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## NOTICE OF PROPOSED RULEMAKING INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 851  
**BOARD OF NURSING**

**FILED**

06/27/2025 9:36 AM  
ARCHIVES DIVISION  
SECRETARY OF STATE

FILING CAPTION: Division 70 - Re-engagement in Health Professionals' Services Program

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 07/21/2025 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.*

CONTACT: Brandy Ritter  
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17938 SW Upper Boones Ferry Rd  
Portland, OR 97224

Filed By:  
Brandy Ritter  
Rules Coordinator

### HEARING(S)

*Auxiliary aids for persons with disabilities are available upon advance request. Notify the contact listed above.*

DATE: 07/17/2025

TIME: 10:30 AM

OFFICER: Brandy Ritter

### REMOTE HEARING DETAILS

MEETING URL: [Click here to join the meeting](#)

PHONE NUMBER: 253-205-0468

CONFERENCE ID: 84864224629

### SPECIAL INSTRUCTIONS:

Meeting URL: <https://us06web.zoom.us/j/84864224629>

Meeting ID: 848 6422 4629

One tap mobile

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Presenters: Only those registered to provide testimony will be called to present comments.

To register to testify for this hearing, please contact: [brandy.ritter@osbn.oregon.gov](mailto:brandy.ritter@osbn.oregon.gov) at least 24 hours prior to the start of the hearing and provide name, address, and affiliation (This is required per OAR 137-001-0030).

Presenters may also register at the beginning of the hearing but are encouraged to pre-register to reserve time during the hearing for the presentation of testimony.

Each presenter will have 3 minutes to testify. Be prepared to summarize your comments to fit within the allotted time.

The hearing will close no later than 11:30 AM and may close earlier if all individuals that have registered to testify have

had the opportunity to enter their comments into the record.

Submit Written Comments: Via email: [brandy.ritter@osbn.oregon.gov](mailto:brandy.ritter@osbn.oregon.gov).

All written comments and materials must be received by the close of the comment period on July 21, 2025 at 5:00PM. Late comments will not be reviewed or considered.

For accommodations or questions, please contact the OSBN Rule Coordinator at least 72 hours prior to the hearing.

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#### NEED FOR THE RULE(S)

The primary mission of Alternative to Discipline (ATD) programs, such as Health Professional Service Programs (HPSP), is to protect the public by improving the health of medical professionals. This improvement positively impacts the quality of patient care. It is believed that if the community can access treatment for substance use disorders (SUD), then it is only fair that clinicians have access to similar treatment. This mission underscores the significance of these programs within the healthcare sector and fosters a sense of responsibility and commitment among healthcare professionals and regulatory boards. The mission is accomplished by providing professional case management services, which include intervention, care coordination, and ongoing monitoring of recovery and fitness to practice.

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#### DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

NOAP, <https://alternativeprograms.org/>

NCSBN, [https://www.ncsbn.org/nursing-regulation/discipline/board-proceedings/alternative-to-discipline.page?utm\\_source=geniusmonkey&utm\\_medium=viewthrou](https://www.ncsbn.org/nursing-regulation/discipline/board-proceedings/alternative-to-discipline.page?utm_source=geniusmonkey&utm_medium=viewthrou)

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

The primary mission of Alternative to Discipline (ATD) programs, such as Health Professionals' Services Programs (HPSP), is to protect the public by improving the health of medical professionals. This improvement positively impacts the quality of patient care. It is believed that if the community can access treatment for substance use disorders (SUD), then it is only fair that clinicians have access to similar treatment. This mission underscores the significance of these programs within the healthcare sector and fosters a sense of responsibility and commitment among healthcare professionals and regulatory boards. The mission is accomplished by providing professional case management services, which include intervention, care coordination, and ongoing monitoring of recovery and fitness to practice.

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#### FISCAL AND ECONOMIC IMPACT:

The primary mission of Alternative to Discipline (ATD) programs, such as Health Professionals' Services Programs (HPSP), is to protect the public by improving the health of medical professionals. This improvement positively impacts the quality of patient care. It is believed that if the community can access treatment for substance use disorders (SUD), then it is only fair that clinicians have access to similar treatment. This mission underscores the significance of these programs within the healthcare sector and fosters a sense of responsibility and commitment among healthcare professionals and regulatory boards. The mission is accomplished by providing professional case management services, which include intervention, care coordination, and ongoing monitoring of recovery and fitness to practice.

