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School Physical Therapy and Telehealth V.4

FREQUENTLY ASKED QUESTIONS



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Introduction

The Oregon Department of Education is providing this FAQ in response to questions from school districts related to Physical Therapy service provision via telehealth. The scope of practice for Physical Therapists (PTs) is defined by the Oregon Board of Physical Therapy. The Board has verified the accuracy of the statements included herein as it pertains to Board rules. Nothing in this document should be interpreted as guidance that PTs are permitted to operate outside of their appropriate scope of practice. This document is meant to be a resource in combination with other guidance and resources on ODE’s [Planning for the 2022-2023 School Year](#) web page.

Table of Contents

Introduction	2
Table of Contents.....	2
School Physical Therapy Telehealth FAQs	3
The Provision of a Free Appropriate Public Education (FAPE)	3
The Provision of Telehealth	3
Consent Related to Telehealth/Telepractice	4
Additional Special Education Considerations	6
Privacy Concerns and Virtual Platforms	6
School Medicaid Billing	8
Future Updates	8
Resources for Implementation of Telehealth.....	9
Additional Resources:	9
Contacts	9

School Physical Therapy Telehealth FAQs

The Provision of a Free Appropriate Public Education (FAPE)

Each school district/school program must ensure that students who experience disabilities have equal access to the same opportunities available to the general student population, including the provision of a free appropriate public education (FAPE) (34 CFR §§ 104.4, 104.33 (Section 504) and 28 CFR § 35.130 (Title II of the ADA). State Education Agencies, Local Education Agencies, schools, and Early Childhood Special Education programs must ensure that, to the greatest extent possible, each student who experiences a disability be provided the special education and related services identified in the student's Individualized Education Program (IEP)/Individualized Family Service Plan (IFSP) developed under IDEA, or a plan developed under Section 504. (34 CFR §§ 300.101 and 300.201 (IDEA), and 34 CFR § 104.33 (Section 504).

School districts and/or school programs must make every effort to provide special education and related services, which may include mental and/or behavioral health services, to students in accordance with the student's IEP, IFSP, or, for students entitled to FAPE under Section 504, consistent with a plan developed to meet the requirements of Section 504. The services in a student's IEP, IFSP, or 504 Plan must be delivered, and teams should work with students and families to determine the methodology for delivering the services. The provision of health services via Telehealth is one methodology that may be utilized to ensure a FAPE.

Please see [this letter regarding FAPE](#) and the [Individualized COVID-19 Recovery Services web page](#) for additional information about the provision of FAPE during the pandemic.

The Provision of Telehealth

Can Physical Therapists provide Telehealth (or telemedicine) services as part of a child's education?

Yes. The Oregon Physical Therapist Board allows for telehealth delivery of services. The Board defines telehealth [OAR 848-040-0100](#) as:

(13) "Telehealth service" means a physical therapy intervention, including assessment or consultation, that can be safely and effectively provided using synchronous two-way interactive video conferencing, or asynchronous video communication, in accordance with generally accepted healthcare practices and standards. For purposes of these rules, "telehealth service" also means, or may be referred to, as "telepractice, teletherapy, or telerehab."

In addition, Telehealth services provided by a licensed Physical Therapist must follow requirements outlined in [OAR 848-140-0180](#). They include requirements that:

- A Licensee may provide telehealth services to a patient who is domiciled or physically present in the state of Oregon at the time the services are provided. An aide may not provide telehealth services.
- Telehealth services provided must conform to the scope and standards of practice and documentation as provided in Oregon Revised Statutes 688.010 through 688.201 and these Division 40 rules. Telehealth services must be at least equivalent to the quality of services delivered in-person.

- Prior to the initiation of telehealth services, a Licensee shall obtain the patient’s consent to receive the services via telehealth. The consent may be verbal, written, or recorded and must be documented in the patient’s permanent record.
- When providing telehealth services, a Licensee shall have procedures in place to address remote medical or clinical emergencies at the patient’s location.
- The application and technology used to provide telehealth services shall meet all standards required by state and federal laws governing the privacy and security of a patient’s protected health information.

Can a Physical Therapist Assistant provide services via telehealth?

Yes. A licensed Physical Therapist Assistant may provide telehealth services under the supervision of a licensed Physical Therapist as defined in [Division 15 and 40](#) of the Board rules. However, as per [OAR 848-040-0180\(1\)](#), Physical Therapist aides may not provide telehealth services.

Can a PT/PTA in another state provide services via telehealth to a student in Oregon?

Oregon PT Board rules only allow a PT or PTA to provide care to a student domiciled in Oregon if that provider is licensed in Oregon or holds a [compact privilege](#) to practice in Oregon. If the student lives in another state, the Oregon licensee cannot treat that individual even if they attend school in Oregon. If the student lives in Oregon but is temporarily located in another state, the PT or PTA can provide telehealth to the student while the student is out of state.

