

OREGON BULLETIN

Supplements the 2017 Oregon Administrative Rules Compilation

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Secretary of State
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INFORMATION ABOUT ADMINISTRATIVE RULES

General Information

The Administrative Rules Unit, Archives Division, Secretary of State publishes the Oregon *Administrative Rules Compilation* and the online *Oregon Bulletin*. The *Oregon Administrative Rules Compilation* is an annual print publication containing complete text of Oregon Administrative Rules (OARs) filed through November 15 of the previous year. The *Oregon Bulletin* is a monthly online supplement that contains rule text adopted or amended after publication of the print Compilation, as well as Notices of Proposed Rulemaking and Rulemaking Hearing. The Bulletin also includes certain non-OAR items when they are submitted, such as Executive Orders of the Governor, Opinions of the Attorney General and Department of Environmental Quality cleanup notices.

Background on Oregon Administrative Rules

ORS 183.310(9) defines “rule” as “any agency directive, standard, regulation or statement of general applicability that implements, interprets or prescribes law or policy, or describes the procedure or practice requirements of any agency.” Agencies may adopt, amend, repeal or renumber rules, permanently or temporarily (up to 180 days), using the procedures outlined in the *Oregon Attorney General’s Administrative Law Manual*. The Administrative Rules Unit assists agencies with the notification, filing and publication requirements of the administrative rulemaking process.

OAR Citations

Every Administrative Rule uses the same numbering sequence of a three-digit chapter number followed by a three-digit division number and a four-digit rule number (000-000-0000). For example, Oregon Administrative Rules, chapter 166, division 500, rule 0020 is cited as OAR 166-500-0020.

Understanding an Administrative Rule’s “History”

State agencies operate in an environment of ever-changing laws, public concerns and legislative mandates which necessitate ongoing rulemaking. To track changes to individual rules and organize the original rule documents for permanent retention, the Administrative Rules Unit maintains history lines for each rule, located at the end of the rule text. OAR histories contain the rule’s statutory authority, statutes implemented and dates of each authorized modification to the rule text. Changes are listed chronologically in abbreviated form, with the most recent change listed last. In the history line “OSA 4-1993, f. & cert. ef. 11-10-93,” for example, “OSA” is short for Oregon State Archives; “4-1993” indicates this was 4th administrative rule filing by the Archives in 1993; “f. & cert. ef. 11-10-93” means the rule was filed and certified effective on November 10, 1993.

Locating Current Versions of Administrative Rules

The online version of the OAR Compilation is updated on the first of each month to include all rule actions filed with the Administrative Rules Unit by the 15th of the previous month. The annual printed OAR Compilation volumes contain text for all rules filed through

November 15 of the previous year. Administrative Rules created or changed after publication in the print Compilation will appear in a subsequent edition of the online Bulletin. These are listed by rule number in the Bulletin’s OAR Revision Cumulative Index, which is updated monthly. The listings specify each rule’s effective date, rule-making action, and the issue of the Bulletin that contains the full text of the adopted or amended rule.

Locating Administrative Rule Publications

Printed volumes of the Compilation are deposited in Oregon’s Public Documents Depository Libraries listed in OAR 543-070-0000. Complete sets and individual volumes of the printed OAR Compilation may be ordered from the Administrative Rules Unit, Archives Division, 800 Summer Street NE, Salem, Oregon 97301, (503) 373-0701.

Filing Administrative Rules and Notices

All hearing and rulemaking notices, and permanent and temporary rules, are filed through the Administrative Rules Unit’s online filing system. To expedite the rulemaking process, agencies are encouraged to file a Notice of Proposed Rulemaking Hearing specifying hearing date, time and location, and to submit their filings early in the submission period. All notices and rules must be filed by the 15th of the month to be included in the next month’s Bulletin and OAR Compilation postings. Filings must contain the date stamp from the deadline day or earlier to be published the following month.

Administrative Rules Coordinators and Delegation of Signing Authority

Each agency that engages in rulemaking must appoint a rules coordinator and file an Appointment of Agency Rules Coordinator form with the Administrative Rules Unit. Agencies that delegate rule-making authority to an officer or employee within the agency must also file a Delegation of Rulemaking Authority form. It is the agency’s responsibility to monitor the rulemaking authority of selected employees and keep the forms updated. The Administrative Rules Unit does not verify agency signatures as part of the rulemaking process.

Publication Authority

The Oregon Bulletin is published pursuant to ORS 183.360(3). Copies of the original Administrative Orders may be obtained from the Archives Division, 800 Summer Street, Salem, Oregon, 97310; (503) 373-0701. The Archives Division charges for such copies.

The official copy of an Oregon Administrative Rule is contained in the Administrative Order filed at the Archives Division. Any discrepancies with the published version are satisfied in favor of the Administrative Order.

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EXECUTIVE ORDERS

EXECUTIVE ORDER NO. 17 - 05

DETERMINATION OF STATE OF EMERGENCY IN COOS, CURRY, DOUGLAS, JOSEPHINE, MULTNOMAH, AND TILLAMOOK COUNTIES DUE TO A SEVERE WINTER STORM THAT INCLUDES HIGH WINDS, FLOODING, AND LANDSLIDES

Pursuant to ORS 401.165, I find that severe winter storms have created a threat to life, safety, property, and have caused significant damage to the state roads on the federal-aid highway system, resulting in a natural disaster in Coos, Curry, Douglas, Josephine, Multnomah, and Tillamook Counties. Beginning December 14, 2016, and continuing through March 2017, these severe storms have resulted in extreme temperatures, heavy snow and ice, rain, high winds, flooding, landslides, and erosion at various locations within these jurisdictions, resulting in critical transportation failures, loss of power and communications capabilities, and evacuations and sheltering needs. This storm system damaged state highways throughout the jurisdictions with scour, washouts, sinkholes, serious debris flows and mudslides.

NOW THEREFORE, IT IS HEREBY DIRECTED AND ORDERED:

1. Pursuant to ORS 401.165, an emergency has occurred in the above-identified counties and a state of emergency is hereby declared.

2. The Oregon Department of Transportation shall provide appropriate assistance and seek federal resources to effect repair and reconstruction of the estimated 4.7 million dollars of damages and impact to the federal aid highway system in above identified jurisdictions.

Done at Salem, Oregon, this 13th day of April, 2017.

/s/ Kate Brown
Kate Brown
GOVERNOR

ATTEST

/s/ Dennis Richardson
Dennis Richardson
SECRETARY OF STATE

EXECUTIVE ORDER NO. 17 - 06

DETERMINATION OF STATE OF EMERGENCY IN CLACKAMAS, CLATSOP, COLUMBIA, COOS, CURRY, DOUGLAS, GILLIAM, GRANT, HARNEY, HOOD RIVER, JOSEPHINE, LAKE, LANE, MARION, MULTNOMAH, TILLAMOOK, WASCO, and WASHINGTON COUNTIES, DUE TO A SEVERE WINTER STORM THAT INCLUDES HIGH WINDS, FLOODING, AND LANDSLIDES

Pursuant to ORS 401.165, I find that severe winter storms have created a threat to life, safety, property, and have caused significant damage to the state roads on the federal-aid highway system, resulting in a natural disaster in Clackamas, Clatsop, Columbia, Coos, Curry, Douglas, Gilliam, Grant, Harney, Hood River, Josephine, Lake, Lane, Marion, Multnomah, Tillamook, Wasco, and Washington Counties. Beginning January 11, 2017, and continuing through March 2017, these severe storms have resulted in extreme temperatures, heavy snow and ice, rain, high winds, flooding, landslides, and erosion at various locations within these jurisdictions, resulting in critical transportation failures, loss of power and communications capabilities, and evacuations and sheltering needs. This

storm system damaged state highways throughout the jurisdictions with scour, washouts, sinkholes, serious debris flows and mudslides.

NOW THEREFORE, IT IS HEREBY DIRECTED AND ORDERED:

1. Pursuant to ORS 401.165, an emergency has occurred in the above-identified counties and a state of emergency is hereby declared.

2. The Oregon Department of Transportation shall provide appropriate assistance and seek federal resources to effect repair and reconstruction of the estimated 8 million dollars of damages and impact to the federal aid highway system in above identified jurisdictions.

Done at Salem, Oregon, this 13th day of April, 2017.

/s/ Kate Brown
Kate Brown
GOVERNOR

ATTEST

/s/ Dennis Richardson
Dennis Richardson
SECRETARY OF STATE

EXECUTIVE ORDER 17 - 07

IMMEDIATE COST SAVING MEASURES IN OREGON'S EXECUTIVE BRANCH

WHEREAS, Oregonians deserve a state government that delivers services to the public both effectively and efficiently; and

WHEREAS, Oregon is presently faced with a budget deficit of approximately \$1.6 billion, which may result in a shortened school year, larger class sizes, and reduced services to Oregon's most vulnerable citizens; and

WHEREAS, essential government services must be maintained to support the health and welfare of all Oregonians; and

WHEREAS, state government should, where possible, seize opportunities to maximize efficiencies, especially at times of financial strain; and

WHEREAS, Oregon's state government has already taken extraordinary steps to reduce costs and find efficiencies; and

WHEREAS, Oregon's Executive Branch is committed to spending each public dollar responsibly;

NOW THEREFORE, IT IS HEREBY DIRECTED AND ORDERED:

I. Definition. For purposes of this Executive Order, "state agency" shall be defined as any agency within the Executive Department as defined in ORS 174.112, other than the Oregon Secretary of State, Oregon State Treasury, Oregon Department of Justice, and Oregon Bureau of Labor and Industries.

II. Hiring Freeze. State agencies shall implement a hiring freeze, effective May 1, 2017. The terms of the hiring freeze shall be as follows:

A. State agencies shall not commence any new hiring processes during the pendency of this hiring freeze.

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B. State agencies shall terminate all ongoing hiring processes that have not yet resulted in a formal offer of employment being extended to a candidate.

C. State agencies may conclude ongoing hiring processes that have resulted in a formal offer of employment being extended to a candidate, if the candidate accepts the extended offer. If the candidate does not accept the extended offer, the state agency that extended the offer shall terminate the hiring process for that position.

D. State agencies shall retain any and all monies saved as a result from this hiring freeze. A state agency shall not expend or otherwise disburse such retained monies, notwithstanding the fact that such spending would fall below a statutorily authorized spending limitation or would otherwise be authorized by law.

E. State agencies shall track the positions that have remained vacant as a result of this hiring freeze, and shall also track the estimated savings that have resulted from these vacancies. State agencies shall report these vacancies and estimated savings to the Department of Administrative Services (“DAS”) upon request by DAS.

F. This hiring freeze shall not apply to positions that provide services critical to life, health, or public safety, or that generate revenue. DAS shall develop a list of such exempt positions in coordination with state agencies. DAS shall consider any state agency’s claim that a position not included on that list in fact provides services critical to life, health, or public safety, generates revenue, or is otherwise indispensable to essential agency operations. If DAS concludes that the state agency is correct, the relevant position shall be added to the exempted positions list and the hiring freeze shall not apply.

G. DAS shall post an announcement of this hiring freeze on the State Jobs website (<http://www.oregon.gov/jobs/Pages/index.aspx>).

H. For each state agency, the obligations imposed by this Section shall expire on the later of June 30, 2017, or the date the agency’s budget becomes law, unless these obligations are extended by a subsequent Executive Order.

III. **Reduction in Travel Expenditures.** State agencies shall reduce their expenditures on travel by at least ten percent, subject to the terms stated herein.

A. For the 2017-19 biennium, state agencies shall reduce their budget allocation for travel funded by General Fund or Lottery Fund monies by no less than 10 percent.

B. All out-of-state travel must be approved by agency directors. Agency directors are instructed to approve only out of state travel deemed necessary to the essential function of their agencies.

C. In prioritizing travel opportunities, state agencies shall give priority to trips that enhance relationships between state government,

on the one hand, and underserved populations (including Oregon’s rural communities), on the other hand.

D. In lieu of nonessential travel, state agencies shall identify opportunities to better use communications technology to develop and strengthen organizational and stakeholder relationships, and to conduct business operations, as a means to maximize savings on travel expenses.

IV. **Optimization of Facilities.** State agencies shall optimize their use of state-owned and state-leased facilities, consistent with the provisions stated herein.

A. State agencies shall immediately conduct a review of their use of state-owned and state-leased space. This review shall evaluate at least the following:

1. The state agency’s maximization of space per FTE.
2. The state agency’s utilization of storage space, including whether maintenance of items being stored is necessary to the agencies’ operations.
3. The state agency’s degree of compliance with all statutes, regulations, and DAS policies governing the use of space, including ORS 276.385 *et seq.*, OAR 125-120-0000 *et seq.*, and DAS Policy 107-001-100.

B. Based upon the review required in Section IV(A), state agencies shall take immediate steps to optimize the efficiency of state-owned and state-leased space, by eliminating or reducing space (consistent with satisfying business needs and controlling statutes, regulations, and DAS policies).

V. Governor Kate Brown encourages the Secretary of State, the State Treasurer, the Attorney General, and the Commissioner of the Bureau of Labor and Industries, as well as the Legislative Assembly and the Judicial Department, to adopt policies that freeze hiring, reduce travel expenditures, and optimize facility usage, consistent with the objectives stated herein. DAS is directed to assist the above-mentioned officials and entities of state government in accomplishing these objectives as they may request.

VI. Except as otherwise provided herein, this Executive Order will remain in effect until June 30, 2019, unless superseded by a subsequent Executive Order or source of law.

Done at Portland, Oregon, this 20th day of April, 2017.

/s/ Kate Brown
Kate Brown
GOVERNOR

ATTEST

/s/ Dennis Richardson
Dennis Richardson
SECRETARY OF STATE

OTHER NOTICES

TO: AGING AND PEOPLE WITH DISABILITIES MANAGERS, AREA AGENCY ON AGING DIRECTORS AND PROGRAM MANAGERS, & STAKEHOLDERS

Public Notice - REQUEST FOR COMMENTS

Proposal to Amend APD 1915(c) Waiver to include transition supports for individuals impacted by changes to Oregon Administrative Rules Chapter 411 Division 015

The Oregon Department of Human Services is proposing an amendment to Aging and People with Disabilities 1915(c) waiver in order to add transition services for individual who lose eligibility due to changes in the definitions in activities of daily living in Oregon Administrative Rules Chapter 411 Division 015. The proposed amendment is posted online at: <http://www.oregon.gov/DHS/DHSNEWS/NewsReleases/apd-waiver-amendment-comments-4-2017.pdf>

COMMENTS DUE: May 11, 2017.

BACKGROUND: Oregon DHS has amended the Oregon Administrative Rules that define the levels of assistance needed for Activities of Daily Living (ADLs). ADLs are the components that make up nursing facility level of care. Nursing facility level of care is used to determine eligibility for nursing facility and home and community-based services. Oregon DHS expects the change to the ADL definitions to result in approximately four percent of eligible individuals losing eligibility for Medicaid Long Term Care Services. This means that approximately 1,200 individuals will lose home and community-based services through Oregon's 1915(k), K State Plan and the APD waiver #0185. A smaller sub-set of that population will lose eligibility for all Medicaid funded services including the Oregon Health Plan.

WAIVER AMENDMENT: Oregon DHS completed a full rule advisory committee process and finalized the public comment period on the rules affected by the changes to the level of assistance needed for ADLs. The waiver amendment, in part, is to provide the Centers for Medicare and Medicaid Services (CMS) with a formal summary of the Oregon Administrative Rule (OAR) changes, a transition plan for individuals who will lose services as a result of the changes, and to add the definition of "assistance" to the waiver. It is important to note that the changes made to OAR are not part of this request for review. States are permitted by federal law to determine and set their eligibility criteria. We are waiting for CMS approval of the waiver to formally align the contents of the waiver with the OAR changes. Upon approval, Oregon DHS will implement those rule changes.

The transition plan for affected participants is addressed in the main section of the waiver application. Transition services will also be available to waiver participants who maintain eligibility but choose to move from a licensed residential settings to an in-home setting.

Because of the potential impact on waiver participants, Oregon DHS and the Oregon Health Authority are requesting to add transition services as an approved waiver service in this amendment. These services will help individuals transition safely from Medicaid home and community-based care services to independent living. The addition of the new service also requires a revision to performance measure 33.

If approved by CMS, transition services will be used to assist those that lose eligibility for waiver services to move from licensed residential settings into non-Medicaid funded in-home settings.

Oregon DHS is requesting from CMS an effective date for these changes of July 1, 2017.

Oregon DHS and the Oregon Health Authority appreciate your interest in these changes. We will consider all feedback as we develop the waiver application for these changes. Please share this information with individuals or groups who may be interested in or affected by the changes.

There is no change expected in the annual aggregate expenditures.

HOW TO COMMENT

Send written comments by fax, mail or email to:

Jesse S. Anderson, State Plan Manager
Health Policy and Analytics
500 Summer Street NE

Salem, Oregon 97301

Fax: 503-947-1119

Email: jesse.anderson@state.or.us

NEXT STEPS: The Department of Human Services and the Oregon Health Authority will consider all comments received. A waiver amendment will be submitted to the Centers for Medicare and Medicaid.

PUBLIC NOTICE PROPOSED CERTIFICATION OF COMPLETION FOR TRIGGCO REAL ESTATE LLC

COMMENTS DUE: 5 p.m., Wed., May 31, 2017

PROJECT LOCATION: 4320 N. Suttle Road, Portland, Oregon

PROPOSAL: The Oregon Department of Environmental Quality invites comments on its proposal to issue a Certificate of Completion to TriggCo Real Estate LLC (TriggCo) for cleanup work completed at their property under the terms of a Consent Order.

HIGHLIGHTS: The TriggCo property covers approximately 4.8 acres in an industrialized area of North Portland, between the Columbia River and Smith Lake. The property was developed in 1986 with two buildings used for vehicle maintenance and repair, and a parking area for buses and other vehicles. In 2011, TriggCo became aware of chromium contamination in the southeast corner of their property. Later that year, DEQ attributed the chromium contamination to steel slag that was used by TriggCo as gravel in the tractor trailer parking area.

TriggCo completed a site investigation and ecological risk assessment under terms of a Letter Agreement with DEQ. Hexavalent chromium contamination was detected in on-site soil above its DEQ risk-based concentration for occupational workers, indicating a potential risk to site workers that may come in contact with site soil. The ecological risk evaluation did not indicate a potential risk to wildlife from the contamination.

In December 2016, TriggCo completed remedial action under terms of a Consent Order with DEQ. The remedial action included construction of an updated stormwater management system and installation of a 4-6-inch asphalt cap over the gravel parking areas. The remedial action was documented in a Remedial Action Completion Report dated March 23, 2017.

Based on remedial actions completed at the property, DEQ concludes the site is protective of human health and the environment, and proposes to issue a Certificate of Completion to TriggCo. To ensure the asphalt cap and stormwater system continue to function as designed, TriggCo will conduct periodic inspections and maintenance as provided in Appendix C of the Consent Order and in the February 19, 2015, *Operations and Maintenance Plan: Stormwater Management System*.

The proposed Certification of Completion confirms TriggCo's release from liability for claims by the State of Oregon under ORS 465.200 to 465.545 and 465.900, 466.640, and 468B.310 regarding existing hazardous substance releases at or from the property.

HOW TO COMMENT: Send comments to DEQ Project Manager Mark Pugh at 700 NE Multnomah St., Suite No. 600, Portland, OR 97232 or pugh.mark@deq.state.or.us. For more information contact the project manager at 503-229-5587.

Find information about requesting a review of DEQ project files
Find the File Review Application form.

To access site summary information and other documents visit the DEQ Environmental Cleanup Site Information Database, select "Search complete ECSI database", then enter 5666 in the Site ID box and click "Submit" at the bottom of the page. Next, click the link labeled 5666 in the Site ID/Info column. Alternatively, you may go directly to Web Documents for TriggCo Property.

If you do not have web access and want to review the project file contact the DEQ project manager.

THE NEXT STEP: DEQ will review and consider all comments received during the comment period prior to issuance of the Certificate of Completion.

ACCESSIBILITY INFORMATION: Documents can be provided upon request in an alternate format for individuals with disabili-

OTHER NOTICES

ties or in a language other than English for people with limited English skills. To request a document in another format or language, call DEQ in Portland at 503-229-5696, or toll-free in Oregon at 1-800-452-4011, ext. 5696; or email deqinfo@deq.state.or.us.

REQUEST FOR COMMENTS PROPOSED NO FURTHER ACTION FOR THE OREGON PALLET SOIL AND GROUNDWATER CONTAMINATION, SALEM, OREGON

COMMENTS DUE: June 1, 2017

PROPOSAL: The Oregon Department of Environmental Quality invites comments on its proposal to issue a conditional No Further Action determination for the Oregon Pallet Site. The public is invited to comment on the proposal from May 1–June 1, 2017.

HIGHLIGHTS: Petroleum contamination was noted by DEQ staff during the investigation to determine the extent of impacted soil and groundwater associated with the former Salem Blacktop site. This petroleum contamination extends well onto Oregon Pallet's property. Further assessment on the Oregon Pallet property did not identify other areas where DEQ's risk-based concentrations were significantly exceeded, given the current and reasonably likely future uses of the property. DEQ worked with both Oregon Pallet and Salem Blacktop property owners to define an area where use restrictions would be required to ensure future use was protective of human health, safety and welfare. With these limits on future use of a defined area of the site, DEQ is considering that no further action is required.

HOW TO COMMENT: Send comments to DEQ Project Manager Jim Glass at 4026 Fairview Industrial Drive SE, Salem, OR 97302 or glass.jim@deq.state.or.us. For more information contact the project manager at 503-378-5044.

Find information about requesting a review of DEQ project files at: <http://www.oregon.gov/deq/about-us/Pages/Request-Public-Record.aspx>

To access site summary information and other documents visit the DEQ Environmental Cleanup Site Information Database at <http://www.oregon.gov/deq/Hazards-and-Cleanup/env-cleanup/Pages/ecsi.aspx> enter 6168 in the Site ID click the link labeled 6168 in the Site ID/Info column.

If you do not have web access and want to review the project file contact the DEQ project manager.

NEXT STEP: DEQ will consider all public comments received by the date and time stated above before making a final decision about the proposed settlement. DEQ will issue a public notice of DEQ's final decision in this publication.

ACCESSIBILITY INFORMATION: DEQ is committed to accommodating people with disabilities. Please notify DEQ of any special physical or language accommodations or if you need information in large print, Braille or another format. To make these arrangements, contact DEQ Office of Communications and Outreach 503-229-5696 or toll free in Oregon at 800-452-4011; fax to 503-229-6762; or e-mail to deqinfo@deq.state.or.us. People with hearing impairments may call 711.

REQUEST FOR COMMENTS PROPOSED NO FURTHER ACTION FOR THE SALEM BLACKTOP SOIL AND GROUNDWATER CONTAMINATION, SALEM, OREGON

COMMENTS DUE: June 1, 2017

PROJECT LOCATION: 1815 22nd Street SE Salem, Oregon

PROPOSAL: The Oregon Department of Environmental Quality invites comments on its proposal to issue a conditional No Further Action determination for the Salem Blacktop Site. The public is invited to comment on the proposal from May 1–June 1, 2017.

HIGHLIGHTS: Subsurface petroleum contamination originated from various sources throughout the Salem Blacktop property. Soil and groundwater throughout the site has been impacted with low levels of diesel and heavy oil/asphalt contamination from past industrial

practices at the asphalt plant. This site-wide contamination was first identified in five groundwater monitoring wells installed across the site as part of a site assessment completed in 2007. Two primary sources of contamination were identified, as the cold-patch mixing area and the truck-bed spraying area.

The remaining contamination extends beyond the current northern property boundary onto the neighboring site that was formerly part of Salem Blacktop operations. During the course of this site cleanup one underground storage tank was decommissioned in-place, each of the source areas were assessed, as well as the sediments, plants and animals associated with Pringle Creek. DEQ worked with the Salem Blacktop property owners to develop the site-specific use restrictions required to ensure future use was protective of human health, safety, welfare, and the environment. With these limits on future use of the site, DEQ is considering that no further action is required.

HOW TO COMMENT: Send comments to DEQ Project Manager Jim Glass at 4026 Fairview Industrial Drive SE, Salem, OR 97302 or glass.jim@deq.state.or.us. For more information contact the project manager at 503-378-5044.

Find information about requesting a review of DEQ project files at: <http://www.oregon.gov/deq/about-us/Pages/Request-Public-Record.aspx>

To access site summary information and other documents visit the DEQ Environmental Cleanup Site Information Database at <http://www.oregon.gov/deq/Hazards-and-Cleanup/env-cleanup/Pages/ecsi.aspx> enter 4882 in the Site ID click the link labeled 4882 in the Site ID/Info column.

If you do not have web access and want to review the project file contact the DEQ project manager.

NEXT STEP: DEQ will consider all public comments received by the date and time stated above before making a final decision about the proposed settlement. DEQ will issue a public notice of DEQ's final decision in this publication.

ACCESSIBILITY INFORMATION: DEQ is committed to accommodating people with disabilities. Please notify DEQ of any special physical or language accommodations or if you need information in large print, Braille or another format. To make these arrangements, contact DEQ Office of Communications and Outreach 503-229-5696 or toll free in Oregon at 800-452-4011; fax to 503-229-6762; or e-mail to deqinfo@deq.state.or.us. People with hearing impairments may call 711.

PROPOSED FINAL REMEDY FOR UNION PACIFIC EUGENE YARD

COMMENTS DUE: 5 p.m., Thursday, June 15

PROJECT LOCATION: Union Pacific Railroad – Eugene Yards, 341 Bethel Drive, Eugene

PROPOSAL: The Oregon Department of Environmental Quality is recommending approval of a final remedy for parts of the Union Pacific Railroad Eugene Yard. The Final Remedial Action will include onsite controls such as worker safety plans, and ongoing monitoring to ensure that off-site groundwater contamination remains low and does not present a risk to neighbors. The controls were developed in accordance with Oregon Revised Statutes 465.200 and Oregon Administrative Rules Chapter 340, Division 122, Sections 010 through 115.

HIGHLIGHTS: DEQ began investigating possible contamination at the rail yard site in the early 1990s. The investigation found groundwater beneath parts of the site was contaminated by solvents that were used at the former locomotive facility. The solvents leaked into the groundwater and the contamination spread off site, beneath parts of the Trainsong and River Road neighborhoods. DEQ and Southern Pacific Railroad (which was later purchased by Union Pacific) conducted multiple phases of investigation in the 1990s and 2000s. This included many sampling events, which initially included sampling private backyard irrigation wells, as well as comprehensive sampling on the rail yard itself. Contamination from petroleum hydrocarbons and metals was also found in soil on site. When investigators discovered that solvent vapors might be getting

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into homes in the Trainsong area, vapor barriers were installed in nine homes. Union Pacific also implemented aggressive groundwater treatment actions to reduce the amount of contaminated groundwater moving off site. By 2011 solvent concentrations in soil vapor had dropped consistently below risk-based screening levels and DEQ approved removal of the vapor barriers. DEQ is proposing to manage the potential future risks to site workers through on-site controls and deed restriction. Current off-site risk is acceptable, but monitoring will continue to ensure that contaminant levels in groundwater continue to decline, and periodic records searches will be conducted going forward to identify wells that might be used for more than irrigation.

HOW TO COMMENT: DEQ is hosting a public meeting at 6 p.m. Monday May 22 at Kelly Middle School, 850 Howard Avenue, Eugene. You can also send comments to DEQ Project Manager Don Hanson at 165 East Seventh Avenue, Suite 100, Eugene, OR 97401-3049 or hanson.don@deq.state.or.us. For more information contact the project manager at 541-687-7349. DEQ is accepting comments until 5 p.m. Thursday June 15.

Find information about requesting a review of DEQ project files at: <http://www.oregon.gov/deq/about-us/Pages/Request-Public-Record.aspx>

Find the File Review Application form at: <http://www.oregon.gov/deq/about-us/Pages/Requesting-Public-Records-Form.aspx>

If you do not have web access and want to review the project file contact the DEQ project manager.

FOR ECSI SITES: To access site summary information and other documents in the DEQ Environmental Cleanup Site Information database, go to <http://www.oregon.gov/deq/Hazards-and-Cleanup/env-cleanup/Pages/ecsi.aspx>, select "Search complete ECSI database", then enter [ECSI No.312] in the Site ID box and click "Submit" at the bottom of the page. Next, click the link labeled [ECSI #] in the Site ID/Info column. Alternatively, you may go directly to the database website for this page at <https://goo.gl/WsLvpe>

If you do not have web access and want to review the project file contact the DEQ project manager.

THE NEXT STEP: DEQ will consider all public comments before taking final action. Following the comment period, DEQ will prepare a Record of Decision that stipulates the remedial activities that UPRR must complete at the site. UPRR will then enter into an agreement with DEQ to complete the remedial design and remedial action implementation.

ACCESSIBILITY INFORMATION: Documents can be provided upon request in an alternate format for individuals with disabilities or in a language other than English for people with limited English skills. To request a document in another format or language, call DEQ in Portland at 503-229-5696, or toll-free in Oregon at 1-800-452-4011, ext. 5696; or email deqinfo@deq.state.or.us.

REQUEST FOR COMMENTS PROPOSED RECORD OF DECISION AMENDMENT FOR LAKESIDE LANDFILL

COMMENTS DUE: 5 p.m., May 31, 2017

PROJECT LOCATION: 14930 SW Vandermost Rd., Beaverton, OR

PROPOSAL: A change is proposed to the November 29, 2011 Record of Decision (ROD) at the Lakeside Reclamation Landfill located at 14930 SW Vandermost Road in Beaverton, Oregon. The change would replace the hydraulic control of groundwater contamination portion of the remedy with monitored natural attenuation; all other parts of the remedy would be unchanged. The proposed change meets the cleanup standards specified in Oregon Revised Statute (ORS) 465.315 and Oregon Administrative Rule (OAR) 340-122-040.

HIGHLIGHTS: Lakeside Reclamation Landfill is a 37-acre former construction debris landfill that operated since the early 1950's until closure in 2009. In the 2011 ROD DEQ decided that contaminated groundwater seepage to the river posed a potentially significant adverse affect on beneficial uses of the river for aquatic organisms but posed no significant human health risks. This determination was

based on the assumption that groundwater discharges to the river with little or no reduction in contaminant strength.

Additional investigation was undertaken following the 2011 ROD. From 2014 through 2016 three porewater/surface water investigations were completed in the Tualatin River adjacent to the landfill and at upstream and downstream locations. The 2016 porewater investigation included a bioassay analysis using collected porewater. These investigations showed that contaminant concentrations in landfill leachate are significantly reduced before discharge to the river, remedial action levels are generally achieved within shallow porewater, and exposure of bioassay test organisms to porewater has little to no impact on the organism's survival and reproduction. The ROD amendment proposes to replace the hydraulic containment element of the ROD with monitored natural attenuation. All other aspects of the ROD including improvement and maintenance of the evapotranspiration cover, groundwater and landfill gas monitoring would continue unchanged.

HOW TO COMMENT: Send comments to project manager Bob Williams at 700 NE Multnomah St., Suite 600, Portland, Oregon 97232 or williams.robert.k@deq.state.or.us. For more information contact the project manager at 503-229-6802.

Find information about requesting a review of DEQ project files at: <http://www.oregon.gov/deq/about-us/Pages/Requesting-Public-Records-FAQ.aspx>

Find the File Review Application form at: <https://www.oregon.gov/deq/about-us/Pages/Requesting-Public-Records-Form.aspx>

To access site summary information and other documents in the DEQ Environmental Cleanup Site Information database, go to <http://www.oregon.gov/deq/Hazards-and-Cleanup/env-cleanup/Pages/ecsi.aspx>, select "Search complete ECSI database", then enter 4413 in the Site ID box and click "Submit" at the bottom of the page. Next, click the link labeled 4413 in the Site ID/Info column. Alternatively, you may go directly to the database website for this page at [<http://www.deq.state.or.us/Webdocs/Forms/Output/FPController.ashx?SourceIdType=11&SourceID=4413&Screen=Load>].

If you do not have web access and want to review the project file contact the DEQ project manager.

THE NEXT STEP: Once the comment period has ended, DEQ will review and respond to all written comments before issuing the amendment to the Record of Decision.

ACCESSIBILITY INFORMATION: Documents can be provided upon request in an alternate format for individuals with disabilities or in a language other than English for people with limited English skills. To request a document in another format or language, call DEQ in Portland at 503-229-5696, or toll-free in Oregon at 1-800-452-4011, ext. 5696; or email deqinfo@deq.state.or.us.

REQUEST FOR COMMENTS PROPOSED CONDITIONAL NO FURTHER ACTION FOR THE HALTON COMPANY AND HALTON VOITH SITES

COMMENTS DUE: 5 p.m., Wednesday, May 31, 2017

PROJECT LOCATION: 4421 NE Columbia Blvd and 6654 NE 47th Ave, Portland, Oregon

PROPOSAL: DEQ recommends a Conditional No Further Action for the properties subject to institutional controls. The proposed determination meets the requirements of Oregon Administrative Rules Chapter 340 Division 122, Sections 0010 to 0140; and ORS 465.200 through 465.455.

HIGHLIGHTS: The Halton Co. completed a remedial investigation and stormwater source control evaluation at both properties. The source control evaluation performed included stormwater monitoring and site improvements to remove and control contaminant sources. The evaluation and actions, in addition to payment into DEQ's settlement account, fulfill requirements of a 2012 settlement with DEQ for historical contribution to sediment contamination in the Whitaker Slough. Decades of light industrial uses have resulted in residual low-level contamination at the properties. DEQ has concluded the sites do not pose unacceptable risk to site workers under

OTHER NOTICES

current conditions as industrial properties. Measures will be taken to prevent contact with subsurface soils, including preservation of concrete-asphalt areas, and employing specific work practices during future redevelopment activities. Proposed institutional controls also incorporate continued stormwater management and restricting groundwater use as provisions of a Conditional No Further Action determination. Similar conditions are recommended for the Halton Voith site.

Institutional controls will be recorded on the property deed of the Halton Company site.

HOW TO COMMENT: Send comments to DEQ Project Manager Erin McDonnell at 700 NE Multnomah Street, Suite 600, Portland, Oregon 97232, or mcdonnell.erin@deq.state.or.us. For more information, contact the project manager at 503-229-6900.

Find information about requesting a review of DEQ project files at: <http://www.oregon.gov/deq/about-us/Pages/Requesting-Public-Records-FAQ.aspx>

Find the File Review Application form at: <http://www.oregon.gov/deq/about-us/Pages/Request-Public-Record.aspx>

To access site summary information and other documents in the DEQ Environmental Cleanup Site Information database, go to

<http://www.oregon.gov/deq/Hazards-and-Cleanup/env-cleanup/Pages/ecsi.aspx>, select “Search complete ECSI database”, then enter ECSI# 121 for the Halton Company Site or ECSI# 1503 for the Halton Voith Site in the Site ID box, and click “Submit” at the bottom of the page. Next, click the link labeled ECSI# 121 or ECSI# 1503 in the Site ID/Info column. Alternatively, you may go directly to the database website for this page at <http://www.deq.state.or.us/Webdocs/Forms/Output/FPController.ashx?SourceId=121&SourceIdType=11>, or <http://www.deq.state.or.us/Webdocs/Forms/Output/FPController.ashx?SourceId=1503&SourceIdType=11>.

If you do not have web access and want to review the project file contact the DEQ project manager.

THE NEXT STEP: DEQ will consider all public comments received within the public comment period and prior issuance of a conditional no further action determination

ACCESSIBILITY INFORMATION: DEQ is committed to accommodating people with disabilities. If you need information in another format, please contact DEQ toll free in Oregon at 800-452-4011, email at deqinfo@deq.state.or.us, or 711 for people with hearing impairments.

NOTICES OF PROPOSED RULEMAKING

Notices of Proposed Rulemaking and Proposed Rulemaking Hearings

The following agencies provide Notice of Proposed Rulemaking to offer interested parties reasonable opportunity to submit data or views on proposed rulemaking activity. To expedite the rulemaking process, many agencies have set the time and place for a hearing in the notice. Copies of rulemaking materials may be obtained from the Rules Coordinator at the address and telephone number indicated.

Public comment may be submitted in writing directly to an agency or presented orally at the rulemaking hearing. Written comment must be submitted to an agency by 5:00 p.m. on the Last Day for Comment listed, unless a different time of day is specified. Oral comments may be submitted at the appropriate time during a rulemaking hearing as outlined in OAR 137-001-0030.

Agencies providing notice request public comment on whether other options should be considered for achieving a proposed administrative rule's substantive goals while reducing negative economic impact of the rule on business.

In Notices of Proposed Rulemaking where no hearing has been set, a hearing may be requested by 10 or more people or by an association with 10 or more members. Agencies must receive requests for a public rulemaking hearing in writing within 21 days following notice publication in the Oregon Bulletin or 28 days from the date notice was sent to people on the agency mailing list, whichever is later. If sufficient hearing requests are received by an agency, notice of the date and time of the rulemaking hearing must be published in the Oregon Bulletin at least 14 days before the hearing.

**Auxiliary aids for persons with disabilities are available upon advance request. Contact the agency Rules Coordinator listed in the notice information.*

Board of Geologist Examiners
Chapter 809

Rule Caption: Adopt 2017–2019 Operating Budget through amendments to Board Operating Budget and Fee Rules
Date: 5-18-17 **Time:** 10 a.m. **Location:** Association Center
707 13th St. SE
Salem, OR 97301

Hearing Officer: Christine Valentine
Stat. Auth.: 809-010-0001: ORS 182.466, 670.310, 672.705; 809-010-0025: ORS 182.462, 607.310, 672.505
Stats. Implemented: 809-010-0001: ORS 672.705; 809-010-0025: ORS 672.505, 182.462

Proposed Amendments: 809-010-0001, 809-010-0025
Last Date for Comment: 5-18-17, Close of Business

Summary: Amend the expenditure limit in the Operating Budget rule to reflect the Board's proposed 2017-2019 budget. Amend the Fee rule to increase the Board's application fee and select registration and renewal fees. Fee increases are proposed to increase new revenues as a means to provide sufficient operating revenues for 2017–2019 while ensuring the continued financial solvency of the Board at its current operational level. The fee increases will be the first increases to application, registration and renewal fees since 2007.

Rules Coordinator: Christine Valentine
Address: Board of Geologist Examiners, 707 13th St. SE, Suite 114, Salem, OR 97301
Telephone: (503) 566-2837

Board of Nursing
Chapter 851

Rule Caption: To amend, adopt and repeal various rules within Chapter 851 Division 45
Date: 6-13-17 **Time:** 6:30 p.m. **Location:** 17938 SW Upper Boones Ferry Rd.
Portland, OR 97224

Hearing Officer: Colin Hunter, Board President
Stat. Auth.: ORS 678.010–ORS 678.448
Other Auth.: ORS 433.800–ORS 433.830, ORS 339.869
Stats. Implemented: ORS 678.010–ORS 678.138, ORS 678.150, ORS 678.157–ORS 678.164, ORS 678.245–ORS 678.285
Proposed Adoptions: 851-045-0035
Proposed Amendments: 851-045-0030, 851-045-0040, 851-045-0050, 851-045-0060, 851-045-0070, 851-045-0090, 851-045-0100
Proposed Repeals: 851-045-0080

Last Date for Comment: 6-13-17, Close of Hearing
Summary: Amends Division 45 to contain practice setting neutral language, adopts new rule number for definitions, adopts stand-alone standards related to documentation, adopts standards related to licensee practice role disclosure to clients, per Board direction incorporates former policy language related to accepting and implementing orders for client care and treatment into rule, provides greater clarity in scope of practice standards at the registered nurse level of licensure and the licensed practical nurse level of licensure, incorporates standards related to ORS 433.800 training on lifesaving treatments, per Board direction incorporates standards specific to ORS 678.038 for registered nurses employed by a school, incorporates former policy language related to supervision of the registered nurse as first assistant into rule, sequences conduct derogatory to the practice of nursing standards with similar conduct unbecoming a certified nursing assistant and conduct unbecoming a certified medication aide, repeals 851-0045-0080 Criminal Conviction History/Falsification of Application Denial of Licensure, Revocation of Licensure.

Rules Coordinator: Peggy A. Lightfoot
Address: Board of Nursing, 17938 SW Upper Boones Ferry Rd., Portland, OR 97224
Telephone: (971) 673-0638

Rule Caption: To comply with DAS policy regarding standardization of Public Records requests and Executive Order 16-06
Date: 6-15-17 **Time:** 9 a.m. **Location:** 17938 SW Upper Boones Ferry Rd.
Portland, OR

Hearing Officer: Colin Hunter, Board President
Stat. Auth.: ORS 678.150 and ORS 678.410
Other Auth.: Executive Order 16-06
Stats. Implemented: ORS 678.410
Proposed Repeals: 851-002-0060

Last Date for Comment: 6-15-17, Close of Hearing
Summary: Eliminates the Oregon Board of Nursing specific Public Records charges and adopts DAS policy 107-001-030.

Rules Coordinator: Peggy A. Lightfoot
Address: Board of Nursing, 17938 SW Upper Boones Ferry Rd., Portland, OR 97224
Telephone: (971) 673-0638

Rule Caption: To update references and language.
Date: 6-15-17 **Time:** 9 a.m. **Location:** 17938 SW Upper Boones Ferry Rd.
Portland, OR 97224

Hearing Officer: Colin Hunter, Board President
Stat. Auth.: ORS 678.150
Other Auth.: OAR 125
Stats. Implemented: ORS 678.150
Proposed Adoptions: 851-001-0115, 851-001-0125, 851-001-0135

Proposed Amendments: 851-001-0000, 851-001-0005, 851-001-0010, 851-001-0015, 851-001-0020, 851-001-0030, 851-001-0100
Last Date for Comment: 6-15-17, Close of Hearing
Summary: Amend OAR 851-001 related to Board Rules of Practice and Procedure.

Updating of Model Rules Reference and eliminate redundant and outdated rule language.

NOTICES OF PROPOSED RULEMAKING

Rename process for license application after voluntary surrender/revocation to match current process.

Eliminate process language from the Fitness for Practice evaluation, process will be part of agency internal workflow.

Clarify that SSNs are required to be produced at initial licensure and not at renewal.

Change consultant contracting language to match DAS rules and eliminate agency specific procurement language.

Align Criminal Background Check process with DAS rules regarding Criminal Background Checks for applicants and employees.

Rules Coordinator: Peggy A. Lightfoot

Address: Board of Nursing, 17938 SW Upper Boones Ferry Rd., Portland, OR 97224

Telephone: (971) 673-0638

Rule Caption: Amends rules to reflect the entity that licenses schools that provide training and certificate programs.

Date:	Time:	Location:
6-13-17	6:30 p.m.	17938 SW Upper Boones Ferry Rd. Portland, OR 97224

Hearing Officer: Colin Hunter, Board President

Stat. Auth.: ORS 678.440 & ORS 678.444

Stats. Implemented: ORS 678.444

Proposed Amendments: 851-061-0030

Last Date for Comment: 6-13-17, Close of Hearing

Summary: Amends OAR 851-061-0030 to reflect the Oregon Higher Education Coordinating Commission (HECC) Office of Private Postsecondary Education Private Career Schools (PCS) Licensing Unit as the entity that licenses schools that provide training and certificate programs in Oregon. The Division 61 rules still refer to the Oregon Department of Education as the licensing entity of PCS.

Rules Coordinator: Peggy A. Lightfoot

Address: Board of Nursing, 17938 SW Upper Boones Ferry Rd., Portland, OR 97224

Telephone: (971) 673-0638

Rule Caption: Repeals rule language covered in statute and administrative rule.

Date:	Time:	Location:
6-13-17	6:30 p.m.	177938 SW Upper Boones Ferry Rd. Portland, OR 97224

Hearing Officer: Colin Hunter, Board President

Stat. Auth.: ORS 678.442

Stats. Implemented: ORS 678.442

Proposed Repeals: 851-063-0080, 851-063-0110

Last Date for Comment: 6-13-17, Close of Hearing

Summary: It is being proposed at this time that OAR 851-063-0080 and OAR 851-063-0110 be deleted from Division 63 when the revisions to Division 1 get approved. The content of OAR 851-063-0800 is covered in ORS 678.442 and OAR 851-063-0110 is in conflict with current Oregon Statutes. The proposed language revision in Division 1 will replace the current OAR 851-063-0110.

Rules Coordinator: Peggy A. Lightfoot

Address: Board of Nursing, 17938 SW Upper Boones Ferry Rd., Portland, OR 97224

Telephone: (971) 673-0638

Board of Pharmacy Chapter 855

Rule Caption: Amendments to Div 041 Prescription Refills related to the auto-refilling of prescriptions by pharmacy outlets.

Date:	Time:	Location:
5-25-17	9:30 a.m.	800 NE Oregon St. Conf. Rm. 1A Portland, OR

Hearing Officer: Staff

Stat. Auth.: ORS 689.205

Stats. Implemented: ORS 689.505 & 689.515

Proposed Amendments: 855-041-1120

Last Date for Comment: 5-25-17, 4:30 p.m.

Summary: Amendments to Div 041 Prescription Refill rules modify previously adopted rules that the Board decided to delay implementation and were not enforced in 2016. The proposed rules are the result of a Stakeholder Work Group, which was required by a legislative committee.

The proposed rules ensure that auto refill programs in retail pharmacies are not used without the prior authorization of the patient or the patient's agent. Auto refill programs in retail pharmacy practice settings can not be used for controlled substance prescriptions in order to help limit the potential for abuse; ensure that outlets appropriately enroll individual prescription medications in auto refill programs; that outlets ensure that medications on auto refill are consistent with the patient's current medication therapy, and that the outlet ensures removal of a prescription from the automatic refilling processes when the prescription is returned to stock or delivery is refused.

This notice and proposed rule can be found on the Board's website at: www.pharmacy.state.or.us.

Rules Coordinator: Karen MacLean

Address: Board of Pharmacy, 800 NE Oregon St., # 150, Portland, OR 97232

Telephone: (971) 673-0001

Rule Caption: Amends Div 065 Wholesaler rules to reflect changes in DEA law for reporting suspicious orders.

Date:	Time:	Location:
5-25-17	9:30 a.m.	800 NE Oregon St. Conf. Rm. 1A Portland, OR

Hearing Officer: Staff

Stat. Auth.: ORS 689.205

Stats. Implemented: ORS 689.155, 689.315, 689.325, 689.527

Proposed Amendments: 855-065-0010

Last Date for Comment: 5-25-17, 4:30 p.m.

Summary: Amends rule to add requirement for Wholesaler Class 1 (with prescription) distributor must notify the Board of suspicious orders. The intention is to focus on controlled substance reporting. This matches the DEA requirement in 21 CFR 1301.74 and the Board simply wants to receive the same notification. Suspicious orders include orders of unusual size, orders that deviate substantially from a normal pattern and orders of unusual frequency.

This notification must be made in writing, which means a written letter, email or fax copy of what is submitted to the DEA.

A copy of this notice and the proposed rules can be found on the Board's website at: www.pharmacy.state.or.us.

Rules Coordinator: Karen MacLean

Address: Board of Pharmacy, 800 NE Oregon St., # 150, Portland, OR 97232

Telephone: (971) 673-0001

Department of Consumer and Business Services, Oregon Occupational Safety and Health Division Chapter 437

Rule Caption: Adopt amendments to remove certain schools and education support from the recordkeeping exempt list.

Date:	Time:	Location:
5-23-17	11 a.m.	Oregon DHS Bldg. J Waybrant Rm., First Flr. 738 W Harvard Avenue Roseburg, OR 97471
5-24-17	10 a.m.	Oregon OSHA, Durham Plaza 16760 SW Upper Boones Ferry Rd. Suite 200 Tigard, OR 97224

Hearing Officer: Sue Joye

Stat. Auth.: ORS 654.025(2) and 656.726(4)

NOTICES OF PROPOSED RULEMAKING

Stats. Implemented: ORS 654.001–654.295, 654.412–654.423, 654.750–654.780

Proposed Amendments: 437-001-0700

Last Date for Comment: 6-21-17, Close of Business

Summary: The Oregon School Employees Association (OSEA) has led a campaign to reduce the amount of preventable injuries resulting in from violence from the school staff they represent. In January of this year OSEA petitioned Oregon OSHA to initiate rule-making to remove NAICS 6111 (Elementary and Secondary Schools), 6116 (Other Schools of Instruction), and 6117 (Educational Support Services) from the exempt status of Table 1 in OAR 437-001-0700 Recording Workplace Injuries and Illnesses. Typically industries on the list that are exempted from recordkeeping are considered low hazard industries. In considering the petition to Oregon OSHA made by OSEA, it was discovered that industries covered by this rule have injury and illness rates that are significantly higher than would be expected in a low hazard industry. To illustrate: The DART rate (days away, restricted or transferred) for elementary and secondary schools from 2011 through 2015 are slightly higher than that of nonresidential construction. Recording injuries under the rule will enable the employer to identify causes and trends of injuries and create corrective actions to eliminate recurrence.

Please visit our website osha.oregon.gov Click 'Rule changes' in the Topics, rules, guidelines column and view our proposed rules; or, select other rule activity from the left vertical column on the Proposed Rules page.

Rules Coordinator: Sue C. Joye

Address: Department of Consumer and Business Services, Oregon Occupational Safety and Health Division, 350 Winter St. NE, Salem, OR 97301-3882

Telephone: (503) 947-7449

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Department of Corrections Chapter 291

Rule Caption: Searches Conducted by DOC Parole and Probation Officers

Stat. Auth.: ORS 144.404, 179.040, 423.020, 423.030 & 423.075

Stats. Implemented: ORS 144.404–144.409, 179.040, 423.020, 423.030 & 423.075

Proposed Amendments: 291-028-0105, 291-028-0110

Last Date for Comment: 6-5-17, 4:30 p.m.

Summary: These rule revisions are necessary to remove a process that is no longer needed for parole and probation officers to conduct searches and to update the definitions to current terminology.

Rules Coordinator: Janet R. Worley

Address: Department of Corrections, 2575 Center St. NE, Salem, OR 97301-4667

Telephone: (503) 945-0933

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Rule Caption: Medical Clearance for Inmate Food Handlers

Stat. Auth.: ORS 179.040, 423.020, 423.030, & 423.075

Stats. Implemented: ORS 179.040, 423.020, 423.030, & 423.075

Proposed Amendments: 291-061-0061

Last Date for Comment: 6-5-17, 4:30 p.m.

Summary: To lower the risk of the transmission of foodborne illnesses through the food supply, the department's rule requires a medical clearance that the department's Health Services certify that an inmate assigned to the Food Services Section is free from communicable disease. This rule amendment clarifies that that certification requirement concerns communicable diseases that are transmitted through the food supply or the handling of food, rather than any or all communicable diseases.

Rules Coordinator: Janet R. Worley

Address: Department of Corrections, 2575 Center St. NE, Salem, OR 97301-4667

Telephone: (503) 945-0933

Department of Energy Chapter 330

Rule Caption: Amending and repealing public records request rules.

Date:
5-22-17

Time:
2 p.m.

Location:
Oregon Department of Energy
550 Capitol NE
Salem, OR 97301

Hearing Officer: Elizabeth Ross

Stat. Auth.: ORS 192.430

Stats. Implemented: ORS 192.410–192.505

Proposed Amendments: 330-001-0025

Proposed Repeals: 330-001-0015

Last Date for Comment: 5-22-17, 5 p.m.

Summary: The Oregon Department of Energy proposes amendments to public records request rules to align with Oregon Executive Order No. 16-06 and DAS Statewide Policy No. 107-001-030. To align with the DAS policy, the proposed rule amendments remove duplicative language covered by the DAS policy relating to fees. The proposed amendments update requirements and add the requirement for a requester to provide an email address. The rulemaking also proposes repealing the department's rule on charges for computer information requests, which is covered under the general public records request rule and does not need a separate rule.

The Oregon Department of Energy plans for the rules to be effective upon filing. The Oregon Department of Energy requests public comment on these draft rules. A call-in number is available for the public hearing, please see website for details and other materials: <http://www.oregon.gov/energy/Get-Involved/Pages/Rulemaking.aspx>

Rules Coordinator: Elizabeth Ross

Address: Department of Energy, 550 Capitol St. NE, 1st Floor, Salem, OR 97301

Telephone: (503) 378-8534

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Department of Energy, Energy Facility Siting Council Chapter 345

Rule Caption: Reorganization of Div. 27 and rewrite of rules governing requests for amendments to site certificates.

Date:
5-25-17

Time:
4:30 p.m.

Location:
Meitner Conf. Rm.
Oregon Dept. of Energy, 1st Flr.
550 Capitol St. NE, Salem, OR

97301

Hearing Officer: Jason Sierman

Stat. Auth.: ORS 469.405, 469.470 & 469.501

Stats. Implemented: ORS 469.350, 469.501 & 469.503

Proposed Adoptions: 345-027-0051, 345-027-0053, 345-027-0055, 345-027-0057, 345-027-0059, 345-027-0063, 345-027-0065, 345-027-0067, 345-027-0068, 345-027-0071, 345-027-0072, 345-027-0075

Proposed Amendments: 345-015-0014, 345-015-0016, 345-015-0080, 345-015-0083, 345-027-0011, 345-027-0050, 345-027-0060, 345-027-0090, 345-027-0100

Proposed Repeals: 345-027-0070, 345-027-0080

Proposed Renumberings: 345-027-0020 to 345-025-0006, 345-027-0023 to 345-025-0010, 345-027-0028 to 345-025-0016

Proposed Ren. & Amends: 345-027-0000 to 345-027-0013, 345-027-0030 to 345-027-0085

Last Date for Comment: 5-25-17, Close of Hearing

Summary: The ultimate goals of the proposed rules are to enhance the opportunity for meaningful public participation while minimizing increases in review time. This rulemaking is not intended to alter the substantive aspects of how the Council's rules and standards apply to the Council's review of a request for an amendment to a site certificate. The scope of this rulemaking is intended to be strictly procedural in nature and effect.

NOTICES OF PROPOSED RULEMAKING

The proposed rules would provide a standard, generally applicable, one-size-fits-most process that the Council would use to review most types of changes proposed by energy facility site certificate holders in a request for amendment (RFA). The idea of having most types of proposed changes reviewed through a standard process is not new and is in keeping with how existing rules are written. Existing rules provide three Council review processes: a standard, one-size-fits-most process; a transfer process; and an expedited process.

The originally proposed rules provided for only two processes: a standard, one-size-fits-most process and a transfer process. However, based on direction staff received from the Council after the first rulemaking hearing it held on February 24, 2017, staff revised the proposed rules to include a new expedited review process that is functionally similar to the existing standard review process in terms of the estimated time it takes the Council to complete its review. The proposed new expedited process is also similar to the proposed new standard process in that the steps comprising the new expedited process are the same as the steps in the proposed new standard process, minus the public hearing step, minus the step for the Council to comment on the DPO, and minus the opportunity for persons to request a contested case. Finally, the new expedited process is also similar to the existing expedited process because in order for an RFA to be reviewed through the new expedited process, the Council must first approve the certificate holder's request for expedited review in a preliminary step. Staff has written provisions for this preliminary step into the Amendment Determination Request process found in proposed rule OAR 345-027-0057.

Therefore, the procedural steps of the proposed rules would provide both a new standard review process that would function quite differently than the steps of the existing standard amendment process, and a new expedited review process that would function quite similarly to the existing standard review process, but it would be comprised of many of the same steps as the new standard review process. This new standard review process borrows some steps from the existing review process for site certificate applications, including adding steps for completeness determination, a draft proposed order, and a public hearing on the draft proposed order.

The Council's existing rules for reviewing requests for amendment do not include a list of the specific types of changes that must be reviewed through the existing standard process and do not include a list of the specific types of changes that must be reviewed through the existing extended review process. Rather, under existing rules, the standard, shorter review process is the default, and the extended, longer review process must be justified by staff or requested by a certificate holder.

In recent years, staff has reviewed nearly all RFAs under the extended review process. Extended review has been required due to the complexity of the changes proposed in RFAs and the incompleteness of RFAs. Therefore, the proposed rules would flip the concept employed under the existing rules. Rather than having the shorter process set as the default review process (as it is under existing rules), the proposed rules would set the default review process as being the process with the most steps. Under the proposed rules, this default process would still be called the standard process, but where the new standard process is the review process with the most steps. Under the proposed rules, the shorter review process with less steps (the expedited review process) would apply to an RFA only after the Council approves a certificate holder's request for expedited review under proposed rule 345-027-0057.

The new standard process would be applicable to the same types of changes proposed by site certificate holders as those in which the existing standard amendment process applies. In other words, all types of proposed changes that require an RFA under existing rules would also require an RFA under the proposed rules, and transfers of site certificate holders or transfers in ownership of site certificate holders would continue to be reviewed through the transfer review rules of 345-027-0100.

In addition to the new steps being proposed, the proposed rules also require an amendment to the site certificate for changes proposing to add any quantity of area to the site boundary. This differs from the existing amendment process, where existing rules only require an amendment for a proposed change that adds area to the site boundary if adding area, or if some other change proposed in the same request for amendment to add area, triggers any of the thresholds under existing rule 345-027-0050(1). Staff's rationale for requiring an amendment to the site certificate for changes proposing to add area to the site boundary is that adding new area carries a relatively high likelihood of impacts to the resources the Council's rules and standards are designed to protect. Also, compared to other types of proposed changes, adding area to the site boundary increases the likelihood that new neighboring property owners could be affected by the proposed change.

Based on direction staff received from the Council after the first rulemaking hearing it held on February 24, 2017, staff revised the proposed rules to include a new option under the Amendment Determination Request (ADR) process to give the Council discretion in deciding, on a case by case basis, whether a certificate holder's proposal to add area to its site boundary would require a request for amendment. The ADR process in the proposed rules is the functional equivalent of the change request process in existing rules. Similar to the existing change request process, the proposed ADR process allows the certificate holder to request authorization to add area to the site boundary that does not trigger the need for an amendment under proposed rule 345-027-0050(5). However, rather than the optional Council review under the existing change request process, Council review is mandatory under the proposed ADR process. Under the proposed ADR process, staff is required to refer its determination of whether the proposed addition of area requires an amendment to the Council for concurrence or rejection.

The 9 major steps of the new standard amendment process being proposed in this rulemaking are summarized briefly in the following 9 paragraphs:

Pre-Amendment Conference (PAC)

Proposed rules codify how a voluntary PAC is available to certificate holders for most types of proposed changes. Council staff has always been available for consultation to assist a certificate holder before submission of a request for amendment, but people may not have been aware of this option due to it not being written in rule. One exception to the voluntary nature of the PAC is that the proposed rules would require the certificate holder to participate in a mandatory PAC with staff before submitting an RFA for a change proposing to add area to the site boundary. For all other types of proposed changes, the PAC is voluntary.

Preliminary Amendment Request (pRFA)

Proposed rules require all RFAs be deemed a preliminary request for amendment (pRFA) until staff determines that the certificate holder has submitted all the information necessary for staff to complete its review of the RFA.

Determination of Completeness (DOC)

Proposed rules add an explicit stage in the amendment review process for staff to determine whether the pRFA contains adequate information for the Council to make findings or impose conditions on all applicable Council standards. This step is consistent with how staff currently processes RFAs, but officially codifying staff's practice in rule would ensure staff has a sufficient period of time to determine whether it needs additional information from the certificate holder in order to prepare a draft proposed order (DPO) (see next paragraph for more discussion on the DPO).

Draft Proposed Order (DPO)

The proposed rules require staff to issue a DPO containing staff's written analysis of how the certificate holder's RFA demonstrated compliance with all applicable laws and Council standards. The DPO would be the first written document reflecting staff's analysis and draft recommendations issued to the public. In contrast, under the existing process, the first written document reflecting staff's analy-

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sis and recommendations issued to the public is a proposed order (PO). Adding this step would allow the Council more flexibility to make changes in response to comments received during the public comment period.

Public Comment and Hearing on the DPO

In the existing amendment process, upon receipt of an RFA, staff solicits comments on the RFA from the public and reviewing agencies. These comments are received before staff issues a document containing staff's analysis of how the RFA complies with all applicable siting standards. After receiving comments on the RFA, staff reviews all the timely comments it receives on the record of the DPO, then completes its analysis of the RFA, and then issues a PO. Once a PO is issued, staff solicits comments and requests for contested case on the PO.

The proposed rules consolidate comments into a single round after the issuance of the DPO. This allows for comments to be based on the complete RFA and staff's initial analysis and conclusions of facts and law as to whether the certificate holder has demonstrated it will meet all applicable laws and Council standards.

The proposed rules also provide for a mandatory public hearing on the DPO. The hearing would increase the public's opportunity to meaningfully participate in the review of an RFA by instituting an automatic time and place for people to provide oral comments. The DPO hearing for an RFA must be conducted by the Council itself rather than by an appointed hearing's officer to ensure they hear all testimony directly.

A feature of the proposed DPO hearing and comment period is for it to function as a "raise it or waive it" opportunity for people to engage in the amendment review process. As such, any person who does not properly raise an issue in a comment on the record of the DPO would not be eligible to raise new issues later in the process and would not be able to participate in a contested case on any issues. In the existing amendment review process, after the PO is issued, any person can provide comment on any issue and any person can request a contested case on any issue.

Proposed Order (PO)

Before issuing a Proposed Order (PO), staff would consider all oral and written comments received on the record of the DPO. Because the recommendations in the DPO may change in response to comments received on the DPO, the PO may or may not include the same recommendations to the Council that were made in the DPO.

As discussed above, the proposed rules do not include a comment period on the PO. However, with the addition of the DPO and the mandatory public hearing on the DPO, the public and the certificate holder would have more opportunity for meaningful participation than what the existing amendment review process provides.

Requests for Contested Case (CC)

Proposed rules require requests for CC on the PO be limited to those persons who previously commented on the record of the DPO hearing and limited to only those issues a prior commenter previously raised on the record of the DPO hearing. The public comment period and the public hearing on the DPO, therefore, would function as a "raise it or waive it" opportunity for the public and the certificate holder to raise issues and preserve their ability to participate further in the review process.

Council Considers CC Requests

Proposed rules do not make any changes to how the Council considers and evaluates CC requests to determine whether to grant a CC for a RFA. The existing amendment process does not include an automatic contested case. Instead, any person may request a CC proceeding on the PO for an RFA. Requests for CC are then considered by the Council to determine if any requests meet the threshold criteria necessary for the Council to grant a CC. To grant a request for a CC, the Council must find that the request raises a significant issue of fact or law that may affect the Council's determination that the facility, with the change proposed by the amendment, meets the applicable laws or Council standards. Proposed rules clarify the lan-

guage describing this Council's CC determination process, but proposed rules make no substantive changes to how this process functions in existing rules.

Under proposed rules, if the Council finds that the contested case request was properly raised on the record of the DPO hearing, and the contested case request meets the threshold determination described above, a contested case would be conducted as described in the existing Council rules. Proposed rules do not make any substantive changes to how the contested case would be conducted. If the Council finds that the contested case request was not properly raised on the record of the DPO hearing, or if the contested case request does not meet the threshold determination described above, the Council would review the proposed order and make a final decision on the amendment request. Proposed rule do not make any substantive changes to how the Council makes its final decision when there is not a contested case.

Council's Final Decision and Scope of Review

Proposed rules clarify the existing rules stating how the Council makes its final decision and what the Council's scope of review is for the various types of amendments (i.e. under existing rules, the Council's scope of review for RFA's proposing to add new area to a site boundary differs from the scope of review for an RFA proposing to extend construction deadlines). These changes are necessary to clarify existing rule language, and to ensure consistency and compatibility with the other rule changes being proposed.

The Council requests public comment on these proposed rules. A call-in number is available for the public hearing. Please see the Oregon Department of Energy website for hearing details, proposed rule language, and other materials: <https://www.oregon.gov/energy/Get-Involved/Pages/Energy-Facility-Siting-Council-Rulemaking.aspx>

Rules Coordinator: Jason Sierman

Address: Department of Energy, Energy Facility Siting Council, 550 Capitol St. NE, 1st Floor, Salem, OR 97301

Telephone: (503) 373-2127

Department of Fish and Wildlife Chapter 635

Rule Caption: Coquille Tribe Special Gathering Permit for Clams

Date:	Time:	Location:
6-9-17	8 a.m.	4034 Fairview Industrial Dr. SE Salem OR 97302

Hearing Officer: Oregon Fish & Wildlife Commission

Stat. Auth.: ORS 497.075

Stats. Implemented: ORS 497.075

Proposed Adoptions: 635-041-0550

Last Date for Comment: 6-9-17, Close of Hearing

Summary: The Oregon Department of Fish and Wildlife (Department) has worked with the Coquille Tribe to provide opportunity for tribal harvest. Under a new Memorandum of Understanding (MOU), the State will annually issue a Special Gathering Permit for Clams to the Coquille Tribe. The MOU stipulates the Coquille Tribal members engage in harvest with no waste, have in possession their Tribal Gathering License while gathering clams, use hands or hand tools, and allow Department employees or enforcement officers to inspect Tribal Gathering License, gear and catch upon request.

Rules Coordinator: Michelle Tate

Address: Department of Fish and Wildlife, 4034 Fairview Industrial Dr. SE, Salem, OR 97302

Telephone: (503) 947-6044

Rule Caption: Amend Rules for Commercial Coastal Pelagic Species Fisheries

Date:	Time:	Location:
6-9-17	8 a.m.	ODFW Headquarters 4034 Fairview Industrial Dr. SE Salem OR 97302

Hearing Officer: Oregon Fish & Wildlife Commission

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Stat. Auth.: ORS 496.118, 496.138, 496.162, 506.036, 506.109, 506.119 and 506.129.

Stats. Implemented: ORS 496.162, 506.109, 506.129 & 507.030.

Proposed Adoptions: Rules in 635-004 & 042

Proposed Amendments: Rules in 635-004 & 042

Proposed Repeals: Rules in 635-004 & 042

Last Date for Comment: 6-9-17, Close of Hearing

Summary: Coastal Pelagic Species (CPS) include Pacific sardine, Pacific mackerel, market squid, jack mackerel, northern anchovy, and krill. Amendments to Oregon's regulations for CPS fisheries will bring the State concurrent with federally adopted CPS regulations and establish additional state regulations for commercial anchovy fishing in the Columbia River area. Final federal regulations have not been published as of the filing of this Notice, but they are expected to conform to recommendations made by the Pacific Fishery Management Council (Council) in April 2017 to close the directed commercial sardine fishery and specify incidental catch limits for sardine in other CPS fisheries for the period July 1, 2017 to June 30, 2018. The Council also recommended allowing up to one metric ton per day of directed commercial harvest of finfish CPS (i.e., excluding market squid and krill) when directed fishing for a particular species is otherwise closed. Additional state regulations for commercial anchovy fishing in the Columbia River area will establish trip limits designed to maintain harvest from the area near historical levels. Housekeeping and technical amendments may occur to ensure rule interpretation consistency.

Rules Coordinator: Michelle Tate

Address: Department of Fish and Wildlife, 4034 Fairview Industrial Dr. SE, Salem, OR 97302

Telephone: (503) 947-6044

Department of Human Services, Aging and People with Disabilities and Developmental Disabilities Chapter 411

Rule Caption: Establishing rules for in-home care agencies providing Medicaid in-home services

Date:	Time:	Location:
5-17-17	2:30 p.m.	Human Services Bldg. 500 Summer St. NE, Rm. 160 Salem, OR 97301

Hearing Officer: Staff

Stat. Auth.: ORS 409.050, 410.070, 410.090, 413.085

Stats. Implemented: ORS 410.010, 410.020, 410.070, 413.085

Proposed Adoptions: 411-033-0000, 411-033-0010, 411-033-0030

Proposed Ren. & Amends: 411-030-0090 to 411-033-0020

Last Date for Comment: 5-21-17, 5 p.m.

Summary: The Department of Human Services (Department) is proposing to adopt the rules for in-home care agencies providing Medicaid in-home services in OAR chapter 411, division 033 to:

- Assist the Department to move the in-home care agencies from Medicaid contractual agreements (statement of work) to "provider enrollment applications and agreements".

- Establish types of services in-home care agencies (IHCA) can provide, provider enrollment, payment, and other requirements to be a Medicaid IHCA provider.

- Ensure in-home care agencies (IHCA), continue as one of the Medicaid in-home services provider options, provide services to maximize independence, empowerment, dignity, and human potential through the provision of flexible, efficient, and suitable services. In-home services fill the role of complementing and supplementing an individual's own personal abilities to continue to live in their own home.

Written comments may be submitted via e-mail to Kimberly.Colkitt-Hallman@state.or.us or mailed to 500 Summer Street NE, E48 Salem, Oregon, 97301-1064. All comments received

will be given equal consideration before the Department proceeds with the permanent rulemaking.

Rules Coordinator: Kimberly Colkitt-Hallman

Address: Department of Human Services, Aging and People with Disabilities and Developmental Disabilities, 500 Summer St. NE, E48, Salem, OR 97301

Telephone: (503) 945-6398

Rule Caption: ODDS: Nursing Services in Adult Foster Homes for Individuals with Intellectual or Developmental Disabilities

Date:	Time:	Location:
5-22-17	3 p.m.	Human Services Bldg. 500 Summer St. NE, Rm. 160 Salem, OR 97301

Hearing Officer: Staff

Stat. Auth.: ORS 409.050, 410.070, 443.725, 443.730, 443.735, 443.738, 443.742, 443.760, 443.765, 443.767, 443.790

Stats. Implemented: ORS 443.705-443.825

Proposed Amendments: 411-360-0140

Proposed Repeals: 411-360-0140(T)

Last Date for Comment: 5-24-17, 5 p.m.

Summary: The Department of Human Services, Office of Developmental Disabilities Services (ODDS) is proposing to amend OAR 411-360-0140 relating to private duty nursing and direct nursing services in an adult foster home for individuals with intellectual or developmental disabilities (AFH-DD).

ODDS is proposing to amend OAR 411-360-0140 to make permanent the temporary changes that became effective on February 15, 2017. The proposed changes include the following:

- Removing the language limiting a Medicaid-enrolled direct nurse provider in an AFH-DD from delivering no more than 40 total hours per week of direct nursing services.

- Specifying that under OAR 410-132-0080 (Limitations for private duty nursing services), an AFH-DD provider is not authorized to deliver private duty nursing services.

Written comments may be submitted via e-mail to Kimberly.Colkitt-Hallman@state.or.us or mailed to 500 Summer Street NE, E48 Salem, Oregon, 97301-1064. All comments received will be given equal consideration before the Department proceeds with the permanent rulemaking.

Rules Coordinator: Kimberly Colkitt-Hallman

Address: Department of Human Services, Aging and People with Disabilities and Developmental Disabilities, 500 Summer St. NE, E48, Salem, OR 97301

Telephone: (503) 945-6398

Rule Caption: DHS - Individually-Based Limitations for Restraints in Home and Community-Based (HCB) Services and Settings

Date:	Time:	Location:
6-5-17	8:30 a.m.	Human Services Bldg. 500 Summer St. NE, Rm. 160 Salem, OR 97301

Hearing Officer: Staff

Stat. Auth.: ORS 409.050, 413.042, 443.738

Other Auth.: 1915(c) HCBS Waivers, 1915(i) State Plan HCBS, 1915(k) Community First Choice (K State Plan Option)

Stats. Implemented: ORS 409.050, 413.042, 443.738

Proposed Amendments: Rules in 411-004

Last Date for Comment: 6-7-17, 5 p.m.

Summary: To implement the regulations and expectations of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), the Department of Human Services (Department) is proposing to amend rules in OAR chapter 411, division 004, to ensure individuals who receive Home and Community-Based Services are free from restraint. The amended rules provide a definition of restraint, and a process that must be followed in order to propose the need for and possible use of a restraint. The rules also update the date by which all requirements of the

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individually-based limitations rule must be implemented. Minor grammar, punctuation, spelling, housekeeping, and formatting issues were made to the rules as well.

Rules Coordinator: Kimberly Colkitt-Hallman

Address: Department of Human Services, Aging and People with Disabilities and Developmental Disabilities, 500 Summer St. NE, E48, Salem, OR 97301

Telephone: (503) 945-6398

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Rule Caption: ODDS: In-Home Expenditure Guidelines

Stat. Auth.: ORS 409.050

Stats. Implemented: ORS 409.050

Proposed Amendments: 411-317-0000

Proposed Repeals: 411-317-0000(T)

Last Date for Comment: 5-24-17, 5 p.m.

Summary: The Department of Human Services, Office of Developmental Disabilities Services (ODDS) is proposing to permanently amend OAR 411-317-0000 to make permanent the temporary changes that became effective on May 1, 2017 that were made to incorporate Version 6.0 of the In-Home Expenditure Guidelines that became effective on May 1, 2017.

Written comments may be submitted until May 24, 2017 at 5:00 p.m. via email to Kimberly.colkitt-hallman@state.or.us, faxed to 503-373-7032, or mailed to Kimberly Colkitt-Hallman, Rules Coordinator, 500 Summer Street NE, E-2, Salem, Oregon, 97301.

A public rulemaking hearing may be requested until May 24, 2017 at 5:00 p.m. via email to Kimberly.colkitt-hallman@state.or.us, faxed to 503-373-7032, or mailed to Kimberly Colkitt-Hallman, Rules Coordinator, 500 Summer Street NE, E-2, Salem, Oregon, 97301.

Rules Coordinator: Kimberly Colkitt-Hallman

Address: Department of Human Services, Aging and People with Disabilities and Developmental Disabilities, 500 Summer St. NE, E48, Salem, OR 97301

Telephone: (503) 945-6398

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Department of Human Services, Self-Sufficiency Programs Chapter 461

Rule Caption: Amending rules relating to self-sufficiency programs

Date:	Time:	Location:
5-22-17	11:30 a.m.	500 Summer St NE, Rm. 254 Salem, OR

Hearing Officer: Robert Trachtenberg

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.816, 412.006, 412.049, 412.124

Other Auth.: 7 CFR 273.9(d)(3)

Stats. Implemented: ORS 409.010, 411.060, 411.070, 411.816, 411.825, 411.837, 412.006, 412.049, 412.064, 412.124

Proposed Amendments: 461-135-0485, 461-135-0491, 461-135-0493, 461-155-0180, 461-160-0430

Proposed Repeals: 461-155-0180(T), 461-160-0430(T)

Last Date for Comment: 5-24-17, 5 p.m.

Summary: OAR 461-135-0485 about employability screening requirements for the Pre-TANF and TANF programs is being amended to add a second option for the employability screening tool so the rule accurately reflects the Department's screening practices as it tests this new screening tool.

OAR 461-135-0491 about the Disaster Supplemental Nutrition Assistance Program (DSNAP) is being amended to define the term "household" to clarify these rules.

OAR 461-135-0493 about eligibility and benefit amounts for DSNAP is being amended to allow households in which a member worked in the disaster area at the time of the disaster to be eligible for DSNAP if they meet the other eligibility requirements. This change will align the rule with the state plan.

OAR 461-155-0180 about income standards used to determine eligibility in self-sufficiency programs is being amended to make per-

manent a temporary rule effective March 1, 2017 that updated the standards that apply 2017 federal poverty guidelines starting March 1, 2017.

OAR 461-160-0430 is being amended to make permanent a temporary rule change effective February 1, 2017 benefitting SNAP clients who are elderly or have disabilities by changing how the Department determines the medical deduction allowed for them, consistent with an approved waiver from the Food and Nutrition Service (FNS) so these clients qualify for additional food benefits to meet their needs. Under the amended rule, to determine the allowed deduction, the Department will first subtract \$35 from the total unreimbursed medical expenses. Then, for amounts between \$0.01 and \$170.01, \$170 will be deducted from income or, for amounts over \$170, the full cost amount will be deducted from income.

In addition, non-substantive edits may be made to these rules to: ensure consistent terminology throughout self-sufficiency program rules and policies; make general updates consistent with current Department practices; update statutory and rule references; correct formatting and punctuation; improve ease of reading; and clarify Department rules and processes.

Rule text showing edits for the rules described above is available at http://www.dhs.state.or.us/policy/selfsufficiency/ar_proposed.htm.

Rules Coordinator: Robert Trachtenberg

Address: Department of Human Services, Self-Sufficiency Programs, 500 Summer St. NE, E48, Salem, OR 97301

Telephone: (503) 947-5290

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Rule Caption: Amending rules relating to APD medical program eligibility

Date:	Time:	Location:
5-22-17	11:30 a.m.	500 Summer St, NE, Rm. 254 Salem, OR

Hearing Officer: Robert Trachtenberg

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.404, 411.706, 411.816, 412.014, 412.049, 413.085, 414.685

Other Auth.: 42 USC 408, 654, 1386k, 1396p, 1396r; P.L. 100-383; 20 CFR 416.1231, 42 CFR 433.36, 433.135, 433.145, 433.147, 433.148, 42 CFR 435.403, 435.406, 435.407, 435.725-435.735, 435.940-435.960

Stats. Implemented: ORS 409.010, 411.060, 411.070, 411.404, 411.706, 411.816, 412.014, 412.049, 413.085, 414.685

Proposed Adoptions: 461-115-0704, 461-145-0285, 461-145-0348

Proposed Amendments: 461-115-0700, 461-120-0010, 461-120-0310, 461-120-0315, 461-120-0345, 461-120-0350, 461-135-0832, 461-135-0835, 461-145-0040, 461-145-0050, 461-145-0108, 461-145-0110, 461-145-0145, 461-145-0150, 461-145-0210, 461-145-0240, 461-145-0320, 461-145-0435, 461-145-0440, 461-145-0460, 461-145-0510, 461-145-0520, 461-155-0580, 461-155-0600, 461-155-0620, 461-155-0630, 461-155-0670, 461-155-0688, 461-160-0551, 461-160-0590, 461-160-0620, 461-160-0780, 461-165-0030

Proposed Repeals: OAR 461-155-0551, 461-155-0640, 461-170-0120, 461-135-0832(T), 461-135-0835(T), 461-155-0670(T)

Last Date for Comment: 5-24-17, 5 p.m.

Summary: OAR 461-115-0700 about required verifications is being amended to shift the burden of verification primarily on the Medicaid agency and the use of electronic sources. Under this amendment, the Department may not require individuals to provide documentation unless to what they self-attest is not "reasonably compatible" with information the Department can obtain electronically (if available). Reasonable compatibility is reached when any differences between individuals' self-attestation and verification the Department receives electronically do not make a difference in eligibility. Reasonable compatibility does not apply to individuals who are being evaluated for long-term-care and are subject to a potential service liability, as the federal rules mandate the Department to consider all income otherwise disregarded in determining eligibility in the post-eligibility treatment of income. This change also outlines in rule the

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methods and types of verification the Department will accept. These changes align with federal law.

OAD 461-115-0704 about required verification of citizenship and alien status in the OSIPM and QMB programs is being adopted to set out Department policy on verification methods and the 90-day reasonable opportunity period to align with federal law.

OAD 461-120-0010 about residency requirements is being amended to state that an individual is considered a resident in the OSIPM and QMB programs if the individual entered Oregon with a job commitment or looking for work, and is not receiving benefits from another state.

OAD 461-120-0310 about assignment of support rights, OAD 461-120-0315 about medical assignment, OAD 461-120-0345 about pursuit of healthcare and cash medical support, and OAD 461-120-0350 about good cause for not complying with requirements to pursue child support, health care coverage, and medical support are being amended to clarify that the requirement to actually assign the rights and pursue healthcare/cash medical support applies only to the individuals who can legally assign right of themselves or others, not the person whose rights that individual can legally assign who cannot legally assign his or her own rights (such as a child, for example). These amendments also clarify that those whose rights must be assigned do not have to be in the OSIPM or QMB filing group, rather, rights must be assigned for anyone receiving any type of Medicaid under the state plan. These amendments distinguish between who actually has to assign to stay eligible for OSIPM and QMB, and whose rights that person must assign. The responsibility to pursue health insurance and cash medical support is based on who is legally able to assign rights for whom. OAD 461-120-0345 is also being amended to support current practices by adding the QMB programs. These amendments align the Department with federal policy and prepare the Department for the implementation of Integrated Eligibility.

OAD 461-135-0832 and OAD 461-135-0835 about limits on estate claims and definitions used in estate administration rules are being amended to make permanent temporary rule changes effective February 13, 2017 and implement an adverse Oregon Supreme Court decision by amending the definition of "estate" with respect to the collection of payments for assistance provided and limit when the Department collects against the spouse of a recipient. OAD 461-135-0835 about limits on estate claims is also being amended to remove the word "probate" from the definition of "probate estate" to bring the rule in line with ORS 416.350 which directs recovery against the "estate" of a spouse of the Medicaid recipient under certain circumstances.

OAD 461-145-0040 about burial arrangements and burial funds is being amended to clarify the rule and make it consistent with federal manual sections on the topic.

OAD 461-145-0050 about burial spaces and merchandise is being amended to revise when the cost of these items provides an exclusion from client assets considered in determining eligibility. These changes clarify the rule and make the policy consistent with federal law and manuals on the topic.

OAD 461-145-0108 about dividends, interest and royalties is being amended to add for the OSIP, OSIPM and QMB programs how dividends and interest income is treated. This amendment also establishes and clarifies how royalty income is treated in the OSIP, OSIPM, and QMB programs, and clarifies that royalties include compensation paid to the owner for the use of property, usually copyrighted material or natural resources, such as coal, oil, or natural gas. These amendments bring the Department into compliance with federal manuals on this topic.

OAD 461-145-0110 about the effect on eligibility of payments under the Domestic Volunteer Services Act (VISTA, RSVP, SCORE, ACE) is being amended to clarify when payments under Title I of the Domestic Volunteer Services Act of 1973 are excluded for the OSIP, OSIPM, and QMB programs, bring the rule into

compliance with federal guidance in the SSA POMS at SI 00830.610.

OAD 461-145-0145 about educational accounts is being amended to add APD medical programs and their treatment of this asset type to the rule.

OAD 461-145-0150 about educational income is being amended to state an exclusion for certain VA educational benefits and clarify how other types of education income are treated, aligning APD medical programs with current federal policy.

OAD 461-145-0210 about the effects of gifts and winnings on eligibility is being amended to change how these items are treated. Under these amendments, the value of a gift card or certificate is income in the month it is received if the gift card or certificate can be used to purchase food or shelter or can be resold (with a rebuttable presumption that the gift card or certificate can be resold). In the OSIP, OSIPM, and QMB programs, if an individual is offered a choice between an in-kind item and cash, the cash amount is considered unearned income regardless of how the individual chooses to take the item; and gambling losses are not subtracted from gambling winnings in determining the individual's countable income. These changes are intended to comply with federal guidance on these topics.

OAD 461-145-0240 about income-producing sales contracts and OAD 461-145-0460 about sale of a resource are being amended to remove the provisions that apply to treatment of these assets that originate prior to October 12, 2012. These changes are intended to streamline eligibility processes.

OAD 461-145-0285 about Japanese-American restitution payments is being adopted to establish for the OSIP, OSIPM and QMB programs that Japanese-American restitution payments are excluded from income and resources. This rule also establishes how income is treated for payments to a survivor, that restitution payments from the Canadian Government are excluded income, and that interest earned on unspent Japanese-American and Japanese-Canadian restitution payments is excluded from income and resources. This rule is being adopted to follow federal law.

OAD 461-145-0320 about life insurance is being amended to state that burial insurance that generates a cash surrender value is treated in the same manner that this rule treats life insurance. This rule is also being amended to state that when the ownership or beneficiary of a life insurance policy has been irrevocably assigned and designated for burial, it is treated in accordance with OAD 461-145-0040 and not counted towards the \$1500 life insurance limit. This amendment also states when the face value of term life insurance policies are not counted in determining if the life insurance exclusion limit is exceeded.

OAD 461-145-0348 about mineral rights is being adopted to define this term and explain how the Department treats mineral rights property and income generated from mineral rights when determining eligibility. This rule aligns the Department with federal guidance.

OAD 461-145-0435 about the effect of refunds on eligibility decisions is being amended to cover the treatment of rebates and fill in gaps that currently exist in treatment of different types of refunds and rebates for APD programs, based on federal policy.

OAD 461-145-0440 about the effect of reimbursements on eligibility decisions is being amended to indicate that a reimbursement for an item already covered by benefits is counted as unearned income. This clarifies the rule and complies with federal law.

OAD 461-145-0510 about the effect of SSI benefits in the determination of eligibility is being amended to set out the policy of the Department about how to treat SSI when the SSI recipient is in the financial group of an individual not assumed eligible. This amendment aligns with federal policy, prepares the Department for the implementation of Integrated Eligibility, and supports current practices.

OAD 461-145-0520 about stocks, bonds, and other securities is being amended to state that in the OSIPM and QMB-DW programs, the value of a savings bond issued by the United States Department

NOTICES OF PROPOSED RULEMAKING

of the Treasury is excluded during the minimum retention period. This amendment also clarifies for all other programs, the value of a savings bond issued by the United States Department of the Treasury is excluded during the minimum retention period if the owner has received a denial of a request for a hardship waiver based on financial need. These amendments align the Department with federal policy.

OAR 461-155-0551 about special needs payments for home adaptations to accommodate a client's physical condition is being repealed to prevent duplication of rules.

OAR 461-155-0580 about special need allowances for laundry, OAR 461-155-0600 about special need payments for home repairs, OAR 461-155-0620 about property taxes, OAR 461-155-0630 about community based care, OAR 461-155-0670 about special diet allowances, OAR 461-155-0688 about drug co-pay coverage, and OAR 461-160-0551 about income deductions are being amended to use terms more consistently with other rules, making them easier to follow. OAR 461-155-0600 is also being amended to state that the home adaptations covered must be performed by a licensed and bonded contractor. OAR 461-155-0670 is also being amended to indicate that the rule does not apply to the OSIP program, that special diet allowances must be reauthorized on an annual basis (instead of reviewed at 6-month intervals), and clarify statements about the amount of the special diet allowance adopted by temporary rule effective April 1, 2017.

OAR 461-155-0640 about restaurant meals is being repealed because the rule is not needed.

OAR 461-160-0590 about assessment of resources and the community spouse provision for the OSIP and OSIPM programs is being amended to state that either the community spouse or the institutional spouse has a right to an administrative hearing, clarify which issues surrounding the resource assessment process are hearable, and clarify the requirements that apply to properly submit such hearing requests.

OAR 461-160-0620 about income deductions and client liability for long-term care services and waived services is being amended to update the minimum community spouse income allowance (Minimum Monthly Maintenance Needs Allowance or MMMNA) and the community spouse monthly housing allowance which are published by the federal government each year. This amendment keeps Oregon in line with current federal standards for Department Medicaid programs and changes to the MMMNA and community spouse monthly housing allowance under the Spousal Impoverishment laws.

OAR 461-160-0780 about determining adjusted income for the OSIP-EPD and OSIPM-EPD programs is being amended to indicate that countable earned income (not gross earned income) is used in the process of reaching adjusted income. This change aligns the rule with current practices.

OAR 461-165-0030 about concurrent and duplicate benefits is being amended to correct an inadvertent omission of MAGI Child to the programs that may coexist with Medicare Savings Programs. This rule is also being amended to state that the QMB-DW and QMB-SMF programs may not coexist with other Medicaid programs, aligning this rule with OAR 461-135-0730.

OAR 461-170-0120 about monthly change reports is being repealed because this rule is no longer needed.

In addition, non-substantive edits may be made to these rules to: ensure consistent terminology throughout self-sufficiency program rules and policies; make general updates consistent with current Department practices; update statutory and rule references; correct formatting and punctuation; improve ease of reading; and clarify Department rules and processes.

Rule text showing edits for the rules described above is available at http://www.dhs.state.or.us/policy/selfsufficiency/ar_proposed.htm.

Rules Coordinator: Robert Trachtenberg

Address: Department of Human Services, Self-Sufficiency Programs, 500 Summer St. NE, E48, Salem, OR 97301

Telephone: (503) 947-5290

Department of State Police Chapter 257

Rule Caption: In the Matter of adopting permanent rules for statewide School Safety Tip Line

Date:	Time:	Location:
5-23-17	2 p.m.	3545 Trelstad Ave. SE Salem OR 97317 - Bldg 2 McLain Conference Rm.*

Hearing Officer: Jodi Sherwood

Stat. Auth.: ORS 165.570 (2)

Other Auth.: 2016 Oregon Legislature, Oregon Laws 2016, chapter 74.

Stats. Implemented: ORS 165.570

Proposed Adoptions: 257-095-0000, 257-095-0010, 257-095-0030, 257-095-0040, 257-095-0050, 257-095-0060, 257-095-0070, 257-095-0080, 257-095-0090, 257-095-0100

Last Date for Comment: 5-23-17, 2 p.m.

Summary: *Or by phone 877-336-1831 access code 8618395; or email to [stslproject00 pm](mailto:stslproject00@pm) to 6:00 pm

To prescribe the policies and procedures for operation and use of the statewide School Safety Tip Line Program (SSTL). The SSTL is established to facilitate the safety and health of students.

(1) SSTL was established by act of the 2016 Oregon Legislature, Oregon Laws 2016, Chapter 74, authorizing the Department of State Police to establish and operate a statewide tip line for students and other members of the public to use to confidentially report information concerning threats to student safety or potential threats to student safety.

(2) Section 1(3) of Oregon Laws 2016, Chapter 74 requires the Department of State Police to adopt rules necessary to establish and operate the tip line.

(3) The SSTL is a program organized within the Public Safety Services Bureau of the Department of State Police for the purpose of facilitating the safety and health of students.

Rules Coordinator: Shannon Peterson

Address: Department of State Police, 3545 Trelstad Ave. SE, Salem, OR 97317

Telephone: (503) 507-9021

Land Conservation and Development Department Chapter 660

Rule Caption: Revise disturbance baseline attached to LCDC's Sage-Grouse Rule

Date:	Time:	Location:
5-15-17	4 p.m.	Harney County Visitor Center 484 N. Broadway Burns, OR
5-18-17	8:30 a.m.	Basement Hearing Rm. 635 Capitol St. Salem, OR

Hearing Officer: DLCD Staff, LCDC

Stat. Auth.: ORS 197.040

Other Auth.: Statewide Planning Goal 5

Stats. Implemented: ORS 197.040

Proposed Amendments: 660-023-0115

Last Date for Comment: 5-18-17, Close of Hearing

Summary: The department will recommend the commission adopt a minor rule revision in order to modify the existing human disturbance baseline values for sage grouse core areas (OAR 660-023-0115, Exhibit D). The original baseline values were determined using a variety of datasets that were the best available in 2013-2014. One of these datasets delineating electric transmission lines was a proprietary dataset that is now preventing the department from creating a fully transparent central registry as directed in Section 15 of OAR

NOTICES OF PROPOSED RULEMAKING

660-023-0115 (a.k.a. Sage Grouse Rule). This rulemaking is intended to modify the baseline values to reflect the use of a replacement transmission line dataset that is state-owned and maintained. No other amendments to the Sage Grouse Rule, the baseline values, or the supporting datasets will be requested.

Rules Coordinator: Casaria Taylor

Address: Land Conservation and Development Department, 635 Capitol St. NE, Suite 150, Salem, OR 97301

Telephone: (503) 373-0050, ext. 322

Landscape Contractors Board Chapter 808

Rule Caption: Defines irrigation repair and negligent and improper work.

Stat. Auth.: ORS 670.310 & 671.670

Stats. Implemented: ORS 671.695 & 671.520

Proposed Adoptions: 808-002-0451, 808-002-0685

Proposed Amendments: 808-002-0480

Last Date for Comment: 5-22-17, Close of Business

Summary: Defines irrigation repair and negligent and improper work.

Rules Coordinator: Kim Gladwill-Rowley

Address: Landscape Contractors Board, 2111 Front Street NE, Suite 2-101, Salem, OR 97301

Telephone: (503) 967-6291, ext. 223

Oregon Department of Aviation Chapter 738

Rule Caption: Amends Divisions 124 and 125 ensuring compliance and fiscal responsibility of grant applicants

Stat. Auth.: ORS 835.035, 835.040, 835.112, OL 2015 c.700 sec. 7(2)

Stats. Implemented: ORS 835.015, 835.025, 836.015, 836.070, 319.020, OL 2015 c.700 sections 7,8

Proposed Amendments: 738-124-0020, 738-125-0020

Last Date for Comment: 6-1-17, 4 p.m.

Summary: These amendments allow the ASAP program to be inclusive of the entire FAM program as it applies to the grant process found in OAR 738-124-0020(2) and ensures that financial obligations are met at the state and local level as found in OAR 738-0125-0020(5). These are important considerations that must be addressed before grants are awarded and grant agreements are executed.

Rules Coordinator: Lauri Kunze

Address: Oregon Department of Aviation, 3040 25th St. SE, Salem, OR 97302-1125

Telephone: (503) 986-3171

Oregon Department of Education Chapter 581

Rule Caption: Child and Adult Care Food Program Appeals Decisions

Date:	Time:	Location:
5-23-17	9:30 a.m.	255 Capitol St. NE Salem, OR 97310 Rm. 400A

Hearing Officer: Emily Nazarov

Stat. Auth.: ORS 326.051

Stats. Implemented: ORS 326.051; 7 CFR 226.6(k)

Proposed Adoptions: 581-051-0120, 581-051-0125

Last Date for Comment: 5-25-17, 9 a.m.

Summary: Federal law prescribes appeal procedures for Department decisions regarding child and adult care food program appeals. This rule authorizes the Department to follow these procedures and the State's Administrative Procedures Act.

Rules Coordinator: Cindy Hunt

Address: Oregon Department of Education, 255 Capitol St. NE, Salem, OR 97310

Telephone: (503) 947-5651

Rule Caption: Oregon School Capital Improvement Matching Program

Date:	Time:	Location:
5-23-17	9:30 a.m.	255 Capitol St. NE Salem, OR, 400A

Hearing Officer: Emily Nazarov

Stat. Auth.: Sect. 2 & 5, Ch. 783, OL 2015 (Enrolled SB 447)

Stats. Implemented: Sec. 2, 4 & 5, Ch. 783, OL 2015 (Enrolled SB 447)

Proposed Amendments: 581-027-0010, 581-027-0015, 581-027-0020, 581-027-0025, 581-027-0030, 581-027-0035, 581-027-0040, 581-027-0045, 581-027-0050

Last Date for Comment: 5-25-17, 9 a.m.

Summary: Implement statutory requirements to add long-range facility plans and facility assessments to the Oregon School Capital Improvement Matching Program applications.

Rules Coordinator: Cindy Hunt

Address: Oregon Department of Education, 255 Capitol St. NE, Salem, OR 97310

Telephone: (503) 947-5651

Rule Caption: Administration of Prescription and Nonprescription Medication to Students

Date:	Time:	Location:
5-23-17	9:30 a.m.	255 Capitol St. NE Salem, OR

Hearing Officer: Emily Nazarov

Stat. Auth.: ORS 326.051

Stats. Implemented: ORS 339.870; 2015 OL Ch. 112, Section 2 (Enrolled HB 3149); 2015 OL 162, Section 1 (Enrolled HB 3041); ORS 678.038

Proposed Amendments: 581-021-0037

Last Date for Comment: 5-25-17, 9 a.m.

Summary: Addresses internal inconsistencies, makes the rule more user friendly and clarifies requirements to address common questions and concerns from the field.

Rules Coordinator: Cindy Hunt

Address: Oregon Department of Education, 255 Capitol St. NE, Salem, OR 97310

Telephone: (503) 947-5651

Oregon Department of Education, Early Learning Division Chapter 414

Rule Caption: Permanent rules governing contracted services, certification and performance of Relief Nurseries.

Stat. Auth.: ORS 326.425(7)

Stats. Implemented: ORS 417.788

Proposed Adoptions: 414-600-0005, 414-600-0015, 414-600-0021, 414-600-0025, 414-600-0031, 414-600-0033, 414-600-0035, 414-600-0038, 414-600-0041, 414-600-0051, 414-600-0055, 414-600-0105, 414-600-0115, 414-600-0120

Last Date for Comment: 5-21-17, 5 p.m.

Summary: ORS 417.788 directs the Early Learning Division to support relief nurseries statewide as funding becomes available. Section 28, chapter 624, 2013 Oregon Laws requires the Early Learning Division to enter into contracts with relief nurseries to ensure service continuity and efficient delivery of contracted services.

The purpose of the rules is to define key terms, describe eligibility criteria, service requirements, monitoring, and reporting requirements for entities selected by the state to provide services to children and families under ORS 417.788.

Rules Coordinator: Lisa Pinheiro

NOTICES OF PROPOSED RULEMAKING

Address: Oregon Department of Education, Early Learning Division, 775 Summer St. NE, Suite 300, Salem, OR 97301
Telephone: (503) 910-8135

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Oregon Film and Video Office
Chapter 951

Rule Caption: Updated Rules for Indigenous OPIF program regarding Filmmaker and Local Filmmaker definitions

Stat. Auth.: ORS 284.335 & 284.368

Stats. Implemented: ORS 284.335 & 284.368

Proposed Amendments: Rules in 951-006

Last Date for Comment: 5-19-17, 5 p.m.

Summary: Updates the existing rules to incorporate a clearer definition of "Filmmaker" and "Local Filmmaker" for implementation purposes.

Rules Coordinator: Nathan Cherrington

Address: Oregon Film and Video Office, 123 NE 3rd Ave., Suite 210, Portland, OR 97232

Telephone: (971) 254-4020

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Oregon Health Authority,
Health Licensing Office, Board of Direct Entry Midwifery
Chapter 332

Rule Caption: Align board meeting procedures with statutory requirements and repeal certain continuing education requirements.

Date:	Time:	Location:
5-25-17	10 a.m.	Health Licensing Office 1430 Tandem Ave NE, Suite 320 Salem, OR 97301

Hearing Officer: Samantha Patnode

Stat. Auth.: ORS 676.615, 687.475

Stats. Implemented: ORS 687.425, 687.475, 687.493

Proposed Adoptions: 332-010-0002, 332-010-0004, 332-010-0006

Proposed Amendments: 332-020-0010

Last Date for Comment: 5-28-17, 5 p.m.

Summary: Align statutory requirements pursuant to ORS 678.4754 which requires the Board of Direct Entry Midwifery implement administrative rules regarding board officers, meetings and quorum.

Remove outdated requirements under continuing education related to initial legend drug and devices by changing the hour requirement from 40 to 48 hours of continuing education .

Rules Coordinator: Samantha Patnode

Address: Health Licensing Office, Board of Direct Entry Midwifery, 1430 Tandem Ave. NE, Suite 180, Salem, OR 97301

Telephone: (503) 373-1917

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Oregon Health Authority,
Health Systems Division: Medical Assistance Programs
Chapter 410

Rule Caption: Amending Prior Authorization Approval Criteria Guide

Date:	Time:	Location:
5-16-17	10:30 a.m.	500 Summer St. NE Salem, OR 97301, Rm. 137B

Hearing Officer: Sandy Cafourek

Stat. Auth.: ORS 413.032, 413.042, 414.065, 414.325, 414.330 to 414.414, 414.312, 414.316

Stats. Implemented: ORS 414.065; 414.325, 414.334, 414.361, 414.369, 414.371, 414.353, 414.354

Proposed Amendments: OAR 410-121-0040

Proposed Repeals: OAR 410-121-0040(T)

Last Date for Comment: 5-18-17, 5 p.m.

Summary: The Pharmaceutical Services program administrative rules (division 121) govern Division payments for services provided to certain clients. The Division needs to amend rules as follows: The Authority is amending this rule to update the Oregon Medicaid

Fee-for-Service Prior Authorization Criteria Guide found at <http://www.oregon.gov/oha/healthplan/Pages/pharmacy-policy.aspx> based on the P&T (Pharmacy and Therapeutic) Committee recommendations.

Rules Coordinator: Sandy Cafourek

Address: Oregon Health Authority, Health Systems Division: Medical Assistance Programs, 500 Summer St. NE, 3rd Floor, Salem, OR 97301

Telephone: (503) 945-6430

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Rule Caption: Update Rules Governing Payment for the Medicaid EHR Incentive Program

Date:	Time:	Location:
5-16-17	10:30 a.m.	500 Summer St. NE Salem, OR 97301, Rm. 137B

Hearing Officer: Sandy Cafourek

Stat. Auth.: ORS 413.042, 414.033

Stats. Implemented: ORS 413.042

Proposed Amendments: 410-165-0000, 410-165-0020, 410-165-0040, 410-165-0060, 410-165-0080

Proposed Repeals: 410-165-0000(T), 410-165-0020(T), 410-165-0060(T), 410-165-0080(T)

Last Date for Comment: 5-18-17, 5 p.m.

Summary: The Division needs to amend these rules as new federal legislation from the Centers for Medicare and Medicaid Services (CMS) and updates to Oregon's Medicaid State Plan Amendment affects how providers are eligible for the Medicaid EHR Incentive Program. These rules include changes for a shortened 90-day EHR reporting period in 2016-2017, updated 2017 grace period, and new attestation requirements for meaningful use regarding information blocking and surveillance of Certified EHR Technology. The program is also adding pediatric optometrists to the program eligible professional types.

Rules Coordinator: Sandy Cafourek

Address: Oregon Health Authority, Health Systems Division: Medical Assistance Programs, 500 Summer St. NE, 3rd Floor, Salem, OR 97301

Telephone: (503) 945-6430

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Rule Caption: Clearly Define Rehabilitative and Habilitative Therapies and Remove Client Copayment to Comply with Federal Requirements

Date:	Time:	Location:
5-16-17	10:30 a.m.	500 Summer St. NE Salem, OR 97301

Hearing Officer: Sandy Cafourek

Stat. Auth.: ORS 413.042 & 414.065

Stats. Implemented: ORS 414.025, 414.065, 681.205, 681.325, 688.135 & 414.065

Proposed Amendments: 410-129-0020, 410-129-0070, 410-129-0100, 410-131-0040, 410-131-0080, 410-131-0120

Proposed Repeals: 410-129-0040, 410-129-0190, 410-131-0100, 410-129-0020(T), 410-129-0070(T), 410-131-0040(T), 410-131-0080(T), 410-131-0120(T)

Last Date for Comment: 5-18-17, 5 p.m.

Summary: The Division needs to comply with the federal requirements within ACA to allow habilitative therapy in addition to rehabilitative therapy. Removing copayments, Oregon Health Plan (OHP) Plus clients are not responsible for paying a co-payment effective January 1, 2017, per OAR 410-120-1230.

Rules Coordinator: Sandy Cafourek

Address: Oregon Health Authority, Health Systems Division: Medical Assistance Programs, 500 Summer St. NE, 3rd Floor, Salem, OR 97301

Telephone: (503) 945-6430

NOTICES OF PROPOSED RULEMAKING

Rule Caption: CCOs Ensure Discharge of Members from Extended/Long-Term Psychiatric Programs as Soon As Reasonably Possible

Date: 5-16-17 **Time:** 10:30 a.m. **Location:** 500 Summer St. NE
Salem, OR 97301, Rm. 137B

Hearing Officer: Sandy Cafourek
Stat. Auth.: ORS 413.042, 414.615, 414.625, 414.635 & 414.651
Stats. Implemented: ORS 414.610-414.685
Proposed Amendments: OAR 410-141-3160
Proposed Repeals: OAR 410-141-3160(T)
Last Date for Comment: 5-18-17, 5 p.m.

Summary: The Division needs to amend this rule to provide immediate direction and clarification to the Coordinated Care Organizations and Prepaid Health Plans in order that they should be compliant with the Code of Federal Regulations as specified by the USDOJ. The changes to this rule outline that CCOs shall ensure members receiving services from extended or long-term psychiatric care programs, such as secure residential facilities, shall receive follow-up services as medically appropriate to facilitate discharge as soon as reasonably possible. CCOs shall coordinate the care of members that enter the Oregon State Hospital and develop agreements with community mental health programs regarding the management of adults who were members upon entering the state hospital and are transitioning from the Oregon State Hospital.

Rules Coordinator: Sandy Cafourek
Address: Oregon Health Authority, Health Systems Division: Medical Assistance Programs, 500 Summer St. NE, 3rd Floor, Salem, OR 97301
Telephone: (503) 945-6430

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Rule Caption: Amending Prior Authorization Approval Criteria Guide

Date: 6-15-17 **Time:** 10:30 a.m. **Location:** 500 Summer St. NE
Salem, OR 97301, Rm. 137B

Hearing Officer: Sandy Cafourek
Stat. Auth.: ORS 413.032, 413.042, 414.065, 414.325, 414.330 to 414.414, 414.312, 414.316
Stats. Implemented: ORS 414.065; 414.325, 414.334, 414.361, 414.369, 414.371, 414.353, 414.354
Proposed Amendments: OAR 410-121-0040
Proposed Repeals: OAR 410-121-0040(T)
Last Date for Comment: 6-19-17, 5 p.m.

Summary: The Pharmaceutical Services program administrative rules (division 121) govern Division payments for services provided to certain clients. The Division needs to amend rules as follows: The Authority is amending this rule to update the Oregon Medicaid Fee for Service Prior Authorization Criteria Guide found at <http://www.oregon.gov/oha/healthplan/Pages/pharmacy-policy.aspx> based on the P&T (Pharmacy and Therapeutic) Committee recommendations.

Rules Coordinator: Sandy Cafourek
Address: Oregon Health Authority, Health Systems Division: Medical Assistance Programs, 500 Summer St. NE, 3rd Floor, Salem, OR 97301
Telephone: (503) 945-6430

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Oregon Health Authority, Health Systems Division: Mental Health Services Chapter 309

Rule Caption: Clarify Procedural Detail and Process for Taking Action on a Behavioral Health Provider Certificate

Date: 5-16-17 **Time:** 10:30 a.m. **Location:** 500 Summer St. NE
Salem, OR 97301, Rm. 137B

Hearing Officer: Sandy Cafourek

Stat. Auth.: ORS 161.390, 161.392, 179.040, 179.505, 413.042, 413.032-413.033, 426.072, 424.236, 426.500, 430.010, 430.021, 430.256, 430.357, 430.560, 430.640, 430.870, 743A.168

Stats. Implemented: ORS 413.520, 426.060, 426.140, 430.010, 430.254, 430.335, 430.590, 430.620, 430.637, 813.021, 813.260
Proposed Adoptions: 309-008-0905

Proposed Amendments: 309-008-0800, 309-008-0900, 309-008-1100, 309-008-1200, 309-008-1300

Proposed Repeals: 309-008-0800(T), 309-008-0900(T), 309-008-0905(T), 309-008-1100(T), 309-008-1200(T), 309-008-1300(T)

Last Date for Comment: 5-18-17, 5 p.m.

Summary: Under Oregon Revised Statutes 413.032–413.033, 430.357, 430.335, and 430.637, the Oregon Health Authority certifies and has the authority to regulate behavioral health treatment service providers who serve vulnerable individuals, including those with mental health issues and/or substance use disorders. These rules set the minimum standards for serving these vulnerable individuals and describe the process by which the Authority regulates the service providers. On November 30, 2016, the Authority promulgated new division 008 rules to regulate behavioral health provider certificates. These rules provide additional clarification and procedural detail regarding the circumstance and process in which the Authority may take an action on a certificate. These rule adoptions and amendments are necessary to provide for and clarify the Authority's practices and procedures regarding when and under what circumstances it may take action on a certificate, such as suspension, revocation, denial of an application, denial of a renewal, and imposing a condition on the certificate.

Rules Coordinator: Sandy Cafourek
Address: Oregon Health Authority, Health Systems Division: Mental Health Services, 500 Summer St. NE, 3rd Floor, Salem, OR 97301
Telephone: (503) 945-6430

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Rule Caption: Rules Revisions Required to Comply with Federal 1915(i) Home and Community-Based Regulations

Date: 5-16-17 **Time:** 10:30 a.m. **Location:** 500 Summer St. NE
Salem, OR 97301, Rm. 137B

Hearing Officer: Sandy Cafourek
Stat. Auth.: ORS 413.042 & 413.450
Stats. Implemented: ORS 413.032, 443.400–443.465 & 443.991
Proposed Adoptions: 309-035-0163, 309-035-0183, 309-035-0195, 309-035-0200, 309-035-0205, 309-035-0210, 309-035-0215, 309-035-0220, 309-035-0225
Proposed Amendments: 309-035-0100, 309-035-0105, 309-035-0110, 309-035-0115, 309-035-0120, 309-035-0125, 309-035-0130, 309-035-0135, 309-035-0140, 309-035-0145, 309-035-0150, 309-035-0155, 309-035-0165, 309-035-0170, 309-035-0175, 309-035-0185, 309-035-0190
Proposed Repeals: 309-035-0100(T), 309-035-0105(T), 309-035-0110(T), 309-035-0115(T), 309-035-0120(T), 309-035-0125(T), 309-035-0130(T), 309-035-0135(T), 309-035-0140(T), 309-035-0145(T), 309-035-0150(T), 309-035-0155(T), 309-035-0163(T), 309-035-0165(T), 309-035-0170(T), 309-035-0175(T), 309-035-0183(T), 309-035-0185(T), 309-035-0190(T), 309-035-0195(T), 309-035-0200(T), 309-035-0205(T), 309-035-0210(T), 309-035-0215(T), 309-035-0220(T), 309-035-0225(T); 309-035-0107, 309-035-0113, 309-035-0117, 309-035-0146, 309-035-0157, 309-035-0159, 309-035-0160, 309-035-0161, 309-035-0167, 309-035-0250, 309-035-0260, 309-035-0270, 309-035-0280, 309-035-0290, 309-035-0300, 309-035-0310, 309-035-0320, 309-035-0330, 309-035-0340, 309-035-0350, 309-035-0360, 309-035-0370, 309-035-0380, 309-035-0390, 309-035-0400, 309-035-0410, 309-035-0420, 309-035-0430, 309-035-0440, 309-035-0450, 309-035-0460, 309-035-0500, 309-035-0550, 309-035-0560, 309-035-0570, 309-035-0580, 309-035-0590, 309-035-0600

NOTICES OF PROPOSED RULEMAKING

Last Date for Comment: 5-18-17, 5 p.m.

Summary: Under Oregon Revised Statutes 413.042 and 413.450, the Authority licenses and has authority to regulate mental health treatment providers, including residential treatment facilities and residential treatment homes for adults with mental health disorders. The Authority's administrative rules set the minimum standards for providing services in licensed settings and describe the process by which the Authority regulates the service providers.

The rules provide updated procedural detail regarding federal regulation requirements, as issued by the Centers for Medicare and Medicaid Services (CMS), for 1915(i) Home and Community-Based Services (HCBS). The purpose of these regulations is to ensure individuals receive HCBS in settings that are integrated in and support full access to the greater community. The rules also provide clarification of current and appropriate behavioral health terminology. In particular, the use of "adults with mental health disorders", rather than "mentally or emotionally disturbed persons."

Rules Coordinator: Sandy Cafourek

Address: Oregon Health Authority, Health Systems Division: Mental Health Services, 500 Summer St. NE, 3rd Floor, Salem, OR 97301

Telephone: (503) 945-6430

Oregon Health Authority, Oregon Educators Benefit Board Chapter 111

Rule Caption: Cleaning up rule language

Date:	Time:	Location:
5-23-17	10:30 a.m.	500 Summer St NE Rm. 137B Salem, OR 97301

Hearing Officer: OEBB Staff

Stat. Auth.: ORS 243.860 to 243.886

Stats. Implemented: ORS 243.864(1)(a)

Proposed Amendments: 111-002-0005

Last Date for Comment: 5-31-17, 5 p.m.

Summary: Cleaning up rule language used in Division 2 so that the language is consistent throughout all OEBB administrative rules.

Rules Coordinator: April Kelly

Address: Oregon Health Authority, Oregon Educators Benefit Board, 500 Summer Street NE, E-88, Salem, OR 97301

Telephone: (503) 378-6588

Rule Caption: Amendments clarify OEBB policy and processes that are currently in place

Date:	Time:	Location:
5-23-17	10:30 a.m.	500 Summer St NE Rm. 137B Salem, OR 97301

Hearing Officer: OEBB Staff

Stat. Auth.: ORS 243.860 to 243.886

Stats. Implemented: ORS 243.864(1)(a)

Proposed Amendments: 111-040-0001, 111-040-0015, 111-040-0040, 111-040-0050

Last Date for Comment: 5-31-17, 5 p.m.

Summary: Amendments to this rule are to clarify OEBB policy and processes that are currently in place. Clarifications include opt-outs, newborn coverage effective dates, Medicare and TRICARE. In addition, the proposed rule changes are to clean up language used in this rule to make the language consistent with all other OEBB administrative rules.

Rules Coordinator: April Kelly

Address: Oregon Health Authority, Oregon Educators Benefit Board, 500 Summer Street NE, E-88, Salem, OR 97301

Telephone: (503) 378-6588

Rule Caption: Cleaning up language in rule

Date:	Time:	Location:
5-23-17	10:30 a.m.	500 Summer St NE Rm 137B Salem, OR 97301

Hearing Officer: OEBB Staff

Stat. Auth.: ORS 243.860 to 243.886

Stats. Implemented: ORS 243.864(1)(a)

Proposed Amendments: 111-050-0010, 111-050-0015, 111-050-0016, 111-050-0020, 111-050-0025, 111-050-0030, 111-050-0035, 111-050-0045, 111-050-0050, 111-050-0060, 111-050-0065, 111-050-0070, 111-050-0075

Last Date for Comment: 5-31-17, 5 p.m.

Summary: Cleaning up language used in Division 50 so that the language is consistent throughout all OEBB administrative rules.

Rules Coordinator: April Kelly

Address: Oregon Health Authority, Oregon Educators Benefit Board, 500 Summer Street NE, E-88, Salem, OR 97301

Telephone: (503) 378-6588

Rule Caption: Cleaning up language in rule

Date:	Time:	Location:
5-23-17	10:30 a.m.	500 Summer St. NE Rm. 137B Salem, OR 97301

Hearing Officer: OEBB Staff

Stat. Auth.: ORS 243.860 to 243.886

Stats. Implemented: ORS 243.864(1)(a)

Proposed Amendments: 111-065-0001, 111-065-0005, 111-065-0010, 111-065-0015, 111-065-0020, 111-065-0025, 111-065-0035, 111-065-0040

Last Date for Comment: 5-31-17, 5 p.m.

Summary: Cleaning up language used in Division 65 so that the language is consistent throughout all OEBB administrative rules.

Rules Coordinator: April Kelly

Address: Oregon Health Authority, Oregon Educators Benefit Board, 500 Summer Street NE, E-88, Salem, OR 97301

Telephone: (503) 378-6588

Rule Caption: Amendments clarify OEBB policy and processes that are currently in place and clean up language

Date:	Time:	Location:
5-23-17	10:30 a.m.	500 Summer St. NE Rm. 137B Salem, OR 97304

Hearing Officer: OEBB Staff

Stat. Auth.: ORS 243.860 to 243.886

Stats. Implemented: ORS 243.864(1)(a)

Proposed Adoptions: 111-080-0060

Proposed Amendments: 111-080-0001, 111-080-0005, 111-080-0030, 111-080-0040, 111-080-0055

Last Date for Comment: 5-31-17, 5 p.m.

Summary: Cleaning up language used in Division 80 so that the language is consistent throughout all OEBB administrative rules. Additionally, amendments to this rule are to clarify OEBB policy and processes that are currently in place.

Rules Coordinator: April Kelly

Address: Oregon Health Authority, Oregon Educators Benefit Board, 500 Summer Street NE, E-88, Salem, OR 97301

Telephone: (503) 378-6588

Oregon Liquor Control Commission Chapter 845

Rule Caption: The amendments align the rule with the Oregon Department of Agriculture's Marijuana Compliance Assistance Program.

Date:	Time:	Location:
5-15-17	10 a.m.	9079 SE McLoughlin Blvd. Portland, OR 97222

NOTICES OF PROPOSED RULEMAKING

Hearing Officer: Bryant Haley
Stat. Auth.: ORS 475B.025 & 475B.070
Stats. Implemented: ORS 475B.070 & 475B.160
Proposed Amendments: 845-025-2070
Last Date for Comment: 5-30-17, 5 p.m.

Summary: This past January, the Commission temporarily amended 845-025-2070 to align the rule with the Oregon Department of Agriculture's Marijuana Compliance Assistance Program. This program allows marijuana producers who participate in the program to accept responsibility for potential illegal pesticide applications. A producer that accepts responsibility will receive a notice of warning from the Oregon Liquor Control Commission for their first violation instead of a Category I violation. Any subsequent violations would result in a Category I violation, as the Assistance program is only available to first time violators.

Rules Coordinator: Bryant Haley
Address: Oregon Liquor Control Commission, 9079 SE McLoughlin Blvd., Portland, OR 97222
Telephone: (503) 872-5136

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Rule Caption: The amendments enable processors to use shared kitchen space to make edible or topical products.

Date:	Time:	Location:
5-15-17	11 a.m.	9079 SE McLoughlin Blvd. Portland, OR 97222

Hearing Officer: Bryant Haley
Stat. Auth.: ORS 475B.025 & 475B.090
Stats. Implemented: ORS 475B.090 & 475B.135
Proposed Adoptions: 845-025-3255
Proposed Amendments: 845-025-3250
Last Date for Comment: 5-30-17, 5 p.m.

Summary: As Commission staff has begun licensing cannabinoid edible processors, staff has discovered that many processor do not own a commercial kitchen to produce their products. Instead, as is common in the catering industry, many edible/concentrate makers rent commercial kitchen space or share space with another processor to save on costs. Existing rules allow for this practice under certain conditions for processors with an edible endorsement. However, existing rules do not contemplate that many edible makers also produce their own infused products, which requires a concentrate endorsement. The Commission is expanding the rule to allow processors who operate under this rule to also produce certain concentrates for use in their edible or topical products.

Rules Coordinator: Bryant Haley
Address: Oregon Liquor Control Commission, 9079 SE McLoughlin Blvd., Portland, OR 97222
Telephone: (503) 872-5136

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Oregon Medical Board Chapter 847

Rule Caption: Physician Assistants prescribing buprenorphine for medication-assisted opioid dependency treatment

Stat. Auth.: ORS 677.265
Other Auth.: 21 U.S.C. 823 as amended by the Comprehensive Addiction and Recovery Act of 2016
Stats. Implemented: ORS 677.190, 677.205, 677.470, 677.515, 677.545
Proposed Amendments: 847-050-0041
Last Date for Comment: 5-31-17, Close of Business

Summary: The proposed rule amendment provides clear requirements for physician assistants to prescribe and dispense buprenorphine for medication-assisted opioid dependency treatment. The physician assistant must be authorized to prescribe Schedule III-V medication, hold a DEA buprenorphine waiver, be authorized to dispense, have a supervising physician who prescribes and dispenses buprenorphine, and the practice agreement must include buprenorphine as a delegated medical service.

Rules Coordinator: Nicole Krishnaswami

Address: Oregon Medical Board, 1500 SW 1st Ave., Suite 620, Portland, OR 97201
Telephone: (971) 673-2667

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Rule Caption: EMRs may control hemorrhage and move patients; AEMTs may perform intraosseous infusions with lidocaine

Stat. Auth.: ORS 682.245
Stats. Implemented: ORS 682.245
Proposed Amendments: 847-035-0030

Last Date for Comment: 5-31-17, Close of Business
Summary: The proposed rule amendment (1) adds "hemorrhage control" to the EMR scope of practice, which will allow use of multiple modalities such as tourniquets and bandages; (2) adds "emergency moves for endangered patients" to the EMR scope of practice; (3) allows intraosseous infusions to be performed by AEMTs for all patients, not just pediatric patients; and (4) moves intraosseous infusion of lidocaine for anesthetic from the EMT-Intermediate scope of practice to the AEMT scope of practice.

Rules Coordinator: Nicole Krishnaswami
Address: Oregon Medical Board, 1500 SW 1st Ave., Suite 620, Portland, OR 97201
Telephone: (971) 673-2667

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Rule Caption: Delegation of Authority to Board Chair during a Declared Emergency

Stat. Auth.: ORS 401.168, 402.105, 433.441, 677.265
Stats. Implemented: ORS 401.165, 677.265
Proposed Amendments: 847-003-0100

Last Date for Comment: 5-31-17, Close of Business
Summary: The proposed rule amendment clarifies that the Board Chair may exercise authority vested in the Board in the event of a declared emergency.

Rules Coordinator: Nicole Krishnaswami
Address: Oregon Medical Board, 1500 SW 1st Ave., Suite 620, Portland, OR 97201
Telephone: (971) 673-2667

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Oregon Patient Safety Commission Chapter 325

Rule Caption: Establishes the Patient Safety Commission 2017-2019 biennial budget by amending OAR 325-005-0015.

Date:	Time:	Location:
5-16-17	1 p.m.	2501 SW 1st St., Suite 200 Portland Oregon 97201

Hearing Officer: Shannon K. O'Fallon
Stat. Auth.: ORS 442.820-442.835
Other Auth.: Section 9, Chapter 686, Oregon Laws, 2003
Stats. Implemented: ORS 182.462(1) & 182.462(2)
Proposed Amendments: 325-005-0015

Last Date for Comment: 5-16-17, Close of Business
Summary: In accordance with the rules governing semi-independent state agencies, this action establishes the Oregon Patient Safety Commission 2017-2019 biennial budget of \$4,353,196 by amending OAR 325-005-015.

Rules Coordinator: Melissa Parkerton
Address: Oregon Patient Safety Commission, PO Box 285, Portland, OR 97207
Telephone: (503) 224-5034

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Oregon State Treasury Chapter 170

Rule Caption: Modifies rules regarding criminal records checks to conduct checks in accordance with state-wide rules.

Stat. Auth.: ORS 181A.195, 184.340 & 184.365
Stats. Implemented: ORS 181A.195(9)
Proposed Amendments: 170-002-0010

Last Date for Comment: 5-24-17, Close of Business

NOTICES OF PROPOSED RULEMAKING

Summary: The Department of Administrative Services established State-Wide Criminal Records Rules effective January 4, 2016. Oregon State Treasury is amending rules regarding criminal records checks to comply with the state-wide requirements. This change will eliminate most of the existing rule text and state that Criminal Records checks are conducted in accordance with OAR 125-007-0200 through OAR 125-007-0310.

Rules Coordinator: Kimberly Olson

Address: Oregon State Treasury, 350 Winter St. NE, Suite 100, Salem, OR 97301

Telephone: (503) 378-3562

**Public Utility Commission
Chapter 860**

Rule Caption: In the Matter of Rules Regarding Community Solar Projects.

Date:	Time:	Location:
5-22-17	9:30 a.m.	Public Utility Commission Hearing Rm., 201 High St. SE Salem, OR 97301

Hearing Officer: ALJ Harper

Stat. Auth.: 2016 Senate Bill 1547, Section 22, codified as Section 22, Chapter 28, Oregon Laws 2016

Stats. Implemented: Section 22, Chapter 28, Oregon Laws 2016

Proposed Adoptions: Rules in 860-088

Last Date for Comment: 5-30-17, 5 p.m.

Summary: The forthcoming proposed rules will allow for development of community solar projects to provide customers of investor-owned utilities the opportunity to share the costs and benefits associated with the generation of electricity by solar photovoltaic (PV) energy systems. The rules will implement a program in which "Project Managers" can sell subscriptions or ownership shares in solar PV facilities located in the purchasing and subscribing customers' respective utility service territories. "Project managers" may be utilities, solar developers, project aggregators, project owners, or other entities.

The rules will enable customer participants to use the value of their proportional share of the project generation to offset utility charges for electricity that the participants consume. The rules will create criteria, guidelines and prescribe a process in which community solar projects can apply for certification with the Public Utility Commission. Certification is a necessary step in order for community solar projects to interconnect with investor-owned utilities. The rules also will prescribe participant protection measures as well as measures for the protection of non-participants, including cost reporting requirements, consumer terms and conditions disclosures, and ongoing PUC oversight of the program.

Rules will establish a third-party administrator to oversee the management of project applications, information dissemination, data management, and data reporting, amongst other responsibilities. The rules will also direct the creation of a low-income community program manager who will facilitate relationships between Project Managers and low-income communities, who will be designated 10 percent of each project's available generating capacity. Finally, the rules will direct the establishment of an advisory panel that will be composed of industry, government, and community advocate members to help inform possible changes to the program.

The rules will also prescribe program and project characteristics, such as size limits, location requirements and subscription rules. These program and project attributes can be changed by the PUC in a public process at the PUC's discretion.

The Commission encourages participants to file written comments as early as practicable in the proceedings so that other participants have the opportunity to consider and respond to the comments before the deadline. Please reference Docket No. AR 603 on comments and attach them to an e-mail to the Commission's Filing Center at PUC.FilingCenter@state.or.us.

Interested persons may review all filings online at <http://apps.puc.state.or.us/edockets/docket.asp?DocketID=20304>. For guidelines on filing and participation, please see OAR 860-001-0140 through 860-001-0160 and 860-001-0200 through 860-001-0250 found online at http://arcweb.sos.state.or.us/pages/rules/oars_800/oar_860/860_001.html.

Participants wishing to monitor the hearing by telephone must contact Diane Davis at diane.davis@state.or.us or (503) 378-4372 by close of business May 19, 2017, to request a dial-in number. The Commission strongly encourages those planning to present oral comment at the hearing to attend in person.

Rules Coordinator: Diane Davis

Address: Public Utility Commission of Oregon, PO Box 1088, Salem, OR 97308-1088

Telephone: (503) 378-4372

**Public Utility Commission,
Oregon Board of Maritime Pilots
Chapter 856**

Rule Caption: Adjusts pilot license fee by percentage change in consumer price index for previous 24 months.

Stat. Auth.: ORS Chapter 776

Stats. Implemented: ORS 776.115(4)(b), 776.355(2)

Proposed Amendments: 856-010-0016

Last Date for Comment: 6-15-17, 3 p.m.

Summary: The Board is statutorily required to adjust the amount of the maximum annual license fee for a maritime pilot for each subsequent biennium by a proportional amount equal to the percentage change in the 24-month period prior to the beginning of the biennium in the Portland-Salem OR-WA, Consumer Price Index for All Urban Consumers for All Items, as published by the Bureau of Labor Statistics of the United States Department of Labor. The cumulative CPI for the previous period will increase the license fee from \$2,995 to \$3,149 annually.

Rules Coordinator: Susan Johnson

Address: Public Utility Commission, Oregon Board of Maritime Pilots, 800 NE Oregon St., Suite 507, Portland, OR 97232

Telephone: (971) 673-1530

**Secretary of State,
Elections Division
Chapter 165**

Rule Caption: Increases length of time before voters are moved to inactive status under ORS 247.013(6)

Date:	Time:	Location:
6-7-17	3 p.m.	255 Capitol St NE, Ste. 501 Salem, OR

Hearing Officer: Brenda Bayes

Stat. Auth.: ORS 246.150

Stats. Implemented: ORS 247.005, ORS 247.013(6)

Proposed Adoptions: 165-005-0180

Last Date for Comment: 6-7-17, 5 p.m.

Summary: This rule is proposed for adoption to specify that the registration of a voter who has not voted or updated their registration information shall not be made inactive until they have not voted or updated their registration information for a period of ten years.

Rules Coordinator: Brenda Bayes

Address: Secretary of State, Elections Division, 255 Capitol St. NE, Suite 501, Salem, OR 97310

Telephone: (503) 986-1518

**Teacher Standards and Practices Commission
Chapter 584**

Rule Caption: Adopts, amends, and repeals rules related to licensure, professional practices and approval of preparation programs.

NOTICES OF PROPOSED RULEMAKING

Date: 5-31-17
Time: 4 p.m.
Location: TSPC Salem Office
250 Division St. NE
Salem, OR 97301

Hearing Officer: Tamara Dykeman

Stat. Auth.: ORS Chapter 342

Stats. Implemented: ORS 342.120–342.430, 342.455–342.495 & 342.553

Proposed Adoptions: 584-017: 584-017-0137, 584-230: 584-230-0010, 584-230-0020, 584-230-0030, 584-230-0040, 584-230-0050, 584-230-0060, 584-230-0070, 584-230-0080, 584-230-0100

Proposed Amendments: 584-010: 584-010-0050, 584-017, 584-017-1100, 584-020: 584-020-0005, 584-020-0040, 584-050: 584-050-0019, 584-210: 584-210-0040, 584-210-0050, 584-210-0140, 584-210-0150, 584-210-0160, 584-255: 584-255-0010

Proposed Repeals: 584-042: 584-042-0008, 584-042-0012, 584-042-0021, 584-042-0022, 584-042-0031, 584-042-0036, 584-042-0044, 584-042-0051, 584-042-0060, 584-042-0070, 584-042-0081, 584-042-0090

Last Date for Comment: 6-1-17, 5 p.m.

Summary: 584-010-0050 is being amended to change the reporting date from September 30 to April 15. This change will align with the CAEP annual report timeline and will allow the EPPs more time to analyze the previous year's data.

584-017-1100 is being amended to change the implementation timing and other provisions related to the Commission-adopted teacher performance assessment.

584-017-0137 is being adopted to create standards for Cooperating Teachers, as required by statute.

584-020-0005 is being amending to prohibit educators from engaging in sexual conduct with a person previously known to the educator as a student, or who has left school or graduated in the 90 days prior to the conduct and defines student as "any individual enrolled in the state's public or private schools from preschool through high school graduation or any individual between under the age of 18."

584-020-0040 is being amended to remove specific reference to list of crimes and now simply references the statute, ORS 342.143. The amendments also adds marijuana to list of substances that are prohibited from appearing on duty or at any district-sponsored activity while under the influence.

584-050-0019 is being amended to eliminate the requirement for a notarized affidavit. Applicants will simply need to submit materials sufficient to indicate they have met all terms of probation.

584-210-0040 is being amended to allow long-term substitute assignments to count toward the 135-day teaching year for purposes of qualifying for the Professional Teaching License.

584-210-0050 Teacher Leader License is being amended to remove July 1, 2017 sunset date, allowing current provisions related to the pilot project.

584-210-0140 is being amended to remove the June 30, 2017 sunset date, allowing the current provisions of the Substitute Teacher License to remain in place.

584-210-0150 is being amended to remove June 30, 2017 sunset date, allowing the current provisions of the Restricted Substitute Teacher License to remain in place.

584-230-0010 Definitions for CTE, 584-230-0020 Preliminary CTE License, 584-230-0030 Professional CTE License, 584-230-0040 Restricted CTE License, 584-230-0050 CTE Endorsements, 584-230-0060 CTE Instructor Appraisal Committees, 584-230-0070 CTE Professional Development Plans, 584-230-0080 CTE Work Experience, 584-230-0100 Waivers, 584-210-0160 License for Conditional Assignment, 584-255-0010 Professional Development Requirements are being adopted to replace the current CTE licensure rules.

