

Secretary of State
NOTICE OF PROPOSED RULEMAKING HEARING
A Statement of Need and Fiscal Impact accompanies this form.

Oregon Health Authority (OHA), Division of Medical Assistance Programs (Division)	410	
Agency and Division	Administrative Rules Chapter Number	
Sandy Cafourek	500 Summer St NE, Salem, OR 97301	(503) 945-6430
Rules Coordinator	Address	Telephone

RULE CAPTION

Amend Rule Text for Clarity and to Ensure Language Is Consistent with Division Prior Authorization Requirements
Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.

October 15, 2014	10:30 a.m.	500 Summer St. NE, Salem, OR 97301	Rm. 137B	Sandy Cafourek
Hearing Date	Time	Location		Hearings Officer

Auxiliary aids for persons with disabilities are available upon advance request.

RULEMAKING ACTION

Secure approval of new rule numbers (Adopted or Renumbered rules) with the Administrative Rules Unit prior to filing.

ADOPT:

AMEND: OAR 410-131-0080

REPEAL:

RENUMBER:

AMEND & RENUMBER:

Stat. Auth. : ORS 413.042, 414.065

Other Auth.:

Stats. Implemented: ORS 414.065

RULE SUMMARY

The Division needs to amend the rule listed above to ensure clarity and consistency in rule text.

The agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing the negative economic impact of the rule on business.

October 17, 2014 by 5 p.m. Send written comments to: dmap.rules@state.or.us

Last Day for Public Comment (Last day to submit written comments to the Rules Coordinator)



Signature

Rhonda Busek

8-14-14

Date

Note: Hearing Notices must be submitted by the 15th day of the month to be published in the next month's *Oregon Bulletin*.

Secretary of State

STATEMENT OF NEED AND FISCAL IMPACT

A Notice of Proposed Rulemaking Hearing or a Notice of Proposed Rulemaking accompanies this form.

Oregon Health Authority (Authority), Division of Medical Assistance Programs (Division) 410
Agency and Division Administrative Rules Chapter Number

Amend Rule Text for Clarity and to Ensure Language Is Consistent with Division Prior Authorization Requirements
Rule Caption (Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.)

In the Matter of: The proposed amendment of administrative rules that govern the Physical and Occupational Therapy Services program. The Division will amend OARs 410-131-0080.

Statutory Authority: ORS 413.042, 414.065

Other Authority:

Stats. Implemented: ORS 414.065

Documents Relied Upon, and where they are available: None

Need for the Rule(s): The Division needs to amend the rule listed above to ensure clarity and consistency in rule text.

Fiscal and Economic Impact: \$0

Statement of Cost of Compliance:

1. Impact on state agencies, units of local government and the public (ORS 183.335(2)(b)(E)): No fiscal or economic impact is anticipated for other state agencies, units of local government, or the general public.
2. Cost of compliance effect on small business (ORS 183.336): None.
 - a. Estimate the number of small businesses and types of business and industries with small businesses subject to the rule: Minimal to no impact on small business.
 - b. Projected reporting, recordkeeping and other administrative activities required for compliance, including costs of professional services: None.
 - c. Equipment, supplies, labor and increased administration required for compliance: None.

How were small businesses involved in the development of this rule? Small businesses were not involved.

Administrative Rule Advisory Committee consulted?: No.

If not, why?: The Authority determined a Rule Advisory Committee was not necessary because changes are considered minor changes with no significant impact to providers, the Division, or any other agency.



Signature

Rhonda Busek

8-14-14

Date

Administrative Rules Unit, Archives Division, Secretary of State, 800 Summer Street NE, Salem, Oregon 97310. ARC 925-2007

410-131-0080 Therapy Plan of Care and Record Requirements

(1) A therapy plan of care is required for prior authorization (PA) for payment.

(2) The therapy plan of care must include:

(a) Client's name, diagnosis, and type, amount, frequency and duration of the proposed therapy;

(b) Individualized, measurably objective short-term and/or long-term functional goals;

(c) Documented need for extended service, considering 60 minutes as the maximum length of a treatment session;

(d) Plan to address implementation of a home management program as appropriate, from the initiation of therapy forward;

(e) Dated signature of the therapist or the prescribing practitioner establishing the therapy plan of care; and

(f) For home health clients, any additional requirements included in Oregon Administrative Rule (OAR) 410 division 127 (e.g. Evidence of certification of the therapy plan of care by the prescribing practitioner).

(3) The therapy treatment plan and regimen will be taught to the client, family, foster parents, or caregiver during the therapy treatments. No extra treatments will be authorized for teaching.

(4) A therapy plan of care ~~requires reauthorization every 30 days:~~

~~(a) shall comply with the relevant state licensing authority's standards (e.g., Oregon licensed physical therapists are governed by OAR 848 division 40).~~

~~(5) If a state licensing authority has not adopted therapy plan of care standards, the therapy plan of care must include:~~

~~(a) The need for continuing therapy must be clearly stated; and~~

~~(b) Changes to the therapy plan of care, including changes to duration and frequency of intervention, and~~

~~(c) must be Any changes or modifications to the plan of care shall be documented, signed, and dated by the prescribing practitioner or therapist who developed the plan.~~

~~(6) Therapy Records must include:~~

~~(a) A written referral, including:~~

(A) The client's name;

(B) The ICD-9-CM diagnosis code; and

(C) ~~Must~~Shall specify the type of services, amount, and duration required.

(b) A copy of the signed therapy plan of care must be on file in the provider's therapy record prior to billing for services; ~~The therapy plan of care must be reviewed and signed by the prescribing practitioner every 30 days.~~

(c) Documents, evaluations, re-evaluations, and progress notes to support the therapy treatment plan and prescribing provider's written orders for changes in the therapy treatment plan;

(d) Modalities used on each date of service;

(e) Procedures performed and amount of time spent performing the procedures is documented and signed by the therapist; and

(f) Documentation of splint fabrication and time spent fabricating the splint.

Stat. Auth.: ORS 413.042

Stats. Implemented: ORS 688.135, 414.065