STIs), unplanned pregnancy and sexual violence in their communities. These services support community prevention efforts to enable TANF families in breaking the generational dependence on public assistance. MFMC expands on the historical teen pregnancy prevention program to provide education and tools for youth to resist multiple risk-taking behaviors. ODHS partners with the Oregon Department of Education and the MFMC Advisory Committee to develop and implement the program.

Program Justification

Strengthening our Foundations

Oregon teen pregnancy rates have consistently stayed below the national average. According to national data from the U.S. Department of Health and Human Services, the 2019 national rate for births to teens between the ages of 15 to 19 is 16.7 per 1,000 teens. In Oregon, the teen pregnancy rate among youth 15 to 19 years continues to decline, from 38.6 per 1,000 in 2010 to 18.1 per 1,000 in 2019. Similarly, the teen birth rate among youth 15 to 19 years declined from 28.45 per 1,000 in 2010 to 9.6 per 1,000 in 2020.

MFMC works closely with system/sector partners at the state and local level to ensure aligned, coordinated and deliberate access to resources and materials to increase youth sexual health education and services.

Community Engagement

MFMC utilizes a peer mentor/training model. High school students lead or co-lead 5 of the 10 program modules. In addition, the program uses a Teen Advisory Board (TAB) to help inform curriculum revision, material development and delivery format. TAB members are provided with compensation (stipends) for the time and expertise offered.

Program Performance

No specific or unique QTR measures have been identified for MFMC because objectives associated with the program are tailored to meet the needs of a comprehensive sexual health program. As a program to reduce teen pregnancy, MFMC is designed as a primary prevention program.

Enabling Legislation

The Oregon Legislature passed HB 2509 in 2009, which requires that all schools provide comprehensive sexual health education. The My Future–My Choice curriculum complies with all requirements of this legislation for sixth grade. ODHS partners with Oregon Health Authority and Oregon Department of Education to share in responsibility for collaborative efforts to increase youth sexual health education and services.

Other Family Support

Program Contact: James Barta, Xochitl Esparza

Program Description

The Tax-Filing Infrastructure Grant Program is a funding opportunity for culturally specific and responsive organizations, Tribal governments, and under-resourced rural community service organizations. The goal of the program is to improve access for low-income Oregonians to the Earned Income Tax Credit (EITC) and other tax benefits. Grant funding allows community-based organizations to offer tax navigation, preparation and filing services. Through the utilization of existing tax benefits, Oregon residents have the opportunity to bring more than $100 million in federal dollars to the state's economy every year.

These grants will:

- Strengthen the existing network of culturally specific and responsive tax preparation organizations;
- Bring tax navigation and preparation services to geographically diverse areas of Oregon;
- Improve organizational capacity of tax preparation organizations;
- Expand the recruitment and retention of qualified tax preparers; and
- Fund the development of technological resources, training systems, outreach and education materials to ensure the removal of tax-filing barriers.

This program will seat an advisory council representing different populations throughout Oregon to support the process and implementation of the grant program.

Program Justification

Removing Barriers to Economic Stability

Oregon has a historically low participation rate in EITC. It has been the second-to-last state in the use of the credit among eligible families, despite EITC's proven ability to boost the income of low-wage earning families.[6] The benefits of EITC are well-documented, and between 2011-2013, federal EITC, along with the federal Child Tax Credit (CTC), helped to lift 129,000 Oregonians out of poverty.[7] Appropriate tax preparation and navigation assistance should be provided to help eligible Oregonians overcome barriers preventing access to these benefits. This grant program promises to strengthen and grow Oregon's network of free taxpayer services and ensure that these organizations are culturally diverse and meet the needs of residents. State funding will allow more organizations flexibility in securing needed funds and build the capacity to offer free tax services and support.

ODHS Equity North Star, Community Engagement

This program is directed to populations who, due to systemic discrimination, are underutilizing valuable cash assistance. By working with community-based organizations who serve the affected communities, Oregon will more effectively reach all Oregonians regardless of their identity or place. This program will reach all parts of the state and all populations, particularly those underserved by existing

6 Bauer, Janet; Oregon Center for Public Policy. 2022. "*HB 4117: Invest in Taxpayer Assistance*." Oregon Center for Public Policy. February 4. Accessed July 11, 2022. https://www.ocpp.org/2022/02/04/hb-4117-invest-taxpayer-assistance/.

7 Oregon Fact Sheet: Tax Credits Promote Work and Fight Poverty, Center on Budget and Policy Priorities, September 2016.

tax-filing infrastructure. Expanding access to tax services in Oregon can advance long-term, equitable, antiracist policies that can upend existing inequalities.

Program Performance

Program performance measures are to be determined. It will take an estimated three years to receive the data to determine the rate of eligible Oregonians signing up for credits such as EITC. A likely short-term measure will be community partner reports detailing the number of Oregonians filing their taxes.

Enabling Legislation/Program Authorization

The Oregon Legislature passed HB 4117 in February 2022, which gives ODHS responsibility for coordinating statewide planning for the delivery of services. The Tax-Filing Infrastructure Grant Program complies with the requirements of this legislation.

Funding Resources

The Self Sufficiency Program uses a combination of general and federal fund resources. The TANF Program requires a minimum state expenditure level, known as Maintenance of Effort (MOE)

Total fund split is 96.5% Federal fund, 3% Other fund and <1% General fund

Federal and Other Fund Splits:

Food Stamp	90%	SNAP benefits are 100 percent federally funded. Oregon is responsible for 50 percent of the administrative costs. Oregon's portion of the administrative costs for SNAP comes from the State General Fund.

TANF Block Grant	6.0%	The TANF Federal block grant funds programs throughout DHS and requires a minimum state expenditure level, known as Maintenance of Effort (MOE). The TANF program is authorized under Title IV-A of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), and the Deficit Reduction Act of 2005.
Federal Funds - Other	3%	Consists of multiple grants which include but are not limited to; Able Bodied Adults with childrean, Abstinence Education, Emergency Food Assistance and Title XX Social Services Block Grant.
Other Funds	<1%	Primarily the Rescue Plan Act for the Food Assistance program with some Miscellaneous funds related to the JOBs and TANF program

Funding Justification and Significant Changes to 21-23 CSL

Self Sufficiency will be putting forward six policy option package investments impacting this area for the upcoming 2023 legislative session. The regular essential packages are included in the Agency Request Budget and are part of the normal budget build process. Staff costs are located in the Design and Delivery Program Unit form.

PACKAGE NO.	PACKAGE TITLE:				
135	TANF Redesign				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
118,582,058		24,541,209	143,123,267	n/a	n/a

PACKAGE DESCRIPTION:

Every child is filled with tremendous promise – and we have a shared obligation to foster that promise. That means supporting families in ways that maximize their capacity for strong, caring relationships, and reducing the financial stressors that can contribute to child neglect, involvement with child welfare systems, and other forms of childhood adversity. This policy option package, developed with the TANF Redesign Partnership and the Poverty Relief Task Force, is an important step in that direction, helping families access more of the resources and financial flexibility they need to achieve well-being and economic stability. By increasing the monthly Temporary Assistance to Needy Families (TANF) cash grant to 50 percent of the Federal Poverty Limit, ending TANF time limits, and expanding program eligibility, the package represents a data-informed strategy for preventing child neglect and improving long-term outcomes for children. At a time when Oregon families are facing rapidly rising costs of living and ongoing housing challenges, this upstream solution is needed more than ever.

PACKAGE NO.	PACKAGE TITLE:				
136	Youth Experiencing Homelessness Program Expansion				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
12,601,500			12,601,500	n/a	n/a

PACKAGE DESCRIPTION:

Every young person deserves safe, stable housing. And yet every night in Oregon, thousands of unaccompanied young people go to sleep in tents, abandoned buildings, makeshift shelters, or on the couches of friends or strangers – all without the security of a home or family. We have a shared obligation to support youth who are experiencing homelessness, helping them not only to find housing, but also to access the wider array of services they need to achieve well-being and reach their full potential. Oregon Department of Human Services' Youth Experiencing Homelessness Program (YEHP) partners with impacted youth, community organizations, and state agencies in an effort to provide these services, help youth secure housing, and prevent homelessness among youth across the state. To do this work effectively, ODHS is requesting the staff and other resources necessary to (1) enhance youth-homelessness programming and maintain recent investments, (2) continue a Direct Cash Transfer pilot project for youth experiencing homelessness, (3) support the Statewide Youth Advisory Board, and (4) provide paid internships for youth with lived experience in homelessness. Together, these program investments will expand YEHP's reach to rural and Tribal communities, increase impacted youths' involvement in service design, and build a continuum of services that effectively meets the unique and often complex needs of the individuals we serve.

PACKAGE NO.	PACKAGE TITLE:				
137	Housing Stabilization Program Expansion				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
83,125,025			83,125,025	n/a	n/a

PACKAGE DESCRIPTION:

Housing is a key social determinant of health. Safe, stable and affordable housing gives families a strong foundation and improves their chances of achieving their employment, education, health and parenting goals. But families in Oregon regularly relay to Self-Sufficiency Programs staff that the existing network of subsidies and resources are insufficient to achieve housing stability. Communities of color, moreover, face disproportionate barriers to affordable housing access, which increases disparities in well-being outcomes. Oregon's Housing Stabilization Program (HSP), in operation since 1999, contracts with Community Action Agencies to provide short-term housing benefits to families. This program could be substantially more effective in housing intervention and as a tool to achieve equitable outcomes. This policy option package proposes to expand HSP to be more effective and culturally responsive. It entails increasing funding available to community-based organizations to build a network of housing navigators and provide financial housing assistance dollars to Oregonians experiencing low income; expanding eligibility criteria for HSP to include any Self-Sufficiency Programs participant; creating a Landlord Incentive Fund to increase affordable housing inventory; and creating new contracting opportunities for HSP in ways that prioritize culturally specific organizations. This package also proposes the transfer of HSP from Oregon Housing and Community Services to Oregon Department of Human Services, where more capacity exists for administering an expansion of this scale.

PACKAGE NO.	PACKAGE TITLE:				
138	Survivor Investment Partnership Expansion				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
31,813,000			31,813,000	n/a	n/a

PACKAGE DESCRIPTION:

Everyone deserves to be safe from violence in their homes and communities. But in Oregon and nationally, domestic violence is an ongoing threat to people's well-being – particularly in communities that have been subject to historic oppressions and disproportionate economic stress. Research and community input tell us that we can provide better domestic violence advocacy, prevention and support services to survivors in these populations by creating more culturally responsive local service arrays and by providing the financial supports necessary for them to exit violent situations. By addressing the current gaps, we can ensure that survivors of domestic violence and sexual assault (DVSA) have access to these critical supports no matter where they live or what community they belong to. Oregon Department of Human Services is proposing an expansion of the Survivor Investment Partnership (SIP) to address these gaps. SIP was developed in partnership with Tribes and communities of color, DVSA service providers and survivors of DVSA, and established by the Legislature in 2021. But current funding constraints prevent us from providing survivors with equitable supports statewide. This package requests funding to enable the delivery of culturally responsive advocacy services and impactful financial support, as well as expanded resourcing for the co-located domestic violence advocates program that serves people through Self-Sufficiency Programs and Child Welfare offices throughout the state.

PACKAGE NO.	PACKAGE TITLE:				
139	LOCAL FOOD PURCHASING INFRASTRUCTURE				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
10,000,000			10,000,000	n/a	n/a

PACKAGE DESCRIPTION:

No one in Oregon should go hungry. But data show that one in four Oregonians need to use a food bank each quarter to get enough food for themselves and their families. And Black- and Latinx-headed households are twice as likely to be hungry as white families.

Since the COVID-19 pandemic there have been food shortages due to supply chain issues, labor shortages and now increases in the cost of foods. The ongoing disruption in federal food assistance is deepening the crisis for Oregon's food bank network, hindering their ability to provide enough food for people who are seeking assistance but don't always qualify for federal food programs.

With strategic investments, we can provide enough food so our neighbors don't go hungry – and we can support our local farmers and communities in the process. ODHS is seeking a $10,172,796 investment over the biennium to help create a more flexible Local Food Purchasing Infrastructure through the Oregon Food Bank network that will stabilize and supplement federal food dollars.

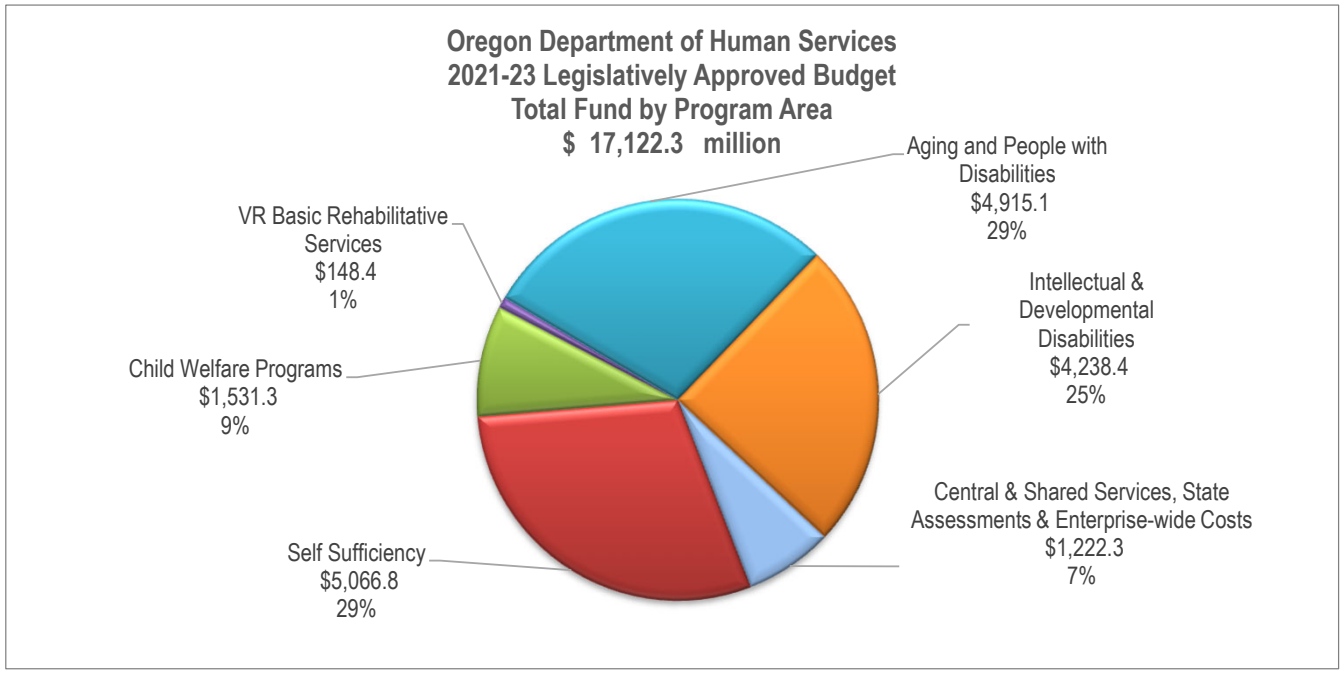
General Fund dollars would give the current network greater flexibility to invest in local economies for the purchase of fresh, nutritious culturally-specific foods. The network includes 20 regional food banks in Oregon and more than 1,400 food assistance sites. The current federal funding is not able to reach all food sites in the larger statewide network and some federal funding is capped at levels that cannot be amended.

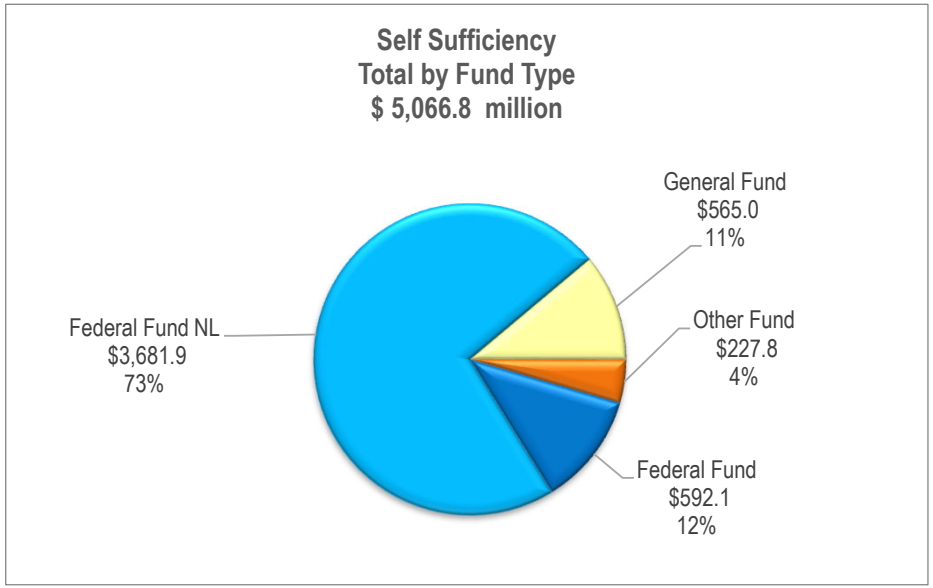
The rapid cancelations of federally purchased foods during the last two years has caused hardship and gaps in Oregon's food infrastructure. As part of the reinvestment in locally grown food and use of general funding, the program will be able to increase the number of sites and customers that cannot be served through current federal food programming.

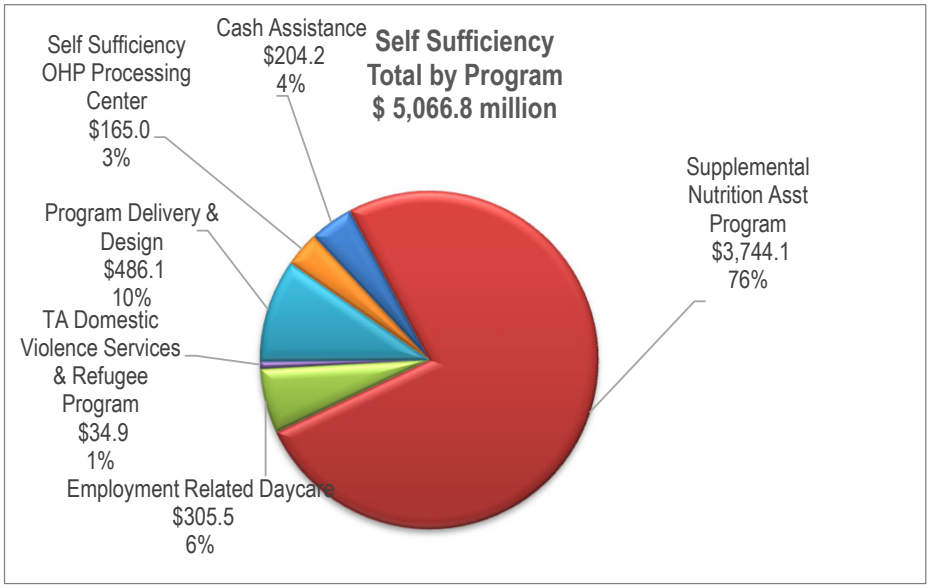
PACKAGE NO.	PACKAGE TITLE:				
141	JACKSON COUNTY DEMONSTRATION				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
13,600,000			13,600,000	n/a	n/a

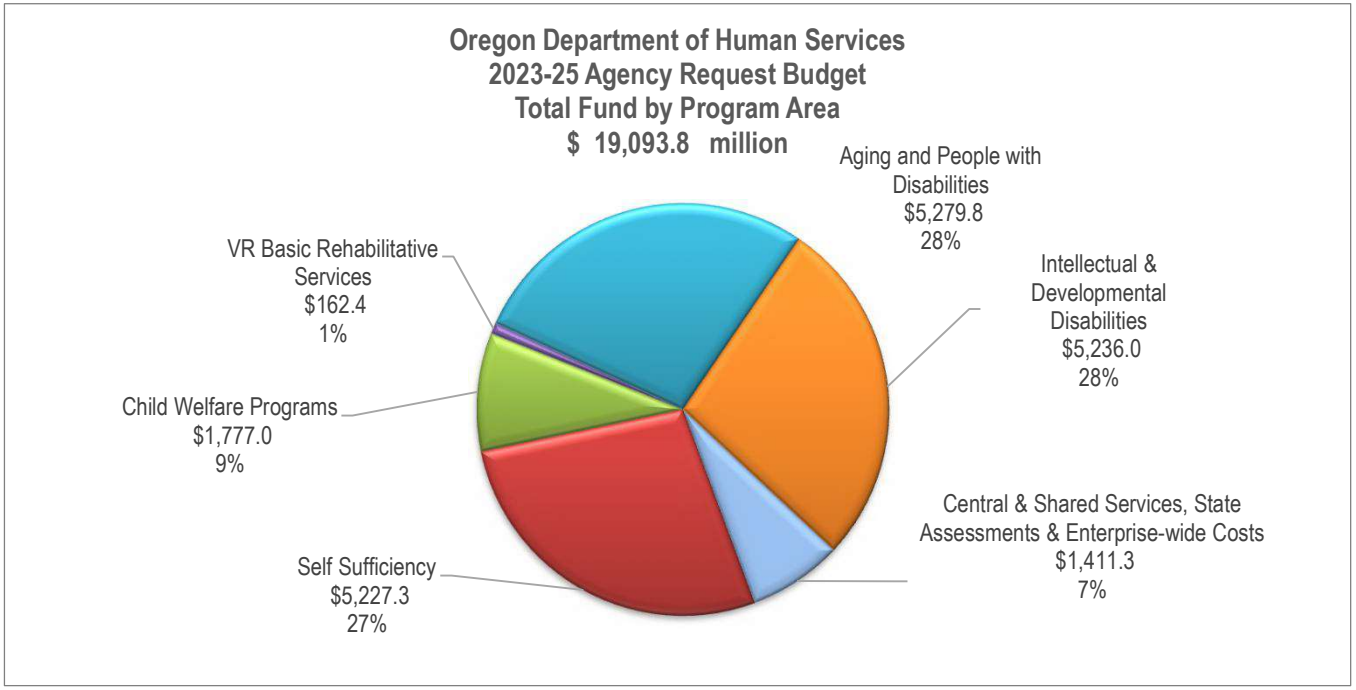
PACKAGE DESCRIPTION:

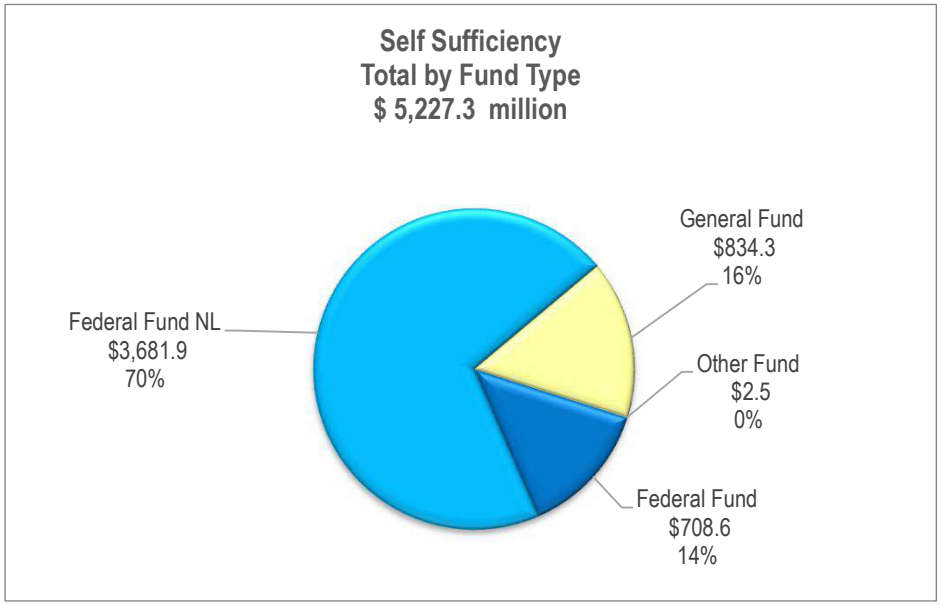
When disasters strike, we need to make sure that families and communities have the supports they need to recover and rebuild their lives. These critical supports must extend beyond the food, shelter, and medical care provided in the immediate aftermath of disasters to include services that facilitate survivors' transitions to long-term well-being. Oregon Department of Human Services Self-Sufficiency Programs is requesting the resources necessary to sustain and further develop a comprehensive, integrated health and human services delivery system at four sites in Jackson County that are currently serving families impacted by the 2020 wildfires. Investments will be made in four areas: continued onsite services and property management; local ODHS staffing resources; a lead organization to identify service needs, manage projects, collect data and coordinate local CBOs; and a tailored service array to meet resident needs.

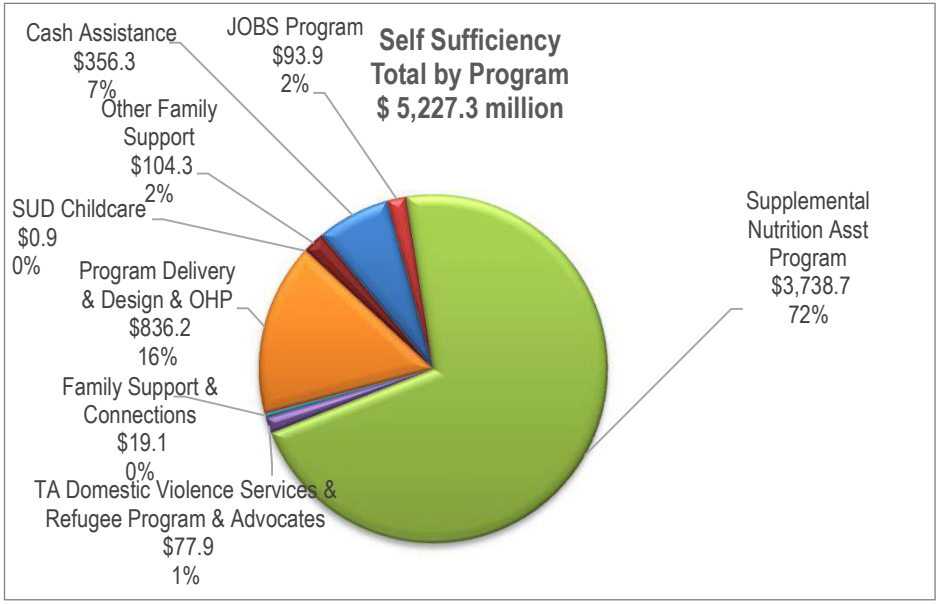

Oregon Department of Human Services
2021-23 Legislatively Approved Budget
Total Fund by Program Area
$ 17,122.3 million
Aging and People with Disabilities $4,915.1 29%
Intellectual & Developmental Disabilities $4,238.4 25%
Central & Shared Services, State Assessments & Enterprise-wide Costs $1,222.3 7%
Self Sufficiency $5,066.8 29%
Child Welfare Programs $1,531.3 9%
VR Basic Rehabilitative Services $148.4 1%


Self Sufficiency
Total by Fund Type
$ 5,066.8 million
General Fund $565.0 11%
Other Fund $227.8 4%
Federal Fund $592.1 12%
Federal Fund NL $3,681.9 73%


Self Sufficiency
Total by Program
$ 5,066.8 million
Cash Assistance $204.2 4%
Supplemental Nutrition Asst Program $3,744.1 76%
Employment Related Daycare $305.5 6%
TA Domestic Violence Services & Refugee Program $34.9 1%
Program Delivery & Design $486.1 10%
Self Sufficiency OHP Processing Center $165.0 3%


Oregon Department of Human Services
2023-25 Agency Request Budget
Total Fund by Program Area
$ 19,093.8 million
Aging and People with Disabilities
$5,279.8
28%
Intellectual & Developmental Disabilities
$5,236.0
28%
Central & Shared Services, State Assessments & Enterprise-wide Costs
$1,411.3
7%
Self Sufficiency
$5,227.3
27%
Child Welfare Programs
$1,777.0
9%
VR Basic Rehabilitative Services
$162.4
1%


Self Sufficiency
Total by Fund Type
$ 5,227.3 million
General Fund
$834.3
16%
Other Fund
$2.5
0%
Federal Fund
$708.6
14%
Federal Fund NL
$3,681.9
70%


Self Sufficiency
Total by Program
$ 5,227.3 million
Supplemental Nutrition Asst Program
$3,738.7
72%
Program Delivery & Design & OHP
$836.2
16%
TA Domestic Violence Services & Refugee Program & Advocates
$77.9
1%
Family Support & Connections
$19.1
0%
Other Family Support
$104.3
2%
JOBS Program
$93.9
2%
Cash Assistance
$356.3
7%
SUD Childcare
$0.9
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DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-060-01-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Other Revenues	2,442,855	2,972,136	4,478,794	2,507,797	-	-
Tsfr From Administrative Svcs	8,314,981	14,000,000	12,000,000	-	-	-
Tsfr From Military Dept, Or	9,263,649	-	-	-	-	-
Tsfr From HECC	75,344	-	-	-	-	-
Tsfr From Education, Dept of	140,027,319	211,335,929	211,335,929	-	-	-
Tsfr From Labor and Ind, Bureau	179,447	-	-	-	-	-
Total Other Funds	**$160,303,595**	**$228,308,065**	**$227,814,723**	**$2,507,797**	**-**	**-**
Federal Funds						
Federal Funds	471,382,511	545,755,375	592,141,548	708,613,942	-	-
Tsfr To HECC	-	-	-	(51,925)	-	-
Tsfr To Housing and Com Svcs	(4,776,550)	-	-	-	-	-
Total Federal Funds	**$466,605,961**	**$545,755,375**	**$592,141,548**	**$708,562,017**	**-**	**-**
Nonlimited Federal Funds						
Federal Funds	2,800,165,775	2,975,868,127	3,681,868,127	3,681,868,127	-	-
Total Nonlimited Federal Funds	**$2,800,165,775**	**$2,975,868,127**	**$3,681,868,127**	**$3,681,868,127**	**-**	**-**

Oregon Department of Human Services
Child Welfare Division

Vision for Transformation

The Child Welfare Vision for Transformation is based on a belief that children do best growing up in a family and on values related to honoring and supporting cultural wisdom, building community resilience and voice, and ensuring the self-determination of our communities of color and those who have historically experienced the worst outcomes.

ODHS Child Welfare will achieve this Vision for Transformation through:

- Assessing child safety and providing in-home supports to prevent placements away from parents, family, friends, and community.
- Expanding services to prevent foster care placements and ensure that intensive interventions are as effective as possible.
- Ensuring foster care is family and community-based, time-limited, culturally responsive and designed to stabilize families rather than serving primarily as a placement for children.
- Establishing that children and young adults will be in the care of family, friends, and neighbors whenever possible, and helping children keep connections to their cultures, Tribal Nations, and communities.
- Recognizing the necessity of short-term, individually customized treatment programs for children who have higher-level physical, developmental, and mental health needs. These supports should occur while children or youth are living in families with birth or adoptive parents, relatives, close friends, or foster caregivers (resource families).
- Collaborating and building strong relationships with Tribes, communities, people with lived expertise and systems partners.
- Striving for a well-supported workforce that has the developmental opportunities, and access to the resources and services needed to support our children, families, and communities; and
- Dismantling structural and systemic racism and moving toward a more equitable and fair system of support for all families.

The Child Welfare Division's mission is to ensure every child and family is empowered to live a safe, stable, and healthy life. This mission is based on a set of beliefs and core values:

- *We believe* children, youth and young adults do best growing up in a family.
- *We believe* our child welfare agency and its partners can better ensure people's safety, health, and well-being if they work in constant collaboration and proactively engage individuals, families, and communities.
- *We believe* when families and communities are strong, fewer children experience abuse and neglect.
- *We believe* earlier, less intrusive support for families means more children can remain safe and healthy at home and in school, where they can maintain the bonds and connections that are critical to their well-being, leading to better long-term outcomes for children and young adults.
- *We believe* families and communities working together in a more proactive, holistic way will also help free up budget and staff resources. This allows ODHS and its partners to allocate resources in ways that have the greatest impact for children and young adults. Integrating services will mean less need for costly foster care, residential placements, and other crisis support, creating opportunities for more innovation, creative solutions, and new business models.

About the Child Welfare Division

The Child Welfare Division serves children and families who are facing challenges that can affect child safety and responds when children are subject to abuse and neglect. Skilled and diverse Child Welfare staff respond to reports of child abuse and neglect, helping to assess whether supports or services can be provided to the family to prevent the need for out-of-home care and coordinating foster care placement in cases where a child cannot be maintained safely at home. The primary goal is to keep children safe while providing equitable services to support timely and safe return to their families in cases where an out of home placement is necessary.

The Child Welfare Division's work encompasses the following areas:

1. Child Abuse Hotline
2. Child Safety Program

3. Child Fatality Review and Prevention Program
4. Family Preservation
5. Child and Family Well-Being Programs
6. Permanency Program
7. Program Design & Delivery
8. Federal Policy, Planning & Resources, and Child Welfare Policy
9. Other Central Office Programs and Focus Areas

In Oregon during Federal Fiscal Year (FFY) 2020:

- 9,838 children spent at least one day in foster care
- 78,632 reports of abuse and neglect were received
- 42,126 reports were referred for investigation
- 7,772 reports were founded for abuse or neglect involving 11,642 victims
- 42.7 percent of the victims were younger than 6 years old

Of the total children served in foster care, 65.3 percent were White, 18.2 percent were Hispanic, 6.2 percent were Black or African American, 4.9 percent were American Indian or Alaska Native, 3.9 percent did not have race recorded and 1.5 percent were Asian or Pacific Islander.

1. Child Abuse Hotline

The Oregon Child Abuse Hotline (ORCAH) is crucial to the Child Welfare system in Oregon. The program is responsible for receiving calls from mandated reporters and community regarding child safety and determine if reports are screened-in for investigation.

2. Child Safety Program

The Child Safety program responds to reports of child maltreatment to determine if a child has experienced abuse or neglect or is safe.. Response is sometimes done in partnership with local law enforcement and Oregon Tribal Nations. The program also assesses whether there is a risk of future maltreatment while offering locally based services for intervention.

The Child Safety program also provides coordination for the following areas:

Commercial Sexual Exploitation of Children (CSEC)
The CSEC coordination provides culturally and linguistically responsive multi-disciplinary services by connecting Child Welfare staff to key partners in order to help youth who are being sexually exploited to access safe shelter and wrap-around services supporting their physical and emotional needs. These partners include:

- National Center for Missing & Exploited Children
- Law Enforcement Agencies (LEA)
- Federal Bureau of Investigation (FBI)
- Other community agencies

Addiction Recovery Teams (ART Teams)
These teams provide coordinated, culturally, and linguistically responsive, multi-disciplinary services to family members who struggle with substance use and/or substance use disorder a. Issues around substance abuse are identified through a comprehensive safety assessment.

Domestic Violence/Sexual Assault
ODHS makes grants available to domestic violence and sexual assault service providers throughout Oregon. These providers offer culturally and linguistically responsive crisis lines, crisis response, emergency shelter and other related services to survivors of sexual assault and domestic violence and their children.

3. *Child Fatality Prevention and Review Program*

This program was created to improve child safety and prevent child maltreatment fatalities in Oregon. The goals of this program align with the Family First requirement to create a state fatality prevention plan. It also provides a unique and necessary opportunity to promote a system shift toward prevention policies and practices that address risk to Oregon's most vulnerable children.

The Child Fatality Prevention and Review program coordinates the Critical Incident Review Team (CIRT), which is an approach Oregon's Child Welfare system has used

for many years to respond to critical incidents that result in child fatalities. With several significant changes to the CIRT statute in 2019, there was a need to increase program capacity to comply with the law and respond to the extensive increase in the number of assigned CIRTs. The development of this program has created opportunities for Oregon's Child Welfare system to better understand, learn from and prevent these tragedies. The work of the CIRT is intended to advance quality improvement in Oregon's Child Welfare system. Moving CIRT coordination out of the Child Safety Program and into Child Fatality Prevention and Review has increased the independence and transparency of child safety and fatality reviews. The program will continue to work across systems and with community partners such as public health and other child- and family-serving agencies in Oregon to improve child safety outcomes and prevent child maltreatment fatalities in our communities.

4. Family Preservation

Child Welfare is actively building the new Family Preservation Program with 2021-23 state investments in the program's initial infrastructure. Designed to strengthen families and prevent children's entry into foster care whenever safely possible, the program is a key step in Oregon's implementation of the federal Family First Prevention Services Act. The system strives to spare children and families from the trauma of separation by addressing family stressors and establishing supports that maximize families' potential to meet their children's needs.

Currently, when Child Welfare safety assessment indicates that a child is unsafe and the family needs supports and/or services to resolve this, the agency works with the family and team to determine whether the child's placement with their parent or guardian can be safely maintained. When it is determined that a family can remain intact given the right supports, Child Welfare partners with the family and team to plan and deliver services, create a safety plan, and conduct ongoing monitoring. The vision for this program is to be able to provide services and supports to families and children more broadly than an assessment indicating lack of safety.

5. *Child and Family Well-Being Programs*

Child and family well-being programs include Foster Care, Youth Transition Services and Health and Wellness Services.

Foster Care

Oregon's Foster Care program values foster care services as a support to families, not a substitute for parents and families. In order to support the families, it serves, the program engages parents, youth, kin, community partners, legal professionals, Tribal partners, resource families and others as a way to holistically support family safety and stabilization. Foster Care services include Relative Care, Family Foster Care, and professional levels of care such as Shelter Care and Behavioral Rehabilitation Services, which are provided in therapeutic home or residential settings through contracted Child Caring Agencies (CCAs). The foster care system operates 24 hours a day, seven days a week, to accept and care for children who cannot remain safely at home.

Oregon's goal aligns with the federal requirement of placing a child in the least restrictive, most appropriate setting that meets the child's individual needs when the child cannot safely be cared for by parent(s).

This program focuses on the well-being of children and young adults while they are in foster care and is responsible for recruitment of resource (foster) families that reflect the characteristics of children in foster care. This program certifies, trains, and retains resource families (both general applicants and kith/kin caregivers). Resource families are trained by agency staff and through contracted experts. Resource families participate in a Structured Analysis Family Evaluation (SAFE) home study, designed to evaluate a family's suitability and readiness to meet the needs of children and young adults that enter the child welfare system. Resource families must also pass:

- A criminal background check,
- Reference checks, and
- A review of Oregon's abuse registry, which includes all prior abuse reports received on children and adults

The program also recruits, contracts, trains, supports, and monitors all contracted CCAs.

ODHS partners with community members, Oregon Tribal Nations, local and national foster care organizations, provider organizations, youth-led organizations and organizations representing diverse cultural perspectives to deliver services throughout the state.

ODHS also works in collaboration with multiple state, Tribal and local government agencies – including Oregon Healthy Authority, Oregon Department of Education, local law enforcement and Oregon Tribal Nations – as well as community programs, schools, the faith community, and volunteer programs to identify and develop a local array of equitable, cultural, and linguistically responsive services. The program supports the overall well-being of children in foster care by:

- Addressing behavioral, emotional, and social functioning
- Meeting core educational needs
- Ensuring appropriate physical, dental and mental health care
- Maintaining safe family and community connections

Youth Transition Services

The Child Welfare Youth Transition programs, including the Independent Living Program (ILP), serves current and former foster children and young adults up to age 21. Services include assistance with developing life skills and learning about:

- Financial literacy
- Communication and social skills
- Relationship building skills
- Resources available in local communities
- Informed decision-making
- Parenting
- Health
- Education support
- Housing
- Transportation options
- Job readiness

The program helps young people develop plans to complete high school and successfully transition to post-secondary education or employment. Housing support options are available to eligible youth through transitional living programs, the independent living housing subsidy program, and the federal Chafee housing program.

Health and Wellness Services

ODHS places high priority on ensuring that children in out-of-home care receive appropriate medical, dental, and mental health care. In addition to the appointments and screenings that are required when a child enters foster care, children are assessed by a contracted nurse shortly after entering care to address any immediate health needs. Support is provided to the child and resource parents for any health-related or medication issues the child may have. Contracted nurses provide:

- Medication management services
- Case consultation
- Medical care coordination
- Nursing delegation
- Resource parent teaching and training
- Other nursing services as needed

The Health and Wellness team provides resources, support and case consultation to staff and provides resources for resource parents who care for medically fragile children. Annual psychotropic medication reviews and psychotropic medication authorizations are completed by a Nurse Consultant for all children in care who are currently prescribed psychotropic medications.

Medical Assistance Resource Coordinators (MARCs) assist with access to care issues and help coordinate services with Coordinated Care Organizations (CCOs) throughout the state to ensure children's health, mental health and dental needs are being met.

6. Permanency Program

Child Welfare prioritizes the safe and successful reunification of children with their parent(s). Specially trained staff partner with parents to develop and meet goals for change so that children can remain safely at home or return home after placement in substitute care. Permanency staff work together with families, children, community partners and the legal system to create and support case plans with the goal of reunification. Once children are placed with a permanent adoptive or guardian family, the Permanency program continues to provide services and supports to children up to age 18 to help meet the special needs and challenges of those who have experienced abuse and neglect. These efforts include consideration of the child's specific cultural, developmental, and linguistic needs.

ODHS is also responsible for the coordinating the Voluntary Adoption Search and Registry Program for Oregon's public and private adoptions. This registry may include adoptions for children with relatives living in other countries pursuant to The Hague Convention and the Intercountry Adoption Act.

Strengthening, Preserving and Reunifying Families (SPRF)
The Strengthening Preserving and Reunifying Families law (ORS 418.575-418.598) allows funding for an array of services to families through collaboration between ODHS and local community partners. ODHS has developed outcome-based contracts for services to specifically address the needs of children and families who come to the attention of child welfare through a screened in report of abuse or neglect. These outcome-based contracts also enable accurate reporting on results associated with SPRF services and funding.

In-Home Safety and Reunification Services (ISRS)
This program provides culturally responsive, intensive, short-term services to families with children who can remain safely in their homes, and to children

and families who have been safely reunited. ISRS provides a combination of safety and strengths-based services that lead to lasting safety changes within the family. These services are time-limited and are complemented by SPRF services for families in need of longer term or more intensive services.

System of Care (SOC)

System of Care funds support Oregon's most vulnerable children by providing local Child Welfare offices with the flexibility to purchase services to meet a family's specific needs and ensure the safety, permanency, and well-being of their child(ren) in culturally and linguistically responsive ways. Families are directly involved in case planning and the identification of needed services. Whenever possible, community partners share funding of custom-designed services.

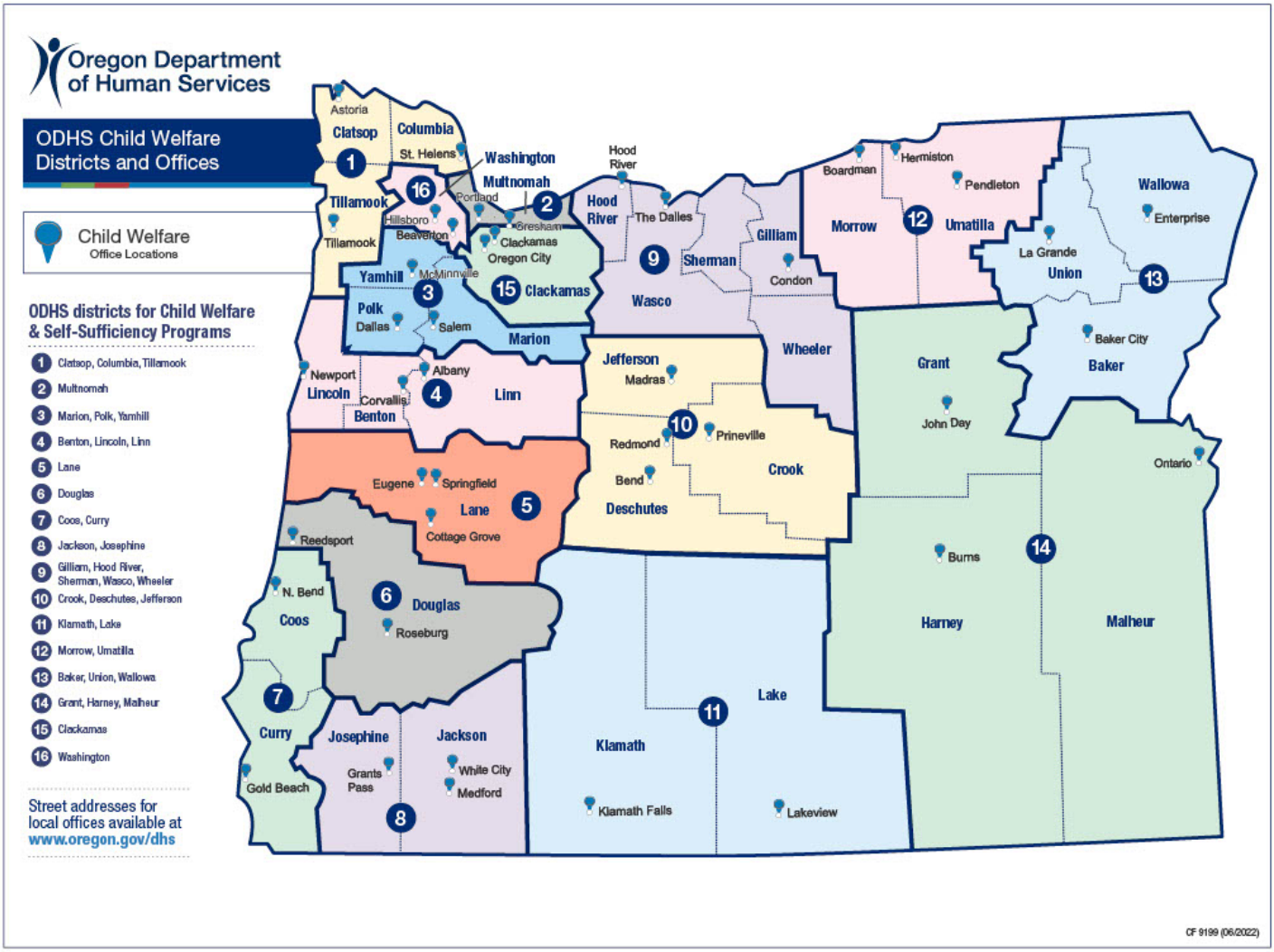
7. *Program Design & Delivery*

Oregon has a state-administered child welfare program. The Child Welfare Executive Leadership team, in collaboration with the Child Welfare design program managers and staff, provide leadership, guidance and central office support to program and delivery staff through:

- Collaborating with community partners and Tribal Nations
- Developing policy and rule
- Complying with federal and state regulations
- Monitoring quality assurance and continuous quality improvement
- Managing projects and providing technical assistance
- Evaluating and analyzing the program
- Designing training and workforce resources for staff and resource families
- Ensuring the integrity of business processes and standards
- Identifying and implementing equity-building, evidence-based and best practices frameworks

Managers and supervisors in local Child Welfare offices provide clinical and case-level supervision of direct service staff across the program areas. Whenever possible, Child Welfare staff coordinate with Self-Sufficiency Programs staff to support family stability and prevent entry/re-entry into the child welfare system. Child Welfare staff coordinate with other child- and family-serving systems including housing-focused organizations, Oregon Health Authority, Oregon Department of Education, county-based health and support services and others. Child Welfare employees provide direct services to children and families in local offices.

Figure 1: Child Welfare district map



8. *Federal Policy, Planning & Resources (FPPR)*

FPPR is responsible for ensuring that Child Welfare remains in compliance with federal program standards, maximizing continued federal financial support for the Child Welfare programs and services described above. FPPR submits all required federal reporting and responds to related inquiries. The primary goal of FPPR is to

optimize the use of federal funds while ensuring that all funds are used solely for allowable purposes. These include:

- Title IV-B – Subparts 1 & 2
- Title IV-D – Child Support
- Title IV-E – Foster Care, Adoption Assistance and Guardianship Assistance, Family First Prevention Services
- Title XIX – Medicaid
- Title XX – Social Services Block Grant
- TANF EA – Emergency Assistance

Child Welfare Policy

Child Welfare Policy is responsible for ensuring that policy, procedure, and rules are updated in accordance with statutes and requirements. The team provides leadership to the PARRC ensuring that any new rules and any policy changes have the opportunity for public comment. The team also reviews all proposed and existing policies to ensure that they are in alignment with the Vision for Transformation and supports updates to those that need changes.

9. Other Central Office Programs and Focus Areas

Equity, Training and Workforce Development and Resource Family Training

Child Welfare staff and leaders are supported by the central office Equity, Training and Workforce Development team, which consists of service delivery leaders and contracted providers who collectively ensure that we have a diverse, skilled, and engaged workforce that reflects and embraces the communities we serve.

The workforce development framework is grounded in a clear research-informed and data-driven systems of best-practices related to:

- Recruiting, screening, selection, and onboarding quality recruits.
- Providing pre-service and ongoing training and development for staff and resource families that develop baseline and developmental knowledge, skills, and abilities.

- A transfer-of-learning, coaching, supervisory and consultation frameworks that work to continuously increase the competence and confidence of staff at all levels.
- Developing leadership with promotional readiness and succession planning to retain high-performing and adaptive leaders for the future.
- Using continuous quality improvement processes that are informed by a robust workforce development evaluation plan.
- Evolving technology to increase access to learning, attend to diverse adult learning needs and track and report on the developmental learning of all staff and resource families.

Diversity, Equity, and Inclusion

Child Welfare is working to improve equity and inclusion in all aspects of our program and to provide inclusive, equitable and culturally responsive and appropriate services to children, young adults, and families. Additionally, Child Welfare is working with communities, Tribal Nations, and other child welfare partners to:

- Centering equity in all aspects of the work
- Creating more transparent and meaningful partnerships
- Sharing quality data and outcomes
- Including the voices of the community and those with lived Child Welfare experience in planning and in decision-making
- Creating a shared vision for how meaningful partnership will promote improved child and family outcomes

Child Welfare is constantly looking for ways to assess how policies, rules, organizational culture, and practices are contributing to inequitable outcomes. Among the division's priorities are:

- Better honoring the sovereignty of Oregon Tribal Nations,
- Re-envisioning and increasing the use of culturally relevant services and supports,
- Increasing the inclusion of and sharing power with those most impacted by child welfare systems and reviewing all policy, rules, and procedures for evidence of unintended contributors to equitable outcomes.