584-042-0008, 584-042-0012, 584-042-0021, 584-042-0022, 584-042-0031, 584-042-0036, 584-042-0044, 584-042-0051, 584-042-0060, 584-042-0070, 584-042-0081, 584-042-0090 are being

repealed. These are the current CTE licensure rules that are being replaced by the new rules delineated in the previous paragraph.

Rules Coordinator: Tamara Dykeman

Address: Teacher Standards and Practices Commission, 250 Division St. NE, Salem, OR 97301

Telephone: (503) 378-3586

Veterinary Medical Examining Board
Chapter 875

Rule Caption: Prohibits Certified Veterinary Technician student interns from administering rabies vaccine.

Stat. Auth.: ORS 686.210

Stats. Implemented: ORS 686.040(13)

Proposed Amendments: 875-010-0045

Last Date for Comment: 5-15-17, Close of Business

Summary: Prohibits Certified Veterinary Technician student interns from administering rabies vaccine. Aligns Veterinary Practice Act with Oregon Health Authority rule.

Rules Coordinator: Lori V. Makinen

Address: Veterinary Medical Examining Board, 800 NE Oregon St., Suite 407, Portland, OR 97232

Telephone: (971) 673-0224

Rule Caption: Prohibits administration of rabies vaccine by veterinary student interns.

Stat. Auth.: ORS 686.210

Stats. Implemented: ORS 686.040(13)

Proposed Amendments: 875-010-0045

Last Date for Comment: 5-15-17, Close of Business

Summary: Prohibits administration of rabies vaccine by veterinary student interns. Aligns Veterinary Practice Act with Oregon Health Authority OAR 333-019-0017.

Rules Coordinator: Lori V. Makinen

Address: Veterinary Medical Examining Board, 800 NE Oregon St., Suite 407, Portland, OR 97232

Telephone: (971) 673-0224

Rule Caption: Limits administration of rabies vaccine to licensees or other authorized person.

Stat. Auth.: ORS 686.210

Stats. Implemented: ORS 686.040 & 686.370

Proposed Amendments: 875-015-0030

Last Date for Comment: 5-15-17, Close of Business

Summary: Limits administration of rabies vaccine to licensees or other authorized person.

Rules Coordinator: Lori V. Makinen

Address: Veterinary Medical Examining Board, 800 NE Oregon St., Suite 407, Portland, OR 97232

Telephone: (971) 673-0224

Rule Caption: Eliminates restrictions on veterinary facility management.

Stat. Auth.: ORS 686.210

Stats. Implemented: ORS 686.130

Proposed Repeals: 875-010-0031

Last Date for Comment: 5-15-17, Close of Business

Summary: Eliminates restrictions on veterinary facility management.

Repeals: No one veterinarian may act as the Managing Veterinarian for more than four separate facilities at any one time. If designated as Managing Veterinarian for more than two separate facilities, none of the facilities may be more than 100 miles apart.

Rules Coordinator: Lori V. Makinen

Address: Veterinary Medical Examining Board, 800 NE Oregon St., Suite 407, Portland, OR 97232

Telephone: (971) 673-0224

NOTICES OF PROPOSED RULEMAKING

Water Resources Department Chapter 690

Rule Caption: Modifies back-siphon prevention device standards for irrigation systems using groundwater to chemigate or fertigate.

Date:	Time:	Location:
5-24-17	2 p.m.	Oregon Water Resources Dept. 725 Summer St. NE, Rm. 124B Salem, OR 97301

Hearing Officer: Kristopher Byrd

Stat. Auth.: ORS 536, 537 & 540

Stats. Implemented: ORS 537.780

Proposed Amendments: 690-215-0017

Last Date for Comment: 5-31-17, 5 p.m.

Summary: The proposed rule changes include:

- Clarifying the installation requirements for down well water treatment systems.
- Specifying the requirements for chemicals used to treat down well groundwater.
- Clarifying back-siphon prevention device testing requirements.

- Clarifying back-siphon prevention device options for irrigation wells with a mainline diameter four inches or larger when used to chemigate or fertigate.

- Clarifying back-siphon prevention device options for irrigation wells with a mainline diameter less than four inches when used to chemigate or fertigate.

- Clarifying the options for individuals that wish to utilize other methods to prevent backflow when applying chemicals or fertilizers through an irrigation system.

- Adding information regarding other agencies that also have back-flow assembly requirements.

- Adding detailed requirements for bypass piping installed around approved back-siphon prevention devices.

- Specifying Department authority to require back-siphon prevention devices on any water supply well.

Rules Coordinator: Diana Enright

Address: Water Resources Department, 725 Summer St. NE, Salem, OR 97301

Telephone: (503) 986-0874

ADMINISTRATIVE RULES

Board of Nursing Chapter 851

Rule Caption: Division 56, Advanced Practice Registered Nurse Authority to Prescribe and Dispense

Adm. Order No.: BN 3-2017(Temp)

Filed with Sec. of State: 4-14-2017

Certified to be Effective: 4-15-17 thru 10-10-17

Notice Publication Date:

Rules Amended: 851-056-0026

Subject: This amendment to the rules will make a temporary rule change for qualified Nurse Practitioners to prescribe medication assisted treatment (MAT) medications to include Buprenorphine (Suboxone).

This change is in response to Federal Legislation known as the CARA Act (July 2016) which made allowances for Nurse Practitioners to prescribe Buprenorphine for MAT.

Rules Coordinator: Peggy A. Lightfoot—(971) 673-0638

851-056-0026

Rules Relating to Controlled Substances

(1) In the administration, distribution, storage, prescribing, and dispensing of controlled substances, APRNs shall comply with all applicable requirements in the Code of Federal Regulations (CFR), Title 21, and state law, including but not limited to, ORS Chapter 430 and 475 and OAR chapter 415 and 855.

(2) Nurse practitioners and clinical nurse specialists shall not dispense a controlled substance without current dispensing authority. Distribution of prepackaged, complimentary drug samples is not considered dispensing (ORS 689.005(9)).

(3) APRNs who have authority from the Drug Enforcement Administration (DEA) to prescribe controlled substances must verify evidence of such with their prescriptive authority renewal application. A nurse with prescriptive authority may choose to decline DEA certification and must verify so in writing.

(4) Storage and inventory of controlled substances:

(a) Samples or quantities of controlled substances shall be stored in a securely locked cabinet on the premises of the APRNs practice location.

(b) APRNs who receive samples or quantities of controlled substances shall be responsible for the security, inventory, and disposal of these drugs.

(c) APRNs shall maintain inventory records of controlled substances that they receive or distribute for a period of three years. The records shall include:

(A) Drug name, amount received, date received, drug expiration date;

(B) Drug name, amount distributed, date distributed, to whom distributed;

(C) Drug name and the date and place where it was returned for destruction.

(d) Controlled substances that are expired, deteriorated, or unwanted shall be returned to a DEA registered disposal site or disposal system or law enforcement authorities. This does not include controlled substances which are properly wasted at the facility where they were to be administered. In this context, "properly wasted" means that on-site destruction of a controlled substance in conformance with applicable state and federal law. APRNs shall not personally destroy controlled substances.

(e) Controlled substances must be transported in a secured, locked container.

(f) Client records shall state the distribution of controlled substance samples.

(g) Theft of controlled substances shall be immediately reported upon discovery to the DEA and to any other required authorities.

(h) APRNs who receive controlled substances shall cooperate with the Board in their inspection of records and physical inventory of controlled substances. Inventory of all controlled substances shall be taken by the prescriber responsible for their receipt and storage every year on the same date as the biennial inventory required by 21 CFR 1304.13.

(i) If requested by the Board, any APRN who receives controlled substances shall submit a copy of inventory records from the preceding two years for review.

(5) Prescribing controlled substances:

(a) APRNs shall only prescribe the controlled substances from Schedules II–V, at the level provided for on their DEA certificate.

(b) Nurse Practitioners who treat opioid addiction must demonstrate that they meet federal requirements and obtain a waiver from the Substance Abuse and Mental Health Services Administration (SAMSHA). To qualify for such a waiver, nurse practitioners must:

(A) Hold a current DEA registration with an identification number that specifically authorizes him or her to engage in medication assisted treatment of opioid addiction;

(B) Hold current Nurse Practitioner Certification in Oregon;

(C) Hold current Prescriptive Authority (NP-PP designation on licensure);

(D) Complete all SAMSHA required training related to the treatment and management of opioid addiction;

(E) Comply with all federal and state regulations applicable to controlled substances.

(6) Intractable or chronic pain management:

(a) APRNs may prescribe or administer controlled substances to a person in the course of their treatment for a diagnosed condition causing pain, defined in OAR 851-056-0000(18).

(b) The diagnosis and treatment of intractable or chronic pain requires documentation of the following:

(A) A recent diagnosis of the condition (if acute or unstable), or past diagnosis (if chronic and stable) causing pain, by one or more licensed practitioners specializing in the treatment of the body area, system, or organ perceived as the source of pain; and

(B) A written material risks notice specific to the patient's condition and treatment; and

(C) A consultation and review of the pain treatment plan where clinically indicated if the patient shows limited or no improvement.

(c) APRNs must have a complete discussion with the patient or person authorized to make health care decisions for the patient regarding the diagnosis, as well as the risk, benefits, alternatives, side effects, and potential for addiction and withdrawal of the controlled substance, along with any other applicable precautions. These discussions must be documented in the patient record. Documentation must include a plan for period review of patient response and follow-up.

(d) APRNs shall document patient use of controlled substances for chronic or intractable pain, including history and assessment to rule out substance abuse. Evidence of patient addiction or abuse requires referral and/or transfer of care for further diagnosis and treatment.

Stat. Auth.: ORS 678.150 & 678.285

Stats. Implemented: ORS 678.111, 678.370, 678.372, 678.375, 678.380, 678.385 & 678.390
Hist.: BN 10-2006, f. & cert. ef. 10-5-06; BN 5-2008, f. & cert. ef. 6-24-08; BN 9-2014, f. 12-5-14, cert. ef. 1-1-15; BN 2-2015, f. 6-23-15, cert. ef. 8-1-15; BN 3-2017(Temp), f. 4-14-17, cert. ef. 4-15-17 thru 10-10-17

Rule Caption: Removes the 384 hour RN practice requirement for initial NP licensure.

Adm. Order No.: BN 4-2017(Temp)

Filed with Sec. of State: 4-14-2017

Certified to be Effective: 4-15-17 thru 10-10-17

Notice Publication Date:

Rules Amended: 851-050-0004

Subject: This amendment to the rules will make a temporary rule change removing the 384 hour RN practice requirement for initial NP licensure.

Rules Coordinator: Peggy A. Lightfoot—(971) 673-0638

851-050-0004

Nurse Practitioner Practice Requirements

(1) The practice requirement as a nurse practitioner must be met through practice, which meets the definition in OAR 851-050-0000(17) in the following manner:

(a) Completion of a nurse practitioner program within the past one year; or

(b) Completion of a nurse practitioner program within the past two years and a minimum of 192 hours of practice as a nurse practitioner; or

(c) 960 hours of nurse practitioner practice within the five years preceding certification application or renewal; or

(d) Completion of a Board supervised advanced practice re-entry program which meets the requirements of OAR 851-050-0006 within two years immediately preceding issuance of certification under a limited or registered nurse license and a limited nurse practitioner certificate.

(2) All practice hours claimed are subject to audit and disciplinary action for falsification.

Stat. Auth.: ORS 678.375, 678.380 & 678.390

Stats. Implemented: ORS 678.380 & 390

ADMINISTRATIVE RULES

Hist.: BN 10-2003, f. & cert. ef. 10-2-03; BN 8-2004, f. 5-4-04, cert. ef. 5-12-04; BN 9-2009, f. 12-17-09, cert. ef. 1-1-10; BN 6-2012, f. 5-7-12, cert. ef. 6-1-12; BN 4-2017(Temp), f. 4-14-17, cert. ef. 4-15-17 thru 10-10-17

Board of Parole and Post-Prison Supervision Chapter 255

Rule Caption: Amend procedures for assessments and classification of registered sex offenders.

Adm. Order No.: PAR 1-2017(Temp)

Filed with Sec. of State: 3-21-2017

Certified to be Effective: 3-21-17 thru 9-16-17

Notice Publication Date:

Rules Adopted: 255-085-0060

Rules Amended: 255-085-0010, 255-085-0020, 255-085-0030, 255-085-0040, 255-085-0050

Subject: Amend rules and procedures for assessing and classifying registered sex offenders under ORS 163A.100-125.

Rules Coordinator: Perry Waddell—(503) 945-0946

255-085-0010

Definitions

The following definitions apply to this Division:

(1) “Adult male registrant” means a male registrant who was at least 18 years of age when he committed the sex crime offense.

(2) “Board registered victim” means a victim, as defined in OAR 255-005-0005 who is registered with the Board.

(3) “Category B registrant” means a person of any gender or age at the time of sex crime commission who is required to register as a sex offender based only on a conviction for a Category B sex crime.

(4) “Category B sex crime” means any type of criminal offense within the scope of “Category B offenses” used to administer the Static-99R and listed on the Board’s website, and is also a sex crime for which reporting is required.

(5) “Existing registrant” means a registrant for whom the event triggering the obligation to make an initial report as a sex offender occurred before January 1, 2014.

(6) “Female registrant” means a female registrant, regardless of her age when she committed the sex crime offense.

(7) “Other registrant” means a registrant who is not an adult male registrant. Other Registrant includes, but is not limited to: female registrants; Category B registrants; and young male registrants.

(8) “Registrant” means a person convicted of a sex crime and required to register as a sex offender or found guilty except for insanity of a sex crime and required to register as a sex offender under ORS Chapter 163A.

(9) “Risk assessment” means a sex offense-specific assessment of the person’s risk to sexually reoffend, using the risk assessment methodology in OAR 255-085-0020.

(10) “Sex crime” has the definition contained in ORS 163A.005 (5).

(11) “Young male registrant” means a male registrant who was 17 years of age or younger when he committed the sex crime offense.

Stat. Auth: ORS 181.800 and 181.803

Stat. Implemented:

Hist.: PAR 3-2015(Temp), f. & cert. ef. 8-27-15 thru 2-19-16; PAR 1-2016, f. & cert. ef. 1-27-16; PAR 5-2016(Temp), f. 12-28-16, cert. ef. 1-3-17 thru 7-1-17; PAR 1-2017(Temp), f. & cert. ef. 3-21-17 thru 9-16-17

255-085-0020

Sex Offender Risk Assessment Methodology

(1) For classification and community notification for adult male registrants, the classifying agency shall use the Static-99R actuarial instrument to conduct a sex offender risk assessment. Classifying agencies may score registrants using information from previous Static-99 or Static-99R assessments. Classifying agencies shall score and place each registrant into one of the following levels:

(a) Notification Level 1: Low risk (Static-99R score of -3 to 3);

(b) Notification Level 2: Moderate risk (Static-99R score of 4 to 5);

or

(c) Notification Level 3: High risk (Static-99R score of 6 or higher).

(2) For classification of other registrants, the classifying agency shall assess registrants using the Level of Services/Case Management Inventory (LS/CMI) as supplemented by an independent sexual offense-specific evaluation report. This assessment shall be performed by an independent evaluator who is a licensed or Sex Offender Treatment Board-certified provider qualified to conduct sexual offense risk assessments. The independent evaluator will provide the classifying agency with a written report, and will pro-

vide information regarding the registrant’s risk for sexual re-offense. Classifying agencies shall place the registrant into one of the following levels:

(a) Notification Level 1: Low risk;

(b) Notification Level 2: Moderate risk; or

(c) Notification Level 3: High risk.

Stat. Auth: ORS 181.800, 181.803

Stat. Implemented: ORS 181.800, 181.803

Hist.: PAR 3-2015(Temp), f. & cert. ef. 8-27-15 thru 2-19-16; PAR 1-2016, f. & cert. ef. 1-27-16; PAR 5-2016(Temp), f. 12-28-16, cert. ef. 1-3-17 thru 7-1-17; PAR 1-2017(Temp), f. & cert. ef. 3-21-17 thru 9-16-17

255-085-0030

Assessments and Reassessments

(1) Automatic Assessments. Classifying agencies shall classify the following registrants as Level 3 sex offenders:

(a) A person who was previously designated as a predatory sex offender between February 10, 2005 and December 31, 2013;

(b) A person who is designated as a sexually violent dangerous offender under ORS 137.765;

(c) An existing registrant who refuses or fails to participate in a sex offender risk assessment as directed by the classifying agency.

(2) Initial Assessments

(a) When a person convicted of a crime described in ORS 163.355 to 163.427 is sentenced to a term of imprisonment in a Department of Corrections institution for that crime, the Board shall conduct a risk assessment of the person before the person is released from custody.

(b) Subject to the procedures set forth in this rule, for a person described in ORS 163A.105(2) or 163A.105(4) who has not been assessed or classified prior to release, the Board shall conduct a risk assessment of the person within 60 days of either the person’s release from custody or after receiving notice of a person’s obligation to report in this state from the Department of State Police.

(c) For persons who were released from custody or whose initial obligation to register occurred on or after January 1, 2014, the Board shall conduct a risk assessment as soon as practicable.

(3) Subsequent Assessments: Upon conviction of a new qualifying sex offense after a previous classification, the classifying agency shall reassess the offender and may reclassify the offender if the risk assessment changes the notification level.

(4) Notifications and Objections: Objections that are not received within these timelines will not be reviewed, and the Board will proceed to final classification. The Board will provide to the registrant the assessment, a Notice of Rights form, and a Written Objections form. Following this notification:

(a) If the registrant is supervised or in custody of the Department of Corrections, the Board must receive the Notice of Rights form, and the form for Written Objections or Waiver of Objections to the assessment, within thirty (30) days after the mailing date on the Notice of Rights.

(b) If the registrant is not supervised or in custody of the Department of Corrections, the Board must receive the Notice of Rights form, and the form for Written Objections or Waiver of Objections to the assessment, within sixty (60) days after the mailing date on the Notice of Rights.

Stat. Auth: ORS 181.801, 181.802

Stat. Implemented: ORS 181.801, 181.802

Hist.: PAR 3-2015(Temp), f. & cert. ef. 8-27-15 thru 2-19-16; PAR 1-2016, f. & cert. ef. 1-27-16; PAR 1-2017(Temp), f. & cert. ef. 3-21-17 thru 9-16-17

255-085-0040

Reviews – Adult Male Registrants

(1) Written objections are limited to presenting factual evidence or information regarding the Static-99R score. Objections must be plain, concise, and directly related to specific items on the Static-99R that the Registrant claims were not scored correctly. Objections are limited to provided forms. That limitation does not include additional documentation necessary to support the request. (Under most circumstances, no additional documentation will be necessary.) Objections must be incorporated into the objection form; any claims or allegations included solely in the “additional documentation” will not be considered by the Board in its response.

(2) Criteria for Granting a Review:

(a) The item was not scored correctly in light of the Registrant’s criminal history; or

(b) Pertinent information was available at the time of the assessment which, through no fault of the Registrant, was not considered; or

(c) Pertinent information was not available at the time of the assessment, e.g., information concerning convictions from other jurisdictions.

(3) Upon receipt of any timely submitted Written Objections, and compliance with 255-085-0040(1) and (2), a Board hearings officer will

ADMINISTRATIVE RULES

conduct a review of the assessment and supporting documents. The hearings officer will verify the accuracy of the assessment and prepare a memo that responds to any written objections from the registrant and make a determination as to whether the registrant's score is accurate or should be changed.

(4) If the hearings officer's review reveals new information that was not available at the time the registrant was provided the opportunity to make objections, notifications will be made under 255-080-0030(4). Under this section, objections are limited to the new information provided in this notification.

(5) Upon completing the review, the hearings officer will submit to the Board a memo detailing the review, as well as any information considered by the hearings officer.

Stat. Auth: ORS 181.800, 181.801, 181.802

Stat. Implemented: ORS 181.800, 181.801, 181.802

Hist.: PAR 3-2015(Temp), f. & cert. ef. 8-27-15 thru 2-19-16; PAR 1-2016, f. & cert. ef. 1-27-16; PAR 1-2017(Temp), f. & cert. ef. 3-21-17 thru 9-16-17

255-085-0050

Hearings — Other Registrants

(1) Upon the Board's receipt of Written Objections, a hearings officer will complete a review of the LS/CMI score, evaluation report, and supporting documents. The review will verify the information, and the hearings officer will prepare a memo responding to the written objections, detail the finding of the evaluator, and make a determination as to whether the registrant's LS/CMI score is accurate or should be changed.

(2) If the hearings officer's review reveals new information that was not available at the time that the registrant was provided the opportunity to make objections, notification will be made under 255-080-0030(4). Under this section, objections are limited to the new information provided in the notification.

(3) If the evaluator's recommendation places the registrant in Level I or Level II, the hearings officer will provide this memo to the Board along with any information considered in the review.

(4) If the evaluator's recommendation places the registrant in Level III, the hearings officer will schedule a hearing with the registrant.

(5) The hearings officer will provide the registrant with the documentation submitted for review at least 14 days before the hearing.

(6) At the hearing, the registrant may present additional factual evidence or information regarding the LS/CMI score and evaluator's report.

(7) For the hearing, the hearings officer will write a supplement to the memo as provided for in subsection (1) of this rule and will provide the supplement to the Board.

(8) A registrant's refusal to participate in the hearing shall be considered a waiver.

(9) The following procedures shall apply:

(a) A registrant may waive a hearing.

(b) The registrant is limited to presenting additional evidence or information regarding the LS/CMI score and evaluator's report.

(c) Hearings may be conducted by a panel of two. The panel may consist of one Board member and one hearings officer, or of two Board members. The panel may make the final decision. The chair may require a panel of more than two members. If the panel is more than two members, the final decision shall be made by a majority of all panel members. In the case of a tie, an additional Board member may vote administratively after reviewing the material from the hearing.

(d) The Board will provide the registrant with notice and the documentation submitted for the hearing at least 14 days before the hearing. The registrant may waive this 14 day notice.

(e) At the chair's discretion, the Board may conduct any hearing in person, by teleconference call, by videoconference, or by other electronic medium that ensures the registrant, the panel, and other participants the opportunity to hear and be heard.

(f) The registrant shall be present in person, by telephone or videoconference, or by any other electronic medium that ensures the registrant, the panel, and other participants the opportunity to hear and be heard. If a registrant refuses to appear at a hearing, the refusal will be considered the registrant's waiver of appearance.

(g) The Board will allow at the hearing, evidence of a type that reasonably prudent persons would commonly rely upon in the conduct of serious affairs. The Board may exclude evidence if it is irrelevant or immaterial to the decision to be made at the hearing or is unduly repetitious. At its discretion, the Board may consider relevant material and additional written information and recommendations from those with a special interest in the case. The Board must receive any information submitted pursuant to this

section at least 14 days prior to the hearing. The Board may waive the 14 day requirement.

(10) Conduct of Hearing: the hearing shall be conducted by and under control of the chair or designated representative. The chair may set reasonable time limits for oral presentation and may exclude or limit cumulative, repetitious, or immaterial matter. The Board may eject any disruptive person from a hearing. The Board may require all persons to leave the designated hearing area during deliberations.

Stat. Auth: ORS 181.800, 181.801, 181.802

Stat. Implemented: ORS 181.800, 181.801, 181.802

Hist.: PAR 3-2015(Temp), f. & cert. ef. 8-27-15 thru 2-19-16; PAR 1-2016, f. & cert. ef. 1-27-16; PAR 1-2017(Temp), f. & cert. ef. 3-21-17 thru 9-16-17

255-085-0060

Classification and Final Decision

(1) The Board will make a final classification decision by reviewing the documents relied upon for the assessment, any hearings officer's memos or documents, all timely submitted objections, and any relevant documents from a hearing, if one was held, and ordering the final classification level.

(2) Following the Board decision, the Board shall send notice of the Board's final order to the registrant and the board registered victim.

(3) The Board's classification decision shall be final. The Board's classification decision is not subject to review under OAR Chapter 255 Division 80.

(4) The Board will notify the Department of State Police of the registrant's final classification after the classification order.

Stat. Auth: ORS 163A.100, 163A.125, Sec. 7, Ch. 708, OL 2013

Stat. Implemented: ORS 163A.100, 163A.105, 163A.110, 163A.115, 163A.125, Sec. 7, Ch. 708, OL 2013

Hist.: PAR 1-2017(Temp), f. & cert. ef. 3-21-17 thru 9-16-17

Rule Caption: Amend rule for exhausting administrative remedies by adding specifications for the review request.

Adm. Order No.: PAR 2-2017

Filed with Sec. of State: 3-23-2017

Certified to be Effective: 4-5-17

Notice Publication Date: 3-1-2017

Rules Amended: 255-080-0001

Subject: The Oregon Court of Appeals found in "Brown v. Board of Parole" (09/26/2016), that an inmate has exhausted administrative remedies from the Board merely by filing a timely request for administrative review pursuant to OAR 255-080-0005. The Board has a rule that establishes formatting requirements for administrative review requests (OAR 255-080-0008). This rule amendment will expressly incorporate those specifications into the administrative review exhaustion requirements in OAR 255-080-0001.

Adopted as a temporary rule 10-31-2016.

Rules Coordinator: Perry Waddell — (503) 945-0946

255-080-0001

Exhaustion of Remedies

(1) A Board order is final and effective the date it is signed, however it is not final for purposes of the time period within which to appeal to the Court of Appeals until the inmate/offender exhausts his or her administrative review remedies.

(2) An inmate/offender has exhausted his or her administrative remedies after complying with OAR 255-080-0005 and 255-080-0008, and after the Board denies review, or grants review and either denies or grants relief. The Board shall notify the inmate/offender that exhaustion has occurred and the time for judicial appeal of appealable orders shall run from the mailing date of the notice.

Stat. Auth.: ORS 144.335

Stats. Implemented: ORS 144.335

Hist.: PAR 2-1991, f. & cert. ef. 2-20-91; PAR 8-1992, f. & cert. ef. 10-9-92; PAR 7-1997, f. 3-11-97, cert. ef. 3-14-97; PAR 13-2010, f. & cert. ef. 12-1-10; PAR 4-2016(Temp), f. & cert. ef. 10-31-16 thru 4-28-17; PAR 2-2017, f. 3-23-17, cert. ef. 4-5-17

Rule Caption: Updating the Sex Offender Risk Assessment Scale, and Definitions and Criteria to reflect current methodologies.

Adm. Order No.: PAR 3-2017

Filed with Sec. of State: 3-27-2017

Certified to be Effective: 4-5-17

Notice Publication Date: 3-1-2017

Rules Amended: 255-060-0011, 255-060-0016

ADMINISTRATIVE RULES

Subject: The Board uses the methodology in the Static-99R to perform sex offender risk assessments. The Static-99R uses risk factors that have been empirically shown to be associated with sexual recidivism and has explicit rules for scoring these factors and then combining them into a total risk score. The Board is amending Exhibits Q-1, the Sex Offender Risk Assessment Scale, and Q-2, the Sex Offender Risk Assessment

Definitions and Criteria, in order to reflect the latest versions of the methodology as revised by the authors of the Static-99R in 2016. The changes incorporate the latest statistics on recidivism.

Adopted as temporary rule 01/03/2017.

Rules Coordinator: Perry Waddell—(503) 945-0946

255-060-0011

Procedures for Predatory Sex Offender Designation for Offenders on Parole and Post-Prison Supervision

(1)(a) For purposes of this rule, a predatory sex offender is defined as a person who exhibits characteristics showing a tendency to victimize or injure others and has been convicted of one or more of the following offenses: Rape in any degree, Sodomy in any degree, Unlawful Sexual Penetration in any degree or Sexual Abuse in any degree, or has been convicted of attempting to commit one or has been found guilty except for insanity of one of these crimes. In determining whether an inmate or offender is a predatory sex offender under this rule, the Board shall use the Static-99R (Exhibit Q-1) and definitions (Exhibit Q-2), which have been approved by the Department of Corrections as required by ORS 181.585(2). The Board may also consider any other evidence that the offender exhibits characteristics showing a tendency to victimize or injure others.

(b) All exhibits referenced in this rule are filed with the rule and are available at the Secretary of State's office, the Board's website, or on request from the Board.

(2) Predatory sex offender designations made by the Board for inmates or offenders released from a Department of Corrections institution before November 14, 2012, are not included in this rule. Those designations are governed by the rules in effect when the designation was made.

(3) Subject to the procedures set forth in this rule, the Board will make a finding that an offender is a candidate for predatory sex offender designation, if the offender scores six or more points on the Static-99R and has been convicted of a qualifying offense or has been found guilty except for insanity of a qualifying offense.

(4) Offenders who score six or more points on the Static-99R, and have been identified as a candidate for predatory designation, must be told. They must be provided with a copy of the Static-99R, the Notice of Rights (Exhibit PSO-5) and the Notice of Rights to File Written Objections form (Exhibit Q-3).

(a) The offender should submit any Written Objections (Exhibit Q-4) to the Static-99R score within three business days after signing the Notice of Rights (Exhibit Q-3).

(b) Unless the offender waives the right to submit Written Objections, no sooner than three days after providing the Notice of Rights, the supervising officer will forward the Static-99R, Notice of Rights and Written Objections, if submitted, to the Board. The supervising officer must also include a written report explaining why the offender should be considered for predatory designation. Other materials that support the offender's Static-99R score shall be included.

(c) Upon receipt of the required documents, the Board will review them to verify the accuracy of the score, obtain supporting documentation if necessary, and determine if there is sufficient information to conduct an evidentiary hearing for purposes of determining whether the offender should be designated a predatory sex offender. The Board will prepare a file memo that verifies the index offense, qualifying conviction, and each point awarded on the Static-99R. The file memo will address offender's written objections. If the Board determines there is sufficient information in the documents, it will forward them to its hearings officer, who will schedule an evidentiary hearing.

(5)(a) The supervising officer or the Board's hearings officer will provide the offender with: the documentation submitted by the supervising officer; the Static-99R; the memo prepared by the Board; and the Notice of Rights regarding an evidentiary hearing (Exhibit PSO-5).

(b) Unless the offender waives their right to an evidentiary hearing, a hearing will be held. Refusal to participate in the notice of rights process will be considered a waiver.

(c) The sole purpose of the evidentiary hearing will be to determine whether the offender exhibits characteristics showing a tendency to victimize or injure others.

(6)(a) At the evidentiary hearing, the hearings officer will consider the written report submitted by the supervising officer, the Static-99R, and any additional evidence supporting the Static-99R score or otherwise indicating that the offender exhibits characteristics showing a tendency to victimize or injure others.

(b) The offender may present evidence rebutting claims made in the supervising officer's written report, challenge the Static-99R score, or rebut other evidence that the offender exhibits characteristics showing a tendency to victimize or injure others.

(c) After consideration of all the evidence presented at the evidentiary hearing, the hearings officer will submit a report to the Board with a recommendation as to whether the offender is exhibiting characteristics showing a tendency to victimize or injure others.

(7)(a) Upon receipt of the report and recommendation from the Board's hearings officer, the Board will review the report and recommendation and determine whether the offender exhibits characteristics showing a tendency to victimize or injure others and is, therefore, a predatory sex offender.

(b) A finding that an offender is a predatory sex offender must be made by at least two Board members.

(c) The Board will issue an order of supervision containing the predatory designation. Upon receipt of the order, the offender's supervising officer must present it to the offender and document that the offender received the order.

(8) Pursuant to ORS 181.586, the community corrections agency supervising an offender found to be a predatory sex offender shall notify anyone whom the agency determines is appropriate that the person is a predatory sex offender. The agency shall make this determination as required by ORS 181.586.

[ED. NOTE: Exhibits referenced are available from the agency.]
Stat. Auth.: ORS 144.050, 144.140, 181.585 & 181.586

Stats. Implemented:

Hist.: PAR 4-2000, f. & cert. ef. 2-15-00; PAR 1-2002(Temp), f. & cert. ef. 1-15-02 thru 7-13-02; PAR 4-2002, f. & cert. ef. 3-12-02; PAR 5-2003, f. & cert. ef. 10-10-03; PAR 2-2004(Temp), f. & cert. ef. 1-41-04 thru 7-11-04; PAR 7-2004, f. & cert. ef. 6-14-04; PAR 1-2006(Temp), f. & cert. ef. 3-20-06 thru 9-15-06; PAR 5-2006, f. & cert. ef. 6-14-06; PAR 6-2006(Temp), f. & cert. ef. 6-15-06 thru 12-11-06; PAR 9-2006, f. & cert. ef. 10-9-06; PAR 1-2008, f. & cert. ef. 1-11-08; PAR 3-2008, f. & cert. ef. 9-12-08; PAR 5-2012(Temp), f. & cert. ef. 11-15-12 thru 5-13-13; Administrative correction, 5-22-13; PAR 4-2013, f. & cert. ef. 6-25-13; PAR 5-2016(Temp), f. 12-28-16, cert. ef. 1-3-17 thru 7-1-17; PAR 3-2017, f. 3-27-17, cert. ef. 4-5-17

255-060-0016

Procedures for Predatory Sex Offender Designation for Inmates

(1)(a) For purposes of this rule, a predatory sex offender is defined as a person who exhibits characteristics showing a tendency to victimize or injure others and has been convicted of one or more of the following offenses: Rape in any degree, Sodomy in any degree, Unlawful Sexual Penetration in any degree or Sexual Abuse in any degree, or has been convicted of attempting to commit one or has been found guilty except for insanity or one of these crimes. In determining whether an inmate or offender is a predatory sex offender under this rule, the Board shall use the Static-99R (Exhibit Q-1) and definitions (Exhibit Q-2), which have been approved by the Department of Corrections as required by ORS 181.585(2). The Board may also consider evidence that the inmate exhibits characteristics showing a tendency to victimize or injure others.

(b) All exhibits referenced in this rule are filed with the rule and are available at the Secretary of State's office, the Board's website, or on request from the Board.

(2) Predatory sex offender designations made by the board for inmates released from a Department of Corrections institution before November 14, 2012, are not included in this rule. Those designations are governed by the rules in effect when the designation was made or when the inmate was released from custody.

(3) Subject to the procedures set forth in this rule, the Board will make a finding that an inmate is a candidate for predatory sex offender designation, if the inmate scores six or more points on the Static-99R and has been convicted of a qualifying offense or has been found guilty except for insanity of a qualifying offense.

(4) Inmates who score six or more points on the Static-99R, and have been identified as a candidate for predatory designation, must be told. They must be provided with a copy of the completed Static-99R, the Notice of Rights (Exhibit PSO-5) and the Notice of Rights to File Written Objections form (Exhibit Q-3).

ADMINISTRATIVE RULES

(a) The inmate should submit any Written Objections (Exhibit Q-4) to the Static-99R score within three business days after signing the Notice of Rights.

(b) Unless the inmate waives the right to submit Written Objections, no sooner than three days after providing the Notice of Rights, the counselor will forward the Static-99R, Notice of Rights and Written Objections, if submitted, to the Board. Other available materials that support the inmate's Static-99R score shall be included.

(c) Upon receipt of the required documents, the Board will review them to verify the accuracy of the score and obtain supporting documentation if necessary to determine if there is sufficient information to conduct an evidentiary hearing for purposes of determining whether the inmate should be designated a predatory sex offender. The Board will prepare a file memo that verifies the index offense, qualifying conviction, and each point awarded on the Static-99R. The file memo will address inmate's written objections. If the Board determines there is sufficient information in the documents, the inmate will be scheduled for a sex offender evaluation.

(d) Refusal to participate in a sex offender evaluation will not exclude inmate from predatory consideration.

(e) Should the sex offender evaluation determine that the inmate is exhibiting characteristics showing a tendency to victimize or injure others the inmate shall be provided with a copy of the sex offender evaluation and the Board's memo verifying the Static-99R points. Unless inmate waives the right to an evidentiary hearing, a hearing will be held. Refusal to participate in the notice of rights process will be considered a waiver.

(f) The sole purpose of the evidentiary hearing is to determine if the inmate exhibits characteristics showing a tendency to victimize or injure others.

(5)(a) At the evidentiary hearing, the Board will consider the written report submitted by the sex offender evaluator, the Static-99R, and any additional evidence supporting the Static-99R score or otherwise indicating that the inmate exhibits characteristics showing a tendency to victimize or injure others.

(b) The inmate may present evidence rebutting claims made in the sex offender evaluator's written report, challenge the Static-99R score, or rebut other evidence that the inmate exhibits characteristics showing a tendency to victimize or injure others.

(c) After consideration of all the evidence presented at the hearing, the Board will make a determination as to whether the inmate should be designated as a predatory sex offender.

(6) A finding that an inmate is a predatory sex offender must be made by at least two Board members.

(7) Pursuant to ORS 181.586, the community corrections agency supervising an inmate or offender found to be a predatory sex offender shall notify anyone whom the agency determines is appropriate that the person is a predatory sex offender. The agency shall make this determination as required by ORS 181.586.

[ED. NOTE: Exhibits referenced are available from the agency.]

Stat. Auth.: ORS 144.050, 144.140, 181.585, 181.586

Other Auth. V.L.Y v. Board of Parole & Post-Prison Supervision, 338 Or 44(2005)

Hist.: PAR 7-2006(Temp), f. & cert. ef. 8-7-2006 thru 2-2-07; Suspended by PAR 8-2006(Temp), f. & cert. ef. 8-30-06 thru 2-2-07; PAR 10-2006, f. & cert. ef. 10-30-06; PAR 4-2007, f. & cert. ef. 7-17-07; PAR 3-2008, f. & cert. ef. 9-12-08; PAR 5-2012(Temp), f. & cert. ef. 11-15-12 thru 5-13-13; Administrative correction, 5-22-13; PAR 4-2013, f. & cert. ef. 6-25-13; PAR 5-2016(Temp), f. 12-28-16, cert. ef. 1-3-17 thru 7-1-17; PAR 3-2017, f. 3-27-17, cert. ef. 4-5-17

Rule Caption: Define the term "reasonable cause".

Adm. Order No.: PAR 4-2017

Filed with Sec. of State: 3-27-2017

Certified to be Effective: 4-5-17

Notice Publication Date: 3-1-2017

Rules Amended: 255-005-0005

Subject: Define the term "reasonable cause" as it is used by the Board. Clarify definitions, clean up of grammar and revise punctuation in Division 005.

Rules Coordinator: Perry Waddell—(503) 945-0946

255-005-0005

Definitions

(1) "Abscond": Unauthorized absence from parole or post-prison supervision.

(2) "Active Supervision" or "Active Community Supervision": Supervision requiring the supervising officer's regular contact and monitoring to assure continued compliance with the general and special condi-

tions of parole or post-prison supervision. "Active Supervision" shall not include:

(a) The period of confinement in a local, state, or federal correctional facility;

(b) The period of time between the suspension of parole or post-prison supervision and the date parole or post-prison supervision is continued;

(c) Inactive parole or inactive post-prison supervision;

(d) Involuntary commitment to a state or federal psychiatric facility.

(3) "Administrative Sanction": Local, structured, or intermediate sanctions as those terms used in OAR 291-058-0010 Et al., and may include periods of local confinement in jails, restitution centers, treatment facilities, or similar facilities.

(4) "Aggravation": The factors or elements surrounding the crime that appear to increase the seriousness of the criminal episode or reflect on the character of the offender pursuant to Exhibit E-1 and E-3.

(5) "Board Action Form": A Board order after a decision.

(6) "Base Range": The range for each crime category reflected in Exhibit C under the "excellent" column.

(7) "Board": Board of Parole and Post-Prison Supervision.

(8) "Board Review Packet": The information the Board shall consider at the inmate's hearing. Each of the Administrative Rule Divisions that establish a hearing shall list the contents of the packet.

(9) "Compensatory Fines": A court-imposed penalty for the commission of a crime resulting in injury for which the person injured has a remedy by civil action (unless the issue of punitive damages has been previously decided on a civil case arising out of the same act and transaction). The court may award compensatory fines in addition to restitution.

(10) "Correctional Facility": Any place used for the confinement of persons charged with or convicted of a crime or otherwise confined under a court order. Correctional Facility includes a juvenile facility, if the juvenile is confined for a felony charge or conviction, and applies to a state hospital only as to persons detained therein after acquittal of a crime by reason of mental disease or defect or after a finding of guilty except for insanity.

(11) "Crime Severity Rating": A classification for crimes committed prior to November 1, 1989, from a low of one (1) to a high of seven (7) assigned to each crime, based on the seriousness of the crime pursuant to Exhibits A-1, A-2, and A-3.

(12) "Crime Spree": A set of criminal activities congruent in time or actually overlapping that are so joined by place and circumstances as to be the product of a continuous disposition or intent.

(13) "Date of Return": The date another in-state or out-of-state jurisdiction physically returns the inmate to the Department of Corrections' custody following a hold.

(14) "De Novo Hearing": A new initial prison term hearing, required when a court orders additional consecutive sentences for crimes that occurred prior to the first prison term hearing.

(15) "Escape":

(a) The unlawful or unauthorized departure from custody, a correctional facility or any form of temporary release or transitional leave;

(b) The unauthorized departure or absence from this state or failure to return to this state by a person who is under the jurisdiction of the Psychiatric Security Review Board;

(c) Does not include failure to comply with provisions of a conditional or security release as in ORS 135.245.

(16) "Future Disposition Hearing": A hearing the Board may set at its discretion for purposes of deciding whether to deny or grant re-release for a violation of parole or post-prison supervision.

(17) "Gang Member": A person who associates with a group that identifies itself through the use of a name, unique appearance, language (including hand signs), the claiming of geographical territory, or the espousing of a distinctive belief system and one of the purposes of the group is criminal activity.

(18) "Gang-Related Activity": Crime committed by a gang member:

(a) With other known gang members;

(b) Against other known gang members; or

(c) Against a person who is not a gang member; in order to further the purposes of the gang or impress other gang members.

(19) "History/Risk Score": A rating from a high of eleven (11) to a low of zero (0) points, reflecting the prisoner's prior record and other factors that predict the likelihood of success on parole pursuant to Exhibit B, Part 1 and Part 2.

(20) "Inactive Parole" and "Inactive Post-Prison Supervision": The offender remains under supervision, however:

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(a) There is no direct supervision by a supervising officer and no requirement of regular reporting;

(b) There are no additional supervision fees; and

(c) The offender remains subject to arrest by a supervising officer for violation of conditions of supervision and return to active supervision at any time until expiration of the sentence or post-prison supervision term as outlined in Division 94; and

(d) Subsections (b) and (c) do not apply to those offenders being supervised in another state via Interstate Compact. Those offenders remain on active parole or post-prison supervision.

(21) "In Camera Hearing": The inspection of a document by the Hearings Officer in private before the document may be introduced as evidence.

(22) "Initial Parole Release Date": The date assigned to a prisoner for parole release based on the prisoner's matrix range, aggravation, mitigation, and judicially imposed minimum sentences.

(23) "Inmate": Any person under the supervision of the Department of Corrections or a local supervisory authority who is not on parole, post-prison supervision or probation status (also referred to as prisoner).

(24) "Inoperative Time": Time spent on abscond, escape, or unauthorized departure from custody, leave, parole or post-prison supervision, which does not count toward service of the sentence.

(25) "Intensive Supervision": Enhanced level of supervision exceeding a county's high risk level supervision standards. Intensive supervision may include, but is not limited to, electronic monitoring, house arrest, curfew, day reporting, supervised housing, multiple supervising officers, adjunct surveillance by law enforcement or other specialists, increased face-to-face offender contacts in the community, increased collateral contacts (such as with family, therapist and employer), community notification, geographic restrictions, offender mileage logs, medication monitoring, intensive outpatient or residential treatment programming, urinalysis, and polygraph.

(26) "Less Than the Sum of the Terms": An action by the Board whereby one or more of the consecutive ranges are treated as if they are concurrent.

(27) "Mail Date" or "Mailed on Date": The date from which the Board calculates the timelines of receipt of Administrative Review Requests and other time-sensitive responses. The date is computer generated and scheduled to ensure actual mailing occurred on or before the listed date.

(28) "Matrix Ranges": Ranges of months within which the Board has the discretion to set a prison term. The ranges are based on crime severity ratings and history/risk scores.

(29) "The Matrix": A table that displays the matrix ranges by showing the intersection of the crime severity rating and the history/risk score pursuant to Exhibit C.

(30) "Mitigation": The factors or elements surrounding the crime that appear to decrease the seriousness of the criminal episode or reflect on the character of the prisoner pursuant to Exhibit E-2 and E-3.

(31) "Offender": Any person under the supervision of the Department of Corrections or a local supervisory authority who is not presently in the custody of a correctional facility, including persons on probation, parole or post-prison supervision.

(32) "Parole": A Board-authorized conditional release from a state correctional facility into the community or to a detainee. Applies to offenders whose crimes were committed before November 1, 1989, offenders who were convicted of murder or aggravated murder and whose sentences allow for parole, and offenders sentenced by the court as Dangerous Offenders or Sexually Violent Dangerous Offenders.

(33) "Particularly Violent or Otherwise Dangerous Criminal Conduct": Conduct that is not merely unpleasant or offensive, but that is indifferent to the value of human safety or property.

(34) "Parole Board Record": The file the Board maintains for each inmate/offender containing the information listed in ORS 144.185.

(35) "Period Under Review": Under Division 40, the time already served on the prison term, normally the three (3) or (5) year period prior to the personal review hearing.

(36) "Post-Prison Supervision": A term of conditional release, as set by statute or the court under the supervision of the Department of Corrections or a correctional agency designated by the Department or a local supervisory authority. Applies to crimes committed on or after November 1, 1989.

(37) "Principal Range": The range of months for the crime holding the highest crime severity rating. When the ranges are the same, the Board shall designate one range as the principal range.

(38) "Preponderance": Evidence that is of greater weight or more convincing than the evidence offered in opposition to it.

(39) "Probable Cause": A substantial objective basis for believing that more likely than not an offense or violation has been committed and the person to be arrested has committed it.

(40) "Prison Term": The Board established time the inmate must serve before the initial parole release date, in accordance with applicable laws and the Board's Administrative Rules.

(41) "Prison Term Hearing": The hearing at which the Board establishes an inmate's prison term and initial parole release date.

(42) "Reasonable Cause": The quantum of information that would cause a reasonably prudent person to believe that a condition or circumstance exists.

(43) "Revocation": An action by a Sanction Authority to terminate an offender's parole or post-prison supervision. Sanction Authority may resume an offender's parole or post-prison supervision following the act of revocation.

(44) "Revocation Hearing": A hearing to determine whether a violation of conditions of parole or post-prison supervision occurred and whether the Hearings Officer should recommend that the parolee or offender return to custody or continue on parole or post-prison supervision with additional conditions. (Commonly known as a "Morrissey Hearing")

(45) "Sanction Authority": For felony offenders sentenced by the court for crimes occurring before November 1, 1989, or sentenced to more than 12 months in the custody of the Department of Corrections or sentenced to 12 months or less and have additional sentences of greater than 12 months, the Board; and the Local Supervisory Authority for felony offenders sentenced by the court to 12 months or less, the Local Supervisory Authority.

(46) "Sexually Violent Dangerous Offender": An inmate/offender who has psychopathic personality features, sexually deviant arousal patterns or interests and a history of sexual assault, and who the Board or Local Supervisory Authority finds presents a substantial probability of committing an offense listed in OAR 255-060-0008(6). "History of sexual assault" means that an inmate/offender has engaged in unlawful sexual conduct that is not related to the crime for which the inmate/offender is currently on parole or post-prison supervision and that seriously endangered the life or safety of another person or involved a victim less than twelve (12) years of age.

(47) "Serious Physical Injury": Any physical injury that creates a substantial risk of death, or that causes serious and protracted disfigurement, or impairment of health or protracted loss or impairment of the function of any bodily organ.

(48) "Stranger": A person who is either unknown to a victim or with whom the victim has a superficial acquaintance or acquaintance of short duration or infrequent contact.

(49) "Subcategory": The criteria for rating criminal conduct within the crime categories based on the seriousness of the offense (Exhibit A).

(50) "Subordinate Range": Any range less than or equal to the principal range.

(51) "Subpoena Duces Tecum": A subpoena requiring the party to appear at a hearing with a document or piece of evidence to be examined at the hearing.

(52) "Summing the Ranges": Adding ranges of consecutive sentences to produce a unified range pursuant to OAR 255-035-0021.

(53) "Supervising Officer": Parole and post-prison supervision officer.

(54) "Supervisory Authority": The state or local corrections agency or official designated in each county by that county's Board of County Commissioners or County Court to operate correction supervision services, custodial facilities, or both (per ORS 144.087(1)).

(55) "Unauthorized Absence": Time spent outside a state correctional facility without the authorization of the Department of Corrections or Local Supervisory Authority.

(56) "Unified Range": The total range computed under OAR 255-035-0021 for consecutive sentences.

(57) "Unsum the Ranges": Will establish a matrix range at less than the unified range. The effect of unsumming is to treat one or more ranges as concurrent.

(58) "Variations": The time periods that the Board may use to set a prison term above or below the matrix range pursuant to Exhibit D.

(59) "Victim":

(a) Any person determined by the prosecuting attorney, the court or the Board to have suffered direct financial, psychological, or physical harm

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as a result of a crime that is the subject of a proceeding conducted by the State Board of Parole and Post-Prison Supervision.

(b) Any person determined by the Board to have suffered direct financial, social, psychological, or physical harm as a result of some other crime connected to the crime that is the subject of a proceeding conducted by the State Board of Parole and Post-Prison Supervision. The term “some other crime connected to the crime that is the subject of the proceeding” includes: other crimes connected through plea negotiations, or admitted at trial to prove an element of the offense. The Board may request information from the District Attorney of the committing jurisdiction to provide substantiation for such a determination.

(c) Any person determined by the Board to have suffered direct financial, social, psychological, or physical harm as a result of some other crime connected to the sentence for which the offender seeks release that is the subject of a proceeding conducted by the State Board of Parole and Post-Prison Supervision. The term “connected to the sentence for which the offender seeks release” includes other crimes that were used as a basis for: a departure sentence, a merged conviction, a concurrent or a consecutive sentence, an upper end grid block sentence, a dangerous offender sentence, or a sentence following conviction for murder or aggravated murder. The Board may request information from the District Attorney of the committing jurisdiction to provide substantiation for such a determination.

[ED. NOTE: Exhibits referenced are available from the Board.]

Stat. Auth.: ORS 144.050 & 144.140

Stats. Implemented:

Hist.: 2PB 2-1986(Temp), f. & ef. 11-13-86; 2PB 3-1986(Temp), f. & ef. 12-2-86; PAR 6-1988, f. & ef. 5-19-88; PAR 7-1988, f. & ef. 7-1-88; PAR 8-1988, f. & ef. 7-1-88; PAR 9-1988(Temp), f. & ef. 7-14-88; PAR 12-1988(Temp), f. & ef. 7-20-88; PAR 13-1988(Temp), f. & ef. 8-5-88; PAR 14-1988(Temp), f. & ef. 9-20-88; PAR 18-1988, f. & ef. 12-6-88; PAR 4-1989, f. & ef. 11-1-89; PAR 5-1990, f. & cert. ef. 10-5-90; PAR 5-1991, f. & cert. ef. 10-15-91; PAR 8-1992, f. & cert. ef. 10-9-92; PAR 1-1997, f. 3-11-97, cert. ef. 3-14-97; PAR 11-1997(Temp), f. & cert. ef. 11-14-97; PAR 1-1998, f. & cert. ef. 5-1-98; PAR 4-2000, f. & cert. ef. 2-15-00; PAR 1-2005, f. & cert. ef. 4-25-05; PAR 4-2010(Temp), f. 7-2-10, cert. ef. 7-6-10 thru 1-1-11; PAR 10-2010, f. & cert. ef. 12-1-10; PAR 2-2015, f. & cert. ef. 7-28-15; PAR 4-2017, f. 3-27-17, cert. ef. 4-5-17

Board of Psychologist Examiners Chapter 858

Rule Caption: Removes “Thirty-Day Letter” requirement from investigation process.

Adm. Order No.: BPE 2-2017

Filed with Sec. of State: 3-20-2017

Certified to be Effective: 3-20-17

Notice Publication Date: 1-1-2017

Rules Amended: 858-020-0055

Subject: This amendment modifies the Board’s investigation process by eliminating the “Thirty-Day Letter” step required prior to commencing procedures for imposing sanctions. Currently, subsequent to the completion of an investigation and prior to issuing a notice of proposed action, the Board must first issue a letter specifying allegations and requiring a response from the respondent within 30 days. This rule amendment removes that requirement.

Rules Coordinator: LaRee’ Felton—(503) 373-1196

858-020-0055

Investigator’s Report to the Board

(1) When the investigation is complete, the investigator will make an investigation report to the Board, in accordance with the timeline and procedures outlined in ORS 183.310 to 183.500 and 676.160 to 676.180, and shall clearly set forth the issues on which the Board should consider possible action.

(2) The Board shall consider the investigator’s report and the standards for disciplinary actions under its statutes and OAR 858-010-0075. The Board may:

- (a) Dismiss the complaint;
- (b) Continue the investigation; or
- (c) Commence procedures for imposing sanctions.

Stat. Auth.: ORS 675.110

Stats. Implemented: ORS 675.110

Hist.: BPE 2-1999, f. & cert. ef. 7-6-99; BPE 2-2004, f. & cert. ef. 8-30-04; BPE 1-2010, f. & cert. ef. 1-8-10; BPE 4-2012(Temp), f. & cert. ef. 10-18-12 thru 4-16-13; Administrative correction, 5-22-13; BPE 3-2013, f. & cert. ef. 9-30-13; BPE 2-2017, f. & cert. ef. 3-20-17

Department of Agriculture Chapter 603

Rule Caption: Amends livestock importation rules for clarification and for harmonization with national standards.

Adm. Order No.: DOA 8-2017

Filed with Sec. of State: 3-22-2017

Certified to be Effective: 3-22-17

Notice Publication Date: 2-1-2017

Rules Amended: 603-011-0255

Subject: The CAN brand import requirement for cattle of Canadian origin was established as a sequel to the Bovine Spongiform Encephalopathy (BSE) detection in Washington in December 2003. That animal was a dairy cow that was born in Canada. She was shipped to a dairy in Washington state and eventually culled from the dairy herd. Routine BSE slaughter surveillance detected the disease. At that time our livestock industries wanted, and needed, a permanent means of identification for traceability of Canadian origin animals. Over the years stringent BSE safeguards have been put in place in Canada and the USA. Safeguards to prevent BSE have been very effective.

The US Department of Agriculture (USDA) maintains stringent animal identification requirements for animals imported into this country, including Canada. Current USDA identification requirements of all Canadian origin cattle includes a CAN brand located on the hip area or a CAN tattoo inside the left ear as well as an official eartag. Current Oregon import requirements for cattle of Canadian origin do not allow for the CAN tattoo option. A significant number of high quality Canadian cattle are imported into Oregon for genetic improvement purposes. The hot brand requirement results in a scar that many dairy and beef cattle producers would like to avoid, especially for those animals with exhibition potential. Amending Oregon’s livestock importation rule to harmonize with USDA requirements would provide a welcomed identification option for many Oregon cattle producers and still maintain traceability.

The Agency received input and approval of the proposed rule changes from the Oregon Dairy Farmers Association and the Oregon Cattlemen’s Association.

Rules Coordinator: Sue Gooch—(503) 986-4583

603-011-0255

Importation of Animals Into Oregon; General Provisions

(1) No livestock that are affected with or that have been known to be exposed to any infectious, contagious, or communicable disease, shall be shipped or in any manner moved or transported into Oregon except as authorized in following sections.

(2) Except as otherwise provided in this rule, all livestock transported or moved in any manner into Oregon are required to obtain an import permit from the Department before entry. The permit number shall be recorded on the grazing permit or Certificate of Veterinary Inspection document, and be in the possession of the driver of the vehicle or person in charge of the animals.

(3)(a) At the time an import permit is requested, the Department may require that a Certificate of Veterinary Inspection or Grazing Permit be obtained at the point of origin and shall accompany the applicable livestock into Oregon.

(b) The State Veterinarian may allow any livestock import requirements to be completed at the first point of destination within this state, on a case-by case basis, if it is determined by the State Veterinarian, that such action will not create a disease hazard to the livestock of this state;

(4) No livestock may be imported into Oregon that are specifically prohibited from interstate movement by the U.S. Department of Agriculture.

(5) The following are exempted from the requirement to obtain an Oregon import permit:

(a) Animals being moved or transported directly (without diversion) to a licensed Oregon slaughtering establishment. Animals consigned for slaughter and received in such slaughtering establishments may not be released from such establishments except by special permission from the State Veterinarian;

(b) Livestock originating in other states and shipped to a state-federally approved livestock auction market in Oregon. Such livestock shall be

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required to comply with all other applicable administrative rules for import into Oregon;

(c) Livestock being transported through the state without interruption, other than stops for feed, water and rest;

(d) Any resident animal leaving and returning to Oregon within 30 days; and

(e) Dogs, cats, reptiles, and non-poultry birds traveling interstate.

(6) Requirements for the exhibition of livestock shall comply with the directives of the Department for that specific exhibit.

(7)(a) Canadian cattle imported into Oregon must be born after 1999, individually identified by an official Canadian ear tag, applied before the animal's arrival at the port of entry into the United States, that is traceable to the premises of Canadian origin of the animal and be listed on the Certificate of Veterinary Inspection.

(b) Canadian cattle imported into Oregon must have a properly applied hot iron CAN brand or tattoo. The CAN brand must be easily visible on the live animal and on the carcass before skinning. The CAN brand must be not less than 2 inches nor more than 4 inches high, and must be applied to each animal's right hip, high on the tail-head (over the junction of the sacral and first coccygeal vertebrae). If a tattoo is used it must identify the exporting country with the CAN letters applied to the inside of the left ear.

(8) Livestock being transported or moved, in any manner, into Oregon without an import permit and a Certificate of Veterinary Inspection or grazing permit, when required, shall be held in quarantine at the owner's risk and expense until released by the Department. This section shall not be construed as a waiver of enforcing the provisions of ORS 596.990 for violation of regulations relating to importation of livestock.

Stat. Auth.: ORS 561 & 596

Stats. Implemented: ORS 596.341

Hist.: AD 890(20-68), f. 10-28-68, ef. 11-1-68; AD 1047(37-74), f. 9-20-74, ef. 10-11-74; AD 9-1977, f. & ef. 4-6-77; AD 7-1981, f. & ef. 5-13-81; AD 3-1984, f. & ef. 1-20-84; DOA 1-2000, f. & cert. ef. 1-4-00; DOA 18-2007(Temp), f. 11-9-07, cert. ef. 11-15-07 thru 5-10-08; Administrative correction 5-20-08; DOA 17-2008, f. & cert. ef. 7-15-08; DOA 1-2011, f. & cert. ef. 1-6-11; DOA 8-2017, f. & cert. ef. 3-22-17

Rule Caption: Adding conversion goals for commercial egg farms; outlining ODA's authority and fees for inspections.

Adm. Order No.: DOA 9-2017(Temp)

Filed with Sec. of State: 3-24-2017

Certified to be Effective: 3-24-17 thru 9-19-17

Notice Publication Date:

Rules Amended: 603-018-0005, 603-018-0020

Subject: This proposed temporary rule amendment would 1) add conversion requirements and goals for commercial egg farms regarding cage size standards, and 2) outline ODA's authority and procedures regarding inspections of commercial egg farms engaged in the production of eggs and specify a fee schedule for recouping costs associated with such inspections.

Rules Coordinator: Sue Gooch—(503) 986-4583

603-018-0005

Poultry Husbandry, Cage Size Standards for Egg Laying Hens

(1) An owner or operator of a commercial egg-laying farm in Oregon may not confine an egg-laying hen in an enclosure that fails to comply with the following standards:

(a) Any enclosure constructed or otherwise acquired before January 1, 2012, must meet standards equivalent to the requirements for certification established by the 2016 edition of the United Egg Producers' (UEP) Animal Husbandry Guidelines for U.S. Egg Laying Flocks, which include:

(A) Any enclosure constructed or otherwise acquired prior to December 31, 2003, must provide a minimum "house average" space allowance of 67 square inches of floor space per hen for White Leghorns, and 76 square inches of floor space per hen for Brown Egg Layers;

(B) Any enclosure constructed or otherwise acquired after December 31, 2003, but prior to January 1, 2012, must provide a minimum of 67 square inches of floor space per hen for White Leghorns, and 76 square inches of floor space per hen for Brown Egg Layers;

(b) Any enclosure constructed or acquired on or after January 1, 2012, must meet standards equivalent to the requirements for certification of enriched colony facility systems established in the October 2015 revised edition of the American Humane Association's (AHA) farm animal welfare certification program, with no enclosure providing less than 116.3 square inches of floor space per hen, including nest, and no enclosure providing less than 17.7 inches of height.

(2) Effective January 1, 2020:

(a) Any enclosure constructed or otherwise acquired before January 1, 2012, must meet standards equivalent to the requirements for certification established by the United Egg Producers' (UEP) Animal Husbandry Guidelines for U.S. Egg Laying Flocks, which include:

(A) Any enclosure constructed or otherwise acquired prior to December 31, 2003 must provide a minimum "house average" space allowance of 67 square inches of floor space per hen for White Leghorns, and 76 square inches of floor space per hen for Brown Egg Layers;

(B) Any enclosure constructed or otherwise acquired after December 31, 2003, but prior to January 1, 2012, must provide a minimum of 67 square inches of floor space per hen for White Leghorns, and 76 square inches of floor space per hen for Brown Egg Layers;

(b) Any enclosure constructed or acquired on or after January 1, 2012, must meet standards equivalent to the requirements for certification of enriched colony facility systems established in the American Humane Association's (AHA) farm animal welfare certification program, with no enclosure providing less than 116.3 square inches of floor space per hen, including nest, and no enclosure providing less than 17.7 inches of height.

(c) No less than 25% of all enclosures on a commercial egg-laying farm should meet standards equivalent to the requirements for certification of enriched colony facility systems established in the American Humane Association's (AHA) farm animal welfare certification program (116.3 square inches of floor space per hen, including nest, and no enclosure providing less than 17.7 inches of height.)

(3) Effective January 1, 2023:

(a) Any enclosure constructed or otherwise acquired before January 1, 2012, must meet standards equivalent to the requirements for certification established by the United Egg Producers' (UEP) Animal Husbandry Guidelines for U.S. Egg Laying Flocks, which include:

(A) Any enclosure constructed or otherwise acquired prior to December 31, 2003 must provide a minimum "house average" space allowance of 67 square inches of floor space per hen for White Leghorns, and 76 square inches of floor space per hen for Brown Egg Layers;

(B) Any enclosure constructed or otherwise acquired after December 31, 2003, but prior to January 1, 2012, must provide a minimum of 67 square inches of floor space per hen for White Leghorns, and 76 square inches of floor space per hen for Brown Egg Layers;

(b) Any enclosure constructed or acquired on or after January 1, 2012, must meet standards equivalent to the requirements for certification of enriched colony facility systems established in the American Humane Association's (AHA) farm animal welfare certification program, with no enclosure providing less than 116.3 square inches of floor space per hen, including nest, and not less than 17.7 inches of height.

(c) No less than 65% of all enclosures on a commercial egg-laying farm should meet standards equivalent to the requirements for certification of enriched colony facility systems established in the American Humane Association's (AHA) farm animal welfare certification program (116.3 square inches of floor space per hen, including nest, and not less than 17.7 inches of height.)

(4) Effective January 1, 2026: All enclosures on a commercial egg-laying farm must meet AHA standards, with no enclosure providing less than 116.3 square inches of floor space per hen, including nest, and no enclosure providing less than 17.7 inches of height.

Stat. Auth.: ORS 632.840

Stats. Implemented: ORS 632.835 - 632.850

Hist.: DOA 20-2012, f. & cert. ef. 7-3-12; DOA 9-2017(Temp), f. & cert. ef. 3-24-17 thru 9-19-17

603-018-0020

Department Access, Inspections, Subpoena Authority

(1) As authorized by ORS 561.275, the State Department of Agriculture shall have access at reasonable times to records, premises, materials or conveyances as necessary for the purpose of administering and enforcing Oregon Laws 2011 Chapter 436 and rules adopted thereunder.

(2) As authorized by ORS 632.840(3), the department shall inspect, at reasonable times, commercial egg-laying farms engaged in the production of eggs for the purpose of enforcing the provisions of ORS 632.835 to 632.850. As authorized by ORS 632.840(4), the department may assess and collect the following expenses associated with inspection:

(a) A fee of \$106 per hour for inspection time, rounded to the nearest 30 minute interval (\$53);

(b) Mileage expense using the prevailing full GSA vehicle mileage rate, if the inspector is not already in the general vicinity of the commercial egg-laying farm as part of their normal business duties and mileage is required for the sole purpose of the commercial egg-laying farm inspection;

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(c) The prevailing Oregon meal and lodging per diem rate/expense if overnight travel is required for the sole purpose of the commercial egg-laying farm inspection.

(d) Any biosecurity clothing or supplies, if not supplied by the commercial egg-laying farm being inspected;

(e) Any other expense associated with the inspection of a commercial egg-laying farm that the department deems necessary to carry out the enforcement of ORS 632.835 to 632.850.

(3) Moneys from fees and expenses collected by the department under section 603-018-0020(2) will be deposited in the Department of Agriculture Service Fund and are continuously appropriated to the department to be used for the purpose of enforcing ORS 632.835 to 632.850.

(4) The department may obtain a subpoena to require the production of pertinent records related to the administration and enforcement of Oregon Laws 2011 Chapter 436 and rules adopted thereunder.

Stat. Auth.: ORS 632.840

Stats. Implemented: ORS 632.835 - 632.850

Hist.: DOA 20-2012, f. & cert. ef. 7-3-12; DOA 9-2017(Temp), f. & cert. ef. 3-24-17 thru 9-19-17

Rule Caption: Amends OAR 603-052-0127 establishing a quarantine in Washington County mitigation measures for Japanese Beetle infestation.

Adm. Order No.: DOA 10-2017(Temp)

Filed with Sec. of State: 4-14-2017

Certified to be Effective: 4-15-17 thru 10-10-17

Notice Publication Date:

Rules Amended: 603-052-0127

Subject: Amends current Japanese beetle quarantine rules to state when the need for eradication is triggered and to establish a quarantine in Washington County where conditions have triggered the need for eradication. The quarantine in Washington County describes mitigation of Japanese beetle in the quarantine area. The rules also establish other regulations that apply to nurseries operating in Washington County.

Rules Coordinator: Sue Goch—(503) 986-4583

603-052-0127

Quarantine; Japanese Beetle, European Chafer and Oriental Beetle

(1) Establishing a Quarantine. A quarantine is established against the pest known as Japanese beetle (*Popillia japonica*) European chafer (*Rhizotrogus majalis*), and Oriental beetle (*Anomala orientalis*), a member of the family Scarabaeidae, which in the larval stage feed on the roots of many plants and in the adult stage feed on the flowers, foliage and fruit of many plants.

(2) Areas Under Quarantine. The entire states of Alabama, Arkansas, Colorado, Connecticut, Delaware, Georgia, Illinois, Indiana, Iowa, Kansas, Kentucky, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nebraska, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Vermont, Virginia, West Virginia, Wisconsin, the District of Columbia, the Provinces of Ontario, Quebec, and British Columbia, Canada, and any other state, territory or province where the presence of an established population of any of these insects is confirmed and effective eradication procedures have not been implemented. Any property(ies) in Oregon where Japanese beetles, European chafers, or Oriental beetles are found including a buffer zone that may be infested around the area where the pests were discovered.

(3) Commodities Covered. All life stages of the Japanese beetle, European chafer, and Oriental beetle, including eggs, larvae, pupae, and adults; and the following hosts or possible carriers of Japanese beetle:

(a) Soil, growing media, humus, compost, and manure (except when commercially packaged, and except soil samples under a federal Compliance Agreement);

(b) All plants with roots;

(c) Grass sod;

(d) Plant crowns or roots for propagation (except when free from soil and growing media; clumps of soil or growing media larger than 1/2 inch diameter will be cause for rejection);

(e) Bulbs, corms, tubers, and rhizomes of ornamental plants (except when free from soil and growing media; clumps of soil or growing media larger than 1/2 inch diameter will be cause for rejection); and

(f) Any other plant, plant part, article or means of conveyance when it is determined by the department to present a hazard of spreading live

Japanese beetle due to either infestation, or exposure to infestation, by Japanese beetle.

(4) Restrictions. All commodities covered are prohibited entry into Oregon from the area under quarantine unless they have the required certification. Plants may be shipped from the area under quarantine into Oregon provided such shipments conform to one of the options below and are accompanied by a certificate issued by an authorized state agricultural official at origin. Note that not all protocols in the U.S. Domestic Japanese Beetle Harmonization Plan are acceptable for Oregon. Advance notification of regulated commodity shipment is required. The certifying official shall mail, FAX or e-mail a copy of the certificate to: Plant Program Area Director, Oregon Department of Agriculture, 635 Capitol Street NE, Salem, Oregon 97310, FAX: 503-986-4786, e-mail: quarantine@oda.state.or.us. The shipper shall notify the receiver to hold such commodities for inspection by the Oregon Department of Agriculture. The receiver must notify the Oregon Department of Agriculture of the arrival of commodities imported under the provisions of this quarantine and must hold such commodities for inspection. Such certificates shall be issued only if the shipment conforms fully with (a), (b), (c), (d), (e) or (f) below:

(a) Bareroot Plants. Plants with roots are acceptable if they are bare-root, free from soil and growing media (clumps of soil or growing media larger than 1/2 inch diameter will be cause for rejection). The certificate accompanying the plants shall bear the following additional declaration: "Plants are bareroot, attached clumps of soil or growing media are less than 1/2 inch in diameter." Advance notification required (see section 4 above).

(b) Production in an Approved Japanese Beetle Free Greenhouse/Screenhouse. All the following criteria apply. All media must be sterilized and free of soil. All stock must be free of soil (bareroot) before planting into the approved medium. The potted plants must be maintained within the greenhouse/screenhouse during the entire adult flight period. During the adult flight period the greenhouse/screenhouse must be made secure so that adult Japanese beetles can not gain entry. Security will be documented by the appropriate phytosanitary official. No Japanese beetle contaminated material shall be allowed into the secured area at any time. The greenhouse/screenhouse will be officially inspected by phytosanitary officials and must be specifically approved as a secure area. They shall be inspected by the same officials for the presence of all life stages of the Japanese beetle. The plants and their growing medium must be appropriately protected from subsequent infestation while being stored, packed and shipped. Certified greenhouse/screenhouse nursery stock may not be transported into or through any infested areas unless identity is preserved and adequate safeguards are applied to prevent possible infestation. Each greenhouse/screenhouse operation must be approved by the phytosanitary officials as having met and maintained the above criteria. The certificate accompanying the plants shall bear the following additional declaration: "The rooted plants (or crowns) were produced in an approved Japanese beetle free greenhouse or screenhouse and were grown in sterile, soilless media." Advance notification required (see section 4 above).

(c) Production During a Pest Free Window. The entire rooted plant production cycle will be completed within a pest free window, in clean containers with sterilized and soilless growing medium, i.e., planting, growth, harvest, and shipment will occur outside the adult Japanese beetle flight period, June through September. The accompanying phytosanitary certificate shall bear the following additional declaration: "These plant were produced outside the Japanese beetle flight season and were grown in sterile, soilless media." Advance notification required (see section 4 above).

(d) Application of Approved Regulatory Treatments. All treatments will be performed under direct supervision of a phytosanitary official or under compliance agreement. Treatments and procedures under a compliance agreement will be monitored closely throughout the season. State phytosanitary certificates listing and verifying the treatment used must be forwarded to Oregon via fax or electronic mail, as well as accompanying the shipment. Note that not all treatments approved in the U.S. Domestic Japanese Beetle Harmonization Plan are acceptable for Oregon. The phytosanitary certificate shall bear the following additional declaration: "The rooted plants are in soilless media and were treated to control *Popillia japonica* according to the criteria for shipment to category 1 states as provided in the U.S. Domestic Japanese Beetle Harmonization Plan and Oregon's Japanese beetle quarantine." Advance notification required (see section 4 above).

(A) Dip Treatment — B&B and Container Plants. Not approved.

(B) Drench Treatments — Container Plants Only. Not approved for ornamental grasses or sedges. Potting media used must be sterile and soilless, containers must be clean. Containers must be one gallon or smaller in size. Field potted plants are not eligible for certification using this protocol.

ADMINISTRATIVE RULES

This is a prophylactic treatment protocol targeting eggs and early first instar larvae. If the containers are exposed to a second flight season they must be retreated with an approved insecticide following label description for application rates.

(i) Imidacloprid (Marathon 60WP). Apply one-half (0.5) gram of active ingredient per gallon as a prophylactic treatment just prior to Japanese beetle adult flight season (June 1, or as otherwise determined by the phytosanitary official). Apply tank mix as a drench to wet the entire surface of the potting media. A twenty-four (24) gallon tank mix should be enough to treat 120-140 one-gallon containers. Avoid over drenching so as not to waste active ingredient through leaching. During the adult flight season, plants must be retreated after sixteen (16) weeks if not shipped to assure adequate protection.

(ii) Bifenthrin (Talstar Nursery Flowable 7.9%). Mix at the rate of twenty (20) ounces per 100 gallons of water. Apply, as a drench, approximately eight (8) ounces of tank mix per six (6) inches of container diameter.

(C) Media (Granule) Incorporation — Container Plants Only. Containers must be one gallon or smaller in size. Not approved for ornamental grasses or sedges. All pesticides used for media incorporation must be mixed prior to potting and plants potted a minimum of thirty (30) days prior to shipment. Potting media used must be sterile and soilless; containers must be clean. The granules must be incorporated into the media prior to potting. Field potted plants are not eligible for treatment. This treatment protocol targets eggs and early first instar larvae and allows for certification of plants that have been exposed to only one flight season after application. If the containers are to be exposed to a second flight season they must be repotted with a granule incorporated mix or retreated using one of the approved drench treatments. Media has to be treated with approved pesticides following label description for application rates approved for media incorporation:

(i) Imidacloprid (Marathon 1 G). Mix at the rate of five (5) pounds per cubic yard.

(ii) Bifenthrin (Talstar Nursery Granular or Talstar T&O Granular (0.2G)). Mix at the rate of 25 ppm or one-third (0.33) of a pound per cubic yard based on a potting media bulk density of 200.

(iii) Tefluthrin (Fireban 1.5 G). Mix at the rate of 25 ppm based on a potting media bulk density of 400.

(D) Methyl Bromide Fumigation. Nursery stock: methyl bromide fumigation at NAP, chamber or tarpaulin. See the California Commodity Treatment Manual for authorized schedules.

(e) Detection Survey for Origin Certification. Japanese Beetle Harmonization Plan protocol not approved. Alternative approved protocol: States listed in the area under quarantine may have counties that are not infested with Japanese beetle. Shipments of commodities covered may be accepted from these noninfested counties if annual surveys are made in such counties and adjacent counties and the results of such surveys are negative for Japanese beetle. In addition, the plants must be greenhouse grown in media that is sterilized and free of soil and the shipping nursery must grow all their own stock from seed, unrooted cuttings or bareroot material. A list of counties so approved will be maintained by the Oregon Department of Agriculture. Agricultural officials from a quarantined state or province may recommend a noninfested county be placed on the approved county list by writing for such approval and stating how surveys were conducted giving the following information:

- (A) Areas surveyed;
- (B) How survey was carried out;
- (C) Number of traps;
- (D) Results of survey;
- (E) History of survey;

(F) If county was previously infested, give date of last infestation. If infestations occur in neighboring counties, approval may be denied. To be maintained on the approved list, each county must be reappraised every twelve (12) months. Shipments of commodities covered from noninfested counties will only be allowed entry into Oregon if the uninfested county has been placed on the approved list prior to the arrival of the shipment in Oregon. The certificate must have the following additional declaration: "The plants in this consignment were produced in sterile, soilless media in (name of county), state of (name of state of origin) that is known to be free of Japanese beetle." Advance notification required (see section 4 above).

(f) Privately owned house plants obviously grown, or certified at the place of origin as having been grown indoors without exposure to Japanese beetle may be allowed entry into this state without meeting the requirements of section (4). Contact the Oregon Department of Agriculture for requirements: Plant Program Area Director, Oregon Department of

Agriculture, 635 Capitol Street NE, Salem, Oregon 97301, telephone: 503/986-4644, FAX: 503/986-4786, e-mail: quarantine@oda.state.or.us.

(g) Infested properties in Oregon: Confirmation of an infestation of Japanese beetle, European chafer, or Oriental beetle must be made by the ODA or an official cooperator. ODA will notify the property owner(s) and develop a response plan. The goal of the plan will be eradication as soon as possible. The plan may require cooperative measures by the property owner(s) to supplement measures taken by ODA.

(A) The eradication is triggered by two adult JB detections within the same trap and within the same year, or the detection of a female JB within a trap, or one larva, pupa, egg. Primary ground treatment: Chlorantraniliprole (Acelepryn®); One application per year, according to label instructions. Area determination: Treat 200-meter radius centered over every confirmed find site and treat irrigated turf areas, according to label.

(h) Quarantine in Washington County: During 2016, the ODA detected an incipient population of the Japanese beetle in the Cedar Mill and Bethany neighborhoods in Washington County, Oregon. The ODA has determined that this is the largest Japanese beetle infestation ever detected in Oregon. If the Japanese beetle population in Oregon is not eradicated, damage to Oregon's \$900 million nursery industry, of which about \$170 million originates in Washington County alone, through quarantines and additional chemical treatments and damage to the rest of Oregon's agricultural industry and natural resources is estimated at up to \$45 million annually. The ODA estimates that approximately \$3.5 million (2016) in nursery product sales in Oregon could be lost because of quarantine restrictions against Oregon products if the Japanese beetle is not eradicated in Washington County. The ODA has determined that the actions described in subsections 4(g) – 4(h) require methods necessary to prevent the spread and establish control and to accomplish the eradication of Japanese beetle in Washington County.

(A) Areas subject to ODA treatment: The portions of the County of Washington described in the map that is available at: bit.do/jbmap

(B) Commodities covered: All life stages of the Japanese beetle, European chafer, and Oriental beetle, including eggs, larvae, pupae, and adults, as well as the following hosts or possible carriers of Japanese beetle:

(i) Soil, all growing media, humus, compost, and manure (except when commercially packaged, and except soil samples under a federal Compliance Agreement);

(ii) All plants with roots;

(iii) Grass sod, green (living) roofs;

(iv) Plant crowns or roots for propagation (except when free from soil and growing media; clumps of soil or growing media larger than ½ inch diameter);

(v) Bulbs, corms, tubers, and rhizomes of ornamental plants (except when free from soil and growing media; clumps of soil or growing media larger than ½ inch diameter will be cause for rejection); and

(vi) Any other plant, plant part, article or means of conveyance when it is determined by the department to present a hazard of spreading live Japanese beetle due to either infestation, or exposure to infestation, by Japanese beetle.

(C) Mitigation measures: The mitigation area is as described in subsection 4(h)(A) above. Mitigation measures will consist of soil treatments of the granular insecticide Acelepryn G® treatments April through June 2017 to kill the grub stage of the Japanese beetles in the ground. Additional soil treatments may be required in the spring of 2017, 2019, 2020, and 2021, depending on eradication progress results.

(i) Entry onto property to be treated is pursuant to authorities in ORS 561.510 and ORS 570.305 by consent of the owner or occupant of the property sought to be entered, or pursuant to an administrative warrant as may be issued by the appropriate court.

(ii) Persons seeking a medical waiver from entry onto their property may provide the State Department of Agriculture with a medical waiver from a physician licensed to practice medicine in Oregon. Medical waivers may be presented to the State Department of Agriculture seventy-two (72) hours prior to a scheduled application.

(iii) Persons who seek to themselves apply the soil treatment as described in subsection (4)(h)(C) may make such request to the State Department of Agriculture at least seventy-two (72) hours before a scheduled treatment. Proof of adequate application must be confirmed by the State Department of Agriculture upon inspection of the treated site and upon other such information as may be required. Sites that may not be confirmed are subject to treatment by the State Department of Agriculture or its contractors.

ADMINISTRATIVE RULES

(iv) The State Department of Agriculture shall provide at least seventy-two (72) hours advanced notice prior to entering property to treat the premises.

(D) Prohibitions: All commodities covered are prohibited from leaving the Area under Quarantine described in subsection (4)(h)(A) (Area under Quarantine) unless they have the required certification. Plants may be shipped from the Area under Quarantine into other counties of Oregon or outside of Oregon provided such shipments conform to one of the classifications in (4)(h)(B)(i)–(vi) and are accompanied by a certificate issued by an authorized state agricultural official:

(i) Bareroot Plants. Plants with roots are acceptable if they are bare-root, free from soil and growing media (clumps of soil or growing media later than ½ inch diameter will be cause for rejection). The certificate accompanying the plants shall bear the following additional declaration: “Plants are bareroot, attached clumps of soil or growing media are less than ½ inch in diameter.” Advance notification required (see Section 4 above).

(ii) Production in an Approved Japanese Beetle Greenhouse or Screenhouse. All of the following criteria apply to plants produced in greenhouses or screenhouses:

(I) All media must be sterilized and free of soil. All stock must be free of soil (bareroot) before planting into the approved medium.

(II) Potted plants must be maintained within the greenhouse or screenhouse during the entire adult flight period. During the adult flight period, the greenhouse or screenhouse must be made secure so that adult Japanese beetles can not gain entry. Security must be documented by the appropriate phytosanitary official.

(III) No Japanese beetle contaminated material shall be allowed into the secured area at any time. The greenhouse or screenhouse must be officially inspected by phytosanitary officials and must be specifically approved as a secure area. Greenhouses and screenhouses must be inspected by the same officials for the presence of all life stages of the Japanese beetle.

(IV) All plants and their growing medium must be appropriately protected from subsequent infestation while being stored, packed, and shipped. Certified greenhouse or screenhouse nursery stock may not be transported into or through any infested areas unless identify is preserved and adequate safeguards are applied to prevent possible infestation.

(V) Each greenhouse or screenhouse operation must be approved by the phytosanitary officials as having met and maintained the above criteria. The certificate accompanying the plants shall bear the following additional declaration: “The rooted plants (or crowns) were produced in an approved Japanese beetle free greenhouse or screenhouse and were grown in sterile, soilless media.” Advance notification is required.

(iii) Production During a Pest Free Window. The entire rooted plant production cycle will be completed within a pest free window, in clean containers with sterilized and soilless growing medium, i.e., planting, growth, harvest, and shipment will occur outside the adult Japanese beetle flight period, which is June through September. The accompanying phytosanitary certificate shall bear the following additional declaration: “These plants were produced outside the Japanese beetle flight season and were grown in sterile, soilless media.” Advance notification is required.

(iv) Application of Approved Regulatory Treatments. All treatments will be performed under direct supervision of a phytosanitary official of the Department or under compliance agreement with the business. Treatments and procedures under a compliance agreement will be monitored closely throughout the season. The phytosanitary certificate shall bear the following additional declaration: “The rooted plants are in soilless media and were treated to control *Popillia japonica* according to the criteria for shipment to category 1 states as provided in the U.S. Domestic Japanese Beetle Harmonization Plan and Oregon’s Japanese beetle quarantine.” Containerized plants must be treated with one of the following approved treatment protocols:

(I) Dip Treatment. B&B and Container Plants. Not approved.

(II) Drench Treatments. Container Plants only. Not approved for ornamental grasses or sedges. Potting media used must be sterile and soilless, containers must be clean. Containers must be one gallon or smaller in size. Field potted plants are not eligible for certification using this protocol. This is a prophylactic treatment protocol targeting eggs and early first instar larvae. If the containers are exposed to a second flight season they must be treated. Containerized plants receiving a drench treatment must be treated according to label instructions in a manner that ensures that the plants are free from Japanese beetle.

(III) Media (Granule) Incorporation. Container Plants Only. Containers must be one gallon or smaller in size. This method is not approved for ornamental grasses or sedges. All pesticides used for media

incorporation must be mixed prior to potting and plants potted a minimum of thirty (30) days prior to shipment. Potting media used must be sterile and soilless and containers must be clean. The granules must be incorporated into the media prior to potting. Field potted plants are not eligible for treatment. This treatment protocol targets eggs and early first instar larvae and allows for certification of plants that have been exposed to only one flight season after application. If the containers are to be exposed to a second flight season they must be repotted with a granule incorporated mix or retreated using an approved drench treatments. Containerized plants receiving media incorporation must be treated according to label instructions in a manner that ensure that the plants are free from Japanese beetle.

(E) Additional Quarantine Requirements. Sites on which Japanese beetle (*P. japonica*) has been detected and on which mitigation activities as described in subsection (4)(h)(C) have been implemented may be eligible to ship plant materials intra- and interstate provided mitigation measures as described in subsection (4) have been conducted.

(F) Violation of Quarantine. As provided in ORS 561.590, violation of these quarantine rules is prohibited. In addition to any other lawful penalty, any person who violates these rules is subject to a civil penalty imposed by the State Department of Agriculture. As provided in ORS 561.995, the civil penalty shall not exceed \$10,000. The imposition of a civil penalty is subject to ORS 183.745.

(5) Exceptions. Upon written request, and upon investigation and finding that unusual circumstances exist justifying such action, the department may issue a permit allowing entry into this state of commodities covered without meeting the requirements of section (4). However, all conditions specified in the permit shall be met before such permit will be recognized.

(6) Violation of Quarantine. All covered commodities described in section (3) of this rule found to be in violation of this quarantine shall be returned immediately to point of origin by the Oregon receiver, or at the owner’s option be destroyed under the supervision of the department, without expense to or indemnity paid by the department. Violation of this quarantine may result in a fine, if convicted, of not less than \$500 nor more than \$5,000, as provided by ORS 561.990(4). Violators may also be subject to civil penalties of up to \$10,000 as provided by Oregon Laws 1999, chapter 390, section 2; nursery license suspension or nursery license revocation.

Stat. Auth.: ORS 561.020, 561.190, 561.510 & 570.305

Stats. Implemented: ORS 561.510

Hist.: AD 12-1977, f. 6-6-77, ef. 6-20-77; AD 7-1988(Temp), f. & cert. ef. 8-2-88; DOA 10-1998, f. & cert. ef. 12-30-98; DOA 27-2000, f. & cert. ef. 10-13-00; DOA 9-2006, f. & cert. ef. 3-22-06; DOA 7-2008, f. & cert. ef. 2-8-08; DOA 4-2010, f. & cert. ef. 1-28-10; DOA 3-2013, f. & cert. ef. 3-1-13; DOA 10-2017(Temp), f. 4-14-17, cert. ef. 4-15-17 thru 10-10-17

Department of Consumer and Business Services, Building Codes Division Chapter 918

Rule Caption: Clarifying Certain Processes for Contested Cases

Adm. Order No.: BCD 4-2017

Filed with Sec. of State: 3-31-2017

Certified to be Effective: 4-1-17

Notice Publication Date: 2-1-2017

Rules Adopted: 918-001-0012, 918-001-0014, 918-001-0016, 918-001-0300, 918-001-0310

Rules Amended: 918-001-0034

Subject: These rules add clarity to the contested case process by providing timelines for the receipt of written exceptions, issuance of final orders, and for the exchange of witness lists and exhibits. The rules also explain certain duties of licensees, including address requirements, service of process, and cooperation with investigations. Additionally, the rules allow for enforcement action to be taken against the license of owners of businesses that have been assessed civil penalties or have had action taken against their business or other associated businesses.

Rules Coordinator: Holly A. Tucker—(503) 378-5331

918-001-0012

Hearing Exhibits and Witness Lists

At least 14 calendar days prior to a contested case hearing for which there are no prehearing conferences, the Division or appropriate advisory board and the parties shall exchange exhibits and a list of witnesses, and shall provide copies to the Office of Administrative Hearings. Failure to provide exhibits and a list of witnesses at least 14 calendar days prior to hearing may result in the exclusion of exhibits or witnesses at the hearing.

ADMINISTRATIVE RULES

Stat. Auth.: ORS 183.341
Stats. Implemented: ORS 183.341
Hist.: BCD 4-2017, f. 3-31-17, cert. ef. 4-1-17

918-001-0014

Written Exceptions

Written exceptions to proposed orders must be received by the Division or appropriate advisory board within 20 calendar days after the service date of the proposed order. Written exceptions shall be sent to: Building Codes Division, Enforcement and Licensing, PO Box 14470, Salem, Oregon 97309-0404.

Stat. Auth.: ORS 183.341
Stats. Implemented: ORS 183.341
Hist.: BCD 4-2017, f. 3-31-17, cert. ef. 4-1-17

918-001-0016

Board Issuance of Final Orders

OAR 137-003-0655(7) shall not apply to contested cases brought under the authority of an advisory board. For such cases, the appropriate advisory board shall consider the proposed order at the next board meeting following the issuance of the proposed order. An amended proposed order or a final order shall be issued within 90 calendar days after the board meeting at which the board considers the proposed order, unless the appropriate advisory board gives written notice to the administrative law judge and all other parties of the date by which it expects to issue an amended proposed order or a final order.

Stat. Auth.: ORS 183.341
Stats. Implemented: ORS 183.341
Hist.: BCD 4-2017, f. 3-31-17, cert. ef. 4-1-17

918-001-0034

Disqualification from Obtaining License, Registration, Certificate, or Certification

(1) Disqualification under ORS 455.127(2) shall be for a period of five years except as provided in subsection (2) of this rule.

(2) The Director of the Department of Consumer and Business Services or an appropriate advisory board may, in its discretion, order a disqualification fewer than five years. In doing so the Director of the Department of Consumer and Business Services or appropriate advisory board may, but is not required to, consider any mitigating factors.

(3) Subject to ORS Chapter 183, a regulatory body listed in ORS 455.129(3) may deny a license, certificate, registration, or application, or may suspend, revoke, condition, or refuse to renew a license, certificate, or registration if the regulatory body finds that the licensee, certificate holder, registrant, or applicant:

(a) Was an owner or officer of another business at the time the other business was assessed a civil penalty under ORS 455.895;

(b) Was an owner or officer of another business at the time an act or failure to act by any owner or officer of the other business resulted in action being taken against the license, certificate, or registration of the other business by the department, the director, or any advisory board;

(c) Was an owner or officer of another business at the time the other business was subject to an order to cease and desist or other sanction by the director or an advisory board; or

(d) Was directly involved in an act described in (a), (b), or (c) of this rule.

Stat. Auth.: ORS 455.117 & 455.127
Stat. Implemented: ORS 455.127
Hist.: BCD 5-2015(Temp), f. & cert. ef. 7-1-15 thru 12-27-15; BCD 8-2015, f. & cert. ef. 10-1-15; BCD 4-2017, f. 3-31-17, cert. ef. 4-1-17

918-001-0300

Address Notification Requirements and Service of Process

(1) It is the responsibility of all persons licensed, certified, registered, or otherwise authorized by the Director or an advisory board to inform the Building Codes Division in writing of current contact information, including a non-Post Office Box mailing address, phone number, and e-mail address. The mailing address must be one to which the Building Codes Division can effectively serve pleadings and other documents by registered or certified mail. Contact information included on an application for a license, certification, registration, or other authorization satisfies this notification requirement.

(2) It is the responsibility of all persons licensed, certified, registered, or otherwise authorized by the Director or an advisory board to inform the Building Codes Division in writing of any change in name, address, phone number, or email address within 20 calendar days of any such change.

(3) Notice by registered or certified mail to the holder of any license, certificate, registration, or other authorization issued by the Director or an

advisory board at the last address on file with the Building Codes Division, pursuant to this rule, shall constitute effective service.

(4) Nothing in this rule shall alter any other change of address notification requirements.

Stat. Auth.: ORS 455.117 & 455.720
Stats. Implemented: ORS 455.117, 455.720
Hist.: BCD 4-2017, f. 3-31-17, cert. ef. 4-1-17

918-001-0310

Cooperation with Investigations

(1) The holder of any license, certificate, registration, or other authorization issued by the Director or an advisory board shall cooperate with any investigation conducted pursuant to ORS Chapter 455.

(2) Failure to cooperate with an investigation pursuant to subsection (1) of this rule shall be grounds for:

(a) Denial, suspension, conditioning, or revocation of a registration, certification, license, or other authority of a person to perform work or conduct business issued under laws administered by the Department or an advisory board, as set forth in ORS 455.125 or 455.129; or

(b) Disqualification from obtaining a license, registration, certificate, or certification, as set forth in ORS 455.127.

(3) As used in this rule, to cooperate with an investigation may include, but not be limited to, answering questions, making sworn statements, or testifying in administrative hearings.

Stat. Auth.: ORS 455.117 & 455.720
Stats. Implemented: ORS 455.117, 455.125, 455.127, 455.129, 455.720
Hist.: BCD 4-2017, f. 3-31-17, cert. ef. 4-1-17

Department of Consumer and Business Services, Finance and Securities Regulation Chapter 441

Rule Caption: Implements NMLS registration and renewal processes, removes fee cap for non-profit credit repair entities.

Adm. Order No.: FSR 5-2017

Filed with Sec. of State: 4-14-2017

Certified to be Effective: 4-14-17

Notice Publication Date: 1-1-2017

Rules Amended: 441-910-0010, 441-910-0030, 441-910-0050, 441-910-0055

Subject: These rules establish the process by which registrants and applicants for a debt management service provider submit applications, renewals, and other information through the Nationwide Mortgage Licensing System and Registry (NMLS). Currently, registered debt management service providers and applicants submit registration materials by paper documentation. The department found the current registration system needed for greater efficiency and to facilitate uniformity for multi-state entities. The NMLS creates efficiencies for the industry, consumers, and department as a replacement for the current system. These rules modify and clarify the registration and application procedures to make the use of the NMLS mandatory. This includes all registration and renewal activity, including surety bonds, for debt management service providers to the NMLS. These rules are necessary to enact a uniform application process resulting in greater efficiencies to the state and industry.

ORS 697.612 exempts non-profit entities that provide advice, assistance, instructional materials in return for a fee reasonably calculated to pay the cost of making the advice, assistance, or material available. Currently the rules cap reasonable fees at \$25. The department has learned that the current \$25 cap is too low to reasonably cover the cost of those services and it is impacting the availability of credit repair services in Oregon. These rules would add a requirement that credit repair organizations comply with the federal Credit Repair Organizations Act, and remove the reference to the non-profit credit repair organization fee.

Rules Coordinator: Karen Winkel—(503) 947-7694

441-910-0010

Registration Requirements

(1) All persons performing debt management services shall apply for registration through the Nationwide Mortgage Licensing System. The application form shall require the person to supply the information required by ORS 697.632 and the following:

ADMINISTRATIVE RULES

(a) The identification number of the applicant's Oregon issued certified public accountant or law license, if the applicant holds a certified public accountant or law license;

(b) The name and identifying number, if any, of an applicant's license, registration, or similar indicia of permission as a debt management service provider or similar form of license or registration in any other state;

(c) A description of any other business activities not constituting debt management services and a description or depiction of the debt management service provider's organizational structure;

(d) Any assumed business name registered with the Secretary of State under which the applicant will conduct business as a debt management service provider; and

(e) The name and the location of the insured institution the applicant establishes to keep the consumer funds that the debt management service provider holds.

(2) The person shall through the Nationwide Mortgage Licensing System with the application for registration as a debt management service provider the following:

(a) A correct and true copy of the surety bond required by ORS 697.642 in a form and on terms approved by the director in the amount of \$25,000.

(b) A copy of any disclosure documents, agreements, or contracts to be signed by a consumer for any debt management services.

(c) A sample budget analysis conforming to the minimum requirements in OAR 441-910-0415.

(d) A copy of the applicant's proposed fee schedule.

(e) A resume of the debt management service provider's managing members, managing partners, executive officers, directors, principals, or persons authorized to enter into contracts or make changes in policy for a debt management service provider.

(f) Financial statements prepared in accordance with generally accepted accounting principles, consisting of a balance sheet and a statement of income or operations and are dated not more than 12 months prior to submission of the application; and

(g) A signed disclosure for the applicant and each person identified in subsection (e) of this section of the following occurring within the five year period prior to application:

(A) Any adverse judgment by a state or federal court;

(B) Any pending bankruptcy proceedings or any bankruptcy judgments;

(C) Any injunctions issued to stop an act involving a debt management practice;

(D) Any arbitration award made in favor of another person;

(E) Any adverse final order issued by a federal or state agency;

(F) Any cease and desist order issued by the director; and

(G) Any criminal convictions, if an essential element of the crime involved fraud.

(3) An application for registration as a debt management service provider shall be considered abandoned if:

(a) The director has had one or more incomplete documents as part of an application for a minimum of 60 days; and

(b) The applicant has not responded within 30 days following a written notice from the director requesting submission of all fees, documents, or information necessary to make the application complete.

(4) The director shall not issue a registration as a debt management service provider unless the applicant pays any applicable fee specified in OAR 441-910-0605.

(5) A Registrations issued before November 1, shall expire at the end of the calendar year. Registrations issued on or after November 1st shall expire at the end of the following calendar year.

Stat. Auth.: 2009 OL Ch. 604, § 21

Stats. Implemented: ORS 697.632 & 697.752

Hist.: DC 16-1983(Temp), f. & ef. 6-28-83; DC 2-1984, f. & ef. 1-16-84; Renumbered from 814-106-0005; FCS 9-1988, f. 4-12-88, cert. ef. 5-1-88; FCS 5-2000, f. & cert. ef. 3-9-00; FCS 4-2005, f. 12-8-05, cert. ef. 1-1-06; FCS 13-2009, f. 12-18-09, cert. ef. 1-1-10; FSR 5-2017, f. & cert. ef. 4-14-17

441-910-0030

Renewal

A debt management service provider shall renew a registration by completing the following on or before December 1 of the year the debt management service provider's registration expires:

(1) Submitting a renewal request through the Nationwide Mortgage Licensing System; and

(2) Paying any required fee for renewal under OAR 441-910-0600.

Stat. Auth.: 2009 OL Ch 604, § 21

Stats. Implemented: ORS 697.632

Hist.: DC 16-1983(Temp), f. & ef. 6-28-83; DC 2-1984, f. & ef. 1-16-84; Renumbered from 814-106-0015; FCS 9-1988, f. 4-12-88, cert. ef. 5-1-88; FCS 4-2005, f. 12-8-05, cert. ef. 1-1-06; FCS 13-2009, f. 12-18-09, cert. ef. 1-1-10; FSR 5-2017, f. & cert. ef. 4-14-17

441-910-0050

Update Filings

(1) At least ten days prior to a change in ownership, address, bonding company, or information relating to the trust or operating account, the debt management service provider shall notify the director in writing through the Nationwide Mortgage Licensing System of the changes.

(2) Within ten days after learning of an arrest of any debt management service provider owner, supervisor, or employee on a charge an essential element of which is fraud, the debt management service provider shall notify the director in writing through the Nationwide Mortgage Licensing System of the known allegations.

Stat. Auth.: 2009 OL Ch 604, § 21

Stats. Implemented: ORS 697.632

Hist.: DC 16-1983(Temp), f. & ef. 6-28-83; DC 2-1984, f. & ef. 1-16-84; Renumbered from 814-106-0030; FCS 9-1988, f. 4-12-88, cert. ef. 5-1-88; FCS 4-2005, f. 12-8-05, cert. ef. 1-1-06; FCS 13-2009, f. 12-18-09, cert. ef. 1-1-10; FSR 5-2017, f. & cert. ef. 4-14-17

441-910-0055

Fees Payable to the Director

(1) A debt management service provider shall pay to the director the following fees:

(a) At the initial application for a registration, a nonrefundable application fee of \$350.

(b) On or before the date in which a debt management service provider's registration expires, a nonrefundable renewal fee of \$175.

(2) When the director conducts an examination under ORS 697.732, the debt management service provider shall pay an examination fee of \$75 per hour for each person conducting the examination.

(3) Notwithstanding section (2) of this rule:

(a) When the director conducts an examination under ORS 697.732 outside of Oregon, the debt management service provider shall pay an examination fee of \$75 per hour for each person conducting the examination plus the actual cost associated with the examination, including travel.

(b) If the work described in section (2) of this rule is performed by a consultant hired by contract for the particular work, the charge payable by the debt management service provider is the actual cost to the director for the contract consultant.

Stat. Auth.: 2009 OL Ch 604, § 21

Stats. Implemented: ORS 697.732

Hist.: DC 2-1984, f. & ef. 1-16-84; Renumbered from 814-106-0055; FCS 9-1988, f. 4-12-88, cert. ef. 5-1-88; Renumbered from 441-910-0100, FCS 4-2005, f. 12-8-05, cert. ef. 1-1-06; FCS 8-2008, f. & cert. ef. 8-28-08; FCS 13-2009, f. 12-18-09, cert. ef. 1-1-10; FSR 5-2017, f. & cert. ef. 4-14-17

Rule Caption: Implements NMLS licensing and renewal processes for collection agencies.

Adm. Order No.: FSR 6-2017

Filed with Sec. of State: 4-14-2017

Certified to be Effective: 4-14-17

Notice Publication Date: 3-1-2017

Rules Amended: 441-810-0020, 441-810-0030, 441-810-0040, 441-810-0050, 441-810-0080

Subject: These rules establish the process by which collection agency registrants and applicants submit applications, renewals, and other information through the Nationwide Multistate Licensing System and Registry (NMLS). Currently, registered collection agencies and applicants submit registration materials by paper documentation. The department found the current registration system needed for greater efficiency and to facilitate uniformity for multi-state entities. The NMLS creates efficiencies for the industry, consumers, and department as a replacement for the current system. These rules modify and clarify the registration and application procedures to make the use of the NMLS mandatory. This includes all registration and renewal activity for collection agencies to the NMLS. These rules are necessary to enact a uniform application process resulting in greater efficiencies to the state and industry.

Rules Coordinator: Karen Winkel—(503) 947-7694

441-810-0020

Duration of Registration

All registrations shall be issued on the date all registration qualifications are met. Registrations issued before November 1st shall expire at the

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end of the calendar year. Registrations issued on or after November 1st shall expire at the end of the following calendar year.

Stat. Auth.: ORS 697
Stats. Implemented: ORS 697.031(3)
Hist.: DC 15-1982, f. & ef. 7-26-82; DC 3-1984, f. & ef. 1-16-84; DC 16-1984, f. & ef. 5-1-84; Renumbered from 814-101-0005, 1987; FSR 6-2017, f. & cert. ef. 4-14-17

441-810-0030

Renewal

A certificate of registration may be renewed on or before the renewal date by submitting a request to renew the license through the Nationwide Multistate Licensing System along with payment of the required fee and submission of a current list of solicitors with desk names.

Stat. Auth.: ORS 697
Stats. Implemented: ORS 697.031(3)
Hist.: DC 7-1981(Temp), f. & ef. 7-1-81; DC 15-1982, f. & ef. 7-26-82; DC 3-1984, f. & ef. 1-16-84; Renumbered from 814-101-0010; FSR 6-2017, f. & cert. ef. 4-14-17

441-810-0040

Application

(1) Application for registration shall be submitted through the Nationwide Multistate Licensing System and must be accompanied by the required fee.

(2) Applications shall include:

- (a) The information required by ORS 697.031(1)(a) through (e);
- (b) The name of the collection agency trust account, account number and financial institution name and address;
- (c) Telephone number of the collection agency business;
- (d) Name of the collection agency business manager; and
- (e) Address of all business locations.

Stat. Auth.: ORS 697
Stats. Implemented: ORS 697.031
Hist.: DC 15-1982, f. & ef. 7-26-82; DC 3-1984, f. & ef. 1-16-84; Renumbered from 814-101-0015; FCS 4-2000, f. & cert. ef. 3-9-00; FSR 6-2017, f. & cert. ef. 4-14-17

441-810-0050

Update Filings

At least ten days prior to a change of ownership, business address, business manager, or change in information relating to the trust account, the collection agency business shall notify the Director of the changes by filing the appropriate forms through the Nationwide Multistate Licensing System.

Stat. Auth.: ORS 697.085
Stats. Implemented: ORS 697.031(3)
Hist.: DC 7-1981(Temp), f. & ef. 7-1-81; DC 15-1982, f. & ef. 7-26-82; DC 3-1984, f. & ef. 1-16-84; Renumbered from 814-101-0020; FCS 9-1988, f. 4-12-88, cert. ef. 5-1-88; FCS 4-2000, f. & cert. ef. 3-9-00; FSR 6-2017, f. & cert. ef. 4-14-17

441-810-0080

Office Closure

When an agency permanently closes an office, it shall notify the Director, by submitting the appropriate notice through the Nationwide Multistate Licensing System, within five days from closure and provide the following information to the Director:

- (1) Disposition or location of records and clients' moneys.
 - (2) Name and address of a contact person for future inquiries.
- Stat. Auth.: ORS 697.085
Stats. Implemented: ORS 697.031(3)
Hist.: DC 3-1984, f. & ef. 1-16-84; Renumbered from 814-101-0036; FCS 9-1988, f. 4-12-88, cert. ef. 5-1-88; FCS 4-2000, f. & cert. ef. 3-9-00; FSR 6-2017, f. & cert. ef. 4-14-17

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Rule Caption: Implements NMLS licensing and renewal processes for money transmitters.

Adm. Order No.: FSR 7-2017

Filed with Sec. of State: 4-14-2017

Certified to be Effective: 4-14-17

Notice Publication Date: 3-1-2017

Rules Amended: 441-745-0000, 441-745-0300, 441-745-0310, 441-745-0330

Subject: These rules establish the process by which money transmitter licensees and applicants submit applications, renewals, and other information through the Nationwide Multistate Licensing System and Registry (NMLS). Currently, licensed money transmitters and applicants submit registration materials by paper documentation. The department found the current registration system needed greater efficiency and a capacity to facilitate uniformity for multi-state entities. The NMLS creates efficiencies for the industry, consumers, and department as a replacement for the current system. These rules modify and clarify the licensing and application procedures to make the

use of the NMLS mandatory. This includes all registration and renewal activity, including surety bonds, for money transmitters to the NMLS. These rules are necessary to enact a uniform application process resulting in greater efficiencies to the state and industry.

Rules Coordinator: Karen Winkel—(503) 947-7694

441-745-0000

Definitions

(1) Unless a specific definition is provided or the context otherwise requires, the words and phrases used in OAR Chapter 441, Division 745 have the meaning given them in ORS 183.310.

(2) A “Director” means the Director of the Department of Consumer and Business Services and the Director’s authorized representatives.

(3) A “Department” means the Department of Consumer and Business Services.

(4) “Nationwide Multistate Licensing System and Registry” or “NMLS” means a system that the Conference of State Bank Supervisors and the American Association of Residential Mortgage Regulators and successors develop and maintain for participating state agencies to use to register and license mortgage loan originators and non-depository companies and made available at www.nationwidelicencingsystem.org.

(5) A “Person” includes individuals, partnerships, corporations, associations, firms, and joint stock companies.

Stat. Auth.: ORS 717.310
Stats. Implemented: ORS 717.200
Hist.: FCS 8-2000, f. & cert. ef. 6-27-00; FSR 7-2017, f. & cert. ef. 4-14-17

441-745-0300

Application Procedure

(1) Each person desiring to obtain a money transmitters license shall apply to the Director by submitting all information required pursuant to ORS 717.220 plus a list of permissible investments pursuant to 717.215(3), if required.

(2) A person seeking a license must submit an application attested to by an authorized owner or officer of the applicant through the NMLS.

(3) Applicants and licensees must comply with the registration, application, licensing, and renewal processes set forth in the NMLS.

Stat. Auth.: ORS 717.310
Stats. Implemented: ORS 717.215 & 717.220
Hist.: FCS 8-2000, f. & cert. ef. 6-27-00; FSR 7-2017, f. & cert. ef. 4-14-17

441-745-0310

Renewal of License

(1) A licensee may renew their license to conduct the business of a Money Transmitter by submitting through the Nationwide Multistate Licensing System and Registry (NMLS):

- (a) A completed renewal application.
- (b) A renewal fee of \$500.00 pursuant to ORS 717.240(1) and any fee required by NMLS.

(c) The information required pursuant to ORS 717.240(2).

(2) The director may by order reduce the fees assessed for any specific year.

Stat. Auth.: ORS 717.240 & 717.310
Stats. Implemented: ORS 717.240
Hist.: FCS 8-2000, f. & cert. ef. 6-27-00; FCS 3-2005, f. & cert. ef. 9-6-05; FSR 7-2017, f. & cert. ef. 4-14-17

441-745-0330

Security Device

Persons who were originally licensed as Sale of Checks licensees who renew their license under the provision of ORS 717.245 and who currently have on file a security device may continue the use of the security device provided:

(1) The security device is in an amount sufficient to meet the requirements of ORS 717.225; or

(2) The security device has been amended, by filing a rider or otherwise, to increase the amount of the security device to an amount required by ORS 717.225 and to reference 717.225.

(3) The security device must be submitted through the NMLS.

Stat. Auth.: ORS 717.310
Stats. Implemented: ORS 717.225
Hist.: FCS 8-2000, f. & cert. ef. 6-27-00; FSR 7-2017, f. & cert. ef. 4-14-17

ADMINISTRATIVE RULES

Department of Consumer and Business Services, Health Insurance Marketplace Chapter 945

Rule Caption: 2018 Health Insurance Marketplace Qualified Health Plan and Stand Alone Dental Plan Annual Assessment Rates

Adm. Order No.: HMP 1-2017

Filed with Sec. of State: 4-5-2017

Certified to be Effective: 4-5-17

Notice Publication Date: 3-1-2017

Rules Amended: 945-030-0030

Subject: The amendment to OAR 945-030-0030 establishes the assessment rate for qualified health plans and stand alone dental plans for 2018. ORS 741.105 requires the Department of Consumer and Business Services (DCBS) to establish assessment rates for qualified health plans and stand alone dental plans sold through the health insurance marketplace. These rates are reviewed annually, adjusted based on budget and enrollment projections, and updated by amending 945-030-0030.

This amendment will keep the assessment rate at \$6.00 for qualified health plans and \$0.57 for stand alone dental plans in 2018.

Rules Coordinator: Victor Garcia—(971) 283-1878

945-030-0030

Administrative Charge on Insurers and Health Care Service Contractors

(1) Effective January 1, 2015, each health insurer or health care service contractor offering:

(a) Qualified health plans through the Marketplace shall pay a monthly administrative charge equal to \$9.66 times the number of members enrolled through the Marketplace in that month.

(b) Stand alone dental plans through the Marketplace shall pay a monthly administrative charge equal to \$0.97 times the number of members enrolled through the Marketplace in that month.

(2) Effective January 1, 2016, each health insurer or health care service contractor offering:

(a) Qualified health plans through the Marketplace shall pay a monthly administrative charge equal to \$9.66 times the number of members enrolled through the Marketplace in that month

(b) Stand alone dental plans through the Marketplace shall pay a monthly administrative charge equal to \$0.97 times the number of members enrolled through the Marketplace in that month.

(3) Effective January 1, 2017, each health insurer or health care service contractor offering:

(a) Qualified health plans through the Marketplace shall pay a monthly administrative charge equal to \$6.00 times the number of members enrolled through the Marketplace in that month.

(b) Stand alone dental plans through the Marketplace shall pay a monthly administrative charge equal to \$0.57 times the number of members enrolled through the Marketplace in that month.

(4) Effective January 1, 2018, each health insurer or health care service contractor offering:

(a) Qualified health plans through the Marketplace shall pay a monthly administrative charge equal to \$6.00 times the number of members enrolled through the Marketplace in that month.

(b) Stand alone dental plans through the Marketplace shall pay a monthly administrative charge equal to \$0.57 times the number of members enrolled through the Marketplace in that month.

Stat. Auth.: ORS 741.002

Stats. Implemented: ORS 741.105

Hist.: OHIE 1-2013, f. & cert. ef. 3-18-13; OHIE 3-2013(Temp), f. & cert. ef. 5-28-13 thru 11-22-13; OHIE 5-2013, f. & cert. ef. 8-19-13; OHIE 2-2014, f. & cert. ef. 4-15-14; OHIE 1-2015(Temp), f. & cert. ef. 3-11-15 thru 9-4-15; Administrative correction, 9-30-15; OHIE 3-2015, f. & cert. ef. 10-15-15; OHIE 4-2015, f. & cert. ef. 11-6-15; HMP 2-2016, f. & cert. ef. 4-12-16; HMP 1-2017, f. & cert. ef. 4-5-17

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Department of Consumer and Business Services, Insurance Regulation Chapter 836

Rule Caption: Repeals market assistance plan for construction contractors general liability insurance.

Adm. Order No.: ID 4-2017

Filed with Sec. of State: 4-14-2017

Certified to be Effective: 4-14-17

Notice Publication Date: 3-1-2017

Rules Repealed: 836-014-0400

Subject: In 2002, the department learned of difficulties in the construction contractors market. Contractors, required to have general liability insurance were having difficulty obtaining coverage. The department determined that there was a likelihood of consumer harm if contractors were unable to acquire general liability insurance coverage to support their license. The department and the Construction Contractors Board (CCB) formed a work-group to develop possible solutions. The work-group developed an outline for the Market Assistance Plan (MAP) website. The website was hosted by the CCB from 2004 until 2016.

During discussions about the website, the department and CCB, in conjunction with an advisory committee, determined that the site was outdated and might not be continuing to serve the purpose for which it was first developed. The department determined that the market for general liability coverage for contractors is now well developed. This repeal is necessary to remove the rule related to the successful, but now unnecessary, market assistance plan related to construction contractor general liability coverage.

Rules Coordinator: Karen Winkel—(503) 947-7694

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Department of Consumer and Business Services, Workers' Compensation Division Chapter 436

Rule Caption: Amendments to reflect the Oregon Supreme Court's decision in *Brown v. SAIF Corporation*

Adm. Order No.: WCD 2-2017(Temp)

Filed with Sec. of State: 4-10-2017

Certified to be Effective: 4-11-17 thru 10-7-17

Notice Publication Date:

Rules Amended: 436-010-0001, 436-010-0280, 436-030-0003, 436-030-0020, 436-030-0035, 436-035-0003, 436-035-0006, 436-035-0013

Subject: These temporary rules:

- Reflect changes in interpretation of workers' compensation statutes by the Oregon Supreme Court in *Brown v. SAIF Corporation*, 361 Or 241 (2017), primarily the court's determination that "otherwise compensable injury" in ORS 656.005(7)(a)(B), refers to a medical condition and not to an injury incident;

- Eliminate references to a "condition directly resulting from the work injury"; and

- Replace some uses of the term "compensable injury" with "accepted condition."

Rules Coordinator: Fred Bruyns—(503) 947-7717

436-010-0001

Administration of These Rules

(1) Any orders issued by the division in carrying out the director's authority to enforce Oregon Revised Statute (ORS) Chapter 656 and Oregon Administrative Rule (OAR) chapter 436, are considered orders of the director of the Department of Consumer and Business Services.

(2) Authority for Rules. These rules are promulgated under the director's general rulemaking authority of ORS 656.726(4) for administration of and pursuant to ORS chapter 656, particularly: ORS 656.245, 656.248, 656.250, 656.252, 656.254, 656.256, 656.260, 656.268, 656.273, 656.313, 656.325, 656.327, 656.331, 656.704, and 656.794.

(3) Purpose. The purpose of these rules is to establish uniform guidelines for administering the delivery of and payment for medical services to workers within the workers' compensation system.

(4) Applicability of Rules.

(a) These rules apply on or after the effective date to carry out the provisions of ORS 656.245, 656.247, 656.248, 656.250, 656.252, 656.254, 656.256, 656.260, 656.268, 656.313, 656.325, 656.327, 656.331, 656.704, and 656.794, and govern all providers of medical services licensed or authorized to provide a product or service under ORS Chapter 656.

(b) The changes to OAR 436-010-0280(8) adopted effective April 11, 2017, apply to all closing exams performed on or after April 11, 2017.

(c) The director may waive procedural rules as justice requires, unless otherwise obligated by statute.

Stat. Auth.: ORS 656.726(4)

ADMINISTRATIVE RULES

Stats. Implemented: ORS 656.245, 656.248, 656.250, 656.252, 656.254, 656.256, 656.260, 656.268, 656.273, 656.313, 656.325, 656.327, 656.331, 656.704, 656.794
Hist.: WCB 1-1972, f. & ef. 1-14-72; WCB 4-1976, f. 10-20-76, ef. 11-1-76; WCD 7-1978(Admin), f. & ef. 6-5-78; WCD 2-1980(Admin), f. 1-28-80, ef. 2-1-80; WCD 5-1982(Admin), f. 2-23-82, ef. 3-1-82; WCD 1-1984(Admin), f. & ef. 1-16-84; WCD 2-1985(Admin), f. 4-29-85, ef. 6-3-85; Renumbered from 436-069-0003, 5-1-85; WCD 12-1990(Temp), f. 6-20-90, cert. ef. 7-1-90; WCD 30-1990, f. 12-10-90, cert. ef. 12-26-90; WCD 11-1992, f. 6-11-92, cert. ef. 7-1-92; WCD 12-1996, f. 5-6-96, cert. ef. 6-1-96; WCD 11-1998, f. 12-16-98, cert. ef. 1-1-99; WCD 13-2001, f. 12-17-01, cert. ef. 1-1-02; WCD 5-2015, f. 8-20-15, cert. ef. 10-1-15; WCD 1-2016, f. 3-7-16, cert. ef. 4-1-16; WCD 2-2017(Temp), f. 4-10-17, cert. ef. 4-11-17 thru 10-7-17

436-010-0280

Determination of Impairment/Closing Exams

(1) When a worker has received compensation for time loss or it is likely the worker has permanent impairment and becomes medically stationary, the attending physician must complete a closing exam or refer the worker to a consulting physician for all or part of the closing exam. If the worker is under the care of an authorized nurse practitioner or a type B attending physician, other than a chiropractic physician, the provider must refer the worker to a type A attending physician to do a closing exam.

(2) The closing exam must be completed under OAR 436-030 and 436-035 and Bulletin 239. (See Appendix A "Matrix for Health Care Provider Types".)

(3) When the attending physician completes the closing exam, the attending physician has 14 days from the medically stationary date to send the closing report to the insurer. When the attending physician does not complete the closing exam, the attending physician must arrange, or ask the insurer to arrange, a closing exam with a consulting physician within seven days of the medically stationary date.

(4) When an attending physician or authorized nurse practitioner requests a consulting physician to do the closing exam, the consulting physician has seven days from the date of the exam to send the report to the attending physician for concurrence or objections. Within seven days of receiving the closing exam report, the attending physician must state in writing whether the physician concurs with or objects to all or part of the findings of the exam, and send the concurrence or objections with the report to the insurer.

(5) The attending physician must specify the worker's residual functional capacity if:

(a) The attending physician has not released the worker to the job held at the time of injury because of a permanent work restriction caused by the compensable injury, and

(b) The worker has not returned to the job held at the time of injury, because of a permanent work restriction caused by the compensable injury.

(6) Instead of specifying the worker's residual functional capacity under section (5) of this rule, the attending physician may refer the worker for:

(a) A second-level physical capacities evaluation (see OAR 436-009-0060) when the worker has not been released to return to the job held at the time of injury, has not returned to the job held at the time of injury, has returned to modified work, or has refused an offer of modified work; or

(b) A work capacities evaluation (see OAR 436-009-0060) when there is a question of the worker's ability to return to suitable and gainful employment. The provider may also be required to specify the worker's ability to perform specific job tasks.

(7) When the insurer issues a major contributing cause denial on an accepted claim and the worker is not medically stationary:

(a) The attending physician must do a closing exam or refer the worker to a consulting physician for all or part of the closing exam; or

(b) An authorized nurse practitioner or a type B attending physician, other than a chiropractic physician, must refer the worker to a type A attending physician for a closing exam.

(8) The closing report must include all of the following:

(a) Findings of permanent impairment.

(A) In an initial injury claim, the closing report must include objective findings of any permanent impairment that is caused in any part by an accepted condition or a direct medical sequela of an accepted condition.

(B) In a new or omitted condition claim, the closing report must include objective findings of any permanent impairment that is caused in any part by an accepted new or omitted condition or a direct medical sequela of an accepted new or omitted condition.

(C) In an aggravation claim, the closing report must include objective findings of any permanent impairment that is caused in any part by an accepted worsened condition or a direct medical sequela of an accepted worsened condition.

(D) In an occupational disease claim, the closing report must include objective findings of any permanent impairment that is caused in any part

by an accepted occupational disease or a direct medical sequela of an accepted occupational disease.

(b) Findings documenting permanent work restrictions.

(A) If the worker has no permanent work restriction, the closing report must include a statement indicating that:

(i) The worker has no permanent work restriction; or

(ii) The worker is released, without restriction, to the job held at the time of injury.

(B) In an initial injury claim, the closing report must include objective findings documenting any permanent work restriction that:

(i) Prevents the worker from returning to the job held at the time of injury; and

(ii) Is caused in any part by an accepted condition or a direct medical sequela of an accepted condition.

(C) In a new or omitted condition claim, the closing report must include objective findings documenting any permanent work restriction that:

(i) Prevents the worker from returning to the job held at the time of injury; and

(ii) Is caused in any part by an accepted new or omitted condition or a direct medical sequela of an accepted new or omitted condition.

(D) In an aggravation claim, the closing report must include objective findings documenting any permanent work restriction that:

(i) Prevents the worker from returning to the job held at the time of injury; and

(ii) Is caused in any part by an accepted worsened condition or a direct medical sequela of an accepted worsened condition.

(E) In an occupational disease claim, the closing report must include objective findings documenting any permanent work restriction that:

(i) Prevents the worker from returning to the job held at the time of injury; and

(ii) Is caused in any part by an accepted occupational disease or a direct medical sequela of an accepted occupational disease.

(c) A statement regarding the validity of an impairment finding is required in the following circumstances:

(A) If the examining physician determines that a finding of impairment is invalid, the closing report must include a statement that identifies the basis for the determination that the finding is invalid.

(B) If the examining physician determines that a finding of impairment is valid but the finding is not addressed by any applicable validity criteria under Bulletin 239, the closing report must include a statement that identifies the basis for the determination that the finding is valid.

(C) If the examining physician chooses to disregard applicable validity criteria under Bulletin 239 because the criteria are medically inappropriate for the worker, the closing report must include a statement that describes why the criteria would be inappropriate.

[ED. NOTE: Appendices referenced are available from the agency.]

Stat. Auth.: ORS 656.726(4) & 656.245(2)(b)

Stats. Implemented: ORS 656.245 & 656.252

Hist.: WCD 5-1982(Admin), f. 2-23-82, ef. 3-1-82; WCD 1-1984(Admin), f. & ef. 1-16-84; Renumbered from 436-069-0601, 5-1-85; WCD 1-1990, f. 1-5-90, cert. ef. 2-1-90; WCD 12-1990(Temp), f. 6-20-90, cert. ef. 7-1-90; WCD 30-1990, f. 12-10-90, cert. ef. 12-26-90; WCD 11-1992, f. 6-11-92, cert. ef. 7-1-92; WCD 13-1994, f. 12-20-94, cert. ef. 2-1-95; WCD 12-1996, f. 5-6-96, cert. ef. 6-1-96, Renumbered from 436-010-0080; WCD 11-1998, f. 12-16-98, cert. ef. 1-1-99; WCD 13-2001, f. 12-17-01, cert. ef. 1-1-02; WCD 14-2003(Temp), f. 12-15-03, cert. ef. 1-1-04 thru 6-28-03; WCD 3-2004, f. 3-5-04 cert. ef. 4-1-04; WCD 2-2005, f. 3-24-05, cert. ef. 4-1-05; WCD 8-2005, f. 12-6-05, cert. ef. 1-1-06; WCD 5-2006, f. 6-15-06, cert. ef. 7-1-06; WCD 11-2007, f. 11-1-07, cert. ef. 1-2-08; WCD 12-2007(Temp), f. 12-14-07, cert. ef. 1-2-08 thru 6-29-08; WCD 2-2008, f. 6-13-08, cert. ef. 6-30-08; WCD 3-2009, f. 12-1-09, cert. ef. 1-1-10; WCD 5-2011, f. 11-18-11, cert. ef. 1-1-12; WCD 3-2014, f. 3-12-14, cert. ef. 4-1-14; WCD 1-2015, f. 1-29-15, cert. ef. 3-1-15; WCD 5-2015, f. 8-20-15, cert. ef. 10-1-15; WCD 2-2017(Temp), f. 4-10-17, cert. ef. 4-11-17 thru 10-7-17

436-030-0003

Applicability of Rules

(1) Except as provided in section (3) of this rule, these rules apply to all accepted claims for workers' compensation benefits and all claims closed on or after the effective date of these rules.

(2) All orders the division issues to carry out the statute and these rules are considered an order of the director.

(3) These rules carry out ORS 656.005, 656.214, 656.262, 656.268, 656.273, 656.278, and 656.325.

(a) For claims in which the worker became medically stationary before July 2, 1990, OAR 436-030-0020, 436-030-0030, and 436-030-0050 as adopted by WCD Administrative Order 13-1987 effective January 1, 1988 will apply.

(b) OAR 436-030-0055(3)(b), (3)(d), and (4)(a) apply to all claims with dates of injury on or after January 1, 2002.

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(c) The changes to OAR 436-030-0020 and 436-030-0035 adopted effective April 11, 2107, apply to:

(A) All notices of closure issued on or after April 11, 2017; and

(B) All requests for reconsideration pending before the Appellate Review Unit as of April 11, 2017.

Stat. Auth.: ORS 656.268 & 656.726

Stats. Implemented: ORS 656.005, 656.206, 656.210, 656.212, 656.214, 656.262, 656.268, 656.273, 656.278, 656.325, 656.726

Hist.: WCD 8-1978(Admin), f. 6-30-78, ef. 7-10-78; WCD 4-1980(Admin), f. 3-20-80, ef. 4-1-80; WCD 5-1981(Admin), f. 12-30-81, ef. 1-1-82; Renumbered from 436-065-0003, 5-1-85; WCD 13-1987, f. 12-18-87, ef. 1-1-88; WCD 5-1990(Temp), f. 6-18-90, cert. ef. 7-1-90; WCD 31-1990, f. 12-10-90, cert. ef. 12-26-90; WCD 5-1991(Temp), f. 8-20-91, cert. ef. 9-1-91; WCD 5-1992, f. 1-17-92, cert. ef. 2-20-92; WCD 12-1994, f. 11-18-94, cert. ef. 1-1-95; WCD 8-1996, f. 2-14-96, cert. ef. 2-17-96; WCD 17-1997, f. 12-22-97, cert. ef. 1-15-98; WCD 9-2000, f. 11-13-00, cert. ef. 1-1-01; WCD 12-2000(Temp), f. 12-22-00, cert. ef. 1-1-01 thru 6-29-01; Administrative correction 11-20-01; WCD 10-2001, f. 11-16-01, cert. ef. 1-1-02; WCD 1-2002(Temp), f. & cert. ef. 1-15-02 thru 7-13-02; WCD 4-2002, f. 4-5-02, cert. ef. 4-8-02; WCD 14-2003(Temp), f. 12-15-03, cert. ef. 1-1-04 thru 6-28-03; WCD 2-2004, f. 2-19-04 cert. ef. 2-29-04; WCD 9-2004, f. 10-26-04, cert. ef. 1-1-05; WCD 8-2005, f. 12-6-05, cert. ef. 1-1-06; WCD 1-2008, f. 6-13-08, cert. ef. 7-1-08; WCD 3-2009, f. 12-1-09, cert. ef. 1-1-10; WCD 5-2011, f. 11-18-11, cert. ef. 1-1-12; WCD 2-2015, f. 2-12-15, cert. ef. 3-1-15; WCD 2-2017(Temp), f. 4-10-17, cert. ef. 4-11-17 thru 10-7-17

436-030-0020

Requirements for Claim Closure

(1) Issuance of a Notice of Closure. Unless the worker is enrolled and actively engaged in training, the insurer must issue a Notice of Closure on an accepted disabling claim within 14 days when:

(a) Medical information establishes that there is sufficient information to determine the extent of permanent disability and indicates that the worker is medically stationary;

(b) The compensable injury is no longer the major contributing cause of the worker's combined or consequential condition(s), a major contributing cause denial has been issued, and there is sufficient information to determine the extent of permanent disability;

(c) The worker fails to seek medical treatment for 30 days for reasons within the worker's control and the worker has been notified of pending actions in accordance with these rules;

(d) The worker fails to attend a mandatory closing examination for reasons within the worker's control and the worker has been notified of pending actions in accordance with these rules; or

(e) A worker receiving permanent total disability benefits has materially improved and is capable of regularly performing work at a gainful and suitable occupation.

(2) Sufficient Information. For purposes of determining the extent of permanent disability, except as provided in section (14) of this rule for closure after training, "sufficient information" requires: a qualifying statement of no permanent disability under subsection (a) of this section or a qualifying closing report under subsection (b) of this section. Additional documentation is required under subsection (c) of this section unless there is clear and convincing evidence that an attending physician or authorized nurse practitioner has released the worker to the job held at the time of injury or that the worker has returned to the job held at the time of injury.

(a) Qualifying statements of no permanent disability. A statement indicating that there is no permanent disability is sufficient if it meets all of the following requirements:

(A) Qualified providers. An authorized nurse practitioner or attending physician must provide or concur with the statement.

(B) Support by the medical record. The statement must be supported by the medical record. If the medical record reveals otherwise, a closing examination and report specified under subsection (b) of this section are required.

(C) In initial injury claims. In an initial injury claim, the statement must clearly indicate the following:

(i) There is no reasonable expectation of any permanent impairment caused in any part by an accepted condition or a direct medical sequela of an accepted condition; and

(ii) There is no reasonable expectation of any permanent work restriction that:

(I) Prevents the worker from returning to the job held at the time of injury; and

(II) Is caused in any part by an accepted condition or a direct medical sequela of an accepted condition.

(D) In new or omitted condition claims. In a new or omitted condition claim, the statement must clearly indicate the following:

(i) There is no reasonable expectation of any permanent impairment caused in any part by an accepted new or omitted condition or a direct medical sequela of an accepted new or omitted condition; and

(ii) There is no reasonable expectation of any permanent work restriction that:

(I) Prevents the worker from returning to the job held at the time of injury; and

(II) Is caused in any part by an accepted new or omitted condition or a direct medical sequela of an accepted new or omitted condition.

(E) In aggravation claims. In an aggravation claim, the statement must clearly indicate the following:

(i) There is no reasonable expectation of any permanent impairment caused in any part by an accepted worsened condition or a direct medical sequela of an accepted worsened condition; and

(ii) There is no reasonable expectation of any permanent work restriction that:

(I) Prevents the worker from returning to the job held at the time of injury; and

(II) Is caused in any part by an accepted worsened condition or a direct medical sequela of an accepted worsened condition.

