

Next Level in Home and Community-Based Services: Oregon's Money Follows the Person Project

Project Abstract

Oregon has led the nation, since 1981, in the development of lower cost alternatives to institutional care in both nursing and intermediate facility care. Home and community-based alternatives to institutional care, offered under three Section 1915(c) waivers and two model waivers, emphasize independence, dignity and choice, and offer needed care and supports at lower cost than medical models.

The result of Oregon's 25 years of rebalancing efforts has been a significant decline in nursing home admissions and the closure of all but one small ICF/MR. As recently highlighted in the Final Report of the Money Follows the Person Initiatives of the System Change Grantees¹, Oregon ranks first of the 50 states and the District of Columbia, in the proportion of Medicaid long-term care expenditures that are made for home care, and last among the 50 states and the District of Columbia in its nursing facility occupancy rate. Of approximately 30,000 seniors or people with physical disabilities supported by SPD, only 4,700 are living in nursing homes. And of the 11,500 people with developmental disabilities supported by SPD, only about 40 are living in ICF/MR homes.

With its Money Follows the Person grant proposal, Oregon proposes to push the envelope of home and community-based services still further. We plan to demonstrate that long-term institutionalized populations of people with complex medical and long-term care needs can be served in their communities with wrap-around packages of supports and services. Specific populations that Oregon proposes to serve include:

- **40 children** with developmental disabilities in pediatric nursing facilities
- **300 seniors** with end-stage dementia in nursing facilities
- **300 adults with physical disabilities** in nursing facilities; and
- **140 adults with developmental disabilities** in nursing and intermediate care facilities.

These 780 individuals account for **16.5% of today's institutionalized Medicaid population**. Oregon believes that successful transition of these individuals to the community will begin building the next wave of a national model to provide home and community-based services to people not typically able to use these services.

Oregon requests five year project funding of \$150,477,244 of which \$ 104,854,366 is federal funding.

¹ United States, Department of Health and Human Services, Center for Medicare and Medicaid Services, Money Follows the Person Initiatives of the System Change Grantees, Final Report, RTI International, July 2006, 16-20.