Comparison of Long-Term Care Settings in Oregon, 2018

	Assisted Living (AL)	Residential Care (RC)	Memory Care (MC)	Adult Foster Homes (AFH)	Nursing Facilities (NF)
Number of facilities	227[a]	297[a]	186	1,584	137
Total capacity (beds)	15,264	11,510	6,574	7,064	11,464
Average licensed capacity per facility	67	27	35	3.9	84
Minimum number of licensed beds	12	4	8	1	5
Maximum number of licensed beds	180	165	114	5	214
Average occupancy rate	77%	75%	85%	84%	67%
Facility Size					
Less than 50 beds	26%	79%	78%	100%	18%
50–99 beds	65%	15%	22%	-	53%
100–149 beds	9%	4%	<1%	-	22%
More than 149 beds	<1%	1%	-	-	7%
Resident Characteristics					
White, non-Hispanic	91%	91%	87%	86%	83%
African American or Black	<1%	2%	1%	2%	2%
Hispanic	1%	1%	2%	3%	1%
Other or Unknown Race/Ethnicity	6%	3%	5%	8%	12%
Female	71%	65%	73%	62%	58%
Age 65–84	41%	41%	47%	40%	52%
Age 85+	53%	47%	50%	38%	28%
Assistance with Activities of Daily Living (ADLs)[b]					
Eating	4%	10%	26%	27%	54%
Dressing	37%	51%	83%	60%	96%
Bathing	55%	68%	92%	80%	97%
Using the bathroom	32%	39%	78%	53%	96%
Walking/Mobility[c]	24%	28%	48%	47%	96%/94%
Chronic Medical Conditions					
Alzheimer's disease/dementia	27%	38%	97%	46%	18%
Hypertension	53%	52%	47%	48%	70%
Depression	30%	36%	34%	40%	35%
Serious mental health illness	5%	12%	6%	19%	5%[d]
Diabetes	22%	23%	15%	21%	32%
Cancer	9%	9%	7%	8%	10%
Osteoporosis	21%	20%	20%	18%	11%
Arthritis	32%	27%	31%	36%	25%

a. This figure includes all AL or RC settings, including those with MC units.

b. For AL, RC, MC, and AFHs, assistance with ADLs means any assistance; NF includes residents who had "some dependence" or "dependent".

c. For AL, RC, MC, and AFHs mobility referred to walking or moving around; NF reports transferring (96%) and bed mobility (94%).

d. NF reports "Severe & Persistent Mental illness" which includes manic depression and schizophrenia.

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	AL	RC	MC	AFH	NF
Length of Stay[a]					
30 days or less	9%	15%	5%	13%	72%
31-90 days	10%	10%	12%	14%	20%
91-180 days	12%	10%	9%	9%	4%
181 days – < 1 year	14%	13%	16%	16%	2%[a]
1–2 years	15%	15%	20%	9%	1%
2–4 years	20%	25%	21%	18%	1%
More than 4 years	20%	12%	15%	21%	0%
Top Payer Sources[b]					
Private pay	59%	59%	51%	43%	12%
Medicaid	40%	39%	48%	57%	60%
Monthly Medicaid Payment for Lowest Service Level[c]					
Effective February 2018	$1,184	$1,475	$3,870	$1,461	$8,606
Effective February 2017	$1,128	$1,405	$3,686	$1,371	$7,986
Average Total Monthly Private Pay Rates[d]					
December 2017	$3,959	$4,497	$5,620	$3,492	$8,784[e]

a. The full NF report provides figures from 30 days or less to 365 days.
b. Totals do not equal 100% because some years included additional payer sources (e.g. other). Medicare FFS was the second largest payer source for NFs (15%). Note that Medicare does not pay for AL/RC/MC/AFH services.
c. AL/RC/MC/AFH Medicaid rates reflect service payments and do not include a room and board fee of $571 per month in 2017.
d. The monthly rates for AL, RC, and MC exclude 4 facilities with rates that were outliers. See the full report for an explanation.
e. The 2017 rate for a semi-private room in Oregon. Source: https://www.genworth.com/about-us/industry-expertise/cost-of-care.html

The Oregon legislature allocated funding to study five types of settings that provide assistance with personal care, supervision, and health monitoring to adults who have physical and/or cognitive impairments. The goal was to collect and analyze data that could inform local and statewide planning and policymaking. The Oregon Department of Human Services (DHS) collaborated with Portland State University, Oregon State University, and stakeholders to produce several reports on the state of long-term care available at: https://www.oregon.gov/DHS/SENIORS-DISABILITIES/Pages/publications.aspx and https://www.pdx.edu/ioa/oregon-community-based-care-project

These five setting types are licensed and monitored by DHS and are staffed 24-hours daily to respond to the personal care, health, and social needs of residents. **Assisted Living facilities (ALs)** have private, single-occupancy apartments with a bathroom and kitchenette. **Residential Care facilities (RCs)** may provide shared or private apartments and bathrooms. **Memory Care communities (MCs)** are designated for residents with Alzheimer's disease or other types of dementia. Memory care units are secured to prevent residents from leaving unescorted and require dementia care training. **Adult Foster Homes (AFHs)** are single-family residences with a live-in operator who provides or coordinates care for up to five unrelated adults. **Nursing Facilities (NF)** provide medical care and monitoring for people needing on-going skilled nursing care. Of these five settings, NFs provide the most intensive level of care and must meet federal as well as state requirements for staffing and services.

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