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NOTICE OF PROPOSED RULEMAKING
INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 847
OREGON MEDICAL BOARD

FILED
10/10/2025 2:52 PM
ARCHIVES DIVISION
SECRETARY OF STATE

FILING CAPTION: Implementing HB 3043 (2025) making updates the Health Professionals' Services Program

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 11/24/2025 5:00 PM

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

A public rulemaking hearing may be requested in writing by 10 or more people, or by a group with 10 or more members, within 21 days following the publication of the Notice of Proposed Rulemaking in the Oregon Bulletin or 28 days from the date the Notice was sent to people on the agency mailing list, whichever is later. If sufficient hearing requests are received, the notice of the date and time of the rulemaking hearing must be published in the Oregon Bulletin at least 14 days before the hearing.

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NEED FOR THE RULE(S)

The rulemaking is needed to implement HB 3043 (2025) updating the Health Professionals' Services Program (HPSP) by adding criteria to the initial evaluation process, updating definitions for direct supervisor and diversion agreements, and authorizing boards to define substantial noncompliance with the program, effective January 1, 2026. The proposed rulemaking updates the HPSP rules to align with HB 3043.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

ORS 677, https://www.oregonlegislature.gov/bills_laws/ors/ors677.html
HB 3043 (2025), https://olis.oregonlegislature.gov/liz/2025R1/Downloads/MeasureDocument/HB3043

STATEMENT IDENTIFYING HOW ADOPTION OF RULE(S) WILL AFFECT RACIAL EQUITY IN THIS STATE

The rulemaking implements HB 3043 (2025) updating the Health Professionals' Services Program (HPSP). The proposed rule will not impact racial equity.

FISCAL AND ECONOMIC IMPACT:

There is no additional impact to fiscal and economic impact to the Oregon Medical Board beyond that estimate for HB 3043 (2025). Minimal time and resources are needed to make these updates and align with HB 3043.

COST OF COMPLIANCE:

(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).

(1) The rule amendment will have no economic impact on state agencies, units of local government, or the public. (2) The

rule amendment applies to individual licensees of the Oregon Medical Board entering the HPSP; small businesses are not eligible to enter HPSP. (b) The rulemaking imposes no additional mandatory reporting, recordkeeping or other administrative requirements on small businesses. (c) The rulemaking imposes no additional requirements regarding equipment, supplies, labor or administration.

DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

Members of the Board who were consulted in the development of the rule represent small businesses. The rule was reviewed by the Administrative Affairs Committee of the Board on September 10, 2025 as well as the full Board at its quarterly meeting on October 2, 2025.

WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? NO IF NOT, WHY NOT?

The rule was reviewed by the Acupuncture Advisory Committee and Oregon Medical Board members who represent the interests of persons and communities likely to be affected by a proposed rule. Overall, Board and Committee are licensees of the Oregon Medical Board or members of the public.

RULES PROPOSED:
847-065-0010, 847-065-0015, 847-065-0020, 847-065-0025, 847-065-0030, 847-065-0035, 847-065-0040, 847-065-0045, 847-065-0050, 847-065-0055, 847-065-0065, 847-065-0070

AMEND: 847-065-0010

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0010
Purpose, Intent and Scope ¶

The Oregon Medical Board recognizes that substance use disorders and/or mental health disorders are potentially progressive, chronic ~~disease~~conditions. The Board believes that physicians, podiatric physicians, physician associates, and acupuncturists who develop these ~~disease~~conditions can, with appropriate treatment, be assisted with recovery and ~~return to the~~safely practice ~~of~~ medicine, podiatry, or acupuncture. It is the intent of the Board that a licensee with a substance use disorder and/or mental health disorder may have the opportunity to enter the Health Professionals' Services Program (HPSP). Participation in the HPSP does not shield a licensee from possible disciplinary action.
Statutory/Other Authority: ORS 676.190, 677.265, 67~~7~~6.200
Statutes/Other Implemented: ORS 676.1~~85-676.200~~90, ORS 676.185, 676.194, 676.200, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0015