Oregon Indian Child Welfare Act/ Indian Child Welfare Act (ORICWA/ICWA)

In collaboration with the ODHS Tribal Affairs Unit and central office leaders, Child Welfare continuously partners with Tribes, Tribal partners and Native American children and families to improve compliance with and integration of the spirit of ICWA and ORICWA in all our work. Native American children are currently over-represented in Oregon's child welfare system. Compliance with the Indian Child Welfare Act is a federal mandate and Oregon's state ICWA, which passed in the summer of 2020, further spells out Child Welfare's responsibility to protect and honor Tribal sovereignty, culture, and traditions. ODHS currently has ICWA Consultants, Active Efforts Specialists and identified ICWA liaisons who work to:

- Improving ICWA/ORICWA compliance,
- Enhancing Tribal relationships,
- Providing technical assistance and expert consultation, and
- Supporting Child Welfare staff in improving outcomes for Tribal children and families, and
- Reducing disproportionality and disparities.

Family First and System Integration

The Federal Family First Prevention Services Act was passed by Congress in February 2018. It changed how Title IV-E funding can be used for prevention and preservation and the type of placements in foster care. The Family First Prevention Plan is an important tool for implementing ODHS Child Welfare's Vision for Transformation goals, helping to strengthen families so that more children can remain safely with their parents and kinship caregivers. Family First presents an unprecedented opportunity to give child welfare systems the tools they need to make transformative changes.

Family First supports in-home services that utilize evidence-based practices approved by the Federal Clearinghouse in the following categories:

- Mental health prevention and treatment programs or services
- Substance abuse prevention and treatment programs or services

- In-home parent skill-based programs or services, and
- Kinship navigator programs

Oregon is using a phased-in and staged approach toward implementation with ongoing, structured opportunities for partner feedback and adjustment. Lessons learned from other states and jurisdictions underscore the importance of progressively scaling up an evidence-based service array, with ample occasion for communication and collaboration between program developers, field staff, service providers, community partners, Tribes, families and youth with lived experience and other stakeholders.

This team is leading the implementation with the newly created Family Preservation team and working across divisions with ODHS as well as with community partners and organizations to focus on the prevention of child welfare involvement.

Interstate Compact on the Placement of Children (ICPC)

The ICPC is the statute that governs the movement of children across state lines. All 50 states, the District of Columbia and the U.S. Virgin Islands are members of the ICPC.

The ICPC covers:

- Children in Oregon foster care being placed in other states,
- Children in the custody of another state's public child welfare agencies being placed in Oregon, and
- Private adoption and residential treatment placements that cross state lines.

According to the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC) the ICPC applies to approximately 5 percent of all child welfare cases nationwide. The Oregon ICPC program includes a team of central office staff who provide training and case consultation to Child Welfare local office staff, attorneys, and members of the public. The program also includes a team of regionally based workers who complete home studies with Oregon families seeking to care for children from other states.

OR-Kids

OR-Kids, a Criminal Justice Information System (CJIS), is the statewide data child welfare information system with more than 3,637 Child Welfare users and 877 partner users across the state and agencies. It provides reports to internal and external partners, including Child Welfare caseworkers, ODHS Office of Financial Services, ODHS Human Resources, and the Federal Agency Administration of Children and Families.

OR-Kids contains case records on all children and families served by Child Welfare and issues payments to service providers. Required federal reports are submitted via the OR-Kids system to access federal reimbursement for eligible services. The OR-Kids program staff monitor access for all system users across the state and partner agencies to ensure privacy and access policies are being followed.

Ad-hoc queries are run to ensure data quality and to operate a data-informed organization. The program also runs queries to identify system issues and resolve end-user problems as case work is completed. The program supports every area of Child Welfare and is the system of record for Child Welfare work.

Strategy and Innovation

The Strategy and Innovation program supports the Continuous Quality Improvement (CQI) team and the Project Management Office. Both teams support the agency's efforts to make significant, and sustainable improvements to Oregon's child welfare system by identifying, prioritizing, and executing a portfolio of projects and CQI strategies to improve practice.

- Continuous Quality Improvement

The Continuous Quality Improvement team is a newly created program in Child Welfare. From the 2021 legislative session, a POP granted positions to start the statewide improvement efforts to improve our Federal Performance measures. The CQI team works with Districts on their individualized quality improvement plan, provides technical assistance on continuous quality improvement strategies, and provides data literacy tools

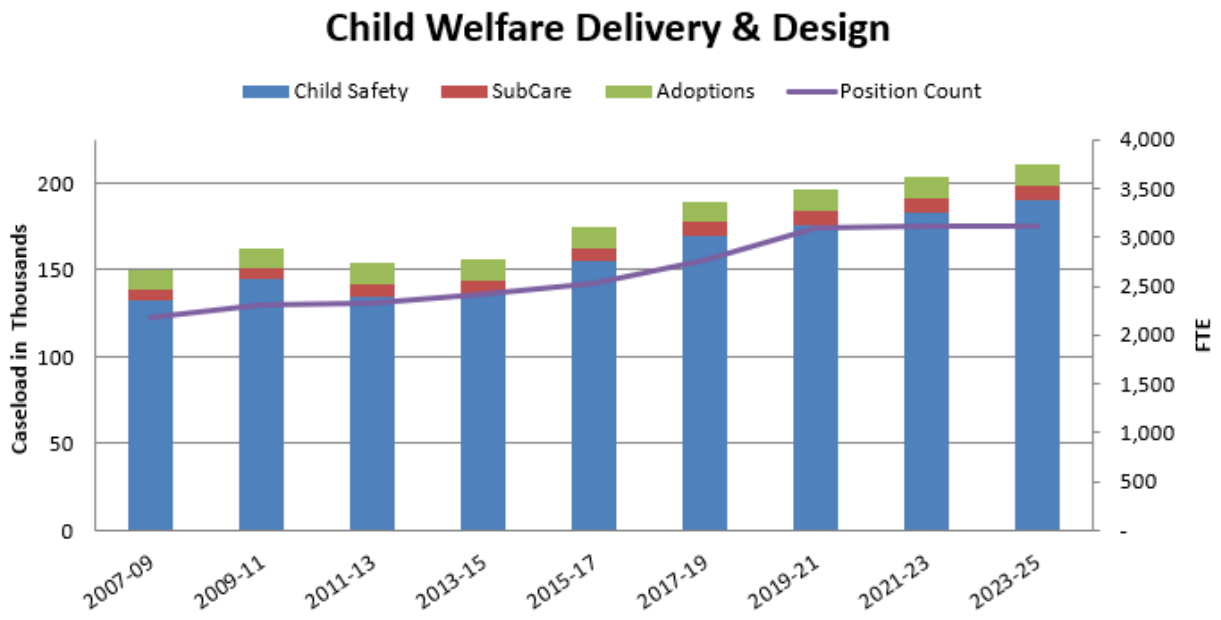
and education while creating a comprehensive and cohesive approach to improvement in Child Welfare.

- Project Management Office (PMO)

Services of the PMO include strategic planning, project management, portfolio management, audit tracking, and data analysis. The PMO supports projects both within the program and at the agency level to advance the program's Vision for Transformation.

Oregon Department of Human Services: CW Delivery and Design

Primary Long-Term Focus Area: Safe and thriving communities, including a reduction of disparate outcomes for children of color
Secondary Long-Term Focus Area: N/A
Program Contact: Rebecca Jones Gaston, Child Welfare Director



Division Overview

The Child Welfare Division supports the safety of children who experience abuse or neglect throughout Oregon and works with the community to prevent abuse or neglect and help families stay together. The work of the division is based on the core belief that children deserve to experience safe, stable, healthy lives and to grow up in the care of a loving family and community.

As of July 1, 2021, there are 3,237 legislatively approved child welfare positions allocated to Child Welfare across Oregon. In FFY 2021, caseworkers responded to 43,464 reports of abuse and neglect, and a total of 8,387 children spent at least one

day in some type of foster care, such as family foster care (relative and non-relative), professional treatment programs, psychiatric residential treatment programs, pre-adoptive placement, specialized placement for children with I/DD, or independent living. The program also finalized 572 adoptions in FFY 2021, creating a permanent family for children who could not safely return to their parents or family of origin.

This statewide structure is administered from the ODHS central office in Salem and supports local delivery staff in 16 Districts plus the centralized Oregon Child Abuse Hotline (ORCAH). To support families, children, youth, and young adults to be safe and to experience greater well-being, Child Welfare central office design provides program administration, supervision, technical assistance and support; develops and implements policies and procedures; collaborates with community, system partners, and Tribal nations.; provides analysis and evaluation; designs and delivers training and workforce development supports; oversees federal claiming and reporting; provides technology, information systems and case management system support; supports quality assurance and continuous quality improvement and equity-enhancing activities for all of child welfare program and practice.

Program Funding Request

CHILD WELFARE - Design	GF	OF	FF	TF	Position Count	FTE
LAB 21-23	$ 114,044,705	$ 257,538	$ 61,118,960	$ 175,421,203	278	261.99
ARB 23-25	$ 133,928,458	$ 279,348	$ 71,268,985	$ 205,476,791	311	295.50
Difference	$ 19,883,753	$ 21,810	$ 10,150,025	$ 30,055,588	33	33.51
Percent change	17.44%	8.47%	16.61%	17.13%	11.87%	12.79%

CHILD WELFARE - Delivery	GF	OF	FF	TF	Position Count	FTE
LAB 21-23	$ 485,198,056	$ 2,089,468	$ 192,875,148	$ 680,162,672	3124	3085.86
ARB 23-25	$ 564,983,404	$ 2,145,979	$ 212,234,191	$ 779,363,574	3698	3375.73
Difference	$ 79,785,348	$ 56,511	$ 19,359,043	$ 99,200,902	574	289.87
Percent change	16.44%	2.70%	10.04%	14.58%	18.37%	9.39%

Program Description

The Child Welfare Division supports the safety and well-being of Oregon children through programs and services including:

- screening and evaluation of calls reporting child maltreatment,
- assessment of families and determination of child safety,

- case management for all open child welfare cases,
- recruitment and retention of resource (previously called “foster”) families and residential treatment providers,
- coordination of family time between children and their parents and families while experiencing out-of-home care,
- Court preparation, reporting and review,
- transition-age planning for children over 14 years of age,
- permanency planning, and
- case management services through completion of a permanency plan.

The program also provides direct supervision, training, mentoring and coaching to Child Welfare staff that is critical to building worker competencies including: complex assessment and safety planning skills; skills that reinforce professional social work ethics and values; self-reflection and critical-thinking skills, casework practice through a trauma-informed and culturally responsive and equity-focused lens and many others.

Child Welfare workers use the Oregon Safety Model to evaluate and ensure a child’s safety throughout the involvement with child welfare. This model requires safety assessment and safety management at all stages of case management, from screening through case closure and includes the use of highly trained consultants and coaches to ensure safety model fidelity and quality of practice and service equity.

Child Welfare design and delivery teams coordinate with Self-Sufficiency Programs design and delivery to support family stability and prevent unnecessary entries into foster care. In addition, Child Welfare partners with other child and family-serving systems including Oregon Housing Authorities, Oregon Health Authority, Oregon Department of Education, Oregon Youth Authority, tribal, community and faith-based organizations, and with Tribal nations to coordinate services and supports for families. The Child Welfare Division also negotiates and manages contracts with numerous community service and community care providers and individuals to ensure families and children have access to the individualized and community-based services they need to ensure child safety, permanency and well-being.

Child Welfare is committed to equity for all Oregonians and to becoming an anti-racist organization in alignment with the ODHS Equity North Star. As a result, Child Welfare makes it a priority to elevate the voices of communities and those with lived expertise, as well as honor the sovereignty of Tribal nations in program planning, system improvement and decision-making. Additionally, Child Welfare is committed to working across systems to uproot the causes and contributors to racialized and disparate outcomes, share power with those most impacted, and implement program and practice enhancements that increase access to the quality and culturally appropriate services and supports families and children need to be safe and thrive.

Children Served in Foster Care, by Race FFY2019 and FFY2020

Race	FFY2019	FY2020
Black or African America	5.7%	4.6%
Asian/Pac Islander	1.6%	1.9%
White	66.8%	58.5%
Hispanic (any race)	17.6%	12.9%
American Indian or Alaskan Native	4.5%	3.6%
Unable to determine	3.7%	18.5%

Major cost drivers for the personnel needs are: Program mandates (federal and state); the number of neglect and abuse allegation reports received that require child welfare assessment and response; family stress factors that affect risk of abuse and case complexity (substance abuse, unemployment, mental or physical health issues, criminal history, domestic violence, etc.); personnel turnover (training/travel costs); work effort required to provide services; and personnel packages (i.e., position cost, etc.). Additional drivers of cost include representation from the Department of Justice connected to dependency matters, court-ordered services and workload associated with federal mandates.

The Child Welfare Division continues to identify and implement changes to improve effectiveness and efficiencies while ensuring child safety, such as abbreviated assessment, overdue case closure tool, centralization of functions currently managed at the District offices, and decision support tools. Additionally,

the Child Welfare Division continues to focus on the safe and equitable reduction of the number of children who experience foster care by building capacity to provide services and supports to children at home with their families and in their communities.

Critical elements of the program are thorough and comprehensive assessment of child safety, in-home supports and services, recruitment and certification of resource family (formerly foster care) providers, and timely permanency outcomes. Other elements include the implementation of the federal Family First Prevention Services Action and Family Preservation. In addition to Oregon's Program Improvement Plan (PIP) resulting from Round 3 of the Federal Child and Family Services Review (CFSR) and in preparation for Round 4 of the CFSR in the next couple of years and other program areas include specific strategies to address areas of needed improvement in Oregon's child welfare practice, the Continuous Quality Improvement team will be working to tie all of Child Welfare's improvement efforts together to streamline efforts and strategies.

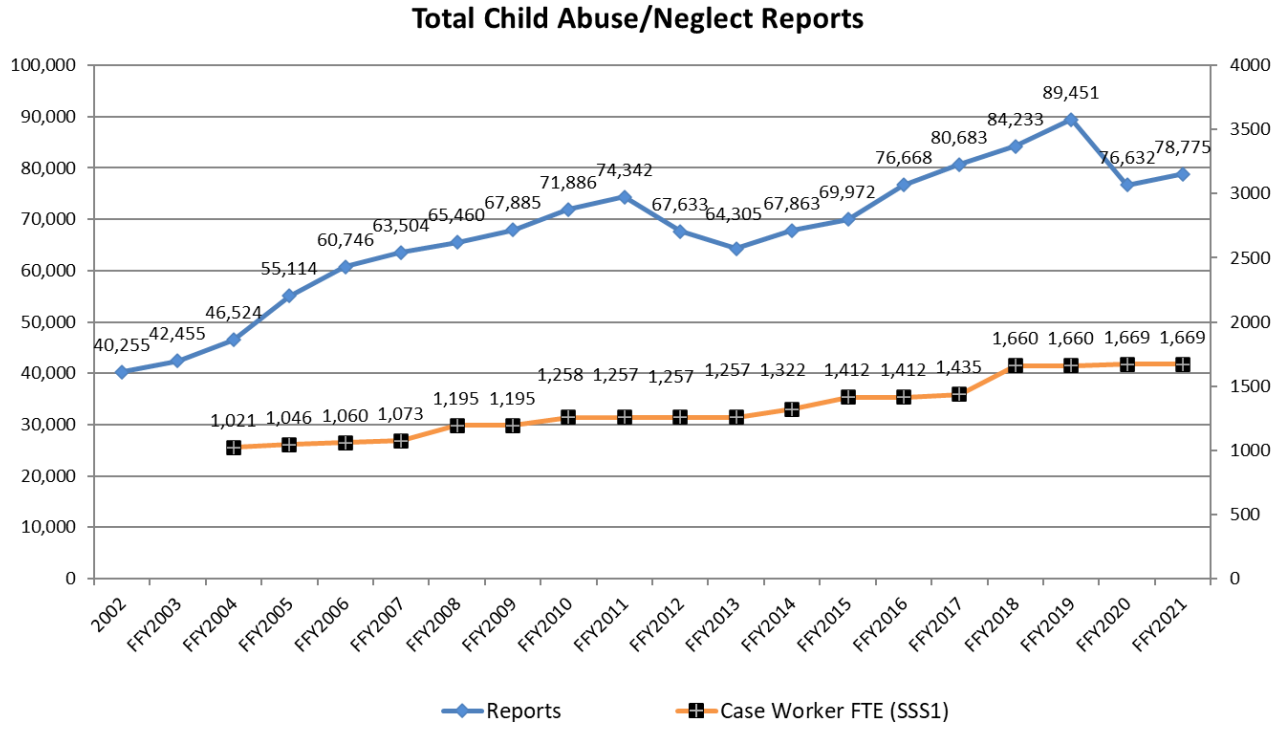
Program Justification and Link to Focus Areas

There is a direct link between the program design and delivery for child welfare and safer, healthier communities. The Child Welfare Division focuses on strengthening and preserving connections to family and community by supporting children and young adults to remain safely in their own home and communities whenever possible. This is accomplished by maintaining connections to family, culture, and community even when temporary substitute care is needed and by making permanency the priority when we are working to safely reunifying families. The division's work with families enhances their ability to safely parent their children and prevent foster care placements.

Child Welfare delivery and design provides the personnel to administer, design and deliver child safety supports through abuse investigations, services, identification of and procurement of resources for family support and reunification whenever possible, or coordinating alternative child safety planning when necessary.

Program Performance

Personnel resources are necessary to deliver Child Welfare programs and services. The chart below provides a comparison of the caseload growth (100 percent) to the personnel growth (46 percent) over time. Together, these trends impact directly impact the Department's ability to keep pace with the need of vulnerable Oregonians.



Safety for children is measured through the performance metrics: timeliness of responding to reports of abuse and neglect, re-abuse rates, the ability to have regular and frequent quality face-to-face contact with children and families prior to a foster care placement and during a foster care placement, and the timeliness of achieving a permanent plan for a child to minimize the duration of a stay in foster care. Staffing levels impact all the performance measures. Adequate staffing is essential to respond timely, provide assessments, ensure family stability, and provide access to services prior to removal, during reunification activities or when moving children to an alternate permanent home, and support family time (visitation) between children and families frequently while in foster care,

The workforce should be composed of staff who are diverse, talented, dedicated, motivated, skilled, resilient and adaptable to change and include those with lived experiences to competently, confidently and compassionately apply skills to their day-to-day work. These qualities are essential to providing equitable response to children, youth and families of color and that include linguistic and ability diversity as well as LGBTQIA2S+ diversity in services and supports that meet the individual needs of children, youth, and families.

The Child Welfare Division is using the Oregon Caseload Ratio Standard to establish goals for staffing and program needs. Promoting these workforce practices with the focus on prevention efforts and serving children and families safely at home, coupled with caseload ratios as recommended by the Child Welfare League of America (CWLA), Child Welfare has the framework for more manageable caseloads and the tools to help stay within those caseloads. With more manageable caseloads, it improves worker morale and retains qualified staff, in addition to the critical goal of improving outcomes for Oregon's children and families.

Central Office staffing for Child Welfare Design was not included in the Oregon Caseload Ratio Standard. However, the work of Child Welfare Design is vital to the delivery of services in local offices and Oregon's compliance with federal and state mandates. Child Welfare Design provides the oversight and continuous quality improvement and assurance of policy development, program design and changes required through legislation, federal reporting compliance, and direct practice support to the field.

Enabling Legislation/Program Authorization

Child Welfare services are mandated by multiple federal and state laws including PL96-272, Adoption Assistance and Child Welfare Act; PL95-608, Indian Child Welfare Act PL 105-89, Adoption and Safe Families Act; PL 110-351, Foster Connections to Success and Increasing Adoption Act; Social Security Act Title IV-E and Title IV-B; ORS Chapter 418, and ORS Chapter 419B, and Child Abuse Prevention and Treatment Act (CAPTA).

Funding Streams

Costs for personnel in program design and delivery are determined through Random Moment Sampling Surveys (RMSS) where field delivery staff are required at random intervals to indicate the time spent on various activities to determine the level of federal funding to offset the cost to the state of staff who directly support our ability to provide critical child welfare services. Block grant funds include Social Services Block Grant (SSBG) and Temporary Assistance for Needy Families (TANF) funds (TANF will no longer be available for 21-23). Leveraged funds include Medicaid, Title IV-E and IV-B funds. State-only General Fund also comprises a portion of the budget.

Funding Justification and Significant Changes from CSL to ARB

There are several policy option package investments in the ARB, in addition to the regular essential packages that are part of the normal budget build process.

PACKAGE NO.	PACKAGE TITLE:				
116	Grant Pgm for Community-Based Organizations				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSTIONS	FTE
135,396		55,303	190,699	1	0.75
PACKAGE DESCRIPTION: An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.					

PACKAGE NO.	PACKAGE TITLE:

118	Child Safety				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSTIONS	FTE
37,538,038		12,514,099	50,052,182	401	200.50

PACKAGE DESCRIPTION:

Children thrive when they have safe and supportive family structures in which to grow up. According to Oregon's May Child Welfare Progress Report, about 4,000 times every month Child Protective Services staff engage with families to identify whether children are being exposed to an unmanaged safety threat. Key ingredients in achieving our Child Welfare Division's Vision for Transformation are accurate assessments of child safety and in-home support to prevent placements away from family and community, but Child Welfare needs more staff to ensure that every family receives in-depth assessment and that safety threats are accurately identified. Current staffing levels make it difficult for staff to meaningfully engage with families, understand their specific needs, and develop customized safety plans – all tasks that require time, care, and skill. Without the staffing necessary to carry out these labor-intensive tasks, we may fail to identify safety issues and support families appropriately in addressing them, thus increasing the likelihood that a child will enter foster care – an often traumatizing outcome that disproportionately affects Black and Native American families. A staffing investment is necessary to meet the goal in the Oregon Caseload Ratio Standards that each CPS caseworker is assigned no more than 7 new assessments per month (1:7 ratio). The investment will ensure critical caseworker capacity for family engagement, assessment, safety planning, and ongoing support – helping to make sure that children have the best chance of growing up in a safe and nurturing family.

PACKAGE NO.	PACKAGE TITLE:				
119	Parent Alcohol & Drug Support Services				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSTIONS	FTE
1,088,443		362,841	1,451,284	8	6.00

PACKAGE DESCRIPTION:

Children do best when they grow up in a family within their community. However, substance use disorder (SUD) among parents is one of the greatest challenges to keeping children safe and healthy at home.

This POP aligns with recommendations from the Oregon Alcohol and Drug Policy Commission that aim to reduce Oregon's substance use disorder rate and increase Oregon's recovery rate.It builds capacity for the agency to better respond to the growing complexity of substance use disorder (SUD) among child welfare parents and creates capacity for building more consistent and efficient relationships with community partners and SUD treatment providers. When parents in the ODHS child welfare system can access treatment quicker, be supported in achieving recovery, and be assisted in sustaining their recovery from addiction, there will be fewer foster placements and improved child safety and family stability.

ODHS will also increase the internal expertise to respond to a variety of issues that combine with parental and adolescent SUD, including various mental health challenges and the need for clean

and sober housing. This proposal will also grow expertise on drug testing, engaging parents and partners, and sustaining community treatment relationships that work with parents and adolescents. These positions will also provide ODHS with needed consultation regarding resource family applicants who may have SUD histories or current use concerns.
Estimated need: reclass 25 SSS-1s to SSS-2s and add 8 new positions.

PACKAGE NO.	PACKAGE TITLE:				
120	CIRT and Safety Systems Analysis				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSTIONS	FTE
1,110,809		370,293	1,481,102	8	6.00

PACKAGE DESCRIPTION:
Preventing the maltreatment of children is core to the work of Child Welfare and to community well-being. Oregon created a Child Fatality Prevention & Review Program (CFPRP) to facilitate statutorily required reviews of child fatalities – conducted by Critical Incident Review Teams (CIRTs). Legislative changes to the criteria for conducting these reviews have led to an increase in the number of CIRTs assigned. And with many CIRTs involving parental substance abuse, focused prevention strategies are critical to making system-wide improvements.
This proposal enhances the infrastructure and capacity of the CFPRP to develop and implement prevention strategies using qualitative and quantitative data from our most tragic outcomes in Child Welfare. This POP also would support the continued work around the federal Comprehensive Addiction and Recovery Act via and continuation of infant safety, maltreatment and fatality prevention.

PACKAGE NO.	PACKAGE TITLE:				
121	Family Preservation & Engagement				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSTIONS	FTE
18,260,864		6,087,630	24,348,494	193	96.50

PACKAGE DESCRIPTION:
Children do best growing up in a family that can provide love, support, cultural continuity and cherished memories. For these reasons, ODHS Child Welfare Division's Vision for Transformation prioritizes supporting families and children at home and in their communities. While foster care is sometimes the only option for child safety, family separation is a traumatizing event. Child Welfare is actively building out its Family Preservation system, which is designed to spare children and families from the trauma of separation by incorporating the correct supports to manage safety in the home. To move our Family Preservation efforts forward, Child Welfare needs additional staffing. New staff positions will be focused on family engagement, co-creation with families of case plans, and ongoing support to meet the goals identified in the case plan. These efforts will reduce the need for foster care and can help families stay –and thrive – together. Unless Family Preservation efforts are fully implemented across Child Welfare's 16 districts, we risk the continued overreliance on foster care as a means of

managing safety, which translates into unnecessary family trauma and ongoing disproportionate impacts to Tribes and communities of color.

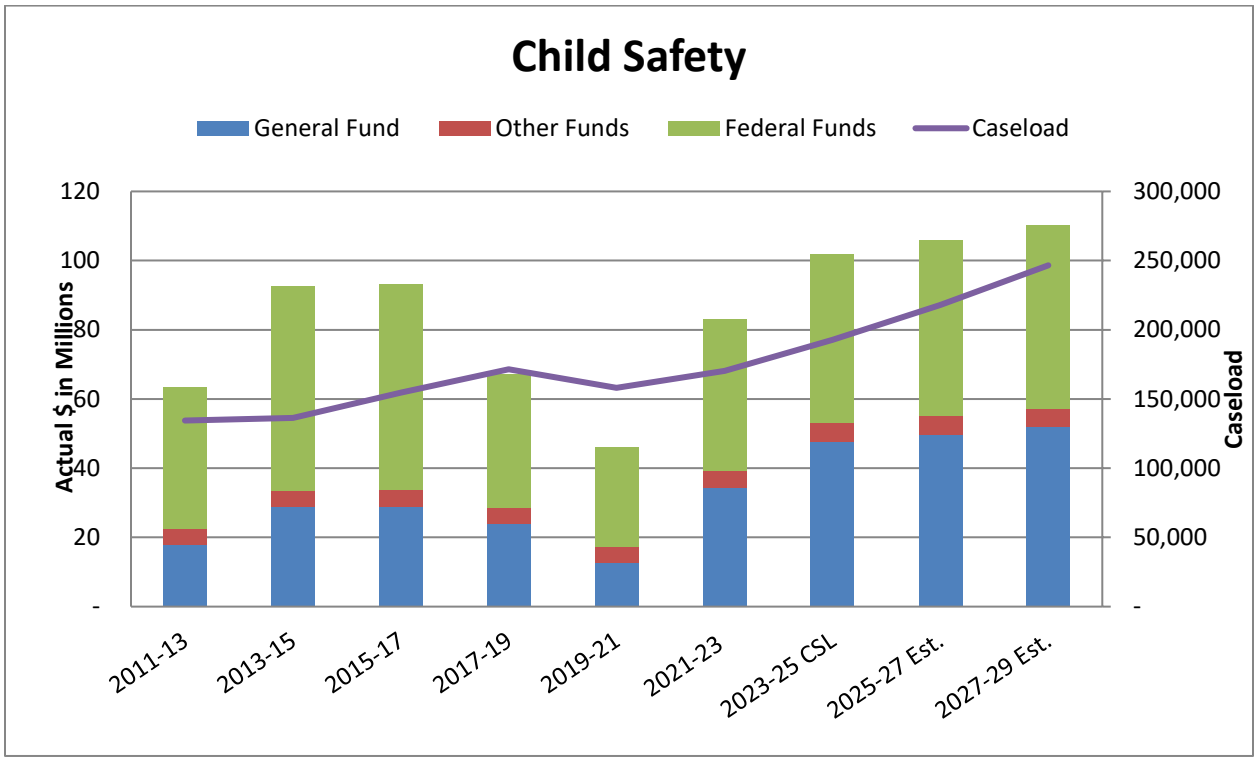
PACKAGE NO.	PACKAGE TITLE:				
301	ERDC Expansion - DELC companion				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSTIONS	FTE
42,228		40,572	82,800		

PACKAGE DESCRIPTION:

All children deserve supportive and nurturing places to learn and play while their parents are at work. Research indicates that quality childcare has a significant and positive impact on children's brain development, setting the stage for success later in life. But disparities persist when it comes to accessing quality childcare, with low-income families and families of color bearing most of the burden. We have a shared obligation to make sure that every child has the supports they need to reach their potential, and that means directly addressing this kind of disparity and promoting equitable access to childcare for all families. Employment Related Day Care (ERDC) is a federal program, partially funded by the Child Care Development Block Grant (CCDG), that helps mitigate these disparities by providing low-income working families with childcare subsidies. In Oregon, ERDC represents the largest childcare subsidy program and was enhanced through House Bill 3073 (2021) which expanded program eligibility to include families with student parents and children who are documented. The ERDC program has also capped co-pays at no more than 7 percent of a family's income, as well as waived the co-pays of families at 100 percent of the federal poverty level to $0. To continue our progress toward addressing longstanding inequities, the Early Learning Division (ELD) is introducing legislation in the 2023 Legislative Session to ensure that children at risk of involvement or involved in Oregon's foster care and child welfare systems, children from families experiencing domestic violence, and houseless families have access to quality, affordable care. This expanded eligibility will allow more families to access critical childcare supports, promoting both healthy development for children and uninterrupted employment for parents.

Oregon Department of Human Services: Child Safety

Primary Long-Term Focus Area: Safe and thriving communities with a reduction of disparate outcomes for children of color
Secondary Long-Term Focus Area: Prevention
Program Contact: Deena Loughary, Child Safety Manager



Note: Neglect and Threat of Harm of Neglect are the primary abuse categories driving the increase in Child Welfare caseloads, currently representing over 80 percent of all founded abuse.

Program Overview

This program provides protective and social services to children and families when allegations of child abuse or neglect are reported. Specially trained Child Protection Services (CPS) case workers conduct comprehensive safety assessments and make determinations about the following: child safety, the presence of abuse, if services would benefit a family or whether safety intervention is required due to the presence of safety threats. Services are delivered through Child Welfare staff or contracts that require linguistically and culturally appropriate service provision.

Services are designed to keep children safely with their parents, whenever possible, and to reunite children quickly and safely with their parents when they have been removed.

Program Funding Request

	GF	OF	FF	TF
LAB 21-23	34,414,815	4,836,460	43,955,183	83,206,458
ARB 23-25	47,994,861	5,027,703	48,765,963	101,788,527
Difference LAB - ARB	13,580,046	191,243	4,810,780	18,582,069
% Difference LAB - ARB	39.46%	3.95%	10.94%	22.33%

Program Description

The Oregon Department of Human Services (ODHS) Child Welfare Child Safety Program currently consists of one Child Safety Program Manager, two Assistant Managers, 6 Child Protective Services Program Coordinators (rule writing, implementation, training, and curriculum development, etc.) and 14 Child Safety Consultants who provide consultation, coaching, training, and support to caseworkers, supervisors, Program and District managers on the safety model practice, Oregon Administrative Rules and statutes. The Child Safety Consultants are located in the local child welfare delivery offices around the state and provide consultation and support to all 16 districts in Oregon. Child Welfare's Alcohol and Drug Services Coordinator and Domestic & Sexual Violence Fund Coordinator are also located within the Child Safety Program. Domestic Violence and Sexual Assault (DVSA) shelter and service programs are funded by the ODHS to help people in Oregon be safe, healthy, and independent. In addition, the program has 1 Child Protective Services Supervisor and 7 SSS1 caseworkers who function as a mobile CPS team.

The Child Safety Program is responsible for administering Child Protective Services in the state, including but not limited to the following:

- Commercial Sexual Exploitation of Children, which provides statewide consultation and technical assistance on child welfare cases where children are or at risk of being sexually trafficked.
- Child Protective Services, which includes assessments for familial and third-party child abuse allegations and certified resource parent assessments.
- The appeals process for people with founded CPS dispositions.
- The CPS Mobile Team, which supports the delivery offices statewide.

- Continuous Quality Improvement, including ongoing fidelity reviews in all 16 districts followed by the creation of Action Plans to make improvements to practice in screening and assessments.

CPS caseworkers in local offices respond to and assess allegations of child abuse and neglect for both familial and 3rd party. In 2022, the Child Safety Program established a new Oregon Administrative Rule to guide CPS caseworkers for 3rd party CPS assessments that do not include assessing the parents' capacity for keeping their child safe. On all allegations of abuse and neglect, CPS caseworkers are usually the first contact for families. The CPS caseworkers also respond to and assess allegations in resource or foster homes certified by Child Welfare, Office of Intellectual & Developmental Disabilities, and Oregon Youth Authority. CPS staff work closely with law enforcement agencies and other members of multidisciplinary teams in each county to assess child abuse reports.

When a child is unable to remain safely in their home, foster care is a temporary safety service, designed to keep children safe while Child Welfare works to manage safety threats and enhance the parents' protective capacities. The priority is to place children with kith/kin and work with families to make sure that children are only removed when an in-home safety plan cannot be implemented. When children are placed in care, which can only be done with court approval, Child Welfare places urgency on ensuring that children return home quickly and connect to family or other relatives whenever possible. Child abuse assessments are not voluntary. They are inherently intrusive and can be traumatic to families. Oregon's Safety Model is a family engagement model that requires Child Welfare caseworkers to work and partner with families and children to gain a comprehensive understanding of family functioning. Historically, Oregon's CPS assessments were focused on the allegations. With the adoption of the Safety Model, CPS caseworkers must assess the allegation but also determine if family behaviors, conditions, or circumstances are making children unsafe. Oregon's Safety Model consists of 16 universal safety threats that are analyzed from the safety-related information gathered by CPS Staff during the comprehensive safety assessment.

The Child Safety Program can best be described in two sections: CPS Assessment and In-Home services.

CPS Assessment
From January 1, 2021 to December 31, 2021, there were 175,038 contacts and 80,209 reports of child abuse or neglect; approximately 25 percent of reports were assigned for safety assessments. As part of the comprehensive safety assessment, the CPS caseworker gathers comprehensive safety-related information in the following categories: Extent of the maltreatment, circumstances surrounding the abuse, adult functioning, child functioning, parenting practices and disciplinary practices. Cultural and linguistic considerations are also factored into the process. This important safety-related information is used to determine overall child safety. If children are determined to be safe after the comprehensive safety assessment, the case is closed. If children are determined to be unsafe, safety planning occurs with either an in-home or out-of-home plan. The case will open, and the family will transition to a Permanency case worker once the CPS assessment concludes. The comprehensive safety assessment may take up to 60 days to complete based on the required elements of the safety model and CPS Assessment Rules.

In-Home Safety and Reunification Services (ISRS)
The ability to keep children safely at home is in large part dependent on the services that can be wrapped around the family to support them while safety concerns are addressed. Services are available to families during child abuse assessments when child safety issues are present. Services are designed to ensure a safe environment for children without removing them from their parents or caregiver. If circumstances require a child to be removed from their parent or caregiver, these services provide the necessary support to the family so the child can be safely reunited with their family. These services are specifically intended to help families remove barriers to managing identified safety threats with the goals of preventing of foster care placement by maintaining a child safely in the home with a parent or returning a child home to a parent.

These services support crucial child welfare initiatives to increase the number of children who can remain safely at home after a safety threat is identified and decrease the length of time a child spends in foster care if removal is required. By contracting with a wide variety of providers, ISRS also allows for a culturally and linguistically specific approach to reducing the disproportionate placement of children of color in foster care.

Over the year (FFY 2019), a total of 7,271 children were served in their homes. All children served in-home receive case management and safety services. Over 2,800

children (2,836 or 34.8 percent) also received additional services. Services offered primarily fall within two categories: In-Home Safety and Reunification Services (ISRS) and Strengthening, Preserving and Reunifying Families (SPRF) Program Services. In-Home Safety and Reunification Services (ISRS) are services designed to provide for the immediate safety of children at risk of abuse by managing the safety threats within the family to prevent removal; or when children have been placed in protective custody, to help them return home with in-home safety services.

The goal of these programs is to foster collaboration between state and community programs and resources, as well as help children remain safely with their families. State and community programs and resources can help stabilize the family in their time of need, work with the family to develop goals for family preservation services, family reunification services and empower the family to make changes that may alleviate the need for an out-of-home placement.

These programs are potentially an enhancement to ISRS services and are delivered through contracts with community providers. Parents and families benefit from ODHS, and communities working together to provide stronger up-front services and use voluntary engagement in solutions, services, and supports to achieve more successful resolution of issues.

Culturally relevant and linguistically specific services are especially important in helping African American and Native American children remain home with their families.

A key partner for program success is the Department of Justice (DOJ) Attorney General's Office, which provides legal representation to ODHS for all juvenile dependency work involving children under its jurisdiction. Oregon Child Welfare has full representation by DOJ, which also files and litigates termination of parental rights cases.

Program Justification and Link to Focus Areas

There is a direct link between the Child Safety Program and the Healthy and Safe Communities focus area, in that Oregonians will be safe where they live, work and play.

Each year, thousands of Oregon families come through the child welfare system due to allegations of child abuse or neglect. Child Welfare services are designed to strengthen families and to prevent further child abuse and neglect, prevent the unnecessary removal of children from families and promote reunification. Drug and alcohol abuse, together with domestic violence, are the two major family stressors contributing to children entering foster care in Oregon. By supporting families early with services designed to keep children safely with their parents, costly foster care placements are avoided. The total average monthly cost per child in foster care in 2020 was approximately $4,288.

Program Performance

The Child Safety Program measures its performance in three primary categories:

- **First contact**: To measure how well ODHS ensures initial child safety, the timeliness of first contact is measured for those reports of child abuse and neglect that are assigned for in-person investigation. According to ROM (Results-Oriented Management CPS.03), 71.2 percent of assignments met the required time period in 2021. The Department's Program Improvement Plan will focus on this measurement for improvement.
- **Assessment**: ODHS measures the comprehensiveness of the CPS assessment by the level of services that were provided and the appropriateness of safety planning for the child by monitoring whether the child experienced repeat maltreatment within 12 months of a prior abuse. The period for this federal measurement is 12 months and the state measurement are 6 months.
- **Re-abuse:** For 2021, Child Welfare is above the national standard of 9.1% for this measurement, at 12 percent. Cases involving parental factors of domestic violence and substance abuse continue to be identified as themes for re-abuse across the state. The Department's Program Improvement Plan will focus on this measurement and activities to decrease re-abuse in Oregon.

Enabling Legislation/Program Authorization

ORS 419B.020 is the statute that mandates the Department and Law Enforcement to conduct investigations upon receipt of reports of child abuse or neglect.

The Child Abuse Prevention and Treatment Act (CAPTA) is one of the key pieces of legislation that guides child protection. CAPTA, in its original inception, was

signed into law in 1974 (P.L. 93-247). It has been reauthorized in on multiple occasions since then with multiple amendments that have strengthened and refined the scope of the law.

ORS 418.575 through 418.598, Strengthening, Preserving and Reunifying Families legislation, was passed during the 2011 legislative session. The Indian Child Welfare Act (ICWA) also applies.

Funding Resources

Child Safety Program uses a combination of general and federal fund resources. Some of the resources are dedicated and do not require a match, while other fund sources are leveraged funds which are matched.

Total Fund Split is 47% General Fund, 48% Federal Fund and 5% Other Fund.

Federal and Other Fund Splits:

Title IV-E, including Chafee ETV	11%	The largest federal funding stream dedicated to child welfare purposes, Title IV-E of the Social Security Act provides support to states through five main programs: (1) foster care; (2) adoption assistance; (3) guardianship assistance; (4) Family First Prevention Services program; and (5) the John H. Chafee Foster Care Program for Successful Transition to Adulthood and Chafee Education and Training Vouchers Program.
SSBG	23%	Social Services Block Grant is a flexible source of federal funds that allows states to tailor social service programming to their populations' needs. Through the SSBG, states provide essential social services linked to its goals to reduce dependency and promote self-sufficiency; protect children and adults from neglect, abuse and exploitation; and help individuals who are unable to take care of themselves to stay in their homes or to find the best institutional arrangements.
Title IV-B Sub-Part 1	5%	Stephanie Tubb Jones Child Welfare Services promotes flexibility in the development and expansion of a coordinated child and family services program that

		utilizes community-based agencies and ensures all children are raised in safe, loving families. CWS funds can be used for a wide variety of child welfare services.
Title IV-B Sub-Part 2	4%	The purpose of MaryLee Allen Promoting Safe and Stable Families is to enable states to develop and operate coordinated programs of community-based family support services, family preservation services, family reunification services, and adoption promotion and support services.
Family Violence Prevention and Services Act	4%	The purpose of this funding resource is dedicated to the support of the emergency shelter and related assistance for victims of domestic violence and their children.
TANF – EA	1%	TANF is a federal block grant to states that operates according to four overarching purposes, one of which is to aid needy families with children so that the children can live in their own homes or the homes of relatives. For children removed from their homes due to abuse and neglect by their parents, TANF can be used to provide financial assistance and an array of services to support children living with non-parent caregivers. In addition, federal law allows states to use TANF dollars for programs or activities a state conducted under its pre-1996 (pre-TANF) Emergency Assistance program.
Other Fund	5%	These include dollars from the Child Abuse Prevention and treatment Act, the Children's Justice Act and the Victims of Crime Act. Also consists of child income-related funding which include but are not limited to: Child Support, Social Security Income and other Social Security Benefits (i.e., death benefits or disability benefits).

Funding Justification and Significant Changes to CSL

Child Welfare will be putting forward a policy option package investments in this area for the upcoming 2023 legislative session. The regular essential packages are

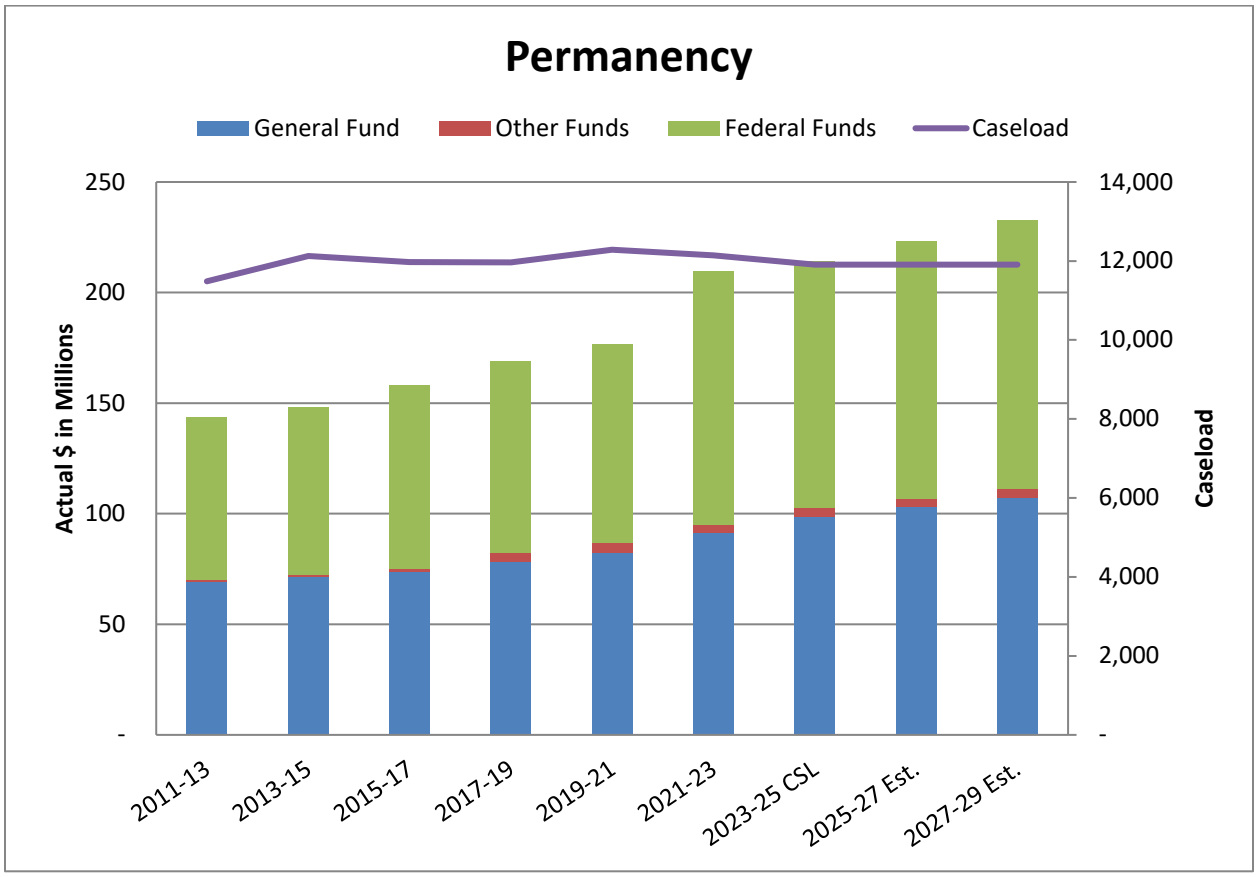
included in the Agency Request Budget and are part of the normal budget build process.

Package Number: 124	Package Title: SSB & Child Support Payments Package				
General Fund	Other Funds	Federal Funds	Total Funds	Positions	FTE
186,765	(206,069)	19,304	-	n/a	n/a

Description: (Safety Portion)
Child Support, Social Security Benefits (SSB), and Supplemental Security Income (SSI) provide valuable social insurance to children and families. However, children in foster care are not able to use those funds because they are used to supplement foster care costs. This makes it more difficult for families to overcome poverty and it perpetuates inequities. This POP proposes to conserve SSI, SSB and child support funds for youth in foster care and make the funds available in a savings account when they exit foster care. These funds will support reunification and help youth better support themselves as they transition into adulthood.

Oregon Department of Human Services: Permanency

Primary Long-Term Focus Area: Healthy and Safe Communities
Secondary Long-Term Focus Area: Achieving permanency for children involved with the child welfare system
Program Contact: Kim Keller, Child Permanency Program Manager



Program Overview

The Child Permanency Program helps children in foster care achieve legal permanency through reunification, adoption, or guardianship. If children achieve legal permanency through adoption or guardianship, this program continues to provide support to the families and their children to meet their special needs and lifelong challenges.

Program Funding Request

	GF	OF	FF	TF
LAB 21-23	91,343,034	3,945,360	114,416,593	209,704,987
ARB 23-25	119,880,763	3,570,974	130,697,256	254,148,993
Difference LAB - ARB	28,537,729	(374,386)	16,280,663	44,444,006
% Difference LAB - ARB	31.24%	-9.49%	14.23%	21.19%

Program Description

The primary permanent plan for all children who enter the foster care system is reunification with a parent, except in rare circumstances. Reunification services are delivered through the efforts of delivery staff with consultation, support, training, and technical assistance from central office consultation staff. If a child in foster care is unable to be safely reunited with a parent, Child Welfare pursues adoption or guardianship.

Adoption and guardianship services are delivered through the joint efforts of delivery (field) and design staff. When children are unable to return to their parent's custody, the Division's efforts are directed to finding a permanent family so the children can leave the foster care system. Research shows that children who turn 18 and age out of the foster care system have poorer outcomes compared to children raised in a permanent home. Delivery staff carry out the process of preparing children for adoption or guardianship, legally freeing children for adoption, working with relatives for family support and/or placement or searching for another appropriate permanent resource family, transitioning the child(ren), and monitoring the placement until the adoption or guardianship is finalized. Central office staff support delivery staff in determining which children should move toward an adoption plan and how to legally free them for adoption, ensuring the completeness of the file for adoption, negotiating Adoption Assistance, finalizing the adoption, and supporting families after the adoption. Similarly, Design staff provide the same support and carry out the same tasks when the plan is guardianship.

During the 19-21 biennium, ODHS returned 3,976 children to a parent and completed 1,625 adoptions and 735 guardianships. Most children adopted or placed in guardianships through Oregon's foster care system are eligible for ongoing financial support and medical coverage. Overall, approximately 12,000 families receive ongoing adoption and guardianship financial support to assist with meeting their children's special needs. Child Welfare also provides administrative oversight in all private and independent adoptions and operates a Search and Registry Program that is mandated by law. This adds program responsibility for an

additional 700-900 children who are adopted privately or independently each year in Oregon.

ODHS works closely with the Department of Justice (DOJ), which provides legal representation for ODHS caseworkers. DOJ also represents ODHS in termination of parental rights cases and in guardianship petitions.

Other key partners include private mediators and attorneys, private adoption and recruitment agencies, the Oregon Post Adoption Resource Center, and the Division of Medical Assistance Programs at the Oregon Health Authority.

Primary cost drivers for the Child Permanency Program include the legal costs of representation throughout the case, freeing and placing children for adoption or filing for legal guardianships, contracted services, and costs associated with adoption and guardianship assistance. Based on their history of trauma, caused by abuse and/or neglect, children adopted annually from the child welfare system are considered special needs children and eligible for an adoption subsidy. Families for approximately 95 percent of the eligible children choose to receive some monetary adoption assistance to assist in meeting these children's special needs. Children entering legal guardianships have the same history of trauma from abuse and/or neglect and are also eligible for subsidies. Most families accept the monetary support and medical coverage to meet the ongoing special needs of their guardian children.