Can a PT with Oregon licensure provide services via telehealth to an Oregon-enrolled student who is temporarily located in another state? For example, can a PT with Oregon licensure provide services via telehealth to a student is at a grandparent’s house in Washington during the day while their parents are at work?

Yes. Per [OAR 848-040-0180\(1\)](#), a Licensee may provide telehealth services to a patient/student who lives in Oregon and is temporarily located out of state. However, a Licensee providing telehealth services to a person who is domiciled in another state and physically present in that state at the time the telehealth services are being provided, may be required to be licensed in the state where the services are being rendered ([OAR 848-040-0180\(6\)](#)).

Consent Related to Telehealth/Telepractice

Prior to the initiation of telehealth services, a Licensee shall obtain the patient’s consent to receive the services via telepractice. The consent may be verbal, written, or recorded and must be documented in the patient’s permanent record ([OAR 848-040-0180](#)).

If we cannot get a response to our consent to telepractice, can PTs still provide materials for parents to work on with their child?

Consent is required prior to the initiation of the provision of services via telehealth. This does not prohibit a PT from providing resources to parents outside of direct therapy.

If a PT is uploading learning materials on an online platform, but not meeting with the student or family members (via phone, video conferencing, etc.), is consent required?

Same as above. Consent is required prior to the initiation of the provision of services via telehealth. This does not prohibit a PT from providing resources to parents outside of direct therapy.

If two PTs are providing services via telehealth to the same student in separate sessions, do they both need to obtain consent?

No. The rules state that, prior to the initiation of telehealth services, “a” Licensee shall obtain the patient’s consent to receive the services via telehealth. However, it is best practice to ask for consent if a Licensee is new to the patient/student in order to support a positive relationship with the patient/student/parent and to ensure compliance in the event that the initial Licensee did not obtain or document consent.

When would a new telehealth consent need to be obtained?

Board rules are not specific about this. School districts may choose to adopt policies to support proper and efficient documentation. Please note, school districts and EI/ECSE programs that bill Medicaid have additional telehealth consent requirements as per [OAR 410-133-0080\(13\)\(b\)](#): Consent must be obtained and documented annually or with change in services on the child/student’s plan of care.

What is considered consult in relation to telehealth and would necessitate consent?

[OAR 848-040-0180](#) states that services provided via telehealth must conform to the scope and standards of practice and documentation as provided in Oregon Revised Statutes (ORS) [688.010 through 688.201](#) as well as Division 40 rules. In regards to consultation, [ORS 688.010\(5\)\(d\)](#) states that the practice of physical therapy includes consulting or providing educational services to a patient for the purposes of: Examining, evaluating and testing for mechanical, physiological and developmental impairments, functional limitations and disabilities or other neuromusculoskeletal conditions in order to determine a physical therapy diagnosis or prognosis or a plan of physical therapy intervention and to assess the ongoing effects of physical therapy intervention.

- a. Alleviating impairments and functional limitations by designing, implementing, administering and modifying physical therapy interventions.
- b. Reducing the risk of injury, impairment, functional limitation and disability by physical therapy interventions that may include as a component the promotion and maintenance of health, fitness and quality of life in all age populations.

The Licensee should obtain consent if any of the services that are being provided meet the Board definitions of consult and/or direct intervention. For further inquiries in regards to what activities may or may not be considered consult, please contact the Board (contact info is provided at the end of the document).

Additional Special Education Considerations

How are PTs expected to document each goal and student progress? Are there forms available to use for documentation?

In regards to education documentation requirements related to an IEP/IFSP, [OAR 581-015-2200\(1\)\(c\)](#) requires “a description of how the child's progress toward meeting the annual goals will be measured and when periodic reports on the progress the child is making toward meeting the annual goals (such as through the use of quarterly or other periodic reports, concurrent with the issuance of report cards) will be provided”. PTs need to document progress towards meeting the annual goals in a manner consistent with requirements specified in the IEP in alignment with district policy and procedure and Board documentation requirements. PT documentation requirements can be found at [OAR 848-040-0110](#). Each employer has different software and filing systems, the board does not provide forms for recordkeeping.

How do PTs address the fact that sessions for telepractice are scheduled and students are not showing up?

This situation should be handled in the same way as you would if a student missed an in-person service. It is important to follow district policy, document your efforts, communicate with the student and family, and consult with the IEP/IFSP team if needed.

Privacy Concerns and Virtual Platforms

Are records created by medically-licensed staff providing health related services to students pursuant to an IEP/IFSP or Section 504 plan considered education records and thus, subject to FERPA privacy protections? Is this any different with Telehealth?

