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TEMPORARY ADMINISTRATIVE ORDER
INCLUDING STATEMENT OF NEED & JUSTIFICATION

DMAP 14-2020

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

FILED
03/26/2020 2:18 PM
ARCHIVES DIVISION
SECRETARY OF STATE
& LEGISLATIVE COUNSEL

FILING CAPTION: Adds Telemedicine Option to Align With Updated Practice Guidelines and Respond to Infectious Disease Outbreaks.

EFFECTIVE DATE: 03/26/2020 THROUGH 09/21/2020

AGENCY APPROVED DATE: 03/26/2020

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Filed By:
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NEED FOR THE RULE(S):

The Division needs to amend these rules to support appropriate response during an outbreak or epidemic of an infectious disease. The amended rule authorizes the Division to operationalize intended coverage of telemedicine services as described in the Health Evidence Review Commission's (HERC) guideline note A5.

JUSTIFICATION OF TEMPORARY FILING:

The Authority finds that failure to act promptly will result in serious prejudice to the public interest, the Authority, and recipients of Medicaid benefits. These rules need to be adopted promptly so that the Authority may operationalize intent of Health Evidence Review Commission's (HERC) Telehealth coverage guidelines. This rule needs to be adopted promptly in order to support appropriate response to an outbreak or epidemic of infectious disease and assure appropriate access to qualified health care providers.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE:

OAR: 410-172-0850: <https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1740>
HERC Guideline Note A5: <https://www.oregon.gov/oha/hpa/dsi-herc/Pages/index.aspx>

AMEND: 410-170-0080

RULE TITLE: Services

RULE SUMMARY: The Health Evidence Review Commission (HERC) has updated guidelines for coverage of telehealth services. These updates support appropriate response to an outbreak or epidemic of an infectious disease through increased access to appropriate health care resources. This temporary rule amendment authorizes the Authority and Division to operationalize the intent of the revisions to telehealth services.

RULE TEXT:

(1) The BRS contractor shall and shall require that its BRS provider provide services to the BRS client in accordance with the BRS client's service plan.

(2) BRS contractor shall and shall require that its BRS provider staff structure and directly supervise all services.

(3) Types of Services:

(a) Milieu Therapy:

(A) The BRS contractor shall and shall require that its BRS provider provide the BRS client structured activities and planned interventions designed to normalize psycho-social development, promote safety, stabilize environment, and assist in responding in developmentally appropriate ways;

(B) The program's staff shall monitor the BRS client in these activities, which include developmental, recreational, academic, rehabilitative, or other productive work;

(C) Milieu therapy occurs in concert with one of the other types of services. Because milieu therapy must occur in concert with another BRS service, the BRS contractor may not and shall ensure that its provider does not count milieu therapy in the number of hours of BRS services provided to the BRS client per week.

(b) For crisis counseling, the BRS contractor shall or shall require that its BRS provider provide the BRS client counseling on a 24-hour basis to stabilize the client's behavior until the problem can be resolved or assessed and treated by a qualified mental health professional or licensed medical practitioner;

(c) For individual and group counseling, the BRS contractor shall or shall require that its BRS provider provide face-to-face individual or group counseling sessions to the BRS client that are designed to remediate the problem behaviors identified in the client's service plan;

(d) For parent training, the BRS contractor shall or shall require that its BRS provider provide planned activities or interventions (face-to-face or by telephone) to the BRS client's family or identified aftercare resource family. Parent training is designed to assist the family in identifying the specific needs of the BRS client, support the client's efforts to change, and improve and strengthen parenting knowledge or skills indicated in the service plan as being necessary for the client to return home or to another community living resource;

(e) For skills-training, the BRS contractor shall or shall require that its BRS provider provide the BRS client planned individual or group sessions using evidence-based or evidence-informed approaches or models designed to improve specific areas of functioning in the client's daily living as identified in the service plan. Skills-training may be designed to develop appropriate social and emotional behaviors, improve peer and family relationships, improve self-care, encourage conflict resolution, reduce aggression, improve anger control, and reduce or eliminate impulse and conduct disorders.

(4) Telemedicine for Behavior Rehabilitation Services

(a) To utilize telemedicine for services required by the BRS program, the BRS contractor and BRS providers shall comply with Telemedicine for Behavioral Health requirements found in OAR 410-172-0850 and comply with agency specific BRS Telemedicine program rules;

(b) The BRS contractor and BRS providers shall comply with OAR 410-141-3830, prioritized list of health services guidelines for telephone and e-mail consultation;

(c) The BRS contractor and BRS providers may utilize telemedicine for services that are not required to be provided face-to-face in an in-person setting.

(d) The BRS contractor may, or allow its BRS provider to, request prior written agency approval for its BRS program to utilize telemedicine for services that require a face-to-face setting when there is a documented barrier to providing in-person services.

(5) The BRS contractor shall or shall require its BRS provider to:

(a) Provide a combination of services necessary to comply with the BRS client's service plan and the requirements in OAR 410-170-0090 for the appropriate BRS type of care;

(b) Create and maintain written documentation describing the services provided to each BRS client that includes at a minimum the following information:

(A) Name of the BRS client;

(B) Date of service;

(C) Name and position of the staff member providing the service to the BRS client;

- (D) Length of time staff spent providing the service to the BRS client;
 - (E) Description of the service provided; and
 - (F) Description of the BRS client's participation in the service.
- (c) Create and maintain a written weekly record in each BRS client's case file with the total number of service hours provided each day to the client and a breakdown of the number of hours spent providing each type of service described in section (3) of this rule; and
- (d) Ensure that social service staff review the documentation described in this section each week for quality, content, and appropriateness with the BRS client's service plan.

STATUTORY/OTHER AUTHORITY: ORS 413.042, ORS 414.065, ORS 743A.058

STATUTES/OTHER IMPLEMENTED: ORS 414.065