Program Justification and Link to Focus Areas

The Child Permanency Program is designed to impact the safe and equitable reduction of children in foster care, which promotes healthy and safe communities. Children in foster care, their parents and resource parents need targeted, family-focused, timely, and culturally responsive services to achieve reunification. Those who cannot safely be reunified with their biological or legal parents need safe and appropriate alternate forms of permanency. Children who have experienced abuse and neglect are better able to recover from that trauma when they can achieve permanency. Evidence shows that children who do not have permanency are more likely to experience issues in the future such as lack of education, unemployment, homelessness, and incarceration at much higher rates than the general population. Specifically, children formerly in foster care who age-out have higher rates of mental illness, including clinically diagnosed mental health problems, depression and post-traumatic stress disorder. These children have a greater chance of

involvement with the corrections community, experiencing early parenting, and/or using the services provided by the Oregon Health Authority and the Addictions and Mental Health program. The safety and stability that come with a permanent home help mitigate the risk of poor future outcomes for those who were abused and placed into foster care as children.

Other non-monetary post-adoption and guardianship services are important in assisting families in providing care for children who often enter adoption and guardianship with significant special needs. Children who have experienced significant abuse and neglect will be challenged to address their history as they move through different developmental stages. Ongoing support of families who are parenting these children is essential to preserve placements. Post-adoption and guardianship services provided by the Oregon Post Adoption Resource Center (ORPARC) include information and referral, consultation in response to imminent and current family crises, in-home family therapy, support groups, training, and a lending library. In calendar year 2021, 5,298 direct contacts were made for support, 4,135 people attended trainings, and there were 696 library users. In addition, 15,649 unique web visitors were served through the Oregon Post Adoption Resource Center website. Children who disrupt from adoption or guardianship re-enter the foster care or residential treatment system at a significant cost to the state.

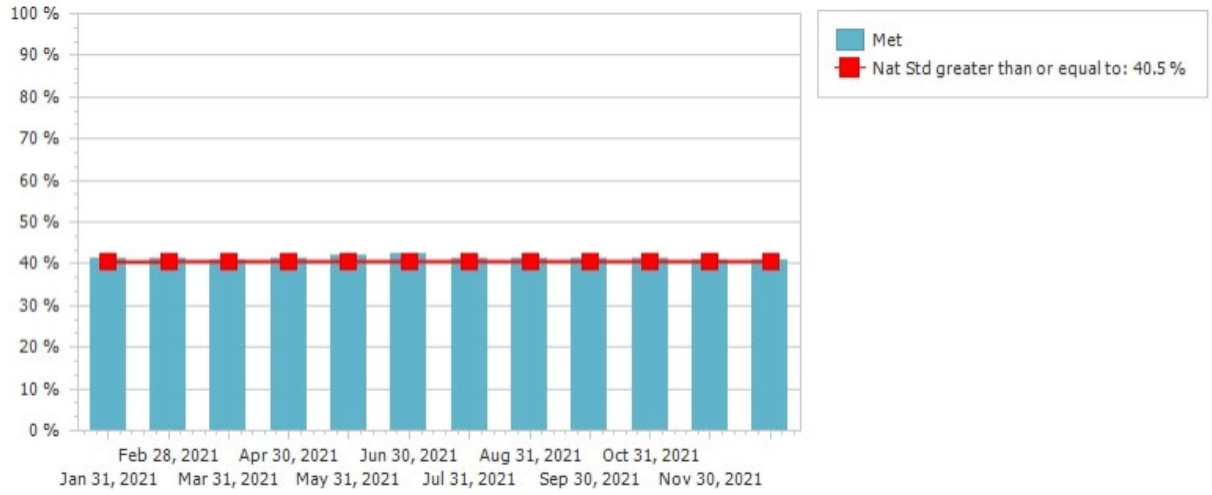
Program Performance

Program performance is measured in several ways, and data is consistently used to evaluate effectiveness. Currently the Child Permanency Program is focusing on specific performance measures and designing its program activities to impact these areas. They include children achieving permanency within 12 months of entering foster care, reducing the median months for children to exit the foster care system to reunification, adoption and guardianship, and improving the number of legally free children who are adopted in less than 12 months.

PA.01 (Fed) Permanency in 12 Months

Of all children who enter foster care in a target 12-month period, what percent discharged to permanency within 12 months of entering foster care

Report Time Period: January 1, 2021 - December 31, 2021

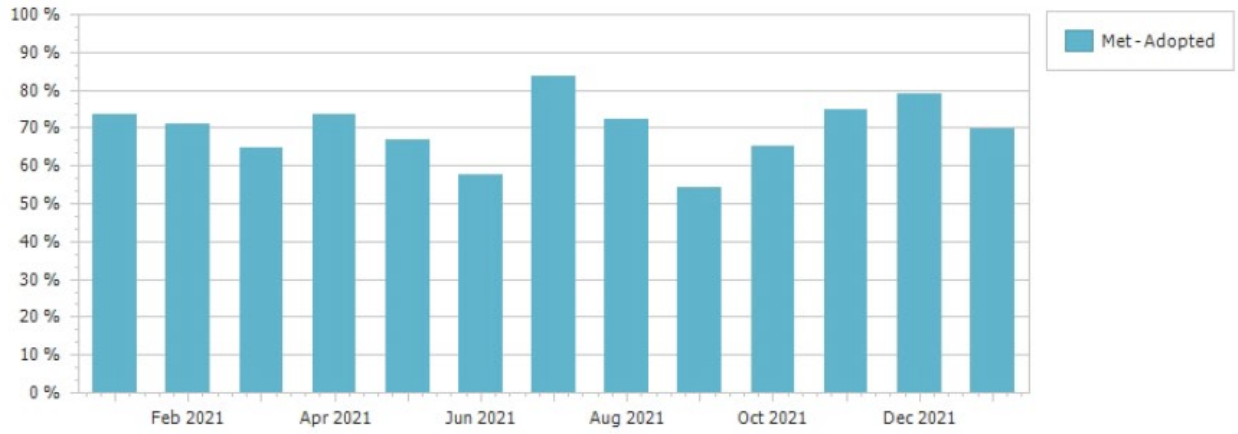


The Federal Standard for Permanency in 12 months is 40.5% or higher for children who have entered foster care achieved permanency in less than 12 months. In 2021, Oregon is maintaining Permanency in 12 months with 41.5%.

PA.12 Adopted in less than 12 months of TPR (of those TPR 12 months ago)

Percent of children that became legally free for adoption (TPR) 12 months ago who were discharged to a finalized adoption in less than 12 months of becoming legally free (TPR).

Report Time Period: January 1, 2021 - December 31, 2021



Report Period	Jan 2021		Feb 2021		Mar 2021		Apr 2021		May 2021		Jun 2021		Jul 2021		Aug 2021	
	Count	%	Count	%	Count	%	Count	%	Count	%	Count	%	Count	%	Count	%
Total	60	100.0%	45	100.0%	51	100.0%	30	100.0%	12	100.0%	33	100.0%	37	100.0%	65	100.0%
Met - Adopted	44	73.3%	32	71.1%	33	64.7%	22	73.3%	8	66.7%	19	57.6%	31	83.8%	47	72.3%
Not Met - Not Adopted	16	26.7%	13	28.9%	18	35.3%	8	26.7%	4	33.3%	14	42.4%	6	16.2%	18	27.7%
Remained foster care	12	20.0%	8	17.8%	13	25.5%	5	16.7%	4	33.3%	13	39.4%	4	10.8%	10	15.4%
Other Discharges	0	0.0%	0	0.0%	1	2.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Adoptive placement	4	6.7%	5	11.1%	4	7.8%	3	10.0%	0	0.0%	1	3.0%	2	5.4%	8	12.3%
Dates of TPR	Jan 2020		Feb 2020		Mar 2020		Apr 2020		May 2020		Jun 2020		Jul 2020		Aug 2020	

Report Period	Sep 2021		Oct 2021		Nov 2021		Dec 2021		Total: Jan - Dec 2021	
	Count	%	Count	%	Count	%	Count	%	Count	%
Total	48	100.0%	46	100.0%	64	100.0%	38	100.0%	529	100.0%
Met - Adopted	26	54.2%	30	65.2%	48	75.0%	30	78.9%	370	69.9%
Not Met - Not Adopted	22	45.8%	16	34.8%	16	25.0%	8	21.1%	159	30.1%
Remained foster care	15	31.3%	12	26.1%	14	21.9%	5	13.2%	115	21.7%
Other Discharges	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.2%
Adoptive placement	7	14.6%	4	8.7%	2	3.1%	3	7.9%	43	8.1%
Dates of TPR	Sep 2020		Oct 2020		Nov 2020		Dec 2020		Jan - Dec 2020	

Since 2019, Oregon has been trending upwards with the percent of children discharged with a finalized adoption in less than 12 months of becoming legally free (2019: 47.9%, 2020: 57.3%, and 2021: 69.9%).

Enabling Legislation/Program Authorization

The following Federal and State laws mandate the operation of permanency planning for children in the foster care system:

- Public Law 96-272 Adoption Assistance and Child Welfare Act of 1980 which established the program of adoption assistance and introduced the requirement to make reasonable efforts to keep children out of foster care
- Public Law 105-89 The Adoption and Safe Families Act which set federal timelines for moving children out of foster care
- Social Security Act, Section 473 which mandates the payment of adoption assistance for eligible children
- Social Security Act, Section 473 which allows non-mandatory payment of guardianship assistance for eligible children
- Oregon Revised Statute 418.330 which provides state funded guardianship assistance
- The Indian Child Welfare Act (ICWA)
- ORS 419A and 419B which provide a series of requirements for services to children in the foster care system
- ORS 109.309 which mandates the Department of Human Services to provide administrative services for independent adoptions, ORS 109.450 to operate a state Search and Registry program, and various other adoption related statutes within ORS Chapter 109.
- The Oregon Indian Child Welfare Act passed in 2020 which created provisions that promote Indian children's continued connection to culture, family and tribe.

Funding Streams

A combination of General and Federal Title IV-E funds the adoption and guardianship subsidy programs. Title XIX Medicaid funds the provision of medical coverage for children in adoptions and guardianship subsidies.

Total Fund Split is 47% General Fund, 52% Federal Fund and 1% Other Fund.

Federal and Other Fund Splits:

Title IV-E	51%	The largest federal funding stream dedicated to child welfare purposes, Title IV-E of the Social Security Act provides support to states through five main programs: (1) foster care; (2) adoption assistance; (3) guardianship

		assistance; (4) Family First Prevention Services program; and (5) the John H. Chafee Foster Care Program for Successful Transition to Adulthood and Chafee Education and Training Vouchers Program.
IV-B sub-part 2	1%	The purpose of Mary Lee Allen Promoting Safe and Stable Families is to enable states to develop and operate coordinated programs of community-based family support services, family preservation services, family reunification services, and adoption promotion and support services.
Other Fund	1%	Consists of child income-related funding which include but are not limited to: Child Support, Social Security Income and other Social Security Benefits (i.e., death benefits or disability benefits).

Funding Justification and Significant Changes to CSL

Child Welfare will be putting forward two policy option package investments impacting this area for the upcoming 2023 legislative session. The regular essential packages are included in the Agency Request Budget and are part of the normal budget build process.

Package Number: 123	Package Title: FC/Resource Parent Reimbursement Rates				
General Fund	Other Funds	Federal Funds	Total Funds	Positions	FTE
20,942,706	-	18,965,786	39,908,492	n/a	n/a
Description: (Permanency Portion) All children deserve to grow up in a family. If a child is not able to remain in their own home, we need resource families who are diverse and affirming and can provide the support a child needs within their communities. Resource families receive a monthly payment, but the rates for Foster Care have not been adjusted since 2018. In 2018, the rates were based on 56.5% of the cost of raising a child at the USDA rate. Cost of living and inflation rates have continued to climb. The rate is intended to cover costs of food, shelter, clothing, school supplies, extracurricular					

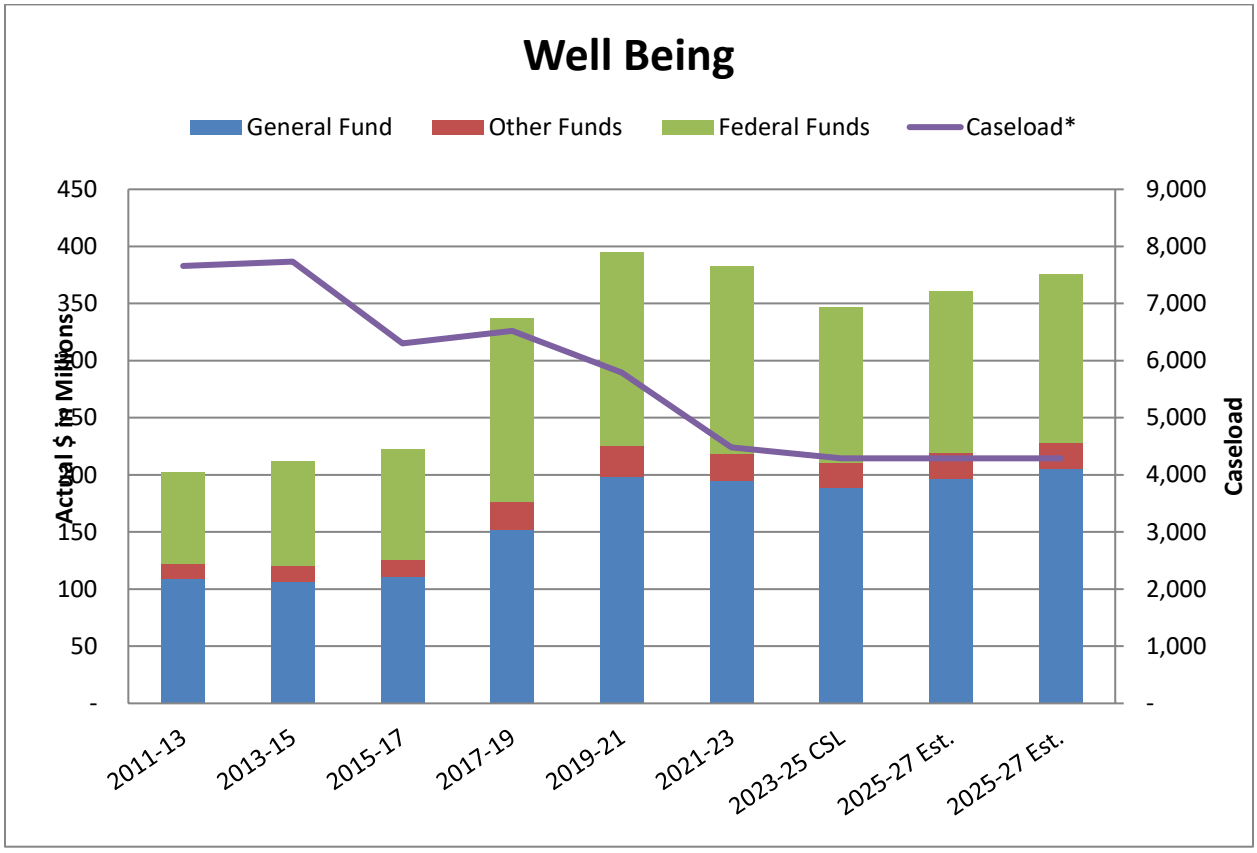
activities, etc. for children in ODHS foster care. Resource Families have voiced to ODHS that the current rate does not cover the actual cost of caring for a child. The policy option package would bring the basic family foster care rate up to 80%-100% of the cost of care to raise a child. The rate would change at each biennium to include regular inflation and additionally, medical, and professional inflation. This would allow for increases every biennium.
Increasing the rates could help attract and retain more resource families and help current resource families cover the cost of care.

Package Number: 124	Package Title: SSB & Child Support Payments Package				
General Fund	Other Funds	Federal Funds	Total Funds	Positions	FTE
260,948	(374,386)	113,438	-	n/a	n/a

Description: (Permanency Portion)
Child Support, Social Security Benefits (SSB), and Supplemental Security Income (SSI) provide valuable social insurance to children and families. However, children in foster care are not able to use those funds because they are used to supplement foster care costs. This makes it more difficult for families to overcome poverty and it perpetuates inequities. This POP proposes to conserve SSI, SSB and child support funds for youth in foster care and make the funds available in a savings account when they exit foster care. These funds will support reunification and help youth better support themselves as they transition into adulthood.

Department of Human Services: Well-Being

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Long-Term Focus Area: Supporting families through trauma-informed, community-centered, culturally responsive services focused on well-being
Program Contact: Stacey Loboy, Foster Care Manager
Sara Fox, Treatment Services Manager
Kelly Brezinski, Youth Transitions Manager



Note: On average, in 23-25 the caseload as of the Spring 2022 forecast is projected to be 4,290 children in paid foster care on any given day in Oregon.

Program Overview

The Child Well-Being Program, including the Foster Care, Youth Transitions and Treatment Services programs, is designed to function as a critical safety network for children with immediate safety needs, as well as provide support and services to youth and young adults in foster care. ODHS is responsible for caring for

children until they can safely live with their parents per ORS 418.015. These children are placed in the legal custody of ODHS by a court. Under limited circumstances and for a short time, a family may place a child in State custody voluntarily. However, most of the children served in foster care are there involuntarily, with court intervention, as a result of abuse or neglect they experienced in their family home.

Program Funding Request

	GF	OF	FF	TF
LAB 21-23	194,757,471	23,884,310	164,186,314	382,828,095
ARB 23-25	260,072,790	14,552,130	161,634,040	436,258,960
Difference LAB - ARB	65,315,319	(9,332,180)	(2,552,274)	53,430,865
% Difference LAB - ARB	33.54%	-39.07%	-1.55%	13.96%

Program Description

The Foster Care services program operates 24 hours a day, seven days a week to accept and care for children, youth, and young adults who cannot remain safely in their family homes. The children, youth, and young adults' range in age from birth to 21 years old. In the federal fiscal year (FFY) 2020, a total of 9,838 children spent at least one day in in family foster care, professional treatment programs, psychiatric residential treatment, pre-adoptive placements, developmental disability placements, and/or independent living, with the majority of these children and youth residing in family foster home settings. There are approximately 3,200 Oregon families who serve as a resource parent or relative caregiver for children needing placement.

ODHS partners with community members and organizations representing diverse community and cultural perspectives to deliver foster care services to children youth and young adults across the state. The agency has federal and state mandates, as well as an internal vision, to provide efforts to reunify children with their parents. 54.7 percent of children entering care returned home to a parent in FFY 2020. There are approximately 37 licensed private Child Caring Agencies in Oregon that are caring for children and youth, most often because the child or youth has a significant behavioral or mental health need. Approximately 200 children are placed with Licensed Child Caring Agencies to provide a higher level of specialized care.

The Child Well-Being program also responds to the overall well-being of the child, youth, or young adult in care. Well-being is identified as caring for and attending

to the child's behavioral, emotional, educational, health and social functioning. This is best identified through meeting the core educational needs, physical, dental, and mental health needs, needs for family, and community connections.

Child Welfare supports programming that helps to attend to the safety and well-being needs of children, youth, and young adults, while expanding the available service array to meet the unique and diverse needs of Oregon's most vulnerable populations. ODHS works in collaboration with multiple Tribal Nations, state, and local government agencies such as the Oregon Health Authority, Oregon Youth Authority, Oregon Department of Education, Office of Developmental Disabilities Services, Self-Sufficiency Programs, and local law enforcement in addition to a significant number of community programs, schools, business and faith communities, and volunteer programs. With the Vison for Transformation, Child Welfare continues to focus on safely and equitably reducing the number of children that enter the foster care system and providing for the care and well-being of children who enter the system. Children who must enter the foster care system often have greater needs than those who can remain at home. The program needs well-trained and supported staff to meet the needs of children experiencing foster care, their parents, and their resource parents.

The average monthly cost per child in foster care is approximately $4,288. There are multiple cost drivers to this program area including the number of children entering the substitute care system due to abuse or neglect, and the length of time they experience substitute care. A significant cost driver is an increased cost of living within the community and daily expenses for providing food, clothing, shelter, education, or other support services for children and youths. As an example, resource parents caring for a 10-year-old child are currently reimbursed at a rate of $24.09 per day. This is intended to cover the cost of providing food, clothing, shelter, school supplies, and the cost to participate in activities, etc. Often the additional costs for the child are paid for by the resource parent, which remains a barrier for many families and the private child-caring agencies across the state. After a 10 percent reduction in the reimbursement rates in 2011, they were last increased in 2018.

Efficiencies to improve outcomes include a reinvestment in local community services to strengthen families and reduce the need for foster care. In addition, for children who are in foster care, increased attention on the need for educational support and school placement continuity, increased access, and continuity of

comprehensive health care (physical, mental and dental health), resources/supports for older teens and young adults preparing to exit the foster care system and increased financial and structural support for resource families and private agencies who care for the children and youth.

The Well-Being program is also responsible for the certification and support of resource families and relative caregivers who care for children in the Department's custody. This includes recruitment, assessment, retention, training, and support. Training of these families is conducted both by agency staff and through contracted providers. Families participate in a Structured Analysis Family Evaluation (SAFE) home study assessment, designed to evaluate a family's readiness to meet the needs of children that enter the system.

Program Justification and Link to Focus Areas

The Child Well-Being Program is an integral part of the State's Plan to achieve a Safer, Healthier Community for the residents of Oregon. As a state policy, Child Well-Being programs are necessary to ensure safety for children if and when they are unable to remain safely with their families. Reliance on the foster care system over the years has reached a capacity that is no longer sustainable in Oregon. The financial support for this system has not kept up with growing costs, which has negatively impacted the ability of potential resource families to step forward to provide family foster care.

Ongoing research indicates that, if substantive preventive services are accessed quickly, many children can safely remain at home, which reduces the need for children to be placed into the foster care system. Re-directing resources away from the removal of children from families and increasing the capacity of families who currently have children in the substitute care system by investing in upfront and in-home services within communities will pay far greater dividends to Oregon in meeting the outcomes identified in the state's plan.

Program Performance

Program performance is measured in the following ways:

- The number of children entering foster care during FFY 2020 (2,748) dropped from FFY 2019 (3,332), a decrease of 17.5 percent. The number of children leaving foster care decreased by 7.1 percent during the period.
- For FFY 2020, 54.7 percent of children who left foster care were reunified with their families.

- The median months to exit foster care is 20.9 months, which is higher than FFY 20219 (19.7 months). For children who were reunited with families, this time period includes the trial home visit, which can be up to six months.
- The number of resource families (i.e., foster families) on 9/30/2020 was 3,799 families. This is a decrease of 143 homes from 9/30/2019.
- Teens (13 years and older) comprised 28.7 percent of the foster care population. A total of 2,826 teens spent at least one day in foster care during FFY 2020, a decrease of 7.6 percent from FFY 2019.
- A total of 196 current and former foster care youth received Chafee ETV scholarships for the 2019-2020 school year, an increase of 14 from the 2018-2019 school year.
- The number of youth receiving ILP services in FFY 2020 (1,250) decreased by 5.4 percent from FFY 2019 (1,322).

Enabling Legislation/Program Authorization

Several Federal acts are centered on the care for children through substitute care programs. Some of the more prominent Federal acts and Federal regulations are noted below.

- *Adoption Assistance and Child Welfare Act P.L. 96-272*. To establish a program of adoption assistance, strengthen the program of foster care assistance for needy and dependent children, and improve the child welfare, social services, and aid to families with dependent children's programs. It requires states to ensure and the courts to determine that reasonable efforts continue to be made on behalf of each individual child to mitigate the need for continued foster care.
- *Indian Child Welfare Act (ICWA) PL 95-60*. To establish standards for the placement of Indian children in foster and adoptive homes and to prevent the breakup of Indian families.
- *Adoption and Safe Family Act PL 105-89.* To promote the adoption of children in foster care by placing limitations and timelines.
- *Foster Care Independence Act of 1999 PL 160-169.* To help children make a successful transition from foster care to adulthood and self-sufficiency.
- *Fostering Connection to Success and Increasing Adoption Act PL 110-35.* To support and connect relative caregivers and improve outcomes for children in foster care.

Funding Resources

Well-Being Program uses a combination general and federal fund resources. Some of the resources are dedicated and do not require a match, while other fund sources are leveraged funds which are matched.

Total Fund Split is 60% General Fund, 37% Federal Fund and 3% Other Fund.

Federal and Other Fund Splits:

Title IV-E, including Chafee ETV	23%	The largest federal funding stream dedicated to child welfare purposes, Title IV-E of the Social Security Act provides support to states through five main programs: (1) foster care; (2) adoption assistance; (3) guardianship assistance; (4) Family First Prevention Services program; and (5) the John H. Chafee Foster Care Program for Successful Transition to Adulthood and Chafee Education and Training Vouchers Program.
IV-B sub-part 2	<1%	The purpose of Mary Lee Allen Promoting Safe and Stable Families is to enable states to develop and operate coordinated programs of community-based family support services, family preservation services, family reunification services, and adoption promotion and support services.
TANF – EA	7%	TANF is a federal block grant to states that operate according to four overarching purposes, one of which is to aid needy families with children so that the children can live in their own homes or the homes of relatives. For children removed from their homes due to abuse and neglect by their parents, TANF can be used to provide financial assistance and an array of services to support children living with non-parent caregivers. In addition, federal law allows states to use TANF dollars for programs or activities a state conducted under its pre-1996 (pre-TANF) Emergency Assistance program.
Title XIX	5%	Medicaid is a federal-state health care financing program that provides health insurance to millions of low-income individuals. In addition to funding basic health care

		services, Medicaid can be used to support certain activities related to child welfare, described below.
Other Fund	3%	Consists of child income-related funding which include but are not limited to: Child Support, Social Security Income and other Social Security Benefits (i.e., death benefits or disability benefits).

Funding Justification and Significant Changes to CSL

Child Welfare will be putting forward three policy option package investments impacting this area for the upcoming 2023 legislative session. The regular essential packages are included in the Agency Request Budget and are part of the normal budget build process.

Package Number: 122	Package Title: FOCUS Expansion				
General Fund	Other Funds	Federal Funds	Total Funds	Positions	FTE
16,480,000	-	-	16,480,000	n/a	n/a

Description:

Children deserve to grow up in their own communities, where their established connections with family, friends, teachers and others can support their well-being. But children with complex needs are more likely to be placed outside their communities in order to receive specialized services. This proposal seeks to strengthen the well-being of Oregon families through intensive community-based support services for children with complex needs, allowing them to remain in their own communities in a resource home, relative care or parent's home. These services will provide coaching, training and support to caregivers and individualized services specific to the child's needs to help keep the child in stable, community-based and familial placements as well as reduce the risk of placement disruption, Temporary Lodging and the use of higher levels of care, including residential treatment. This proposal, if approved, will allow for services to be developed throughout the state, including in rural communities. In the long term, these services will prevent unnecessary foster care placements, support families,

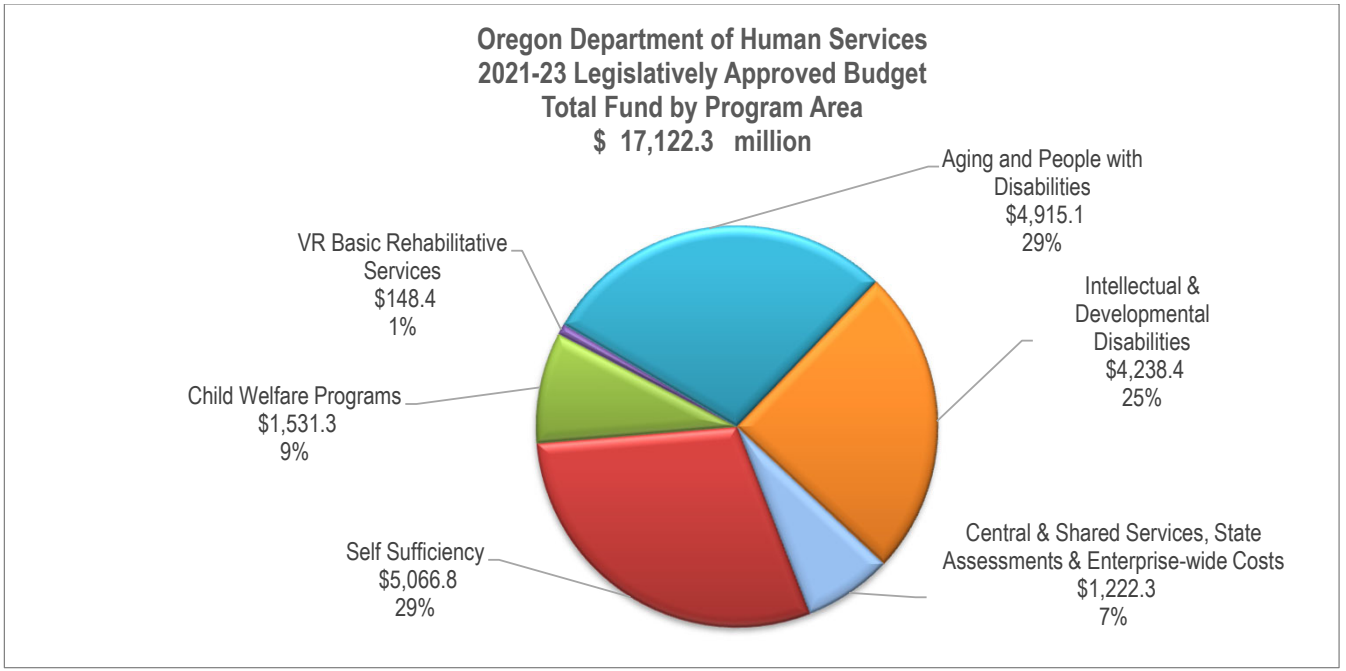
improve the retention of resource parents, and ultimately save the state money through effective early intervention and partnerships with other systems. The services included in this proposal are Child Specific Caregiver Services, Response and Support Network (RSN), Community-based supports for Commercial Sexually Exploited Children (CSEC) youth and Multidimensional Transition Services. This proposal requests funding and resources necessary to implement, oversee and audit these services.

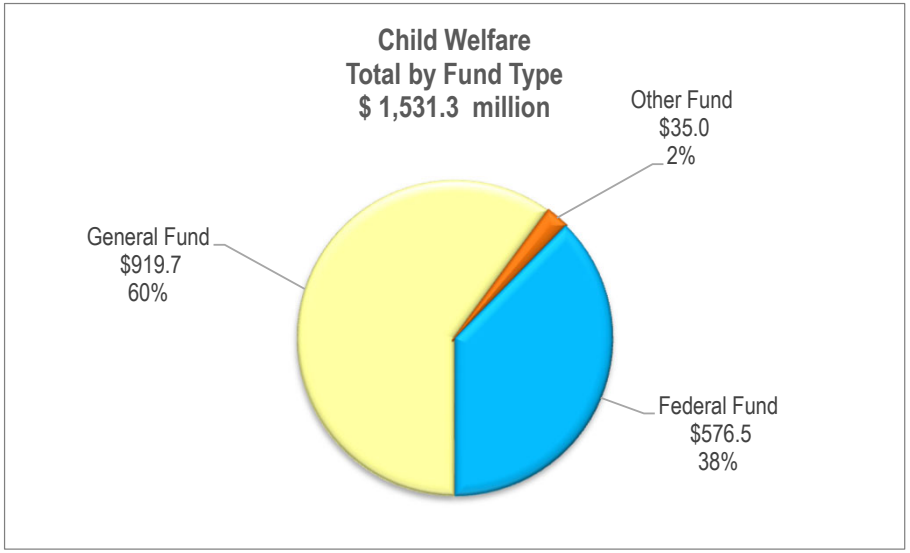
Package Number: 123	Package Title: FC/Resource Parent Reimbursement Rates				
General Fund	Other Funds	Federal Funds	Total Funds	Positions	FTE
49,385,469	-	23,240,259	72,625,728	n/a	n/a

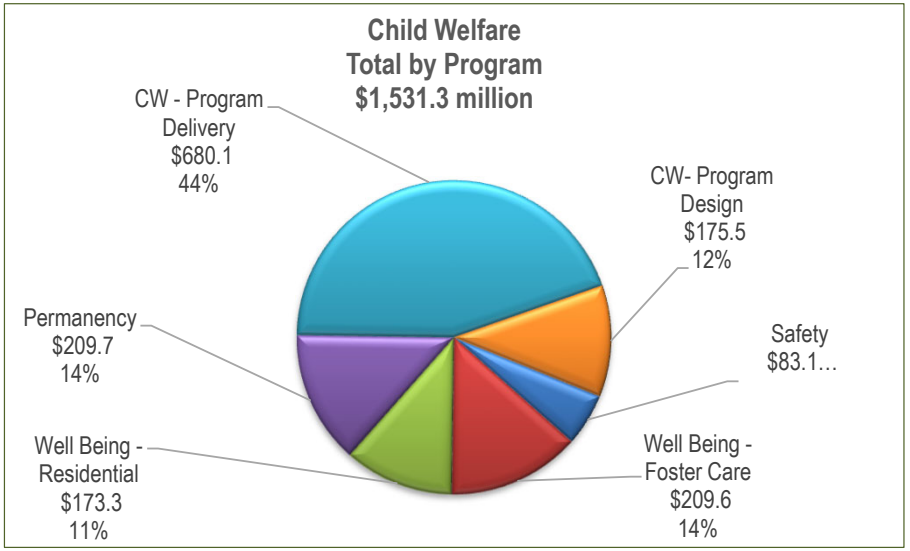
Description: (Well Being Portion)
All children deserve to grow up in a family. If a child is not able to remain in their own home, we need resource families who are diverse and affirming and can provide the support a child needs within their communities. Resource families receive a monthly payment, but the rates for Foster Care have not been adjusted since 2018. In 2018, the rates were based on 56.5% of the cost of raising a child at the USDA rate. Cost of living and inflation rates have continued to climb. The rate is intended to cover costs of food, shelter, clothing, school supplies, extracurricular activities, etc. for children in ODHS foster care. Resource Families have voiced to ODHS that the current rate does not cover the actual cost of caring for a child. The policy option package would bring the basic family foster care rate up to 80%-100% of the cost of care to raise a child. The rate would change at each biennium to include regular inflation and additionally, medical, and professional inflation. This would allow for increases every biennium.
Increasing the rates could help attract and retain more resource families and help current resource families cover the cost of care.

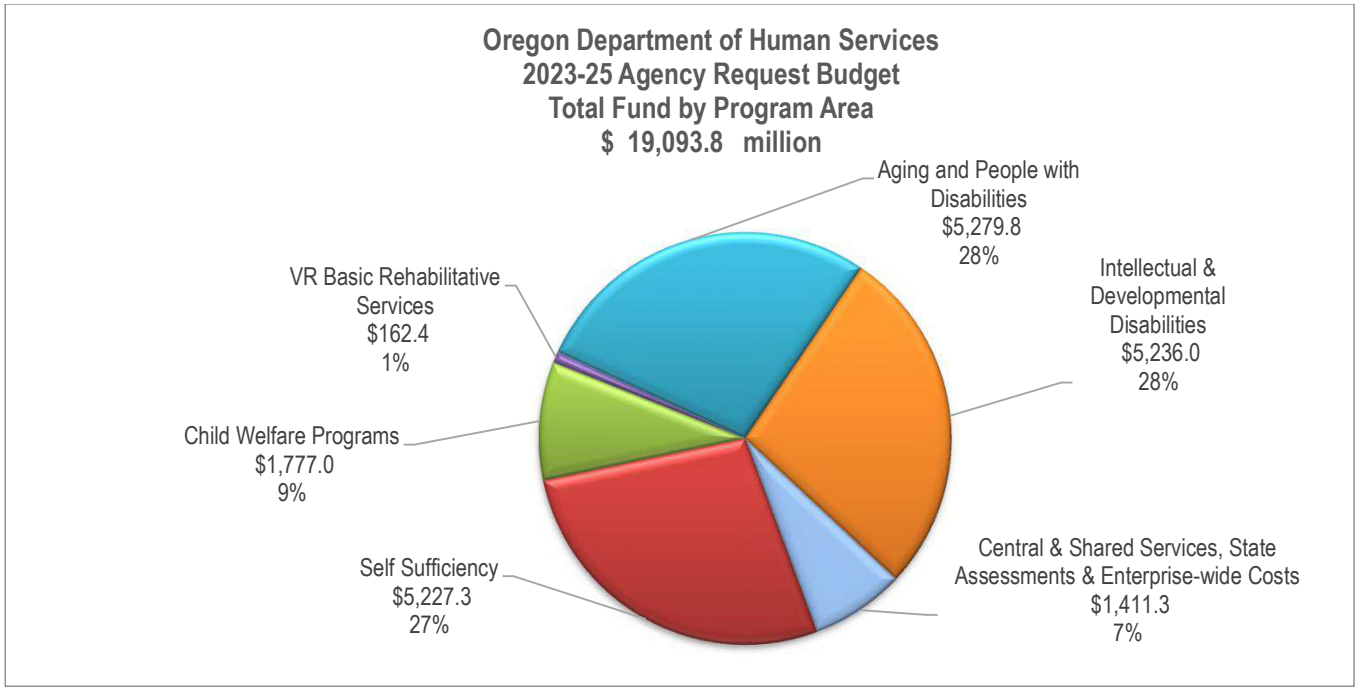
Package Number: 124	Package Title: SSB & Child Support Payments Package				
General Fund	Other Funds	Federal Funds	Total Funds	Positions	FTE
5,835,210	(8,291,096)	2,455,886	-	n/a	n/a

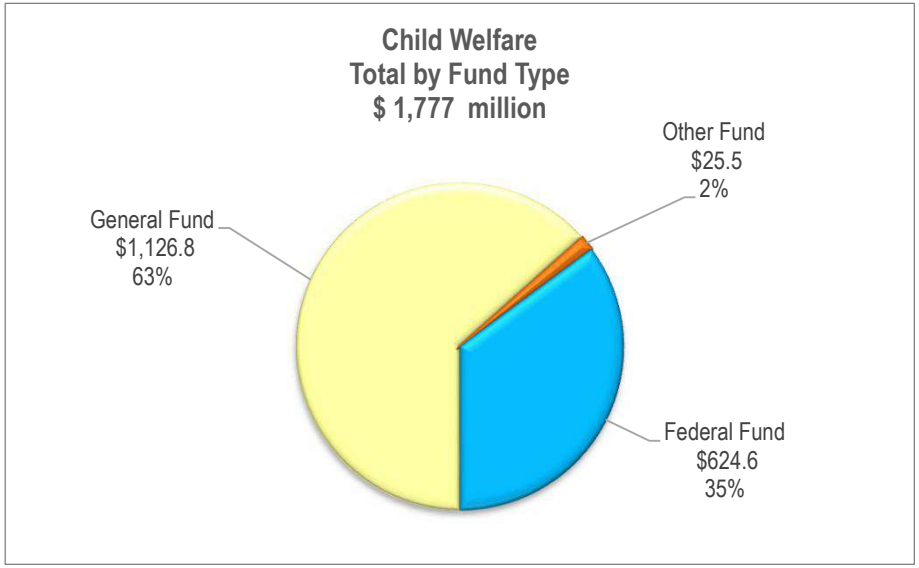
Description: (Well Being Portion)
Child Support, Social Security Benefits (SSB), and Supplemental Security Income (SSI) provide valuable social insurance to children and families. However, children in foster care are not able to use those funds because they are used to supplement foster care costs. This makes it more difficult for families to overcome poverty and it perpetuates inequities. This POP proposes to conserve SSI, SSB and child support funds for youth in foster care and make the funds available in a savings account when they exit foster care. These funds will support reunification and help youth better support themselves as they transition into adulthood.

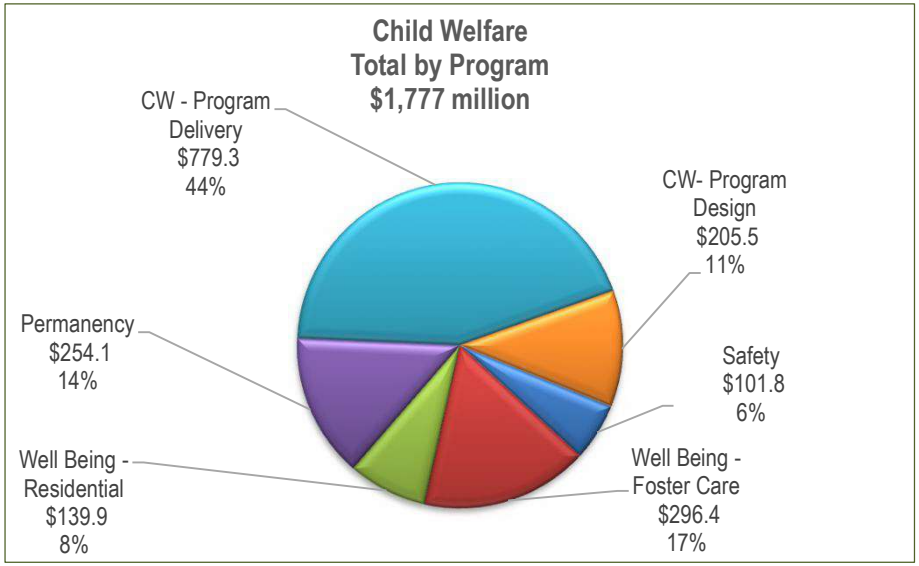

Oregon Department of Human Services
2021-23 Legislatively Approved Budget
Total Fund by Program Area
$ 17,122.3 million
Aging and People with Disabilities $4,915.1 29%
Intellectual & Developmental Disabilities $4,238.4 25%
Central & Shared Services, State Assessments & Enterprise-wide Costs $1,222.3 7%
Self Sufficiency $5,066.8 29%
Child Welfare Programs $1,531.3 9%
VR Basic Rehabilitative Services $148.4 1%


Child Welfare
Total by Fund Type
$ 1,531.3 million
Other Fund $35.0 2%
General Fund $919.7 60%
Federal Fund $576.5 38%


Child Welfare
Total by Program
$1,531.3 million
CW - Program Delivery $680.1 44%
CW- Program Design $175.5 12%
Safety $83.1…
Well Being - Foster Care $209.6 14%
Well Being - Residential $173.3 11%
Permanency $209.7 14%


Oregon Department of Human Services
2023-25 Agency Request Budget
Total Fund by Program Area
$ 19,093.8 million
Aging and People with Disabilities
$5,279.8
28%
Intellectual & Developmental Disabilities
$5,236.0
28%
Central & Shared Services, State Assessments & Enterprise-wide Costs
$1,411.3
7%
Self Sufficiency
$5,227.3
27%
Child Welfare Programs
$1,777.0
9%
VR Basic Rehabilitative Services
$162.4
1%


Child Welfare
Total by Fund Type
$ 1,777 million
Other Fund
$25.5
2%
General Fund
$1,126.8
63%
Federal Fund
$624.6
35%


Child Welfare
Total by Program
$1,777 million
CW - Program Delivery
$779.3
44%
CW- Program Design
$205.5
11%
Safety
$101.8
6%
Well Being - Foster Care
$296.4
17%
Well Being - Residential
$139.9
8%
Permanency
$254.1
14%

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-060-10-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Business Lic and Fees	-	1,588,366	1,614,796	1,614,796	-	-
Charges for Services	-	349,760	349,760	349,760	-	-
Care of State Wards	-	19,860,835	16,331,150	7,168,515	-	-
Interest Income	-	237,515	237,515	237,515	-	-
Other Revenues	-	8,860,440	16,718,341	16,796,662	-	-
Transfer In - Intrafund	-	10,844,421	10,844,421	11,466,920	-	-
Transfer from General Fund	-	14,091,688	14,821,416	15,443,915	-	-
Tsfr From Administrative Svcs	-	750,000	750,000	-	-	-
Tsfr From Revenue, Dept of	-	2,876,601	2,876,601	3,273,913	-	-
Tsfr From Transportation, Dept	-	50,000	50,000	50,000	-	-
Transfer Out - Intrafund	-	(10,844,421)	(10,844,421)	(11,466,920)	-	-
Total Other Funds	**-**	**$48,665,205**	**$53,749,579**	**$44,935,076**	**-**	**-**
Federal Funds						
Federal Funds	-	578,663,643	592,950,221	641,182,199	-	-
Tsfr To Administrative Svcs	-	(184,048)	(184,048)	(191,778)	-	-
Tsfr To Judicial Dept	-	(2,213,975)	(2,213,975)	(2,389,986)	-	-
Tsfr To Public Def Svcs Comm	-	(14,000,000)	(14,000,000)	(14,000,000)	-	-
Total Federal Funds	**-**	**$562,265,620**	**$576,552,198**	**$624,600,435**	**-**	**-**

Oregon Department of Human Services
Vocational Rehabilitation Program

Program Vision
Every Oregonian with a disability who desires to work is given an equitable opportunity and means.

Program Mission
Vocational Rehabilitation's mission is to assist Oregonians with disabilities to achieve, maintain and advance in employment and independence.

About Vocational Rehabilitation
Vocational Rehabilitation (VR) is a state and federal program authorized by state law and the federal Rehabilitation Act of 1973 and amended in 1998 and in 2014 by the Workforce Innovation and Opportunity Act (WIOA).

VR staff work in partnership with Oregonians with disabilities, communities, and businesses to develop employment opportunities and provide individualized services to each eligible person.

Employment helps people with disabilities live independently, become involved in their communities, and live more engaged and satisfying lives.

VR helps Oregonians with disabilities gain employment through a variety of services. These include but are not limited to:

- Helping youth with disabilities transition to jobs as they become adults,
- Providing individualized counseling and supports to job seekers with disabilities to help overcome barriers to employment,
- Helping employers realize and receive the benefits of employing diverse people with disabilities, and
- Partnering with other state and local organizations that coordinate and provide equitable employment and workforce programs.

All working-age Oregonians who experience a disability and are legally entitled to work are potentially eligible for VR services. Individuals who experience a

medical, cognitive, or psychiatric diagnosis that results in a functional impediment to employment are typically eligible. Recipients of Social Security disability benefits are presumed eligible for services.

VR has a diverse staff of counselors with interdisciplinary expertise in the areas of:

- Intellectual and developmental disabilities (I/DD)
- Deafness and hearing loss
- Mental health
- Motivational interviewing
- Spinal injury
- Traumatic brain injury
- Other disability specific areas of specialization

Additionally, VR counselors consider the participant's cultural and linguistic needs and the intersection of barriers to employment that race, language and disability can present for Oregonians seeking employment.

Individuals VR serves

VR employees provide direct services through a network of local offices across Oregon. Visit the ODHS website for a full list of local VR offices.

Services are provided by rehabilitation counselors, transition service specialists, workforce and business coordinators, support staff and contracted employment specialists who deliver direct client services through 34 field offices around the state. VR, as a core Workforce Innovation and Opportunity Act (WIOA) partner, is also co-located in some WorkSource Oregon Centers and other human services agencies across the state as part of an effort to increase access to the larger workforce support system in Oregon. VR is responding to historical inequities in service access and to changing Oregon demographics by prioritizing equity in our service delivery model and providing culturally and linguistically appropriate services.

In State Fiscal Year 2021, VR**:**

- Helped 12,240 individuals, including
    - 3,570 who entered an individualized plan for employment and
    - 2,562 who obtained employment outcomes.

- Contracted with 65 sites on behalf of over 200 high schools to provide VR Plan services for approximately 1,300 students.
- Provided Pre-Employment Transition Services for more than 5,000 students.
- Helped 574 individuals with intellectual and developmental disabilities (I/DD) obtain jobs.
- Served 930 Oregonians who reported some level of hearing loss as their primary disability, representing 8 percent of the total population served that year.

Among the clients rehabilitated in VR in SFY 2021:

- 78 were American Indian or Alaskan Native
- 250 were Hispanic or Latino
- 1,796 were White
- 47 were African American
- 18 were Native Hawaiian or other Pacific Islander
- 37 were Asian

Programs and Services

VR services are provided in five primary areas:

- Substantial VR services
- Youth programs
- Supported employment
- Career counseling information and referral
- Independent living

VR is also engaged in Oregon's Employment First program in partnership with the ODHS Office of Developmental Disability Services and is actively engaged in improving workforce partnerships as part of a core partner in state workforce programs.

- *Substantial VR Services*

These are individualized services provided to VR clients whose disabilities present a barrier to employment. A rehabilitation counselor conducts a comprehensive

assessment to evaluate a client's career potential. This includes assistance determining which services can help support an individual in achieving their employment potential. Vocational counseling and guidance build on this assessment and help the client identify a vocational goal. The counselor works with the client to develop an individualized plan for employment and helps the client access appropriate services in support of the plan.

- *Youth Programs*

Youth Transition Program (YTP): YTP is a partnership between VR, the Oregon Department of Education (ODE), the University of Oregon's College of Education and local Oregon school districts. At least 75 percent of students with disabilities in YTP complete high school and transition to a job or postsecondary education at a rate exceeding the national average. 97.5 percent of YTP students who exited last year did so with a state-recognized completion document. This internationally and nationally recognized school-to-work transition program is a proven best practice for supporting young people with disabilities. YTP bridges the gap between school and work by coordinating vocational rehabilitation services while the student is in school and ensuring a smooth transition to adult services and employment after completing school. YTP currently serves more than 6,300 students in more than 200 schools across Oregon.

Pre-Employment Transition Services (Pre-ETS): In 2014, Congress passed the Workforce Innovation and Opportunity Act (WIOA). The legislation allows students ages 14-21 who are potentially eligible for VR services to receive Pre-Employment Transition Services (Pre-ETS). These services provide students an opportunity to access:

- Career Exploration
- Post-Secondary Counseling
- Self-Advocacy Instruction
- Work-Based Learning Experiences
- Workplace Readiness Training

Pre-ETS services are organized and delivered in collaboration with Local Education Agencies and Local Education Service Districts. In 2021, VR provided 15,638 pre-employment transition services to 5,949 students.

- *Supported Employment Services*

These services are for individuals with the most significant disabilities for whom employment is not possible through traditional means, but who can obtain and maintain competitive employment in the community with job coaching and ongoing supports. Substantial and supported employment services are provided on a time-limited basis for each client. Oregon Health Authority, ODHS Office of Developmental Disability Services, other community programs, families and private employers are responsible for the subsequent services once VR has found employment for an individual and completed training. Supported Employment Services provide individuals with both traditional VR services and support services provided by job coaches, typically at job sites.

- *Career Counseling, Information and Referral (CCIR)*

The WIOA created CCIR services in the 2014 update to the Rehabilitation Act and states began related subminimum wage projects in 2017. These services provide career counseling, information, and referral to individuals of any age known by VR to be employed at subminimum wage. Employers with 14C certificates from Department of Labor are allowed to employ individuals at less than minimum wage. These employers are required to inform employees about training opportunities but are prohibited from providing CCIR services as the latter is a VR function.