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0015
Definitions ¶

The following definitions apply to OAR chapter 847, division 065, except as otherwise stated in the definition:¶
(1) "Assessment or evaluation" means the process an independent ~~third-party~~clinical evaluator uses to diagnose the licensee and to make treatment recommendations for the licensee.¶
(2) "Board" means the Oregon Medical Board.¶
(3) "Business day" means Monday through Friday, except legal holidays as defined in ORS 187.010 and ORS 187.020.¶
(4) "Contractor" means the entity that has contracted with the health profession licensing boards to ~~conduct~~administer the HPSP.¶
(5) "Diagnosis" means the principal mental health or substance use diagnosis listed in the current Diagnostic Statistical Manual (DSM). The diagnosis is determined through the assessment and any examinations, tests or consultations suggested by the assessment.¶
(6) "DSM" means the Diagnostic and Statistical Manual of Mental Disorders, published by the American Psychiatric Association.¶
(7) "Federal regulations" means:¶
(a) As used in ORS 676.185(~~5~~4)(d), a "positive toxicology test result as determined by federal regulations pertaining to drug testing" means a test result that meets or exceeds the cutoff concentrations shown in 49 CFR § 40.87 (2009); and¶
(b) As used in O~~RS 676.190(6)(g), requiring a "licensee to submit to~~ regon Laws 2025, chapter 499, section 3(1)(d), "random drug or alcohol testing in accordance with federal regulations" means ~~licensees are selected for~~ random ~~testing~~selection by a scientifically valid method, such as a random number table or a computer-based random number generator that is matched with licensees' unique identification numbers or other comparable identifying numbers. Under the selection process used, each covered licensee must have an equal chance of being tested each time selections are made, as described in 40 CFR § 199.105(c)(5) (2009). Random drug tests must be unannounced and the dates for administering random tests must be spread reasonably throughout the calendar year, as described in 40 CFR § 199.105(c)(7) (2009).¶
(8) "Fitness to practice evaluation" means the process a qualified, independent ~~third-party~~clinical evaluator uses to determine if the licensee can safely perform the essential functions of the licensee's health practice.¶
(9) "Independent ~~third-party~~clinical evaluator" means an individual or center who is approved by the Board to evaluate, diagnose, and make treatment recommendations for substance use disorders and/or mental health disorders.¶
(10) "Licensee" means a licensed physician, podiatric physician, physician associate or acupuncturist who is licensed or certified by the Board.¶
(11) "Mental health disorder" means a clinically significant syndrome identified in the current DSM that is associated with disability or with significantly increased risk of disability.¶
(12) "Monitoring agreement" ~~means an individualized agreement between a licensee and the contractor that meets the requirements for a diversion agreement set by~~has the meaning given in ORS 676.1~~90~~85.¶
(13) "Positive toxicology test result" means a test result that meets or exceeds the cutoff concentrations shown in 49 CFR 40.87 (2009), a test result that shows other drugs or alcohol, or a test result that fails to show the appropriate presence of a currently prescribed drug that is part of a treatment program related to a condition being monitored by HPSP.¶
(14) "Provisional enrollment" means temporary enrollment, pending verification that a licensee meets all program eligibility criteria.¶
(15) "Self-referred licensee" means a licensee who seeks to participate in the program without a referral from the Board.¶
(16) "Substance use disorder" means a disorder related to the taking of a drug of abuse, including alcohol. This includes substance use disorders with modifiers of mild, moderate, or severe and substance-induced disorders, including but not limited to intoxication, withdrawal, and other substance/medication-induced mental health disorders (psychotic disorders, bipolar and related disorders, depressive disorders, anxiety disorders, obsessive-compulsive and related disorders, sleep disorders, sexual dysfunctions, delirium, and neurocognitive disorders), as defined in DSM-5 criteria.¶

(17) "Substantial non-compliance" ~~means that~~occurs when a licensee is in violation of the terms of their monitoring agreement in a way that gives rise to concerns about the licensee's ability or willingness to participate in the HPSP. Substantial non-compliance ~~and non-compliance include, but are not limited to, the factors list~~is further described in ORS 676.185(~~5~~4). Conduct that occurred before a licensee entered into ~~a monitoring agreement does not violate the terms of that monitoring agreement~~the HPSP is not substantial non-compliance.¶
(18) "Toxicology testing" means urine testing or alternative chemical monitoring including blood, saliva, breath, nail, or hair as conducted by a laboratory certified, accredited or licensed and approved for toxicology testing.¶
(19) "Treatment" means the planned, specific, individualized health and behavioral-health procedures, activities, services and supports that a treatment provider uses to remediate symptoms of a substance use disorder and/or mental health disorder.¶
(20) "Workplace monitor" has the meaning given in ORS 676.185.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85 - 676.200~~90, ORS 676.185, ORS 676.200, ORS 677.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0020

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0020
Participation in Health Professionals' Services Program ¶