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#### 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) Only effects licensees wanting to participate in program. 2a) No impact 2b) No impact 2c) no impact

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

Not affected.

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

No RAC, completed engagement with community partners, Board voted to re-engage the program based on current data.

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RULES PROPOSED:

851-070-0010, 851-070-0011, 851-070-0025, 851-070-0026, 851-070-0027, 851-070-0035, 851-070-0041, 851-070-0051, 851-070-0060, 851-070-0070, 851-070-0075, 851-070-0080, 851-070-0090, 851-070-0100

REPEAL: 851-070-0010

RULE SUMMARY: Repealed due to renewed participation in HPSP.

CHANGES TO RULE:

~~851-070-0010~~

~~Alternative to Discipline Program ¶¶~~

~~The Oregon State Board of Nursing ceased participation in Oregon's alternative to discipline program for healthcare providers (known as the Health Professionals' Services Program or HPSP) effective October 1, 2022. Those licensees who completed their enrollment into HPSP before that date are authorized to continue in the program. The board may remove from the program any participants who are non-compliant with the terms of the HPSP and impose a public disciplinary action on the individual's license.~~

~~Statutory/Other Authority: ORS 676.200~~

~~Statutes/Other Implemented: ORS 676.200~~

ADOPT: 851-070-0011

RULE SUMMARY: Adopt 851-070-0011 to include Purpose, Intent and Scope of HPSP.

CHANGES TO RULE:

851-070-0011

Purpose, Intent and Scope

The Oregon State Board of Nursing recognizes that substance use disorders and/or mental health disorders are potentially progressive, chronic diseases. The Board believes certified nursing assistants, licensed practical nurses, registered nurses, and advanced practice registered nurses can develop these diseases and, with appropriate treatment, be assisted in recovery and safely return to the practice of nursing. It is the intent of the Board that a certificate holder or 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 certificate holder or licensee from possible disciplinary action.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200

REPEAL: 851-070-0025

RULE SUMMARY: Repealed

CHANGES TO RULE:

~~851-070-0025~~

~~Public Discipline ¶¶~~

~~Public discipline is determined by the Board after deliberation of investigatory information. The requirements for Board ordered monitored practice are stated in the specific Board documents.~~

~~Statutory/Other Authority: ORS 676.200~~

~~Statutes/Other Implemented: ORS 676.200~~

ADOPT: 851-070-0026

RULE SUMMARY: Adopt: 851-070-0026 to include Participation in HPSP.

CHANGES TO RULE:

851-070-0026

Participation in Health Professionals' Services Program

Effective September 1, 2025, the Board will participate in the Health Professionals' Services Program (HPSP) and may refer eligible certificate holder or licensees to the program in lieu of or in addition to discipline. Only certificate holders and licensees who meet the eligibility criteria may be referred by the Board to the program.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200

ADOPT: 851-070-0027

RULE SUMMARY: Adopt: 851-070-0027 to include Eligibility for HPSP.

CHANGES TO RULE:

851-070-0027

Eligibility for enrollment in Health Professionals' Services Program

- (1) The certificate holder or licensee must be evaluated by an independent, third-party evaluator.¶
- (2) The evaluation must include a diagnosis of a substance disorder and/or mental health disorder with the appropriate diagnostic code from the DSM, and treatment recommendations.¶
- (3) The certificate holder or licensee must provide a written statement agreeing to enter the HPSP and agreeing to abide by all rules established by the Board.¶
- (4) The certificate holder or licensee must enter the "HPSP Monitoring Agreement."¶
- (5) The Board will determine whether a Board-referred certificate holder or licensee's practice has presented or presents a danger to the public. ¶
- (6) The contractor will determine whether a self-referred certificate holder or licensee's practice has presented or presents a danger to the public.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200

ADOPT: 851-070-0035

RULE SUMMARY: Adopt 851-070-0035 to include Procedure for Board referrals to HPSP.