Family Education Rights and Privacy Act (FERPA) requirements apply to the information contained in student education records. FERPA does not specifically address online settings. It is important to note that records created during the provision of school health services, whether provided in-person or via Telehealth, are considered education records as defined by FERPA at 34 CFR § 99.2. However, in regards to Telehealth, there are HIPAA security implications because the health services are provided via an electronic platform.

See [Student Privacy Considerations and Remote/Online Education Platforms](#) and [Joint Guidance on the Application of the Family Educational Rights and Privacy Act \(FERPA\) and the Health Insurance Portability Act of 1996 \(HIPAA\) To Student Records \(December 2019 Update\)](#) for more information about FERPA, HIPAA, and digital privacy.

Can I use Skype, Zoom, or Google to provide PT telehealth services?

It depends. There are multiple factors to consider when using telehealth technology. The Office for Civil Rights (OCR) at the Department of Health and Human Services (HHS) is responsible for enforcing certain regulations issued under the Health Insurance Portability and Accountability Act (HIPAA). Telehealth services are subject to HIPAA requirements for security, transmission, and confidentiality. Compliance with HIPAA requires that covered entities have appropriate

administrative, physical, and technical safeguards in place and that they have reasonably implemented those safeguards. See the [HIPAA Security Series 101](#) for more information.

However, during the COVID-19 national emergency, which also constitutes a nationwide public health emergency, OCR will exercise its enforcement discretion and will not impose penalties for noncompliance with the regulatory requirements under the HIPAA Rules against covered health care providers in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency. Covered entities seeking to use audio or video communication technology to reach patients where they live can use any non-public facing remote communication product that is available to communicate with patients.

To that end, OCR will temporarily allow providers to use applications such as Apple FaceTime, Facebook Messenger video chat, Google Hangouts video or Skype. The agency also specified that Facebook Live, Twitch, TikTok, and other public-facing video communication **should not** be used in the provision of telehealth.

Despite this temporary relaxation of rules, OCR does note that healthcare providers should notify parents that such third-party apps may pose privacy risk. In addition, providers should enable all available encryption and privacy modes when using such applications.

See [Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency](#) for the complete release. OCR has also published an [FAQ](#) related to this change.

School Medicaid Billing

Can school districts bill Medicaid for school health services (SLP, OT, RN, PT) provided through telehealth?

Yes. A school district may bill Medicaid for health services provided to a student pursuant to their IEP or IFSP delivered in person or via telehealth when these conditions are met:

1. A school district must be an enrolled as a School Medical provider
2. Student must be an actively enrolled Medicaid recipient
3. Service must be identified on the student's IEP/IFSP
4. A school district must obtain informed written consent to access students benefits
5. Health service delivery must be aligned with Licensing Board requirements, including documentation. Documentation must include the fact the service was provided via telehealth.

Documentation of attendance is a critical component of service provision and is required for Medicaid billing. In order to align with Medicaid documentation requirements and to mitigate audit risk, when documenting service provision, PTs should document their location, the location of the student, the therapy provided, and the service delivery method (in-person or via telehealth). In the event that a Physical Therapy Assistant is providing the service, documentation of supervision by the supervisor and their location must be maintained as well. Please see OHA's [Telemedicine—Telehealth Guidance for School-Based Health Services Providers](#) for additional information.

Please note: Current Board rules do not require documentation of the location of the Physical Therapist/Physical Therapy Assistant and student. This is a Medicaid requirement.

Future Updates

This document will continue to be updated based on:

- The continuing impacts of COVID-19 and the State's evolving mitigation efforts as directed by Governor Brown and the Oregon Health Authority.
- Input from educators, students, families, and community partners.
- Updates from federal partners.
- An ongoing review of equity impacts.

Resources for Implementation of Telehealth

- [Northwest Regional Telehealth Resource Center](#)
- [Roadmap for Action Advancing the Adoption of Telehealth in Child Care Centers and Schools to Promote Children’s Health and Well-Being](#)
- [The National Consortium of Telehealth Resource Centers](#)

Additional Resources:

- [Joint Guidance on the Application of the Family Educational Rights and Privacy Act \(FERPA\) and the Health Insurance Portability Act of 1996 \(HIPAA\) To Student Records \(December 2019 Update\)](#)
- [American Physical Therapy Association - Telehealth](#)
- [The Federation of State Boards of Physical Therapy](#)
- [Oregon Board of Physical Therapy](#)
- [PT Compact](#)

Contacts

Oregon Board of Physical Therapy

- [Oregon Board of Physical Therapy](#), 971-673-0200, physical.therapy@oregon.gov

Oregon Department of Education – School Health

- Ely Sanders, School Health Specialist, ely.sanders@ode.oregon.gov

Oregon Department of Education – School Medicaid

- Jennifer Dundon, Operations & Policy Analyst, jennifer.dundon@ode.oregon.gov