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Disability Services

Disability services are an array of programs and supports for children and adults with diverse disabilities. Some services are required by law, some by legal decision, some are a matter of public policy. Services may be operated by the state, counties, private, or nonprofit agencies. Much of the funding for disability services is federal money that flows to states either as matched funding (e.g., Medicaid), block grants (e.g., mental health block grant), federal grants/contracts, or in other ways. The state also allocates considerable funding for disability services and distributes funds to counties that provide many local services. Counties and cities sometimes use local revenues to provide or enhance services for their residents.

What is a Disability?

The legal definition of disability in the Americans with Disabilities Act (ADA), for the purpose of administering programs and grounding discrimination claims, is “a physical or mental impairment that substantially limits one or more of the major life activities of (an) individual; a record of such an impairment; or being regarded as having such an impairment.” Another definition is used by the Social Security Administration to determine who is eligible to receive federal disability benefits: a physical or mental condition that prevents an individual from engaging in substantial gainful activity (SGA), that is expected to last (or has lasted) twelve consecutive months, or is expected to result in death.

Physical or mental disabilities may include contagious or noncontagious diseases and conditions such as orthopedic, visual, speech and hearing impairments, sensory disabilities, cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, mental illness, psychiatric disabilities, specific learning disabilities, Human Immunodeficiency Virus (HIV) disease (whether symptomatic or asymptomatic),

tuberculosis, drug addiction, and alcoholism.

A *developmental* disability is a disability that manifests prior to the age of 22 that is likely to continue indefinitely, that significantly impacts adaptive behavior. Developmental disabilities include intellectual disability, cerebral palsy, Down Syndrome, autism spectrum disorders, and other neurological conditions that originate in and directly affect the brain.

Oregon Health Authority (OHA) and Department of Human Services (DHS)

Many disability-related services are provided by OHA and DHS. OHA manages the Oregon Health Plan (Oregon's Medicaid program): physical health care services are offered through its Division of Medical Assistance Programs (DMAP), and behavioral health care services through its Addictions and Mental Health Division (AMH). DHS administers a whole spectrum of human services programs, including long-term care, welfare, services for children, services for the hard of hearing, and more. DHS primarily serves people with disabilities through its Office of Aging and People with Disabilities (APD), Office of Developmental Disability Services (DD), and Office of Vocational Rehabilitation Services (VR).

OHA's Division of Medical Assistance Programs (DMAP) and Addictions and Mental Health Division (AMH)

Prevention and treatment of both physical and behavioral health issues is a part of disability services. Behavioral and physical health care in Oregon are integrated. For greater detail, see the *Oregon Health Plan* and the *Addictions and Mental Health Services* Background Briefs.

DHS Offices of Developmental Disabilities (DD), and Aging and People with Disabilities (APD)

The APD and DD offices administer programs for seniors and people with physical and developmental disabilities. DD provides support to over 20,000 qualified adults and children with developmental disabilities. Most services operate through a network of state offices,

county agencies, community mental health programs, community developmental disability programs, and Area Agencies on Aging. Case managers work directly with individuals to determine eligibility for services, develop long-term plans, obtain needed services, and access benefits such as Medicaid and food stamps.

Programs that APD and DD operate include:

- *Medicaid long-term care services* – Supports seniors and people with disabilities who need assistance with activities of daily living. These services can be provided in the individual's home or in community-based programs such as assisted living facilities and adult foster homes, or in nursing facilities.
- *Comprehensive services for the developmentally disabled* – Adults with developmental disabilities may be eligible for services ranging from assistance with living independently, to 24-hour comprehensive care. Services are provided in a variety of settings including group homes, foster homes and state-operated group homes. Children with developmental disabilities may be eligible for services ranging from family support and in-home services to out-of-home placements. Placements can be to proctor care, foster homes, or other residential settings.
- *Community-based servicers* – Eligibility determinations and case management services are provided by Community Developmental Disability Programs (CDDP's) located in each county and usually operated by local county government. They administer residential care, employment services, family support, in-home support, and crisis and protective services.
- *State-operated group homes* – The state also operates 23 group homes for people with developmental disabilities who have severe medical and/or behavioral problems.
- *Federal disability determinations* – Two groups within APD provide disability determination services: Disability Determination Services (DDS) and the