CHANGES TO RULE:

851-070-0035

Procedure for Board Referrals

(1) When the Board receives information involving a certificate holder or 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 a certificate holder or 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 evaluator who diagnosed the certificate holder or licensee;¶

(b) The treatment recommendations developed by the independent third-party evaluator;¶

(c) A statement that the Board has investigated the certificate holder or 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 certificate holders or licensee's professional practice;¶

(e) A written statement from the certificate holder or licensee agreeing to enter the HPSP and agreeing to abide by all terms and conditions established by the contractor; and¶

(f) A statement that the certificate holder or 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 an arrest or conviction. ¶

(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.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200



ADOPT: 851-070-0041

RULE SUMMARY: Adopt 851-070-0041 to include Procedure for Self-referral to HPSP.

CHANGES TO RULE:

851-070-0041

Procedure for Self-Referral

Board certificate holders and licensees may self-refer to the HPSP.¶

(1) Provisional Enrollment: To be provisionally enrolled in the program, a self-referral must:¶

(a) Sign a written consent allowing disclosure and exchange of information among the contractor, the contractor's investigator, the certificate holder or licensee's employer, independent third-party evaluators and treatment providers;¶

(b) Sign a written consent allowing disclosure and exchange of information among the contractor, the Board, the employer, independent third-party evaluators and treatment providers in the event the contractor determines the certificate holder or licensee to be in substantial non-compliance with their monitoring agreement as defined in OAR 847-065-0065;¶

(c) Attest that the certificate holder or licensee is not, to the best of their knowledge, under investigation by the Board¶

(d) Agree to and sign a provisional enrollment agreement, which includes a statement that the certificate holder or 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 an arrest or conviction. ¶

(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 certificate holder or licensee must:¶

(a) Obtain at the their own expense and provide to the contractor, an independent third-party 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 certificate holder or licensee practiced 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 met all eligibility requirements to participate in the HPSP.¶

(3) Once a self-referred certificate holder or 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 676.200

Statutes/Other Implemented: ORS 676.200

ADOPT: 851-070-0051

RULE SUMMARY: Amend 851-070-0051: Revision of Disqualification Criteria for clarity.

CHANGES TO RULE:

851-070-0051

Disqualification Criteria

Certificate holders and 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) Certificate holder or licensee's disciplinary history;
- (2) Severity and duration of the certificate holder or licensee's impairment;
- (3) Extent to which certificate holder or licensee's practice can be limited or managed to eliminate danger to the public;
- (4) If certificate holder or licensee's impairment cannot be 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 State Board of Nursing Health Professionals' Program.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200

AMEND: 851-070-0060

RULE SUMMARY: Amend 851-070-0060: Revision of Approval of Independent Third-Party Evaluators for clarity.

CHANGES TO RULE:

851-070-0060

Approval of Independent Third-Party Evaluators ¶

(1) To be approved by the Board as an independent third-party evaluator, an evaluator must: be: ¶

(a) ~~Be~~ Licensed as required by the jurisdiction in which the evaluator works; ¶

(b) ~~Have a minimum of a Master's Degree in a mental health discipline;~~ ¶

(c) ~~Provide evidence of additional education and experience as shown by one of the following:~~ ¶

(A) ~~Department of Transportation Substance Abuse Professional qualification;~~ ¶

(B) ~~Certified Alcohol and Drug Counselor (CADC) II or III; an evaluation done by a CADC 1 may be accepted if:~~ ¶

(i) ~~Signed off by a CADC II or III; or~~ ¶

(ii) ~~Per the Board evaluation process be qualified to perform the appropriate level of evaluation;~~ ¶

(C) ~~Board Certified in Addiction Medicine by either ASAM or American Board of Psychiatry and Neurology~~ 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 evaluator for any reason. ¶

(d) ~~3) Provide evidence of assessments at the licensure level of the licensee being evaluated.~~ ¶

(e) ~~The Board~~ 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~~ the participant. ¶

(f) ~~4) If the evaluation does not contain return-to-work criteria, qualified Board staff or another third-party evaluator will review the evaluation to determine the return-to-work criteria.~~ ¶

(2) ~~Evaluation of cognitive or physical impairment may be established by a Licensed Independent Practitioner who has met their Licensing Board's requirement for practice in the area of physical and cognitive assessment.~~

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200

AMEND: 851-070-0070

RULE SUMMARY: Amend 851-070-0070: Revision of Approval of Treatment Providers for clarity.

