



OREGON DEPARTMENT OF
Human Services

Case Management Webinar January 2026 'Rate Methodology Changes'

Aging and People with Disabilities – APD Medicaid Policy Unit
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Agenda

- APD-PT-25-023
- Adult Foster Home (AFH) and Residential Care Facility (RCF)
rate methodology changes
 - Point Calculations and Considerations
 - “Hold Harmless” provision
 - System Changes
 - Exception Information

APD-PT-25-023

- Oregon Legislature has directed the Oregon Department of Human Services (ODHS) to adopt a new model for calculating provider rates
 - New rates are effective Jan. 1, 2026
 - Applies to AFHs and RCFs
 - Does not apply to AFHs/RCFs with Specific Needs Contracts or to Assisted Living Facilities (ALFs)
 - Oregon Access will calculate rates – no additional actions are required by staff

ADL/IADL Point Calculation

- One point for Independent
- Two points for Minimal Assist
- Three points for Assist
- Five points for Substantial Assist
- Six points for Full Assist



Additional Cognition Points

- **Full Assist in:**
 - Self-Preservation
 - Decision Making
 - Make Self Understood

= Additional 10 points
- **Substantial or Full Assist in:**
 - Challenging Behaviors

= Additional 20 points



Maximum additional points cannot exceed 20 points

Treatment Points

- Complex medical add-ons based on frequency
 - At least weekly = one point
 - At least daily = three points
- Additional Treatment information:
 - Sliding scale insulin + “Medications requiring skilled assessment/judgment/monitoring”
- Important: Treatments must be added when the assessment is in ‘Pending’ status.

Points Calculated into Tiers

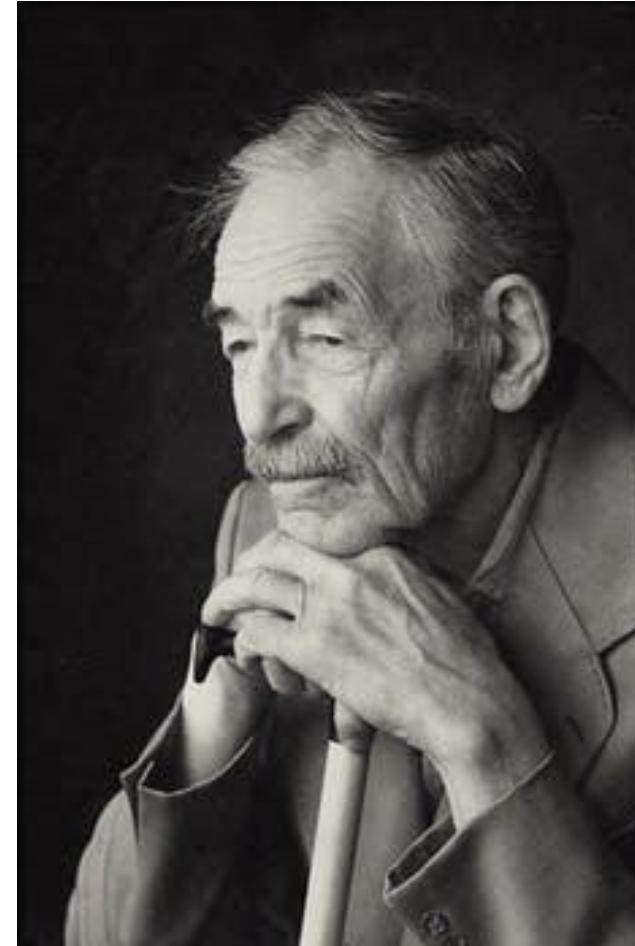
Assessed Levels	Score Ranges	Tier
Low	0 - 40	1
Moderate	41 – 55	2
Medium High	56 – 82	3
High	83 – 106	4
Very High	107 +	5

Tier Rates + AFH Additional Daily Staff Hours

Tier	AFH Rate	AFH Additional Staff Hours	RCF Rate
1	\$2,332	0	\$2,863
2	\$3,327	2	\$3,421
3	\$3,863	4	\$3,979
4	\$5,916	8	\$4,537
5	\$7,773	10	\$5,172

“Hold Harmless” Provision for Current Exceptions – Lower vs. Higher Rates

- **Lower**
 - 2025 total rate: \$7000
 - Tier Rate: \$7,773
 - 2026 rate: \$7,773 (exception ends)
- **Higher**
 - 2025 total rate: \$12,000
 - Tier Rate: \$7,773
 - 2026 rate: \$12,000



“Hold Harmless” Provision for Current Exceptions – Notification Requirements

The Central Office CBC
Exceptions team needs to be
notified when an assessment
results in a different tier if
there is a “Hold Harmless”
exception in place.