(F) In occupational disease claims. In an occupational disease claim, the statement must clearly indicate the following:

(i) There is no reasonable expectation of any permanent impairment caused in any part by an accepted occupational disease or a direct medical sequela of an accepted occupational disease; and

(ii) There is no reasonable expectation of any permanent work restriction that:

(I) Prevents the worker from returning to the job held at the time of injury; and

(II) Is caused in any part by an accepted occupational disease or a direct medical sequela of an accepted occupational disease.

(b) Qualifying closing reports. A closing medical examination and report are required if there is a reasonable expectation of permanent disability. A closing report is sufficient if it meets all of the following requirements:

(A) Qualified providers. A type A attending physician or a chiropractic physician serving as the attending physician must provide or concur with the closing report.

(B) Release to regular work. If the worker has no permanent work restriction, the closing report must include a statement indicating that:

(i) The worker has no permanent work restriction; or

(ii) The worker is released, without restriction, to the job held at the time of injury.

(C) In initial injury claims. In an initial injury claim, the closing report must include detailed documentation of all measurements, findings, and limitations regarding:

(i) Any permanent impairment caused in any part by an accepted condition or a direct medical sequela of an accepted condition; and

(ii) Any permanent work restriction that:

(I) Prevents the worker from returning to the job held at the time of injury; and

(II) Is caused in any part by an accepted condition or a direct medical sequela of an accepted condition.

(D) In new or omitted condition claims. In a new or omitted condition claim, the closing report must include detailed documentation of all measurements, findings, and limitations regarding:

(i) Any permanent impairment caused in any part by an accepted new or omitted condition or a direct medical sequela of an accepted new or omitted condition; and

(ii) Any permanent work restriction that:

(I) Prevents the worker from returning to the job held at the time of injury; and

(II) Is caused in any part by an accepted new or omitted condition or a direct medical sequela of an accepted new or omitted condition.

(E) In aggravation claims. In an aggravation claim, the closing report must include detailed documentation of all measurements, findings, and limitations regarding:

(i) Any permanent impairment caused in any part by an accepted worsened condition or a direct medical sequela of an accepted worsened condition; and

(ii) Any permanent work restriction that:

(I) Prevents the worker from returning to the job held at the time of injury; and

(II) Is caused in any part by an accepted worsened condition or a direct medical sequela of an accepted worsened condition.

(F) In occupational disease claims. In an occupational disease claim, the closing report must include detailed documentation of all measurements, findings, and limitations regarding:

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(i) Any permanent impairment caused in any part by an accepted occupational disease or a direct medical sequela of an accepted occupational disease; and

(ii) Any permanent work restriction that:

(I) Prevents the worker from returning to the job held at the time of injury; and

(II) Is caused in any part by an accepted occupational disease or a direct medical sequela of an accepted occupational disease.

(c) Additional documentation. Unless there is clear and convincing evidence that an attending physician or authorized nurse practitioner has released the worker to the job held at the time of injury (for dates of injury on or after January 1, 2006) or that the worker has returned to the job held at the time of injury, all of the following is required:

(A) An accurate description of the physical requirements of the worker's job held at the time of injury, which has been provided by certified mail to the worker and the worker's legal representative, if any, either before closing the claim or at the time the claim is closed;

(B) The worker's wage established consistent with OAR 436-060;

(C) The worker's date of birth;

(D) Except as provided in OAR 436-030-0015(4)(d), the worker's work history for the period beginning five years before the date of injury to the mailing date of the Notice of Closure, including tasks performed or level of SVP, and physical demands; and

(E) The worker's level of formal education.

(3) When determining disability and issuing the Notice of Closure, the insurer must apply all statutes and rules consistent with their provisions, particularly as they relate to major contributing cause denials, worker's failure to seek treatment, worker's failure to attend a mandatory examination, medically stationary status, temporary disability, permanent partial and total disability, review of permanent partial and total disability.

(4) When issuing a Notice of Closure, the insurer must prepare and attach a summary worksheet, "Notice of Closure Worksheet," Form 2807, as described by bulletin of the director.

(5) The "Notice of Closure," Form 1644, is effective the date it is mailed to the worker and to the worker's attorney if the worker is represented, or to the worker's estate if the worker is deceased, regardless of the date on the Notice itself.

(6) The notice must be in the form and format prescribed by the director in these rules and include only the following:

(a) The worker's name, address, and claim identification information;

(b) The appropriate dollar value of any individual scheduled or unscheduled permanent disability based on the value per degree for injuries occurring before January 1, 2005 or, for injuries occurring on or after January 1, 2005, the appropriate dollar value of any "whole person" permanent disability, including impairment and work disability as determined appropriate under OAR 436-035;

(c) The body part(s) awarded disability, coded to the table of body part codes as prescribed by the director;

(d) The percentage of loss of the specific body part(s), including either the number of degrees that loss represents as appropriate for injuries occurring before January 1, 2005, or the percentage of the whole person the worker's loss represents as appropriate for injuries occurring on or after January 1, 2005;

(e) If there is no permanent disability award for this Notice of Closure, a statement to that effect;

(f) The duration of temporary total and temporary partial disability compensation;

(g) The date the Notice of Closure was mailed;

(h) The medically stationary date or the date the claim statutorily qualifies for closure under OAR 436-030-0035 or 436-030-0034;

(i) The date the worker's aggravation rights end;

(j) The appeal rights of the worker and any beneficiaries;

(k) A statement that the worker has the right to consult with the Ombudsman for Injured Workers;

(l) For claims with dates of injury before January 1, 2005, the rate in dollars per degree at which permanent disability, if any, will be paid based on date of injury as identified in Bulletin 111;

(m) For claims with dates of injury on or after January 1, 2005, the state's average weekly wage applicable to the worker's date of injury;

(n) The worker's return to work status;

(o) A general statement that the insurer has the authority to recover an overpayment;

(p) A statement that the worker has the right to be represented by an attorney; and

(q) A statement that the worker has the right to request a vocational eligibility evaluation under ORS 656.340.

(7) The Notice of Closure (Form 1644) must be accompanied by the following:

(a) The brochure "Understanding Claim Closure and Your Rights";

(b) A copy of summary worksheet Form 2807 containing information and findings which result in the data appearing on the Notice of Closure;

(c) An accurate description of the physical requirements of the worker's job held at the time of injury unless it is not required under section (2)(a) of this rule or it was previously provided under section (2)(b)(A) of this rule;

(d) The Updated Notice of Acceptance at Closure which clearly identifies all accepted conditions in the claim and specifies those which have been denied and are on appeal or which were the basis for this opening of the claim; and

(e) A cover letter that:

(A) Specifically explains why the claim has been closed (e.g., expiration of a period of suspension without the worker resolving the problems identified, an attending physician stating the worker is medically stationary, worker failure to treat without attending physician authorization or establishing good cause for not treating, etc.);

(B) Lists and describes enclosed documents; and

(C) Notifies the worker about the end of temporary disability benefits, if any, and the anticipated start of permanent disability benefits, if any.

(8) A copy of the Notice of Closure must be mailed to each of the following persons at the same time, with each copy clearly identifying the intended recipient:

(a) The worker;

(b) The employer;

(c) The director; and

(d) The worker's attorney, if the worker is represented.

(9) If the worker is deceased at the time the Notice of Closure is issued:

(a) The worker's copy of the notice must be addressed to the estate of the worker and mailed to the worker's last known address.

(b) Copies of the notice may be mailed to any known or potential beneficiaries to the worker's estate. If a copy of the notice is mailed to a beneficiary, it must be mailed by both regular mail and certified mail return receipt requested.

(10) The worker's copy of the Notice of Closure must be mailed by both regular mail and certified mail return receipt requested.

(11) An insurer may use electronically produced Notice of Closure forms if consistent with the form and format prescribed by the director.

(12) Insurers may allow adjustments of benefits awarded to the worker under the documentation requirements of OAR 436-060-0170 for the following purposes:

(a) To recover payments for permanent disability which were made prematurely;

(b) To recover overpayments for temporary disability; and

(c) To recover overpayments for other than temporary disability such as prepaid travel expenses where travel was not completed, prescription reimbursements, or other benefits payable under ORS 656.001 to 656.794.

(13) The insurer may allow overpayments made on a claim with the same insurer to be deducted from compensation to which the worker is entitled but has not yet been paid.

(14) Under ORS 656.268(10), if, after claim closure, the worker becomes enrolled and actively engaged in an approved training program under OAR 436-120, the insurer must again close the claim consistent with the following:

(a) The claim must be closed when the worker ceases to be enrolled and actively engaged in the training and:

(A) The worker is medically stationary;

(B) The worker's accepted injury is no longer the major contributing cause of the worker's combined or consequential condition or conditions; or

(C) The claim otherwise qualifies for closure under OAR 436-030-0034.

(b) If the worker is medically stationary, there must be a current (within three months before closure) determination of medically stationary status.

(c) For claims with dates of injury on or after January 1, 2005, permanent disability must be redetermined for work disability only. For claims with dates of injury before January 1, 2005, permanent disability must be redetermined for unscheduled disability only.

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(d) Except for claims closed under ORS 656.268(1)(c), the insurer must have sufficient information to redetermine work disability or un-scheduled disability. The requirements in section (2) of this rule regarding sufficient information apply only as necessary for the redetermination, as follows:

(A) For claims with dates of injury on or after January 1, 2005, the insurer must have sufficient information to determine work disability under OAR 436-035-0012. An evaluation of the adaptability factor of work disability under OAR 436-035-0012(7) through (13) must be based on a current (within three months before closure) medical determination of the worker's residual functional capacity.

(B) For claims with dates of injury before January 1, 2005, the insurer must have sufficient information to determine un-scheduled disability under OAR 436-035-0008(2). An evaluation of un-scheduled disability must be based on a current (within three months before closure) medical determination.

(15) When, after a claim is closed, the insurer changes or is ordered to change the worker's weekly wage upon which calculation of the work disability portion of a permanent disability award may be based, the insurer must notify the parties and the division of the change and the effect of the change on any permanent disability award. For purposes of this rule, the insurer must complete Form 1502 consistent with the instructions of the director and distribute it within 14 days of the change.

Stat. Auth.: ORS 656.268, 656.726

Stats. Implemented: ORS 656.210, 656.212, 656.214, 656.268 (2015 OL Ch. 144), 656.726, 656.745

Hist.: WCD 4-1980(Admin), f. 3-20-80, cert. ef. 4-1-80; WCD 5-1981(Admin), f. 12-30-81, cert. ef. 1-1-82; Renumbered from 436-065-0006, 5-1-85; WCD 13-1987, f. 12-18-87, cert. ef. 1-1-88; WCD 5-1990(Temp), f. 6-18-90, cert. ef. 7-1-90; WCD 31-1990, f. 12-10-90, cert. ef. 12-26-90; WCD 5-1992, f. 1-17-92, cert. ef. 2-20-92; WCD 12-1994, f. 11-18-94, cert. ef. 1-1-95; WCD 8-1996, f. 2-14-96, cert. ef. 2-17-96; WCD 17-1997, f. 12-22-97, cert. ef. 1-15-98; WCD 9-2000, f. 11-13-00, cert. ef. 1-1-01; WCD 2-2004, f. 2-19-04 cert. ef. 2-29-04; WCD 9-2004, f. 10-26-04, cert. ef. 1-1-05; WCD 8-2005, f. 12-6-05, cert. ef. 1-1-06; WCD 11-2007, f. 11-1-07, cert. ef. 1-2-08; WCD 3-2009, f. 12-1-09, cert. ef. 1-1-10; WCD 1-2015, f. 1-29-15, cert. ef. 3-1-15; WCD 4-2015(Temp), f. & cert. ef. 5-21-15 thru 11-16-15; WCD 6-2015, f. 10-12-15, cert. ef. 11-17-15; WCD 2-2017(Temp), f. 4-10-17, cert. ef. 4-11-17 thru 10-7-17

436-030-0035

Determining Medically Stationary Status

(1) A worker is medically stationary in the following circumstances:

(a) In initial injury claims. In an initial injury claim, a worker is medically stationary when the attending physician, authorized nurse practitioner, or a preponderance of medical opinion declares that all accepted conditions and direct medical sequelae of accepted conditions are either "medically stationary" or "medically stable" or when the provider uses other language meaning the same thing.

(b) In new or omitted condition claims. In a new or omitted condition claim, a worker is medically stationary when the attending physician, authorized nurse practitioner, or a preponderance of medical opinion declares that all accepted new or omitted conditions and direct medical sequela of accepted new or omitted conditions are either "medically stationary" or "medically stable" or when the provider uses other language meaning the same thing.

(c) In aggravation claims. In an aggravation claim, a worker is medically stationary when the attending physician, authorized nurse practitioner, or a preponderance of medical opinion declares that all accepted worsened conditions and direct medical sequela of accepted worsened conditions are either "medically stationary" or "medically stable" or when the provider uses other language meaning the same thing.

(d) In occupational disease claims. In an occupational disease claim, a worker is medically stationary when the attending physician, authorized nurse practitioner, or a preponderance of medical opinion declares that all accepted occupational diseases and direct medical sequela of accepted occupational diseases are either "medically stationary" or "medically stable" or when the provider uses other language meaning the same thing.

(2) When there is a conflict in the medical opinions as to whether a worker is medically stationary, more weight is given to medical opinions that are based on the most accurate history, on the most objective findings, on sound medical principles, and clear and concise reasoning.

(3) Where there is not a preponderance of medical opinion stating a worker is or is not medically stationary, deference will generally be given to the opinion of the attending physician. However, in cases where expert analysis is important, deference is given to the opinion of the physician with the greatest expertise in, and understanding of, the worker's medical condition.

(4) When there is a conflict as to the date upon which a worker became medically stationary, the following conditions govern the determination of the medically stationary date. The date a worker is medically sta-

tionary is the earliest date that a preponderance is established under sections (1) and (2) of this rule. The date of the examination, not the date of the report, controls the medically stationary date.

(5) The insurer must request the attending physician, as defined in ORS 656.005(12)(b)(A), to concur or comment when the attending physician arranges or refers the worker for a closing examination with another physician to determine the extent of impairment or when the insurer refers a worker for an independent medical examination. A concurrence with another physician's report is an agreement in every particular, including the medically stationary impression and date, unless the physician expressly states to the contrary and explains the reasons for disagreement. Concurrence cannot be presumed in the absence of the attending physician's response.

(6) A worker is medically stationary on the date of the examination when so specified by a physician. When a specific date is not indicated, a worker is presumed medically stationary on the date of the last examination, prior to the date of the medically stationary opinion. Physician projected medically stationary dates cannot be used to establish a medically stationary date.

(7) If the worker is incarcerated or confined in some other manner and unable to freely seek medical treatment, the insurer must arrange for medical examinations to be completed at the facility where the worker is located or at some other location accessible to the worker.

(8) If a worker dies and the attending physician has not established a medically stationary date, for purposes of claim closure, the medically stationary date is the date of death.

Stat. Auth.: ORS 656.268, 656.726

Stats. Implemented: ORS 656.268

Hist.: WCD 5-1990(Temp), f. 6-18-90, cert. ef. 7-1-90; WCD 31-1990, f. 12-10-90, cert. ef. 12-26-90; WCD 5-1992, f. 1-17-92, cert. ef. 2-20-92; WCD 12-1994, f. 11-18-94, cert. ef. 1-1-95; WCD 8-1996, f. 2-14-96, cert. ef. 2-17-96; WCD 17-1997, f. 12-22-97, cert. ef. 1-15-98; WCD 9-2000, f. 11-13-00, cert. ef. 1-1-01; WCD 14-2003(Temp), f. 12-15-03, cert. ef. 1-1-04 thru 6-28-03; WCD 2-2004, f. 2-19-04 cert. ef. 2-29-04; WCD 9-2004, f. 10-26-04, cert. ef. 1-1-05; WCD 11-2007, f. 11-1-07, cert. ef. 1-2-08; WCD 3-2009, f. 12-1-09, cert. ef. 1-1-10; WCD 1-2015, f. 1-29-15, cert. ef. 3-1-15; WCD 2-2017(Temp), f. 4-10-17, cert. ef. 4-11-17 thru 10-7-17

436-035-0003

Applicability of Rules

(1) Except as provided in section (2) of this rule, these rules apply to the rating of permanent disability under ORS chapter 656 and to all claims closed on or after the effective date of these rules for workers medically stationary on or after June 7, 1995.

(2) The changes to OAR 436-035-0006 and 436-035-0013 adopted effective April 11, 2017, apply to:

(a) All notices of closure issued on or after April 11, 2017; and

(b) All requests for reconsideration pending before the Appellate Review Unit as of April 11, 2017.

(3) The rules adopted by WCD Administrative Order 93-056 apply to the rating of permanent disability for workers medically stationary on or after July 1, 1990 but before June 7, 1995, except as otherwise provided in 1995 Oregon Laws, chapter 332.

(4) The rules adopted by WCD Administrative Order 6-1988 apply to the rating of permanent disability for workers medically stationary before July 1, 1990, except as otherwise provided in 1995 Oregon Laws, chapter 332.

(5) For the purpose of reconsideration of claim closure under ORS 656.268, the rules in effect on the date of issuance of the appealed notice of closure apply to the rating of permanent disability for workers medically stationary after July 1, 1990, except as otherwise provided in 1995 Oregon Laws, chapter 332.

Stat. Auth.: ORS 656.726

Stats. Implemented: ORS 656.005, 656.214, 656.268, 656.273 & 656.726

Hist.: WCD 2-1988, f. 6-3-88, cert. ef. 7-1-88; WCD 7-1988, f. 12-21-88, cert. ef. 1-1-89; WCD 1-1989(Temp), f. & cert. ef. 1-24-89; WCD 18-1990(Temp), f. 9-14-90, cert. ef. 10-1-90; WCD 20-1990(Temp), f. & cert. ef. 11-20-90; WCD 2-1991, f. 3-26-91, cert. ef. 4-1-91; WCD 6-1991(Temp), f. 9-13-91, cert. ef. 10-1-91; WCD 6-1992, f. 2-14-92, cert. ef. 3-13-92; WCD 10-1992(Temp), f. & cert. ef. 6-1-92; WCD 15-1992, f. 11-20-92, cert. ef. 11-27-92; WCD 3-1993(Temp), f. & cert. ef. 6-17-93; WCD 13-1995(Temp), f. & cert. ef. 9-21-95; WCD 3-1996, f. 1-29-96, cert. ef. 2-17-96; WCD 19-1996(Temp), f. & cert. ef. 8-19-96; WCD 1-1997, f. 1-9-97, cert. ef. 2-15-97; WCD 6-1998, f. 5-13-98, cert. ef. 7-1-98; WCD 2-2003, f. 1-15-03 cert. ef. 2-1-03; WCD 9-2004, f. 10-26-04, cert. ef. 1-1-05; WCD 2-2010, f. 5-5-10, cert. ef. 6-1-10; WCD 8-2012, f. 11-26-12, cert. ef. 1-1-13; WCD 2-2017(Temp), f. 4-10-17, cert. ef. 4-11-17 thru 10-7-17

436-035-0006

Determination of Benefits for Disability Caused by the Compensable Injury

(1) In injury claims. In an injury claim, permanent disability caused by the compensable injury includes disability caused by:

(a) An accepted condition; or

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- (b) A direct medical sequela of an accepted condition.
 - (2) In new or omitted condition claims. In a new or omitted condition claim, permanent disability caused by the compensable injury includes disability caused by:
 - (a) An accepted new or omitted condition; or
 - (b) A direct medical sequela of an accepted new or omitted condition.
 - (3) In aggravation claims. In an aggravation claim, permanent disability caused by the compensable injury includes disability caused by:
 - (a) An accepted worsened condition; or
 - (b) A direct medical sequela of an accepted worsened condition.
 - (4) In occupational disease claims. In an occupational disease claim, permanent disability caused by the compensable injury includes disability caused by:
 - (a) An accepted occupational disease; or
 - (b) A direct medical sequela of an accepted occupational disease.
- Stat. Auth.: ORS 656.726
Stats. Imp. Id.: ORS 656.005, 656.214, 656.225, 656.268, 656.726 & 656.802
Hist.: WCD 1-2015, f. 1-29-15, cert. ef. 3-1-15; WCD 2-2017(Temp), f. 4-10-17, cert. ef. 4-11-17 thru 10-7-17

436-035-0013

Findings of Impairment

(1) Findings of impairment, generally. Findings of impairment are objective medical findings that measure the extent to which a worker has suffered permanent loss of use or function of a body part or system.

(2) Findings of impairment when the worker is medically stationary. If the worker is medically stationary, findings of impairment are determined by performing the following steps:

(a) In injury claims.

(A) Identify each body part or system in which use or function is permanently lost as a result of an accepted condition or a direct medical sequela of an accepted condition.

(B) For each body part or system identified in paragraph (A) of this subsection, establish the extent to which use or function of the body part or system is permanently lost; and

(C) Establish the portion of the loss caused by:

- (i) Any accepted condition;
- (ii) Any direct medical sequela of an accepted condition;
- (iii) Any condition that existed before the initial injury incident but does not qualify as a preexisting condition;
- (iv) Any preexisting condition that is not otherwise compensable;
- (v) Any denied condition; and
- (vi) Any superimposed condition.

Example: Accepted condition: Low back strain
Superimposed condition: pregnancy (mid-term)
Denied condition: lumbar disc herniation

In the closing examination, the attending physician describes range of motion findings and states that 10% of the range of motion loss is due to the accepted condition, 50% of the loss is due to a lumbar disc herniation, and 40% of the loss is due to the pregnancy. The worker is eligible for an impairment award for the 10% of the range of motion loss that is due to the low back strain. Under these rules, the range of motion loss is valued at 10%. $10\% \times .10$ equals 1% impairment.

(b) In new or omitted condition claims.

(A) Identify each body part or system in which use or function is permanently lost as a result of an accepted new or omitted condition or a direct medical sequela of an accepted new or omitted condition.

(B) For each body part or system identified in paragraph (A) of this subsection, establish the extent to which use or function of the body part or system is permanently lost; and

(C) Establish the portion of the loss caused by:

- (i) Any accepted new or omitted condition;
 - (ii) Any direct medical sequela of an accepted new or omitted condition;
 - (iii) In a new condition claim, any condition that existed before the onset of the accepted new medical condition but does not qualify as a preexisting condition;
 - (iv) In an omitted condition claim, any condition that existed before the initial injury incident but does not qualify as a preexisting condition;
 - (v) Any preexisting condition that is not otherwise compensable;
 - (vi) Any denied condition; and
 - (vii) Any superimposed condition.
- (c) In aggravation claims.

(A) Identify each body part or system in which use or function is permanently lost as a result of an accepted worsened condition or a direct medical sequela of an accepted worsened condition. (B) For each body part or system identified in paragraph (A) of this subsection, establish the extent to which use or function of the body part or system is permanently lost; and

- (C) Establish the portion of the loss caused by:
 - (i) Any accepted worsened condition;
 - (ii) Any direct medical sequela of an accepted worsened condition;
 - (iii) Any condition that existed before the onset of the accepted worsened condition but does not qualify as a preexisting condition;
 - (iv) Any preexisting condition that is not otherwise compensable;
 - (v) Any denied condition; and
 - (vi) Any superimposed condition.
- (d) In occupational disease claims.
 - (A) Identify each body part or system in which use or function is permanently lost as a result of an accepted occupational disease or a direct medical sequela of an accepted occupational disease.

(B) For each body part or system identified in paragraph (A) of this subsection, establish the extent to which use or function of the body part or system is permanently lost; and

(C) Establish the portion of the loss caused by:

- (i) Any accepted occupational disease;
- (ii) Any direct medical sequela of an accepted occupational disease;
- (iii) Any preexisting condition that is not otherwise compensable;
- (iv) Any denied condition; and
- (v) Any superimposed condition.

(3) Findings of impairment when the worker is not medically stationary. Except for a claim closed under ORS 656.268(1)(c), if the worker is not medically stationary, findings of impairment are determined by performing the following steps:

(a) In injury claims.

(A) Identify each body part or system in which use or function is likely to be permanently lost as a result of an accepted condition or a direct medical sequela of an accepted condition at the time the worker is likely to become medically stationary;

(B) For each body part or system identified in paragraph (A) of this subsection, estimate the extent to which the use or function of the body part or system is likely to be permanently lost at the time the worker is likely to become medically stationary; and

(C) Estimate the portion of the loss that is likely to be caused by:

- (i) Any accepted condition;
- (ii) Any direct medical sequela of an accepted condition;
- (iii) Any condition that existed before the initial injury incident but does not qualify as a preexisting condition;
- (iv) Any preexisting condition that is not otherwise compensable;
- (v) Any denied condition; and
- (vi) Any superimposed condition.

(b) In new or omitted condition claims.

(A) Identify each body part or system in which use or function is likely to be permanently lost as a result of an accepted new or omitted condition or a direct medical sequela of an accepted new or omitted condition at the time the worker is likely to become medically stationary;

(B) For each body part or system identified in paragraph (A) of this subsection, estimate the extent to which the use or function of the body part or system is likely to be permanently lost at the time the worker is likely to become medically stationary; and

(C) Estimate the portion of the loss that is likely to be caused by:

- (i) Any accepted new or omitted condition;
- (ii) Any direct medical sequela of an accepted new or omitted condition;
- (iii) In a new condition claim, any condition that existed before the onset of the accepted new medical condition but does not qualify as a preexisting condition;
- (iv) In an omitted condition claim, any condition that existed before the initial injury incident but does not qualify as a preexisting condition;
- (v) Any preexisting condition that is not otherwise compensable;
- (vi) Any denied condition; and
- (vii) Any superimposed condition.

(c) In aggravation claims.

(A) Identify each body part or system in which use or function is likely to be permanently lost as a result of an accepted worsened condition or a direct medical sequela of an accepted worsened condition at the time the worker is likely to become medically stationary;

(B) For each body part or system identified in paragraph (A) of this subsection, estimate the extent to which the use or function of the body part or system is likely to be permanently lost at the time the worker is likely to become medically stationary; and

(C) Estimate the portion of the loss that is likely to be caused by:

- (i) Any accepted worsened condition;
- (ii) Any direct medical sequela of an accepted worsened condition;

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- (iii) Any condition that existed before the onset of the accepted worsened condition but does not qualify as a preexisting condition;
 - (iv) Any preexisting condition that is not otherwise compensable;
 - (v) Any denied condition; and
 - (vi) Any superimposed condition.
- (d) In occupational disease claims.

(A) Identify each body part or system in which use or function is likely to be permanently lost as a result of an accepted occupational disease or a direct medical sequela of an accepted occupational disease at the time the worker is likely to become medically stationary;

(B) For each body part or system identified in paragraph (A) of this subsection, estimate the extent to which the use or function of the body part or system is likely to be permanently lost at the time the worker is likely to become medically stationary; and

(C) Estimate the portion of the loss that is likely to be caused by:

- (i) Any accepted occupational disease;
- (ii) Any direct medical sequela of an accepted occupational disease;
- (iii) Any preexisting condition that is not otherwise compensable;
- (iv) Any denied condition; and
- (v) Any superimposed condition.

(4) Age and education. The social-vocational factors of age and education (including SVP) are not apportioned, but are determined as of the date of issuance.

(5) Irreversible findings of impairment or surgical value. Workers with an irreversible finding of impairment or surgical value due to the compensable injury receive the full value awarded in these rules for the irreversible finding or surgical value.

Example: Accepted condition: Low back strain with herniated disk at L5-S1 and diskectomy.

Noncompensable condition: pregnancy (mid-term)

The worker is released to regular work. In the closing examination, the physician describes range of motion findings and states that 60% of the range of motion loss is due to the accepted condition. Under these rules, the range of motion loss is valued at 10%. $10\% \times .60$ equals 6%. Diskectomy at L5-S1 (irreversible finding) = 9% per these rules. Combine 9% with 6% for a value of 14% impairment for the compensable injury.

[ED. NOTE: Examples referenced are available from the agency.]

Stat. Auth.: ORS 656.726

Stats. Implemented.: ORS 656.005, 656.214, 656.268, 656.726

Hist.: WCD 9-2004, f. 10-26-04, cert. ef. 1-1-05; WCD 2-2010, f. 5-5-10, cert. ef. 6-1-10; WCD 1-2015, f. 1-29-15, cert. ef. 3-1-15; WCD 2-2017(Temp), f. 4-10-17, cert. ef. 4-11-17 thru 10-7-17

Department of Corrections Chapter 291

Rule Caption: Specify the duties of parole and probation officers of the Department of Corrections.

Adm. Order No.: DOC 4-2017

Filed with Sec. of State: 3-17-2017

Certified to be Effective: 3-17-17

Notice Publication Date: 1-1-2017

Rules Amended: 291-065-0006, 291-065-0007

Subject: These amendments are necessary to update the definitions with current terminology.

Rules Coordinator: Janet R. Worley—(503) 945-0933

291-065-0006

Definitions

(1) Local State Director: A person within the Department of Corrections who reports to the Assistant Director of Community Corrections and has responsibility for managing a state community corrections office within a particular county.

(2) Offender: Any person under the supervision of the Department of Corrections or a local community corrections office who is on parole, probation or post-prison supervision status.

(3) Parole and Probation Officer: An employee of the Department of Corrections as defined in ORS 181A.355(13).

Stat. Auth.: ORS 137.610, 137.630, 179.040, 423.020, 423.030, 423.075

Stats. Implemented: ORS 137.610, 137.630, 179.040, 423.020, 423.030 & 423.075

Hist.: CD 18-1985, f. & cert. ef. 8-2-85; DOC 6-2006, f. & cert. ef. 7-24-06; DOC 4-2017, f. & cert. ef. 3-17-17

291-065-0007

Duties and Assignments

(1) Among the duties of the Department of Corrections parole and probation officers articulated by statute are:

(a) To make investigation in relation to granting, revoking or modifying parole, post-prison supervision, transitional leave, local control, probation or conditional release as required by the Board of Parole and Post-Prison Supervision, courts or Department of Corrections;

(b) To provide supervisory services and interventions to persons released on parole, post-prison supervision, transitional leave, local control or probation residing in this state with the goal of reducing the probability of continued criminal behavior;

(c) To keep informed concerning conduct and conditions of such persons by visiting, requiring reports, and making collateral contacts;

(d) To make reports to the Board of Parole and Post-Prison Supervision, courts or Department of Corrections as required;

(e) Cause the execution of any arrest warrant on a person who is under supervision on parole, post-prison supervision, transitional leave, local control or probation status; and

(f) To perform such additional duties as the local state director or Department of Corrections Assistant Director of Community Corrections may direct.

(2) The priority of duties and assignments shall be determined by the parole and probation officer's supervisor.

Stat. Auth.: ORS 137.610, 137.630, 179.040, 423.020, 423.030, 423.075

Stats. Implemented: ORS 137.610, 137.630, 179.040, 423.020, 423.030 & 423.075

Hist.: CD 18-1985, f. & cert. ef. 8-2-85; DOC 6-2006, f. & cert. ef. 7-24-06; ; DOC 4-2017, f. & cert. ef. 3-17-17

Rule Caption: Medical Clearance for Inmate Food Handlers

Adm. Order No.: DOC 5-2017(Temp)

Filed with Sec. of State: 3-30-2017

Certified to be Effective: 3-30-17 thru 9-25-17

Notice Publication Date:

Rules Amended: 291-061-0061

Subject: To lower the risk of the transmission of foodborne illness through the food supply, the department's rule requires a medical clearance that the department's Health Services certify that an inmate assigned to the Food Services Section is free from communicable disease. This rule amendment clarifies that that certification requirement concerns communicable diseases that are transmitted through the food supply or the handling of food, rather than any or all communicable diseases

Rules Coordinator: Janet R. Worley—(503) 945-0933

291-061-0061

Medical Clearances

(1) The Health Services Section will document that an inmate is free from communicable disease that may be transmitted through the handling of food and is physically capable of performing the required work in the Food Services Section prior to assignment.

(2) Staff supervisors in each area of the Food Services Section shall:

(a) Inform all inmates who apply for a position in food services that a current medical clearance is a requirement.

(b) Visually inspect all inmates assigned to work units for signs or symptoms which could be a health hazard. Those inmates who exhibit symptoms of colds or flu, have cuts, abrasions, or skin rash will not be permitted to work until they have been seen and released for work by Health Services.

(3) Staff supervisors will evaluate and follow up with Health Services any complaints of illness by inmates. Statements about the health of any inmate which could affect the health and well being of staff and inmates will be reported to Health Services and the shift supervisor. The shift supervisor will notify the food services manager if applicable.

Stat. Auth.: ORS 179.040, 423.020, 423.030 & 423.075

Stats. Implemented: ORS 179.040, 423.020, 423.030 & 423.075

Hist.: CD 2-1993, f. 1-25-93, cert. ef. 2-1-93; CD 18-1996, f. 11-20-96, cert. ef. 12-1-96; DOC 5-2017(Temp), f. & cert. ef. 3-30-17 thru 9-25-17

Department of Fish and Wildlife Chapter 635

Rule Caption: Extend 2017 Winter Commercial Seasons in the Select Areas of the Columbia River.

Adm. Order No.: DFW 25-2017(Temp)

Filed with Sec. of State: 3-20-2017

Certified to be Effective: 3-20-17 thru 6-13-17

Notice Publication Date:

Rules Amended: 635-042-0160, 635-042-0170

ADMINISTRATIVE RULES

Subject: These amended rules extend the 2017 winter commercial salmon seasons for the Blind Slough/Knappa Slough and Tongue Point/South Channel Select Areas. The first extended fishing period in these Select Area sites is set to begin March 20. Modifications are consistent with action taken March 20, 2017 by the Departments of Fish & Wildlife for the States of Oregon and Washington at a meeting of the Columbia River Compact.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-042-0160

Blind Slough and Knappa Slough Select Area Salmon Season

(1) Salmon and shad may be taken for commercial purposes during open fishing periods described as the winter fishery and the spring fishery in subsections (1)(a)(A) and (1)(a)(B) of this rule in those waters of Blind Slough and Knappa Slough. The following restrictions apply:

(a) The open fishing periods are established in segments categorized as the Winter and Spring season fishery in Blind Slough and Knappa Slough in subsection (1)(a)(A), and the spring fishery in Blind Slough and Knappa Slough in subsection (1)(a)(B). The seasons are open nightly from 7:00 p.m. to 7:00 a.m. the following morning (12 hours), as follows:

(A) Blind Slough and Knappa Slough:

(i) Monday, Wednesday, and Thursday nights from February 6 through March 10 2017 and Monday and Thursday nights from March 13 through March 31 2017.

(B) Blind and Knappa Sloughs:

(i) Tuesday and Thursday nights from April 20 through April 28 2017, and Monday and Thursday nights from May 1 through June 13 2017.

(b) The fishing areas for the winter and spring seasons are:

(A) Winter season: Blind Slough and Knappa Slough are open February 6 through March 24 2017 and only Blind Slough area is open March 27 through March 31 2017. Spring season: Blind Slough and Knappa Slough areas are open from April 20 through June 13 2017.

(B) Knappa Slough are all waters bounded by a line from the northerly most marker at the mouth of Blind Slough westerly to a marker on Karlson Island downstream to a north-south line defined by a marker on the eastern end of Minaker Island to markers on Karlson Island and the Oregon shore.

(C) During the period from May 1 through June 13, the lower boundary of the Knappa Slough fishing area extends downstream to the boundary lines defined by markers on the west end of Minaker Island to markers on Karlson Island and the Oregon shore (fall boundary).

(c) Gear restrictions are as follows:

(A) During the winter fishery, outlined above in subsection (1)(a)(A), gill nets may not exceed 100 fathoms in length with no weight limit on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is less than 7-inches.

(B) During the spring fishery, outlined above in subsection (1)(a)(B), gill nets may not exceed 100 fathoms in length with no weight limit on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is more than 9.75-inches.

(C) Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(2) Retention and sale of sturgeon is prohibited.

(3) Oregon licenses are required in the open waters upstream from the railroad bridge.

Stat. Auth.: ORS 183.325, 506.109 & 506.119

Stats. Implemented: ORS 506.129 & 507.030

Hist.: FWC 46-1996, f. & cert. ef. 8-23-96; FWC 48-1997, f. & cert. ef. 8-25-97; DFW 15-1998, f. & cert. ef. 3-3-98; DFW 67-1998, f. & cert. ef. 8-24-98; DFW 86-1998(Temp), f. & cert. ef. 10-28-98 thru 10-30-98; DFW 10-1999, f. & cert. ef. 2-26-99; DFW 48-1999(Temp), f. & cert. ef. 6-24-99 thru 7-2-99; DFW 55-1999, f. & cert. ef. 8-12-99; DFW 9-2000, f. & cert. ef. 2-25-00; DFW 42-2000, f. & cert. ef. 8-3-00; DFW 65-2000(Temp), f. 9-22-00, cert. ef. 9-25-00 thru 12-31-00; DFW 3-2001, f. & cert. ef. 2-6-01; DFW 84-2001(Temp), f. & cert. ef. 8-29-01 thru 12-31-01; DFW 86-2001, f. & cert. ef. 9-4-01 thru 12-31-01; DFW 89-2001(Temp), f. & cert. ef. 9-14-01 thru 12-31-01; DFW 106-2001(Temp), f. 10-26-01 thru 12-31-01; DFW 14-2002(Temp), f. 2-13-02, cert. ef. 2-18-02 thru 8-17-02; DFW 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; DFW 12-2003, f. & cert. ef. 2-14-03; DFW 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; DFW 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; DFW 75-2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; DFW 89-2003(Temp), f. 9-8-03, cert. ef. 9-9-03 thru 12-31-03; DFW 11-2004, f. & cert. ef. 2-13-04; DFW 19-2004(Temp), f. & cert. ef. 3-12-04 thru 3-31-04; DFW 22-2004(Temp), f. & cert. ef. 3-18-04 thru 3-31-04; DFW 28-2004(Temp), f. 4-8-04 cert. ef. 4-12-04 thru 4-15-04; DFW 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; DFW 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; DFW 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-

31-04; DFW 95-2004(Temp), f. 9-17-04, cert. ef. 9-19-04 thru 12-31-04; DFW 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; DFW 6-2005, f. & cert. ef. 2-14-05; DFW 16-2005(Temp), f. & cert. ef. 3-10-05 thru 7-31-05; DFW 18-2005(Temp), f. & cert. ef. 3-15-05 thru 3-21-05; Administrative correction 4-20-05; DFW 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; DFW 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; DFW 28-2005(Temp), f. & cert. ef. 4-28-05 thru 6-16-05; DFW 37-2005(Temp), f. & cert. ef. 5-5-05 thru 10-16-05; DFW 40-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; DFW 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; DFW 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; DFW 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; DFW 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; DFW 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; DFW 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; DFW 5-2006, f. & cert. ef. 2-15-06; DFW 14-2006(Temp), f. 3-15-06, cert. ef. 3-16-06 thru 7-27-06; DFW 16-2006(Temp), f. 3-23-06 & cert. ef. 3-26-06 thru 7-27-06; DFW 18-2006(Temp), f. 3-29-06, cert. ef. 4-2-06 thru 7-27-06; DFW 20-2006(Temp), f. 4-7-06, cert. ef. 4-9-06 thru 7-27-06; DFW 32-2006(Temp), f. & cert. ef. 5-23-06 thru 7-31-06; DFW 35-2006(Temp), f. & cert. ef. 5-30-06 thru 7-31-06; DFW 75-2006(Temp), f. 8-8-06, cert. ef. 9-5-06 thru 12-31-06; DFW 92-2006(Temp), f. 9-1-06, cert. ef. 9-5-06 thru 12-31-06; DFW 98-2006(Temp), f. & cert. ef. 9-12-06 thru 12-31-06; DFW 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; DFW 119-2006(Temp), f. & cert. ef. 10-18-06 thru 12-31-06; Administrative correction 1-16-07; DFW 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; DFW 9-2007, f. & cert. ef. 2-14-07; DFW 13-2007(Temp), f. & cert. ef. 3-6-07 thru 9-1-07; DFW 25-2007(Temp), f. 4-17-07, cert. ef. 4-18-07 thru 7-26-07; DFW 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; DFW 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative correction 1-24-08; DFW 6-2008(Temp), f. 1-29-08, cert. ef. 1-31-08 thru 7-28-08; DFW 16-2008(Temp), f. 2-26-08, cert. ef. 3-2-08 thru 8-28-08; DFW 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; DFW 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; DFW 85-2008(Temp), f. 7-24-08, cert. ef. 8-1-08 thru 12-31-08; DFW 103(Temp), f. 8-26-08, cert. ef. 9-2-08 thru 10-31-08; DFW 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; DFW 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; DFW 49-2009(Temp), f. 5-14-09, cert. ef. 5-17-09 thru 7-31-09; DFW 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; DFW 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; Administrative correction 11-19-09; DFW 15-2010(Temp), f. 2-19-10, cert. ef. 2-21-10 thru 6-11-10; DFW 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; DFW 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; DFW 57-2010(Temp), f. & cert. ef. 5-11-10 thru 7-31-10; DFW 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; DFW 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; DFW 129-2010(Temp), f. & cert. ef. 9-10-10 thru 10-31-10; Administrative correction 11-23-10; DFW 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; DFW 23-2011, f. & cert. ef. 3-21-11; DFW 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; DFW 44-2011(Temp), f. & cert. ef. 5-11-11 thru 6-10-11; Administrative correction 6-28-11; DFW 113-2011(Temp), f. 8-10-11, cert. ef. 8-15-11 thru 10-31-11; Administrative correction, 11-18-11; DFW 12-2012(Temp), f. 2-8-12, cert. ef. 2-12-12 thru 7-31-12; DFW 104-2012(Temp), f. 8-6-12, cert. ef. 8-13-12 thru 10-31-12; Administrative correction 11-23-12; DFW 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; DFW 24-2013(Temp), f. & cert. ef. 3-21-13 thru 7-31-13; Administrative correction, 8-21-13; DFW 91-2013(Temp), f. 8-22-13, cert. ef. 8-26-13 thru 10-31-13; DFW 110-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction, 11-22-13; DFW 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; DFW 35-2014(Temp), f. & cert. ef. 4-24-14 thru 7-31-14; DFW 39-2014(Temp), f. 5-7-14, cert. ef. 5-8-14 thru 7-31-14; DFW 115-2014(Temp), f. 8-5-14, cert. ef. 8-18-14 thru 10-31-14; DFW 135-2014(Temp), f. & cert. ef. 9-19-14 thru 10-31-14; Administrative correction 11-24-14; DFW 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; DFW 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; DFW 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; DFW 70-2015(Temp), f. 6-15-15, cert. ef. 6-16-15 thru 7-31-15; DFW 76-2015(Temp), f. 6-23-15, cert. ef. 6-25-15 thru 7-31-15; DFW 102-2015(Temp), f. 8-10-15, cert. ef. 8-17-15 thru 10-31-15; Administrative correction, 11-20-15; DFW 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; DFW 23-2016(Temp), f. & cert. ef. 3-28-16 thru 7-31-16; DFW 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; DFW 71-2016(Temp), f. 6-13-16, cert. ef. 6-16-16 thru 7-31-16; DFW 78-2016(Temp), f. 6-23-16 thru 7-31-16; DFW 85-2016(Temp), f. & cert. ef. 6-30-16 thru 7-31-16; DFW 87-2016(Temp), f. & cert. ef. 7-7-16 thru 7-31-16; DFW 92-2016(Temp), f. 7-13-16, cert. ef. 7-14-16 thru 7-31-16; DFW 101-2016(Temp), f. 8-2-16, cert. ef. 8-24-16 thru 10-31-16; DFW 129-2016(Temp), f. 9-29-16, cert. ef. 10-1-16 thru 13-31-16; DFW 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; DFW 25-2017(Temp), f. & cert. ef. 3-20-17 thru 6-13-17

635-042-0170

Tongue Point Basin and South Channel

(1) The winter and spring season Tongue Point fishing area includes all waters bounded by a line extended from the upstream (southern most) pier (#1) at the Tongue Point Job Corps facility through navigation marker #6 to Mott Island, a line from a marker at the southeast end of Mott Island northeasterly to a marker on the northwest tip of Lois Island, and a line from a marker on the southwest end of Lois Island westerly to a marker on the Oregon shore.

(2) South Channel area includes all waters bounded by a line from a marker on John Day Point to a marker on the southwest end of Lois Island upstream to an upper boundary line from a marker on Settler Point northwesterly to the flashing red USCG marker "10", northwesterly to a marker on the eastern tip of Burnside Island defining the upstream terminus of South Channel.

(3) Salmon, and shad may be taken for commercial purposes in those waters of Tongue Point and South Channel as described in section (1) and section (2) of this rule. Open fishing periods are:

(a) Winter season: Monday and Thursday nights from February 6 through March 10 2017, from 7 p.m. to 7 a.m. (12 hours) the following morning, Monday night March 13 2017 from 7 p.m. to 11 p.m. (4 hours), and Wednesday March 22 from 3 p.m. to 7 p.m. (4 hours). Spring season: Thursday night April 20 2017 from 2 p.m. to 6 p.m. (4 hours); Tuesday and Thursday nights from April 25 through April 28 2017 and Monday and

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Thursday nights from May 1 through June 13 2017, 7:00 p.m. to 7:00 a.m. (12 hours) the following morning.

(4) Gear restrictions are as follows:

(a) In waters described in section (1) as Tongue Point basin, gill nets may not exceed 250 fathoms in length and weight limit on the lead line is not to exceed two pounds on any one fathom. It is unlawful to use a gill net having a mesh size that is less than 7 inches during winter season and 9.75-inches during spring season.

(b) In waters described in section (2) as South Channel, nets are restricted to 250 fathoms in length with no weight restrictions on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is less than 7 inches during winter season and 9.75-inches during spring season.

(c) Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(5) Retention and sale of sturgeon is prohibited.

Stat. Auth.: ORS 183.325, 506.109 & 506.119

Stats. Implemented: ORS 506.129 & 507.030

Hist.: FWC 46-1996, f. & cert. ef. 8-23-96; FWC 48-1997, f. & cert. ef. 8-25-97; FWC 61-1997(Temp), f. 9-23-97, cert. ef. 9-24-97; DFW 15-1998, f. & cert. ef. 3-3-98; DFW 41-1998(Temp), f. 5-28-98, cert. ef. 5-29-98; DFW 42-1998(Temp), f. 5-29-98, cert. ef. 5-31-98 thru 6-6-98; DFW 45-1998(Temp), f. 6-5-98, cert. ef. 6-6-98 thru 6-10-98; DFW 67-1998, f. & cert. ef. 8-24-98; DFW 86-1998, f. & cert. ef. 10-28-98 thru 10-30-98; DFW 10-1999, f. & cert. ef. 2-26-99; DFW 55-1999, f. & cert. ef. 8-12-99; DFW 9-2000, f. & cert. ef. 2-25-00; DFW 42-2000, f. & cert. ef. 8-3-00; DFW 3-2001, f. & cert. ef. 2-6-01; DFW 84-2001(Temp), f. & cert. ef. 8-29-01 thru 12-31-01; DFW 89-2001(Temp), f. & cert. ef. 9-14-01 thru 12-31-01; DFW 106-2001(Temp), f. & cert. ef. 10-26-01 thru 12-31-01; DFW 15-2002(Temp), f. & cert. ef. 2-20-02 thru 8-18-02; DFW 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; DFW 12-2003, f. & cert. ef. 2-14-03; DFW 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; DFW 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; DFW 75-2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; DFW 89-2003(Temp), f. 9-8-03, cert. ef. 9-9-03 thru 12-31-03; Administrative correction 7-30-04; DFW 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-31-04; DFW 95-2004(Temp), f. 9-17-04, cert. ef. 9-19-04 thru 12-31-04; DFW 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; DFW 6-2005, f. & cert. ef. 2-14-05; DFW 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; DFW 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; DFW 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; DFW 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; DFW 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; DFW 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; DFW 76-2006(Temp), f. 8-8-06, cert. ef. 9-5-06 thru 12-31-06; DFW 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; DFW 119-2006(Temp), f. & cert. ef. 10-18-06 thru 12-31-06; Administrative correction 1-16-07; DFW 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; DFW 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative Correction 1-24-08; DFW 44-2008(Temp), f. 4-25-08, cert. ef. 4-28-08 thru 10-24-08; DFW 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; DFW 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; DFW 85-2008(Temp), f. 7-24-08, cert. ef. 8-1-08 thru 12-31-08; DFW 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; DFW 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; DFW 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; DFW 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; Administrative correction 11-19-09; DFW 29-2010(Temp), f. 3-9-10, cert. ef. 4-19-10 thru 6-12-10; DFW 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; DFW 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; DFW 57-2010(Temp), f. & cert. ef. 5-11-10 thru 7-31-10; DFW 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; DFW 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; DFW 129-2010(Temp), f. & cert. ef. 9-10-10 thru 10-31-10; Administrative correction 11-23-10; DFW 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; DFW 23-2011, f. & cert. ef. 3-21-11; DFW 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; DFW 44-2011(Temp), f. & cert. ef. 5-11-11 thru 6-10-11; Administrative correction 6-28-11; DFW 113-2011(Temp), f. 8-10-11, cert. ef. 8-15-11 thru 10-31-11; DFW 122-2011(Temp), f. 8-29-11, cert. ef. 9-19-11 thru 10-31-11; Administrative correction, 11-18-11; DFW 41-2012(Temp), f. 4-24-12, cert. ef. 4-26-12 thru 6-30-12; Administrative correction, 8-1-12; DFW 104-2012(Temp), f. 8-6-12, cert. ef. 8-13-12 thru 10-31-12; Administrative correction 11-23-12; DFW 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; DFW 34-2013(Temp), f. 5-14-13, cert. ef. 5-15-13 thru 7-31-13; Administrative correction, 8-21-13; DFW 91-2013(Temp), f. 8-22-13, cert. ef. 8-26-13 thru 10-31-13; DFW 110-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction, 11-22-13; DFW 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; DFW 35-2014(Temp), f. & cert. ef. 4-24-14 thru 7-31-14; DFW 39-2014(Temp), f. 5-7-14, cert. ef. 5-8-14 thru 7-31-14; DFW 115-2014(Temp), f. 8-5-14, cert. ef. 8-18-14 thru 10-31-14; DFW 135-2014(Temp), f. & cert. ef. 9-19-14 thru 10-31-14; Administrative correction 11-24-14; DFW 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; DFW 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; DFW 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; DFW 102-2015(Temp), f. 8-10-15, cert. ef. 8-17-15 thru 10-31-15; Administrative correction, 11-20-15; DFW 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; DFW 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; DFW 71-2016(Temp), f. 6-13-16, cert. ef. 6-16-16 thru 7-31-16; DFW 78-2016(Temp), f. 6-23-16 thru 7-31-16; DFW 85-2016(Temp), f. & cert. ef. 6-30-16 thru 7-31-16; DFW 87-2016(Temp), f. & cert. ef. 7-7-16 thru 7-31-16; DFW 92-2016(Temp), f. 7-13-16, cert. ef. 7-14-16 thru 7-31-16; DFW 101-2016(Temp), f. 8-2-16, cert. ef. 8-24-16 thru 10-31-16; DFW 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; DFW 25-2017(Temp), f. & cert. ef. 3-20-17 thru 6-13-17

Rule Caption: Tillamook Bay Commercial Cockle Clam Dive Fishery Closes.

Adm. Order No.: DFW 26-2017(Temp)

Filed with Sec. of State: 3-21-2017

Certified to be Effective: 3-24-17 thru 9-19-17

Notice Publication Date:

Rules Amended: 635-005-0355

Subject: Amended rule closes the Tillamook Bay commercial cockle clam dive fishery at 12:01 a.m. March 24, 2017 due to a projected attainment of the 185,000 pound annual harvest quota allowed under bay clam dive permits. Modifications are consistent with requirements described in OAR 635-005-0355 sections (1) and (2).

Rules Coordinator: Michelle Tate—(503) 947-6044

635-005-0355

Catch Limits

(1) In Tillamook Bay, the commercial landing cap for clams harvested by the bay clam dive fishery are 185,000 pounds for cockles, 235,000 pounds for gaper clams, and 225,000 pounds for butter clams.

(2) When any of the commercial clam landing caps specified in sections (1) of this rule are reached, the commercial clam fishery for that species in that particular estuary will close for the remainder of the calendar year.

(3) The Tillamook Bay cockle dive fishery is closed effective 12:01 a.m. Friday, March 24, 2017 due to the anticipated attainment of the 185,000 pound landing cap.

Stat. Auth.: ORS 506.036, 506.109, 506.119 & 506.129

Stats. Implemented: ORS 506.109 & 506.129

Hist.: DFW 137-2005, f. 12-7-05, cert. ef. 1-1-06, Renumbered from 635-005-0032, DFW 76-2012, f. 6-28-12, cert. ef. 7-1-12; DFW 80-2012(Temp), f. 6-28-12, cert. ef. 7-4-12 thru 12-30-12; Administrative correction, 2-1-13; DFW 54-2013(Temp), f. 6-12-13, cert. ef. 6-15-13 thru 12-11-13; Administrative correction, 12-19-13; DFW 69-2014(Temp), f. 6-12-14, cert. ef. 6-13-14 thru 12-10-14; Administrative correction, 12-18-14; DFW 11-2015(Temp), f. 2-3-15, cert. ef. 2-6-15 thru 7-31-15; Administrative correction, 8-18-15; DFW 112-2015(Temp), f. 8-20-15, cert. ef. 8-26-15 thru 12-31-15; DFW 164-2015, f. 12-9-15, cert. ef. 1-1-16; DFW 12-2016(Temp), f. 2-22-16, cert. ef. 2-23-16 thru 8-20-16; Administrative correction, 9-23-16; DFW 151-2016(Temp), f. 12-13-16, cert. ef. 12-15-16 thru 13-31-16; DFW 26-2017(Temp), f. 3-21-17, cert. ef. 3-24-17 thru 9-19-17

Rule Caption: Limited Landowner Preference Tags for Mule Deer
Adm. Order No.: DFW 27-2017

Filed with Sec. of State: 3-21-2017

Certified to be Effective: 3-21-17

Notice Publication Date: 2-1-2017

Rules Amended: 635-075-0022

Subject: Change the formula used to allocate Landowner Preference tags for mule deer in Wildlife Management Units where the mule deer population is below the population Management Objective.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-075-0022

Landowner Hunting Preference Tags for Mule Deer

(1) This rule further implements HB 2027A whereby the 2013 Legislative Assembly directed the Department through the commission to specify a formula that bases the number of landowner preference tags available for mule deer on the management, research, and habitat needs set forth in the wildlife management plan for mule deer.

(2) For purposes of this rule, the population management objectives (MOs) for each wildlife management unit that were adopted by the commission in August 2016 are considered representative of the management, research, and habitat needs for mule deer.

(3) The formula to determine the number of landowner hunting preference tags available for buck deer in a unit is as follows:

(a) In those wildlife management units where the estimated mule deer population is less than 60% of the established population management objective, the number of landowner hunting preference tags available for buck deer in that unit may be limited to five tags or 10 percent of the total controlled buck tags authorized for the public for each hunt in that unit by the commission, whichever is greater.

(b) In those wildlife management units where the estimated mule deer population is equal to or more than 60% of the established population management objective, but less than 80% of the established population management objective, the number of landowner hunting preference tags available for buck deer in that unit may be limited to five tags or 15 percent of the total controlled buck tags authorized for the public for each hunt in that unit by the commission, whichever is greater.

(c) In the Biggs, Columbia Basin, and Mount Emily wildlife management units, and in the NE Owyhee 167A hunt area, and in those wildlife management units where the estimated mule deer population is equal to or more than 80% of the established population management objective, the number of landowner hunting preference tags available for buck deer in

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that unit may be issued based upon a landowner's acreage as set forth in 635-075-0005(8).

(d) If conditions such as but not limited to disease or harsh winter weather occur, resulting in adoption of a Temporary OAR to reduce 100 Series mule deer tags by equal to or more than 25% from the number authorized by the Commission in areas listed or described in 635-075-0022(3)(c), Limited Landowner Preference mule deer tags in those areas may be limited as described in 635-075-0022(3)(b).

(4) For the purposes of OAR 635-075-0022(3), "qualified landowner" is a landowner who registered their land through the landowner preference program for the Wildlife Management Unit which includes the controlled hunt and who has a current tag distribution form filed with the Department.

(5) Landowner Hunting Preference Tag numbers for mule deer in 2016 and 2017 are listed in Table 1 and are adopted and incorporated in OAR chapter 635, division 075 by reference.

[ED. NOTE: Tables referenced are available from the agency.]
Stat. Auth.: ORS 496.012, 496.138, 496.146, 496.151 & 496.162
Stats. Implemented: ORS 496.012, 496.138, 496.146, 496.151 & 496.162
Hist.: DFW 1-2015, f. & cert. ef. 1-6-15; DFW 69-2015, f. & cert. ef. 6-11-15; DFW 81-2016, f. & cert. ef. 6-27-16; DFW 131-2016(Temp), f. 9-29-16, cert. ef. 9-30-16 thru 3-15-17; DFW 27-2017, f. & cert. ef. 3-21-17

Rule Caption: Rename the River Ranch Parcel of the Lower Deschutes Wildlife Area to "Woosley Tract"

Adm. Order No.: DFW 28-2017

Filed with Sec. of State: 3-21-2017

Certified to be Effective: 3-21-17

Notice Publication Date: 2-1-2017

Rules Amended: 635-008-0123

Subject: Rename the River Ranch parcel of the Lower Deschutes Wildlife Area to the "Woosley Tract" in recognition of the contributions of Chuck and Gail Woosley.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-008-0123

Lower Deschutes Wildlife Area (Sherman/Wasco Counties)

The Lower Deschutes Wildlife Area is open to wildlife-oriented public use compatible with the goals and objectives contained in the 2009 Lower Deschutes Wildlife Area Management Plan unless otherwise excluded or restricted by the Deschutes River Scenic Waterway Rules and the following additional rules:

(1) Open to the discharge of firearms only while hunting big game and game birds during authorized seasons or by permit; except that discharge of firearms is prohibited within the scenic waterway boundary from the third Saturday in May through August 31.

(2) Unauthorized motor vehicle use is prohibited.

(3) Horses and horseback riding are prohibited except by access permit issued by OPRD.

(4) Open fires are prohibited except as specified under the Scenic Waterway rules.

(5) Running or training of dogs is prohibited except during authorized game bird hunting seasons.

(6) Camping is prohibited on river islands, areas posted "camping prohibited" within the Deschutes River Scenic Waterway, and on state lands outside the Deschutes River Scenic Waterway in the Lower Deschutes Wildlife Area (Deschutes Scenic Waterway is an area extending 1/4-mile away from each bank of the river).

Exception: Camping is allowed on the Woosley Tract from three days prior to the opening of controlled buck deer season through February 28, and may not exceed 14 days per stay.

(7) Public access to the Woosley Tract is only allowed from the Deschutes River through adjacent Bureau of Land Management lands.

Stat. Auth.: ORS 496.012, 496.138, 496.146, 496.162
Stats. Implemented: ORS 496.012, 496.138, 496.146, 496.162
Hist.: FWC 71-1984, f. & ef. 10-12-84; FWC 53-1994, f. & cert. ef. 8-25-94; DFW 40-2009, f. & cert. ef. 4-27-09; DFW 159-2011, f. 12-14-11, cert. ef. 1-1-12; DFW 117-2014, f. & cert. ef. 8-7-14; DFW 136-2015(Temp), f. & cert. ef. 10-1-15 thru 3-28-16; DFW 158-2015, f. & cert. ef. 11-25-15; DFW 28-2017, f. & cert. ef. 3-21-17

Rule Caption: Amendment to Administrative Rules for Recreational and Commercial Fisheries in the Columbia River.

Adm. Order No.: DFW 29-2017

Filed with Sec. of State: 3-22-2017

Certified to be Effective: 4-4-17

Notice Publication Date: 3-1-2017

Rules Amended: 635-500-6705, 635-500-6715, 635-500-6720, 635-500-6730, 635-500-6735

Subject: These amended or adopted rules, as determined justified, will modify recreational and commercial fisheries in the Columbia River and tributaries. Housekeeping and technical corrections to the regulations were made to ensure consistency.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-500-6705

Guiding Principles for Columbia River Fisheries Management

(1) Promote the recovery of ESA-listed species and the conservation of wild stocks of salmon, steelhead, and sturgeon in the Columbia River.

(2) Continue leadership on fish recovery actions, including improved fish survival through the federal Columbia River hydropower system, improved habitat conditions in the tributaries and estuary, hatchery reform, reduced predation by fish, birds, and marine mammals, and harvest management that meets conservation responsibilities.

(3) Continue to meet terms of U.S. v. Oregon management agreements with Columbia River Treaty Tribes.

(4) In a manner that is consistent with conservation and does not impair the resource, seek to enhance the overall economic well-being and stability of Columbia River fisheries in Oregon.

(5) For steelhead, salmon and sturgeon, prioritize recreational fisheries in the mainstem and commercial fisheries in off-channel areas of the lower Columbia River. Toward this end:

(a) Assign mainstem recreational fisheries a sufficient share of ESA-impacts and harvestable surplus to enhance current fishing opportunity and economic benefit.

(b) Assign commercial fisheries a sufficient share of the ESA-impacts and harvestable surplus to effectively harvest fish in off-channel areas and harvest surplus fish with selective techniques in the mainstem Columbia River.

(6) Limit the use of gill nets in non-tribal commercial fisheries, other than shad and smelt, in the mainstem Columbia River to fall fisheries in Commercial Zones 4 and 5. Limit other non-tribal gill net use to off-channel areas only.

(7) Enhance the economic benefits of off-channel commercial fisheries, in a manner consistent with conservation and wild stock recovery objectives. Enhancements include:

(a) Providing additional hatchery fish for release in off-channel areas by shifting currently available production, and where possible providing new production for release in off-channel areas, emphasizing complementary conservation benefits in tributaries.

(b) Expanding existing seasons and boundaries in off-channel areas and/or establishing new off-channel areas, allowing increased harvest in areas where the likelihood of impacting ESA-listed stocks is lower than the mainstem.

(8) Develop and implement selective-fishing gear and techniques for commercial mainstem fisheries to optimize conservation and economic benefits consistent with mainstem recreational objectives, combined with incentives to commercial fishers to expand the development and implementation of these gear and techniques.

(9) Maintain consistent and concurrent policies between Oregon and Washington related to management of non-tribal Columbia River fisheries, to ensure orderly fisheries as well as the sharing of investments and benefits.

(10) To maximize economic return, develop a program that seeks to implement Marine Stewardship Council or other certification of commercial salmon and sturgeon fisheries in the Columbia River as sustainably managed fisheries.

Stat. Auth.: ORS 496.138, 496.146 & 506.119

Stats. Implemented: ORS 506.109 & 506.129

Hist.: DFW 152-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 8-2017(Temp), f. & cert. ef. 2-2-17 thru 7-31-17; DFW 4-2017, f. & cert. ef. 1-25-17; DFW 29-2017, f. 3-22-17, cert. ef. 4-4-17

635-500-6715

Spring Chinook

(1) Transition Period (2013-January 31, 2017).

(a) In 2013, assign 65%, then 70% of the ESA-impact for upriver spring Chinook stocks to mainstem recreational fisheries.

(b) In 2013, assign 35%, then 30% to off-channel and mainstem commercial fisheries.

(2) Long Term (February 1, 2017 and Beyond).

(a) Assign 80% of the ESA-impact to mainstem recreational fisheries. If the recreational allocation, including areas upstream of Bonneville Dam

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and in the Snake River, is unlikely to be fully used, the unused portion of that allocation shall be transferred to the commercial fishery.

(b) Assign 20% to commercial fisheries. Mainstem commercial fisheries may occur only after the run size update and will use tangle nets or other selective gear, if developed. Unused commercial impacts will not be transferred to recreational fisheries.

Stat. Auth.: ORS 496.138, 496.146 & 506.119
Stats. Implemented: ORS 506.109 & 506.129
Hist.: DFW 152-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 147-2016, f. 12-7-16, cert. ef. 12-15-16; DFW 4-2017, f. & cert. ef. 1-25-17; DFW 29-2017, f. 3-22-17, cert. ef. 4-4-17

635-500-6720

Summer Chinook

(1) Transition Period (2013–April 4, 2017).

(a) In 2013-14, assign 60%, then 70% of the harvestable surplus available for use downstream from Priest Rapids Dam to mainstem recreational fisheries.

(b) In 2013-14, assign 40%, then 30% to off-channel and mainstem commercial fisheries.

(2) Long Term (April 5, 2017 and Beyond).

(a) Assign 80% of the harvestable surplus available for use downstream from Priest Rapids Dam to mainstem recreational fisheries.

(b) Assign 20% of the harvestable surplus available for use downstream from Priest Rapids Dam to off-channel and mainstem commercial fisheries using gears other than gill nets. Unused commercial harvest will not be transferred to recreational fisheries.

Stat. Auth.: ORS 496.138, 496.146 & 506.119
Stats. Implemented: ORS 506.109 & 506.129
Hist.: DFW 152-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 147-2016, f. 12-7-16, cert. ef. 12-15-16; DFW 4-2017, f. & cert. ef. 1-25-17; DFW 29-2017, f. 3-22-17, cert. ef. 4-4-17

635-500-6730

Tule Fall Chinook

(1) Transition Period (2013–April 4, 2017).

(a) Assign no more than 70% of the ESA-impact for lower Columbia River Tule fall Chinook to mainstem recreational fisheries.

(b) Assign not less than 30% to off-channel commercial fisheries, mainstem commercial fisheries that target Upriver Bright and Lower River Hatchery Fall Chinook.

(2) Long Term (April 5, 2017 and Beyond).

(a) Assign no more than 70% of the remaining ESA-impact for lower Columbia River Tule Fall Chinook to mainstem recreational fisheries.

(b) Assign not less than 30% of the remaining ESA-impact for lower Columbia River Tule Fall Chinook to off-channel commercial fisheries and mainstem commercial fisheries that target Upriver Bright and Lower River Hatchery Fall Chinook and hatchery coho. Use up to 2% of commercial ESA impacts of the most constraining stock for use in lower river commercial fisheries using alternative gears. The Department shall approve alternative gears for use.

Stat. Auth.: ORS 496.138, 496.146 & 506.119
Stats. Implemented: ORS 506.109 & 506.129
Hist.: DFW 152-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 147-2016, f. 12-7-16, cert. ef. 12-15-16; DFW 4-2017, f. & cert. ef. 1-25-17; DFW 29-2017, f. 3-22-17, cert. ef. 4-4-17

635-500-6735

Upriver Bright Fall Chinook

(1) Transition Period (2013–April 4, 2017).

(a) Assign no more than 70% of the ESA-impact for Snake River Wild Fall Chinook to mainstem recreational fisheries.

(b) Assign not less than 30% to off-channel and mainstem commercial fisheries. Provide additional mainstem commercial harvest when recreational fishery objectives (OAR 635-500-6760) are expected to be met.

(2) Long Term (April 5, 2017 and Beyond).

(a) Assign no more than 70% of the ESA-impact for Snake River Wild Fall Chinook to mainstem recreational fisheries.

(b) Assign not less than 30% to off-channel and mainstem commercial fisheries. Provide additional mainstem commercial harvest when recreational fishery objectives (OAR 635-500-6760) are expected to be met. Use up to 2% of commercial ESA impacts of the most constraining stock for use in lower river commercial fisheries using alternative gears. The Department shall approve alternative gears for use.

Stat. Auth.: ORS 496.138, 496.146 & 506.119
Stats. Implemented: ORS 506.109 & 506.129
Hist.: DFW 152-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 147-2016, f. 12-7-16, cert. ef. 12-15-16; DFW 4-2017, f. & cert. ef. 1-25-17; DFW 29-2017, f. 3-22-17, cert. ef. 4-4-17

Rule Caption: Requirements to Purchase Fishing Licenses, Tags, and Endorsements Suspended for Free Fishing Weekend

Adm. Order No.: DFW 30-2017(Temp)

Filed with Sec. of State: 3-22-2017

Certified to be Effective: 4-22-17 thru 10-18-17

Notice Publication Date:

Rules Amended: 635-011-0102, 635-011-0104

Subject: These amended rules allow anglers to participate in fisheries statewide without the need to purchase the licenses, tags, and endorsements usually required to fish in Oregon during the free fishing weekend scheduled for Saturday, April 22 through Sunday April 23, 2017.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-011-0102

Free Fishing Weekend

(1) The first full weekend (Saturday and Sunday) in the month of June shall be designated as an annual free fishing weekend. No angling licenses or tags shall be required for the taking of fish for personal use in Oregon waters on this weekend.

(2) The following days shall be designated as free fishing days; April 22 and 23, 2017. No angling licenses or tags shall be required for the taking of fish for personal use in Oregon waters on these days.

Stat. Auth.: ORS 183.335
Other Auth.: Section 2, Chapter 344, Oregon Laws 1989; HB 2221, 1995 Legislature
Stats. Implemented: Sec. 2, Ch. 344, OL 1989; HB 2221, 1995
Hist.: FWC 103-1989, f. 9-29-89, cert. ef. 1-1-90; FWC 92-1995, f. 12-8-95, cert. ef. 12-15-95; DFW 70-2001, f. & cert. ef. 8-10-01; DFW 149-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 141-2016(Temp), f. 10-31-16, cert. ef. 11-23-16 thru 1-1-17; DFW 30-2017(Temp), f. 3-22-17, cert. ef. 4-22-17 thru 10-18-17

635-011-0104

Licenses, Tags, and Permits

(1) Hatchery Salmon and Steelhead Harvest Tag Requirements:

(a) Persons holding an annual angling license and an annual angling harvest tag may purchase Hatchery Salmon and Steelhead Harvest Tags. There is no limit on the number of Hatchery Salmon and Steelhead Harvest Tags an angler may purchase per year. The purchase of each tag entitles the angler to take a combined total of 10 hatchery salmon or steelhead;

(b) Only adipose or otherwise fin-clipped adult salmon or adipose fin-clipped steelhead may be recorded on the Hatchery Salmon and Steelhead Harvest Tag;

(c) A valid annual angling license and a valid annual angling harvest tag must be in possession while fish validated on the Hatchery Salmon and Steelhead Harvest Tag are in angler's possession. All tags purchased must be in angler's possession while angling for salmon or steelhead;

(d) Purchase of a valid annual angling license and harvest tag is not required during designated free fishing weekend or designated free fishing days, where every angler is considered as having a valid annual angling license and a valid annual angling harvest tag. Fish must be recorded immediately upon removal from the water and fish must be recorded in the chronological order caught. The angler who landed the fish must record the fish on his or her tag irrespective of who hooked the fish; and

(e) Hatchery Salmon and Steelhead Harvest Tags should be returned to ODFW upon expiration.

(2) Columbia River Basin Endorsement:

(a) The Columbia River Basin is defined as: The mainstem Columbia River from Buoy 10 upstream to include all rivers and their tributaries that drain into the mainstem Columbia River.

(b) Beginning January 1, 2014 a valid Columbia River Basin Endorsement must be in possession while angling for salmon, steelhead, or sturgeon in the Columbia River Basin except during free fishing weekend or designated free fishing days where every angler is considered as having a valid Columbia River Basin Endorsement.

(c) The fee for the Columbia River Basin Endorsement, when purchased in conjunction with an annual license is \$9.75, in addition to fees as described in ORS 497.121 and 497.123.

(d) The fee for the Columbia River Basin Endorsement when purchased separately is \$9.75 (plus a \$2.00 agent fee).

(e) The fee for the Columbia River Basin Endorsement, when purchased in conjunction with a daily license is \$1.00 per each day, in addition to those fees as described in ORS 497-121.

(f) Purchase of a Columbia River Basin Endorsement is not required for free fishing weekend or other designated free fishing days.

(g) No fee will be charged for a Columbia River Basin Endorsement for an angler(s) in possession of:

(A) A resident disabled veteran, resident pioneer, resident and non-resident youth under 12 license; or

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(B) A Permanent Wheel-chair Angling License, a Permanent Blind Angler License, or a Permanent Senior.

Stat. Auth.: ORS 496.138, 496.146, 497.079, 497.121, 497.123, 506.119

Other Auth.: SB 247 (2015)

Stats. Implemented: ORS 496.162, 497.079, 506.129

Hist.: DFW 101-2001, f. & cert. ef. 10-23-01; DFW 125-2013, f. 10-30-13, cert. ef. 11-1-13; DFW 128-2013(Temp), 11-18-13, cert. ef. 12-1-13 thru 12-31-13; DFW 133-2013, f. & cert. ef. 12-9-13; DFW 49-2014(Temp), f. 5-27-14, cert. ef. 6-1-14 thru 6-30-14; Administrative correction, 7-24-14; DFW 165-2014, f. 12-18-14, cert. ef. 1-1-15; DFW 139-2015, f. 10-14-15, cert. ef. 1-1-16; DFW 141-2016(Temp), f. 10-31-16, cert. ef. 11-23-16 thru 1-1-17; DFW 30-2017(Temp), f. 3-22-17, cert. ef. 4-22-17 thru 10-18-17

Rule Caption: 2017 White Sturgeon Recreational Fishery Closure in the John Day Pool

Adm. Order No.: DFW 31-2017(Temp)

Filed with Sec. of State: 3-28-2017

Certified to be Effective: 3-30-17 thru 9-25-17

Notice Publication Date:

Rules Amended: 635-023-0095

Subject: This amended rule closes the recreational white sturgeon retention fishery in the area from the John Day Dam upstream to McNary Dam (John Day Pool), including adjacent tributaries effective 12:01 a.m. Thursday March 30, 2017. The annual harvest guideline for the John Day Pool has been attained. Revisions are consistent with emergency action taken March 27, 2017 by the Departments of Fish and Wildlife for the States of Oregon and Washington.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-023-0095

Sturgeon Season

(1) The 2017 Oregon Sport Fishing Regulations provide requirements for the Columbia River Zone and the Snake River Zone. However, additional regulations may be adopted in this rule division from time to time, and, to the extent of any inconsistency, they supersede the 2017 Oregon Sport Fishing Regulations.

(2) Retention of sturgeon in Zone 6 of the mainstem Columbia River is prohibited as follows:

(a) From The Dalles Dam upstream to John Day Dam (The Dalles Pool), including adjacent tributaries, beginning 12:01 a.m. Saturday March 25, 2017.

(b) From Bonneville Dam upstream to The Dalles Dam (Bonneville Pool), including adjacent tributaries, beginning 12:01 Saturday March 25, 2017.

(c) From the John Day Dam upstream to McNary Dam (John Day Pool) including adjacent tributaries, beginning 12:01 a.m. Thursday March 30, 2017.

Stat. Auth.: ORS 183.325, 506.109 & 506.119

Stats. Implemented: ORS 506.129 & 507.030

Hist.: DFW 129-2004(Temp), f. 12-23-04, cert. ef. 1-1-05 thru 2-28-05; DFW 6-2005, f. & cert. ef. 2-14-05; DFW 22-2005(Temp), f. 4-1-05, cert. ef. 4-30-05 thru 7-31-05; DFW 50-2005(Temp), f. 6-3-05, cert. ef. 6-11-05 thru 11-30-05; DFW 60-2005(Temp), f. 6-21-05, cert. ef. 6-24-05 thru 12-21-05; DFW 65-2005(Temp), f. 6-30-05, cert. ef. 7-10-05 thru 12-31-05; DFW 76-2005(Temp), f. 7-14-05, cert. ef. 7-18-05 thru 12-31-05; DFW 136-2005, f. 12-7-05, cert. ef. 1-1-06; DFW 145-2005(Temp), f. 12-21-05, cert. ef. 1-1-06 thru 3-31-06; DFW 5-2006, f. & cert. ef. 2-15-06; DFW 19-2006(Temp), f. 4-6-06, cert. ef. 4-8-06 thru 7-31-06; DFW 54-2006(Temp), f. 6-29-06, cert. ef. 7-1-06 thru 12-27-06; DFW 62-2006(Temp), f. 7-13-06, cert. ef. 7-24-06 thru 12-31-06; DFW 79-2006, f. 8-11-06, cert. ef. 1-1-07; DFW 131-2006(Temp), f. 12-20-06, cert. ef. 1-1-07 thru 6-29-07; DFW 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; DFW 9-2007, f. & cert. ef. 2-14-07; DFW 20-2007(Temp), f. 3-26-07, cert. ef. 3-28-07 thru 7-30-07; DFW 38-2007(Temp), f. & cert. ef. 5-31-07 thru 11-26-07; DFW 59-2007(Temp), f. 7-18-07, cert. ef. 7-29-07 thru 12-31-07; DFW 75-2007(Temp), f. 8-17-07, cert. ef. 8-18-07 thru 12-31-07; DFW 102-2007(Temp), f. 9-28-07, cert. ef. 10-1-07 thru 12-31-07; DFW 135-2007(Temp), f. 12-28-07, cert. ef. 1-1-08 thru 6-28-08; DFW 136-2007, f. 12-31-07, cert. ef. 1-1-08; DFW 8-2008, f. & cert. ef. 2-11-08; DFW 23-2008(Temp), f. 3-12-08, cert. ef. 3-15-08 thru 9-10-08; DFW 28-2008(Temp), f. 3-24-08, cert. ef. 3-26-08 thru 9-10-08; DFW 72-2008(Temp), f. 6-30-08, cert. ef. 7-10-08 thru 12-31-08; DFW 78-2008(Temp), f. 7-9-08, cert. ef. 7-12-08 thru 12-31-08; DFW 86-2008(Temp), f. & cert. ef. 7-25-08 thru 12-31-08; DFW 148-2008(Temp), f. 12-19-08, cert. ef. 1-1-09 thru 6-29-09; DFW 156-2008, f. 12-31-08, cert. ef. 1-1-09; DFW 18-2009, f. & cert. ef. 2-26-09; DFW 33-2009(Temp), f. 4-2-09, cert. ef. 4-13-09 thru 10-9-09; DFW 63-2009(Temp), f. 6-3-09, cert. ef. 6-6-09 thru 10-9-09; DFW 83-2009(Temp), f. 7-8-09, cert. ef. 7-9-09 thru 12-31-09; DFW 86-2009(Temp), f. 7-22-09, cert. ef. 7-24-09 thru 12-31-09; DFW 144-2009, f. 12-8-09, cert. ef. 1-1-10; DFW 13-2010(Temp), f. 2-16-10, cert. ef. 2-21-10 thru 7-31-10; DFW 19-2010(Temp), f. 2-26-10, cert. ef. 3-1-10 thru 8-27-10; DFW 34-2010, f. 3-16-10, cert. ef. 4-1-10; DFW 49-2010(Temp), f. 4-27-10, cert. ef. 4-29-10 thru 7-31-10; DFW 50-2010(Temp), f. 4-29-10, cert. ef. 5-6-10 thru 11-1-10; DFW 88-2010(Temp), f. 6-25-10, cert. ef. 6-26-10 thru 7-31-10; DFW 91-2010(Temp), f. 6-29-10, cert. ef. 8-1-10 thru 12-31-10; DFW 99-2010(Temp), f. 7-13-10, cert. ef. 7-15-10 thru 12-31-10; DFW 165-2010(Temp), f. 12-28-10, cert. ef. 1-1-11 thru 6-29-11; DFW 171-2010, f. 12-30-10, cert. ef. 1-1-11; DFW 11-2011(Temp), f. 2-10-11, cert. ef. 2-11-11 thru 7-31-11; DFW 23-2011, f. & cert. ef. 3-21-11; DFW 26-2011(Temp), f. 4-5-11, cert. ef. 4-10-11 thru 9-30-11; DFW 74-2011(Temp), f. 6-24-11, cert. ef. 6-27-11 thru 7-31-11; DFW 87-2011(Temp), f. 7-8-11, cert. ef. 7-9-11 thru 7-31-11; DFW 96-2011(Temp), f. 7-20-11, cert. ef. 7-30-11 thru

12-31-11; DFW 129-2011(Temp), f. 9-15-11, cert. ef. 9-30-11 thru 12-31-11; DFW 163-2011, f. 12-27-11, cert. ef. 1-1-12; DFW 1-2012(Temp), f. & cert. ef. 1-5-12 thru 7-2-12; DFW 10-2012, f. & cert. ef. 2-7-12; DFW 16-2012(Temp), f. 2-14-12, cert. ef. 2-18-12 thru 7-31-12; DFW 44-2012(Temp), f. 5-1-12, cert. ef. 5-20-12 thru 7-31-12; DFW 73-2012(Temp), f. 6-29-12, cert. ef. 7-1-12 thru 8-31-12; DFW 97-2012(Temp), f. 7-30-12, cert. ef. 8-1-12 thru 12-31-12; DFW 129-2012(Temp), f. 10-3-12, cert. ef. 10-20-12 thru 12-31-12; DFW 140-2012(Temp), f. 10-31-12, cert. ef. 11-4-12 thru 12-31-12; DFW 152-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 154-2012(Temp), f. 12-28-12, cert. ef. 1-1-13 thru 2-28-13; DFW 12-2013(Temp), f. 2-12-13, cert. ef. 2-28-13 thru 7-31-13; DFW 23-2013(Temp), f. 3-20-13, cert. ef. 4-1-13 thru 9-27-13; DFW 47-2013(Temp), f. 5-30-13, cert. ef. 6-14-13 thru 9-30-13; DFW 59-2013(Temp), f. 6-19-13, cert. ef. 6-21-13 thru 10-31-13; DFW 64-2013(Temp), f. 6-27-13, cert. ef. 6-29-13 thru 10-31-13; DFW 104-2013(Temp), f. 9-13-13, cert. ef. 10-19-13 thru 12-31-13; DFW 126-2013(Temp), f. 10-31-13, cert. ef. 11-12-13 thru 12-31-13; DFW 135-2013(Temp), f. 12-12-13, cert. ef. 1-1-14 thru 1-31-14; DFW 137-2013, f. 12-19-13, cert. ef. 1-1-14; DFW 5-2014(Temp), f. 1-30-14, cert. ef. 2-1-14 thru 7-30-14; DFW 14-2014(Temp), f. 2-20-14, cert. ef. 2-24-14 thru 7-31-14; DFW 27-2014(Temp), f. 3-28-14, cert. ef. 5-1-14 thru 7-31-14; DFW 56-2014(Temp), f. 6-9-14, cert. ef. 6-13-14 thru 7-31-14; DFW 87-2014(Temp), f. 7-2-14, cert. ef. 7-11-14 thru 12-31-14; DFW 94-2014(Temp), f. & cert. ef. 7-14-14 thru 12-31-14; DFW 165-2014, f. 12-18-14, cert. ef. 1-1-15; DFW 166-2014(Temp), f. 12-18-14, cert. ef. 1-1-15 thru 3-1-15; Administrative correction, 3-23-15; DFW 41-2015(Temp), f. & cert. ef. 5-12-15 thru 7-31-15; DFW 54-2015(Temp), f. 5-28-15, cert. ef. 6-3-15 thru 7-31-15; DFW 89-2015(Temp), f. 7-16-15, cert. ef. 7-18-15 thru 9-30-15; Temporary suspended by DFW 122-2015(Temp), f. 8-31-15, cert. ef. 9-1-15 thru 9-30-15; Administrative correction, 10-22-15; DFW 167-2015, f. 12-29-15, cert. ef. 1-1-16; DFW 7-2016(Temp), f. 1-28-16, cert. ef. 2-8-16 thru 8-05-16; DFW 36-2016(Temp), f. 4-26-16, cert. ef. 5-1-16 thru 7-31-16; DFW 42-2016(Temp), f. 4-27-16, cert. ef. 4-30-16 thru 7-31-16; DFW 56-2016(Temp), f. 5-25-16, cert. ef. 5-29-16 thru 11-24-16; DFW 79-2016(Temp), f. 6-23-16, cert. ef. 6-30-16 thru 12-26-16; DFW 153-2016, f. 12-28-16, cert. ef. 1-1-17; DFW 24-2017(Temp), f. 3-14-17, cert. ef. 3-25-17 thru 9-20-17; DFW 31-2017(Temp), f. 3-28-17, cert. ef. 3-30-17 thru 9-25-17

Rule Caption: Extend 2017 Winter Commercial Seasons in the Select Areas of the Columbia River

Adm. Order No.: DFW 32-2017(Temp)

Filed with Sec. of State: 3-29-2017

Certified to be Effective: 3-30-17 thru 9-15-17

Notice Publication Date:

Rules Amended: 635-042-0145, 635-042-0160, 635-042-0170, 635-042-0180

Subject: These amended rules extend the 2017 winter commercial salmon seasons for the Deep River, Youngs Bay, Blind Slough/Knapapa Slough and Tongue Point/South Channel Select Areas. Additional authorized fishing periods in these Select Area sites is set to begin March 30. Modifications are consistent with action taken March 28, 2017 by the Departments of Fish & Wildlife for the States of Oregon and Washington at a meeting of the Columbia River Compact.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-042-0145

Youngs Bay Salmon Season

(1) Salmon and shad may be taken for commercial purposes in those waters of Youngs Bay.

(a) The open fishing periods are established in three segments categorized as the winter fishery, subsection (1)(a)(A); the spring fishery, subsection (1)(a)(B); and summer fishery, subsection (1)(a)(C), as follows:

(A) Winter Season:

(i) Youngs Bay from Highway 101 Bridge upstream to the upper boundary marker at the confluence of the Klaskanine and Youngs River, including the lower Walluski River upstream to the Highway 202 Bridge; 8:00 a.m. to noon Thursday March 30, 2017. Those waters southerly of the alternate Highway 101 Bridge (Lewis and Clark River) are closed.

(ii) Youngs Bay from the Alternate Highway 101 Bridge upstream to the upper boundary markers at the confluence of the Klaskanine and Youngs rivers, including the lower Walluski River upstream to the Highway 202 Bridge; Noon to 4:00 p.m. Monday April 3, 2017

(iii) Youngs Bay (Walluski Area) from the first powerlines downstream of the Walluski River upstream to the confluence of the Youngs and Klaskanine rivers; 4:00 p.m. to 8:00 p.m. Thursday April 6, 2017.

(B) Spring Season: Thursday April 20 from 2 p.m. to 6 p.m. (4 hours), Tuesday and Thursday nights from April 25 through April 28 from 7 p.m. to 7 a.m. (12 hours), Monday May 1 from 10 a.m. to Tuesday May 2 4 a.m. (18 hours), Wednesday May 3 from 9 a.m. to 9 p.m. (12 hours), Thursday May 4 from 10 a.m. to Friday May 5 a.m. (18 hours), noon Monday through noon Friday (4 days/week) from May 8 through June 9 and noon Monday through noon Thursday (3 days) from June 12 through June 15.

(C) Summer Season: Noon Monday through Noon Friday (4 days/week) from June 19 through June 30, Noon Monday July 3 through Noon Thursday July 6 (3 days), and Noon Tuesday through Noon Thursday (2 days/week) from July 11 through July 27.

(b) The fishing areas for the winter, spring and summer fisheries are:

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(A) During the winter season, the Youngs Bay open fishing areas are described in (1)(a)(A)(i) through (1)(a)(A)(iii) above.

(B) During the spring and summer seasons, the Youngs Bay open fishing area is identified as the waters of Youngs Bay from the Highway 101 Bridge upstream to the upper boundary markers at the confluence of the Klaskanine and Youngs rivers, and includes the lower Walluski River upstream to the Highway 202 Bridge and the lower Lewis and Clark River upstream to the overhead power lines immediately upstream of Barrett Slough.

(2) Gill nets may not exceed 1,500 feet (250 fathoms) in length and weight may not exceed two pounds per any fathom except the use of additional weights and/or anchors attached directly to the headline is allowed upstream of markers located approximately 200 yards upstream of the mouth of the Walluski River during all Youngs Bay commercial fisheries and upstream of the alternate Highway 101 Bridge in the Lewis and Clark River. A red cork must be placed on the corkline every 25 fathoms as measured from the first mesh of the net. Red corks at 25-fathom intervals must be in color contrast to the corks used in the remainder of the net.

(a) It is unlawful to use a gill net having a mesh size that is less than 7-inches during the winter season. It is unlawful to use a gill net having a mesh size that is more than 9.75-inches during the spring and summer seasons. Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(3) Retention and sale of sturgeon is prohibited.

(4) Non-resident commercial fishing and boat licenses are not required for Washington fishers participating in Youngs Bay commercial fisheries. A valid fishing and boat license issued by the state of Washington is considered adequate for participation in this fishery. The open area for non-resident commercial fishers includes all areas open for commercial fishing.

Stat. Auth.: ORS 183.325, 506.109 & 506.119

Stats. Implemented: ORS 506.129 & 507.030

Hist.: FWC 32-1979, f. & ef. 8-22-79; FWC 28-1980, f. & ef. 6-23-80; FWC 42-1980(Temp), f. & ef. 8-22-80; FWC 30-1981, f. & ef. 8-14-81; FWC 42-1981(Temp), f. & ef. 11-5-81; FWC 54-1982, f. & ef. 8-17-82; FWC 37-1983, f. & ef. 8-18-83; FWC 61-1983(Temp), f. & ef. 10-19-83; FWC 42-1984, f. & ef. 8-20-84; FWC 39-1985, f. & ef. 8-15-85; FWC 37-1986, f. & ef. 8-11-86; FWC 72-1986(Temp), f. & ef. 10-31-86; FWC 64-1987, f. & ef. 8-7-87; FWC 73-1988, f. & cert. ef. 8-19-88; FWC 55-1989(Temp), f. 8-7-89, cert. ef. 8-20-89; FWC 82-1990(Temp), f. 8-14-90, cert. ef. 8-19-90; FWC 86-1991, f. 8-7-91, cert. ef. 8-18-91; FWC 123-1991(Temp), f. & cert. ef. 10-21-91; FWC 30-1992(Temp), f. & cert. ef. 4-27-92; FWC 35-1992(Temp), f. 5-22-92, cert. ef. 5-25-92; FWC 74-1992(Temp), f. 8-10-92, cert. ef. 8-16-92; FWC 28-1993(Temp), f. & cert. ef. 4-26-93; FWC 48-1993, f. 8-6-93, cert. ef. 8-9-93; FWC 21-1994(Temp), f. 4-22-94, cert. ef. 4-25-94; FWC 51-1994, f. 8-19-94, cert. ef. 8-22-94; FWC 64-1994(Temp), f. 9-14-94, cert. ef. 9-15-94; FWC 66-1994(Temp), f. & cert. ef. 9-20-94; FWC 27-1995, f. 3-29-95, cert. ef. 4-1-95; FWC 48-1995(Temp), f. & cert. ef. 6-5-95; FWC 66-1995, f. 8-22-95, cert. ef. 8-27-95; FWC 69-1995, f. 8-25-95, cert. ef. 8-27-95; FWC 8-1995, f. 2-28-96, cert. ef. 3-1-96; FWC 37-1996(Temp), f. 6-11-96, cert. ef. 6-12-96; FWC 41-1996, f. & cert. ef. 8-12-96; FWC 45-1996(Temp), f. 8-16-96, cert. ef. 8-19-96; FWC 54-1996(Temp), f. & cert. ef. 9-23-96; FWC 4-1997, f. & cert. ef. 1-30-97; FWC 47-1997, f. & cert. ef. 8-15-97; FWC 8-1998(Temp), f. & cert. ef. 2-5-98 thru 2-28-98; FWC 14-1998, f. & cert. ef. 3-3-98; FWC 18-1998(Temp), f. 3-9-98, cert. ef. 3-11-98 thru 3-31-98; FWC 60-1998(Temp), f. & cert. ef. 8-7-98 thru 8-21-98; FWC 67-1998, f. & cert. ef. 8-24-98; FWC 10-1999, f. & cert. ef. 2-26-99; FWC 52-1999(Temp), f. & cert. ef. 8-2-99 thru 8-6-99; FWC 55-1999, f. & cert. ef. 8-12-99; FWC 9-2000, f. & cert. ef. 2-25-00; FWC 42-2000, f. & cert. ef. 8-3-00; FWC 3-2001, f. & cert. ef. 2-6-01; FWC 66-2001(Temp), f. 8-2-01, cert. ef. 8-6-01 thru 8-14-01; FWC 76-2001(Temp), f. & cert. ef. 8-20-01 thru 10-31-01; FWC 106-2001(Temp), f. & cert. ef. 10-26-01 thru 12-31-01; FWC 15-2002(Temp), f. & cert. ef. 2-20-02 thru 8-18-02; FWC 82-2002(Temp), f. 8-5-02, cert. ef. 8-7-02 thru 9-1-02; FWC 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; FWC 12-2003, f. & cert. ef. 2-14-03; FWC 17-2003(Temp), f. 2-27-03, cert. ef. 3-1-03 thru 8-1-03; FWC 32-2003(Temp), f. & cert. ef. 4-23-03 thru 8-1-03; FWC 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; FWC 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; FWC 37-2003(Temp), f. & cert. ef. 5-7-03 thru 10-1-03; FWC 75-2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; FWC 89-2003(Temp), f. 9-8-03, cert. ef. 9-9-03 thru 12-31-03; FWC 11-2004, f. & cert. ef. 2-13-04; FWC 19-2004(Temp), f. & cert. ef. 3-12-04 thru 3-31-04; FWC 22-2004(Temp), f. & cert. ef. 3-18-04 thru 3-31-04; FWC 28-2004(Temp), f. 4-8-04, cert. ef. 4-12-04 thru 4-15-04; FWC 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; FWC 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; FWC 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-31-04; FWC 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; FWC 6-2005, f. & cert. ef. 2-14-05; FWC 15-2005(Temp), f. & cert. ef. 3-10-05 thru 7-31-05; FWC 18-2005(Temp), f. & cert. ef. 3-15-05 thru 3-21-05; Administrative correction 4-20-05; FWC 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; FWC 28-2005(Temp), f. & cert. ef. 4-28-05 thru 6-16-05; FWC 37-2005(Temp), f. & cert. ef. 5-5-05 thru 10-16-05; FWC 40-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; FWC 46-2005(Temp), f. 5-17-05, cert. ef. 5-18-05 thru 10-16-05; FWC 73-2005(Temp), f. 7-8-05, cert. ef. 7-11-05 thru 7-31-05; FWC 77-2005(Temp), f. 7-14-05, cert. ef. 7-18-05 thru 7-31-05; FWC 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; FWC 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; FWC 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; FWC 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; FWC 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; FWC 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; FWC 5-2006, f. & cert. ef. 2-15-06; FWC 14-2006(Temp), f. 3-15-06, cert. ef. 3-16-06 thru 7-27-06; FWC 15-2006(Temp), f. & cert. ef. 3-23-06 thru 7-27-06; FWC 17-2006(Temp), f. 3-29-06, cert. ef. 3-30-06 thru 7-27-06; FWC 29-2006(Temp), f. & cert. ef. 5-16-06 thru 7-31-06; FWC 32-2006(Temp), f. & cert. ef. 5-23-06 thru 7-31-06; FWC 35-2006(Temp), f. & cert. ef. 5-30-06 thru 7-31-06; FWC 52-2006(Temp), f. & cert. ef. 6-28-06 thru 7-27-06;

DFW 73-2006(Temp), f. 8-1-06, cert. ef. 8-2-06 thru 12-31-06; DFW 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; DFW 119-2006(Temp), f. & cert. ef. 10-18-06 thru 12-31-06; Administrative correction 1-16-07; DFW 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; DFW 9-2007, f. & cert. ef. 2-14-07; DFW 13-2007(Temp), f. & cert. ef. 3-6-07 thru 9-1-07; DFW 16-2007(Temp), f. & cert. ef. 3-14-07 thru 9-9-07; DFW 25-2007(Temp), f. 4-17-07, cert. ef. 4-18-07 thru 7-26-07; DFW 45-2007(Temp), f. 6-15-07, cert. ef. 6-25-07 thru 7-31-07; DFW 50-2007(Temp), f. 6-29-07, cert. ef. 7-4-07 thru 7-31-07; DFW 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; DFW 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative correction 1-24-08; DFW 6-2008(Temp), f. 1-29-08, cert. ef. 1-31-08 thru 7-28-08; DFW 16-2008(Temp), f. 2-26-08, cert. ef. 3-2-08 thru 8-28-08; DFW 30-2008(Temp), f. 3-27-08, cert. ef. 3-30-08 thru 8-28-08; DFW 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; DFW 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; DFW 85-2008(Temp), f. 7-24-08, cert. ef. 8-1-08 thru 12-31-08; DFW 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; DFW 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; DFW 24-2009(Temp), f. 3-10-09, cert. ef. 3-11-09 thru 7-31-09; DFW 49-2009(Temp), f. 5-14-09, cert. ef. 5-17-09 thru 7-31-09; DFW 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; DFW 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; Administrative correction 11-19-09; DFW 17-2010(Temp), f. & cert. ef. 2-22-10 thru 7-31-10; DFW 20-2010(Temp), f. & cert. ef. 2-26-10 thru 7-31-10; DFW 30-2010(Temp), f. 3-11-10, cert. ef. 3-14-10 thru 7-31-10; DFW 35-2010(Temp), f. 3-23-10, cert. ef. 3-24-10 thru 7-31-10; DFW 40-2010(Temp), f. & cert. ef. 4-1-10 thru 7-31-10; DFW 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; DFW 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; DFW 57-2010(Temp), f. & cert. ef. 5-11-10 thru 7-31-10; DFW 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; DFW 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; DFW 129-2010(Temp), f. & cert. ef. 9-10-10 thru 10-31-10; Administrative correction 11-23-10; DFW 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; DFW 23-2011, f. & cert. ef. 3-21-11; DFW 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; DFW 35-2011(Temp), f. & cert. ef. 4-28-11 thru 7-29-11; DFW 46-2011(Temp), f. & cert. ef. 5-12-11 thru 7-29-11; DFW 52-2011(Temp), f. & cert. ef. 5-18-11 thru 7-29-11; DFW 76-2011(Temp), f. 6-24-11, cert. ef. 6-27-11 thru 7-29-11; DFW 106-2011(Temp), f. 8-2-11, cert. ef. 8-3-11 thru 10-31-11; DFW 121-2011(Temp), f. 8-29-11, cert. ef. 9-5-11 thru 10-31-11; Administrative correction 11-18-11; DFW 12-2012(Temp), f. 2-8-12, cert. ef. 2-12-12 thru 7-31-12; DFW 24-2012(Temp), f. 3-15-12, cert. ef. 3-18-12 thru 7-31-12; DFW 26-2012(Temp), f. 3-20-12, cert. ef. 3-21-12 thru 7-31-12; DFW 27-2012(Temp), f. 3-27-12, cert. ef. 3-29-12 thru 7-31-12; DFW 28-2012(Temp), f. 3-30-12, cert. ef. 4-1-12 thru 7-31-12; DFW 30-2012(Temp), f. 4-4-12, cert. ef. 4-5-12 thru 7-31-12; DFW 36-2012(Temp), f. 4-16-12, cert. ef. 4-19-12 thru 7-31-12; DFW 82-2012(Temp), f. 6-29-12, cert. ef. 7-2-12 thru 7-31-12; DFW 96-2012(Temp), f. 7-30-12, cert. ef. 8-1-12 thru 10-31-12; Administrative correction 11-23-12; DFW 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; DFW 22-2013(Temp), f. 3-12-13, cert. ef. 3-13-13 thru 7-31-13; DFW 34-2013(Temp), f. 5-14-13, cert. ef. 5-15-13 thru 7-31-13; DFW 36-2013(Temp), f. & cert. ef. 5-22-13 thru 7-31-13; DFW 44-2013(Temp), f. & cert. ef. 5-29-13 thru 7-31-13; DFW 82-2013(Temp), f. 7-29-13, cert. ef. 7-31-13 thru 10-31-13; DFW 87-2013(Temp), f. & cert. ef. 8-9-13 thru 10-31-13; DFW 109-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction 11-22-13; DFW 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; DFW 18-2014(Temp), f. 3-7-14, cert. ef. 3-10-14 thru 7-30-14; DFW 25-2014(Temp), f. 3-13-14, cert. ef. 3-17-14 thru 7-31-14; DFW 32-2014(Temp), f. 4-21-14, cert. ef. 4-22-14 thru 7-31-14; DFW 35-2014(Temp), f. & cert. ef. 4-24-14 thru 7-31-14; DFW 39-2014(Temp), f. 5-7-14, cert. ef. 5-8-14 thru 7-31-14; DFW 45-2014(Temp), f. 5-14-14, cert. ef. 5-20-14 thru 7-31-14; DFW 51-2014(Temp), f. & cert. ef. 5-28-14 thru 7-31-14; DFW 55-2014(Temp), f. 6-3-14, cert. ef. 6-4-14 thru 7-31-14; DFW 104-2014(Temp), f. 8-4-14, cert. ef. 8-5-14 thru 10-31-14; Administrative correction 11-24-14; DFW 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; DFW 17-2015(Temp), f. 3-5-15, cert. ef. 3-9-15 thru 7-30-15; DFW 21-2015(Temp), f. & cert. ef. 3-24-15 thru 7-30-15; DFW 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; DFW 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; DFW 42-2015(Temp), f. & cert. ef. 5-12-15 thru 7-31-15; DFW 50-2015(Temp), f. & cert. ef. 5-27-15 thru 7-31-15; DFW 58-2015(Temp), f. & cert. ef. 6-2-15 thru 7-31-15; DFW 63-2015(Temp), f. 6-9-15, cert. ef. 6-10-15 thru 7-31-15; DFW 98-2015(Temp), f. 7-30-15, cert. ef. 8-4-15 thru 10-31-15; DFW 110-2015(Temp), f. 8-18-15, cert. ef. 8-24-15 thru 10-31-15; DFW 117-2015(Temp), f. 8-28-15, cert. ef. 8-31-15 thru 10-31-15; Administrative correction 11-20-15; DFW 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; DFW 20-2016(Temp), f. 3-25-16, cert. ef. 3-28-16 thru 7-31-16; DFW 26-2016(Temp), f. 4-5-16, cert. ef. 4-6-16 thru 7-31-16; DFW 31-2016(Temp), f. 4-11-16, cert. ef. 4-13-16 thru 7-31-16; DFW 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; DFW 47-2016(Temp), f. & cert. ef. 5-11-16 thru 7-31-16; DFW 53-2016(Temp), f. 5-19-16, cert. ef. 5-23-16 thru 7-31-16; DFW 60-2016(Temp), f. 5-26-16, cert. ef. 5-31-16 thru 7-31-16; DFW 64-2016(Temp), f. 6-2-16, cert. ef. 6-7-16 thru 7-31-16; DFW 99-2016(Temp), f. 7-29-16, cert. ef. 8-1-16 thru 10-31-16; DFW 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; DFW 32-2017(Temp), f. 3-29-17, cert. ef. 3-30-17 thru 9-15-17

635-042-0160

Blind Slough and Knappa Slough Select Area Salmon Season

(1) Salmon and shad may be taken for commercial purposes during open fishing periods described as the winter fishery and the spring fishery in subsections (1)(a)(A) and (1)(a)(B) of this rule in those waters of Blind Slough and Knappa Slough. The following restrictions apply:

(a) The open fishing periods are established in segments categorized as the Winter and Spring season fishery in Blind Slough and Knappa Slough in subsections (1)(a)(A) and (1)(a)(B), and the spring fishery in Blind Slough and Knappa Slough in subsection (1)(a)(C). The seasons are open nightly from 7:00 p.m. to 7:00 a.m. the following morning (12 hours), as follows:

(A) Blind Slough and Knappa Sloughs:

(i) Monday night March 31 2017.

(B) Blind Slough only:

(i) Monday night April 3, 2017.

(ii) Thursday night April 6, 2017.

(C) Blind and Knappa Sloughs:

(i) Tuesday and Thursday nights from April 20 through April 28 2017, and Monday and Thursday nights from May 1 through June 13 2017.

(b) The fishing areas for the winter and spring seasons are:

ADMINISTRATIVE RULES

(A) Blind Slough are those waters adjoining the Columbia River which extend from markers at the mouth of Blind Slough upstream to markers at the mouth of Gnat Creek which is located approximately 1/2 mile upstream of the county road bridge.

(B) Knappa Slough are all waters bounded by a line from the northerly most marker at the mouth of Blind Slough westerly to a marker on Karlson Island downstream to a north-south line defined by a marker on the eastern end of Minaker Island to markers on Karlson Island and the Oregon shore.

(C) During the period from May 1 through June 13, the lower boundary of the Knappa Slough fishing area extends downstream to the boundary lines defined by markers on the west end of Minaker Island to markers on Karlson Island and the Oregon shore (fall boundary).

(c) Gear restrictions are as follows:

(A) During the winter fishery, outlined above in subsection (1)(a)(A) and (1)(a)(B), gill nets may not exceed 100 fathoms in length with no weight limit on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is less than 7-inches.

(B) During the spring fishery, outlined above in subsection (1)(a)(C), gill nets may not exceed 100 fathoms in length with no weight limit on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is more than 9.75-inches.

(C) Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(2) Retention and sale of sturgeon is prohibited.

(3) Oregon licenses are required in the open waters upstream from the railroad bridge.

Stat. Auth.: ORS 183.325, 506.109 & 506.119

Stats. Implemented: ORS 506.129 & 507.030

Hist.: FWC 46-1996, f. & cert. ef. 8-23-96; FWC 48-1997, f. & cert. ef. 8-25-97; DFW 15-1998, f. & cert. ef. 3-3-98; DFW 67-1998, f. & cert. ef. 8-24-98; DFW 86-1998(Temp), f. & cert. ef. 10-28-98 thru 10-30-98; DFW 10-1999, f. & cert. ef. 2-26-99; DFW 48-1999(Temp), f. & cert. ef. 6-24-99 thru 7-2-99; DFW 55-1999, f. & cert. ef. 8-12-99; DFW 9-2000, f. & cert. ef. 2-25-00; DFW 42-2000, f. & cert. ef. 8-3-00; DFW 65-2000(Temp), f. 9-22-00, cert. ef. 9-25-00 thru 12-31-00; DFW 3-2001, f. & cert. ef. 2-6-01; DFW 84-2001(Temp), f. & cert. ef. 8-29-01 thru 12-31-01; DFW 86-2001, f. & cert. ef. 9-4-01 thru 12-31-01; DFW 89-2001(Temp), f. & cert. ef. 9-14-01 thru 12-31-01; DFW 106-2001(Temp), f. & cert. ef. 10-26-01 thru 12-31-01; DFW 14-2002(Temp), f. 2-13-02, cert. ef. 2-18-02 thru 8-17-02; DFW 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; DFW 12-2003, f. & cert. ef. 2-14-03; DFW 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; DFW 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; DFW 75-2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; DFW 89-2003(Temp), f. 9-8-03, cert. ef. 9-9-03 thru 12-31-03; DFW 11-2004, f. & cert. ef. 2-13-04; DFW 19-2004(Temp), f. & cert. ef. 3-12-04 thru 3-31-04; DFW 22-2004(Temp), f. & cert. ef. 3-18-04 thru 3-31-04; DFW 28-2004(Temp), f. 4-8-04, cert. ef. 4-12-04 thru 4-15-04; DFW 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; DFW 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; DFW 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-31-04; DFW 95-2004(Temp), f. 9-17-04, cert. ef. 9-19-04 thru 12-31-04; DFW 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; DFW 6-2005, f. & cert. ef. 12-14-05; DFW 16-2005(Temp), f. & cert. ef. 3-10-05 thru 7-31-05; DFW 18-2005(Temp), f. & cert. ef. 3-15-05 thru 3-21-05; Administrative correction 4-20-05; DFW 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; DFW 28-2005(Temp), f. & cert. ef. 4-28-05 thru 6-16-05; DFW 37-2005(Temp), f. & cert. ef. 5-5-05 thru 10-16-05; DFW 40-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; DFW 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; DFW 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; DFW 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; DFW 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; DFW 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; DFW 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; DFW 5-2006, f. & cert. ef. 2-15-06; DFW 14-2006(Temp), f. 3-15-06, cert. ef. 3-16-06 thru 7-27-06; DFW 16-2006(Temp), f. 3-23-06 & cert. ef. 3-26-06 thru 7-27-06; DFW 18-2006(Temp), f. 3-29-06, cert. ef. 4-2-06 thru 7-27-06; DFW 20-2006(Temp), f. 4-7-06, cert. ef. 4-9-06 thru 7-27-06; DFW 32-2006(Temp), f. & cert. ef. 5-23-06 thru 7-31-06; DFW 35-2006(Temp), f. & cert. ef. 5-30-06 thru 7-31-06; DFW 75-2006(Temp), f. 8-8-06, cert. ef. 9-5-06 thru 12-31-06; DFW 92-2006(Temp), f. 9-1-06, cert. ef. 9-5-06 thru 12-31-06; DFW 98-2006(Temp), f. & cert. ef. 9-12-06 thru 12-31-06; DFW 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; DFW 119-2006(Temp), f. & cert. ef. 10-18-06 thru 12-31-06; Administrative correction 1-16-07; DFW 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; DFW 9-2007, f. & cert. ef. 2-14-07; DFW 13-2007(Temp), f. & cert. ef. 3-6-07 thru 9-1-07; DFW 25-2007(Temp), f. 4-17-07, cert. ef. 4-18-07 thru 7-26-07; DFW 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; DFW 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative correction 1-24-08; DFW 6-2008(Temp), f. 1-29-08, cert. ef. 1-31-08 thru 7-28-08; DFW 16-2008(Temp), f. 2-26-08, cert. ef. 3-2-08 thru 8-28-08; DFW 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; DFW 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; DFW 85-2008(Temp), f. 7-24-08, cert. ef. 8-1-08 thru 12-31-08; DFW 103(Temp), f. 8-26-08, cert. ef. 9-2-08 thru 10-31-08; DFW 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; DFW 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; DFW 49-2009(Temp), f. 5-14-09, cert. ef. 5-17-09 thru 7-31-09; DFW 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; DFW 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; Administrative correction 11-19-09; DFW 15-2010(Temp), f. 2-19-10, cert. ef. 2-21-10 thru 6-11-10; DFW 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; DFW 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; DFW 57-2010(Temp), f. & cert. ef. 5-11-10 thru 7-31-10; DFW 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; DFW 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; DFW 129-2010(Temp), f. & cert. ef.

9-10-10 thru 10-31-10; Administrative correction 11-23-10; DFW 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; DFW 23-2011, f. & cert. ef. 3-21-11; DFW 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; DFW 44-2011(Temp), f. & cert. ef. 5-11-11 thru 6-10-11; Administrative correction 6-28-11; DFW 113-2011(Temp), f. 8-10-11, cert. ef. 8-15-11 thru 10-31-11; Administrative correction, 11-18-11; DFW 12-2012(Temp), f. 2-8-12, cert. ef. 2-12-12 thru 7-31-12; DFW 104-2012(Temp), f. 8-6-12, cert. ef. 8-13-12 thru 10-31-12; Administrative correction 11-23-12; DFW 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; DFW 24-2013(Temp), f. & cert. ef. 3-21-13 thru 7-31-13; Administrative correction, 8-21-13; DFW 91-2013(Temp), f. 8-22-13, cert. ef. 8-26-13 thru 10-31-13; DFW 110-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction, 11-22-13; DFW 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; DFW 35-2014(Temp), f. & cert. ef. 4-24-14 thru 7-31-14; DFW 39-2014(Temp), f. 5-7-14, cert. ef. 5-8-14 thru 7-31-14; DFW 115-2014(Temp), f. 8-5-14, cert. ef. 8-18-14 thru 10-31-14; DFW 135-2014(Temp), f. & cert. ef. 9-19-14 thru 10-31-14; Administrative correction 11-24-14; DFW 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; DFW 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; DFW 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; DFW 70-2015(Temp), f. 6-15-15, cert. ef. 6-16-15 thru 7-31-15; DFW 76-2015(Temp), f. 6-23-15, cert. ef. 6-25-15 thru 7-31-15; DFW 102-2015(Temp), f. 8-10-15, cert. ef. 8-17-15 thru 10-31-15; Administrative correction, 11-20-15; DFW 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; DFW 23-2016(Temp), f. & cert. ef. 3-28-16 thru 7-31-16; DFW 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; DFW 71-2016(Temp), f. 6-13-16, cert. ef. 6-16-16 thru 7-31-16; DFW 78-2016(Temp), f. 6-23-16 thru 7-31-16; DFW 85-2016(Temp), f. & cert. ef. 6-30-16 thru 7-31-16; DFW 87-2016(Temp), f. & cert. ef. 7-7-16 thru 7-31-16; DFW 92-2016(Temp), f. 7-13-16, cert. ef. 7-14-16 thru 7-31-16; DFW 101-2016(Temp), f. 8-2-16, cert. ef. 8-24-16 thru 10-31-16; DFW 129-2016(Temp), f. 9-29-16, cert. ef. 10-1-16 thru 13-31-16; DFW 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; DFW 25-2017(Temp), f. & cert. ef. 3-20-17 thru 6-13-17; DFW 32-2017(Temp), f. 3-29-17, cert. ef. 3-30-17 thru 9-15-17

635-042-0170

Tongue Point Basin and South Channel

(1) The winter and spring season Tongue Point fishing area includes all waters bounded by a line extended from the upstream (southern most) pier (#1) at the Tongue Point Job Corps facility through navigation marker #6 to Mott Island, a line from a marker at the southeast end of Mott Island northeasterly to a marker on the northwest tip of Lois Island, and a line from a marker on the southwest end of Lois Island westerly to a marker on the Oregon shore.

(2) South Channel area includes all waters bounded by a line from a marker on John Day Point to a marker on the southwest end of Lois Island upstream to an upper boundary line from a marker on Settler Point northwesterly to the flashing red USCG marker "10", northwesterly to a marker on the eastern tip of Burnside Island defining the upstream terminus of South Channel.

(3) Salmon, and shad may be taken for commercial purposes in those waters of Tongue Point and South Channel as described in section (1) and section (2) of this rule. Open fishing periods are:

(a) Winter season: Thursday March 30, 2017 from 10:00 a.m. to 2 p.m.

(b) Spring season:

(i) Thursday night April 20 2017 from 2 p.m. to 6 p.m. (4 hours).

(ii) Tuesday and Thursday nights from April 25 through April 28 2017 and Monday and Thursday nights from May 1 through June 13 2017, from 7:00 p.m. to 7:00 a.m. (12 hours) the following morning.

(4) Gear restrictions are as follows:

(a) In waters described in section (1) as Tongue Point basin, gill nets may not exceed 250 fathoms in length and weight limit on the lead line is not to exceed two pounds on any one fathom. It is unlawful to use a gill net having a mesh size that is less than 7 inches during winter season and 9.75-inches during spring season. (b) In waters described in section (2) as South Channel, nets are restricted to 250 fathoms in length with no weight restrictions on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is less than 7 inches during winter season and 9.75-inches during spring season.

(c) Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(5) Retention and sale of sturgeon is prohibited.

Stat. Auth.: ORS 183.325, 506.109 & 506.119

Stats. Implemented: ORS 506.129 & 507.030

Hist.: FWC 46-1996, f. & cert. ef. 8-23-96; FWC 48-1997, f. & cert. ef. 8-25-97; FWC 61-1997(Temp), f. 9-23-97, cert. ef. 9-24-97; DFW 15-1998, f. & cert. ef. 3-3-98; DFW 41-1998(Temp), f. 5-28-98, cert. ef. 5-29-98; DFW 42-1998(Temp), f. 5-29-98, cert. ef. 5-31-98 thru 6-6-98; DFW 45-1998(Temp), f. 6-5-98, cert. ef. 6-6-98 thru 6-10-98; DFW 67-1998, f. & cert. ef. 8-24-98; DFW 86-1998, f. & cert. ef. 10-28-98 thru 10-30-98; DFW 10-1999, f. & cert. ef. 2-26-99; DFW 55-1999, f. & cert. ef. 8-12-99; DFW 9-2000, f. & cert. ef. 2-25-00; DFW 42-2000, f. & cert. ef. 8-3-00; DFW 3-2001, f. & cert. ef. 2-6-01; DFW 84-2001(Temp), f. & cert. ef. 8-29-01 thru 12-31-01; DFW 89-2001(Temp), f. & cert. ef. 9-14-01 thru 12-31-01; DFW 106-2001(Temp), f. & cert. ef. 10-26-01 thru 12-31-01; DFW 15-2002(Temp), f. & cert. ef. 2-20-02 thru 8-18-02; DFW 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; DFW 12-2003, f. & cert. ef. 2-14-03; DFW 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; DFW 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; DFW 75-

ADMINISTRATIVE RULES

2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; DFW 89-2003(Temp), f. 9-8-03, cert. ef. 9-9-03 thru 12-31-03; Administrative correction 7-30-04; DFW 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-31-04; DFW 95-2004(Temp), f. 9-17-04, cert. ef. 9-19-04 thru 12-31-04; DFW 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; DFW 6-2005, f. & cert. ef. 2-14-05; DFW 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; DFW 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; DFW 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; DFW 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; DFW 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; DFW 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; DFW 76-2006(Temp), f. 8-8-06, cert. ef. 9-5-06 thru 12-31-06; DFW 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; DFW 119-2006(Temp), f. & cert. ef. 10-18-06 thru 12-31-06; Administrative correction 1-16-07; DFW 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; DFW 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative Correction 1-24-08; DFW 44-2008(Temp), f. 4-25-08, cert. ef. 4-28-08 thru 10-24-08; DFW 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; DFW 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; DFW 85-2008(Temp), f. 7-24-08, cert. ef. 8-1-08 thru 12-31-08; DFW 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; DFW 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; DFW 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; DFW 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; Administrative correction 11-19-09; DFW 29-2010(Temp), f. 3-9-10, cert. ef. 4-19-10 thru 6-12-10; DFW 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; DFW 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; DFW 57-2010(Temp), f. & cert. ef. 5-11-10 thru 7-31-10; DFW 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; DFW 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; DFW 129-2010(Temp), f. & cert. ef. 9-10-10 thru 10-31-10; Administrative correction 11-23-10; DFW 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; DFW 23-2011, f. & cert. ef. 3-21-11; DFW 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; DFW 44-2011(Temp), f. & cert. ef. 5-11-11 thru 6-10-11; Administrative correction 6-28-11; DFW 113-2011(Temp), f. 8-10-11, cert. ef. 8-15-11 thru 10-31-11; DFW 122-2011(Temp), f. 8-29-11, cert. ef. 9-19-11 thru 10-31-11; Administrative correction, 11-18-11; DFW 41-2012(Temp), f. 4-24-12, cert. ef. 4-26-12 thru 6-30-12; Administrative correction, 8-1-12; DFW 104-2012(Temp), f. 8-6-12, cert. ef. 8-13-12 thru 10-31-12; Administrative correction 11-23-12; DFW 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; DFW 34-2013(Temp), f. 5-14-13, cert. ef. 5-15-13 thru 7-31-13; Administrative correction, 8-21-13; DFW 91-2013(Temp), f. 8-22-13, cert. ef. 8-26-13 thru 10-31-13; DFW 110-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction, 11-22-13; DFW 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; DFW 35-2014(Temp), f. & cert. ef. 4-24-14 thru 7-31-14; DFW 39-2014(Temp), f. 5-7-14, cert. ef. 5-8-14 thru 7-31-14; DFW 115-2014(Temp), f. 8-5-14, cert. ef. 8-18-14 thru 10-31-14; DFW 135-2014(Temp), f. & cert. ef. 9-19-14 thru 10-31-14; Administrative correction 11-24-14; DFW 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; DFW 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; DFW 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; DFW 102-2015(Temp), f. 8-10-15, cert. ef. 8-17-15 thru 10-31-15; Administrative correction, 11-20-15; DFW 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; DFW 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; DFW 71-2016(Temp), f. 6-13-16, cert. ef. 6-16-16 thru 7-31-16; DFW 78-2016(Temp), f. 6-23-16 thru 7-31-16; DFW 85-2016(Temp), f. & cert. ef. 6-30-16 thru 7-31-16; DFW 87-2016(Temp), f. & cert. ef. 7-7-16 thru 7-31-16; DFW 92-2016(Temp), f. 7-13-16, cert. ef. 7-14-16 thru 7-31-16; DFW 101-2016(Temp), f. 8-2-16, cert. ef. 8-24-16 thru 10-31-16; DFW 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; DFW 25-2017(Temp), f. & cert. ef. 3-20-17 thru 6-13-17; DFW 32-2017(Temp), f. 3-29-17, cert. ef. 3-30-17 thru 9-15-17

635-042-0180

Deep River Select Area Salmon Season

(1) Salmon and shad, may be taken for commercial purposes from the US Coast Guard navigation marker #16 southwest to a marker on the Washington shore, upstream to the Highway 4 Bridge.

(2) The fishing seasons are open:

(a) Winter season: Thursday March 30 from 7 p.m. to 7a.m. Friday March 31, 2017.

(b) Spring season: Tuesday and Thursday nights from 7:00 p.m. to 7:00 a.m. the following morning (12 hours) beginning April 20 through April 28 2017, and Monday and Thursday nights from 7:00 p.m. to 7:00 a.m. the following morning (12 hours) beginning May 1 through June 13.

(3) Gear restrictions are as follows:

(a) Gill nets may not exceed 100 fathoms in length and there is no weight limit on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. Nets may not be tied off to stationary structures and may not fully cross navigation channel.

(b) It is unlawful to operate in any river, stream or channel any gill net longer than three-fourths the width of the stream. It is unlawful in any area to use, operate, or carry aboard a commercial fishing vessel a licensed net or combination of such nets, whether fished singly or separately, in excess of the maximum lawful size or length prescribed for a single net in that area, except as otherwise provided for in the rules and regulations of the department WAC 220-20-010(17). Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(c) Nets that are fished at any time between official sunset and official sunrise must have lighted buoys on both ends of the net unless the net is attached to the boat. If the net is attached to the boat, then one lighted buoy on the opposite end of the net from the boat is required.

(d) During the winter season, outlined above in subsection (2)(a), it is unlawful to use a gill net having a mesh size that is less than 7-inches;

(e) During the spring season, outlined above in subsection (2)(b) it is unlawful to use a gill net having a mesh size that is more than 9.75-inches.

(4) Retention and sale of sturgeon is prohibited.

(5) Transportation or possession of fish outside the fishing area (except to the sampling station) is unlawful until WDFW staff has biologically sampled individual catches. After sampling, fishers will be issued a transportation permit by WDFW staff. During the winter season, described in subsection (2)(a) above, fishers are required to call (360) 795-0319 to confirm the location and time of sampling. During the spring season, described in subsection (2)(b) above, a sampling station will be established at WDFW's Oneida Road boat ramp, about 0.5 miles upstream of the Deep River area downstream boundary (USCG navigation marker #16).

Stat. Auth.: ORS 183.325, 506.109 & 506.119

Stats. Implemented: ORS 506.129 & 507.030

Hist.: FWC 46-1996, f. & cert. ef. 8-23-96; FWC 48-1997, f. & cert. ef. 8-25-97; DFW 55-1999, f. & cert. ef. 8-12-99; DFW 42-2000, f. & cert. ef. 8-3-00; DFW 84-2001(Temp), f. & cert. ef. 8-29-01 thru 12-31-01; DFW 89-2001(Temp), f. & cert. ef. 9-14-01 thru 12-31-01; DFW 106-2001(Temp), f. & cert. ef. 10-26-01 thru 12-31-01; DFW 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; DFW 19-2003(Temp), f. 3-12-03, cert. ef. 4-17-03 thru 6-13-03; DFW 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; DFW 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; DFW 75-2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; DFW 89-2003(Temp), f. & cert. ef. 9-9-03, cert. ef. 9-9-03 thru 12-31-03; DFW 11-2004, f. & cert. ef. 2-13-04; DFW 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; DFW 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; DFW 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-31-04; DFW 95-2004(Temp), f. 9-17-04, cert. ef. 9-19-04 thru 12-31-04; DFW 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; DFW 6-2005, f. & cert. ef. 2-14-05; DFW 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; DFW 28-2005(Temp), f. & cert. ef. 4-28-05 thru 6-16-05; DFW 37-2005(Temp), f. & cert. ef. 5-5-05 thru 10-16-05; DFW 40-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; DFW 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; DFW 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; DFW 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; DFW 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; DFW 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; DFW 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; DFW 5-2006, f. & cert. ef. 2-15-06; DFW 32-2006(Temp), f. & cert. ef. 5-23-06 thru 7-31-06; DFW 35-2006(Temp), f. & cert. ef. 5-30-06 thru 7-31-06; DFW 77-2006(Temp), f. 8-8-06, cert. ef. 9-4-06 thru 12-31-06; DFW 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; DFW 119-2006(Temp), f. & cert. ef. 10-18-06; Administrative correction 1-16-07; DFW 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; DFW 9-2007, f. & cert. ef. 2-14-07; DFW 13-2007(Temp), f. & cert. ef. 3-6-07 thru 9-1-07; DFW 25-2007(Temp), f. 4-17-07, cert. ef. 4-18-07 thru 7-26-07; DFW 28-2007(Temp), f. & cert. ef. 4-26-07 thru 7-26-07; DFW 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; DFW 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative Correction 1-24-08; DFW 6-2008(Temp), f. 1-29-08, cert. ef. 1-31-08 thru 7-28-08; DFW 16-2008(Temp), f. 2-26-08, cert. ef. 3-2-08 thru 8-28-08; DFW 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; DFW 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; DFW 85-2008(Temp), f. 7-24-08, cert. ef. 8-1-08 thru 12-31-08; DFW 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; DFW 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; DFW 23-2009(Temp), f. 3-5-09, cert. ef. 3-6-09 thru 4-30-09; DFW 35-2009(Temp), f. 4-7-09, cert. ef. 4-8-09 thru 4-30-09; DFW 49-2009(Temp), f. 5-14-09, cert. ef. 5-17-09 thru 7-31-09; DFW 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; DFW 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; DFW 112-2009(Temp), f. 9-11-09, cert. ef. 9-13-09 thru 10-30-09; DFW 121-2009(Temp), f. & cert. ef. 9-30-09 thru 10-31-09; Administrative correction 11-19-09; DFW 16-2010(Temp), f. 2-19-10, cert. ef. 2-22-10 thru 6-10-10; DFW 40-2010(Temp), f. & cert. ef. 4-1-10 thru 7-31-10; DFW 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; DFW 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; DFW 57-2010(Temp), f. & cert. ef. 5-11-10 thru 7-31-10; DFW 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; DFW 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; DFW 129-2010(Temp), f. & cert. ef. 9-10-10 thru 10-31-10; Administrative correction 11-23-10; DFW 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; DFW 23-2011, f. & cert. ef. 3-21-11; DFW 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; DFW 53-2011(Temp), f. & cert. ef. 5-18-11 thru 6-10-11; Administrative correction 6-28-11; DFW 113-2011(Temp), f. 8-10-11, cert. ef. 8-15-11 thru 10-31-11; Administrative correction, 11-18-11; DFW 12-2012(Temp), f. 2-8-12, cert. ef. 2-12-12 thru 7-31-12; DFW 104-2012(Temp), f. 8-6-12, cert. ef. 8-13-12 thru 10-31-12; Administrative correction 11-23-12; DFW 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; DFW 24-2013(Temp), f. & cert. ef. 3-21-13 thru 7-31-13; Administrative correction, 8-21-13; DFW 91-2013(Temp), f. 8-22-13, cert. ef. 8-26-13 thru 10-31-13; DFW 110-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction, 11-22-13; DFW 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; DFW 115-2014(Temp), f. 8-5-14, cert. ef. 8-18-14 thru 10-31-14; DFW 135-2014(Temp), f. & cert. ef. 9-19-14 thru 10-31-14; Administrative correction 11-24-14; DFW 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; DFW 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; DFW 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; DFW 102-2015(Temp), f. 8-10-15, cert. ef. 8-17-15 thru 10-31-15; Administrative correction, 11-20-15; DFW 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; DFW 23-2016(Temp), f. & cert. ef. 3-28-16 thru 7-31-16; DFW 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; DFW 99-2016(Temp), f. 7-29-16, cert. ef. 8-1-16 thru 10-31-16; DFW 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; DFW 32-2017(Temp), f. 3-29-17, cert. ef. 3-30-17 thru 9-15-17

Rule Caption: Temporary allowance for Two-Rod Usage in the Willamette Angling Zone

Adm. Order No.: DFW 33-2017(Temp)

Filed with Sec. of State: 3-29-2017

Certified to be Effective: 4-1-17 thru 9-27-17

Notice Publication Date:

Rules Amended: 635-017-0080

Subject: This rule allows for usage of a Two-Rod Validation in the Willamette angling zone. Modifications allow the use of two fishing rods while fishing for both game and non-game fish species, except sturgeon, in areas of the Willamette River and its tributaries, includ-

ADMINISTRATIVE RULES

ing flowing waters that are open to angling for hatchery Chinook, hatchery steelhead, trout, or warmwater gamefish.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-017-0080

Purpose and Scope

(1) The purpose of Division 017 is to provide for management of sport fisheries in the Willamette Zone over which the State has jurisdiction.

(2) Division 017 incorporates by reference the **2017 Oregon Sport Fishing Regulations**. Therefore, persons must consult the **2017 Oregon Sport Fishing Regulations** in addition to Division 011 and Division 017 to determine all applicable sport fishing requirements for the Willamette Zone.

(3) Beginning April 1 through July 31, 2017, the following rules apply:

(a) In all areas of the Willamette River and tributaries, including flowing waters, that are open to angling for hatchery Chinook, hatchery steelhead, trout, or warmwater gamefish, anglers with a valid 2017 Two-Rod Angling Validation may use up to two fishing rods while fishing for any game fish or non-game fish species except sturgeon. Youth anglers under 12 years of age may use two rods in these areas without purchasing the Two-Rod Angling Validation.

(b) Angling for sturgeon remains restricted to the use of one rod per angler.

(c) All other rules and licensing requirements specified in the **2017 Oregon Sport Fishing Regulations** remain in effect.

[Publications: Publications referenced are available from the agency.]