- *Independent Living*

These services are available through seven Centers for Independent Living (CILs). The CILs are nonprofit organizations that provide:

- Information and referral to services
- Independent living skills training
- Peer counseling
- Systems and individual advocacy
- Transition services for youth

CILs also provide a range of services based on local needs, many of which complement services provided through other state and federally funded programs. Services are provided through a peer-mentoring model with an emphasis on self-help, self- advocacy, and consumer responsibility.

CILs are part of a federal program established in the Rehabilitation Act of 1973. Oregon's State Independent Living Council was established by Governor's Executive Order 94-12 in 1994. VR is the Designated State Entity for the SILC and the CILs in Oregon and has the responsibility to:

- Receive, account for, and disburse funds received by the state
- Provide administrative support services to the CILs
- Keep records and provide access to such records as required by the Administration on Community Living (the federal authority for the Independent Living program)
- Fund and support the State Independent Living Council's resource plan

The Work Incentive Network (WIN) provides benefits planning through contracts with six CILs. Through the state's General Fund dollars, WIN is able to provide benefits and work incentives planning to any Oregonian with a disability who receives a public benefit and who wants to obtain, maintain, or increase their employment. In doing so, the network empowers individuals to make informed decisions regarding their employment and benefits while understanding how to maintain access to crucial services and medical coverage. People who successfully have access to and receive disability benefits are better able to secure employment, live independently, engage with their communities, and live a higher quality of life. Through employment, they also pay taxes and reduce reliance on publicly funded services.

VR Partnerships

- *Employment First*

Youth and adults with intellectual and developmental disabilities (I/DD) are significantly underrepresented in Oregon's workforce. With appropriate services and assistance, most people with I/DD can work successfully in the community. The state is seeking to increase employment of and work opportunities for people with I/DD by achieving targeted outcomes that align with the Employment First policy and the Lane vs. Brown Settlement Agreement.

The Governor's Executive Order (EO) 13-04 and subsequent EO 15-01 directs

state agencies and programs, including VR, ODHS Office of Developmental Disability Services and the Oregon Department of Education, to increase community-based employment services for people with I/DD and to reduce state support of sheltered work. VR has specialized counselors around the state committed to working with people with I/DD to help them find employment in their communities.

- *Tribal Partnerships*

The VR program continues to partner with and support the Tribal VR programs of the Confederated Tribes of the Umatilla Indian Reservation, Confederated Tribes of Siletz Indians, Confederated Tribes of Grand Ronde and Klamath Tribes. Each federally recognized Tribe shares a unique vision for its program and identifies how ODHS VR can support the delivery of services to Tribal members.

This collaboration includes:

- Supporting shared clients with complex disability-based barriers to employment who require specialized rehabilitation services
- Cross-training new VR counselors on the cultural customs specific to the Tribal Nation
- Hosting joint rehabilitation trainings for state and Tribal VR counselors
- Facilitating Tribal VR directors and Tribal leaders to meet with the ODHS Director
- Sharing space within WorkSource buildings

- *Workforce Partnerships*

With the passage and implementation of the Workforce Opportunity and Innovation Act (WIOA) of 2014, VR has been identified as a core partner in the workforce system. VR has been working closely with the core workforce partners to create a system that is less siloed, more efficient, inclusive, equitable and diverse.

VR, ODHS Self Sufficiency Programs, the Oregon Employment Department, local workforce development boards and Adult Basic Education programs around

the state have been meeting to ensure all services are aligned and minimize duplication and to create opportunities for expanding services in ways that meet the needs of shared clients. Moving toward this shared purpose has increased awareness of the needs of individuals with disabilities seeking employment while creating more opportunities for clients in local communities.

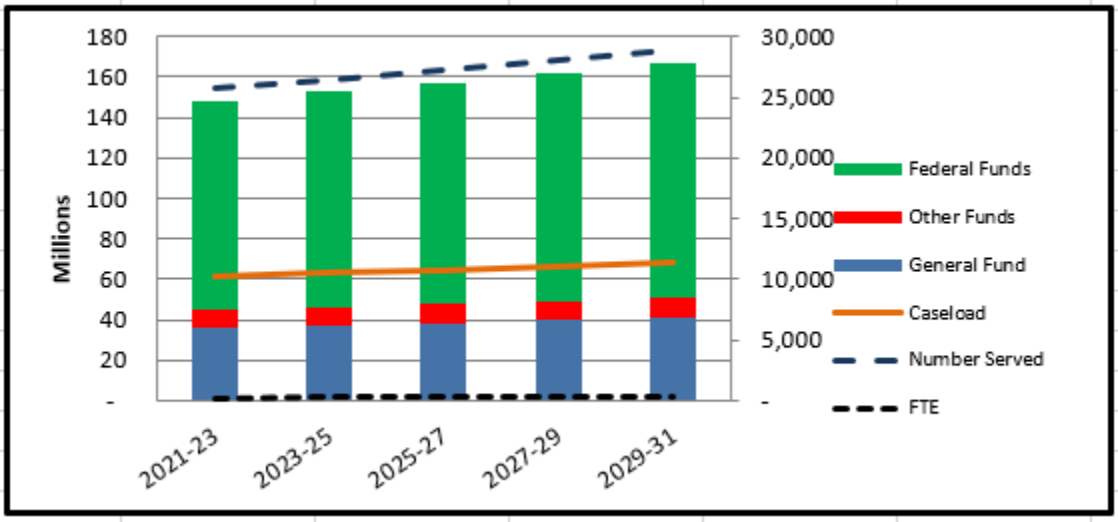
VR continues to create diverse opportunities for individuals with disabilities to gain equitable access to employment supports and to benefit from various workforce strategies. Moving forward, VR will enhance employer outreach strategies to demonstrate that VR's diverse clients are reliable, dependable, and skilled workers who also happen to have disabilities. VR will also engage employers to provide work-based learning opportunities for all clients, including youth transitioning into post-secondary careers and apprenticeships. One of these opportunities is the federally funded Inclusive Career Advancement Program that will provide 500 people with disabilities with the supports they need to access a postsecondary education.

As a core partner in the workforce system, VR is represented on the nine local workforce development boards in Oregon. VR also has a large role in the statewide Workforce and Talent Development Board. VR and its workforce partners have developed and updated the unified state plan that guides collaborative efforts to build an effective and strong workforce support system throughout Oregon.

Oregon Department of Human Services: Vocational Rehabilitation

Primary Long-Term Focus Area: A Thriving Oregon Economy
Secondary Long-Term Focus Area: Safer, Healthier Communities
Program Contact: Keith Ozols

Vocational Rehabilitation Funding Sources, Caseload Levels and FTEs



Note: Cost-per-case increase is the result of a growing number of people with cognitive disorders requiring services that come with higher costs.

Program Overview

Vocational Rehabilitation (VR) helps Oregonians with disabilities obtain, maintain, regain and advance in employment through counseling, specialized training and job placement. This includes helping youth with disabilities transition from educational programs to the workforce; assisting adults with disabilities in achieving, maintaining or advancing in employment; helping employers overcome barriers to employing people with disabilities; and partnering with other state and local organizations that coordinate employment and workforce programs. The public workforce system in Oregon, of which VR is a federally mandated member,

includes the following state agency partners: Oregon Employment Department (OED), ODHS Self Sufficiency Programs (SSP), VR, and the Higher Education Coordinating Commission (HECC). Agencies work in conjunction with the Governor's Office and Local Workforce Development Boards. A Workforce System Executive Team is tasked with communication and coordination among partners and ensuring system alignment.

885,741 adults in Oregon have a disability (2020 Behavioral Risk Factor Surveillance System). This is equal to 26 percent (or 1 in 4) of Oregon adults. Employment helps people with disabilities become more self-sufficient and involved in their communities, and to live more engaged and satisfying lives.

All working-age Oregonians who experience a disability that creates a barrier to employment, and are legally entitled to work, are potentially eligible for VR services. Individuals who experience a medical, cognitive or psychiatric diagnosis that results in an impediment to employment typically are eligible for services. Recipients of Social Security disability benefits are presumed eligible for services. Approximately 95 percent of all eligible clients currently served by VR are people with significant disabilities. These individuals typically experience multiple functional limitations requiring several services provided over an extended period.

VR has counselors who specialize in the areas of intellectual and developmental disabilities (I/DD), deafness and hearing loss, mental health, motivational intervention, spinal injury, and traumatic brain injury; however, the majority of VR counselors provide services to a wide array of Oregonians with disabilities.

Services are provided by rehabilitation counselors and support staff who deliver direct client services through 34 VR field offices and through single employee outstations in one-stop career centers and other human services agencies across the state.

Specialized services designed to maximize clients' independence are provided through seven Centers for Independent Living (CILs) located throughout the state. Information, referral and comprehensive services are provided.

VR staff work in partnership with community organizations and businesses to develop employment opportunities for people with disabilities. These activities range from live resume events and job fairs to presenting disability awareness workshops in local businesses. VR also offers business services that include consultations with employers about diversifying their workforce by hiring people with disabilities, and pre-screening services to match employers with clients who are qualified, reliable job candidates.

Program Funding Request

OVRS w/POPs	GF	OF	FF	TF	POS	FTE
LAB 21-23	36,303,474	8,584,466	103,496,208	148,384,148	269	265.89
ARB 23-25	54,121,723	10,853,531	97,395,803	162,371,057	320	306.29
Difference	17,818,249	2,269,065	(6,100,405)	13,986,909	51	40.40
Percent Change	49%	26%	-6%	9%	19%	15%

Program Description

VR is comprised of five primary areas: basic services, youth programs, supported employment, career counseling information, and referral and independent living. VR is also engaged in Oregon's Employment First initiative. VR is a core partner in the implementation of the Workforce Innovations and Opportunities Act (WIOA) and is committed to improving access to the workforce system for Oregonians with disabilities. VR works with the Commission for the Blind and Oregon's Tribal VR (121) Programs.

Substantial Services

These are basic services provided to individuals whose disabilities present an impediment to employment. The Vocational Rehabilitation Counselor (VRC) conducts a comprehensive assessment to evaluate vocational potential, including diagnostic and related services necessary for the determination of program eligibility as well as the nature and scope of services to be provided. Vocational counseling and guidance build on this assessment and help the client identify a vocational goal. The counselor, in partnership with the client, develops an individualized plan for employment and authorizes services and training in support of the plan while maintaining a counseling relationship with the client.

Youth Transition Program (YTP)
YTP operates as a partnership between VR, the Oregon Department of Education (ODE), the University of Oregon's College of Education and local Oregon school districts. Currently serving about 2,400 students in more than 120 school districts, YTP bridges the gap between school and work by providing coordinated vocational rehabilitation services while the student is in school and ensures a smooth transition to adult services and employment after completion of school. Local YTP teams deliver pre-employment transition services so students can begin career exploration while they are still in school. These services include career counseling, counseling on postsecondary education and training options, work-based learning experience, work-readiness skills development and training in self-advocacy. At least 75 percent of students with disabilities in YTP complete high school and transition to a job or postsecondary education – a rate that exceeds the national average. This internationally and nationally recognized school-to-work transition approach is a best practice for young people with disabilities.

Supported Employment Services
These services enable Oregonians, including youth, with the most significant disabilities to achieve and maintain competitive integrated employment. Vocational Rehabilitation supported employment services (i.e., job coaching, training normally done at the job site) are time-limited, lasting from job placement until the individual is stable in their job and long-term supports are in place. Oregon Health Authority's Behavioral Services, community programs and families, ODHS Office of Developmental Disability Services, or private employers provide long-term supports after the individual reaches job stabilization, which continue after the client has exited the VR Program.

Career Counseling, Information and Referral
The WIOA created CCIR services in the 2014 update to the Rehabilitation Act and states began related subminimum wage projects in 2017. These services provide career counseling, information and referral to individuals of any age known by VR to be employed at subminimum wage. Employers with 14C certificates from the Department of Labor are allowed to employ individuals at less than minimum wage. These employers are required to inform employees about training

opportunities but are prohibited from providing CCIR services as the latter is a VR function.

Program Justification

VR assists individuals with disabilities to establish a foundation by identifying a personal vision, goals and steps necessary to achieve success in education and employment, and to become independent, productive members of their communities. The VR program and the services provided align with Governor Brown's initiatives relating to safer and healthier communities, which point to higher rates of employment as key ingredients in community well-being. This is especially important in relationship to Oregonians with disabilities, who are underrepresented in the workforce. Secondarily, by creating better access to the workforce system, we are increasing the number of employable Oregonians, many of whom bring in skills and attributes that contribute to a thriving Oregon economy.

Employment and Jobs

- The VR Program has developed a plan in partnership with the workforce system as defined by the Workforce Innovations and Opportunities Act (WIOA) which includes goals regarding employment outcomes for clients, to increase skills upgrading and certification of Oregonians with disabilities seeking employment
- As a result of the Lane v. Brown Settlement, the state is seeking to increase employment of people with intellectual and developmental disabilities (I/DD) in integrated workplaces through increased efforts around the Employment First initiative. The Governor's Executive Order 15-01 and the Settlement Agreement directs state agencies and programs, including VR, ODHS' Office of Developmental Disabilities Services (ODDS) and the Oregon Department of Education (ODE), to increase community-based employment services for people with I/DD and to reduce state support of sheltered work. VR has specialized counselors around the state committed to working with people with I/DD to find employment in the community.
- VR is continuing to increase community engagement with communities of color, non- or limited-English speaking communities and other communities

across the state. VR works with ODHS to provide information in alternative formats and language to communities across the state.

Program Performance

Vocational Rehabilitation measures its performance primarily by employment outcomes. Employment outcomes are defined as the number of individuals who obtained and successfully maintained employment for a minimum of 90 days. The Workforce Innovation and Opportunities Act of 2014 added several measures with emphasis on long-term employment.

Education

- The internationally recognized Youth Transition Program has expanded to more than 120 school districts in Oregon. More than 75 percent of students with disabilities in YTP complete high school and transition to a job or postsecondary education, a rate that exceeds the national average. YTP bridges the gap between school and entry into the workforce by providing coordinated vocational rehabilitation services while the student is in school and ensuring a smooth transition to adult services and employment after completion of school. YTP currently serves about 2,388 students in more than 120 school districts.
- VR utilizes Supported Employment, an evidence-based model, which allows individuals with developmental and intellectual disabilities to work in competitive employment in the community with needed supports.
- The Independent Living program partners with schools and families to support the transition of students with disabilities to secondary education and/or work.
- Memorandums of Agreement with the Office of Developmental Disabilities Services and the Oregon Department of Education are designed to more effectively align transition services, identify opportunities to braid and leverage funding in order to increase the number of students with disabilities.
- Introduction of services in partnership with ODE to meet WIOA requirements to expend 15 percent of our Federal Funds to meet Pre-Employment Transition Services as required by the WIOA.

Healthy and Safe Communities
The Independent Living Program consists of the following partners: 7 Centers for Independent Living, Oregon State Independent Living Council, Oregon Commission for the Blind and ODHS Vocational Rehabilitation. Federal funding is provided through the Administration on Community Living (ACL) in both direct awards to individual centers and pass-through funding through the Vocational Rehabilitation program. Pass-through funding requires a minimum State General Fund (SGF) match of 10 percent.

The mission of the Independent Living Network as established through the State Plan for Independent Living (SPIL) is to empower people in Oregon who experience disabilities to direct their lives, access their communities and fulfill their responsibilities at their desired level of independence.

Centers for Independent Living
Centers for Independent Living (CILs) are non-residential community-based organizations that provide services and advocacy for individuals with all types of disabilities. There are nearly 500 CILs across the United States. There are seven private, nonprofit CILs in Oregon. Each CIL has a board of directors. At least 51 percent of board membership must consist of people with disabilities. CIL staff play an important role in the delivery of services to enhance the independence of people with disabilities and are also, as required by the Rehabilitation Act, composed of 51 percent people with disabilities.

Services provided in CILs include peer support, independent living skills training, information and referral, advocacy and transition including services that:

- Facilitate transition from nursing homes and other institutions to the community,
- Provide assistance to those at risk of entering institutions, and
- Facilitate transition youth to postsecondary life.

CILs also work to make communities more accepting of individuals with disabilities. CILs provide services to individuals of all ages and all disabilities. The seven CILs in Oregon are located in Portland, Eugene, Roseburg, Grants Pass, Klamath Falls, Bend and Ontario and are contracted to serve 22 of the 36 counties throughout the state.

CILs are mandated through the federal Rehabilitation Act, under the Administration for Community Living (ACL). Title VII, Chapter 1 of the Act states the current purpose of the program is to "promote a philosophy of independent living including a philosophy of consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, in order to maximize the leadership, empowerment, independence, and productivity of individuals with disabilities, and the integration and full inclusion of individuals with disabilities into the mainstream of American society."

Oregon State Independent Living Council (SILC)
The SILC is established by Executive Order of the Governor as a separate governmental entity, independent of any state agency. The Governor appoints the members of the SILC. Member composition of the SILC must also meet the 51 percent majority of people with disabilities as required by the Rehabilitation Act. The SILC has bylaws and policies and procedures that align with the federal requirements set forth in the Rehabilitation Act and Assurances and Indicators of minimum compliance, as well as state requirements.

Vocational Rehabilitation – Special Services Independent Living Program
Vocational Rehabilitation (VR) serves as the Designated State Entity to receive, administer and account for the funds made available to the State under Title VII, Chapter 1, Part B of the Rehabilitation Act and State General Funds appropriated for Oregon's IL Network. The match rate for Title VII, Chapter 1, Part B funds is 10 percent General Fund; 90 percent Federal Funds. All partners of the IL Program receive funds through VR through executed state contracts.

Enabling Legislation/Program Authorization
VR is a state and federal program authorized by Oregon state law (ORS 344.511et seq.) and the Workforce Innovation and Opportunity Act of 2014.

The Independent Living Program is a federal program established in Title VII of the Rehabilitation Act of 1973, as amended, and regulated by the Code of Federal Regulations, Title 45, and Part 1329. In conjunction, Oregon's State Independent

Living Council was established in 1994 by Governor's Executive Order 94-12. VR is listed as the designated state entity for this program in the State Plan for Independent Living, per Section 704 of Title VII.

Funding Streams

VR is funded through the U.S. Department of Education. It receives a formula-based grant with Match and Maintenance of Effort requirements. The match rate for Vocational Rehabilitation is 21.3 percent General Fund; 78.7 percent Federal Funds. For Independent Living the match rate is 10 percent General Fund; 90 percent Federal Funds. Grant dollars cannot be utilized by other programs. Program income, which is reinvested back into VR, includes Social Security reimbursement and Youth Transition Program grants.

FUNDING JUSTIFICATION AND SIGNIFICANT CHANGES to 23-25 CSL

PKG NO	PKG TITLE				
116	Grant Pgm for Community-Based Organizations				
GF	OF	FF	TOTAL FUNDS	POS	FTE
$ 190,700	0	0	$ 190,700	1	0.75
PKG DESCRIPTION					
An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.					

PKG NO	PKG TITLE				
144	Pay Equity for CILs				
GF	OF	FF	TOTAL FUNDS	POS	FTE
$ 2,616,005			$ 2,616,005	-	-
PKG DESCRIPTION					

All workers deserve to earn a wage that meets their basic needs for housing, food and family life. Yet, Oregon's seven Centers for Independent Living (CILs) have been unable to provide livable wages for its employees, many of whom have disabilities. As a result, turnover and vacancies are high, and CILs struggle to fulfill their federally mandated role in supporting Oregonians with disabilities. This policy package requests $2,616,005 to allow all seven CILs across Oregon to adopt and implement salary and benefit standards that create pay equity for staff who play a vital role in their communities — helping Oregonians with disabilities to gain greater self-sufficiency and ability to participate in community life.

PKG NO	PKG TITLE				
145	RCDHH & VRCs				
GF	OF	FF	TOTAL FUNDS	POS	FTE
$ 6,944,825			$ 6,944,825	46	34.50
PKG DESCRIPTION					

Everyone benefits from the independence, self-sufficiency and fulfillment that employment brings. Vocational Rehabilitation helps people with all disabilities find jobs that match their skills and interests so they can enjoy this benefit. Yet our reporting shows we are underserving part of the population we serve — people of color who are deaf or hard of hearing. This policy package will add 46 full-time positions so VR can provide linguistically and culturally responsive employment services to better serve people of color who are deaf and hard of hearing throughout the state.

PKG NO	PKG TITLE				
146	Work Incentives Network (WIN)				
GF	OF	FF	TOTAL FUNDS	POS	FTE
$ 3,211,060			$ 3,211,060	1	0.75

PKG DESCRIPTION

Through benefits planning services, the Work Incentives Network (WIN) empowers Oregonians with disabilities to make informed decisions about how employment may affect their public benefits. However, current demand for services far exceeds capacity, and Oregonians cannot get these comprehensive benefits planning services. This means people cannot confidently moving forward with employment goals due to the uncertainty of how that work may impact their benefits. The problem is amplified because wages have remained stagnant in the past decade. As a result, WIN struggles to recruit and retain Work Incentive Coordinators (WIC) who deliver these benefit services. This policy package is designed to improve timeliness of benefits planning services for all Oregonians with disabilities, with a specific focus on improving services to historically underserved groups — youth, tribal communities, Spanish-speaking communities and rural communities. To this end, Vocational Rehabilitation (VR) is requesting position authority and funding for 12 non-budgeted, full-time WIC positions. In addition, VR is requesting an increase in the base rates for current and proposed contracted positions to keep up with increased cost of living and operational expenses.

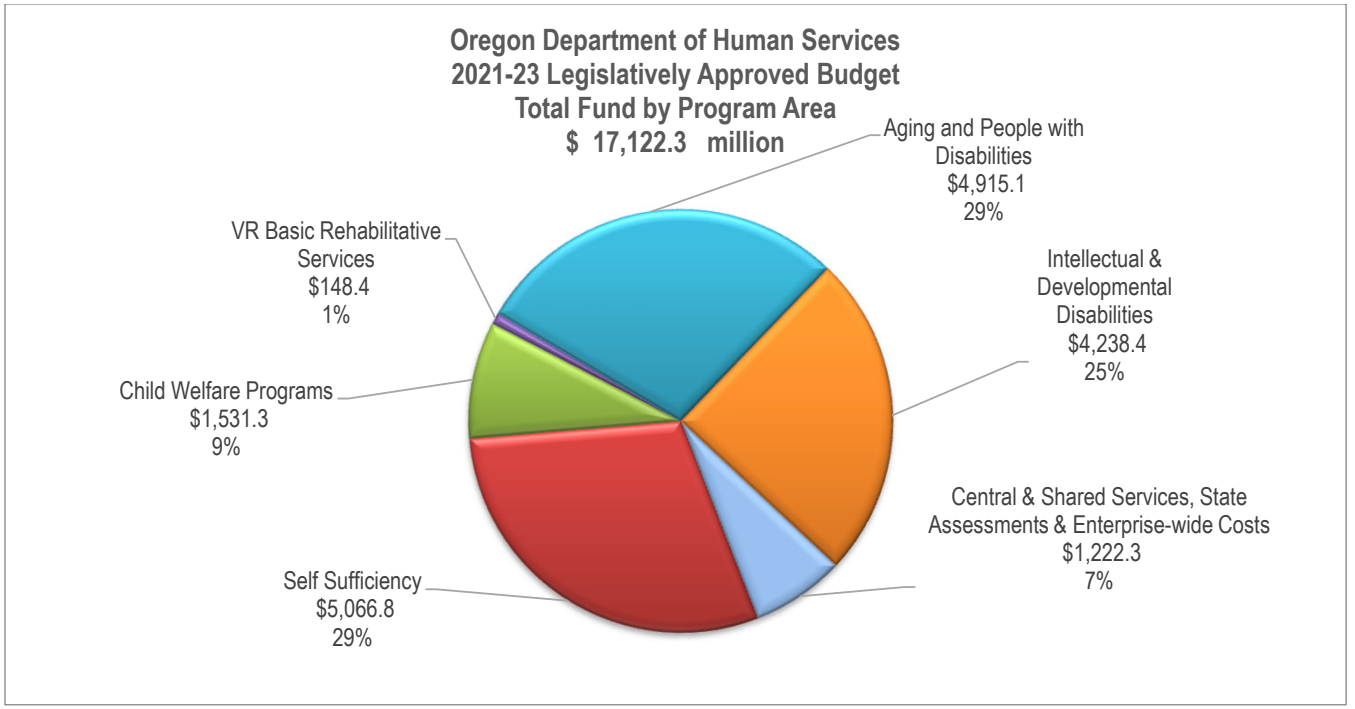
PKG NO	PKG TITLE				
147	Business/Contracts Unit				
GF	OF	FF	TOTAL FUNDS	POS	FTE
$ 461,616			$ 461,616	3	2.25

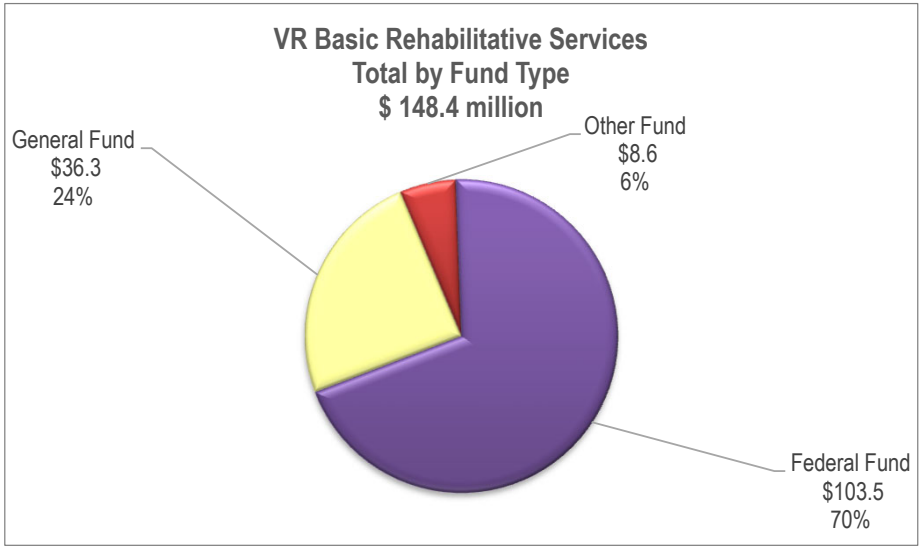
PKG DESCRIPTION

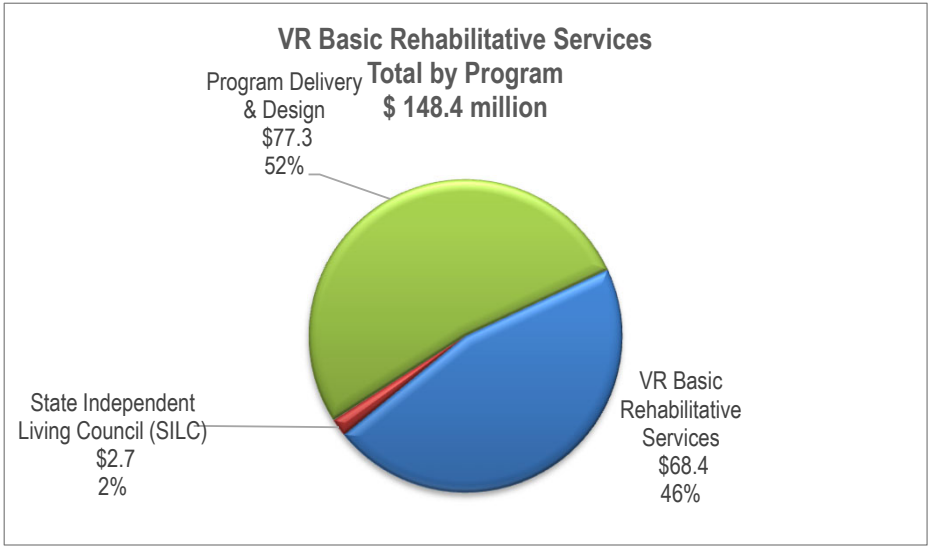
Every person with disabilities deserves access to employment opportunities. Oregon Department of Human Services Vocational Rehabilitation (VR) helps Oregonians with disabilities find jobs through contracting with hundreds of local service providers around the state. However, the VR Business Operations team does not have enough staff to maintain current contracts and keep up with the increased demand for new contracts, particularly in rural and Tribal communities. As a result, VR is not able to offer full services to all Oregonians with disabilities, particularly those who live in historically underserved communities. This policy option package requests three FTE positions — two to administer contracts and one to support the Business Operations Manager in covering five program areas.

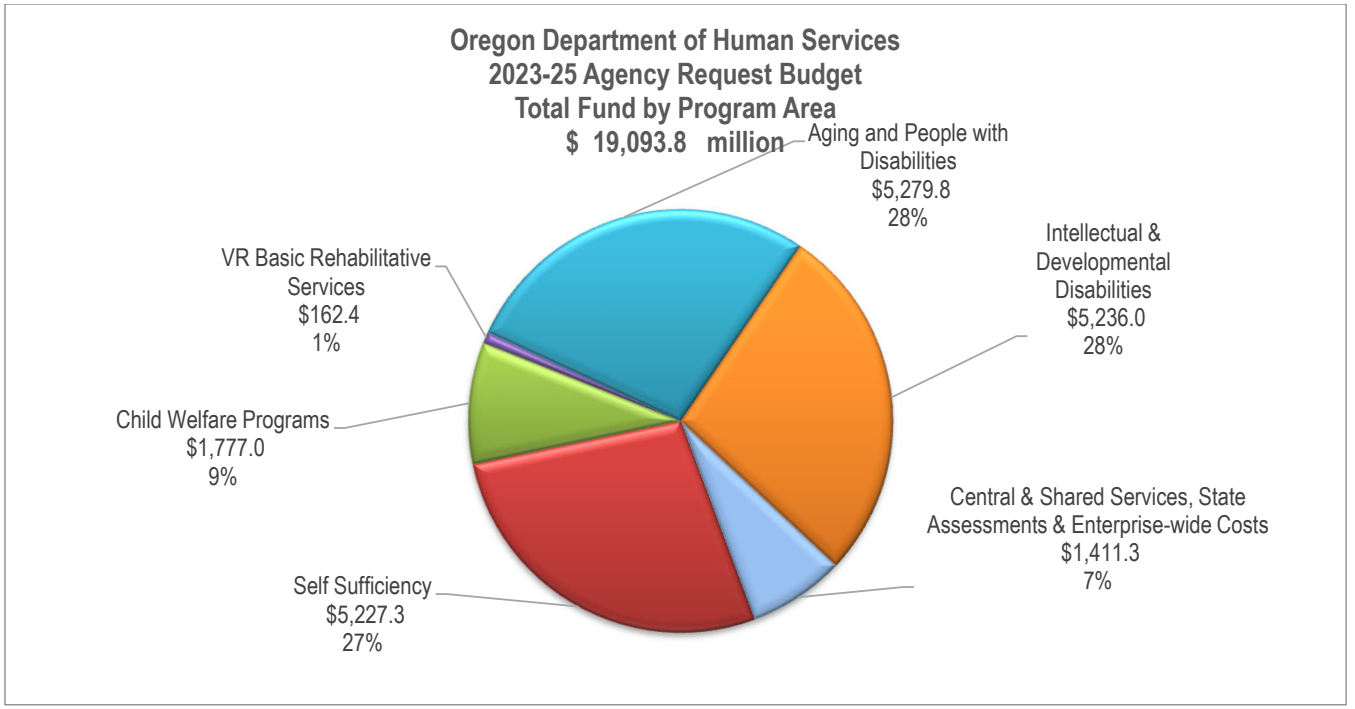
PKG NO	PKG TITLE				
148	RSA Audit Report				
GF	OF	FF	TOTAL FUNDS	POS	FTE
$ 1			$ 1	-	-
PKG DESCRIPTION					

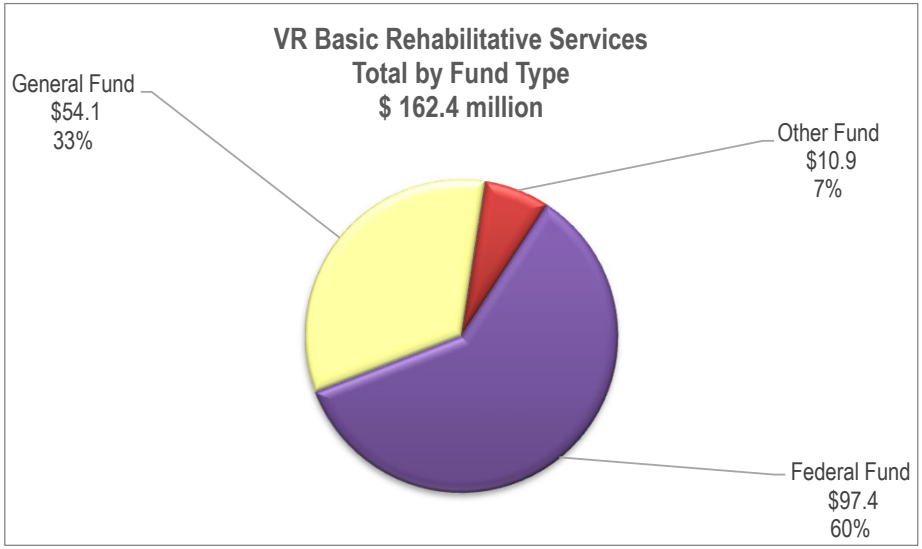
Placeholder. Early in 2022 the Rehabilitation Services Administration (RSA), VR's federal funders, came to Oregon to conduct a monitoring visit of Oregon Vocational Rehabilitation (VR). Two programs, the Youth Transition Program (YTP) and the Pre-Employment Transition Program (Pre-ETS), were evaluated in this monitoring process with RSA. YTP is a VR administrated program throughout the state. This program establishes contracts between local school districts and the VR program to deliver transition and employment related services to students with disabilities. Currently there are more than 220 schools participating in YTP. And the Pre-ETS Program is available and working with every school district in the state through contracts with local Education Service Districts and other Community Based Organizations. The goal of YTP and Pre-ETS is to assist students with disabilities to successfully transition from secondary school into postsecondary education or into competitive integrated employment. Although VR is still awaiting the final audit report from RSA, they indicated there are issues with how the YTP and Pre-ETS programs are operated. For instance, they indicated that VR has inappropriately sub-delegated some of its authority through a contract. Therefore, new VR positions will be needed to do the functions previously paid for through contract funding. This issue will be cost neutral but will require position authority. This PLACEHOLDER is included to allow for this and other corrective actions required by the audit to be addressed. Once the final audit report is received, the POP will be updated.

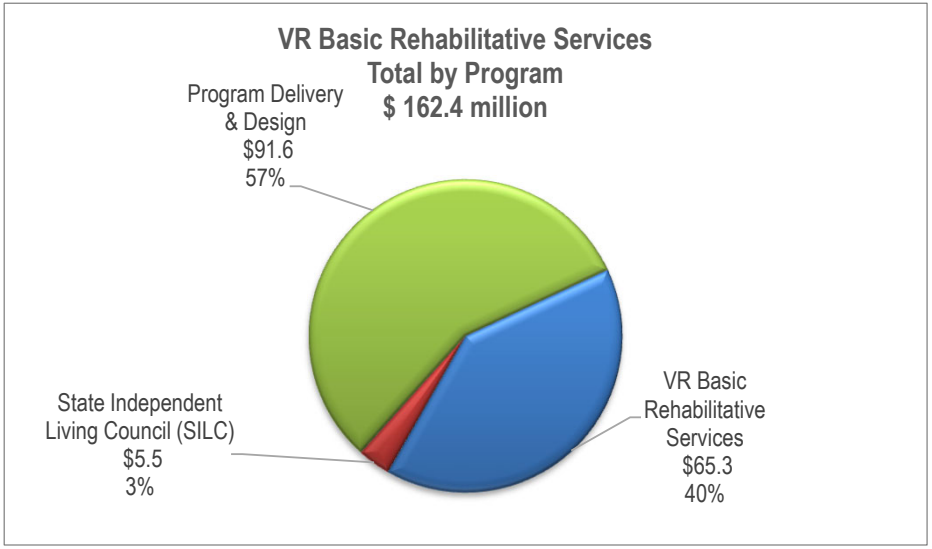

Oregon Department of Human Services
2021-23 Legislatively Approved Budget
Total Fund by Program Area
$ 17,122.3 million
Aging and People with Disabilities
$4,915.1
29%
Intellectual & Developmental Disabilities
$4,238.4
25%
Central & Shared Services, State Assessments & Enterprise-wide Costs
$1,222.3
7%
Self Sufficiency
$5,066.8
29%
Child Welfare Programs
$1,531.3
9%
VR Basic Rehabilitative Services
$148.4
1%


VR Basic Rehabilitative Services
Total by Fund Type
$ 148.4 million
General Fund
$36.3
24%
Other Fund
$8.6
6%
Federal Fund
$103.5
70%


VR Basic Rehabilitative Services
Total by Program
$ 148.4 million
Program Delivery & Design
$77.3
52%
VR Basic Rehabilitative Services
$68.4
46%
State Independent Living Council (SILC)
$2.7
2%


Oregon Department of Human Services
2023-25 Agency Request Budget
Total Fund by Program Area
$ 19,093.8 million
Aging and People with Disabilities
$5,279.8
28%
Intellectual & Developmental Disabilities
$5,236.0
28%
Central & Shared Services, State Assessments & Enterprise-wide Costs
$1,411.3
7%
Self Sufficiency
$5,227.3
27%
Child Welfare Programs
$1,777.0
9%
VR Basic Rehabilitative Services
$162.4
1%


VR Basic Rehabilitative Services
Total by Fund Type
$ 162.4 million
General Fund
$54.1
33%
Other Fund
$10.9
7%
Federal Fund
$97.4
60%


VR Basic Rehabilitative Services
Total by Program
$ 162.4 million
Program Delivery & Design
$91.6
57%
State Independent Living Council (SILC)
$5.5
3%
VR Basic Rehabilitative Services
$65.3
40%

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-060-07-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Donations	4,731	-	-	-	-	-
Other Revenues	4,302,360	4,964,436	4,984,466	10,853,531	-	-
Tsfr From Administrative Svcs	904,518	-	3,600,000	-	-	-
Total Other Funds	**$5,211,609**	**$4,964,436**	**$8,584,466**	**$10,853,531**	**-**	**-**
Federal Funds						
Federal Funds	84,230,352	84,573,852	103,496,208	97,395,803	-	-
Tsfr To Blind, Comm	(48,422)	-	-	-	-	-
Total Federal Funds	**$84,181,930**	**$84,573,852**	**$103,496,208**	**$97,395,803**	**-**	**-**

Oregon Department of Human Services
Aging and People with Disabilities

Program Mission

To help Oregonians in their own communities achieve well-being and independence through opportunities that protect, empower, respect choice, and preserve dignity.

Program Vision

Oregon's older adults, people with physical disabilities and their families have easy access to services, support and early interventions that help maintain independence, promote well-being, honor choice, respect cultural preferences and uphold dignity.

Program Goals

Well-being: Older adults and people with disabilities feel safe and experience their best quality of life.

Accessibility: Oregonians can readily and consistently access services and supports to meet their needs.

Quality outcomes: Oregonians engage in services and supports that are preventive, evidence-informed, and lead to quality outcomes.

Service equity: Oregonian's experience programs, services, and supports that are designed, improved and responsive to historical inequities, current disparities, and individual experiences.

Engagement: Consumers are empowered by information, communication, and advocacy through strong, collaborative partnerships with stakeholders and rich community dialogue.

About the Aging and People with Disabilities (APD) Program

During the biennium, APD expects to serve:

- More than 36,000 older adults and people with physical disabilities per month who qualify for Medicaid-funded long-term services and supports

- More than 212,000 older individuals who benefit from Older Americans Act services
- About 180,000 people who need nutrition assistance or Medicare Premium benefits
- About 44,500 Oregonians who live in long-term care settings that APD licenses
- More than 43,000 individuals who receive a Social Security Disability determination and need help accessing federal income benefits available to individuals with a disability
- More than 3,500 unique individuals ages 60 and older who seek help through Oregon Project Independence to remain living in their homes.
- More than 2,000 people who receive long-term care options counseling from the Aging and Disability Resource Connection.
- Individuals who will make more than 50,000 calls seeking to report abuse or neglect or request information and referral services from Adult Protective Services.

APD encompasses the following programs and units:

Aging and Disability Resource Connection

Individuals living in Oregon needing information and referral services about any APD programs or services and other resources that serve older adults and people with disabilities may contact the state's Aging and Disability Resource Connection (ADRC) of Oregon. The ADRC is a collaborative public-private partnership that streamlines consumer access to a complex aging and disability service delivery system. ADRC services are free to Oregonians and the service raises visibility and awareness of the full range of options available. The ADRC provides trusted information and assistance, and it empowers people to make informed decisions. Through trained options counselors, Oregonians can develop action plans to address long-term services and supports needs that align with consumer preferences, their financial situation, strengths, values and needs.

If a person is likely to be eligible for Medicaid long-term services and supports, they will be referred to APD local offices or Area Agencies on Aging (AAAs) for a full assessment.

Employees from both APD local offices and AAAs throughout Oregon are responsible for providing direct client services. Employees also determine eligibility for older adults and people with disabilities for medical programs provided through the Oregon Health Authority (OHA). During the 2021 calendar year, the ADRC received 89,504 direct contacts and 159,305 website visits.

The ADRC, as with all APD, must keep pace with growth in the older adult population and is increasingly serving a more diverse population. APD strives to identify disparities in outcomes for diverse populations, provide equitable access to services and identify strategies to serve all individuals in a culturally and linguistically appropriate manner.

Adult Protective Services

APD and some AAA offices are responsible for investigating instances of abuse against older adults and persons with disabilities across the state. Elder abuse, and other adult abuse, is costly both from a human and financial perspective. A person who has experienced abuse is likely to have increased health and long-term care costs. In Oregon, 18.2 percent of the population is over the age of 65 and 9.9 percent who are younger than 65 live with a disability. In 2021, local Adult Protective Services (APS) offices received a total of 47,818 calls. These numbers are slightly up from 2020, when local offices received 46,239 calls. Of the cases investigated, 25 percent to 35 percent were in community-based long-term care settings such as adult foster homes, assisted living facilities and memory care settings.

APS in 2021 completed 11,109 abuse investigations in community settings in 2021, as well as 5,634 investigations in licensed long term care settings, though some investigations may have started in 2020. Financial exploitation and neglect remain the most common forms of abuse for older adults and people with disabilities. In the 2021 calendar year, 28 percent of abuse allegations in the community were for financial exploitation.

Many alleged victims involved in APS investigations do not have Medicaid at the time of the investigation. APS involvement is often the first occasion that APD works with these individuals and helps protect them from neglect and harm.

Safety, Oversight and Quality Unit

The APD Safety, Oversight and Quality Unit (SOQ) licenses many providers of long-term care for older adults and people with disabilities. The providers offer a wide range of services. Through oversight, investigation of complaints and reports of potential abuse, and corrective action, SOQ reduces future incidence of unsafe conditions and improves the quality of care. These services are most effective when they are provided in a quality model aimed at preventing harm.

The providers licensed by SOQ include adult foster homes, assisted living facilities, residential care facilities, nursing homes, conversion facilities, intensive intervention care facilities and facilities with memory care endorsements. SOQ strives to ensure service equity and the delivery of culturally and linguistically appropriate services.

Medicaid Services

Each month, about 36,000 older adults and people with physical disabilities use Medicaid long-term services provided through ODHS APD. By federal law, each state must develop criteria for access to nursing facility care paid by Medicaid. Criteria must include financial and asset tests as well as service eligibility criteria. The federal government, through Centers for Medicare and Medicaid Services (CMS), must approve any criteria established by the states.

Older adults and many individuals with disabilities need assistance from other people to perform daily activities and to ensure their health and safety. To accurately identify those who need assistance, ODHS created service priority levels (SPLs) to establish eligibility for Medicaid long-term services and supports. SPLs prioritize services for older adults and people with physical disabilities whose well-being and survival would be in jeopardy without services. Levels are based on the ability of the person to perform activities of daily living (ADLs); level 1 reflects the highest level of need. ADLs are personal activities required for continued health and well-being and include mobility, eating, toileting, cognition,

and personal hygiene. Prior to 2003, ODHS served individuals through SPL 17. Since then**,** because of budget constraints, only levels 1-13 are funded.

APD assists thousands of Oregonians who require ADL services as well as those requiring instrumental activities of daily living (IADL) services – which include housekeeping and meal preparation – in selecting competent providers and establishing effective working relationships with those providers. Due to the increasingly diverse population served, the program requires supports that are equally diverse and linguistically and culturally appropriate.

Oregon Deaf and Hard of Hearing Services

Oregon Deaf and Hard of Hearing Services (ODHHS) serves as a resource for all Oregonians, to improve quality of life for Deaf and hard of hearing people and their families. APD's ODHHS is engaged in ongoing training to improve the experiences of people seeking services and of public employees working with an agency.

Senior Health Insurance Benefits Assistance (SHIBA)

In 2021, there were 877,232 Medicare beneficiaries in Oregon. Older adults who are newly eligible for Medicare may not be sure where to start with enrollment and may not understand which plan best fits their unique health care needs. The Senior Health Insurance Benefits Assistance (SHIBA) program offers Medicare-eligible adults and their families free, objective and comprehensive one-on-one benefits counseling so people can make informed decisions about their Medicare coverage.

Direct services are provided by SHIBA staff and a team of nearly 200 certified volunteer counselors who provide information about what Medicare plans are available, help with Medicare appeals and educate consumers on how to protect, detect and report Medicare fraud, waste and abuse. During the 2021 federal fiscal year, SHIBA certified counselors provided 16,013 one-on-one counseling sessions to Oregonians.

Services, Design and Delivery

APD's budget is sectioned into three key areas: program services, program design and program delivery.

Program services focus on supporting older adults and people with disabilities in maintaining the utmost independence while supporting their individual needs. Services are provided through the following:

- Older Americans Act
- Oregon Project Independence
- Financial support services
- In-home services
- Community-based care facilities including adult foster homes
- Nursing facilities

- *Older Americans Act*

A federal program, the Older Americans Act is administered in Oregon through APD. It provides federal funding for locally developed programs serving individuals ages 60 and older. APD distributes funds to local Area Agencies on Aging (AAAs) for service delivery through subcontractors. It is estimated that approximately 212,000 Oregonians currently access these services. The AAAs develop services that are within federal expectations and meet the needs and preferences unique to individuals in their local area. Program mandates require that services target those with the most significant economic and social need, to minorities and to those residing in rural areas. There are no income or asset requirements to receive services except those related to the Senior Community Service Employment Program (SCSEP).

APD distributes federal funds to the AAAs using a federally approved intra-state funding formula that's based on the demographics and square mileage of each area. APD encourages and incentivizes culturally specific and linguistically competent supports within all programs. Programs include family caregiver supports, nutrition via congregate and home-delivered meal programs, older adult employment, legal

services, elder abuse prevention services and more. Most AAAs also sponsor and promote evidence-based wellness and chronic health condition management activities, and many also provide assistance to local senior centers.

- *Oregon Project Independence (OPI)*

OPI is a state-funded program offering in-home services and related supports to individuals 60 years of age and older or people who have been diagnosed with Alzheimer's or a related dementia disorder. Approximately 3,500 Oregonians are served in this program during a calendar year. OPI represents a critical element in Oregon's strategy for preventing or delaying instances where individuals must leave their own homes to receive services in more expensive facility settings – or depleting their personal assets sooner than necessary and accessing more expensive Medicaid health and long-term service benefits. The program was expanded by the 2005 Oregon Legislature to include younger adults with disabilities. However, funding was not provided until 2014 and 2015. The funding allowed for a pilot program to expand the program to adults ages 19-59 with physical disabilities.

OPI is administered statewide by local Area Agencies on Aging (AAAs). Many areas have waiting lists due to high demand and limited program funding. Client eligibility is determined by an assessment of functional ability and natural supports related to activities of daily living. Typical services include assistance with housekeeping, bathing, grooming, health care tasks, meal preparation, caregiver respite, chore services, adult day services and transportation.

The OPI program has no financial asset limitations for clients. A sliding fee scale is applied to clients with net monthly income between 100 and 200 percent of the federal poverty level (FPL) to pay toward the cost of service. A small group with income above 200 percent of FPL pays the full rate for services provided. Generally, this is because they benefit from case management and ongoing support and monitoring in addition to the purchased services.

- *Financial support services*

APD has programs designed to meet a variety of special circumstances for certain low-income populations. These include:

a.) General assistance (GA) program – With this program, APD serves individuals with severe disabilities who are experiencing homelessness or who are at risk of homelessness. To be eligible for the GA program, individuals must meet all the following criteria:

- Be experiencing homelessness or at risk of experiencing homelessness.
- Be an adult, age 18-64, with no minor children living with them.
- Have a severe disability that meets Social Security disability criteria.
- Be receiving Presumptive Medicaid medical assistance.
- Meet all eligibility criteria for Supplemental Security Income (SSI).
- Apply for SSI and appeal any denials received; and
- Sign an Interim Assistance Agreement (IAR), allowing ODHS to recover GA funds paid to them once awarded SSA benefits.

General assistance program benefits include up to $545 per month in housing assistance, $90 in utility assistance per month, $60 in cash assistance per month, and free assistance with the Social Security application and appeals process.

b.) Cash payments – special needs – APD is required to meet maintenance of effort (MOE) payments for low-income aged and disabled Oregonians who receive federal Supplemental Security Income (SSI) benefits. These benefits are focused on payments that allow clients to maintain independence and mobility in a safe environment. Examples of special needs payments include help for non-medical transportation, repairs of broken appliances such as a furnace, or for such things as adapting a home's stairs into a ramp.

c.) Employed Persons with Disabilities Program (EPD) – This program allows people with a disability to work to their full extent and not lose Medicaid coverage. To be eligible, a person must be deemed to have a disability by Social Security Administration criteria, be employed and have adjusted income of less than 250 percent of FPL. Eligible individuals pay a monthly participation fee and are eligible for the full range of Medicaid benefits and services.

d.) Other benefits – In addition to Medicare, clients often need help accessing other programs for which they are eligible. APD determines client eligibility and submits client data to CMS for two Medicare-related programs: Medicare buy-in and Medicare Part D low-income subsidy. APD served more than 140,000 clients in March 2020 in these two programs. These programs help low-income beneficiaries with their cost-sharing requirements. Securing this coverage also ensures Medicare remains in a "first payor" status, ultimately saving the state's Medicaid program significant money.