Effective July 1, 2010, the Board must participate in the Health Professionals' Services Program and may refer eligible licensees to the ~~contractor~~HPSP in lieu of or in addition to discipline. Only licensees who meet the eligibility criteria may ~~be referred by the Board to the contractor~~enter into the HPSP.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85-676.200~~90, ORS 676.185, ORS 677.194

AMEND: 847-065-0025

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0025
Eligibility for Participation in Health Professionals Services Program ¶

~~(1) L~~To be eligible to participate in the Health Professionals' Services Program, a licensee must~~ b~~:~~¶~~
(1) Be evaluated by an independent ~~third-party~~clinical evaluator~~.~~;~~¶~~
(2) ~~The evaluation must include~~Have received a diagnosis of a substance use disorder and/or mental health disorder with the appropriate diagnostic code from the DSM, and treatment recommendations~~.~~;~~¶~~
(3) ~~Licensee must p~~Provide a written ~~stat~~agreement ~~agreeing~~ to enter the HPSP and ~~agreeing to~~ abide by all rules established by the Board~~.¶~~
~~(4) Licensee must e~~; and~~¶~~
(4) Enter into ~~the~~a "HPSP Monitoring Agreement~~."¶~~
~~(5) The Board will determine whether a Board-referred licensee's practice has presented or presents a danger to the public. The contractor will determine whether a self-referred licensee's practice has presented or presents a danger to the public~~" as described in OAR 847-065-0055.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85 - 676.200~~90, ORS 676.185, ORS 676.200, ORS 676.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0030

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0030
Procedure for Board-~~-~~Referr~~al~~ed Licensees ¶

(1) When the Board receives information involving a licensee who may have a substance use and/or a mental health disorder, the Board staff will investigate and complete a report to be presented at a Board meeting.¶
(2) If the licensee meets eligibility criteria and the Board approves entry into the HPSP, the Board will provide a written referral. The referral must include:¶
(a) A copy of the report from the independent ~~third-party~~clinical evaluator who diagnosed the licensee;¶
(b) The treatment recommendations developed by the independent ~~third-party~~clinical evaluator;¶
(c) A statement that the Board has investigated the licensee's professional practice and conduct;¶
(d) A description of any restrictions or requirements imposed by the Board or recommended by the Board on the licensee's professional practice;¶
(e) ~~A written statement from the licensee~~The licensee's written agree~~ing~~ment to enter the HPSP and ~~agreeing~~ to abide by all rules established by the Board and all terms and conditions established by the contractor; and¶
(f) A statement that the licensee has agreed to report:¶
(A) Any arrest for or conviction of a misdemeanor or felony crime to the Board within three business days after the licensee is arrested or convicted.¶
(B) Any citation for the use or possession of any DEA scheduled substances, including but not limited to citations for Class E violations, to the contractor within three business days of the citation.¶
(3) The Executive Director or Medical Director has the authority to approve a licensee's entry into the HPSP.
Statutory/Other Authority: ORS 676.190, ORS 677.265, 676.200
Statutes/Other Implemented: ORS 676.1~~85-676.200~~90, ORS 676.185, 676.200, ORS 676.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0035

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0035
Procedure for Self-Referred Licensees ¶

Board licensees may self-refer to the HPSP.¶
(1) Provisional Enrollment: To be provisionally enrolled in the program, a self-referred licensee must:¶
(a) Sign a written consent allowing disclosure and exchange of information among the contractor, the contractor's investigator, the licensee's employer, independent ~~third-party~~clinical evaluators and treatment providers;¶
(b) Sign a written consent allowing disclosure and exchange of information among the contractor, the Board, the licensee's employer, independent ~~third-party~~clinical evaluators and treatment providers in the event the contractor determines the licensee to be in substantial non-compliance with their monitoring agreement as defined in OAR 847-065-0065;¶
(c) Attest that the licensee is not, to the best of the licensee's knowledge, under investigation by the Board; and¶
(d) Agree to and sign a provisional enrollment agreement, which includes a statement that the licensee agrees to report to the contractor:¶
(A) Any arrest for or conviction of a misdemeanor or felony crime to the Board within three business days after the licensee is arrested or convicted. ¶
(B) Any citation for the use or possession of any DEA scheduled substances, including but not limited to citations for Class E violations, within three business days of the citation.¶
(2) Final Enrollment: To move from provisional enrollment to final enrollment in the program, a self-referred licensee must:¶
(a) Obtain at the licensee's own expense and provide to the contractor, an independent ~~third-party~~clinical evaluator's written evaluation containing a DSM diagnosis and diagnostic code and treatment recommendations;¶
(b) Agree to cooperate with the contractor's investigation to determine whether the licensee's practice while impaired, as defined in OAR 847-010-0073, presents or has presented a danger to the public;¶
(c) Enter into a monitoring agreement; and¶
(d) ~~Has m~~Meet all eligibility requirements to participate in the HPSP.¶
(3) Once a self-referred licensee seeks enrollment in the HPSP, failure to successfully complete final enrollment, as outlined in section (2) of this rule, may constitute substantial non-compliance and may be reported to the Board.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85 - 676.200~~90, ORS 676.185, ORS 676.200, ORS 676.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0040