Stat. Auth.: ORS 496.138 & 496.146

Stats. Implemented: ORS 496.162

Hist.: FWC 82-1993, f. 12-22-93, cert. ef. 1-1-94, Renumbered from 635-017-0105 - 635-017-0465; FWC 22-1995, f. 3-7-95, cert. ef. 3-10-95; FWC 77-1995, f. 9-13-95, cert. ef. 1-1-96; FWC 72-1996, f. 12-31-96, cert. ef. 1-1-97; FWC 75-1997, f. 12-31-97, cert. ef. 1-1-98; DFW 100-1998, f. 12-23-98, cert. ef. 1-1-99; DFW 96-1999, f. 12-27-99, cert. ef. 1-1-00; DFW 1-2001, f. 1-25-01, cert. ef. 2-1-01; DFW 70-2001, f. & cert. ef. 8-10-01; DFW 123-2001, f. 12-31-01, cert. ef. 1-1-02; DFW 26-2002, f. & cert. ef. 3-21-02; DFW 130-2002, f. 11-21-02, cert. ef. 1-1-03; DFW 125-2003, f. 12-11-03, cert. ef. 1-1-04; DFW 117-2004, f. 12-13-04, cert. ef. 1-1-05; DFW 136-2005, f. 12-7-05, cert. ef. 1-1-06; DFW 79-2006, f. 8-11-06, cert. ef. 1-1-07; DFW 136-2007, f. 12-31-07, cert. ef. 1-1-08; DFW 156-2008, f. 12-31-08, cert. ef. 1-1-09; DFW 144-2009, f. 12-8-09, cert. ef. 1-1-10; DFW 171-2010, f. 12-30-10, cert. ef. 1-1-11; DFW 163-2011, f. 12-27-11, cert. ef. 1-1-12; DFW 149-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 137-2013, f. 12-19-13, cert. ef. 1-1-14; DFW 165-2014, f. 12-18-14, cert. ef. 1-1-15; DFW 167-2015, f. 12-29-15, cert. ef. 1-1-16; DFW 153-2016, f. 12-28-16, cert. ef. 1-1-17; DFW 33-2017(Temp), f. 3-29-17, cert. ef. 4-1-17 thru 9-27-17

Rule Caption: Commercial Anchovy Fishery Trip Limits for the Columbia River

Adm. Order No.: DFW 34-2017(Temp)

Filed with Sec. of State: 3-29-2017

Certified to be Effective: 4-1-17 thru 6-16-17

Notice Publication Date:

Rules Amended: 635-042-0100

Subject: This amended rule establishes daily and weekly trip limits for the commercial anchovy fishery inside the Columbia River. Anchovy landings into Oregon substantially increased in 2016 from recent years, with the majority of the catch coming from inside the Buoy 10 line at the mouth of the Columbia River. There were 5,313 metric tons (mt) landed in Oregon in 2016. In past seasons since 2000, the total annual harvest into Oregon averaged around 67 mt. The magnitude of anchovy landings into Oregon from the Columbia River area alone has been a point of concern for all management entities involved (the states of Oregon and Washington, the Pacific Fishery Management Council, and the National Marine Fisheries Service) and a variety of stakeholders, including both fishing industry and environmental groups.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-042-0100

Anchovies and Herring Season

(1) Anchovies and herring may be taken for commercial purposes at any time in the Columbia River seaward of the Megler-Astoria Bridge with purse, lampara, and round haul seines of a mesh size not less than one half inch and not over 1,400 feet in length. All other species taken in operation of such gear must immediately with care be returned to the water.

(2) Columbia River Anchovy Fishery Trip Limits:

(a) Commercial vessels fishing for anchovy in the Columbia River between the Astoria-Megler Bridge and a north-south line through Buoy 10

at the mouth of the river may land no more than 5 metric tons per day and no more than 10 metric tons per calendar week.

(b) For the purposes of this fishery, a calendar week shall begin at 12:01 a.m. Sunday and run through 11:59 p.m. the following Saturday.

(c) These limits apply to all catch from any trip on which fishing inside the Buoy 10 line occurs.

Stat. Auth.: ORS 496.118 & 506.119

Stats. Implemented: ORS 506.129 & 507.030

Hist.: FWC 8, f. & ef. 1-28-77; FWC 2-1978, f. & ef. 1-31-78; FWC 7-1978, f. & ef. 2-21-78; FWC 2-1979, f. & ef. 1-25-79, Renumbered from 635-035-0260; FWC 6-1980, f. & ef. 1-28-80; FWC 1-1981, f. & ef. 1-19-81; FWC 6-1982, f. & ef. 1-28-82; FWC 4-1984, f. & ef. 1-31-84; FWC 79-1986(Temp), f. & ef. 12-22-86; FWC 2-1987, f. & ef. 1-23-87; FWC 10-1988, f. & cert. ef. 3-4-88; DFW 127-2016(Temp), f. 9-27-16, cert. ef. 10-3-16 thru 3-31-17; DFW 34-2017(Temp), f. 3-29-17, cert. ef. 4-1-17 thru 6-16-17

Rule Caption: Amend rule to correct hunt season dates for Controlled Elk Hunt 253C2 Mt Harris No.2

Adm. Order No.: DFW 35-2017(Temp)

Filed with Sec. of State: 3-31-2017

Certified to be Effective: 3-31-17 thru 9-26-17

Notice Publication Date:

Rules Amended: 635-071-0010

Subject: The season for Controlled Antlerless Elk Hunt 253C2 Mt Harris No. 2 listed on page 73 of the 2017 Oregon Big Game Hunting Regulations is incorrectly printed as Nov. 18–Dec. 31, 2017. This rule amendment would correct the starting date of the hunt to Dec. 18, 2017 to remove overlap with two other hunts in the area, reduce potential for excessive hunter crowding, and provide the intended level of harvest.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-071-0010

Controlled Rocky Mountain Antlerless Elk Rifle Hunts

Notwithstanding the provisions of the 2017 Oregon Big Game Regulations: The season listed on page 73 for the Mt Harris No. 2 (253C2) Controlled Rocky Mountain Antlerless Elk Hunt is changed to December 18–December 31, 2017.

Stat. Auth.: ORS 496.012, 496.138, 496.146 & 496.162

Stats. Implemented: ORS 496.012, 496.138, 496.146 & 496.162

Hist.: FWC 37-1982, f. & ef. 6-25-82; FWC 28-1983, f. & ef. 7-8-83; FWC 34-1984, f. & ef. 7-24-84; FWC 43-1985, f. & ef. 8-22-85; FWC 76-1985(Temp), f. & ef. 12-6-85; FWC 71-1985, f. & ef. 11-8-85; FWC 35-1986, f. & ef. 8-7-86; FWC 45-1987, f. & ef. 7-6-87; FWC 42-1988, f. & cert. ef. 6-13-88; FWC 69-1989, f. & cert. ef. 8-15-89; FWC 115-1989(Temp), f. & cert. ef. 11-16-89; FWC 61-1990, f. & cert. ef. 6-21-90; FWC 116-1990(Temp), f. & cert. ef. 10-11-90; FWC 64-1991, f. & cert. ef. 6-24-91; FWC 115-1991, f. & cert. ef. 9-30-91; FWC 49-1992, f. & cert. ef. 7-15-92; FWC 36-1993, f. & cert. ef. 6-14-93; FWC 46-1993, f. & cert. ef. 8-4-93; FWC 18-1994, f. 3-30-94, cert. ef. 5-1-94; FWC 40-1994, f. & cert. ef. 6-28-94; FWC 63-1994(Temp), f. & cert. ef. 9-13-94; FWC 6-1995, f. 1-23-95, cert. ef. 4-1-95; FWC 54-1995, f. & cert. ef. 6-20-95; FWC 17-1996, f. 4-10-96, cert. ef. 4-15-96; FWC 17-1996, f. 4-10-96, cert. ef. 4-15-96; FWC 35-1996, f. & cert. ef. 6-7-96; FWC 9-1997, f. & cert. ef. 2-27-97; DFW 49-1998, f. & cert. ef. 6-22-98; DFW 47-1999, f. & cert. ef. 6-16-99; DFW 30-2000, f. & cert. ef. 6-14-00; DFW 22-2006(Temp), f. & cert. ef. 4-7-06 thru 10-4-06; DFW 41-2006, f. & cert. ef. 6-14-06; DFW 42-2007, f. & cert. ef. 6-14-07; DFW 127-2013(Temp), f. & cert. ef. 11-5-13 thru 12-1-13; Administrative correction, 12-19-13; DFW 2-2015(Temp), f. & cert. ef. 1-7-15 thru 6-30-15; DFW 69-2015, f. & cert. ef. 6-11-15; DFW 35-2017(Temp), f. & cert. ef. 3-31-17 thru 9-26-17

Rule Caption: Amend rule to exclude Premium Deer and Elk tag holders from Starkey Experimental Forest

Adm. Order No.: DFW 36-2017(Temp)

Filed with Sec. of State: 3-31-2017

Certified to be Effective: 3-31-17 thru 9-26-17

Notice Publication Date:

Rules Amended: 635-065-0625

Subject: The Starkey Experimental Forest Enclosure is currently open to deer and elk hunting only by permit during controlled hunts. Big Game Auction and Raffle, and Mandatory Reporting Incentive tag holders are not eligible to hunt within the enclosure. Holders of the new Premium Deer and Premium Elk tags are not currently excluded from the area. This rule amendment will exclude Premium Deer and Premium Elk tag holders from hunting within the enclosure.

Rules Coordinator: Michelle Tate—(503) 947-6044

ADMINISTRATIVE RULES

635-065-0625

Regulations on State and Federal Wildlife Areas, Refuges and Special Areas

State and Federal wildlife areas, refuges and special areas listed below shall be open to hunting during authorized seasons, subject to the following special regulations and exceptions:

(1) Bear Valley National Wildlife Refuge (Klamath County): Closed to all public entry except walk-in deer hunting prior to November 1.

(2) Cascade Head — Lincoln City Area: The Cascade Head — Lincoln City Area is closed to hunting with centerfire rifles, muzzleloaders, or handguns. Hunting is restricted to archery and shotguns only during authorized seasons, except for Department approved emergency hunts. Hunters using shotguns for elk shall use slugs (single projectile) only. The Cascade Head — Lincoln City Area boundaries shall be defined as follows: Beginning at the Pacific Ocean and Siletz River mouth, east along the north shoreline of the Siletz River to Drift Cr. Rd. (mile post 1 on Hwy 229); north on Drift Cr. Rd. to Anderson Cr. Rd.; north on Anderson Cr. Rd. to Schooner Cr. Rd.; west on Schooner Cr. Rd. to Forest Rd. 2200; north and east on FR 2200 to FR 1726; west on FR 1726 to FR 2100; northeast on FR 2100 to the power line crossing; north along the power line to State Hwy. 18; west on Hwy 18 to Old Scenic Hwy 101; north on Old Scenic Hwy 101 to Three Rocks Rd.; west on Three Rocks Rd. to U.S. Hwy 101; north on Hwy 101 to FR 1861; west on FR 1861 to Harts Cove trailhead; west on Harts Cove trail to the Pacific Ocean; south along the coastline to the Siletz River, point of beginning.

(3) Cold Springs Refuge (Umatilla County): The Cold Springs Refuge shall be closed to deer and elk hunting.

(4) Dean Creek Elk Viewing Area (Douglas County): All Bureau of Land Management lands within or contiguous to BLM lands within T22S R11W (including Spruce Reach Island located adjacent to Hwy. 38 and between the outlets of Koapke and Hinsdale Sloughs) are closed to hunting. Also, other lands located within the following boundary are closed to hunting during all elk and deer seasons that pertain to this area: beginning at the intersection of Schofield Rd. and Hwy. 38, south on Schofield Rd. to its intersection with Hakki Ridge Rd., east on Hakki Ridge Rd. to the crest of Hakki Ridge, east along the crest of Hakki Ridge to its intersection with the BLM boundary located in T22S, R11W Section 4, easterly along the BLM boundary to Hwy. 38, west on Hwy 38 to point of beginning.

(5) Dunes National Recreational Area: Use of rifles and handguns is prohibited for all hunting in that portion of the Siuslaw Unit west of Highway 101 and north of Tahkenitch Creek.

(6) North Bank Habitat Management Area (NBHMA; previously known as the Dunning Ranch Area in Douglas County): 6,500 acres located approximately eight miles northeast of Roseburg. Area: All BLM lands located in T25S, R5W, Sections 35,36; T26S, R5W, Sections 1,2,11,12,13,14; T25S, R4W, Sections 31,32,33; T26S, R4W, Sections 4,5,6,7,8,18. This area is closed to all big game hunting except for and during controlled hunts specific to the NBHMA by hunters possessing a controlled hunt tag for the area. Elk, black bear, and cougar hunting will be allowed by hunters who possess a valid NBHMA controlled hunt tag in addition to valid elk, black bear, or cougar tags. The use of bait for hunting game mammals is prohibited on NBHMA. All BLM lands located in T25S, R5W, Sections 35, 36; T26S, R5W, Sections 1, 2, 11, 12, 13, 14; T25S, R4W, Sections 31,32, 33; T26S, R4W, Sections 4, 5, 6, 7, 8, 18.

(7) William Finley National Wildlife Refuge (Benton County):

(a) Portions of the Refuge are open to deer and elk hunting under special regulations established by the Refuge.

(b) All hunters shall obtain a refuge permit and check in and out of the refuge daily. Information about deer and elk hunting locations, seasons, weapon restrictions, and application instructions are available at the refuge office at 541-757-7236 or on their website (http://www.fws.gov/refuge/William_L_Finley/Hunt.html).

(8) Government Island State Recreation Area (Multnomah County): Use of rifles, handguns, and shotguns with slugs or buckshot, and bows is prohibited at all times.

(9) Hart Mountain National Antelope Refuge (Lake County): Portions of the refuge shall be open for hunting as prescribed under chukar season, controlled pronghorn antelope and bighorn sheep hunts, deer bowhunting season, and muzzleloader deer season. The refuge is open for pronghorn antelope Mandatory Reporting Incentive tag holders, and pronghorn antelope and bighorn sheep auction and raffle tag holders but is closed for Access and Habitat deer and elk auction and raffle and Mandatory Reporting Incentive tag holders.

(10) Heppner Regulated Hunt Area: Closed to all motor vehicle use year-round unless posted otherwise, open fires and camping prohibited in

posted areas. Approximately 63 square miles in Townships 2, 3, 4, and 5 South, Ranges 25, 26, 27 and 28 East;

(11) John Day Fossil Beds National Monument: Those parts of the National Monument in the Grizzly, Biggs, Fossil, and Northside Units are closed to all hunting and trapping.

(12) John Day River Refuge: Includes all land within 1/4 mile of the John Day River mean high water line from the Columbia River upstream to Thirty Mile Creek. Within this area, from the Columbia Rvr upstream to Rock Cr, the area shall be open to hunting of upland game birds during authorized seasons only between September 1 and October 31 annually but closed to all waterfowl hunting. The remaining area from Rock Cr upstream to Thirty Mile Cr is open to the hunting of all game birds during authorized seasons. Hunting of big game is allowed during authorized seasons.

(13) Klamath Marsh National Wildlife Refuge: This area is closed to all deer and elk hunting.

(14) Long Ranch (Linn County): Forty-eight acres in T13S, R4E, and S32 are closed to all hunting.

(15) Malheur National Wildlife Refuge (Harney County): Portions of the refuge in Blitzen Valley lying west of State Highway 205 is open during authorized rifle and bow deer and pronghorn antelope seasons.

(16) McDonald Forest-Dunn Forest Area (Benton County): The area is closed to all hunting except during controlled hunts as authorized by the commission.

(17) McKay Creek Refuge (Umatilla County): This refuge is closed to deer and elk hunting.

(18) Metolius Wildlife Refuge (Jefferson County): All hunting, injuring, taking, killing, or destroying any wild bird or mammal on public land is prohibited on public lands within T12 and T13S, R9E, bounded by USFS road 1420 and 1419 on the west; road 1400 on the south and east; and road 1420-400, Metolius River, and posted boundary from the Metolius River to road 1400 on the north (approximately five square miles). 36 CFR 261.58(v).

(19) Mill Creek Watershed (Umatilla County): This watershed is closed to all access and hunting except by holders of a Mill Creek Watershed controlled elk tag and a Forest Service entry permit.

(20) Newberry Crater Wildlife Refuge (Deschutes County): All hunting, injuring, taking, killing, or destroying any wild bird or mammal is prohibited on public lands within the rim of Newberry Crater in: T21S, R12E; T22S, R12E; T21S, R13E; T22S, R13E (approximately 15 square miles).

(21) Rimrock Springs Wildlife Area (Grizzly Unit): This area is closed to all hunting.

(22) Rogue River Area:

(a) All land within one mile of the Rogue River between Grave Creek and Lobster Creek is closed to bear hunting

(b) All land within 1/4 mile of the Rogue River in the wild river section from Grave Creek downstream to Watson Creek is closed to all hunting except during authorized seasons.

(23) Snake River Islands (Malheur County): Closed to hunting with rifles.

(24) South Slough National Estuarine Reserve: Specific areas are closed to hunting due to public health and safety. Contact reserve headquarters office for specific closures.

(25) Starkey Experimental Forest Enclosure (Union County): That portion of The Starkey Experimental Forest within the eight foot high elk-proof fence enclosure is closed to all hunting during deer and elk season except for persons possessing a controlled hunt tag for the area. A posted 1/4 mile buffer zone on the National Forest lands surrounding the enclosure is closed to all hunting with a centerfire rifle or bow. The enclosure is open to deer and elk hunting only by permit during controlled hunts. The main study area is open to hunting of other species during authorized seasons. The 12-foot right-of-way along each side of all eight foot-high perimeter and internal game fences is closed to all motorized travel. Public entry is allowed only through the main gate. The Experimental Forest is closed to all public entry during the winter closure, which runs from the day after the controlled antlerless elk hunt until May 1 annually. Access and Habitat auction or raffle tag holders, Mandatory Incentive Tag holders, and Premium Deer and Premium Elk tag holders are not eligible to hunt in the Starkey Experimental Forest enclosure.

(26) Umatilla Refuge (Morrow County): This refuge is closed to deer and elk hunting except during controlled hunts specific to the refuge and emergency hunts as provided in OAR chapter 635, division 078.

(27) Wallowa Lake (Wallowa County): All land on or within 1/4 mile of the Wallowa River from Wallowa Lake upstream to the falls and within 1/4 mile along the west side of Wallowa Lake from the Wallowa Lake State Park to the Wallowa River outlet is closed to all big game hunting.

ADMINISTRATIVE RULES

(28) Willamette River Greenway Corridor: Hunting is permitted with shotguns or bows and arrows only during authorized season on Willamette River Greenway parcels, except in those parcels where hunting is prohibited.

Stat. Auth.: ORS 496.012, 496.138, 496.146 & 496.162
Stats. Implemented: ORS 496.012, 496.138, 496.146 & 496.162
Hist.: FWC 123, f. & ef. 6-9-77; FWC 33-1978, f. & ef. 6-30-78; FWC 28-1979, f. & ef. 8-2-79; FWC 33-1980, f. & ef. 6-30-80; FWC 6-1981, f. & ef. 1-23-81; FWC 11-1981, f. & ef. 3-31-81; FWC 20-1981, f. & ef. 6-19-81; FWC 37-1982, f. & ef. 6-25-82; FWC 28, f. & ef. 7-8-83; FWC 34-1984, f. & ef. 7-24-84; FWC 43-1985, f. & ef. 8-22-85; FWC 35-1986, f. & ef. 8-7-86; FWC 41-1987, f. & ef. 7-6-87; FWC 38-1988, f. & cert. ef. 6-13-88; FWC 94-1988(Temp), f. & cert. ef. 9-19-88; FWC 15-1989, f. & cert. ef. 3-28-89; FWC 63-1989, f. & cert. ef. 8-15-89; FWC 24-1990, f. & cert. ef. 3-21-90; FWC 55-1990, f. & cert. ef. 6-21-90; FWC 20-1991, f. & cert. ef. 3-12-91; FWC 58-1991, f. & cert. ef. 6-24-91; FWC 36-1993, f. & cert. ef. 6-14-93; FWC 18-1994, f. 3-30-94, cert. ef. 5-1-94; FWC 4-1995, f. 1-1-95, cert. ef. 7-1-95; FWC 18-1996, f. 4-10-96, cert. ef. 8-1-96; FWC 9-1997, f. & cert. ef. 2-27-97; FWC 38-1997, f. & cert. ef. 6-17-97; FWC 71-1997, f. & cert. ef. 12-29-97; DFW 49-1998, f. & cert. ef. 6-22-98; DFW 1-1999, f. & cert. ef. 1-14-99; DFW 47-1999, f. & cert. ef. 6-16-99; DFW 92-1999, f. 12-8-99, cert. ef. 1-1-00; DFW 30-2000, f. & cert. ef. 6-14-00; DFW 82-2000, f. 12-21-00, cert. ef. 1-1-01; DFW 121-2001, f. 12-24-01, cert. ef. 1-1-02; DFW 2-2003, f. & cert. ef. 1-17-03; DFW 9-2003(Temp), f. & cert. ef. 1-28-03 thru 6-16-03; DFW 118-2003, f. 12-4-03, cert. ef. 1-1-04; DFW 122-2004, f. 12-21-04, cert. ef. 1-1-05; DFW 128-2005, f. 12-1-05, cert. ef. 1-1-06; DFW 127-2006, f. 12-7-06, cert. ef. 1-1-07; DFW 118-2007, f. 10-31-07, cert. ef. 1-1-08; DFW 150-2008, f. 12-18-08, cert. ef. 1-1-09; DFW 140-2009, f. 11-3-09, cert. ef. 1-1-10; DFW 168-2010, f. 12-29-10, cert. ef. 1-1-11; DFW 159-2011, f. 12-14-11, cert. ef. 1-1-12; DFW 147-2012, f. 12-18-12, cert. ef. 1-1-13; DFW 80-2013(Temp), f. 7-25-13, cert. ef. 7-26-13 thru 1-21-14; Administrative correction, 2-24-14; DFW 117-2014, f. & cert. ef. 8-7-14; DFW 1-2015, f. & cert. ef. 1-6-15; DFW 18-2016, f. & cert. ef. 3-21-16; DFW 20-2017, f. & cert. ef. 3-2-17; DFW 36-2017(Temp), f. & cert. ef. 3-31-17 thru 9-26-17

Rule Caption: Extend Columbia River Recreational Seasons for Salmon, Steelhead and Shad Set.

Adm. Order No.: DFW 37-2017(Temp)

Filed with Sec. of State: 4-3-2017

Certified to be Effective: 4-7-17 thru 6-15-17

Notice Publication Date:

Rules Amended: 635-023-0125

Subject: This amended rule extends the 2017 Columbia River recreational spring Chinook, steelhead and shad seasons with descriptions of areas, dates, and bag limits for harvest of adipose fin-clipped Chinook salmon, adipose fin-clipped steelhead and shad. Revisions are consistent with action taken March 30, 2017 by the Oregon and Washington Departments of Fish and Wildlife in a meeting of the Columbia River Compact.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-023-0125

Spring Sport Fishery

(1) The 2017 Oregon Sport Fishing Regulations provide requirements for the Columbia River Zone and the Snake River Zone. However, additional regulations may be adopted in this rule division from time to time, and, to the extent of any inconsistency, they supersede the 2017 Oregon Sport Fishing Regulations.

(2) The Columbia River recreational salmon and steelhead fishery downstream of Bonneville Dam is open from the mouth at Buoy 10 upstream to Beacon Rock (boat and bank) plus bank angling only from Beacon Rock upstream to the Bonneville Dam deadline from Wednesday, March 1 through Monday, April 10, 2017. (41 retention days) with the following restrictions:

(a) No more than two adult adipose fin-clipped salmonids, of which only one may be a Chinook, may be retained per day. All non-adipose fin-clipped salmon and non-adipose fin-clipped steelhead must be released immediately unharmed.

(b) The upstream boat boundary at Beacon Rock is defined as: “a deadline marker on the Oregon bank (approximately four miles downstream from Bonneville Dam Powerhouse One) in a straight line through the western tip of Pierce Island to a deadline marker on the Washington bank at Beacon Rock.”

(c) No angling is allowed within a closure area near the mouth of the Lewis River. This closure area is defined as: A line from a marker on the lower end of Bachelor Island through USCG buoy Red #4 to the Oregon shore, downstream to a line from the lower (north) end of Sauvie Island across to the downstream range marker (0.7 miles downstream of the Lewis R.) and continuing along the wing jetty to the Washington Shore.

(d) All other permanent 2017 Oregon Sport Fishing Regulations apply.

(3) The Columbia River recreational salmon and steelhead fishery upstream of the Tower Island power lines (approximately 6 miles below

The Dalles Dam) to the Oregon/Washington border, plus the Oregon and Washington banks between Bonneville Dam and the Tower Island power lines is open from Thursday, March 16 through Friday, May 5, 2017 (51 retention days) with the following restrictions:

(a) No more than two adult adipose fin-clipped salmonids, of which only one may be a Chinook, may be retained per day. All non-adipose fin-clipped salmon and non-adipose fin-clipped steelhead must be released immediately unharmed.

(b) All other permanent 2017 Oregon Sport Fishing Regulations apply.

(4) Beginning Wednesday, March 1 through Thursday, June 15, 2017 the following restrictions are in effect for Columbia River Select Area recreational salmon and steelhead fisheries:

(a) On days when the recreational fishery below Bonneville Dam is open to retention of Chinook, the salmonid daily bag limit in Select Areas will be the same as mainstem Columbia River bag limits; and

(b) On days when the mainstem Columbia River fishery is closed to Chinook retention, the permanent salmonid bag limit regulations for Select Areas apply.

(5) Beginning Thursday, March 16 through Monday, May 15, 2017, the mainstem Columbia River will be open for retention of adipose fin-clipped steelhead from Buoy 10 upstream to the Oregon/Washington border and open for shad from Buoy 10 upstream to Bonneville Dam only during days and in areas open for retention of adipose fin-clipped spring Chinook.

[Publications: Publications referenced are available from the agency.]

Stat. Auth.: ORS 496.138, 496.146 & 506.119
Stats. Implemented: ORS 496.162 & 506.129
Hist.: DFW 11-2004, f. & cert. ef. 2-13-04; DFW 17-2004(Temp), f. & cert. ef. 3-10-04 thru 7-31-04; DFW 29-2004(Temp), f. 4-15-04, cert. ef. 4-22-04 thru 7-31-04; DFW 30-2004(Temp), f. 4-21-04, cert. ef. 4-22-04 thru 7-31-04; DFW 36-2004(Temp), f. 4-29-04, cert. ef. 5-1-04 thru 7-31-04; DFW 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; DFW 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; DFW 51-2004(Temp), f. 6-9-04, cert. ef. 6-16-04 thru 7-31-04; Administrative correction 8-19-04; DFW 117-2004, f. 12-13-04, cert. ef. 1-1-05; DFW 6-2005, f. & cert. ef. 2-14-05; DFW 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; DFW 35-2005(Temp), f. 5-4-05, cert. ef. 5-5-05 thru 10-16-05; DFW 38-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; DFW 44-2005(Temp), f. 5-17-05, cert. ef. 5-22-05 thru 10-16-05; DFW 51-2005(Temp), f. 6-3-05, cert. ef. 6-4-05 thru 7-31-05; Administrative correction 11-18-05; DFW 136-2005, f. 12-7-05, cert. ef. 1-1-06; DFW 5-2006, f. & cert. ef. 2-15-06; DFW 21-2006(Temp), f. 4-13-06, cert. ef. 4-14-06 thru 5-15-06; DFW 27-2006(Temp), f. 5-12-06, cert. ef. 5-13-06 thru 6-15-06; DFW 29-2006(Temp), f. & cert. ef. 5-16-06 thru 7-31-06; DFW 79-2006, f. 8-11-06, cert. ef. 1-1-07; DFW 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; DFW 9-2007, f. & cert. ef. 2-14-07; DFW 28-2007(Temp), f. & cert. ef. 4-26-07 thru 7-26-07; DFW 33-2007(Temp), f. 5-15-07, cert. ef. 5-16-07 thru 7-30-07; DFW 37-2007(Temp), f. & cert. ef. 5-31-07 thru 7-30-07; DFW 39-2007(Temp), f. 6-5-07, cert. ef. 6-6-07 thru 7-31-07; DFW 136-2007, f. 12-31-07, cert. ef. 1-1-08; DFW 13-2008(Temp), f. 2-21-08, cert. ef. 2-25-08 thru 8-22-08; DFW 17-2008(Temp), f. & cert. ef. 2-27-08 thru 8-22-08; DFW 35-2008(Temp), f. 4-17-08, cert. ef. 4-21-08 thru 8-22-08; DFW 49-2008(Temp), f. & cert. ef. 5-13-08 thru 6-15-08; Administrative correction 7-22-08; DFW 156-2008, f. 12-31-08, cert. ef. 1-1-09; DFW 10-2009(Temp), f. 2-13-09, cert. ef. 3-1-09 thru 6-15-09; DFW 18-2009, f. & cert. ef. 2-26-09; DFW 48-2009(Temp), f. 5-14-09, cert. ef. 5-15-09 thru 6-16-09; DFW 68-2009(Temp), f. 6-11-09, cert. ef. 6-12-09 thru 6-16-09; Administrative correction 7-21-09; DFW 144-2009, f. 12-8-09, cert. ef. 1-1-10; DFW 19-2010(Temp), f. 2-26-10, cert. ef. 3-1-10 thru 8-27-10; DFW 23-2010(Temp), f. & cert. ef. 3-2-10 thru 8-27-10; DFW 45-2010(Temp), f. 4-21-10, cert. ef. 4-24-10 thru 7-31-10; DFW 49-2010(Temp), f. 4-27-10, cert. ef. 4-29-10 thru 7-31-10; DFW 55-2010(Temp), f. 5-7-10, cert. ef. 5-8-10 thru 7-31-10; Suspended by DFW 88-2010(Temp), f. 6-25-10, cert. ef. 6-26-10 thru 7-31-10; Administrative correction 8-18-10; DFW 171-2010, f. 12-30-10, cert. ef. 1-1-11; DFW 13-2011(Temp), f. & cert. ef. 2-14-11 thru 6-15-11; DFW 28-2011(Temp), f. 4-7-11, cert. ef. 4-8-11 thru 6-15-11; DFW 30-2011(Temp), f. 4-15-11, cert. ef. 4-16-11 thru 6-15-11; DFW 33-2011(Temp), f. & cert. ef. 4-21-11 thru 6-15-11; DFW 39-2011(Temp), f. 5-5-11, cert. ef. 5-7-11 thru 6-15-11; DFW 48-2011(Temp), f. 5-13-11, cert. ef. 5-15-11 thru 6-15-11; DFW 55-2011(Temp), f. 5-25-11, cert. ef. 5-27-11 thru 6-15-11; DFW 59-2011(Temp), f. & cert. ef. 6-2-11 thru 6-15-11; Administrative correction 6-28-11; DFW 163-2011, f. 12-27-11, cert. ef. 1-1-12; DFW 8-2012(Temp), f. 2-6-12, cert. ef. 2-15-12 thru 6-15-12; DFW 31-2012(Temp), f. 4-5-12, cert. ef. 4-6-12 thru 6-15-12; DFW 33-2012(Temp), f. 4-12-12, cert. ef. 4-14-12 thru 6-15-12; DFW 45-2012(Temp), f. 5-1-12, cert. ef. 5-2-12 thru 7-31-12; DFW 47-2012(Temp), f. 5-15-12, cert. ef. 5-16-12 thru 7-31-12; DFW 49-2012(Temp), f. 5-18-12, cert. ef. 5-19-12 thru 7-31-12; DFW 51-2012(Temp), f. 5-23-12, cert. ef. 5-26-12 thru 7-31-12; Suspended by DFW 85-2012(Temp), f. 7-6-12, cert. ef. 7-9-12 thru 8-31-12; DFW 149-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 12-2013(Temp), f. 2-12-13, cert. ef. 2-28-13 thru 7-31-13; DFW 26-2013(Temp), f. 4-4-13, cert. ef. 4-5-13 thru 7-1-13; DFW 38-2013(Temp), f. 5-22-13, cert. ef. 5-25-13 thru 7-1-13; DFW 49-2013(Temp), f. 6-7-13, cert. ef. 6-8-13 thru 6-30-13; Administrative correction, 7-18-13; DFW 137-2013, f. 12-19-13, cert. ef. 1-1-14; DFW 12-2014(Temp), f. 2-13-14, cert. ef. 3-1-14 thru 6-15-14; DFW 29-2014(Temp), f. 4-3-14, cert. ef. 4-4-14 thru 6-15-14; DFW 31-2014(Temp), f. 4-17-14, cert. ef. 4-19-14 thru 7-31-14; DFW 40-2014(Temp), f. 5-7-14, cert. ef. 5-9-14 thru 6-30-14; DFW 44-2014(Temp), f. 5-14-14, cert. ef. 5-15-14 thru 6-15-14; DFW 52-2014(Temp), f. 5-28-14, cert. ef. 5-31-14 thru 6-30-14; Administrative correction, 7-24-14; DFW 165-2014, f. 12-18-14, cert. ef. 1-1-15; DFW 12-2015(Temp), f. 2-23-15, cert. ef. 3-1-15 thru 6-15-15; DFW 16-2015(Temp), f. & cert. ef. 3-5-15 thru 6-15-15; DFW 26-2015(Temp), f. 4-8-15, cert. ef. 4-10-15 thru 6-15-15; DFW 35-2015(Temp), f. 4-30-15, cert. ef. 5-2-15 thru 6-15-15; DFW 40-2015(Temp), f. & cert. ef. 5-6-15 thru 6-15-15; DFW 52-2015(Temp), f. 5-27-15, cert. ef. 5-28-15 thru 6-15-15; DFW 59-2015(Temp), f. 6-2-15, cert. ef. 6-3-15 thru 6-15-15; DFW 167-2015, f. 12-29-15, cert. ef. 1-1-16; DFW 9-2016(Temp), f. 2-1-16, cert. ef. 3-1-16 thru 6-15-16; DFW 29-2016(Temp), f. 4-7-16, cert. ef. 4-8-16 thru 6-15-16; DFW 44-2016(Temp), f. 5-5-16, cert. ef. 5-6-16 thru 6-15-16; DFW 49-2016(Temp), f. 5-11-16, cert. ef. 5-13-16 thru 6-15-16; DFW 52-2016(Temp), f. 5-19-16, cert. ef. 5-20-16 thru 6-15-16; DFW 57-2016(Temp), f. 5-25-16, cert. ef. 5-28-16 thru 6-15-16; DFW 68-2016(Temp), f. 6-9-16, cert. ef. 6-10-16 thru 6-16-16; DFW 153-2016, f. 12-28-

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16, cert. ef. 1-1-17; DFW 18-2017, f. 2-28-17, cert. ef. 3-1-17 thru 6-15-17; DFW 37-2017(Temp), f. 4-3-17, cert. ef. 4-7-17 thru 6-15-17

Rule Caption: Modifications to 2017 Sportfishing regulations in Wickiup Reservoir.

Adm. Order No.: DFW 38-2017(Temp)

Filed with Sec. of State: 4-5-2017

Certified to be Effective: 4-5-17 thru 10-1-17

Notice Publication Date:

Rules Amended: 635-018-0090

Subject: This amended rule will remove the 25 kokanee bonus bag limit in Wickiup Reservoir and modify the open fishing season to April 22 through August 31, 2017 in the Deschutes Arm of Wickiup Reservoir. The Deschutes River Arm of Wickiup Reservoir will close to all angling on September 1st 2017, between the ODFW marker at Gull Point and ODFW marker upstream of Sheep's Bridge to provide protection to fish in this section of the reservoir. This amended rule also clarifies the angling regulations in this section above the Sheep's Bridge marker.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-018-0090

Inclusions and Modifications

(1) The 2017 Oregon Sport Fishing Regulations provide requirements for the Central Zone. However, additional regulations may be adopted in this rule division from time to time and to the extent of any inconsistency, they supersede the 2017 Oregon Sport Fishing Regulations.

(2) Hood River from the mouth to the mainstem confluence with the East Fork, and the West Fork from the confluence with the mainstem upstream to the angling deadline 200 feet downstream of Punchbowl Falls is open to angling for hatchery Chinook salmon from April 15 through June 30, 2017.

(a) The catch limit is one (1) adult hatchery Chinook salmon per day, and five (5) hatchery jack salmon per day. All wild Chinook salmon must be released unharmed.

(b) It is unlawful to continue angle in the Hood River after retaining an adult Chinook.

(3) Wickiup Reservoir

(a) Daily trout bag limit is 5 fish which includes kokanee (removes 25 kokanee bonus bag limit).

(b) The Deschutes River Arm between ODFW marker at Gull Point and ODFW marker upstream of Sheep's Bridge is open from April 22–August 31.

(c) Upstream of ODFW marker near Sheep's Bridge:

(A) Open May 22–Sep 30

(B) 2 trout per day, 8 inch minimum length, (including brook, brown, kokanee, and hatchery rainbow trout).

(C) Wild rainbow trout must be released

Stat. Auth.: ORS 496.138, 496.146, 497.121 & 506.119

Stat. Implemented: ORS 496.004, 496.009, 496.162 & 506.129

Hist.: FWC 82-1993, f. 12-22-93, cert. ef. 1-1-94; FWC 20-1994(Temp), f. & cert. ef. 4-11-94; FWC 24-1994(Temp), f. 4-29-94, cert. ef. 4-30-94; FWC 34-1994(Temp), f. 6-14-94, cert. ef. 6-16-94; FWC 54-1994, f. 8-25-94, cert. ef. 9-1-94; FWC 65-1994(Temp), f. 9-15-94, cert. ef. 9-17-94; FWC 67-1994(Temp), f. & cert. ef. 9-26-94; FWC 70-1994, f. 10-4-95, cert. ef. 11-1-94; FWC 18-1995, f. 3-2-95, cert. ef. 4-1-95; FWC 60-1995(Temp), f. 7-24-95, cert. ef. 8-1-95; FWC 77-1995, f. 9-13-95, cert. ef. 1-1-96; FWC 11-1996(Temp), f. 3-8-96, cert. ef. 4-1-96; FWC 32-1996(Temp), f. 6-7-96, cert. ef. 6-16-96; FWC 38-1996(Temp), f. 6-14-96, cert. ef. 7-1-96; FWC 72-1996, f. 12-31-96, cert. ef. 1-1-97; FWC 20-1997, f. & cert. ef. 3-24-97; FWC 21-1997, f. & cert. ef. 4-1-97; FWC 27-1997(Temp), f. 5-2-97, cert. ef. 5-9-97; FWC 75-1997, f. 12-31-97, cert. ef. 1-1-98; DFW 25-1998(Temp), f. & cert. ef. 3-25-98 thru 8-31-98; DFW 56-1998(Temp), f. 7-24-98, cert. ef. 8-1-98 thru 10-31-98; DFW 70-1998, f. & cert. ef. 8-28-98; DFW 100-1998, f. 12-23-98, cert. ef. 1-1-99; DFW 31-1999, f. & cert. ef. 5-3-99; DFW 78-1999, f. & cert. ef. 10-4-99; DFW 96-1999, f. 12-27-99, cert. ef. 1-1-00; DFW 12-2000(Temp), f. 3-20-00, cert. ef. 4-15-00 thru 7-31-00; DFW 27-2000(Temp), f. 5-15-00, cert. ef. 8-1-00 thru 10-31-00; DFW 28-2000, f. 5-23-00, cert. ef. 5-24-00 thru 7-31-00; DFW 83-2000(Temp), f. 12-28-00, cert. ef. 1-1-01 thru 1-31-01; DFW 1-2001, f. 1-25-01, cert. ef. 2-1-01; DFW 13-2001(Temp), f. 3-12-01, cert. ef. 4-7-01 thru 7-31-01; DFW 40-2001(Temp), f. & cert. ef. 5-24-01 thru 11-20-01; DFW 44-2001(Temp), f. 5-25-01, cert. ef. 6-1-01 thru 7-31-01; DFW 123-2001, f. 12-31-01, cert. ef. 1-1-02; DFW 5-2002(Temp), f. 1-11-02 cert. ef. 1-12-02 thru 7-11-02; DFW 23-2002(Temp), f. 3-21-02, cert. ef. 4-6-02 thru 7-31-02; DFW 25-2002(Temp), f. 3-22-02, cert. ef. 4-6-02 thru 7-31-02; DFW 26-2002, f. & cert. ef. 3-21-02; DFW 62-2002, f. 6-14-02, cert. ef. 7-11-02; DFW 74-2002(Temp), f. 7-18-02, cert. ef. 8-1-02 thru 10-31-02; DFW 91-2002(Temp), f. 8-19-02, cert. ef. 8-20-02 thru 11-1-02 (Suspended by DFW 101-2002(Temp), f. & cert. ef. 10-3-02 thru 11-1-02); DFW 97-2002(Temp), f. & cert. ef. 8-29-02 thru 10-31-02; DFW 130-2002, f. 11-21-02, cert. ef. 1-1-03; DFW 26-2003(Temp), f. 3-28-03, cert. ef. 4-15-03 thru 7-31-03; DFW 66-2003(Temp), f. 7-17-03, cert. ef. 8-1-03 thru 10-31-03; DFW 125-2003, f. 12-11-03, cert. ef. 1-1-04; DFW 23-2004(Temp), f. 3-22-04, cert. ef. 4-1-04 thru 7-31-04; DFW 77-2004(Temp), f. 7-28-04, cert. ef. 8-1-04 thru 10-31-04, Administrative correction 11-22-04; DFW 117-2004, f. 12-13-04, cert. ef. 1-1-05; DFW 19-2005(Temp), f. 3-16-05, cert. ef. 4-15-05 thru 7-31-05; DFW 41-2005(Temp), f. 5-13-05, cert. ef. 5-15-05 thru 7-31-05; DFW 83-

2005(Temp), f. 7-29-05, cert. ef. 8-1-05 thru 10-31-05; DFW 84-2005(Temp), f. & cert. ef. 8-1-05 thru 12-31-05; DFW 136-2005, f. 12-7-05, cert. ef. 1-1-06; DFW 59-2006(Temp), f. 7-10-06, cert. ef. 8-1-06 thru 10-31-06; DFW 79-2006, f. 8-11-06, cert. ef. 1-1-07; DFW 18-2007(Temp), f. 3-22-07, cert. ef. 4-15-07 thru 7-31-07; DFW 55-2007(Temp), f. 7-6-07, cert. ef. 8-1-07 thru 10-31-07; Administrative correction 11-17-07; DFW 136-2007, f. 12-31-07, cert. ef. 1-1-08; DFW 26-2008(Temp), f. 3-17-08, cert. ef. 4-15-08 thru 7-31-08; DFW 27-2008(Temp), f. 3-24-08, cert. ef. 5-1-08 thru 10-27-08; Administrative correction 11-18-08; DFW 156-2008, f. 12-31-08, cert. ef. 1-1-09; DFW 16-2009(Temp), f. 2-25-09, cert. ef. 4-15-09 thru 6-30-09; DFW 61-2009(Temp), f. 6-1-09, cert. ef. 8-1-09 thru 10-31-09; DFW 104-2009(Temp), f. 8-28-09, cert. ef. 9-1-09 thru 12-31-09; DFW 144-2009, f. 12-8-09, cert. ef. 1-1-10; DFW 7-2010(Temp), f. 1-25-10, cert. ef. 4-1-10 thru 7-31-10; DFW 27-2010(Temp), f. 3-8-10, cert. ef. 4-15-10 thru 7-31-10; DFW 66-2010(Temp), f. 5-18-10, cert. ef. 5-22-10 thru 10-31-10; DFW 86-2010(Temp), f. 6-23-10, cert. ef. 7-1-10 thru 10-31-10; DFW 106-2010(Temp), f. 7-26-10, cert. ef. 8-1-10 thru 12-31-10; DFW 164-2010(Temp), f. 12-28-10, cert. ef. 1-1-11 thru 6-29-11; DFW 171-2010, f. 12-30-10, cert. ef. 1-1-11; DFW 16-2011(Temp), f. 2-16-11, cert. ef. 4-15-11 thru 7-31-11; DFW 17-2011(Temp), f. 2-17-11, cert. ef. 4-15-11 thru 7-31-11; DFW 42-2011(Temp), f. & cert. ef. 5-10-11 thru 10-31-11; DFW 93-2011(Temp), f. 7-13-11, cert. ef. 8-1-11 thru 10-31-11; DFW 123-2011(Temp), f. 9-2-11, cert. ef. 9-3-11 thru 12-31-11; DFW 160-2011(Temp), f. 12-20-11, cert. ef. 1-1-12 thru 4-30-12; DFW 163-2011, f. 12-27-11, cert. ef. 1-1-12; DFW 21-2012, f. & cert. ef. 3-12-12; DFW 34-2012(Temp), f. 4-13-12, cert. ef. 4-15-12 thru 7-31-12; DFW 55-2012(Temp), f. & cert. ef. 6-4-12 thru 6-30-12; Administrative correction, 8-1-12; DFW 88-2012(Temp), f. 7-16-12, cert. ef. 8-1-12 thru 10-31-12; Administrative correction 11-23-12; DFW 149-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 16-2013(Temp), f. 2-25-13, cert. ef. 4-15-13 thru 6-30-13; DFW 75-2013(Temp), f. 7-15-13, cert. ef. 8-1-13 thru 10-31-13; Administrative correction, 11-22-13; DFW 137-2013, f. 12-19-13, cert. ef. 1-1-14; DFW 13-2014(Temp), f. 2-18-14, cert. ef. 4-15-14 thru 7-31-14; DFW 83-2014(Temp), f. 7-1-14, cert. ef. 8-1-14 thru 10-31-14; Administrative correction 11-24-14; DFW 165-2014, f. 12-18-14, cert. ef. 1-1-15; DFW 27-2015(Temp), f. 4-9-15, cert. ef. 4-15-15 thru 6-30-15; Administrative correction, 7-24-15; DFW 88-2015(Temp), f. 7-16-15, cert. ef. 7-18-15 thru 12-31-15; DFW 99-2015(Temp), f. & cert. ef. 8-3-15 thru 12-31-15; Temporary suspended by DFW 120-2015(Temp), f. 8-31-15, cert. ef. 9-1-15 thru 12-31-15; DFW 128-2015(Temp), f. 9-14-15, cert. ef. 9-18-15 thru 12-31-15; DFW 141-2015(Temp), f. 10-15-15, cert. ef. 10-16-15 thru 12-31-15; DFW 167-2015, f. 12-29-15, cert. ef. 1-1-16; DFW 17-2016(Temp), f. 3-21-16, cert. ef. 4-15-16 thru 7-31-16; Administrative correction, 8-29-16; DFW 153-2016, f. 12-28-16, cert. ef. 1-1-17; DFW 14-2017(Temp), f. 2-14-17, cert. ef. 4-15-17 thru 6-30-17; DFW 38-2017(Temp), f. & cert. ef. 4-5-17 thru 10-1-17

Rule Caption: Extend 2017 Winter Commercial Seasons in the Youngs Bay and Blind Slough Areas.

Adm. Order No.: DFW 39-2017(Temp)

Filed with Sec. of State: 4-5-2017

Certified to be Effective: 4-6-17 thru 9-15-17

Notice Publication Date:

Rules Amended: 635-042-0145, 635-042-0160

Subject: These amended rules extend the 2017 winter commercial salmon seasons for the Youngs Bay and Blind Slough Select Areas. Additional authorized fishing periods in these Select Area sites are set to begin April 6. Modifications are consistent with action taken April 4 2017 by the Department of Fish & Wildlife for the State of Oregon.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-042-0145

Youngs Bay Salmon Season

(1) Salmon and shad may be taken for commercial purposes in those waters of Youngs Bay.

(a) The open fishing periods are established in three segments categorized as the winter fishery, subsection (1)(a)(A); the spring fishery, subsection (1)(a)(B); and summer fishery, subsection (1)(a)(C), as follows:

(A) Winter Season:

(i) Youngs Bay from the Alternate Highway 101 Bridge upstream to the upper boundary markers at the confluence of the Klaskanine and Youngs rivers, including the lower Walluski River upstream to the Highway 202 Bridge; 4:00 p.m. to 8:00 p.m. Thursday April 6, and 6:00 a.m. to 10:00 a.m. Monday April 10, 2017

(B) Spring Season: Thursday April 20 from 2 p.m. to 6 p.m. (4 hours), Tuesday and Thursday nights from April 25 through April 28 from 7 p.m. to 7 a.m. (12 hours), Monday May 1 from 10 a.m. to Tuesday May 2 4 a.m. (18 hours), Wednesday May 3 from 9 a.m. to 9 p.m. (12 hours), Thursday May 4 from 10 a.m. to Friday May 5 4 a.m. (18 hours), noon Monday through noon Friday (4 days/week) from May 8 through June 9 and noon Monday through noon Thursday (3 days) from June 12 through June 15.

(C) Summer Season: Noon Monday through Noon Friday (4 days/week) from June 19 through June 30, Noon Monday July 3 through Noon Thursday July 6 (3 days), and Noon Tuesday through Noon Thursday (2 days/week) from July 11 through July 27.

(b) The fishing areas for the winter, spring and summer fisheries are:

(A) During the winter season, the Youngs Bay open fishing areas are described in (1)(a)(A)(i) through (1)(a)(A)(iii) above.

(B) During the spring and summer seasons, the Youngs Bay open fishing area is identified as the waters of Youngs Bay from the Highway

ADMINISTRATIVE RULES

101 Bridge upstream to the upper boundary markers at the confluence of the Klaskanine and Youngs rivers, and includes the lower Walluski River upstream to the Highway 202 Bridge and the lower Lewis and Clark River upstream to the overhead power lines immediately upstream of Barrett Slough.

(2) Gill nets may not exceed 1,500 feet (250 fathoms) in length and weight may not exceed two pounds per any fathom except the use of additional weights and/or anchors attached directly to the headline is allowed upstream of markers located approximately 200 yards upstream of the mouth of the Walluski River during all Youngs Bay commercial fisheries and upstream of the alternate Highway 101 Bridge in the Lewis and Clark River. A red cork must be placed on the corkline every 25 fathoms as measured from the first mesh of the net. Red corks at 25-fathom intervals must be in color contrast to the corks used in the remainder of the net.

(a) It is unlawful to use a gill net having a mesh size that is less than 7-inches during the winter season. It is unlawful to use a gill net having a mesh size that is more than 9.75-inches during the spring and summer seasons. (b) Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(3) Retention and sale of sturgeon is prohibited.

(4) Non-resident commercial fishing and boat licenses are not required for Washington fishers participating in Youngs Bay commercial fisheries. A valid fishing and boat license issued by the state of Washington is considered adequate for participation in this fishery. The open area for non-resident commercial fishers includes all areas open for commercial fishing.

Stat. Auth.: ORS 183.325, 506.109 & 506.119
Stats. Implemented: ORS 506.129

Hist.: FWC 32-1979, f. & ef. 8-22-79; FWC 28-1980, f. & ef. 6-23-80; FWC 42-1980(Temp), f. & ef. 8-22-80; FWC 30-1981, f. & ef. 8-14-81; FWC 42-1981(Temp), f. & ef. 11-5-81; FWC 54-1982, f. & ef. 8-17-82; FWC 37-1983, f. & ef. 8-18-83; FWC 61-1983(Temp), f. & ef. 10-19-83; FWC 42-1984, f. & ef. 8-20-84; FWC 39-1985, f. & ef. 8-15-85; FWC 37-1986, f. & ef. 8-11-86; FWC 72-1986(Temp), f. & ef. 10-31-86; FWC 64-1987, f. & ef. 8-7-87; FWC 73-1988, f. & ef. 8-19-88; FWC 55-1989(Temp), f. 8-7-89, cert. ef. 8-20-89; FWC 82-1990(Temp), f. 8-14-90, cert. ef. 8-19-90; FWC 86-1991, f. 8-7-91, cert. ef. 8-18-91; FWC 123-1991(Temp), f. & cert. ef. 10-21-91; FWC 30-1992(Temp), f. & cert. ef. 4-27-92; FWC 35-1992(Temp), f. 5-22-92, cert. ef. 5-25-92; FWC 74-1992 (Temp), f. 8-10-92, cert. ef. 8-16-92; FWC 28-1993(Temp), f. & cert. ef. 4-26-93; FWC 48-1993, f. 8-6-93, cert. ef. 8-9-93; FWC 21-1994(Temp), f. 4-22-94, cert. ef. 4-25-94; FWC 51-1994, f. 8-19-94, cert. ef. 8-22-94; FWC 64-1994(Temp), f. 9-14-94, cert. ef. 9-15-94; FWC 66-1994(Temp), f. & cert. ef. 9-20-94; FWC 27-1995, f. 3-29-95, cert. ef. 4-1-95; FWC 48-1995(Temp), f. & cert. ef. 8-27-95; FWC 66-1995, f. 8-22-95, cert. ef. 8-27-95; FWC 69-1995, f. 8-25-95, cert. ef. 8-27-95; FWC 8-1995, f. 2-28-96, cert. ef. 3-1-96; FWC 37-1996(Temp), f. 6-11-96, cert. ef. 6-12-96; FWC 41-1996, f. & cert. ef. 8-12-96; FWC 45-1996(Temp), f. 8-16-96, cert. ef. 8-19-96; FWC 54-1996(Temp), f. & cert. ef. 9-23-96; FWC 4-1997, f. & cert. ef. 1-20-97; FWC 47-1997, f. & cert. ef. 8-15-97; FWC 8-1998(Temp), f. & cert. ef. 2-5-98 thru 2-28-98; FWC 14-1998, f. & cert. ef. 3-3-98; FWC 18-1998(Temp), f. 3-9-98, cert. ef. 3-11-98 thru 3-31-98; FWC 60-1998(Temp), f. & cert. ef. 8-7-98 thru 8-21-98; FWC 67-1998, f. & cert. ef. 8-24-98; FWC 10-1999, f. & cert. ef. 2-26-99; FWC 52-1999(Temp), f. & cert. ef. 8-2-99 thru 8-6-99; FWC 55-1999, f. & cert. ef. 8-12-99; FWC 9-2000, f. & cert. ef. 2-25-00; FWC 42-2000, f. & cert. ef. 8-3-00; FWC 3-2001, f. & cert. ef. 2-6-01; FWC 66-2001(Temp), f. 8-2-01, cert. ef. 8-6-01 thru 8-14-01; FWC 76-2001(Temp), f. & cert. ef. 8-20-01 thru 10-31-01; FWC 106-2001(Temp), f. & cert. ef. 10-26-01 thru 12-31-01; FWC 15-2002(Temp), f. & cert. ef. 2-20-02 thru 8-18-02; FWC 82-2002(Temp), f. 8-5-02, cert. ef. 8-7-02 thru 9-1-02; FWC 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; FWC 12-2003, f. & cert. ef. 2-14-03; FWC 17-2003(Temp), f. 2-27-03, cert. ef. 3-1-03 thru 8-1-03; FWC 32-2003(Temp), f. & cert. ef. 4-23-03 thru 8-1-03; FWC 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; FWC 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; FWC 37-2003(Temp), f. & cert. ef. 5-7-03 thru 10-1-03; FWC 75-2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; FWC 89-2003(Temp), f. 9-8-03, cert. ef. 9-9-03 thru 12-31-03; FWC 11-2004, f. & cert. ef. 2-13-04; FWC 19-2004(Temp), f. & cert. ef. 3-12-04 thru 3-31-04; FWC 22-2004(Temp), f. & cert. ef. 3-18-04 thru 3-31-04; FWC 28-2004(Temp), f. 4-8-04, cert. ef. 4-12-04 thru 4-15-04; FWC 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; FWC 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; FWC 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-31-04; FWC 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; FWC 6-2005, f. & cert. ef. 2-14-05; FWC 15-2005(Temp), f. & cert. ef. 3-10-05 thru 7-31-05; FWC 18-2005(Temp), f. & cert. ef. 3-15-05 thru 3-21-05; Administrative correction 4-20-05; FWC 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; FWC 28-2005(Temp), f. & cert. ef. 4-28-05 thru 6-16-05; FWC 37-2005(Temp), f. & cert. ef. 5-5-05 thru 10-16-05; FWC 40-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; FWC 46-2005(Temp), f. 5-17-05, cert. ef. 5-18-05 thru 10-16-05; FWC 73-2005(Temp), f. 7-8-05, cert. ef. 7-11-05 thru 7-31-05; FWC 77-2005(Temp), f. 7-14-05, cert. ef. 7-18-05 thru 7-31-05; FWC 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; FWC 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; FWC 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; FWC 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; FWC 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; FWC 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; FWC 5-2006, f. & cert. ef. 2-15-06; FWC 14-2006(Temp), f. 3-15-06, cert. ef. 3-16-06 thru 7-27-06; FWC 15-2006(Temp), f. & cert. ef. 3-23-06 thru 7-27-06; FWC 17-2006(Temp), f. 3-29-06, cert. ef. 3-30-06 thru 7-27-06; FWC 29-2006(Temp), f. & cert. ef. 5-16-06 thru 7-31-06; FWC 32-2006(Temp), f. & cert. ef. 5-23-06 thru 7-31-06; FWC 35-2006(Temp), f. & cert. ef. 5-30-06 thru 7-31-06; FWC 52-2006(Temp), f. & cert. ef. 6-28-06 thru 7-27-06; FWC 73-2006(Temp), f. 8-1-06, cert. ef. 8-2-06 thru 12-31-06; FWC 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; FWC 119-2006(Temp), f. & cert. ef. 10-18-06 thru 12-31-06; Administrative correction 1-16-07; FWC 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; FWC 9-2007, f. & cert. ef. 2-14-07; FWC 13-2007(Temp), f. & cert. ef. 3-6-07 thru 9-1-07; FWC 16-2007(Temp), f. & cert. ef. 3-14-07 thru 9-9-07; FWC 25-

2007(Temp), f. 4-17-07, cert. ef. 4-18-07 thru 7-26-07; FWC 45-2007(Temp), f. 6-15-07, cert. ef. 6-25-07 thru 7-31-07; FWC 50-2007(Temp), f. 6-29-07, cert. ef. 7-4-07 thru 7-31-07; FWC 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; FWC 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative correction 1-24-08; FWC 6-2008(Temp), f. 1-29-08, cert. ef. 1-31-08 thru 7-28-08; FWC 16-2008(Temp), f. 2-26-08, cert. ef. 3-2-08 thru 8-28-08; FWC 30-2008(Temp), f. 3-27-08, cert. ef. 3-30-08 thru 8-28-08; FWC 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; FWC 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; FWC 85-2008(Temp), f. 7-24-08, cert. ef. 8-7-08 thru 12-31-08; FWC 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; FWC 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; FWC 24-2009(Temp), f. 3-10-09, cert. ef. 3-11-09 thru 7-31-09; FWC 49-2009(Temp), f. 5-14-09, cert. ef. 5-17-09 thru 7-31-09; FWC 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; FWC 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; Administrative correction 11-19-09; FWC 17-2010(Temp), f. & cert. ef. 2-22-10 thru 7-31-10; FWC 20-2010(Temp), f. & cert. ef. 2-26-10 thru 7-31-10; FWC 30-2010(Temp), f. 3-11-10, cert. ef. 3-14-10 thru 7-31-10; FWC 35-2010(Temp), f. 3-23-10, cert. ef. 3-24-10 thru 7-31-10; FWC 40-2010(Temp), f. & cert. ef. 4-1-10 thru 7-31-10; FWC 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; FWC 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; FWC 57-2010(Temp), f. & cert. ef. 5-11-10 thru 7-31-10; FWC 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; FWC 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; FWC 129-2010(Temp), f. & cert. ef. 9-10-10 thru 10-31-10; Administrative correction 11-23-10; FWC 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; FWC 23-2011, f. & cert. ef. 3-21-11; FWC 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; FWC 35-2011(Temp), f. & cert. ef. 4-28-11 thru 7-29-11; FWC 46-2011(Temp), f. & cert. ef. 5-12-11 thru 7-29-11; FWC 52-2011(Temp), f. & cert. ef. 5-18-11 thru 7-29-11; FWC 76-2011(Temp), f. 6-24-11, cert. ef. 6-27-11 thru 7-29-11; FWC 106-2011(Temp), f. 8-2-11, cert. ef. 8-3-11 thru 10-31-11; FWC 121-2011(Temp), f. 8-29-11, cert. ef. 9-5-11 thru 10-31-11; Administrative correction 11-18-11; FWC 12-2012(Temp), f. 2-8-12, cert. ef. 2-12-12 thru 7-31-12; FWC 24-2012(Temp), f. 3-15-12, cert. ef. 3-18-12 thru 7-31-12; FWC 26-2012(Temp), f. 3-20-12, cert. ef. 3-21-12 thru 7-31-12; FWC 27-2012(Temp), f. 3-27-12, cert. ef. 3-29-12 thru 7-31-12; FWC 28-2012(Temp), f. 3-30-12, cert. ef. 4-1-12 thru 7-31-12; FWC 30-2012(Temp), f. 4-4-12, cert. ef. 4-5-12 thru 7-31-12; FWC 36-2012(Temp), f. 4-16-12, cert. ef. 4-19-12 thru 7-31-12; FWC 82-2012(Temp), f. 6-29-12, cert. ef. 7-2-12 thru 7-31-12; FWC 96-2012(Temp), f. 7-30-12, cert. ef. 8-1-12 thru 10-31-12; Administrative correction 11-23-12; FWC 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; FWC 22-2013(Temp), f. 3-12-13, cert. ef. 3-13-13 thru 7-31-13; FWC 34-2013(Temp), f. 5-14-13, cert. ef. 5-15-13 thru 7-31-13; FWC 36-2013(Temp), f. & cert. ef. 5-22-13 thru 7-31-13; FWC 44-2013(Temp), f. & cert. ef. 5-29-13 thru 7-31-13; FWC 82-2013(Temp), f. 7-29-13, cert. ef. 7-31-13 thru 10-31-13; FWC 87-2013(Temp), f. & cert. ef. 8-9-13 thru 10-31-13; FWC 109-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction 11-22-13; FWC 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; FWC 18-2014(Temp), f. 3-7-14, cert. ef. 3-10-14 thru 7-30-14; FWC 25-2014(Temp), f. 3-13-14, cert. ef. 3-17-14 thru 7-31-14; FWC 32-2014(Temp), f. 4-21-14, cert. ef. 4-22-14 thru 7-31-14; FWC 35-2014(Temp), f. & cert. ef. 4-24-14 thru 7-31-14; FWC 39-2014(Temp), f. 5-7-14, cert. ef. 5-8-14 thru 7-31-14; FWC 45-2014(Temp), f. 5-14-14, cert. ef. 5-20-14 thru 7-31-14; FWC 51-2014(Temp), f. & cert. ef. 5-28-14 thru 7-31-14; FWC 55-2014(Temp), f. 6-3-14, cert. ef. 6-4-14 thru 7-31-14; FWC 104-2014(Temp), f. 8-4-14, cert. ef. 8-5-14 thru 10-31-14; Administrative correction 11-24-14; FWC 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; FWC 17-2015(Temp), f. 3-5-15, cert. ef. 3-9-15 thru 7-30-15; FWC 21-2015(Temp), f. & cert. ef. 3-24-15 thru 7-30-15; FWC 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; FWC 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; FWC 42-2015(Temp), f. & cert. ef. 5-12-15 thru 7-31-15; FWC 50-2015(Temp), f. & cert. ef. 5-27-15 thru 7-31-15; FWC 58-2015(Temp), f. & cert. ef. 6-2-15 thru 7-31-15; FWC 63-2015(Temp), f. 6-9-15, cert. ef. 6-10-15 thru 7-31-15; FWC 98-2015(Temp), f. 7-30-15, cert. ef. 8-4-15 thru 10-31-15; FWC 110-2015(Temp), f. 8-18-15, cert. ef. 8-24-15 thru 10-31-15; FWC 117-2015(Temp), f. 8-28-15, cert. ef. 8-31-15 thru 10-31-15; Administrative correction 11-20-15; FWC 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; FWC 20-2016(Temp), f. 3-25-16, cert. ef. 3-28-16 thru 7-31-16; FWC 26-2016(Temp), f. 4-5-16, cert. ef. 4-6-16 thru 7-31-16; FWC 31-2016(Temp), f. 4-11-16, cert. ef. 4-13-16 thru 7-31-16; FWC 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; FWC 47-2016(Temp), f. & cert. ef. 5-11-16 thru 7-31-16; FWC 53-2016(Temp), f. 5-19-16, cert. ef. 5-23-16 thru 7-31-16; FWC 60-2016(Temp), f. 5-26-16, cert. ef. 5-31-16 thru 7-31-16; FWC 64-2016(Temp), f. 6-2-16, cert. ef. 6-7-16 thru 7-31-16; FWC 99-2016(Temp), f. 7-29-16, cert. ef. 8-1-16 thru 10-31-16; FWC 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; FWC 32-2017(Temp), f. 3-29-17, cert. ef. 3-30-17 thru 9-15-17; FWC 39-2017(Temp), f. 4-5-17, cert. ef. 4-6-17 thru 9-15-17

635-042-0160

Blind Slough and Knappa Slough Select Area Salmon Season

(1) Salmon and shad may be taken for commercial purposes during open fishing periods described as the winter fishery and the spring fishery in subsections (1)(a)(A) and (1)(a)(B) of this rule in those waters of Blind Slough and Knappa Slough. The following restrictions apply:

(a) The open fishing periods are established in segments categorized as the winter season fishery in Blind Slough and Knappa Slough in subsection (1)(a)(A) and Blind Slough (only) in subsection (1)(a)(B), and the spring fishery in Blind Slough and Knappa Slough in subsection (1)(a). The seasons are open nightly from 7:00 p.m. to 7:00 a.m. the following morning (12 hours), as follows:

(A) Blind Slough and Knappa Sloughs:

(B) Blind Slough only:

(i) Thursday night April 6, 2017.

(ii) Monday night April 10, 2017.

(iii) Thursday night April 13, 2017.

(C) Blind and Knappa Sloughs:

(i) Tuesday and Thursday nights from April 20 through April 28 2017, and Monday and Thursday nights from May 1 through June 13 2017.

(b) The fishing areas for the winter and spring seasons are:

(A) Blind Slough are those waters adjoining the Columbia River which extend from markers at the mouth of Blind Slough upstream to

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markers at the mouth of Gnat Creek which is located approximately 1/2 mile upstream of the county road bridge.

(i) For the fishing periods in subsections (1)(a)(B)(ii) and (1)(a)(B)(iii) the lower boundary of the Blind Slough fishing area is defined as the railroad bridge located approximately 1-1/4 miles upstream from the mouth of Blind Slough.

(B) Knappa Slough are all waters bounded by a line from the northerly most marker at the mouth of Blind Slough westerly to a marker on Karlson Island downstream to a north-south line defined by a marker on the eastern end of Minaker Island to markers on Karlson Island and the Oregon shore.

(C) During the period from May 1 through June 13, the lower boundary of the Knappa Slough fishing area extends downstream to the boundary lines defined by markers on the west end of Minaker Island to markers on Karlson Island and the Oregon shore (fall boundary).

(c) Gear restrictions are as follows:

(A) During the winter fishery, outlined above in subsection (1)(a)(A) and (1)(a)(B), gill nets may not exceed 100 fathoms in length with no weight limit on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is less than 7-inches.

(B) During the spring fishery, outlined above in subsection (1)(a)(C), gill nets may not exceed 100 fathoms in length with no weight limit on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is more than 9.75-inches.

(C) Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(2) Retention and sale of sturgeon is prohibited.

(3) Oregon licenses are required in the open waters upstream from the railroad bridge.

Stat. Auth.: ORS 183.325, 506.109 & 506.119
Stats. Implemented: ORS 506.129

Hist.: FWC 46-1996, f. & cert. ef. 8-23-96; FWC 48-1997, f. & cert. ef. 8-25-97; DFW 15-1998, f. & cert. ef. 3-3-98; DFW 67-1998, f. & cert. ef. 8-24-98; DFW 86-1998(Temp), f. & cert. ef. 10-28-98 thru 10-30-98; DFW 10-1999, f. & cert. ef. 2-26-99; DFW 48-1999(Temp), f. & cert. ef. 6-24-99 thru 7-2-99; DFW 55-1999, f. & cert. ef. 8-12-99; DFW 9-2000, f. & cert. ef. 2-25-00; DFW 42-2000, f. & cert. ef. 8-3-00; DFW 65-2000(Temp), f. 9-22-00, cert. ef. 9-25-00 thru 12-31-00; DFW 3-2001, f. & cert. ef. 2-6-01; DFW 84-2001(Temp), f. & cert. ef. 8-29-01 thru 12-31-01; DFW 86-2001, f. & cert. ef. 9-4-01 thru 12-31-01; DFW 89-2001(Temp), f. & cert. ef. 9-14-01 thru 12-31-01; DFW 106-2001(Temp), f. & cert. ef. 10-26-01 thru 12-31-01; DFW 14-2002(Temp), f. 2-13-02, cert. ef. 2-18-02 thru 8-17-02; DFW 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; DFW 12-2003, f. & cert. ef. 2-14-03; DFW 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; DFW 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; DFW 75-2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; DFW 89-2003(Temp), f. 9-8-03, cert. ef. 9-9-03 thru 12-31-03; DFW 11-2004, f. & cert. ef. 2-13-04; DFW 19-2004(Temp), f. & cert. ef. 3-12-04 thru 3-31-04; DFW 22-2004(Temp), f. & cert. ef. 3-18-04 thru 3-31-04; DFW 28-2004(Temp), f. 4-8-04, cert. ef. 4-12-04 thru 4-15-04; DFW 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; DFW 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; DFW 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-31-04; DFW 95-2004(Temp), f. 9-17-04, cert. ef. 9-19-04 thru 12-31-04; DFW 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; DFW 6-2005, f. & cert. ef. 2-14-05; DFW 16-2005(Temp), f. & cert. ef. 3-10-05 thru 7-31-05; DFW 18-2005(Temp), f. & cert. ef. 3-15-05 thru 3-21-05; Administrative correction 4-20-05; DFW 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; DFW 28-2005(Temp), f. & cert. ef. 4-28-05 thru 6-16-05; DFW 37-2005(Temp), f. & cert. ef. 5-5-05 thru 10-16-05; DFW 40-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; DFW 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; DFW 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; DFW 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; DFW 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; DFW 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; DFW 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; DFW 5-2006, f. & cert. ef. 2-15-06; DFW 14-2006(Temp), f. 3-15-06, cert. ef. 3-16-06 thru 7-27-06; DFW 16-2006(Temp), f. 3-23-06 & cert. ef. 3-26-06 thru 7-27-06; DFW 18-2006(Temp), f. 3-29-06, cert. ef. 4-2-06 thru 7-27-06; DFW 20-2006(Temp), f. 4-7-06, cert. ef. 4-9-06 thru 7-27-06; DFW 32-2006(Temp), f. & cert. ef. 5-23-06 thru 7-31-06; DFW 35-2006(Temp), f. & cert. ef. 5-30-06 thru 7-31-06; DFW 75-2006(Temp), f. 8-8-06, cert. ef. 9-5-06 thru 12-31-06; DFW 92-2006(Temp), f. 9-1-06, cert. ef. 9-5-06 thru 12-31-06; DFW 98-2006(Temp), f. & cert. ef. 9-12-06 thru 12-31-06; DFW 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; DFW 119-2006(Temp), f. & cert. ef. 10-18-06 thru 12-31-06; Administrative correction 1-16-07; DFW 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; DFW 9-2007, f. & cert. ef. 2-14-07; DFW 13-2007(Temp), f. & cert. ef. 3-6-07 thru 9-1-07; DFW 25-2007(Temp), f. 4-17-07, cert. ef. 4-18-07 thru 7-26-07; DFW 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; DFW 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative correction 1-24-08; DFW 6-2008(Temp), f. 1-29-08, cert. ef. 1-31-08 thru 7-28-08; DFW 16-2008(Temp), f. 2-26-08, cert. ef. 3-2-08 thru 8-28-08; DFW 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; DFW 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; DFW 85-2008(Temp), f. 7-24-08, cert. ef. 8-1-08 thru 12-31-08; DFW 103(Temp), f. 8-26-08, cert. ef. 9-2-08 thru 10-31-08; DFW 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; DFW 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; DFW 49-2009(Temp), f. 5-14-09, cert. ef. 5-17-09 thru 7-31-09; DFW 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; DFW 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; Administrative correction 11-19-09; DFW 15-2010(Temp), f. 2-19-10, cert. ef. 2-21-10 thru 6-11-10; DFW 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; DFW 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; DFW 57-2010(Temp), f. & cert. ef.

5-11-10 thru 7-31-10; DFW 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; DFW 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; DFW 129-2010(Temp), f. & cert. ef. 9-10-10 thru 10-31-10; Administrative correction 11-23-10; DFW 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; DFW 23-2011, f. & cert. ef. 3-21-11; DFW 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; DFW 44-2011(Temp), f. & cert. ef. 5-11-11 thru 6-10-11; Administrative correction 6-28-11; DFW 113-2011(Temp), f. 8-10-11, cert. ef. 8-15-11 thru 10-31-11; Administrative correction, 11-18-11; DFW 12-2012(Temp), f. 2-8-12, cert. ef. 2-12-12 thru 7-31-12; DFW 104-2012(Temp), f. 8-6-12, cert. ef. 8-13-12 thru 10-31-12; Administrative correction 11-23-12; DFW 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; DFW 24-2013(Temp), f. & cert. ef. 3-21-13 thru 7-31-13; Administrative correction, 8-21-13; DFW 91-2013(Temp), f. 8-22-13, cert. ef. 8-26-13 thru 10-31-13; DFW 110-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction, 11-22-13; DFW 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; DFW 35-2014(Temp), f. & cert. ef. 4-24-14 thru 7-31-14; DFW 39-2014(Temp), f. 5-7-14, cert. ef. 5-8-14 thru 7-31-14; DFW 115-2014(Temp), f. 8-5-14, cert. ef. 8-18-14 thru 10-31-14; DFW 135-2014(Temp), f. & cert. ef. 9-19-14 thru 10-31-14; Administrative correction 11-24-14; DFW 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; DFW 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; DFW 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; DFW 70-2015(Temp), f. 6-15-15, cert. ef. 6-16-15 thru 7-31-15; DFW 76-2015(Temp), f. 6-23-15, cert. ef. 6-25-15 thru 7-31-15; DFW 102-2015(Temp), f. 8-10-15, cert. ef. 8-17-15 thru 10-31-15; Administrative correction, 11-10-15; DFW 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; DFW 23-2016(Temp), f. & cert. ef. 3-28-16 thru 7-31-16; DFW 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; DFW 71-2016(Temp), f. 6-13-16, cert. ef. 6-16-16 thru 7-31-16; DFW 78-2016(Temp), f. 6-23-16 thru 7-31-16; DFW 85-2016(Temp), f. & cert. ef. 6-30-16 thru 7-31-16; DFW 87-2016(Temp), f. & cert. ef. 7-7-16 thru 7-31-16; DFW 92-2016(Temp), f. 7-13-16, cert. ef. 7-14-16 thru 7-31-16; DFW 101-2016(Temp), f. 8-2-16, cert. ef. 8-24-16 thru 10-31-16; DFW 129-2016(Temp), f. 9-29-16, cert. ef. 10-1-16 thru 13-31-16; DFW 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; DFW 25-2017(Temp), f. & cert. ef. 3-20-17 thru 6-13-17; DFW 32-2017(Temp), f. 3-29-17, cert. ef. 3-30-17 thru 9-15-17; DFW 39-2017(Temp), f. 4-5-17, cert. ef. 4-6-17 thru 9-15-17

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Rule Caption: Extend 2017 Winter Commercial Seasons in the Youngs Bay and Blind Slough Areas

Adm. Order No.: DFW 40-2017(Temp)

Filed with Sec. of State: 4-12-2017

Certified to be Effective: 4-13-17 thru 9-15-17

Notice Publication Date:

Rules Amended: 635-042-0145, 635-042-0160

Subject: These amended rules extend the 2017 winter commercial salmon seasons for the Youngs Bay and Blind Slough Select Areas. Additional authorized fishing periods in these Select Area sites are set to begin April 13. Modifications are consistent with action taken April 12 2017 by the Department of Fish & Wildlife for the State of Oregon and Washington Departments of Fish and Wildlife in a meeting of the Columbia River Compact.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-042-0145

Youngs Bay Salmon Season

(1) Salmon and shad may be taken for commercial purposes in those waters of Youngs Bay.

(a) The open fishing periods are established in three segments categorized as the winter fishery, subsection (1)(a)(A); the spring fishery, subsection (1)(a)(B); and summer fishery, subsection (1)(a)(C), as follows:

(A) Winter Season:

(i) Youngs Bay from the Alternate Highway 101 Bridge upstream to the upper boundary markers at the confluence of the Klaskanine and Youngs rivers, including the lower Walluski River upstream to the Highway 202 Bridge; 8:30 a.m. to 11:30 a.m. Thursday April 13, and 11:00 a.m. to 2:00 p.m. Monday April 17, 2017

(B) Spring Season: Thursday April 20 from 2 p.m. to 6 p.m. (4 hours), Tuesday and Thursday nights from April 25 through April 28 from 7 p.m. to 7 a.m. (12 hours), Monday May 1 from 10 a.m. to Tuesday May 2 4 a.m. (18 hours), Wednesday May 3 from 9 a.m. to 9 p.m. (12 hours), Thursday May 4 from 10 a.m. to Friday May 5 4 a.m. (18 hours), noon Monday through noon Friday (4 days/week) from May 8 through June 9 and noon Monday through noon Thursday (3 days) from June 12 through June 15.

(C) Summer Season: Noon Monday through Noon Friday (4 days/week) from June 19 through June 30, Noon Monday July 3 through Noon Thursday July 6 (3 days), and Noon Tuesday through Noon Thursday (2 days/week) from July 11 through July 27.

(b) The fishing areas for the winter, spring and summer fisheries are:

(A) During the winter season, the Youngs Bay open fishing areas are described in (1)(a)(A)(i) through (1)(a)(A)(iii) above.

(B) During the spring and summer seasons, the Youngs Bay open fishing area is identified as the waters of Youngs Bay from the Highway 101 Bridge upstream to the upper boundary markers at the confluence of the Klaskanine and Youngs rivers, and includes the lower Walluski River upstream to the Highway 202 Bridge and the lower Lewis and Clark River

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upstream to the overhead power lines immediately upstream of Barrett Slough.

(2) Gill nets may not exceed 1,500 feet (250 fathoms) in length and weight may not exceed two pounds per any fathom except the use of additional weights and/or anchors attached directly to the headline is allowed upstream of markers located approximately 200 yards upstream of the mouth of the Walluski River during all Youngs Bay commercial fisheries and upstream of the alternate Highway 101 Bridge in the Lewis and Clark River. A red cork must be placed on the corkline every 25 fathoms as measured from the first mesh of the net. Red corks at 25-fathom intervals must be in color contrast to the corks used in the remainder of the net. It is unlawful to use a gill net having a mesh size that is less than 7-inches during the winter season. It is unlawful to use a gill net having a mesh size that is more than 9.75-inches during the spring and summer seasons. Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(3) Retention and sale of sturgeon is prohibited.

(4) Non-resident commercial fishing and boat licenses are not required for Washington fishers participating in Youngs Bay commercial fisheries. A valid fishing and boat license issued by the state of Washington is considered adequate for participation in this fishery. The open area for non-resident commercial fishers includes all areas open for commercial fishing.

Stat. Auth.: ORS 183.325, 506.109 & 506.119

Stats. Implemented: ORS 506.129

Hist.: FWC 32-1979, f. & cert. 8-22-79; FWC 28-1980, f. & cert. 6-23-80; FWC 42-1980(Temp), f. & cert. 8-22-80; FWC 30-1981, f. & cert. 8-14-81; FWC 42-1981(Temp), f. & cert. 11-5-81; FWC 54-1982, f. & cert. 8-17-82; FWC 37-1983, f. & cert. 8-18-83; FWC 61-1983(Temp), f. & cert. 10-19-83; FWC 42-1984, f. & cert. 8-20-84; FWC 39-1985, f. & cert. 8-15-85; FWC 37-1986, f. & cert. 8-11-86; FWC 72-1986(Temp), f. & cert. 10-31-86; FWC 64-1987, f. & cert. 8-7-87; FWC 73-1988, f. & cert. 8-19-88; FWC 55-1989(Temp), f. 8-7-89, cert. ef. 8-20-89; FWC 82-1990(Temp), f. 8-14-90, cert. ef. 8-19-90; FWC 86-1991, f. 8-7-91, cert. ef. 8-18-91; FWC 123-1991(Temp), f. & cert. ef. 10-21-91; FWC 30-1992(Temp), f. & cert. ef. 4-27-92; FWC 35-1992(Temp), f. 5-22-92, cert. ef. 5-25-92; FWC 74-1992 (Temp), f. 8-10-92, cert. ef. 8-16-92; FWC 28-1993(Temp), f. & cert. ef. 4-26-93; FWC 48-1993, f. 8-6-93, cert. ef. 8-9-93; FWC 21-1994(Temp), f. 4-22-94, cert. ef. 4-25-94; FWC 51-1994, f. 8-19-94, cert. ef. 8-22-94; FWC 64-1994(Temp), f. 9-14-94, cert. ef. 9-15-94; FWC 66-1994(Temp), f. & cert. ef. 9-20-94; FWC 27-1995, f. 3-29-95, cert. ef. 4-1-95; FWC 48-1995(Temp), f. & cert. ef. 6-5-95; FWC 66-1995, f. 8-22-95, cert. ef. 8-27-95; FWC 69-1995, f. 8-25-95, cert. ef. 8-27-95; FWC 8-1995, f. 2-28-96, cert. ef. 3-1-96; FWC 37-1996(Temp), f. 6-11-96, cert. ef. 6-12-96; FWC 41-1996, f. & cert. ef. 8-12-96; FWC 45-1996(Temp), f. 8-16-96, cert. ef. 8-19-96; FWC 54-1996(Temp), f. & cert. ef. 9-23-96; FWC 4-1997, f. & cert. ef. 1-30-97; FWC 47-1997, f. & cert. ef. 8-15-97; FWC 8-1998(Temp), f. & cert. ef. 2-5-98, cert. ef. 2-28-98; FWC 14-1998, f. & cert. ef. 3-3-98; FWC 18-1998(Temp), f. 3-9-98, cert. ef. 3-11-98 thru 3-31-98; FWC 60-1998(Temp), f. & cert. ef. 8-7-98 thru 8-21-98; FWC 67-1998, f. & cert. ef. 8-24-98; FWC 10-1999, f. & cert. ef. 2-26-99; FWC 52-1999(Temp), f. & cert. ef. 8-2-99 thru 8-6-99; FWC 55-1999, f. & cert. ef. 8-12-99; FWC 9-2000, f. & cert. ef. 2-25-00; FWC 42-2000, f. & cert. ef. 8-3-00; FWC 3-2001, f. & cert. ef. 2-6-01; FWC 66-2001(Temp), f. 8-2-01, cert. ef. 8-6-01 thru 8-14-01; FWC 76-2001(Temp), f. & cert. ef. 8-20-01 thru 10-31-01; FWC 106-2001(Temp), f. & cert. ef. 10-26-01 thru 12-31-01; FWC 15-2002(Temp), f. & cert. ef. 2-20-02 thru 8-18-02; FWC 82-2002(Temp), f. 8-5-02, cert. ef. 8-7-02 thru 9-1-02; FWC 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; FWC 12-2003, f. & cert. ef. 2-14-03; FWC 17-2003(Temp), f. 2-27-03, cert. ef. 3-1-03 thru 8-1-03; FWC 32-2003(Temp), f. & cert. ef. 4-23-03 thru 8-1-03; FWC 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; FWC 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; FWC 37-2003(Temp), f. & cert. ef. 5-7-03 thru 10-1-03; FWC 75-2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; FWC 89-2003(Temp), f. 9-8-03, cert. ef. 9-9-03 thru 12-31-03; FWC 11-2004, f. & cert. ef. 2-13-04; FWC 19-2004(Temp), f. & cert. ef. 3-12-04 thru 3-31-04; FWC 22-2004(Temp), f. & cert. ef. 3-18-04 thru 3-31-04; FWC 28-2004(Temp), f. 4-8-04, cert. ef. 4-12-04 thru 4-15-04; FWC 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; FWC 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; FWC 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-31-04; FWC 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; FWC 6-2005, f. & cert. ef. 2-14-05; FWC 15-2005(Temp), f. & cert. ef. 3-10-05 thru 7-31-05; FWC 18-2005(Temp), f. & cert. ef. 3-15-05 thru 3-21-05; Administrative correction 4-20-05; FWC 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; FWC 28-2005(Temp), f. & cert. ef. 4-28-05 thru 6-16-05; FWC 37-2005(Temp), f. & cert. ef. 5-5-05 thru 10-16-05; FWC 40-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; FWC 46-2005(Temp), f. 5-17-05, cert. ef. 5-18-05 thru 10-16-05; FWC 73-2005(Temp), f. 7-8-05, cert. ef. 7-11-05 thru 7-31-05; FWC 77-2005(Temp), f. 7-14-05, cert. ef. 7-18-05 thru 7-31-05; FWC 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; FWC 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; FWC 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; FWC 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; FWC 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; FWC 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; FWC 5-2006, f. & cert. ef. 2-15-06; FWC 14-2006(Temp), f. 3-15-06, cert. ef. 3-16-06 thru 7-27-06; FWC 15-2006(Temp), f. & cert. ef. 3-23-06 thru 7-27-06; FWC 17-2006(Temp), f. 3-29-06, cert. ef. 3-30-06 thru 7-27-06; FWC 29-2006(Temp), f. & cert. ef. 5-16-06 thru 7-31-06; FWC 32-2006(Temp), f. & cert. ef. 5-23-06 thru 7-31-06; FWC 35-2006(Temp), f. & cert. ef. 5-30-06 thru 7-31-06; FWC 52-2006(Temp), f. & cert. ef. 6-28-06 thru 7-27-06; FWC 73-2006(Temp), f. 8-1-06, cert. ef. 8-2-06 thru 12-31-06; FWC 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; FWC 119-2006(Temp), f. & cert. ef. 10-18-06 thru 12-31-06; Administrative correction 1-16-07; FWC 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; FWC 9-2007, f. & cert. ef. 2-14-07; FWC 13-2007(Temp), f. & cert. ef. 3-6-07 thru 9-1-07; FWC 16-2007(Temp), f. & cert. ef. 3-14-07 thru 9-9-07; FWC 25-2007(Temp), f. 4-17-07, cert. ef. 4-18-07 thru 7-26-07; FWC 45-2007(Temp), f. 6-15-07, cert. ef. 6-25-07 thru 7-31-07; FWC 50-2007(Temp), f. 6-29-07, cert. ef. 7-4-07 thru 7-31-07; FWC 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; FWC 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative correction 1-24-08; FWC 6-2008(Temp), f. 1-29-08, cert. ef. 1-31-08 thru 7-28-08; FWC 16-2008(Temp), f. 2-26-08,

cert. ef. 3-2-08 thru 8-28-08; FWC 30-2008(Temp), f. 3-27-08, cert. ef. 3-30-08 thru 8-28-08; FWC 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; FWC 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; FWC 85-2008(Temp), f. 7-24-08, cert. ef. 8-1-08 thru 12-31-08; FWC 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; FWC 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; FWC 24-2009(Temp), f. 3-10-09, cert. ef. 3-11-09 thru 7-31-09; FWC 49-2009(Temp), f. 5-14-09, cert. ef. 5-17-09 thru 7-31-09; FWC 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; FWC 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; Administrative correction 11-19-09; FWC 17-2010(Temp), f. & cert. ef. 2-22-10 thru 7-31-10; FWC 20-2010(Temp), f. & cert. ef. 2-26-10 thru 7-31-10; FWC 30-2010(Temp), f. 3-11-10, cert. ef. 3-14-10 thru 7-31-10; FWC 35-2010(Temp), f. 3-23-10, cert. ef. 3-24-10 thru 7-31-10; FWC 40-2010(Temp), f. & cert. ef. 4-1-10 thru 7-31-10; FWC 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; FWC 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; FWC 57-2010(Temp), f. & cert. ef. 5-11-10 thru 7-31-10; FWC 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; FWC 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; FWC 129-2010(Temp), f. & cert. ef. 9-10-10 thru 10-31-10; Administrative correction 11-23-10; FWC 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; FWC 23-2011, f. & cert. ef. 3-21-11; FWC 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; FWC 35-2011(Temp), f. & cert. ef. 4-28-11 thru 7-29-11; FWC 46-2011(Temp), f. & cert. ef. 5-12-11 thru 7-29-11; FWC 52-2011(Temp), f. & cert. ef. 5-18-11 thru 7-29-11; FWC 76-2011(Temp), f. 6-24-11, cert. ef. 6-27-11 thru 7-29-11; FWC 106-2011(Temp), f. 8-2-11, cert. ef. 8-3-11 thru 10-31-11; FWC 121-2011(Temp), f. 8-29-11, cert. ef. 9-5-11 thru 10-31-11; Administrative correction, 11-18-11; FWC 12-2012(Temp), f. 2-8-12, cert. ef. 2-12-12 thru 7-31-12; FWC 24-2012(Temp), f. 3-15-12, cert. ef. 3-18-12 thru 7-31-12; FWC 26-2012(Temp), f. 3-20-12, cert. ef. 3-21-12 thru 7-31-12; FWC 27-2012(Temp), f. 3-27-12, cert. ef. 3-29-12 thru 7-31-12; FWC 28-2012(Temp), f. 3-30-12, cert. ef. 4-1-12 thru 7-31-12; FWC 30-2012(Temp), f. 4-4-12, cert. ef. 4-5-12 thru 7-31-12; FWC 36-2012(Temp), f. 4-16-12, cert. ef. 4-19-12 thru 7-31-12; FWC 82-2012(Temp), f. 6-29-12, cert. ef. 7-2-12 thru 7-31-12; FWC 96-2012(Temp), f. 7-30-12, cert. ef. 8-1-12 thru 10-31-12; Administrative correction 11-23-12; FWC 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; FWC 22-2013(Temp), f. 3-12-13, cert. ef. 3-13-13 thru 7-31-13; FWC 34-2013(Temp), f. 5-14-13, cert. ef. 5-15-13 thru 7-31-13; FWC 36-2013(Temp), f. & cert. ef. 5-22-13 thru 7-31-13; FWC 44-2013(Temp), f. & cert. ef. 5-29-13 thru 7-31-13; FWC 82-2013(Temp), f. 7-29-13, cert. ef. 7-31-13 thru 10-31-13; FWC 87-2013(Temp), f. & cert. ef. 8-9-13 thru 10-31-13; FWC 109-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction, 11-22-13; FWC 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; FWC 18-2014(Temp), f. 3-7-14, cert. ef. 3-10-14 thru 7-30-14; FWC 25-2014(Temp), f. 3-13-14, cert. ef. 3-17-14 thru 7-31-14; FWC 32-2014(Temp), f. 4-21-14, cert. ef. 4-22-14 thru 7-31-14; FWC 35-2014(Temp), f. & cert. ef. 4-24-14 thru 7-31-14; FWC 39-2014(Temp), f. 5-7-14, cert. ef. 5-8-14 thru 7-31-14; FWC 45-2014(Temp), f. 5-14-14, cert. ef. 5-20-14 thru 7-31-14; FWC 51-2014(Temp), f. & cert. ef. 5-28-14 thru 7-31-14; FWC 55-2014(Temp), f. 6-3-14, cert. ef. 6-4-14 thru 7-31-14; FWC 104-2014(Temp), f. 8-4-14, cert. ef. 8-5-14 thru 10-31-14; Administrative correction 11-24-14; FWC 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; FWC 17-2015(Temp), f. 3-5-15, cert. ef. 3-9-15 thru 7-30-15; FWC 21-2015(Temp), f. & cert. ef. 3-24-15 thru 7-30-15; FWC 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; FWC 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; FWC 42-2015(Temp), f. & cert. ef. 5-12-15 thru 7-31-15; FWC 50-2015(Temp), f. & cert. ef. 5-27-15 thru 7-31-15; FWC 58-2015(Temp), f. & cert. ef. 6-2-15 thru 7-31-15; FWC 63-2015(Temp), f. 6-9-15, cert. ef. 6-10-15 thru 7-31-15; FWC 98-2015(Temp), f. 7-30-15, cert. ef. 8-4-15 thru 10-31-15; FWC 110-2015(Temp), f. 8-18-15, cert. ef. 8-24-15 thru 10-31-15; FWC 117-2015(Temp), f. 8-28-15, cert. ef. 8-31-15 thru 10-31-15; Administrative correction, 11-20-15; FWC 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; FWC 20-2016(Temp), f. 3-25-16, cert. ef. 3-28-16 thru 7-31-16; FWC 26-2016(Temp), f. 4-5-16, cert. ef. 4-6-16 thru 7-31-16; FWC 31-2016(Temp), f. 4-11-16, cert. ef. 4-13-16 thru 7-31-16; FWC 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; FWC 47-2016(Temp), f. & cert. ef. 5-11-16 thru 7-31-16; FWC 53-2016(Temp), f. 5-19-16, cert. ef. 5-23-16 thru 7-31-16; FWC 60-2016(Temp), f. 5-26-16, cert. ef. 5-31-16 thru 7-31-16; FWC 64-2016(Temp), f. 6-2-16, cert. ef. 6-7-16 thru 7-31-16; FWC 99-2016(Temp), f. 7-29-16, cert. ef. 8-1-16 thru 10-31-16; FWC 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; FWC 32-2017(Temp), f. 3-29-17, cert. ef. 3-30-17 thru 9-15-17; FWC 39-2017(Temp), f. 4-5-17, cert. ef. 4-6-17 thru 9-15-17; FWC 40-2017(Temp), f. 4-12-17, cert. ef. 4-13-17 thru 9-15-17

635-042-0160

Blind Slough and Knappa Slough Select Area Salmon Season

(1) Salmon and shad may be taken for commercial purposes during open fishing periods described as the winter fishery and the spring fishery in subsections (1)(a)(A) and (1)(a)(B) of this rule in those waters of Blind Slough and Knappa Slough. The following restrictions apply:

(a) The open fishing periods are established in segments categorized as the winter season fishery in Blind Slough and Knappa Slough in subsection (1)(a)(A) and Blind Slough (only) in subsection (1)(a)(B), and the spring fishery in Blind Slough and Knappa Slough in subsection (1)(a)(C). The seasons are open nightly from 7:00 p.m. to 7:00 a.m. the following morning (12 hours), as follows:

(A) Blind Slough and Knappa Sloughs:

(B) Blind Slough only:

(i) Thursday night April 13, 2017.

(ii) Monday night April 17, 2017.

(C) Blind and Knappa Sloughs: Tuesday and Thursday nights from April 20 through April 28 2017, and Monday and Thursday nights from May 1 through June 13 2017.

(b) The fishing areas for the winter and spring seasons are:

(A) Blind Slough are those waters adjoining the Columbia River which extend from markers at the mouth of Blind Slough upstream to markers at the mouth of Gnat Creek which is located approximately 1/2 mile upstream of the county road bridge.

(B) Knappa Slough are all waters bounded by a line from the northerly most marker at the mouth of Blind Slough westerly to a marker on Karlson Island downstream to a north-south line defined by a marker on the

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eastern end of Minaker Island to markers on Karlson Island and the Oregon shore.

(C) During the period from May 1 through June 13, the lower boundary of the Knappa Slough fishing area extends downstream to the boundary lines defined by markers on the west end of Minaker Island to markers on Karlson Island and the Oregon shore (fall boundary).

(c) Gear restrictions are as follows:

(A) During the winter fishery, outlined above in subsection (1)(a)(A) and (1)(a)(B), gill nets may not exceed 100 fathoms in length with no weight limit on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is less than 7-inches.

(B) During the spring fishery, outlined above in subsection (1)(a)(C), gill nets may not exceed 100 fathoms in length with no weight limit on the lead line. The attachment of additional weight and anchors directly to the lead line is permitted. It is unlawful to use a gill net having a mesh size that is more than 9.75-inches.

(C) Nets not specifically authorized for use in these areas may be onboard a vessel if properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope with a diameter of 3/8 (0.375) inches or greater.

(2) Retention and sale of sturgeon is prohibited.

(3) Oregon licenses are required in the open waters upstream from the railroad bridge.

Stat. Auth.: ORS 183.325, 506.109, 506.119 & 507.030

Stats. Implemented: ORS 506.129 & 507.030

Hist.: FWC 46-1996, f. & cert. ef. 8-23-96; FWC 48-1997, f. & cert. ef. 8-25-97; DFW 15-1998, f. & cert. ef. 3-3-98; DFW 67-1998, f. & cert. ef. 8-24-98; DFW 86-1998(Temp), f. & cert. ef. 10-28-98 thru 10-30-98; DFW 10-1999, f. & cert. ef. 2-26-99; DFW 48-1999(Temp), f. & cert. ef. 6-24-99 thru 7-2-99; DFW 55-1999, f. & cert. ef. 8-12-99; DFW 9-2000, f. & cert. ef. 2-25-00; DFW 42-2000, f. & cert. ef. 8-3-00; DFW 65-2000(Temp), f. 9-22-00, cert. ef. 9-25-00 thru 12-31-00; DFW 3-2001, f. & cert. ef. 2-6-01; DFW 84-2001(Temp), f. & cert. ef. 8-29-01 thru 12-31-01; DFW 86-2001, f. & cert. ef. 9-4-01 thru 12-31-01; DFW 89-2001(Temp), f. & cert. ef. 9-14-01 thru 12-31-01; DFW 106-2001(Temp), f. & cert. ef. 10-26-01 thru 12-31-01; DFW 14-2002(Temp), f. 2-13-02, cert. ef. 2-18-02 thru 8-17-02; DFW 96-2002(Temp), f. & cert. ef. 8-26-02 thru 12-31-02; DFW 12-2003, f. & cert. ef. 2-14-03; DFW 34-2003(Temp), f. & cert. ef. 4-24-03 thru 10-1-03; DFW 36-2003(Temp), f. 4-30-03, cert. ef. 5-1-03 thru 10-1-03; DFW 75-2003(Temp), f. & cert. ef. 8-1-03 thru 12-31-03; DFW 89-2003(Temp), f. 9-8-03, cert. ef. 9-9-03 thru 12-31-03; DFW 11-2004, f. & cert. ef. 2-13-04; DFW 19-2004(Temp), f. & cert. ef. 3-12-04 thru 3-31-04; DFW 22-2004(Temp), f. & cert. ef. 3-18-04 thru 3-31-04; DFW 28-2004(Temp), f. 4-8-04 cert. ef. 4-12-04 thru 4-15-04; DFW 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; DFW 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; DFW 79-2004(Temp), f. 8-2-04, cert. ef. 8-3-04 thru 12-31-04; DFW 95-2004(Temp), f. 9-17-04, cert. ef. 9-19-04 thru 12-31-04; DFW 109-2004(Temp), f. & cert. ef. 10-19-04 thru 12-31-04; DFW 6-2005, f. & cert. ef. 2-14-05; DFW 16-2005(Temp), f. & cert. ef. 3-10-05 thru 7-31-05; DFW 18-2005(Temp), f. & cert. ef. 3-15-05 thru 3-21-05; Administrative correction 4-20-05; DFW 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; DFW 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; DFW 28-2005(Temp), f. & cert. ef. 4-28-05 thru 6-16-05; DFW 37-2005(Temp), f. & cert. ef. 5-5-05 thru 10-16-05; DFW 40-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; DFW 85-2005(Temp), f. 8-1-05, cert. ef. 8-3-05 thru 12-31-05; DFW 109-2005(Temp), f. & cert. ef. 9-19-05 thru 12-31-05; DFW 110-2005(Temp), f. & cert. ef. 9-26-05 thru 12-31-05; DFW 116-2005(Temp), f. 10-4-05, cert. ef. 10-5-05 thru 12-31-05; DFW 120-2005(Temp), f. & cert. ef. 10-11-05 thru 12-31-05; DFW 124-2005(Temp), f. & cert. ef. 10-18-05 thru 12-31-05; Administrative correction 1-20-06; DFW 5-2006, f. & cert. ef. 2-15-06; DFW 14-2006(Temp), f. 3-15-06, cert. ef. 3-16-06 thru 7-27-06; DFW 16-2006(Temp), f. 3-23-06 & cert. ef. 3-26-06 thru 7-27-06; DFW 18-2006(Temp), f. 3-29-06, cert. ef. 4-2-06 thru 7-27-06; DFW 20-2006(Temp), f. 4-7-06, cert. ef. 4-9-06 thru 7-27-06; DFW 32-2006(Temp), f. & cert. ef. 5-23-06 thru 7-31-06; DFW 35-2006(Temp), f. & cert. ef. 5-30-06 thru 7-31-06; DFW 75-2006(Temp), f. 8-8-06, cert. ef. 9-5-06 thru 12-31-06; DFW 92-2006(Temp), f. 9-1-06, cert. ef. 9-5-06 thru 12-31-06; DFW 98-2006(Temp), f. & cert. ef. 9-12-06 thru 12-31-06; DFW 103-2006(Temp), f. 9-15-06, cert. ef. 9-18-06 thru 12-31-06; DFW 119-2006(Temp), f. & cert. ef. 10-18-06 thru 12-31-06; Administrative correction 1-16-07; DFW 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; DFW 9-2007, f. & cert. ef. 2-14-07; DFW 13-2007(Temp), f. & cert. ef. 3-6-07 thru 9-1-07; DFW 25-2007(Temp), f. 4-17-07, cert. ef. 4-18-07 thru 7-26-07; DFW 61-2007(Temp), f. 7-30-07, cert. ef. 8-1-07 thru 10-31-07; DFW 108-2007(Temp), f. 10-12-07, cert. ef. 10-14-07 thru 12-31-07; Administrative correction 1-24-08; DFW 6-2008(Temp), f. 1-29-08, cert. ef. 1-31-08 thru 7-28-08; DFW 16-2008(Temp), f. 2-26-08, cert. ef. 3-2-08 thru 8-28-08; DFW 48-2008(Temp), f. & cert. ef. 5-12-08 thru 8-28-08; DFW 58-2008(Temp), f. & cert. ef. 6-4-08 thru 8-31-08; DFW 85-2008(Temp), f. 7-24-08, cert. ef. 8-1-08 thru 12-31-08; DFW 103(Temp), f. 8-26-08, cert. ef. 9-2-08 thru 10-31-08; DFW 108-2008(Temp), f. 9-8-08, cert. ef. 9-9-08 thru 12-31-08; Administrative correction 1-23-09; DFW 12-2009(Temp), f. 2-13-09, cert. ef. 2-15-09 thru 7-31-09; DFW 49-2009(Temp), f. 5-14-09, cert. ef. 5-17-09 thru 7-31-09; DFW 89-2009(Temp), f. 8-3-09, cert. ef. 8-4-09 thru 12-31-09; DFW 107-2009(Temp), f. 9-2-09, cert. ef. 9-5-09 thru 10-31-09; Administrative correction 11-19-09; DFW 15-2010(Temp), f. 2-19-10, cert. ef. 2-21-10 thru 6-11-10; DFW 46-2010(Temp), f. & cert. ef. 4-21-10 thru 7-31-10; DFW 53-2010(Temp), f. & cert. ef. 5-4-10 thru 7-31-10; DFW 57-2010(Temp), f. & cert. ef. 5-11-10 thru 7-31-10; DFW 69-2010(Temp), f. & cert. ef. 5-18-10 thru 7-31-10; DFW 113-2010(Temp), f. 8-2-10, cert. ef. 8-4-10 thru 10-31-10; DFW 129-2010(Temp), f. & cert. ef. 9-10-10 thru 10-31-10; Administrative correction 11-23-10; DFW 12-2011(Temp), f. 2-10-11, cert. ef. 2-13-11 thru 7-29-11; DFW 23-2011, f. & cert. ef. 3-21-11; DFW 32-2011(Temp), f. 4-20-11, cert. ef. 4-21-11 thru 7-29-11; DFW 44-2011(Temp), f. & cert. ef. 5-11-11 thru 6-10-11; Administrative correction 6-28-11; DFW 113-2011(Temp), f. 8-10-11, cert. ef. 8-15-11 thru 10-31-11; Administrative correction, 11-18-11; DFW 12-2012(Temp), f. 2-8-12, cert. ef. 2-12-12 thru 7-31-12; DFW 104-2012(Temp), f. 8-6-12, cert. ef. 8-13-12 thru 10-31-12; Administrative correction 11-23-12; DFW 11-2013(Temp), f. 2-8-13, cert. ef. 2-11-13 thru 7-31-13; DFW 24-2013(Temp), f. & cert. ef. 3-21-13 thru 7-31-13; Administrative correction, 8-21-13; DFW 91-2013(Temp), f. 8-22-13, cert. ef. 8-26-13 thru

10-31-13; DFW 110-2013(Temp), f. 9-27-13, cert. ef. 9-30-13 thru 10-31-13; Administrative correction, 11-22-13; DFW 8-2014(Temp), f. & cert. ef. 2-10-14 thru 7-31-14; DFW 35-2014(Temp), f. & cert. ef. 4-24-14 thru 7-31-14; DFW 39-2014(Temp), f. 5-7-14, cert. ef. 5-8-14 thru 7-31-14; DFW 115-2014(Temp), f. 8-5-14, cert. ef. 8-18-14 thru 10-31-14; DFW 135-2014(Temp), f. & cert. ef. 9-19-14 thru 10-31-14; Administrative correction 11-24-14; DFW 10-2015(Temp), f. 2-3-15, cert. ef. 2-9-15 thru 7-30-15; DFW 29-2015(Temp), f. & cert. ef. 4-21-15 thru 7-30-15; DFW 37-2015(Temp), f. 5-1-15, cert. ef. 5-4-15 thru 7-30-15; DFW 70-2015(Temp), f. 6-15-15, cert. ef. 6-16-15 thru 7-31-15; DFW 76-2015(Temp), f. 6-23-15, cert. ef. 6-25-15 thru 7-31-15; DFW 102-2015(Temp), f. 8-10-15, cert. ef. 8-17-15 thru 10-31-15; Administrative correction, 11-20-15; DFW 8-2016(Temp), f. 2-1-16, cert. ef. 2-8-16 thru 7-31-16; DFW 23-2016(Temp), f. & cert. ef. 3-28-16 thru 7-31-16; DFW 32-2016(Temp), f. 4-20-16, cert. ef. 4-21-16 thru 7-31-16; DFW 71-2016(Temp), f. 6-13-16, cert. ef. 6-16-16 thru 7-31-16; DFW 78-2016(Temp), f. 6-23-16 thru 7-31-16; DFW 85-2016(Temp), f. & cert. ef. 6-30-16 thru 7-31-16; DFW 87-2016(Temp), f. & cert. ef. 7-7-16 thru 7-31-16; DFW 92-2016(Temp), f. 7-13-16, cert. ef. 7-14-16 thru 7-31-16; DFW 101-2016(Temp), f. 8-2-16, cert. ef. 8-24-16 thru 10-31-16; DFW 129-2016(Temp), f. 9-29-16, cert. ef. 10-1-16 thru 13-31-16; DFW 9-2017(Temp), f. & cert. ef. 2-6-17 thru 3-28-17; DFW 25-2017(Temp), f. & cert. ef. 3-20-17 thru 6-13-17; DFW 32-2017(Temp), f. 3-29-17, cert. ef. 3-30-17 thru 9-15-17; DFW 39-2017(Temp), f. 4-5-17, cert. ef. 4-6-17 thru 9-15-17; DFW 40-2017(Temp), f. 4-12-17, cert. ef. 4-13-17 thru 9-15-17

Rule Caption: Extend Columbia River Recreational Seasons for Salmon, Steelhead and Shad Set.

Adm. Order No.: DFW 41-2017(Temp)

Filed with Sec. of State: 4-12-2017

Certified to be Effective: 4-13-17 thru 6-15-17

Notice Publication Date:

Rules Amended: 635-023-0125

Subject: This amended rule extends the 2017 Columbia River recreational spring Chinook, steelhead and shad seasons with descriptions of areas, dates, and bag limits for harvest of adipose fin-clipped Chinook salmon, adipose fin-clipped steelhead and shad. Revisions are consistent with action taken April 12, 2017 by the Oregon and Washington Departments of Fish and Wildlife in a meeting of the Columbia River Compact.

Rules Coordinator: Michelle Tate—(503) 947-6044

635-023-0125

Spring Sport Fishery

(1) The 2017 Oregon Sport Fishing Regulations provide requirements for the Columbia River Zone and the Snake River Zone. However, additional regulations may be adopted in this rule division from time to time, and, to the extent of any inconsistency, they supersede the 2017 Oregon Sport Fishing Regulations.

(2) The Columbia River recreational salmon and steelhead fishery downstream of Bonneville Dam is open from the mouth at Buoy 10 upstream to Beacon Rock (boat and bank) plus bank angling only from Beacon Rock upstream to the Bonneville Dam deadline from Wednesday, March 1 through Monday April 10, Thursday April 13 through Monday April 17, and Thursday April 20 through Sunday April 23, 2017 (50 retention days) with the following restrictions:

(a) No more than two adult adipose fin-clipped salmonids, of which only one may be a Chinook, may be retained per day. All non-adipose fin-clipped salmon and non-adipose fin-clipped steelhead must be released immediately unharmed.

(b) The upstream boat boundary at Beacon Rock is defined as: "a deadline marker on the Oregon bank (approximately four miles downstream from Bonneville Dam Powerhouse One) in a straight line through the western tip of Pierce Island to a deadline marker on the Washington bank at Beacon Rock."

(c) No angling is allowed within a closure area near the mouth of the Lewis River. This closure area is defined as: A line from a marker on the lower end of Bachelor Island through USCG buoy Red #4 to the Oregon shore, downstream to a line from the lower (north) end of Sauvie Island across to the downstream range marker (0.7 miles downstream of the Lewis R.) and continuing along the wing jetty to the Washington Shore.

(d) All other permanent 2017 Oregon Sport Fishing Regulations apply.

(3) The Columbia River recreational salmon and steelhead fishery upstream of the Tower Island power lines (approximately 6 miles below The Dalles Dam) to the Oregon/Washington border, plus the Oregon and Washington banks between Bonneville Dam and the Tower Island power lines is open from Thursday, March 16 through Friday, May 5, 2017 (51 retention days) with the following restrictions:

(a) No more than two adult adipose fin-clipped salmonids, of which only one may be a Chinook, may be retained per day. All non-adipose fin-clipped salmon and non-adipose fin-clipped steelhead must be released immediately unharmed.

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(b) All other permanent 2017 Oregon Sport Fishing Regulations apply.

(4) Beginning Wednesday, March 1 through Thursday, June 15, 2017 the following restrictions are in effect for Columbia River Select Area recreational salmon and steelhead fisheries:

(a) On days when the recreational fishery below Bonneville Dam is open to retention of Chinook, the salmonid daily bag limit in Select Areas will be the same as mainstem Columbia River bag limits; and

(b) On days when the mainstem Columbia River fishery is closed to Chinook retention, the permanent salmonid bag limit regulations for Select Areas apply.

(5) Beginning Thursday, March 16 through Monday, May 15, 2017, the mainstem Columbia River will be open for retention of adipose fin-clipped steelhead from Buoy 10 upstream to the Oregon/Washington border and open for shad from Buoy 10 upstream to Bonneville Dam only during days and in areas open for retention of adipose fin-clipped spring Chinook.

[Publications: Publications referenced are available from the agency.]

Stat. Auth.: ORS 496.138, 496.146 & 506.119

Stats. Implemented: ORS 496.162 & 506.129

Hist.: DFW 11-2004, f. & cert. ef. 2-13-04; DFW 17-2004(Temp), f. & cert. ef. 3-10-04 thru 7-31-04; DFW 29-2004(Temp), f. 4-15-04, cert. ef. 4-22-04 thru 7-31-04; DFW 30-2004(Temp), f. 4-21-04, cert. ef. 4-22-04 thru 7-31-04; DFW 36-2004(Temp), f. 4-29-04, cert. ef. 5-1-04 thru 7-31-04; DFW 39-2004(Temp), f. 5-5-04, cert. ef. 5-6-04 thru 7-31-04; DFW 44-2004(Temp), f. 5-17-04, cert. ef. 5-20-04 thru 7-31-04; DFW 51-2004(Temp), f. 6-9-04, cert. ef. 6-16-04 thru 7-31-04; Administrative correction 8-19-04; DFW 117-2004, f. 12-13-04, cert. ef. 1-1-05; DFW 6-2005, f. & cert. ef. 2-14-05; DFW 27-2005(Temp), f. & cert. ef. 4-20-05 thru 6-15-05; DFW 35-2005(Temp), f. 5-4-05, cert. ef. 5-5-05 thru 10-16-05; DFW 38-2005(Temp), f. & cert. ef. 5-10-05 thru 10-16-05; DFW 44-2005(Temp), f. 5-17-05, cert. ef. 5-22-05 thru 10-16-05; DFW 51-2005(Temp), f. 6-3-05, cert. ef. 6-4-05 thru 7-31-05; Administrative correction 11-18-05; DFW 136-2005, f. 12-7-05, cert. ef. 1-1-06; DFW 5-2006, f. & cert. ef. 2-15-06; DFW 21-2006(Temp), f. 4-13-06, cert. ef. 4-14-06 thru 5-15-06; DFW 27-2006(Temp), f. 5-12-06, cert. ef. 5-13-06 thru 6-15-06; DFW 29-2006(Temp), f. & cert. ef. 5-16-06 thru 7-31-06; DFW 79-2006, f. 8-11-06, cert. ef. 1-1-07; DFW 7-2007(Temp), f. 1-31-07, cert. ef. 2-1-07 thru 7-30-07; DFW 9-2007, f. & cert. ef. 2-14-07; DFW 28-2007(Temp), f. & cert. ef. 4-26-07 thru 7-26-07; DFW 33-2007(Temp), f. 5-15-07, cert. ef. 5-16-07 thru 7-30-07; DFW 37-2007(Temp), f. & cert. ef. 5-31-07 thru 7-30-07; DFW 39-2007(Temp), f. 6-5-07, cert. ef. 6-6-07 thru 7-31-07; DFW 136-2007, f. 12-31-07, cert. ef. 1-1-08; DFW 13-2008(Temp), f. 2-21-08, cert. ef. 2-25-08 thru 8-22-08; DFW 17-2008(Temp), f. & cert. ef. 2-27-08 thru 8-22-08; DFW 35-2008(Temp), f. 4-17-08, cert. ef. 4-21-08 thru 8-22-08; DFW 49-2008(Temp), f. & cert. ef. 5-13-08 thru 6-15-08; Administrative correction 7-22-08; DFW 156-2008, f. 12-31-08, cert. ef. 1-1-09; DFW 10-2009(Temp), f. 2-13-09, cert. ef. 3-1-09 thru 6-15-09; DFW 18-2009, f. & cert. ef. 2-26-09; DFW 48-2009(Temp), f. 5-14-09, cert. ef. 5-15-09 thru 6-16-09; DFW 68-2009(Temp), f. 6-11-09, cert. ef. 6-12-09 thru 6-16-09; Administrative correction 7-21-09; DFW 144-2009, f. 12-8-09, cert. ef. 1-1-10; DFW 19-2010(Temp), f. 2-26-10, cert. ef. 3-1-10 thru 8-27-10; DFW 23-2010(Temp), f. & cert. ef. 3-2-10 thru 8-27-10; DFW 45-2010(Temp), f. 4-21-10, cert. ef. 4-24-10 thru 7-31-10; DFW 49-2010(Temp), f. 4-27-10, cert. ef. 4-29-10 thru 7-31-10; DFW 55-2010(Temp), f. 5-7-10, cert. ef. 5-8-10 thru 7-31-10; Suspended by DFW 88-2010(Temp), f. 6-25-10, cert. ef. 6-26-10 thru 7-31-10; Administrative correction 8-18-10; DFW 171-2010, f. 12-30-10, cert. ef. 1-1-11; DFW 13-2011(Temp), f. & cert. ef. 2-14-11 thru 6-15-11; DFW 28-2011(Temp), f. 4-7-11, cert. ef. 4-8-11 thru 6-15-11; DFW 30-2011(Temp), f. 4-15-11, cert. ef. 4-16-11 thru 6-15-11; DFW 33-2011(Temp), f. & cert. ef. 4-21-11 thru 6-15-11; DFW 39-2011(Temp), f. 5-5-11, cert. ef. 5-7-11 thru 6-15-11; DFW 48-2011(Temp), f. 5-13-11, cert. ef. 5-15-11 thru 6-15-11; DFW 55-2011(Temp), f. 5-25-11, cert. ef. 5-27-11 thru 6-15-11; DFW 59-2011(Temp), f. & cert. ef. 6-2-11 thru 6-15-11; Administrative correction 6-28-11; DFW 163-2011, f. 12-27-11, cert. ef. 1-1-12; DFW 8-2012(Temp), f. 2-6-12, cert. ef. 2-15-12 thru 6-15-12; DFW 31-2012(Temp), f. 4-5-12, cert. ef. 4-6-12 thru 6-15-12; DFW 33-2012(Temp), f. 4-12-12, cert. ef. 4-14-12 thru 6-15-12; DFW 45-2012(Temp), f. 5-1-12, cert. ef. 5-2-12 thru 7-31-12; DFW 47-2012(Temp), f. 5-15-12, cert. ef. 5-16-12 thru 7-31-12; DFW 49-2012(Temp), f. 5-18-12, cert. ef. 5-19-12 thru 7-31-12; DFW 51-2012(Temp), f. 5-23-12, cert. ef. 5-26-12 thru 7-31-12; Suspended by DFW 85-2012(Temp), f. 7-6-12, cert. ef. 7-9-12 thru 8-31-12; DFW 149-2012, f. 12-27-12, cert. ef. 1-1-13; DFW 12-2013(Temp), f. 2-12-13, cert. ef. 2-28-13 thru 7-31-13; DFW 26-2013(Temp), f. 4-4-13, cert. ef. 4-5-13 thru 7-1-13; DFW 38-2013(Temp), f. 5-22-13, cert. ef. 5-25-13 thru 7-1-13; DFW 49-2013(Temp), f. 6-7-13, cert. ef. 6-8-13 thru 6-30-13; Administrative correction, 7-18-13; DFW 137-2013, f. 12-19-13, cert. ef. 1-1-14; DFW 12-2014(Temp), f. 2-13-14, cert. ef. 3-1-14 thru 6-15-14; DFW 29-2014(Temp), f. 4-3-14, cert. ef. 4-4-14 thru 6-15-14; DFW 31-2014(Temp), f. 4-17-14, cert. ef. 4-19-14 thru 7-31-14; DFW 40-2014(Temp), f. 5-7-14, cert. ef. 5-9-14 thru 6-30-14; DFW 44-2014(Temp), f. 5-14-14, cert. ef. 5-15-14 thru 6-15-14; DFW 52-2014(Temp), f. 5-28-14, cert. ef. 5-31-14 thru 6-30-14; Administrative correction, 7-24-14; DFW 165-2014, f. 12-18-14, cert. ef. 1-1-15; DFW 12-2015(Temp), f. 2-3-15, cert. ef. 3-1-15 thru 6-15-15; DFW 16-2015(Temp), f. & cert. ef. 3-5-15 thru 6-15-15; DFW 26-2015(Temp), f. 4-8-15, cert. ef. 4-10-15 thru 6-15-15; DFW 35-2015(Temp), f. 4-30-15, cert. ef. 5-2-15 thru 6-15-15; DFW 40-2015(Temp), f. & cert. ef. 5-6-15 thru 6-15-15; DFW 52-2015(Temp), f. 5-27-15, cert. ef. 5-28-15 thru 6-15-15; DFW 59-2015(Temp), f. 6-2-15, cert. ef. 6-3-15 thru 6-15-15; DFW 167-2015, f. 12-29-15, cert. ef. 1-1-16; DFW 9-2016(Temp), f. 2-1-16, cert. ef. 3-1-16 thru 6-15-16; DFW 29-2016(Temp), f. 4-7-16, cert. ef. 4-8-16 thru 6-15-16; DFW 44-2016(Temp), f. 5-5-16, cert. ef. 5-6-16 thru 6-15-16; DFW 49-2016(Temp), f. 5-11-16, cert. ef. 5-13-16 thru 6-15-16; DFW 52-2016(Temp), f. 5-19-16, cert. ef. 5-20-16 thru 6-15-16; DFW 57-2016(Temp), f. 5-25-16, cert. ef. 5-28-16 thru 6-15-16; DFW 68-2016(Temp), f. 6-9-16, cert. ef. 6-10-16 thru 6-16-16; DFW 153-2016, f. 12-28-16, cert. ef. 1-1-17; DFW 18-2017, f. 2-28-17, cert. ef. 3-1-17 thru 6-15-17; DFW 37-2017(Temp), f. 4-3-17, cert. ef. 4-7-17 thru 6-15-17; DFW 41-2017(Temp), f. 4-12-17, cert. ef. 4-13-17 thru 6-15-17

Department of Human Services, Aging and People with Disabilities and Developmental Disabilities Chapter 411

Rule Caption: ODDS: In-Home Expenditure Guidelines

Adm. Order No.: APD 8-2017(Temp)

Filed with Sec. of State: 4-14-2017

Certified to be Effective: 5-1-17 thru 10-27-17

Notice Publication Date:

Rules Amended: 411-317-0000

Subject: The Department of Human Services, Office of Developmental Disabilities Services (ODDS) is temporarily amending OAR 411-317-0000 to incorporate Version 6.0 of the In-Home Expenditure Guidelines effective May 1, 2017.

Rules Coordinator: Kimberly Colkitt-Hallman—(503) 945-6398

411-317-0000

Definitions for Developmental Disability Services

This rule, OAR 411-317-0000, defines words and terms frequently used in OAR chapter 411, divisions 300 to 450 for developmental disabilities services. OAR chapter 411, divisions 300 to 450 may include definitions specific to the subject matter in that division. If a word or term is defined differently than what is in this rule, the definition in that division applies, when used in that division.

(1) "24-Hour Residential Program" means the distinct method for the delivery of home and community-based services in a 24-hour residential setting by a provider certified and endorsed under the rules in OAR chapter 411, division 323.

(2) "24-Hour Residential Setting" means a residential home, apartment, or duplex licensed by the Department under ORS 443.410 in which home and community-based services are provided to individuals with intellectual or developmental disabilities. A 24-hour residential setting is considered a provider owned, controlled, or operated residential setting.

(3) "Abuse" means:

(a) For a child:

(A) "Abuse" as defined in ORS 419B.005.

(B) "Abuse" as defined in OAR 407-045-0260 when a child resides in a 24-hour residential setting licensed by the Department as described in OAR chapter 411, division 325.

(b) For an individual between the ages of 18 and 21 residing in a certified child foster home, "abuse" as defined in OAR 407-045-0260.

(c) For an adult, "abuse" as defined in OAR 407-045-0260.

(4) "Abuse Investigation" means the reporting and investigation activities as required by OAR 407-045-0300 and any subsequent services or supports necessary to prevent further abuse as required by OAR 407-045-0310.

(5) "Accident" means an event that results in injury, or has the potential for injury, even if the injury does not appear until after the event.

(6) "Activities of Daily Living (ADL)" are the basic personal everyday activities, such as eating, using the restroom, grooming, dressing, bathing, and transferring. ADL services include, but are not limited to the following:

(a) Basic personal hygiene — providing or assisting with needs, such as bathing (tub, bed, bath, shower), hair care, grooming, shaving, nail care, foot care, dressing, skin care, or oral hygiene.

(b) Toileting, bowel, and bladder care — assisting to and from the bathroom, on and off toilet, commode, bedpan, urinal, or other assistive device used for toileting, changing incontinence supplies, following a toileting schedule, managing menses, cleansing an individual or adjusting clothing related to toileting, emptying a catheter, drainage bag, or assistive device, ostomy care, or bowel care.

(c) Mobility, transfers, and repositioning — assisting with ambulation or transfers with or without assistive devices, turning an individual or adjusting padding for physical comfort or pressure relief, or encouraging or assisting with range-of-motion exercises.

(d) Nutrition — assisting with adequate fluid intake or adequate nutrition, assisting with food intake (feeding), monitoring to prevent choking or aspiration, assisting with adaptive utensils, cutting food, and placing food, dishes, and utensils within reach for eating.

(e) Delegated nursing tasks.

(f) First aid and handling emergencies — addressing medical incidents related to the conditions of an individual, such as seizure, aspiration, constipation, or dehydration, responding to the call of the individual for

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help during an emergent situation, or for unscheduled needs requiring immediate response.

(g) Assistance with necessary medical appointments — help scheduling appointments, arranging medical transportation services, accompanying to appointments, follow up from appointments, or assistance with mobility, transfers, or cognition in getting to and from appointments.

(h) Observation of the status of an individual and reporting of significant changes to a physician, health care provider, or other appropriate person.

(7) “ADL” means “activities of daily living”.

(8) “Administration of Medication” means the act of placing a medication in or on the body of an individual by a person responsible for the care of the individual and employed by, or under contract to, the individual or as applicable their legal or designated representative or a provider organization.

(9) “Administrator Review” means the Director of the Department reviews a decision upon request, including the documentation related to the decision, and issues a determination.

(10) “Adult” means an individual who is 18 years of age or older with an intellectual or developmental disability.

(11) “Advocate” means a person other than paid staff who has been selected by an individual or their legal representative to help the individual understand and make decisions in matters relating to identification of needs and choices of services, especially when rights are at risk or have been violated.

(12) “Agency” means a public or private community agency or organization certified by the Department to deliver developmental disabilities services.

(13) “Aids to Physical Functioning” means any special equipment prescribed for an individual by a physician, therapist, or dietician that maintains or enhances the physical functioning of the individual.

(14) “Alternative Resources” mean possible resources, not including developmental disabilities services, for the provision of supports to meet the needs of an individual. Alternative resources include, but are not limited to, private or public insurance, vocational rehabilitation services, supports available through the Oregon Department of Education, or other community supports.

(15) “Annual Plan” means the written summary a case manager completes for an individual who is not enrolled in waiver or Community First Choice state plan services. An Annual Plan is not an ISP and is not a plan of care for Medicaid purposes.

(16) “Attendant Care” means an hourly service that provides assistance with ADL, IADL, and health-related tasks through cueing, monitoring, reassurance, redirection, set-up, hands-on, standby assistance, and reminding. Attendant care is available through the Community First Choice state plan.

(17) “Authority” means “Oregon Health Authority”.

(18) “Background Check” means a criminal records check and abuse check as defined in OAR 407-007-0210.

(19) “Baseline Level of Behavior” means the frequency, duration, or intensity of a behavior, objectively measured, described, and documented prior to the implementation of an initial or revised Behavior Support Plan (BSP). The baseline level of behavior serves as the reference point by which the ongoing efficacy of a BSP is to be assessed.

(20) “Bedroom” means the personal space and sleeping area of an individual receiving home and community-based services in a provider owned, controlled, or operated residential setting, as agreed to in the Residency Agreement.

(21) “Behavior Consultant” means a contractor with specialized skills who meets the minimum qualifications defined in the Community First Choice state plan, who conducts functional assessments, and develops a Behavior Support Plan.

(22) “Behavior Data Collection System” means the methodology specified within a Behavior Support Plan that directs the process for recording observations, interventions, and other support provision information critical to the analysis of the efficacy of the Behavior Support Plan.

(23) “Behavior Data Summary” means the document composed to summarize episodes of protective physical intervention. The behavior data summary serves as a substitution for the requirement of an incident report for each episode of protective physical intervention.

(24) “Behavior Support Plan” means the written strategy, based on person-centered planning and a functional assessment that outlines specific instructions for a primary caregiver or provider to follow in order to reduce the frequency and intensity of the challenging behaviors of an individual and to modify the behavior of the primary caregiver or provider,

adjust the environment of the individual, and teach new skills to the individual.

(25) “Behavior Support Services” mean the services consistent with positive behavioral theory and practice that are delivered in accordance with a Behavior Support Plan to assist with behavioral challenges due to the intellectual or developmental disability of an individual that prevents the individual from accomplishing ADL, IADL, health-related tasks, and provides cognitive supports to mitigate behavior.

(26) “Brokerage” means an entity or distinct operating unit within an existing entity that uses the principles of self-determination to perform the functions associated with planning and implementation of services for individuals with intellectual or developmental disabilities.

(27) “BSP” means “Behavior Support Plan”.

(28) “Career Development Plan”:

(a) Means the part of an ISP that identifies the following:

(A) The employment goals and objectives for an individual.

(B) The services and supports needed to achieve those goals.

(C) The people, agencies, and providers assigned to assist the individual to attain those goals.

(D) The obstacles to the individual working in an individualized job in a competitive integrated employment setting and the services and supports necessary to overcome those obstacles.

(b) A Career Development Plan is based on person-centered planning principles.

(29) “Case Management Contact” means a reciprocal interaction between a case manager and an individual or their legal or designated representative (as applicable).

(30) “Case Management Entity” means a CDDP, a Brokerage, CIIS, or the Children’s Residential Program of the Department.

(31) “Case Management Services” means the functions performed by a case manager that are funded by the Department. Case management services include, but are not limited to the following:

(a) Assessment of support needs.

(b) Developing an ISP or Annual Plan that may include authorized services.

(c) Information and referral for services.

(d) Monitoring the effectiveness of services and supports.

(32) “Case Manager” means a person who delivers case management services or person-centered service planning for and with individuals, meets the qualifications of OAR 411-415-0040, and is employed as one of the following:

(a) A personal agent by a Brokerage.

(b) A services coordinator by a CDDP.

(c) A services coordinator by the Department.

(33) “CDDP” means “Community Developmental Disabilities Program”.

(34) “Centers for Medicare and Medicaid Services”. The Centers for Medicare and Medicaid Services is the federal agency within the United States Department of Health and Human Services responsible for the administration of Medicaid, the Health Insurance Portability and Accountability Act (HIPAA), and for overseeing Medicaid programs administered by the states through survey and certification.

(35) “Chemical Restraint” means the use of a psychotropic drug or other drugs for punishment or to modify behavior in place of a meaningful behavior or treatment plan.

(36) “Child” means an individual under the age of 18.

(37) “Children’s Intensive In-Home Services” includes case management from a Department employed services coordinator and the services authorized by the Department delivered through the following:

(a) The ICF/ID Behavioral Program.

(b) The Medically Fragile Children’s Program.

(c) The Medically Involved Children’s Program.

(38) “Choice” means the expression of preference, opportunity for, and active role of an individual in decision-making related to services received and from whom services may be received including, but not limited to, case management, providers, services, and service settings. Individuals are supported in opportunities to make changes when so expressed. Choice may be communicated through a variety of methods, including orally, through sign language, or by other communication methods.

(39) “Choice Advising” means the impartial sharing of information to individuals with intellectual or developmental disabilities about the following:

(a) Case management options.

(b) Service options.