CHANGES TO RULE:

851-070-0070

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 certificate holder or licensee's diagnosis, degree of impairment, level of licensure, and treatment options proposed by the treatment program or the independent third-party evaluator; and ¶

(c) Able to ~~obtain a urinalysis of the~~ facilitate toxicology testing of the certificate holder or licensee at intake. ¶

(2) ~~The Board will not accept a provider as a treatment provider in a particular case if, in the Board's judgment, the provider's judgment is likely to be influenced by~~ A treatment provider may not have a personal or professional relationship with a licensee the participant.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200

AMEND: 851-070-0075

RULE SUMMARY: Amend 851-070-0075: Revision of Approval of Worksite Monitors for clarity.

CHANGES TO RULE:

851-070-0075

Approval of Worksite Monitors ¶

Board approved worksite monitors must: ¶

- (1) Be a ~~Registered~~nurse with an unencumbered license or other identified health professional who holds an unencumbered license, as approved by the Board. ¶
- (2) Conduct routine observation and monitoring of certificate holder or licensee's performance. The worksite monitor may serve as the supervisor if the observation requirements are delegated to another licensed individual who meets the requirements.¶
- (3) Provide evidence of relevant specialized education as approved by the Board.¶
- (4) Agree in writing to perform the worksite monitor role. ¶
- (5) Complete a written report with input from worksite monitors.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200

CHANGES TO RULE:

851-070-0080

Certificate Holder and Licensee Responsibilities for HPSP and Public Discipline

(1) All certificate holders and licensees must:

(a) Agree to report any arrest for or conviction of a misdemeanor or felony crime to the HPSP and/or the Board contractor within three business days after the licensee is arrested or convicted of the crime; and arrest or conviction of the crime;

(b) Agree to 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;

(~~b~~c) Comply continuously with his or their monitoring agreement, including any restrictions on his or their practice, for a minimum of two years for the HPSP program; or, for public discipline, as specified by the Board by rule or order. For longer as specified in the last two years of the HPSP program only, for a single isolated incident of substantial noncompliance the Board has discretion to determine if the substantial noncompliance warrants extension in the program. monitoring agreement or addenda to the monitoring agreement;

(~~e~~d) 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. The Board does not authorize the HPSP program to approve or disapprove medications prescribed to the Licensee for a documented medical condition;

(~~e~~) Report unauthorized use of mind-altering or intoxicating substances or potentially addictive drugs within 24 hours;

(~~e~~) Comply with the treatment plan. HPSP medical director may consult with the third party evaluator(s) regarding treatment recommendations. The Board does not authorize HPSP to independently modify treatment plans developed by an Independent third-party evaluator to contractor;

(f) Participate in a treatment plan approved by a third-party evaluator or treatment provider;

(~~f~~g) Limit practice as required by the Third-Party Evaluator, Treatment Program, or Board order contractor or the Board;

(~~g~~h) Participate in Cooperate with supervised monitoring of practice;

(~~h~~i) Participate in a follow-up evaluation, when necessary, of licensee's to evaluate fitness to practice;

(~~i~~j) Submit to random toxicology testing for the duration of the HPSP or Public Discipline program drug or alcohol testing as outlined in the monitoring agreement;

(~~j~~k) Report at least weekly to the HPSP regarding the licensee's contractor regarding compliance with the monitoring agreement;

(l) Report at least monthly to the Public Discipline Program compliance staff;

(~~k~~) Report to the HPSP monitor/Board compliance staff applications for certifications for licensure in other states, changes in employment and changes in practice setting to the contractor;

(~~l~~m) Agree to be responsible for the cost of evaluations, toxicology testing and, treatment, monitoring groups, and periodic monitoring consultations;

(~~m~~n) Report to the HPSP Board compliance staff contractor any investigations or disciplinary action by any state, or state or federal agency, including Oregon;

(~~n~~o) Participate in required meeting activities according to the treatment plan; and

(~~o~~p) Maintain active license status.