Collaborative Disability Determination Unit (**CDDU**). DDS assists with applications for federal disability benefits Social Security and Disability Insurance (**SSDI**) and Supplemental Security Income (**SSI**) and is entirely federally funded. As of March 2012 *[next update available July 2014 - http://www.socialsecurity.gov/policy/docs/stacomps/ssi_sc/index.html]*, nearly 201,460 Oregonians received approximately \$160.8 million per month in SSDI and SSI disability benefits which then flow into the state economy. The CDDU is comprised of three program teams: the Presumptive Medicaid Disability Determination Team (**PMDDT**), the State Family Pre-SSI/SSDI (**SFPSS**) program team, and the Children's Benefits Unit. These teams provide disability determinations for Medicaid and SFPSS service; assist clients with the Social Security application and appeals process; and provide representative payee services for children in DHS custody.

DHS Office of Vocational Rehabilitation (VR)

The office of VR has field locations throughout the state to provide vocational services to people with disabilities. Services include vocational evaluation, training, restorative services, transportation, job placement, job supplies, and related services. Services are funded with federal dollars that require state matching funds. VR also receives funding for Independent Living Services. These dollars are passed through to the seven independent living centers across the state.

Oregon Commission for the Blind

The Commission for the Blind assists eligible blind individuals to be self-sufficient through an array of vocational services and independent living supports. Services include youth/transition services for young adults entering the work force, vocational counseling, direct training, job placement assistance, and resources for businesses. The Businesses Enterprise Program provides self-employment for blind individuals through operation of cafeteria and other food vending services in various state agencies. The Commission's

Orientation and Career Center serves people with imminent or recent loss of sight by offering counseling, assessments, training, and other transition assistance.

State Independent Living Council (SILC)

SILC is a federally mandated body appointed by the Governor. It promotes self-determination, community inclusion, and peer mentoring of people with all types of disabilities. SILC works closely with VR, the Oregon Commission for the Blind, private nonprofit Centers for Independent Living (**CILs**), and others, to provide service coordination and education related to the philosophy of Independent Living, as defined in the Rehabilitation Act. SILC co-develops a State Independent Living Plan (**SILP**) and evaluates its implementation. SILC identifies independent living service needs and surveys consumer satisfaction with services provided by CILs, so that the community being served has a prominent role in service design.

Office of the Long-Term Care Ombudsman

This independent agency serves as the consumer advocate for residents of long-term care facilities in Oregon. The agency staff and its certified volunteers monitor care, investigate and resolve resident and citizen complaints, and offer consultations to residents, families, other state agencies, and the public. Substantiated complaints are forwarded to APD for formal investigation and regulatory follow-up. The office is federally mandated through the Older Americans Act and through Oregon statute.

School-Based Disability Services

Infants and school-age children with disabilities are often eligible to receive ancillary disability-related services such as Early Intervention, assistive technology, vocational training, and job placement as part of the state's special education system. For more information on these services, see the *Special Education* Background Brief.

Sheltered Workshops can violate the Americans with Disabilities Act

A sheltered workshop is a place where disabled individuals are employed, at usually much less than minimum wage, to perform unskilled, production-type work. Such a facility may be publicly or privately organized and funded, and may accept public contract work. Sheltered work settings are not integrated, meaning disabled persons who work there have little or no contact with other employees who are not also disabled.

In late 2011, the U.S. Department of Justice (**Justice**) began investigating whether sheltered workshops supported by Oregon violated the “integration mandate” of Title II of the Americans with Disabilities Act. (The integration mandate requires the most community-integrated setting possible, not segregation and institutionalization.) About three months later, early in 2012, a class-action lawsuit was filed in federal district court alleging exactly that violation. In the first half of 2013: Justice joined the lawsuit; the Governor issued executive order 13-04 to phase-out state support of sheltered work; and the district court ruled in favor of the plaintiffs, finding that Oregon had come to rely on sheltered workshops rather than providing supported employment services, a practice that failed to move persons with disabilities into mainstream jobs.

The use of sheltered workshops, when relied on as a permanent or long-term employment solution for disabled individuals, is largely viewed as a modern form of segregated institutionalization of disabled persons.

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