- *Social Security Disability Determination Services*

APD determines eligibility for Social Security Disability and Supplemental Security Income benefits on behalf of the Social Security Administration. In 2020, 33,617 cases were adjudicated which increased to 38,785 cases in 2021.

- *Medicaid Services and Supports*

Medicaid-funded Long-Term Services and Supports provides eligible individuals fundamental ADLs such as mobility, elimination, cognition, eating, bathing, dressing, and personal hygiene. These services ensure that the person is living in a safe and healthy environment. All services promote choice, independence, and dignity. Services can be provided in nursing facilities or in community settings such as residential care, assisted living, memory care or foster homes, or in the person's own home.

In-home services are the cornerstone of Oregon's community-based care system and were created to meet the preferences of older adults and people with disabilities throughout Oregon. For older adults or people with physical disabilities, the ability to live in their own homes is compromised by the need for support in regular activities of daily living (ADLs). For more than 25 years, Oregon has created options to meet people's needs in their own homes. All options are funded with support of the Medicaid program through home- and community-based waivers or state plan options. Oregon has been able to create cost-effective programs that meet people's needs in their homes and other community settings

using these options, sparing Oregonians from the unnecessary use of much higher cost services, primarily those offered in nursing facilities.

Services to older adults and people with physical disabilities are designed to support assistance with fundamental ADLs including mobility, cognition, eating, elimination, personal hygiene, dressing, and bathing. To receive in-home services, an individual must be financially eligible for Medicaid. A case manager works with the client and together they identify needs and develop a plan for the in-home services. There are different options that an individual can select to receive in-home services.

a.) Medicaid client-employed Homecare Workers: Homecare Workers (HCW) are hired directly by the consumer and provide many of the services Medicaid recipients need to remain in their own homes. The consumer, or their selected representative, is responsible for performing the duties of an employer. These duties include selecting, hiring, and providing on-site direction in the performance of provider duties that are authorized by a case manager to meet the client's individual needs. The HCW must pass a criminal background check. In partnership with the consumer, APD develops and authorizes a service plan, makes payment to the HCW on behalf of the consumer and provides ongoing contact with the consumer to ensure service needs are met. About 19,000 consumers are expected to receive services supplied by HCWs by the end of the 2021-23 biennium.

   The Oregon Home Care Commission (HCC) was established in 2000 by an amendment to the Oregon Constitution. It is a public commission dedicated to ensuring high-quality home care services to individuals using consumer-employed providers. Service Employees International Union Local 503, Oregon Public Employees Union, represents approximately 16,000 HCWs. For purposes of collective bargaining, HCC serves as the HCW employer of record. The commission maintains a statewide, computerized registry of workers and provides an extensive training curriculum. The HCC also makes training available to clients to better understand their employer responsibilities and increase their skill in managing the use of HCWs.

b.) In-home agency services*:* Many clients prefer to receive their in-home services through an in-home care agency. In-home care agencies (IHCA) are licensed by the Oregon Health Authority. These agencies employ, assign and

schedule caregivers to perform the tasks authorized by the client's case manager. APD contracts with licensed IHCAs throughout the state. IHCAs work closely with ODHS case managers and clients to ensure services are provided as authorized and to ensure the quality of the work performed.

c.) Medicaid Independent Choices Program*:* This program offers choices to clients in the way they receive in-home services and increases clients' self-direction and independence. Clients receive a cash benefit based on their assessed need. They purchase and directly pay for services. Clients are responsible for locating providers, paying their employees, and withholding and paying necessary taxes. Depending upon how they manage their service benefit, many can purchase a few additional services or items otherwise not covered by Medicaid to increase their independence or well-being.

d.) Medicaid adult day services: Adult Day Services (ADS) provide supervision and care for clients with functional or cognitive impairments. Service may be provided for half or full days in stand-alone centers, hospitals, senior centers, and licensed care facilities. ADS providers are certified, but not licensed, by ODHS.

e.) Medicaid home-delivered meals: Home-delivered meals are provided to those who are homebound and unable to go to sites, such as senior centers, for meals. These programs generally provide a hot midday meal and often frozen meals for days of the week beyond the provider's delivery schedule.

f.) Medicaid (state plan) personal care services: Individuals who do not meet service priority levels (SPLs), but have some personal care needs, may qualify for Medicaid Personal Care Services. Services are generally limited to no more than 20 hours a month. Personal care services are more limited than the standard Medicaid Long-term Services and Supports benefit.

g.) Medicaid specialized living services: The services are provided through a contract with APD and targeted to a specific group of clients living in their own apartments and assisted by a specialized program offering direct service and structured supports.

- *Community-based facilities*

These include a variety of 24-hour care settings and services that provide alternatives to nursing facilities. Services include assistance with ADLs, medication oversight and social activities. Services can also include nursing and behavioral supports to meet complex needs. State and federal guidelines related to health and safety of these facilities must be met.

a.) Adult foster homes: Services are provided in home-like settings licensed for five or fewer individuals who are not related to the foster home provider. Homes may specialize in certain services, such as serving ventilator-dependent residents.

b.) Assisted living and residential care facilities: Licensed 24-hour service settings serve six or more residents and facilities range in size from six to more than 100 beds. The difference between residential care and assisted living is generally in the structural set up of the facility and the fact that individuals typically have shared rooms in residential care. Either type of facility can seek a Memory Care endorsement on top of the underlying licensure, provided they meet additional requirements for Memory Care Facilities. Registered nurse consultation services are required by regulation.

c.) Conversion facilities: A conversion facility is a nursing facility that has decided to "convert" its license to that of a residential care facility. The facility must go through the federal process of closing the nursing facility before going through a state process for converting the building to a residential care facility.

d.) Intensive intervention care facilities: Intensive Intervention Care (IIC) facilities are small residential care facilities designed to serve individuals with significant behavioral and mental health needs. Five or fewer people can live in a single IIC home.

e.) Enhanced care services: Specialized 24-hour programs in licensed care settings that provide intensive behavioral supports for older adults and people with physical disabilities who have needs that cannot be met in any other setting. These programs support clients with combined funding from APD and the Oregon Health Authority's mental health program.

f.) Memory Care Community Endorsement: These facilities are licensed as an Assisted Living Facility or Residential Care Facility or Nursing Facility and serve individuals with Alzheimer's disease, other forms of dementia and other cognitive diseases. They are required to have enhanced training and a more secure setting for their residents. The endorsement is in addition to the underlying licensure.

g.) Program for the All-inclusive Care for the Elderly (PACE): PACE is a capped Medicare/Medicaid program built on a care model that combines all Medicare and Medicaid medical services and long-term services and supports into one program. Currently, about 1,700 Oregonians ages 55 and older are served in this program, which generally allows them to attend adult day services and live in a variety of settings. PACE programs are responsible for providing and coordinating their clients' full health and long-term service needs in these settings or in an in-home setting.

- *Nursing facilities*

Institutional services for older adults and people with physical disabilities are provided in nursing facilities licensed and regulated by ODHS. Nursing facilities provide individuals with skilled nursing services, housing, related services, and ongoing assistance with activities of daily living.

Oregon has led the nation since 1981 in the development of lower cost alternatives to institutional (nursing facility) care. Home- and community-based alternatives to nursing facility services emphasize independence, dignity and choice and offer needed services and supports at lower costs than medical models.

Program Design **–** APD programs are supported by a variety of staff and services. These include:

- Central leadership and administration
- Medicaid eligibility and federal waiver administration
- Development and maintenance of policy and administrative rules

- Oversight of licensed care facilities
- Ensuring Medicaid provider enrollment
- Support and leadership for various advisory councils.
- Administration of the Older Americans Act
- Home Care Commission.

Program Delivery **–** Direct services to Oregonians are provided through:

- Direct service staff located in local offices throughout the state
- Case management
- Presumptive Medicaid Disability Determination Team
- State Family/ Pre-SSI
- Disability Determination Services
- Administration of Medicare Modernization Act and Buy-in programs
- Provider payments and relations
- Adult Protective Services investigations
- Adult Foster Home, Nursing Facility and Community Based Care licensing
- Long term care referral services registry.

Eligibility and case management services are delivered throughout the state by APD and Area Agency on Aging (AAA) employees. ORS Chapter 410 allows AAAs to determine which populations they wish to serve and which programs they wish to administer. Type B Transfer AAAs choose to provide Medicaid services in addition to Older Americans Act and OPI services. In areas where the AAAs (Type A - AAAs) do not provide Medicaid services, APD has local offices to serve older adults and people with disabilities.

APD and AAA case managers perform a variety of roles in serving older adults and people with disabilities and are the front line in protecting individuals from abuse and neglect. They determine eligibility for long-term services and supports and assist individuals in developing person-centered service plans, accessing supports through APD and other programs, and finding qualified providers. They also address issues and concerns regarding providers and act as advocates and champions for consumer rights.

APD case managers face increasingly complex work. APD has implemented Waivered Case Management expectations requiring monthly contact on every case. Due to changes to the Fair Labor Standards Act, APD added more responsibilities on working with home care workers, including managing hourly caps, limiting overtime, and ensuring access to adequate services. Based on federal expectations, APD has also increased expectations related to person-centered planning and ensuring individuals' safety. Legal requirements have made notices more complex and detailed, requiring more case management time to issue each notice.

History

During the past 40 years, there has been a profound shift in society's understanding of the importance of supporting the independence of older adults and people with disabilities. Traditionally, states provided services in institutional settings such as nursing facilities. Oregon's first nursing facility opened in the 1940s. With the passage of the federal statute creating Medicaid, the state began to pay for nursing facility services for eligible individuals in the 1960s.

The Older Americans Act, also passed in the 1960s, has gradually expanded additional protections and services to vulnerable older adults, including access to home-delivered meals, senior centers, transportation, family caregiver support and legal services as well as support through the Office of the Long-Term Care Ombudsman to uphold rights and resolve complaints.

As professional standards and public thinking about how to best serve people with disabilities began to change, community living options became more accessible. Leading the nation in the 1970s, Oregon developed legislation that recognized the importance of assisting older adults in maintaining their independence and honoring their inherent dignity. Later, on a national level, the Americans with

Disabilities Act strengthened and expanded civil rights in the areas of employment, public accommodations, transportation, and housing. As accessibility increased, the right to community integration became more attainable for individuals with disabilities and families had more options for members to be able to receive needed supports at home.

Federal dollars to fund Medicaid waivers first became available in 1981 for Home and Community-Based Services. That same year, the Oregon Legislature updated its policies around disabilities and found that significant numbers of people with disabilities lived in institutions because adequate community services did not exist. The legislature mandated that the state work to empower people with disabilities, keep them as independent as possible and develop service settings that were alternatives to institutionalization. The 1981 Oregon Legislature also created the Senior Services Division and a strong statutory mandate to support older adults in their own homes and community settings outside of institutions. This action forged the way for Oregon to lead the nation in the development of lower-cost alternatives to institutional care.

In response to that mandate, Oregon applied for and received the first home and community-based waiver that allowed Medicaid funds to provide long-term services outside an institution. Throughout the 1980s and 1990s, Oregon received waivers that allowed services for unique groups of people. For Medicaid-eligible older adults and people with disabilities in Oregon, this has meant that the provision of long-term care has, in large measure, shifted away from nursing facilities to in-home services, assisted living facilities, residential care facilities and adult foster homes. In 2013, APD worked with the legislature to shift from waivers to a state plan that allowed the state to gain additional federal funds to support individuals receiving services through the Medicaid program.

Future populations

The aging population is growing rapidly. The number of people 65 and older in the United States is expected to increase to 70 million by 2030, and to 88.5 million ─ or 20 percent of the population ─ in 2050.

The aging population in Oregon will continue to grow dramatically as more baby-boomers reach retirement age.

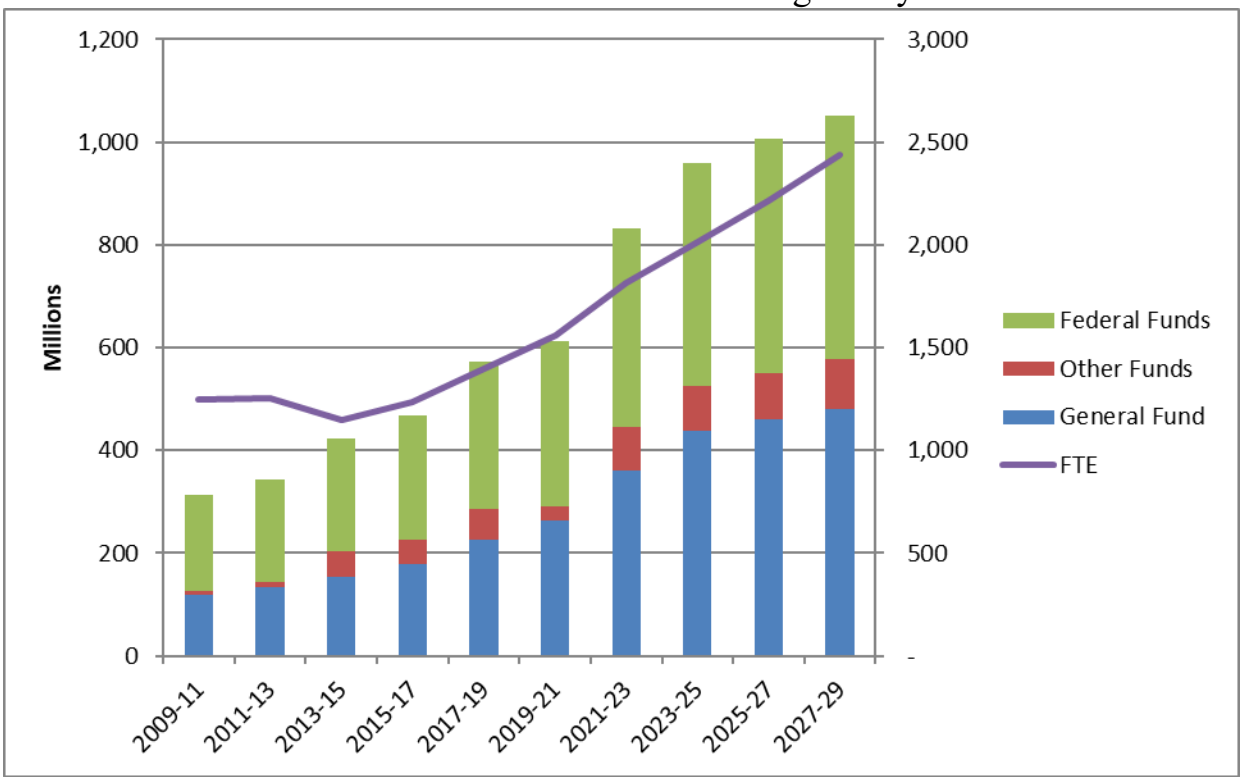
In 2016, approximately 17 percent of Oregon's population was 65 years or older. By 2030, the percentage is expected to increase to nearly 20 percent. In addition, nearly 10 percent of Oregon's population that is younger than 65 is living with a disability.

Further, in Oregon, people 85 years or older make up a small but rapidly growing group within the total population.

Guided by the ODHS Equity North Star, APD programs and services continue to evolve through a focus on equity and inclusion for individuals of all races, ethnicities, sexual orientations, gender identities and expressions, disabilities, ages, geographic locations, and Tribal affiliations. By working closely with communities to design and deliver services, APD helps ensure that all of Oregon's older adults and people with disabilities have access to the supports they need to achieve and maintain whole well-being.

Oregon Department of Human Services: Delivery and Design

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Long-Term Focus Area:
Program Contact: Nakeshia Knight-Coyle



APD expects to see a rebound in caseload growth in the coming biennium with increased complexity in the individuals it serves. APD faces immediate challenges to sustain staffing levels to meet the growing need for services and higher expectations on those workers.

Program Overview

The Aging and People with Disabilities (APD) delivery system provides services and supports to Oregonians over the age of 60 and to adults with physical disabilities. The population is a diverse cross-section of Oregonians that requires supports that take into account race, ethnicity and language; gender expression, and sexual orientation. APD provides services to individuals recognizing their unique individuality and lived experiences.

Design and Delivery includes staff created programs and services and provide technical assistance for Oregon's long-term care system as well as the staff and partners who directly provide services in over 50 offices located throughout the state.

Program Funding Request

APD Delivery and Design						
	GF	OF	FF	TF	Positions	FTE
21-23 LAB	359,903,503	86,170,356	385,423,137	831,496,996	1,877	1,814.41
23-25 ARB	439,041,746	87,240,103	433,823,622	960,105,471	2,094	2,014.80
Difference	79,138,243	1,069,747	48,400,485	128,608,475	217	200.39
Percent Change	22.0%	1.2%	12.6%	15.5%	11.6%	11.0%

Program Description

The APD program delivery system directly provides respectful and inclusive services and eligibility determinations to about 300,000 individuals living in Oregon. Some of the services provided include:

- Aging and Disability Resource Connection (ADRC)
- Adult Protective Services (APS)
- Disability Determination Services
- Financial Eligibility Determination (includes Medicare Premium assistance, General Assistance, Supplemental Nutrition Assistance Programs)
- Long-Term Care Licensing
- Medicaid Long-Term Care Services and Supports
- Older Americans Act (includes meals and job support)
- Oregon Deaf and Hard of Hearing Services
- Oregon Home Care Commission
- Oregon Project Independence (OPI)
- Senior Health Insurance Benefits Assistance

About 180,000 individuals access financially based services such as Medical assistance and are served by eligibility staff only; case management services are provided to individuals accessing long term services and supports. Approximately 36,000 of the 180,000 individuals who receive financially based services also access Medicaid long-term care services and supports. For these individuals, local case management services generally consist of assessment, choices counseling, service plan development, risk monitoring and ongoing monitoring. Additionally, local offices have memorandums of understanding (MOUs) with local Coordinated Care Organizations. These MOUs focus on joint accountability for coordinating care for individuals accessing long-term care services. State and Area Agency on Aging (AAA) case managers are the front line in ensuring effective care coordination occurs for individuals served by APD's long-term care system.

Local staff license adult foster homes, including those that do not participate in Medicaid. Local staff also provide adult protective services, consisting of investigations of abuse and neglect against seniors and people with disabilities.

APD has historically earned local service delivery staff through a caseload ratio model (e.g. one eligibility worker for every 500 cases). In the 13-15 biennium, the Legislature authorized the transition to a workload model. This model differs from the caseload ratio model in that it measures time required to perform tasks and captures work performed for individuals who are never found eligible. However, the model has fallen out of date recently and needs an overhaul. Additionally, it only captures the work that staff are able to do and does not account for changes in expectations and the work they are unable to complete.

The delivery system is comprised of both state staff and staff with Area Agencies on Aging (AAA) located in communities throughout Oregon. Under ORS 410.270, AAAs have the right to elect to deliver Medicaid services locally. Currently, four AAAs have elected this option. These four AAAs (Multnomah County, Northwest Senior and Disability Services, Oregon Cascades West Council of Government. and Lane Council of Governments) serve the most populous areas of Oregon. APD serves the remainder of the state including Washington and Clackamas counties.

The Oregon Home Care Commission (OHCC) is also included in the Design and Delivery Program Area. Under Oregon's constitution, the OHCC is responsible for ensuring the quality of home care services for older adults and people with disabilities. The Commission maintains a website of homecare workers, personal support workers and personal care attendants that can be accessed by all people living in Oregonians, including those not served by Medicaid. Training is provided to both consumers of services and homecare workers in a variety of areas addressing safety and quality. The efforts of the OHCC are critical to the successful delivery of long-term care services to Oregonians.

Finally, the Senior Health Insurance Benefits Assistance (SHIBA) unit offers Medicare eligible adults and their families free, objective and comprehensive one-on-one benefits counseling so people can make informed decisions about their Medicare coverage.

Direct services are provided by SHIBA staff and a team of nearly 200 certified counselors who volunteer their time to provide information about what Medicare plans are available, help with Medicare appeals and educate consumers on how to protect, detect and report Medicare fraud, waste and abuse. During the 2021 federal fiscal year, SHIBA certified counselors provided 16,013 one-on-one counseling sessions to Oregonians with questions about Medicare.

APD's Design and Delivery area also includes the staff that design and administer services centrally. Some of the major services provided include:

- Negotiating system design with federal partners
- Developing program policy and maintaining administrative rules
- Paying providers
- Executing contracts
- Negotiating and implementing collective bargaining agreements
- Maintaining provider rates.

Program Justification and Link to Focus Areas

There is a direct link between this program and the goal of Safer, Healthier Communities. The APD Delivery system supports individuals living in their communities in settings of their choice, whether in their own home, a community-based care facility or a nursing facility. Partnerships between local law enforcement, local court systems, and local advocates are critical to ensuring that older adults and people with disabilities are protected from neglect and abuse.

Enabling Legislation/Program Authorization

Oregon Revised Statutes 410.070 charges the agency with primary responsibility for the planning, coordination, development, and evaluation of policy, programs and services for older adults and people with disabilities in Oregon. Area Agencies on Aging have universal responsibilities as articulated in ORS 410.210. Additionally, ORS 410.270 authorizes Area Agencies on Aging to perform services locally that would otherwise be administered by state staff if they elect to do so.

Funding Justification and Significant Changes to CSL

PACKAGE NO.	PACKAGE TITLE				
101	101 - Infrastructure, Access and Emergency				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
27,731,409	-	27,711,830	55,443,239	113	98.75
PACKAGE DESCRIPTION					
A fully staffed and supported workforce ensures that services and supports are delivered to Oregonians in ways that achieve the respective missions of Oregon Department of Human Services (ODHS) and the Office of Aging and People with Disabilities (APD). Without a fully staffed workforce, Oregonians, including older adults and people with disabilities, may face barriers to services, resulting in poor health and life outcomes. The infrastructure requests in this policy option package would allow services and supports to become more accessible, and culturally and linguistically responsive to Oregon's diverse communities, ensure that APD can respond in emergency situations and natural disasters, and support a stable long-term care delivery system. Over a long period of time, these investments would create the foundation for older adults, people with disabilities, their families and their communities to realize their ideals of well-being.					

PACKAGE NO.	PACKAGE TITLE				
102	102 - Homecare Workforce				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
2,750,496	-	642,128	3,392,624	16	12.00

PACKAGE DESCRIPTION

The homecare workforce helps ensure that older adults and people with disabilities can achieve well-being through opportunities that protect, empower, respect choice and preserve dignity. Without strong foundational supports in place through the Oregon Home Care Commission (OHCC), homecare providers – including homecare workers, personal support workers, and personal care attendants – may disengage from the workforce, which would negatively affect the consumers of these services. Conversely, when people feel supported in the work they do, they are more invested in positive outcomes, leading to improved job satisfaction and role retention. The purpose of this policy option package is to strengthen human resources and training support through OHCC by establishing a permanent Provider Time Capture (PTC) team within the Office of Aging and People with Disabilities (APD) and creating an online service and dedicated phone number with live assistance to expand consumer/client access to information and resources. The overall package helps eliminate systemic barriers that adversely affect consumers, advocates and providers; strengthens ODHS foundations; and builds toward a better future for the homecare workforce, consumers and local office staff.

PACKAGE NO.	PACKAGE TITLE				
103	103 - Address Systemic Poverty Issues				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
254,070	-	254,070	508,140	2	2.00

PACKAGE DESCRIPTION

The cycle of poverty is often passed from one generation to the next. This means that children who grow up in impoverished households are more likely to live in poverty as adults. Beyond poverty, this intergenerational cycle often extends to access to resources such as education and healthcare. At ODHS, we understand that when people can access the services they need, when they need them, they are more likely to experience positive health and well-being outcomes. This policy option package will create and support policy changes that conserve the financial resources of individuals in ways that promote dignity, equity, independence and reduce intergenerational poverty. The proposed policy changes allow the department to disregard tribal, commission and council income when determining eligibility for Medicaid based on age, blindness or disability; increase the Medicaid resource limit to reflect inflation that has not been updated since 1987 and index this resource limit to future inflation; increase the General Assistance housing assistance payment by connecting it to a percentage of the SSI payment standard; and by improve parity between Medicare Savings programs and the MAGI medical program income standard.

PACKAGE NO.	PACKAGE TITLE				
104	104 - Equitable Access and Well Being				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
12,810,269	-	7,422,761	20,233,030	67	33.50

PACKAGE DESCRIPTION

Everyone in Oregon deserves to access services that align with their personal, cultural and ethnic identities and linguistic preferences. When people cannot access such services, they may avoid seeking help with things like health care, food security and other basic supports. Without these supports, individual and community well-being are put at risk of unmanaged health conditions, and insecurities in food, housing and finance. This comprehensive policy option package assists ODHS/APD on achieving well-being and equity for older adults and people with disabilities with several component parts, each of which is interdependent with the others. It supports well-being by ensuring that individuals in Oregon have access to services that meet their cultural, ethnic, and linguistic needs through an intersectional lens that recognizes the various identities that comprise our aging and disability network.

PACKAGE NO.	PACKAGE TITLE				
105	105 - Healthier Oregon Program (HOP)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
4,889,712	-	-	4,889,712	13	11.50

PACKAGE DESCRIPTION

Everyone in Oregon deserves access to the services they need, when they need them, to achieve well-being. More importantly, access to services needs to remain uninterrupted as people move through each stage of life and regardless of identity or place. Oregon Department of Human Services is requesting funding to provide long-term services and supports to eligible children and adults with disabilities regardless of their immigration status as directed by HB 3352, formerly called Cover All People and renamed “Healthier Oregon”. This POP includes continuation of funding for population enrolled during 2022 through initial implementation of the program (ages 19 to 26 and 55+) and expansion of the services to the remainder of the age groups, including children, starting July 1, 2023. It also asks for ongoing funding for staff to help individuals access these services and supports, including case managers, and related staff who are critical to serving this population.

PACKAGE NO.	PACKAGE TITLE				
116	116 - Grant Program for Community Based Organizations				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
190,700	-	-	190,700	1	0.75

PACKAGE DESCRIPTION

An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.

PACKAGE NO.	PACKAGE TITLE				
142	142 - Combined Eligibility Worker				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
8,387,530	-	5,842,627	14,230,157	56	42.00

PACKAGE DESCRIPTION

We all want a state in which everyone can access the supports they need to thrive. In Oregon, the ONE eligibility system is key in making this a reality. As of May 2022, 1.5 million Oregonians access critical medical, food, cash, and child care benefits through the ONE system – representing a historic level of need triggered in large part by the COVID-19 pandemic. We need to make sure that ONE operations has the necessary resources to process applications and administer benefits in a timely manner, because people can't thrive when they are facing interruptions in their ability to see a doctor, choosing between paying bills or buying food, losing paid work in order to care for a child or are unable to afford necessities for their families. Since its initial launch in 2020, the Oregon Eligibility Partnership has made significant improvements to business practices and computer systems in order to boost efficiency and maximize existing staff resources. Still, we don't have the staffing levels necessary to make sure everyone who is eligible gets what they need when they need it. Without these resources, vulnerable Oregonians may experience longer delays in applications processing, delays that can mean the difference between going hungry and having enough food for their families. Additionally, local businesses may see decreases in consumer spending stemming from delays in getting Supplemental Nutrition Assistance Program (SNAP) benefits out to families, and parents may face interruptions in their employment due to lack of needed child care benefits. In this policy option package, Oregon Department of Human Services is requesting position authority and funding for additional eligibility staff who will answer calls, assist people in person who are applying for or receiving benefits, process applications on a timely basis, and provide support to community partners who assist people in applying for benefits. These resources will help move the ONE system toward its goal of processing applications same day/next day and ensure Oregonians' timely access to benefits.

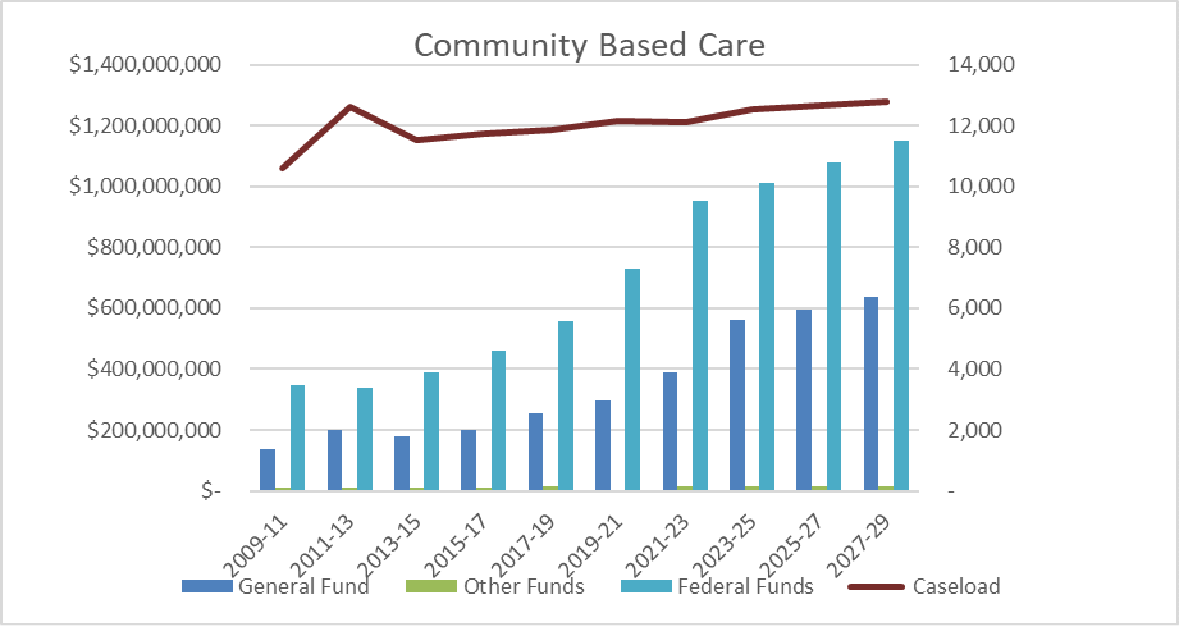
PACKAGE NO.	PACKAGE TITLE				
202	202 - Basic Health Program				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
1,630,194	-	1,630,194	3,260,388	13	9.75

PACKAGE DESCRIPTION

Oregon recognizes that health care is fundamental to people's and families' well-being. This shared value was a key driver behind the Oregon Health Plan (OHP), which prior to the pandemic covered approximately 1 million people. During the pandemic, federal rule changes allowed hundreds of thousands of additional Oregonians to access health care coverage through OHP, and today the plan covers one in three Oregonians. Without state action, many of these newly covered Oregonians will lose their health coverage when the federal public health emergency (PHE) expires, erasing the important gains in coverage Oregon achieved during the PHE. In 2022, the Oregon Legislature passed House Bill 4035 to fund the federally-mandated redeterminations process and preserve short-term coverage for people who earn too much income for Medicaid, but not enough to afford other coverage. The bill also authorized the development of a sustainable, long-term solution in the form of a Basic Health Program (BHP). This policy package would direct necessary funding to Oregon Department of Human Services to finish the work of implementing the BHP and allow us to move forward with an effective redetermination process. Together, these actions will help ensure that eligible Oregonians have uninterrupted access to critical medical benefits for themselves and their families.

Oregon Department of Human Services: Medicaid Long-Term Care Community-Based Care

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Long-Term Focus Area:
Program Contact: Nakeshia Knight-Coyle



Program Overview

Community-based care is considered the middle layer of Oregon's long-term care continuum and includes a variety of 24-hour care settings and services for older adults and people with physical disabilities who cannot meet their own activities of daily living. These services are part of Oregon's nationally recognized home and community-based care system, which provides a critical, cost-effective alternative to nursing facilities.

Eligibility for services is based upon a combination of financial criteria and service needs. An individual's service needs are calculated as a "service priority level" which ranges from 1 (highest need) to 18 (lowest need). In the 2003 budget crisis, funding to serve individuals with service priority levels 14 through 17 was eliminated (SPL 18 was not funded at that time). These levels remain unfunded

through Medicaid; however, some (not all) of the needs can be met for these individuals through Older Americans Act and Oregon Project Independence programs.

Program Funding Request

APD Community Based Care				
	General Fund	**Other Fund**	**Federal Fund**	**Total Funds**
21-23 LAB	$390,543,895	$15,255,627	$951,696,532	$1,357,496,054
23-25 ARB	$560,227,083	$15,255,627	$1,012,320,598	$1,587,803,308
Difference	$169,683,188	$0	$60,624,066	$230,307,254
% Diff	**43.45%**	**0.00%**	**6.37%**	**16.97%**

Program Description

The State of Oregon strives to meet the needs and expectations of increasingly diverse populations, and community-based care provides a critical alternative to nursing facilities for seniors and people with disabilities who cannot meet their own daily needs.

Eligibility for long-term care services and supports is based upon a combination of financial criteria and service needs. Recipients contribute their own funds toward room and board directly to community-based care facilities, while the state pays for services consisting mostly of assistance with activities of daily living (walking, transferring, eating, dressing, grooming, bathing, hygiene, toileting, and cognition) and instrumental activities of daily living (meal preparation, housekeeping, laundry, shopping, medication, and oxygen management). Nursing facility care is a guaranteed Medicaid benefit to eligible individuals. If the state did not use alternatives to nursing facility level of care, more than 31,000 individuals, including more than 12,000 in community-based care settings, would likely be receiving services in nursing facilities at approximately 300 percent of the cost of community-based care services.

Community-based care includes:

- Adult foster homes, which serve five or fewer individuals in a home-like setting.
- Residential care facilities (RCF), which serve six or more individuals in a facility with private or shared rooms and common areas.
- Assisted living facilities (ALF), which serve six or more individuals in their own apartments.
- Memory care facilities, licensed as either an ALF or RCF, with an endorsement allowing them to specialize in serving individuals with dementia.
- Enhanced-care services, which serve APD eligible individuals complicated by significant mental health needs. This program is jointly funded between ODHS and the Oregon Health Authority.
- Program of All-Inclusive Care for the Elderly (PACE) serves more than 1,750 individuals via a fully capitated premium. The program is jointly funded with Medicare and Medicaid dollars and provides an integrated program for medical and long-term services. Participants are 55 years of age or older, generally attend adult day services, and live in a variety of settings representative of Oregon's long-term care continuum. PACE providers are responsible for providing and coordinating the full health and long-term service needs of their clients in all of these setting types.

APD competes with the private pay market for access to most community-based care. Most facilities have a mix of private pay and Medicaid residents. As the society ages and the economy strengthens, APD may lose access due to competition for open beds with the private pay market.

Adult foster homes are represented by SEIU and have collective bargaining rights. Factors such as safety and quality cannot be negotiated; however, issues such as training, and service rates are mandatory subjects of bargaining.

Each community-based care setting must meet federal and state laws and regulations related to health, safety, and service delivery. Mandatory services include assistance with activities of daily living, medication oversight, and social activities. Some settings that serve individuals with more complex needs may include additional services, such as nursing and behavioral supports.

Program Justification and Link to Focus Areas

Community-based care is a direct link to the Safer, Healthier Communities focus area (Oregonians are healthy and have the best possible quality of life at all ages). The program maximizes federal resources while reducing unnecessary costs in higher levels of care. With one of the lowest levels of nursing facility utilization in the country, Oregon is at the forefront of using community-based care as a core alternative to nursing facilities. With ongoing support, Oregon can meet the target of serving 90 percent of the publicly funded long-term care caseload in-home and community-based care in the next five years (up from 86 percent).

Program Performance

A key goal of the Oregon Department of Human Services (ODHS) is that people are safe and living as independently as possible. ODHS currently measures this goal based on the percentage of individuals living in their own homes in lieu of a licensed care facility, as well as the percentage of individuals who move to a less restrictive service settings such as community- based care.

Community-based care service plans have been proven to be a cost-effective alternative to nursing facility care. Costs range by facility type and assessed need of the individual. The monthly average cost by setting is:

- Adult Foster Home: $4,965
- Regular Residential Care Facility: $1,795
- Contracted Residential Care Facility: $6,190

The cost of similar services provided in a nursing facility exceeds $11,300 per month.

Enabling Legislation/Program Authorization

Community-based care is operated under a variety of Medicaid home and community-based options. The newest mechanism is the 1915(k) State Plan Option or, “K plan.” Through the K plan the state provides services that substitute for nursing facility services, the mandated benefit for Medicaid eligible individuals. The K plan provides an enhanced federal match allowing the state to draw down additional federal funds to support the Medicaid program. Additionally, ORS 410 and ORS 443 provide statutory policy and structure to the services offered.

Funding Streams

Community-based care services are funded through the Medicaid program. The services are designed and approved using Medicaid 1915c Home and Community-Based Waivers, and primarily, the Community First Choice Option in the Medicaid State Plan. The program 1915c Waiver funding match rate is current Federal Medical Assistance Percentage (FMAP), 60.22% Federal funds and 39.78% State General Funds and for 1915K, FMAP + 6%: 66.22% Federal funds and 32.78% State General Funds. There is a small amount of funding from the estates of former recipients. When a Medicaid recipient passes away, ODHS is required by federal law to recover money spent for the individual's care from the recipient's estate. These funds are reinvested in services for other individuals, offsetting the need for general funds.

Funding Justification and Significant Changes to CSL

PACKAGE NO.	PACKAGE TITLE				
POP 101	Infrastructure, Access and Emergency				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$64,090,453	$ -	$107,752,231	$171,842,684	-	-

PACKAGE DESCRIPTION

A fully staffed and supported workforce ensures that services and supports are delivered to Oregonians in ways that achieve the respective missions of Oregon Department of Human Services (ODHS) and the Office of Aging and People with Disabilities (APD). Without a fully staffed workforce, Oregonians, including older adults and people with disabilities, may face barriers to services, resulting in poor health and life outcomes. The infrastructure requests in this policy option package would allow services and supports to become more accessible, and culturally and linguistically responsive to Oregon's diverse communities, ensure that APD can respond in emergency situations and natural disasters, and support a stable long-term care delivery system. Over a long period of time, these investments would create the foundation for older adults, people with disabilities, their families and their communities to realize their ideals of well-being.

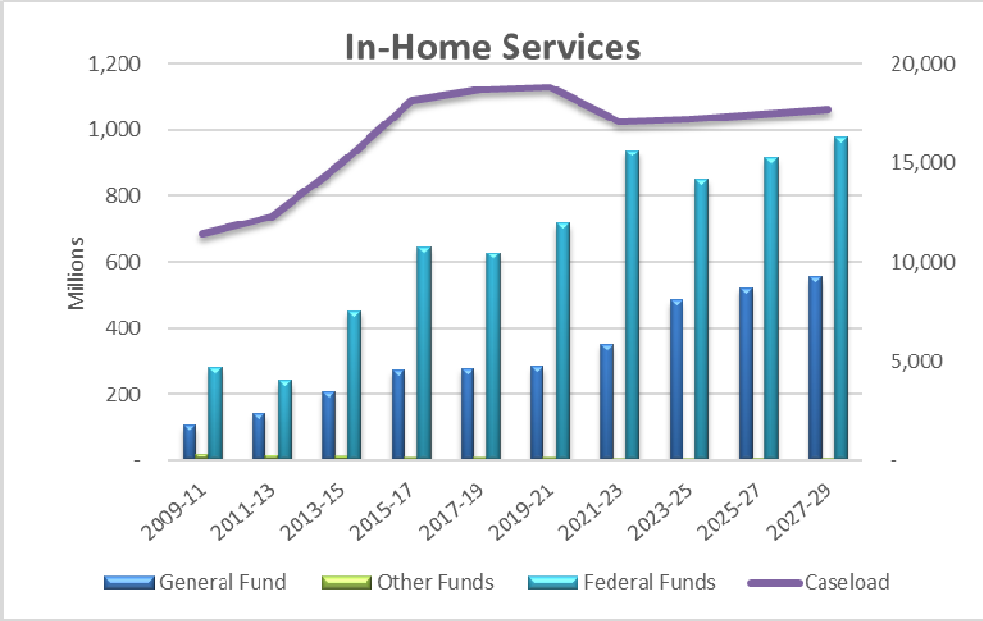
PACKAGE NO.	PACKAGE TITLE				
POP 105	Healthier Oregon Program (HOP)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$1,892,889	$ -	$0	$1,892,889	-	-

PACKAGE DESCRIPTION

Everyone in Oregon deserves access to the services they need, when they need them, to achieve well-being. More importantly, access to services needs to remain uninterrupted as people move through each stage of life and regardless of identity or place. Oregon Department of Human Services is requesting funding to provide long-term services and supports to eligible children and adults with disabilities regardless of their immigration status as directed by HB 3352, formerly called Cover All People and renamed "Healthier Oregon". This POP includes continuation of funding for population enrolled during 2022 through initial implementation of the program (ages 19 to 26 and 55+) and expansion of the services to the remainder of the age groups, including children, starting July 1, 2023. It also asks for ongoing funding for staff to help individuals access these services and supports, including case managers, and related staff who are critical to serving this population.

Oregon Department of Human Services: Medicaid Long-Term Care In-Home Services

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Long-Term Focus Area:
Program Contact: Nakeshia Knight-Coyle



In the 13-15 biennium, in-home agency and personal care budgets were moved from 'other services' to In-Home care for reporting purposes. In 2021-23 there was a significant federal funds increase from Home and Community Based American Rescue Plan Act.

Program Overview

In-home services are the least restrictive service offered in Oregon's long-term care continuum. This program funds Medicaid long-term care services to older adults and people with disabilities in their own homes. Individuals are eligible to receive the same services in a nursing facility. In 2013, Oregon added a new Medicaid, 1915(k) State Plan Option, or "K plan," that provides additional flexibility and federal funds. Approximately 52 percent of individuals served in Oregon's long-term care system are served in their own homes. In-home services offer an opportunity to provide individualized care in a respectful, sensitive, and inclusive manner to Oregonians from a variety of diverse backgrounds.

Program Funding Request

APD In-Home Care				
	GF	**OF**	**FF**	**TF**
21-23 LAB	$353,202,010	$4,197,619	$937,823,848	$1,295,223,477
23-25 ARB	$485,475,923	$4,197,619	$853,852,262	$1,343,525,804
Difference	$132,273,913	$0	-$83,971,586	$48,302,327
% Difference	**37.45%**	**0.00%**	**-8.95%**	**3.73%**

Program Description

This cost-effective program enables older adults who have low incomes and people with disabilities to remain in their own homes and established communities. Individuals from culturally diverse backgrounds benefit from this program that provides enhanced independence, health, safety, and quality of life. Oregon's model of long-term care is referred to as a social model, distinctly different from a medical model of care. Social models of care focus on client autonomy, respect, choice, and individualized care planning. Individuals are viewed holistically, provided supports that enhance independence, dignity, and respect.

Eligibility for services is based upon a combination of financial criteria and service needs. An individual's service needs are calculated as a "service priority level" which ranges from 1 (highest need) to 18 (lowest need). In the 2003 budget crisis, funding to serve individuals with service priority levels 14 through 17 was eliminated (SPL 18 was not funded at that time). These levels remain unfunded through Medicaid; however, some (not all) of the needs can be met for these individuals through Older Americans Act and Oregon Project Independence programs.

In-home supports include necessary assistance with activities of daily living (walking, transferring, eating, dressing, grooming, bathing, hygiene, toileting, and cognition) and instrumental activities of daily living (meal preparation, housekeeping, laundry, shopping, medication, and oxygen management). Assistance ranges from several hours per week to 24 hours per day. Without these supports, more than 19,000 individuals would likely receive services in a more costly nursing facility. Oregon provides a variety of in-home service options available to individuals based on preference, choice, and cost-effectiveness.

Consumer-Employed Provider Program

Individuals participating in this program receive services from homecare workers. The in-home recipient is the employer and is empowered and responsible to hire, train, supervise, track hours worked, address performance deficiencies, and discharge providers. Homecare workers are paid a set rate established through collective bargaining, which the State pays on the individual's behalf. The Oregon Home Care Commission establishes homecare worker enrollment standards and training required, both of which contribute to the quality of in-home services. APD is forecast to serve approximately 20,000 individuals in this program in the 2021-2023 biennium.

Independent Choices Program

This program is a 1915(j) State Plan Option and allows individuals to exercise more decision-making authority in identifying, accessing, managing, and purchasing goods and services that enhance independence, dignity, choice, and well-being. This option is popular among individuals who wish to take complete control over the planning, budget, and provision of services. In the Independent Choices Program, the cost of the established service plan is "cashed-out" and deposited into the eligible individual's dedicated Independent Choices Program checking account. The individual then pays providers directly based on an individually negotiated rate. Participants have the flexibility to use a portion of the funds to purchase goods that enhance their independence and are unavailable through the medical plan, such as a wheelchair lift for a vehicle or a wheelchair ramp for their home. The State performs periodic monitoring with an emphasis on to ensure that the funds are used to meet the individual's service needs and that funds are used appropriately.

Specialized Living Services

These services are designed to serve a specific special-needs consumer base, such as those with traumatic brain injuries or quadriplegia who would otherwise require 24-hour care. The services are provided through contracts with qualified vendors who provide specialized, shared-attendant services to individuals living in their own homes or apartments.

Cost Drivers

The major cost drivers of the in-home services program are the current number of eligible individuals, their level of needed assistance, the length of time receiving services, and the growing population of those requiring services. The population served is much different than it was 30 years ago when Oregon first received a waiver to allow in-home services. With the advancement of medical technology and treatment options, individuals are living longer with chronic disease and significant disabilities. Another major cost driver is the provision of wages and benefits for homecare workers tied to collective bargaining. This includes set wages, paid time off, workers' compensations premiums, unemployment insurance, and other benefits.

Program Justification and Link to Focus Areas

In-home services link to the Safer, Healthier Communities focus area. In the early 1980s, Oregon was the first state awarded a Medicaid 1915(c) Home and Community-Based Services waiver from the Centers for Medicare and Medicaid Services, which allowed Oregon to serve individuals in their homes and communities. In 2013, Oregon added a new, 1915(k) State Plan Option, or "K plan," that provides additional flexibility and funds. In an independent study conducted by AARP, Oregon received an overall ranking of 4th out of 50 states in terms of choice of settings and providers, quality of life and quality of care, and effective transitions from nursing facilities back into the community. Across the nation, Oregon continues to be a leader for serving individuals in their own homes.

The program empowers individuals to direct their own services and make choices that enhance their quality of life, live with dignity, and remain as independent as possible. Health and safety are maintained through the provision of necessary assistance with activities of daily living and instrumental activities of daily living. Consistent provision of services, including medication management and the preparation of nutritious meals, delays or diverts an individual's entry into more costly care settings.

Program Performance

A key goal of the Oregon Department of Human Services (ODHS) is that people are safe and living as independently as possible. ODHS currently measures this goal based on the percentage of individuals living in their own homes in lieu of a

licensed care facility, as well as the percentage of individuals who move to a less restrictive service setting.

Enabling Legislation/Program Authorization

Medicaid is an entitlement program that was enacted in 1965 under Title XIX of the Social Security Act. Eligible individuals have the right to receive long-term care services in a nursing facility. While states are not required to participate in Medicaid, they must follow Medicaid rules to receive federal matching funds. Oregon's Long-Term Care system operates under a variety of Medicaid options which allows long-term care services to be provided in home and community-based settings, more cost effective than the required nursing facility service.

Funding Streams

In-home services are funded through the Medicaid program. The services are designed and approved using Medicaid 1915c Home and Community-Based Waivers, and primarily, the Community First Choice Option in the Medicaid State Plan. The program 1915c Waiver funding match rate is current Federal Medical Assistance Percentage (FMAP), 60.22% Federal funds and 39.78% State General Funds and for 1915K, FMAP + 6%: 66.22% Federal funds and 32.78% State General Funds. There is a small amount of funding from the estates of former recipients. When a Medicaid recipient passes away, ODHS is required by federal law to recover money spent for the individual's care from the recipient's estate. These funds are reinvested in services for other individuals, offsetting the need for general funds.

Funding Justification and Significant Changes to CSL

PACKAGE NO.	PACKAGE TITLE				
POP 101	Infrastructure, Access and Emergency				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$5,579,327	$ -	$8,903,349	$14,482,676	-	-

PACKAGE DESCRIPTION

A fully staffed and supported workforce ensures that services and supports are delivered to Oregonians in ways that achieve the respective missions of Oregon Department of Human Services (ODHS) and the Office of Aging and People with Disabilities (APD). Without a fully staffed workforce, Oregonians, including older adults and people with disabilities, may face barriers to services, resulting in poor health and life outcomes. The infrastructure requests in this policy option package would allow services and supports to become more accessible, and culturally and linguistically responsive to Oregon's diverse communities, ensure that APD can respond in emergency situations and natural disasters, and support a stable long-term care delivery system. Over a long period of time, these investments would create the foundation for older adults, people with disabilities, their families and their communities to realize their ideals of well-being.