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- (c) Service setting options.
- (d) Provider types.
- (40) "Children's Health Insurance Program" means Oregon medical coverage under Title XXI of the Social Security Act.
- (41) "CHIP" means the "Children's Health Insurance Program".
- (42) "CIIS" means "Children's Intensive In-Home Services".
- (43) "Claimant" means the person directly impacted by an action that is the subject of a hearing request.
- (44) "CME" means "Case Management Entity".
- (45) "CMS" means "Centers for Medicare and Medicaid Services".
- (46) "Collective Bargaining Agreement" means a contract based on negotiation between organized workers and their designated employer for purposes of collective bargaining to determine wages, hours, rules, and working conditions.
- (47) "Community Developmental Disabilities Program" means the entity that is responsible for plan authorization, delivery, and monitoring of services for individuals who are not enrolled in a Brokerage. A Community Developmental Disabilities Program operates in a specific geographic service area of the state under a contract with the Department, local mental health authority, or other entity as contracted by the Department.
- (48) "Community First Choice (K Plan)" means the state plan amendment for Oregon authorized under section 1915(k) of the Social Security Act.
- (49) "Community Living Supports" means attendant care, skills training, and relief care.
- (50) "Community Transportation" means the ancillary service described in OAR 411-435-0050 that enables an individual to gain access to community-based state plan and waiver services, activities, and resources, not medical in nature. Community transportation is provided in the area surrounding the home of the individual commonly used by people in the same area to obtain ordinary goods and services. Community transportation is available through the Community First Choice state plan.
- (51) "Complaint" means an oral or written expression of dissatisfaction with a developmental disabilities service or provider.
- (52) "Complaint Investigation" means the investigation of a non-abuse related complaint that has been made to a proper authority.
- (53) "Complaint Log" means a list of complaint-related information.
- (54) "Completed Application" means an application required by the Department that:
- (a) Is filled out completely, signed, and dated. An applicant who is unable to sign may sign with a mark, witnessed by another person.
- (b) Contains documentation required to make an eligibility determination as outlined in OAR 411-320-0080.
- (55) "Condition" means a provision attached to a new or existing certificate, endorsement, or license that limits or restricts the scope of the certificate, endorsement, or license or imposes additional requirements on the provider.
- (56) "Continuing Services" means the continuation of a developmental disabilities service following the request for a hearing. Services continue until a Final Order is issued.
- (57) "Cost Effective" means being responsible and accountable with Department resources by offering less costly alternatives when providing choices that adequately meet the support needs of an individual. Less costly alternatives include other service settings available from the Department and the utilization of assistive devices, natural supports, environmental modifications, and alternative resources. Less costly alternatives may include resources not paid for by the Department.
- (58) "County of Origin" means:
- (a) For an adult, the county of residence for the adult.
- (b) For a child, the county where the jurisdiction of guardianship exists.
- (59) "Day" means a calendar day unless otherwise specified.
- (60) "DD Administrative Hearing Request" means form APD 0443DD.
- (61) "Denial" means any rejection of a request for a developmental disabilities service or for an increase in a developmental disabilities service. A denial of a Medicaid service requires a Notification of Planned Action.
- (62) "Delegation" is the process by which a registered nurse authorizes an unlicensed person to perform nursing tasks and confirms that authorization in writing. Delegation may occur only after a registered nurse follows all steps of the delegation process as outlined in OAR chapter 851, division 047.
- (63) "Department" means "Department of Human Services".
- (64) "Department Hearing Representative" means a person authorized by the Department to represent the Department in a hearing as described in OAR 411-001-0500.
- (65) "Department Staff" means a person employed by the Department who is knowledgeable in a particular subject matter.
- (66) "Designated Representative":
- (a) Means a person who is 18 years of age or older, such as a parent, family member, guardian, or advocate, who is:
- (A) Chosen by an individual or their legal representative.
- (B) Not a paid provider for the individual.
- (C) Authorized by the individual, or as applicable their legal representative, to serve as the representative of the individual, or as applicable, their legal representative, in connection with the provision of funded supports.
- (b) The power to act as a designated representative is valid until an individual modifies the authorization.
- (c) An individual or their legal representative is not required to appoint a designated representative.
- (67) "Developmental Disability" means a neurological condition that:
- (a) Originates before an individual is 22 years of age or 18 years of age for an intellectual disability.
- (b) Originates in and directly affects the brain and has continued, or is expected to continue, indefinitely.
- (c) Constitutes significant impairment in adaptive behavior as diagnosed and measured by a qualified professional as described in OAR 411-320-0080.
- (d) Is not primarily attributed to other conditions including, but not limited to, a mental or emotional disorder, sensory impairment, motor impairment, substance abuse, personality disorder, learning disability, or Attention Deficit Hyperactivity Disorder (ADHD).
- (e) Requires training and support similar to an individual with an intellectual disability as described in OAR 411-320-0080.
- (68) "Developmental Disabilities Services" mean the services provided by or authorized by a CDDP, Brokerage, or the Department that are comprised of the following:
- (a) Case management services described in OAR chapter 411, division 415.
- (b) Services available through the Community First Choice state plan.
- (c) Services available through a 1915(c) waiver.
- (69) "Director" means the Director of the Department of Human Services, Office of Developmental Disabilities Services, or the designee of the Director, which may include Department Staff.
- (70) "Domestic Animals" means the animals domesticated so as to live and breed in a tame condition, such as dogs, cats, and domesticated farm stock.
- (71) "Employer" means, for the purposes of obtaining services through a personal support worker, the common law employer. The common law employer is the individual, or a person selected by the individual or their legal representative, to conduct the responsibilities of an employer. An employer may also be a designated representative.
- (72) "Employer-Related Supports" mean the activities that assist an individual, and when applicable their legal or designated representative or family members, with directing and supervising the provision of services described in the ISP for the individual. Employer-related supports may include, but are not limited to, the following:
- (a) Education about employer responsibilities.
- (b) Orientation to basic wage and hour issues.
- (c) Use of common employer-related tools, such as Service Agreements.
- (d) Fiscal intermediary services.
- (73) "Employment Service" means a home and community-based service that supports the primary objective of exploring, obtaining, maintaining, or advancing in an individual job in a competitive integrated employment setting in the general workforce.
- (a) Employment services under the rules in OAR chapter 411, division 345 include the following:
- (A) Supported Employment.
- (i) Individual Employment Support.
- (I) Job Coaching.
- (II) Job Development.
- (ii) Small Group Employment Support.
- (B) Discovery.
- (C) Employment Path Services.

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(b) Employment services do not include vocational assessments in sheltered workshop settings or facility-based settings. Employment services do not include new participants in sheltered workshop settings.

(74) "Entity" means a person, a trust or estate, a partnership, a corporation (including associations, joint stock companies, and insurance companies), a state, or a political subdivision or instrumentality, including a municipal corporation of a state.

(75) "Entry" means initial enrollment to a Department-funded developmental disabilities service delivered by a provider agency or case management entity.

(76) "Exit" means termination or discontinuance of a Department-funded developmental disabilities service.

(77) "Family Member" means spouse, domestic partner, natural parent, child, sibling, adopted child, adoptive parent, stepparent, stepchild, stepbrother, stepsister, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, grandparent, grandchild, aunt, uncle, niece, nephew, or first cousin.

(78) "Founded Report" means the determination by the Department or Law Enforcement Authority (LEA), based on the evidence that there is reasonable cause to believe that conduct in violation of the child abuse statutes or rules has occurred and such conduct is attributable to the person alleged to have engaged in the conduct.

(79) "Functional Needs Assessment" means the comprehensive assessment or reassessment appropriate to the specific program in which an individual is enrolled that documents physical, mental, and social functioning.

(a) A functional needs assessment is:

(A) For community living supports as described in OAR chapter 411, division 450, the "functional needs assessment" as defined in OAR 411-450-0020.

(B) For 24-hour residential programs settings as described in OAR chapter 411, division 325, the Supports Intensity Scale, Adult Needs Assessment, or Children's Needs Assessment.

(C) For supported living programs as described in OAR chapter 411, division 328, the Adult Needs Assessment.

(D) For adult foster homes as described in OAR chapter 411, division 360, the Support Needs Assessment Profile, Adult Needs Assessment, or Children's Needs Assessment.

(b) The functional needs assessments are maintained by the Department at: <http://www.dhs.state.or.us/spd/tools/dd/cm/>.

(c) A printed copy of the assessment tools may be obtained by calling (503) 945-6398 or writing the Department of Human Services, Developmental Disabilities, ATTN: Rules Coordinator, 500 Summer Street NE, E-2, Salem, OR 97301.

(80) "General Business Provider" means an organization or entity selected by an individual or their legal representative and paid with Department funds that:

(a) Is primarily in business to provide the service chosen by the individual or their legal representative to the general public.

(b) Provides services for the individual through employees, contractors, or volunteers.

(c) Receives compensation to recruit, supervise, and pay the person who actually provides support for the individual.

(81) "Good Cause" means an excusable mistake, surprise, excusable neglect (which may include neglect due to a significant cognitive or health issue), circumstances beyond the control of a claimant, reasonable reliance on the statement of Department staff or an adverse provider relating to procedural requirements, [or due to] fraud, misrepresentation, or other misconduct of the Department or a party adverse to a claimant.

(82) "Guardian" means the parent for an individual under the age of 18, or a person or agency appointed and authorized by a court to make decisions about services for an individual.

(83) "Health Care Provider" means the person or health care facility licensed, certified, or otherwise authorized or permitted by Oregon law to administer health care in the ordinary course of business or practice of a profession. Examples of a health care provider include, but are not limited to, a registered nurse (RN), nurse practitioner (NP), licensed practical nurse (LPN), medical doctor (MD), osteopathic physician (DO), chiropractor, respiratory therapist (RT), physical therapist (PT), physician assistant (PA), dentist, or occupational therapist (OT).

(84) "Health Care Representative" means:

(a) A health care representative as defined in ORS 127.505; or

(b) A person who has authority to make health care decisions for an individual under the provisions of OAR chapter 411, division 365.

(85) "Hearing" means a contested case hearing subject to OAR 137-003-0501 to 137-003-0700, which results in a final order.

(86) "Home" means the primary residence for an individual that is not under contract with the Department to provide services certified as a foster home for children under OAR chapter 411, division 346, licensed as a foster home for adults under OAR chapter 411, division 360, or a licensed or certified residential care facility, assisted living facility, nursing facility, or other residential setting.

(a) A home for a child may include a foster home funded by Child Welfare.

(b) A foster home funded by Child Welfare is considered a provider owned, controlled, or operated residential setting.

(87) "Home and Community-Based Services" are services provided in the home or community of an individual.

(a) Home and community-based services are authorized under the following Medicaid authorities:

(A) 1915(c) - HCBS Waivers.

(B) 1915(i) - State Plan HCBS.

(C) 1915(k) - Community First Choice (K State Plan Option).

(b) Home and community-based services are delivered through the following program areas:

(A) Department of Human Services, Aging and People with Disabilities.

(B) Department of Human Services, Office of Developmental Disabilities Services.

(C) Oregon Health Authority.

(c) Home and community-based services may include alternative resources specifically authorized as home and community-based by the Department or Authority.

(88) "Home and Community-Based Setting" means a physical location meeting the qualities of OAR 411-004-0020 where an individual receives home and community-based services.

(89) "Hospital Level of Care" means a child:

(a) Has a documented medical condition and demonstrates the need for active treatment as assessed by the Clinical Criteria.

(b) The medical condition requires the care and treatment of services normally provided in an acute medical hospital.

(90) "IADL" means "instrumental activities of daily living".

(91) "ICF/ID" means "Intermediate Care Facility for Individuals with Intellectual Disabilities".

(92) "ICF/IID Level of Care" means an individual meets the following institutional level of care for an intermediate care facility for individuals with intellectual disabilities:

(a) The individual has an intellectual disability or a developmental disability as defined in this rule and meets the eligibility criteria in OAR 411-320-0080 for developmental disabilities services.

(b) The individual has a significant impairment in one or more areas of adaptive behavior as determined in OAR 411-320-0080.

(93) "IEP" means "Individualized Education Program".

(94) "Incident Report" means the written report of any injury, accident, act of physical aggression, use of protective physical intervention, or unusual incident involving an individual.

(95) "Independence" means the extent to which an individual exerts control and choice over their own life.

(96) "Independent Provider" means:

(a) A personal support worker; or

(b) An independent contractor delivering services including nursing services, discovery, job development, or behavior consultation.

(97) "Individual" means a child, young adult, or an adult, applying for, or determined eligible for, Department-funded developmental disabilities services.

(98) "Individualized Education Program" means the written plan of instructional goals and objectives developed in conference with an individual, their parent or legal representative (as applicable), teacher, and a representative of the public school district.

(99) "Individually-Based Limitations" means any limitation to the qualities outlined in OAR 411-004-0020(2)(c) to (2)(j), due to health and safety risks. An individually-based limitation is based on specific assessed need and only implemented with the informed consent of the individual or, as applicable, their legal representative, as described in OAR 411-004-0040.

(100) "Individual Support Plan" includes the written details of the supports, activities, and resources required for an individual to achieve and maintain personal outcomes and health and safety. The ISP is developed at least annually to reflect decisions and agreements made during a person-

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centered process of planning and information gathering. The ISP reflects services and supports that are important to meet the needs of the individual identified through a functional needs assessment as well as the preference of the individual for providers and the delivery and frequency of services and supports. The ISP is the plan of care for Medicaid purposes and reflects whether services are provided through a waiver, the Community First Choice state plan, natural supports, or alternative resources.

(101) "In-Home Expenditure Guidelines" mean the guidelines published by the Department that describe allowable uses for Department funds.

(a) The Department incorporates Version 6.0 of the In-home Expenditure Guidelines into these rules by this reference. The In-home Expenditure Guidelines are maintained by the Department at: <http://www.dhs.state.or.us/spd/tools/dd/cm/In-Home-Expenditure-Guidelines.pdf>.

(b) A printed copy may be obtained by calling (503) 945-6398 or writing the Department of Human Services, Developmental Disabilities, ATTN: Rules Coordinator, 500 Summer Street NE, E-2, Salem, Oregon 97301.

(102) "Instrumental Activities of Daily Living" are the activities other than activities of daily living required to continue independent living as described in the Community First Choice state plan.

(103) "Intake" means the activity of completing the DD Intake Form (APD 0552) and necessary releases of information prior to the submission of a completed application to the CDDP.

(104) "Integrated Employment Setting" means employment at a location where an employee interacts with other persons who are not individuals with disabilities (not including supervisory personnel or individuals who are providing services to such employee) to the same extent that individuals who are not individuals with disabilities and who are in comparable positions interact with other persons; and that, as appropriate, presents opportunities for advancement that are similar to those for other employees who are not individuals with disabilities and who have similar positions. Employment in an Integrated Employment Setting cannot be facility-based work in a Sheltered Workshop, and cannot be non-work activities such as day support activities.

(105) "Integration" as defined in ORS 427.005 means:

(a) Use by individuals receiving developmental disabilities services of the same community resources used by and available to other people.

(b) Participation by individuals receiving developmental disabilities services in the same community activities in which people without disabilities participate, together with regular contact with people without disabilities.

(c) Residence by individuals receiving developmental disabilities services in homes or in home-like settings that are in proximity to community resources, together with regular contact with people without disabilities in their community.

(106) "Intellectual Disability" means significantly sub-average general intellectual functioning defined as full scale intelligence quotients (IQs) 70 and under as measured by a qualified professional and existing concurrently with significant impairment in adaptive behavior directly related to an intellectual disability as described in OAR 411-320-0080 that is manifested during the developmental period prior to 18 years of age. Individuals with a valid full scale IQ of 71-75 may be considered to have an intellectual disability if there is also significant impairment in adaptive behavior as diagnosed and measured by a licensed clinical or school psychologist as described in OAR 411-320-0080.

(107) "Involuntary Reduction" means a provider has made the decision to reduce services provided to an individual without prior approval from the individual.

(108) "Involuntary Transfer" means a provider has made the decision to transfer an individual without prior approval from the individual.

(109) "ISP" means "Individual Support Plan".

(110) "ISP Team" means a team composed of an individual receiving services and their legal or designated representative (as applicable), case manager, and others chosen by the individual, or as applicable their legal representative, such as providers and family members.

(111) "Legal Representative" means a person who has the legal authority to act for an individual. The legal representative only has authority to act within the scope and limits of their authority as designated by a court or other agreement. A legal representative acting outside of their authority or scope must meet the definition of designated representative.

(a) For an individual under the age of 18, the legal representative is the parent, unless a court appoints another person or agency to act as the guardian.

(b) For an individual 18 years of age or older, the legal representative is the guardian appointed by a court order or the legally designated health care representative, where the court order or the written designation provides authority for the appointed or designated person to make the decisions indicated where the term "legal representative" is used.

(112) "MAGI" means "Modified Adjusted Gross Income". "MAGI" is further defined in OAR 410-200-0015.

(113) "Mandatory Reporter":

(a) Means:

(A) Any public or private official as defined in ORS 419B.005 who comes in contact with a child with or without an intellectual or developmental disability and has reasonable cause to believe the child has suffered abuse, or comes in contact with any person whom the public or private official has reasonable cause to believe abused the child, regardless of whether or not the knowledge of the abuse was gained in the official capacity of the public or private official.

(B) Any public or private official as defined in ORS 430.735 who, while acting in an official capacity, comes in contact with an adult with an intellectual or developmental disability or mental illness and has reasonable cause to believe the adult has suffered abuse, or comes in contact with any person whom the public or private official has reasonable cause to believe abused the adult.

(C) Any public or private official as defined in ORS 124.050 who comes in contact with an older adult, age 65 and older, and has reasonable cause to believe the older adult has suffered abuse, or comes in contact with any person whom the public or private official has reasonable cause to believe abused the older adult.

(D) Any public or private official as defined in ORS 441.630 who comes in contact with a resident of a long-term care facility as defined in ORS 442.015 and has reasonable cause to believe the resident has suffered abuse, or comes in contact with any person whom the public or private official has reasonable cause to believe abused the resident.

(b) Nothing contained in ORS 40.225 to 40.295 affects the duty to report imposed by this definition, except that a psychiatrist, psychologist, clergy, attorney, or guardian ad litem appointed under ORS 419B.231 is not required to report if the communication is privileged under ORS 40.225 to 40.295.

(114) "Mechanical Restraint" means any mechanical device, material, object, or equipment attached or adjacent to the body of an individual that the individual cannot easily remove or easily negotiate around that restricts freedom of movement or access to the body of the individual. Mechanical restraint is not:

(a) The use of acceptable infant safety products.

(b) The use of car safety systems, consistent with applicable state law for people without disabilities.

(c) Safeguarding equipment when ordered by a physician or health care provider and approved by the ISP team.

(115) "Medicaid Agency Identification Number" means the numeric identifier assigned by the Department to a provider following the enrollment of the provider as described in OAR chapter 411, division 370.

(116) "Medicaid Performing Provider Number" means the numeric identifier assigned by the Department to an entity or person following the enrollment of the entity or person to deliver Medicaid funded services as described in OAR chapter 411, division 370. The Medicaid Performing Provider Number is used by the rendering provider for identification and billing purposes associated with service authorizations and payments.

(117) "Medicaid Title XIX Benefit Package" means only the Medicaid benefit packages provided under OAR 410-120-1210(4)(a) and (b), excluding individuals receiving CHIP Title XXI benefits.

(118) "Medication" means any drug, chemical, compound, suspension, or preparation in suitable form for use as a curative or remedial substance taken either internally or externally by any person.

(119) "Monitoring" means the periodic review of the implementation of services and supports identified in an Individual Support Plan or Annual Plan, and the quality of services delivered by other organizations.

(120) "Natural Support" means:

(a) For a child, the parental responsibilities for the child and the voluntary resources available to the child from their relatives, friends, neighbors, and the community, that are not paid for by the Department.

(b) For an adult, the voluntary resources available to an adult from their relatives, friends, significant others, neighbors, roommates, and the community, that are not paid for by the Department.

(121) "Notice of Involuntary Reduction, Transfer, or Exit" means form APD 0719DD. This form is part of the AFH/DD Mandatory Written Notice of Exit or Transfer.

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(122) “Notification of Planned Action” means form APD 0947. The Notification of Planned Action is the written decision notice issued to an individual in the event that a developmental disabilities service is denied, reduced, suspended, or terminated.

(123) “Nurse” means a person who holds a current license from the Oregon Board of Nursing as a registered nurse or licensed practical nurse pursuant to ORS chapter 678.

(124) “Nursing Facility Level of Care” means a child:

(a) Has a documented medical condition that demonstrates the need for active treatment as assessed by the Clinical Criteria as defined in OAR 411-300-0110.

(b) The medical condition requires the care and treatment of services normally provided in a nursing facility.

(125) “Nursing Service Plan” means the plan that is developed by a registered nurse based on an initial nursing assessment, reassessment, or an update made to a nursing assessment as the result of a monitoring visit.

(a) The Nursing Service Plan is specific to an individual and identifies their diagnoses and health needs and any service coordination, teaching, or delegation activities.

(b) The Nursing Service Plan is separate from the ISP as well as any service plans developed by other health professionals.

(126) “Nursing Tasks” mean the care or services that require the education and training of a licensed professional nurse to perform. Nursing tasks may be delegated.

(127) “OAAPI” means the Department of Human Services, Office of Adult Abuse Prevention and Investigation.

(128) “OAH” means “Office of Administrative Hearings”.

(129) “OCCS” means “Office of Client and Community Services”.

(130) “OCCS Medical Programs” means the medical programs under OCCS including, but not limited to, the MAGI Medicaid and CHIP programs described in OAR 410-200-0305 to 410-200-0510. “OCCS Medical Programs” is further defined in OAR 410-200-0015.

(131) “ODDS” means the Department of Human Services, Office of Developmental Disabilities Services.

(132) “Office of Client and Community Services” means the part of the Health Systems Division under the Oregon Health Authority.

(133) “OIS” means “Oregon Intervention System”.

(134) “OHA” means “Oregon Health Authority”.

(135) “OHP” means “Oregon Health Plan”.

(136) “Older Adult” means an adult at least 65 years of age.

(137) “Oregon Health Authority” means the agency established in ORS chapter 413 that administers the funds for Titles XIX and XXI of the Social Security Act. The Oregon Health Authority is the single state agency for the administration of the medical assistance program under ORS chapter 414.

(138) “Oregon Intervention System” is the system of providing training of elements of positive behavior support and non-aversive behavior intervention. The Oregon Intervention System uses principles of pro-active support and describes the approved protective physical intervention techniques used in an emergency to maintain health and safety.

(139) “Oregon Supplemental Income Program-Medical” is Oregon Medicaid insurance coverage for individuals who meet the eligibility criteria described in OAR chapter 461.

(140) “OSIPM” means “Oregon Supplemental Income Program-Medical”.

(141) “Parent” means the biological parent, adoptive parent, or stepparent of a child. Unless otherwise specified, references to parent also include a person chosen by the parent or guardian to serve as their designated representative in connection with the provision of ODDS-funded supports.

(142) “Person-Centered Planning”:

(a) Means a timely and formal or informal process driven by an individual, includes people chosen by the individual, ensures the individual directs the process to the maximum extent possible, and enables the individual to make informed choices and decisions consistent with 42 CFR 441.540.

(b) Person-centered planning includes gathering and organizing information to reflect what is important to and for the individual and to help:

(A) Determine and describe choices about personal goals, activities, services, providers, service settings, risks, and lifestyle preferences.

(B) Design strategies and networks of support to achieve goals and a preferred lifestyle using individual strengths, relationships, and resources.

(C) Identify, use, and strengthen naturally occurring opportunities for support at home and in the community.

(c) The methods for gathering information vary, but all are consistent with the cultural considerations, needs, and preferences of the individual.

(143) “Personal Agent” means a person who:

(a) Is a case manager for the provision of case management services.

(b) Is the person-centered plan coordinator for an individual as defined in the Community First Choice state plan.

(c) Works directly with individuals, and if applicable their legal or designated representatives and families, to provide or arrange for support services.

(d) Meets the qualifications set forth in OAR 411-415-0040.

(144) “Personal Support Worker”:

(a) Means a person:

(A) Who has a Medicaid provider number.

(B) Who is hired or selected by an individual or their representative.

(C) Who receives money from the Department for the purpose of delivering services to the individual in the home or community of the individual.

(D) Whose compensation for providing services is provided in whole or in part through the Department.

(b) This definition of personal support worker is intended to be interpreted consistently with ORS 410.600.

(145) “Plan Year” means 12 consecutive months from the start date specified on an authorized ISP or Annual Plan.

(146) “Positive Behavioral Theory and Practice” means a proactive approach to behavior and behavior interventions that:

(a) Emphasizes the development of functional alternative behavior and positive behavior intervention.

(b) Uses the least intrusive intervention possible.

(c) Ensures that abusive or demeaning interventions are never used.

(d) Evaluates the effectiveness of behavior interventions based on objective data.

(147) “Prescription Medication” means any medication that requires a prescription from a physician before the medication may be obtained from a pharmacist.

(148) “Primary Caregiver” means:

(a) For a child, their parent, guardian, relative, or other non-paid parental figure that normally provides their direct care. In this context, the term parent or guardian may include a designated representative.

(b) For an adult, the person identified in an Individual Support Plan as providing the majority of services and support for an individual in the home of the individual.

(149) “Primary Care Provider” means the health care provider who delivers day-to-day comprehensive health care. Typically, the primary care provider acts as the first contact and principal point of continuing care for an individual within the health care system and coordinates other specialist care the individual may need.

(150) “Private Duty Nursing” means the State Plan nursing services described in OAR chapter 410, division 132 and OAR 411-300-0150 that are determined medically necessary to support a child or young adult in their home.

(151) “PRN (pro re nata)” means the administration of a medication to an individual on an ‘as needed’ basis.

(152) “Productivity” as defined in ORS 427.005 means regular engagement in income-producing work, preferable competitive employment with supports and accommodations to the extent necessary, by an individual that is measured through improvements in income level, employment status, or job advancement or engagement by an individual in work contributing to a household or community.

(153) “Progress Note” means a written record of an action taken by a provider in the delivery of a service to support an individual. A progress note may also be a recording of information related to services, support needs, or circumstances of the individual that is necessary for the effective delivery of services.

(154) “Protection” means the necessary actions offered to an individual, as soon as possible, to prevent subsequent abuse or exploitation of the individual, to prevent self-destructive acts, or to safeguard the person, property, and funds of the individual.

(155) “Protective Physical Interventions” are safety procedures utilized with an individual that assists in keeping the individual protected from harming themselves or others through supportive measures, as taught in the Oregon Intervention System.

(156) “Protective Services” mean the necessary actions offered to an individual, as soon as possible, to prevent subsequent abuse or exploitation of the individual, to prevent self-destructive acts, or to safeguard the person, property, and funds of the individual.

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(157) "Provider" means a person, agency, organization, or business, approved by the Department or other appropriate agency and selected by an individual, or their designated or legal representative, to provide Department-funded services. The provider for a child may not also be the primary caregiver of the child.

(158) "Provider Agency" means a public or private community organization that delivers developmental disabilities services and is certified and endorsed by the Department under the rules in OAR chapter 411, division 323 or division 450, that:

(a) Is primarily in business to provide supports for individuals eligible to receive developmental disabilities.

(b) Provides supports for individuals through employees, contractors, or volunteers.

(c) Receives compensation to recruit, supervise, and pay the people who actually provides support for the individuals.

(159) "Provider Owned, Controlled, or Operated Setting" means:

(a) The provider is responsible for delivering home and community-based services to individuals in the setting and the provider:

(A) Owns the setting;

(B) Leases or co-leases the residential setting; or

(C) If the provider has a direct or indirect financial relationship with the property owner, the setting is presumed to be provider owned, controlled, or operated.

(b) A setting is not provider owned, controlled, or operated if the individual leases directly from a third party that has no direct or indirect financial relationship with the provider.

(c) When an individual receives services in the home of a family member, the home is not considered provider owned, controlled, or operated.

(160) "Psychotropic Medication" means a medication the prescribed intent of which is to affect or alter thought processes, mood, or behavior including, but not limited to, anti-psychotic, antidepressant, anxiolytic (anti-anxiety), and behavior medications. The classification of a medication depends upon its stated, intended effect when prescribed.

(161) "Quality Assurance" means a systematic procedure for assessing the effectiveness, efficiency, and appropriateness of services.

(162) "Relief Care" means the services provided on a periodic basis for the relief of, or due to the temporary absence of, a person normally available to provide supports to an individual. A unit of service of relief care is 24 hours. Relief care is available through the Community First Choice state plan.

(163) "Request for Service" means:

(a) Submission of a completed application for developmental disabilities services as described in OAR 411-320-0080;

(b) A written request for a new developmental disabilities service or provider; or

(c) A written request for a change in a developmental disabilities service currently provided.

(164) "Residency Agreement" means the written and legally enforceable agreement between a residential provider and an individual or their legal or designated representative, when the individual is receiving home and community-based services in a provider owned, controlled, or operated residential setting. The Residency Agreement identifies the rights and responsibilities of the individual and the residential provider and provides the individual protection from eviction substantially equivalent to landlord-tenant laws.

(165) "Residential Programs" means services delivered by the following:

(a) 24-hour residential programs described in OAR chapter 411, division 325.

(b) Adult foster homes described in OAR chapter 411, division 360.

(c) Supported living programs described in OAR chapter 411, division 328.

(d) Foster homes for children described in OAR chapter 411, division 346.

(166) "Residential Settings" means the location where individuals, who receive services from a residential program, live.

(167) "Restraint" means any physical hold, device, or chemical substance that restricts, or is meant to restrict, the movement or normal functioning of an individual.

(168) "Review" means a request for reconsideration of a decision.

(169) "Safeguarding Equipment" means a device used to provide support to an individual for the purpose of achieving and maintaining functional body position, proper balance, and protecting the individual from injury or symptoms of existing medical conditions.

(170) "School Aged" means the age at which an individual is old enough to attend kindergarten through high school.

(171) "Self-Administration of Medication" means an individual manages and takes their own medication, identifies their own medication and the times and methods of administration, places the medication internally in or externally on their own body without staff assistance upon written order of a physician, and safely maintains the medication without supervision.

(172) "Self-Determination" means a philosophy and process by which individuals with intellectual or developmental disabilities are empowered to gain control over the selection of services and supports that meet their needs. The basic principles of self-determination are:

(a) Freedom. The ability for an individual, together with freely-chosen family and friends, to plan a life with necessary services and supports rather than purchasing a predefined program.

(b) Authority. The ability for an individual, with the help of a social support network if needed, to control resources in order to purchase services and supports.

(c) Autonomy. The arranging of resources and personnel, both formal and informal, that assists an individual to live a life in a community rich in community affiliations.

(d) Responsibility. The acceptance of a valued role of an individual in the community through competitive employment, organizational affiliations, personal development, and general caring for others in the community, as well as accountability for spending public dollars in ways that are life-enhancing for the individual.

(173) "Self-Direction" means an individual, or as applicable their legal or designated representative, has decision-making authority over services and takes direct responsibility for managing services with the assistance of a system of available supports that promotes personal choice and control over the delivery of waiver and state plan services.

(174) "Sensory Impairment" means loss or impairment of sight or hearing from any cause, including involvement of the brain.

(175) "Service Agreement":

(a) Means the component of an ISP that is the written agreement for a particular provider that describes at a minimum, the following:

(A) The services authorized in an ISP to be delivered by the provider.

(B) Hours, rates, location of services, and expected outcomes of the services.

(C) Any specific individual health, safety, and emergency procedures that may be required, including action to be taken if an individual is unable to provide for their own safety and the individual is missing while in the community.

(b) For employed personal support workers, the Service Agreement serves as the written job description for Oregon Home Care Commission purposes.

(c) For non-personal support worker providers, the ISP serves as the Service Agreement, when signed by the provider.

(176) "Service Element" means a funding stream to fund developmental disabilities programs and services.

(177) "Service Record" means the combined information related to an individual.

(178) "Services Coordinator" means an employee of the Department, CDDP, or other agency that contracts with the county or Department, who provides case management services. A services coordinator acts as the proponent for individuals with intellectual or developmental disabilities and is the person-centered plan coordinator for the individual as defined in the Community First Choice state plan.

(179) "Setting" means the community-based location where services are delivered.

(180) "Sheltered Workshop" means a facility in which individuals with intellectual or developmental disabilities are congregated for the purpose of receiving employment services and performing work tasks for pay at the facility. A sheltered workshop primarily employs individuals with intellectual and developmental disabilities, or other disabilities, with the exception of service support staff. A sheltered workshop is a fixed site that is owned, operated, or controlled by a provider, where an individual has few or no opportunities to interact with individuals who do not have disabilities, not including paid support staff. A sheltered workshop is not small group employment in an integrated employment setting, and is not otherwise an integrated employment setting.

(181) "Skills Training" means the hourly service intended to increase the independence of an individual through training, coaching, and prompting the individual to accomplish ADL, IADL, and health-related tasks. Skills training is available through the Community First Choice state plan.

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(182) "Social Benefit" means that developmental disabilities services are intended to assist an individual to function in society on a level comparable to that of a person who does not experience a developmental disability.

(a) Social benefits may not:

(A) Duplicate benefits and services otherwise available to a person regardless of disability.

(B) Replace normal parental responsibilities for the services, education, recreation, and general supervision of a child.

(C) Provide financial assistance with food, clothing, shelter, and laundry needs common to any person, except as described in OAR chapter 411, division 435 for transition services.

(D) Replace other governmental or community services available to an individual.

(b) Assistance provided as a social benefit is reimbursement for an expense previously authorized in an ISP.

(c) Assistance provided as a social benefit may not exceed the actual cost of the support required by an individual to be supported in the home of the individual.

(183) "Staff" means a paid employee who is responsible for providing services and supports to an individual and whose wages are paid in part or in full with funds sub-contracted with a Community Developmental Disabilities Program, Brokerage, or contracted directly through the Department.

(184) "Substantiated" means an abuse investigation has been completed by the Department, or the designee of the Department, and the preponderance of the evidence establishes the abuse occurred.

(185) "Support" means:

(a) For a child, the assistance the child and their family requires, solely because of the effects of a condition that makes the child eligible for developmental disabilities, to maintain or increase the age-appropriate independence of the child, achieve age-appropriate community presence and participation of the child, and to maintain the child in the family home. Support is subject to change with time and circumstances.

(b) For an adult, the assistance the adult individual requires, solely because of the effects of an intellectual or developmental disability, to maintain or increase independence, achieve community presence and participation, and improve productivity. Support is subject to change with time and circumstances.

(186) "Transfer" means movement of an individual from one service setting to a different service setting, administered or operated by the same provider.

(187) "Transition-Age" means:

(a) Not older than 24 years of age.

(b) Not younger than 14 years of age. With respect to Vocational Rehabilitation Services, persons who are under 16 years of age may receive employment services with Department approval. With respect to ODDS, persons who are under 18 years of age may receive employment services with Department approval.

(188) "Unacceptable Background Check" means an administrative process that produces information related to the background of a person that precludes the person from being an independent provider for one or more of the following reasons:

(a) Under OAR 407-007-0275, the person applying to be an independent provider has been found ineligible due to ORS 443.004.

(b) Under OAR 407-007-0275, the person was enrolled as an independent provider for the first time, or after any break in enrollment, after July 28, 2009 and has been found ineligible due to ORS 443.004.

(c) A background check and fitness determination has been conducted resulting in a "denied" status as defined in OAR 407-007-0010.

(189) "Unusual Incident" means any incident involving an individual that includes serious illness or an accident, death, injury or illness requiring inpatient or emergency hospitalization, a suicide attempt, when an individual contacts the police or is contacted by the police, a fire requiring the services of a fire department, an act of physical aggression, or any incident requiring an abuse investigation.

(190) "Variance" means the temporary exemption from a regulation or provision of the rules granted by the Department upon written application.

(191) "Volunteer" means any person assisting a provider without pay to support the services and supports provided to an individual.

(192) "Workday" means 12:00 AM through 11:59 PM.

(193) "Working Age" means an individual aged 21 to 60. Working age also includes an individual 18 to 21 if the individual has left school.

(194) "Workweek" means 12:00 AM Sunday through 11:59 PM Saturday.

(195) "Written Outcome" means the written response from the Department or the local program to a complaint following a review of the complaint.

(196) "Young Adult" means a young individual aged 18 through 20.

Stat. Auth.: ORS 409.050

Stats. Implemented: ORS 409.050

Hist.: APD 22-2014(Temp), f. & cert. ef. 7-1-14 thru 12-28-14; APD 39-2014, f. 12-26-14, cert. ef. 12-28-14; APD 40-2014, f. 12-26-14, cert. ef. 12-28-14; APD 38-2015(Temp), f. 12-31-15, cert. ef. 1-1-16 thru 6-28-16; APD 26-2016, f. & cert. ef. 6-29-16; APD 32-2016(Temp), f. 8-30-16, cert. ef. 9-1-16 thru 2-27-17; APD 5-2017, f. 2-21-17, cert. ef. 2-28-17; APD 8-2017(Temp), f. 4-14-17, cert. ef. 5-1-17 thru 10-27-17

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**Department of Human Services,
Child Welfare Programs
Chapter 413**

Rule Caption: Amending rule relating to reports of child abuse or neglect.

Adm. Order No.: CWP 4-2017

Filed with Sec. of State: 4-3-2017

Certified to be Effective: 4-3-17

Notice Publication Date: 3-1-2017

Rules Amended: 413-015-0210

Subject: The Department of Human Services, Office of Child Welfare Programs, is amending OAR 413-015-0210 relating to determining the Department's response to reports of child abuse. The rule is amended to state that a CPS (Child Protective Services) assessment is required on a report of child abuse or neglect if the report would be the fourth or greater consecutive report received regarding the same family and there is at least one child in the home under the age of five. Any exception to this requirement must be approved by the CPS program manager or their designee. This rule was amended by temporary rule on October 5, 2016.

Rules Coordinator: Amie Fender—(503) 945-8986

413-015-0210

Determining Department's Response and Required Time Lines for CPS Information

(1) After the screener completes screening activities required by OAR 413-015-0205, and the screener determines the information received is CPS information, the screener must determine the Department response, either CPS assessment required or close at screening. If a CPS assessment is required, the screener must then determine the time line for the Department response, either within 24 hours or within five calendar days.

(2) CPS assessment required. A CPS assessment is required if one of the following applies:

(a) The screener determines that information received constitutes a report of child abuse or neglect, as defined in ORS 419B.005, and the information indicates:

(A) The alleged perpetrator is a legal parent of the alleged child victim;

(B) The alleged perpetrator resides in the alleged child victim's home;

(C) The alleged perpetrator may have access to the alleged child victim, and the parent or caregiver may not be able or willing to protect the child; or

(D) The alleged child abuse occurred in a day care facility, or the home of a Department certified foster parent or relative caregiver.

(b) The screener determines that information received constitutes a report of child abuse or neglect as defined in ORS 419B.005 or Oregon Laws 2016, chapter 106, section 36 and the report is the responsibility of the Department as outlined in OAR 413-015-0630.

(c) The screener determines the current report would be the fourth or greater consecutive report closed at screening regarding the same family and there is at least one child in the home who is less than five years of age, unless an exception has been approved by the CPS Program Manager or their designee.

(d) A tribe or LEA requests assistance from the Department with an investigation of child abuse or neglect, and a CPS supervisor agrees that assistance from the Department is appropriate.

(3) Response Time Lines. If the screener determines that a CPS assessment is required, the screener must:

(a) Determine the CPS assessment response time line. The time line for the Department response refers to the amount of time between when the

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report is received at screening and when the CPS worker is required to make an initial contact. When determining the response time, the screener must take into account the location of the child, how long the child will be in that location, and access that others have to the child.

(A) Within 24 hours: This response time line is required, unless paragraph (B) of this subsection applies, when the information received constitutes a report of child abuse or neglect as defined in ORS 419B.005 or, when applicable, Oregon Laws 2016, chapter 106, section 36.

(B) Within five calendar days: This response time line must only be used when the screener can clearly document how the information indicates the child's safety will not be compromised by not responding within 24 hours and whether an intentional delay to allow for a planned response is less likely to compromise the safety of the child.

(b) Complete a screening report form immediately when a "within 24 hour" response time line is assigned or the same day when a "within five calendar days" response time is assigned, unless a CPS supervisor grants an extension as provided in OAR 413-015-0220.

(c) Refer the CPS assessment to the appropriate county as described in OAR 413-015-0213.

(4) Close at Screening: A report will be closed at screening if one of the following subsections applies:

(a) The screener determines that information received:

(A) Does not constitute a report of child abuse or neglect, as defined in ORS 419B.005 or, when applicable, Oregon Laws 2016, chapter 106, section 36, and the screener determines that the information describes behaviors, conditions, or circumstances that pose a risk to a child;

(B) Is third party child abuse or neglect that does not require a CPS assessment because the alleged perpetrator does not have access to the child, and the parent or caregiver is willing and able to protect the child; or

(C) Is a report that there are no children in the home and:

(i) An expectant mother is abusing substances during her pregnancy;

(ii) An expectant mother or a household member has had his or her parental rights to another child terminated; or

(iii) An expectant mother or a household member is known to have conditions or circumstances that would endanger a newborn child.

(D) Is information from a Department caseworker that a child or young adult on an open Department case is identified as a sex trafficking victim and the report does not meet the criteria in OAR 413-015-0210 to assign.

(b) When a report is received, but the screener, after extensive efforts, is unable to obtain sufficient information to locate the child. Name and exact address are not necessary if a location is obtained.

(5) If a report is closed at screening, the screener must:

(a) Document the current information that supports the decision to close the report at screening.

(b) Decide whether other services are appropriate and make service or resource referrals, as necessary. Document what service or resource referrals are made, if any.

(c) Make diligent efforts to contact the reporter if contact information was provided and when the reporter was not informed of the following information prior to completing the screening report form.

(A) Whether contact with the child was made;

(B) Whether the Department determined child abuse occurred; and

(C) Whether services will be provided.

(d) Complete a screening report form no later than the next working day after the screening determination is made, unless a CPS supervisor grants an extension, as provided in OAR 413-015-0220.

Stat. Auth.: ORS 418.005, OL 2016, ch 106

Stats. Implemented: ORS 418.005, OL 2016, ch 106

Hist.: CWP 25-2003, f. & cert. ef. 7-1-03; CWP 14-2004, f. 7-30-04, cert. ef. 8-1-04; CWP 4-2005, f. & cert. ef. 2-1-05; CWP 16-2005, f. & cert. ef. 12-1-05; CWP 3-2007, f. & cert. ef. 3-20-07; CWP 25-2007(Temp), f. 12-31-07, cert. ef. 1-1-08 thru 6-27-08; CWP 7-2008, f. 6-27-08, cert. ef. 6-28-08; CWP 10-2014, f. 5-20-14, cert. ef. 5-27-14; CWP 11-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; CWP 17-2016, f. & cert. ef. 9-29-16; CWP 19-2016(Temp), f. & cert. ef. 10-5-16 thru 4-2-17; CWP 4-2017, f. & cert. ef. 4-3-17

Department of Human Services, Self-Sufficiency Programs Chapter 461

Rule Caption: Amending rules relating to public and medical assistance programs

Adm. Order No.: SSP 8-2017

Filed with Sec. of State: 3-17-2017

Certified to be Effective: 4-1-17

Notice Publication Date: 2-1-2017

Rules Amended: 461-120-0330, 461-145-0530

Subject: OAR 461-120-0330 about the requirement to pursue assets is being amended to clarify the manner in which individuals must begin drawing from retirement or pension accounts when eligible to do so. The previous amendment to this rule (adopted on July 1, 2016) was not specific enough and could be interpreted to allow individuals to take \$1.00 per month or quarter payments, for example.

OAR 461-145-0530 about tax refunds is being amended in its entirety to state how tax refunds are treated (as income or a resource) when determining financial eligibility for public and medical assistance programs depending on the type of refund and date of receipt.

Rules Coordinator: Robert Trachtenberg—(503) 947-5290

461-120-0330

Requirement to Pursue Assets

(1) In all programs, except the ERDC and SNAP programs, an individual must make a good faith effort to obtain any asset (other than support and medical coverage, which are covered in OAR 461-120-0340 and 461-120-0345, respectively) to which the individual has a legal right or claim, except as follows:

(a) A parent (see OAR 461-001-0000) or caretaker relative (see OAR 461-001-0000) who is exempt from participation in the JOBS program is not required to apply for unemployment insurance benefits.

(b) Except as specified by law, an individual applying for or receiving any program benefits from the Department is not required to apply for other programs it administers or for supplemental security income (SSI).

(c) An individual applying for the EA program is required to pursue, obtain, and use an asset only if the asset can be made available in time to meet the emergent need.

(d) An individual is not required to borrow money.

(e) An individual is not required to make a good faith effort to obtain any asset if the individual can show good cause for not doing so. Good cause means a circumstance beyond the ability of the individual to control.

(2) In all programs except the ERDC, OSIP, OSIPM, QMB, and SNAP programs:

(a) The effect of failing to comply with this rule is that everyone in the filing group is ineligible. In addition, when a REF, SFPSS, or TANF program payment ends due to the penalty described in this subsection, eligibility for and the level of SNAP benefits are determined as if the individual were receiving benefits without the effects of this rule.

(b) The penalty provided by subsection (2)(a) of this rule is effective until all members of the filing group comply with the requirements of section (1) of this rule.

(3) In the OSIP, OSIPM, and QMB programs:

(a) The requirement to pursue assets includes individuals in the benefit group (see OAR 461-110-0750) applying for monthly or periodic payments from a retirement or pension plan (see OAR 461-145-0380) if the individual is eligible to apply under the terms of the plan.

(A) When an individual can choose a lump sum or monthly or periodic payments, the individual must choose monthly or periodic payments; and if the individual can choose between monthly or periodic payments, the individual must choose monthly payments.

(B) The individual must select the option that:

(i) Provides payments commencing on the earliest possible date; and

(ii) Completes payments within the actuarial life expectancy, as published in the Periodic Life Table of the Chief Actuary of the Social Security Administration of the individual.

(C) Where an application has been made for a lump sum withdrawal of the monies on which a potential annuity is based and the benefit source permits the individual to change the individual's decision and apply for the annuity, the individual must pursue the change to be eligible for medical benefits. If the benefit source does not permit such a change, accept the individual's word that the decision is irreversible, absent evidence to the contrary.

(D) An individual is not required to file when only a lump sum payment is available.

(b) An individual is ineligible for benefits if the individual fails to comply with the requirements of this rule.

(c) The penalty provided by section (3)(b) of this rule is effective until the individual complies with the requirements of section (1) of this rule and subsection (a) of this section.

Stat. Auth.: ORS 411.060, 411.070, 411.087, 411.404, 411.706, 411.816, 412.006, 412.014, 412.024, 412.049, 412.124, 414.231

Stats. Implemented: ORS 411.060, 411.070, 411.087, 411.404, 411.706, 411.816, 412.006, 412.014, 412.024, 412.049, 412.124, 414.231

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 20-1990, f. 8-17-90, cert. ef. 9-1-90; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 2-1992, f. 1-30-92, cert. ef. 2-1-92; AFS 8-1992, f.

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& cert. ef. 4-1-92; AFS 20-1992, f. 7-31-92, cert. ef. 8-1-92; AFS 28-1992, f. & cert. ef. 10-1-92; AFS 12-1993, f. & cert. ef. 7-1-93; AFS 30-1996, f. & cert. ef. 9-23-96; AFS 17-1998, f. & cert. ef. 10-1-98; AFS 1-2000, f. 1-13-00, cert. ef. 2-1-00; AFS 19-2001, f. 8-31-01, cert. ef. 9-1-01; AFS 5-2002, f. & cert. ef. 4-1-02; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 17-2008, f. & cert. ef. 7-1-08; SSP 9-2012, f. 3-29-12, cert. ef. 4-1-12; SSP 37-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 24-2016, f. 6-29-16, cert. ef. 7-1-16; SSP 8-2017, f. 3-17-17, cert. ef. 4-1-17

461-145-0530

Tax Refund

(1) Federal income tax refunds:

(a) If received on or after January 1, 2010, are excluded from income and resources in the month of receipt and then for 12 full months starting with the month following the month of receipt of the refund or payment. All funds remaining after the 12-month period are counted as a resource.

(b) If received before January 1, 2010, are counted as a resource.

(2) State tax refunds and property tax refunds, including Elderly Rental Assistance (ERA):

(a) In all programs except the OSIP, OSIPM, and QMB programs, are considered lump-sum income (see OAR 461-001-0000) in the month received, and counted as a resource in the month after the month of receipt.

(b) In the OSIP, OSIPM, and QMB programs, are excluded as income in the month received. All funds remaining after the month of receipt are counted as a resource.

(3) The treatment of federal and state Earned Income Tax Credit payments is covered by OAR 461-145-0140.

Stat. Auth.: ORS 411.060, 411.070, 411.404, 411.816, 412.049
Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.816, 412.049
Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 8-1992, f. & cert. ef. 4-1-92; SSP 29-2003(Temp), f. 10-31-03, cert. ef. 11-1-03 thru 3-31-04; SSP 6-2004, f. & cert. ef. 4-1-04; SSP 8-2008, f. & cert. ef. 4-1-08; SSP 9-2008(Temp), f. & cert. ef. 4-1-08 thru 9-26-08; Administrative correction 10-21-08; SSP 4-2011(Temp), f. & cert. ef. 2-4-11 thru 8-3-11; SSP 17-2011, f. & cert. ef. 7-1-11; SSP 12-2015, f. 3-16-15, cert. ef. 4-1-15; SSP 8-2017, f. 3-17-17, cert. ef. 4-1-17

Rule Caption: Amending rule about direct provider payments for child care

Adm. Order No.: SSP 9-2017(Temp)

Filed with Sec. of State: 3-24-2017

Certified to be Effective: 3-24-17 thru 9-19-17

Notice Publication Date:

Rules Amended: 461-165-0160

Subject: OAR 461-165-0160 about direct payments to child care providers is being amended to allow licensed providers to receive reimbursement for care provided prior to their approval date so long as the client was eligible for child care services. Licensed providers have complete background checks through their licensing process.

The rule text showing the changes is available at http://www.dhs.state.or.us/policy/selfsufficiency/ar_temporary.htm.

Rules Coordinator: Robert Trachtenberg—(503) 947-5290

461-165-0160

Direct Provider Payments; General Information

(1) The Department makes payments on behalf of eligible clients to the providers they select to care for their children. The payments are made directly to the provider. To be eligible for payment, a provider must:

(a) Charge Department clients at a rate no higher than the rate charged other customers;

(b) Provide the Department his or her social security number (SSN) or IRS identification number; and

(c) Meet the requirements of OAR 461-165-0180.

(2) Payments to a client's provider are subject to each of the following limitations:

(a) A payment is made only for child care already provided.

(b) Payment is made for the amount charged to the client but may not exceed the rate authorized in OAR 461-155-0150.

(c) No payment will be authorized unless the client has designated a primary provider.

(d) No payment will be made for less than one dollar.

(e) Except as provided otherwise in subsection (f) of this section, a payment is made only for child care provided on or after the date the designated provider has met the requirements to be listed and paid through the Department.

(f) A designated child care provider who the Department approves to be listed and paid through the Department may receive payment for child care provided prior to obtaining Department approval if the provider met the other Department requirements and was licensed under OAR 414-205-

0000 to 414-205-0170, 414-350-0000 to 414-350-0405, or 414-300-0000 to 414-300-0415.

(3) In the ERDC and TANF programs, the Department may issue a payment to an eligible provider during a month for which child care is being provided to meet an unexpected need of the provider related to the care of a covered child. The payment may be made if, without the payment, continued care by the same provider would be jeopardized and the client could not immediately obtain child care from another provider.

Stat. Auth.: ORS 329A.500, 409.050, 411.060, 411.070, 411.122, 412.049
Stats. Implemented: ORS 329A.500, 409.010, 411.060, 411.070, 411.122, 412.049
Hist.: AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90; AFS 30-1990, f. 12-31-90, cert. ef. 1-1-91; AFS 9-1991, f. 3-29-91, cert. ef. 4-1-91; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 20-1992, f. 7-31-92, cert. ef. 8-1-92; AFS 12-1993, f. & cert. ef. 7-1-93; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 23-1994, f. 9-29-94, cert. ef. 10-1-94; AFS 13-1995, f. 6-29-95, cert. ef. 7-1-95; AFS 23-1995, f. 9-20-95, cert. ef. 10-1-95; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 2-1997, f. 2-27-97, cert. ef. 3-1-97; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 12-1997, f. & cert. ef. 8-25-97; AFS 11-1999, f. & cert. ef. 10-1-99; AFS 22-2000(Temp), f. 9-27-00, cert. ef. 9-27-00 thru 12-31-00; AFS 34-2000, f. 12-22-00, cert. ef. 1-1-01; SSP 7-2003, f. & cert. ef. 4-1-03; SSP 32-2010, f. & cert. ef. 10-1-10; SSP 17-2011, f. & cert. ef. 7-1-11; SSP 8-2013, f. & cert. ef. 4-1-13; SSP 9-2017(Temp), f. & cert. ef. 3-24-17 thru 9-19-17

Rule Caption: Amending rules relating to programs for refugees

Adm. Order No.: SSP 10-2017

Filed with Sec. of State: 3-24-2017

Certified to be Effective: 4-1-17

Notice Publication Date: 3-1-2017

Rules Adopted: 461-135-0915

Rules Amended: 461-101-0010, 461-110-0210, 461-110-0630, 461-110-0750, 461-115-0190, 461-115-0230, 461-115-0610, 461-120-0125, 461-120-0510, 461-130-0310, 461-130-0327, 461-135-0085, 461-135-0560, 461-135-0900, 461-135-0930, 461-140-0040, 461-140-0210, 461-145-0005, 461-145-0035, 461-145-0088, 461-145-0300, 461-145-0365, 461-145-0430, 461-145-0505, 461-145-0930, 461-155-0225, 461-160-0015, 461-160-0100, 461-160-0160, 461-165-0030, 461-175-0220, 461-190-0231, 461-193-0031, 461-195-0601

Subject: OAR 461-101-0010 is being amended to add the Refugee (REF) Employment Program to the list of programs that are described and to which OAR 461 rules apply when no program acronym appears in a rule.

OAR 461-110-0210 is being amended to add A&D treatment and DV shelter as a reasons for absence from the household group for the Refugee (REF) and Refugee Medical (REFM) programs. This rule is also being amended to indicate that in these programs the initial absence due to emergent needs is limited to 30 days, and to change the reasonably anticipated to return extension from 90 to 30 days.

OAR 461-110-0630 is being amended to broaden the need group description in the REF and REFM programs. The need group consists of the individuals whose basic and special needs are used to determine eligibility.

OAR 461-110-0750 is being amended to specify the benefit group membership for the REF and REFM programs, which will generally align with the TANF program.

OAR 461-115-0190 is being amended to reduce the time that DHS has to provide an eligibility decision for the REF and REFM programs.

OAR 461-115-0230 is being amended to remove the interview requirement for the REFM program, aligning with other medical programs.

OAR 461-115-0610 is being amended to add a requirement for the REF and REFM programs that an individual's immigration status must be verified so that federal law is being followed.

OAR 461-120-0125 is being amended to move Iraqi and Afghan SIV holders back into qualified noncitizen status, remove references to Lautenberg parolees, and reorganize the rule. These changes align with federal law and make the rule easier to follow.

OAR 461-120-0510 is being amended to eliminate the ineligible TANF filing group's potential eligibility for the REF and REFM programs.

OAR 461-130-0310 is being amended to add an exemption from an employment program for REF individuals who are taking care of household members who have disabilities. This rule is also being

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amended to describe who is mandatory to participate in an employment program for REF.

OAR 461-130-0327 is being amended to add health and safety violations and customary work hours as good cause for failure to comply with program requirements in the REF program. These changes follow federal requirements

OAR 461-135-0085 is about assessment and treatment requirements is being amended to so the rule no longer applies in the REF program, consistent with the limited benefit period.

OAR 461-135-0560 is being amended to require that REF and REFM individuals are not fleeing felons, aligning these programs with the TANF program.

OAR 461-135-0900 is being amended to add a new requirement for the REF and REFM programs individuals must provide the name of the resettlement program that resettled them if they were resettled in Oregon, consistent with federal law. This rule is also being amended as part of reorganizing which rules set out REF only and REFM only requirements

OAR 461-135-0915 is being adopted to add job quit requirements for the REF program as well as REF only requirements previously in OAR 461-135-0900.

OAR 461-135-0930 is being amended to include requirements about the REFM program previously in OAR 461-135-0900. The amended rule will indicate that an individual is not required to apply or receive REF in order to receive REFM, and that an individual who is receiving REF and loses Medicaid eligibility is not required to meet the financial requirements of REFM, aligning with federal policy.

OAR 461-140-0040 is being amended to remove the reference to medical expenses as a reason income is not available in the REFM program because this is addressed in other rules.

OAR 461-140-0210 is being amended to limit the look back time for an asset transfer in the REF program and limiting the assets to those in the U.S only. This rule is also being amended to align REFM with TANF, and remove the disqualification for REFM if the individual was an inpatient at a nursing facility or medical institution.

OAR 461-145-0005 is being amended to correct the name of the federal legislation.

OAR 461-145-0035 is being amended to indicate that public assistance programs count Black Lung Benefits as unearned income.

OAR 461-145-0088 is being amended to remove its requirement to treat certain expenditures as available income in the REF and REFM programs, aligning these programs with the TANF program.

OAR 461-145-0300 is being amended to add an income exclusion in the REF and REFM programs for some needs-based payments, aligning these programs with the TANF program.

OAR 461-145-0365 is being amended to add the REF and REFM programs to the child care allowance for NCSTA and AmeriCorps, aligning with the TANF program.

OAR 461-145-0430 is being amended to add REF and REFM on how the equity value of real property is treated to determine eligibility, aligning with the TANF program requirements.

OAR 461-145-0505 is being amended to treat spousal support for determining eligibility in the REFM program similarly to the TANF program.

OAR 461-145-0930 is being amended to change how self-employment costs are treated for REFM program, aligning this program with the REF and TANF programs.

OAR 461-155-0225 is being amended to change the income standard to the adjusted income standard for the REFM program, aligning this program more closely with the REF and TANF programs.

OAR 461-160-0015 is being amended to provide a new resource limit for the REFM program, aligning this program more closely with the REF and TANF programs.

OAR 461-160-0100 is being amended to provide a definition of adjusted income that is specific to the REFM program and change which income is compared to the income standard, aligning this program more closely with the REF and TANF programs.

OAR 461-160-0160 is being amended to allow an earned income deduction in the REFM program, aligning this program more closely with the REF and TANF programs.

OAR 461-165-0030 is being amended to clarify the time frame that an individual is considered to have received benefits in the Matching Grant program to ensure that an individual is not able to potentially receive benefits in the Matching Grant Program and another DHS cash assistance program during the same month.

OAR 461-175-0220 is being amended to add the REF Employment Program to the notice requirements for disqualification, aligning this program with the JOBS program.

OAR 461-190-0231 is being amended to add the REF Employment Program to the re-engagement process, aligning this program with the JOBS program.

OAR 461-193-0031 is being amended to clarify that an individual must participate in the Refugee Case Services Project under the stated conditions to strengthen the requirement to participate in the Refugee Case Services Project. This rule is also being amended to remove newborn verification requirements.

OAR 461-195-0601 is being amended to include REF and REFM as programs that have the potential for an Intentional Program Violation, aligning these programs with the TANF program.

In addition, non-substantive edits were made to: ensure consistent terminology throughout self-sufficiency program rules and policies; make general updates consistent with current Department practices; update statutory and rule references; correct formatting and punctuation; improve ease of reading; and clarify Department rules and processes.

Rules Coordinator: Robert Trachtenberg—(503) 947-5290

461-101-0010

Program Acronyms and Overview

(1) Acronyms are frequently used when referring to a program. There is an acronym for each umbrella program and acronyms for each subprogram.

(2) When no program acronym appears in a rule in chapter 461 of these rules, the rule with no program acronym applies to all programs listed in this rule. If a rule does not apply to all programs, the rule uses program acronyms to identify the programs to which the rule applies.

(3) Wherever an umbrella acronym appears, that means the rule covers all the subprograms under that code.

(4) CAWEM; Citizen/Alien-Waived Emergent Medical. Medicaid coverage of emergent medical needs for individuals who are not eligible for other medical programs solely because they do not meet citizenship and alien status requirements.

(5) DSNAP; Disaster Supplemental Nutrition Assistance Program. Following a presidential declaration of a major disaster in Oregon, DSNAP provides emergency DSNAP program benefits to victims. OAR 461-135-0491 to 461-135-0497 cover DSNAP eligibility and benefits.

(6) EA; Emergency Assistance. Emergency cash to families without the resources to meet emergent needs.

(7) ERDC or ERDC-BAS; Employment Related Day Care-Basic. Helps low-income working families pay the cost of child care.

(8) GA; General Assistance. Cash assistance to certain low-income individuals with disabilities.

(9) HSP; Housing Stabilization Program. A program that helps low-income families obtain stable housing. The program is operated through the Housing and Community Services Department through community-based, service-provider agencies. The Department's rules for the program (OAR 461-135-1305 to 461-135-1335) were repealed July 1, 2001.

(10) JOBS; Job Opportunity and Basic Skills. An employment program for TANF clients. JOBS helps these clients attain self-sufficiency through training and employment. The program is part of Welfare Reform.

(11) JOBS Plus. Provides subsidized jobs rather than SNAP or TANF benefits. For TANF clients, JOBS Plus is a component of the JOBS Program; for SNAP clients and noncustodial parents of children receiving TANF, it is a separate employment program. Eligibility for TANF clients, SNAP clients, and noncustodial parents of children receiving TANF is determined by the Department. Eligibility for UI recipients is determined by the Oregon State Employment Department. When used alone, JOBS Plus includes only clients whose JOBS Plus program participation is through the Department of Human Services. JOBS Plus administered

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through the Oregon State Employment Department is known in chapter 461 of the Oregon Administrative Rules as Oregon Employment Department UI JOBS Plus. The following acronyms are used for specific categories:

- (a) TANF-PLS; Clients eligible for JOBS Plus based on TANF.
- (b) SNAP-PLS; Clients eligible for JOBS Plus based on SNAP.
- (c) NCP-PLS; Noncustodial parents of children receiving TANF.

(12) JPI; Job Participation Incentive. An additional \$10 food benefit to help increase the ability of parents with children, who meet federal TANF participation rate, to meet the nutritional needs of their families.

(13) LIS; Low-Income Subsidy. The Low-Income Subsidy program is a federal assistance program for Medicare clients who are eligible for extra help meeting their Medicare Part D prescription drug costs.

(14) OFSET. The Oregon Food Stamp Employment Transition Program, which helps SNAP program benefit recipients find employment. This program is mandatory for some SNAP program benefit recipients.

(15) OSIP; Oregon Supplemental Income Program. Cash supplements and special need payments to individuals who are blind, disabled, or 65 years of age or older. When used alone, OSIP refers to all OSIP programs. The following acronyms are used for OSIP subprograms:

(a) OSIP-AB; Oregon Supplemental Income Program — Aid to the Blind.

(b) OSIP-AD; Oregon Supplemental Income Program — Aid to the Disabled.

(c) OSIP-EPD; Oregon Supplemental Income Program — Employed Persons with Disabilities program. This program provides Medicaid coverage for employed persons with disabilities with adjusted income less than 250 percent of the Federal Poverty Level.

(d) OSIP-OAA; Oregon Supplemental Income Program — Old Age Assistance.

(16) OSIPM; Oregon Supplemental Income Program Medical. Medical coverage for elderly and disabled individuals. When used alone, OSIPM refers to all OSIP-related medical programs. The following codes are used for OSIPM subprograms:

(a) OSIPM-AB; Oregon Supplemental Income Program Medical — Aid to the Blind.

(b) OSIPM-AD; Oregon Supplemental Income Program Medical — Aid to the Disabled.

(c) OSIPM-EPD; Oregon Supplemental Income Program Medical — Employed Persons with Disabilities program. This program provides Medicaid coverage for employed persons with disabilities with adjusted income less than 250 percent of the Federal Poverty Level.

(d) OSIPM-OAA; Oregon Supplemental Income Program Medical — Old Age Assistance.

(e) OSIPM-IC; Oregon Supplemental Income Program Medical — Independent Choices

(17) The Post-TANF program provides a monthly transitional payment to employed clients who are no longer eligible for the Pre-TANF or TANF programs due to earnings, and meet the other eligibility requirements.

(18) The Pre-TANF program is an up-front assessment and resource-search program for TANF applicant families. The intent of the program is to assess the individual's employment potential; determine any barriers to employment or family stability; develop an individualized case plan that promotes family stability and financial independence; help individuals find employment or other alternatives; and provide basic living expenses immediately to families in need.

(19) QMB; Qualified Medicare Beneficiaries. Programs providing payment of Medicare premiums and one program also providing additional medical coverage for Medicare recipients. Each of these programs also is considered to be a Medicare Savings Program (MSP). When used alone in a rule, QMB refers to all MSP. The following codes are used for QMB subprograms:

(a) QMB-BAS; Qualified Medicare Beneficiaries — Basic. The basic QMB program.

(b) QMB-DW; Qualified Medicare Beneficiaries — Disabled Worker. Payment of the Medicare Part A premium for individuals under age 65 who have lost eligibility for Social Security disability benefits because they have become substantially gainfully employed.

(c) QMB-SMB; Qualified Medicare Beneficiaries — Specified Limited Medicare Beneficiary. Payment of the Medicare Part B premium only. There are no medical benefits available through QMB-SMB.

(d) QMB-SMF; Qualified Medicare Beneficiaries — Qualified Individuals. Payment of the Medicare Part B premium only. There are no medical benefits available through QMB-SMF. This program has a 100-

percent federal match, but also has an allocation that, if reached, results in the closure of the program.

(20) REF; Refugee Assistance. Cash assistance to low-income refugee singles or married couples without children.

(21) REF Employment Program; Any self-sufficiency service, employment service, or case plan that is available to or developed for individuals in the REF program.

(22) REFM; Refugee Assistance Medical. Medical coverage for low-income refugees.

(23) The Repatriate Program helps Americans resettle in the United States if they have left a foreign land because of an emergency situation.

(24) SFDNP; Senior Farm Direct Nutrition Program. Food vouchers for low-income seniors. Funded by a grant from the United States Department of Agriculture.

(25) SFPSS; State Family Pre-SSI/SSDI Program. A voluntary program providing cash assistance and case management services to families when at least one TANF eligible adult in the household has an impairment (see OAR 461-125-0260) and is or will be applying for Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI).

(26) SNAP; Supplemental Nutrition Assistance Program. Helps low-income households maintain proper nutrition by giving them the means to purchase food. SNAP used to be known as FS or Food Stamps; any reference to SNAP also includes FS and Food Stamps.

(27) TA-DVS; Temporary Assistance for Domestic Violence Survivors. Addresses the needs of individuals threatened by domestic violence.

(28) TANF; Temporary Assistance for Needy Families. Cash assistance for families when children in those families are deprived of parental support because of continued absence, death, incapacity, or unemployment.

Stat. Auth.: ORS 329A.500, 409.050, 411.060, 411.404, 411.706, 411.816, 412.014, 412.049, 414.025, 414.826

Stats. Implemented: ORS 329A.500, 409.010, 411.060, 411.404, 411.704, 411.706, 411.816, 412.014, 412.049, 414.025, 414.826, 414.839

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90;

AFS 16-1990, f. 6-29-90, cert. ef. 7-1-90; AFS 20-1990, f. 8-17-90, cert. ef. 9-1-90; AFS 23-

1990, f. 9-28-90, cert. ef. 10-1-90; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 20-1992, f. 7-31-

92, cert. ef. 8-1-92; AFS 35-1992, f. 12-31-92, cert. ef. 1-1-93; AFS 16-1993, f. & cert. ef. 9-

1-93; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 23-1994, f. 6-29-94, cert. ef. 10-1-94; AFS 10-

1995, f. 3-30-95, cert. ef. 4-1-95; AFS 13-1995, f. 6-29-95, cert. ef. 7-1-95; AFS 17-1996, f.

4-29-96, cert. ef. 5-1-96; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 3-1997, f. 3-31-97,

cert. ef. 4-1-97; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 4-1998, f. 2-25-98, cert. ef. 3-1-98;

AFS 10-1998, f. 6-29-98, cert. ef. 7-1-98; AFS 17-1998, f. & cert. ef. 10-1-98; AFS 25-1998,

f. 12-18-98, cert. ef. 1-1-99; AFS 1-1999(Temp), f. & cert. ef. 2-1-99 thru 7-31-99; AFS 7-

1999, f. 4-27-99, cert. ef. 5-1-99; AFS 9-1999, f. & cert. ef. 7-1-99; AFS 17-2000, f. 6-28-

00, cert. ef. 7-1-00; AFS 11-2001, f. 6-29-01, cert. ef. 7-1-01; AFS 17-2001(Temp), f. 8-31-

01, cert. ef. 9-1-01 thru 9-30-01; AFS 22-2001, f. & cert. ef. 10-1-01; AFS 5-2002, f. & cert.

ef. 4-1-02; AFS 10-2002, f. & cert. ef. 7-1-02; SSP 1-2003, f. 1-31-03, cert. ef. 2-1-03; SSP

7-2003, f. & cert. ef. 4-1-03; SSP 29-2003(Temp), f. 10-31-03, cert. ef. 11-1-03 thru 3-31-04;

SSP 6-2004, f. & cert. ef. 4-1-04; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 22-2004, f. & cert.

ef. 10-1-04; SSP 7-2005, f. & cert. ef. 7-1-05; SSP 19-2005, f. 12-30-05, cert. ef. 1-1-06; SSP

8-2006, f. & cert. ef. 6-1-06; SSP 7-2007, f. 6-29-07, cert. ef. 7-1-07; SSP 11-2007(Temp), f.

& cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 23-2008, f. &

cert. ef. 10-1-08; SSP 26-2008, f. 12-31-08, cert. ef. 1-1-09; SSP 29-2009(Temp), f. & cert.

ef. 10-1-09 thru 3-30-10; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 39-2009(Temp), f.

12-31-09, cert. ef. 1-1-10 thru 6-30-10; SSP 18-2010, f. & cert. ef. 7-1-10; SSP 25-

2010(Temp), f. & cert. ef. 8-16-10 thru 2-12-11; SSP 41-2010, f. 12-30-10, cert. ef. 1-1-11;

SSP 9-2012, f. 3-29-12, cert. ef. 4-1-12; SSP 22-2013(Temp), f. & cert. ef. 8-23-13 thru 2-

19-14; SSP 29-2013(Temp), f. & cert. ef. 10-1-13 thru 2-19-14; SSP 37-2013, f. 12-31-13,

cert. ef. 1-1-14; SSP 14-2014(Temp), f. & cert. ef. 6-26-14 thru 12-23-14; SSP 16-2014, f. &

cert. ef. 7-1-14; SSP 18-2014(Temp), f. & cert. ef. 7-1-14 thru 12-23-14; SSP 24-2014, f. &

cert. ef. 10-1-14; SSP 11-2015, f. 3-13-15, cert. ef. 4-1-15; SSP 25-2016(Temp), f. 6-30-16,

cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17,

cert. ef. 4-1-17

461-110-0210

Household Group

(1) This rule describes who is included in the household group. The household group generally consists of the individuals who live together with or without the benefit of a dwelling. For homeless individuals, the household group consists of the individuals who consider themselves living together.

(2) A separate dwelling is not recognized for the purpose of determining the members of a household group unless the living space has, separate from any other dwelling, an access to the outside that does not pass through another dwelling, a functional sleeping area, bathroom, and kitchen facility.

(3) Each individual in the household group who applies for benefits is an applicant. The household group and applicants form the basis for determining who is in the remaining eligibility groups.

(4) For all programs except the SNAP program, a separate household group is established for individuals who live in the same dwelling as another household group, if all the following subsections are true:

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(a) There is a landlord-tenant relationship between the two household groups in which the tenant is billed by the landlord at fair market value (see OAR 461-001-0000) for housing.

(b) The tenant lives independently from the landlord.

(c) The tenant:

(A) Has and uses sleeping, bathroom, and kitchen facilities separate from the landlord; or

(B) Shares bathroom or kitchen facilities with the landlord, but the facilities are in a commercial establishment that provides room or board or both for compensation at fair market value.

(5) Individuals who live with more than one household group during a calendar month are members of the household group in which they spend more than half of their time, except as follows:

(a) In the ERDC program, if a child (see OAR 461-001-0000) lives with different caretakers during the month, the child is considered a member of both household groups.

(b) In the TANF program:

(A) If a parent (see OAR 461-001-0000) sleeps at least 30 percent of the time during the calendar month in the home of the dependent child (see OAR 461-001-0000), the parent is in the same household group as the dependent child.

(B) A dependent child is included in the household group with the caretaker relative (see OAR 461-001-0000), who usually has the major responsibility for care and control of the dependent child, if the dependent child lives with two household groups in the same calendar month for at least one of the following reasons:

(i) Education.

(ii) The usual caretaker relative is gone from the household for part of the month because of illness.

(iii) A family emergency.

(c) In the SNAP program:

(A) The individual is a member of the household group that provides the individual more than half of his or her 21 weekly meals. If the individual is a child, the child is a member of the household group credited with providing the child more than half of his or her 21 weekly meals. A household group is credited with providing breakfast and lunch for each day the child departs that group's home for school, even if the child eats no breakfast or lunch at that home.

(B) During the month in which a resident of a domestic violence shelter (see OAR 461-001-0000) enters the domestic violence shelter, the resident may be included both in the household group he or she left and in a household group in the domestic violence shelter.

(6) In the OSIPM program, individuals receiving or applying for home and community-based care (see OAR 461-001-0030) or nursing facility care are each an individual household group regardless of others living in the individual's dwelling or facility.

(7) Individuals absent from the household for 30 days or more are no longer part of the household group, except for the following:

(a) In all programs except the SNAP program, an individual in an acute care medical facility remains in the household group unless the individual enters long-term care (see OAR 461-001-0000).

(b) In the ERDC and TANF programs:

(A) A caretaker relative who is absent for up to 90 days while in a residential alcohol or drug treatment facility is in the household group.

(B) A child who is absent for 30 days or more is in the household group if the child is:

(i) Absent for illness (unless the child is in a long-term care Title XIX facility), social service, or educational reasons;

(ii) In foster care, but expected to return to the household within the next 30 days.

(c) In the ERDC program, an individual in the household group who is:

(A) Absent because of education, training, or employment, including long-haul truck driving, fishing, or active duty in the U.S. armed forces;

(B) Absent to care for an emergent need of an individual related to illness, injury, or death; or

(C) Absent but reasonably anticipated to return within 90 days.

(d) In the TANF program, when a filing group (see OAR 461-110-0310 and 461-110-0330) includes more than one caretaker relative, a caretaker relative in the household group who is absent:

(A) Because of education, training, or employment: including absence while working or looking for work outside the area of his or her residence, such as long-haul truck driving, fishing, or active duty in the U.S. armed forces; or

(B) For up to 60 days solely due to the regulations of a homeless or domestic violence shelter or other circumstances beyond the individual's control but who would otherwise be included in the household group.

(e) In the REF and REFM programs, an individual in the household group who was absent:

(A) For up to 90 days while in a residential alcohol or drug treatment facility;

(B) For up to 30 days to care for an emergent need of an individual related to illness, injury, or death;

(C) Because of education, training, or employment: including absence while working or looking for work outside the area of his or her residence, such as long-haul truck driving, fishing, or active duty in the U.S. armed forces; or

(D) For up to 60 days solely due to the regulations of a homeless or domestic violence shelter or other circumstances beyond the individual's control but who would otherwise be included in the household group.

(f) In the REF, REFM, and TANF programs, the Department may approve one or more 30-day extensions of this time period if the Department receives sufficient information to assure the Department that the absent individual will return within the extension period.

(8) In the OSIP-EPD and OSIPM-EPD programs, the household group consists only of the individual applying for or receiving benefits.

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.404, 411.706, 411.816, 412.006, 412.049, 413.085, 414.685

Stats. Implemented: ORS 409.050, 411.060, 411.070, 411.404, 411.704, 411.706, 411.816, 412.001, 412.006, 412.049, 413.085, 414.025, 414.685, 414.826, 414.839

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 13-1994, f. & cert. ef. 7-1-94; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 4-1998, f. 2-25-98, cert. ef. 3-1-98; AFS 1-1999(Temp), f. & cert. ef. 2-1-99 thru 7-31-99; AFS 3-1999, f. 3-31-99, cert. ef. 4-1-99; AFS 5-1999(Temp), f. & cert. ef. 4-1-99 thru 6-30-99; AFS 9-1999, f. & cert. ef. 7-1-99; AFS 17-2000, f. 6-28-00, cert. ef. 7-1-00; AFS 34-2000, f. 12-22-00, cert. ef. 1-1-01; AFS 19-2001, f. 8-31-01, cert. ef. 9-1-01; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 7-2007, f. 6-29-07, cert. ef. 7-1-07; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 29-2009(Temp), f. & cert. ef. 10-1-09 thru 3-30-10; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 39-2009(Temp), f. 12-31-09, cert. ef. 1-1-10 thru 6-30-10; SSP 18-2010, f. & cert. ef. 7-1-10; SSP 10-2011, f. 3-31-11, cert. ef. 4-1-11; SSP 17-2013(Temp), f. & cert. ef. 7-1-13 thru 12-28-13; SSP 26-2013, f. & cert. ef. 10-1-13; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 37-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 15-2014, f. & cert. ef. 7-1-14; SSP 11-2015, f. 3-13-15, cert. ef. 4-1-15; SSP 17-2015, f. & cert. ef. 6-30-15; SSP 15-2016, f. & cert. ef. 4-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-110-0630 Need Group

(1) The "need group" consists of the individuals whose basic and special needs are used in determining eligibility (see OAR 461-001-0000) and benefit level.

(2) In the EA program, the need group consists of the members of the financial group (see OAR 461-110-0530) who meet all nonfinancial eligibility requirements, except that members disqualified for an intentional program violation (see OAR 461-195-0601) are not in the need group.

(3) In the ERDC, OSIPM-EPD, and QMB programs, the need group consists of each member of the financial group.

(4) In the OSIPM (except OSIPM-EPD) program:

(a) If a child (see OAR 461-001-0000) is applying, the need group consists of the child.

(b) In all other situations, the need group consists of each member of the financial group.

(5) In the Pre-TANF and TANF programs, the need group consists of all the members of the financial group except:

(a) A parent (see OAR 461-001-0000) who is in foster care and for whom foster care payments are being made.

(b) An unborn child.

(6) In the SNAP program, the need group consists of the members of the financial group who meet all nonfinancial eligibility requirements, except the following individuals are not in the need group:

(a) A member disqualified for an intentional program violation.

(b) A fleeing felon under OAR 461-135-0560.

(c) An individual violating a condition of state or federal parole, probation, or post-prison supervision under OAR 461-135-0560.

(d) An individual who becomes ineligible due to the time limit in OAR 461-135-0520.

(7) In the REF and REM programs, the need group consists of all the members of the financial group except an unborn child.

Stat. Auth.: ORS 411.060, 411.070, 411.404, 411.706, 411.816, 412.049 & 414.231

Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.704, 411.706, 411.816, 412.049, 414.025, 414.231, 414.826, 414.831 & 414.839

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 23-1990, f. 9-28-90, cert. ef. 10-1-90; AFS 6-1991(Temp), f. & cert. ef. 2-8-91; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 20-1992, f. 7-31-92, cert. ef. 8-1-92; AFS 12-1993, f. & cert. ef. 7-1-93; AFS 19-1993, f. & cert. ef. 10-1-93; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 36-1996, f. 10-31-96, cert. ef. 11-1-96; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 3-1997, f. 3-31-97, cert. ef. 4-1-97; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 13-2002, f. & cert.

ADMINISTRATIVE RULES

ef. 10-1-02; SSP 29-2003(Temp), f. 10-31-03, cert. ef. 11-1-03 thru 3-31-04; SSP 6-2004, f. & cert. ef. 4-1-04; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 6-2006, f. 3-31-06, cert. ef. 4-1-06; SSP 7-2006(Temp), f. 3-31-06, cert. ef. 4-1-06 thru 9-28-06; SSP 10-2006, f. 6-30-06, cert. ef. 7-1-06; SSP 14-2006, f. 9-29-06, cert. ef. 10-1-06; SSP 4-2007, f. 3-30-07, cert. ef. 4-1-07; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 11-2007(Temp), f. & cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 17-2008, f. & cert. ef. 7-1-08; SSP 13-2009, f. & cert. ef. 7-1-09; SSP 39-2009(Temp), f. 12-31-09, cert. ef. 1-1-10 thru 6-30-10; SSP 18-2010, f. & cert. ef. 7-1-10; SSP 25-2010(Temp), f. & cert. ef. 8-16-10 thru 2-12-11; SSP 41-2010, f. 12-30-10, cert. ef. 1-1-11; SSP 10-2011, f. 3-31-11, cert. ef. 4-1-11; SSP 16-2012(Temp), f. & cert. ef. 5-1-12 thru 10-28-12; SSP 30-2012, f. 9-28-12, cert. ef. 10-1-12; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 15-2016, f. & cert. ef. 4-1-16; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-110-0750

Benefit Group

- (1) A "benefit group" consists of the individuals who receive benefits.
- (2) Except as provided in sections (4) and (5) of this rule, for an individual not assumed eligible for medical programs (see OAR 461-135-0010), the benefit group consists of each individual from the need group (see OAR 461-110-0630) requesting benefits who meets all financial and nonfinancial eligibility (see OAR 461-001-0000) requirements.
- (3) For an individual assumed eligible for medical programs (see OAR 461-135-0010), the benefit group consists of the individuals who are in the benefit group of the program used to assume eligibility.
- (4) In the TANF program, the following individuals are not in the benefit group:
 - (a) An individual who may not be in the benefit group because of a disqualification penalty (see OAR 461-130-0330 and 461-135-0085).
 - (b) An individual disqualified for an intentional program violation (see OAR 461-195-0601).
 - (c) An individual who may not be in the benefit group because the individual has reached the time limit in OAR 461-135-0071 and does not meet any of the extension criteria in OAR 461-135-0073 or exemption criteria in OAR 461-135-0075.
 - (d) A fleeing felon (see OAR 461-135-0560).
 - (e) An individual violating a condition of state or federal parole, probation, or post-prison supervision (see OAR 461-135-0560).
 - (f) An individual who does not meet the citizenship and alien status requirements in OAR 461-120-0110 and 461-120-0125.
 - (g) An individual who chooses not to receive benefits.
- (5) In the REF and REFM programs, the following individuals are not in the benefit group:
 - (a) An individual who may not be in the benefit group because of a disqualification penalty (see OAR 461-130-0330 and 461-135-0085).
 - (b) An individual disqualified for an intentional program violation (see OAR 461-195-0601).
 - (c) A fleeing felon (see OAR 461-135-0560).
 - (d) An individual violating a condition of state or federal parole, probation, or post-prison supervision (see OAR 461-135-0560).
 - (e) An individual who chooses not to receive benefits.
 - (f) An individual who does not meet the alien status requirements of OAR 461-120-0125(5), with the exception of a newborn child, so long as all parents who are in the filing group meet the alien status requirements of OAR 461-120-0125(5).

Stat. Auth.: ORS 411.060, 411.404, 411.816, 412.014, 412.049
Stats. Implemented: ORS 411.060, 411.404, 411.816, 412.014, 412.049
Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; SSP 1-2003, f. 1-31-03, cert. ef. 2-1-03; SSP 29-2003(Temp), f. 10-31-03, cert. ef. 11-1-03 thru 3-31-04; SSP 6-2004, f. & cert. ef. 4-1-04; SSP 24-2004, f. 12-30-04, cert. ef. 1-1-05; SSP 8-2006, f. & cert. ef. 6-1-06; SSP 10-2011, f. 3-31-11, cert. ef. 4-1-11; SSP 15-2016, f. & cert. ef. 4-1-16; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-115-0190

Application Processing Time Frames; Not SNAP or Pre-TANF

- (1) In all programs except the EA, Pre-TANF, REF, SNAP, and TA-DVS programs, the Department determines eligibility and sends a decision notice (see OAR 461-001-0000) not later than the 45th day after the date of request (see OAR 461-115-0030). The Department may extend the period if one or more of the following subsections applies:
 - (a) Information needed to determine eligibility is expected to be received after the 45-day deadline, and the client has no control over the information.
 - (b) Other circumstances beyond the control of the client prevent the Department from making the decision within the 45-day period.
 - (c) In the OSPM program, the applicant has met all eligibility requirements except the Department must determine whether the applicant is blind or has a disability. In this case, the Department determines eligibility and sends a decision notice not later than the 90th day after the date of

request. The Department may extend this period for any of the following reasons:

(A) The Department cannot reach a decision because the client or an examining physician or psychologist has not taken an action necessary for the decision to be made.

(B) There is an administrative or other emergency beyond the Department's control that impairs its ability to make the decision.

(2) In the EA program, the Department determines eligibility within one working day of the date of application or as soon thereafter as verification of emergent need is completed. Verification of all other factors may be waived if it would delay the client's receipt of assistance.

(3) For support service payments in the JOBS program (authorized by OAR 461-190-0211) and in the SFPSS program, the Department determines eligibility as follows:

(a) If the client is receiving an SFPSS or TANF grant--in time to meet the need for which the request is made and not later than the 30th day after the date of request.

(b) If the client is not covered by subsection (a) of this section--in time to meet the need for which the request is made.

(4) In REF program, the Department determines eligibility and sends a decision notice (see OAR 461-001-0000) not later than the 30th day after the date of request (see OAR 461-115-0030). The Department may extend the period if one or more of the following subsections applies:

(a) Information needed to determine eligibility is expected to be received after the 30-day deadline, and the client has no control over the information.

(b) Other circumstances beyond the control of the client prevent the Department from making the decision within the 30-day period.

(5) In the TA-DVS program, OAR 461-135-1220 covers the following time requirements:

(a) Assessing the client's safety concerns and offering options to the client for addressing immediate safety needs.

(b) Determining eligibility after the application is complete, whether or not the client has signed the application.

Stat. Auth.: ORS 411.060, 411.070, 412.049, 414.042
Stats. Implemented: ORS 411.060, 411.070, 411.117, 412.049, 414.042
Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90; AFS 3-1991(Temp), f. & cert. ef. 1-17-91; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 2-1992, f. 1-30-92, cert. ef. 2-1-92; AFS 8-1992, f. & cert. ef. 4-1-92; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 8-1998, f. 4-28-98, cert. ef. 5-1-98; AFS 9-1999, f. & cert. ef. 7-1-99; AFS 1-2000, f. 1-13-00, cert. ef. 2-1-00; AFS 34-2000, f. 12-22-00, cert. ef. 1-1-01; AFS 22-2001, f. & cert. ef. 10-1-01; SSP 22-2004, f. & cert. ef. 10-1-04; SSP 24-2004, f. 12-30-04, cert. ef. 1-1-05; SSP 7-2007, f. 6-29-07, cert. ef. 7-1-07; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 11-2007(Temp), f. & cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-115-0230

Interviews

(1) In the REF and TANF programs, the Department may conduct a required face-to-face interview by telephone or home visit if an authorized representative (see OAR 461-001-0000 and 461-115-0090) has not been appointed, and participating in a face-to-face interview is a hardship (see section (2) of this rule) for the household.

(2) For the purposes of this rule, "hardship" includes, but is not limited to:

- (a) Care of a household member;
- (b) An individual's age, disability (see OAR 461-001-0000), or illness;

(c) A commute of more than two hours from the individual's residence to the nearest branch office (see OAR 461-001-0000);

(d) A conflict between the individual's work or training schedule and the business hours of the branch office; and

(e) Transportation difficulties due to prolonged severe weather or financial hardship.

(3) In the SNAP program:

(a) An interview must be scheduled so that the filing group (see OAR 461-110-0370) has at least ten days to provide any needed verification before the deadline under OAR 461-115-0210.

(b) A face-to-face interview must be granted at the applicant's request.

(c) When an applicant misses the first scheduled interview appointment, the Department must inform the applicant by regular mail of the missed interview.

(d) An applicant who fails to attend a scheduled interview must contact the Department no later than 30 days following the filing date (OAR 461-115-0040) to be eligible for benefits.

(e) An adult (see OAR 461-001-0015) in the filing group or the authorized representative of the filing group is interviewed once every 12 months.

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(4) In the ERDC program:

(a) Except as provided otherwise in subsection (c) of this section, an interview with an adult in the filing group (see OAR 461-110-0350) or the authorized representative of the filing group is required to process an initial application and a renewal of benefits.

(b) A phone interview is preferred; however, a face-to-face interview must be granted at the applicant's request.

(c) An interview is not required when the Department has implemented the Child Care Reservation List and it is determined that a decision notice of ineligibility will be sent under OAR 461-115-0016.

(5) In the OSIPM and QMB programs, the Department must complete an interview face-to-face in the branch office, by telephone, or during a home visit with at least one applicant who is 18 years of age or older or an applicant's authorized representative:

(a) At initial application.

(b) At redetermination except individuals who are assumed eligible (see OAR 461-135-0010).

(6) In the REFM program, an interview is not required.

Stat. Auth.: ORS 409.050, 411.060, 411.404, 411.706, 411.816, 412.049, 414.826, 414.839
Stats. Implemented: ORS 409.010, 409.050, 411.060, 411.070, 411.404, 411.706, 411.816, 412.049, 414.025, 414.231, 414.826, 414.839

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 20-1990, f. 8-17-90, cert. ef. 9-1-90; AFS 20-1992, f. 7-31-92, cert. ef. 8-1-92; AFS 12-1993, f. & cert. ef. 7-1-93; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 1-2000, f. 1-13-00, cert. ef. 2-1-00; AFS 9-2001, f. & cert. ef. 6-1-01; AFS 22-2001, f. & cert. ef. 10-1-01; AFS 5-2002, f. & cert. ef. 4-1-02; SSP 39-2009(Temp), f. 12-31-09, cert. ef. 1-1-10 thru 6-30-10; SSP 5-2010, f. & cert. ef. 4-1-10; SSP 7-2010(Temp), f. & cert. ef. 4-1-10 thru 6-30-10; SSP 18-2010, f. & cert. ef. 7-1-10; SSP 22-2011(Temp), f. & cert. ef. 7-22-11 thru 1-18-12; SSP 35-2011, f. 12-27-11, cert. ef. 1-1-12; SSP 7-2012(Temp), f. & cert. ef. 2-29-12 thru 8-27-12; SSP 25-2012, f. 6-29-12, cert. ef. 7-1-12; SSP 15-2014, f. & cert. ef. 7-1-14; SSP 25-2015, f. 9-29-15, cert. ef. 10-1-15; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-115-0610

Verification; General

(1) To be eligible for benefits, clients must provide verification when the Department requests verification. Verification provided for one program is used for all programs in which the client participates. The three categories of information used in the verification process are:

(a) Documentary evidence, which is the primary source of verification for all eligibility factors except residency and household composition.

(b) Collateral contact, which is an oral or documentary confirmation of an eligibility factor by a person outside of the filing group.

(c) Observations made during a home visit by a Department representative.

(2) The Department will notify a client when verification of any factor affecting eligibility or benefit level is required.

(3) Verification of the occurrence of an act of domestic violence (see OAR 461-001-0000) is not required for any program.

(4) In the REF and REFM programs, the immigration status of an individual must be verified using documentary evidence from a federal agency that holds authority to grant legal immigration status.

Stat. Auth: ORS 411.060, 411.816, 414.042, 418.100

Stats. Implemented: ORS 411.060, 411.117, 411.650, 411.816, 414.042, 418.100

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 19-1993, f. & cert. ef. 10-1-93; AFS 6-1994, f. & cert. ef. 4-1-94; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 1-2000, f. 1-13-00, cert. ef. 2-1-00; SSP 8-2008, f. & cert. ef. 4-1-08; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-120-0125

Alien Status

(1) For purposes of this chapter of rules, an individual is a "qualified non-citizen" if the individual is any of the following:

(a) A non-citizen who is lawfully admitted for permanent residence under the Immigration and Nationality Act (INA) (8 U.S.C. 1101 et seq). This includes an Iraqi or Afghan alien granted special immigrant status (SIV) under section 101(a)(27) of the INA.

(b) A refugee who is admitted to the United States as a refugee under section 207 of the INA (8 U.S.C. 1157).

(c) A non-citizen who is granted asylum under section 208 of the INA (8 U.S.C. 1158).

(d) A non-citizen whose deportation is being withheld under section 243(h) of the INA (8 U.S.C. 1253(h)) (as in effect immediately before April 1, 1997) or section 241(b)(3) of the INA (8 U.S.C. 1231(b)(3)) (as amended by section 305(a) of division C of the Omnibus Consolidated Appropriations Act of 1997, Pub. L. No. 104-208, 110 Stat. 3009-597 (1996)).

(e) A non-citizen who is paroled into the United States under section 212(d)(5) of the INA (8 U.S.C. 1182(d)(5)) for a period of at least one year.

(f) A non-citizen who is granted conditional entry pursuant to section 203(a)(7) of the INA (8 U.S.C. 1153(a)(7)) as in effect prior to April 1, 1980.

(g) A non-citizen who is a "Cuban and Haitian entrant" (as defined in section 501(3) of the Refugee Education Assistance Act of 1980).

(h) A battered spouse or dependent child who meets the requirements of 8 U.S.C. 1641(c), as determined by the U.S. Citizenship and Immigration Services.

(i) A non-citizen who is a "victim of a severe form of trafficking in persons" certified under the Victims of Trafficking and Violence Protection Act of 2000 (22 U.S.C. 7101 to 7112).

(j) A non-citizen who is a family member of a victim of a severe form of trafficking in persons who holds a visa for family members authorized by the Trafficking Victims Protection Reauthorization Act of 2003 (22 U.S.C. 7101 to 7112).

(2) In all programs except the REF and REFM programs, an individual meets the alien status requirements if the individual is one of the following:

(a) An American Indian born in Canada to whom the provisions of section 289 of the INA (8 U.S.C. 1359) apply.

(b) A member of an Indian tribe, as defined in section 4(e) of the Indian Self-Determination and Education Act (25 U.S.C. 450b(e)).

(c) A qualified non-citizen who is any of the following:

(A) A veteran of the United States Armed Forces who was honorably discharged for reasons other than alien status and who fulfilled the minimum active-duty service requirements described in 38 U.S.C. 5303A(d).

(B) A member of the United States Armed Forces on active duty (other than active duty for training).

(C) The spouse, the un-remarried surviving spouse, or an unmarried dependent child, of an individual described in paragraphs (A) or (B) of this subsection.

(3) In the ERDC, TA-DVS, and TANF programs, an individual meets the alien status requirements if the individual is one of the following:

(a) An individual who is a qualified non-citizen (see section (1) of this rule).

(b) A non-citizen who is currently a victim of domestic violence or who is at risk of becoming a victim of domestic violence.

(c) An individual granted immigration status under section 584(a) of the Foreign Operations, Export Financing and Related Program Appropriations Act of 1988.

(4) In the OSIPM and QMB programs an individual meets the alien status requirement if:

(a) The individual is a non-citizen who entered the United States or was given qualified non-citizen status on or after August 22, 1996 and has been in the U.S. for five years beginning on the date the non-citizen received his or her qualified non-citizen status; or

(b) The individual meets the requirements of one of the following subsections:

(A) An individual granted any of the following alien statuses:

(i) Refugee--under section 207 of the INA.

(ii) Asylum--under section 208 of the INA.

(iii) Deportation being withheld under section 243(h) of the INA.

(iv) Cubans and Haitians who are either public interest or humanitarian parolees.

(v) An individual granted immigration status under section 584(a) of the Foreign Operations, Export Financing and Related Program Appropriations Act of 1988.

(vi) A "victim of a severe form of trafficking in persons" certified under the Victims of Trafficking and Violence Protection Act of 2000 (22 U.S.C. 7101 to 7112).

(vii) A family member of a victim of a severe form of trafficking in persons who holds a visa for family members authorized by the Trafficking Victims Protection Reauthorization Act of 2003 (22 U.S.C. 7101 to 7112).

(viii) An Iraqi or Afghan alien granted special immigrant status (SIV) under section 101(a)(27) of the INA.

(B) Effective October 1, 2009, an individual is a qualified non-citizen and is under 19 years of age.

(C) Was a qualified non-citizen before August 22, 1996.

(D) Physically entered the United States before August 22, 1996, and was continuously present in the United States between August 22, 1996, and the date qualified non-citizen status was obtained. An individual is not continuously present in the United States if the individual is absent from the United States for more than 30 consecutive days or a total of more than 90 days between August 22, 1996 and the date qualified non-citizen status was obtained.

(E) Is under the age of 19 and is one of the following:

(i) A citizen of a Compact of Free Association State (i.e., Federated States of Micronesia, Republic of the Marshall Islands, and the Republic of

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Palau) who has been admitted to the U.S. as a non-immigrant and is permitted by the Department of Homeland Security to reside permanently or indefinitely in the U.S.

(ii) An individual described in 8 CFR section 103.12(a)(4) who belongs to one of the following classes of aliens permitted to remain in the United States because the Attorney General has decided for humanitarian or other public policy reasons not to initiate deportation or exclusion proceedings or enforce departure:

(I) An alien currently in temporary resident status pursuant to section 210 or 245A of the INA (8 USC 1160 and 1255a);

(II) An alien currently under Temporary Protected Status (TPS) pursuant to section 244 of the INA (8 USC 1229b);

(III) Cuban-Haitian entrants, as defined in section 202(b) Pub. L. 99-603 (8 USC 1255a), as amended;

(IV) Family Unity beneficiaries pursuant to section 301 of Pub. L. 101-649 (8 USC 1255a), as amended;

(V) An alien currently under Deferred Enforced Departure (DED) pursuant to a decision made by the President;

(VI) An alien currently in deferred action status pursuant to Department of Homeland Security Operating Instruction OI 242.1(a)(22); or

(VII) An alien who is the spouse or child of a United States citizen whose visa petition has been approved and who has a pending application for adjustment of status.

(iii) An individual in non-immigrant classifications under the INA who is permitted to remain in the U.S. for an indefinite period, including those individuals as specified in section 101(a)(15) of the INA (8 USC 1101).

(F) In the OSIPM program, is receiving SSI benefits.

(G) In the QMB program, is receiving SSI and Medicare Part A benefits.

(H) Meets the alien status requirements in section (2) or (5) of this rule.

(5) In the REF and REFM programs, an individual meets the alien status requirements if the individual is admitted lawfully under any of the following provisions of law:

(a) An individual admitted as a refugee under section 207 of the INA (8 USC 1157).

(b) An individual granted asylum under section 208 of the INA (8 USC 1158).

(c) Cuban and Haitian entrants, in accordance with requirements in 45 CFR part 401.

(d) An individual paroled as a refugee or asylee under section 212(d)(5) of the Immigration and Nationality Act (INA) (8 USC 1182(d)(5)).

(e) An Amerasian from Vietnam who is admitted to the U.S. as an immigrant pursuant to section 584 of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 1988 (as contained in section 101(e) of Pub. L. No. 100-202 and amended by the 9th proviso under Migration and Refugee Assistance in title II of the Foreign Operations, Export Financing, and Related Programs Appropriations Acts, 1989 (Pub. L. No. 100-461 as amended)).

(f) A “victim of a severe form of trafficking in persons” certified under the Victims of Trafficking and Violence Protection Act of 2000, Pub. L. No. 106-386, 114 Stat. 1464 (2000), as amended.

(g) A family member of a victim of a severe form of trafficking in persons who holds a visa for family members authorized by the Trafficking Victims Protection Reauthorization Act of 2003, Pub. L. 108-193, 117 Stat. 2875 (2003).

(h) Iraqi and Afghan aliens granted special immigrant status under section 101(a)(27) of the Immigration and Nationality Act.

(6) In the SNAP program, an individual meets the alien status requirement if the individual meets the requirements of one or more of the following subsections:

(a) An individual granted any of the following alien statuses:

(A) Refugee--under section 207 of the INA.

(B) Asylum--under section 208 of the INA.

(C) Deportation being withheld under section 243(h) of the INA.

(D) Cubans and Haitians who are either public interest or humanitarian parolees.

(E) An individual granted immigration status under section 584(a) of the Foreign Operations, Export Financing and Related Program Appropriations Act of 1988.

(F) A “victim of a severe form of trafficking in persons” certified under the Victims of Trafficking and Violence Protection Act of 2000 (22 U.S.C. 7101 to 7112).

(G) A family member of a victim of a severe form of trafficking in persons who holds a visa for family members authorized by the Trafficking Victims Protection Reauthorization Act of 2003 (22 U.S.C. 7101 to 7112).

(H) An Iraqi or Afghan alien granted special immigrant status (SIV) under section 101(a)(27) of the INA.

(b) A qualified non-citizen under 18 years of age.

(c) A non-citizen who has been residing in the United States for at least five years while a qualified non-citizen.

(d) A non-citizen who is lawfully residing in the United States and who was a member of a Hmong or Highland Laotian tribe at the time that the tribe rendered assistance to United States personnel by taking part in a military or rescue operation during the Vietnam era (as defined in 38 U.S.C. 101).

(e) The spouse, the un-remarried surviving spouse, or an unmarried dependent child, of an individual described in subsection (d) of this section.

(f) A qualified non-citizen who has a disability, as defined in OAR 461-001-0015.

(g) A client who is lawfully admitted to the United States for permanent residence under the INA and has worked 40 qualifying quarters of coverage as defined under title II of the Social Security Act, or can be credited with such qualifying quarters as provided under 8 U.S.C. 1645, meets the alien status requirements for the SNAP program, subject to the following provisions:

(A) No quarter beginning after December 31, 1996, is a qualifying quarter if the client received any federal, means-tested benefit during the quarter. Federal means tested benefits include SNAP, TANF, and Medicaid (except emergency medical).

(B) For the purpose of determining the number of qualifying quarters of coverage, a client is credited with all of the quarters of coverage worked by a parent of the client while the client was under the age of 18 and all of the qualifying quarters worked by a spouse of the client during their marriage, during the time the client remains married to such spouse or such spouse is deceased.

(C) A lawful permanent resident who would meet the alien status requirement, except for a determination by the Social Security Administration (SSA) that the individual has fewer than 40 quarters of coverage, may be provisionally certified for SNAP program benefits while SSA investigates the number of quarters creditable to the client. A client provisionally certified under this section who is found by SSA, in its final administrative decision after investigation, not to have 40 qualifying quarters is not eligible for SNAP program benefits received while provisionally certified. The provisional certification is effective according to the rule on effective dates for opening benefits, OAR 461-180-0080. The provisional certification cannot run more than six months from the date of original determination by SSA that the client does not have sufficient quarters.

Stat. Auth.: ORS 411.060, 411.404, 411.704, 411.706, 411.816, 412.014, 412.049, 414.231
Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.704, 411.706, 411.816, 412.014, 412.049, 414.025, 414.231, 414.826

Hist.: AFS 17-1992, f. & cert. ef. 7-1-92; AFS 28-1992, f. & cert. ef. 10-1-92; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 32-1996(Temp), f. & cert. ef. 9-23-96; AFS 36-1996, f. 10-31-96, cert. ef. 11-1-96; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 13-1997, f. 8-28-97, cert. ef. 9-1-97; AFS 24-1997, f. 12-31-97, cert. ef. 1-1-98; AFS 22-1998, f. 10-30-98, cert. ef. 11-1-98; AFS 9-1999, f. & cert. ef. 7-1-99; AFS 15-1999, f. 11-30-99, cert. ef. 12-1-99; AFS 34-2000, f. 12-22-00, cert. ef. 1-1-01; AFS 17-2001(Temp), f. 8-31-01, cert. ef. 9-1-01 thru 9-30-01; AFS 22-2001, f. & cert. ef. 10-1-01; AFS 5-2002, f. & cert. ef. 4-1-02; AFS 10-2002, f. & cert. ef. 7-1-02; AFS 13-2002, f. & cert. ef. 10-1-02; SSP 7-2003, f. & cert. ef. 4-1-03; SSP 16-2003, f. & cert. ef. 7-1-03; SSP 23-2003, f. & cert. ef. 10-1-03; SSP 29-2003(Temp), f. 10-31-03, cert. ef. 11-1-03 thru 3-31-04; SSP 36-2003(Temp), f. 12-31-03 cert. ef. 1-1-04 thru 3-31-04; SSP 6-2004, f. & cert. ef. 4-1-04; SSP 10-2004(Temp), f. & cert. ef. 4-9-04 thru 6-30-04; SSP 14-2004(Temp), f. & cert. ef. 5-11-04 thru 6-30-04; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 4-2005, f. & cert. ef. 4-1-05; SSP 7-2005, f. & cert. ef. 7-1-05; SSP 14-2005, f. 9-30-05, cert. ef. 10-1-05; SSP 6-2006, f. 3-31-06, cert. ef. 4-1-06; SSP 11-2006(Temp), f. 6-30-06, cert. ef. 7-1-06 thru 9-30-06; SSP 14-2006, f. 9-29-06, cert. ef. 10-1-06; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 3-2008(Temp), f. & cert. ef. 1-30-08 thru 7-28-08; SSP 4-2008(Temp), f. & cert. ef. 2-22-08 thru 7-28-08; SSP 17-2008, f. & cert. ef. 7-1-08; SSP 25-2008(Temp), f. 12-31-08, cert. ef. 1-1-09 thru 6-30-09; SSP 5-2009, f. & cert. ef. 4-1-09; SSP 9-2009(Temp), f. & cert. ef. 5-1-09 thru 10-28-09; SSP 29-2009(Temp), f. & cert. ef. 10-1-09 thru 3-30-10; SSP 28-2009, f. & cert. ef. 10-1-09; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 39-2009(Temp), f. 12-31-09, cert. ef. 1-1-10 thru 6-30-10; SSP 18-2010, f. & cert. ef. 7-1-10; SSP 9-2012, f. 3-29-12, cert. ef. 4-1-12; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 16-2014, f. & cert. ef. 7-1-14; SSP 2-2016, f. & cert. ef. 1-1-16; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

ADMINISTRATIVE RULES

461-120-0510

Age Requirements for Clients to Receive Benefits

(1) If the year of an individual's birth is known but the month is unknown, the month of birth is presumed to be July. If the date of birth is unknown, the date of birth is presumed to be the first of the month.

(2) To be eligible for the TANF program:

(a) A dependent child (see OAR 461-001-0000) must be--

(A) Under 18 years of age; or

(B) Under 19 years of age and regularly attending school (see subsection (c) of this section) full time, as determined by the school.

(b) A caretaker relative (see OAR 461-001-0000) may be any age.

(c) "Regularly attending school" means enrolled in and attending any of the following:

(A) A school in grade 12 or below, including home schooling approved by the local school district.

(B) GED classes in lieu of high school.

(C) A course of vocational or technical training, including Job Corps, in lieu of high school.

(D) The Oregon School for the Deaf.

(d) The student's full-time status is defined by the school.

(e) Regular attendance continues when a student misses school because of an illness, family emergency, or vacation, as long as the student intends to return to school. Students are considered to be in attendance for the full month in which they complete or discontinue school or training.

(3) To be eligible for payment of child care costs for the ERDC or TANF program, a child must be--

(a) Under 12 years of age for the ERDC program or under 13 years of age for the TANF program; or

(b) Under 18 years of age and--

(A) Physically or mentally incapable of selfcare;

(B) Under court supervision;

(C) Receiving foster care;

(D) Eligible for the special need rate for child care in OAR 461-155-0150; or

(E) Subject to circumstances that significantly compromise the child's safety or the caretaker's ability to work or participate in an assigned activity if child care is not available.

(4) To be eligible for the OSIP-AB, OSIPM-AB, QMB-BAS, QMB-SMB, REFM, or SNAP programs, a client may be any age.

(5) To be eligible for the OSIP-AD (except OSIP-EPD), OSIPM-AD (except OSIPM-EPD), and QMB-DW programs, a client must be under 65 years of age.

(6) To be eligible for the OSIP-EPD and OSIPM-EPD programs, the client must be 18 years of age or older or be legally emancipated.

(7) To be eligible for the OSIP-OAA or OSIPM-OAA programs, a client must be 65 years of age or older.

(8) To be eligible for the REF or REFM programs, a client must be:

(a) 18 years of age or older; or

(b) A legally emancipated minor.

Stat. Auth: ORS 411.060, 411.070, 411.404, 411.816, 412.049

Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.816, 412.049

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 20-1991, f. & cert. ef. 10-1-91; AFS 20-1992, f. 7-31-92, cert. ef. 8-1-92; AFS 35-1992, f. 12-31-92, cert. ef. 1-1-93; AFS 12-1993, f. & cert. ef. 7-1-93; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 3-1997, f. 3-31-97, cert. ef. 4-1-97; AFS 4-1998, f. 2-25-98, cert. ef. 3-1-98; AFS 5-1998(Temp), f. & cert. ef. 3-11-98 thru 5-31-98; AFS 8-1998, f. 4-28-98, cert. ef. 5-1-98; AFS 10-1998, f. 6-29-98, cert. ef. 7-1-98; AFS 25-1998, f. 12-28-98, cert. ef. 1-1-99; AFS 1-1999(Temp), f. & cert. ef. 2-1-99 thru 7-31-99; AFS 7-1999, f. 4-27-99, cert. ef. 5-1-99; AFS 1-2000, f. 1-13-00, cert. ef. 2-1-00; AFS 18-2001(Temp), f. 8-31-01, cert. ef. 9-1-01 thru 12-31-01; AFS 27-2001, f. 12-21-01, cert. ef. 1-1-02; AFS 5-2002, f. & cert. ef. 4-1-02; AFS 10-2002, f. & cert. ef. 7-1-02; SSP 29-2003(Temp), f. 10-31-03, cert. ef. 11-1-03 thru 3-31-04; SSP 6-2004, f. & cert. ef. 4-1-04; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 22-2004, f. & cert. ef. 10-1-04; SSP 19-2005, f. 12-30-05, cert. ef. 1-1-06; SSP 17-2008, f. & cert. ef. 7-1-08; SSP 23-2008, f. & cert. ef. 10-1-08; SSP 29-2009(Temp), f. & cert. ef. 10-1-09 thru 3-30-10; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 25-2011, f. 9-30-11, cert. ef. 10-1-11; SSP 9-2012, f. 3-29-12, cert. ef. 4-1-12; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 16-2014, f. & cert. ef. 7-1-14; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-130-0310

Participation Classifications: Exempt, Mandatory, and Volunteer

(1) In the Post-TANF, Pre-TANF, REF, SNAP, and TANF programs:

(a) The Department assigns an individual to one or more employment program participation classifications--exempt, mandatory, and volunteer (see OAR 461-130-0305 for definitions of all three terms).

(b) In the Post-TANF program or while receiving Employment Payments (see OAR 461-001-0025) under OAR 461-135-1270, an individual is classified as a volunteer.

(2) In the Pre-TANF, REF, and TANF programs:

(a) An individual is exempt from employment program participation and disqualification if the individual meets the requirements of at least one of the following paragraphs. The individual is:

(A) Pregnant and in the last month of the pregnancy.

(B) Pregnant and experiencing medical complications due to the pregnancy that prohibit participation in activities of the program and are documented by a qualified and appropriate professional.

(C) A parent (see OAR 461-001-0000) during the first six months after the birth of the parent's dependent child (see OAR 461-001-0000) except that the Department may require the parent to participate in parenting classes or a family stability activity (see OAR 461-001-0000). An exemption allowed under this paragraph may apply only to one mandatory participant in each filing group (see OAR 461-110-0310, 461-110-0330, and 461-110-0430).

(D) Under 20 years of age during the first 16 weeks after giving birth except that the individual may be required to participate in suitable activities with a preference for educational activities, parenting classes, and family stability activity.

(E) A parent providing care for a family member who is an individual with a disability (see OAR 461-001-0000) and is in the household group (see OAR 461-110-0210) with the parent. Medical documentation to support the need for the care is required.

(F) In the REF program, any of the following:

(i) 65 years of age or older.

(ii) An individual providing care for a family member who is in the household group (see OAR 461-110-0210) and has a disability (see OAR 461-001-0000). Medical documentation to support the need for the care is required.

(iii) An individual whose participation is likely to cause undue hardship to that individual.

(G) A TANF client 60 years of age or older.

(H) A noncitizen who is not authorized to work in the United States.

(I) An individual who is eligible for and receives supplemental security income (SSI) from the Social Security Administration.

(J) A caretaker relative (see OAR 461-001-0000) who is non-needy.

(K) An individual whose participation is likely to cause undue hardship or is contrary to the best interests of the dependent child or needy caretaker relative.

(L) Pregnant and participating more than 10 hours per week during the first two months of the third trimester.

(M) A VISTA volunteer.

(b) A caretaker relative of a dependent child or unborn who receives TANF program benefits is mandatory if the caretaker relative is in the same filing group with the dependent child or unborn (even if the caretaker relative is not in the TANF program benefit group under OAR 461-110-0750), unless the caretaker relative is otherwise exempt from participation under subsection (a) of this section.

(3) In the SNAP program:

(a) An individual is exempt from registration in an employment program and disqualification if the individual meets the requirements of one of the following paragraphs. The individual is:

(A) An individual with a physical or mental condition that prevents performance of any work.

(B) Responsible for the care of a child (see OAR 461-001-0000) in the filing group under 6 years of age.

(C) Responsible for the care of an individual in the household with a disability (see OAR 461-001-0015) that substantially reduces or eliminates the individual's ability to care for himself or herself.

(D) Enrolled at least half-time, as defined by the school, in any high school or equivalent program recognized by a school district or enrolled at least half-time in any school, training program, or institution of higher education. An individual remains exempt during normal periods of class attendance, vacation, and recess but no longer qualifies for the student exemption when a break in enrollment occurs due to graduation, suspension or expulsion, or when the student drops out of school or does not enroll in classes for the next regular school term (excluding summer term).

(E) Participating in a drug or alcohol treatment and rehabilitation program.

(F) Pregnant.

(G) Chronically homeless. For purposes of this rule, "chronically homeless" means the individual is currently homeless (see OAR 461-001-

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0015), unable to obtain employment due to being homeless, and one of the following applies:

- (i) The individual has been homeless for more than six months.
- (ii) The individual has been homeless more than one time in the last 12 months.

(iii) The individual states that the individual is unable to meet the basic necessities of everyday life.

(b) An individual is mandatory for registration in an employment program and the requirements in OAR 461-130-0315 if the individual meets the requirements of one of the following paragraphs. These individuals may be disqualified under OAR 461-130-0330 for failing to meet the requirements in OAR 461-130-0315. The individual is:

(A) Working a minimum of 30 hours a week or earning money equal to at least the federal minimum wage multiplied by 30 hours per week multiplied by 4.3 weeks. An individual who is self-employed with allowable costs must meet the earnings threshold after allowing the 50 percent deduction. This includes migrant and seasonal farm workers (see OAR 461-001-0015) who are under contract or similar agreement with an employer or crew chief to begin employment within 30 days.

(B) Receiving REF or TANF program benefits under Title IV of the Social Security Act.

(C) In receipt of unemployment insurance benefits, has completed an application for unemployment insurance benefits and is waiting for an initial decision on the claim, or is participating in at least one of the following Employment Department training programs:

(i) The Trade Readjustment Allowance (TRA) program serving displaced workers under the Trade Act.

(ii) The Training Unemployment Insurance (TUI) program.

(iii) The Self-Employment Insurance (SEA) program.

(iv) The Apprenticeship Program (APT).

(c) A mandatory client is an individual in the need group (see OAR 461-110-0630); who is 16 or 17 years of age and a primary person (see OAR 461-001-0015), or 18 years of age and older and 59 years of age and younger; and who is not exempt under subsection (a) of this section.

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.816, 412.006, 412.009, 412.014, 412.049
Stats. Implemented: ORS 409.010, 409.750, 411.060, 411.070, 411.816, 411.837, 412.006, 412.009, 412.014, 412.049

Hist.: AFS 17-1998, f. & cert. ef. 10-1-98; AFS 9-1999, f. & cert. ef. 7-1-99; AFS 12-2000(Temp), f. 5-1-00, cert. ef. 5-1-00 thru 9-30-00; AFS 25-2000, f. 9-29-00, cert. ef. 10-1-00; AFS 34-2000, f. 12-22-00, cert. ef. 1-1-01; SSP 14-2005, f. 9-30-05, cert. ef. 10-1-05; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 11-2007(Temp), f. & cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 23-2008, f. & cert. ef. 10-1-08; SSP 28-2009, f. & cert. ef. 10-1-09; SSP 41-2010, f. 12-30-10, cert. ef. 1-1-11; SSP 18-2011(Temp), f. & cert. ef. 7-1-11 thru 12-28-11; SSP 25-2011, f. 9-30-11, cert. ef. 10-1-11; SSP 39-2012(Temp), f. 12-28-12, cert. ef. 1-1-13 thru 6-30-13; SSP 8-2013, f. & cert. ef. 4-1-13; SSP 13-2013, f. & cert. ef. 7-1-13; SSP 24-2015, f. 9-29-15, cert. ef. 10-1-15; SSP 37-2015, f. 12-23-15, cert. ef. 1-1-16; SSP 1-2016(Temp), f. & cert. ef. 1-1-16 thru 6-28-16; SSP 15-2016, f. & cert. ef. 4-1-16; SSP 35-2016, f. 9-30-16, cert. ef. 10-1-16; SSP 38-2016(Temp), f. & cert. ef. 10-19-16 thru 4-16-17; SSP 45-2016, f. 12-20-16, cert. ef. 1-1-17; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-130-0327

Good Cause

In a Department program administered under OAR 461-130-0305 to 461-130-0335 and OAR 461-135-0085 and 461-135-0089:

(1) The Department does not require a client to provide verification of good cause if providing the verification would expose the client to increased risk of domestic violence (see OAR 461-001-0000).

(2) If in making a determination under this rule a client's physical or mental impairment is in question, the Department may require the client to provide documentation from a qualified and appropriate medical professional.

(3) A client is excused for good cause from a failure to comply with a program requirement, including an activity in a case plan (both terms defined in OAR 461-001-0025) in the following circumstances:

(a) Participation in a required activity in a case plan would have an adverse effect on or risk to the client's physical or mental health or would expose the client to increased risk of domestic violence (see OAR 461-001-0000).

(b) Except in the SNAP program, participation is likely to cause undue hardship for the dependent child (see OAR 461-001-0000) or the client.

(c) Appropriate child care, or day care for an individual in the household who has a disability (see OAR 461-001-0000 and 461-001-0015 as applicable) that substantially reduces or eliminates the individual's ability to care for himself or herself, cannot be obtained. "Appropriate child care" means that:

(A) Both the provider and the place where care is provided meet health, safety, and provider requirements as required in OAR 461-165-0180;

(B) The care accommodates the parent's work schedule; and

(C) The care meets the specific needs of the dependent child, such as age and special-needs requirements.

(d) The work attachment position or employment offered is vacant due to a strike, lockout, or other labor dispute.

(e) The work attachment position or employment requires the client to join a union, and the client has religious objections to unions.

(f) The client belongs to a union and the employment violates the conditions of the client's membership in the union.

(g) The wage for the client's current or potential job is:

(A) Less than applicable minimum wage; or

(B) If minimum wage laws do not apply, the wage (rate for piece work) is less than that normally paid for similar work.

(h) The client's prospective employer engages in employment practices that are illegally discriminatory on the basis of age, sex, race, religious or political belief, marital status, disability, sexual orientation, or ethnic origin.

(i) The client's participation in a required activity in a case plan would prevent or interfere with the client's participation in an activity of the Grande Ronde Tribe's NEW program.

(j) The client's failure to participate is due to a circumstance beyond his or her reasonable control.

(k) When the failure to comply is caused by an aspect of the client's disability, including the Department's failure to provide a reasonable accommodation.

(l) The client quits a job to accept another job with a monthly income at least equal to the monthly income of the first job.

(m) The Department determines there are no appropriate activities or necessary support services (see OAR 461-001-0025) to support an activity (see OAR 461-001-0025) in order for the client to participate.

(n) In the REF program:

(A) If the client has no means of transportation and would have to walk an unreasonable distance to meet the participation requirement. An "unreasonable distance" is a distance that requires a commute of more than two hours each day; or

(B) If the hours or nature of the job interferes with the client's religious observances, convictions, or beliefs.

(C) The service requirement or work site is in violation of applicable federal, state, or local health and safety standards.

(D) The daily hours of work and the weekly hours of work exceed those customary to the occupation.

(4) In the SNAP program, a client is excused from not accepting employment or for leaving a job under the following circumstances:

(a) The hours or nature of the job interferes with the client's religious observances, convictions, or beliefs.

(b) The client accepts employment or enrolls at least half-time in any recognized school, training program, or institution of higher education that requires the client to quit a job.

(c) A client accepts employment or enrolls in school in another county, requiring the benefit group (see OAR 461-110-0750) to move and the client to quit a job.

(d) A client less than 60 years of age resigns, and the employer recognizes the resignation as retirement.

(e) The client leaves a job to follow a type of employment that moves from one area to another, such as migrant labor or construction.

(f) The client accepts a job that, for reasons beyond the control of the client, does not materialize or results in fewer work hours or a lower wage than the client's previous job.

(g) Work demands or conditions, such as not being paid for work or not being paid on schedule, make employment unreasonable.

(h) The wage for the client's current or potential job is less than applicable minimum wage or, if minimum wage laws do not apply, the wage (rate for piece work) is less than that normally paid for similar work.

(i) The work schedule for the job in question does not conform to hours customary to the occupation or the hours worked each week are more than those customary to the occupation.

(j) The client is not obligated to accept a job during the first 30 days of registration for employment if the job is not in the client's field of experience.

(k) The client has no means of transportation and would have to walk an unreasonable distance to meet the participation requirement. An "unreasonable distance" is a distance that requires a commute of more than two

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hours each day. The client must make a good-faith effort to secure the needed transportation.

(l) Lack of adequate child care for a child who is six years of age or older and less than 12 years of age.

Stat. Auth.: ORS 409.050, 411.060, 411.816, 412.006, 412.009, 412.049
Stats. Implemented: ORS 409.010, 411.060, 411.117, 411.816, 412.006, 412.009, 412.049
Hist.: AFS 17-1998, f. & cert. ef. 10-1-98; AFS 9-1999, f. & cert. ef. 7-1-99; AFS 11-1999, f. & cert. ef. 10-1-99; AFS 25-2000, f. 9-29-00, cert. ef. 10-1-00; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 11-2007(Temp), f. & cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 41-2010, f. 12-30-10, cert. ef. 1-1-11; SSP 18-2011(Temp), f. & cert. ef. 7-1-11 thru 12-28-11; SSP 34-2011, f. 12-27-11, cert. ef. 12-29-11; SSP 15-2016, f. & cert. ef. 4-1-16; SSP 23-2016, f. 6-28-16, cert. ef. 7-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-135-0085

Requirement to Attend an Assessment or Evaluation, or Seek Medically Appropriate Treatment for Substance Abuse and Mental Health; Disqualification and Penalties; Pre-TANF, REF, TANF

In the Pre-TANF and TANF programs:

(1) For the purposes of this rule:

(a) "Assessment for substance abuse" means an assessment performed by an appropriate licensed professional with the purpose of discovering the presence of substance abuse.

(b) "Controlled substance" means a drug or its immediate precursor classified in Schedules I through V under the Controlled Substances Act, 21 U.S.C. 811 to 812, as modified under ORS 475.035. The use of the term "precursor" in this subsection does not control and is not controlled by the use of the term "precursor" in ORS 475.840 to 475.980. Alcohol is not a controlled substance.

(c) "Self-identified illegal use" means an individual states he or she illegally used a controlled substance within the previous 30 days. Illegal use does not include the use of a controlled substance pursuant to a valid prescription, or other use authorized by the Uniform Controlled Substances Act, ORS 475.005 to 475.285 and 475.840 to 475.980, the federal Controlled Substances Act, or other Federal law.

(2) When directed by the Department, an adult member or parenting teen in the need group (see OAR 461-110-0630), regardless of participation classification (see OAR 461-130-0310), must participate in:

(a) An assessment for substance abuse if:

(A) The individual has self-identified illegal use of a controlled substance; and

(B) The assessment is available and at no cost to the individual.

(b) Medically appropriate treatment for substance abuse if it is available and at no cost to the individual when:

(A) The individual reports a qualified and appropriate professional has diagnosed the individual with a substance abuse disorder within the previous twelve months; or

(B) An assessment resulted in a diagnosis requiring medically appropriate treatment for the individual to be successful in the workplace.

(3) When directed by the Department, an adult member or parenting teen in the need group (see OAR 461-110-0630), regardless of participation classification (see OAR 461-130-0310), must participate in medically appropriate treatment for mental health if it is available and at no cost to the individual when:

(a) The individual reports a qualified and appropriate professional has diagnosed the individual with a mental health disorder within the previous twelve months; or

(b) An evaluation resulted in a mental health diagnosis requiring medically appropriate treatment for the individual to be successful in the workplace.

(4) An individual is responsible for providing information needed by the Department to determine whether the individual had good cause (see OAR 461-130-0327) for failing to meet the requirements of this rule. If a medical condition must be evaluated in regard to the requirements of this rule, the Department will assist the client in obtaining a medical opinion from an appropriate medical professional.

(5) An individual who refuses to participate in a required assessment, evaluation, or the medically appropriate treatment required by this rule is subject to disqualification in accordance with this section and OAR 461-130-0330 only after the individual has had an opportunity to participate in the re-engagement process (see OAR 461-190-0231) including a determination by the Department of whether the individual had good cause for non-participation. The penalties are progressive and, once imposed, continue as long as the individual refuses to participate. If there is a change in the participation classification (see OAR 461-130-0310) of the individual the penalty ends and the individual must have an opportunity to participate in the re-engagement process under OAR 461-190-0231 before applying a disqualification.

Stat. Auth.: ORS 411.060, 411.070, 411.816, 412.006, 412.009, 412.049, 412.089
Stats. Implemented: ORS 411.060, 411.070, 411.816, 412.006, 412.009, 412.049, 412.089
Hist.: AFS 27-1996, f. 6-27-96, cert. ef. 7-1-96; AFS 36-1996, f. 10-31-96, cert. ef. 11-1-96; AFS 3-1997, f. 3-31-97, cert. ef. 4-1-97; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 15-1999, f. 11-30-99, cert. ef. 12-1-99; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 11-2007(Temp), f. & cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 26-2008, f. 12-31-08, cert. ef. 1-1-09; SSP 35-2016, f. 9-30-16, cert. ef. 10-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-135-0560

Fleeing Felon and Violators of Parole, Probation, and Post-Prison Supervision; GA, GAM, SNAP and TANF

(1) An individual is ineligible for the REF, REFM, SNAP, and TANF programs if the individual is a fleeing felon or in violation of parole, probation, or post-prison supervision.

(2) A fleeing felon is a person who knowingly flees to avoid either of the following:

(a) Prosecution or custody for a crime or attempt to commit a crime that is classified as a felony.

(b) Confinement following conviction of a felony.

(3) For purposes of this rule, the crime must be considered a felony under the laws of the place from which the person is fleeing or, in the case of New Jersey, a high misdemeanor under the law of New Jersey.

(4) An individual is in violation of parole, probation, or post-prison supervision if the Department receives a report of this violation from a local, state, or federal corrections agency or court responsible for supervision of the individual. The violation continues until the Department receives a report from the corrections agency or court that the individual is no longer in violation.

(5) If there is a pending arrest warrant for an individual for a felony, a high misdemeanor under the law of New Jersey, or a violation of parole, probation, or post-prison supervision, the individual is ineligible under this rule if the individual is aware of the arrest warrant and has not provided the Department with evidence on request that the individual made a substantial effort within his or her ability to resolve the warrant.

(6) An individual is no longer considered a fleeing felon if the arrest warrant is no longer pending or the individual provides the Department with evidence that the individual made a substantial effort within his or her ability to resolve the warrant.

Stat. Auth.: ORS 409.050, 411.060, 411.816, 412.049
Stats. Implemented: ORS 409.010, 411.060, 411.816, 412.049
Hist.: SSP 14-2006, f. 9-29-06, cert. ef. 10-1-06; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-135-0900

Specific Requirements; REF, REFM

(1) In addition to the eligibility (see OAR 461-001-0000) requirements in other rules in OAR chapter 461, an individual must meet all of the requirements in this rule to be eligible for the REF and REFM programs.

(2) An individual must meet the alien status requirements of OAR 461-120-0125, except a child (see OAR 461-001-0000) born in the United States to an individual in the REF or REFM program meets the alien status requirements for the REF and REFM programs as long as each parent (see OAR 461-001-0000) in the household group (see OAR 461-110-0210) meets the alien status requirements of OAR 461-120-0125.

(3) An individual is not eligible to receive REF and REFM program benefits if the individual is a full-time student of "higher education", unless such education is part of a cash assistance case plan. Any education or training allowable under an approved case plan must be less than one year in length. For the purposes of this rule, "higher education" means education that meets the requirements of one of the following subsections:

(a) Public and private universities and colleges and community colleges that offer degree programs regardless of whether a high school diploma is required for the program. However, GED, ABE, ESL, and high school equivalency programs at these institutions are not considered "higher education".

(b) Vocational, technical, business, and trade schools that normally require a high school diploma or equivalency certificate for enrollment in the curriculum or in a particular program at the institution. However, programs at those institutions that do not require the diploma or certificate are not considered "higher education".

(4) Eligibility for REF and REFM program benefits is limited to the first eight months in the United States:

(a) For an individual who meets the alien status requirements of OAR 461-120-0125(5)(a), (c), (d), or (e), the month that the individual enters the U.S. counts as the first month.

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(b) For an individual who meets the alien status requirements of OAR 461-120-0125(5)(b), (f), or (g), the month that the individual was granted the individual's status counts as the first month.

(c) For an individual who meets the alien status requirements of OAR 461-120-0125(5)(h):

(A) If the individual enters the U.S. with the special immigrant status, the month that the individual enters the U.S. counts as the first month.

(B) If the individual is granted special immigrant status after the individual has already entered the U.S., then the month in which the special immigrant status was granted counts as the first month.

(d) Months in the United States are counted as whole months. There is no prorating of months, except as described in OAR 461-193-0320.

(5) For an individual who meets the requirements of section (4) of this rule:

(a) When the individual resides in Clackamas, Multnomah, or Washington County:

(A) The individual is not eligible to receive REF, TANF, or TANF-related employment services through the Department. To receive benefits, the individual is required to participate in the Refugee Case Service Project (RCSP) program. This individual is referred to the individual's local resettlement agency to be enrolled in the RCSP program and receives all other Department services through the individual's local Department office.

(B) An individual who no longer meets the requirements of section (4) of this rule is no longer eligible to receive cash or case management services through the RCSP program. If this individual has been in the United States for 12 months or less, the individual is referred to the employment program that is available to RCSP participants through the contractor for employment services.

