

September 9, 2025



OREGON DEPARTMENT OF
Human Services

Funding and Payment Methods

Funding Options

1

K-Plan Ancillary Services

- Enhanced federal match + state funds
- For helping people live independently; also, for leaving the NF or state hospital into in-home and CBC
- To increase independence, reduce the need for human assistance, and/or maintain health or safety
- [K-Plan Policy](#)

2

Community-Based Transition Services

- Federal match + state funds
- For consumers transitioning from CBC or acute care hospital to in-home setting
- Helps people establish a home
- Offers more flexibility compared to Special Needs rule
- [OAR 411-037](#)

3

Special Needs Medical Related Payments

- State funds
- Supports people in all settings to maintain independence, dignity, and health/safety
- [OAR 461-155-0500 t → 0710](#)

4

Crisis Support

- State funds
- For those assessed with a **high** or **medium** risk
- Funding is to mitigate or prevent a crisis
- Only for people living in-home
- [Crisis Support Program Outline](#)

K-Plan Eligibility

Eligible:

- All LTSS and EWE consumers
- Consumers in CBC settings or in-home (for certain situations)
- For consumers transferring from a nursing facility or **state** hospital into in-home and CBC settings

Not eligible:

- Consumers with SPPC, OPI, and OPI-M

K-Plan Services



Home Modifications

Ramps, barrier free showers, door widening, etc.

Only for home, or rental with landlord approval

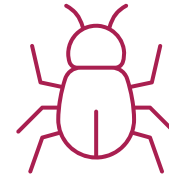
CO always needs to preapprove



Assistive Technology

Lift chairs, transfer poles, automatic shut-off faucets, etc.

Only for CBC or in-home
CO needs to preapprove costs above \$500



Chore Services

Deep clean, pest control services, de-hoarding
Can pay for repeated deep cleaning services for the same consumer
Only for homes or rentals

CO always needs to preapprove



Transition Services

Only for moving from NF or state hospital to lower care

Includes household goods, furniture, clothing, movers, costs

CO needs to preapprove costs above \$1000

K-Plan Providers



Home Modifications

Must be a K-Plan Provider



Assistive Technology

Can be a K-Plan Provider



Chore Services

Must be a K-Plan Provider



All providers must accept full payment after the service is provided



Current list of K-Plan providers named “Provider List”



Provider must fill out the Provider Enrollment Agreement if not enrolled

K-Plan Payment Process: Central Office Approval

1. Prioritize community resources and insurance coverage first
If none available, prioritize K-plan over community-based transition and crisis support
2. Obtain three bids for assistive technology, chore service, and environmental modifications; indicate on 3406 form if unable to obtain three (3) bids and why

If the expense requires prior authorization from central office:

1. Fill out the [Supplemental Assessment Form 3406](#)
2. Email the form to kplan.requests@odhs.oregon.gov
Put in the e-mail subject line if the consumer is discharging from a NF
Mark the email “urgent” to expedite process if needed
3. Once central office approves, notify vendor to begin the work
4. Local office will email the invoice to the K-Plan team; central office completes payment in ONE

If approval needed for higher expenses, or for K-Plan questions, contact margaret.may@odhs.oregon.gov

K-Plan Payment Process: Local Office Approval

Local office needs preapproval for more than:

- \$500 for household goods (cookware, bedding, linens, cleaning supplies, garbage cans, etc.)
- \$1000 for household furnishings (beds, mattresses, dressers, couch, table, etc.)
- \$200 for food stocking (pantry staples, perishable food items, canned or boxed foods)
- \$100 for clothing
- \$1,000 for moving expenses, including delivery costs, moving, extra locks, duplicate keys
- \$500 for assistive devices and durable medical equipment

Payment process:

1. Determine the most cost effective and quality option based on bids
2. Enter the expense in ONE using proper code; the local supervisor can approve it (even if the system says central office approval required)

ONE Codes

- W1: Assistive Technology
- W3: Costs associated with finding space, paying deposits, etc.
- W4: Household purchases
- W5: Moving costs; paying movers, etc.