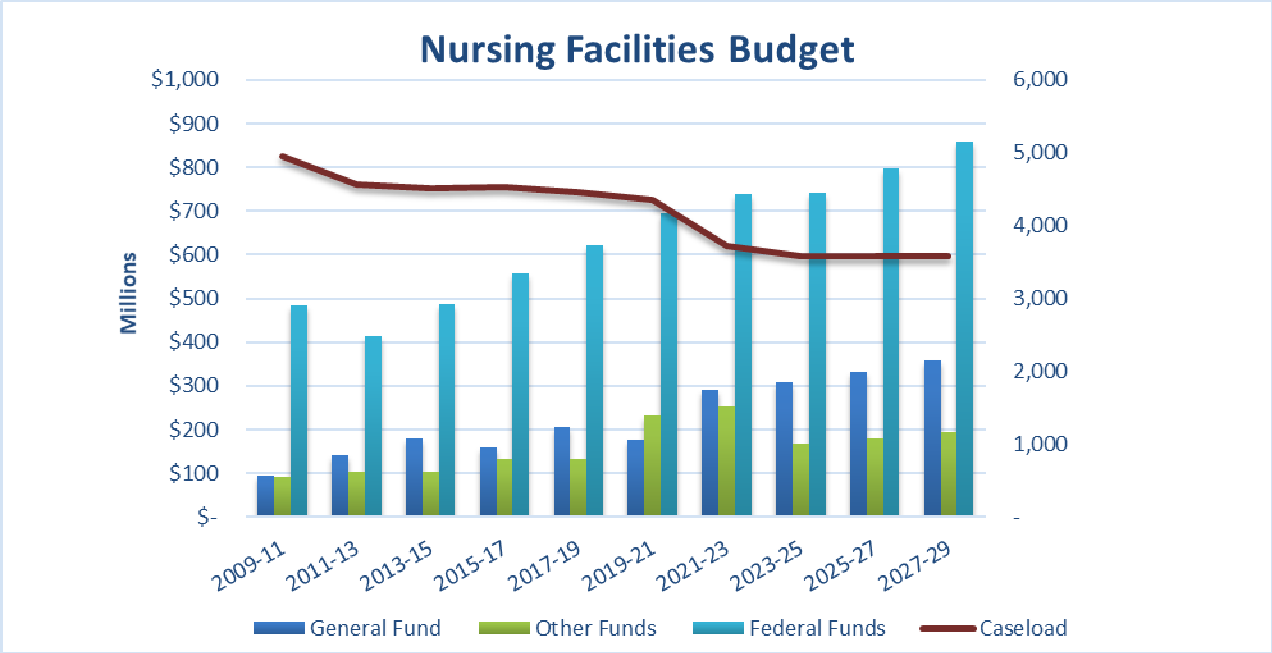
PACKAGE NO.	PACKAGE TITLE				
POP 105	Healthier Oregon Program (HOP)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$23,605,741	$ -	$0	$23,605,741	-	-

PACKAGE DESCRIPTION

Everyone in Oregon deserves access to the services they need, when they need them, to achieve well-being. More importantly, access to services needs to remain uninterrupted as people move through each stage of life and regardless of identity or place. Oregon Department of Human Services is requesting funding to provide long-term services and supports to eligible children and adults with disabilities regardless of their immigration status as directed by HB 3352, formerly called Cover All People and renamed "Healthier Oregon". This POP includes continuation of funding for population enrolled during 2022 through initial implementation of the program (ages 19 to 26 and 55+) and expansion of the services to the remainder of the age groups, including children, starting July 1, 2023. It also asks for ongoing funding for staff to help individuals access these services and supports, including case managers, and related staff who are critical to serving this population.

Oregon Department of Human Services: Medicaid Long-Term Care Nursing Facilities

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Long-Term Focus Area:
Program Contact: Nakeshia Knight-Coyle



Caseload has shifted toward an overall downward trend as more and more individuals choose to receive long-term care services in a home or community-based setting. In 2019-21 the caseload began to decline because of COVID-19.

Program Overview

Nursing facility services are the institutional option available in Oregon's long-term care continuum, which also consists of in-home and community-based care. Nursing facilities are generally considered the most restrictive setting of the three options offered; however, this program is important for individuals with the highest levels of acuity and is a mandated federal benefit under the Medicaid program. Nursing facility services are the guaranteed benefit (entitlement) by federal law for individual who meet nursing facility level of care criteria set by the state.

Program Funding Request

APD Nursing Facilities				
	General Fund	**Other Fund**	**Federal Fund**	**Total Funds**
21-23 LAB	$291,050,726	$253,702,182	$738,900,070	$1,283,652,978
23-25 ARB	$309,020,644	$167,717,821	$742,472,292	$1,219,210,757
Difference	$17,969,918	-$85,984,361	$3,572,222	-$64,442,221
% Diff	**6.17%**	**-33.89%**	**0.48%**	**-5.02%**

Program Description

Nursing facilities are most appropriate for people with high acuity needs requiring 24-hour medical oversight and a protective/structured setting. They offer short-term care for individuals who need rehabilitation services or 24-hour nursing. They may be appropriate for a limited number of individuals who need long-term care due to permanent health problems too complex or serious for in-home or community-based care settings.

Nursing facility rates cover basic, complex, pediatric, enhanced care, and post-hospital extended care. Services vary in nursing care facilities, but generally consist of the following:

- Medical treatment prescribed by a doctor;
- Physical, speech, and occupational therapy;
- Assistance with personal care activities such as eating, walking, bathing, and using the toilet (custodial care); and
- Social services.

Oregon currently has 130 licensed nursing facilities. These facilities have approximately 2.26 million annual resident days, of which nearly 65.7 percent are Medicaid clients. The majority of residents are admitted directly from acute care hospitals with a very small percentage from home.

Payer	Long-Term Care – Nursing Facility
Medicare	14.03%
Medicaid	70.81
Private Pay	15.16%

There has been a significant increase in the number and percentage of Medicaid consumers receiving services. As such, there has also been an increase in revenue coming from Medicaid in the last biennium. It is now about 71% of NF revenue compared to about 61% previously.

The main cost drivers are low census in nursing facilities, the length of stay in a nursing facility, and the steady increase in the daily reimbursement rate. The nursing facility reimbursement rate is tied to the provider assessment statute. The current nursing facility reimbursement basic rate is $440.82 per resident per day. It includes a 5 percent increase provided during the pandemic. **T**he provider assessment rate is $32.91.

In the 2021-2023 biennium, the provider assessment is expected to account for approximately $142.2 million of $3.6 billion in total APD program expenditures.

Program Justification and Link to Focus Areas

Nursing facility services link to the Safer, Healthier Communities focus area. Though nursing facility level of care is a guaranteed benefit, Oregon has been the national leader in creating cost-effective alternatives that meet people's needs in their homes and other community settings, such as assisted living facilities, in-home care, retirement communities, residential care, and adult foster homes. Oregon continues to work closely with individuals and their families to offer the full array of community-based services. The new State Plan Authority approved by the Centers for Medicare and Medicaid Services in July 2013 provides Medicaid-funded resources to assist individuals in transitioning from nursing facilities.

Nursing facilities are an important service in our continuum, meeting the needs of some individuals with higher acuity levels; however, ODHS still believes there are opportunities to decrease its usage. Oregon continues to highlight, strengthen, and encourage the use of community-based care facilities instead of nursing facilities. ODHS has established a goal of decreasing the percentage of long-term care recipients utilizing nursing facility services to 10 percent. As of May 2020, the

percentage of long-term care recipients utilizing nursing facilities services is 12.4 percent.

Program Performance

Nursing facilities are heavily regulated by the federal government and are licensed and routinely monitored by the state. The state establishes requirements for nursing facilities that promote quality of care and maximization of personal choice and independence for residents.

ODHS remains diligent in diverting and relocating people who receive Medicaid-funded long-term care services from nursing facilities into home or community settings. One-way performance is measured in this program is by the occupancy percentage of nursing facilities. Oregon has one of the lowest occupancy percentages in the nation at 67.5 percent compared with the national average of 78 percent.

Enabling Legislation/Program Authorization

Medicaid is an entitlement program that was enacted in 1965 under Title XIX of the Social Security Act. While states are not required to participate in Medicaid, in order to receive federal matching funds states must follow the Medicaid rules. Oregon's long-term care system operates under Medicaid state plan authority. All clients qualify for nursing facility care have the choice of receiving care in other settings such as in-home or in community-based care settings.

Oregon's nursing facility reimbursement rate and accompanying provider assessment authorization is promulgated in ORS 409.736. The 2013 Legislative Assembly reauthorized the provider assessment through 2020.

Funding Streams

Nursing facility services are funded through the Medicaid program; therefore, the federal government pays 60.22%, Federal Medical Assistance Percentage (FMAP), with the balance being split between state general funds and provider taxes. There is also funding provided through the estates of former recipients. When a Medicaid recipient passes away, the state is required by federal law to recover

expenditures for the individual's care from the recipient's estate. These funds are reinvested in services for other individuals, offsetting the need for general fund.

Funding Justification and Significant Changes to CSL

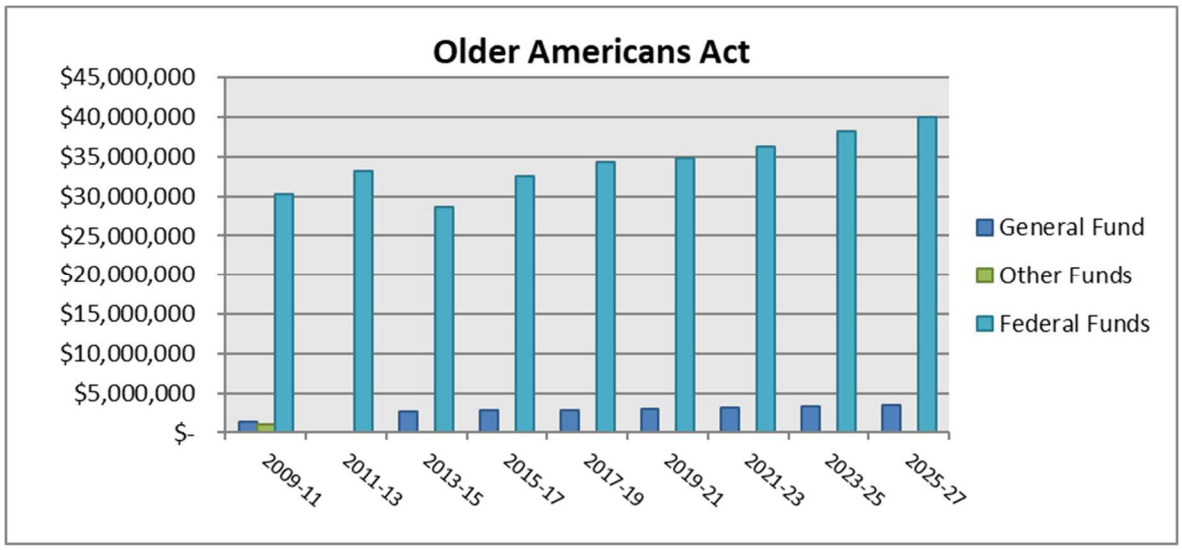
PACKAGE NO.	PACKAGE TITLE				
POP 105	Healthier Oregon Program (HOP)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$3,633,469	$ -	$ -	$3,633,469	-	-

PACKAGE DESCRIPTION

Everyone in Oregon deserves access to the services they need, when they need them, to achieve well-being. More importantly, access to services needs to remain uninterrupted as people move through each stage of life and regardless of identity or place. Oregon Department of Human Services is requesting funding to provide long-term services and supports to eligible children and adults with disabilities regardless of their immigration status as directed by HB 3352, formerly called Cover All People and renamed “Healthier Oregon”. This POP includes continuation of funding for population enrolled during 2022 through initial implementation of the program (ages 19 to 26 and 55+) and expansion of the services to the remainder of the age groups, including children, starting July 1, 2023. It also asks for ongoing funding for staff to help individuals access these services and supports, including case managers, and related staff who are critical to serving this population.

Oregon Department of Human Services: Older Americans Act

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Outcome Area:
Program Contact: Nakeshia Knight-Coyle



Older Americans Act funding comes primarily from the federal government. In 2019, OAA funding helped serve nearly 213,000 Oregonians.

Program Overview

Services and supports available to individuals under the Older Americans Act (OAA) provide vital assistance designed to prevent or delay entry into Medicaid-funded long-term care such as In-Home or 24-hour residential services. The OAA is a Federal law that set out a national aging network structure consisting of the U.S. Administration on Aging (AoA) now part of the Administration for Community Living, State Units on Aging (ODHS/Aging and People with Disabilities program), and Area Agencies on Aging (AAAs). The OAA authorizes funding and services through this network to serve older individuals in their homes and communities, through local entities. All individuals aged 60 or older, regardless of income are eligible to receive services but the programs are targeted towards those in greatest social or economic need. A specific focus on how to better serve diverse populations of older adults across race/ethnicity, sexual orientation, gender, veteran status, and other intersecting categories are essential with the continually changing demographics of Oregon.

Program Funding Request

APD Older Americans Act				
	GF	**OF**	**FF**	**TF**
21-23 LAB	$3,000,828	$0	$34,865,201	$37,866,029
23-25 ARB	$3,126,863	$0	$36,329,539	$39,456,402
Difference	$126,035	$0	$1,464,338	$1,590,373
% Difference	**4.20%**	**0.00%**	**4.20%**	**4.20%**

Program Description

Older Americans Act services are administered entirely by 16 local Area Agencies on Aging. To qualify for OAA supported services an individual must meet the following criteria:

- Be 60 years of age or older;
- Be a caregiver of someone 60 years of age or older (or younger if the person is diagnosed with Alzheimer's Disease or related dementia) or an older relative caring for a child 18 year of age or younger or an individual with disabilities age 18 or older; or
- Be 55 or older and have an adjusted income at or below 125 percent of Federal Poverty Level for the Senior Community Service Employment Program (Title V).

Please Note: There is no income or asset/resource criteria for eligibility, except for the Senior Community Service Employment Program (Title V).

The Older Americans Act authorizes services and funding by title

Title III
Supportive Services - Provides assistance to maintain independence through assisted transportation, information and referral/assistance, in-home care, adult day care, chore services, home modification and other housing help, legal assistance, mental health outreach, and assistive devices. Title III also partially funds Oregon's Aging and Disability Resource Connection (ADRC), which provides

unbiased information, referral, and options counseling for individuals (consumers, family members, caregivers) needing long-term services and supports.

Nutrition Services - In order to reduce hunger and food insecurity and promote socialization, health, and well-being the Act authorizes both home-delivered (commonly known as Meals on Wheels) and congregate (community setting, senior center, community center, etc.) meals programs. The Act also requires nutrition education and counseling.

Services Incentive Program (NSIP) - Supplements funding authorized under Title III for food used in meals served under the Older Americans Act. States receive an allocation based on the number of meals served under the OAA in the state in proportion to the total number of meals served by all states.

Preventive Health Services - Authorizes evidence-based programs that promote healthy lifestyles through physical activity, appropriate diet and nutrition and self-management of chronic health conditions.

National Family Caregiver Support Program - Provides individual and group options counseling, training, and respite care for family members and friends who are primary caregivers to seniors. This program also provides support to older relatives and raising grandchildren.

Title V

Senior Community Service Employment Program (SCSEP) – Authorizes a community service and work-based training program for older workers that provides subsidized, service-based training for low-income persons 55 or older who are unemployed and have poor employment prospects. Participants are paid minimum wage for approximately 20 hours per week while they develop valuable skills and connections to help them find and keep jobs in their communities. Title V funding is awarded to ODHS/APD from the U.S. Department of Labor and is competitively sub-granted to a qualified job training organization.

Title VII

Elder Rights Services - Provides a focus on the physical, mental, emotional and financial well-being of older Americans. Services include pension counseling, legal assistance, and elder abuse prevention education.

Ombudsman Program - Establishes an Office of the State Long-Term Care Ombudsman program to identify, investigate, and resolve complaints made by or on behalf of residents of licensed care facilities (nursing homes, assisted living, and adult foster homes) and promote system changes that will improve the quality of life and care for residents. The allocation for this program is 100 percent passed through to the Office of the Long-Term Care Ombudsman, a separate state agency from APD.

OAA Funding

OAA funding is granted to each State Unit on Aging (ODHS/APD) based on a population formula. The State Unit on Aging sub-grants Title III funds to Oregon's 16 designated Area Agencies on Aging (AAA) based on a state population formula. The AAAs work with their local communities to assess and develop a menu of services that meet the needs of older adults in their planning and service area. Subsequently, the AAA submits an Area Plan to the State describing the delivery of OAA services in their communities; this is basis for the funding agreement between the AAA and ODHS/APD.

Program Justification and Link to Focus Areas

OAA program services contribute to the Safer, Healthier Communities goal. The OAA, in partnership with providers and clients, provides vital support for older adults who are at significant risk of losing their independence by providing food, job training/opportunities, social support, transportation, chronic disease self-management and fall prevention.

Annual State Program reports are submitted to the Administration on Community Living, consisting of service unit data and client demographics. Evidence-based programs supported by the preventive health services funding under Title III have provided an opportunity to demonstrate health care cost-saving based on the research supporting the programs. The Senior Community Service Employment

Program tracks six performance measures each year including employment and retention. Performance standards and measures have recently been established for the Aging and Disability Resource Connections Program and will be tracked appropriately.

Program Performance

- **Number of people served/items produced**
  OAA data reporting requires AAAs to capture identifiable unduplicated clients who receive "registered services" and an estimated number of clients receiving "non-registered services." Registered services include personal care, home care, chore, meals, day care, case management, assisted transportation, caregiver, and nutrition counseling. Non-registered services include but are not limited to information and assistance, health promotion programs, group education, etc. The AAAs served approximately 85,822[WEA1][SK2][WEA3] distinct individuals in state fiscal year 2021.

- **Quality of the services provided**
  Program standards have been established for the major services and annual program monitoring is conducted.

- **Timeliness of services provided**
  The Family Caregiver Support Program of the OAA is the only service area that consistently encounters wait lists.

- **Cost per service unit**
  Varies depending on the level of community support, the OAA funding on average supports about one-third of the cost of service. Further funding comes from local governments, donations, and fundraising.

Enabling Legislation/Program Authorization

Federal Law: 45 CFR, Part 1321.

Funding Streams

OAA funds are 100 percent federal. The law has a required Maintenance of Effort and state match of $5 million per biennium, which is met with state funding authorized for the Oregon Project Independence Program (ORS 410.410 to 410.480). OAA funding was never intended nor does it fully fund services. Each dollar of OAA funding is leveraged with $2 of state and local funds, participant donations, and community fundraising. Additionally, the services are enhanced with the in-kind support of volunteers, donated community space and equipment, etc.

Funding Justification and Significant Changes to CSL

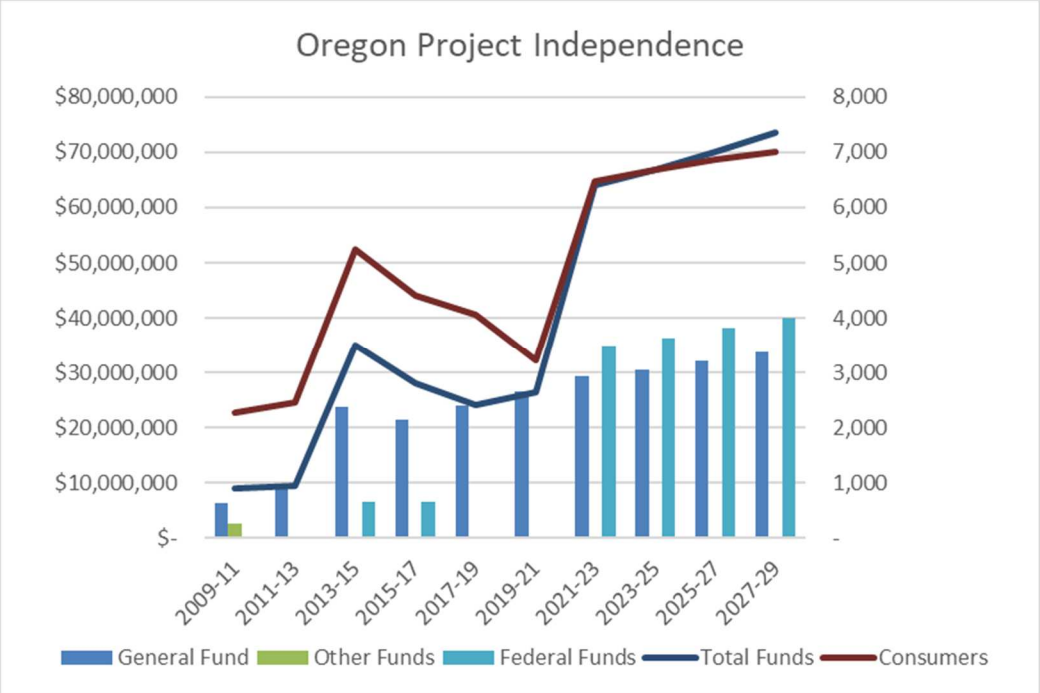
N/A

Oregon Department of Human Services: Oregon Project Independence

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Long-Term Focus Area:
Program Contact: Nakeshia Knight-Coyle

Program Overview

Oregon Project Independence (OPI) provides preventive and in-home services and supports to a diverse population of eligible individuals to reduce the risk of out-of-home placement and promote self-determination. This program optimizes eligible individuals' personal and community support resources to prevent, or delay spend down to Medicaid-funded long-term care.



Program Funding Request

APD Oregon Project Independence				
	GF	OF	FF	TF
21-23 LAB	29,315,299	-	34,805,145	64,120,444
23-25 ARB	30,546,542	-	36,266,961	66,813,503
Diff.	1,231,243	-	1,461,816	2,693,059
% Diff.	4.20%		4.20%	4.20%

Program Description

Oregon Project Independence (OPI) is a state-funded program offering in-home services and related supports to a diverse population of Oregonians. ODHS/APD strives to deliver in-home services in a culturally and linguistically appropriate manner. OPI provides essential services such as personal care, homecare and chore assistance, adult day care, service coordination, registered nursing (teaching/delegation of nursing tasks to caregivers), case management and home-delivered meals. This program complements services provided under the Older Americans Act.

Traditionally, OPI has served individuals who are 60 years of age or older who are assessed as needing assistance with activities of daily living (eating, dressing/grooming, bathing/personal hygiene, mobility, elimination, and cognition) and/or instrumental activities of daily living (housekeeping, shopping, transportation, medication management and meal preparation) and are not receiving Medicaid. Also, individuals under age 60 who have been diagnosed with Alzheimer's disease or a related disorder are also eligible. The program was expanded by the 2005 Oregon Legislature to include younger adults with disabilities and recently $6 million to continue funding for a pilot program has been made available to support this limited expansion.

In 2021, the Oregon Legislature approved ODHS/APD to apply for an 1115 Demonstration Waiver with the Centers for Medicare and Medicaid Services (CMS) to begin to match OPI General Funds with federal Medicaid funds. In a collaborative process with community partners, ODHS/APD developed and submitted the 1115 Waiver in November 2021. ODHS/APD has been in negotiations with CMS since January 2022 and expects to implement in October 2022. This change will allow the state to increase the number of individuals served

through OPI, and a family caregiver assistance program, while maintaining the unique nature of the OPI program.

In the traditional OPI program, there are neither income nor resource requirements for eligibility; however, these factors are taken into consideration when assessing the individual's risk of needing Medicaid long-term care. In the demonstration waiver, the waiver does have income and asset limits. OPI clients do not pay a charge for the service coordination they receive. For traditional OPI, services other than service coordination are provided at no cost to families with net incomes at or below 150 percent of the federal poverty level (FPL). Families with net incomes from 150 percent to 400 percent FPL pay a fee toward services using a sliding scale based on income. Families with net incomes at or above 400 percent FPL pay the full cost of the services provided (other than service coordination). In the demonstration waiver, there will be no copayments or cost-sharing for eligible individuals. In part, this is because APD wants to ensure that as many people as possible access OPI through the demonstration waiver rather than the state general funded program.

Oregon Project Independence services are delivered statewide through the network of 16 designated Area Agencies on Aging (AAAs). Administrative cost efficiencies have been realized in one area of the state where neighboring AAAs collaborated to jointly secure contracted services of a single in-home care agency. AAAs share these types of innovations and strategies. In the waiver, in areas served by local APD offices, the APD office will determine eligibility, and ongoing case management will be performed by the AAA.

Program Justification and Link to Focus Areas

OPI contributes to the Safer, Healthier Communities focus area and has a desired outcome to "decrease the number of older Oregonians that access full Medicaid-funded health and long-term care system." AAAs are currently maintaining waiting lists of individuals who are eligible to be served by OPI. The demonstration waiver should eliminate any waitlists allowing the state to serve more than double the number of people.

OPI and the new demonstration programs empower individuals to direct their own services and make choices that enhance their quality of life, live with dignity, and remain as independent as possible. Health is maintained through the provision of

necessary assistance with activities of daily living and instrumental activities of daily living.

Program Performance

APD recently conducted an analysis of the Return on Investment (ROI) for OPI. Nationally recognized researchers estimated that the estimate of OPI's ROI is 3.8 to 1. For fiscal year 2016-17, they estimated, at a minimum, benefits totaled $49.4 million and came at a cost of $13.0 million.

Data on number of individuals accessing OPI over the last 20 years:

Biennium	Number of unique consumers
2001 - 2003	4,415
2003 - 2005	2,939
2005 - 2007	3,637
2007 - 2009	3,414
2009 - 2011	2,278
2011 - 2013	2,455
2013 - 2015	5,250
2015 - 2017	4,403
2017 - 2019	4,055
2019 - 2021*	3,213

2019-2021 OPI unique consumers as of June 30, 2020

The number of unduplicated consumers decreased in 2019-2021 due to COVID impact on LTSS and rising costs associated with homecare worker and in-home care agency rates.

Quality of the services provided

Personal and home-care services are delivered via licensed in-home care agencies or registered home care workers. Quality of care standards for in-home care agencies are set forth in licensing rules found in OAR Chapter 333, Division 536; compliance with licensing standards is monitored by the Health Care Licensing and Certification unit of the Public Health Division. Homecare Workers who provide services to OPI clients are required to be registered with the Oregon Home Care Commission and receive background checks and ongoing training.

Enabling Legislation/Program Authorization

OPI is authorized under Oregon law at ORS 410.410 to 410.480.

Funding Streams

Currently, OPI is comprised of state General Funds. Services are expanded through the utilization of program income generated from client cost sharing based on a sliding fee schedule. Once the 1115 Medicaid Demonstration Waiver is approved by the Centers for Medicare and Medicaid Services (CMS) federal funds will be added to the program.

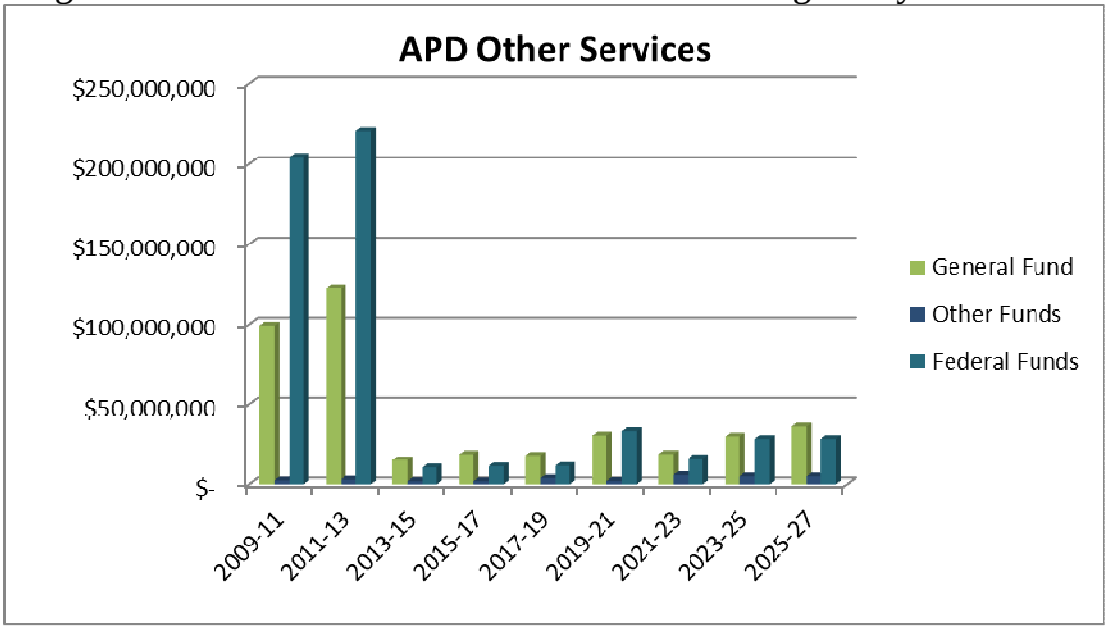
OPI General Funds serve as the required Maintenance of Effort (45 CFR Sec. 1321.49) and state match (45 CFR Sec. 1321.47) to receive federal funding under the Older Americans Act. At least $5 million per biennium in state funds is needed to maintain the Maintenance of Effort and match requirements of the OAA. The intent is that the $5 million remains outside of the Demonstration Waiver to serve individuals who cannot meet the new criteria and to maintain the MOE requirement.

Funding Justification, And Significant Changes to CSL

N/A

Oregon Department of Human Services: Other Services

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Long-Term Focus Area:
Program Contact: Nakeshia Knight-Coyle



Costs for 2009-2011 and 2011-2013 are higher due to the transfer of the funding for Medicare Part A and Medicare Part B buy-in programs from the Oregon Health Authority (OHA) to Aging and People with Disabilities (APD). These funding sources were transferred back to OHA in 2013-2015, but APD continues to administer the programs.

Program Overview

The other services category is dominated by federally mandated programs, such as the Medicare Buy-in and the Medicare Part D low-income subsidy programs, which help low-income Medicare beneficiaries meet their cost sharing requirements. This cost-effective investment ensures that Medicare remains in a first-payer position, thereby reducing or eliminating costs to the State's Medicaid health programs (Oregon Health Plan). Other services also include programs that support individuals living as independently as possible in the community. For example, home-delivered meals provide a critical support to many individuals who otherwise may not be able to remain independent in their own home.

Program Funding Request

APD Other Services (excludes OPI and OAA)				
	GF	**OF**	**FF**	**TF**
21-23 LAB	$18,865,186	$5,851,758	$16,132,051	$40,848,995
23-25 ARB	$29,712,700	$4,961,352	$28,226,119	$62,900,171
Difference	$10,847,514	-$890,406	$12,094,068	$22,051,176
% Difference	**57.5%**	**-15.2%**	**75.0%**	**54.0%**

Program Description

Federal law requires states to provide payments for Medicare beneficiaries who meet specific income guidelines. APD helps consumers access this benefit. Medicare beneficiaries include individuals aged 65 or older and people with disabilities who have been receiving Social Security Disability payments for at least two years. The passage of the Medicare Improvements for Patients and Providers Act (MIPPA) of 2008 expanded the asset allowance and eliminated the estate recovery component of Medicare Savings Programs. These changes eliminated many of the barriers to the Medicare buy-in programs for a significant number of Oregonians.

Oregon is expected to serve more than 180,000 older adults and people with disabilities in the following programs:

- **State Medicare buy-in:** By purchasing Medicare Part B (which has a federally required premium) for individuals eligible for both Medicare and Medicaid (dual-eligibles), the Medicaid program pays for medical services (such as physician, radiology, and laboratory services) only after Medicare has paid as primary payer.

- **Medicare savings programs:** Clients in these programs receive federally mandated assistance with their Medicare Part B premiums. Specified low-income Medicare beneficiaries and qualified individuals are those individuals who have income between 100 percent and 135 percent of the federal poverty level.

- **Qualified Medicare Beneficiaries:** Beneficiaries receive state assistance for the costs associated with the Medicare hospital benefit, Part A, and physician services, Part B, that would otherwise be required of them, including premiums, deductibles, and co-payments. These clients have income equal to or less than 100 percent of the federal poverty level.

Medicare Part D: Medicare Part D is the Medicare pharmacy benefit. All clients in the Medicare buy-in programs receive assistance from CMS with their Medicare Part D premiums and co-insurance amounts. Oregon pays a per-person monthly premium to Medicare for eligible clients.

Along with mandated programs, APD works to provide services that support individuals in their own home. These supports reduce reliance on nursing facilities and licensed community-based care while simultaneously improving quality of life and saving taxpayers' money. These programs provide supplemental services as needed to in-home clients and are not tracked as a separate caseload. These programs include:

- **Medicaid Adult Day Services:** Adult day services provide supervision for adults with functional or cognitive impairments who cannot be left alone for significant periods of times. Services may be provided for half or full days in stand-alone centers, hospitals, senior centers, and licensed care facilities.

- **Medicaid Home-Delivered Meals**: Home-delivered meals are provided for Medicaid eligible clients receiving in-home services who are homebound and unable to go to the congregate meal sites, such as senior centers, for meals. These programs generally provide a daily hot mid-day meal and often frozen meals for days of the week beyond the provider's delivery schedule.

- **Cash payments:** APD makes special-needs payments to reduce the need for more expensive long-term care payments and to allow a client to retain independence and mobility in a safe environment. Special needs payments may be used for such things as adapting a home's stairs into a ramp or repairing a broken furnace. Clients can also receive cash payments to help pay Medicare Part D prescription drug copays, payments for non-medical transportation, and a one-time emergency payment for an unexpected loss (such as stolen cash, a car repair, or a broken appliance). The budget

supporting these payments meets the federal requirement for APD's maintenance of effort (MOE).

Program Justification and Link to Focus Areas

Other services are targeted supports that help Oregonians remain in the least restrictive setting possible. The Department strives to provide services in a respectful, culturally, and linguistically appropriate manner. These services tie to Strategy 1 on changing how health care is delivered in Oregon by supporting efforts to increase home- and community-based care to 90 percent of the total Medicaid long-term care caseload. The Safer, Healthier Communities focus area also envisions an integrated system that these community supports will help realize.

These services allow individuals to receive services at the right time and in the right place. They maximize expenditures by using the federal portion of Medicaid funding to provide person-centered services when the person needs them. It ties directly to the desired outcome of Ensuring Financial Stability for the Long-Term Care Service Systems and Supports.

Other Services complement and enhance in-home service plans, contributing to overall cost-effectiveness and the sustainability of the plan. Other services not only have a positive impact on consumers, but also their natural support system (relatives/friends/neighbors), preventing burnout and the need for higher cost services.

Program Performance

In an independent study conducted by AARP in 2017, Oregon received an overall ranking of 4th out of 50 states in terms of choice of settings and providers, quality of life, quality of care, and effective transitions from nursing facilities back into the community. With approximately 52 percent of the Medicaid caseload served in their own homes, Oregon continues to rank in the highest percentile.

Enabling Legislation/Program Authorization

Services in this category are operated under both the Medicaid state plan options, including the "K plan" and Oregon's Home and Community Based Care 1915(c)

waiver. The state provides services that "waive" against nursing facility services, the mandated entitlement for Medicaid eligible individuals under Title XIX of the Social Security Act. Additionally, ORS 410 and ORS 443 provide statutory policy and structure to the services offered.

Funding Streams

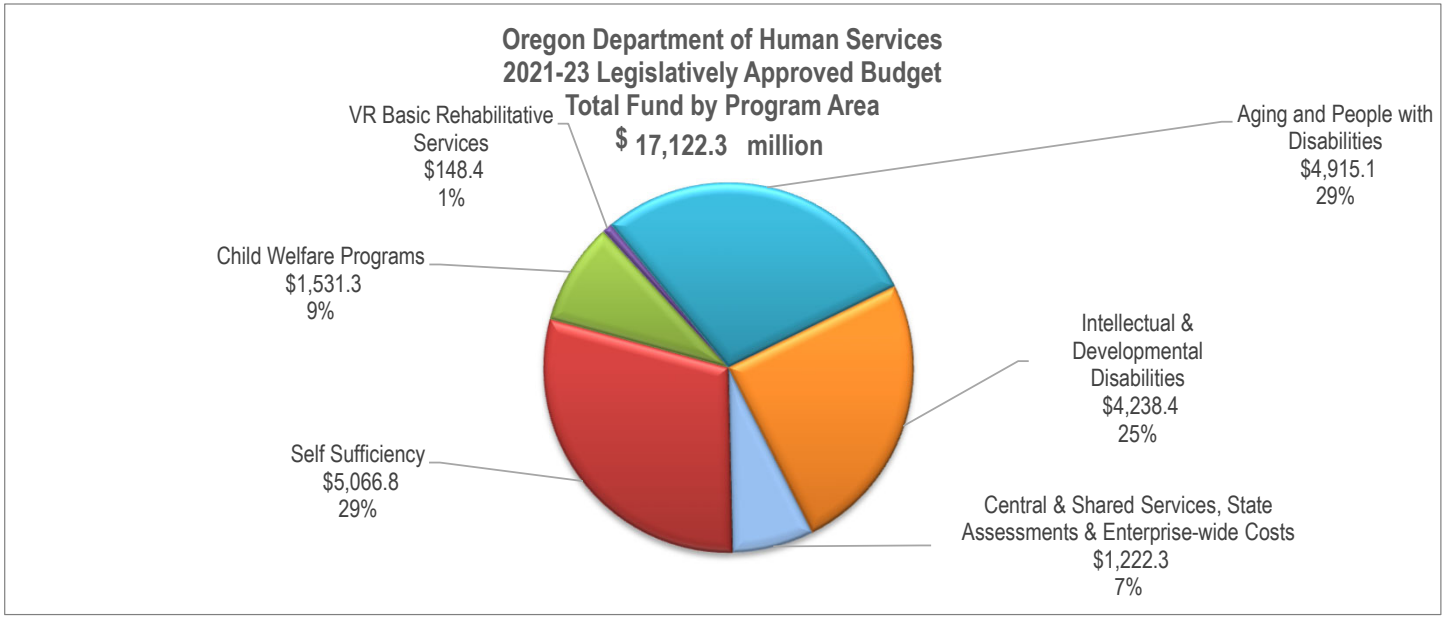
Other services are mostly funded through the Medicaid program; therefore, the federal government pays approximately 60.22% and 39.78% State General Funds There is a small amount of funding that is state general fund only, which serves to meet the state's maintenance of effort requirements. Finally, there is a small amount of funding from the estates of former recipients. When a Medicaid recipient passes away, the state is required by federal law to recover money spent for the individual's care from the recipient's estate. These funds are reinvested in services for other individuals, offsetting the need for general funds.

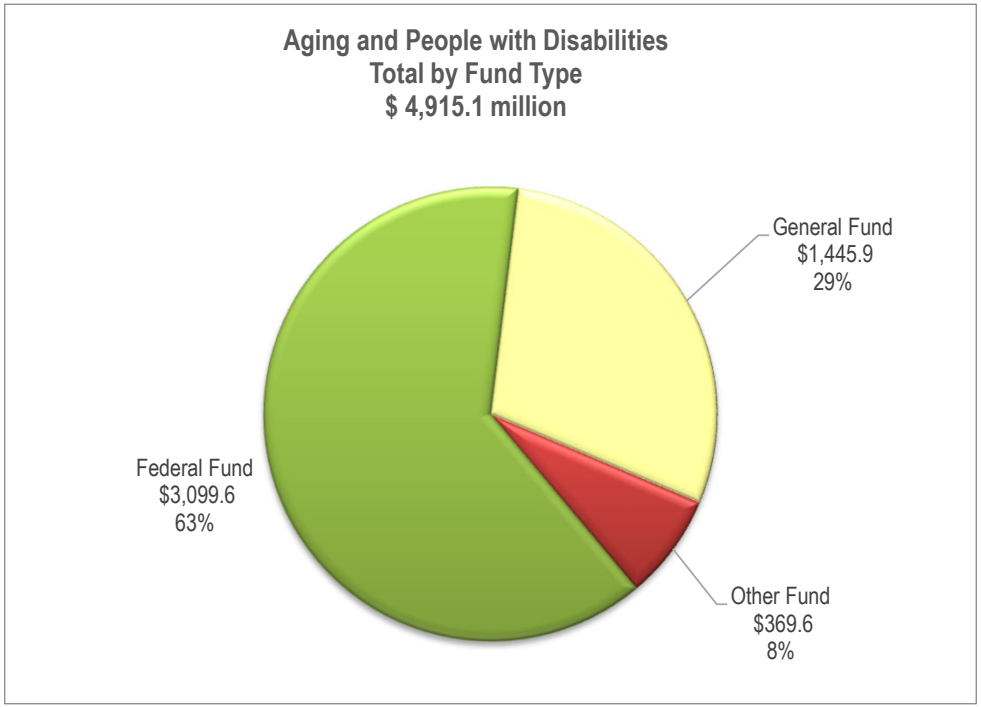
Funding Justification and Significant Changes to 23-25 CSL

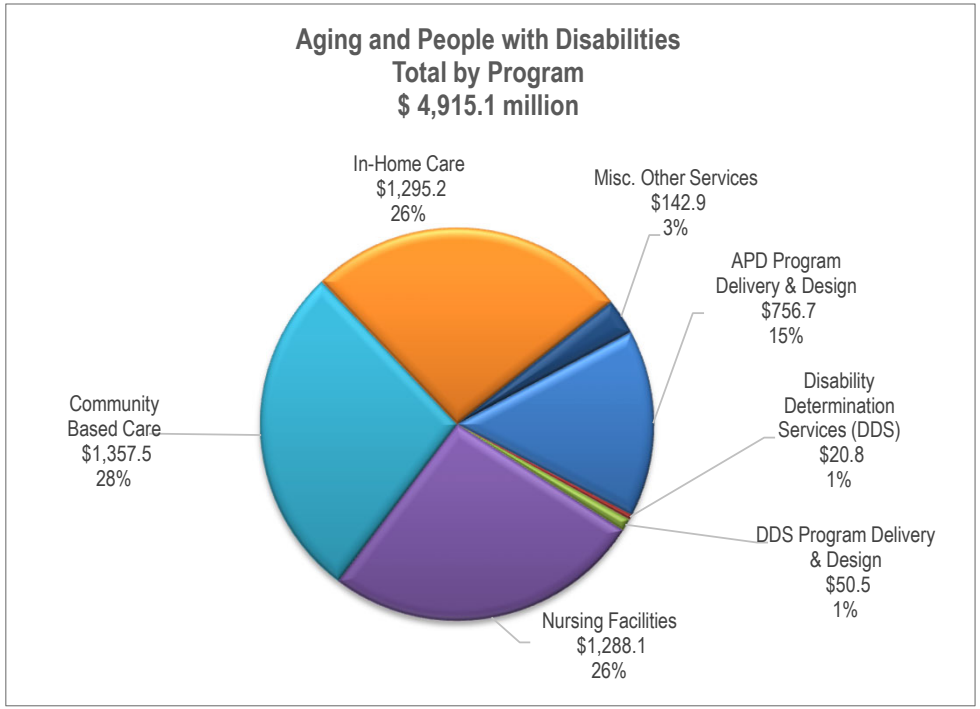
PACKAGE NO.	PACKAGE TITLE				
POP 103	Address Systemic Poverty Issues				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$7,866,259	$974,849	$13,349,805	$22,190,913	-	-

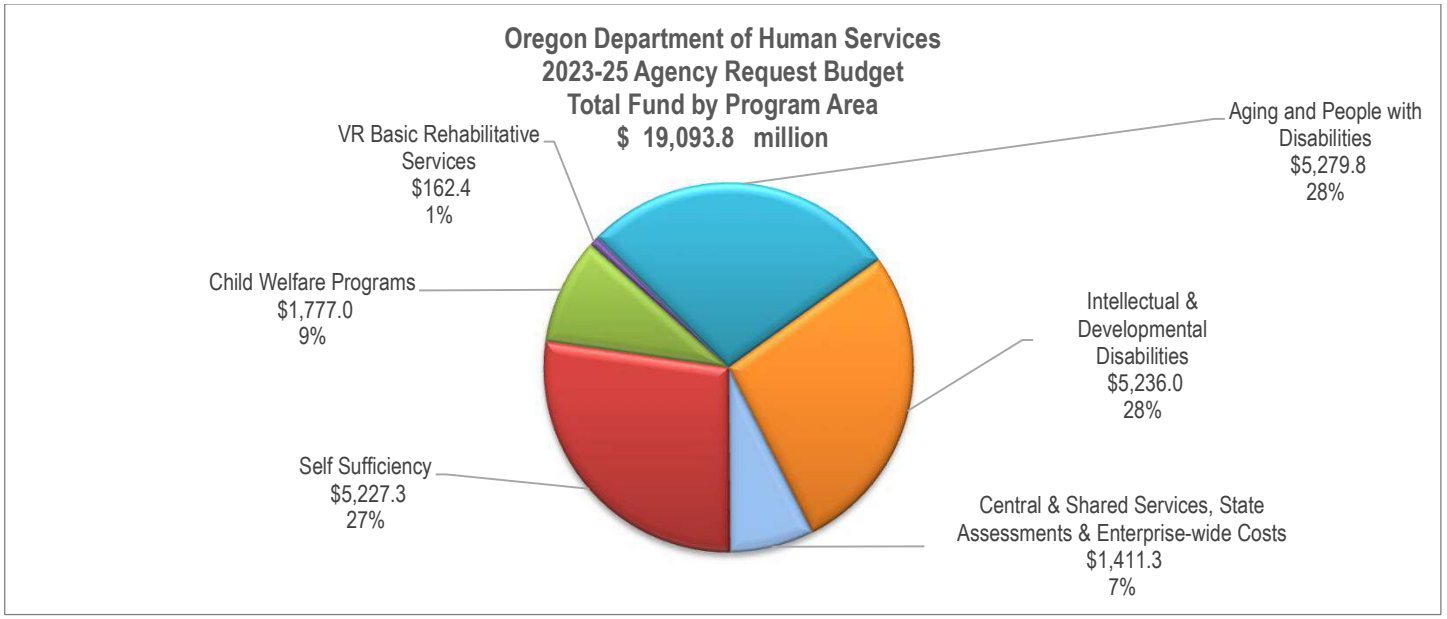
PACKAGE DESCRIPTION

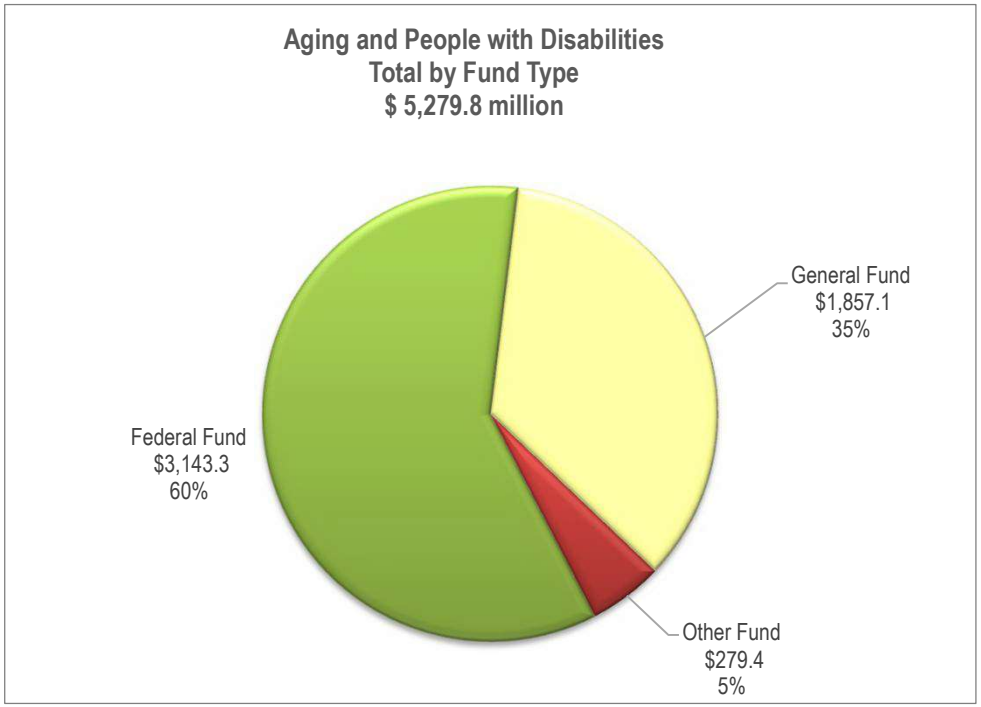
The cycle of poverty is often passed from one generation to the next. This means that children who grow up in impoverished households are more likely to live in poverty as adults. Beyond poverty, this intergenerational cycle often extends to access to resources such as education and healthcare. At ODHS, we understand that when people can access the services they need, when they need them, they are more likely to experience positive health and well-being outcomes. This policy option package will create and support policy changes that conserve the financial resources of individuals in ways that promote dignity, equity, independence and reduce intergenerational poverty. The proposed policy changes allow the department to disregard tribal, commission and council income when determining eligibility for Medicaid based on age, blindness or disability; increase the Medicaid resource limit to reflect inflation that has not been updated since 1987 and index this resource limit to future inflation; increase the General Assistance housing assistance payment by connecting it to a percentage of the SSI payment standard; and by improve parity between Medicare Savings programs and the MAGI medical program income standard.