(b) When the individual resides in a county other than Clackamas, Multnomah, and Washington, the RCSP program is not available. The individual is served at the individual's local Department office.

(6) For REF and REFM, if an individual was originally resettled in Oregon through the federal refugee resettlement process, then the individual must provide the name of the local resettlement agency that resettled them.

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.404, 412.049, 414.685
Stats. Implemented: ORS 409.010, 409.050, 411.060, 411.070, 411.404, 411.878, 412.049, 414.685
Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90; AFS 20-1990, f. 8-17-90, cert. ef. 9-1-90; AFS 19-1991(Temp), f. & cert. ef. 10-1-91; AFS 4-1992, f. 2-28-92, cert. ef. 3-1-92; AFS 1-1993, f. & cert. ef. 2-1-93; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 40-1995, f. 12-26-95, cert. ef. 1-1-96; AFS 33-1996(Temp), f. 9-26-96, cert. ef. 10-1-96; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 19-1997, f. & cert. ef. 10-1-97; AFS 17-1998, f. & cert. ef. 10-1-98; AFS 15-1999, f. 11-30-99, cert. ef. 12-1-99; AFS 25-2000, f. 9-29-00, cert. ef. 10-1-00; AFS 22-2002, f. 12-31-02, cert. ef. 1-1-03; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 3-2008(Temp), f. & cert. ef. 1-30-08 thru 7-28-08; SSP 4-2008(Temp), f. & cert. ef. 2-22-08 thru 7-28-08; SSP 17-2008, f. & cert. ef. 7-1-08; SSP 9-2009(Temp), f. & cert. ef. 5-1-09 thru 10-28-09; SSP 28-2009, f. & cert. ef. 10-1-09; SSP 13-2010(Temp), f. & cert. ef. 5-17-10 thru 11-13-10; SSP 32-2010, f. & cert. ef. 10-1-10; SSP 13-2013, f. & cert. ef. 7-1-13; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 24-2015, f. 9-29-15, cert. ef. 10-1-15; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-135-0915 Specific Requirements; REF

In the REF program:

(1) To be eligible, an individual must be determined ineligible for TANF.

(2) As used in this rule:

(a) Except as provided otherwise in this section, "good cause" means a reasonable person of normal sensitivity, exercising ordinary common sense under similar circumstances, would have:

- (A) Quit work, including in anticipation of discharge;
- (B) Participated in behavior leading to the individual's discharge; or
- (C) Voluntarily reduced work hours.

(b) For an individual with a physical or mental impairment (as defined at 29 CFR 1630.2(h)), except as provided otherwise in subsection (c) of this section, "good cause" for leaving work means that a reasonable person with the characteristics and qualities of such individual under similar circumstances would have:

- (A) Quit work, including in anticipation of discharge;
- (B) Participated in behavior leading to the individual's discharge; or
- (C) Voluntarily reduced work hours.

(c) There is no "good cause" if the reason for separation from employment is a labor dispute.

(3) Except as provided otherwise under section (5) of this rule, a member of the need group (see OAR 461-110-0630) has a "violation" if that individual voluntarily quit employment or refused to accept an offer of

employment in which that member was hired to work 100 or more hours per month or worked or was scheduled to work 100 or more hours:

- (a) Within 30 days prior of the date of request for REF benefits; or
- (b) While receiving REF program benefits.

(4) A member of the need group is not eligible for REF program benefits:

(a) For the first violation (see section (3) of this rule), three payments months from the date that member of the need group was separated from their employment, voluntarily quit their employment, or refused to accept an offer of employment.

(b) For the second violation, six payments months from the date that member of the need group was separated from their employment, voluntarily quit their employment, or refused to accept an offer of employment.

(5) A need group does not have a violation based on section (3) of this rule if at least one of the following subsections applies:

(a) The member was unable to work due to a disability or medical condition documented by a qualified and appropriate professional, and which is expected to last for 30 days or more from the date of request for REF program benefits.

(b) The member was separated from employment for a reason the Department determines is good cause as defined in section (2) of this rule.

(c) The member was separated from employment as a result of a lay-off.

(d) The member was pregnant and experiencing medical complications due to the pregnancy that prohibit participation in activities of the program and are documented by a qualified and appropriate professional.

(e) The member was fleeing from or at risk of domestic violence (see OAR 461-001-0000).

Stat. Auth.: ORS 409.050, 411.060, 411.404
Stats. Implemented: ORS 409.010, 411.060, 411.404
Hist.: SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-135-0930 Medical Coverage for Refugees; REFM

(1) Benefits in the REFM program are the same medical coverage as any Medicaid or CHIP program, except the QMB and CAWEM programs.

(2) An individual is not required to meet the financial eligibility criteria for the REFM program if the individual meets all the non-financial eligibility criteria for the REFM program and the requirements of at least one of the following subsections:

(a) The individual loses eligibility for any Medicaid or CHIP program, except the QMB and CAWEM programs, due to income from employment.

(b) The individual loses eligibility for any Medicaid or CHIP program, except the QMB and CAWEM programs, and is currently receiving benefits in the REF program.

(c) The individual had medical assistance established in another state based on refugee status granted by the United States Citizenship and Immigration Services, and:

(A) Moved to Oregon and is still within the individual's first eight months in the United States; and

(B) Was found not eligible for any Medicaid or CHIP program.

(3) An individual who is determined eligible for the REFM program will maintain eligibility for the REFM program for the remainder of their first eight months in the United States even if the individual loses eligibility for the REF program due to having income equal to or over the countable (see OAR 461-001-0000) income and adjusted income (see OAR 461-001-0000) limits (see OAR 461-155-0030).

(4) An individual applying for the REFM program is not required to apply for or receive benefits in the REF program.

(5) Except for the QMB program, eligibility for all Medicaid and CHIP programs must be determined prior to determining eligibility for the REFM program.

(6) An REFM program benefit group (see OAR 461-110-0750) may continue to receive REFM program benefits for the remainder of the eight months, as stated in OAR 461-135-0900(4) of this rule, if:

(a) A newborn is born to a benefit group member while the benefit group member was receiving REFM program benefits; and

(b) The benefit group applied for Medicaid eligibility under MAGI rules (OAR 410-200) and was denied.

Stat. Auth.: ORS 409.050, 411.060, 411.404
Stats. Implemented: ORS 409.010, 411.060, 411.404

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 20-1990, f. 8-17-90, cert. ef. 9-1-90; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 13-1995, f. 6-29-95, cert. ef. 7-1-95; AFS 15-1999, f. 11-30-99, cert. ef. 12-1-99; SSP 23-2008, f. & cert. ef. 10-1-08; SSP 24-2013, f. & cert. ef. 10-1-13; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

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461-140-0040

Determining Availability of Income

(1) This rule describes the date income is considered available, what amount of income is considered available, and situations in which income is considered unavailable.

(2) Income is considered available the date it is received or the date a member of the financial group (see OAR 461-110-0530) has a legal right to the payment and the legal ability to make it available, whichever is earlier, except as follows:

(a) Income usually paid monthly or on some other regular payment schedule is considered available on the regular payment date if the date of payment is changed because of a holiday or weekend.

(b) Income withheld or diverted at the request of an individual is considered available on the date the income would have been paid without the withholding or diversion.

(c) An advance or draw of earned income is considered available on the date it is received.

(d) Income that is averaged, annualized, converted, or prorated is considered available throughout the period for which the calculation applies.

(e) A payment due to a member of the financial group, but paid to a third party for a household expense, is considered available when the third party receives the payment.

(f) In prospective budgeting, income is considered available in the month the income is expected to be received (see OAR 461-150-0020).

(g) In the OSIP, OSIPM, and QMB programs, except for self-employment (see OAR 461-145-0915), wages that are earned in one period of time but paid in another are considered available when they are received, such as a teacher who works for nine months but is paid over twelve.

(3) The following income is considered available even if not received:

(a) Deemed income.

(b) In the ERDC, REF, REFM, and TANF programs, the portion of a payment from an assistance program, such as public assistance, unemployment compensation, or Social Security, withheld to repay an overpayment.

(c) In the OSIPM and QMB programs, the portion of a payment from an assistance program (such as public assistance, unemployment compensation, or Social Security) withheld to repay an overpayment of the same source:

(A) If withheld prior to July 1, 2014.

(B) If withheld on or after July 1, 2014 and:

(i) No member of the financial group was receiving OSIP, OSIPM, or QMB during the period the benefit was overpaid; or

(ii) The withheld amount is not excluded under paragraph (5)(e)(A) of this rule.

(d) In the SNAP program, the portion of a payment from the TANF program counted as disqualifying income under OAR 461-145-0105.

(4) The amount of income considered available is the gross before deductions, such as garnishments, taxes, or other payroll deductions including flexible spending accounts.

(5) The following income is not considered available:

(a) Wages withheld by an employer in violation of the law.

(b) Income received by another individual who does not pay the client his or her share.

(c) Income received by a member of the financial group after the individual has left the household.

(d) Moneys withheld from or returned to the source of the income to repay an overpayment from that source unless the repayment is countable (see OAR 461-001-0000)--

(A) In the SNAP program, under OAR 461-145-0105.

(B) In the ERDC, REF, REFM, and TANF programs, under subsection (3)(b) of this rule.

(e) In the OSIP, OSIPM, and QMB programs:

(A) The portion of a payment from an assistance program, such as public assistance, unemployment compensation, or Social Security withheld on or after July 1, 2014 to repay an overpayment from the same source if at least one member of the financial group was receiving OSIP, OSIPM, or QMB during the period the benefit was overpaid. The amount considered unavailable cannot exceed the amount of the overpaid benefit previously counted in determining eligibility (see OAR 461-001-0000) for OSIP, OSIPM, or QMB.

(B) Monies withheld from or returned to a source of income, when the source is not an assistance program, to repay an overpayment of the same source.

(f) For an individual who is not self-employed, income required to be expended on an ongoing, monthly basis on an expense necessary to produce the income, such as supplies or rental of work space.

(g) Income received by the financial group but intended and used for the care of an individual not in the financial group as follows:

(A) If the income is intended both for an individual in the financial group and an individual not in the financial group, the portion of the income intended for the care of the individual not in the financial group is considered unavailable.

(B) If the portion intended for the care of the individual not in the financial group cannot readily be identified, the income is prorated evenly among the individuals for whom the income is intended. The prorated share intended for the care of the individual not in the financial group is then considered unavailable.

(h) In the ERDC, REF, REFM, SNAP, and TANF programs, income controlled by the client's abuser if the client is a victim of domestic violence (see OAR 461-001-0000), the client's abuser controls the income and will not make the money available to the filing group (see OAR 461-110-0310), and the abuser is not in the client's filing group.

(i) In the OSIP, OSIPM, and QMB programs, unearned income not received because a payment was reduced to cover expenses incurred by a member of the financial group to secure the payment. For example, if a retroactive check is received from a benefit program other than SSI, legal fees connected with the claim are subtracted. Or, if payment is received for damages received as a result of an accident the amount of legal, medical, or other expenses incurred by a member of the financial group to secure the payment are subtracted.

(6) The availability of lump-sum income (see OAR 461-001-0000) is covered in OAR 461-140-0120.

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.404, 411.816, 412.049, 413.085, 414.685
Stats. Implemented: ORS 409.010, 409.050, 411.060, 411.070, 411.117, 411.404, 411.706, 411.816, 412.049, 413.085, 414.685, 414.839
Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 20-1990, f. 8-17-90, cert. ef. 9-1-90; AFS 9-1991, f. 3-29-91, cert. ef. 4-1-91; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 17-1992, f. & cert. ef. 7-1-92; AFS 19-1993, f. & cert. ef. 10-1-93; AFS 22-1995, f. 9-20-95, cert. ef. 10-1-95; AFS 3-1997, f. 3-31-97, cert. ef. 4-1-97; AFS 25-1998, f. 12-28-98, cert. ef. 1-1-99; AFS 10-2000, f. 3-31-00, cert. ef. 4-1-00; AFS 17-2000, f. 6-28-00, cert. ef. 7-1-00; AFS 13-2002, f. & cert. ef. 10-1-02; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 1-2005(Temp), f. & cert. ef. 2-1-05 thru 6-30-05; SSP 4-2005, f. & cert. ef. 4-1-05; SSP 5-2005(Temp), f. & cert. ef. 4-1-05 thru 6-30-05; SSP 7-2005, f. & cert. ef. 7-1-05; SSP 10-2006, f. 6-30-06, cert. ef. 7-1-06; SSP 4-2007, f. 3-30-07, cert. ef. 4-1-07; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 8-2008, f. & cert. ef. 4-1-08; SSP 17-2008, f. & cert. ef. 7-1-08; SSP 5-2009, f. & cert. ef. 4-1-09; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 15-2014, f. & cert. ef. 7-1-14; SSP 23-2014(Temp), f. & cert. ef. 9-19-14 thru 3-18-15; SSP 13-2015, f. & cert. ef. 3-19-15; SSP 25-2015, f. 9-29-15, cert. ef. 10-1-15; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-140-0210

Asset Transfer; General Information and Timelines

(1) OAR 461-140-0210 to 461-140-0300 regulate the effect of a transfer of an asset on a client.

(2) If an asset is transferred during the periods of time listed in section (4) or (5) of this rule and if the transfer is made in whole or in part for the purpose of establishing or maintaining eligibility for benefits:

(a) In the REF and REFM programs, the filing group is disqualified if a member of the financial group (see OAR 461-110-0530) transferred the asset while that member was in the U.S. and the asset was located in the U.S.

(b) In the REF, REFM, SNAP, and TANF programs, the filing group is disqualified if:-

(A) The asset was a resource; and

(B) A member of the financial group transferred the resource.

(c) In the OSIP and OSIPM programs, a client in a nonstandard living arrangement (see OAR 461-001-0000) is disqualified if the client or the spouse of the client transferred the asset.

(3) In all programs except the ERDC program, clients in financial groups whose members transfer an asset covered under section (2) of this rule within the time periods listed in section (4) or (5) of this rule must report the transfer as soon as practicable and must provide information requested by the Department concerning the transfer.

(4) In the REF, REFM, SNAP, and TANF programs, a transfer of an asset may be disqualifying if the transfer occurs:

(a) In the REF and REFM programs, during the three years preceding the date of request (see OAR 461-115-0030), if that the member of the financial group was residing in the U.S.

(b) In the SNAP program, during the three months preceding the filing date or during a certification period (see OAR 461-001-0000) if the asset was a resource.

(c) In the TANF program, during the three years preceding the date of request (see OAR 461-115-0030) if the asset was a resource.

ADMINISTRATIVE RULES

(5) In the OSIP and OSIPM programs, for a client in a nonstandard living arrangement, a transfer of an asset may be disqualifying if the transfer occurs:

(a) On or before June 30, 2006 and as described in one of the following paragraphs:

(A) On or after the date that is 60 months prior to the date of request: for assets that are transferred without compensation equal to or greater than fair market value from a revocable trust (see OAR 461-145-0540(8)(c)).

(B) On or after the date that is 60 months prior to the date of request: for assets that are transferred without compensation equal to or greater than fair market value to an irrevocable trust (see OAR 461-145-0540(9)(a)).

(C) On or after the date that is 60 months prior to the date of request: when there is a change in circumstances that makes assets in an irrevocable trust unavailable to the client (see OAR 461-145-0540(9)(d)).

(D) On or after the date that is 36 months prior to the date of request: for assets transferred without compensation equal to or greater than fair market value from an irrevocable trust (see OAR 461-145-0540(9)(b) and (c)).

(E) On or after the date that is 36 months prior to the date of request: for other asset transfers made without compensation equal to or greater than fair market value.

(b) On or after:

(A) July 1, 2006; and

(B) The date that is 60 months prior to the date of request.

(6) The duration of the period of disqualification or ineligibility is set out in OAR 461-140-0260 to 461-140-0300.

Stat. Auth.: ORS 411.060, 411.404, 411.710, 411.816, 412.049

Stats. Implemented: ORS 411.060, 411.404, 411.710, 411.816, 412.049

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 20-1992, f. 7-31-92, cert. ef. 8-1-92; AFS 12-1993, f. & cert. ef. 7-1-93; AFS 18-1993(Temp), f. & cert. ef. 10-1-93; AFS 29-1993, f. 12-30-93, cert. ef. 1-1-94; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 6-1994, f. & cert. ef. 4-1-94; AFS 13-1994, f. & cert. ef. 7-1-94; AFS 10-2000, f. 3-31-00, cert. ef. 4-1-00; AFS 6-2001, f. 3-30-01, cert. ef. 4-1-01; AFS 5-2002, f. & cert. ef. 4-1-02; SSP 22-2004, f. & cert. ef. 10-1-04; SSP 10-2006, f. 6-30-06, cert. ef. 7-1-06; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 27-2013, f. & cert. ef. 10-1-13; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-145-0005

Agent Orange Disability Benefits

(1) For all programs except OSIP, OSIPM, and QMB:

(a) Benefits from the Agent Orange Settlement Fund made by Aetna Life and Casualty for settling Agent Orange disability claims are excluded.

(b) Payments made under the Agent Orange Act of 1991, and issued by the U.S. Treasury through the Department of Veterans Affairs, are counted as unearned income.

(2) For OSIP, OSIPM, and QMB, all payments made under the Agent Orange Act of 1991 or from the Agent Orange Settlement Fund or any other fund established pursuant to the settlement in the Agent Orange product liability litigation are excluded.

Stat. Auth.: ORS 411.060, 411.070, 411.083, 411.404, 411.816, 412.049

Stats. Implemented: ORS 411.060, 411.070, 411.083, 411.404, 411.816, 412.049

Hist.: AFS 20-1990, f. 8-17-90, cert. ef. 9-1-90; AFS 2-1992, f. 1-30-92, cert. ef. 2-1-92; SSP 4-2007, f. 3-30-07, cert. ef. 4-1-07; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 44-2016, f. 12-7-16, cert. ef. 1-1-17; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-145-0035

Black Lung Benefits

Black Lung Benefits paid to miners or their survivors under the provisions of the Federal Mine Safety and Health Act are counted as unearned income.

Stat. Auth.: ORS 411.060, 411.070, 411.083, 411.404, 411.816, 412.049

Stats. Implemented: ORS 411.060, 411.070, 411.083, 411.404, 411.816, 412.049

Hist.: SSP 44-2016, f. 12-7-16, cert. ef. 1-1-17; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-145-0088

Corporations and Business Entities; Income and Resources; Not OSIP, OSIPM, or QMB

(1) The value of stocks or other ownership interest in a corporation is a resource.

(2) Assets of the corporation essential to the employment of an individual are excluded. For instance, if the corporation owns equipment used by the individual to produce income for the corporation, the equipment is an excluded resource. If an individual must own stock in the corporation as a condition of working for the corporation, the stock is an excluded resource.

(3) Except as provided in OAR 461-140-0040(2), income of a corporation is not income of an individual with an ownership interest in the corporation until the income is distributed to the individual.

(4) In the SNAP program:

(a) Income from business entities and corporations is treated as follows:

(A) If an individual is actively working in a corporation, the income is treated as earned income.

(B) If an individual is actively working in an unincorporated business entity, refer to OAR 461-145-0910 to determine if the income is treated as earned or as self-employment.

(C) If an individual is no longer actively working to produce the income, the income is treated as unearned.

(b) Income from a limited liability company is treated as follows:

(A) If an individual is a member or a manager member, the income is treated as self-employment income.

(B) If an individual is a manager but not a member, the income is treated as earned income.

(c) For an expenditure by a business entity or corporation that benefits a principal such as a car or housing payment:

(A) The payment is considered available when the expenditure is made.

(B) For purposes of this rule, a "principal" means an individual with significant authority in a business entity or corporation, including a sole proprietor, a self-employed person (see OAR 461-145-0910), a partner in a partnership, a member or manager of a limited liability company, and an officer or principal stockholder of a closely held corporation.

(C) See OAR 461-145-0130, 461-145-0280, and 461-145-0470 for the treatment of earned in-kind income.

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.816, 412.049

Stats. Implemented: ORS 409.050, 409.050, 411.060, 411.070, 411.816, 412.049

Hist.: AFS 11-1999, f. & cert. ef. 10-1-99; SSP 10-2006, f. 6-30-06, cert. ef. 7-1-06; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 11-2015, f. 3-13-15, cert. ef. 4-1-15; SSP 25-2015, f. 9-29-15, cert. ef. 10-1-15; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-145-0300

Workforce Investment Act

Payments to clients made under Title I-B of the Workforce Investment Act (see OAR 589-020-0210) are treated as provided in this rule.

(1) Need-based (stipend) payments are treated as unearned income except as follows:

(a) In the SNAP program, these payments are excluded.

(b) The payments are excluded in the REF, REFM, and TANF programs for clients under the age of 19 years, or under the age of 20 years if the client is a caretaker relative (see OAR 461-001-0000).

(2) OJT (On-the-Job Training) and work experience payments are counted as earned income, except as follows:

(a) The payments are excluded in the REF, REFM, and TANF programs for clients under the age of 18 years, or under the age of 20 years if the client is a caretaker relative (see OAR 461-001-0000);

(b) The payments are excluded for an SNAP client who is:

(A) Under the age of 19 years and under the control of an adult member of the filing group (see OAR 461-110-0370); or

(B) Receiving OJT payments under the Summer Youth Employment and Training Program.

(3) A support service payment for an item already covered by the benefits of the benefit group (see OAR 461-110-0750) is treated as unearned income. All other support service payments (including lunch payments and clothing allowances) are excluded.

(4) A reimbursement (see OAR 461-001-0000) is treated as provided in OAR 461-145-0440.

[Publication.: Publications referenced are available from the agency.]

Stat. Auth.: ORS 411.060, 411.070, 411.404, 411.816, 412.049

Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.816, 412.049

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90; AFS 8-1992, f. & cert. ef. 4-1-92; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 24-1997, f. 12-31-97, cert. ef. 1-1-98; AFS 9-2001, f. & cert. ef. 6-1-01; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 38-2015, f. 12-25-15, cert. ef. 1-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-145-0365

National and Community Services Trust Act (NCSTA), including AmeriCorps (other than AmeriCorps VISTA)

(1) The National and Community Service Trust Act (NCSTA) of 1993 (P.L. 103-82) amended the National and Community Service Act (NCSA) of 1990 (P.L. 101-610) that established a Corporation for National and Community Service. The Corporation administers national service programs providing living allowance, educational award, child care, and in-kind benefits.

ADMINISTRATIVE RULES

(2) NCSTA payments, including AmeriCorps (except AmeriCorps VISTA which is covered in OAR 461-145-0110) are treated as follows:

- (a) The living allowance (stipend benefits) is excluded.
- (b) Educational award and in-kind benefits are excluded.
- (c) The child care allowance is treated as follows:

(A) For clients in the ERDC, REF, REFM, and TANF programs who are eligible for direct provider payment of child care, the allowance is counted as unearned income. The allowance is excluded only if the client already pays the provider. The provider may be paid for only the costs not covered by the allowance.

(B) For clients in the SNAP program who are receiving a child care deduction, the deduction is allowed only for the costs not covered by the allowance.

(C) In all other programs, the allowance is excluded.

Stat. Auth.: ORS 411.060, 411.070, 411.404, 411.816, 412.049
Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.816, 412.049
Hist.: AFS 2-1994, f. & cert. ef. 2-1-94; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 9-1999, f. & cert. ef. 7-1-99; SSP 7-2005, f. & cert. ef. 7-1-05; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 38-2015, f. 12-25-15, cert. ef. 1-1-16; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-145-0430

Real Property Excluded under an Interim Assistance Agreement; REF, REFM, and TANF

(1) This rule applies in the REF, REFM, and TANF programs when the equity value (see OAR 461-001-0000) of real property (see OAR 461-001-0000) puts the financial group (see OAR 461-110-0530) over the resource limit.

(2) When section (1) of this rule applies:

(a) The equity value of real property is excluded for a maximum of nine months if the financial group signs and complies with the terms of the program's Interim Assistance Agreement.

(b) After the ninth month, the equity value of the property is counted as a resource.

(3) To comply with the terms of the program's Interim Assistance Agreement, the financial group must agree to do all the following:

(a) Make a good-faith effort to sell the property; and

(b) Use the proceeds from the sale of the property to reimburse the Department for all benefits paid under the terms of the program's Interim Assistance Agreement. The reimbursement will not exceed the net proceeds of the sale of the property.

(4) The amount of benefits paid while the financial group has excess real property is an overpayment if the financial group fails to notify the Department that the group has the property.

(5) The amount of the benefits paid while the financial group has excess real property is an overpayment up to the net proceeds of the sale of the property if the property sells and the financial group does not repay the Department under the terms of the program's Interim Assistance Agreement.

Stat. Auth.: ORS 411.060, 411.070, 411.083, 412.049
Stats. Implemented: ORS 411.060, 411.070, 411.083, 412.049
Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 38-2015, f. 12-25-15, cert. ef. 1-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-145-0505

Spousal Support

(1) In the ERDC, OSIP, OSIPM, and QMB programs, spousal support (see OAR 461-001-0000) is counted as unearned income.

(2) In the SNAP program:

(a) Payments made by the separated or divorced spouse to a third party for the benefit of the financial group are excluded, except that a payment for which there is a legal obligation to pay to a member of the financial group that is made to a third party for shelter expenses of a member of the financial group is counted as unearned income.

(b) Spousal support is counted as unearned income.

(3) In the REF, REFM, and TANF programs:

(a) For clients not working under a TANF JOBS Plus agreement, if the spousal support is received by the Department or Department of Justice and if continued receipt of the spousal support is reasonably anticipated, the spousal support is:

- (A) Counted as unearned income when determining eligibility; and
 - (B) Excluded when determining the REF and TANF benefit amount.
- (b) For clients working under a TANF JOBS Plus agreement:
- (A) Spousal support is excluded in determining countable income.

(B) Spousal support is excluded when calculating the TANF portion of the benefit equivalency standards.

(C) Spousal support received by the client is counted as unearned income when calculating the wage supplement.

(c) Other spousal support payments (not covered under subsections (a) or (b) of this section) are counted as unearned income.

Stat. Auth.: ORS 411.060, 411.070, 411.404, 411.816, 412.049

Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.700, 411.816, 412.049
Hist.: AFS 8-1992, f. & cert. ef. 4-1-92; AFS 12-1993, f. & cert. ef. 7-1-93; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 23-1994, f. 9-29-94, cert. ef. 10-1-94; AFS 29-1994, f. 12-29-94, cert. ef. 1-1-95; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 9-1997, f. & cert. ef. 7-1-97; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 8-2008, f. & cert. ef. 4-1-08; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-145-0930

Self-Employment; Determination of Countable Income

This rule explains how different programs exclude and deduct costs from self-employment gross sales and receipts.

(1) The Department initially determines gross sales and receipts, including mileage reimbursements, minus any returns and allowances (before excluding or deducting any costs).

(2) In the ERDC program, if an individual claims an excludable cost permitted under OAR 461-145-0920, at least 50 percent of gross self-employment income is excluded. The maximum exclusion is the total excludable cost under OAR 461-145-0920.

(3) In the OSIP, OSIPM, and QMB programs, all costs permitted under OAR 461-145-0920 are excluded.

(4) In the REF and REFM programs, no costs are subtracted (excluded).

(5) In the SNAP program, if there are any costs permitted under OAR 461-145-0920, there is a deduction of 50 percent of gross self-employment income.

(6) In the TANF program:

(a) For an individual participating in the microenterprise (see OAR 461-001-0000) component of the JOBS program, costs are excluded according to OAR 461-145-0920 and general accounting principles, as applied by a certified public accountant, bookkeeping firm, or other entity approved by the Department.

(b) For all other individuals, no costs are subtracted (excluded).

Stat. Auth.: ORS 409.050, 411.060, 411.083, 411.404, 411.706, 411.816, 412.006, 412.009, 412.049 & 414.826
Stats. Implemented: ORS 409.050, 411.060, 411.083, 411.404, 411.706, 411.816, 412.006, 412.009, 412.049 & 414.826
Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 20-1990, f. 8-17-90, cert. ef. 9-1-90; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 4-1998, f. 2-25-98, cert. ef. 3-1-98; AFS 5-1998(Temp), f. & cert. ef. 3-11-98 thru 5-31-98; AFS 8-1998, f. 4-28-98, cert. ef. 5-1-98; AFS 10-1998, f. 6-29-98, cert. ef. 7-1-98; AFS 24-1998(Temp), f. 11-30-98, cert. ef. 12-1-98 thru 3-31-99; AFS 25-1998, f. 12-28-98, cert. ef. 1-1-99; AFS 2-1999, f. 3-26-99, cert. ef. 4-1-99; SSP 23-2003, f. & cert. ef. 10-1-03; SSP 14-2005, f. 9-30-05, cert. ef. 10-1-05; SSP 4-2007, f. 3-30-07, cert. ef. 4-1-07; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 32-2010, f. & cert. ef. 10-1-10; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 11-2015, f. 3-13-15, cert. ef. 4-1-15; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 44-2016, f. 12-7-16, cert. ef. 1-1-17; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-155-0225

Income Standard; REFM

In the REFM program, the adjusted income standard is 200 percent of the federal poverty level, as listed in OAR 461-155-0180(5), based on the size of the need group (see OAR 461-110-0630).

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.404 & 414.231

Stats. Implemented: ORS 409.010, 411.060, 411.070, 411.404, 414.231
Hist.: AFS 2-1994, f. & cert. ef. 2-1-94; AFS 6-1994, f. & cert. ef. 4-1-94; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 16-1996, f. 4-29-96, cert. ef. 5-1-96; AFS 5-1997, f. 4-30-97, cert. ef. 5-1-97; AFS 4-1998, f. 2-25-98, cert. ef. 3-1-98; AFS 5-1998(Temp), f. & cert. ef. 3-11-98 thru 5-31-98; AFS 6-1998(Temp), f. 3-30-98, cert. ef. 4-1-98 thru 5-31-98; AFS 8-1998, f. 4-28-98, cert. ef. 5-1-98; AFS 10-1998, f. 6-29-98, cert. ef. 7-1-98; AFS 3-1999, f. 3-31-99, cert. ef. 4-1-99; AFS 10-2000, f. 3-31-00, cert. ef. 4-1-00; AFS 6-2001, f. 3-30-01, cert. ef. 4-1-01; AFS 5-2002, f. & cert. ef. 4-1-02; AFS 13-2002, f. & cert. ef. 10-1-02; SSP 1-2003, f. 1-31-03, cert. ef. 2-1-03; SSP 2-2003(Temp), f. & cert. ef. 2-7-03 thru 6-30-03; SSP 7-2003, f. & cert. ef. 4-1-03; SSP 2-2004(Temp), f. & cert. ef. 2-13-04 thru 3-31-04; SSP 8-2004, f. & cert. ef. 4-1-04; SSP 22-2004, f. & cert. ef. 10-1-04; SSP 2-2005, f. & cert. ef. 2-18-05; SSP 1-2006, f. & cert. ef. 1-24-06; SSP 10-2006, f. 6-30-06, cert. ef. 7-1-06; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 4-2007, f. 3-30-07, cert. ef. 4-1-07; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 29-2009(Temp), f. & cert. ef. 10-1-09 thru 3-30-10; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 25-2010(Temp), f. & cert. ef. 8-16-10 thru 2-12-11; SSP 31-2010(Temp), f. & cert. ef. 9-15-10 thru 2-12-11; SSP 41-2010, f. 12-30-10, cert. ef. 1-1-11; SSP 22-2013(Temp), f. & cert. ef. 8-23-13 thru 2-19-14; SSP 29-2013(Temp), f. & cert. ef. 10-1-13 thru 2-19-14; SSP 37-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

ADMINISTRATIVE RULES

461-160-0015

Resource Limits

(1) In the EA program, all countable (see OAR 461-001-0000) resources must be used to meet the emergent need.

(2) In the ERDC program, the limit is \$1,000.00.

(3) In the OSIP and OSIPM programs, the resource limit is as follows:

(a) \$2,000 for a one-person need group (see OAR 461-110-0630) and \$3,000 for a two-person need group.

(b) \$5,000 for the OSIP-EPD and OSIPM-EPD programs (see OAR 461-001-0035 and 461-145-0025 for funds that may be excluded as approved accounts).

(4) In the QMB-BAS, QMB-SMB, and QMB-SMF programs, all resources are excluded.

(5) In the QMB-DW program, the resource limit is \$4,000 for a one-person need group and \$6,000 for a need group containing two or more individuals.

(6) In the REF and REFM programs, the resource limit is:

(a) \$2,500 for any of the following:

(A) A new REF or REFM applicant for benefits.

(B) In the REF program, the need group that has at least one mandatory (see OAR 461-130-0305) participant in an employment program who is:

(i) Receiving REF and not progressing in a required activity of an open case plan; or

(ii) Serving a current employment program disqualification (see OAR 461-130-0330).

(b) \$10,000 for an REF need group not covered under subsection (a) of this section.

(7) In the SNAP program, the resource limit is:

(a) \$3,250 for a financial group (see OAR 461-110-0530) with at least one member who is elderly (see OAR 461-001-0015) or an individual with a disability (see OAR 461-001-0015).

(b) \$2,250 for all other financial groups.

(8) In the TANF program, the resource limit is:

(a) \$2,500 for any of the following:

(A) A new TANF applicant for benefits.

(B) TANF need group that does not have at least one caretaker relative (see OAR 461-001-0000) or parent (see OAR 461-001-0000) who is receiving TANF.

(C) TANF need group that has at least one JOBS participant who is:

(i) Receiving TANF and not progressing in an activity (see OAR 461-001-0025) of an open JOBS case plan (see OAR 461-001-0025); or

(ii) Serving a current JOBS disqualification (see OAR 461-130-0330).

(b) \$10,000 for a need group not covered under subsection (a) of this section.

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.083, 411.404, 411.706, 411.816, 412.049, 413.085, 414.685

Stats. Implemented: ORS 409.010, 411.060, 411.070, 411.083, 411.404, 411.704, 411.706, 411.816, 411.837, 412.049, 413.085, 414.685, 414.839

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 20-1991, f. & cert. ef. 10-1-91; AFS 20-1992, f. 7-31-92, cert. ef. 8-1-92; AFS 12-1993, f. & cert. ef. 7-1-93; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 23-1994, f. 9-29-94, cert. ef. 10-1-94; AFS 29-1994, f. 12-29-94, cert. ef. 1-1-95; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 13-1995, f. 6-29-95, cert. ef. 7-1-95; AFS 22-1995, f. 9-20-95, cert. ef. 10-1-95; AFS 27-1996, f. 6-27-96, cert. ef. 7-1-96; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 3-1997, f. 3-31-97, cert. ef. 4-1-97; AFS 10-1998, f. 6-29-98, cert. ef. 7-1-98; AFS 1-1999(Temp), f. & cert. ef. 2-1-99 thru 7-31-99; AFS 7-1999, f. 4-27-99, cert. ef. 5-1-99; AFS 16-1999, f. 12-29-99, cert. ef. 1-1-00; AFS 27-2001, f. 12-21-01, cert. ef. 1-1-02; AFS 13-2002, f. & cert. ef. 10-1-02; SSP 1-2003, f. 1-31-03, cert. ef. 2-1-03; SSP 17-2003, f. & cert. ef. 7-1-03; SSP 29-2003(Temp), f. 10-31-03, cert. ef. 11-1-03 thru 3-31-04; SSP 6-2004, f. & cert. ef. 4-1-04; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 22-2004, f. & cert. ef. 10-1-04; SSP 6-2006, f. 3-31-06, cert. ef. 4-1-06; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 29-2009(Temp), f. & cert. ef. 10-1-09 thru 3-30-10; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-1; SSP 39-2009(Temp), f. 12-31-09, cert. ef. 1-1-10 thru 6-30-10; SSP 18-2010, f. & cert. ef. 7-1-10; SSP 42-2010(Temp), f. 12-30-10, cert. ef. 1-1-11 thru 6-30-11; SSP 10-2011, f. 3-31-11, cert. ef. 4-1-11; SSP 26-2011(Temp), f. 9-30-11, cert. ef. 10-1-11 thru 3-29-12; SSP 35-2011, f. 12-27-11, cert. ef. 1-1-12; SSP 37-2012, f. 12-28-12, cert. ef. 1-1-13; SSP 39-2012(Temp), f. 12-28-12, cert. ef. 1-1-13 thru 6-30-13; SSP 8-2013, f. & cert. ef. 4-1-13; SSP 27-2013, f. & cert. ef. 10-1-13; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 37-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 26-2014(Temp), f. & cert. ef. 10-1-14 thru 3-30-15; SSP 4-2015, f. & cert. ef. 1-1-15; SSP 35-2015, f. 12-23-15, cert. ef. 1-1-16; SSP 23-2016, f. 6-28-16, cert. ef. 7-1-16; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 34-2016, f. 9-30-16, cert. ef. 10-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-160-0100

How Income Affects Eligibility and Benefits; REF, SFPSS, TANF

(1) In the REF and TANF programs, countable (see OAR 461-001-0000) income and adjusted income (see OAR 461-001-0000) are compared to the standards in OAR 461-155-0030 to determine eligibility (see OAR 461-001-0000) and benefit amount.

(2) This section applies to filing groups that do not include an ineligible noncitizen with income. For filing groups that include an ineligible noncitizen with income, see section (3) of this rule.

(a) For individuals not eligible for the Exit Limit Increase (ELI) Standards in OAR 461-155-0030(3), compare the countable income of the financial group (see OAR 461-110-0530) to the applicable Countable Income Limit Standard for the need group (see OAR 461-110-0630) in OAR 461-155-0030(2).

(A) If countable income equals or exceeds the applicable standard, the need group is not eligible.

(B) If countable income is less than the applicable standard, compare the adjusted income of the financial group to the Adjusted Income Limit Standard for the need group in OAR 461-155-0030(4):

(i) If the adjusted income equals or exceeds the applicable standard, the filing group is not eligible.

(ii) If the adjusted income is less than the applicable standard, determine the benefit amount as provided in subsection (c) of this section.

(b) For individuals eligible for the ELI in OAR 461-155-0030(3), compare the countable income of the financial group to the ELI for the need group in OAR 461-155-0030(3).

(A) If countable income equals or exceeds the applicable ELI standard, the need group is not eligible.

(B) If countable income is less than the applicable ELI standard, determine the benefit amount as provided in subsection (c) of this section.

(c) Subtract adjusted income from the applicable Payment Standard for the benefit group (see OAR 461-110-0750) in OAR 461-155-0030(5). The remainder is the benefit amount except as provided in OAR 461-165-0060.

(3) Income of an ineligible noncitizen in a financial group is prorated as provided in subsection (d) of this section. Income received by all other members of the financial group who meet the citizenship requirements in OAR 461-120-0110 is not prorated. The combined countable income is treated as provided in this section:

(a) For individuals not eligible for the ELI in OAR 461-155-0030(3), compare the countable income of the financial group to the applicable Countable Income Limit Standard for the need group in OAR 461-155-0030(2).

(A) If countable income equals or exceeds the applicable standard, the filing group is not eligible.

(B) If countable income is less than the applicable standard, compare the adjusted income of the financial group to the applicable Adjusted Income Limit Standard for the need group in OAR 461-155-0030(4):

(i) If adjusted income equals or exceeds the applicable standard, the filing group is not eligible.

(ii) If adjusted income is less than the applicable standard, determine the benefit amount as provided in subsection (c) of this section.

(b) For individuals eligible for the ELI in OAR 461-155-0030(3), compare the countable income of the financial group to the ELI for the need group in OAR 461-155-0030(3).

(A) If countable income equals or exceeds the ELI, the need group is not eligible.

(B) If countable income is less than the ELI, determine the benefit amount as provided in subsection (c) of this section.

(c) Subtract the total of the prorated income (see subsection (d) of this section) of all ineligible noncitizens and adjusted income of all other members of the filing group from the applicable Payment Standard in OAR 461-155-0030(5) for the benefit group. The remainder is the benefit amount except as provided in OAR 461-165-0060.

(d) Prorate adjusted income used in subsection (c) of this section that belongs to an ineligible noncitizen by dividing it by the number in the need group and multiplying it by the number in the benefit group.

(4) In the REFM program:

(a) "Adjusted income" is defined as countable income minus the earned income deduction and all medical-related expenses incurred during the month of application.

(b) Only the "adjusted income" in subsection (a) of this section is compared to the standards in OAR 461-155-0225 to determine eligibility (see OAR 461-001-0000).

Stat. Auth.: ORS 411.060, 411.070, 411.404, 411.816, 412.006, 412.009, 412.014, 412.049
Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.816, 412.006, 412.009, 412.014, 412.049

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 20-1992, f. 7-31-92, cert. ef. 8-1-92; AFS 16-1993, f. & cert. ef. 9-1-93; AFS 23-1994, f. 9-29-94, cert. ef. 10-1-94; AFS 13-1995, f. 6-29-95, cert. ef. 7-1-95; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 6-2001, f. 3-30-01, cert. ef. 4-1-01; SSP 26-2008, f. 12-31-08, cert. ef. 1-1-09; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 15-2016, f. & cert. ef. 4-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

ADMINISTRATIVE RULES

461-160-0160

Earned Income Deduction; REF, REFM, and TANF

(1) In the REF and REFM programs, the earned income deduction authorized in this division of rules is allowed for each person in the financial group who has earned income. The earned income deduction is 50 percent of the client's gross earned income including self-employment income.

(2) In the TANF program:

(a) For a self-employed client participating in the microenterprise component of the JOBS program, the earned income deduction for income earned in the microenterprise is 50 percent of the client's countable income calculated pursuant to OAR 461-145-0920 and 461-145-0930.

(b) For all other income, the earned income deduction is 50 percent of the client's gross earned income, including self-employment income.

Stat. Auth.: ORS 409.050, 411.060, 412.049

Stats. Implemented: ORS 409.010, 411.060, 412.049

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90; AFS 20-1990, f. 8-17-90, cert. ef. 9-1-90; AFS 30-1990, f. 12-31-90, cert. ef. 1-1-91; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 15-1991(Temp), f. & cert. ef. 8-16-91; AFS 20-1991, f. & cert. ef. 10-1-91; AFS 8-1992, f. & cert. ef. 4-1-92; AFS 20-1992, f. 7-31-92, cert. ef. 8-1-92; AFS 16-1993, f. & cert. ef. 9-1-93; AFS 10-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 13-1995, f. 6-29-95, cert. ef. 7-1-95; AFS 36-1996, f. 10-31-96, cert. ef. 11-1-96; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 10-2002, f. & cert. ef. 7-1-02; SSP 23-2003, f. & cert. ef. 10-1-03; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-165-0030

Concurrent and Duplicate Program Benefits

(1) Except as noted in this rule, an individual may not receive benefits from the Department of the same type (that is, cash, medical, or SNAP benefits) for the same period as a member of two or more different benefit groups (see OAR 461-110-0750) or from two or more separate programs. Except as allowed in subsection (g) of this section, this provision includes a prohibition against an individual receiving TANF concurrently with another cash assistance program funded under Title IV-E of the Social Security Act.

(a) An individual may receive EA, HSP, and TA-DVS benefits and cash payments from other programs for the same time period.

(b) If a GA recipient becomes eligible for the TANF program, the GA recipient may not receive a TANF cash payment for themselves in the month a GA cash payment was received.

(c) A TANF recipient may receive ERDC for a child (see OAR 461-001-0000) in the household group (see OAR 461-110-0210), but who may not be included in the TANF filing group (see OAR 461-110-0310 and 461-110-0330).

(d) A child who is a member of an ERDC benefit group may also be a member of one of the following benefit groups:

(A) An OSIP-AB benefit group.

(B) A TANF benefit group when living with a nonneedy caretaker relative (see OAR 461-001-0000), if the caretaker relative is not the parent (see OAR 461-001-0000) of the child.

(C) A TANF benefit group when living with a needy caretaker relative receiving SSI.

(e) An individual in the SNAP program who leaves a filing group (see OAR 461-110-0310 and 461-110-0370) that includes an individual who abused them and enters a domestic violence shelter (see OAR 461-001-0000) or safe home (see OAR 461-001-0000) for victims of domestic violence (see OAR 461-001-0000) may receive SNAP benefits twice during the month the individual enters the domestic violence shelter or safe home.

(f) A QMB recipient may also receive medical benefits from OSIPM, REFM, MAGI Parent or Other Caretaker Relative, or MAGI Pregnant Woman.

(g) An individual may receive Chafee (see OAR 413-030-0400 to 413-030-0455) and TANF benefits during the same time period. As of January 1, 2013, receipt of both Chafee and TANF benefits will not result in an overpayment.

(h) An individual receiving Employment Payments (see OAR 461-001-0025 and 461-135-1270) who becomes eligible for TANF in the same month may receive both benefits in the same month.

(i) An individual receiving JPI (see OAR 461-135-1260) who becomes eligible for Pre-TANF or TANF in the same month may receive both benefits in the same month.

(2) An individual may not receive benefits of the same type (that is, cash, medical, or SNAP benefits) for the same period from both Oregon and another state or tribal food distribution program, except as follows:

(a) Medical benefits may be authorized for an eligible individual if the individual's provider refuses to submit a bill to the Medicaid agency of another state and the individual would not otherwise receive medical care.

(b) Cash benefits may be authorized for an individual in the Pre-TANF program if benefits from another state will end by the last day of the month in which the individual applied for TANF.

(3) In the SNAP program, each individual who has been included as a member of the filing group in Oregon or another state is subject to all of the restrictions in section (2) of this rule.

(4) An REF or TANF filing group may not receive REF or TANF benefits during the same month that an individual in that group was enrolled in or received assistance from the Office of Refugee Resettlement Matching Grant Program.

Stat. Auth.: ORS 411.060, 411.070, 411.404, 411.704, 411.706, 411.816, 412.049, 412.124, 414.025, 414.826, 414.839

Stats. Implemented: ORS 411.060, 411.070, 411.117, 411.404, 411.704, 411.706, 411.816, 412.049, 412.124, 414.025, 414.826, 414.839

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 30-1990, f. 12-31-90, cert. ef. 1-1-91; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 9-1999, f. & cert. ef. 7-1-99; AFS 14-1999, f. & cert. ef. 11-1-99; AFS 25-2000, f. 9-29-00, cert. ef. 10-1-00; SSP 1-2003, f. 1-31-03, cert. ef. 2-1-03; SSP 7-2003, f. & cert. ef. 4-1-03; SSP 33-2003, f. 12-31-03, cert. ef. 1-4-04; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 10-2006, f. 6-30-06, cert. ef. 7-1-06; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 11-2007(Temp), f. & cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 26-2008, f. 12-31-08, cert. ef. 1-1-09; SSP 39-2009(Temp), f. 12-31-09, cert. ef. 1-1-10 thru 6-30-10; SSP 18-2010, f. & cert. ef. 7-1-10; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 29-2014(Temp), f. & cert. ef. 11-3-14 thru 5-1-15; SSP 12-2015, f. 3-16-15, cert. ef. 4-1-15; SSP 38-2015, f. 12-25-15, cert. ef. 1-1-16; SSP 15-2016, f. & cert. ef. 4-1-16; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-175-0220

Notice Situation; Disqualification

(1) If a benefit group (see OAR 461-110-0750) or individual is disqualified for a SNAP voluntary job quit or for failure to apply for or provide an SSN, pursue assets, cooperate in the JOBS, JOBS Plus, REF Employment Program, or a SNAP Employment and Training program, or assist the state's efforts to collect support, the Department sends the following type of notice:

(a) If benefits are reduced or closed because of the disqualification:

(A) A continuing benefit decision notice (see OAR 461-001-0000) is used when changes are reported on the Interim Change Report form.

(B) A timely continuing benefit decision notice (see OAR 461-001-0000) is used when changes are not reported on the Interim Change Report form.

(b) If benefits are opened without the disqualified individual in the benefit group or if the entire benefit group is denied assistance, a basic decision notice (see OAR 461-001-0000) is used.

(2) For a JOBS, JOBS Plus, REF Employment Program, or a SNAP Employment and Training disqualification, and for a SNAP voluntary job quit by an individual receiving SNAP benefits, the notice includes the following information:

(a) The client action that resulted in disqualification.

(b) The length of the minimum disqualification period.

(c) The reduced benefit amount.

(d) How the client may end the disqualification after the minimum period.

(3) For an ABAWD disqualified due to the SNAP time limit in OAR 461-135-0520, the notice includes the following information:

(a) The action that resulted in the disqualification.

(b) The reduced amount when there are other eligible persons in the filing group.

(c) How the individual may regain eligibility for SNAP benefits.

(4) For a voluntary job quit by an individual applying for SNAP benefits, the notice includes the following information:

(a) The action that resulted in the disqualification; and

(b) The length of the disqualification period.

(5) For an IPV disqualification:

(a) In all programs except the SNAP program, the Department does not send a notice of termination to an individual disqualified for an IPV after a court order, a final order from an administrative hearing, or a signed waiver (see OAR 461-175-0200(9)(c)(C) and OAR 461-195-0621(2)) that imposes the disqualification.

(b) In the SNAP program:

(A) After an individual signs an IPV waiver, the Department sends a basic decision notice to terminate benefits. If the Department receives a timely request for a hearing, the contested case hearing addresses the issues set out in OAR 461-195-0611(3).

(B) The Department does not send a notice of termination to an individual disqualified for an IPV after a court order or a final order from an administrative hearing.

ADMINISTRATIVE RULES

(c) In all programs, the Department sends a continuing benefit decision notice when benefits for other individuals in the benefit group are closed or reduced because an individual in the benefit group is disqualified for an IPV.

(6) For a disqualification due to being a fleeing felon or in violation of parole, probation, or post-prison supervision (under OAR 461-135-0560):

(a) A basic decision notice is required if benefits are opened without the disqualified individual in the benefit group or if the entire filing group is denied benefits.

(b) A timely continuing benefit decision notice is required if an individual in the benefit group is disqualified.

(7) The notice situation for a disqualification due to a transfer of assets is covered in OAR 461-175-0310.

Stat. Auth.: 411.060, 411.070, 411.404, 411.816, 412.014, 412.049
Stats. Implemented: 411.060, 411.070, 411.404, 411.816, 412.014, 412.049
Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 23-1990, f. 9-28-90, cert. ef. 10-1-90; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 19-1993, f. & cert. ef. 10-1-93; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 23-1994, f. 9-29-94, cert. ef. 10-1-94; AFS 21-1995, f. 9-20-95, cert. ef. 10-1-95; AFS 36-1996, f. 10-31-96, cert. ef. 11-1-96; AFS 3-1997, f. 3-31-97, cert. ef. 4-1-97; SSP 20-2003, f. & cert. ef. 8-15-03; SSP 10-2006, f. 6-30-06, cert. ef. 7-1-06; SSP 14-2006, f. 9-29-06, cert. ef. 10-1-06; SSP 26-2008, f. 12-31-08, cert. ef. 1-1-09; SSP 5-2010, f. & cert. ef. 4-1-10; SSP 2-2016, f. & cert. ef. 1-1-16; SSP 23-2016, f. 6-28-16, cert. ef. 7-1-16; SSP 35-2016, f. 9-30-16, cert. ef. 10-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-190-0231

Re-engagement; JOBS, Pre-TANF, REF, SFPSS, TA-DVS

In the JOBS, Pre-TANF, REF, SFPSS, and TA-DVS programs:

(1) When aspects of the case plan have not been met or are in dispute, the re-engagement process provides an opportunity for the client and the Department to:

(a) Review and re-evaluate the case plan and other information gathered related to the client's strengths and barriers;

(b) Identify participation expectations, concerns related to participation, and completion of activities in the case plan;

(c) Consider whether the case plan is still appropriate;

(d) Develop options that support full participation; and

(e) Revise the case plan if appropriate.

(2) The re-engagement process is intended to assist the Department in identifying whether the client is unable to fully participate or whether the client is or has been willfully non-compliant.

(a) In the JOBS, Pre-TANF, REF, and SFPSS programs, if:

(A) A screening for physical or mental health needs, substance abuse, domestic violence (see OAR 461-001-0000), or learning needs has not been completed, the re-engagement process requires an additional opportunity to initiate those screenings for potential barriers to participation not previously identified.

(B) A screening described in paragraph (A) of this subsection indicates follow-up is needed. The re-engagement process requires an opportunity to initiate the follow-up for potential barriers to participation not previously identified.

(b) Circumstances that require a determination of whether good cause (see OAR 461-130-0327) exists include disagreements about the case plan, irregular attendance at activities, missed appointments, failure to participate in a component of the case plan, and (in the JOBS program) refusal to accept or maintain employment.

(c) In the TA-DVS program, there are no participation requirements. The re-engagement process is intended to provide an opportunity to address problems with the case plan (see OAR 461-135-1230) and an opportunity to modify the case plan.

(3) In the JOBS and REF programs, the re-engagement process must include:

(a) Assessing the risk of harm posed to the children in the filing group by the reduction in aid payments and taking steps to ameliorate the risk.

(b) An attempted home visit.

(4) The client, the Department, or the Department's contractor may initiate the re-engagement process. The re-engagement process is not a required activity. The Department may not disqualify clients based on their failure to participate in the re-engagement process.

(5) The client or Department may invite partner agencies, Department contractors, persons currently working with the client, or other individuals who have information relevant to the re-engagement process to any appointments or meetings scheduled as part of the process.

(6) The re-engagement process ends when any of the following subsections applies:

(a) The Department and the client agree to a modified case plan.

(b) Efforts to re-engage are unsuccessful.

(c) In the JOBS, Pre-TANF, and REF programs:

(A) Except in the REF program, the Department has determined the client has met federally required participation rates (see OAR 461-001-0025);

(B) The Department has determined the client is exempt from JOBS and REF Employment Program participation and disqualification under OAR 461-130-0310(2)(a).

(C) The client clearly indicates an intent not to participate in the re-engagement process;

(D) The client is willfully non-compliant and has the ability to be fully engaged;

(E) The client has no barriers or refuses to take appropriate steps to address identified barriers to participation in the program; or

(F) A decision is made by the Department that a client did not have good cause for not complying with a requirement of the JOBS or REF employment programs, and the client is able but unwilling to address the issue through activities that address barriers or through case plan modifications.

(d) In the SFPSS program, after a review team consisting of SFPSS program staff including the case manager, disability analyst, and appropriate medical professional determine the client does not have good cause for non-cooperation and no accommodations or modifications can be made to support the client being re-engaged.

(7) The re-engagement process must end unsuccessfully before the Department begins the process of disqualifying a client for a failure to comply with a requirement of the JOBS or REF employment programs.

(8) In the SFPSS program, when the re-engagement process ends unsuccessfully, a client removed from the program is returned to the TANF program.

(9) For a participant in the Parents as Scholars (PAS) component of the JOBS program, when re-engagement ends unsuccessfully, PAS is ended pursuant to OAR 461-190-0199.

Stat. Auth.: ORS 411.060, 412.009, 412.014, 412.049
Stats. Implemented: ORS 411.060, 411.117, 412.009, 412.014, 412.049
Hist.: AFS 23-1990, f. 9-28-90, cert. ef. 10-1-90; AFS 9-1991, f. 3-29-91, cert. ef. 4-1-91; AFS 8-1992, f. & cert. ef. 4-1-92; AFS 19-1993, f. & cert. ef. 10-1-93; AFS 21-1995, f. 9-20-95, cert. ef. 10-1-95; AFS 26-1996, f. 6-27-96, cert. ef. 7-1-96; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 18-1998, f. & cert. ef. 10-2-98; SSP 11-2007(Temp), f. & cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 23-2008, f. & cert. ef. 10-1-08; SSP 23-2016, f. 6-28-16, cert. ef. 7-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-193-0031

Eligibility Requirements; Refugee Case Services Project (RCSP)

An individual must participate in the Refugee Case Services Project if the individual meets all of the following:

(1) Meet all REF or TANF program eligibility (see OAR 461-001-0000) requirements.

(2) Meet the alien status requirements under OAR 461-120-0125(5).

(3) Reside in Clackamas, Multnomah, or Washington County.

(4) Have resided in the U.S. for eight months or less. The first month is, for an individual meeting the alien status requirements of OAR 461-120-0125:

(a) Subsections (5)(a), (c), (d), or (e), the month the individual entered the United States.

(b) Subsections (5)(b), (f), or (g), the month the individual was granted the individual's immigration status.

(c) Subsection (5)(h):

(A) If the individual entered the U.S. with special immigrant status, the month the individual entered the United States.

(B) If the individual is granted special immigrant status after entering the U.S., the month in which the special immigrant status was granted.

(d) Each month in the U.S. is counted as a whole month; there is no prorating of any month.

(5) Be 64 years old or younger.

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.116, 412.006, 412.049
Stats. Implemented: ORS 409.010, 409.050, 411.060, 411.070, 411.116, 412.006, 412.049
Hist.: AFS 9-1995, f. 3-30-95, cert. ef. 4-1-95; AFS 24-1995, f. 9-20-95, cert. ef. 10-1-95; AFS 34-1996, f. 9-26-96, cert. ef. 10-1-96; AFS 19-1997, f. & cert. ef. 10-1-97; AFS 13-2001, f. 6-29-01, cert. ef. 7-1-01; SSP 7-2009, f. & cert. ef. 4-1-09; SSP 9-2009(Temp), f. & cert. ef. 5-1-09 thru 10-28-09; SSP 28-2009, f. & cert. ef. 10-1-09; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 30-2012, f. 9-28-12, cert. ef. 10-1-12; SSP 11-2015, f. 3-13-15, cert. ef. 4-1-15; SSP 35-2016, f. 9-30-16, cert. ef. 10-1-16; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

461-195-0601

Intentional Program Violations; Defined

(1) In the child care programs, a provider commits an intentional program violation (IPV) by intentionally making a false or misleading statement or misrepresenting, concealing, or withholding information related to his or her request to be eligible for a child care payment under OAR 461-165-0180 or a claim for a child care payment.

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(2) In the SNAP program:

(a) An individual commits an intentional program violation by:

(A) Making a false or misleading statement or misrepresenting, concealing or withholding a fact relating to the use, presentation, transfer, acquisition, receipt, possession, or trafficking (see OAR 461-195-0601(2)(b)) of SNAP benefits; or

(B) Committing any act that constitutes a violation of the Food Stamp Act, the SNAP program regulations, or any state statute relating to the use, presentation, transfer, acquisition, receipt, possession, or trafficking of SNAP benefits.

(b) "Trafficking" means any of the following:

(A) The buying, selling, stealing, or other exchange of SNAP benefits for cash or consideration other than eligible food, either directly or indirectly, in complicity or collusion with others or acting alone.

(B) The exchange of firearms, ammunition, explosives, or controlled substances (as defined in section 802 of title 21, United States Code), for SNAP benefits.

(C) Purchasing a product with SNAP benefits that has a container return deposit with the intent of obtaining cash by intentionally discarding the product and returning the container for the deposit amount.

(D) Purchasing a product with SNAP benefits with the intent of obtaining cash or consideration other than eligible food by intentionally reselling the product purchased with SNAP benefits.

(E) Intentionally purchasing products originally purchased with SNAP benefits in exchange for cash or consideration other than eligible food.

(3) In the SFPSS program, an individual commits an intentional program violation by intentionally:

(a) Making a false or misleading statement or misrepresenting, concealing, or withholding a fact for the purpose of establishing or maintaining eligibility (see OAR 461-001-0000) for SFPSS or increasing, or preventing a reduction in, the amount of the SFPSS grant; or

(b) Committing any act intended to mislead or to conceal or withhold information for the purpose of establishing or maintaining eligibility for SFPSS or increasing, or preventing a reduction in, the amount of the SFPSS grant.

(4) In the REF, REFM, and TANF programs, an individual commits an intentional program violation by intentionally:

(a) Making a false or misleading statement or misrepresenting, concealing, or withholding a fact for the purpose of establishing or maintaining eligibility for the REF, REFM, or TANF programs, or increasing or preventing a reduction in the amount of the REF or TANF grant; or

(b) Committing any act intended to mislead or to conceal or withhold information for the purpose of establishing or maintaining eligibility for the REF, REFM, or TANF programs, or increasing or preventing a reduction in the amount of the REF or TANF grant.

Stat. Auth.: ORS 411.060, 411.660, 411.816, 412.014, 412.049

Stats. Implemented: ORS 411.060, 411.630, 411.635, 411.660, 411.816, 412.014, 412.049

Hist.: AFS 3-2000, f. 1-31-00, cert. ef. 2-1-00; SSP 8-2004, f. & cert. ef. 4-1-04; SSP 11-2007(Temp), f. & cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 7-2013(Temp), f. & cert. ef. 3-25-13 thru 9-21-13; SSP 23-2013, f. & cert. ef. 9-20-13; SSP 19-2015, f. & cert. ef. 7-1-15; SSP 10-2017, f. 3-24-17, cert. ef. 4-1-17

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Rule Caption: Disregarding unearned shelter-in-kind income in APD medical programs

Adm. Order No.: SSP 11-2017(Temp)

Filed with Sec. of State: 3-28-2017

Certified to be Effective: 4-1-17 thru 9-27-17

Notice Publication Date:

Rules Amended: 461-145-0470, 461-155-0020, 461-155-0250, 461-155-0660, 461-155-0670

Rules Suspended: 461-155-0300

Subject: OAR 461-145-0470 about shelter-in-kind income is being amended to exclude unearned shelter-in-kind in the OSIP, OSIPM, and QMB programs. OAR 461-155-0020 about pro-rated standards-adjusted number in household is being amended to remove OSIP, OSIPM, and QMB programs. OAR 461-155-0250 about OSIPM income and payment standards is being amended to remove the OSIPM items of need chart, and the adjusted number in household labels and the pro-rated standards from the adjusted income standards chart (section (3)). OAR 461-155-0300 about shelter-in-kind standards is being suspended. OAR 461-155-0660 about special need, accommodation allowance and OAR 461-155-0670 about special need, special diet allowance are being amended to remove references

to the shelter and food standards in 461-155-0250 (which are removed) and refer to the actual dollar amounts instead. These rule changes implement the federally-approved state plan amendment that has an effective date of April 1, 2017 and will support client eligibility.

The rule text showing changes is available at http://www.dhs.state.or.us/policy/selfsufficiency/ar_temporary.htm.

Rules Coordinator: Robert Trachtenberg—(503) 947-5290

461-145-0470

Shelter-in-Kind Income

(1) Except as provided in section (2) of this rule:

(a) In the ERDC program, shelter-in-kind (see OAR 461-001-0000) payments are excluded, except earned shelter-in-kind is not excluded in the ERDC program.

(b) In the REF, REFM, and TANF programs, except for child support (see OAR 461-145-0080 and 461-145-0280), shelter-in-kind payments are excluded.

(c) In the SNAP program, shelter-in-kind housing and utility payments are excluded (see OAR 461-145-0130 about exclusion of earned in-kind income), except an expenditure by a business entity for shelter costs (see OAR 461-001-0000) of a principal (see OAR 461-145-0088) is counted as income.

(d) In the OSIP, OSIPM, and QMB programs:

(A) Unearned shelter-in-kind income is excluded.

(B) Earned shelter-in-kind income is treated as follows:

(i) If shelter is provided for services related to the employer's trade or business and acceptance of the shelter is a condition of employment, the shelter-in-kind income is treated in accordance with paragraph (A) of this subsection.

(ii) Except as provided in subparagraph (i) of this paragraph, the fair market value (see OAR 461-001-0000) of the shelter is counted as earned income.

(2) A payment for which there is a legal obligation to pay to a member of the financial group (see OAR 461-110-0530) that is made to a third party for shelter expenses of a member of the financial group is counted as unearned income.

Stat. Auth.: ORS 409.050, 411.060, 411.083, 411.404, 411.816, 412.014, 412.049

Stats. Implemented: ORS 411.060, 411.083, 411.404, 411.700, 411.816, 412.014, 412.049, 414.042

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1990, f. 3-30-90, cert. ef. 4-1-90; AFS 30-1990, f. 12-31-90, cert. ef. 1-1-91; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 19-1993, f. & cert. ef. 10-1-93; AFS 2-1994, f. & cert. ef. 2-1-94; AFS 13-1994, f. & cert. ef. 7-1-94; AFS 23-1994, f. 9-29-94, cert. ef. 10-1-94; AFS 13-1995, f. 6-29-95, cert. ef. 7-1-95; AFS 9-1997, f. & cert. ef. 7-1-97; AFS 3-2000, f. 1-31-00, cert. ef. 2-1-00; AFS 13-2002, f. & cert. ef. 10-1-02; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 7-2007, f. 6-29-07, cert. ef. 7-1-07; SSP 8-2008, f. & cert. ef. 4-1-08; SSP 23-2008, f. & cert. ef. 10-1-08; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 11-2017(Temp), f. 3-28-17, cert. ef. 4-1-17 thru 9-27-17

461-155-0020

Prorated Standards, Adjusted Number in Household; Not OSIP, OSIPM, QMB

(1) Prorated standards are used only in the no-adult tables.

(2) This rule does not apply to the OSIP, OSIPM, and QMB programs.

(3) In the TANF program, the no-adult tables are used when there are no adults in the TANF benefit group (see OAR 461-110-0750).

(4) In all programs except the TANF program, prorated standards are based on the number of people in the need group, compared to the adjusted number in the household group (see OAR 461-110-0210). The adjusted number in the household is determined by taking the total number of individuals in the household, minus the following individuals unless they are included in the need group:

(a) Unborns.

(b) Individuals receiving long-term care (see OAR 461-001-0000) or home and community-based care (see OAR 461-001-0030).

(c) Foster children.

(d) Children receiving adoption assistance.

(e) Live-in attendants who live with the filing group (see OAR 461-110-0310) solely to provide necessary medical or housekeeping services and are paid to provide these services.

(f) Landlords and tenants. A landlord-tenant relationship exists if one person pays another at fair market value (see OAR 461-001-0000) for housing and if:

(A) The filing group lives independently from the landlord or tenant;

(B) The filing group has and uses sleeping, bathroom, and kitchen facilities that are separate from the landlord or tenant; and

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(C) If bathroom or kitchen facilities are shared, the housing must be a commercial establishment that provides either room, board, or both for fair market value compensation.

(5) In the TANF program, prorated standards are based on the number of people in the benefit group (see OAR 461-110-0750), compared to the adjusted number in the household group (see OAR 461-110-0210). The adjusted number in the household is determined by taking the total number of individuals in the household, minus the following individuals unless they are included in the benefit group:

(a) Unborns.

(b) Individuals receiving long-term care (see OAR 461-001-0000) or home and community-based care (see OAR 461-001-0030).

(c) Foster children.

(d) Children receiving adoption assistance.

(e) Live-in attendants who live with the filing group (see OAR 461-110-0310 and 461-110-0330) solely to provide necessary medical or house-keeping services and are paid to provide these services.

(f) Landlords and tenants. A landlord-tenant relationship exists if one person pays another at fair market value (see OAR 461-001-0000) for housing and if:

(A) The filing group lives independently from the landlord or tenant;

(B) The filing group has and uses sleeping, bathroom, and kitchen facilities that are separate from the landlord or tenant; and

(C) If bathroom or kitchen facilities are shared, the housing must be a commercial establishment that provides either room, board, or both for fair market value compensation.

Stat. Auth.: ORS 409.050, 411.060, 411.070, 411.402, 411.404, 411.706, 412.049, 413.085, 414.685

Stats. Implemented: ORS 409.010, 409.050, 411.060, 411.070, 411.402, 411.404, 411.706, 412.049, 413.085, 414.685

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 19-1993, f. & cert. ef. 10-1-93; AFS 6-1994, f. & cert. ef. 4-1-94; AFS 13-1995, f. 6-29-95, cert. ef. 7-1-95; AFS 17-1998, f. & cert. ef. 10-1-98; SSP 33-2003, f. 12-31-03, cert. ef. 1-4-04; SSP 24-2004, f. 12-30-04, cert. ef. 1-1-05; SSP 23-2008, f. & cert. ef. 10-1-08; SSP 17-2013(Temp), f. & cert. ef. 7-1-13 thru 12-28-13; SSP 26-2013, f. & cert. ef. 10-1-13; SSP 21-2015, f. & cert. ef. 7-1-15; SSP 15-2016, f. & cert. ef. 4-1-16; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 11-2017(Temp), f. 3-28-17, cert. ef. 4-1-17 thru 9-27-17

461-155-0250

Income and Payment Standard; OSIPM

(1) An individual who is assumed eligible per OAR 461-135-0010 is presumed to meet the income limits for the OSIPM program.

(2) An individual in a nonstandard living arrangement (see OAR 461-001-0000) meeting the requirements of OAR 461-135-0750, who is not assumed eligible and does not meet the income standards set out in section (4) of this rule, must have countable (see OAR 461-001-0000) income that is equal to or less than 300 percent of the full SSI standard for a single individual (except OSIPM-EPD) or have established a qualifying trust as specified in OAR 461-145-0540(10)(c).

(3) An individual, other than one identified in section (1), (2), or (5) of this rule, must have adjusted income below the standard in this section. [Table not included. See ED. NOTE.]

(4) In the OSIPM (except OSIPM-EPD) program, an individual in a nursing facility or an ICF-MR is allowed the following amounts for clothing and personal incidentals:

(a) For an individual who receives a VA pension based on unreimbursed medical expenses (UME), \$90 is allowed.

(b) For all other individuals, \$60.18 is allowed.

(c) For an individual identified in subsection (b) of this section with countable income (including any SSI) that is less than \$60.18, the payment standard is equal to the difference between the individual's countable income (including any SSI) and \$60.18. For the purposes of this subsection, countable income includes income that would otherwise be countable for an individual who is assumed eligible under OAR 461-135-0010.

(5) In the OSIPM-EPD program, the adjusted earned income limit is 250 percent of the federal poverty level for a family of one.

[ED. NOTE: Tables referenced are available from the agency.]

Stat. Auth.: ORS 411.060, 411.070, 411.404, 411.704 & 411.706

Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.704 & 411.706

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 16-1990, f. 6-29-90, cert. ef. 7-1-90; AFS 30-1990, f. 12-31-90, cert. ef. 1-1-91; AFS 25-1991, f. 12-30-91, cert. ef. 1-1-92; AFS 35-1992, f. 12-31-92, cert. ef. 1-1-93; AFS 29-1993, f. 12-30-93, cert. ef. 1-1-94; AFS 29-1994, f. 12-29-94, cert. ef. 1-1-95; AFS 41-1995, f. 12-26-95, cert. ef. 1-1-96; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 24-1997, f. 12-31-97, cert. ef. 1-1-98; AFS 25-1998, f. 12-28-98, cert. ef. 1-1-99; AFS 1-1999(Temp), f. & cert. ef. 2-1-99 thru 7-31-99; AFS 3-1999, f. 3-31-99, cert. ef. 4-1-99; AFS 16-1999, f. 12-29-99, cert. ef. 1-1-00; AFS 10-2000, f. 3-31-00, cert. ef. 4-1-00; AFS 34-2000, f. 12-22-00, cert. ef. 1-1-01; AFS 6-2001, f. 3-30-01, cert. ef. 4-1-01; AFS 27-2001, f. 12-21-01, cert. ef. 1-1-02; AFS 5-2002, f. & cert. ef. 4-1-02; AFS 22-2002, f. 12-31-02, cert. ef. 1-1-03; SSP 7-2003, f. & cert. ef. 4-1-03; SSP 10-2003(Temp), f. & cert. ef. 5-1-03 thru 9-30-03; SSP 26-2003, f. & cert. ef. 10-1-03; SSP 33-2003, f. 12-31-03, cert. ef. 1-4-04; SSP 8-2004, f. & cert. ef. 4-1-04; SSP 24-2004, f. 12-30-04, cert. ef.

1-1-05; SSP 4-2005, f. & cert. ef. 4-1-05; SSP 19-2005, f. 12-30-05, cert. ef. 1-1-06; SSP 4-2006, f. & cert. ef. 3-1-06; SSP 6-2006, f. 3-31-06, cert. ef. 4-1-06; SSP 10-2006, f. 6-30-06, cert. ef. 7-1-06; SSP 14-2006, f. 9-29-06, cert. ef. 10-1-06; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 2-2007(Temp), f. & cert. ef. 3-1-07 thru 3-31-07; Suspended by SSP 3-2007(Temp), f. & cert. ef. 3-9-07 thru 6-30-07; SSP 4-2007, f. 3-30-07, cert. ef. 4-1-07; Suspended by SSP 5-2007(Temp), f. 3-30-07, cert. ef. 4-1-07 thru 6-30-07; SSP 7-2007, f. 6-29-07, cert. ef. 7-1-07; SSP 10-2007, f. & cert. ef. 10-1-07; SSP 14-2007, f. 12-31-07, cert. ef. 1-1-08; SSP 6-2008(Temp), f. 2-29-08, cert. ef. 3-1-08 thru 8-28-08; SSP 17-2008, f. & cert. ef. 7-1-08; SSP 23-2008, f. & cert. ef. 10-1-08; SSP 26-2008, f. 12-31-08, cert. ef. 1-1-09; SSP 2-2009(Temp), f. 2-27-09, cert. ef. 3-1-09 thru 8-28-09; SSP 13-2009, f. & cert. ef. 7-1-09; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 35-2011, f. 12-27-11, cert. ef. 1-1-12; SSP 5-2012(Temp), f. & cert. ef. 2-1-12 thru 7-30-12; SSP 25-2012, f. 6-29-12, cert. ef. 7-1-12; SSP 39-2012(Temp), f. 12-28-12, cert. ef. 1-1-13 thru 6-30-13; SSP 37-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 17-2014(Temp), f. & cert. ef. 7-1-14 thru 12-28-14; SSP 24-2014, f. & cert. ef. 10-1-14; SSP 4-2015, f. & cert. ef. 1-1-15; SSP 44-2016, f. 12-7-16, cert. ef. 1-1-17; SSP 11-2017(Temp), f. 3-28-17, cert. ef. 4-1-17 thru 9-27-17

461-155-0300

Shelter-in-Kind Standard

In the OSIP, OSIPM, and QMB programs, the Shelter-in-Kind Standard is:

(1) For a single individual:

(a) Living alone, \$451 for total shelter or \$271 for housing costs only.

(b) Living with others, \$209 for total shelter or \$125 for housing costs only.

(2) For a couple:

(a) Living alone, \$559 for total shelter or \$335 for housing costs only.

(b) Living with others, \$207 for total shelter or \$124 for housing costs only.

Stat. Auth.: ORS 411.060 & 411.070

Stats. Implemented: ORS 411.060 & 411.070

Hist.: AFS 16-1990, f. 6-29-90, cert. ef. 7-1-90; AFS 30-1990, f. 12-31-90, cert. ef. 1-1-91; AFS 12-1991(Temp), f. & cert. ef. 7-1-91; AFS 16-1991, f. 8-27-91, cert. ef. 9-1-91; AFS 25-1991, f. & cert. ef. 1-1-92; AFS 1-1993, f. & cert. ef. 2-1-93; AFS 17-1993(Temp), f. & cert. ef. 9-1-93; AFS 29-1993, f. 12-30-93, cert. ef. 1-1-94; AFS 13-1994, f. & cert. ef. 7-1-94; AFS 29-1994, f. 12-29-94, cert. ef. 1-1-95; AFS 40-1995, f. 12-26-95, cert. ef. 1-1-96; AFS 42-1996, f. 12-31-96, cert. ef. 1-1-97; AFS 24-1997, f. 12-31-97, cert. ef. 1-1-98; AFS 25-1998, f. 12-28-98, cert. ef. 1-1-99; AFS 11-1999, f. & cert. ef. 10-1-99; AFS 16-1999, f. 12-29-99, cert. ef. 1-1-00; AFS 34-2000, f. 12-22-00, cert. ef. 1-1-01; AFS 27-2001, f. 12-21-01, cert. ef. 1-1-02; AFS 22-2002, f. 12-31-02, cert. ef. 1-1-03; SSP 33-2003, f. 12-31-03, cert. ef. 1-4-04; SSP 24-2004, f. 12-30-04, cert. ef. 1-1-05; SSP 19-2005, f. 12-30-05, cert. ef. 1-1-06; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 14-2007, f. 12-31-07, cert. ef. 1-1-08; SSP 23-2008, f. & cert. ef. 10-1-08; SSP 26-2008, f. 12-31-08, cert. ef. 1-1-09; SSP 35-2011, f. 12-27-11, cert. ef. 1-1-12; SSP 39-2012(Temp), f. 12-28-12, cert. ef. 1-1-13 thru 6-30-13; SSP 8-2013, f. & cert. ef. 4-1-13; SSP 37-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 4-2015, f. & cert. ef. 1-1-15; SSP 44-2016, f. 12-7-16, cert. ef. 1-1-17; Suspended by SSP 11-2017(Temp), f. 3-28-17, cert. ef. 4-1-17 thru 9-27-17

461-155-0660

Special Need; Accommodation Allowance

(1) An OSIP or OSIPM program client living in a nursing facility is not eligible for an accommodation allowance. An OSIP or OSIPM program client living in a nonstandard living arrangement (see OAR 461-001-0000) is not eligible for an accommodation allowance unless he or she is receiving, or is eligible to receive after a temporary absence, home and community-based care (see OAR 461-001-0030) in-home services. An OSIP or OSIPM program client receiving SSI or having an adjusted income less than the OSIPM program income standard (except a client in a nursing facility) or eligible to receive or receiving home and community-based care in-home services is allowed an accommodation allowance if the client is 18 years of age or older and meets the criteria in section (2) or (3) of this rule.

(2) Temporary absence of client from home.

(a) A temporary accommodation allowance may be authorized, when permitted under section (1) of this rule, if a client meets the following criteria:

(A) The client leaves his or her home or rental property and enters an adult foster care facility, assisted living facility, group care home, hospital, nursing facility, residential care facility, specialized living facility, or state psychiatric institution;

(B) The client cannot afford to keep the home without the allowance;

(C) The client will be able to return home within six months of leaving, according to a written statement from a primary practitioner, RN, or PAS (pre-admission screening) RN; and

(D) The home will accommodate the service plan of the client when the client returns.

(b) The allowance may be authorized for six months. If, after six months, the client continues to meet the criteria in subsection (a) of this section, an extension may be approved in writing by a supervisor.

(c) The accommodation allowance equals the total of the client's housing cost, including taxes and insurance, plus the limited standard utility allowance for the SNAP program provided in OAR 461-160-0420.

(3) Additional cost for accommodation. A client meeting the criteria in section (1) of this rule may receive an accommodation allowance if the

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client's shelter cost exceeds \$451 for a one-person need group (see OAR 461-110-0610) or \$559 for a two-person need group, and the requirements of one of the following subsections are met:

(a) The client has a documented increase in rent associated with access by an individual with a disability; or

(b) The client has been assessed to need a live-in provider, has accepted the services of a live-in provider, and requires an additional bedroom for the live-in provider.

(4) The accommodation allowance is determined as follows:

(a) For a client who receives an accommodation allowance based on increased costs associated with access by an individual with a disability, only the additional increase in cost for the accommodation is allowed.

(b) For a client who receives an accommodation allowance based on the need for an additional bedroom for a live-in provider, the amount of the accommodation allowance is the limited standard utility allowance for the SNAP program under OAR 461-160-0420 plus:

(A) One-third of the monthly rental cost; or

(B) One-third of the monthly payment on the property agreement (including mortgage, trust deed, or land sale contract). The property agreement is the agreement existing at the time the client is approved for the accommodation allowance. The accommodation allowance for the housing portion ends if the debt is refinanced, unless the refinancing was done only to reduce the original property agreement's interest rate or total monthly payment amount and the owner realized no direct or indirect payment of the home's equity value from the refinancing.

(i) If the refinancing requirement under this paragraph is met, the amount of the accommodation allowance is one-third of the refinanced property agreement amount plus the limited standard utility allowance under OAR 461-160-0420.

(ii) If the refinancing requirement under this paragraph is not met and the housing portion of the accommodation allowance ends, the client remains eligible only for the limited standard utility allowance portion under OAR 461-160-0420.

(5) Special requirements.

(a) A client who rents and qualifies for an allowance under section (3) of this rule must take the steps necessary to obtain subsidized housing under any federal or state housing program. A client who fails, at any time, to take the steps necessary to obtain subsidized housing reasonably available is ineligible for the allowance. A client, who has been denied or revoked from participation in any rent subsidy program based on the client's own actions is ineligible for benefits under this rule.

(b) A client who rents housing and refuses subsidized housing will no longer be eligible for an accommodation allowance, except that if the housing that is offered is not suitable, related to accommodations, and the client continues to have increased costs related to accommodations in the client's current living situation, the accommodation allowance may continue until such time as appropriate subsidized housing is found.

Stat. Auth.: ORS 411.060, 411.070, 411.704, 411.706

Stats. Implemented: ORS 411.060, 411.070, 411.704, 411.706

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 12-1991(Temp), f. & cert. ef. 7-1-91; AFS 16-1991, f. 8-27-91, cert. ef. 9-1-91; AFS 2-1992, f. 1-30-92, cert. ef. 2-1-92; AFS 12-1993, f. & cert. ef. 7-1-93; AFS 23-1995, f. 9-20-95, cert. ef. 10-1-95; AFS 1-1999(Temp), f. & cert. ef. 2-1-99 thru 7-31-99; AFS 3-1999, f. 3-31-99, cert. ef. 4-1-99; AFS 9-1999, f. & cert. ef. 7-1-99; AFS 25-2000, f. 9-29-00, cert. ef. 10-1-00; SSP 22-2004, f. & cert. ef. 10-1-04; SSP 15-2006, f. 12-29-06, cert. ef. 1-1-07; SSP 23-2008, f. & cert. ef. 10-1-08; SSP 13-2009, f. & cert. ef. 7-1-09; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 25-2011, f. 9-30-11, cert. ef. 10-1-11; SSP 17-2013(Temp), f. & cert. ef. 7-1-13 thru 12-28-13; SSP 26-2013, f. & cert. ef. 10-1-13; SSP 11-2017(Temp), f. 3-28-17, cert. ef. 4-1-17 thru 9-27-17

461-155-0670

Special Need; Special Diet Allowance

(1) In the OSIP, OSIPM, REF, REFM, SFPSS, and TANF programs, a client is not eligible for a special diet allowance if receiving any of the following:

(a) Room and board.

(b) Residential care facility services or assisted living facility services.

(c) Nursing facility services.

(d) Adult foster care services.

(e) An allowance for restaurant meals.

(f) A commercial food preparation diet.

(2) An REF, REFM, SFPSS, or TANF client, or an OSIP or OSIPM client receiving SSI, having an adjusted income less than the OSIPM program income standard under OAR 461-155-0250, or receiving in-home services is eligible for a special diet allowance if the client meets the following requirements:

(a) The client would be in an imminent life-threatening situation without the diet, as verified by medical documentation from a Department-approved medical authority (see OAR 461-125-0830); and

(b) A nutritionist verifies that the special diet needed exceeds the cost of a regular diet.

(3) The amount of a special diet allowance is calculated as follows:

(a) In the REF, REFM, SFPSS, and TANF programs, the difference between the actual cost of the special diet and a prorated share of the SNAP program benefit for the appropriate number of clients in the benefit group (see OAR 461-110-0750).

(b) In the OSIP and OSIPM programs, the lesser of paragraph (A) or (B) of this subsection:

(A) The difference between the actual cost of the special diet and:

(i) \$178 for a one-person need group (see OAR 461-110-0630).

(ii) \$341 for a two-person need group.

(B) A maximum of \$300 per month, or an exceptional amount, authorized by the SPD Program Assistance Section, which will not exceed the cost of home IV therapy.

(4) Local management staff must approve the request for a special diet allowance.

(5) Each special diet allowance must be reviewed at six-month intervals.

Stat. Auth.: ORS 411.060, 411.070, 411.404, 412.014, 412.049

Stats. Implemented: ORS 411.060, 411.070, 411.404, 411.706, 412.014, 412.049

Hist.: AFS 80-1989, f. 12-21-89, cert. ef. 2-1-90; AFS 13-1991, f. & cert. ef. 7-1-91; AFS 2-1992, f. 1-30-92, cert. ef. 2-1-92; AFS 12-1993, f. & cert. ef. 7-1-93; SSP 17-2004, f. & cert. ef. 7-1-04; SSP 4-2007, f. 3-30-07, cert. ef. 4-1-07; SSP 11-2007(Temp), f. & cert. ef. 10-1-07 thru 3-29-08; SSP 5-2008, f. 2-29-08, cert. ef. 3-1-08; SSP 38-2009, f. 12-31-09, cert. ef. 1-1-10; SSP 30-2013(Temp), f. & cert. ef. 10-1-13 thru 3-30-14; SSP 38-2013, f. 12-31-13, cert. ef. 1-1-14; SSP 25-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; SSP 31-2016, f. & cert. ef. 9-1-16; SSP 11-2017(Temp), f. 3-28-17, cert. ef. 4-1-17 thru 9-27-17

Department of Justice

Chapter 137

Rule Caption: Self-Support Reserve annual update

Adm. Order No.: DOJ 1-2017

Filed with Sec. of State: 3-29-2017

Certified to be Effective: 3-29-17

Notice Publication Date: 3-1-2017

Rules Amended: 137-050-0745

Subject: OAR 137-050-0745 is amended to update the self-support reserve in the child support guidelines using the federal poverty level guidelines for 2017.

Rules Coordinator: Carol Riches—(503) 378-5987

137-050-0745

Self-Support Reserve

(1) The support calculation must leave an obligated parent enough income to meet his or her own basic needs.

(2) To determine the amount of the parent's income available for support ("available income"), subtract the self-support reserve of \$1173 from the parent's adjusted income.

(3) The parent's total obligation, including the parent's shares of the basic support obligation, child care costs, health insurance, and cash medical support, may not exceed the parent's available income, except as provided in OAR 137-050-0750(7).

(4) The limitation on support described in this rule is reflected in the specific provisions of OAR 137-050-0710 (Calculating Support), OAR 137-050-0725 (Basic Support Obligation), OAR 137-050-0735 (Child Care Costs), and OAR 137-050-0750 (Medical Support).

(5) The amount of the self-support reserve is based on the federal poverty guideline, multiplied by 1.167 to account for estimated taxes, and rounded to the nearest whole dollar. This rule will be reviewed and updated annually to reflect changes in the federal poverty guideline.

Stat. Auth.: ORS 25.275, 25.280 & 180.345

Stats. Implemented: ORS 25.275 & 25.280

Hist.: DOJ 16-2009, f. 12-1-09, cert. ef. 1-4-10; DOJ 1-2011(Temp), f. & cert. ef. 1-26-11 thru 7-24-11; DOJ 5-2011, f. & cert. ef. 7-1-11; DOJ 9-2012, f. & cert. ef. 7-2-12; DOJ 3-2013, f. 5-15-13, cert. ef. 7-1-13; DOJ 8-2014, f. & cert. ef. 5-22-14; DOJ 14-2015, f. 12-22-15, cert. ef. 1-1-16; DOJ 1-2017, f. & cert. ef. 3-29-17

Rule Caption: Establishment of Past Support Orders

Adm. Order No.: DOJ 2-2017

Filed with Sec. of State: 3-29-2017

Certified to be Effective: 3-29-17

Notice Publication Date: 3-1-2017

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Rules Amended: 137-055-3220

Subject: OAR 137-055-3220 is amended to limit the amount of past support that may be entered in an action initiated by the Child Support Program.

Rules Coordinator: Carol Riches—(503) 378-5987

137-055-3220

Establishment of Past Support Orders

(1) For purposes of this rule the following definitions apply:

(a) “Past support” means the amount of child support that could have been ordered based on the Oregon Child Support Guidelines and accumulated as arrears against a parent for the benefit of a child for any period of time during which the child was not supported by the parent and for which period no support order was in effect.

(b) “Supported by the parent” in subsection (1)(a) means payments in cash or in kind in amounts or in-kind value equal to the amount that would have accrued under the Oregon Child Support Guidelines from the obligor to the obligee for purposes of support of the child.

(c) The Oregon Child Support Guidelines means the formula for calculating child support specified in ORS 25.275.

(2) The administrator may establish “past support” when establishing a child support order under ORS 416.400 through 416.470.

(3) When an obligor has made payments in cash or in kind to an obligee for the support of the child during the period for which a judgment for past support is sought, and providing that those payments were in amounts equal to or exceeding the amount of support that would have been presumed correct under the Oregon Child Support Guidelines, no past support will be ordered.

(4) When such payments as described in section (3) were made in amounts less than the amount of support presumed correct under the Oregon Child Support Guidelines, the amount of the past support judgment will be the correct amount presumed under the Oregon Child Support Guidelines minus any amounts of support paid.

(5) The obligor must provide evidence of such payments as described in sections (3) and (4) by furnishing copies of:

- (a) Canceled checks;
- (b) Cash or money order receipts;
- (c) Any other type of funds transfer records;
- (d) Merchandise receipts;
- (e) Verification of payments from the obligee;
- (f) Any other record of payment deemed acceptable by the administrator.

(6) The administrator may decide whether to accept evidence of such cash or in-kind support payments for purposes of giving credit for them. If any party disagrees, the past support calculation may be appealed to an administrative law judge as provided in ORS 416.427.

(7) Past support may not be ordered for any period of time prior to the first day of the month the Notice and Finding of Financial Responsibility and proposed Order Establishing Support are issued. For any month or part of a month for which past support is ordered, the amount of support shall be a full month increment and shall not be prorated.

(8) If the parties are filing for annulment, dissolution or separation under ORS 107.105 and a judgment will be entered for months when the proceeding was pending, any order for past support may only include amounts owed for a time period not already addressed in the judicial action.

(9) If the order to be entered does not include current support and the past support would be owed only to the State of Oregon or another jurisdiction, the administrator will not enter an order for past support that covers a period of less than four months.

(10) Past support will be calculated under the Oregon Child Support Guidelines and will use current income for the parties in calculating past support monthly amounts. Parties may rebut use of current income by presenting evidence of income in differing amounts for the months for which past support is being ordered.

Stat. Auth.: ORS 180.345

Stats. Implemented: ORS 416.422

Hist.: AFS 28-1995, f. 11-2-95, cert. ef. 11-3-95; AFS 32-2000, f. 11-29-00, cert. ef. 12-1-00, Renumbered from 461-195-1010; AFS 28-2001, f. 12-28-01, cert. ef. 1-1-02; DOJ 6-2003(Temp), f. 6-25-03, cert. ef. 7-1-03 thru 12-28-03, Renumbered from 461-200-3220; DOJ 10-2003, f. 9-29-03, cert. ef. 10-1-03, Renumbered from 461-200-3220; DOJ 2-2004, f. 1-2-04 cert. ef. 1-5-04; DOJ 1-2006, f. & cert. ef. 1-3-06; DOJ 1-2010, f. & cert. ef. 1-4-10; DOJ 3-2011(Temp), f. & cert. ef. 3-31-11 thru 9-26-11; DOJ 4-2011, f. & cert. ef. 7-1-11; DOJ 13-2011, f. 12-30-11, cert. ef. 1-3-12; DOJ 11-2016(Temp), f. 9-23-16, cert. ef. 10-1-16 thru 3-29-17; DOJ 2-2017, f. & cert. ef. 3-29-17

Department of Public Safety Standards and Training Chapter 259

Rule Caption: Changes the requirements and processes for out-of-state private investigators to obtain temporary licensure in Oregon.

Adm. Order No.: DPSST 1-2017

Filed with Sec. of State: 3-22-2017

Certified to be Effective: 3-22-17

Notice Publication Date: 3-1-2017

Rules Amended: 259-061-0010, 259-061-0110

Subject: The changes to OAR 259-061-0110 provide new requirements and standards for a person licensed as a private investigator by another state or jurisdiction to obtain a temporary private investigator’s license to conduct investigations in Oregon.

The changes to OAR 259-061-0110:

Provide a requirement that an applicant for a temporary investigator’s license must have a current out-of-state license for which a background check was completed pursuant to the issuing state’s requirements for licensure;

Require a completed Form PI-9 (Temporary Investigator License) to be submitted electronically or mailed and postmarked to the Department within 72 hours of beginning any investigatory services in Oregon;

Allow a person with a temporary investigator’s license to perform investigatory services for cases that originate from the individual’s licensing state for a total of 30 days per calendar year;

Prohibit a person with a temporary investigator’s license from initiating new cases, opening an investigatory business or providing investigatory services for more than 30 days per calendar year; and

Require investigators providing services in Oregon with a temporary investigator’s license to maintain a record of the dates they are providing investigatory services in Oregon; carry a copy of their temporary license; obey all rules of conduct and ethics that apply to Oregon private investigators; and obey state laws as they pertain to the duties of investigations for Oregon private investigators.

The change to OAR 259-061-0010 removes the fee requirement for a temporary license.

Rules Coordinator: Jennifer Howald—(503) 378-2432

259-061-0010

Fees

(1) Payments to the Department are due at the time of application. All payments are non-refundable and must be paid by business check, money order, cashier’s check or credit card. No personal checks or cash will be accepted.

(2) The Department will charge the following fees:

(a) The fee of \$79 for the application for licensure as a private investigator. This fee includes the cost of a criminal background check and private investigator examination;

(b) The fee of \$550 for the issuance of a two-year license as a private investigator;

(c) The fee of \$50 for application of reactivation from inactive status as described in OAR 259-061-0160;

(d) The fee of \$550 for the renewal of a two-year private investigator license;

(e) A late submission fee of \$25 will be added to the fees for licensure renewal if the private investigator fails to complete the application process by the expiration date of the license; and

(f) The fee of \$20 for the issuance of a duplicate or replacement card or license.

(3) In the event a non-sufficient check is received for payment, an additional \$25 administrative fee will be assessed.

Stat. Auth.: ORS 703.480

Stats. Implemented: ORS 703.480

Hist.: DPSST 7-2006, f. & cert. ef. 5-15-06; DPSST 1-2013, f. & cert. ef. 1-2-13; DPSST 3-2016, f. & cert. ef. 3-22-16; DPSST 1-2017, f. & cert. ef. 3-22-17

259-061-0110

Temporary License

(1) An individual licensed or certified to perform private investigations in another jurisdiction may apply for a temporary investigator’s license to perform investigative services in the state of Oregon under the following conditions:

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(a) The individual's private investigator's license or certification is current and in good standing with the issuing jurisdiction;

(b) The individual completed a background check as required by the issuing jurisdiction in order to obtain the license or certification;

(c) The individual holds proof of a corporate surety bond, an irrevocable letter of credit issued by an Oregon commercial bank as defined in ORS 706.008, or errors and omission insurance in the amount of at least \$5,000; and

(d) The case being investigated originated from the private investigator's licensing or certifying jurisdiction.

(2) A completed Form PI-9 (Temporary Investigator License) must be submitted electronically or mailed and postmarked to the Department within 72 hours of beginning any investigatory services in Oregon.

(3) A temporary investigator's license is valid for a total of 30 aggregate days per calendar year from the first day of performing investigatory services in Oregon.

(4) Investigators providing services in Oregon with a temporary investigator's license are required to maintain a record of the dates that they have performed investigatory services in Oregon and must provide that record to the Department upon request.

(5) Investigators providing services in Oregon with a temporary investigator's license must:

(a) Obey all rules of conduct and ethics that apply to Oregon private investigators;

(b) Obey state laws as they pertain to the duties of investigations for Oregon private investigators;

(c) Have in their possession a copy of the Form PI-9 at all times while performing investigative services in this state and must be able to present the temporary investigator's license to any Department staff member, law enforcement officer or any other person upon reasonable request;

(d) Not solicit, initiate new cases or open a business in Oregon;

(e) Not perform investigatory services in Oregon for more than 30 aggregate days per calendar year; and

(f) Apply for Oregon licensure as a private investigator if providing investigatory services for more than 30 aggregate days per calendar year.

(6) Violations of the law or these administrative rules may be considered grounds for:

(a) Administrative proceeding or court action, up to and including civil penalty, as outlined in OAR 259-061-0200 (Compliance); or

(b) Denial, suspension or revocation of the temporary investigator's license as outlined in OAR 259-061-0300 (Denial/Suspension/Revocation).

(7) Complaints received by the Department will be forwarded to the investigator's licensing or certifying jurisdiction.

(8) The intent of this rule is to allow out-of-state investigators to temporarily conduct lawful business in this state.

Stat. Auth.: ORS 703.480

Stats. Implemented: ORS 703.425, 703.430, 703.435, 703.450, 703.460 & 703.465

Hist.: DPSST 7-2006, f. & cert. ef. 5-15-06; DPSST 1-2017, f. & cert. ef. 3-22-17

Rule Caption: Changes definition of Alarm Monitoring Facility to exclude a temporary/emergency backup facility from licensure requirements.

Adm. Order No.: DPSST 2-2017

Filed with Sec. of State: 3-22-2017

Certified to be Effective: 3-22-17

Notice Publication Date: 3-1-2017

Rules Amended: 259-060-0010

Subject: The rule change to OAR 259-060-0010 amends the definition of an Alarm Monitoring Facility to exclude facilities that are providing temporary back up alarm monitoring services. The exclusion of the temporary backup facilities from the definition of an Alarm Monitoring Facility means that the temporary backup facility is not required to utilize alarm monitors that have been certified in Oregon.

Rules Coordinator: Jennifer Howald—(503) 378-2432

259-060-0010

Definitions

(1) "Accreditation Program Manager" means a person who is designated as the administrator of an employer accredited training program and is primary liaison with the Department.

(2) "Alarm Monitor" means an individual whose primary duties are the processing of alarms in an alarm monitoring facility.

(3) "Alarm Monitoring Facility" means any organization, contract or proprietary, with the primary responsibility of reviewing incoming traffic transmitted to alarm receiving equipment and following up with actions that may include notification of public agencies to address imminent threats related to public safety. This does not include:

(a) Facilities that monitor only production or environmental signals not directly impacting public safety;

(b) Proprietary alarm systems being monitored by Department-certified private security professionals that generate an internal response by another Department-certified private security professional;

(c) Facilities that monitor Personal Emergency Response Systems (PERS) only;

(d) Facilities utilizing alarms that never generate a response from a public safety agency; or

(e) Facilities, whose alarm monitors are not required to be certified in Oregon, providing temporary assistance to an alarm monitoring facility, whose alarm monitors are certified by DPSST, when alarm monitoring services are required to be rerouted due to an unexpected facility outage or an emergency.

(4) "Applicant" means an individual who is applying for or renewing certification or licensure as a private security provider.

(5) "Armed Private Security Professional" means a private security professional who is certified to possess or has access to a firearm at any time while performing private security services.

(6) "Assessments" means a Department-approved curriculum given to private security providers that includes, but is not limited to, the demonstration of task-related skills learned in the classroom instruction as applied to hypothetical situations.

(7) "Board" means the Board on Public Safety Standards and Training.

(8) "Certification" means recognition by the Department that a private security professional meets all the qualifications listed in ORS 181A.855 and these rules.

(9) "Confrontational Activity" means the exertion of physical control by detaining individuals.

(10) "Consideration" means something of value promised, given or done that has the effect of making an agreement to provide private security services.

(11) "Crowd Management or Guest Services" means duties performed during an organized event, including pre-event assembly and post-event departure activities relating to the organized event that involve:

(a) Directing people attending an organized event;

(b) Allowing entry into or exit out of an organized event or any area within the established confines of an organized event that requires authorized access; or

(c) Screening individuals for entry into an organized event. Screening does not include physical pat-down searches.

(12) "De Minimis" means non-monetary compensation received by a volunteer performing private security services for a non-profit organization as defined in ORS 181A.845. The compensation may not exceed a fair market value of \$125 per day.

(13) "Denial" or "Deny" means the Department's refusal to grant private security certification or issue a license to an applicant who fails to meet the minimum standards for certification or licensure as identified in OAR 259-060-0020, including the mandatory and discretionary disqualifying misconduct identified in OAR 259-060-0300.

(14) "Department" and "DPSST" means the Department of Public Safety Standards and Training.

(15) "Director" means the Director of the Department of Public Safety Standards and Training.

(16) "Employer" means:

(a) An individual who employs persons to provide private security services;

(b) An owner or owners of a business or entity that provides private security services; or

(c) An owner or owners of a business or entity who employs persons to provide private security services.

(17) "Executive Manager" means a person:

(a) Who is authorized to act on behalf of a company or business in matters of licensure and certification;

(b) Who is authorized to hire and terminate personnel;

(c) Whose primary responsibility is the management of certified private security professionals; and

(d) Who has final responsibility for a company's or business's compliance with the ORS 181A.840 to 181A.995.

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(18) "Flagrant Violation" means an act by a provider, contractor, owner or manager who, after being notified of a violation, intentionally continues or repeats the violation within a 36 month period after the initial violation.

(19) "Fundamental" means a duty that is a basic task or function and may be low frequency, but is an essential component of a job.

(20) "Incidental or Temporary Action" means reaction to an unexpected occurrence that requires immediate response and occurs without regularity or expectation. These actions are not primary responsibilities and are for brief periods of time.

(21) "Instructor" means any person who has been certified by the Department as meeting the requirements to provide instruction to private security providers or applicants.

(22) "License" means recognition by the Department that executive manager or supervisory manager meets the requirements listed in ORS 181A.855 and these rules.

(23) "Organized Event" means a temporary gathering of a crowd for a planned occasion or activity that occurs in a defined location during a specific time. An organized event has an established border or boundary.

(24) "Policy Committee" means the Private Security and Investigator Policy Committee.

(25) "Premises" means:

(a) Land or buildings considered as a property, regardless if permanent or temporary; or

(b) With respect to a licensee of the Oregon Liquor Control Commission (OLCC), a permanent place where an OLCC license is held regularly or a location where licensees can gather for a temporary amount of time.

(26) "Primary Responsibility" means an activity that is fundamental to, and required or expected in, the regular course of employment and is not merely incidental to employment.

(27) "Private" as used in the Act means those activities intended for or restricted to the use of a particular person, group or interest, or belonging to or concerning an individual person, company or interest.

(28) "Private Security Professional" means an individual who performs, as the individual's primary responsibility, private security services for consideration, regardless of whether the individual, while performing private security services, is armed or unarmed or wears a uniform or plain clothes, and regardless of whether the individual is employed part-time or full-time to perform private security services. A private security professional is not authorized to independently contract with businesses or entities to provide services as a private security professional.

(29) "Private Security Provider" means any individual who performs the functions of a private security professional, executive manager, supervisory manager or instructor.

(30) "Private Security Services" means the performance of at least one of the following activities:

(a) Observing and reporting unlawful activity;

(b) Preventing or detecting theft or misappropriation of any goods, money or other items of value;

(c) Protecting individuals or property, including, but not limited to proprietary information, from harm or misappropriation;

(d) Controlling access to premises being protected or, with respect to a licensee of the Oregon Liquor Control Commission, controlling access to premises at an entry to the premises or any portion of the premises where minors are prohibited;

(e) Securely moving prisoners;

(f) Taking enforcement action by detaining persons or placing persons under arrest under ORS 133.225; or

(g) Providing canine services for guarding premises or for the detection of unlawful devices or substances.

(31) "Private Security Services Providers Act" or "The Act" means the Private Security Providers Act (ORS Chapter 181A.840 through 181A.995).

(32) "Revocation" or "Revoke" means action taken by the Department to rescind the certification or licensure of a private security provider who fails to meet the minimum standards for certification or licensure as identified in OAR 259-060-0020, including the mandatory and discretionary disqualifying misconduct identified in OAR 259-060-0300.

(33) "Supervisory Manager" means an employee of or a person supervised by an executive manager who has as a primary responsibility the supervision of certified private security professionals. A supervisory manager is not authorized to independently contract with businesses or entities to provide services as a supervisory manager.

(34) "Surrender" means the voluntary relinquishment of private security certification or licensure to the Department.

(35) "Suspension" or "Suspend" means action taken by the Department in temporarily depriving the holder of a license or certificate that authorizes the individual to provide private security services.

(36) "Temporary Work Permit" means a temporary certification or licensure issued by an employing, licensed manager to allow a company to employ and deploy a private security professional, executive or supervisory manager while the application for certification or licensure is being processed. A temporary work permit will not be issued for armed security professionals.

(37) "Unarmed Private Security Professional" means a private security professional who is not in possession of, or has access to, a firearm at any time while performing private security services.

(38) "Violation" means an act or omission that is prohibited under the Act or these rules.

(39) "Withdraw" means action taken by the applicant or private security provider to remove an application from consideration.

Stat. Auth.: ORS 181A.840 & 181A.870

Stats. Implemented: ORS 181A.840 & 181A.870

Hist.: PS 9-1997, f. & cert. ef. 8-20-97; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; BPSST 3-1999(Temp), f. & cert. ef. 3-9-99 thru 9-5-99; BPSST 4-1999, f. 4-29-99, cert. ef. 9-5-99; BPSST 3-2000, f. & cert. ef. 8-10-00; BPSST 8-2001(Temp), f. & cert. ef. 8-22-01 thru 2-18-02; BPSST 18-2001(Temp), f. & cert. ef. 11-28-01 thru 2-18-02; BPSST 4-2002(Temp), f. & cert. ef. 2-25-02 thru 7-1-02; BPSST 13-2002, f. & cert. ef. 4-30-02; DPSST 4-2003, f. & cert. ef. 1-22-03; DPSST 11-2005, f. & cert. ef. 10-14-05; DPSST 6-2006, f. & cert. ef. 5-15-06; DPSST 4-2007, f. & cert. ef. 2-15-07; DPSST 11-2007, f. & cert. ef. 10-15-07; DPSST 6-2008, f. & cert. ef. 4-15-08; DPSST 25-2012, f. 10-26-12, cert. ef. 11-1-12; DPSST 28-2012, f. & cert. ef. 12-24-12; DPSST 12-2013, f. & cert. ef. 6-24-13; DPSST 3-2015, f. & cert. ef. 1-5-15; DPSST 8-2015, f. & cert. ef. 3-24-15; DPSST 9-2015(Temp), f. & cert. ef. 5-19-15 thru 11-14-15; Administrative correction, 11-20-15; DPSST 20-2015, f. & cert. ef. 12-22-15; DPSST 7-2016, f. & cert. ef. 6-22-16; DPSST 2-2017, f. & cert. ef. 3-22-17

Rule Caption: Specifies person hired as an investigator not eligible for expert witness exemption from PI licensure.

Adm. Order No.: DPSST 3-2017

Filed with Sec. of State: 3-22-2017

Certified to be Effective: 3-22-17

Notice Publication Date: 3-1-2017

Rules Amended: 259-061-0018

Subject: The change to OAR 259-061-0018 provides DPSST's interpretation of the expert witness exemption from private investigator licensure found in ORS 703.407. The proposed rule language states that the expert witness exemption to private investigator licensing requirements does not apply when an individual is hired as an investigator to obtain or furnish information and later testifies as to the factual information obtained during the investigation.

DPSST's application of the administrative rule is centered on the intent of employment when an individual is hired. An individual that was hired as an expert to conduct investigations, or review or engage in other activities in preparation for providing expert testimony in court meets the exemption and therefore would not require licensure as a private investigator. The person must either be providing testimony in court as an expert witness or preparing to provide testimony in court as an expert witness.

Rules Coordinator: Jennifer Howald—(503) 378-2432

259-061-0018

Private Investigator Responsibilities

(1) A person may not act as an investigator or represent themselves as an investigator unless they are licensed as described in ORS 703.430 and these rules.

(2) A licensed investigator must abide by all the requirements of conduct found in ORS 703.450.

(3) All contracts signed by private investigators to provide private investigation services must include the investigator's legal name and DPSST-issued license number.

(4) Exemptions: Persons described in ORS 703.411 are exempt from regulation as private investigators.

(5) For the purposes of ORS 703.411(1), a person is "employed exclusively by one employer in connection with the affairs of that employer only" when;

(a) The person has one, exclusive employer; and

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(b) The person conducts investigations on behalf of that employer only. This subsection does not apply to a person who conducts investigations on behalf of the employer's clients.

(c) Section (5) of this rule applies as of August 9, 2011.

(6) For the purposes of this rule, the expert witness exemption to private investigator licensing requirements found in ORS 703.407 does not apply to an individual hired as an investigator to obtain or furnish information who later testifies as to the factual information obtained during the investigation.

Stat. Auth.: ORS 703.480

Stats. Implemented: ORS 703.407, 703.411, 703.430, 703.450, 703.480

Hist.: DPSST 1-2012(Temp), f. & cert. ef. 2-6-12 thru 7-31-12; DPSST 16-2012, f. & cert. ef. 7-2-12; DPSST 1-2016, f. & cert. ef. 3-22-16; DPSST 3-2017, f. & cert. ef. 3-22-17

Rule Caption: Amends and adopts responsibilities and compliance regarding use of prohibited business name per HB 4142.

Adm. Order No.: DPSST 4-2017

Filed with Sec. of State: 3-22-2017

Certified to be Effective: 3-22-17

Notice Publication Date: 3-1-2017

Rules Adopted: 259-060-0200

Rules Amended: 259-060-0015, 259-060-0130, 259-060-0450, 259-060-0600

Subject: This rule change amends language in OARs 259-060-0015, 259-060-0130, 259-060-0450, 259-060-0600 and adopts OAR 259-060-0200 to comply with the provisions of HB 4142. House Bill 4142 (2016) states that it is unlawful for an entity that employs private security providers to use a name that implies that the entity is, or is affiliated with, an existing law enforcement unit or public safety agency as defined in ORS 181A.355, the organized militia as described in ORS 396.105, the Armed Forces of the United States, a federal law enforcement agency or a federal intelligence agency. The rule changes will require executive managers to submit the Form PS-24 (Executive Manager Information Form) which will be used to identify the name and the business owner who the executive manager is employed by or contracted with, provide company contact information, and to report the beginning of or termination or completion of employment or contract. Information contained in the Form PS-24 will allow DPSST to monitor employer compliance with HB 4142. Failure of the executive manager to provide the Form PS-24 will make the executive manager's license subject to denial, suspension or revocation.

Rules Coordinator: Jennifer Howald—(503) 378-2432

259-060-0015

Private Security Provider Responsibilities

(1) A person may not act as a private security provider unless that person is certified or licensed under the Private Security Services Providers Act and these rules.

(2) Private security providers must have in their possession their DPSST issued certification, licensure or temporary work permit (Form PS-20) while performing the functions of a private security provider and must be able to present their license, certificate, or temporary work permit to any DPSST staff member, law enforcement officer or Oregon Liquor Control Commission agent upon demand, or any other person, upon reasonable request.

(3) Persons described in ORS 181A.845 are exempt from regulation as private security providers.

(a) The exemption found in ORS 181A.845(1)(L) does not apply to an individual who has the primary responsibility of controlling access to premises at an entry to the premises or any portion of the premises where minors are prohibited.

(b) The exemption found in ORS 181A.845(1)(k) applies to individuals performing crowd management or guest services inside the established confines of an organized event and who are not armed, permitted to initiate confrontational activities, or hired with the primary responsibility of taking enforcement action as described in ORS 181A.840(8)(f).

(4) Private security providers are prohibited from:

(a) Carrying a concealed weapon while providing security services unless currently certified as an armed private security professional and licensed under ORS 166.291; and

(b) Providing training to private security professionals or applicants unless currently certified as an instructor.

(5) For purposes of these administrative rules, these prohibitions apply to any business, employer, or entity that provides private security services within this state regardless of whether the business, employer, or entity is located in this state.

(6) Change of Information.

(a) An applicant or private security provider must notify the Department within 14 calendar days of any change of address by using Form PS-23 (Private Security Services Provider Change of Information).

(b) Executive managers must notify the Department when a private security provider is hired and when the private security provider's employment status changes due to a resignation or termination. Submission of the Form PS-23 is required for terminations of employment where the private security provider may have violated the Private Security Services Providers Act.

(c) Executive managers must submit a completed Form PS-24 (Executive Manager Information Form) within 48 hours of a change when:

(A) Beginning employment or entering a contract with an employer as an executive manager;

(B) Terminating employment or completing a contract for an employer as an executive manager; and

(C) When the ownership of the employing business or entity changes.

(7) Notification of Arrest. Pursuant to ORS 181A.885, any private security provider or applicant who is charged with a crime must notify his or her employer or, if not employed, the Department no later than 48 hours after the charge is filed.

(a) The initial notification may be made by telephone or with a Recent Arrest Form.

(b) The Department may request immediate written notification documenting specific charges, the county and state where any charges are pending, the investigating agency, and the date of arrest.

(8) Should any certified armed private security provider become ineligible to purchase, own or possess a firearm, the provider and the manager, employer or supervisor of the provider must notify the Department in writing within 48 hours of the circumstances causing the ineligibility. The notification must list all facts known and must identify a person whom the Department may contact for additional information.

Stat. Auth.: ORS 181A.870

Stats. Implemented: ORS 181A.870

Hist.: PS 9-1997, f. & cert. ef. 8-20-97; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; BPSST 3-1999(Temp), f. & cert. ef. 3-9-99 thru 9-5-99; BPSST 4-1999, f. & cert. ef. 4-29-99, cert. ef. 9-5-99; BPSST 3-2000, f. & cert. ef. 8-10-00; BPSST 8-2001(Temp), f. & cert. ef. 8-22-01 thru 2-18-02; BPSST 18-2001(Temp), f. & cert. ef. 11-28-01 thru 2-18-02; BPSST 4-2002(Temp), f. & cert. ef. 2-25-02 thru 7-1-02; BPSST 13-2002, f. & cert. ef. 4-30-02; DPSST 4-2003, f. & cert. ef. 1-22-03; DPSST 11-2005, f. & cert. ef. 10-14-05; DPSST 6-2006, f. & cert. ef. 5-15-06; DPSST 9-2012, f. & cert. ef. 4-2-12; DPSST 25-2012, f. & cert. ef. 10-26-12, cert. ef. 11-1-12; DPSST 28-2012, f. & cert. ef. 12-24-12; DPSST 12-2013, f. & cert. ef. 6-24-13; DPSST 9-2015(Temp), f. & cert. ef. 5-19-15 thru 11-14-15; Administrative correction, 11-20-15; DPSST 20-2015, f. & cert. ef. 12-22-15; DPSST 8-2016, f. & cert. ef. 6-22-16; DPSST 4-2017, f. & cert. ef. 3-22-17

259-060-0130

Private Security Executive Manager and Supervisory Manager Licensure and Responsibilities

(1) All private security executive or supervisory manager applicants must complete an application in accordance with OAR 259-060-0025.

(2) All private security executive or supervisory manager applicants must be in compliance with the minimum standards for licensure as listed in OAR 259-060-0020.

(3) Private security executive managers are responsible for ensuring compliance of all private security providers employed by businesses or entities by which the executive manager is employed or contracted. An executive manager is authorized to perform the duties defined in OAR 259-060-0010.

(4) Private security supervisory managers have the responsibility and authority of supervising persons providing security services. A supervisory manager is authorized to perform the duties defined in OAR 259-060-0010.

(5) Basic training for executive and supervisory private security managers consists of successful completion of the following:

(a) The required basic classroom instruction, exam and assessments as defined in OAR 259-060-0120; and

(b) Manager course, exam and assessments.

(6) Biennial renewal training consists of the manager course, exam and assessments.

(7) Employing, licensed managers may issue temporary work permits to private security applicants upon verification that all application requirements have been completed.

(8) An executive manager is authorized to contract with businesses or entities to provide services as an executive manager. For the purposes of

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this rule, an executive manager who contracts with businesses or entities to provide services as an executive manager is considered an employing, licensed manager.

(9) An executive manager is required to submit a completed Form PS-24 (Executive Manager Information Form) to the Department within 48 hours of beginning employment or a contract and to provide changes of information as described in OAR 259-060-0015.

(10) A licensed manager who performs private security services must complete the full training required for that classification and be certified.

(11) Failure to complete any training requirements as prescribed by this rule may result in denial or revocation of private security certification or licensure as prescribed in OAR 259-060-0300 and civil penalties as prescribed in OAR 259-060-0450.

[ED. NOTE: Forms referenced are available from the agency.]

Stat. Auth.: ORS 181A.870

Stats. Implemented: ORS 181A.870

Hist.: PS 9-1997, f. & cert. ef. 8-20-97; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; BPSST 3-1999(Temp), f. & cert. ef. 3-9-99 thru 9-5-99; BPSST 4-1999, f. 4-29-99, cert. ef. 9-5-99; BPSST 3-2000, f. & cert. ef. 8-10-00; BPSST 8-2001(Temp), f. & cert. ef. 8-22-01 thru 2-18-02; BPSST 18-2001(Temp), f. & cert. ef. 11-28-01 thru 2-18-02; BPSST 4-2002(Temp), f. & cert. ef. 2-25-02 thru 7-1-02; BPSST 13-2002, f. & cert. ef. 4-30-02; DPSST 4-2003, f. & cert. ef. 1-22-03; DPSST 6-2006, f. & cert. ef. 5-15-06; DPSST 6-2008, f. & cert. ef. 4-15-08; DPSST 25-2012, f. 10-26-12, cert. ef. 11-1-12; DPSST 3-2015, f. & cert. ef. 1-5-15; DPSST 8-2015, f. & cert. ef. 3-24-15; DPSST 9-2016, f. & cert. ef. 6-22-16; DPSST 4-2017, f. & cert. ef. 3-22-17

259-060-0200

Employer Responsibilities

(1) The owner of any business or entity that employs or utilizes at least one individual whose primary responsibilities include providing private security services:

(a) Must designate an individual to perform the duties of an executive manager at all times as described in OAR 259-060-0130. An employer may obtain licensure for more than one executive manager.

(b) Is prohibited from using a name that implies that the employer's business or entity is, or is affiliated with, an existing law enforcement unit or public safety agency as defined in ORS 181A.355, the organized militia as described in ORS 396.105, the Armed Forces of the United States, a federal law enforcement agency or a federal intelligence agency. Employers operating under a name prior to July 1, 2016 are exempt from this restriction for as long as the business or entity is owned by the same person.

(2) For the purpose of these administrative rules, these provisions apply to any business, employer or entity that provides private security services within this state, regardless of whether the business, employer or entity is located in or out of this state.

(3) Violation of these rules may result in denial or revocation of private security certification or licensure as prescribed in OAR 259-060-0300 and civil penalties as prescribed in OAR 259-060-0450.

Stat. Auth.: OL 2016 Ch. 50

Stats. Implemented: OL 2016 Ch. 50

Hist.: DPSST 4-2017, f. & cert. ef. 3-22-17

259-060-0450

Compliance

(1) The Department may cause administrative proceedings or court action to be initiated to enforce compliance with the Act and these rules.

(2) Violations. The Department may find violation and recommend assessment of civil penalties upon finding that a private security provider, individual, or employer has previously engaged in or is currently engaging in any of the following acts:

(a) Providing private security services without valid certification or licensure or Temporary Work Permit;

(b) Failure to submit properly completed forms or documentation in a time frame as designated by the Department;

(c) The falsification of any documents submitted to the Department;

(d) Failure to cease providing private security services upon issuance of a cease and desist order, expiration of certification or licensure, notice of termination, suspension, denial or revocation;

(e) Failure to complete required training as prescribed in OAR 259-060-0060;

(f) Failure to report criminal charges as required in ORS 181A.885;

(g) Providing training without a valid certification;

(h) Failure of a private security instructor to instruct the full Department-approved curriculum;

(i) Failure to terminate employment as a private security provider of an individual whose application has been terminated, or whose certification or licensure has been suspended, denied or revoked, upon notice from the Department to do so;

(j) Employing private security providers who have not completed the training and application process required under the Act and these rules;

(k) Failure to employ a licensed executive manager;

(l) Failure to provide technological communication or visibility of a certified security professional to crowd management staff;

(m) Failure to provide documentation of one certified security professional to ten crowd management staff;

(n) Expecting crowd management staff to perform security services duties other than the duties incidental to crowd management; or

(o) Using a name that implies that the employer's business or entity is, or is affiliated with, an existing law enforcement unit or public safety agency as defined in ORS 181A.355, the organized militia as described in ORS 396.105, the Armed Forces of the United States, a federal law enforcement agency or a federal intelligence agency. Employers operating under a name prior to July 1, 2016 are exempt from this restriction for as long as the business or entity is owned by the same person.

(p) Any other violation of requirements of the Act or these rules.

(3) The Department may issue a Demand to Examine Books and Records (DEBR) to obtain any record or document related to compliance.

(a) The Department may cause inspection or audits of the records of any private security provider or employer. Records inspected may include any document relating to the requirements of the Act and these rules.

(b) Failure to cooperate or respond to any investigative inquiries or DEBR may result in issuance of a civil penalty as described in this rule and the revocation or denial of certification or licensure as described in OAR 259-060-0300.

(4) The Department may issue a Cease and Desist Order when an individual or employer is not in compliance with these rules. The order requires the individual or employer cease and desist providing private security services in the state of Oregon and will remain in effect until the individual or employer gains compliance.

(5) Complaints and Allegations of Violations.

(a) All complaints or allegations of violations must be submitted on a Department-approved complaint form before an investigation can be initiated, unless the Department grants an exception. The Department may consider additional credible sources of information to determine non-compliance.

(b) A preliminary administrative review of the complaint or allegation will be conducted by the Department to ensure there is sufficient information to proceed. Staff may conduct a fact-finding preliminary investigation.

(A) If sufficient information is determined to support the complaint or allegation, the Department may open and conduct an investigation and gather relevant information.

(B) Private security providers, applicants, or other involved parties will respond to any questions or requests with 20 days after a request is mailed by the Department, unless an extension is requested and approved by the Department.

(6) Procedures for Proposing a Civil Penalty.

(a) The Department may issue an Allegation of Non-Compliance when there is a reason to believe a violation has occurred. The purpose of this document is to provide education and allow an opportunity to gain compliance within 30 days without penalty.

(b) The Department will issue a Notice of Violation upon discovery of violation as described in this rule. The Notice will include a statement of found violations and proposed sanctions. An individual or employer may be given the opportunity to remedy the violation and pay a penalty within 10 days of the mailing of the notice.

(c) The Department, through the Policy Committee and Board, will issue a Notice of Intent to Propose a Civil Penalty upon the failure to remedy a violation or request an extension within 10 days of the mailing of the Notice of Violation.

(A) The Department may extend the time to remedy a violation upon a showing of good cause.

(B) An individual or employer will be given the opportunity to provide mitigation to the Department.

(7) Hearing Request.

(a) If the Department issues a Notice of Intent to Propose Civil Penalty, an individual, business or entity is entitled to a contested case hearing in accordance with the applicable provisions of the Attorney General's Model Rules of Procedure adopted under OAR 259-005-0015.

(b) The Department must receive a request for hearing in writing within 20 days of the date the Notice of Intent to Propose Civil Penalty was served on the individual or employer.

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(8) Default Order. If a timely request for a hearing is not received, the Notice of Intent to Impose a Civil Penalty will become a Final Order Imposing Civil Penalty.

(9) Resolution by Stipulation. The Department is authorized to seek resolution by stipulation, subject to acceptance and approval by the Board or Director, if:

(a) The matter is resolved before entry of a final order assessing penalty;

(b) The respondent satisfies all terms set forth by the Department within the time allowed; and

(c) Any stipulated penalty amount is received by the Department.

(10) Civil Penalty Amounts.

(a) Unarmed private security providers and alarm monitors will be charged a penalty of not less than \$250 for the first violation and a maximum of \$1,500 for each flagrant violation.

(b) Armed private security providers will be charged a penalty of not less than \$500 for the first violation and a maximum of \$1,500 for each flagrant violation.

(c) Private security instructors will be charged a penalty of not less than \$750 for the first violation and a maximum of \$1,500 for each flagrant violation.

(d) Private security managers, contract executive managers and employers that employ private security staff will be charged a penalty of not less than \$1,000 for the first violation and a maximum of \$1,500 for each flagrant violation.

(e) For the purposes of imposing civil penalties, each 30 day period in violation of the same statute or rule may be considered a separate violation by the Department.

(11) The Department may reduce or waive civil penalties from the amounts set in this rule in situations where further mitigation is warranted or the matter is resolved by stipulation at any time prior to the entry of a final order.

(12) Staff will recommend the full civil penalty amount for individuals, businesses or entities that fail to satisfy the terms as stipulated. The recommendation will be reviewed by the Policy Committee and Board.

Stat. Auth.: ORS 181A.870

Stats. Implemented: ORS 181A.870

Hist.: PS 9-1997, f. & cert. ef. 8-20-97; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; BPSST 3-1999(Temp), f. & cert. ef. 3-9-99 thru 9-5-99; BPSST 4-1999, f. 4-29-99, cert. ef. 9-5-99; BPSST 3-2000, f. & cert. ef. 8-10-00; BPSST 8-2001(Temp), f. & cert. ef. 8-22-01 thru 2-18-02; BPSST 18-2001(Temp), f. & cert. ef. 11-28-01 thru 2-18-02; BPSST 4-2002(Temp), f. & cert. ef. 2-25-02 thru 7-1-02; BPSST 13-2002, f. & cert. ef. 4-30-02; DPSST 4-2003, f. & cert. ef. 1-22-03; DPSST 6-2006, f. & cert. ef. 5-15-06; DPSST 11-2007, f. & cert. ef. 10-15-07; DPSST 6-2008, f. & cert. ef. 4-15-08; DPSST 25-2012, f. 10-26-12, cert. ef. 11-1-12; DPSST 12-2013, f. & cert. ef. 6-24-13; DPSST 8-2015, f. & cert. ef. 3-24-15; DPSST 4-2017, f. & cert. ef. 3-22-17

259-060-0600

Forms

The Department utilizes the following forms:

(1) PS-1 — Application for Licensure or Certification of Private Security Services Provider.

(2) PS-3 — Private Security Order Forms Sheet.

(3) PS-6 — (Affidavit of Instructor and Private Security Provider Testing Results).

(4) PS-7 — Private Security Instructor Evaluation.

(5) PS-8 — Private Security Instructor Continuing Education.

(6) PS-9 — Private Security Waiver for Reciprocity.

(7) PS-20 — Private Security Services Provider Temporary Work Permit.

(8) PS-21 — Renewal of Private Security Services Licensure or Certification.

(9) PS-23 — Private Security Services Provider Change of Information.

(10) PS-24 — Executive Manager Information Form.

(11) PS-27 — Private Security Code of Ethics.

(12) PS-30 — Reconsideration Application for Private Security Services Providers.

[ED. NOTE: Forms referenced are available from the agency.]

Stat. Auth.: ORS 181A.870

Stats. Implemented: ORS 181A.870

Hist.: PS 9-1997, f. & cert. ef. 8-20-97; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; BPSST 3-1999(Temp), f. & cert. ef. 3-9-99 thru 9-5-99; BPSST 4-1999, f. 4-29-99, cert. ef. 9-5-99; BPSST 3-2000, f. & cert. ef. 8-10-00; BPSST 8-2001(Temp), f. & cert. ef. 8-22-01 thru 2-18-02; BPSST 18-2001(Temp), f. & cert. ef. 11-28-01 thru 2-18-02; BPSST 4-2002(Temp), f. & cert. ef. 2-25-02 thru 7-1-02; BPSST 13-2002, f. & cert. ef. 4-30-02; DPSST 6-2006, f. & cert. ef. 5-15-06; DPSST 15-2006, f. & cert. ef. 10-13-06; DPSST 30-2012, f. & cert. ef. 12-26-12; DPSST 16-2016, f. & cert. ef. 9-22-16; DPSST 4-2017, f. & cert. ef. 3-22-17

Rule Caption: Amends rule language to reflect changes in the submission of training records to DPSST.

Adm. Order No.: DPSST 5-2017

Filed with Sec. of State: 3-22-2017

Certified to be Effective: 3-22-17

Notice Publication Date: 3-1-2017

Rules Amended: 259-008-0090

Subject: OAR 259-008-0090, Training Records, identifies what the DPSST training record for a public safety professional is used for, how to report training to DPSST for the addition of information to a DPSST training record, and what training will be accepted for addition to a DPSST training record.

In recognition that DPSST has updated the internal processes for data entry of reported training to DPSST public safety professional training records, which includes the addition of electronic versions of the training rosters, this proposed rule change eliminates the references to specific forms and some now outdated processes.

The changes to OAR 259-008-0090 simplify the reporting process to state that training must be submitted on a course attendance roster through a Department approved submission process. This proposed language allows DPSST to accept the standard F6 course attendance roster or the newer eRoster by mail, fax, email attachment or digital upload.

Rules Coordinator: Jennifer Howald—(503) 378-2432

259-008-0090

Training Records

(1) The Department maintains a DPSST training record for each currently employed Oregon public safety professional in order to document training that the public safety professional completed to meet the minimum requirements for certification and the minimum training requirements to maintain certification.

(2) The Department will add training hours to a public safety professional's DPSST training record for training completed while employed as a public safety professional.

(3) Training must be submitted on a course attendance roster through a Department approved submission process.

(4) Any course attendance roster received by the Department that is incomplete will not be accepted.

(5) For the purpose of this rule, training is defined as an event that develops, refreshes, augments, or enhances knowledge, skills and abilities to perform the job effectively.

(6) Training hours are reflected as "passed" or "completed" on the public safety professional's DPSST training record.

(7) Instructor hours that are reported when the public safety professional is the instructor for the training content are reflected on the public safety professional's DPSST training record as "instructed" and are not applied toward training hour requirements for the purpose of obtaining certification.

Stat. Auth.: ORS 181A.410

Stats. Implemented: ORS 181A.410

Hist.: PS 12, f. & ef. 12-19-77; PS 1-1983, f. & ef. 12-15-83; Renumbered from 259-010-0070, PS 1-1990, f. & cert. ef. 2-7-90; PS 2-1995, f. & cert. ef. 9-27-95; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; DPSST 10-2007, f. & cert. ef. 10-15-07; DPSST 1-2014, f. & cert. ef. 1-2-14; DPSST 5-2014, f. & cert. ef. 1-29-14; DPSST 5-2017, f. & cert. ef. 3-22-17

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Rule Caption: Adds maintenance training for Corrections, Parole and Probation Officers, Regulatory Specialists; amends Police maintenance requirements.

Adm. Order No.: DPSST 6-2017

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Notice Publication Date: 3-1-2017

Rules Amended: 259-008-0065

Subject: The changes to OAR 259-008-0065, add certification maintenance training standards for certified corrections officers, parole and probation officers, and OLCC regulatory specialists. The changes also include clarification to the intent of the requirements already required for certified police officers and the certification maintenance training standards.

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The changes adding certification maintenance training standards for certified corrections officers, parole and probation officers and OLCC regulatory specialists are being implemented with a transition period in which the maintenance training is a recommendation. The recommended transition period extends to December 31, 2019. Certifications for corrections officers, parole and probation officers and OLCC regulatory specialists will not be suspended for maintenance training deficiencies during the transition period which extends to December 31, 2019.