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0040
Disqualification Criteria ¶

Licensees, either Board-referred or self-referred, may be disqualified from entering or participating in the HPSP for factors including, but not limited to:¶
(1) Licensee's disciplinary history;¶
(2) Severity and duration of the licensee's impairment;¶
(3) ~~Extent to which l~~Licensee's practice cannot reasonably be limited or managed to eliminate danger to the public;¶
(4) If licensee's impairment cannot be adequately managed with treatment and monitoring;¶
(5) Evidence of criminal history that involves injury or endangerment to others;¶
(6) Evidence of sexual misconduct;¶
(7) Evidence of non-compliance with a monitoring program from another state;¶
(8) Pending investigations with the Board or boards from other states;¶
(9) Previous Board investigations with findings of substantiated abuse or dependence; and¶
(10) Prior enrollment in, but failure to successfully complete, the Oregon Medical Board Health Professionals Program or HPSP.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85-676.200, 676.200~~90, ORS 676.185, ORS 676.200, ORS 676.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0045

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0045
Approval of Independent ~~Third-Party~~Clinical Evaluators ¶

(1) To be approved by the Board as an independent ~~third-party~~clinical evaluator, an evaluator must be:¶
(a) Licensed as required by the jurisdiction in which the evaluator works;¶
(b) Able to provide a comprehensive assessment of and written report describing a licensee's diagnosis, degree of impairment, and treatment recommendations; and¶
(c) Able to facilitate toxicology testing of the licensee at intake.¶
(2) The Board reserves the right to not approve an independent ~~third-party~~clinical evaluator for any reason.¶
(3) The Board or contractor will not accept an evaluator as independent in a particular case if, in the Board's or contractor's judgment, the evaluator's judgment is likely to be influenced by a personal or professional relationship with a licensee.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85-676.200~~90, ORS 676.185, ORS 676.200, ORS 676.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0050

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0050
Approval of Treatment Providers ¶

(1) To be approved by the Board as a treatment provider, a provider must be:¶
(a) Licensed as required by the jurisdiction in which the provider works;¶
(b) Able to provide appropriate treatment considering the licensee's diagnosis, degree of impairment, and treatment recommendations proposed by the independent ~~third-party~~clinical evaluator; and¶
(c) Able to facilitate toxicology testing of the licensee at intake.¶
(2) A treatment provider may not have a personal or professional relationship with a licensee.¶
(3) The Board will maintain a list of treatment providers available to licensees upon request.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85-676.200~~90, ORS 676.185, ORS 676.200, ORS 676.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0055

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0055
~~Licensee Responsibilities~~Monitoring Agreement ¶