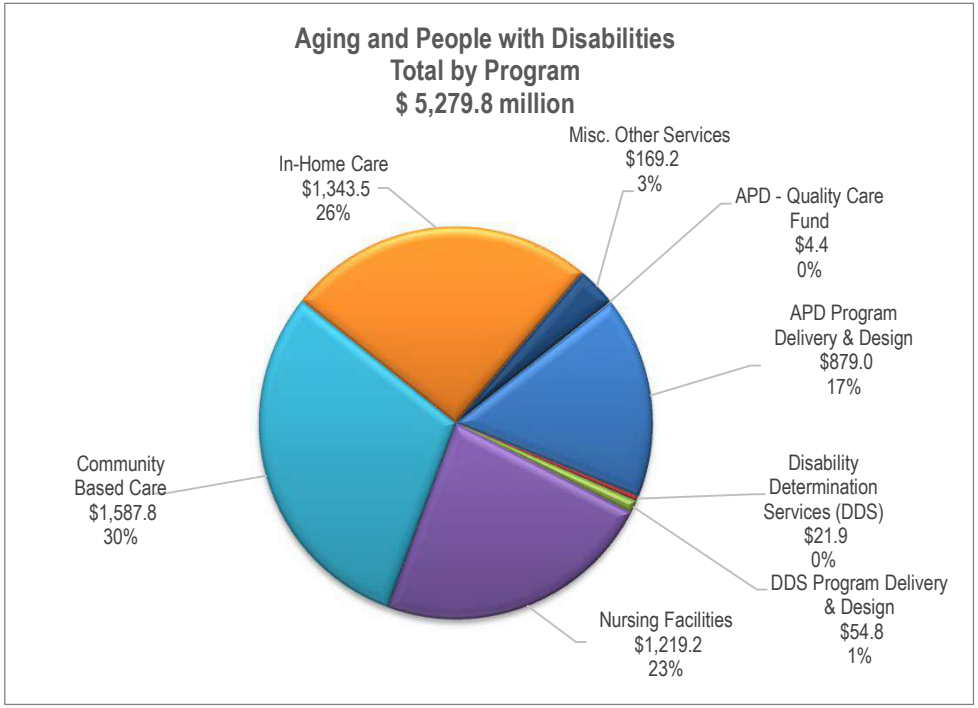

Oregon Department of Human Services
2021-23 Legislatively Approved Budget
Total Fund by Program Area
$ 17,122.3 million
VR Basic Rehabilitative Services
$148.4
1%
Aging and People with Disabilities
$4,915.1
29%
Child Welfare Programs
$1,531.3
9%
Intellectual & Developmental Disabilities
$4,238.4
25%
Self Sufficiency
$5,066.8
29%
Central & Shared Services, State Assessments & Enterprise-wide Costs
$1,222.3
7%


Aging and People with Disabilities
Total by Fund Type
$ 4,915.1 million
General Fund
$1,445.9
29%
Federal Fund
$3,099.6
63%
Other Fund
$369.6
8%


Aging and People with Disabilities
Total by Program
$ 4,915.1 million
In-Home Care
$1,295.2
26%
Misc. Other Services
$142.9
3%
APD Program Delivery & Design
$756.7
15%
Disability Determination Services (DDS)
$20.8
1%
Community Based Care
$1,357.5
28%
DDS Program Delivery & Design
$50.5
1%
Nursing Facilities
$1,288.1
26%


Oregon Department of Human Services
2023-25 Agency Request Budget
Total Fund by Program Area
$ 19,093.8 million
Aging and People with Disabilities
$5,279.8
28%
Intellectual & Developmental Disabilities
$5,236.0
28%
Central & Shared Services, State Assessments & Enterprise-wide Costs
$1,411.3
7%
Self Sufficiency
$5,227.3
27%
Child Welfare Programs
$1,777.0
9%
VR Basic Rehabilitative Services
$162.4
1%


Aging and People with Disabilities
Total by Fund Type
$ 5,279.8 million
General Fund
$1,857.1
35%
Other Fund
$279.4
5%
Federal Fund
$3,143.3
60%


Aging and People with Disabilities
Total by Program
$ 5,279.8 million
Misc. Other Services
$169.2
3%
In-Home Care
$1,343.5
26%
APD - Quality Care Fund
$4.4
0%
APD Program Delivery & Design
$879.0
17%
Disability Determination Services (DDS)
$21.9
0%
DDS Program Delivery & Design
$54.8
1%
Nursing Facilities
$1,219.2
23%
Community Based Care
$1,587.8
30%

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-060-08-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Other Selective Taxes	116,381,077	149,242,048	149,242,048	150,510,271	-	-
Business Lic and Fees	7,934,558	1,234,017	1,234,017	1,234,017	-	-
Non-business Lic. and Fees	532	-	-	-	-	-
Charges for Services	160	-	-	-	-	-
Admin and Service Charges	47,180,588	-	-	-	-	-
Care of State Wards	28,273	-	-	-	-	-
Fines and Forfeitures	3,885,265	-	-	-	-	-
Interest Income	3,204,945	-	-	-	-	-
Sales Income	5,900	-	-	-	-	-
Donations	1,246	-	-	-	-	-
Other Revenues	56,445,790	119,236,364	182,856,223	126,200,847	-	-
Tsfr From Administrative Svcs	15,449,957	24,000,000	35,361,000	-	-	-
Tsfr From Military Dept, Or	45,007,725	-	-	-	-	-
Tsfr From Nursing, Bd of	1,196,174	1,413,254	1,413,254	1,427,387	-	-
Total Other Funds	**$296,722,190**	**$295,125,683**	**$370,106,542**	**$279,372,522**	**-**	**-**
Federal Funds						
Federal Funds	2,511,260,302	2,940,547,097	3,097,832,365	3,143,291,393	-	-
Tsfr From Consumer/Bus Svcs	-	1,813,619	1,813,619	-	-	-
Tsfr To Consumer/Bus Svcs	(96,776)	-	-	-	-	-
Total Federal Funds	**$2,511,163,526**	**$2,942,360,716**	**$3,099,645,984**	**$3,143,291,393**	**-**	**-**

Oregon Department of Human Services
Office of Developmental Disabilities Services

Program mission
The Office of Developmental Disabilities Services (ODDS) provides support across the lifespan to Oregonians. ODDS, partners, and the developmental disabilities community come together to provide services, supports, and advocacy to empower Oregonians with intellectual and developmental disabilities to live full lives in their communities.

Program vision
People and families access quality supports that are simple to use and responsive to their strengths, needs, and choices, while they live and thrive as valued members of their community.

Program values
ODDS fulfills its mission and carries out its responsibilities while adhering to the following values:

- Choice, self-determination, and person-centered practices
- Children and families together
- Health, safety, and respect
- Community inclusion and community living
- Strong relationships
- Service equity and access

ODDS worked with a diverse group of partners representing all areas of the intellectual/developmental disabilities (I/DD) service delivery system to develop a strategic plan that will guide its work for the next biennium and beyond. The mission, vision, and goals included here reflect that effort and plan.

The strategic planning process resulted in a firm understanding that the person, their family, and the goals they want to achieve remain at the core of our system. As a result of this process, the agency also committed to develop a Service Equity Plan that includes reaching out to underserved populations, removing barriers to access, and providing services by staff who have appropriate cultural and linguistic capacities.

ODDS seeks to achieve the following strategic goals**:**

- Create a system that is sustainable and easy to use with effective communication and equitable access.
- Honor and support people to make their own choices about who they want to be and what they want to do in their lives.
- Support equal opportunity for living options and meaningful employment in an integrated community setting.
- Provide families the amount and type of supports they need to raise their children at home, or when necessary, in another family home within their community.
- Support health and safety while people live rich, full lives.

People served

ODDS serves people with intellectual disabilities (IQ 75 or below) or developmental disabilities such as autism, Down syndrome, and cerebral palsy. These disabilities are lifelong and have a significant impact on a person's ability to function independently. Some people with I/DD may also have significant medical or mental health needs. Most people with I/DD meet Medicaid financial eligibility requirements.

Community First Choice Option services

The I/DD service system is composed of three basic components: program design, program delivery, and program services primarily offered through the Affordable Care Act's Community First Choice Option (CFCO).

Under CFCO, eligible persons must receive a functional needs assessment that informs the planning process. They also participate in a person-centered planning process that focuses on the person's strengths, community engagement, personal goals, and outcomes. The planning process results in an annual Individual Support Plan (ISP) that documents the services the person will access in order to meet their goals. Together, the functional needs assessment and the ISP inform the amount of and/or rate for services that are available to the person.

Program services

ODDS offers a broad array of services to optimize choice and offers cost-effective supports based on functional need.

Attendant care

Attendant care provides support for people to perform activities of daily living and instrumental activities of daily living (ADL/IADL). This is the primary service

available to people with I/DD through CFCO. Attendant care services are generally categorized based on the setting where the person lives. **Services that now fall under attendant care include:**

- In-home supports for children and adults
- Children's Intensive In-Home Services (CIIS)
- 24-hour services:
  - Group home for children and adults
  - Adult and child foster care
  - Supported living (adults only)
- Day services
- Stabilization and Crisis Unit (SACU)

In-home supports for children and adults
These services are designed to provide ADL/IADL supports in the home or in the community. Children who receive these supports live with family, and adults live either with family or in their own home. In-home services are provided to the majority of individuals served by ODDS. Without these services, many individuals would require much more expensive out-of-home services such as group or foster homes.

Persons who live in their own home or with their family can access a range of services needed to successfully support these individuals. These services may include professional behavior services, assistive technology, or environmental modifications.

For both children and adults, in-home services are provided by Personal Support Workers (PSWs) or by Direct Support Professionals (DSPs) who are affiliated with Medicaid-certified provider agencies. PSWs are hired directly by the person receiving services or by their employer representative. DSPs are employees of private organizations who contract with the state to provide services.

Children's Intensive In-Home Services (CIIS)
These services consist of three model waiver programs that provide intensive supports to children living in the family home:

- The first program is for children with significant behavioral issues who, without supports, would require specialized out-of-home services.
- The second program is for children with medical conditions who, without supports, would require nursing facility services.
- The third program is for children with intense medical needs. These children

are dependent on life support technology such as ventilators that, without these in-home services, would require a hospital setting.

With the implementation of the Community First Choice Option, children who do not have the intensive needs described above can access in-home support services through their local Community Developmental Disabilities Programs (CDDP) upon completion of a needs assessment and an Individualized Support Plan (ISP).

24-hour services

24-hour services are for children and adults who can no longer remain at home or adults who choose to receive services in a 24-hour setting such as a group home, foster home, or supported living service. These services are provided in settings outside the family home with exception of supported living.

Group home and supported living services are provided by private organizations that contract with the state. Child foster care providers are private providers licensed through either Child Welfare or their local Community Developmental Disabilities Programs. Adult foster care providers are represented by the Service Employees International Union. In all of these settings, a diverse workforce, and the ability to provide linguistically and culturally appropriate services are critical to removing barriers to service access.

People usually receive 24-hour services when they are unable to stay at home on their own or with their family. This may be due to their own needs or the caregiver's ability to continue providing services.

Children with disabilities enter 24-hour comprehensive services as a voluntary placement when the intensive needs of the child cannot be met in the family home. Involuntary placements can also be made through Child Welfare action. In these cases, Child Welfare maintains responsibility for the court relationship, but I/DD provides the specific disability-related care.

Day services

Day services are available for people who are over 18 and out of school. Many adults receiving 24-hour services also receive day services. These services are available for up to 25 hours a week for out-of-home activities, including employment-related activities. Adults receiving in-home supports are also able to receive day services as part of their attendant care. Day support activities that fall under the category of attendant care are provided through CFCO and provide supports promoting integration, independence, and participation in the person's community.

Stabilization and Crisis Unit (SACU)
SACU is a 24-hour service provided under the CFCO. SACU provides a safety net for Oregon's vulnerable individuals with I/DD who have the most intense medical and behavioral challenges. SACU provides services when no other community-based option is available for a person. This includes persons with I/DD coming out of the Oregon State Hospital or corrections systems, as well as those from crisis situations where counties and private providers cannot meet the needs of the person to ensure health and safety. SACU focuses on supporting people in community-based settings and enabling them to return to less intensive service levels as quickly as possible.

SACU provides 24-hour residential, and day supports to people with I/DD from across the state who have significant medical or behavioral needs. The services are provided in licensed five-bed group homes.

In 1987, Oregon began to move people with developmental disabilities who were living at the state institution (Fairview Training Center and Eastern Oregon Training Center) to private providers. SACU was established to serve the small number of people with complex medical or behavioral needs who could not yet be supported by private providers.

Today, the profile of those SACU serves has changed as private agencies increase their skills to meet challenging needs and agree to provide needed services. While the population SACU initially served included a relatively high number of people with autism diagnoses, today's intensive support needs are more related to co-occurring mental health diagnosis and/or personality disorders.

Transportation
Non-medical transportation is also provided to help persons with I/DD in in-home and 24-hour services when public transportation is either not available or not feasible, to help them participate in employment or other services.

Ancillary services
In addition, people with I/DD served through ODDS are able to access vital ancillary services including:

- Professional behavioral services
- Assistive devices
- Assistive technology
- Environmental modifications

- Long-term care community nursing
- Specialized nursing

Employment First policy
This policy states that employment in fully integrated work settings will be the first and priority option explored in service planning for all working-age adults and students preparing to transition to the world of work. The policy is based on the general philosophy that persons with I/DD have the ability, with the right supports, to be productive and contributing members of their communities through work. It also recognizes intrinsic and financial benefits of paid work to persons with I/DD and their families.

In alignment with this policy, ODDS stopped funding services in a Sheltered Workshop setting in September 2020. Additionally, ODDS has continued to support and implement SB 494 passed in 2019 to phase out subminimum wage by 2023. Further, ODDS continues to work with stakeholders to ensure that people with I/DD have access to employment supports and services, and we continue to track and report progress made in ensuring people with I/DD (including those who had been in Sheltered Work or who are transition age) are accessing Competitive Integrated Employment.

Employment services
Employment services have been strengthened and improved as part of the Employment First initiative. ODDS has restructured these services to encourage integrated, competitively paid employment for people with I/DD. Employment services are not offered through the CFCO; they remain available through the Medicaid waivers.

Employment services include:
- Employment path identification
- Job discovery
- Job development
- Job coaching
- Small group supported employment

Family support services
These services are available to any family with a child with I/DD who is under age 18 and is not eligible for Medicaid. The program offers minimal support services with the most common request being for respite care.

All children in this program have case managers through their county CDDP and state-funded services are allocated based on need. Most participating children are also in school programs and the case manager coordinates between school and home. Family support services can be more cost effective by allowing the family to support the child with a small amount of funding, without accessing Medicaid.

Family-to-family networks
These family-driven networks provide training, information, referral, and general support with families providing support among one another. Just having another family to connect with or problem solve with is often what it takes to be supported in the family home.

Program design and delivery
ODDS programs are supported by central office staff and services. Central operations provide strategic planning, program funding, policy development, service equity initiatives, general oversight, and technical support to community services as well as support and leadership for various advisory councils.

The structure for service delivery and design includes a central program administration office within ODHS and contracted services with Community Developmental Disabilities Programs (CDDPs) and brokerages.

Contracted CDDPs, often operated by county governments, are responsible for eligibility determination and redeterminations, protective service investigations, and foster care licensing and reviews. After eligibility is established through the CDDP, adults who live in in-home settings can choose to be served by the CDDP or by a brokerage.

Brokerages provide case management services, including assessment and service planning for adults in-home.

Case Management
These services are provided through certified entities called brokerages or through CDDPs. CDDPs support children and adults while brokerages support adults in in-home settings.

A functional needs assessment is administered to determine the person's level of need and the amount or rate of services that will be available. The services coordinator (SC) or personal agent (PA) then works with the person, family, and

others important in the person's life to complete an Individual Support Plan (ISP) and a Career Development Plan (CDP). They then work with the person to identify necessary supports required to meet the needs identified through the assessment and the goals identified in the ISP/CDP. SCs and PAs provide referrals to providers and other resources necessary to meet the person's needs. SCs and PAs continuously monitor the individual's ISP implementation, their satisfaction with services and supports, and the plan and services in place to ensure the person's health and safety.

Quality Improvement

In 2017, ODDS created a Quality Improvement unit. This unit is responsible for coordinating quality assurance and quality improvement for I/DD services, including:

- Regular quality reviews of brokerages and CDDPs.
- Oversight of licensing activities.
- Coordinating with abuse investigator specialists (AISs) and the Office of Training, Investigations and Safety (OTIS).
- Establishing quality metrics for I/DD programs; and
  Collecting and analyzing data to measure overall system performance and to inform policy decisions.

Brokerages and Community Developmental Disabilities Programs (CDDP) field reviews

The Quality Improvement unit conducts field reviews on a two-year cycle in each CDDP and brokerage. The reviews are focused on ensuring Centers for Medicare and Medicaid Services (CMS) Assurances are met through performance measures approved by CMS. The reviews assist I/DD in identifying program-specific strengths and areas requiring improvement and inform the training and technical assistance we provide to individual CDDPs and brokerages. The reviews also facilitate the identification of common trends across the state that may suggest a need for system changes, improvements, best practices implementation, and training.

I/DD Licensing unit

The Intellectual/Developmental Disabilities (I/DD) Licensing unit oversees a statewide program responsible for licensing and the quality of care in programs serving persons with I/DD, including the licensing of adult foster homes and 24-hour residential facilities. It oversees and is responsible for the Medicaid-agency certification of agencies and the endorsement of 24-hour residential programs,

supported living programs, community living supports, direct nursing supports, professional behavior services, employment services, and host homes. It also certifies support service brokerages and child foster homes throughout the state. Through licensing and certification, the I/DD licensing team ensures that providers of services comply with requirements for federal and state reimbursement. The I/DD Licensing unit also conducts complaint investigations and determines necessary corrective action up to and including civil penalties or revocation of a license or certificate.

History and future trends

Oregon is recognized nationally as an innovative leader in developing community-based services for persons with I/DD. Oregon is one of the few states that have no state- or privately-operated, institutional-level services specifically for people with developmental disabilities. In fact, the majority of persons with developmental disabilities in Oregon are served in their own home or their family's home.

The work of ODDS and its partners and stakeholders aims to achieve a self-directed, family-involved, individually focused, culturally appropriate, and sustainable approach to service. According to the 2020-21 National Core Indicators' National Adult Family Survey Report and National Child Family Survey Report, people with I/DD and their families report high levels of satisfaction with services when they have increased control, the ability to integrate into their home communities more fully, and the benefits of home and community life.

Ongoing input from our partners both nationally and in Oregon indicates that the number of people with I/DD-related needs is growing. There also is an increase in the number of people who need services that have co-occurring mental health needs or are coming from the corrections system. Efforts to ensure the long-term sustainability of ODDS programs and services will be essential in meeting these growing needs. To reach underserved and underrepresented communities, moreover, ODDS must continue its efforts to build a diverse workforce capable of delivering linguistically and culturally agile services.

Before COVID-19, the Direct Support Professional (DSP) workforce was in crisis with a national staffing shortage. COVID-19 made the situation worse. ODDS took numerous measures to recruit and retain workers throughout the pandemic, including rate increases for care workers and provider agencies, retention incentives, incentives for new care workers, and a recruitment campaign involving the launch

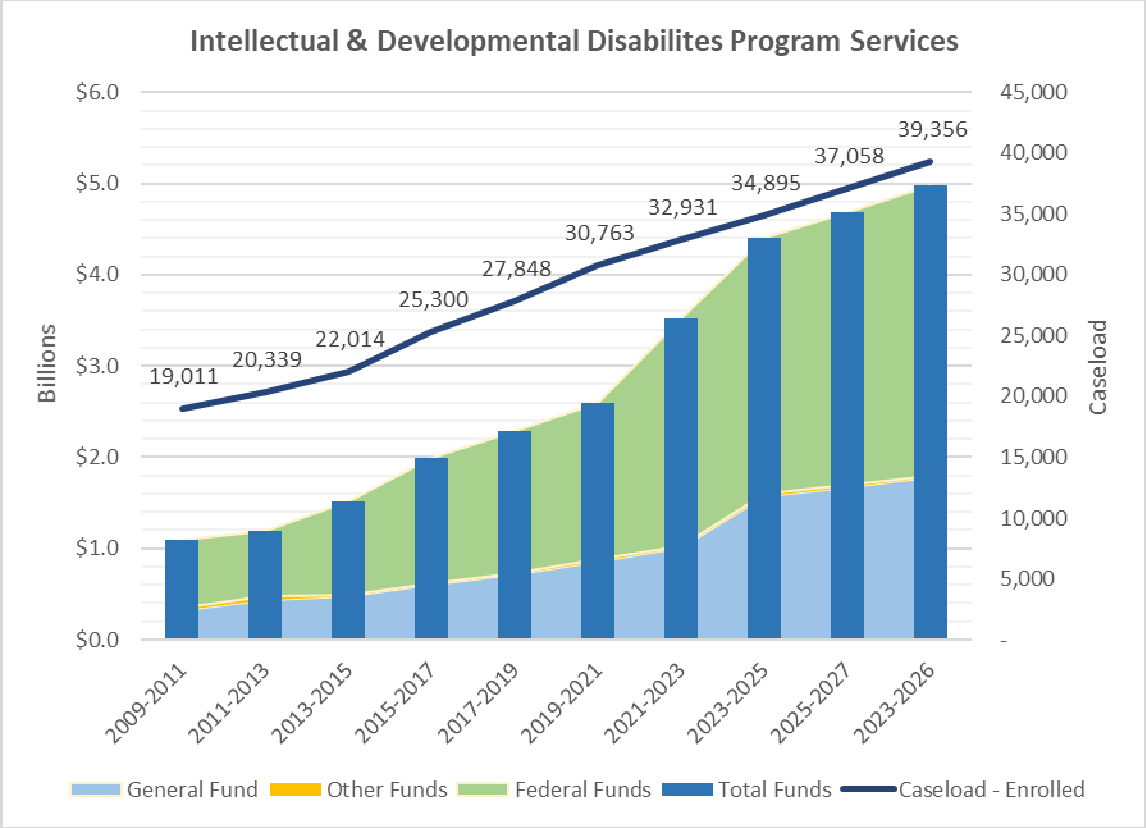
of the Impact Oregon website. ODDS expects these workforce shortages to continue after the pandemic and will continue its efforts to increase this vital workforce.

In 2021, the Oregon Legislature funded HB 3352, formerly called Cover All People, and renamed Healthier Oregon, to ensure that more Oregonians can access comprehensive Oregon Health Plan benefits, including long-term services and supports. This program will allow I/DD eligible individuals, regardless of immigration status, to access needed home- and community-based services.

Oregon Department of Human Services: Program Services

Primary Long-Term Focus Area: Safer and Healthier Communities
Secondary Long-Term Focus Area:
Program Contact: Lilia Teninty

Program Services – Caseload and Funding



Note: Effective 2013-2015, K Plan increased enrollment as well as lifted spending caps.

Program Overview

Oregon home and community-based services for people with intellectual and developmental disabilities are provided under several Medicaid authorities including Community First Choice Option (CFCO), also known as K Plan; and five 1915(c) waiver programs. ODDS also operate a small Family Support program funded by state general funds providing limited flexible supports for individuals and families.

Currently, ODDS home and community-based services support more than 32,000 adults and children with intellectual and developmental disabilities to live their lives in their communities. More than 18,000 of these individuals receive services in their own of family homes.

Program Funding Request

I/DD Program Services	*GF*	*OF*	*FF*	*TF*
21-23 LAB	$ 1,007,629,569	$ 20,510,894	$ 2,499,518,297	$ 3,527,658,760
23-25 ARB	$ 1,575,589,175	$ 18,364,936	$ 2,817,437,599	$ 4,411,391,710
Difference	$ 567,959,606	$ (2,145,958)	$ 317,919,302	$ 883,732,950
Percent Change	56.4%	-10.5%	12.7%	25.1%

Program Description

Oregon home and community-based services for people with intellectual and developmental disabilities are provided under several Medicaid authorities including Community First Choice Option (CFCO), also known as K Plan; and five 1915(c) waiver programs. Supports provided under K Plan are services such as attendant services that support individuals in accomplishing activities of daily living and instrumental activities of daily living (ADL/IADL), relief care, behavioral support services, transportation, environmental modifications, and assistive technology and devices.

The Adult and Children Waivers provide services such as case management, employment services, and other ancillary services (direct nursing services, specialized medical supplies, environmental safety and vehicle modifications, and family training). Services through the Children's Waiver are provided to children in all settings, including family homes, group homes, host homes, and foster care through Community Developmental Disabilities Programs (CDDPs). Services through the Adult Waiver are provided to adults, age 18 and older. Adults receiving service through CDDPs may reside in all settings including their own homes, family homes, supportive living, group homes, and foster care. Adults served through Support Services Brokerages receive services in their own or family home. Individuals receiving services through either waiver can access all K Plan services. Under CFCO, an individual can elect to live in any setting of their choice, but it may impact whether they receive case management support through CDDP or Brokerage.

Of the more than 32,000 individuals enrolled in services (May 2022 Variance Report), 3,235 live in 24-hour group homes, 3,229 in foster homes, 763 in supported living. 18,042 individuals, who receive I/DD services in addition to case management, reside in their own or family homes. 7,469 of the adults served at home receive case management support through Support Services Brokerages; 14,849 adults living in all settings receive case management through the CDDP system. In-home support services average approximately $4,065 per month per individual while out-of-home services average approximately $10,202 per month.

For both children and adults, the direct care services are provided through Personal Support Workers (PSWs), provider agencies, behavior consultants, and respite providers. Personal Support Workers were provided collective bargaining rights in 2010 through HB 3618.

Employment services

ODDS currently offer supported employment services, such as job development, job coaching, supported small-group employment, discovery, and Employment Path. Discovery and Employment Path help individuals explore and learn skills to help them gain competitive integrated employment. These services are currently provided though all five waivers.

People who are employed in the community have the highest level of integration and have stronger social networks. The more people with developmental disabilities can achieve paid employment, the less dependence there is on public resources and the greater the state's flexibility in designing future services that respond to the need of this population.

Oregon has been very successful in developing community-based care to move away from institutions as a model of care. Individuals with developmental disabilities fully engaging with their communities brings positive outcomes while being fiscally beneficial. Based on federal requirements, community employment services will be the only employment services to receive federal funding as of September 1, 2020.

Model Waivers

ODDS administer three Model Waivers through the Children's Intensive In-Home Services (CIIS) unit: Medically Involved Children's Waiver, Medically Fragile Model Waiver, and Behavioral Model Waiver for children. Currently, these waivers serve about 376 kids. Children receiving service through Model Waivers are also able to access K Plan services. These services are substantially the same as individuals served through the Comprehensive and Support Services Waivers, including attendant services, relief care, behavioral support services, environmental modifications, and assistive technology and devices.

Family Support Program

Limited supports for children are offered by ODDS through the Family Support Program and are available to any family of a child under age 18 who is not receiving K plan or waiver services. The program is funded by general fund and offers flexible supports with the most common request being for attendant care and respite services. On average, during 2019-21 biennium, the program served 12 families per month at an average monthly cost of about $223. All children in these programs have case managers through their county Community Developmental Disabilities Program (CDDP).

Program Justification and ODHS Equity North Star

ODDS service and supports for people with intellectual and developmental disabilities focus on individuals with intellectual/developmental disabilities (I/DD) to ensure they are healthy and have the best possible quality of life in their communities among families and friends and are working or attending school to achieve their greatest potential. The service equity focus of I/DD service delivery system reflects the North Star pillar: "staff and communities will know services and supports are working when all who live in Oregon, regardless of identity or place can achieve well-being". This is being achieved through investments into the direct workforce, development of robust and diverse network of providers, including culturally specific providers, improved language access, building cultural agility and ensuring that individuals' goals and preferences are respected and supported in the context of their communities, families and culture. ODDS continuously works to ensure that services are provided in a linguistically and culturally competent manner.

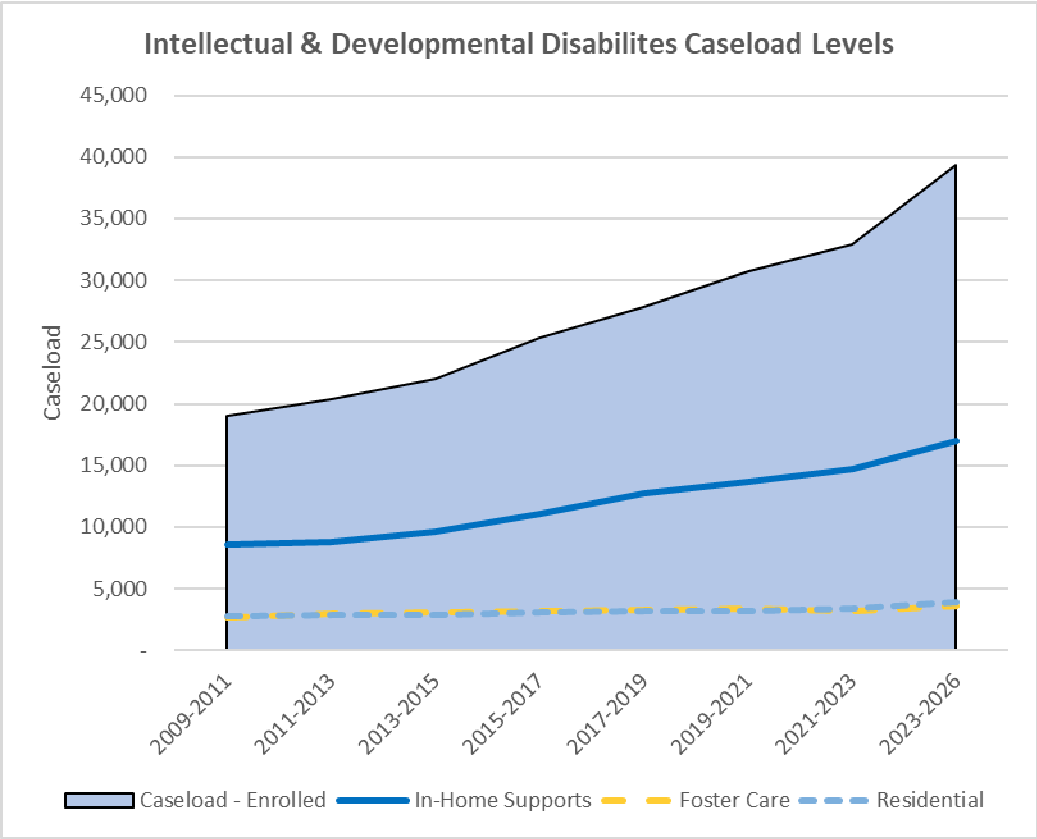
I/DD services and supports do not only connect individuals and families to needed home and community-based services, but also link them to resources critical to the social determinants of health, such as housing, food, employment, through other governmental and community resources. When compared to the entire Medicaid population, adults in the Medicaid-funded home and community-based services with I/DD are uniquely more reliant on the service system to make lifestyle changes and to adequately access health care. Funding I/DD programs to support the necessary lifestyle choices that reliably and consistently follow through with medical recommendations will result in significant cost savings to the state's medical programs. Families and case managers are critical to help with health care coordination in the communication and implementation of treatment.

I/DD services are critical to the financial stability of a family and to the person with intellectual/developmental disabilities. With supports, families are not forced to decide between working and supporting their family member. It is also important that working-age adults with developmental disabilities are supported to work. Oregon has implemented an Employment First policy. This prioritizes individuals in actively engaging in developing work skills and defining work interests, pursuing job development or being employed in the community, and receiving support to maintain employment. In addition to being happier and healthier, individuals with I/DD who are employed broaden their network of supports.

Important equity milestones will be achieved in July 2023 by opening up I/DD services to all eligible individuals regardless of their legal status in the United States. Based on SB 558, also known as Cover All Kids, starting January 1, 2018, the Oregon Health Plan (OHP) became available to more children and teens younger than 19, regardless of immigration status. This coverage did not include long term services and supports. In 2021, the Oregon legislature funded HB 3352, formerly called Cover All People and renamed "Healthier Oregon," to ensure more Oregon adults can access comprehensive Oregon Health Plan benefits, including long term services and supports. The program will be phased in by enrolling people aged 19-25 and 55 and older into program starting July 1, 2022 and opening up I/DD home and community based services to all ages in July of 2023. This effort directly reflects ODHS Equity North Start pillar: "We are dedicated to make services, supports and well-being accessible to all".

Program Performance

Supporting individuals to live at home or live on their own is the most desirable outcome for people with I/DD and is most cost effective for the state. The number of people supported at home has been the largest area of growth in the I/DD system.



Spring 2022 Forecast

Choice, self-determination and person-centered practices are one of the core values of I/DD service delivery system. One of the ODDS QTR metrics derived from National Core Indicators Survey of adults, looks at a % of NCI respondents indicating they were able to choose services as part of their service plan:

Enabling Legislation/Program Authorization

Oregon Revised Statutes 427.005, 427.007, and 430.610 through 430.695 enable the provision of family support for children with developmental disabilities.

Oregon Revised Statutes 427.410 enables the provision of Support Services for adults through Support Services Brokerages.

At the federal level, in addition to all applicable Medicaid statutes and regulations, services must comply with the Title II of the Americans with Disabilities Act (ADA) of 1990 and Section 504 of the Rehabilitation Act of 1973. Compliance with these federal laws is subject to the U.S. Supreme Court's Olmstead Decision of 1999 and the U.S. Department of Justice's interpretation of that decision as it relates to the ADA and Rehabilitation Act. The Olmstead ruling applies to ODDS services.

Funding Streams

The services are designed and approved using Medicaid 1915c Home and Community-Based Waivers, and primarily, the Community First Choice Option in the Medicaid State Plan. The program 1915c Waiver funding match rate is current Federal Medical Assistance Percentage (FMAP), 60.22% Federal funds and 39.78% State General Funds and for 1915K, FMAP + 6%; 66.22% Federal funds and 32.78% State General Funds.

Funding Justification and Significant Changes to CSL

ARB requests the following Policy Option Packages:

PACKAGE NO.	PACKAGE TITLE				
POP 105	Healthier Oregon Program (HOP)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$ 31,887,302	$ -	$ -	$ 31,887,302	-	-
PACKAGE DESCRIPTION Everyone in Oregon deserves access to the services they need, when they need them, to achieve well-being. More importantly, access to services needs to remain uninterrupted as people move through each stage of life and regardless of identity or place. Oregon Department of Human Services is requesting funding to provide long-term services and supports to eligible children and adults with disabilities regardless of their immigration status as directed by HB 3352, formerly called Cover All People and renamed "Healthier Oregon". This POP includes continuation of funding for population enrolled during 2022 through initial implementation of the program (ages 19 to 26 and 55+) and expansion of the services to the remainder of the age groups, including children, starting July 1, 2023. It also asks for ongoing funding for staff to help individuals access these services and supports, including case managers, and related staff who are critical to serving this population.					

PACKAGE NO.	PACKAGE TITLE
POP 128	Child Welfare and IDD Parents

GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$ 199,276	$ -	$ 375,724	$ 575,000	-	-

PACKAGE DESCRIPTION

Our communities are stronger when parents are able to raise their children as independently as possible in their own or family homes. Parents with intellectual and developmental disabilities (I/DD) have long faced overwhelming challenges and have endured discrimination, while being failed by various systems that are intended to support them to have full lives with their children and families in their communities. ODDS proposes a new set of innovative services intended to support parents with I/DD more effectively and keep families together. These new services, "supported parenting" would provide person-centered support for parents with I/DD to raise their children independently in their communities. ODDS requests to maintain permanent 2.0 FTEs that are currently temporary American Rescue Plan Act-funded positions for cross-systems coordination with Child Welfare (CW) and other systems to ensure optimal services to parents with I/DD and children involved in the CW system.

PACKAGE NO.	PACKAGE TITLE
POP 131	Children's Foster Care Rates

GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$ 2,972,158	$ -	$ 5,345,278	$ 8,317,436	-	-

PACKAGE DESCRIPTION

All people, especially those who are most vulnerable, such as children with intellectual and developmental disabilities (I/DD), should have equitable access to the services offered by the Office of Developmental Disabilities Services (ODDS). ODDS is working to improve equity and access across all services and settings. Historically, children placed in ODDS-certified children's foster homes have not been able to access home-modification services that would allow for a foster home to be made more accessible, better meet the needs of the child and ensure compliance with federal home- and community-based settings requirements. This policy option package (POP) addresses this inequity and will implement a fair and equitable reimbursement strategy for children's foster care (CFC) providers based on a valid and reliable assessment tool. The new reimbursement strategy is aimed at increasing the provider network's capacity to meet the needs of children who cannot be served safely in their family home.

PACKAGE NO.	PACKAGE TITLE
POP 132	Targeted Rate Increases

GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$ 162,144,945	$ -	$ 294,067,672	$ 456,212,617	-	-

PACKAGE DESCRIPTION

All people with intellectual and developmental disabilities (I/DD) deserve to live full lives as valued members in their communities and have access to the quality services and supports that empower them to do so. I/DD service providers have been severely impacted by workforce shortages, which have been exacerbated by the COVID-19 pandemic and other economic and inflationary pressures. Providers have been struggling to meet the needs of individuals they serve, because they are unable to offer competitive living wages to sufficiently recruit and retain workers during a time of extraordinary wage hikes and inflation. This policy option package (POP) implements targeted updates to the service rates assumptions with the most recent published data sources, such as the latest Bureau of Labor (BLS) data and Internal Revenue Service (IRS) mileage rate. Ensuring provider rates remain updated to the most current cost information will ensure that Oregon's provider network remains robust and capable of attracting and retaining direct workforce, pay living wages to direct care workers and providing other supports to the workers that ultimately result in better quality and continuity of services for people with I/DD.

Oregon Department of Human Services: Delivery and Design

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Long-Term Focus Area: N/A
Program Contact: Anna Lansky

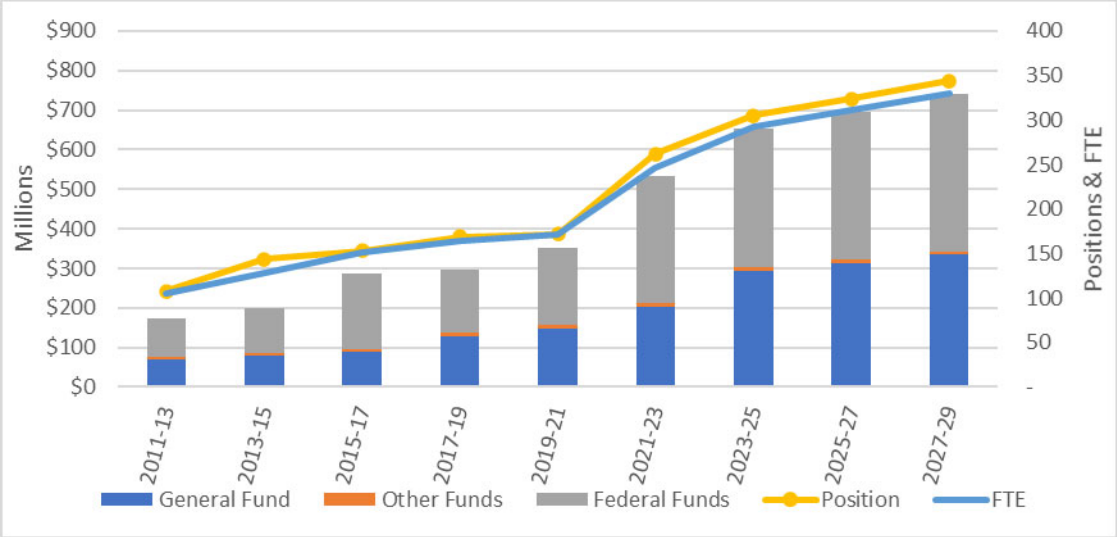


Figure I: Funding of I/DD Delivery and Design (not reflective of funding or FTE for the Stabilization and Crisis Unit (SACU)).

Program Overview The Office of Developmental Disabilities Services (ODDS) manages a lifespan program that provides support and funding to children and adults with intellectual and developmental disabilities (I/DD) to live fully engaged lives in their communities. Programs are provided in the community in the person's own home, family home, foster care or group home, or in supported living programs. Design and Delivery provides administrative and operational support to these programs.

Program Funding Request

Intellectual & Developmental Disabilities Delivery and Design	General Fund	Other Funds	Federal Funds	Total Funds	Positions	FTE
21-23 LAB	$203,944,317	$7,408,933	$322,493,414	$533,846,664	262	245.81
23-25 ARB	$294,857,338	$7,261,732	$350,823,896	$652,942,966	307	294.88
Difference	$90,913,021	-$147,201	$28,330,482	$119,096,302	45	49.07
Percent Change	44.58%	-1.99%	8.78%	22.31%	17.18%	19.96%

Program Description

More than 32,000 Oregonians with I/DD are receiving case management and other supports through the ODDS program. Since implementation of Community First Choice Option (CFCO), also known as K Plan, in July 2013, the Oregon I/DD service delivery system has undergone significant changes. CFCO has moved the program along the equity trajectory by ensuring that all eligible Oregonians can access home and community based servcies and supports based on their needs.

The structure for service delivery and design includes a central program administration office, Children Intensive In-Home Services (CIIS) unit, and contracted services with Community Developmental Disabilities Programs (CDDPs) and Support Service Brokerages (Brokerages). Additionally, the ODDS central office provides strategic planning focused on service equity, program funding, policy development and training, provider licensure and certification, general oversight, and technical support to community services. Contracted Community Developmental Disability Programs (CDDPs) are responsible for eligibility determination, program enrollment, case management, abuse investigation, and foster care licensing and certification. Adults receiving in-home services can also choose to get case management through contracted Brokerages.

With CFCO, people can choose the setting in which they live, which increases the importance of supporting and strengthening the ability of families and communities to be more inclusive and provide natural supports to those with I/DD.

ODDS delegates the responsibility for administration of the Community Developmental Disabilities Programs (CDDPs) to local county government first, in accordance with state statutes (ORS 407). ODHS will implement state contracts with a private agency for counties who do not wish to pursue this program. Local oversight responsibilities include determining eligibility for developmental disabilities services. CDDPs also are responsible for case management services, evaluation and coordination of services, planning and resource development, developing and monitoring Individual Support Plans (ISPs), documentation of service delivery to comply with state and federal requirements. CDDPs also perform abuse investigations of adults,quality assurance services, and perform licensing and cetification tasks for foster homes, including site reviews. ODDS provides funding for the equivalent of nearly 1,097 full-time employees of CDDPs through contracts. CDDPs provide case management for all individuals, except

adults choosing to be served by a Support Service Brokerage. Adults living in their own or family home have a choice of case management providers, between the local CDDP and a Brokerage. Children are all served by the CDDPs, except those case managed by ODDS staff through the Children's Intensive In-Home Services or Children's Residential Services programs.

There are 14 Support Service Brokerages statewide. Brokerages vary in size and support from 251 to 720 people. People with I/DD are enrolled in Brokerages from the county when they select Brokerage case management services. Once in a Brokerage, the Brokerage Personal Agent (PA) completes a needs assessment, develops the Individual Support Plan, and assists the person in determining services needed, amount of service and possible workers or provider agencies. PAs help the individual to design plans that meet their needs as determined by the need's assessment. ODDS provide funding for 319 full-time employees to the Brokerages. In order to not duplicate services, once a person is in a Brokerage, they do not also get case management from the CDDP.

The majority of individuals receiving services are eligible for Medicaid. The state uses Medicaid Home and Community-Based Services (HCBS) that allow for shared funding from the federal government. Through the CFCO State Plan Option, the states receive FMAP plus an additional 6 percent in federal match.

ODDS staff provide policy and program design, training, technical support, provider licensure and certification, quality assurance, and field support of CDDPs, Brokerages, and direct service providers. There are more than 3,900 private service provider agencies, including 1,418 foster care providers and more than 12,000 Personal Support Workers. Regulatory oversight for licensed settings is provided by the ODDS Licensing Unit.

Central office staff provides programmatic and budget analysis support to Department of Administrative Services Labor Management, collective bargaining, for the Adult Foster Homes, Home Care Workers, and Personal Support Workers.
I
The Delivery system also includes the Children's Intensive In-Home Services (CIIS) and the Children's Residential Services comprised of state staff under ODDS' umbrella. These units operate and provide case management services to the three Model Waivers for children and provide case management support to children in residential services.

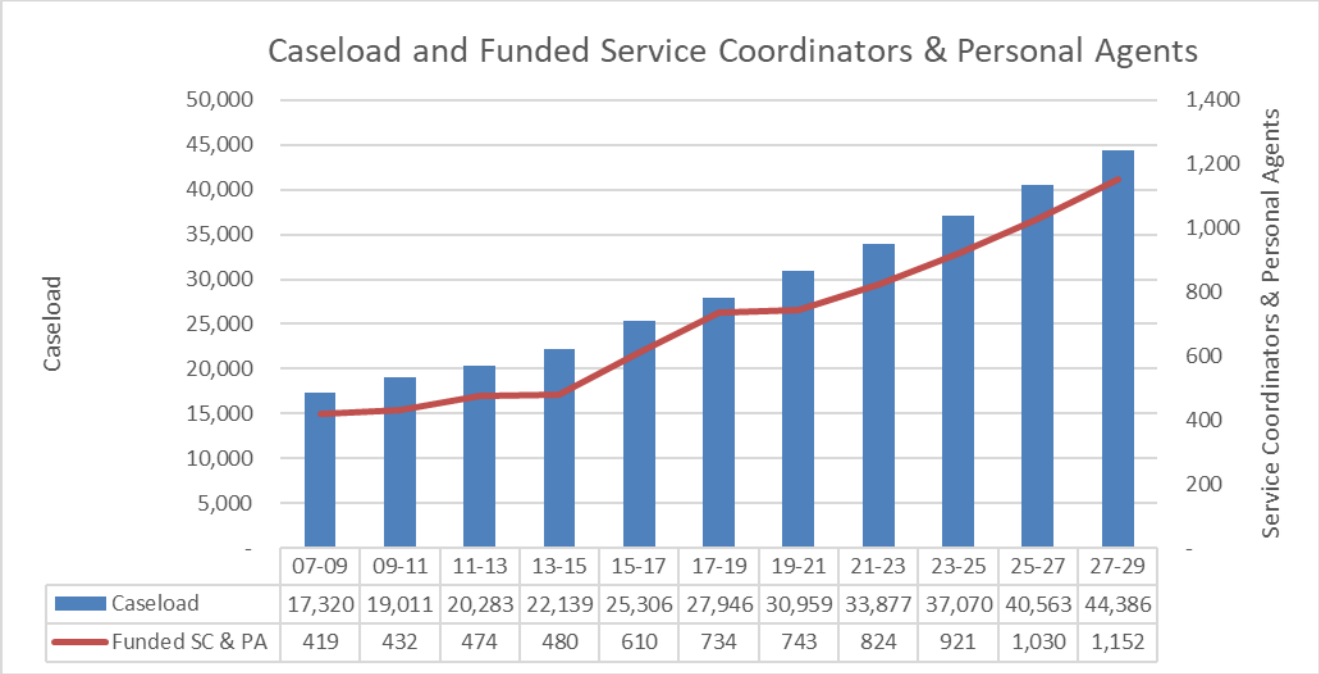
Program Justification and Link to Equity North Star

ODDS vision is: People and families access quality supports that are simple to use and responsive to their strengths, needs and choices, while they live and thrive as valued members of their community. ODDS is working to fully align with ODHS Equity north star in every aspect of its operations.

The program delivery and design system, administered and monitored by central staff and implemented through the CDDPs and Brokerages, is designed to ensure supports are provided so the individual is supported in context of their community, family and culture, so they are healthy and safe, and fully engaged in their community. The goal is to help individuals have the best possible quality of life and outcomes at any stage of their life. Person-centered strategies are used to maximize the person's outcomes and use of natural supports. In collaboration with local CME partners, CDDP and Brokerages, ODDS works to ensure that system, services, supports, and well-being are accessible to all. These goals are accomplished through partnerships with other ODHS programs, state agencies, and local communities and organizations at the state and local level. This Delivery and Design strategy reflects the North Star commitment "to partnering with communities to develop and deliver policies and programs that are equitable and improve community conditions". In this I/DD service delivery system is guided by its Strategic Plan and service equity priorities.

Program Performance

Adequate personnel resources are necessary to ensure delivery of programs and provision of services within Developmental Disabilities in a linguistically and culturally competent manner. The chart below provides a comparison of the caseload growth to the equivalent contracted CDDP and Brokerage personnel: CDDP Service Coordinators and the Brokerage Personal Agents.



	07-09	09-11	11-13	13-15	15-17	17-19	19-21	21-23	23-25	25-27	27-29
Caseload	17,320	19,011	20,283	22,139	25,306	27,946	30,959	33,877	37,070	40,563	44,386
Funded SC & PA	419	432	474	480	610	734	743	824	921	1,030	1,152

Figure II: Growth of I/DD Caseload and CDDP Service Coordinators and Brokerage Personal Agents.

Enabling Legislation/Program Authorization

The services are designed and approved using Medicaid 1915c Home and Community-Based Waivers and the 1915k CFCO Medicaid State Plan. Individuals can also be court committed to the state care and custody under ORS 427. Case Management can also be authorized under the Medicaid State Plan. Federal authorization for all services is at 42 C.F.R. 441 and Section 1915(c) of the Social Security Act. Authorization to provide the services in Oregon is in ORS 410.070, 409.050.

At the federal level, in addition to all applicable Medicaid statutes and regulations, services must comply with the Title II of the Americans with Disabilities Act (ADA) of 1990 and Section 504 of the Rehabilitation Act of 1973. Compliance with these federal laws are subject to the U.S. Supreme Court's Olmstead Decision of 1999 and the U.S. Department of Justice's interpretation of that decision as it relates to the ADA and Rehabilitation Act. The Olmstead Decision requires states to provide services and supports in non-segregated settings.

Funding Streams

The services are designed and approved using the Community First Choice Option in the Medicaid State Plan and Home and Community-Based Waivers, which provide a federal match to the program's General Fund. The program funding match rate for waivered services is the current FMAP rate which is 60% Federal Funds and 40% state General Fund and for CFCO services is the current FMAP rate plus an additional 6%; 66% Federal Funds and 34% state General Fund.

The administration of CDDP, Brokerage, and Central Office staff are funded at the Medicaid administrative match of 50/50. Authorization to provide the services in Oregon is in ORS 410.070, 409.050. Case Management services delivered by CDDPs and Brokerages are billed FFS and are federally matched at the federal FMAP waivered rate.

Funding Justification and Significant Changes to CSL

There is one investment in the Agency Request Budget, in addition to the regular essential packages that are part of the normal budget build process.

PACKAGE NO.	PACKAGE TITLE				
POP 105	Healthier Oregon Program – Long-Term Services and Supports				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$2,426,108	$0	$0	$2,426,108	0	0.00
PACKAGE DESCRIPTION					
Everyone in Oregon deserves access to the services they need, when they need them, to achieve well-being. More importantly, access to services needs to remain uninterrupted as people move through each stage of life and regardless of identity or place. Oregon Department of Human Services is requesting funding to provide long-term services and supports to eligible children and adults with disabilities regardless of their immigration status as directed by HB 3352, formerly called Cover All People and renamed "Healthier Oregon". This POP includes continuation of funding for population enrolled during 2022 through initial implementation of the program (ages 19 to 26 and 55+) and expansion of the services to the remainder of the age groups, including children, starting July 1, 2023. It also asks for ongoing funding for staff to help individuals access these services and supports, including case managers, and related staff who are critical to serving this population.					