Completion of certification maintenance training standards for certified corrections officers, parole and probation officers and OLCC regulatory specialists will be required beginning January 1, 2020. After January 1, 2020, certified corrections officers, parole and probation officers and OLCC regulatory specialists are subject to suspension of their certifications for a failure to complete maintenance training requirements.

The term law enforcement officer includes police officers, corrections officers, parole and probation officers and OLCC regulatory specialists.

These rule changes are replacing the references to police maintenance training with references to law enforcement maintenance training.

The maintenance training standard for law enforcement officers includes:

- Continued maintenance of FA/CPR certification;
- The completion of 84-hours of training every three years;
- Of the required 84 hours, eight hours annually must be related to Firearms/Use of Force;
- A minimum of one hour annually of ethics training (for all disciplines: recommended training through December 31, 2019 / required training after January 1, 2020);
- If the officer holds supervisory certification, 24 of the 84 hours must be related to Leadership training; and
- The remainder of the 84 hours must be related to general law enforcement training.

Certified police officers should note that the rule language has also been amended to reflect the original intent of the police maintenance standard regarding First Aid and CPR certifications and annual Firearms/Use of Force related training.

These changes clarify that the intent that First Aid and CPR certifications are to be maintained, with "maintained" being interpreted as continuous and without lapse. Failure to maintain First Aid and CPR certifications may result in suspension of a law enforcement officer's certifications.

These changes clarify that the intent that a certified law enforcement officer is required to complete 8 hours of Firearms/Use of Force training annually means that failure to complete the training annually may result in suspension of a law enforcement officer's certifications.

When a law enforcement officer has not met a maintenance training requirement, a deficiency notice will be sent to the officer and their agency first. If the deficiency is not resolved then the Department will send a Notice of Intent to Suspend certifications to the officer and their agency.

The rule also includes the opportunity to request a time extension to complete the training requirements and guidelines for extending a maintenance training cycle based upon a law enforcement officer's leave from their certifiable position.

The rule provides guidelines for recertification following a suspension for failure to meet certification maintenance training requirements.

Rules Coordinator: Jennifer Howald—(503) 378-2432

259-008-0065

Maintenance of Law Enforcement Officer Certification

(1) It is the responsibility of the Board to set the standards for law enforcement officer training and the maintenance of certification for currently employed and certified law enforcement officers.

(a) While it is the responsibility of the Department to uphold those standards, each agency may determine what training will be provided to meet the standards.

(b) The Board recommends that agencies provide training time and training opportunities to enable law enforcement officers to meet the required maintenance training hours.

(2) The requirements established by the Board for the completion of training to maintain certification apply to law enforcement officers who are currently employed full-time, as defined in OAR 259-008-0005, and are currently certified.

(a) Maintenance training is required for police officers.

(b) Effective January 1, 2017, maintenance training will be recommended for corrections officers, full-time parole and probation officers and regulatory specialists. Effective January 1, 2020 maintenance training for corrections officers, full-time parole and probation officers and regulatory specialists will be required.

(c) Certified part-time parole and probation officers are excluded from the three year law enforcement officer maintenance training cycle and are required to meet annual certification maintenance requirements as prescribed in OAR 259-008-0066.

(d) Certifications cannot be maintained when a law enforcement officer is not employed in a certifiable position.

(3) The Department will establish a three year maintenance training cycle for each law enforcement officer upon issuance of a basic certification.

(a) The cycle will begin on January 1st and end on December 31st of the third year.

(b) Basic certifications granted between January 1st and June 30th of the current year will have maintenance cycles that are effective January 1st of the current year.

(c) Basic certifications granted between July 1st and December 31st of the current year will have maintenance cycles that are effective January 1st of the following year.

(d) If a law enforcement officer's certifications lapse pursuant to OAR 259-008-0067, a new maintenance training cycle will be established upon reissuance of a basic certification.

(4) Upon issuance of a supervisory certification, the Department will update the law enforcement officer's current maintenance training cycle to indicate the requirement for Leadership maintenance training.

(5) In order to maintain certification, a law enforcement officer must:

(a) Maintain current First Aid and CPR certifications; and

(b) Complete a minimum of 84 hours of agency approved training prior to the expiration of the established maintenance training cycle.

(A) The 84 hours of agency approved training must include a minimum of 8 hours of Firearms or Use of Force related training completed annually.

(B) Effective January 1, 2017, it is recommended that law enforcement officers complete a minimum of one hour of Ethics training annually. Effective January 1, 2020 a minimum of one hour of ethics training will be an annual training requirement to maintain certification. Ethics training hours will be applied toward the minimum requirement to complete 84 hours of agency approved training within the three year maintenance cycle.

(C) If a law enforcement officer holds supervisory certification, the law enforcement officer will be required to complete 24 hours of Leadership training. Leadership training hours will be applied toward the minimum requirement to complete 84 hours of agency approved training within the three year maintenance cycle.

(D) The remaining hours of the required 84 total training hours may include additional Firearms or Use of Force, Leadership, Ethics or Other training.

(e) Failure to maintain First Aid and CPR certifications may result in suspension of the law enforcement officer's certifications pursuant to section (8) of this rule.

(d) Failure to complete 8 hours of Firearms or Use of Force training annually may result in suspension of the law enforcement officer's certifications pursuant to section (8) of this rule.

(e) Failure to complete 24 hours of Leadership training for a law enforcement officer who holds supervisory certification may result in suspension of the law enforcement officer's supervision, management and executive certifications pursuant to section (8) of this rule.

(6) Documentation of Maintenance Training.

(a) The employing agency must maintain documentation of required maintenance training and First Aid and CPR certifications on each law enforcement officer.

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(b) First Aid and CPR certification expiration dates must be reported to the Department through a Department approved submission process to document a law enforcement officer's maintenance of current First Aid and CPR certifications.

(c) Training hours used to complete the requirements for maintenance of certification must be reported to the Department through a Department approved submission process using either of the following:

(A) A Course Attendance Roster. When an agency submits a course attendance roster to the Department pursuant to OAR 259-008-0090 (Training Records), the training will be entered into each law enforcement officer's DPSST training record and the training hours will be credited to the maintenance training category identified on the course attendance roster; or

(B) A Maintenance Training Log. When an agency submits a maintenance training log to document the completion of maintenance training hours and First Aid and CPR certification, the maintenance training log will be used solely to verify completion of maintenance training requirements and training hours will not be added to the law enforcement officer's DPSST training record.

(d) Training hours that have been added to a law enforcement officer's DPSST training record as "passed" or "completed" may be used to meet maintenance training requirements.

(e) Instructor hours that have been added to a law enforcement officer's DPSST training record as "instructed" represent the hours reported where the law enforcement officer was the instructor for the training content and will not be used to meet maintenance training requirements.

(f) The Department will update the law enforcement officer's DPSST training record to reflect the law enforcement officer's completion of the maintenance training requirements for certification.

(7) Maintenance Training Requirements for Law Enforcement Officers on Leave.

(a) The employing agency must notify the Department whenever a law enforcement officer is on leave for 91 days or more pursuant to OAR 259-008-0020.

(b) When a law enforcement officer is on leave, their certifications will not lapse pursuant to 259-008-0067.

(c) A law enforcement officer who is on leave for any period up to 180 days will have the same maintenance training deadline as the date established prior to the law enforcement officer's leave.

(d) A law enforcement officer who is on leave for more than 180 days but less than one year will receive a one year extension from the maintenance training deadline established prior to the law enforcement officer's leave.

(e) A law enforcement officer who is on leave for more than one year will receive an extension of the maintenance training deadline. The extension will be prorated, based on the duration of the law enforcement officer's leave.

(f) Beginning on the date a law enforcement officer returns to work from leave, a law enforcement officer will have 30 days to complete maintenance training requirements that will make their maintenance current for:

(A) Eight hours of Firearms or Use of Force related training to be applied to the current year's annual training requirement; and

(B) Current First Aid and CPR certifications.

(g) Failure to complete the maintenance training requirements to become current within 30 days of the law enforcement officer's return to work from leave may result in a Notice of Intent to Suspend pursuant to section (8) of this rule.

(8) Suspension for failure to meet maintenance training requirements for certification.

(a) When a law enforcement officer is identified as deficient for the three year maintenance training cycle, annual Firearms or Use of Force training, expired First Aid and CPR certifications or Leadership training, a deficiency notice will be sent to the law enforcement officer and a copy of the deficiency notice will be sent to the law enforcement officer's employing agency.

(b) A law enforcement officer has 30 days from the date of the deficiency notice to complete the maintenance certification requirements identified as deficient or to request a time extension.

(c) When a law enforcement officer fails to complete the deficient maintenance training requirement or fails to request a time extension within 30 days of the date of the deficiency notice, a Contested Case Notice of Intent to Suspend will be prepared by the Department and served on the law enforcement officer pursuant to ORS 181A.640(c) and these rules. A copy of the Notice of Intent will be sent to the law enforcement officer's employing agency.

(d) All contested case notices will be prepared in accordance with the applicable provisions of the Attorney General's Model Rules of Procedure adopted under OAR 259-005-0015.

(e) A law enforcement officer who has been served with a Contested Case Notice of Intent to Suspend has 30 days from the date of mailing or personal service of the notice to provide documentation to the Department showing the completion of the maintenance requirements identified as deficient during the reporting period or to file a written request for hearing with the Department.

(f) Default Order. If the required training is not reported to the Department or a request for hearing received by the Department within 30 days from the date of the mailing or personal service of the Notice, the Contested Case Notice will become a final order suspending certification pursuant to OAR 137-003-0672.

(9) Time Extensions.

(a) The Department may grant a time extension for a law enforcement officer to complete the deficient maintenance training requirements upon receipt of a written request from the law enforcement officer or the agency. The written request must include an action plan for completing the training requirements that were identified as deficient.

(b) No extension will be granted beyond December 31st of the year following the expiration date of the required three year maintenance training cycle.

(c) Training used to complete the deficiencies for a maintenance cycle that has been granted a time extension cannot be applied toward the next maintenance training cycle.

(d) A time extension for a deficient three year maintenance training cycle does not change the three year period for the following maintenance training cycle.

(e) If a law enforcement officer fails to complete the deficient maintenance training requirements before the expiration of the time extension, a Notice of Intent to Suspend will be served on the law enforcement officer by the Department.

(10) A law enforcement officer whose basic certification has been suspended is prohibited from performing the duties of a law enforcement officer.

(11) Recertification following a suspension:

(a) Recertification following a suspension may be obtained by submitting documentation to the Department showing completion of the maintenance training requirements.

(b) Prior to reinstatement of certifications from a suspension for failure to meet certification maintenance training requirements, a law enforcement officer must meet the minimum employment, training and certification requirements outlined in OAR chapter 259 division 008.

Stat. Auth.: ORS 181A.410

Stats. Implemented: ORS 181A.410

Hist.: PS 1-1990, f. & cert. ef. 2-7-90; PS 2-1995, f. & cert. ef. 9-27-95; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; BPSST 22-2002, f. & cert. ef. 11-18-02; BPSST 9-2003, f. & cert. ef. 4-22-03; DPSST 11-2006(Temp), f. & cert. ef. 8-15-06 thru 2-1-07; DPSST 13-2006, f. & cert. ef. 10-13-06; DPSST 3-2007, f. & cert. ef. 1-12-06; DPSST 3-2009, f. & cert. ef. 4-8-09; DPSST 7-2010, f. 7-15-10, cert. ef. 8-1-10; DPSST 31-2012, f. & cert. ef. 12-27-12; DPSST 11-2016, f. 7-25-16, cert. ef. 7-29-16; DPSST 6-2017, f. & cert. ef. 3-22-17

Rule Caption: Combines permanent rule filing for notification of arrest and COD/JTA/FTM changes.

Adm. Order No.: DPSST 7-2017

Filed with Sec. of State: 3-22-2017

Certified to be Effective: 4-1-17

Notice Publication Date: 3-1-2017

Rules Amended: 259-008-0010, 259-008-0011, 259-008-0075, 259-008-0080, 259-008-0085

Subject: This permanent rule change combines the filing for two proposed administrative rule changes.

1. Changes to OARs 259-008-0010, 259-008-0011 and 259-008-0085 update FTM and JTA version dates, clarify PCOD/CCOD remediation, update the attendance standard for mandated courses, and include housekeeping changes.

DPSST administrative rules for the minimum standards for employment and minimum standards for mandated courses document and reference the current versions of the Job Task Analysis (JTA) and the Field Training Manual (FTM) for each public safety officer discipline. Over the course of the past year, the Policy Committees and the Board have reviewed and approved the 2015 Parole

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and Probation JTA, 2015 Telecommunications JTA, 2016 Corrections JTA and the 2016 Emergency Medical Dispatcher Field Training Manual. The rule changes for OARs 259-008-0010, 259-008-0011 and 259-008-0085 provide the updates to reflect each of the current versions of the JTA and FTM that were approved.

Additional rule changes for OAR 259-008-0085 include:

- Changes to rule language to clarify the original intention of the Board that a law enforcement officer be provided one additional attempt to pass the COD course before being required to complete a full basic course due to failure of the COD course. The changes to COD also allow that the remediation and retesting of an initial failure of a Police COD course be remediated by repeating the Police COD course, of the employing agency's choice, either by the self-study option or the two week academy at DPSST. Corrections COD courses are currently only available through the self-study option.

- An update to the rule language regarding attendance for mandated courses to reflect current practices.

- The addition of language to the Basic Police Course, the Basic Corrections Local Course, the Basic Parole and Probation Course and the DOC Basic Corrections Course regarding successful completion of course projects and assignments as part of successful completion of the course.

- The incorporation of updates to the number of tests administered during the Career Officer Development courses from multiple exams to one exam.

- The deletion of language regarding the option for waiver of the PCOD and CCOD FTM requirement (this option already exists in OAR 259-008-0025 and waivers are not a component of OAR 259-008-0085).

- Recommended housekeeping changes for punctuation, consistency in capitalization, reference clarity.

2. Changes to OARs 259-008-0010, 259-008-0011, 259-008-0075 and 259-008-0080 require public safety professionals to report arrests, or criminal citations to appear, to DPSST.

This rule change replaces the requirements for a public safety professional to report a conviction to their employer, who would then notify DPSST, with requirements that the public safety professional report arrests to DPSST directly.

This change requires a public safety professional who is arrested, or receives a criminal citation to appear or its equivalent, for any offense punishable as a crime, to notify DPSST within five business days. Notification must be in writing and include the date of the arrest or citation, the location of the arrest or citation, the reason for the arrest or citation and the arresting or citing agency.

This requirement would not replace any reporting requirements that are a part of an employer and employee agreement or policy.

Rules Coordinator: Jennifer Howald—(503) 378-2432

259-008-0010

Minimum Standards for Employment as a Law Enforcement Officer or Utilization as a Reserve Officer

(1) Citizenship.

(a) A person may not be employed as a corrections officer for more than one year unless the person is a citizen of the United States.

(b) A person may not be employed as a police officer, parole and probation officer or a regulatory specialist for more than 18 months unless the person is a citizen of the United States.

(c) The citizenship requirement found in (b) does not apply to a person employed as a regulatory specialist on March 16, 2012, who continues full-time employment as a regulatory specialist without a lapse.

(2) Age. No law enforcement unit in this state may employ or utilize any person under the age of 21 years as a police officer, corrections officer, parole and probation officer, regulatory specialist or reserve officer.

(3) Fingerprints. Within 90 days of the date of employment in a certified position, each law enforcement officer must be fingerprinted on a standard applicant fingerprint card.

(a) The hiring agency is responsible for fingerprinting and must forward one card to the Oregon State Police Identification Services Section for processing and the assignment of an identification number.

(b) If any procedural change is made by either the Federal Bureau of Investigation or the Oregon State Police Identification Services Section, the Department must comply with the most current requirements.

(c) Applications for certification will not be processed until an applicant's fingerprints have cleared Oregon State Police Identification Services.

(4) Criminal Records. No law enforcement officer may have been convicted:

(a) In this state or any other jurisdiction, of a crime designated under the law where the conviction occurred as being punishable as a felony or as a crime for which a maximum term of imprisonment of more than one year may be imposed;

(b) Of violating any law involving the unlawful use, possession, delivery, or manufacture of a controlled substance, narcotic, or dangerous drug;

(c) In this state of violating any law subject to denial or revocation as identified in OAR 259-008-0070 or has been convicted of violating the statutory counterpart of any of those offenses in any other jurisdiction.

(5) Notification of Arrest or Criminal Citation to Appear. A law enforcement officer who is arrested, or receives a criminal citation to appear or its equivalent, for any offense punishable as a crime must notify the Department within five business days. Notification must be in writing and include the date of the arrest or citation, the location of the arrest or citation, the reason for the arrest or citation and the arresting or citing agency.

(6) Moral Fitness (Professional Fitness). All law enforcement officers must be of good moral fitness. For purposes of this standard, lack of good moral fitness includes, but is not limited to:

(a) Mandatory disqualifying misconduct as described in OAR 259-008-0070(3); or

(b) Discretionary disqualifying misconduct as described in OAR 259-008-0070(4).

(7) Education:

(a) Applicants for the position of a law enforcement officer will be required to furnish documentary evidence of one of the following:

(A) High School diploma;

(B) Successful completion of the General Educational Development (GED) Test; or

(C) A four-year, post-secondary degree issued by an accredited, degree-granting college or university recognized by the Oregon Office of Degree Authorization under the provisions of ORS 348.604.

(i) For the purpose of determining high school graduation level as required by these rules, the applicant must have achieved a score no less than that required by the Oregon Board of Education before issuing an Oregon GED certificate.

(ii) Applicants holding a GED from another state may be required to obtain an Oregon certificate at the discretion of the Department.

(b) Evidence of the above must consist of official transcripts, diplomas, or GED test report forms. Other documentation may be accepted, at the discretion of the Department.

(c) Academic Proficiency Standard. Before beginning basic training or beginning the career officer development course, each applicant must provide evidence to DPSST that the applicant possesses the academic tools necessary to successfully complete basic training.

(A) The hiring agency is responsible for ensuring a law enforcement proficiency test or validated written test designed to evaluate predictors of job-related skills and behaviors has been administered. The hiring agency must verify the completion of the test and report the date of completion to the Department on a Form F-5 (Application for Training) prior to the applicant being admitted to basic training.

(B) Individuals submitting transcripts verifying that they possess at least a four-year academic degree from an institution recognized by the Department under the provisions of OAR 259-008-0045 are exempt from this testing requirement.

(C) Individuals who have successfully completed training resulting in the award of certification in the discipline they are applying for training are exempt from this testing requirement. Individuals must submit proof of training and certification.

(8) Physical Standards.

(a) Prior to admittance into a basic training course, as described in OAR 259-008-0025, all law enforcement officers or applicants must demonstrate the physical abilities to perform the critical and essential tasks of a law enforcement officer.

(A) The critical and essential tasks for law enforcement officers have been determined by the following:

(i) The 2015 DPSST Job Task Analysis for Police Officers;

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(ii) The 2015 DPSST Job Task Analysis for Parole & Probation Officers;

(iii) The 2016 DPSST Job Task Analysis for Corrections Officers; and
(iv) The 2013 Job Task Analysis for Liquor Enforcement Inspectors.

(b) The following minimum physical standards are required for all law enforcement officers:

(A) Visual Acuity.

(i) Monocular vision must be at least 20/30 (Snellen) corrected in each eye and not worse than 20/100 (Snellen) uncorrected in either eye.

(ii) Binocular vision must be at least 20/20 (Snellen) corrected.

(iii) Officers or applicants whose uncorrected vision is worse than 20/100 must wear soft contact lenses to meet the corrected vision requirement.

(B) Color Vision.

(i) Law enforcement officers or applicants must be able to distinguish red, green, blue, and yellow, as determined by the HRR Test, 4th Edition.

(ii) Red or green deficiencies may be acceptable, providing the officer or applicant can read at least nine of the first 13 plates of the Ishihara Test.

(iii) Officers or applicants who fail to meet the color vision standard may meet the standard by demonstrating that they can correctly discriminate colors via a field test conducted by the employer as approved by the examining licensed physician or surgeon.

(C) Depth Perception. Random Stereo Test equal to 60 seconds of arc or better.

(D) Peripheral Vision. Visual Field Performance must be 140 degrees in the horizontal meridian combined.

(E) Hearing.

(i) Law enforcement officers or applicants must have no average hearing loss greater than 25 decibels (db) at the 500, 1,000, 2,000 and 3,000-Hertz levels in either ear with no single loss in excess of 40 db.

(ii) Law enforcement officers or applicants who fail to meet the hearing standard must be examined by a licensed audiologist or otorhinolaryngologist to determine if an amplification device will allow them to meet the hearing standard.

(iii) An amplification device may be used to meet the hearing standard, if a licensed audiologist or otorhinolaryngologist determines an amplification device will allow the officer or applicant to meet the hearing standard.

(F) Cardiovascular.

(i) Resting blood pressure must be less than or equal to 160 mmHg systolic and 100 mmHg diastolic.

(ii) Law enforcement officers or applicants who fail to meet the cardiovascular standards must be examined by a general practitioner to address the issue.

(iii) Law enforcement officers or applicants who have a history of organic cardiovascular disease will necessitate further medical evaluation.

(G) Pulmonary Capacity. Officers and applicants with obstructive or restrictive spirometry (FVC or FEV1 less than 80% or FVC/FEV1 ratio of less than 70%) require further evaluation.

(H) Medications. The side effects of any prescribed medication must not interfere with the law enforcement officer's or applicant's ability to perform the critical and essential tasks of the job.

(I) Medical Recommendations.

(i) It is recommended that officers or applicants with a history of seizures or diabetes be evaluated following American College of Occupational and Environmental Medicine's Guidance for the Medical Evaluation of Law Enforcement Officers, to include post-employment monitoring.

(ii) It is recommended that officers or applicants with a history of hypertension (resting blood pressure exceeding 160 mmHg systolic and 100 mmHg diastolic (160/100) have post-employment medical monitoring.

(9) Medical Examinations. To ensure that law enforcement officers and applicants meet the minimum physical standards listed in section (8) of this rule, all officers and applicants must be examined by a licensed physician or surgeon.

(a) The licensed physician or surgeon performing the medical examination must be provided with a current DPSST Medical Examination Report (Form F-2) for completion at the time of the examination.

(b) The medical examination must conform to applicable standards of the Americans with Disabilities Act (ADA) Title 42 USC 1210.

(c) The medical examination must be completed within 180 days prior to the start of employment as a law enforcement officer.

(d) Upon completion of the medical examination, the examining licensed physician or surgeon must sign the final page of the Form F-2

(Form F-2A) attesting that the officer or applicant has met or has not met the minimum physical standards listed in section (8) of this rule.

(e) The Form F-2A must be submitted to the Department no later than 90 days after the start of employment.

(f) Law enforcement officers and applicants will not be admitted into a basic course until the Department receives a Form F-2A attesting that the minimum physical standards have been met or a physical standard waiver has been granted, as described in section (10) of this rule.

(g) DPSST may require that a law enforcement officer or applicant take a subsequent examination by a licensed physician or surgeon of the Department's choice at the expense of the officer, the applicant or the hiring agency.

(h) Certified individuals who are hired into a discipline they are not certified for are required to successfully complete a new physical examination.

(i) A law enforcement officer whose certification has lapsed will be required to complete a new medical examination prior to re-applying for certification.

(j) Individuals employed in a limited duration, administrative position, as described in OAR 259-008-0078, are exempt from the medical examination requirement.

(k) Regulatory Specialists employed by OLCC prior to July 1, 2015 who have previously completed OLCC basic training are exempt from completion of the physical examination.

(10) Physical Standard Waivers.

(a) An individual or department head may request a waiver of any physical standard in section (8) of this rule by:

(A) Submitting a request to the Department in writing; and

(B) Providing documentation or pertinent testimony that supports the physical standard waiver request.

(C) If further clarification is needed, the Department may require additional documentation or testimony from the individual or department head requesting the physical standard waiver.

(D) The requesting individual may be required to demonstrate the ability to perform the critical and essential job tasks.

(E) If the Department finds that the physical standard waiver request would not prohibit the requesting individual's ability to successfully complete training and the performance of the critical and essential tasks, the waiver will be granted.

(F) Any expense associated with providing physical standard waiver documentation or testimony will be the responsibility of the requesting individual or the requesting agency.

(G) If an individual requests and is granted a medical waiver, but does not obtain employment within one year from the date the waiver is granted, the waiver will be void.

(H) If the Department denies a request for a waiver of any physical standard in section (8) of this rule, the Department will issue Notice and proceed as provided in section (10)(b) of this rule.

(b) Contested Case Hearing Process for Denial of Physical Standard Waivers.

(A) Initiation of Proceedings: A contested case notice will be prepared when the Department denies a physical standard waiver after determining that factual data meeting the statutory and administrative rule requirements justifies the denial.

(B) Contested Case Notice: The contested case notice will be prepared in accordance with the applicable provisions of the Attorney General's Model Rules of Procedure adopted under OAR 259-005-0015.

(C) Response Time: A party who has been served with a "Contested Case Notice of Intent to Deny a Waiver" has 60 days from the date of mailing or personal service of the notice in which to file a written request for a hearing with the Department.

(D) Default Order: If a timely request for a hearing is not received, the Contested Case Notice will become a final order denying the requested waiver pursuant to OAR 137-003-0672.

(E) Hearing Request: If a timely request for a hearing is received, the Department will refer the matter to the Office of Administrative Hearings in accordance with OAR 137-003-0515.

(F) Proposed and Final Orders: In cases where a hearing is requested, proposed orders, exceptions, and final orders will be issued pursuant to the applicable provisions of the Attorney General's Model Rules of Procedure adopted under OAR 259-005-0015.

[ED. NOTE: Forms referenced are available from the agency.]

Stat. Auth.: ORS 181A.410, 183.341

Stats. Implemented: 181A.410, 183.341

Hist.: PS 12, f. & ef. 12-19-77; PS 1-1981, f. 9-26-81, ef. 11-2-81; PS 1-1983, f. & ef. 12-15-83; PS 1-1985, f. & ef. 4-24-85; PS 1-1987, f. & ef. 10-26-87; Renumbered from 259-010-0015, PS 1-1990, f. & cert. ef. 2-7-90; PS 2-1995, f. & cert. ef. 9-27-95; PS 2-1996, f.

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5-15-96, cert. ef. 5-20-96; PS 4-1997, f. 3-20-97, cert. ef. 3-25-97; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; BPSST 1-1999, f. & cert. ef. 3-9-99; BPSST 9-2000, f. 11-13-00, cert. ef. 11-15-00; BPSST 3-2001, f. & cert. ef. 8-22-01; BPSST 12-2001(Temp), f. & cert. ef. 10-26-01 thru 4-5-02; BPSST 5-2002(Temp), f. 4-3-02, cert. ef. 4-6-02 thru 8-1-02; BPSST 16-2002, f. & cert. ef. 7-5-2002; BPSST 20-2002, f. & cert. ef. 11-21-02; DPSST 3-2003, f. & cert. ef. 1-22-03; DPSST 6-2003, f. & cert. ef. 4-11-03; DPSST 8-2003, f. & cert. ef. 4-18-03; DPSST 14-2003, f. & cert. ef. 12-22-03; DPSST 3-2006, f. & cert. ef. 2-28-06; DPSST 12-2006, f. & cert. ef. 10-13-06; DPSST 10-2007, f. & cert. ef. 10-15-07; DPSST 13-2007(Temp), f. & cert. ef. 11-1-07 thru 4-18-08; DPSST 1-2008(Temp), f. & cert. ef. 1-15-08 thru 4-18-08; DPSST 4-2008, f. & cert. ef. 4-15-08; DPSST 21-2008, f. 12-15-08, cert. ef. 1-1-09; DPSST 10-2009, f. & cert. ef. 9-21-09; DPSST 9-2011, f. & cert. ef. 6-28-11; DPSST 14-2011, f. 9-26-11, cert. ef. 10-1-11; DPSST 18-2012, f. & cert. ef. 8-27-12; DPSST 19-2012, f. & cert. ef. 8-31-12; DPSST 18-2013, f. & cert. ef. 7-23-13; DPSST 1-2014, f. & cert. ef. 1-2-14; DPSST 13-2014, f. & cert. ef. 6-24-14; DPSST 32-2014, f. 12-29-14, cert. ef. 1-1-15; DPSST 7-2015, f. & cert. ef. 3-24-15; DPSST 11-2015, f. 6-23-15, cert. ef. 7-1-15; DPSST 18-2015, f. 12-22-15, cert. ef. 1-1-16; DPSST 4-2016, f. 3-22-16, cert. ef. 4-1-16; DPSST 11-2016, f. 7-25-16, cert. ef. 7-29-16; DPSST 7-2017, f. & cert. ef. 3-22-17

259-008-0011

Minimum Standards for Employment as a Telecommunicator and Emergency Medical Dispatcher

(1) Fingerprints. Within 90 days of the date of employment in a certifiable position, each telecommunicator and emergency medical dispatcher must be fingerprinted on a standard applicant fingerprint card.

(a) If the hiring agency is a public agency, it is responsible for fingerprinting and forwarding one fingerprint card to the Oregon State Police Identification Services Section for processing and the assignment of an identification number.

(b) If the hiring agency is a private agency, it is responsible for fingerprinting and forwarding one fingerprint card to the Department along with the appropriate fee.

(c) Applications for certification will not be processed until an applicant's fingerprints have cleared Oregon State Police Identification Services.

(d) If any procedural change is made by either the Federal Bureau of Investigation or the Oregon State Police Identification Services Section, the Department will comply with the most current requirements.

(2) Criminal Records. No telecommunicator or emergency medical dispatcher will have been convicted:

(a) In this state or any other jurisdiction, of a crime designated under the law where the conviction occurred as being punishable as a felony or as a crime for which a maximum term of imprisonment of more than one (1) year may be imposed;

(b) Of violating any law involving the unlawful use, possession, delivery, or manufacture of a controlled substance, narcotic, or dangerous drug;

(c) In this state of violating any law subject to denial or revocation as identified in OAR 259-008-0070 or has been convicted of violating the statutory counterpart of any of those offenses in any other jurisdiction.

(3) Notification of Arrest or Criminal Citation to Appear. A telecommunicator or emergency medical dispatcher who is arrested, or receives a criminal citation to appear or its equivalent, for any offense punishable as a crime must notify the Department within five business days. Notification must be in writing and include the date of the arrest or citation, the location of the arrest or citation, the reason for the arrest or citation and the arresting or citing agency.

(4) Moral Fitness (Professional Fitness). All telecommunicators and emergency medical dispatchers must be of good moral fitness. For purposes of this standard, lack of good moral fitness includes, but is not limited to:

(a) Mandatory disqualifying misconduct as described in OAR 259-008-0070(3); or

(b) Discretionary disqualifying misconduct as described in OAR 259-008-0070(4).

(5) Education:

(a) Applicants for the position of a telecommunicator or emergency medical dispatcher will be required to furnish documentary evidence of one of the following:

(A) High School diploma;

(B) Successful completion of the General Educational Development (GED) Test; or

(C) A four-year, post-secondary degree issued by a degree-granting college or university accredited by a recognized national or regional accrediting body, or recognized by the Oregon Office of Degree Authorization under the provisions of ORS 348.604.

(i) For the purpose of determining high school graduation level as required by these rules, the applicant must have achieved a score no less than that required by the Oregon Board of Education before issuing an Oregon GED certificate.

(ii) Applicants holding a GED from another state may be required to obtain an Oregon certificate at the discretion of the Department.

(b) Evidence of the above must consist of official transcripts, diplomas, or GED test report forms. Other documentation may be accepted, at the discretion of the Department.

(6) Academic Proficiency Standard. Before beginning basic telecommunicator or Emergency Medical Dispatcher (EMD) training or challenging basic telecommunicator training, each applicant must provide evidence to DPSST that the applicant possesses the academic tools necessary to successfully complete basic telecommunicator or EMD training.

(a) The hiring agency is responsible for ensuring a telecommunicator/EMD proficiency test or validated written test designed to evaluate predictors of job-related skills and behavior has been administered. The hiring agency must verify the completion of the test and report the date of completion to the Department on a Form F-5 (Application for Training) prior to the applicant being admitted to basic telecommunicator or EMD training.

(b) Individuals submitting transcripts verifying that they possess at least a four-year academic degree from an institution recognized by DPSST under the provisions of OAR 259-008-0045 are exempt from this testing requirement.

(c) Individuals who have successfully completed training resulting in the award of certification in the discipline they are applying for training are exempt from this testing requirement. Individuals must submit proof of training and certification.

(7) Physical Standards.

(a) Prior to admittance into a basic training course, as described in OAR 259-008-0025, all telecommunicators, emergency medical dispatchers and applicants must demonstrate the physical abilities to perform the critical and essential tasks of a telecommunicator or emergency medical dispatcher.

(A) The critical and essential tasks for telecommunicators have been determined by the 2015 DPSST Job Task Analysis for Telecommunicators.

(B) The critical and essential tasks for emergency medical dispatchers have been determined by the 1995 National Highway Traffic Safety Administration Emergency Medical Dispatcher (EMD) National Standards Curriculum.

(b) The following minimum physical standards are required for all telecommunicators and emergency medical dispatchers.

(A) Visual Acuity. Corrected vision must be at least 20/30 (Snellen) when tested using both eyes together.

(B) Color Vision.

(i) Telecommunicators, emergency medical dispatchers and applicants must be able to distinguish red, green, blue, and yellow as determined by the HRR Test, 4th Edition.

(ii) Red or green deficiencies may be acceptable, providing the telecommunicator, emergency medical dispatcher or applicant can read at least nine of the first 13 plates of the Ishihara Test.

(iii) Telecommunicators, emergency medical dispatchers or applicants who fail to meet the color vision standard may meet the standard by demonstrating that they can correctly discriminate colors via a field test conducted by the employer as approved by the examining licensed health professional.

(C) Hearing.

(i) Telecommunicators, emergency medical dispatchers or applicants must meet National Emergency Number Association (NENA) hearing standard NENA-STA-007.2-2014 (June 14, 2014).

(ii) Telecommunicators, emergency medical dispatchers or applicants who fail to meet the hearing standard must be examined by a licensed audiologist or otorhinolaryngologist to determine if an amplification device will allow them to meet the hearing standard.

(iii) An amplification device may be used to meet the hearing standard, if a licensed audiologist or otorhinolaryngologist determines an amplification device will allow the telecommunicator, emergency medical dispatcher or applicant to meet the hearing standard.

(D) Medications. The side effects of any prescribed medication must not interfere with the telecommunicator's, emergency medical dispatcher's or applicant's ability to perform the essential functions and tasks of the job.

(8) Medical Examinations. To ensure that telecommunicators, emergency medical dispatchers, and applicants meet the minimum physical standards listed in section (7) of this rule, telecommunicators, emergency medical dispatchers, and applicants must be examined by a licensed health professional.

(a) The licensed health professional performing the medical examination must be provided with a current DPSST Medical Examination Report (Form F-2T) for completion at the time of the examination.

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(b) The medical examination must conform to applicable standards of the Americans with Disabilities Act (ADA) Title 42 USC 1210.

(c) The medical examination must be completed within 180 days prior to the start of employment as a telecommunicator or emergency medical dispatcher.

(d) Upon completion of the medical examination, the examining licensed health professional must sign the final page of the Form F-2T (Form F-2TA) attesting that the telecommunicator, emergency medical dispatcher or applicant has met or has not met the minimum physical standards listed in section (7) of this rule.

(e) The Form F-2TA must be submitted to the Department no later than 90 days after the start of employment.

(f) Telecommunicators, emergency medical dispatchers or applicants will not be admitted into a basic course until the Department receives a Form F-2TA attesting that the minimum physical standards have been met or a physical standard waiver has been granted, as described in section (9) of this rule.

(g) The Department may require that a telecommunicator or emergency medical dispatcher take a subsequent examination by a licensed health professional of the Department's choice at the expense of the applicant or the hiring agency.

(h) Certified individuals who are hired into a discipline for which they are not certified are required to successfully complete a new physical examination.

(i) A telecommunicator or emergency medical dispatcher whose certification has lapsed will be required to complete a new medical examination prior to re-applying for certification.

(j) Individuals employed in a limited duration, administrative position, as described in OAR 259-008-0078, are exempt from the medical examination requirement.

(9) Physical Standard Waivers.

(a) An individual or department head may request a waiver of any physical standard in section (7) of this rule by:

(A) Submitting a request to the Department in writing; and

(B) Providing documentation or pertinent testimony that supports the physical standard waiver request.

(C) If further clarification is needed, the Department may require additional documentation or testimony from the individual or department head requesting the physical standard waiver.

(D) The requesting individual may be required to demonstrate the ability to perform the critical and essential job tasks.

(E) If the Department finds that the physical standard waiver request would not prohibit the requesting individual's ability to successfully complete training and the performance of the critical and essential tasks, the waiver will be granted.

(F) Any expense associated with providing physical standard waiver documentation or testimony will be the responsibility of the requesting individual or the requesting agency.

(G) If an individual requests and is granted a physical standard waiver, but does not obtain employment within one year from the date the waiver is granted, the waiver will be void.

(H) If the Department denies a request for a waiver of any physical standard in section (7) of this rule, the Department will issue Notice and proceed as provided in section (9) (b) of this rule.

(b) Contested Case Hearing Process for Denial of Physical Standard Waivers.

(A) Initiation of Proceedings: A contested case notice will be prepared when the Department denies a physical standard waiver after determining that factual data meeting the statutory and administrative rule requirements justifies the denial.

(B) Contested Case Notice: All contested case notices will be prepared in accordance with the applicable provisions of the Attorney General's Model Rules of Procedure adopted under OAR 259-005-0015.

(C) Response Time: A party who has been served with a "Contested Case Notice of Intent to Deny a Waiver" has 60 days from the date of mailing or personal service of the notice in which to file a written request for a hearing with the Department.

(D) Default Order: If a timely request for a hearing is not received, the Contested Case Notice will become a final order denying the requested waiver pursuant to OAR 137-003-0672.

(E) Hearing Request: If a timely request for a hearing is received, the Department will refer the matter to the Office of Administrative Hearings in accordance with OAR 137-003-0515.

(F) Proposed and Final Orders: In cases where a hearing was requested, proposed orders, exceptions, and final orders will be issued pursuant to

the applicable provisions of the Attorney General's Model Rules of Procedure adopted under OAR 259-005-0015.

[ED. NOTE: Forms referenced are available from the agency.]

Stat. Auth.: ORS 181A.410

Stats. Implemented: ORS 181A.410

Hist.: BPSST 1-2002, f. & cert. ef. 2-6-02; DPSST 1-2004, f. 1-16-04, cert. ef. 1-20-04; DPSST 5-2004, f. & cert. ef. 4-23-04; DPSST 3-2007, f. & cert. ef. 1-12-07; DPSST 10-2007, f. & cert. ef. 10-15-07; DPSST 5-2008, f. & cert. ef. 4-15-08; DPSST 21-2008, f. 12-15-08, cert. ef. 1-1-09; DPSST 6-2009, f. & cert. ef. 7-13-09; DPSST 9-2010(Temp), f. & cert. ef. 10-15-10 thru 4-12-11; DPSST 13-2010, f. & cert. ef. 12-23-10; DPSST 9-2011, f. & cert. ef. 6-28-11; DPSST 14-2011, f. 9-26-11, cert. ef. 10-1-11; DPSST 5-2012, f. & cert. ef. 3-26-12; DPSST 19-2012, f. & cert. ef. 8-31-12; DPSST 18-2013, f. & cert. ef. 7-23-13; DPSST 13-2014, f. & cert. ef. 6-24-14; DPSST 32-2014, f. 12-29-14, cert. ef. 1-1-15; DPSST 7-2015, f. & cert. ef. 3-24-15; DPSST 10-2015, f. 6-23-15, cert. ef. 7-1-15; DPSST 6-2016, f. 3-22-16, cert. ef. 4-1-16; DPSST 11-2016, f. 7-25-16, cert. ef. 7-29-16; DPSST 7-2017, f. & cert. ef. 3-22-17

259-008-0075

Eligibility for Candidacy for Office of Sheriff

(1) A person is not eligible to be a candidate for election or appointment to the office of sheriff unless at the time in which an eligibility determination is being requested the person:

(a) Is 21 years of age or older;

(b) Has at least four years experience as a full-time law enforcement officer or at least two years experience as a full-time law enforcement officer with at least two years post-high school education; and

(c) Has not been convicted of a felony or any other crime that would prevent the person from being certified as a police officer under ORS 181A.355 to 181A.430.

(2) As used in section (1) of this rule, "two years post-high school education" means four semesters or six quarters of classroom education in a formal course of study undertaken after graduation from high school in any accredited college or university. The term does not include apprenticeship or on-the-job training.

(3) The procedure for determining whether an individual is eligible to be a candidate for election to the office of sheriff is:

(a) After filing a nominating petition or declaration of candidacy with the county clerk or county official in charge of elections, a potential candidate for sheriff must submit an Application for Determination of Eligibility to Be Sheriff (DPSST Form F-25) and Criminal History Affidavit (DPSST Form F-26) to the Department;

(b) The Department will make an eligibility determination and file a copy of its determination on an individual's eligibility to be a candidate for election to the office of sheriff with the county clerk or county official in charge of elections not later than the 61st day before the date of an election;

(c) The Department will notify the applicant in writing of the determination and decision concerning the eligibility of the applicant by certified mail, mailed to the applicant and postmarked at not later than the 61st day before the date of an election.

(4) If the person is not certified as a police officer by the Department at the time of accepting appointment or filing as a candidate, a person elected or appointed to the office of sheriff must:

(a) Obtain certification not later than one year after taking office;

(b) File a copy of the certification with the County Clerk or the county official in charge of elections within one year after taking office.

(5) Prior to attending any Department-approved training course, a person elected or appointed to the office of Sheriff must comply with the minimum standards for employment and training specified in OAR 259-008-0010 and 259-008-0025. This includes, but is not limited to the following categories:

(a) Citizenship;

(b) Age;

(c) Fingerprints;

(d) Criminal Records;

(e) Notification of Arrest or Criminal Citation to Appear;

(f) Moral Fitness (Professional Fitness);

(g) Education;

(h) Physical Examination;

(A) Any written request for a waiver of any physical requirement must be submitted to the Department as described in OAR 259-008-0010(8)(o);

(B) Any request for a waiver of any physical requirement must be approved by a Policy Committee and Board; and

(C) Any expense associated with providing documentation or testimony will be the responsibility of the person requesting the waiver.

(i) Submitting an Application for Training (DPSST Form F-5) to the Department providing evidence that a law enforcement proficiency test or validated written test designed to evaluate predictors of job-related skills and behaviors has been completed as required in OAR 259-008-0010;

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(j) Submitting a current Medical Examination Report (DPSST Form F-2) completed by a licensed physician; and

(k) Completion of a basic course and field training manual, unless a written request for a waiver of this requirement is received and approved by the Department.

(6) Prior to obtaining certification as a police officer, a person elected or appointed to the office of Sheriff must comply with the minimum standards for certification specified in OAR 259-008-0060 which include, but are not limited to:

(a) Full-time employment;

(b) Submission of a Criminal Justice Code of Ethics (DPSST Form F 11);

(c) Submission of an Application for Certification (DPSST Form F-7) with all applicable sections of the form completed; and

(d) Valid first aid and cardiopulmonary resuscitation (CPR) cards.

(7) Any newly elected or appointed public safety officer must submit a Personnel Action Report (DPSST Form F-4) to the Department within 10 business days after taking office or appointment, as provided in OAR 259-008-0020.

(8) For complete information relating to employment, training and certification requirements, refer to the full text of the statutes and rules referenced in subsections (1) through (6) above.

(9) The Department may deny approval or revoke or rescind any approval previously given, if any falsification is made on the application or documents submitted in support of the application.

(10) The Department will provide a copy of this rule to all persons requesting an evaluation of their eligibility to be a candidate for sheriff, upon request.

[ED. NOTE: Forms referenced are available from the agency.]

Stat. Auth.: ORS 206.015

Stats. Implemented: ORS 206.015

Hist.: PS 1-1981, f. 9-26-81, ef. 11-2-81; PS 1-1982, f. & ef. 7-2-82; PS 2-1982, f. & ef. 9-7-82; PS 1-1983, f. & ef. 12-15-83; PS 2-1987, f. & ef. 10-26-87; Renumbered from 259-010-0057, PS 1-1990, f. & cert. ef. 2-7-90; PS 2-1995, f. & cert. ef. 9-27-95; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; DPSST 9-2007, f. & cert. ef. 8-15-07; DPSST 3-2010, f. 4-12-10, cert. ef. 5-1-10; DPSST 11-2013, f. & cert. ef. 6-24-13; DPSST 18-2013, f. & cert. ef. 7-23-13; DPSST 1-2014, f. & cert. ef. 1-2-14; DPSST 17-2014, f. & cert. ef. 7-23-14; DPSST 7-2017, f. & cert. ef. 3-22-17

259-008-0080

Certification of Instructors

(1) Standards and Certification will certify instructors deemed qualified to teach all mandated training courses.

(2) Minimum Standards for Instructor Certification:

(a) Fingerprints.

(A) Prior to the date of employment, instructors and applicants must be fingerprinted on standard applicant fingerprint cards. The hiring agency is responsible for fingerprinting and must forward a card to the Oregon State Police Identification Services Section for processing and assignment of an identification number.

(B) If any procedural change is made by either the Federal Bureau of Investigation or the Oregon State Police Identification Services Section the Department must comply with the most current requirements.

(b) Criminal Records. No instructor or applicant may have been convicted:

(A) In this state or any other jurisdiction, of a crime designated under the law where the conviction occurred as being punishable as a felony or as a crime for which a maximum term of imprisonment of more than one year may be imposed;

(B) Of violating any law involving the unlawful use, possession, delivery, or manufacture of a controlled substance, narcotic, or dangerous drug;

(C) In this state of violating any law subject to denial or revocation as identified in OAR 259-008-0070 or has been convicted of violating the statutory counterpart of any of those offenses in any other jurisdiction.

(c) Notification of Arrest or Criminal Citation to Appear. An instructor who is arrested, or receives a criminal citation to appear or its equivalent, for any offense punishable as a crime must notify the Department within five business days. Notification must be in writing and include the date of the arrest or citation, the location of the arrest or citation, the reason for the arrest or citation and the arresting or citing agency.

(d) Moral Fitness (Professional Fitness). All instructors and applicants must be of good moral fitness. For purposes of this standard, lack of good moral fitness includes, but is not limited to:

(A) Mandatory disqualifying misconduct as described in OAR 259-008-0070(3); or

(B) Discretionary disqualifying misconduct as described in OAR 259-008-0070(4).

(e) Training Requirements.

(A) Notwithstanding section (3), all instructors and applicants must complete a Department-approved Basic Instructor Development Course or equivalent Department-approved training. The course must include instruction on the theory and application of adult learning principles and presentation skills.

(i) For the purposes of this rule, adult learning principles must include problem-based, practical, collaborative training that builds on the students' life experience and knowledge.

(ii) For the purposes of this rule, presentation skills must include the appropriate knowledge and preparation of materials and training that engage the student through a variety of methods to develop critical thinking, while acquiring job-specific knowledge and skills.

(B) Instructors whose certification has lapsed may be required to satisfactorily complete a Department-approved Basic Instructor Development Course or equivalent Department-approved training to qualify for re-certification.

(f) Professional experience. Notwithstanding section (3), instructors and applicants must have:

(A) Three years' experience in a certifiable public safety position; or

(B) Non-certified, professional or educational experience that allows them to possess the requisite knowledge, skills and abilities to instruct mandated courses.

(g) It is the continuing responsibility of the agency utilizing certified instructors to ensure that instructors are assigned only topics which they are qualified to teach and the instruction is evaluated on a regular basis.

(h) All applicants for initial certification must submit an Instructor Certification Application (DPSST Form F-9) with any required documentation to Standards and Certification.

(3) The requirements in sections (2)(e) and (2)(f) may be waived if a Training Supervisor or Training Manager responsible for mandated training delivery can attest to the instructor or applicant's knowledge and skills to instruct mandated courses.

(4) Instructor certification is not required for instructors who instruct non-mandated courses.

(5) Review of instructor certification will be the responsibility of Standards and Certification. Reviews may be initiated upon the request of a department head, staff, or other reliable source.

[ED. NOTE: Form referenced is available from the agency.]

Stat. Auth.: ORS 181A.410 & 181A.590

Stats. Implemented: ORS 181A.410 & 181A.590

Hist.: PS 12, f. & ef. 12-19-77; PS 1-1983, f. & ef. 12-15-83; Renumbered from 259-010-0060, PS 1-1990, f. & cert. ef. 2-7-90; PS 2-1995, f. & cert. ef. 9-27-95; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; BPSST 22-2002, f. & cert. ef. 11-18-02; DPSST 17-2013, f. & cert. ef. 7-23-13; DPSST 1-2014, f. & cert. ef. 1-2-14; DPSST 5-2014, f. & cert. ef. 1-29-14; DPSST 18-2014, f. & cert. ef. 7-23-14; DPSST 16-2015, f. & cert. ef. 7-23-15; DPSST 11-2016, f. 7-25-16, cert. ef. 7-29-16; DPSST 7-2017, f. & cert. ef. 3-22-17

259-008-0085

Minimum Standards for Mandated Courses

(1) Basic Police Course and Field Training.

(a) The curriculum for the Basic Police Course and field training manual will be based on the critical and essential job tasks identified in the 2015 DPSST Job Task Analysis for Police Officers.

(b) The Basic Police Course will consist of sufficient training hours to satisfy all Board-approved instructional goals (approximately 640 hours). Training will include, at a minimum:

(A) Training on law, theory, policies and practices related to pursuit driving;

(B) Vehicle pursuit exercises;

(C) Twenty-four hours of training in the recognition of mental illnesses as described in ORS 181A.440(2). At least one hour of mental health training will be dedicated to the appropriate use of the mental health database maintained by the Department of State Police within the Law Enforcement Data System;

(D) The investigation and reporting of cases of missing children and adults;

(E) The investigation, identification and reporting of crimes motivated by prejudice based on perceived race, color, religion, national origin, sexual orientation, marital status, political affiliation or beliefs, membership or activity in or on behalf of a labor organization or against a labor organization, physical or mental disability, age, economic or social status or citizenship of the victim;

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(F) Investigation, identification and reporting of crimes constituting abuse, as defined in ORS 419B.005, or domestic violence; and

(G) The requirements of the Vienna Convention on Consular Relations, including situations in which officers are required to inform a person of the person's rights under the convention.

(c) Field training requires successful completion of the 2013 Police Officer Field Training Manual or DPSST-approved equivalent manual.

(2) Basic Corrections Local Course and Field Training.

(a) The curriculum for the Basic Corrections Local Course and field training manual will be based on the critical and essential job tasks identified in the 2016 Job Task Analysis for Corrections Officers.

(b) The Basic Corrections Local Course will consist of sufficient training hours to satisfy all Board-approved instructional goals (approximately 240 hours).

(c) Field training requires successful completion of the 2009 Corrections Officer Field Training Manual or DPSST-approved equivalent manual.

(3) Basic Parole and Probation Course and Field Training.

(a) The curriculum for the Basic Parole and Probation Course and field training manual will be based on the critical and essential job tasks identified in the 2015 Job Task Analysis for Parole and Probation Officers.

(b) The Basic Parole and Probation Course will consist of sufficient training hours to satisfy all Board-approved instructional goals (approximately 200 hours).

(c) Field training requires successful completion of the 2009 Parole & Probation Officer Field Training Manual or DPSST-approved equivalent manual.

(4) Basic Telecommunicator Course and Field Training.

(a) The curriculum for the Basic Telecommunicator Course and field training manual will be based on the critical and essential job tasks identified in the 2015 Job Task Analysis for Telecommunicators.

(b) The Basic Telecommunicator Course will consist of sufficient training hours to satisfy all Board-approved instructional goals (approximately 80 hours).

(c) Field training requires successful completion of the 2014 Telecommunicator Field Training Manual or DPSST-approved equivalent manual.

(5) Basic Emergency Medical Dispatcher Course and Field Training.

(a) The curriculum for the Basic Emergency Medical Dispatcher Course will be based on the 1996 National Highway Traffic Safety Administration (NHTSA) Emergency Medical Dispatcher standards.

(b) The Basic Emergency Medical Dispatcher Course will consist of sufficient training hours to satisfy all NHSTA instructional goals (approximately 24 hours).

(c) Field training requires successful completion of the 2016 Emergency Medical Dispatcher Field Training Manual or DPSST-approved equivalent manual.

(d) The Basic Emergency Medical Dispatcher Course may be delivered by an approved third-party vendor or agency if the course has been certified as equivalent by Standards and Certification.

(A) Vendors or agencies must submit a Course Certification Request (Form F-20) to request an equivalency determination.

(B) Equivalency determinations are valid for one year and will expire on December 31 of each year.

(6) Department of Corrections (DOC) Basic Corrections Course and Field Training.

(a) The curriculum for the DOC Basic Corrections Course will be based on the 2016 Job Task Analysis for Corrections Officers.

(b) The DOC Basic Corrections Course will consist of sufficient training hours to satisfy all Board-approved instructional goals (approximately 240 hours).

(c) The DOC Basic Corrections Course will incorporate the DPSST Basic Corrections 2012 Instructional Goals within each of the following sections:

(A) Section A — Legal Considerations (Approximately 20 hours);

(B) Section B — Security Procedures (Approximately 37 hours);

(C) Section C — Inmate Supervision (Approximately 43 hours);

(D) Section D — Inmate Health Care (Approximately 16 hours);

(E) Section E — Professional Skills (Approximately 16 hours);

(F) Section F — Personal Fitness (Approximately 27 hours);

(G) Section G — Defensive Tactics (Approximately 41 hours); and

(H) Section H — Firearms (Approximately 26 hours).

(d) Administrative time will make up approximately 14 hours.

(e) Eighty percent of the DOC Basic Corrections Course must contain participatory learning activities. Participatory learning activities will include:

(A) A minimum of 51 hours of Reality Based Training;

(B) A minimum of three written incident reports that are complete, accurate, and demonstrate the report writing fundamentals of content, organization, and mechanics. Each report must be evaluated by an instructor to ensure the student's ability to accurately document an incident using report writing components; and

(C) A minimum of four Problem Based Learning activities consisting of at least eight hours.

(f) Field training requires successful completion of the 2009 Department of Corrections Officer Field Training Manual.

(7) Basic Oregon Liquor Control Commission Regulatory Specialist Course and Field Training.

(a) The curriculum for the Basic Regulatory Specialist Course will be based on the 2013 Job Task Analysis for Liquor Enforcement Inspectors.

(b) The Basic Regulatory Specialist Course will consist of sufficient training hours to satisfy all Board-approved instructional goals (approximately 160 hours).

(c) Field training requires successful completion of the 2015 Pilot Regulatory Specialist Field Training Manual.

(8) Basic Instructor Development Course. The Basic Instructor Development Course must include instruction on the theory and application of adult learning principles and presentation/facilitation skills.

(9) Supervision Course. The curriculum for the Supervision Course will be based on the 2000 Job Task Analysis for Oregon Public Safety Supervisors and a 2009 Survey of Incumbent Supervisors.

(10) Management Course. The curriculum for the Management Course will be based on the 2000 Job Task Analysis for Oregon Public Safety Middle Managers, a 2007 DACUM for Middle Management and a 2009 Survey of Incumbent Managers.

(11) Academy Police Career Officer Development Course (PCOD) and Field Training.

(a) The Academy PCOD will be based on the 2015 Job Task Analysis for Police Officers.

(b) The Academy PCOD will consist of sufficient training hours to satisfy all Board-approved instructional goals (approximately 80 hours).

(c) Field training requires successful completion of the 2013 Police Officer Field Training Manual or DPSST-approved equivalent manual.

(12) Self-Study Police Career Officer Development Course (PCOD) and Field Training.

(a) The Self-Study PCOD will be based on the 2015 Job Task Analysis for Police Officers.

(b) The Self-Study PCOD will consist of sufficient training hours to satisfy all Board-approved instructional goals (approximately 80 hours).

(c) Field training requires successful completion of the 2013 Police Officer Field Training Manual or DPSST-approved equivalent manual.

(13) Self-Study Corrections Career Officer Development Course (CCOD) and Field Training.

(a) The CCOD will be based on 2016 Job Task Analysis for Corrections Officers.

(b) The Self-Study CCOD will consist of sufficient training hours to satisfy all Board-approved instructional goals (approximately 80 hours).

(c) Field training requires successful completion of the 2009 Corrections Officer Field Training Manual or DPSST-approved equivalent manual.

(14) Field Training. All field training will be conducted under the supervision of the employing agency.

(15) All course curriculums must be reviewed and approved by the Board on Public Safety Standards and Training prior to being delivered.

(16) All course curriculums will be reviewed following any update to the underlying standards adopted above.

(17) All instructors of mandated courses must be certified as an instructor as required by OAR 259-008-0080 prior to instructing.

(18) A public safety officer must have successfully completed the mandated course for which certification is being requested in order for the training to satisfy the minimum requirements for certification. No more than 10% of the course may be missed without the approval of the Director. Absences must be approved and missed coursework or training must be remediated as designated by the Department.

(19) Testing. All academic testing must consist of measures that are valid, rigorous, and require students to demonstrate knowledge and application of essential tasks. Successful completion of a mandated course requires the following:

ADMINISTRATIVE RULES

- (a) Basic Police Course students must:
- (A) Successfully complete course projects and assignments;
 - (B) Obtain and maintain a minimum cumulative score of 75% by Quiz 4;
 - (C) Obtain a minimum score of 75% on the midterm exam and final exam;
 - (D) Achieve a passing score of 100% on use of force exams with remediation as necessary; and
 - (E) Effective January 1, 2007, successful completion of the Oregon Physical Abilities Test (OR-PAT).
- (b) Basic Corrections Local Course students must:
- (A) Successfully complete course projects and assignments;
 - (B) Obtain a minimum cumulative score of 75% by Quiz 3;
 - (C) Obtain a minimum score of 75% on the final exam; and
 - (D) Achieve a passing score of 100% on use of force exams with remediation as necessary.
- (c) Basic Parole and Probation Course students must:
- (A) Successfully complete course projects and assignments;
 - (B) Obtain a minimum cumulative score of 75% by Quiz 3;
 - (C) Obtain a minimum score of 75% on the final exam; and
 - (D) Achieve a passing score of 100% on use of force exams with remediation as necessary.
- (d) Basic Telecommunicator Course students must obtain a minimum score of 75% on the exam.
- (e) Basic Emergency Medical Dispatcher Course students must:
- (A) Obtain a minimum score of 75% on the exam; and
 - (B) Achieve a passing score of 100% on Emergency Medical Dispatcher Protocol Reference System (EMDPRS).
- (f) DOC Basic Corrections Course students must:
- (A) Successfully complete course projects and assignments;
 - (B) Obtain a minimum score of 75% on each academic test; and
 - (C) Achieve a passing score of 100% on all academic test questions relating to use of force topics with remediation as necessary.
 - (D) DOC Basic Corrections Course students who fail to achieve a passing score on the final exam after two attempts will be required to complete the DOC Basic Corrections Course and field training manual pursuant to section (6) of this rule.
- (g) Basic Regulatory Specialist students must:
- (A) Successfully complete course projects and assignments; and
 - (B) Achieve a passing score of 100% on use of force exams with remediation as necessary.
- (h) Basic Instructor Development Course students must successfully complete course projects and assignments.
- (i) Supervision Course students must successfully complete course projects and assignments.
- (j) Management Course students must successfully complete course projects and assignments.
- (k) Academy PCOD students must:
- (A) Obtain a minimum score of 75% on the exam; and
 - (B) Achieve a passing score of 100% on the use of force exam with remediation as necessary.
- (C) Academy PCOD students who do not achieve a passing score on the Academy PCOD exam will be given one opportunity to retake PCOD through the Academy PCOD Course or the Self-study PCOD Course.
- (D) PCOD students who fail to achieve a passing score after completing a second PCOD Course will be required to complete the Basic Police Course and field training manual pursuant to section (1) of this rule.
- (l) Self-study PCOD students must:
- (A) Obtain a minimum score of 75% on the exam; and
 - (B) Achieve a passing score of 100% on the use of force exam with remediation as necessary.
- (C) Self-study PCOD students who do not achieve a passing score on the Self-study PCOD exam will be given one opportunity to retake PCOD through the Academy PCOD Course or the Self-study PCOD Course.
- (D) PCOD students who fail to achieve a passing score after completing a second PCOD Course will be required to complete the Basic Police Course and field training manual pursuant to section (1) of this rule.
- (m) Self-study CCOD students must:
- (A) Obtain a minimum score of 75% on the exam; and
 - (B) Achieve a passing score of 100% on the use of force exam with remediation as necessary.
- (C) Self-study CCOD students who do not achieve a passing score on the Self-study CCOD exam will be given one opportunity to retake the Self-study CCOD Course.

(D) Self-study CCOD students who fail to achieve a passing score after completing a second Self-study CCOD Course will be required to complete the Basic Corrections Local Course and field training manual pursuant to section (2) of this rule.

(20) Course Documentation. Prior to being recognized as meeting the minimum training standards required for certification, the following documentation must be submitted to Standards & Certification at the conclusion of each course:

- (a) A course attendance roster (Form F-6);
- (b) An official record of actual course hours or attendance rosters;
- (c) Absence reports with documentation of make-up training;
- (d) Class schedule including subject hour breakdown;
- (e) Curriculum, including master exams and answer sheets;
- (f) Testing results, including individual test scores, individual final average and class average; and
- (g) Deficiency reports and documentation of completion.

(21) Course Certification. Each mandated course must be certified annually. All course certifications are valid for one year and will expire on December 31 of each year.

(22) All mandated courses are subject to periodic audits by Standards and Certification to ensure compliance with the minimum training standards found in this rule.

(a) Notwithstanding subsection (b), the anticipated training dates, training locations and training hours must be provided to Standards and Certification no later than 14 days prior to the training.

(b) Standards and Certification will be notified of remediation training dates, training locations and training hours no later than 48 hours prior to the training or at the time of failure.

(c) Standards and Certification will prepare an audit report for each audited course.

(d) Issues of non-compliance will be forwarded to the appropriate department head or designee for resolution. Failure to respond to non-compliance issues may result in training not being recognized as meeting the minimum training requirements for certification.

(e) Standards and Certification will provide observations made during audits for feedback and possible suggestions for course enhancements. Observations will not be indicative of non-compliance of courses.

[ED. NOTE: Forms referenced are available from the agency.]

Stat. Auth.: ORS 181A.410 & 181A.590

Stats. Implemented: ORS 181A.410 & 181A.590

Hist.: PS 12, f. & ef. 12-19-77; PS 1-1983, f. & ef. 12-15-83; Renumbered from 259-010-0065, PS 1-1990, f. & cert. 2-7-91; PS 2-1995, f. & cert. ef. 9-27-95; PS 10-1997(Temp), f. & cert. ef. 11-5-97; BPSST 1-1998, f. & cert. ef. 5-6-98; BPSST 2-1998(Temp), f. & cert. ef. 5-6-98 thru 6-30-98; BPSST 3-1998, f. & cert. ef. 6-30-98; BPSST 15-2001(Temp), f. & cert. ef. 10-26-01 thru 4-5-02; BPSST 9-2002, f. & cert. ef. 4-3-02; BPSST 22-2002, f. & cert. ef. 11-18-02; DPSST 3-2007, f. & cert. ef. 1-12-07; DPSST 5-2016, f. & cert. ef. 3-22-16; DPSST 7-2017, f. & cert. ef. 3-22-17

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Department of Transportation, Driver and Motor Vehicle Services Division Chapter 735

Rule Caption: Extending the Class C Third Party Testing Pilot Program

Adm. Order No.: DMV 6-2017

Filed with Sec. of State: 3-20-2017

Certified to be Effective: 3-20-17

Notice Publication Date: 2-1-2017

Rules Amended: 735-061-0210

Rules Repealed: 735-061-0210(T)

Subject: DMV wishes to continue a pilot for a Class C Third Party Testing Program and OAR 735-061-0210 contained a specific ending date. This permanent rule amendment replaces an emergency rule that prevented the pilot program from ending on October 31, 2016.
Rules Coordinator: Lauri Kunze—(503) 986-3171

735-061-0210

Purpose

(1) The purpose of these rules, OAR 735-061-0210 through 735-061-0390 is to establish criteria by which a third party testing business is authorized to have its examiners give a drive test to a Class C driver license applicant on behalf of DMV.

(2) The rules are written under the authority of ORS 802.600 allowing the department to enter into an agreement with a person who is not an employee of the department to transact a function on behalf of the department.

ADMINISTRATIVE RULES

(3) These rules are adopted to establish a pilot program. The pilot program will continue for as long as necessary for DMV to establish a permanent program or to determine that DMV no longer wants to operate a Third Party Class C non-commercial program, if such a program is not administratively viable or that operating the program is not in the best interests of public safety.

Stat. Auth.: ORS 184.616, 184.619, 802.010 & 802.600
Stats. Implemented: ORS 802.600
Hist.: DMV 11-2014, f. 10-28-14, cert. ef. 11-1-14; DMV 1-2016, f. & cert. ef. 4-29-16; DMV 6-2016(Temp), f. 10-19-16, cert. ef. 10-31-16 thru 4-28-17; DMV 6-2017, f. & cert. ef. 3-20-17

Rule Caption: Early Renewal of Driver Licenses and Identification Cards

Adm. Order No.: DMV 7-2017

Filed with Sec. of State: 3-20-2017

Certified to be Effective: 3-20-17

Notice Publication Date: 2-1-2017

Rules Amended: 735-062-0090

Rules Repealed: 735-062-0090(T)

Subject: OAR 735-062-0090 previously allowed a person to renew a driver license or identification card 14 months prior to expiration to allow flexibility for persons who may work or travel out-of-state for extended periods. DMV has reduced that period to 12 months to comply with a policy of the U.S. Department of Transportation, Federal Motor Carrier Safety Administration, allowing states to renew a Commercial Driver License (CDL) up to one year in advance of the expiration date of the current CDL. This amendment also conforms the renewal period to the requirements in ORS 807.150(1)(a) and 807.400(9), addressing renewal of driver licenses and identification cards.

This rule amendment was filed as an emergency rule on October 19, 2016, as major changes to the issuance of CDL and commercial learner driver permits were made effective on September 26, 2016, and this change in the renewal was inadvertently overlooked.

Rules Coordinator: Lauri Kunze—(503) 986-3171

735-062-0090

Renewal Driver Licenses and Identification Cards

(1) DMV will renew the driver license of a person who satisfies the requirements set forth in ORS 807.150.

(2) An applicant for the renewal of a driver license or identification card must:

(a) Provide a verifiable SSN or proof that the person is not eligible for a SSN as provided in OAR 735-062-0005(2);

(b) Provide proof of legal presence as provided in OAR 735-062-0015;

(c) Submit to the collection of biometric data for the purpose of establishing identity as provided in ORS 807.024 and 735-062-0016; and

(d) Provide proof of identity and date of birth as provided in OAR 735-062-0020.

(3) An applicant for the renewal of a driver license or identification card that includes a change of residence address must present to DMV one of the proofs of residence address listed in OAR 735-062-0030 that shows the person's current residence address. (Current residence address is the residence address to be included on the license or identification card to be issued.)

(4) DMV may renew an unexpired driver license or identification card up to 12 months prior to the expiration date.

(5) If a driver license has been expired more than one year, the applicant must re-apply for an original driver license and meet the requirements set forth in OAR 735-062-0007.

(6) Before processing a driver license renewal, DMV will make an inquiry to the National Driver Register/Problem Driver Pointer System (NDR/PDPS) and the Commercial Driver License Information System (CDLIS) to determine if the applicant's driving privileges are suspended, revoked, canceled or otherwise not valid in any other jurisdiction.

(7) If the applicant's driving privileges are suspended, revoked, canceled or otherwise not valid in any other jurisdiction, the applicant may not renew an Oregon driver license until the applicant submits a clearance letter that complies with OAR 735-062-0160 or a DMV inquiry to NDR/PDPS and CDLIS shows the applicant's driving privileges are reinstated or otherwise valid in the other jurisdiction.

(8) Notwithstanding section (7) of this rule, DMV will renew the driving privileges of an applicant whose driving privileges are suspended, revoked, canceled or otherwise not valid in another jurisdiction if the only remaining reinstatement requirement in the other jurisdiction is proof of future financial responsibility.

(9) DMV will not renew an Oregon driver license or permit if the applicant has a current, valid Oregon identification card. To become eligible, the person must surrender the Oregon identification card before DMV will renew the Oregon driver license or permit. If the person's identification card is lost or the person no longer has the identification card in his or her possession, the person must provide a statement attesting to this fact.

(10) Notwithstanding subsection (2)(b) of this rule, DMV will renew a limited term driver license, limited term driver permit or limited term identification card to an applicant who otherwise qualifies for renewal under this rule and has provided proof of temporary legal presence in the United States as described in OAR 735-062-0015(4) that has been extended or is still in effect.

Stat. Auth.: ORS 184.616, 184.619, 802.010, 802.012, 807.021, 807.022, & 807.040
Stats. Implemented: ORS 802.012, 802.540, 807.021, 807.022, 807.040 - 807.060, 807.100, 807.15 & 807.400
Hist.: MV 14-1987, f. 9-21-87, ef. 9-27-87; Administrative Renumbering 3-1988, Renumbered from 735-031-0009; MV 14-1992, f. & cert. ef. 10-16-92; MV 16-1992, f. & cert. ef. 12-16-92; DMV 11-1998, f. & cert. ef. 9-14-98; DMV 21-2004(Temp), f. & cert. ef. 10-1-04 thru 3-29-05; DMV 2-2005, f. 1-20-05, cert. ef. 1-31-05; DMV 4-2007, f. 5-24-07, cert. ef. 6-5-07; DMV 17-2007, f. 12-24-07, cert. ef. 1-1-08; DMV 1-2008(Temp), f. 1-18-08, cert. ef. 2-4-08 thru 8-1-08; DMV 7-2008(Temp), f. & cert. ef. 2-22-08 thru 8-19-08; DMV 10-2008, f. & cert. ef. 4-24-08; DMV 16-2008, f. 6-23-08, cert. ef. 7-1-08; DMV 25-2009, f. 12-22-09, cert. ef. 1-1-10; DMV 1-2012, f. 1-27-12, cert. ef. 1-30-12; DMV 4-2016, f. 9-22-16, cert. ef. 9-26-16; DMV 7-2016(Temp), f. & cert. ef. 10-19-16 thru 4-16-17; DMV 7-2017, f. & cert. ef. 3-20-17

Employment Department Chapter 471

Rule Caption: Amend/repeal criminal records checks rules to comply with amended statutes and HB 3168 (2013).

Adm. Order No.: ED 3-2017

Filed with Sec. of State: 4-5-2017

Certified to be Effective: 4-5-17

Notice Publication Date: 3-1-2017

Rules Amended: 471-007-0200, 471-007-0210, 471-007-0285, 471-007-0300, 471-007-0310

Rules Repealed: 471-007-0220, 471-007-0230, 471-007-0240, 471-007-0250, 471-007-0260, 471-007-0280, 471-007-0290, 471-007-0270

Subject: Repeals and amends the criminal records check and fitness determination process that is addressed in OAR 125-007-0200 for purposes of utilizing the uniform administrative rules established by Department of Administrative Services in accordance with House Bill 3168 passed in the 2013 Legislative Session.

Rules Coordinator: Cristina Koreski—(503) 947-1471

471-007-0200

Statement of Purpose and Statutory Authority

Purpose. These rules control the Department's acquisition of information about a subject individual's criminal history through criminal records checks or other means and its use of that information to determine whether the subject individual (SI) is fit to provide services to the Department as an employee, contractor, subcontractor, vendor or volunteer in a position or assignment covered by ORS 181A.200.

Stat. Auth.: ORS 181A.195, 181A.200

Stats. Implemented: ORS 181A.195

Hist.: ED 4-2009(Temp), f. & cert. ef. 8-5-09 thru 1-31-10; ED 1-2010, f. 1-29-10, cert. ef. 1-31-10; ED 3-2017, f. & cert. ef. 4-5-17

471-007-0210

Definitions

(1) "Authorized Designee" means a Department employee authorized to obtain and/or review criminal offender information and other records about a subject individual through criminal records checks and other means, and to conduct a fitness determination in accordance with these rules.

(2) "Department" means the Oregon Employment Department (OED) or any subdivision thereof.

(3) "Family Member" means a spouse, domestic partner, natural parent, foster parent, adoptive parent, stepparent, child, foster child, adopted child, stepchild, sibling, stepbrother, stepsister, father-in-law, mother-in-

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law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, grandparent, grandchild, aunt, uncle, niece, nephew or first cousin.

(4) "Subject Individual" means an individual identified in ORS 181A.200 as someone from whom the Department may require fingerprints for the purpose of conducting a criminal records check.

(5) See OAR 125-007-0210 for additional definitions.

Stat. Auth.: ORS 181A.195, 181A.200 184.340 & 184.365

Stats. Implemented: ORS 181A.195

Hist.: ED 4-2009(Temp), f. & cert. ef. 8-5-09 thru 1-31-10; ED 1-2010, f. 1-29-10, cert. ef. 1-31-10; ED 3-2017, f. & cert. ef. 4-5-17

471-007-0285

Agency Representation

The Director shall designate an authorized representative of the department to participate in hearings conducted pursuant to OAR 125-007-0270.

Stat. Auth.: ORS 181A.195, 657.610

Stats. Implemented: ORS 181A.195

Hist.: ED 4-2009(Temp), f. & cert. ef. 8-5-09 thru 1-31-10; ED 1-2010, f. 1-29-10, cert. ef. 1-31-10; ED 3-2017, f. & cert. ef. 4-5-17

471-007-0300

Authorized Designees

(1) Appointment.

(a) The Department Director or the Director's designee shall designate positions within the Department as including the responsibilities of an authorized designee.

(b) Appointment to one of the designated positions shall be contingent upon an individual being approved under the Department's criminal records check and fitness determination process.

(c) Appointments shall be made by the Department Director or the Director's designee at his or her sole discretion.

(2) The Department Director and Deputy Director may also serve as authorized designees, contingent on being approved under the Department's criminal records check and fitness determination process.

(3) Conflict of Interests. An authorized designee shall not participate in a fitness determination or review any information associated with a fitness determination for a subject individual if either of the following is true:

(a) The authorized designee is a family member of the subject individual; or

(b) The authorized designee has a financial or close personal relationship with the subject individual. If an authorized designee is uncertain of whether a relationship with a subject individual qualifies as a financial or close personal relationship under this subsection (b), the authorized designee shall consult with his or her supervisor prior to taking any action that would violate this rule if such a relationship were determined to exist.

(4) Termination of Authorized Designee Status.

(a) When an authorized designee's employment in a designated position ends, his or her status as an authorized designee is automatically terminated.

(b) The Department shall suspend or terminate a Department employee's appointment to a designated position within the Department, and thereby suspend or terminate his or her status as an authorized designee, if the employee fails to comply with OAR 471-007-0200 through 471-007-0290 in conducting criminal records checks and fitness determinations.

(c) An authorized designee shall immediately report to his or her supervisor if he or she is arrested for or charged with, is being investigated for, or has an outstanding warrant or pending indictment for a crime listed in OAR 125-007-0270. Failure to make the required report is grounds for termination of the individual's appointment to a designated position within the Department, and thereby termination of his or her status as an authorized designee.

(d) The Department will review and update an authorized designee's eligibility for service in a designated position within the Department. As part of a review or update, a new criminal records check and fitness determination may be required:

(A) Every three years; or

(B) At any time the Department has reason to believe that the authorized designee has violated these rules or no longer is eligible to serve in his or her current position within the Department.

(5) A denial under OAR 125-007-0260 related to a designated position within the Department is subject to the appeal rights provided under OAR 125-007-300.

Stat. Auth.: ORS 181A.195, 181A.200

Stats. Implemented: ORS 181A.195

Hist.: ED 4-2009(Temp), f. & cert. ef. 8-5-09 thru 1-31-10; ED 1-2010, f. 1-29-10, cert. ef. 1-31-10; ED 3-2017, f. & cert. ef. 4-5-17

471-007-0310

Fees

(1) The Department may charge a fee for acquiring criminal offender information for use in making a fitness determination. In any particular instance, the fee shall not exceed the fee(s) charged the Department by the Oregon Department of State Police and the Federal Bureau of Investigation to obtain criminal offender information on the subject individual.

(2) The Department may charge the fee to the subject individual on whom criminal offender information is sought, or, if the subject individual is an employee of a Department contractor or vendor and is undergoing a fitness determination in that capacity, the Department may charge the fee to the subject individual's employer.

(3) The Department shall not charge a fee if the subject individual is a Department employee or an applicant for employment with the Department.

Stat. Auth.: ORS 181A.195, 181A.200

Stats. Implemented: ORS 181A.195

Hist.: ED 4-2009(Temp), f. & cert. ef. 8-5-09 thru 1-31-10; ED 1-2010, f. 1-29-10, cert. ef. 1-31-10; ED 3-2017, f. & cert. ef. 4-5-17

Landscape Contractors Board

Chapter 808

Rule Caption: Adds a Practical Skills Registration Fee

Adm. Order No.: LCB 1-2017

Filed with Sec. of State: 3-24-2017

Certified to be Effective: 3-24-17

Notice Publication Date: 3-1-2017

Rules Amended: 808-003-0710

Subject: Adds a Practical Skills Registration Fee

Rules Coordinator: Kim Gladwill-Rowley—(503) 967-6291, ext. 223

808-003-0710

Fees

(1) Landscape Construction Professional License Application Fee, \$100.

(2) Practical Skills Registration Fee, \$100.

(3) Written exam fee:

(a) Written exam taken through PSI, pay directly to the exam provider.

(b) Written exam taken same day as practical skills exam, \$75 for the first section & \$10 for each additional section per sitting, pay the agency.

(4) Practical skills test fee, pay the agency:

(a) \$120 Administrative fee; and

(b) \$60 per practical skills section.

(5) Retake fees. An applicant must pay the fees in subsection (2) (3) & (4) of this rule if an applicant wants to retake any sections/modules of the exam/test.

(6) Expiration of application. An applicant must pay the application fee in subsection (1) of this rule if the application has expired as stated in OAR 808-003-0030(2) & (3).

Stat. Auth.: ORS 671

Stats. Implemented: ORS 671.561 & 671.570

Hist.: LCB 2-2016, f. & cert. ef. 5-23-16; LCB 1-2017, f. & cert. ef. 3-24-17

Oregon Department of Education,

Early Learning Division

Chapter 414

Rule Caption: Rules required to meet federal Child Care and Development Block Grant Act of 2014 requirements.

Adm. Order No.: ELD 3-2017

Filed with Sec. of State: 3-27-2017

Certified to be Effective: 3-27-17

Notice Publication Date: 3-1-2016

Rules Amended: 414-300-0040, 414-300-0120, 414-300-0170, 414-300-0180, 414-300-0220, 414-300-0295, 414-300-0350

Subject: Rule changes to Certified Child Care Centers, Certified Family Child Care Homes, Registered Family Child Care Homes and

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Regulated Subsidy providers required to meet requirements of the Federal Child Care and Development Block Grant Act of 2014.

Subject areas to be addressed are procedures for dealing with children with allergies, procedures for preventing child maltreatment, prevention of shaken baby syndrome and abusive head trauma, handling and storage of hazardous materials, disposal of bio-contaminants, procedures for protecting children from vehicular hazards, procedures in the event of an emergency, required Office of Child Care approved health and safety training, orientation requirements for staff and critical training for staff before they can have unsupervised access to children.

Rules Coordinator: Lisa Pinheiro—(503) 910-8135

414-300-0040

Enrollment

(1) Children shall be admitted only in accordance with the conditions of the certificate, including, but not limited to, capacity, hours of operation, age range, and special conditions.

(2) All children visiting the center on a regular basis will count in capacity. Children attending with a non-staff parent do not count as enrolled as long as the parent remains with and is responsible for non-enrolled children.

(3) As required by state and federal civil rights laws and the Americans with Disabilities Act (ADA), the center shall not discriminate against any child on the basis of race, religion, color, national origin, gender, marital status of parent, or because of a need for special care.

(a) Refusal by the operator to care for a child with a need for special care because of lack of related skills and degree of competence, or because of structural barriers in the center, shall not in itself establish a prima facie case of discrimination. The decision to enroll/not enroll a child shall be made on an individual basis after the child's child care needs have been assessed using information from parents and professionals who are knowledgeable about the specific disability. The operator shall record the assessment that was made for each child with special needs.

(b) If a child with special needs is enrolled who needs a specific plan for caring for that child, such a plan shall be developed in writing between center staff, parent(s), and if necessary, outside specialists. All staff who come in contact with that child shall be fully aware of the plan.

(4) The operator shall obtain the following information in writing from parent(s) of each child before admission. The information shall be kept current at all times.

- (a) Name and birth date of child;
- (b) Date child entered care;
- (c) Name(s), home and business address(es) and telephone number(s) of the custodial parent(s);
- (d) The school attended by a school-age child;
- (e) Name and telephone number of child's medical provider(s) and dentist, if applicable;
- (f) Name and telephone number of person to be called in an emergency if the parent cannot be located;
- (g) Name and telephone number of person(s) to whom the child may be released; and
- (h) Any chronic health problem(s) the child has, including allergies.

(5) The operator shall obtain the following information in writing from parent(s) of each infant and toddler before admission:

- (a) Schedule of feeding;
- (b) Types of food introduced and timetable for new foods;
- (c) Toilet and diapering schedule;
- (d) Sleep schedule;
- (e) Child's way of communicating and being comforted; and
- (f) Developmental and health history of any problems that could affect the child's participation in child care.

(6) The operator shall obtain the following written authorizations from parent(s) of each child before admission:

(a) Permission for the center to obtain emergency medical treatment for the child. The emergency medical release shall be:

- (A) On a form accepted by the medical treatment facility used by the operator for emergency medical services; and
- (B) Immediately accessible to all staff.
- (b) Permission for the center to call an ambulance or take a child to an available physician or medical treatment facility; and
- (c) Approval when applicable for:
- (A) Participation in field trips; and

(B) Participation in swimming or wading activities, both on and off the premises of the center.

(7) A center shall maintain separate information and authorization forms on each child in care.

(8) An opportunity shall be given for each child, with his/her parent(s), to have a pre-placement visit to the center and for the center staff to exchange information with the parent(s).

(9) No child under six weeks of age shall be enrolled in a center.

[Publications: Publications referenced are available from the agency.]

Stat. Auth. ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CSD 21-1988, f. & cert. ef. 9-29-88; CSD 10-1990, f. & cert. ef. 4-23-90; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0622; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 4-2001, f. 7-13-01, cert. ef. 7-15-01; CCD 3-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; CCD 3-2010, f. 6-29-10, cert. ef. 7-1-10; CCD 8-2010, f. 12-29-10, cert. ef. 1-1-11; ELD 3-2017, f. & cert. ef. 3-27-17

414-300-0120

Staff Training

(1) All staff shall receive an orientation within the first two weeks of employment and before they can have unsupervised access to children. Orientation shall ensure that staff are familiar with the contents of the orientation, as described below, and shall include, but is not limited to:

(a) Individual responsibilities in the event:

- (A) The building must be evacuated (e.g., fire);
- (B) An emergency requiring staff and children to remain inside under unusual circumstances (e.g., power outage, environmental hazard); or
- (C) A child or staff is injured or becomes ill;
- (b) These requirements (OAR 414-300-0000 through 414-300-0415);
- (c) The center policies, as required in OAR 414-300-0030; and
- (d) Procedures for reporting suspected child abuse or neglect.

(2) The operator shall have documentation for each staff person of the date and type of orientation received and the person providing the orientation.

(3) Within the first 90 days of employment, all staff, with the exception of Aide I's, shall:

(a) Complete first aid and Infant and Child CPR training or have current certification in first aid and Infant and Child CPR on file. First aid and Infant and Child CPR training must be kept current during employment at the center. First aid training shall include the following components: bleeding; burns; poisoning; choking; injuries; shock; seizures; sprains and breaks; dental emergencies; and head injuries. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.

(b) Have completed a minimum of two hours of training on child abuse and neglect that is specific to Oregon law before they can have unsupervised access to children.

(4) Key people in food preparation must have food handler certification, pursuant to ORS 624.570, within 30 days of employment or have current certification on file. Food handler's training must be kept current during employment at the center. Key people include cooks, kitchen staff who handle food, and classroom staff who serve meals from a communal source.

(5) The director, head teacher, and all teachers shall participate yearly in at least 15 clock hours of training or education related to child care, of which at least eight clock hours shall be in child development or early childhood education. If an individual has worked in the facility less than a year, the training requirements will be prorated as follows: At least 1.25 clock hours for each month worked in the current license period.

(a) The following core knowledge categories are accepted for the child development and early childhood education requirement: Diversity (D), Family and Community Systems (FCS), Human Growth and Development (HGD), Health Safety and Nutrition (HSN), Learning Environments and Curriculum (LEC), Observation and Assessment (OA), Special Needs (SN), and Understanding and Guiding Behavior (UGB).

(b) A head teacher whose qualifications for the position are based solely on work experience shall emphasize training in child development and early childhood education for the first two years of employment;

(c) Training may include correspondence courses, conferences, workshops, or audiovisual programs.

(d) An approved planned reading program of professional materials may count for up to six hours of the 15 clock hours of training and must include a written assessment of reading materials completed by each participating staff person.

(e) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the

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Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.

(f) The center shall record each person's training showing the subject matter, the date completed, and the number of clock hours of training in each certification year.

(6) During the first year of employment, a staff person may count up to two hours of orientation and their most recent training in first aid and CPR, food handler's training, if applicable, and child abuse and neglect training as part of the 15 clock hours of training required in OAR 414-300-0120(5), but may not use these toward the eight hours required in child development or early childhood education.

(7) During subsequent years of employment, a staff person may count 5 hours of first aid and CPR training or food handler's training as part of the 15 clock hours of training. Duplicate training on recognizing and reporting child abuse and neglect can be accepted again after three years, and every three years thereafter towards the 15 clock hours of staff training required for licensing.

(8) Staff meetings shall not count as training.

(9) All new staff that may have unsupervised access to children must have completed OCC approved health and safety training within thirty days of employment.

(10) All current staff that may have unsupervised access to children must have completed OCC approved health and safety training by June 30, 2017.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CSD 21-1988, f. & cert. ef. 9-29-88; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0637; CCD 4-2001, f. 7-13-01, cert. ef. 7-15-01; CCD 3-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; CCD 3-2010, f. 6-29-10, cert. ef. 7-1-10; CCD 8-2010, f. 12-29-10, cert. ef. 1-1-11; ELD 3-2016(Temp), f. & cert. ef. 9-29-16 thru 3-27-17; ELD 3-2017, f. & cert. ef. 3-27-17

414-300-0170

Hazards and Emergencies

(1) Protection from Hazards:

(a) Glass surfaces subject to impact by children shall be of safety glass and marked at a child's eye level or have a protective barrier in place.

(b) Electrical outlets accessible to children not yet attending kindergarten shall have protective caps or safety devices when not in use.

(c) All stairways with three steps or more used by children shall have handrails installed a minimum of thirty inches to a maximum of thirty-four inches above the stair tread.

(d) Protective barriers shall be used in any hazardous location accessible to a child.

(e) A movable barrier, such as a mesh-type gate, shall be placed at the top and/or bottom of all stairways accessible to infants and toddlers. Gates and enclosures should have the Juvenile Products Manufacturers Assn. (JPMA) certification seal to ensure safety.

(f) Lights shall be protected from hazards or breakage by installation of covers or shields.

(g) All rooms used by staff and children shall have adequate lighting.

(h) Floors shall be free of splinters, large or unsealed cracks, sliding rugs, and other hazards.

(i) Items of potential danger to children (e.g., cleaning supplies and equipment, poisonous and toxic materials, paints, plastic bags, aerosols, detergents) shall be:

(A) Kept in the original container or labeled;

(B) Secured by a child-proof lock or latch;

(C) Stored in an area not used by children; and

(D) Stored separately from food service equipment and supplies.

(j) Lead-based paint or other toxic finishing materials shall not be used on walls, furnishings, toys, or any other equipment, materials or surface which may be used by children or are within their reach.

(k) The possession and/or storage of firearms and ammunition are prohibited in the center.

(l) The center must take precautions to protect children from vehicular traffic. The center shall:

(A) Require drop off and pick up only at the curb or at an off-street location protected from traffic; and

(B) Assure that any adult who supervises drop-off and loading can see and assure that children are clear of the perimeter of all vehicles before any vehicle moves.

(m) Other hazards observed in the certification process must be corrected.

(2) Preparation for Emergencies:

(a) A portable emergency light source, in working condition, shall be available with each group of children.

(b) Telephone service shall be accessible and available in the center at all times when children are in care.

(c) The center must have a system in place to ensure that parents can have contact with facility staff at all times when children are in care.

(d) Telephone numbers for fire, emergency medical care, and poison control shall be posted on or near all telephones. Portable telephones must have emergency numbers on the phone.

(e) Written instructions for evacuating the building, including a map illustrating exiting, shall be posted in each room children use.

(3) Emergency Plan:

(a) The center shall have a written plan for handling emergencies, including, but not limited to, acute illness of a child or staff, floods, natural disasters (e.g. fire, earthquake, etc.), man-caused events, such as violence at a child care facility and evacuation of the facility. The plan must include:

(A) How the center will ensure that parents or the parents' emergency contacts can be reached in person;

(B) Designation of an alternate safe location in the event of evacuation;

(C) How the center will inform parents where children will be located in the event of evacuation and how children will be reunited with their families;

(D) An accessible file of emergency contact numbers for children and staff;

(E) Designation of a staff member(s) to take the emergency contact numbers file to the evacuation site in the event of an evacuation;

(F) Procedures to address the needs of individual children, including infants and toddlers, children with special needs, and children with chronic medical conditions;

(G) An acceptable method to ensure that all children in attendance are accounted for;

(H) Procedures in the event that children must shelter-in-place or if the child-care home must be locked-down so that no one can enter or leave; and

(I) Procedures for maintaining continuity of child-care operations.

(b) All staff shall be familiar with the emergency telephone numbers and emergency procedures.

(c) Fire drills shall be practiced monthly. In addition, one other aspect of the emergency plan shall be practiced every other month.

(A) The director shall keep a written record of the type, date, time, and duration of the practices.

(B) If a center has on-site swimming or is responsible for off-site swimming, the practices must include pool and swimming safety.

(d) Fire and other emergency exiting shall not be through a swimming pool area.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CSD 21-1988, f. & cert. ef. 9-29-88; CSD 10-1990, f. & cert. ef. 4-23-90; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0643; CCD 4-2001, f. 7-13-01, cert. ef. 7-15-01; CCD 3-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 3-2016(Temp), f. & cert. ef. 9-29-16 thru 3-27-17; ELD 3-2017, f. & cert. ef. 3-27-17

414-300-0180

Sanitation

(1) Water Supply:

(a) The center's water supply shall be continuous in quantity and from a water supply system approved by the Health Division.

(b) There shall be safe drinking water available to children that is supplied in a sanitary manner. Drinking water shall not be obtained from bathroom sinks or diaper changing sinks.

(2) Heat and Ventilation:

(a) The center shall be ventilated, by natural or mechanical means, and shall be free of excessive heat, condensation, and obnoxious odors.

(b) Room temperature shall be at least 68° F. (20 C.) and not so warm as to be dangerous or unhealthy in the center when children are present.

(c) After painting or laying carpet, the building must be aired out completely for at least 24 hours with good ventilation before children are allowed to return.

(3) Insect and Rodent Control:

(a) The center shall be in such condition as to prevent the infestation of rodents and insects.

(b) Doors and windows used for ventilation shall be equipped with fine-meshed screens.

(c) Automatic insecticide dispensers, vaporizers, or fumigants shall not be used.

(4) Maintenance:

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(a) The building, toys, equipment, and furniture shall be maintained in a clean and sanitary condition:

(A) Kitchen and toilet rooms shall be cleaned when soiled and at least daily;

(B) The isolation area shall be thoroughly cleaned after each use and all bedding laundered before it is used again;

(C) Door knobs and cabinet pulls in toilet rooms and diaper changing areas shall be sanitized daily;

(D) All clean linen shall be stored in a sanitary manner;

(E) Soiled bed linen and clothing shall not be stored in food preparation or food storage areas, and shall be inaccessible to children;

(F) Floors, walls, ceilings, and fixtures of all rooms shall be kept clean and in good repair;

(G) All food storage areas shall be kept clean and free of food particles, dust, dirt, and other materials;

(H) Cribs, mats, and cots shall be sanitized with a sanitizing solution at least once a week and upon change of occupant. If visibly soiled, items must be cleaned prior to sanitizing.

(I) Bedding shall be cleaned when soiled, upon change of occupant and at least once a week;

(J) Water tables and toys used in water tables shall be emptied and sanitized daily;

(K) When a chemical, such as chlorine, is used for sanitizing, a test kit that measures the parts per million concentration of the solution shall be used to ensure the proper concentration; and

(L) Cloths, both single use and multiple use, used for wiping food spills on utensils and food-contact surfaces shall be kept clean and used for no other purpose. Cloths that are reused shall be stored in a sanitizing solution between uses.

(b) The center shall be kept hazard-free, in good repair, and free of litter or rubbish and unused or inoperable equipment and utensils.

(5) Infant and Toddler Care:

(a) The following shall be sanitized immediately after each use. If visibly soiled, items must be cleaned prior to sanitizing:

(A) A bathtub or other receptacle used for bathing a child;

(B) A diaper-changing table;

(C) High chairs, tables and chairs;

(D) Toys that infants and toddlers put in the mouth; and

(E) Toilet training seat inserts.

(b) Pacifiers must be labeled, stored individually and sanitized after contamination. The health department must approve methods of sanitation.

(c) A sanitizing solution shall be kept in each diaper changing area ready for immediate use. This solution need not be stored in a locked cabinet but must be out of children's reach.

(6) Hand washing:

(a) Staff and children shall wash their hands with soap and warm running water after using the toilet or wiping the nose, and before and after eating.

(b) Staff shall wash their hands with soap and warm running water before and after changing a diaper, before and after feeding a child or handling food and after assisting a child with toileting or wiping the nose.

(c) Infants' and children's hands shall be washed with soap and warm running water after diaper changing.

(d) Commercial products labeled "hand sanitizers" shall not replace hand washing. If hand sanitizers are present in the center, they shall be kept under child-proof lock and shall not be used by children.

(e) When hand washing is not possible, e.g. on field trips and on the playground, moist towelettes shall be used.

(7) Waste Disposal:

(a) All sewage and liquid wastes shall be collected, treated, and disposed of in compliance with the requirements of the Department of Environmental Quality.

(b) All garbage, solid waste, and refuse shall be disposed of at least once a week.

(c) All garbage shall be kept in watertight, non-absorbent, and easily washable containers with close-fitting lids.

(d) Diaper disposal containers shall be approved by the environmental health specialist.

(e) All garbage storage areas and garbage containers shall be kept clean.

(f) All rubbish and garbage storage shall be inaccessible to children.

(g) Bio-contaminants including but not limited to bodily fluids and blood shall be disposed of in a manner that prevents exposure to children.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CSD 21-1988, f. & cert. ef. 9-29-88; CSD 10-1990, f. & cert. ef. 4-23-90; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0644; CCD 4-2001, f. 7-13-01, cert. ef. 7-15-01; CCD 8-2003, f. 12-23-03, cert. ef. 12-28-03; CCD 3-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 3-2017, f. & cert. ef. 3-27-17

414-300-0220

Illness or Injury

(1) Illness:

(a) A center shall not admit or retain in care, except with the written approval of the local health officer, a child who:

(A) Is diagnosed as having or being a carrier of a child care-restrictable disease, as defined in Health Division administrative rules, OAR 333-019-0010; or

(B) Has one of the following symptoms, or combination of symptoms, of illness:

(i) Fever over 100 degrees F taken under the arm;

(ii) Diarrhea (more than one abnormally loose, runny, watery or bloody stool);

(iii) Vomiting;

(iv) Nausea;

(v) Severe cough;

(vi) Unusual yellow color to skin or eyes;

(vii) Skin or eye lesions or rashes that are severe, weeping, or pus-filled;

(viii) Stiff neck and headache with one or more of the symptoms listed above;

(ix) Difficult breathing or abnormal wheezing; or

(x) Complaints of severe pain.

(b) A child who shows signs of illness, as defined in this rule, shall be isolated and the parent(s) notified and asked to remove the child from the center as soon as possible;

(c) If a child has mild cold symptoms that do not impair his/her functioning, the child may remain in the center and the parent(s) notified when they pick up their child;

(d) A specific place for isolating a child who becomes ill shall be provided. The isolation area:

(A) Shall be located where the child can be seen and heard by staff; and

(B) Shall be equipped with a cot, mat, or bed for each sick child.

(e) An outbreak of a child care restrictable disease, as defined in OAR 333-019-0010, or food poisoning shall be reported immediately to the local health department and posted for the parents of all children who attend the facility.

(f) If a child with allergies is enrolled who needs a specific plan for caring for that child, such a plan shall be developed in writing between center staff, parents, and if necessary, outside specialists. All staff who come in contact with that child shall be fully aware of the plan.

(2) Injuries:

(a) All caregivers shall take appropriate precautions to prevent shaken baby syndrome and abusive head trauma.

(b) The operator shall have written procedures for handling injuries that shall be made known to all staff, including:

(A) Procedure for taking a child to emergency medical care;

(B) Routine for treatment of minor injuries; and

(C) First aid measures for serious accidents.

(c) First aid supplies and a chart or handbook of first aid instructions shall be maintained in one identified place away from food and food-contact surfaces and be available for staff use but kept out of reach of children:

(A) The first aid supplies shall include Band-Aids, adhesive tape, sterile gauze pads, soap or sealed antiseptic towelettes or solution to be used as a wound cleaning agent, scissors, disposable plastic gloves for handling blood spills, chlorine bleach for sanitizing after a blood spill, and a sanitary temperature-taking device;

(B) Separate first aid supplies and a copy of each child's medical release form shall be taken on all field trips away from the immediate neighborhood.

(d) Injuries or accidents shall be reported to the child's parent(s) on the day of occurrence:

(A) A written report of the injury or accident shall be maintained on file;

(B) The report shall include the date, child's full name, nature of the injury, witnesses, action taken, and the signatures of reporting staff and parent(s).

(e) The injury to or death of a child shall be reported to OCC in accordance with OAR 414-300-0030(3)(a) and (b).

(3) Emergency Medical Care:

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(a) The operator shall identify a licensed physician, hospital, or clinic to be used for emergency medical care;

(b) In the event of an illness or injury which requires immediate medical care, the director or the substitute director is responsible for securing such care and notifying the parent(s).

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CSD 21-1988, f. & cert. ef. 9-29-88; CSD 10-1990, f. & cert. ef. 4-23-90; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0650; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 4-2001, f. 7-13-01, cert. ef. 7-15-01; CCD 2-2007, f. & cert. ef. 7-13-07; CCD 3-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 3-2016(Temp), f. & cert. ef. 9-29-16 thru 3-27-17; ELD 3-2017, f. & cert. ef. 3-27-17

414-300-0295

Program of Activities for All Children

(1) All caregivers must give the children's needs first priority, ensuring that they get adequate care and attention.

(2) The center shall provide a written program of activities for each group of children according to their developmental ages, interests, and abilities. The program of activities must allow for change and flexibility and show evidence of the preplanning.

(3) The program of activities shall be planned to provide:

(a) Positive learning experiences appropriate to the individual developmental needs of children in care;

(b) Individual and group activities;

(c) A balance of active and quiet activities;

(d) Opportunities for free choice by children; and

(e) Daily indoor and outdoor activities in which children use both large and small muscles.

(4) The center shall follow the written program of activities.

(5) The center shall inform parents when children are participating in contracted services (e.g., tumbling, music) that the contracted services have not been certified by OCC.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CCD 4-2001, f. 7-13-01, cert. ef. 7-15-01; CCD 3-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 3-2017, f. & cert. ef. 3-27-17

414-300-0350

Transportation

When transportation is provided by or arranged for by the center, the following requirements shall be met:

(1) Drivers shall:

(a) Be at least 18 years of age;

(b) Hold a current driver's license. If required by the Motor Vehicles Division (DMV), a commercial driver's license shall be obtained; and

(c) Maintain a safe driving record.

(2) The operator shall obtain a copy of the driving record from DMV for each staff whose job description includes driving duties. The DMV check shall be updated annually.

(3) The vehicle shall be:

(a) In compliance with all applicable state and local motor vehicle laws; and

(b) Maintained in a safe operating condition.

(4) If transportation is provided between the center and the child's school or other destination, the center shall have in writing an acknowledgment from the parent(s) that they are aware of the time of day their child is to be picked up and/or delivered by the center. If the pick-up schedule results in children being unsupervised at school or other location, the center shall notify parents of this fact.

(5) When transporting children on a regular basis, there shall be sufficient staff to meet the required staff/child ratios (OAR 414-300-0130) for each age group of children being transported.

(a) The driver may count in the staff/child ratios.

(b) Staff shall be teacher-qualified or Aide II qualified. Aide I qualified staff may count in the staff/child ratios if one other staff is teacher-qualified.

(c) If none of the staff is teacher-qualified, an adult in the vehicle shall be trained in first aid and the vehicle shall be equipped with a cell phone or other communication device.

(6) When transporting children on field trips, the center shall follow its procedures for field trips (OAR 414-300-0030(7)(e)). The procedures shall include, but not be limited to, requirements regarding drivers and adult supervision.

(7) When transporting children for any and all purposes:

(a) Children shall be transported only in sections of vehicles designed for and equipped to carry passengers;

(b) A seat that fully supports the passenger shall be provided for each child;

(c) All children, shall be transported in accordance with ORS 811.210. The child safety system and safety belts shall comply with ORS 815.055 and the standards adopted by the Oregon Department of Transportation;

(d) Infants, toddlers, and preschool age children shall leave the vehicle on the same side of the street as the building they will enter;

(e) Drivers delivering children to their homes shall not depart until the child has been received by an authorized person; and

(f) No child shall be left unattended inside or outside a vehicle.

(8) The center shall maintain a written plan for transportation.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CSD 21-1988, f. & cert. ef. 9-29-88; CSD 10-1990, f. & cert. ef. 4-23-90; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0678; CSD 11-1994, f. & cert. ef. 5-23-94; CCD 4-2001, f. 7-13-01, cert. ef. 7-15-01; CCD 3-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 3-2016(Temp), f. & cert. ef. 9-29-16 thru 3-27-17; ELD 3-2017, f. & cert. ef. 3-27-17

Rule Caption: Rules required to meet federal Child Care and Development Block Grant Act of 2014 requirements.

Adm. Order No.: ELD 4-2017

Filed with Sec. of State: 3-27-2017

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Notice Publication Date: 3-1-2017

Rules Amended: 414-350-0050, 414-350-0060, 414-350-0100, 414-350-0115, 414-350-0160, 414-350-0170, 414-350-0180, 414-350-0220, 414-350-0250

Subject: Rule changes to Certified Family Child Care Homes required to meet requirements of the Federal Child Care and Development Block Grant Act of 2014.

Subject areas to be addressed are procedures for dealing with children with allergies, procedures for preventing child maltreatment, prevention of shaken baby syndrome and abusive head trauma, handling and storage of hazardous materials, disposal of bio-contaminants, procedures for protecting children from vehicular hazards, procedures in the event of an emergency, required Office of Child Care approved health and safety training, orientation requirements for staff and critical training for staff before they can have unsupervised access to children.

Rules Coordinator: Lisa Pinheiro—(503) 910-8135

414-350-0050

General Requirements

(1) The following items shall be posted in the certified family child care home where they may be viewed by parents:

(a) The child care certificate;

(b) Notification of a communicable disease outbreak at the home;

(c) The evacuation plan; and

(d) A notice that the following items are available for parents to review:

(A) The guidance/discipline policy;

(B) The current week's menus, with substitutions recorded;

(C) The description of the general routine;

(D) Information on how to report a complaint to OCC regarding certification requirements; and

(E) The most recent OCC and sanitation inspection reports and, if applicable, fire life safety self-evaluation (or fire marshal inspection report if completed).

(2) The provider shall ensure that a copy of these administrative rules is available in the certified family child care home to all parents and staff.

(3) Caregivers shall report suspected child abuse or neglect immediately, as required by the Child Abuse Reporting Law (ORS 419B.005 through 419B.050) to the Department of Human Services Child Welfare (DHS) or to a law enforcement agency. By statute, this requirement applies 24 hours per day.

(4) The certified family child care home shall comply with state and federal laws related to child safety systems and seat belts in vehicles, bicycle safety, civil rights laws, and the Americans with Disabilities Act (ADA).

(5) Representatives of all agencies involved in certification shall have immediate access to all parts of the home whenever the provider is conducting the child care business:

(a) OCC staff shall have the right to inspect all areas of the facility that are accessible to child care children, and to conduct a health and safe-

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ty review of other areas of the facility to ensure the health and safety of child care children. This includes access to all caregivers, records of children enrolled in the home, and all records and reports related to the child care operation regarding compliance with these rules; and

(b) Representatives of the Department of Human Services Child Welfare (DHS) and the State Fire Marshal have the right to enter and inspect the home when an inspection has been requested by OCC.

(6) Custodial parents of all children enrolled shall have access to the home during the hours their child(ren) are in care.

(7) The provider shall develop the following information in writing and shall make it available to OCC, to staff, and to parent(s) at the time of enrollment:

(a) Guidance and discipline policy;

(b) Information on transportation, when provided by the provider or other caregiver; and

(c) The plan for handling emergencies and/or evacuations, including, but not limited to, acute illness of a child or staff, natural disasters (e.g. fire, earthquake, etc.), man-caused events, such as violence at a child care facility, power outages, and situations which do not allow reentry to the home after evacuation.

(8) The provider shall comply with the Department of Human Services' administrative rules relating to:

(a) Immunization of children (OAR 333-019-0021 through 333-019-0090);

(b) Reporting communicable diseases (OAR 333-019-0215 through 333-019-0415); and

(c) Child care restrictable diseases (OAR 333-019-0010).

(9) The provider shall report to OCC:

(a) An accident at the home resulting in the death of a child, within 48 hours after the occurrence; and

(b) Injuries to a child at the certified family child care home which require attention from a licensed health care professional, such as a physician, EMT or nurse, within 7 days after the occurrence.

(10) Documentation of meals and snacks provided by the certified family child care home shall be made available to OCC upon request, if the home does not participate in the USDA Child and Adult Care Food Program. Documentation is limited to the three weeks prior to the request.

(11) The provider is responsible for compliance with these requirements (OAR 414-350-0000 through 414-350-0405).

(12) Parental request or permission to waive any of the rules for certified family child care homes does not give the provider permission to do so.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260, 657A.280, 657A.290, 657A.300, 657A.390 & 657A.400

Hist.: CSD 21-1988, f. & cert. ef. 9-29-88; CSD 10-1990, f. & cert. ef. 4-23-90; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0720; CSD 9-1994, f. & cert. ef. 5-23-94; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 3-2002, f. 10-14-02, cert. ef. 10-15-02; CCD 6-2005(Temp), f. 12-29-05, cert. ef. 1-1-06 thru 6-29-06; CCD 3-2006, f. & cert. ef. 6-13-06; CCD 5-2006(Temp), f. & cert. ef. 8-25-06 thru 2-21-07; CCD 6-2006, f. & cert. ef. 12-1-06; CCD 2-2007, f. & cert. ef. 7-13-07; CCD 4-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; CCD 4-2010, f. 6-29-10, cert. ef. 7-1-10; CCD 9-2010, f. 12-29-10, cert. ef. 1-1-11; ELD 1-2015, f. & cert. ef. 2-3-15; ELD 4-2016(Temp), f. & cert. ef. 9-29-16 thru 3-27-17; ELD 4-2017, f. & cert. ef. 3-27-17

414-350-0060

Enrollment

(1) Children shall be admitted only in accordance with the conditions of the certificate, including, but not limited to, capacity, hours of operation, age range, and special conditions.

(2) As required by state and federal civil rights laws and the Americans with Disabilities Act (ADA), the certified family child care home shall not discriminate against any child on the basis of race, religion, color, national origin, gender, marital status of parent, or because of a need for special care.

(a) Refusal by the provider to care for a child with a need for special care because of lack of related skills and degree of competence or because of structural barriers in the certified family child care home, shall not in itself establish a prima facie case of discrimination. The decision to enroll/not enroll a child shall be made on an individual basis after the child's child care needs have been assessed using information from parents and professionals who are knowledgeable about the specific disability. The provider shall record the assessment that was made for each child with special needs.

(b) If a child with special needs is enrolled who needs a specific plan for caring for that child, such a plan shall be developed in writing between the provider, parent(s) and, if necessary, outside specialists. The provider

shall be responsible for ensuring that all caregivers have knowledge of the plan and act in compliance with the plan.

(3) The provider shall obtain the following information in writing from parent(s) of each child before admission. The information shall be kept current at all times.

(a) Name and birth date of child;

(b) Name(s), home and business addresses and telephone numbers, and the working hours of custodial parent(s) or guardian(s);

(c) The school attended by a school-age child;

(d) Name and telephone number of child's medical provider(s) and dentist, if applicable.

(e) Name and telephone number of person to be called in an emergency if the parent cannot be located; and

(f) Name and telephone number of person(s) to whom the child may be released.

(g) Any chronic health problem(s), including allergies, the child has.

(4) The provider shall obtain the following written authorizations from parent(s) of each child before admission. The authorizations shall be kept current at all times.

(a) Permission for the provider to obtain emergency medical treatment for the child. The emergency medical release shall be on a form accepted by the medical treatment facility used by the provider for emergency medical services;

(b) Permission for the provider to call an ambulance or take a child to an available physician or medical treatment facility;

(c) If applicable, permission for the child to participate in field trips; and

(d) If applicable, permission for the child to participate in swimming or wading activities, both on and off the premises of the home.

(5) No child under six weeks of age shall be enrolled in the certified family child care home.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260 & 657A.280

Hist.: CSD 12-1988, f. 6-29-88, cert. ef. 7-1-88; CSD 2-1989, f. & cert. ef. 1-25-89; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0722; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 3-2002, f. 10-14-02, cert. ef. 10-15-02; CCD 4-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; CCD 9-2010, f. 12-29-10, cert. ef. 1-1-11; ELD 4-2017, f. & cert. ef. 3-27-17

414-350-0100

The Provider

(1) The provider shall be:

(a) At least 18 years of age if the facility is certified for 12 children; or at least 21 years of age if the facility is certified for more than 12 children; and

(b) Responsible for the operation of the certified family child care home, including those duties ordinarily considered to be administrative. These include, but are not limited to, financial management, maintaining records, maintenance of the building and grounds, meal planning and preparation, compliance with certification requirements, communication with OCC, and correcting deficiencies.

(2) The provider shall have:

(a) At least one year of qualifying teaching experience, as specified in OAR 414-350-0010(28), in the care of a group of children in an ongoing group setting such as a kindergarten, preschool, child care center, certified family child care home, registered family child care home, or Head Start program; or prior to applying to be certified for up to 16 children, completed one year of successful operation as a certified family child care facility for 12 children if the qualifying teaching experience is based on registered family child care; or

(b) Completion of 20 credits (semester system) or 30 credits (quarter system) of training in a college or university in early childhood education or child development; or

(c) Documentation of attaining at least step eight in the Oregon Registry.

(3) The provider shall provide evidence of the following training prior to being certified:

(a) A current certification in first aid and infant and child cardiopulmonary resuscitation. CPR training must have practical hands-on instruction, therefore, strictly online training is not acceptable. CPR courses that involve an on-line component with hands-on instruction may be acceptable.

(b) A current food handler certification; and

(c) Have completed a minimum of two hours of training on child abuse and neglect that is specific to Oregon law.

(4) Prior to a facility providing care to more than two children under 24 months of age, the provider shall have at least 30 clock hours of training specific to infant and toddler care. The provider of facilities certified on

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October 15, 2002, who are providing care for more than two children under 24 months of age must have documentation of 30 hours of prior training in infant and toddler care or a plan, approved by OCC, that shows how the training will be attained.

(5) The provider/operator shall be on-site at least half of the hours of operation that are reflected on the certificate. If the facility is certified for more than 12 children, the provider shall be on site at least 2/3 of the hours of operation that are reflected on the certificate. The hours shall be calculated on a weekly basis, except for planned vacations and emergency absences.

(6) The provider shall have no other employment, either in or out of the home, during the hours the provider is directly caring for children.

(7) The provider, or a substitute caregiver, shall be present during all the hours the certified family child care business is conducted.

(8) A caregiver substituting for the provider shall:

(a) Be at least 18 years old;

(b) Have current certification in first aid and infant and child cardiopulmonary resuscitation (CPR). Training must have practical hands-on instruction; therefore, online training is not acceptable.

(c) Have current food handler certification pursuant to ORS 624.570, if the substitute will be preparing or serving food;

(d) Be familiar with the provider's policies and procedures and with these requirements (OAR 414-350-0000 through 414-350-0405);

(e) Be authorized and able to correct a deficiency that might be an immediate threat to children; and

(f) Have on file documentation of an orientation and training in these administrative rules and the functions and duties of a provider;

(g) Have completed a minimum of two hours of training on child abuse and neglect that is specific to Oregon law before they can have unsupervised access to children; and

(h) Have worked in the home at least 60 hours when substituting for the provider in a home certified to care for more than 12 children.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260, 657A.280 & 657A.290

Hist.: CSD 12-1988, f. 6-29-88, cert. ef. 7-1-88; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0732; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 3-2002, f. 10-14-02, cert. ef. 10-15-02; CCD 6-2005(Temp), f. 12-29-05, cert. ef. 1-1-06 thru 6-29-06; CCD 3-2006, f. & cert. ef. 6-13-06; CCD 5-2006(Temp), f. & cert. ef. 8-25-06 thru 2-21-07; CCD 6-2006, f. & cert. ef. 12-1-06; CCD 2-2007, f. & cert. ef. 7-13-07; CCD 4-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; CCD 4-2010, f. 6-29-10, cert. ef. 7-1-10; CCD 9-2010, f. 12-29-10, cert. ef. 1-1-11; ELD 4-2017, f. & cert. ef. 3-27-17

414-350-0115

Training Requirements

(1) All staff shall receive an orientation within the first two weeks of employment and before they can have unsupervised access to children. Orientation shall ensure that staff are familiar with the contents of the orientation, as described below, and shall include, but is not limited to:

(a) Individual responsibilities in the event:

(A) The home must be evacuated (e.g. fire);

(B) An emergency requiring staff and children to remain inside under unusual circumstances (e.g. power outage, environmental hazard); or

(C) A child or staff is injured or becomes ill;

(b) These requirements (OAR 414-350-0000 through 414-350-0405);

(c) The facility policies, as required in OAR 414-350-0050; and

(d) Procedures for reporting suspected child abuse or neglect.

(2) The provider and all caregivers who function as substitute providers and Assistant II staff, including volunteers, shall participate yearly in at least 15 clock hours of training related to child care, of which at least eight clock hours shall be in child development or early childhood education. Substitute providers and volunteers who provide care in the home for less than 20 hours in a calendar year are not required to participate in the 15 clock hours of training. If an individual has worked in the facility less than a year, the training requirements will be prorated as follows: At least 1.25 clock hours for each month worked in the current license period.

(a) The following core knowledge categories are accepted for the child development and early childhood education requirement: Diversity (D), Family and Community Systems (FCS), Human Growth and Development (HGD), Health Safety and Nutrition (HSN), Learning Environments and Curriculum (LEC), Observation and Assessment (OA), Special Needs (SN), and Understanding and Guiding Behavior (UGB).

(b) Training may include correspondence courses, conferences, workshops and audio-visual programs.

(c) An approved planned reading program of professional materials may count for up to six hours of the 15 clock hours of training and must include a written assessment of reading materials completed by each participating staff person.

(d) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.

(3) During the first year of certification and the first year of employment staff may count up to two hours of orientation and their most recent training in first aid and CPR, food handler's and recognizing and reporting child abuse and neglect training, as part of the 15 clock hours of training required in OAR 414-350-0115(2), but may not use these toward the eight hours required in child development or early childhood education.

(a) Recognizing and reporting child abuse and neglect training must be based on Oregon law and practice so information is relevant to reporting in Oregon.

(b) Recognizing and reporting child abuse and neglect training must be two clock hours or more in duration to be accepted.

(4) During subsequent years of certification and subsequent years of employment staff may count five hours of first aid and CPR training or food handler's training as part of the 15 clock hours of training. Duplicate training on recognizing and reporting child abuse and neglect training can be accepted again after three years, and every three years thereafter towards the 15 clock hours of staff training required for licensing.

(5) The provider shall document each caregiver's training, showing the subject matter, the date completed, and the number of clock hours of training in each certification year.

(6) All new staff that may have unsupervised access to children must have completed OCC approved health and safety training within thirty days of employment.

(7) All current staff that may have unsupervised access to children must complete OCC approved health and safety training by June 30, 2017.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260 & 657A.280

Hist.: CCD 3-2002, f. 10-14-02, cert. ef. 10-15-02; CCD 4-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; CCD 9-2010, f. 12-29-10, cert. ef. 1-1-11; ELD 4-2016(Temp), f. & cert. ef. 9-29-16 thru 3-27-17; ELD 6-2016(Temp), f. & cert. ef. 10-28-16 thru 3-27-17; ELD 4-2017, f. & cert. ef. 3-27-17

414-350-0160

Sanitation

(1) Water Supply:

(a) The home's water supply shall be continuous in quantity and from a water supply system approved by the Department of Human Services.

(b) If drinking water is from a private source, the provider shall provide evidence of bacterial and chemical analysis which establish safety of the water;

(c) The tests shall be conducted by the local health department, the Department of Human Services, or an approved commercial laboratory;

(d) The bacterial analysis shall be done quarterly;

(e) The chemical analysis shall be done only once for a well and yearly for other water sources;

(f) The provider shall have drinking water available to children that is supplied in a safe and sanitary manner. If drinking water is obtained from bathroom sinks or sinks used for handwashing after changing a diaper, the sink must be sanitized after each handwashing.

(2) Hand Washing:

(a) Caregivers and children shall wash their hands with soap and warm running water after nose wiping, after using the toilet, and before and after eating;

(b) Caregivers shall wash their hands with soap and warm running water before and after changing a diaper, before and after feeding a child or handling food, and after assisting a child with toileting and nose wiping;

(c) Infants' and children's hands shall be washed with soap and warm running water after diaper changing;

(d) Staff shall immediately and thoroughly wash their hands after handling animals or cleaning cages;

(e) Commercial products labeled "hand sanitizers" shall not replace hand washing. If hand sanitizers are present in the home, they shall be kept under child-proof lock and shall not be used by children;

(f) When hand washing is not possible, e.g., on field trips or the neighborhood park, moist towelettes shall be used.

(3) Maintenance:

(a) The building, toys, equipment, and furniture shall be maintained in a clean, sanitary, and hazard-free condition:

(A) Kitchen and bathrooms shall be cleaned when soiled and at least daily;

(B) Floors, walls, ceilings, and fixtures of all rooms shall be kept clean and in good repair;

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(C) All kitchen counters, shelves, tables, refrigeration equipment, sinks, drain boards, cutting boards, and other equipment or utensils used for food preparation shall be kept clean and in good repair;

(D) All food storage areas shall be kept clean and free of food particles, dust, dirt and other materials;

(E) Cloths, both single use and multiple use, used for wiping food spills on utensils and food-contact surfaces shall be kept clean and used for no other purpose. Cloths that are reused shall be stored in a sanitizing solution between uses.

(F) The isolation area shall be thoroughly cleaned after use and all bedding laundered after each use;

(G) A diaper-changing table shall:

(i) Have a surface that is non-absorbent and easily cleaned;

(ii) Be cleaned and sanitized after each use;

(iii) Not be used for any purposes other than diapering, including food or drink preparation or storage, dish washing, storage of food service utensils, arts and crafts supplies or products, etc.; and

(iv) Comply with the requirements for diaper changing area specified in OAR 414-350-0235(2)(b).

(H) Bathtubs, showers, sinks, bathinettes, or other receptacles used for bathing children shall be cleaned and sanitized after each use.

(I) Bedding shall be cleaned when soiled, with change of occupant, or at least once a week.

(b) Tableware, kitchenware (pots, pans and equipment), and food-contact surfaces of equipment shall be washed, rinsed, sanitized, and air-dried after each use. The cleaning and sanitizing of tableware and kitchenware shall be accomplished by using:

(A) A dishwasher that is operated according to the manufacturer's instructions; or

(B) A three-step manual process as follows:

(i) Washing in the first compartment;

(ii) Rinsing in a second compartment; and

(iii) Immersion in a third compartment or large dishpan or tub for at least two minutes in a sanitizing solution containing at least 2 teaspoons of household chlorine bleach in each gallon of warm water.

(c) A sink used for diapering or bathing activities shall not be used for any part of food or drink preparation or dish washing.

(d) Soap, paper towels dispensed in a sanitary manner, and mixing faucets with hot and cold running water shall be provided at each hand washing sink.

(e) The home and grounds shall be kept clean and free of litter or rubbish and unused or inoperable equipment, utensils, and vehicles.

(f) All garbage, solid waste, and refuse shall be disposed of at least once a week.

(A) All garbage shall be kept in watertight, non-absorbent, and easily washable containers with close-fitting lids;

(B) All garbage storage areas and garbage containers shall be kept clean; and

(C) All garbage storage shall be inaccessible to children.

(g) Bio-contaminants including, but not limited to bodily fluids and blood shall be disposed of in a manner that prevents exposure to children.

(4) Insect and Rodent Control:

(a) The home shall be in such condition as to prevent the infestation of rodents and insects.

(b) Doors and windows which are opened for ventilation shall be equipped with fine-meshed screens.

(c) Automatic insecticide dispensers, vaporizers, or fumigants shall not be used.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260, 657A.280, 657A.290, 657A.400, 657A.420

Hist.: CSD 12-1988, f. 6-29-88, cert. ef. 7-1-88; CSD 10-1990, f. & cert. ef. 4-23-90; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0746; CSD 10-1994, f. & cert. ef. 5-23-94; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 3-2002, f. 10-14-02, cert. ef. 10-15-02; CCD 6-2005(Temp), f. 12-29-05, cert. ef. 1-1-06 thru 6-29-06; CCD 3-2006, f. & cert. ef. 6-13-06; CCD 4-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 4-2017, f. & cert. ef. 3-27-17

414-350-0170

Home Safety

(1) All floor levels used by children for play and napping shall have two usable exits to ground level.

(2) All rooms used by children for play and napping shall have two usable exits.

(3) Obstructions, including furniture, storage of supplies, or any other items shall not be placed in a manner that blocks usable exits.

(4) There shall be at least one 2-A-10 BC-rated fire extinguisher on each floor of the home. Fire extinguishers shall be easily accessible, kept

out of the reach of children, and located along the path of emergency exiting.

(5) Smoke alarms shall be:

(a) Installed on each floor level of the home and in any area where children nap; and

(b) Maintained in operating order.

(6) Candles or other open flame decorative devices are prohibited, except for the brief use of celebratory candles.

(7) Matches and lighters shall be kept in locked storage when not in use.

(8) A portable light source, to be used in emergencies, shall be:

(a) Available in all activity areas used by children;

(b) In working condition; and

(c) Stored in an easily accessible place.

(9) Items of potential danger (e.g., cleaning supplies and equipment, paints, poisonous and toxic materials, plastic bags, aerosols, detergents) shall be:

(a) Kept in the original container or labeled;

(b) Stored under child-proof lock; and

(c) Kept away from food service supplies.

(10) The provider shall protect children from safety hazards, including but not limited to:

(a) A rigid screen or guard shall be installed to prevent children from falling into a fireplace or against a heater or wood stove;

(b) A movable barrier, such as mesh-type gate, shall be placed at the top and/or bottom of all stairways accessible to infants and toddlers. Gates and enclosures should have the Juvenile Products Manufacturers Assn. (JPMA) certification seal to ensure safety;

(c) Child-proof latches shall be installed on all cupboards, closets, and drawers that contain hazardous objects and may be accessible to preschool-age and younger children;

(d) Firearms, ammunition, and other potentially hazardous equipment, such as darts, other projectiles, power tools, and knives shall be kept under lock:

(A) Firearms, pellet or BB guns must be unloaded and kept in areas not used by child care children; and

(B) Ammunition shall be stored separately from firearms;

(e) Hot water heaters shall be equipped with a safety release valve and an overflow pipe that directs water to the floor or to another approved location;

(f) Unused appliances, such as old refrigerators or freezers, that present a risk for entrapment, shall be secured so as to prevent entry by children;

(g) Clear glass panels in doors shall be clearly marked at child level;

(h) All exposed electrical outlets in rooms used by preschool or younger children shall have hard-to-remove protective caps or safety devices when not in use;

(i) Extension cords shall not be used as permanent wiring. All appliance cords will be in good condition and multiple connectors for cords will not be used. A grounded power strip outlet with built-in over-current protection may be used;

(j) Floors shall be free of splinters, large unsealed cracks, sliding rugs, and other hazards;

(k) Devices which generate heat and are hot from recent use shall be inaccessible to children; and

(l) After painting or laying carpet, the certified home must be aired out completely for at least 24 hours with good ventilation before children are allowed to return.

(11) The provider shall have written evidence that any wood stove in the home has been inspected and approved for use by the local building official.

(12) All wood stove and fireplace flues shall be cleaned as needed or, at a minimum, once a year. A written record of cleaning shall be maintained on site.

(13) The use of unvented, fuel-fired space heaters is prohibited.

(14) Flammable and combustible liquids, such as paint thinner and gasoline, shall be stored in the original container or a safety container and, if over one gallon, kept in an unattached storage building.

(15) All caregivers and children shall practice at least one aspect of the emergency plan, as described in OAR 414-350-0050(7)(c), once per month.

(a) Evacuating the home shall be practiced at least eight times per year. If the facility is certified to care for more than 12 children and more than 4 children regularly in care are under 24 months of age, evacuating the home shall be practiced monthly.

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(b) The provider shall maintain a written record showing the date, time of day, participants, and type of emergency of each emergency plan practice session.

(16) The written plan for evacuating and removing children to a safe location in an emergency must be posted in the home and must be familiar to the children and the caregivers. The plan must include:

(a) Procedures for notifying parents or other adults responsible for the children, of the relocation and how children will be reunited with their families;

(b) Procedures to address the needs of individual children, including infants and toddlers, children with special needs, and children with chronic medical conditions;

(c) An acceptable method to ensure that all children in attendance are accounted for;

(d) Procedures in the event that children must shelter-in-place or if the child-care home must be locked-down so that no one can enter or leave; and

(e) Procedures for maintaining continuity of child-care operations.

(17) The provider must take precautions to protect children from vehicular traffic. The provider shall:

(a) Require drop off and pick up only at the curb or at an off-street location protected from traffic.

(b) Assure that any adult who supervises drop-off and loading can see and assure that children are clear of the perimeter of all vehicles before any vehicle moves.

(18) Other hazards observed in the certification process must be corrected.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260, 657A.280, 657A.290 & 657A.420

Hist.: CSD 12-1988, f. 6-29-88, cert. ef. 7-1-88; CSD 2-1989, f. & cert. ef. 1-25-89; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0748; CSD 10-1994, f. & cert. ef. 5-23-94; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 3-2002, f. 10-14-02, cert. ef. 10-15-02; CCD 6-2005(Temp), f. 12-29-05, cert. ef. 1-1-06 thru 6-29-06; CCD 3-2006, f. & cert. ef. 6-13-06; CCD 4-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 4-2016(Temp), f. & cert. ef. 9-29-16 thru 3-27-17; ELD 4-2017, f. & cert. ef. 3-27-17

414-350-0180

Illness or Injury

(1) A provider shall not admit, or retain in care, a child who:

(a) Is diagnosed as having or being a carrier of a child care-restrictable disease, as defined in Department of Human Services administrative rules, OAR 333-019-0010; or

(b) Has one of the following symptoms, or combination of symptoms, of illness:

(A) Diarrhea (more than one abnormally loose, runny, watery or bloody stool);

(B) Vomiting;

(C) Fever over 100 degrees F taken under the arm;

(D) Severe cough;

(E) Unusual yellow color to skin or eyes;

(F) Skin or eye lesions or rashes that are severe, weeping, or pus-filled;

(G) Stiff neck and headache with one or more of the symptoms listed above;

(H) Difficult breathing or abnormal wheezing; or

(I) Complaints of severe pain.

(2) A child who, after being admitted, shows signs of illness, as defined in subsection (1) of this rule, shall be isolated and the parent(s) notified and asked to remove the child from the home as soon as possible.

(3) If a child has mild cold symptoms that do not impair his/her functioning, the child may remain in the home and the parent(s) notified when they pick up the child.

(4) A specific place for isolating a child who becomes ill shall be provided. The isolation area shall be:

(a) Located where the child can be seen and heard by a caregiver; and

(b) Equipped with a cot, mat, or bed for each sick child.

(5) All caregivers shall take appropriate precautions to prevent shaken baby syndrome and abusive head trauma.

(6) The provider shall identify a licensed physician, hospital, or clinic to be used for emergency medical care:

(a) The provider shall have written procedures for taking a child to emergency medical care;

(b) In the event of an illness or injury which requires immediate medical care, the provider is responsible for securing such care and notifying the parent(s).

(7) First aid supplies and a chart or handbook of first aid instructions shall be maintained in one identified place but kept out of reach of children:

(a) The first aid supplies shall include bandaids, adhesive tape, sterile gauze pads, soap or sealed antiseptic towelettes or solution to be used as a wound cleaning agent, scissors, disposable plastic gloves for handling blood spills, chlorine bleach for sanitizing after a blood spill, a sanitary temperature taking device, and CPR mouthguards; and

(b) First aid supplies shall be taken on all field trips.

(8) Injuries or accidents shall be reported to the child's parent(s) on the day of occurrence:

(a) A written report of the injury or accident shall be maintained on file;

(b) The report shall include the date, child's full name, nature of the injury, witnesses, action taken, and the signatures of the provider and parent(s); and

(c) The injury to or death of a child shall be reported to OCC in accordance with OAR 414-350-0050(9).

