



TEMPORARY ADMINISTRATIVE ORDER
INCLUDING STATEMENT OF NEED & JUSTIFICATION

DMAP 5-2021

CHAPTER 410
OREGON HEALTH AUTHORITY
HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

FILED

02/01/2021 1:54 PM
ARCHIVES DIVISION
SECRETARY OF STATE
& LEGISLATIVE COUNSEL

FILING CAPTION: Removes Rule Language Regarding Blood Lead Screening That is Inaccurate and Conflicts with Other Rule

EFFECTIVE DATE: 02/01/2021 THROUGH 07/30/2021

AGENCY APPROVED DATE: 02/01/2021

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NEED FOR THE RULE(S):

This temporary rule change removes inaccurate and conflicting language regarding blood lead screening and treatment for children in the Oregon Health Plan. As the medical standards for screening and treating lead poisoning have changed over time some of the details in this rule are out of date. To correct this the agency has promulgated a new rule, OAR 410-130-0246. The new rule is generally applicable for OHP including the EPSDT program. This temp rule change will remove the outdated language from 0245 and replace it with a reference to the new updated rule.

JUSTIFICATION OF TEMPORARY FILING:

The Authority finds that failure to act promptly will result in conflicting and potentially unenforceable rules regarding blood lead screening and treatment for children on the Oregon Health Plan.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE:

None

AMEND: 410-130-0245

RULE TITLE: Early and Periodic Screening, Diagnostic and Treatment Program

RULE SUMMARY: OAR 410-130-0245 describes the EPSDT program, which ensures the right of children to have certain screenings and treatments under the Oregon Health Plan. The requirements for screening and treatment for lead poisoning have been detailed here. As the medical standards for screening and treating lead poisoning have changed over time some of the details in this rule are out of date. To correct this the agency has promulgated a new rule, OAR 410-130-0246. The new rule is generally applicable for OHP including the EPSDT program. This temp rule change will remove the outdated language from 0245 and replace it with a reference to the new updated rule.

RULE TEXT:

(1) The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) program, formerly called Medichex, offers "well-child" medical exams with referral for medically appropriate comprehensive diagnosis and treatment for all

children (birth through age 20) covered by the Oregon Health Plan (OHP) Plus benefit package.

(2) Screening Exams:

(a) Physicians (MD or DO), nurse practitioners, licensed physician assistants and other licensed health professionals may provide EPSDT services. Screening services are based on the definition of "Preventive Services" in Oregon Health Plan OAR 410-141-0000, Definitions;

(b) Periodic EPSDT screening exams must include:

(A) A comprehensive health and developmental history including assessment of both physical and mental health development;

(B) Assessment of nutritional status;

(C) Comprehensive unclothed physical exam including inspection of teeth and gums;

(D) Appropriate immunizations;

(E) Lead testing as required by OAR 410-130-0246;

(F) Other appropriate laboratory tests (such as anemia test, sickle cell test, and others) based on age and client risk;

(G) Health education including anticipatory guidance;

(H) Appropriate hearing and vision screening.

(c) The provider may bill for both lab and non-lab services using the appropriate Current Procedural Terminology (CPT) and Health care Common Procedure Coding System (HCPCS) codes. Immunizations must be billed according to the guidelines listed in OAR 410-130-0255;

(d) Inter-periodic EPSDT screening exams are any medically appropriate encounters with a physician (MD or DO), nurse practitioner, licensed physician assistant, or other licensed health professional within their scope of practice.

(3) Referrals:

(a) If, during the screening process (periodic or inter-periodic), a medical, mental health, substance abuse, or dental condition is discovered, the client may be referred to an appropriate provider for further diagnosis and/or treatment;

(b) The screening provider shall explain the need for the referral to the client, client's parent, or guardian;

(c) If the client, client's parent, or guardian agrees to the referral, assistance in finding an appropriate referral provider and making an appointment should be offered;

(d) The child's CCO or the FFS program will also make available care coordination as needed.

STATUTORY/OTHER AUTHORITY: ORS 413.042

STATUTES/OTHER IMPLEMENTED: ORS 414.025, 414.065, 414.150