Community-Based Transition Services

Eligible:

- Consumers with LTSS and EWE
- Consumers moving from an acute hospital or community-based care setting **to** in-home setting

Not eligible:

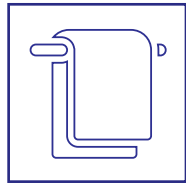
- Consumers with SPPC, Oregon Project Independence (OPI), and OPI-M
- Individuals transitioning between CBC facilities
- Individuals transferring to a higher level of care

Community-Based Transition Services can fund:



Establishing a residence

Housing application fees
Security deposits
Utilities (including those past due)
Local office can approve up to \$1,000



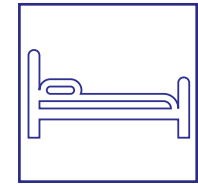
Household goods

Bedding, lamps, towels, pots and pans, and other necessary goods
Local office can approve up to \$500, within 30 days of moving



Moving expenses

Covers movers, extra locks and duplicate keys
Local offices can approve moving costs up to \$1,000 per move



Household furnishings

Furniture
Appliances
Local office can approve up to \$1,000 within 30 days of moving

Email inhome.transitionsservices@odhsoha.oregon.gov for more funding in each category, if necessary, with justification

Community-Based Transitions Payment Process

If the expense amount is below local limit:

- Local authorization in ONE – codes B2 (LTSS, PACE and EWE) or B3 (MAGI consumers)

For exceptions above the limits in rule:

- E-mail inhome.transitionsservices@odhsoha.oregon.gov to get approval for:
- Purchases above the listed limits
- Expenses that occur after 30 days of the transition
- Benefits more than once in a calendar year

After approval received and service is provided, send the following information to apd.invoices@odhsoha.oregon.gov

- Invoice from the vendor with the consumer's name and prime number
- Vendor's W-9 (if applicable)

Payment to the vendor will be issued by Central Office after service is provided

Special Needs MRP Eligibility

Eligible:

- People receiving services with one-time and/or ongoing payments
- For consumers in CBC or in-home
- For OSIP-M consumers

Not eligible:

- If any other Medicare, Medicaid, or other medical coverage is available

Special Needs MRP – One-Time Needs

- Funds one-time needs:
 - Home repairs to remove physical hazards for health and safety (limited to \$1,000 in 24 months)
 - Moving costs under certain circumstances (limited to \$1,000 in any 12 months)
 - Moving from hazardous housing
 - Eviction besides neglect or failure to pay rent/house payments
 - Domestic violence or abuse cases
 - Out of state moves
 - Nonstandard living arrangement and care needs change
 - Intermediate care facility for individuals with intellectual disabilities, psychiatric institution if over age 65
 - Property taxes (once per year)
 - Diversion and transition costs
 - To divert someone otherwise served in a NF or psychiatric hospital *into* CBC
 - Flexible funding source

Special Needs MRP – Ongoing Needs

- Funds ongoing needs:
 - Laundry allowance
 - Special diet allowance
 - Guide dog and special assistance animal food and medicine
 - Prescription drug co-pay coverage

Special Needs MRP Payment Process

- Local office can approve all one-time and ongoing needs that do not exceed limits in ONE
- No ability to grant exceptions

Crisis Support Program Eligibility

Eligible:

- In-home consumers to establish or maintain an in-home plan
- Consumers with LTSS, MAGI, OPI-M, or EWE
- Consumers **who are assessed at high or medium risk** on their risk assessment

Not eligible:

- Consumers with SPPC or OPI

Crisis Support Program

- Intended to be one-time assistance to ensure health and/or safety of the consumer, including but not limited to:
 - Eviction prevention
 - Utility shut off
 - Emergency home repair when the home is owned by the consumer (furnaces, plumbing, electrical fixes)
 - Temporary hotel costs if the home is unsafe
- No cap on how much: central office will determine if this service or item is the most cost-effective solution to help solve or mitigate the crisis

Crisis Support Program Payment Process

1. Explore other funding sources if possible, and describe that in the request form
2. Fill out the Crisis Support Program [Request Form](#)
 - Form located on the CM Tools page, under Other Programs, then Crisis Support
3. Send all supplementary paperwork, forms, and additional materials to apd.crisissupport@odhsoha.oregon.gov

Central office will respond to requests within 5 business days (there is only one person staffing this program)

Crisis support questions: Jessica.kallhoff2@odhs.oregon.gov

Other Resources

- [Guidance on K-Plan](#) – provides details on what is authorized
- [K-Plan FAQ](#) – overview on FAQ, details on how to enroll providers
- [K-Plan Chore Services Consent](#)
- [K-Plan Contractor Environmental Modification Consent](#)
- [Consumer Confirmation of Job Completed to Their Satisfaction](#)
- [Assistive Technology Acceptance of Delivery](#)
- [Consumer/Landlord/Owner Environmental Modification Consent](#)
- [General Medicaid Provider Enrollment Agreement](#) - for enrolling any provider into plans to provide services (commonly used for K-Plan)
- [Funding Sources](#) – describes the 4 main funding sources from today's presentation

Thank you!

You can get this letter in other languages, large print, braille, or a format you prefer for free. Contact ODHS at apd.ltss@odhsoha.oregon.gov or at 503-945-5600 (voice/text). We accept all relay calls.

Contact dt.policy@odhsoha.oregon.gov with any questions!



OREGON DEPARTMENT OF
Human Services