(2) In addition to the requirements listed in section one of this rule, self-referred licensees must also provide to the HPSP a copy of a report of the licensee's criminal history, at least once per calendar year certification or license status and report any changes in certification or license status.

(2) Mental health participants without a diagnosis of substance use disorder agree to toxicology testing if there are concerns about substance use or if an evaluator more often if required by the HPSP recommends testing.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200

AMEND: 851-070-0090

RULE SUMMARY: Amend 851-070-0090: Revision of Completion Requirements for clarity.

CHANGES TO RULE:

851-070-0090

Completion Requirements ¶

(1) To complete the HPSP successfully, a certificate holder or licensees with a substance use disorder and with or without a mental disorder health diagnosis, must have participated in the HPSP program for a minimum of four~~three~~ years and have worked for at least two years in a monitored practice. ~~Licensees must complete the required two years of monitored practice within four years of entering the HPSP.¶~~

(2) To complete the HPSP successfully, a certificate holder or licensees with a mental health disorder~~agnosis~~, but no substance use disorder, must have participated in the HPSP program for a minimum of two years and have worked for at least one year in a monitored practice. ~~Licensees with a mental health disorder may be required to submit to random alcohol or drug testing only in cases when such testing is recommended by a third-party evaluator or Board order based on a diagnosis of substance use disorder. Licensees must complete the required year of monitored practice within two years of entering the Health Professionals' Services Program.¶~~

(3) ~~The Board may extend the time within which a licensee must complete monitored practice if the licensee has remained compliant with the program.¶~~

(4) ~~A licensee who does not complete the required term of monitored practice will be discharged from the Health Professionals' Services Program and may be subject to discipline.¶~~

(5) ~~The time spent working in monitored practice before transferring from the Nurse Monitoring Program to the Health Professionals' Services Program effective July 1, 2010, will be counted toward the required term of monitored practice.¶~~

(6) ~~For probation, the licensee will be considered for completion as per Board order; however, the public discipline stays on the OSBN website for the life of the licens¶~~

(3) A certificate holders or licensees may be required to be enrolled for a longer period if the evaluator or contractor is able to document concerns for the safety of the public, certificate holder, or licensee or if otherwise directed by the Oregon State Board of Nursing.¶

(4) A certificate holder or licensee who does not complete the required term of monitored practice will be discharged from the Health Professionals' Services Program and may be subject to discipline.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200

AMEND: 851-070-0100

RULE SUMMARY: Amend 851-070-0100: Adding Certificate Holder.

CHANGES TO RULE:

851-070-0100

Substantial Non-Compliance Criteria ¶¶

(1) The HPSP will report substantial non-compliance to the Board within one business day after the HPSP learns of non-compliance, including but not limited to information that a certificate holder or 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 as determined by federal regulations pertaining to drug testing or self report of unauthorized substance use;¶¶

(e) Violated a restriction on the ~~licensee's~~ practice imposed by the HPSP or the ~~licensee's~~ Board;¶¶

(f) Was civilly committed for mental illness or involuntary hospitalization;¶¶

(g) Entered into a monitoring agreement with HPSP, but failed to participate or discontinued participation in 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/dispensing authority;¶¶

(k) Violated any provisions of OAR 851-070-0080;¶¶

(l) Violated any terms of the monitoring agreement; or¶¶

(m) Failed to complete the monitored practice requirements as stated in OAR 851-070-0090.¶¶

(2) The Board, upon being notified of a ~~licensee's~~ substantial non-compliance will investigate and determine the appropriate sanction, which may include a limitation of ~~licensee's~~ practice and any other sanction, up to and including termination from the HPSP and formal discipline.¶¶

(3) For Board Ordered discipline violation of any of the conditions of the final order is considered non-compliance and will be investigated and the appropriate sanction will be determined up to and including revocation of license or certificate.

Statutory/Other Authority: ORS 676.200

Statutes/Other Implemented: ORS 676.200