~~All licensees must:¶~~
~~(1) Agree to report any arrest for or conviction of a misdemeanor or felony crime to the contractor~~To participate in the Health Professionals' Services Program, a licensee must enter into a written monitoring agreement with~~in~~ th~~ree business days after the licensee is arrested or convicted of the crime;¶~~
~~(2) Agr~~e HPSP which requires the licensee to:¶
(1) Consent to disclosure and exchange of information betw~~ee~~n t~~o report to the contractor any citation for the use or possession of any DEA scheduled substances, including but not limited to citations for Class E violations, within three business days of the citation~~he HPSP, the board, and the licensee's employer, evaluators and treatment entities in compliance with ORS 179.505 and 42 C.F.R. part 2;¶
(~~3~~2) Comply continuously with the~~ir monitoring~~ agreement, including any restrictions on their practice, for two years or longer as described in OAR 847-065-0060, as specified in the monitoring agreement or addenda to the monitoring agreement;¶
(3) Participate in a treatment plan and all required activities in the treatment plan as approved by a clinical evaluator or treatment provider;¶
(4) Abstain from mind-altering or intoxicating substances or potentially addictive drugs, unless the drug is approved by the contractor and prescribed for a documented medical condition by a person authorized by law to prescribe the drug to the licensee;¶
(5) Report use of mind-altering or intoxicating substances or potentially addictive drugs within 24 hours to contractor;¶
(6) ~~Participate in a treatment plan approved by a third-party evaluator or treatment provider~~Submit to random drug or alcohol testing as outlined in the monitoring agreement;¶
(7) Limit practice as required by the contractor or the Board;¶
(8) ~~Cooperate with supervised monitoring of practice~~Designate a workplace monitor;¶
(9) Participate in a follow-up evaluation, when necessary, of the licensee's fitness to practice;¶
(10) ~~Submit to random drug or alcohol testing as outlined in the monitoring agreement;¶~~
~~(11)~~ Report at least weekly to the contractor regarding the licensee's compliance with the monitoring agreement;¶
(1~~2~~1) Report applications for licensure in other states, changes in employment and changes in practice setting to the contractor;¶
(1~~3~~2) ~~Agree to be responsible for the cost of evaluations, toxicology testing, treatment, monitoring groups, and periodic monitoring consul~~Report any arrest for or conviction of a misdemeanor or felony crime to the contractor within three business days after the licensee is arrested or convicted of the crime;¶
(13) Report to the contractor any citation for the use or possession of any DEA scheduled substances, including but not limited to citations for Class E violations, within three business days of the citation~~s~~;¶
(14) Report to the contractor any investigations or disciplinary action by any state, or state or federal agency, including Oregon;¶
(15) ~~Participate in required activities according to the treatment plan~~Agree to be responsible for the cost of evaluations, toxicology testing, treatment, monitoring groups, and periodic monitoring consultations; and¶
(16) Maintain a license status and report any changes in license status.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85 - 676.200~~90, ORS 676.185, ORS 676.200, ORS 676.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0065

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0065
Substantial Non-Compliance Criteria ¶

(1) The contractor will report substantial non-compliance with a monitoring agreement to the Board within one business day after the contractor learns of the substantial non-compliance, including but not limited to information that a licensee:¶
(a) Engaged in criminal behavior;¶
(b) Engaged in conduct that caused injury, death or harm to the public, including engaging in sexual impropriety with a patient;¶
(c) Was impaired in a health care setting in the course of the licensee's employment;¶
(d) Received a positive toxicology test result;¶
(e) Violated a restriction on the license's practice imposed by the contractor or the Board;¶
(f) Was civilly committed for mental illness;¶
(g) Entered into a monitoring agreement, but failed to participate in the HPSP;¶
(h) Was referred to the HPSP, but failed to enroll in the HPSP;¶
(i) Forged, tampered with, or modified a prescription;¶
(j) Violated any rules of prescriptive authority;¶
(k) Violated any provisions of OAR 847-065-0055;¶
(L) Violated any terms of the monitoring agreement; or¶
(m) Failed to complete the monitored practice requirements as stated in OAR 847-065-0060.¶
(2) The Board will review reports from the program. The Board may request the contractor to provide the licensee's complete record, and the contractor must send these records to the Board as long as a valid release of information is in place.¶
(3) If the Board conducts an investigation and finds that a licensee ~~is~~has been substantially non-compliant with a monitoring agreement, the Board may ~~investigate and determine the appropriate sanction~~pursue disciplinary action in accordance with ORS 677.200.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85 - 676.200~~90, ORS 676.185, ORS 676.200, ORS 676.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)

AMEND: 847-065-0070

RULE SUMMARY: The proposed rulemaking implements HB 3043 (2025) making updates to the Health Professionals' Services Program (HPSP).

CHANGES TO RULE:

847-065-0070
Licensees with Primary Residence or Work Site Outside of Oregon ¶

If a licensee's primary residence or work site is located outside the State of Oregon, the licensee must enroll in the HPSP, in accordance with OAR 847-065-0025 and 847-065-0030 for Board-referred or 847-065-0035 for self-referred licensees, and may choose to be monitored by the out-of-state's health professional program if the following conditions are met:¶
(1) The other state's health professional program is substantially similar ~~with~~to the relevant Oregon statutes and rules. It is the duty of the contractor to verify this information and notify the Board of any discrepancies;¶
(2) The other state's health professional program sends quarterly reports on the licensee to the contractor; and¶
(3) The other state's health professional program will promptly report any substantial non-compliance with the licensee's monitoring agreement to the contractor.
Statutory/Other Authority: ORS 676.190, ORS 677.265, ORS 676.200
Statutes/Other Implemented: ORS 676.1~~85-676.200~~90, ORS 676.185, ORS 676.200, ORS 676.194, Oregon Laws 2025, chapter 499, sections 2-3 (HB 3043)