



PERMANENT ADMINISTRATIVE ORDER

DMAP 36-2019
CHAPTER 410
OREGON HEALTH AUTHORITY
HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

FILED

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FILING CAPTION: Repeal of Home and Community Based Rules OAR 410-172-0700

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REPEAL: 410-172-0700

REPEAL: Temporary 410-172-0700 from DMAP 16-2019

RULE TITLE: 1915(i) Home and Community Based Services

NOTICE FILED DATE: 07/18/2019

RULE SUMMARY: Repealing HCBS rule in 410-172-0700 and replacing with a new chapter to comply with federal regulations.

RULE TEXT:

- (1) Habilitation services are designed to help an individual attain or maintain their maximal level of independence, including the individual's acceptance of a current residence and the prevention of unnecessary changes in residence. Services are provided in order to assist an individual to acquire, retain, or improve skills in one or more of the following areas: Assistance with activities of daily living, cooking, home maintenance, community inclusion and mobility, money management, shopping, community survival skills, communication, self-help, socialization, and adaptive skills necessary to reside successfully in home and community-based settings.
- (2) Psychosocial rehabilitation services are medical or remedial services recommended by a licensed physician or other licensed practitioner to reduce impairment to an individual's functioning associated with the symptoms of a mental disorder or to restore functioning to the highest degree possible.
- (3) Providers seeking reimbursement for the provision of rehabilitative behavioral health services shall meet one of the following qualifications:
 - (a) Physician or Physician Assistant licensed in the State of Oregon;
 - (b) Advanced Practice Nurse including Clinical Nurse Specialist and Certified Nurse Practitioner licensed by the Oregon Board of Nursing;
 - (c) Psychologist licensed by the Oregon Board of Psychology;
 - (d) Professional Counselor or Marriage and Family Therapist licensed by the Oregon Board of Licensed Professional Counselors and Therapists;
 - (e) Clinical Social Worker licensed by the Oregon Board of Licensed Social Workers;
 - (f) Licensed Psychologist Associate granted independent status as described in OAR 858-010-0039;

- (g) Licensed Master Social Worker licensed by the Oregon Board of Licensed Social Workers as described in OAR 877-015-0105;
 - (h) Licensed Occupational Therapist licensed by the Oregon Occupational Therapy Licensing Board;
 - (i) Organizational certificate of approval issued by the Division as described in OAR 309-012-0130 through 309-012-0220.
- (4) Board registered intern providers shall be supervised by a paid provider as described in section (3)(c–f) of this rule under an active board approved plan of practice and supervision and meet one of the following qualifications:
- (a) Psychologist Associate Residents as described in OAR 858-010-0037;
 - (b) Licensed Psychologist Associate under continued supervision as described in OAR 858-010-0038;
 - (c) Licensed Professional Counselor intern or Marriage and Family Therapist intern registered with the Oregon Board of Licensed Professional Counselors and Therapists as described in OAR 833-050-0011;
 - (d) Certificate of Clinical Social Work Associate issued by the Oregon Board of Licensed Social Workers as described in OAR 877-020-0009;
 - (e) Registered bachelor of social work issued by the Oregon Board of Licensed Social Workers as described in OAR 877-015-0105.
- (5) Providers exempt from licensure or registration per ORS 675.090(f), 675.523(3), or 675.825(c) shall be employed by or contracted with a provider organization certified by the Authority under ORS 430.610 to 430.695 as described in (3)(i) of this rule and meet one of the following qualifications:
- (a) Qualified mental health professional as defined in OAR 309-019-0105;
 - (b) Qualified mental health associate as defined in OAR 309-019-0105;
 - (c) Mental health intern as defined in OAR 309-019-0105; or
 - (d) Peer-Support Specialist as defined in OAR 410-180-0305;
 - (e) Recovery Assistant.
- (6) Providers of 1915(i) services may be required to meet Community Mental Health Program (CMHP) liability insurance requirements.
- (7) Due to federal requirements for the Authority to ensure the impartiality of paid providers rendering services to 1915(i) eligible members, providers may be restricted from conducting eligibility reviews or developing the behavioral health assessment or service plan.
- (8) To be eligible for services under the 1915(i) State Plan HCBS, the individual shall meet the following requirements:
- (a) Been diagnosed with a chronic mental illness as defined in ORS 426.495;
 - (b) Been assessed as needing assistance to perform at least two personal care services as identified in these rules due to a chronic mental illness.
- (9) Eligibility for 1915(i) services is determined by an external Independent and Qualified Agent (IOA) as identified by the Division.

STATUTORY/OTHER AUTHORITY: ORS 413.042, 430.640

STATUTES/OTHER IMPLEMENTED: 430.640, 430.705, 430.715, ORS 413.042, 414.025, 414.065