PACKAGE NO.	PACKAGE TITLE

POP 113	Maintaining Critical Staffing				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$267,957	$0	$267,957	$535,914	1	1.00

PACKAGE DESCRIPTION

ODHS is leading an agency-wide shift toward more collaborative, community- and person-centered human services. Encompassing change across our programs and at every level of our nearly 10,000-employee agency, the shift requires strategic and dedicated leadership, improved communication and transparency with partners, and a diverse, well-trained human services workforce. At the same time, the COVID-19 pandemic and other crises have contributed to historic demand for human services. To meet these compounding needs, ODHS has added key positions to agency offices. Without these positions, ODHS cannot effectively and efficiently carry out its three strategic priorities. To ensure that Oregonians will continue see needed and global improvements in our human services systems, ODHS is requesting position authority and funding for 56 non-budgeted positions. These positions will continue mission-critical work including leading our enterprise-wide Building Well-being Together initiative; leading programs for people with intellectual and developmental disabilities; providing timely and transparent communication to elected officials, the media, partners, and the public; as well as employee recruitment, professional development, retention, and management.

PACKAGE NO.	PACKAGE TITLE				
POP 116	Grant Program for Community-Based Organizations				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$172,795	$0	$0	$ 172,795	1	0.75

PACKAGE DESCRIPTION

An effective, resilient human services ecosystem is comprised of both government and community-based partners working collaboratively to provide the supports and systems necessary for everyone in Oregon to thrive. During the pandemic and recent weather events, communities clamored for a more comprehensive response that was driven by communities rather than by centralized government structures, making clear a pressing need to empower communities to shape their own, custom-tailored solutions. Oregon Department of Human Services is requesting $26 million and 17 staff positions to establish a grants program to community-based organizations (CBOs). These resources will be used for grant awards and will support data, technical and program supports to CBOs. The investment will allow ODHS to strategically grow the human services infrastructure through local partnerships, supporting the emergence of new and more effective service delivery models and increasing equity within human services statewide.

PACKAGE NO.	PACKAGE TITLE

POP 125	ARPA Positions				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$1,501,711	$0	$1,501,711	$3,003,422	14	14.00

PACKAGE DESCRIPTION

Services provided by the Oregon Department of Human Services (ODHS) need to be reliable so those who depend upon them are not thrown into crisis by service disruptions. Funding from the American Rescue Plan Act (ARPA) allowed the Office of Developmental Disabilities Services (ODDS) to secure 57 temporary positions to meet the program's needs in the critical areas of program management and improvement. The expiration of all of these positions would result in the discontinuation of critical efforts related to ODDS' strategic work across programs, agencies and community organizations that ensure high-quality services and supports for individuals with intellectual and developmental disabilities (I/DD). ODDS proposes that14 of the 57 ARPA-funded limited duration (LD) positions be made permanent. These 14 full-time employees (FTE) will continue to provide ongoing support to the ODDS Policy, Training, Case Management Support Services, Operations and Portfolio Management units. This will allow ODDS to maintain the level of care and quality for services that people have come to depend upon over the past two years and also free managers of administrative work empowering them to better engage with community partners and move the needle on our strategic efforts instead of just trying to keep up.

PACKAGE NO.	PACKAGE TITLE				
POP 126	Model Employer				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$2,034,856	$0	$2,034,856	$4,069,712	29	24.09

PACKAGE DESCRIPTION

All people deserve equal access to employment opportunities that allow them to thrive as valued members of their communities. The state of Oregon is committed to fair employment practices and non-discrimination. Less than 1% of the state's workforce is comprised of people with intellectual and developmental disabilities (I/DD), because this population faces common, disability-based barriers when trying to access state employment. The Model Employer program is designed to hire people with I/DD into state service. This policy option package (POP) requests dedicated full-time equivalent (FTE) for positions for the Model Employer program. Providing this opportunity for people with I/DD to have access to state employment by removing common barriers faced by people with I/DD in the state hiring process and incentivizing hiring managers to utilize this process will increase access to state employment for people with I/DD.

PACKAGE NO.	PACKAGE TITLE
POP 127	ODDS-OTIS Joint Quality Improvement

GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$2,480,898	$0	$1,325,380	$3,806,278	20	16.79

PACKAGE DESCRIPTION

The Office of Developmental Disabilities Services' (ODDS) top priority is to ensure quality services for adults and children with intellectual and developmental disabilities (I/DD) that empower these individuals to live rich, full lives in their communities while providing for their health and safety. Timely and quality licensing practices and abuse investigations are critical in supporting the well-being, health and safety of the vulnerable Oregonians we serve. The quality of foster home compliance has progressively decreased over the years as investigators have struggled with timeliness and quality screening of investigations conducted at the local level. As a result, individuals receiving services are at greater risk for abuse and neglect. Licensing is a large component to reducing risk and assuring providers are doing their important work in a high-quality way. By providing additional resources, ODDS and the Office of Training, Investigations and Safety (OTIS) will be able to provide meaningful and sustainable support to local offices and the communities they serve. We will be able to better focus on the important work of advancing the Oregon Department of Human Service's (ODHS) Building Well-being Together Initiative.

PACKAGE NO.	PACKAGE TITLE				
POP 128	Supported Parenting Waiver Service (IDD Parents and CW)				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$188,721	$0	$188,721	$377,442	2	1.50

PACKAGE DESCRIPTION

Our communities are stronger when parents are able to raise their children as independently as possible in their own or family homes. Parents with intellectual and developmental disabilities (I/DD) have long faced overwhelming challenges and have endured discrimination, while being failed by various systems that are intended to support them to have full lives with their children and families in their communities. ODDS proposes a new set of innovative services intended to support parents with I/DD more effectively and keep families together. These new services, "supported parenting" would provide person-centered support for parents with I/DD to raise their children independently in their communities. ODDS requests to maintain permanent 2.0 FTEs that are currently temporary American Rescue Plan Act-funded positions for cross-systems coordination with Child Welfare (CW) and other systems to ensure optimal services to parents with I/DD and children involved in the CW system.

PACKAGE NO.	PACKAGE TITLE				
POP 129	ODDS Systems - Case Management and Provider Systems				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$889,698	$0	$8,007,245	$8,896,943	29	29.00

PACKAGE DESCRIPTION

In the 2020s, the ability to quickly, transparently and effectively collect, share, analyze and communicate data is an essential component of providing equitable and accessible human services. The Office of Developmental Disabilities Services (ODDS) lacks a centralized data system to manage the case management services and supports it provides to roughly 32,000 people across Oregon. ODDS seeks position authority and funding to secure a case management system, a universal provider portal, and a robust agency provider system to improve provider reporting capabilities and to replace ODDS' antiquated ASPEN system that will be shut down in one year. These system upgrades will improve ODDS' service delivery on many levels, some of which include communications, quality assurance, licensing, data collection and equitable access to case management services and supports.

PACKAGE NO.	PACKAGE TITLE				
POP 130	Case Management Entity (CME) Service Equity and Capacity				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$39,739,037	$0	$39,794,953	$79,533,990	-	-

PACKAGE DESCRIPTION

All people with intellectual and developmental disabilities (I/DD) should have equitable access to the services and supports provided by the Office of Developmental Disabilities Services (ODDS) and its statewide partners. Under the umbrella of the Oregon Department of Human Services' (ODHS) Equity North Star vision and in its strategic plan, ODDS and its partners have committed to ensuring service equity throughout the service-delivery system. Case management entities (CMEs) serve a cornerstone function in the I/DD service-delivery system. CMEs serve as the front door to the system, perform eligibility assessments, provide adult protective services (APS) and foster care licensing functions, and connect people to services and resources through case management services. Because of the way CMEs are currently funded, they don't have sufficient resources to fully implement ODHS' service equity vision and to take local actions to ensure equitable access and services to individuals with I/DD and their families. To ensure adequate resources for these critical functions and initiatives, ODDS requests CMEs be made whole by bringing their funding up to 100% of the full-time equivalent (FTE) allocation and funding identified in the workload model prior to Oregon Legislative Fiscal Office (LFO) consideration of 23–25 biennial funding or allocated

FTE. ODDS also requests additional resources for the development and implementation of service equity strategies at the local level. This funding will ensure CMEs are resourced to meet the needs of the diverse communities they serve in an equitable and culturally agile way.

PACKAGE NO.	PACKAGE TITLE				
POP 131	Children's Foster Care Payments and Home Mods				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$114,145	$0	$114,145	$228,290	1	1.00

PACKAGE DESCRIPTION

All people, especially those who are most vulnerable, such as children with intellectual and developmental disabilities (I/DD), should have equitable access to the services offered by the Office of Developmental Disabilities Services (ODDS). ODDS is working to improve equity and access across all services and settings. Historically, children placed in ODDS-certified children's foster homes have not been able to access home-modification services that would allow for a foster home to be made more accessible, better meet the needs of the child and ensure compliance with federal home- and community-based settings requirements. This policy option package (POP) addresses this inequity and will implement a fair and equitable reimbursement strategy for children's foster care (CFC) providers based on a valid and reliable assessment tool. The new reimbursement strategy is aimed at increasing the provider network's capacity to meet the needs of children who cannot be served safely in their family home.

PACKAGE NO.	PACKAGE TITLE				
POP 133	Children's Residential/CIIS Workload Model				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$794,225	$0	$794,225	$1,588,450	10	7.50

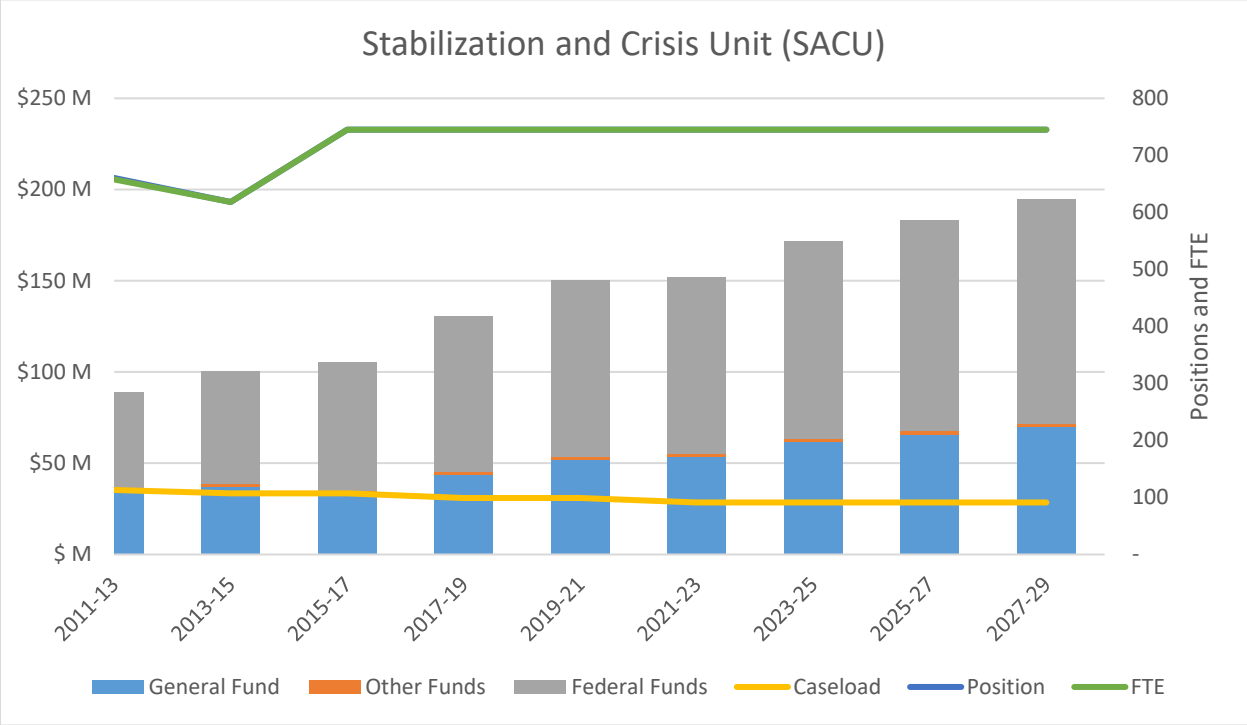
PACKAGE DESCRIPTION

All people who depend upon services provided by the Oregon Department of Human Services deserve equitable access to quality support services, especially children with the highest level of care needs. Over the last several years, the Office of Developmental Disabilities Services (ODDS) children's case management programs – Children's Intensive In-home Services (CIIS) and Children's Residential (CR) – have delivered services to children with the highest level of care needs in Oregon's intellectual and developmental disabilities (I/DD) system. Case managers in these units faced the added stressors of the pandemic and supporting critical program improvements while operating at a lower full-time equivalent (FTE) percentage than

county-based contracted I/DD case management programs. This request is to fund CIIS and CR at a rate in alignment with the FTE% at county I/DD case management programs which equates to 10 additional positions as determined by the most recent workload model. Staffing that is more in alignment with the workload model will help ensure the high level of services necessary for children with most complex needs, compliance with Medicaid and state standards, and equitable person-centered services.

Oregon Department of Human Services: Stabilization and Crisis Unit (SACU)

Primary Long-Term Focus Area: Safer, Healthier Communities
Secondary Long-Term Focus Area: N/A
Program Contact: Sierra Rawson



**A 7 percent overall budget reduction occurred in 2011.*

Program Overview

The Stabilization and Crisis Unit (SACU) is a safety net resource for Oregonians with intellectual and developmental disabilities (I/DD) who have no other option for a residential bed due to significant I/DD and mental health challenges. SACU serves the most vulnerable, intensive, behaviorally and medically challenged individuals with I/DD. This includes people with developmental disabilities coming out of crisis situations, including hospitals, correctional systems, and private providers who cannot meet the needs of the individual to ensure their health and safety. Almost all individuals served by SACU present with dual diagnosis of mental health and I/DD issues. This program is an integral part of the overall

intellectual/developmental disabilities continuum of services. SACU focuses on supporting people in community-based settings and preparing them to return to less intensive service levels once stabilized.

Program Funding Request

	Stabilization and Crisis Unit					
	GF	**OF**	**FF**	**TF**	**Positions**	**FTE**
21-23 LAB	55,721,095	1,534,036	116,238,414	173,493,545	745	744.92
23-25 ARB	61,741,550	1,629,436	108,288,853	171,659,839	745	744.92
Difference	6,020,455	95,400	-7,949,561	-1,833,706	0	0
Percent Change	11%	6%	-7%	-1%	0	0

Program Description

SACU provides 24-hour residential services to individuals with intellectual/developmental disabilities who have significant behavioral, mental health/medical care needs. The services are provided in licensed 4 and 5-bed group homes located across six counties from the Portland metropolitan area south to Eugene.

As individuals enter SACU, staff work with each person to modify behaviors and increase individual skills. Many of the individuals supported have frequent and intense behaviors and staff may provide physical interventions as trained through the Oregon Intervention System (OIS). All individuals have focused behavioral protocols that require frequent staff training and a high level of data collection and review. The program utilizes a person-centered approach and complies with all state and federal regulations.

There is an active referral list of adults and children waiting to enter SACU. Before entry into SACU, individuals are first referred by the local Community Developmental Disabilities Program to community-based providers across the state. When a person is denied or terminated from a current provider program, they move to a SACU placement. Nearly all individuals served have co-morbid (co-occurring) disorders of mental illness and intellectual/developmental disability and mental illness. The acuity level of challenging behaviors requires intensive 24-hour supervision and behavioral support services to ensure safety to themselves and the community. Challenging behaviors range from aggression toward people or property, including self-injurious behaviors. SACU also supports up to 10

individuals with medically fragile conditions that require 24-hour nursing care and support services.

More than 50 percent of these individuals have a history of criminal charges and/or current or pending legal sanctions. The convictions range from such crimes as assault, criminal mischief, theft, harassment, public indecency, possession, rape, sex abuse, and murder. A number have legal sanctions as a result such as parole, probation, Psychiatric Security Review Board (PRSB), or are registered sex offenders. Some are civilly committed as they have been found to be a danger to themselves or others. The majority of individuals referred to SACU have an identified need for a secured facility due to their risk of flight and/or offensive behavior. In addition, a large percentage of individuals require a secure placement where housing modifications are implemented to avoid injury to self and others.

SACU serves 70 adults who need acute stabilization and crisis services. These individuals have been identified due to extreme behavioral and psychiatric needs that have not been successfully provided in the community.

SACU has 15 beds available for children (up to 18 years old) who are in acute crisis situations and require stabilization. These children come from a variety of settings including the family home, foster care, 24-hour group home care, and institutional care.

SACU serves up to 10 individuals in specialized medical facilities due to their fragile medical conditions and I/DD needs.

In all the homes, SACU staff provide services that ensure health and safety needs are met and that the individual has the ability to participate in the community. As the goal of the program is to have the individual live in the most independent, least restrictive community setting, it is important to ensure the individual can be supported in the same type of setting.

All of the individuals in SACU qualify for Medicaid, currently use the Oregon Health Plan and are served by Coordinated Care Organizations, to meet their medical needs. Since there are high medical, behavioral and mental health needs, the program treatment plans are critical for individual stabilization and coordination of health services.

From the initial homes established in 1987 through today, the profile of the individuals served by SACU has dramatically changed. As private agencies increased their skills to meet challenging needs and were able to provide services, the individual who needs safety net services has changed. In 2000, SACU had six homes serving 30 people with high medical needs. Today these medical homes serve only up to 10 individuals. These individuals now receive care in community and nursing facilities.

In the past, the numbers of people with intensive behaviors were people who had a diagnosis of autism. Today, intensive behaviors are related to co-occurring mental health diagnosis and/or criminal convictions.

With the 2015-2017 budget, SACU completely transformed the organizational structure to increase efficiencies and lower injuries and overtime. The agency formed seven island structures within the existing three regions and created a staffing float pool, which allows for more flexibility in direct care staffing. SACU also created the Crisis Outreach Assessment Team (COAT), a rapid-response team that responds to an individual's crisis as it is occurring. COAT also completes mental health assessments allowing SACU to better support the individuals served. In addition, SACU contracted with a national consultant, Benchmark, to review SACU as a whole and make recommendations for improved services as well as individual and staff safety.

Program Justification and Link to Focus Areas

SACU links to the Safer, Healthier Communities focus area. SACU helps individuals with intellectual/developmental disabilities be healthy and have the best possible quality of life by helping them live in their communities and to work or attend school to achieve their potential. Stabilization and training are provided for adults and children who have entered the program in crisis. SACU helps individuals transition back into community settings with support from their families, caregivers, or private providers.

Individuals enrolled have no other alternatives for a residential placement. They are in crisis due to a family breakdown; discharge from a hospital, psychiatric or correctional setting, or discharge from a private provider who can no longer support them due to the intensity of their behavioral or medical needs. SACU provides a critical alternative to assist the person to return to a healthy and

productive life through a high-quality residential program, including community-based housing, appropriate nutritional and medical care, and interventions.

In addition, the safety net provided by SACU allows for targeted, community-based support to individuals in crisis or with otherwise unmet intensive needs, individuals receive the services they need for the time they need them, and are then assisted to transition back to families or private providers.

Program Performance

Staff ratios are quite high; at minimum all require a 1:1 staffing level. Many require a greater staffing level while in the community. The goal is to stabilize behaviors and health issues in a residential setting so that transition to a private provider is successful. Average length of stay for SACU adults overall (in both medical and behavioral beds) is 6 years.

SACU is focusing on placement of these long-term individuals in private care. These types of individuals, who can now be served by private providers due to improvements in community service skills and capacity, are no longer prioritized for this program.

SACU continues to build strong data tracking, including clinical data (individuals' incidents, medication errors, safety records, restraints, and a number of other elements), staffing data (ratios, overtime), and programmatic data (admissions, transfers, exits, length of stay). SACU uses this data to make programmatic changes.

Enabling Legislation/Program Authorization

Virtually all individuals served by SACU are funded through Medicaid Home and Community-Based Waivers and the 1915(k) Medicaid State Plan. The individuals served by SACU would be entitled to nursing home or intermediate care facilities for persons with intellectual and developmental disabilities (ICF/IDD) institutional services. Oregon no longer uses institutional care, but the service would be required if we could not meet the need in the community.

Other federal laws and rulings that impact services delivered through SACU are the Americans with Disabilities Act and the Supreme Court Ruling on Olmstead, which generally require individuals to be served in least restrictive, non-

institutional settings. Oregon commitment statutes in ORS 427 also require the State to provide care and custody to a person who presents harm to themselves or others, and SACU's status as the safety net is integral to accomplishing this.

Additional statutes that guide the delivery and program are found in ORS 412, 430, 409 and 410. The Oregon Administrative Rules (OARs) that govern the operations of SACU require that individuals be supported in the community and in pursuit of educational and vocational activities.

At the Federal level, in addition to all applicable Medicaid statutes and regulations, services must comply with the Title II of the Americans with Disabilities Act (ADA) of 1990 and Section 504 of the Rehabilitation Act of 1973. Compliance with these Federal laws is subject to the U.S. Supreme Court's Olmstead Decision of 1999 and the U.S. Department of Justice's interpretation of that decision as it relates to the ADA and Rehabilitation Act. The Olmstead ruling is relevant to SACU in that it requires all services allowed in the waiver, including SACU, are ones that create inclusion in the community equitably across the state.

Funding Streams

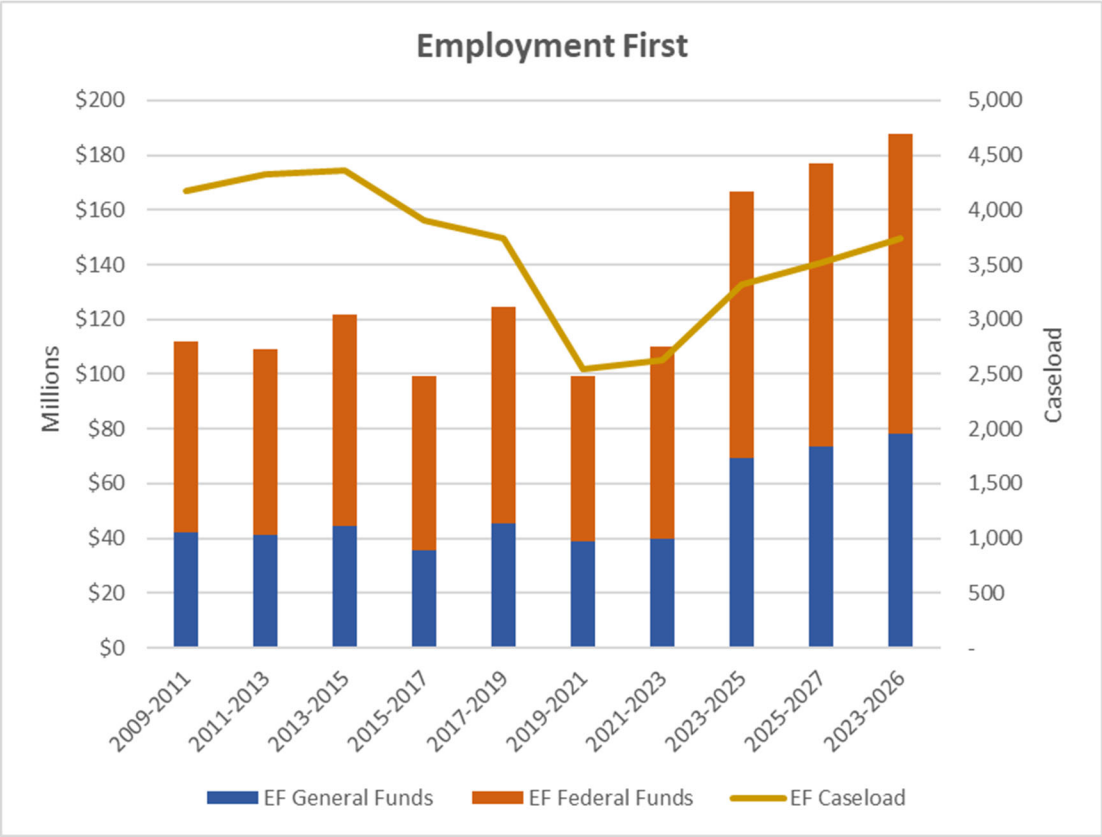
The services are designed and approved using a Medicaid 1915(c) Home and Community-Based Waiver and a 1915(k) Medicaid State Plan which provides a Federal match to the program's General Funds. The program funding match rate is 63 percent Federal funds and 37 percent state general funds for waiver services and 69 percent Federal funds and 31 percent state general funds for 1915(k) State Plan services. Based on their income level, some individuals also pay an other funds contribution toward their room and board costs.

Funding Justification and Significant Changes to CSL

There are no investments in the Agency Request Budget, only the regular essential packages that are part of the normal budget build process.

Oregon Department of Human Services: Employment First Intellectual and Developmental Disabilities Services

Primary Outcome Area:	Thriving Oregon Economy
Secondary Outcome Area:	Safer Healthier Communities
Program Contact:	Acacia McGuire Anderson, 503-884-4910



Program Overview

Employment First is a nationwide initiative which helps individuals with I/DD reach and maintain competitive integrated employment by ensuring that employment is the first and priority option in each state. Research has shown that people who are employed in the community have the highest level of integration and have stronger social networks. The more people with developmental disabilities that achieve paid

employment, the less dependence there is on public resources and the greater the state's flexibility in designing future services that respond to the need of this population. For these reasons and many more, in 2008 Oregon was an early adopter of the Employment First initiative. Employment First is both a national initiative and a state policy. In Oregon, Employment First includes the Office of Developmental Disabilities Services (ODDS), Vocational Rehabilitation (VR), and the Oregon Department of Education (ODE). Employment First is working to increase employment opportunities for individuals with intellectual and developmental disabilities (I/DD). New federal regulations, as well as the Lane v. Brown settlement agreement, place even greater emphasis on the state's need to provide community-based employment services to people with I/DD. Finally, due to COVID-19 there has been an interruption in employment services, as well as job loss or job reduction; this is in part because people with I/DD are at greater risk of negative effects from COVID-19. As individuals decide to return to work, increase hours, etc. the employment first services become even more critical. These services can help people with I/DD identify accommodations that can help keep them safe and healthy while at work and can also help people return to work.

Program Funding Request

Employment First	*GF*	*OF*	*FF*	*TF*
21-23 LAB	$39,926,415	$-	$70,121,663	$ 110,048,078
23-25 ARB	$69,394,250	$-	$97,170,712	$ 166,564,962
Difference	$29,467,835	$-	$27,049,049	$ 56,516,884
Percent Change	73.8%	0.0%	38.6%	51.4%

Program Description

Employment First is based on the general philosophy that individuals with intellectual and developmental disabilities have the ability to be productive and contributing members of their communities through work. This philosophy also recognizes intrinsic and financial benefits of paid work to the individuals with disabilities and their families. This improved economic self-sufficiency has shown to also reduce reliance on government services. Oregon has been very successful in developing community-based care to move away from institutions as a model of care. Having individuals with developmental disabilities fully engaged in their

communities is highly desirable as an outcome and fiscally efficient. The Employment First initiative is designed to ensure that employment supports are provided in the community.

All people with developmental disabilities who are eligible to receive services through either the Comprehensive or Support Services waiver and the Community First Choice (K Plan) may choose to receive residential support through in-home services, foster care, group homes, or supported living services, as well as employment and/or day services. Employment supports include:

- Employment Path services — individuals learn employment skills
- Supported Small Group services —supports for individuals to work in the community with up to seven other individuals who have disabilities and make minimum wage or better
- Job coaching —support to work independently in a community-based job making minimum wage or better
- Discovery — a time-limited service designed to help an individual learn more about their employment strengths and potential job interests

The Employment First policy states that work in integrated jobs is the first and priority option in planning employment services for working-age adults and youth. Services should be planned to use person-centered practices that identify an individual's talents, skills, and interests. This information can then help inform employment options and career opportunities.

In 2014, CMS issued additional guidance regarding their Home and Community Based Services (HCBS) regulation requiring that employment supports be community-based by March 2019. Further, DHS reached a settlement in the Lane v. Brown case in January 2016 which requires that ODDS, VR, and the ODE work together to ensure that individuals who are currently in a sheltered workshop (or who have been in a sheltered workshop as of 2012) or individuals eligible for ODDS services transitioning out of high school receive supported employment services to help them obtain competitive integrated employment. Additionally, the Rehabilitation Act was amended formally as of June 30, 2016 via the Workforce Innovation and Opportunity Act, which requires competitive integrated employment as the outcome to be considered a successful placement through VR.

These federal and state changes, as well as implementing Employment First policies, require some fundamental systems transformation. Many providers needed support to change business practices to support individuals in jobs throughout their communities. Due to this technical assistance and other support, the last Sheltered Workshop in the state of Oregon closed August 31, 2020.

It continues to be critical for business partners to embrace the benefits of hiring people with developmental disabilities. Employment First partners with the Oregon Council on Developmental Disabilities and other stakeholder and advocacy organizations to develop policies and communications that strengthen employment outcomes.

As part of the department's strategic planning to integrate those with developmental disabilities into their communities, as well as new federal regulations which require that all employment supports be community-based, Oregon has moved away from the Sheltered Workshop model into a community based model as the last Sheltered Workshop in Oregon closed August 31, 2020. For people with developmental disabilities, the goal is that their time in career exploration and hours working in the community will increase and time spent in sheltered workshops decreases. This goal aligns with federal regulations, as well as the Lane v. Brown settlement agreement.

Program Justification and Link to Focus Areas

Employment First links to the Thriving Oregon Economy focus area. Individuals with developmental disabilities are healthier, safer, and happiest when they are engaged in meaningful work. Individuals are more likely to be able to live with their family longer when they have their own daily schedule that is similar to working parents. As with all other citizens, for individuals with I/DD, employment has many positive impacts. These impacts include increasing self-worth, building relationships, and access to community resources. Employment improves economic well-being as well as physical and mental health. Employment supports are key in moving people with developmental disabilities away from 24-hour support services, which results in fewer public funds being spent.

Employment First also links to other economic development strategies to increase

workforce diversity while meeting business needs in ways that result in jobs and prosperity for all Oregonians. Hiring people with disabilities is not only of benefit to those individuals, but also to businesses. Businesses report that their employees with disabilities help with overall retention, contribute to a positive workplace culture, are dedicated and hard workers, etc. Some information from Oregon employers can be found here: Employer Testimonial.

Program Performance

Employment trends have been tracked since 2007. Since Employment First began in 2008, there has been growth in community employment. Additionally, according to the September 2022 Employment Outcome Survey data 1,536 people received individual supported employment services (this was after the rate dropped to about 1100 people in September 2020 due to COVID-19). This is a 25% increase in people working in individual supported employment services from March 2018. For more information, please visit the Employment First Outcomes and Successes Report.

Employment First and its partners have reached the goals outlined in the 2015-2017 Bid ensuring that by 2016, no transition age youth may enter a sheltered workshop when leaving school as there were no new entries into a sheltered workshop setting allowed by Oregon Administrative Rule as of 7-1-2015. Although there were over 4,200 individuals in a Sheltered Workshop setting (totaling more than 45 Sheltered Workshops) in 2012, currently there are none.

For more details regarding process, please visit our bi-annual data reports: http://www.oregon.gov/DHS/EMPLOYMENT/EMPLOYMENT-FIRST/Pages/data-reports.aspx

Employment First Goals:

By June 30, 2022, based on the Lane v. Brown Settlement, Employment First (through ODDS and Vocational Rehabilitation) must place 1,115 individuals currently or recently in a sheltered workshop in competitive integrated employment; and

By June 30, 2022, based on the Lane v. Brown Settlement and Executive Order 15-

01, Employment First must provide supported employment services to 4,600 transition age youth or individuals currently or recently in a sheltered workshop. This is required by the Lane v. Brown Settlement Agreement and ODHS along with ODE is progressing toward system change to ensure these outcomes are reached.

To date, Oregon has achieved these goals and is in substantial compliance with the Lane v. Brown Settlement Agreement. However, COVID-19 has impacted provider capacity. This makes this biennium critical to ensuring that Oregon continues to meet the new Key Performance Measure goal of ensuring 1700 individuals with IDD are working by 2026. Without continued efforts, Oregon stands to lose providers who deliver these services and ultimately, could fail to meet metrics.

Enabling Legislation/Program Authorization

The provisions of employment-related services for individuals with developmental disabilities are in ORS 430.610, .650, and .670. The enabling statutes are in ORS 409.050 and ORS 410.070.

At the federal level, in addition to all applicable Medicaid statutes and regulations such as the Home and Community Based Services regulation and Workforce Innovation and Opportunity Act mentioned above, services must comply with the Title II of the Americans with Disabilities Act (ADA) of 1990. Compliance with these federal laws are subject to the U.S. Supreme Court's Olmstead Decision of 1999 and the U.S. Department of Justice's interpretation of that decision as it relates to the ADA and Rehabilitation Act. ADA and Olmstead are relevant to Employment First since the program must assure statewide access in the least restrictive environment.

As of January 2016, the Lane vs. Brown case has been formally settled and Oregon via ODHS and ODE are mandated to effectively implement policies to achieve the required outcomes of the Settlement Agreement, which is mandated under federal jurisdiction.

Funding Streams

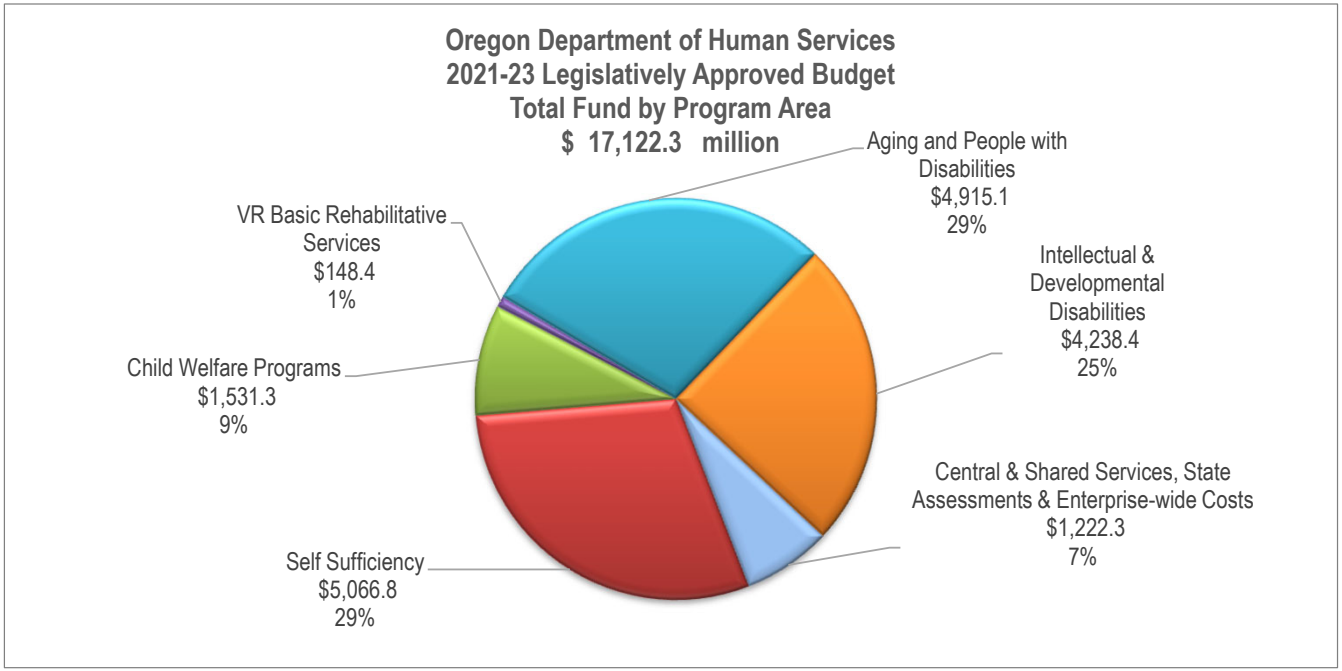
All funding for Employment First through ODDS is matched through the Medicaid

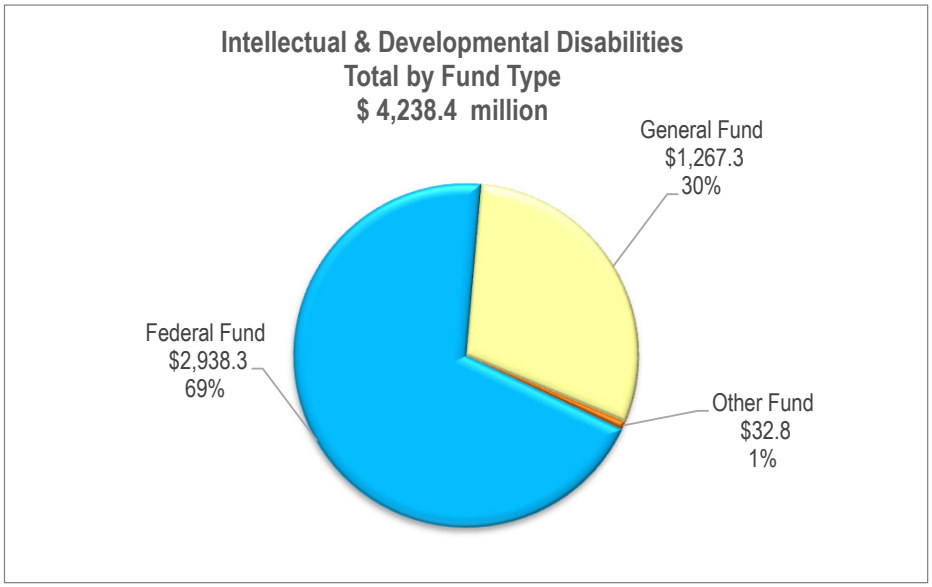
1915(c) Home and Community-Based Waiver. When a person is getting job development from Vocational Rehabilitation (VR), OVRS Title 1 case service funding is used.

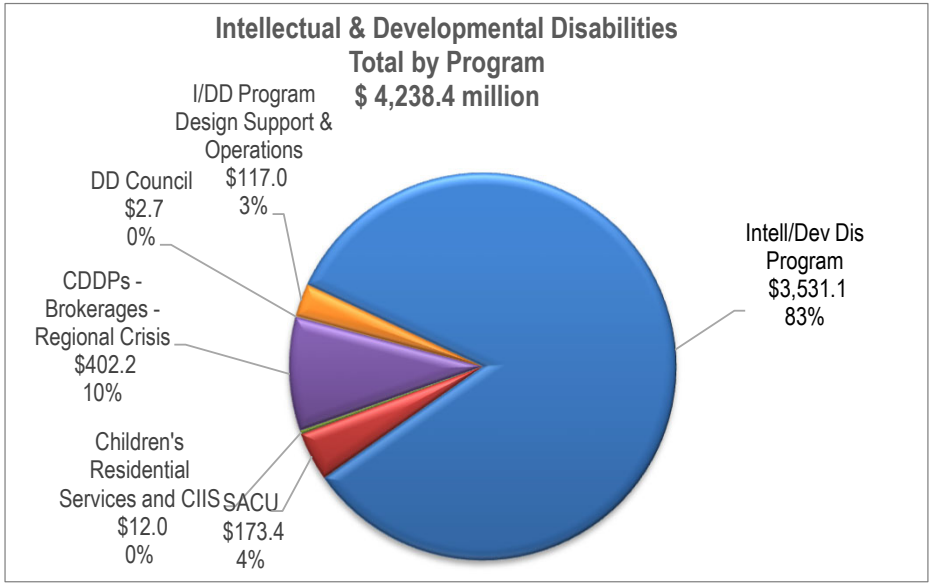
Funding Justification and Significant Changes to CSL

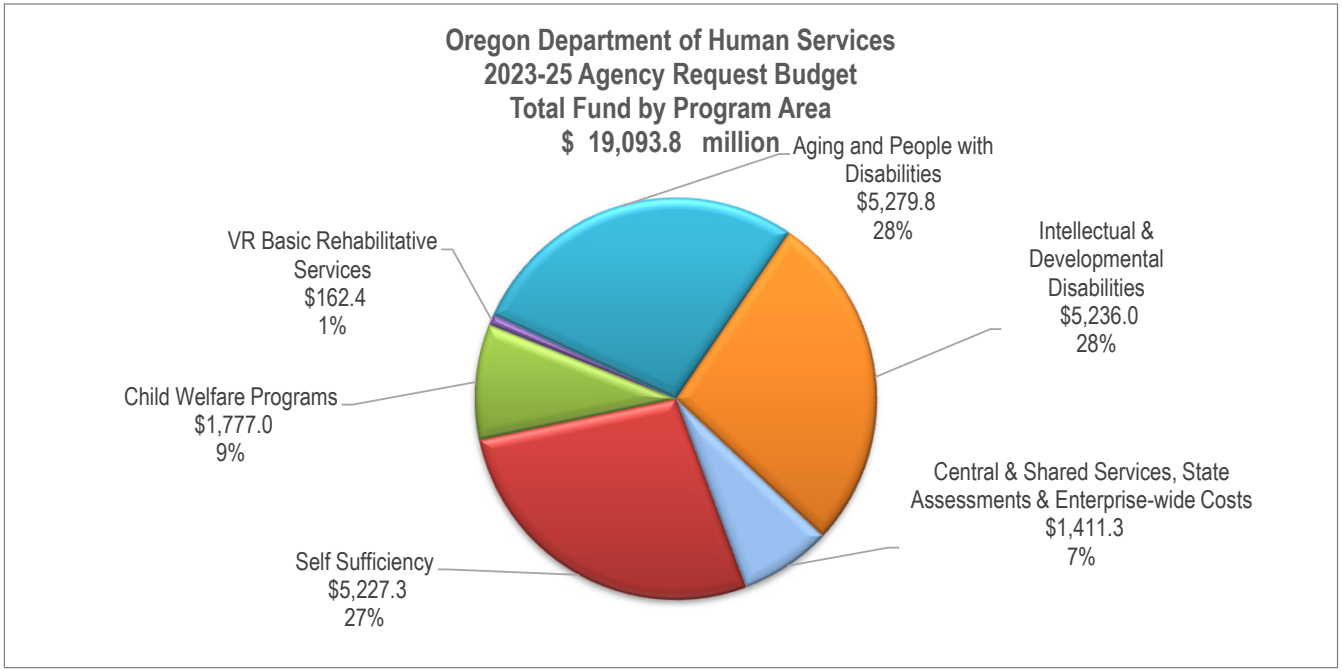
ARB requests the following Policy Option Packages:

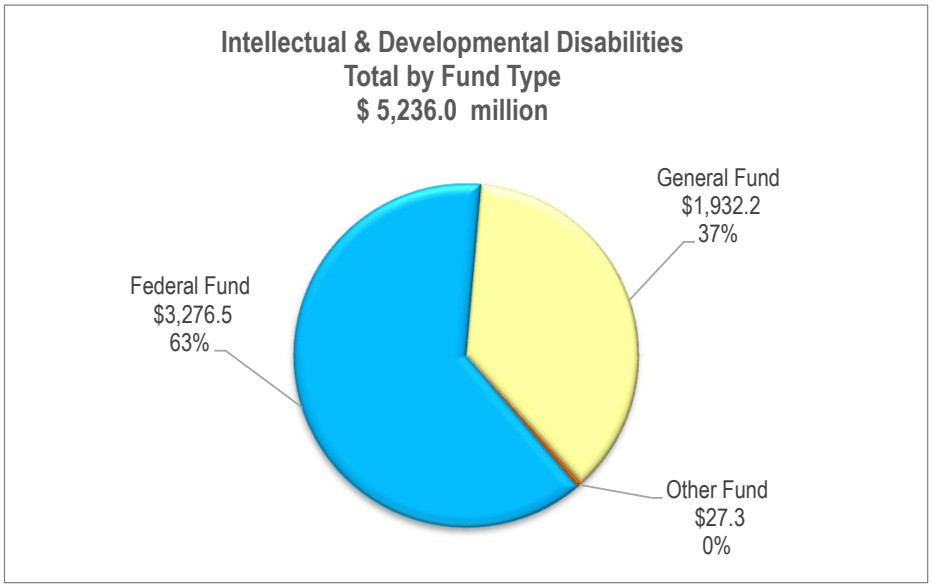
PACKAGE NO.	PACKAGE TITLE				
POP 132	Targeted Rate Increases				
GENERAL FUND	OTHER FUNDS	FEDERAL FUNDS	TOTAL FUNDS	POSITIONS	FTE
$ 12,917,512	$ -	$ 18,676,140	$ 31,593,652	-	-
PACKAGE DESCRIPTION All people with intellectual and developmental disabilities (I/DD) deserve to live full lives as valued members in their communities and have access to the quality services and supports that empower them to do so. I/DD service providers have been severely impacted by workforce shortages, which have been exacerbated by the COVID-19 pandemic and other economic and inflationary pressures. Providers have been struggling to meet the needs of individuals they serve, because they are unable to offer competitive living wages to sufficiently recruit and retain workers during a time of extraordinary wage hikes and inflation. This policy option package (POP) implements targeted updates to the service rates assumptions with the most recent published data sources, such as the latest Bureau of Labor (BLS) data and Internal Revenue Service (IRS) mileage rate. Ensuring provider rates remain updated to the most current cost information will ensure that Oregon's provider network remains robust and capable of attracting and retaining direct workforce, pay living wages to direct care workers and providing other supports to the workers that ultimately result in better quality and continuity of services for people with I/DD.					

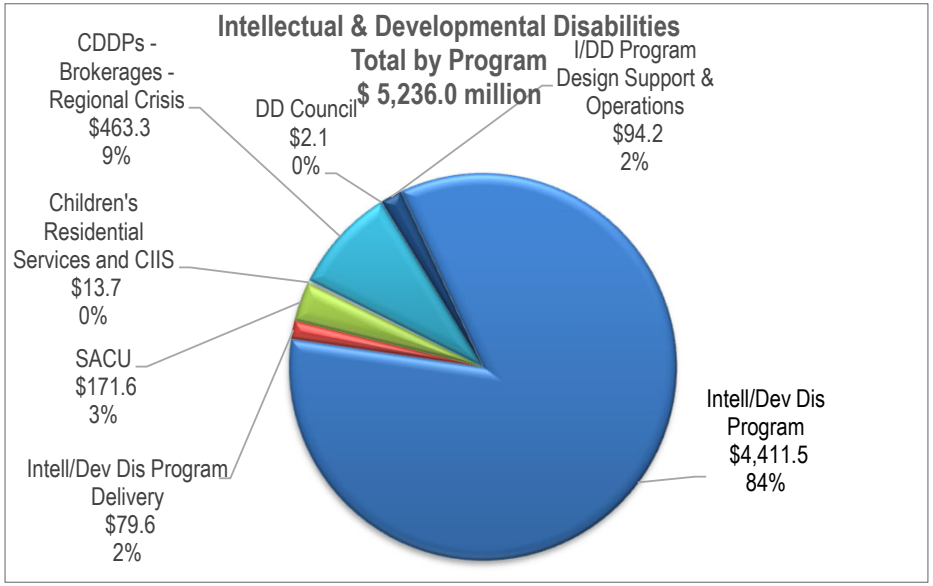

Oregon Department of Human Services
2021-23 Legislatively Approved Budget
Total Fund by Program Area
$ 17,122.3 million
Aging and People with Disabilities $4,915.1 29%
Intellectual & Developmental Disabilities $4,238.4 25%
Central & Shared Services, State Assessments & Enterprise-wide Costs $1,222.3 7%
Self Sufficiency $5,066.8 29%
Child Welfare Programs $1,531.3 9%
VR Basic Rehabilitative Services $148.4 1%


Intellectual & Developmental Disabilities
Total by Fund Type
$ 4,238.4 million
General Fund $1,267.3 30%
Federal Fund $2,938.3 69%
Other Fund $32.8 1%


Intellectual & Developmental Disabilities
Total by Program
$ 4,238.4 million
I/DD Program Design Support & Operations $117.0 3%
DD Council $2.7 0%
CDDPs - Brokerages - Regional Crisis $402.2 10%
Children's Residential Services and CIIS $12.0 0%
SACU $173.4 4%
Intell/Dev Dis Program $3,531.1 83%


Oregon Department of Human Services
2023-25 Agency Request Budget
Total Fund by Program Area
$ 19,093.8 million
Aging and People with Disabilities
$5,279.8
28%
Intellectual & Developmental Disabilities
$5,236.0
28%
Central & Shared Services, State Assessments & Enterprise-wide Costs
$1,411.3
7%
Self Sufficiency
$5,227.3
27%
Child Welfare Programs
$1,777.0
9%
VR Basic Rehabilitative Services
$162.4
1%


Intellectual & Developmental Disabilities
Total by Fund Type
$ 5,236.0 million
General Fund
$1,932.2
37%
Federal Fund
$3,276.5
63%
Other Fund
$27.3
0%


Intellectual & Developmental Disabilities
Total by Program
$ 5,236.0 million
CDDPs - Brokerages - Regional Crisis
$463.3
9%
DD Council
$2.1
0%
I/DD Program Design Support & Operations
$94.2
2%
Children's Residential Services and CIIS
$13.7
0%
SACU
$171.6
3%
Intell/Dev Dis Program Delivery
$79.6
2%
Intell/Dev Dis Program
$4,411.5
84%

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Human Services, Dept. of **Agency Number: 10000**

2023-25 Biennium **Cross Reference Number: 10000-060-09-00-00000**

Source	2019-21 Actuals	2021-23 Leg Adopted Budget	2021-23 Leg Approved Budget	2023-25 Agency Request Budget	2023-25 Governor's Budget	2023-25 Leg. Adopted Budget
Other Funds						
Business Lic and Fees	57,690	-	-	-	-	-
Charges for Services	3,735	-	-	-	-	-
Care of State Wards	8,392,347	-	-	-	-	-
Fines and Forfeitures	121,350	-	-	-	-	-
Interest Income	109,352	-	-	-	-	-
Other Revenues	17,423,779	19,363,997	22,645,239	23,649,092	-	-
Transfer from General Fund	-	3,461,624	3,461,624	3,607,012	-	-
Tsfr From Administrative Svcs	12,247,134	-	3,347,000	-	-	-
Tsfr From Education, Dept of	1,117,481	-	-	-	-	-
Tsfr To Long Term Care Ombud	(105,600)	-	-	-	-	-
Total Other Funds	**$39,367,268**	**$22,825,621**	**$29,453,863**	**$27,256,104**	**-**	**-**
Federal Funds						
Federal Funds	2,216,762,072	2,594,495,379	2,938,250,125	3,276,550,348	-	-
Total Federal Funds	**$2,216,762,072**	**$2,594,495,379**	**$2,938,250,125**	**$3,276,550,348**	**-**	**-**