System Changes

- The following slides will show the changes in Oregon ACCESS and the CBC/512 system in the mainframe

OA Full Benefit Results

Full Benefit Results

Based on Assessment 11/05/2025 and Benefit Version 1

Results	
ALF Rates	Level 5
RCF Rates	Base + 3
AFH Rates	Base + 3
R-AFH Rates	Base + 3
SPL Summary	

Version Info

Additional Benefit Results

Prev Next

In-Home Maximum Hours	
Need	
ADL	
Bath/Personal Hygiene	
Cognition	
Dressing/Grooming	
Eating	
Elimination	
Mobility	
IADL	
Breakfast	
Dinner / Supper	
Housekeeping	
Lunch	
Medication Management	
Shopping	
Transportation	
Live-In Services	
Live-In Services	

OA Full Benefit Results - Rates

Full Benefit Results

Based on Assessment 11/01/2023

Rates

AFH	Rate
Base:	\$2,120.00
ADL Dependency Add-On:	\$386.00
Behavioral Risk Add-On:	\$386.00
Complex Needs Add-on:	\$386.00
Total:	\$3,278.00

Level	Rate
Tier 05:	\$7,773.00
Total Rate:	\$7,773.00
Total Points:	151

Results

ALF Rates	Level 5
RCF Rates	Base + 3
AFH Rates	Base + 3
R-AFH Rates	Base + 3
SPL Summary	

Version Info

Additional Benefit Results

Prev Next

Details

OA Full Benefit Results – Points Detail

Points Details

Need Points Detail			
Need	Level	Points	Eligible Addon Points
Self-Preservation	Sub assist	5	
Decision Making	Sub assist	5	
Make Self Understood	Sub assist	5	
Challenging Behaviors	Sub assist	5	20

Treatment Points Detail			
Type	Description	Frequency	Points
Medication	Medications requiring skilled	1xDay(QD)	3
		Total Treatment Points:	3

Applied Addon Points	
Only one add-on is permitted for combined components with Cognition	
Add-on Points:	20

Total Points:	151
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SELG in SSEI

SSEI	Prime #	Recip	CAPS Service Eligibility Detail						Svc Off	12/18/2025	
									Svc Off	0611	
Benefit Data:											
Svc Cat	Beg Dt	01/01/2025	Svc Cat	End Dt	11/30/2025	Cor Rsn	INL				
Svc Cat		APD	Svc Setting	Grp	RES						
Assessment Data:				Asmt Cd	1	Asmt Create Dt	11/21/2024				
Asmt Dt	11/21/2024		Review Dt	11/30/2025		Valid Until Dt	11/30/2025				
Algorithm Components											
Alf	(AFC/RCF) Tier 05 02	(AFC/RCF) Base 01	Med Mgmt 00	Behav 00	ADLs 00	NF 01	Sur 03	Serv B	SPPC N		
Eat	Bath	Elim	Drs	Cog D	Mobl I			AFH Class 2			
Create Date	2024-12-13	Time	14.44.47.928649	Racf Id							
Update Date	2025-12-08	Time	08.50.51.834882	Racf Id							
Msg	F3=EXIT				F10=SSEU	F12=SELG					

PRIM ID		PROV	SDS COMMUNITY BASED CARE 512 SELECTION INQUIRY SCREEN					
SEL	PRIME ID	PROV ID	2ND PROV	EFF BEG	EFF END	MODE	ACT	LVL/ TIER
—			N	2025/08/01	9999/12/31	C	1	L5
—			N	2025/07/01	2025/07/31	C	1	L5
—			N	2025/06/03	2025/06/30	C	1	L5
—			N	2025/02/01	2025/06/02	C	1	L5
—			N	2025/01/01	2025/01/31	C	1	L5
—			N	2024/12/01	2024/12/31	C	1	L5
—			N	2024/07/01	2024/11/30	C	1	L5
—			N	2024/02/01	2024/06/30	C	1	L5
—			N	2023/12/01	2024/01/31	C	1	L5
—			N	2023/08/23	2023/11/30	C	1	L5

MSG: A148 Select a Record and press Enter to Inquire
MSG:
MSG:

F3=EXIT **F10=SMRF (ADD/UPDATE)**

SMRQ – LVL/TIER

- B0-B3: AFH/RCFs, prior to 1/1/2026. B means “base” and the number reflects the number of add-ons. For example, “B0” base plus zero add-ons, “B1” is base plus one add-on, etc.
- 01-05: AFH/RCF beginning 1/1/2026. This means tiers 1 through 5.
- L1-L5: ALF level 1 through 5.
- RX: Memory care or Rx contracted rate. This includes endorsed Memory Care Communities or providers with a specific needs contract.
- SL/SU/IC: These are various specialized living settings. This includes providers like Maids, Home Forward, Quad Inc, Minds in Motion, and Brain Rehab.
- 0: 512 is suspended/no rate found. This most likely means that an appropriate benefit is no longer authorized or there is a rate mismatch.

RATZ - Before

RATZ	SDS	CBC	PAYMENT	SYSTEM	LAST	CHG	2025/08/15
ACT TYPE	4	OPER ID		CANCEL N	MODE	COMP	
EFF BEG		EFF END	9999/12/31	SVC WKR 99	FINC	WKR 99	
PRIM ID		RECIP					
PROV NMBR		PROV NAME			2ND	PROV N	
MHD	SERV AMT	EXCLUSION (1099)					
AFC	0.00	N					
SDSD	BASE	ADD ON	SVC RATE	RATE ADJ	SERV AMT		
ALF	4,649.00	+	.00	= 4,649.00	+	427.00	= 5,076.00
AFC/RCF	0.00	+	.00	= 0.00	+	.00	= 0.00
ARPA/ADD-ON	0.00	+	.00	= 0.00	+	.00	= 0.00
TOTAL	4,649.00		.00	4,649.00		427.00	5,076.00
AFC/RCF DETAIL: MED MGMT N BEHAV N ADL'S N							
ADJ REASON: Enhanced Care Outreach Services							
THIS RATE ADJUSTMENT IS EFFECTIVE UNTIL 11/30/2025							
MSG:	S-011	Next screen?	(Y, N, Tranid)		ANS:	N	
MSG:							
MSG:							
F5>	SCR SNRS	F6>	SCR SMRQ	F7>	SCR SADD		

RATZ - After

RATZ	SDS	CBC	PAYMENT	SYSTEM	LAST	CHG	2025/08/15
ACT TYPE	1	OPER ID		CANCEL N	MODE	PEND	
EFF BEG		EFF END	2025/11/30	SVC WKR 99	FINC	WKR 99	
PRIM ID		RECIP					
PROV NMBR		PROV NAME			2ND	PROV N	

PROC CODE: LF001

PROV TYP	SVC RATE	RATE ADJ	SERV AMT
Assisted Living Facility	4,649.00	+ 427.00	= 5,076.00

ALF LEVEL: 05

ADJ REASON: Enhanced Care Outreach Services

THIS RATE ADJUSTMENT IS EFFECTIVE UNTIL 11/30/2025

MSG: S-011 Next screen? (Y, N, Tranid)

ANS: N

MSG:

MSG:

F5> SCR SNRS F6> SCR SMRQ F7> SCR SADD

What Does this mean for AFH Exceptions

- AFH exception requests will only be granted when an individual's needs exceed the caregiving hours as funded by a resident's assessed tier.
- Exception requests will only be approved if the provider demonstrates they are delivering the required caregiving hours **for all residents** in the adult foster home based on each resident's tier.

Minimum Staffing Requirements funded by all Tiers

- Providers must provide at a minimum one caregiver on duty 24 hours a day that can be shared among all the residents in the AFH:
 - Sometimes referred to as base rate staffing
 - Is separate from the additional caregiving hours funded by Tiers and Exceptions
 - Exceptions for routine night needs may be allowed
- Providers staffing plans and payroll records must reflect this staffing along with the additional staffing requirements

Example Tiers with Exceptional Hours

Resident	Tier	Additional Caregiving Hours funded by Each Tier Per day	Exceptional Hours per Day	Total Hours Per Day	
A	5	10	2	12	<p>If the provider wants to admit a fifth resident and request an exception, they must demonstrate—through payroll records— providing a total 53 caregiving hours per day.</p> <p>Note The minimally required Base Caregiving subtracts 5 hour for sleeping time. Staffing plan will still need to show sleeping hours.</p>
B	4	8	0	8	
C	1	0	0	0	
D	5	10	4	14	
			Total Add Staffing	34	
			Base Caregiving	19	
			Total Daily Staffing	53	

Examples of documentation that could verify caregiving hours

- Time Sheets
- Paystubs
- Documentation taxes were paid
- Other Documentation



Expectations for Local Offices Regarding Staffing Verification

- Inform the provider in writing of Central Office requests for documentation
- Send documentation to Central Office Exceptions Staff that is received from providers
- Answer questions from providers and follow up with the Central Office exception teams when questions are asked that you cannot answer. Follow up with providers once you have the answer.

Note: Case Managers are not expected to review payroll or other documentation that verifies staffing to determine if it meets the exception requirements.

Updated Exception Request Forms

- The CBC Exceptions [Calculator](#) (Different from the current in-home Calculator)
- Updated [514A](#)
- [Exception Check List](#)

These forms are on the Provider Tools Page and CM Tools Page

Renewal of Exception Requests

For "Hold Harmless" Exceptions – Providers will still need to submit a written request before the exceptions expires. To request continuation of the exception, providers will need to submit:

- Staffing Plan (the new SDS 514A)
- Verification that additional caregiving hours were provided for residents with exceptions. (Example: payroll documentation, Staffing Schedules)

"Hold Harmless" exceptions will end if:

- The Provider doesn't request renewal of the exception before the exception expires
- When the consumers tier goes down
- When the provider cannot verify additional caregiving hours were provided (Example: Payroll Records, Staffing Schedules)

Initiation or Renewal of All Other Exception Requests (Not Hold Harmless)

- All Other Exception Requests will require the following documentation:
 - A Staffing Plan
 - The CBC Exceptions Calculator
 - Verification that additional caregiving hours were provided for each resident as required by each Tier (Example: Payroll Records)

Questions?

You can get this document in other languages, large print, braille or a format you prefer free of charge. Email the APD Medicaid Policy Unit listed below.

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