(9) No prescription or non-prescription medication, including, but not limited to, pain relievers, sunscreen, cough syrup, diapering and first aid ointments or nose drops, shall be given to a child except under the following conditions:

(a) A signed, dated, written authorization from the parent(s) is on file;

(b) Prescription medication is in the original container and labeled with the child's name, the name of the drug, dosage, directions for administering, date and physician's name;

(c) Non-prescription medication is in the original container, labeled with the child's name, the dosage, and directions for administering;

(d) A written record of all medications administered, listing, as a minimum, the name of the child, type of medication, the signature of the caregiver administering the medication, date, time, and dosage given, shall be kept;

(e) All medications shall be secured in a tightly-covered container with a child-proof lock or latch and stored so that they are not accessible to children;

(f) Medications requiring refrigeration shall be kept in the refrigerator in a separate, tightly-covered container, with a child-proof lock or latch, clearly marked "medication"; and

(g) Parent(s) shall be informed daily of medication administered to their child.

(10) Sunscreen is considered a non-prescription medication and may be used for child care children under the following conditions:

(a) Providers must obtain written parental authorization prior to using sunscreen.

(b) One container of sunscreen may be used for child care children unless a parent supplies an individual container for their child. The sunscreen shall be applied in a manner that prevents contaminating the container.

(A) Parents must be informed of the type of product and the sun protective factor (SPF).

(B) Parents must be given the opportunity to inspect the product and active ingredients.

(c) If sunscreen is supplied for an individual child care child, the sunscreen must be labeled with the child's first and last name and must be used for only that child.

(d) Providers must reapply sunscreen every two hours while the child care children are exposed to the sun.

(e) Providers shall use a sunscreen with an SPF of 15 or higher and must be labeled as "Broad Spectrum".

(f) Providers shall not use aerosol sunscreens on child care children.

(g) Sunscreen shall not be used on child care children younger than six months.

(h) Child care children over six years of age may apply sunscreen to themselves under the direct supervision of the provider or staff member.

(11) Parents of all children enrolled in the certified family child care home shall be informed of any outbreak of communicable disease within the facility.

(12) If a child with allergies is enrolled who needs a specific plan for caring for that child, such a plan shall be developed in writing between the provider, parents, and if necessary, outside specialists. All staff who come in contact with that child shall be fully aware of the plan.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260, 657A.280 & 657A.290

Hist.: CSD 12-1988, f. 6-29-88, cert. ef. 7-1-88; CSD 2-1989, f. & cert. ef. 1-25-89; CSD 10-1990, f. & cert. ef. 4-34-90; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0750; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 3-2002, f. 10-14-02, cert. ef. 10-15-02; CCD 2-2007, f. & cert. ef. 7-13-07; CCD 4-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; CCD 1-2012(Temp), f. & cert. ef. 6-12-12 thru 11-6-12; CCD 2-2012, f. 9-28-12, cert. ef. 10-10-12; ELD 4-2016(Temp), f. & cert. ef. 9-29-16 thru 3-27-17; ELD 4-2017, f. & cert. ef. 3-27-17

ADMINISTRATIVE RULES

414-350-0220

General Requirements

(1) The provider and any caregivers must give the children's needs first priority, ensuring they get adequate care and attention.

(2) There shall be activities for children according to their ages, interests, and abilities. If the provider is certified to care for more than 12 children the provider shall have a written program of activities for each age group.

(3) A description of the general routine, covering all hours of operation, shall be in writing and shall provide:

(a) Regularity of such activities as eating, napping, and toileting with flexibility to respond to the needs of individual children;

(b) A balance of active and quiet activities;

(c) Individual and group activities;

(d) Daily indoor and outdoor activities in which children use both large and small muscles;

(e) Periods of outdoor play each day when weather permits; and

(f) Opportunities for a free choice of activities by children.

(4) The provider and other caregivers shall use the written description of the general routine as a guide, allowing flexibility to respond to the needs of individual children and/or groups of children and to appropriate variations in daily activities.

(5) No child may view television or videos or play computer or electronic games for more than two hours per day.

(6) Infant and toddler program of activities. The following apply to infant and toddlers in care at the certified home.

(a) Infants shall be allowed to form and follow their own patterns of sleeping and waking periods.

(b) Children shall be given opportunities during each day to move freely by creeping and crawling in a safe, clean, warm, and uncluttered area.

(c) Throughout the day, each child shall receive physical contact and individual attention (e.g., being held, rocked, talked to, sung to, and taken on walks inside and outside the home).

(d) Routines relating to activities such as bedtime, feeding, diapering, and toileting shall be used as opportunities for language development, building the child's self-esteem, and other learning experiences.

(e) Children shall be encouraged to play with a variety of safe toys and objects.

(f) Children shall be given appropriate opportunities to use the five senses through sensory play.

(g) Infants shall be put to sleep on their backs.

(h) Immediate attention shall be given to the emotional and physical needs of the children. No child shall be routinely left in a crib except for sleep or rest.

(i) Caregivers shall encourage the development of self-help skills (dressing, toileting, washing, eating) as children are ready.

(j) In addition, toddlers shall be given opportunities to participate in:

(A) A variety of activities encouraging creative expression through the arts; and

(B) Running, climbing, and other vigorous physical activities.

(7) Preschool-age program of activities. In addition to the daily routine specified in OAR 414-350-0220(2), preschool-age children shall have opportunities, on a daily basis, to choose from a variety of activities and experiences, which shall include:

(a) Creative expression through the arts;

(b) Dramatic play;

(c) Gross (large) motor development;

(d) Fine (small) motor development;

(e) Music and movement;

(f) Opportunities to listen and speak;

(g) Concept development;

(h) Appropriate sensory play; and

(i) A supervised nap or rest period. Children who do not sleep after 20–45 minutes of quiet time must be provided with an alternative quiet activity. The activity may be in the same room where children are sleeping if it is not distracting to sleeping children.

(8) School-age program of activities. In addition to the daily routine specified in OAR 414-350-0220(2), school age children shall have opportunities to choose from a variety of activities, including:

(a) Individual or group projects and activities, including homework; and

(b) Rest or relaxation.

(9) A home providing swimming or other water activities to children shall meet all of the requirements set forth in OAR 414-350-0380.

(10) Spa pools on the grounds of the certified family child care home shall be enclosed by a barrier at least 48 inches high, with a lockable gate or door, and have a lockable pool cover. The enclosure and cover shall be locked whenever the child care business is being conducted.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260, 657A.280 & 657A.290

Hist.: CSD 12-1988, f. 6-29-88, cert. ef. 7-1-88; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0770; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 3-2002, f. 10-14-02, cert. ef. 10-15-02; CCD 6-2005(Temp), f. 12-29-05, cert. ef. 1-1-06 thru 6-29-06; CCD 3-2006, f. & cert. ef. 6-13-06; CCD 4-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 4-2017, f. & cert. ef. 3-27-17

414-350-0250

Transportation

When transportation is provided by or arranged for by the certified family child care home, the following requirements must be met.

(1) Drivers shall be at least 18 years of age and hold a current driver's license.

(2) The vehicle shall be:

(a) In compliance with all applicable state and local motor vehicle laws, and

(b) Maintained in a safe operating condition.

(3) If transportation is provided between the certified family child care home and the child's school or other destination, the provider shall have in writing an acknowledgment from the parent(s) that they are aware of the time of day their child is to be picked up and/or delivered by the provider. If the pick-up schedule results in children being unsupervised at school or other location, the provider shall notify parents of this fact.

(4) When transporting children:

(a) The emergency information for each child who is being transported shall be in the vehicle.

(b) Children shall be transported only in sections of vehicles designed for and equipped to carry passengers.

(c) A seat that fully supports the passenger shall be provided for each child.

(d) The number of children transported shall not exceed the number of seat belts or child safety systems available in the vehicle.

(e) All children shall be transported in accordance with ORS 811.210. The child safety system and safety belts shall comply with ORS 815.055 and the standards adopted by the Oregon Department of Transportation. A child under four years of age and weighing 40 pounds or less shall be in an approved child safety system. A child between the ages of 4 and 6 years AND children who weigh between 40 and 60 pounds, regardless of age, must use a booster seat.

(f) Staff/child ratios, as specified in OAR 414-350-0120, shall be maintained in vehicles, as well as in the certified family child care home, when one caregiver is transporting children.

(g) Infants, toddlers, and preschool age children shall leave the vehicle on the same side of the street as the building they will enter.

(h) Drivers delivering children to their homes shall not depart until the child has been received by an authorized person.

(i) No child shall be left unattended inside or outside a vehicle.

(j) If firearms and ammunition are stored in a vehicle, they must be stored as specified in OAR 414-350-0170(10)(d).

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260, 657A.280 & 657A.290

Hist.: CSD 12-1988, f. 6-29-88, cert. ef. 7-1-88; CCD 1-1994, f. & cert. ef. 1-12-94, Renumbered from 412-010-0776; CSD 11-1994, f. & cert. ef. 5-23-94; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 3-2002, f. 10-14-02, cert. ef. 10-15-02; CCD 6-2005(Temp), f. 12-29-05, cert. ef. 1-1-06 thru 6-29-06; CCD 3-2006, f. & cert. ef. 6-13-06; CCD 4-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 4-2016(Temp), f. & cert. ef. 9-29-16 thru 3-27-17; ELD 4-2017, f. & cert. ef. 3-27-17

Rule Caption: Rules required to meet federal Child Care and Development Block Grant Act of 2014 requirements.

Adm. Order No.: ELD 5-2017

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Rules Amended: 414-205-0040, 414-205-0055, 414-205-0100, 414-205-0110, 414-205-0120

Subject: Rule changes to Registered Family Child Care Homes required to meet requirements of the Federal Child Care and Development Block Grant Act of 2014.

Subject areas to be addressed are procedures for dealing with children with allergies, procedures for preventing child maltreatment, prevention of shaken baby syndrome and abusive head trauma, han-

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dling and storage of hazardous materials, disposal of bio-contaminants, procedures for protecting children from vehicular hazards, procedures in the event of an emergency, required Office of Child Care approved health and safety training, orientation requirements for staff and critical training for staff before they can have unsupervised access to children.

Rules Coordinator: Lisa Pinheiro—(503) 910-8135

414-205-0040

The Provider and Other Persons in the Home

(1) The registered provider and any substitute provider shall:

(a) Be at least 18 years old,

(b) Have competence, sound judgment and self-control when working with children, and

(c) Be mentally, physically and emotionally capable of performing duties related to child care.

(2) No one shall have access to child care children who has demonstrated behavior that may have a detrimental effect on a child. Residents of the home are considered to have access to the child care children even if they are not generally at home during child care hours.

(3) The applicant and other residents of the home 18 years of age or older must be enrolled in OCC's CBR prior to the issuance of a registration. Residents of the home who are under 18 years of age must be enrolled in the Registry by their 18th birthday.

(4) The provider must verify with OCC that the individual is enrolled in the CBR prior to that individual moving into the home, residing on a temporary basis in the home, visiting the home on a regular basis (including overnight visits) or substituting for or assisting the provider. This does not apply to parents of children in care unless they are residing in the home or substituting or assisting the provider. The provider must keep a copy of OCC's confirmation letter for all adults enrolled in the CBR that may have contact with child care children.

(5) If additional information is needed to assess a person's ability to care for children or to have access to children, OCC may require references, an evaluation by a physician, counselor, or other qualified person, or other information.

(6) Any visitor to the home or other adult who is not enrolled in the CBR may not have unsupervised access to children.

(7) The provider, substitutes and other individuals that are required to be enrolled in the CBR must maintain current enrollment in the CBR at all times while the child care license is active.

(8) Prior to substituting for the provider, a caregiver must:

(a) Be familiar with the requirements for registration and agree to comply with them;

(b) Be enrolled in the CBR;

(c) Comply with all the requirements placed on the provider, except those in OAR 414-205-0055(1)(a), (2), (3);

(d) Have current certification in first aid and infant and child cardiopulmonary resuscitation (CPR). The certifications must be current while the caregiver is substituting for the provider. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable;

(e) Have completed a minimum of two hours of training on child abuse and neglect that is specific to Oregon law;

(f) Have current food handler's certification, if preparing or serving food to children; and

(g) Have completed OCC approved health and safety training.

Stat. Auth.: ORS 329A.260

Stats. Implemented: ORS 329A

Hist.: CCD 2-1994, f. 7-15-94, cert. ef. 8-15-94; CCD 1-1995, f. 10-30-95, cert. ef. 11-1-95; CCD 1-2000, f. 3-31-00, cert. ef. 4-2-00; CCD 2-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; CCD 2-2010, f. 6-29-10, cert. ef. 7-1-10; ELD 9-2014(Temp), f. & cert. ef. 8-7-14 thru 2-3-15; ELD 4-2015, f. & cert. ef. 2-3-15; ELD 5-2016, f. & cert. ef. 9-29-16 thru 3-27-17; ELD 5-2017, f. & cert. ef. 3-27-17

414-205-0055

Training Requirements

(1) When a person submits a new application for registration as a family child care provider, OCC shall, prior to approving the registration, receive evidence from the person that the person has:

(a) Completed the Family Child Care Overview session;

(b) A current certification in first aid and infant and child CPR. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.

(c) A current food handler certification pursuant to ORS 624.570;

(d) Have completed a minimum of two hours of training on child abuse and neglect that is specific to Oregon law; and

(e) Completed OCC approved health and safety training.

(2) When a registered family child care provider submits a renewal application, the OCC shall, prior to approving it, receive evidence from the provider that the provider has:

(a) A current certification in first aid and infant and child CPR. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.

(b) A current food handler certification pursuant to ORS 624.570; and

(c) Completed a minimum of ten hours of training during the two years preceding the renewal date. The training must be related to the core knowledge categories in the Oregon Registry. At least six clock hours of the ten hours of training must be in child development or early childhood education. A training on recognizing and reporting child abuse and neglect will be accepted after five years (and every five years thereafter) as part of the ten clock hours of training required for licensing, but will not be accepted as part of the required child development training hours.

(d) Completed OCC approved health and safety training. If the training is not complete at the time of the application, it must be completed by June 30, 2017.

(A) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.

(B) The following core knowledge categories are accepted for the child development and early childhood education requirement: Diversity (D), Family and Community Systems (FCS), Human Growth and Development (HGD), Health Safety and Nutrition (HSN), Learning Environments and Curriculum (LEC), Observation and Assessment (OA), Special Needs (SN), and Understanding and Guiding Behavior (UGB).

(3) When a person submits a reopen application, the OCC shall, prior to approving it, receive evidence from the individual that the individual has:

(a) A current certification in first aid and infant and child CPR. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.

(b) A current food handler certification pursuant to ORS 624.570; and

(c) Documentation that individual has ten hours of training related to the Oregon Registry core knowledge categories since the individual's last active child care license was issued. If the individual was previously licensed for less than two years, the training requirements will be prorated as follows: 2.5 hours of training for each six months of the previous license period. A training on recognizing and reporting child abuse and neglect will be accepted again after five years (and every five years thereafter) as part of the ten clock hours of training required for licensing, but will not be accepted as part of the required child development training hours.

(d) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.

(e) Completed OCC approved health and safety training. If the reopen is the result of an address change, the person must complete the OCC approved health and safety training by June 30, 2017.

(4) While the registered family child care license is active, the provider must maintain current certification in first aid, infant and child CPR and food handler training.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CCD 1-2000, f. 3-31-00, cert. ef. 4-2-00; CCD 5-2001, f. 11-2-01, cert. ef. 11-4-01; CCD 3-2004, f. 7-30-04 cert. ef. 8-1-04; CCD 1-2007(Temp), f. & cert. ef. 3-20-07 thru 9-16-07; CCD 2-2007, f. & cert. ef. 7-13-07; CCD 2-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; CCD 7-2010, f. 12-29-10, cert. ef. 1-1-11; ELD 4-2015, f. & cert. ef. 2-3-15; ELD 5-2016, f. & cert. ef. 9-29-16 thru 3-27-17; ELD 5-2017, f. & cert. ef. 3-27-17

414-205-0100

Health

(1) All caregivers shall take appropriate precautions to prevent shaken baby syndrome and abusive head trauma.

(2) The home must be a healthy environment for children.

(a) No person shall smoke or carry any lighted smoking instrument, including an e-cigarette or vaporizer in the family child care home or within ten feet of any entrance, exit, or window that opens or any ventilation intake that serves an enclosed area, during child care hours or when child care children are present. No person shall use smokeless tobacco in the

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family child care home during child care hours or when child care children are present. No person shall smoke, carry any lighted smoking instrument, including an e-cigarette, or vaporizer or use smokeless tobacco in motor vehicles while child care children are passengers.

(b) No one shall consume alcohol on the family child care home premises during child care hours or when child care children are present. No one shall be under the influence of alcohol on the family child care home premises during child care hours or when child care children are present.

(c) Notwithstanding OAR 414-205-0000(5), no one shall possess, use or store illegal controlled substances on the family child care home premises. No one shall be under the influence of illegal controlled substances on the family child care home premises.

(d) Notwithstanding OAR 414-205-0000(5), no one shall grow or distribute marijuana on the premises of the registered family child care home. No adults shall use marijuana on the registered family child care home premises during child care hours or when child care children are present.

(e) No adult under the influence of marijuana shall have contact with child care children.

(f) Notwithstanding OAR 414-205-0000(5), marijuana plants shall not be grown or kept on the registered family child care home premises.

(g) All medical marijuana must be kept in its original container if purchased from a dispensary and stored under child safety lock. All medical marijuana derivatives and associated paraphernalia must be stored under child safety lock.

(h) Effective July 1, 2015, all marijuana, marijuana derivatives and associated paraphernalia must be stored under child safety lock.

(i) There must be at least one flush toilet and one hand-washing sink available to children. Steps or blocks must be available to ensure children can use the toilet and sink without assistance.

(j) The room temperature must be at least 68°F during the hours the child care business is conducted.

(k) Rooms occupied by children must have a combination of natural and artificial lighting.

(l) Floors must be free of splinters, large unsealed cracks, sliding rugs and other hazards.

(3) First aid supplies and a chart or handbook of first aid instructions shall be maintained in one identified place and kept out of reach of children.

(a) The first aid supplies shall include: band aids, adhesive tape, sterile gauze pads, soap or sealed antiseptic towelettes or solution to be used as a wound cleaning agent, scissors, disposable plastic gloves for handling blood spills, a solution for disinfecting after a blood spill, a sanitary temperature taking device and CPR mouth guards.

(b) A first aid kit and a copy of each child's emergency medical information including a medical release form shall be taken any time the caregiver is transporting child care children or taking child care children on field trips.

(4) Infants must be laid on their backs on a flat surface for sleeping.

(5) Illness:

(a) A provider shall not admit or retain in care, except with the written approval of the local health office, a child who:

(A) Is diagnosed as having or being a carrier of a child care restrictable disease, as defined in Oregon Health Authority administrative rule; or

(B) Has one of the following symptoms or combination of symptoms or illness;

(i) Fever over 100°F, taken under the arm;

(ii) Diarrhea (more than one abnormally loose, runny, watery or bloody stool);

(iii) Vomiting;

(iv) Nausea;

(v) Severe cough;

(vi) Unusual yellow color to skin or eyes;

(vii) Skin or eye lesions or rashes that are severe, weeping or pus-filled;

(viii) Stiff neck and headache with one or more of the symptoms listed above;

(ix) Difficulty breathing or abnormal wheezing;

(x) Complaints of severe pain.

(b) A child, who, after being admitted into child care, shows signs of illness, as defined in this rule, shall be separated from the other children, and the parent(s) notified and asked to remove the child from the provider's home as soon as possible.

(6) If a child has mild cold symptoms that do not impair his/her normal functioning, the child may remain in the provider's home and the parent(s) notified when they pick up their child.

(7) Parents must be notified if their child is exposed to an outbreak of a communicable disease.

(8) Prescription and non-prescription medication shall only be given to a child if the provider has written authorization from the parent, as required in OAR 414-205-0130(3).

(9) Prescription and non-prescription medications must be properly labeled and stored.

(a) Non-prescription medications or topical substances must be labeled with the child's name.

(b) Prescription medications must be in the original container and labeled with the child's name, the name of the drug, dosage, directions for administering, and the physician's name.

(c) Medication requiring refrigeration must be kept in a separate, tightly covered container, marked "medication," in the refrigerator.

(10) Sunscreen is considered a non-prescription medication and may be used for child care children under the following conditions:

(a) Providers must obtain written parental authorization prior to using sunscreen.

(b) One container of sunscreen may be used for child care children unless a parent supplies an individual container for their child. The sunscreen shall be applied in a manner that prevents contaminating the container.

(A) Parents must be informed of the type of product and the sun protective factor (SPF).

(B) Parents must be given the opportunity to inspect the product and active ingredients.

(c) If sunscreen is supplied for an individual child care child, the sunscreen must be labeled with the child's first and last name and must be used for only that child.

(d) Providers must reapply sunscreen every two hours while the child care children are exposed to the sun.

(e) Providers shall use a sunscreen with an SPF of 15 or higher and must be labeled as "Broad Spectrum".

(f) Providers shall not use aerosol sunscreens on child care children.

(g) Sunscreen shall not be used on child care children younger than six months.

(h) Child care children over six years of age may apply sunscreen to themselves under the direct supervision of the provider or staff member.

(11) Parents must be informed daily of any medications given to their child or any injuries their child has had.

(12) If a child with allergies is enrolled who needs a specific plan for caring for that child, such a plan shall be developed in writing between the provider, parents, and if necessary, outside specialists. All staff who come in contact with that child shall be fully aware of the plan.

(13) The provider must provide or ensure the availability of meals and snacks appropriate for the ages and needs of the children served.

(a) Meals and snacks must be based on the guidelines of the USDA Child Care Food Program.

(b) Foods must be stored and maintained at the proper temperature.

(c) Foods must be prepared and served according to the minimum standards for food handler certification.

(d) Infants must be held or sitting up for bottle feeding. Propping bottles is prohibited.

(e) Children shall not be laid down with a bottle for sleeping.

(14) Any animal at the family child care home shall be in good health and be a friendly companion for the children in care.

(a) Potentially aggressive animals must not be in the same physical space as the children.

(b) Dogs and cats must be vaccinated according to a licensed veterinarian's recommendations.

(c) Dogs and cats shall be kept free of fleas, ticks and worms.

(15) Animal litter boxes shall not be located in areas accessible to children or areas used for food storage or preparation.

(16) Caregivers must be physically present when children are interacting with animals.

(17) Exotic animals, including, but not limited to: reptiles (e.g. lizards, turtles, snakes) amphibians, monkeys, hook-beaked birds, baby chicks and ferrets are prohibited unless they are housed in and remain in a tank or other container which precludes any direct contact by children. Educational programs that include prohibited animals and are run by zoos, museums and other professional animal handlers are permitted.

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(18) Parents must be made aware of the presence of any animals on the premises.

Stat. Auth.: ORS 329A.260

Stats. Implemented: ORS 329A

Hist.: CCD 1-2000, f. 3-31-00, cert. ef. 4-2-00; CCD 1-2008(Temp), f. & cert. ef. 8-6-08 thru 2-2-09; CCD 3-2008, f. & cert. ef. 10-2-08; CCD 2-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; CCD 7-2010, f. 12-29-10, cert. ef. 1-1-11; CCD 1-2012(Temp), f. & cert. ef. 6-12-12 thru 11-6-12; CCD 2-2012, f. 9-28-12, cert. ef. 10-10-12; ELD 9-2014(Temp), f. & cert. ef. 8-7-14 thru 2-3-15; ELD 4-2015, f. & cert. ef. 2-3-15; ELD 5-2016, f. & cert. ef. 9-29-16 thru 3-27-17; ELD 5-2017, f. & cert. ef. 3-27-17

414-205-0110

Safety

(1) Children shall be protected from fire and safety hazards. Providers must have the following protections in place:

(a) All exposed electrical outlets in rooms used by preschool or younger children must have hard-to-remove protective caps or safety devices installed when the outlet is not in use.

(b) Extension cords shall not be used as permanent wiring;

(c) All appliance cords must be in good condition;

(d) Multiple connectors for cords shall not be used;

(e) A grounded power strip outlet with a built-in over-current protection may be used;

(f) A stable barrier shall be installed to prevent children from falling into hazards, including, but not limited to: fireplaces, heaters and woodstoves that are in use when child care children are present;

(g) A secure barrier shall be placed at the top and/or bottom of all stairways accessible to infants and toddlers;

(h) A working smoke detector on each floor and in any area where children nap;

(i) A working fire extinguisher with a rating of at least 2-A:10-BC;

(j) Firearms, BB guns, pellet guns and ammunition kept under lock, with ammunition stored and locked separately. Firearms, BB guns and pellet guns must remain unloaded;

(k) Cleaning supplies, paints, matches, lighters, and plastic bags kept under child-safety lock;

(l) Other potentially dangerous items, such as medicine, drugs, sharp knives and poisonous and toxic materials kept under child-safety lock;

(m) Flammable and combustible liquids, such as paint thinner and gasoline, shall be stored in the original container or a safety container and, if over one gallon, kept in an unattached storage building;

(n) If any preschool age or younger children are in care, poisonous plants must be kept out of the reach of children; and

(o) All clear glass panels in doors clearly marked at child level.

(2) All floor levels used by children must have access to two useable exits, as defined in OAR 414-205-0010(32), to the outdoors.

(a) If a basement is used for child care purposes, the requirement for two useable exits may be met by one of the following:

(A) A sliding glass door or swinging door to the outside and a window that meets the definition of a useable exit; or

(B) A window which meets the definition of a useable exit and an internal stairway to ground level that has unobstructed and direct access to the outdoors.

(b) If a window, which meets the definition of a useable exit, is used:

(A) Steps must be placed under the window to allow children to exit without assistance; and

(B) The window must be kept in good working condition.

(c) If a window used as an exit has a window well, a mechanism must be in place to allow children to exit the window well.

(3) Second floors (does not apply to providers registered continuously at the same address before 2009, unless the provider has moved the child care license to a new residence):

(a) Child care children shall not sleep on the second floor or above;

(b) Care shall not be provided for infants and toddlers on the second floor or above;

(c) Night care shall not be provided on the second floor or above;

(d) Children may be allowed on the second floor to use the bathroom if the only bathroom is on the second floor;

(e) Care can be provided for preschool and school-age children on the second floor or above, if:

(A) There are two staircases to the ground level and all children are mobile enough to exit safely; or

(B) The designated fire marshal has approved the use of the upper floor.

(4) The provider must have a written plan for evacuating and removing children to a safe location in an emergency. The plan must be posted in

the home, familiar to the children and the caregivers, and practiced at least every other month and must include:

(a) Procedures for notifying parents or other adults responsible for the children, of the relocation and how children will be reunited with their families;

(b) Procedures to address the needs of individual children, including infants and toddlers, children with special needs and children with chronic medical conditions;

(c) An acceptable method to ensure that all children in attendance are accounted for;

(d) Procedures for handling natural disasters (e.g. fire, earthquake, etc.) and man-caused events, such as violence at a child-care facility;

(e) Procedures in the event that children must shelter-in-place or if the child-care home must be locked-down so that no one can enter or leave; and

(f) Procedures for maintaining continuity of child care operations.

(5) A telephone in working condition must be in the family child care home.

(a) Parents must be given the telephone number so they can contact the provider if needed.

(b) Emergency telephone numbers for fire, ambulance, police and poison control and the provider's home address must be posted in a visible location.

(6) The building, grounds, water supply, and toys, equipment and furniture used by children must be maintained in a hazard-free condition.

(a) Broken toys, furniture and equipment must be removed from areas accessible to children.

(b) Both the exterior and interior of the home must be maintained in good repair.

(c) Painted surfaces must be in good condition, both inside and outside, to avoid exposing children to lead paint.

(d) The provider shall report to OCC any damage to the building that affects the provider's ability to comply with these requirements, within 48 hours after the occurrence.

(7) If a caregiver is transporting children, the caregiver must have a valid driver's license and proof of appropriate insurance.

(8) The number of children transported shall not exceed the number of seat belts or child safety systems available in the vehicle.

(9) Car seats are to be used for transportation only. Children who arrive at the provider's home asleep in a car seat may remain in the car seat until the child awakens.

(10) The provider must take precautions to protect children from vehicular traffic. The provider shall:

(A) Require drop off and pick up only at the curb or at an off-street location protected from traffic.

(B) Assure that any adult who supervises drop-off and loading can see and assure that children are clear of the perimeter of all vehicles before any vehicle moves.

(11) 15-passenger vans shall not be used to transport child care children after January 1, 2018.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CCD 1-2000, f. 3-31-00, cert. ef. 4-2-00; CCD 2-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; CCD 7-2010, f. 12-29-10, cert. ef. 1-1-11; ELD 4-2015, f. & cert. ef. 2-3-15; ELD 5-2016, f. & cert. ef. 9-29-16 thru 3-27-17; ELD 5-2017, f. & cert. ef. 3-27-17

414-205-0120

Sanitation

(1) Pre-mixed sanitizers and disinfectants that are EPA registered and meet Oregon Health Authority criteria may be used in all areas of the home per manufacturer instructions.

(2) All caregivers and children must wash their hands with soap and warm, running water:

(a) Before handling food;

(b) Before assisting with feeding;

(c) Before and after eating;

(d) After diapering;

(e) After using the toilet;

(f) After assisting someone with toileting;

(g) After nose wiping;

(h) After playing outside; and

(i) After touching an animal or handling pet toys.

(3) Hand sanitizers shall not replace hand washing. If hand sanitizers are present in the home, they shall be kept out of children's reach and shall not be used on children.

(4) All toys, equipment and furniture used by children must be cleaned, rinsed and sanitized regularly and whenever soiled.

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(5) Diaper changing surfaces must be either:

- (a) Non-absorbent and easily disinfected;
- (b) Disposed of after each use; or
- (c) Laundered after each use.

(6) The diaper changing area shall be located so that hand washing can occur immediately after diapering without contacting other surfaces or children.

(7) The building and grounds must be maintained in a clean and sanitary manner.

(8) All garbage, solid waste, and refuse must be disposed of regularly, in a safe and sanitary manner.

(9) Bio-contaminants including but not limited to bodily fluids and blood shall be disposed of in a manner that prevents exposure to children.

(10) The home's water supply must be safe to drink.

(11) Wading pools are prohibited for wading.

Stat. Auth.: ORS 657A.260

Stats. Implemented: ORS 657A.260

Hist.: CCD 1-2000, f. 3-31-00, cert. ef. 4-2-00; CCD 2-2009(Temp), f. 12-30-09, cert. ef. 1-1-10 thru 6-30-10; Administrative correction 7-27-10; ELD 4-2015, f. & cert. ef. 2-3-15; ELD 5-2017, f. & cert. ef. 3-27-17

Rule Caption: Rules required to meet federal Child Care and Development Block Grant Act of 2014 requirements.

Adm. Order No.: ELD 6-2017

Filed with Sec. of State: 3-27-2017

Certified to be Effective: 3-27-17

Notice Publication Date: 3-1-2017

Rules Amended: 414-180-0015, 414-180-0020, 414-180-0025

Subject: Rule changes to Regulated Subsidy providers required to meet requirements of the Federal Child Care and Development Block Grant Act of 2014.

Subject areas to be addressed are procedures for dealing with children with allergies, procedures for preventing child maltreatment, prevention of shaken baby syndrome and abusive head trauma, handling and storage of hazardous materials, disposal of bio-contaminants, procedures for protecting children from vehicular hazards, procedures in the event of an emergency, required Office of Child Care approved health and safety training, orientation requirements for staff and critical training for staff before they can have unsupervised access to children.

Rules Coordinator: Lisa Pinheiro—(503) 910-8135

414-180-0015

Health

(1) The provider must give the children's needs first priority, assuring that they get adequate care and attention.

(2) The child care home must be a healthy environment for children.

(3) All caregivers shall take appropriate precautions to prevent shaken baby syndrome and abusive head trauma.

(4) There must be at least one flush toilet and one hand-washing sink available to children.

(5) The provider must comply with local, state and federal laws related to immunizations, child care restrictable diseases, child safety systems and seat belts in vehicles, bicycle safety, civil rights laws, and the Americans with Disabilities Act.

(6) Infants shall have a crib, portable crib or playpen with a clean, non-absorbent mattress. All cribs must comply with current Consumer Product Safety Commission (CPSC) standards. There shall be no items in the crib with the infant (e.g. toys, pillows or stuffed animals).

(7) If the parent(s) so request, siblings may share the same bed.

(8) The upper level of bunk beds shall not be used for children under ten years of age.

(9) If an infant uses a blanket, the blanket may not cover the infant's head or face.

(10) Infants must be laid on their backs on a flat surface for sleeping.

(11) Children shall not be laid down with a bottle for sleeping.

(12) First aid supplies and a chart or handbook of first aid instructions shall be maintained in one identified place and kept out of reach of children.

(13) The first aid supplies shall include: band aids, adhesive tape, sterile gauze pads, soap or sealed antiseptic towelettes or solution to be used as a wound cleaning agent, a solution for disinfecting after a blood spill, a sanitary temperature taking device.

(14) Illness:

(a) Except for mild cold symptoms that do not impair a child's daily functioning, sick children shall not be in care.

(b) A provider shall not admit or retain in care, except with the written approval of the local health office, a child who:

(A) Is diagnosed as having or being a carrier of a child care restrictable disease, as defined in Oregon Health Authority administrative rule; or

(B) Has one of the following symptoms or combination of symptoms or illness:

(i) Fever over 100°F, taken under the arm;

(ii) Diarrhea (more than one abnormally loose, runny, watery or bloody stool);

(iii) Vomiting;

(iv) Nausea;

(v) Severe cough;

(vi) Unusual yellow color to skin or eyes;

(vii) Skin or eye lesions or rashes that are severe, weeping, or pus-filled;

(viii) Stiff neck and headache with one or more of the symptoms listed above;

(ix) Difficult breathing or abnormal wheezing; or

(x) Complaints of severe pain.

(c) A child who, after being admitted into child care, shows signs of illness, as defined in this rule, whenever possible will be separated from the other children, and the parent(s) notified and asked to remove the child from the provider's home as soon as possible.

(d) If a child has mild cold symptoms that do not impair his/her normal functioning, the child may remain in the provider's home and the parent(s) notified when they pick up their child.

(15) Section 14 of this rule does not apply when the provider is caring only for children from the same family and no other unrelated child care children are present, except that the provider shall notify the parent if a child who, after being admitted into child care, shows signs of illness.

(16) Parents must be notified if their child is exposed to an outbreak of a communicable disease.

(17) If a child with allergies is enrolled who needs a specific plan for caring for that child, such a plan shall be developed in writing between the provider and parents, and if necessary, outside specialists. All caregivers who come in contact with that child shall be fully aware of the plan.

(18) No person shall smoke or carry any lighted smoking instrument, including an e-cigarette or vaporizer in the child care home or within ten feet of any entrance, exit, or window that opens or any ventilation intake that serves an enclosed area, during child care hours or when child care children are present.

(19) No person shall use smokeless tobacco in the child care home during child care hours or when child care children are present.

(20) No person shall smoke, carry any lighted smoking instrument, including an e-cigarette, or vaporizer or use smokeless tobacco in motor vehicles while child care children are passengers.

(21) No one shall consume alcohol on the child care home premises during child care hours or when child care children are present.

(22) No one shall be under the influence of alcohol on the child care home premises during child care hours or when child care children are present.

(23) No one shall possess, use or store illegal controlled substances on the child care home premises. No one shall be under the influence of illegal controlled substances on the child care home premises.

(24) No one shall grow or distribute marijuana on the premises of the child care home. No adults shall use marijuana on the child care home premises during child care hours or when child care children are present.

(25) Child care providers and any individual supervising, transporting, preparing meals, or otherwise working in the proximity of child care children and those completing daily attendance and billing records shall not be under the influence.

(26) "Under the influence" means observed abnormal behavior or impairments in mental or physical performance leading a reasonable person to believe the individual has used alcohol, any controlled substances (including lawfully prescribed and over-the-counter medications), marijuana (including medical marijuana), or inhalants that impairs their performance of essential job function or creates a direct threat to child care children or others. Examples of abnormal behaviors include, but are not limited to hallucinations, paranoia, or violent outbursts. Examples of impairments in physical or mental performance include, but are not limited to slurred speech as well as difficulty walking or performing job activities.

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Hist.: ELD 2-2016, f. & cert. ef. 6-29-16; ELD 2-2017, f. & cert. ef. 1-31-17; ELD 6-2017, f. & cert. ef. 3-27-17

(27) All marijuana, marijuana derivatives and associated paraphernalia must be stored under child safety lock.

(28) Any animal at the provider's home shall be in good health and be a friendly companion for the children in care.

(29) Dogs and cats must be vaccinated according to a licensed veterinarian's recommendations.

(30) Dogs and cats shall be kept free of fleas, ticks and worms.

(31) Animal litter boxes shall not be located in areas accessible to children or areas used for food storage or preparation.

(32) Exotic animals, including, but not limited to: reptiles (e.g. lizards, turtles, snakes) amphibians, monkeys, hook-beaked birds, baby chicks and ferrets are prohibited unless they are housed in and remain in a tank or other container which precludes any direct contact by children. Educational programs that include prohibited animals and are run by zoos, museums and other professional animal handlers are permitted.

(33) Prescription and non-prescription medication shall only be given to a child if the provider has written authorization from the parent.

(34) Prescription and non-prescription medications must be properly labeled and stored.

(35) Non-prescription medications or topical substances must be labeled with the child's name.

(36) Prescription medications must be in the original container and labeled with the child's name, the name of the drug, dosage, directions for administering, and the physician's name.

(37) Medication requiring refrigeration must be kept in a separate, tightly covered container, marked "medication," in the refrigerator.

(38) Parents must be informed daily of any medications given to their child or any injuries their child has had.

(39) Sunscreen may be used with written parental authorization.

(a) In instances where parent has provided written permission to use sunscreen, providers must reapply sunscreen every two hours while the child care children are exposed to the sun.

(b) Providers shall use a sunscreen with an SPF of 15 or higher and must be labeled as "Broad Spectrum".

(c) Providers shall not use aerosol sunscreens on child care children.

(d) Sunscreen shall not be used on child care children younger than six months.

(40) Parents must be given the telephone number so they can contact the provider if needed.

Stat. Auth.: ORS 326.425(7)

Stats. Implemented: ORS 329A.505

Hist.: ELD 2-2016, f. & cert. ef. 6-29-16; ELD 2-2017, f. & cert. ef. 1-31-17; ELD 6-2017, f. & cert. ef. 3-27-17

414-180-0020

Sanitation

(1) Pre-mixed sanitizers and disinfectants that are EPA registered and meet Oregon Health Authority criteria may be used in all areas of the home per manufacturer instructions.

(2) All caregivers and children must wash their hands with soap and warm, running water:

(a) Before handling food;

(b) Before assisting with feeding;

(c) Before and after eating;

(d) After diapering;

(e) After using the toilet;

(f) After assisting someone with toileting;

(g) After nose wiping;

(h) After playing outside; and

(i) After touching an animal or handling pet toys.

(3) Hand sanitizers shall not replace hand washing. If hand sanitizers are present in the home, they shall be kept out of children's reach and shall not be used on children.

(4) Clean toys, equipment and furniture used by children when soiled.

(5) Diaper changing surfaces must be either:

(a) Non-absorbent and easily disinfected;

(b) Disposed of after each use; or

(c) Laundered after each use.

(6) The building, grounds, any toy, equipment, and furniture are maintained in a clean, sanitary, and hazard free condition.

(7) All garbage, solid waste, and refuse must be disposed of regularly, in a safe and sanitary manner.

(8) Bio-contaminants including but not limited to bodily fluids and blood shall be disposed of in a manner that prevents exposure to children.

(9) The home has safe drinking water.

Stat. Auth.: ORS 326.425(7)

Stats. Implemented: ORS 329A.505

414-180-0025

Safety

(1) The room temperature must be at least 68°F during the hours which child care children are in care.

(2) Rooms child care children are predominantly occupying must have a combination of natural and artificial lighting.

(3) Floors must be free of splinters, large unsealed cracks, sliding rugs and other hazards.

(4) Potentially aggressive animals must not be in the same physical space as the children.

(5) Children shall be protected from fire and safety hazards. Providers must have the following protections in place:

(a) All exposed electrical outlets in rooms used by preschool or younger children must have hard-to-remove protective caps or safety devices installed when the outlet is not in use.

(b) Extension cords shall not be used as permanent wiring;

(c) All appliance cords must be in good condition;

(d) Multiple connectors for cords shall not be used;

(e) A grounded power strip outlet with a built-in over-current protection may be used;

(f) A stable barrier shall be installed to prevent children from falling into hazards, including, but not limited to: fireplaces, heaters and woodstoves that are in use when child care children are present;

(g) A secure barrier shall be placed at the top and/or bottom of all stairways accessible to infants and toddlers;

(6) The home has a working smoke detector on each floor level and in any area where a child naps.

(7) Cleaning supplies, paints, matches, lighters, and any plastic bags large enough to fit over a child's head kept under child-safety lock.

(8) Other potentially dangerous items, such as medicine, drugs, sharp knives and poisonous and toxic materials kept under child-safety lock.

(9) Firearms, BB guns, pellet guns and ammunition kept under lock, with ammunition stored and locked separately. Firearms, BB guns and pellet guns must remain unloaded;

(10) If any preschool age or younger children are in care, poisonous plants must be kept out of the reach of children;

(11) All clear glass panels in doors clearly marked at child level.

(12) Each provider must:

(a) Ensure that the home where care is provided meets all of the following standards:

(A) Each floor level used by a child has two useable exits to the outdoors (a sliding door or window that can be used to evacuate a child is considered a useable exit). If a second floor is used for child care, the provider must have a written plan for evacuating occupants in the event of an emergency.

(B) The home has a working telephone or telephone service in operating condition.

(C) Emergency telephone numbers for fire, ambulance, police and poison control and the home address must be posted in a visible location.

(D) The building, grounds, water supply, and toys, equipment and furniture used by children must be maintained in a hazard-free condition.

(E) Broken toys, furniture and equipment must be removed from areas accessible to children.

(13) Wading pools are prohibited for wading.

(14) The provider is responsible for the children in care. At all times the provider must:

(a) Be within sight or sound of all children;

(b) Be aware of what each child is doing;

(c) Be near enough to children to respond when needed.

(15) The provider must have a written plan for evacuating and removing children to a safe location in an emergency. The plan must be posted in the child care home, familiar to the children and the caregivers, and practiced at least every other month and must include:

(a) Procedures for notifying parents or other adults responsible for the children, of the relocation and how children will be reunited with their families;

(b) Procedures to address the needs of individual children, including infants and toddlers, children with special needs and children with chronic medical conditions;

(c) An acceptable method to ensure that all children in attendance are accounted for;

(d) Procedures for handling natural disasters (e.g. fire, earthquake, etc.) and man-caused events, such as violence at a child-care facility;

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- (e) Procedures in the event that children must shelter-in-place or if the child-care home must be locked-down so that no one can enter or leave; and
- (f) Procedures for maintaining continuity of child care operations.
- (16) If a caregiver is transporting children, the caregiver must have a valid driver's license and proof of appropriate insurance.
- (17) The number of children transported shall not exceed the number of seat belts or child safety systems available in the vehicle.
- (18) Car seats are to be used for transportation only. Children who arrive at and brought into the provider's home asleep in a car seat may remain in the car seat until the child awakens.
- (19) The provider must take precautions to protect children from vehicular traffic. The provider shall:

(a) Require drop off and pick up only at the curb or at an off-street location protected from traffic.

(b) Assure that any adult who supervises drop-off and loading can see and assure that children are clear of the perimeter of all vehicles before any vehicle moves.

(20) If a passenger van is used to transport child care children it must meet Federal Motor Vehicle Safety Standards for transporting children in education settings.

(21) The provider must have a written statement from the parent(s) regarding whether or not the provider is authorized to:

(a) Take a child on a field trip or other activity outside the child care home or participate in any water activity; and

(b) Transport a child to or from school or allow a child to bus or walk to or from school or child care home.

(22) 15-passenger vans shall not be used to transport child care children.

[ED. NOTE: Table referenced are available from the agency.]
Stat. Auth.: ORS 326.425(7)
Stats. Implemented: ORS 329A.505
Hist.: ELD 2-2016, f. & cert. ef. 6-29-16; ELD 2-2017, f. & cert. ef. 1-31-17; ELD 6-2017, f. & cert. ef. 3-27-17

**Oregon Health Authority,
Health Licensing Office, Board of Licensed Dietitians
Chapter 834**

Rule Caption: Renewal language for licensed dietitians must be aligned with the rest of the rules.

Adm. Order No.: BELD 3-2017

Filed with Sec. of State: 3-28-2017

Certified to be Effective: 4-1-17

Notice Publication Date: 2-1-2017

Rules Amended: 834-030-0010

Subject: A very recent (January 2017) continuing education language clarification missed this language in another section. Rules must be consistent for licensees.

Rules Coordinator: Samantha Patnode—(503) 373-1917

834-030-0010

Licensed Dietitian Issuance and Renewal

(1) A license is subject to the provisions of OAR Chapter 331, division 30 regarding the issuance and renewal of a license, provisions regarding authorization to practice, identification, and requirements for issuance of a duplicate license.

(2) To avoid delinquency penalties, a license must be renewed before the license becomes inactive as described in section (3) of this rule. The licensee must:

(a) Submit a renewal application form;

(b) Pay the renewal fee pursuant to 834-040-0000;

(c) Attest to having obtained the required annual CE pursuant to OAR 834-050-0000;

(d) Attest to having provided the required information to OHA pursuant to ORS 676.410; and

(e) Pay fee established by OHA pursuant to ORS 676.410.

(3) A license becomes inactive if it is not renewed before its "active through" date. A license may be inactive for up to three years, but an inactive license does not authorize its holder to practice dietetics under the title, "Licensed Dietitian" or the letters "L.D." To renew an inactive license, the licensee must:

(a) Submit a renewal application form;

(b) Pay the delinquency and renewal fees pursuant to OAR 834-040-0000;

(c) Attest to having obtained the required annual CE pursuant to OAR 834-050-0000 on a form prescribed by the Office;

(d) Attest to having provided the required information to OHA pursuant to ORS 676.410; and

(e) Pay fee established by OHA pursuant to ORS 676.410.

(4) A licensee holding an expired license must reapply and meet the requirements of OAR 834-030-0000. An expired license does not authorize its holder to practice dietetics under the title, "Licensed Dietitian" or the letters "L.D."

(5) A license is expired if it has been inactive for more than three years.

Stat. Auth.: ORS 691.475, 691.485

Stats. Implemented: ORS 691.435, 691.445, 691.475, 691.477, 691.479

Hist.: BELD 2-2012, f. 8-16-12, cert. ef. 8-17-12; BELD 1-2016, f. 2-17-16, cert. ef. 3-1-16; BELD 2-2017(Temp), f. & cert. ef. 1-17-17 thru 7-15-17; BELD 3-2017, f. 3-28-17, cert. ef. 4-1-17

**Oregon Health Authority,
Health Systems Division: Medical Assistance Programs
Chapter 410**

Rule Caption: Expanding Services in State Plan for Babies First!, CaCoon TCM Approved by CMS Effective January 1, 2017

Adm. Order No.: DMAP 9-2017

Filed with Sec. of State: 3-31-2017

Certified to be Effective: 4-1-17

Notice Publication Date: 3-1-2017

Rules Amended: 410-138-0000, 410-138-0005, 410-138-0007, 410-138-0009, 410-138-0020, 410-138-0040, 410-138-0060, 410-138-0080, 410-138-0390, 410-138-0420

Rules Repealed: 410-138-0000(T), 410-138-0005(T), 410-138-0007(T), 410-138-0009(T), 410-138-0020(T), 410-138-0040(T), 410-138-0060(T), 410-138-0080(T), 410-138-0390(T), 410-138-0420(T)

Subject: The Division needs to amend these rules to incorporate changes to the State Plan for Targeted Case Management Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership services, recently approved by Centers for Medicare and Medicaid Services (CMS) effective 01/01/2017. The Division is adding definitions specific to the expanded services, qualifications of case managers, expanded target group, and identified risk criteria for clients eligible in the target group. All changes are pending subject to CMS approval of proposed language and/or changes to language for expanding services for Babies First!, CaCoon Targeted Case Management Services.

Rules Coordinator: Sandy Cafourek—(503) 945-6430

410-138-0000

Targeted Case Management Definitions

The following definitions apply to OAR 410-138-0000 through 410-138-0420:

(1) "Assessment" means the act of gathering information and reviewing historical and existing records of an eligible client in a target group to determine the need for medical, educational, social, or other services. To perform a complete assessment, the case manager shall gather information from family members, medical providers, social workers, and educators, if necessary.

(2) "Care Plan" means a Targeted Case Management (TCM) Care Plan that is a multidisciplinary plan that contains a set of goals and actions required to address the medical, social, educational, and other service needs of the eligible client based on the information collected through an assessment or periodic reassessment.

(3) "Case Management" means services furnished by a case manager to assist individuals eligible under the Medicaid State Plan Amendment (SPA) in gaining access to and effectively using needed medical, social, educational, and other services (such as housing or transportation) in accordance with 42 CFR 441.18. See also the definition for Targeted Case Management.

(4) "Centers for Medicare and Medicaid Services (CMS)" means the federal agency under the U.S. Department of Health and Human Services that provides the federal funding for Medicaid and the Children's Health Insurance Program (CHIP).

(5) "Children and Youth with Special Health Care Needs (CYSHCN)" means those children and youth who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and

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who also require health and related services of a type or amount beyond that required by children generally.

(6) “Department” means the Department of Human Services (Department).

(7) “Division” means the Oregon Health Authority’s Health Systems Division.

(8) “Duplicate Payment” means more than one payment made for the same services to meet the same need for the same client at the same point in time.

(9) “Early Childhood Special Education (ECSE)” means free, specially designed instruction to meet the unique needs of a preschool child with a disability, three years of age until the age of eligibility for public school, including instruction in physical education, speech-language services, travel training, and orientation and mobility services. Instruction is provided in any of the following settings: home, hospitals, institutions, special schools, classrooms, and community childcare or preschool settings.

(10) “Early Intervention (EI)” means services for preschool children with disabilities from birth until three years of age, including Indian children and children who are homeless and their families.

(11) “Early Intervention/Early Childhood Special Education (EI/ECSE) Services” means services provided to a preschool child with disabilities, eligible under the Individuals with Disabilities Education Act (IDEA) from birth until they are eligible to attend public school, pursuant to the eligible child’s Individualized Family Service Plan (IFSP).

(12) “EI/ECSE Case Manager (i.e., service coordinator)” means an employee of the EI/ECSE contracting or subcontracting agency meeting the personnel standards requirements in OAR 581-015-2900. The EI/ECSE case manager serves as a single point-of-contact and is responsible for coordinating all services across agency lines for the purpose of assisting an eligible client to obtain needed medical, social, educational, developmental, and other appropriate services (such as housing or transportation) identified in the eligible client’s care plan in coordination with the client’s IFSP.

(13) “EI/ECSE TCM Program” means a service under the State Plan and includes case management services furnished to eligible EI/ECSE preschool children age 0-5 with disabilities, assisting them to gain access to needed medical, social, educational, developmental, and other appropriate services (such as housing or transportation) in coordination with their IFSP. EI/ECSE TCM providers shall meet the criteria for the provision of special education programs approved by the State Superintendent of Public Instruction qualifying such programs for state reimbursement under OAR 581-015-2710 EI/ECSE and shall be contractors with the Oregon Department of Education in the provision of EI/ECSE services or be subcontractors with such a contractor. Medicaid reimbursement for EI/ECSE TCM services is available only to eligible clients in the target group and does not restrict an eligible client’s free choice of providers.

(14) “Eligible Client” means an individual who is found eligible for Medicaid or the Children’s Health Insurance Program (CHIP) by the Oregon Health Authority (Authority) and eligible for case management services (including TCM services) as defined in the Medicaid State Plan at the time the services are furnished.

(15) “Federal Financial Participation (FFP)” means the portion paid by the federal government to states for their share of expenditures for providing Medicaid services. FFP was created as part of the Title XIX, Social Security Act of 1965. There are two objectives that permit claims under FFP. They are:

(a) To assist individuals eligible for Medicaid to enroll in the Medicaid program; and

(b) To assist individuals on Medicaid to access Medicaid providers and services. The second objective involves TCM.

(16) “Federal Medical Assistance Percentage (FMAP)” means the percentage of federal matching dollars available to a state to provide Medicaid services. The FMAP is calculated annually based on a three-year average of state per capita personal income compared to the national average. The formula is designed to provide a higher federal matching rate to states with lower per capita income. No state receives less than 50 percent or more than 83 percent.

(17) “Individualized Family Service Plan (IFSP)” means a written plan of early childhood special education, related services, early intervention services, and other services developed in accordance with criteria established by the State Board of Education for each child eligible for services. (See OAR 581-015-2700 to 581-015-2910, Early Intervention and Early Childhood Special Education Programs.)

(18) “Medical Assistance Program” means a program administered by the Division that provides and pays for health services for eligible Oregonians. The Medical Assistance Program includes TCM services pro-

vided to clients eligible under the Oregon Health Plan (OHP) Title XIX and the Children’s Health Insurance Program (CHIP) Title XXI.

(19) “Monitoring” means ongoing face-to-face or other contact to conduct follow-up activities with the participating eligible client or the client’s health care decision makers, family members, providers, or other entities or individuals when the purpose of the contact is directly related to managing the eligible client’s care to ensure the care plan is effectively implemented.

(20) “Oregon Health Plan (OHP)” means the Medicaid program in Oregon that is known as the OHP and governed by a series of laws passed by the Oregon Legislature with the intention of providing universal access to healthcare to Oregonians. OHP is also governed by many federal laws.

(21) “Perinatal (for the purpose of the State Plan amendment for Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership TCM)” means the period inclusive of pregnancy through two years postpartum to the child’s second birthday. Services to a parent or primary caregiver may be available during this same two-year period following the birth of the child.

(22) “Reassessment” means periodically re-evaluating the eligible client to determine whether or not medical, social, educational, or other services continue to be adequate to meet the goals and objectives identified in the care plan. Reassessment decisions include those to continue, change, or terminate TCM services. A reassessment shall be conducted at least annually or more frequently if changes occur in an eligible client’s condition, or when resources are inadequate, or the service delivery system is non-responsive to meet the client’s identified service needs.

(23) “Referral” means performing activities such as scheduling appointments that link the eligible client with medical, social, or educational providers, or other programs and services, and follow-up and documentation of services obtained.

(24) “Targeted Case Management (TCM) Services” means case management services furnished to a specific target group of eligible clients under the Medicaid State Plan to gain access to needed medical, social, educational, and other services (such as housing or transportation).

(25) “Unit of Government” means a city, a county, a special purpose district, or other governmental unit in the state.

Stat. Auth.: ORS 413.042 & 414.065

Stats. Implemented: ORS 414.065

Hist.: HR 20-1992, f. & cert. ef. 7-1-92; OMAP 61-2004, f. 9-10-04, cert. ef. 10-1-04; DMAP 32-2008(Temp), f. & cert. ef. 10-2-08 thru 3-27-09; DMAP 43-2008, f. 12-17-08, cert. ef. 12-28-08; DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 75-2013(Temp), f. 12-31-13, cert. ef. 1-1-14 thru 6-30-14; DMAP 23-2014, f. & cert. ef. 4-4-14; DMAP 76-2016, f. 12-29-16, cert. ef. 1-1-17; DMAP 2-2017(Temp), f. & cert. ef. 1-13-17 thru 7-11-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

410-138-0005

Payment for Targeted Case Management Services Eligible for Federal Financial Participation

(1) This rule is to be used in conjunction with Targeted Case Management (TCM) rules OAR 410-138-0000 through 410-138-0009 and 410-138-0390 and the Division’s General Rules chapter 410, division 120.

(2) The TCM services rules are designed to assist the TCM provider organizations in matching state and federal funds for TCM services defined by Section 1915(g) of the Social Security Act, 42 USC § 1396n(g).

(3) Payment shall be made to the TCM provider enrolled with the Authority as a unit of government provider meeting the requirements set forth in the provider enrollment agreement.

(4) Signing the provider enrollment agreement sets forth the relationship between the State of Oregon, the Authority, and the TCM provider and constitutes agreement by the TCM provider to comply with all applicable Authority rules and federal and state laws and regulations.

(5) The TCM provider shall bill according to administrative rules in chapter 410, division 138 and the TCM supplemental information. Payments shall be made using the Medicaid Management Information System (MMIS), and the TCM provider shall retain the full payment for covered services provided. The TCM provider shall have a Trading Partner Agreement with the Authority prior to submission of electronic transactions.

(6) TCM authorized under these rules is a cost-sharing (Federal Financial Participation (FFP) matching) program in which the TCM provider as a public entity, unit of government, shall pay the non-federal matching share of the amount of the TCM claims, calculated using the Federal Medical Assistance Percentage (FMAP) rates in effect during the quarter when the TCM claims will be paid:

(a) The TCM provider’s non-federal matching share means the public funds share of the Medicaid payment amount. Pursuant to the Social Security Act, 42 CFR 433.51, public funds may be considered as the state’s

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share in claiming federal financial participation, if the public funds meet the following conditions:

(A) The public funds are transferred to the Authority from public entities that are units of government;

(B) The public funds are not federal funds, or they are federal funds authorized by federal law to be used to match other federal funds; and

(C) All sources of funds shall be allowable under the Social Security Act 42 CFR 433 Subpart B;

(b) The unit of government TCM provider shall pay the non-federal matching share to the Authority in accordance with OAR 410-120-0035.

(7) Before the Authority pays for TCM claims, the Authority shall receive the corresponding local match payment as described in this rule. Failure to timely pay the non-federal matching funds to the Authority will delay payment.

(8) The Authority shall not be financially responsible for payment of any claim that CMS disallows under the Medicaid program. If the Authority has previously paid the TCM provider for any claim, which CMS disallows, the TCM provider shall reimburse the Authority the amount of the claim that the Authority has paid to the TCM provider, less any amount previously paid by the unit of government TCM provider to the Authority for the non-federal match portion for that claim.

(9) Providers shall only bill Medicaid for allowable activities in the TCM program that assist individuals eligible under the Medicaid State Plan to gain access to needed medical, social, educational, and other services. One or more of the following allowable activities shall occur before billing:

(a) Assessment;

(b) Development of a care plan;

(c) Referral and follow up; and

(d) Monitoring and follow up.

(10) TCM claims may not duplicate payments made to:

(a) Public agencies or private entities for any other case management activities or direct services provided under the State Plan or OHP, through fee for service, managed care, or other contractual arrangement, that meet the same need for the same client at the same point in time;

(b) A TCM provider by program authorities under different funding authority than OHP, including but not limited to other public health funding;

(c) A TCM provider for administrative expenditures reimbursed under agreement with the Authority or any other program or funding source.

(11) Medicaid is only liable for the cost of otherwise allowable case management services if there are no other third parties liable to pay. However, while schools are legally liable to provide IDEA-related health services at no cost to eligible children, Medicaid reimbursement is available for these services because section 1903(c) of the Act requires Medicaid to be primary to the U.S. Department of Education for payment for covered Medicaid services furnished to a child with a disability. These services may include health services included in a child's Individualized Education Program (IEP) or Individual Family Service Plan (IFSP) under the IDEA. Payment for those services that are included in the IEP or IFSP may not be available when those services are not covered Medicaid services.

(12) The Authority's acceptance of cost data provided by provider organizations for the purpose of establishing rates paid for TCM services does not imply or validate the accuracy of the cost data provided.

(13) Reimbursement is subject to all rules and laws pertaining to federal financial participation.

Stat. Auth.: ORS 413.042 & 414.065

Stats. Implemented: ORS 414.065

Hist.: DMAP 32-2008(Temp), f. & cert. ef. 10-2-08 thru 3-27-09; DMAP 43-2008, f. 12-17-08, cert. ef. 12-28-08; DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 76-2016, f. 12-29-16, cert. ef. 1-1-17; DMAP 2-2017(Temp), f. & cert. ef. 1-13-17 thru 7-11-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

410-138-0007

Targeted Case Management — Covered Services

(1) Targeted case management (TCM) services shall be furnished only to assist individuals eligible under the Medicaid State Plan in gaining access to and effectively using needed medical, social, educational, and other services (such as housing or transportation) in accordance with 42 CFR 441.18.

(2) TCM services billed to Medicaid shall be for allowable activities and include one or more of the following components:

(a) Assessment of an eligible client in the target group to determine the need for medical, educational, social, or other services as follows:

(A) Taking client history;

(B) Identifying the needs of the client, and completing related documentation;

(C) Gathering information from other sources, such as family members, medical providers, social workers, and educators, if necessary, to form a complete assessment of the eligible client;

(D) Periodically reassessing a client to determine if the client's needs or preferences have changed. A reassessment shall be conducted at least annually or more frequently if changes occur in the client's condition;

(b) Development of a care plan based on the information collected through the assessment or periodic reassessment, specifying the goals and actions to address the medical, social, educational, and other services needed by the eligible client. This may include:

(A) Active participation of the eligible client in the target group; or

(B) Working with the eligible client or the eligible client's authorized health care decision maker and others to develop goals and identify a course of action to respond to the assessed needs of the eligible client;

(c) Referral, linking, and coordination of services and related activities including but not limited to:

(A) Scheduling appointments for the eligible client in the target group to obtain needed services; and

(B) Activities that help link the eligible client with medical, social, or educational providers, or other programs and services (e.g., food vouchers, transportation, child care, or housing assistance) that address identified needs and achieve goals specified in the care plan. The case management referral activity is completed once the referral and linkage have been made;

(C) Reminding and motivating the client to adhere to the treatment and services schedules established by providers.

(d) Monitoring or ongoing face-to-face or other contact:

(A) Monitoring and follow-up activities include activities and contacts:

(i) To ensure the care plan is effectively implemented;

(ii) To help determine if the services are being furnished in accordance with the eligible client's care plan;

(iii) To determine whether the care plan adequately addresses the needs of the eligible client in the target group;

(iv) To adjust the care plan to meet changes in the needs or status of the eligible client.

(B) Monitoring activities may include contacts with:

(i) The participating eligible client in the target group;

(ii) The eligible client's healthcare decision makers, family members, providers, or other entities or individuals when the purpose of the contact is directly related to the management of the eligible client's care.

(3) TCM services billed to Medicaid shall be documented in the client's case records for all client's receiving case management. The documentation shall include:

(a) The client's name;

(b) The dates of the case management services;

(c) The name of the provider agency (if relevant) and the person providing the case management service;

(d) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved;

(e) Whether the client has declined services in the care plan;

(f) The need for, and occurrences of, coordination with other case managers;

(g) A timeline for obtaining needed services;

(h) A timeline for reevaluation of the plan.

Stat. Auth.: ORS 413.042 & 414.065

Stats. Implemented: ORS 414.065

Hist.: DMAP 32-2008(Temp), f. & cert. ef. 10-2-08 thru 3-27-09; DMAP 43-2008, f. 12-17-08, cert. ef. 12-28-08; DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 75-2013(Temp), f. 12-31-13, cert. ef. 1-1-14 thru 6-30-14; DMAP 23-2014, f. & cert. ef. 4-4-14; DMAP 76-2016, f. 12-29-16, cert. ef. 1-1-17; DMAP 2-2017(Temp), f. & cert. ef. 1-13-17 thru 7-11-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

410-138-0009

Targeted Case Management — Services Not Covered

Targeted Case Management (TCM) services do not cover:

(1) Direct delivery of an underlying medical, educational, social, or other service to which the eligible client has been referred.

(2) Providing transportation to a service to which an eligible client is referred.

(3) Escorting an eligible client to a service.

(4) Providing child care so that an eligible client may access a service.

(5) Contacts with individuals who are not categorically eligible for Medicaid or who are categorically eligible for Medicaid but not included in the eligible target population when those contacts relate directly to the iden-

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tification and management of the non-eligible or non-targeted individual's needs and care.

(6) Assisting an individual who has not yet been determined eligible for Medicaid to apply for or obtain eligibility.

(7) TCM services provided to an individual if the services are case management services funded by Title IV-E or Title XX of the Social Security Act, or federal or state funded parole and probation, or juvenile justice programs.

(8) Activities for which third parties are liable to pay.

Stat. Auth.: ORS 413.042 & 414.065

Stats. Implemented: ORS 414.065

Hist.: DMAP 32-2008(Temp), f. & cert. ef. 10-2-08 thru 3-27-09; DMAP 43-2008, f. 12-17-08, cert. ef. 12-28-08; DMAP 43-2009, f. 12-15-09, cert. ef. 1-1-10; DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 75-2013(Temp), f. 12-31-13, cert. ef. 1-1-14 thru 6-30-14; DMAP 23-2014, f. & cert. ef. 4-4-14; DMAP 76-2016, f. 12-29-16, cert. ef. 1-1-17; DMAP 2-2017(Temp), f. & cert. ef. 1-13-17 thru 7-11-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

410-138-0020

Targeted Case Management Programs

(1) This rule includes expanded services in the State Plan for TCM and includes: Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership services approved by CMS effective January 1, 2017.

(2) TCM programs include the following:

(a) Asthma/Healthy Homes;

(b) Early Intervention/Early Childhood Special Education (EI/ECSE);

(c) Human Immunodeficiency Virus (HIV);

(d) Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership;

(e) Substance Abusing Pregnant Women and Substance Abusing Parents with Children Under Age 18; and

(f) Federally Recognized Tribal Governments.

(3) The TCM Programs are medical assistance programs operated by public health authorities, unit of government providers, or Federally Recognized Tribal Governments in Oregon who are enrolled as TCM providers with the Authority. Participation by providers is voluntary and subject to approval by the Authority and CMS. With the exception of the Federally Recognized Tribal Governments TCM programs, the TCM programs authorized under these rules are cost-sharing (Federal Financial Participation (FFP) matching) programs in which the public fund agency, public entity, unit of government, shall pay the non-federal matching share of the amount of the TCM claims.

(4) The Public Fund Agency may contract TCM services provided by a Local Public Health Authority or other public or private agency if the public fund agency's obligations for providing payment for the non-federal share for services provided and billed to Medicaid are met in compliance with 42CFR433.51 and the TCM services are provided by an enrolled Medicaid TCM provider who will receive and retain 100 percent of the TCM payments. See OAR 410-138-0005 (Payment for Targeted Case Management Services Eligible for Federal Financial Participation).

(5) Federally Recognized Tribal Governments TCM services authorized under these rules provided to tribal members (American Indian/Alaska Native) at an Indian Health Service (IHS/638) facility operated by the Indian Health Service, by an Indian tribe or tribal organization are reimbursed at 100 percent by Title XIX (Medicaid) and Title XXI Children's Health Insurance Program (CHIP). TCM services provided by IHS/638 facilities to non-tribal American Indian/Alaska Native members shall be reimbursed at the applicable FMAP rate.

(6) The Authority may not authorize services or reimbursement for direct care as part of any TCM activity. The following are TCM programs and services:

(a) The TCM Asthma/Healthy Homes program improves access to needed services for eligible clients with poorly controlled asthma or a history of environmentally induced respiratory distress. The TCM Asthma/Healthy Homes program services include management of medical and non-medical services, which address medical, social, nutritional, educational, housing, environmental, and other needs. Home visits constitute an integral part of the delivery of TCM services, provided by a TCM Asthma/Healthy Homes case manager consistent with these rules;

(b) The TCM Early Intervention/Early Childhood Special Education (EI/ECSE) program is a medical assistance program provided by enrolled EI/ECSE providers that meet the criteria approved by the State Superintendent of Public Instruction to administer the provision of EI and ECSE. The TCM EI/ECSE program provides services to categorically eligible children with disabilities, receiving EI/ECSE services from birth until they are eligible for public school. These TCM services are available on a

fee-for-service basis, within the limitations established by the Division and chapter 410, division 138 rules, consistent with the requirements of the Individuals with Disabilities Education Act (IDEA). This qualifies such programs for state reimbursement under EI/ECSE programs OAR 581-015-2700 through 581-015-2910. An enrolled TCM EI/ECSE provider shall be a contractor/agency designated by the Oregon Department of Education (ODE) to administer the provision of EI and ECSE within selected service areas or be a sub-contractor with such a contractor. TCM EI/ECSE program services include management of medical and non-medical services to assist children with disabilities in gaining access to needed medical, social, educational, developmental, and other appropriate services in coordination with a child's Individualized Family Service Plan (IFSP) developed and implemented pursuant to IDEA and based on information collected through the TCM assessment or periodic reassessment process;

(c) The TCM HIV program improves access to needed medical and non-medical services, which address physical, psychosocial, nutritional, educational, and other services for Medicaid categorically eligible clients with symptomatic or asymptomatic HIV disease. Home visits constitute an integral part of the delivery of TCM services, provided by a TCM HIV case manager consistent with these rules. Without TCM case management services, an eligible client's ability to remain safely in their home may be at risk;

(d) The TCM Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership program improve access to needed medical and non-medical services that address medical, social, educational, and other services. These programs are expanded to include Medicaid eligible perinatal women, eligible infants and children through four years of age who have one or more risk factors for poor perinatal, birth, and other poor health outcomes. TCM services may be provided to a parent (primary caregiver) during this same two years following the birth of the eligible child. See Table 1 Risk Criteria as outlined in OAR 410-138-0040 risk criteria. The TCM CaCoon program improves access to needed medical, psychosocial, educational, and other services for infants, children, and youth and shall be provided to Medicaid eligible Children and Youth with Special Health Care Needs (CYSHCN), up to age 21, who have one or more diagnosis or very high risk factor listed in Table 2 as outlined in OAR 410-138-0040 risk criteria. Home visits constitute a significant part of the delivery of targeted case management services, provided by a Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership targeted case manager consistent with these rules;

(e) The TCM Substance Abusing Pregnant Women and Substance Abusing Parents with Children under age 18 program improves access to needed medical and non-medical services, which address physical, psychosocial, educational, nutritional, and other services to Medicaid categorically eligible pregnant women or custodial parents with children under the age of 18 who have alcohol or drug addiction issues. Targeted clients are those who are not yet ready to actively engage in addiction treatment services. TCM services are provided by an enrolled TCM Substance Abusing Pregnant Women and Substance Abusing Parents with Children under age 18 provider consistent with these rules. Participation by all TCM providers is voluntary and subject to approval by the Division and CMS;

(f) The TCM Federally Recognized Tribal Government program improves access to needed medical and non-medical services, which address health, psychosocial, economic, educational, nutritional, and other services for Medicaid categorically eligible tribal members served by tribal programs, provided by an enrolled tribal TCM provider consistent with these rules. The target group includes those members receiving elder care; individuals with diabetes; children and adults with health and social service care needs, and pregnant women.

(7) Refer to the State Plan Amendments for participating counties for each TCM program. The State Plan Amendments are located at <http://www.oregon.gov/oha/healthplan/Pages/stateplan.aspx>.

(8) Provision of any TCM Program services may not restrict an eligible client's choice of providers, in accordance with 42 CFR 441.18(a):

(a) Eligible clients shall have free choice of available TCM Program service providers or other TCM service providers available to the eligible client, subject to the Social Security Act, 42 USC 1396n and 42 CFR 441.18(b);

(b) Eligible clients shall have free choice of the providers of other medical care within their benefit package of covered services.

Stat. Auth.: ORS 413.042 & 414.065

Stats. Implemented: ORS 414.065

Hist.: HR 20-1992, f. & cert. ef. 7-1-92; OMAP 50-2004, f. 9-9-04, cert. ef. 10-1-04; DMAP 32-2008(Temp), f. & cert. ef. 10-2-08 thru 3-27-09; DMAP 43-2008, f. 12-17-08, cert. ef. 12-28-08; DMAP 43-2009, f. 12-15-09, cert. ef. 1-1-10; DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 76-2016, f. 12-29-16, cert. ef. 1-

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1-17; DMAP 2-2017(Temp), f. & cert. ef. 1-13-17 thru 7-11-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

410-138-0040

Targeted Case Management Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership Program Risk Criteria

(1) This rule is in effect for expanded services approved by CMS effective for services rendered beginning January 1, 2017, and sets forth the criteria for risk factors for the TCM Expanded Babies First! programs for infants and preschool children (birth through age four) to include perinatal and parental eligibility criteria in Table 1 and risk factors for TCM infant and children eligibility criteria and diagnosis in **Table 2**.

(2) **Table 1** risk criteria for TCM perinatal and parental eligibility and **Table 2** risk criteria for TCM infant and children eligibility and diagnosis criteria become effective January 1, 2017, and may be obtained by clicking on the PDF copy.

[Note: Tables referenced are available from the agency.]

Stat. Auth.: ORS 413.042 & 414.065

Stats. Implemented: ORS 414.065

Hist.: HR 20-1992, f. & cert. ef. 7-1-92; HR 37-1994, f. 12-30-94, cert. ef. 1-1-95; OMAP 50-2004, f. 9-9-04, cert. ef. 10-1-04; DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 76-2016, f. 12-29-16, cert. ef. 1-1-17; DMAP 2-2017(Temp), f. & cert. ef. 1-13-17 thru 7-11-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

410-138-0060

Targeted Case Management Program — Provider Requirements

(1) This rule is in effect for services rendered retroactive to July 1, 2009, except for the TCM Asthma/Healthy Homes Program that is retroactive to July 1, 2010, and Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership for services rendered effective January 1, 2017.

(2) TCM Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership targeted case managers may be an employee of a Local County Health Department or other public or private agency contracted by a Local Public Health Authority with the demonstrated ability to meet all state and federal laws governing the participation of providers in the state Medicaid program and the ability to link with the Maternal and Child Health (MCH) Data System.

(3) TCM Asthma/Healthy Homes, Early Intervention/Early Childhood Special Education (EI/ECSE), and Human Immunodeficiency Virus (HIV) provider organizations shall be unit of government providers. TCM EI/ECSE providers may also be a subcontractor of a government entity.

(4) TCM Substance Abusing Pregnant Women and Substance Abusing Parents with Children Under Age 18 provider organizations shall be locally based agencies.

(5) TCM Federally Recognized Tribal Governments providers shall be Indian Health Services/638 facilities.

(6) All providers shall demonstrate the ability to provide all core elements of case management services including:

(a) Comprehensive assessment, which may include triage and environmental assessment of client needs. All providers for the Public Health Nurse Home Visiting, Expanded Babies First!, CaCoon, and Nurse-Family Partnership targeted case managers program shall provide comprehensive nursing assessment of client needs;

(b) Reassessment of the client's status and needs annually or more frequently with a significant change in the client's condition;

(c) Development and periodic revision of a comprehensive care and service plan;

(d) Referral and linking/coordination of services;

(e) Ongoing monitoring and follow-up of referral and related services;

(f) A financial management capacity and system that provides documentation of services and costs and provides computerized tracking and monitoring to assure adequate follow-up and avoid duplication.

(7) Except for Federally Recognized Tribal Governments providers, the TCM provider shall provide the non-federal matching share from public funds in compliance with OAR 410-138-0005.

(8) If the provider is a subcontractor of a governmental entity, the governmental entity shall make the non-federal matching share with public fund payments in compliance with OAR 410-138-0005.

(9) All program providers shall demonstrate the following TCM experience and capacity:

(a) Understanding and knowledge of local and state resources and services available to the target population;

(b) Demonstrated case management experience in coordinating and linking community resources as required by the target population;

(c) Demonstrated and documented experience providing services for the target population;

(d) An administrative capacity to ensure quality of services in accordance with state and federal requirements;

(e) A financial management capacity and system that provides documentation of services and costs;

(f) Capacity to document and maintain client case records in accordance with state and federal requirements, including requirement for recordkeeping on OAR 410-138-0007 and 410-120-1360; confidentiality requirements in ORS 192.518–192.524, 179.505 and 411.320; and HIPAA Privacy requirements applicable to case management services;

(g) A sufficient number of staff to meet the case management service needs of the target population;

(h) Demonstrated ability to meet all state and federal laws governing the participation of providers in the state Medicaid program; and

(i) Enrolled as a TCM provider with the Authority and meeting the requirements set forth in the provider enrollment agreement.

(10) TCM Asthma/Healthy Homes Program case managers shall possess the following additional qualifications:

(a) A current active Oregon registered nurse (RN) license; or

(b) A registered environmental health specialist; or

(c) An asthma educator certified by the National Asthma Education and Prevention Program; or

(d) A community health worker certified by the Stanford Chronic Disease Self-Management Program; or

(e) A case manager working under the supervision of a licensed registered nurse or a registered environmental specialist.

(11) The TCM case managers for the Public Health Nurse Home Visiting, Babies First!, CaCoon, and Nurse-Family Partnership program:

(a) May be an employee of a local county health department or other public or private agency contracted by a Local Public Health Authority;

(b) Shall be a licensed registered nurse with experience in community health, public health, or child health nursing; and

(c) May be a community health worker, family advocate, or promotor working under the supervision of a licensed registered nurse. The minimum qualifications of the Community Health Workers, Family Advocates, or Promotoras are as follows:

(A) High School Graduate or GED with additional course work in human growth and development, health occupations, or health education; and

(B) Two years' experience in public health, mental health, or alcohol drug treatment settings; or

(C) Any satisfactory combination of experience and training that demonstrates the ability to perform case management duties;

(D) The case manager shall work under the policies, procedures, and protocols of the state MCH Program.

(12) Additional qualifications for TCM EI/ECSE provider organizations include the following:

(a) TCM EI/ECSE providers shall meet the criteria to administer the provision of EI and ECSE within selected service areas designated by the Oregon Department of Education, qualifying such programs for state reimbursement under EI/ECSE Programs (OAR 581-015-2700 through 581-015-2910);

(b) Shall be contractors with the Oregon Department of Education in the provision of EI/ECSE services or sub-contractors with such a contractor and shall meet the following qualifications:

(A) Demonstrated case management experience in conjunction with service coordination under OAR 581-015-2840 specified on a child's Individualized Family Service Plan (IFSP) for coordinating and linking such community resources as required by the target population; and

(B) Capacity to document and maintain individual case records in accordance with confidentiality requirements in the Individuals with Disabilities Education Act, ORS 192.518–192.524, 179.505, and 411.320, and HIPAA Privacy requirements in 45 CFR 160 and 164, if applicable.

(13) Qualifications for TCM EI/ECSE Supervisors of EI/ECSE service coordinators of targeted case management services shall:

(a) Possess a minimum of a master's degree in early childhood special education, or a related field and have three years of experience with infants, toddlers, young children, and families;

(b) Hold a Teacher Standard and Practices Commission (TSPC) administrative endorsement or within 12 months of employment, complete authorization as an Early Childhood Supervisor under OAR 581-015-2910; and

ADMINISTRATIVE RULES

(c) Have a professional development plan based on the content of the EI/ECSE competencies.

(14) Qualifications of EI and ECSE Specialists performing case management/Targeted Case Management services shall:

(a) Possess a minimum of a baccalaureate degree in early childhood, special education or a related field;

(b) Have a professional development plan based on the content of the EI/ECSE competencies; and

(c) Hold one of the following credentials:

(A) TSPC licensure or endorsement in EI/ECSE;

(B) TSPC licensure or endorsement in a related field; or

(C) Within 12 months of employment, authorization as an Early Childhood Specialist under OAR 581-15-2905.

(15) Qualifications of EI and ECSE Related services personnel shall possess a minimum of a baccalaureate degree and a valid license necessary to practice in Oregon. Related services personnel who also provide service coordination as outlined in OAR 581-015-2840 shall have:

(a) TSPC licensure in their area of discipline; or

(b) State licensure in their area of discipline; and

(c) A professional development plan based on the content of the EI/ECSE competencies;

(d) Knowledge and understanding of the Individuals with Disabilities Education Act (IDEA);

(e) Knowledge and understanding of the nature and scope of services available under the Oregon EI/ECSE programs.

(16) In addition to the above, all shall be employees of the ODE, its contractors or subcontractors, and shall have demonstrated knowledge and understanding about:

(a) The ODE EI/ECSE programs OAR 581-015-2700 through 581-015-2910, including these rules and the applicable Medicaid State Plan Amendment;

(b) Case Management experience in conjunction with service coordination under OAR 581-015-2840 for coordinating and linking such community resources as required by the target population to assist clients in gaining access to needed medical, social, educational, developmental, and other appropriate services in coordination with the eligible child's IFSP;

(c) The Individuals with Disabilities Education Act (IDEA);

(d) The nature and scope of services available under the Oregon EI/ECSE program, including the TCM services, and the system of payments for services and other pertinent information.

(17) TCM HIV providers shall have the financial management capacity and system that provides documentation of services and costs and is able to generate quarterly service utilization reports that can be used to monitor services rendered against claims submitted and paid. The service utilization reporting requirements are as follows:

(a) Report on the number of unduplicated clients receiving services during the reporting period;

(b) Report on the number of full time equivalent (FTE) case managers providing services during the reporting period; and

(c) Report on the number of distinct case management activities performed during the reporting period (Triage Assessments, Comprehensive Assessments, Re-Assessments, Care Plan Development, Referral and Related Services, and Monitoring Follow-Up) along with the total number of 15-minute increments associated with each activity category.

(18) TCM HIV case managers shall possess the following education and qualifications:

(a) A current active Oregon registered nurse (RN) license or Bachelor of Social Work, or other related health or human services degree from an accredited college or university; and

(b) Documented evidence of completing the Authority's HIV Care and Treatment designated HIV Targeted Case Manager training and shall participate in the Authority's on-going training for HIV targeted case managers. The training may either be provided by the Authority or be approved by the Authority and provided by the TCM provider organization.

(19) The TCM Substance Abusing Pregnant Women and Substance Abusing Parents with Children Under Age 18 case manager shall:

(a) Possess a combination of education and experience necessary to support case planning and monitoring. The case manager shall be able to demonstrate an understanding of issues relating to substance abuse and community supports;

(b) Demonstrate continuous sobriety under a nonresidential or independent living condition for the immediate past two years;

(c) Meet at least one of the following qualifications:

(A) Be a licensed Medical Provider, Qualified Mental Health Professional, or Qualified Mental Health Associate; or

(B) Possess certification as an Alcohol and Drug Counselor (CADC) level I, II, or III; or

(C) Complete a Peer Services Training Program following a curriculum approved by the Authority's Addictions and Mental Health Division and be:

(i) A self-identified person currently or formerly receiving mental health services; or

(ii) A self-identified person in recovery from a substance use disorder who meets the abstinence requirements for recovering staff in alcohol and other drug treatment programs; or

(iii) A family member of an individual who is a current or former recipient of addictions or mental health services;

(d) Work under the supervision of a clinical supervisor. The clinical supervisor shall:

(A) Meet the requirements in Oregon administrative rule for alcohol and other drug treatment programs;

(B) Be certified or licensed by a health or allied provider agency to provide addiction treatment; and

(C) Possess one of the following qualifications:

(i) Five years of paid full-time experience in the field of alcohol and other drug counseling; or

(ii) A Bachelor's degree and four years of paid full-time experience in the social services field with a minimum of two years of direct alcohol and other drug counseling experience; or

(iii) A Master's degree and three years of paid full-time experience in the social services field with a minimum of two years of direct alcohol and other drug counseling experience;

(e) Satisfy continuing education requirements as specified by the agency providing clinical supervision specific to alcohol and other drug treatment; and

(f) Work in compliance with Medicaid policies, procedures, and protocols.

(20) A Federally Recognized Tribal Governments TCM provider shall be an organization certified as meeting the following criteria:

(a) A minimum of three years' experience of successful work with Native American children, families, and elders involving a demonstrated capacity to provide all core elements of tribal case management including: assessment, case planning, case plan implementation, case plan coordination, and case plan reassessment;

(b) A minimum of three years case management experience in coordinating and linking community medical, social, educational, or other resources as required by the target population;

(c) Administrative capacity to ensure quality of services in accordance with tribal, state, and federal requirements; and

(d) Evidence that the TCM organization is a federally recognized tribe located in the State of Oregon.

(21) The following are qualifications of Tribal Case Managers within provider organizations:

(a) Completion of training in a case management curriculum;

(b) Basic knowledge of behavior management techniques, family dynamics, child development, family counseling techniques, emotional and behavioral disorders, and issues around aging;

(c) Skill in interviewing to gather data and complete needs assessment in preparation of narratives/reports, in development of service plans, and in individual and group communication;

(d) Ability to learn and work with state, federal and tribal rules, laws and guidelines relating to Native American child, adult, and elder welfare and to gain knowledge about community resources and link tribal members with those resources;

(e) Knowledge and understanding of these rules and the applicable Medicaid State Plan Amendment.

Stat. Auth.: ORS 413.042 & 414.065

Stats. Implemented: ORS 414.065

Hist.: HR 20-1992, f. & cert. ef. 7-1-92; HR 37-1994, f. 12-30-94, cert. ef. 1-1-95; OMAP 50-2004, f. 9-9-04, cert. ef. 10-1-04; DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 76-2016, f. 12-29-16, cert. ef. 1-1-17; DMAP 2-2017(Temp), f. & cert. ef. 1-13-17 thru 7-11-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

410-138-0080

Targeted Case Management Program Billing Policy

(1) Reimbursement is based on cost-based rate methodology and subject to all rules and laws pertaining to federal financial participation. The Authority's acceptance of cost data provided by provider organizations for the purpose of establishing rates paid for TCM services does not imply or validate the accuracy of the cost data provided.

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(2) The cost-based rate shall be derived by considering the following expenditures directly attributable to TCM staff:

- (a) TCM staff salaries and other personnel expenses;
- (b) Supervisory salaries and other personnel expenses;
- (c) Administrative support salaries and other personnel expenses;
- (d) Services and supply expenses;
- (e) Various overhead expenditures, if not already considered in the indirect rate.

(3) The Division shall accept a claim up to 12 months from the date of service. See provider rules OAR 943-120-0340 (Claim and PHP Encounter Submission) and OAR 410-120-1300 (Timely Submission of Claims).

(4) Providers shall only bill for allowable activities in the TCM programs that assist individuals eligible under the Medicaid State Plan to gain access to needed medical, social, educational, housing, environmental, and other services.

(5) The Division may not allow duplicate payments to other public agencies or private entities under other program authorities for TCM services under the eligible client's care plan. Medical services shall be provided and billed separately from case management services. The Authority shall recover duplicate payments.

(6) The Division may not reimburse for TCM services if the services are case management services funded by Title IV-E or Title XX of the Social Security Act, federal or state funded parole and probation, or juvenile justice programs. These services shall be billed separately.

(7) In general, the Medicaid program is the payer of last resort, and a provider is required to bill other resources before submitting the claim to Medicaid. This requirement means that other payment sources, including other federal or state funding sources, shall be used before the Authority may be billed for covered TCM services. However, the following exceptions apply to the requirement to pursue third party resources:

(a) TCM Early Intervention/Early Childhood School Education (EI/ECSE) services are provided under the Individuals with Disabilities Education Act (IDEA), 1903(c) of the Social Security Act and 34 CFR 300.154 Methods of Ensuring Services wherein Medicaid and the Children's Health Insurance Program (CHIP) are the primary payers before the Oregon Department of Education (ODE) or the Educational Agency (EA) for a covered TCM EI/ECSE service provided to a Medicaid-eligible child receiving Service Coordination/Case Management pursuant to the Medicaid-eligible child's Individualized Family Service Plan (IFSP). The services are documented as required under the TCM rules and subject to the applicable reimbursement rate;

(b) If TCM EI/ECSE services are provided under Title V of the Social Security Act Maternal and Child Health Services Block Grant, Medicaid-covered TCM services provided by a Title V grantee are paid by Medicaid before the Title V funds;

(c) CMS recognizes that while public education agencies are required to provide IDEA services at no cost to eligible children, Medicaid reimbursement is available for these services because section 1903(c) of the Social Security Act requires Medicaid to be primary to the U.S. Department of Education for payment of covered services that may also be considered special education, related services, or early intervention services, or services provided under IDEA.

- (8) Any place of service is valid.
- (9) Prior authorization is not required.

Stat. Auth.: ORS 413.042 & 414.065
Stats. Implemented: ORS 414.065

Hist.: HR 20-1992, f. & cert. ef. 7-1-92; HR 37-1994, f. 12-30-94, cert. ef. 1-1-95; OMAP 61-2004, f. 9-10-04, cert. ef. 10-1-04; DMAP 28-2008(Temp), f. 6-30-08, cert. ef. 7-1-08 thru 12-28-08; DMAP 32-2008(Temp), f. & cert. ef. 10-2-08 thru 3-27-09; DMAP 43-2008, f. 12-17-08, cert. ef. 12-28-08; DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 76-2016, f. 12-29-16, cert. ef. 1-1-17; DMAP 2-2017(Temp), f. & cert. ef. 1-13-17 thru 7-11-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

410-138-0390

Targeted Case Management Retroactive Payments

(1) Providers may submit claims retroactively for services provided to the targeted populations described in OAR 410-138-0020(2)(a)-(f) if the claims meet the following criteria:

(a) Services were provided less than 12 months prior to the date of first claim submission and were provided on or after the date indicated in the rule listed above and were allowable services in accordance with OAR 410-138-0007;

(b) The maximum number of units billed does not exceed the maximum allowed under each TCM program.

(c) The case manager was appropriately licensed or certified and met all current requirements for case managers at the time the service was provided, as described in the provider requirements rule OAR 410-138-0060 appropriate for the TCM program;

(d) Documentation regarding provider qualifications and the services that the provider retroactively claims shall have been available at the time the services were performed.

(2) The Division may not allow duplicate payments to be made to the same or different providers for the same service for the same client, nor will payment be allowed for services for which third parties are liable to pay (see also OAR 410-138-0005).

(3) Reimbursement is subject to all rules and laws pertaining to federal financial participation.

Stat. Auth.: ORS 413.042 & 414.065
Stats. Implemented: ORS 414.065

Hist.: DMAP 34-2009(Temp), f. & cert. ef. 11-16-09 thru 5-1-10; DMAP 43-2009, f. 12-15-09, cert. ef. 1-1-10; DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 48-2012(Temp), f. & cert. ef. 10-31-12 thru 4-28-13; DMAP 21-2013, f. & cert. ef. 4-26-13; DMAP 76-2016, f. 12-29-16, cert. ef. 1-1-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

410-138-0420

Targeted Case Management Asthma/Healthy Home — Risk Criteria

(1) This administrative rule will be implemented contingent on CMS approval for the TCM Asthma/Healthy Home Program. This rule is to be used in conjunction with the Division's General Rules (chapter 410, division 120) and other Targeted Case Management Program rules OAR 410-138-0000 through 410-138-0009.

(2) The target group is Medicaid eligible children with poorly controlled asthma or a history of environmentally induced respiratory distress, which can result in a life threatening asthma exacerbation or exacerbation of respiratory distress.

(3) Risk factors for the target group could include, but are not limited to:

- (a) Unscheduled visits for emergency or urgent care;
- (b) One or more in-patient stays;
- (c) History of intubation or Intensive Care Unit care;
- (d) A medication ratio of control medications to rescue medications of less than or equal to .33 indicating less than desirable control of asthma;
- (e) Environmental or psychosocial concerns raised by medical home;
- (f) School day loss greater than two school days per year;
- (g) Inability to participate in sports or other activities due to asthma;
- (h) Homelessness;
- (i) Inadequate housing, heating, or sanitation.

Stat. Auth.: ORS 413.042 & 414.065
Stats. Implemented: ORS 414.065

Hist.: DMAP 22-2010, f. 6-30-10, cert. ef. 7-1-10; DMAP 41-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 76-2016, f. 12-29-16, cert. ef. 1-1-17; DMAP 2-2017(Temp), f. & cert. ef. 1-13-17 thru 7-11-17; DMAP 4-2017(Temp), f. 2-2-17, cert. ef. 2-10-17 thru 7-11-17; DMAP 9-2017, f. 3-31-17, cert. ef. 4-1-17

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Rule Caption: Amending Prior Authorization Approval Criteria Guide

Adm. Order No.: DMAP 10-2017(Temp)

Filed with Sec. of State: 3-31-2017

Certified to be Effective: 4-1-17 thru 6-29-17

Notice Publication Date:

Rules Amended: 410-121-0040

Subject: The Pharmaceutical Services program administrative rules (division 121) govern Division payments for services provided to certain clients. The Authority needs to amend this rule to update the Oregon Medicaid Fee-for-Service Prior Authorization Criteria Guide found at <http://www.oregon.gov/oha/healthplan/Pages/pharmacy-policy.aspx> based on the P&T (Pharmacy and Therapeutic) Committee recommendations.

Rules Coordinator: Sandy Cafourek — (503) 945-6430

410-121-0040

Prior Authorization Required for Drugs and Products

(1) Prescribing practitioners shall obtain prior authorization (PA) for the drugs and categories of drugs requiring PA in this rule, using the procedures set forth in OAR 410-121-0060.

(2) All drugs and categories of drugs including, but not limited to, those drugs and categories of drugs that require PA shall meet the following requirements for coverage:

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(a) Each drug shall be prescribed for conditions funded by the Oregon Health Plan (OHP) in a manner consistent with the Health Evidence Review Commission (HERC) Prioritized List of Health Services (OAR 410-141-0480 through 410-141-0520). If the medication is for a non-covered diagnosis, the medication may not be covered unless there is a co-morbid condition for which coverage would be allowed. The use of the medication shall meet corresponding treatment guidelines and be included within the client's benefit package of covered services and not otherwise excluded or limited;

(b) Each drug shall also meet other criteria applicable to the drug or category of drug in these pharmacy provider rules, including PA requirements imposed in this rule.

(3) The Authority may require PA for individual drugs and categories of drugs to ensure that the drugs prescribed are indicated for conditions funded by OHP and consistent with the Prioritized List of Health Services and its corresponding treatment guidelines (see OAR 410-141-0480). The drugs and categories of drugs that the Authority requires PA for this purpose are found in the Oregon Medicaid Fee-for-Service Prior Authorization Approval Criteria (PA Criteria guide) dated March 23, 2017, adopted and incorporated by reference and found at: <http://www.oregon.gov/OHA/healthplan/pages/pharmacy-policy.aspx>

(4) The Authority may require PA for individual drugs and categories of drugs to ensure medically appropriate use or to address potential client safety risk associated with the particular drug or category of drug, as recommended by the Pharmacy & Therapeutics Committee (P&T) and adopted by the Authority in this rule. The drugs and categories of drugs for which the Authority requires PA for this purpose are found in the Pharmacy PA Criteria Guide.

(5) New drugs shall be evaluated when added to the weekly upload of the First Databank drug file:

(a) If the new drug is in a class where current PA criteria apply, all associated PA criteria shall be required at the time of the drug file load;

(b) If the new drug is indicated for a condition below the funding line on the Prioritized List of Health Services, PA shall be required to ensure that the drug is prescribed for a condition funded by OHP;

(c) PA criteria for all new drugs shall be reviewed by the DUR/P&T Committee.

(6) PA shall be obtained for brand name drugs that have two or more generically equivalent products available and that are not determined Narrow Therapeutic Index drugs by the DUR/P&T Committee:

(a) Immunosuppressant drugs used in connection with an organ transplant shall be evaluated for narrow therapeutic index within 180 days after United States patent expiration;

(b) Manufacturers of immunosuppressant drugs used in connection with an organ transplant shall notify the Authority of patent expiration within 30 days of patent expiration for section (5)(a) to apply;

(c) Criteria for approval are:

(A) If criteria established in section (3) or (4) of this rule applies, follow that criteria;

(B) If section (6)(A) does not apply, the prescribing practitioner shall document that the use of the generically equivalent drug is medically contraindicated and provide evidence that either the drug has been used and has failed or that its use is contraindicated based on evidence-based peer reviewed literature that is appropriate to the client's medical condition.

(7) PA shall be obtained for non-preferred Preferred Drug List (PDL) products in a class evaluated for the PDL except in the following cases:

(a) The drug is a mental health drug as defined in OAR 410-121-0000;

(b) The original prescription is written prior to 1/1/10;

(c) The prescription is a refill for the treatment of seizures, cancer, HIV, or AIDS; or

(d) The prescription is a refill of an immunosuppressant.

(8) PA may not be required:

(a) When the prescription ingredient cost plus the dispensing fee is less than the PA processing fees as determined by the Authority;

(b) For over-the-counter (OTC) covered drugs when prescribed for conditions covered under OHP; or

(c) If a drug is in a class not evaluated from the Practitioner-Managed Prescription Drug Plan under ORS 414.334.

Stat. Auth.: ORS 413.032, 413.042, 414.065, 414.330 to 414.414, 414.312 & 414.316

Stats. Implemented: 414.065, 414.334, 414.361, 414.371, 414.353 & 414.354

Hist.: AFS 56-1989, f. 9-28-89, cert. ef. 10-1-89; AFS 2-1990, f. & cert. ef. 1-16-90; HR 29-1990, f. 8-31-90, cert. ef. 9-1-90, Renumbered from 461-016-0170; HR 10-1991, f. & cert. ef. 2-19-91; HR 14-1993, f. & cert. ef. 7-2-93; HR 25-1994, f. & cert. ef. 7-1-94; HR 6-1995, f. 3-31-95, cert. ef. 4-1-95; HR 18-1996(Temp), f. & cert. ef. 10-1-96; HR 8-1997, f. 3-13-97, cert. ef. 3-15-97; OMAP 1-1999, f. & cert. ef. 2-1-99; OMAP 29-2000, f. 9-29-00, cert. ef. 10-1-00; OMAP 31-2001, f. 9-24-01, cert. ef. 10-1-01; OMAP 44-2002, f. & cert. ef. 10-1-02; OMAP 66-2002, f. 10-31-02, cert. ef. 11-1-02; OMAP 29-2003, f. 3-31-03, cert. ef. 4-

1-03; OMAP 40-2003, f. 5-27-03, cert. ef. 6-1-03; OMAP 43-2003(Temp), f. 6-10-03, cert. ef. 7-1-03 thru 12-15-03; OMAP 49-2003, f. 7-31-03, cert. ef. 8-1-03; OMAP 84-2003, f. 11-25-03, cert. ef. 12-1-03; OMAP 87-2003(Temp), f. & cert. ef. 12-15-03 thru 5-15-04; OMAP 9-2004, f. 2-27-04, cert. ef. 3-1-04; OMAP 71-2004, f. 9-15-04, cert. ef. 10-1-04; OMAP 74-2004, f. 9-23-04, cert. ef. 10-1-04; OMAP 89-2004, f. 11-24-04, cert. ef. 12-1-04; OMAP 4-2006(Temp), f. & cert. ef. 3-15-06 thru 9-7-06; OMAP 32-2006, f. 8-31-06, cert. ef. 9-1-06; OMAP 41-2006, f. 12-15-06, cert. ef. 1-1-07; DMAP 4-2007, f. 6-14-07, cert. ef. 7-1-07; DMAP 26-2007, f. 12-11-07, cert. ef. 1-1-08; DMAP 9-2008, f. 3-31-08, cert. ef. 4-1-08; DMAP 16-2008, f. 6-13-08, cert. ef. 7-1-08; DMAP 34-2008, f. 11-26-08, cert. ef. 12-1-08; DMAP 14-2009, f. 6-12-09, cert. ef. 7-1-09; DMAP 39-2009, f. 12-15-09, cert. ef. 1-1-10; DMAP 17-2010, f. 6-15-10, cert. ef. 7-1-10; DMAP 40-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 27-2011(Temp), f. & cert. ef. 9-30-11 thru 3-15-12; DMAP 44-2011, f. 12-21-11, cert. ef. 1-1-12; DMAP 12-2012(Temp), f. & cert. ef. 3-16-12 thru 9-11-12; DMAP 18-2012, f. 3-30-12, cert. ef. 4-9-12; DMAP 23-2012(Temp), f. & cert. ef. 4-20-12 thru 10-15-12; DMAP 27-2012(Temp), f. & cert. ef. 5-14-12 thru 10-15-12; DMAP 29-2012, f. & cert. ef. 6-21-12; DMAP 33-2012(Temp), f. 7-18-12, cert. ef. 7-23-12 thru 1-18-13; DMAP 40-2012(Temp), f. & cert. ef. 8-20-12 thru 1-18-13; DMAP 44-2012(Temp), f. & cert. ef. 9-26-12 thru 1-18-13; DMAP 61-2012, f. 12-27-12, cert. ef. 1-1-13; DMAP 6-2013(Temp), f. & cert. ef. 2-21-13 thru 8-19-13; DMAP 23-2013(Temp), f. 4-30-13, cert. ef. 5-1-13 thru 8-19-13; Administrative correction, 7-18-13; DMAP 43-2013, f. & cert. ef. 8-16-13; DMAP 76-2013(Temp), f. 12-31-13, cert. ef. 1-1-14 thru 6-30-14; DMAP 14-2014(Temp), f. & cert. ef. 3-21-14 thru 9-17-14; DMAP 27-2014(Temp), f. & cert. ef. 5-2-14 thru 6-30-14; DMAP 38-2014, f. & cert. ef. 6-30-14; DMAP 46-2014(Temp), f. & cert. ef. 7-15-14 thru 1-11-15; DMAP 49-2014(Temp), f. & cert. ef. 8-13-14 thru 1-11-15; DMAP 62-2014(Temp), f. 10-13-14, cert. ef. 10-14-14 thru 1-11-15; DMAP 75-2014, f. & cert. ef. 12-12-14; DMAP 76-2014(Temp), f. & cert. ef. 12-12-14 thru 6-7-15; DMAP 89-2014(Temp), f. 12-31-14, cert. ef. 1-1-15 thru 6-26-15; DMAP 4-2015(Temp), f. & cert. ef. 2-3-15 thru 6-26-15; DMAP 25-2015(Temp), f. 4-17-15, cert. ef. 4-18-15 thru 6-26-15; DMAP 34-2015, f. 6-25-15, cert. ef. 6-26-15; DMAP 36-2015(Temp), f. 6-26-15, cert. ef. 7-1-15 thru 12-27-15; DMAP 41-2015(Temp), f. & cert. ef. 8-7-15 thru 2-2-16; DMAP 44-2015(Temp), f. 8-21-15, cert. ef. 8-25-15 thru 12-27-15; DMAP 58-2015(Temp), f. & cert. ef. 10-9-15 thru 12-27-15; DMAP 80-2015, f. 12-23-15, cert. ef. 12-27-15; DMAP 83-2015(Temp), f. 12-23-15, cert. ef. 1-1-16 thru 6-28-16; DMAP 6-2016(Temp), f. 2-11-16, cert. ef. 2-12-16 thru 6-28-16; DMAP 19-2016(Temp), f. 4-28-16, cert. ef. 5-1-16 thru 6-28-16; DMAP 26-2016, f. 6-24-16, cert. ef. 6-28-16; DMAP 35-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; DMAP 54-2016(Temp), f. & cert. ef. 8-26-16 thru 12-27-16; DMAP 62-2016(Temp), f. & cert. ef. 10-13-16 thru 12-27-16; DMAP 68-2016, f. & cert. ef. 12-1-16; DMAP 79-2016(Temp), f. 12-29-16, cert. ef. 1-1-17 thru 6-29-17; DMAP 5-2017(Temp), f. & cert. ef. 2-21-17 thru 6-29-17; DMAP 10-2017(Temp), f. 3-31-17, cert. ef. 4-1-17 thru 6-29-17

Rule Caption: Amending Prior Authorization Approval Criteria Guide

Adm. Order No.: DMAP 11-2017(Temp)

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Rules Amended: 410-121-0040

Rules Suspended: 410-121-0040(T)

Subject: The Pharmaceutical Services program administrative rules (division 121) govern Division payments for services provided to certain clients. The Authority needs to amend this rule to update the Oregon Medicaid Fee-for-Service Prior Authorization Criteria Guide found at <http://www.oregon.gov/oha/healthplan/Pages/pharmacy-policy.aspx> based on the P&T (Pharmacy and Therapeutic) Committee recommendations.

Rules Coordinator: Sandy Cafourek—(503) 945-6430

410-121-0040

Prior Authorization Required for Drugs and Products

(1) Prescribing practitioners shall obtain prior authorization (PA) for the drugs and categories of drugs requiring PA in this rule, using the procedures set forth in OAR 410-121-0060.

(2) All drugs and categories of drugs including, but not limited to, those drugs and categories of drugs that require PA shall meet the following requirements for coverage:

(a) Each drug shall be prescribed for conditions funded by the Oregon Health Plan (OHP) in a manner consistent with the Health Evidence Review Commission (HERC) Prioritized List of Health Services (OAR 410-141-0480 through 410-141-0520). If the medication is for a non-covered condition for which coverage would be allowed. The use of the medication shall meet corresponding treatment guidelines and be included within the client's benefit package of covered services and not otherwise excluded or limited;

(b) Each drug shall also meet other criteria applicable to the drug or category of drug in these pharmacy provider rules, including PA requirements imposed in this rule.

(3) The Authority may require PA for individual drugs and categories of drugs to ensure that the drugs prescribed are indicated for conditions funded by OHP and consistent with the Prioritized List of Health Services and its corresponding treatment guidelines (see OAR 410-141-0480). The drugs and categories of drugs that the Authority requires PA for this purpose

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are found in the Oregon Medicaid Fee-for-Service Prior Authorization Approval Criteria (PA Criteria guide) dated June 1, 2017, adopted and incorporated by reference and found at: <http://www.oregon.gov/OHA/healthplan/pages/pharmacy-policy.aspx>

(4) The Authority may require PA for individual drugs and categories of drugs to ensure medically appropriate use or to address potential client safety risk associated with the particular drug or category of drug, as recommended by the Pharmacy & Therapeutics Committee (P&T) and adopted by the Authority in this rule. The drugs and categories of drugs for which the Authority requires PA for this purpose are found in the Pharmacy PA Criteria Guide.

(5) New drugs shall be evaluated when added to the weekly upload of the First Databank drug file:

(a) If the new drug is in a class where current PA criteria apply, all associated PA criteria shall be required at the time of the drug file load;

(b) If the new drug is indicated for a condition below the funding line on the Prioritized List of Health Services, PA shall be required to ensure that the drug is prescribed for a condition funded by OHP;

(c) PA criteria for all new drugs shall be reviewed by the DUR/P&T Committee.

(6) PA shall be obtained for brand name drugs that have two or more generically equivalent products available and that are not determined Narrow Therapeutic Index drugs by the DUR/P&T Committee:

(a) Immunosuppressant drugs used in connection with an organ transplant shall be evaluated for narrow therapeutic index within 180 days after United States patent expiration;

(b) Manufacturers of immunosuppressant drugs used in connection with an organ transplant shall notify the Authority of patent expiration within 30 days of patent expiration for section (5)(a) to apply;

(c) Criteria for approval are:

(A) If criteria established in section (3) or (4) of this rule applies, follow that criteria;

(B) If section (6)(A) does not apply, the prescribing practitioner shall document that the use of the generically equivalent drug is medically contraindicated and provide evidence that either the drug has been used and has failed or that its use is contraindicated based on evidence-based peer reviewed literature that is appropriate to the client's medical condition.

(7) PA shall be obtained for non-preferred Preferred Drug List (PDL) products in a class evaluated for the PDL except in the following cases:

(a) The drug is a mental health drug as defined in OAR 410-121-0000;

(b) The original prescription is written prior to 1/1/10;

(c) The prescription is a refill for the treatment of seizures, cancer, HIV, or AIDS; or

(d) The prescription is a refill of an immunosuppressant.

(8) PA may not be required:

(a) When the prescription ingredient cost plus the dispensing fee is less than the PA processing fees as determined by the Authority;

(b) For over-the-counter (OTC) covered drugs when prescribed for conditions covered under OHP; or

(c) If a drug is in a class not evaluated from the Practitioner-Managed Prescription Drug Plan under ORS 414.334.

Stat. Auth.: ORS 413.032, 413.042, 414.065, 414.330 to 414.414, 414.312 & 414.316

Stats. Implemented: 414.065, 414.334, 414.361, 414.371, 414.353 & 414.354

Hist.: AFS 56-1989, f. 9-28-89, cert. ef. 10-1-89; AFS 2-1990, f. & cert. ef. 1-16-90; HR 29-1990, f. 8-31-90, cert. ef. 9-1-90, Renumbered from 461-016-0170; HR 10-1991, f. & cert. ef. 2-19-91; HR 14-1993, f. & cert. ef. 7-2-93; HR 25-1994, f. & cert. ef. 7-1-94; HR 6-1995, f. 3-31-95, cert. ef. 4-1-95; HR 18-1996(Temp), f. & cert. ef. 10-1-96; HR 8-1997, f. 3-13-97, cert. ef. 3-15-97; OMAP 1-1999, f. & cert. ef. 2-1-99; OMAP 29-2000, f. 9-29-00, cert. ef. 10-1-00; OMAP 31-2001, f. 9-24-01, cert. ef. 10-1-01; OMAP 44-2002, f. & cert. ef. 10-1-02; OMAP 66-2002, f. 10-31-02, cert. ef. 11-1-02; OMAP 29-2003, f. 3-31-03 cert. ef. 4-1-03; OMAP 40-2003, f. 5-27-03, cert. ef. 6-1-03; OMAP 43-2003(Temp), f. 6-10-03, cert. ef. 7-1-03 thru 12-15-03; OMAP 49-2003, f. 7-31-03 cert. ef. 8-1-03; OMAP 84-2003, f. 11-25-03 cert. ef. 12-1-03; OMAP 87-2003(Temp), f. & cert. ef. 12-15-03 thru 5-15-04; OMAP 9-2004, f. 2-27-04, cert. ef. 3-1-04; OMAP 71-2004, f. 9-15-04, cert. ef. 10-1-04; OMAP 74-2004, f. 9-23-04, cert. ef. 10-1-04; OMAP 89-2004, f. 11-24-04 cert. ef. 12-1-04; OMAP 4-2006(Temp), f. & cert. ef. 3-15-06 thru 9-7-06; OMAP 32-2006, f. 8-31-06, cert. ef. 9-1-06; OMAP 41-2006, f. 12-15-06, cert. ef. 1-1-07; DMAP 4-2007, f. 6-14-07, cert. ef. 7-1-07; DMAP 26-2007, f. 12-11-07, cert. ef. 1-1-08; DMAP 9-2008, f. 3-31-08, cert. ef. 4-1-08; DMAP 16-2008, f. 6-13-08, cert. ef. 7-1-08; DMAP 34-2008, f. 11-26-08, cert. ef. 12-1-08; DMAP 14-2009 f. 6-12-09, cert. ef. 7-1-09; DMAP 39-2009, f. 12-15-09, cert. ef. 1-1-10; DMAP 17-2010, f. 6-15-10, cert. ef. 7-1-10; DMAP 40-2010, f. 12-28-10, cert. ef. 1-1-11; DMAP 27-2011(Temp), f. & cert. ef. 9-30-11 thru 3-15-12; DMAP 44-2011, f. 12-21-11, cert. ef. 1-1-12; DMAP 12-2012(Temp), f. & cert. ef. 3-16-12 thru 9-11-12; DMAP 18-2012, f. 3-30-12, cert. ef. 4-9-12; DMAP 23-2012(Temp), f. & cert. ef. 4-20-12 thru 10-15-12; DMAP 27-2012(Temp), f. & cert. ef. 5-14-12 thru 10-15-12; DMAP 29-2012, f. & cert. ef. 6-21-12; DMAP 33-2012(Temp), f. 7-18-12, cert. ef. 7-23-12 thru 1-18-13; DMAP 40-2012(Temp), f. & cert. ef. 8-20-12 thru 1-18-13; DMAP 44-2012(Temp), f. & cert. ef. 9-26-12 thru 1-18-13; DMAP 61-2012, f. 12-27-12, cert. ef. 1-1-13; DMAP 6-2013(Temp), f. & cert. ef. 2-21-13 thru 8-19-13; DMAP 23-2013(Temp), f. 4-30-13, cert. ef. 5-1-13 thru 8-19-13; Administrative correction, 7-18-13; DMAP 43-2013, f. & cert. ef. 8-16-13; DMAP 76-2013(Temp), f. 12-31-13, cert. ef. 1-1-14 thru 6-30-14; DMAP 14-2014(Temp), f. & cert. ef.

3-21-14 thru 9-17-14; DMAP 27-2014(Temp), f. & cert. ef. 5-2-14 thru 6-30-14; DMAP 38-2014, f. & cert. ef. 6-30-14; DMAP 46-2014(Temp), f. & cert. ef. 7-15-14 thru 1-11-15; DMAP 49-2014(Temp), f. & cert. ef. 8-13-14 thru 1-11-15; DMAP 62-2014(Temp), f. 10-13-14, cert. ef. 10-14-14 thru 1-11-15; DMAP 75-2014, f. & cert. ef. 12-12-14; DMAP 76-2014(Temp), f. & cert. ef. 12-12-14 thru 6-7-15; DMAP 89-2014(Temp), f. 12-31-14, cert. ef. 1-1-15 thru 6-26-15; DMAP 4-2015(Temp), f. & cert. ef. 2-3-15 thru 6-26-15; DMAP 25-2015(Temp), f. 4-17-15, cert. ef. 4-18-15 thru 6-26-15; DMAP 34-2015, f. 6-25-15, cert. ef. 6-26-15; DMAP 36-2015(Temp), f. 6-26-15, cert. ef. 7-1-15 thru 12-27-15; DMAP 41-2015(Temp), f. & cert. ef. 8-7-15 thru 2-2-16; DMAP 44-2015(Temp), f. 8-21-15, cert. ef. 8-25-15 thru 12-27-15; DMAP 58-2015(Temp), f. & cert. ef. 10-9-15 thru 12-27-15; DMAP 80-2015, f. 12-23-15, cert. ef. 12-27-15; DMAP 83-2015(Temp), f. 12-23-15, cert. ef. 1-1-16 thru 6-28-16; DMAP 6-2016(Temp), f. 2-11-16, cert. ef. 2-12-16 thru 6-28-16; DMAP 19-2016(Temp), f. 4-28-16, cert. ef. 5-1-16 thru 6-28-16; DMAP 26-2016, f. 6-24-16, cert. ef. 6-28-16; DMAP 35-2016(Temp), f. 6-30-16, cert. ef. 7-1-16 thru 12-27-16; DMAP 54-2016(Temp), f. & cert. ef. 8-26-16 thru 12-27-16; DMAP 62-2016(Temp), f. & cert. ef. 10-13-16 thru 12-27-16; DMAP 68-2016, f. & cert. ef. 12-1-16; DMAP 79-2016(Temp), f. 12-29-16, cert. ef. 1-1-17 thru 6-29-17; DMAP 5-2017(Temp), f. & cert. ef. 2-21-17 thru 6-29-17; DMAP 10-2017(Temp), f. 3-31-17, cert. ef. 4-1-17 thru 6-29-17; DMAP 11-2017(Temp) f. 3-31-17, cert. ef. 6-1-17 thru 6-29-17

Rule Caption: Aligning ABA Rules with Licensing, HERC, and Mental Health Parity Regulations

Adm. Order No.: DMAP 12-2017

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Rules Amended: 410-172-0650, 410-172-0760, 410-172-0770

Rules Repealed: 410-172-0650(T), 410-172-0760(T), 410-172-0770(T)

Subject: These rules are needed to inform the prior authorization process for Applied Behavior Analysis services by ensuring that high quality diagnoses that are aligned with national practice standards are performed by trained and experienced providers that are accessible in all areas of the State and that prior authorization decisions are arrived at through the consideration of their medical appropriateness as well as the HERC guidelines.

Rules Coordinator: Sandy Cafourek — (503) 945-6430

410-172-0650

Prior Authorization

(1) Some services or items covered by the Division require authorization before the service may be provided. Services requiring prior authorization are published on the Medicaid Behavioral Health Services Fee Schedule.

(2) The Division shall authorize payment for the type of service or level of care that meets the recipient's medical need and that has been adequately documented.

(3) The Division shall only authorize services that are medically appropriate and for which the required documentation has been supplied. The Division may request additional information from the provider to determine medical appropriateness.

(4) Documentation submitted when requesting authorization shall support the medical justification for the service. The authorization request shall contain:

(a) A cover sheet detailing relevant provider and recipient Medicaid numbers;

(b) Requested dates of service;

(c) HCPCS or CPT Procedure code requested; and

(d) Amount of service or units requested;

(e) A behavioral health assessment and service plan meeting the requirements described in OAR 309-019-0135 through 0140; or

(f) Any additional supporting clinical information supporting medical justification for the services requested;

(g) For substance use disorder services (SUD), the Division uses the American Society of Addiction Medicine (ASAM) Patient Placement Criteria second edition-revised (PPC-2R) to determine the appropriate level of SUD treatment of care. Providers shall use the ASAM;

(h) For Applied Behavior Analysis (ABA) services, the Division requires submission of the following:

(A) ABA services for the treatment of autism spectrum disorder shall have an evaluation as described in OAR 410-172-0770(1)(a-j) and a referral for treatment as described in OAR 410-172-0760(1) from one of the licensed practitioners described in OAR 410-172-0760(1)(a-d) who are, in addition, experienced in the diagnosis of autism spectrum disorder;

(B) ABA services for the treatment of stereotyped movement disorder with self-injurious behavior due to neurodevelopmental disorder shall have an evaluation as described in OAR 410-172-0770(2) and a referral for treatment as described in OAR 410-172-0760(2) from a licensed practitioner,

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practicing within the scope of their license, who has experience or training in the diagnosis and treatment of stereotyped movement disorder with self-injurious behavior due to neurodevelopmental disorder;

(C) A treatment plan, including a functional behavior assessment, as needed, from a licensed health care professional as defined in ORS 676.802(2)(a–h), or by a behavior analyst or assistant behavior analyst licensed by the Oregon Behavior Analysis Regulatory Board, or by an individual holding a declaration of practice through the Oregon Behavior Analysis Regulatory Board as described in OAR 824-010-0005(10).

(i) Residential treatment services for children may require a letter of approval by a designated quality improvement organization (QIO);

(j) Some services require additional approval or authorization by a physician, the Authority, or designee. Services requiring additional approval are listed on the Behavioral Health Fee Schedule or described in this rule.

(5) The Division may not authorize services under the following circumstances:

(a) The request received by the Division was not complete;

(b) The provider did not hold the appropriate license, certificate, or credential at the time services were requested;

(c) The recipient was not eligible for Medicaid at the time services were requested;

(d) The provider cannot produce appropriate documentation to support medical appropriateness, or the appropriate documentation was not submitted to the Division;

(e) The services requested are not in compliance with OAR 410-120-1260 through 1860;

(f) Authorization for payment may be given for a past date of service if:

(A) On the date of service, the recipient was made retroactively eligible or was retroactively dis-enrolled from a CCO or PHP;

(B) The services provided meet all other criteria and Division or Authority administrative rules and;

(C) The request for authorization is received within 30 days of the date of service.

(6) Any requests for authorization after 30 days from date of service require documentation from the provider that authorization could not have been obtained within 30 days of the date of service.

(7) Payment authorization is valid for the time-period specified on the authorization notice but may not exceed 12 months unless the recipient's benefit package no longer covers the service, in which case the authorization shall terminate on the date coverage ends.

(8) Prior authorization of services shall be subject to periodic utilization review and retrospective review to ensure services meet the definition of medical appropriateness.

(9) Payments shall be made for the provision of active treatment services. If active treatment is not documented during any period in which the Division has prior authorized the services, the Division may limit or cancel prior authorization or recoup the payments.

(10) If providers fail to comply with requests for documents for purposes of verifying medical appropriateness within the specified time-frames, the Authority may deem the records non-existent and cancel prior authorization.

Stat. Auth.: ORS 413.042 & 430.640

Stats. Implemented: ORS 413.042, 414.025, 414.065, 430.640, 430.705, & 430.715

Hist.: DMAP 85-2014(Temp), f. 12-24-14, cert. ef. 1-1-15 thru 6-29-15; DMAP 32-2015, f. 6-24-15, cert. ef. 6-26-15; DMAP 60-2016(Temp), f. & cert. ef. 10-7-16 thru 4-4-17; DMAP 12-2017, f. & cert. ef. 4-4-17

410-172-0760

Applied Behavior Analysis

(1) Applied Behavior Analysis (ABA) services for the treatment of autism spectrum disorder shall be recommended by a licensed practitioner who has experience in the diagnosis and treatment of autism spectrum disorder and holds at least one of the following educational degrees and valid license:

(a) Physician;

(b) Psychologist;

(c) Nurse practitioner specializing in developmental medicine, or;

(d) Physician's assistant specializing in developmental medicine.

(2) ABA services for the treatment of stereotyped movement disorder with self-injurious behavior due to neurodevelopmental disorder shall be recommended by a licensed practitioner, practicing within the scope of their license, who has experience or training in the diagnosis and treatment of stereotyped movement disorder with self-injurious behavior due to neurodevelopmental disorder.

(3) Providers of ABA services eligible for direct payment shall hold the following license, registration, or declaration of practice:

(a) Licensed Behavior Analyst as described in OAR 824-030-0010;

(b) Licensed health care professional as defined in 2015 Oregon Laws Chapter 674, section 1 who is registered with the Oregon Behavior Analyst Certification Board as described in ORS 676.802(2)(a–h);

(c) Individual holding a declaration of practice through the Oregon Behavior Analysis Regulatory Board as described in OAR 824-010-0005(10).

(4) The following ABA service providers are not eligible for direct payment:

(a) Assistant Behavior Analyst licensed by the Oregon Behavior Analysis Regulatory Board as described in OAR 824-030-0020;

(b) Behavior Analysis Interventionists registered by the Oregon Behavior Analysis Regulatory Board as described in OAR 824-030-0040.

(5) Initial and ongoing six month assessments of core skills by ABA licensed providers for the purpose of measuring progress achieved during ABA treatment must:

(a) Use standardized, validated and reliable assessment tools that allow for tracking an individual's progress over time;

(b) Result in a treatment plan with specific, observable, and quantifiable goals that are relatable to identified skills deficits.

(6) Initial and ongoing six month assessments of behavior that is considered to have an adverse impact on the individual's development or is harmful to the individual or to others must have treatment goals that are specific, observable, and quantifiable and must relate to identified behavioral concerns.

Stat. Auth.: ORS 413.042, 430.640

Stats. Implemented: ORS 413.042, 414.025, 414.065, 430.640, 430.705, 430.715

Hist.: DMAP 85-2014(Temp), f. 12-24-14, cert. ef. 1-1-15 thru 6-29-15; DMAP 32-2015, f. 6-24-15, cert. ef. 6-26-15; DMAP 60-2016(Temp), f. & cert. ef. 10-7-16 thru 4-4-17; DMAP 12-2017, f. & cert. ef. 4-4-17

410-172-0770

Individual Eligibility for Applied Behavioral Analysis Treatment

(1) Prior to receiving services, individuals receiving ABA services for the treatment of autism spectrum disorder (ASD) shall have an evaluation by a licensed practitioner, described in OAR 410-172-0760(1)(a–d), experienced in the diagnosis and treatment of autism using the current DSM criteria that includes:

(a) A diagnosis of an ASD listed on the ASD line of the Health Evidence Review Commission's (HERC) Prioritized List;

(b) Documentation of and results from a standardized, validated tool, such as the Autism Diagnostic Observation Schedule (ADOS), that has been used to substantiate the autism disorder;

(c) Documentation of individual core features of autism as identified through a review of ASD diagnostic criteria from the Diagnostic and Statistical Manual of Mental Disorders (DSM 5);

(d) Documentation that a parent or caregiver has been interviewed;

(e) Documentation that there was a review of relevant medical records;

(f) Documentation that the practitioner was able to observe the individual directly;

(g) Documentation of developmental status using validated assessments or a combination of such assessments, such as the Vineland. This information may be provided by a licensed ABA provider;

(h) Documentation of a comprehensive medical exam. A physical exam from the most recent well child care visit may be submitted if within one year for children aged 1-6, or within two years for children 6-18. The physical exam must be completed before starting ABA but may not be allowed to delay or interrupt ABA services;

(i) Documentation that an audiology or hearing test has been performed within one year for children aged 2 through 5, or within two years for children aged 6 through 18. The audiology or hearing test must be completed before starting ABA but may not be allowed to delay or interrupt ABA services;

(A) Newborn assessment is not sufficient after the age of 24 months;

(B) Hearing tests from primary care offices and schools are sufficient if there are no concerns regarding hearing;

(j) Any other documentation, if available, that would substantiate the diagnosis of autism or stereotyped movement disorder with self-injurious behavior due to neurodevelopmental disorder including but not limited to the following:

(A) Notes from well-child visits or other medical professionals;

(B) Results from any additional assessments including but not limited to IQ, achievement tests, speech and language tests, and assessments of adaptive functioning.

ADMINISTRATIVE RULES

(k) A referral for ABA treatment with or without specification of hours or intensity that shall include:

(A) A diagnosis of ASD or stereotyped movement disorder with self-injurious behavior due to neurodevelopmental disorder;

(B) A copy of the evaluation described in 410-172-0770(1);

(C) A referral for ABA treatment with or without specification of hours or intensity.

(2) Prior to receiving services, individuals receiving ABA for the treatment of stereotyped movement disorder with self-injurious behavior due to neurodevelopmental disorder shall have an evaluation by a licensed practitioner, practicing within their scope of practice, who has training or experience in the diagnosis and treatment of stereotyped movement disorder with self-injurious behavior due to neurodevelopmental disorder that includes results from a questionnaire or observations that have been used to substantiate the diagnosis.

(3) Prior authorization for intensive and less intensive interventions must be based on an individualized determination of medical appropriateness for each individual and relevant guideline notes from the HERC Prioritized List at the initiation and continuation of ABA services. Services in excess of the HERC Prioritized List coverage guidance or guideline notes shall be provided when medically appropriate for a particular individual, including individuals age 13 and older. Relevant factors to consider when making a prior authorization determination include but are not limited to the following:

(a) Severity;

(b) Depth and breadth of previous treatment;

(c) How recently the diagnosis has been made. For example, if the diagnosis has been made after the child turned 13, intensive treatment shall be considered;

(d) Comorbidities such as psychiatric disorders, developmental delays, and intellectual disability may make it harder to treat ASD and may require more intensity of treatment to be effective;

(e) Factors that would be contrary to the efficacy of ABA or increased intensity of ABA services.

Stat. Auth.: ORS 413.042, 430.640

Stats. Implemented: ORS 413.042, 414.025, 414.065, 430.640, 430.705, 430.715

Hist.: DMAP 85-2014(Temp), f. 12-24-14, cert. ef. 1-1-15 thru 6-29-15; DMAP 32-2015, f. 6-24-15, cert. ef. 6-26-15; DMAP 60-2016(Temp), f. & cert. ef. 10-7-16 thru 4-4-17; DMAP 12-2017, f. & cert. ef. 4-4-17

Oregon Health Authority, Oregon Educators Benefit Board Chapter 111

Rule Caption: Amendments to update benefit plan name changes and other housekeeping updates

Adm. Order No.: OEBB 1-2017

Filed with Sec. of State: 3-16-2017

Certified to be Effective: 3-16-17

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Rules Amended: 111-070-0001, 111-070-0005, 111-070-0015, 111-070-0020, 111-070-0040, 111-070-0050

Rules Repealed: 111-070-0001(T), 111-070-0005(T), 111-070-0015(T), 111-070-0020(T), 111-070-0040(T), 111-070-0050(T)

Subject: Amendments to update benefit plan name changes and other housekeeping updates.

Rules Coordinator: April Kelly—(503) 378-6588

111-070-0001

Definitions

For the purpose of this rule:

(1) “HB 2557 eligible member” means a part time faculty who is eligible for membership in the Public Employees Retirement System (PERS) by teaching or conducting research at a single institution of higher education or in aggregate at multiple public institutions of higher education during the prior year. “HB 2557 eligible member” does not mean or include a part time faculty member who has revoked PERS membership by opting to enroll in another employer retirement plan, or a part time faculty member who is eligible for benefits through the Public Employees’ Benefit Board (PEBB).

(2) “Eligible Dependent” means a Spouse, Domestic Partner or dependent child as defined in OAR 111-010-0015.

(3) “Overpayment” means the amount of a participating HB 2557 eligible member’s monthly payment to OEBB that exceeded the amount due.

(4) “PERS” means the Oregon Public Employees Retirement System.

(5) “Plan Year” means the coverage period, usually 12 months long that is used for administration of a health benefits plan.

(6) “Public institution of higher education” means an Oregon community college or a state institution of higher education listed in ORS 352.002.

(7) “Underpayment” means a payment submitted by a participating HB 2557 eligible member that is less than the invoiced amount.

(8) “ACH Debit” for purposes of this OAR refers to a payment through an Automated Clearing House (ACH) credit or debit that initiates the movement of funds electronically from the HB 2557 eligible member’s individual banking account within the United States to the OEBB Treasury account.

Stat. Auth.: ORS 243.864, 2009 OL Ch. 351 (HB 2557)

Stats. Implemented: 2009 OL Ch. 351 (HB 2557)

Hist.: OEBB 4-2010, f. & cert. ef. 3-15-10; OEBB 4-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 1-2017, f. & cert. ef. 3-16-17

111-070-0005

Plan Selections

(1) HB 2557 eligible members will use the tiered rate structure and may elect to enroll in the following medical plans:

(a) Kaiser Permanente Plan 3 (limited to OEBB members in the Kaiser service area),

(b) Moda Health Cedar Plan,

(c) Moda Health Dogwood Plan,

(d) Moda Health Evergreen Plan (limited to members who qualify for and contribute to a Health Savings Account (HSA)).

(2) If enrolling in a Moda Health medical plan, the HB 2557 eligible member may elect to enroll in the PPO option or the Synergy or Summit network plan option if the HB 2557 member lives or works in an area where the Synergy or Summit network is available.

Stat. Auth.: ORS 243.860 - 243.886

Stats. Implemented 243.864(1)(a)

Hist.: OEBB 4-2010, f. & cert. ef. 3-15-10; OEBB 7-2013(Temp), f. & cert. ef. 7-12-13 thru 1-7-14; OEBB 17-2013, f. & cert. ef. 10-23-13; OEBB 4-2014(Temp), f. & cert. ef. 7-31-14 thru 1-27-15; OEBB 5-2014, f. & cert. ef. 11-5-14; OEBB 4-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 1-2017, f. & cert. ef. 3-16-17

111-070-0015

Enrollment

(1) OEBB will directly provide HB 2557 eligible members notice of their eligibility, the open enrollment schedule and instructions for completing the required enrollment information prior to the beginning of the open enrollment period.

(2) HB 2557 eligible members and eligible dependents may enroll in a medical plan as specified in 111-070-0005 when one of the following occurs:

(a) During the annual open enrollment period (August 15 through September 25);

(A) Required enrollment information may be submitted by the member to the OEBB office prior to the beginning of the open enrollment period;

(B) All required enrollment information must be received by OEBB from the member by close of business on September 25;

(C) Required enrollment information not received from the member on or before the end of the open enrollment period will be considered a declination of coverage for the Plan Year;

(D) Coverage selected will be effective at the beginning of the new Plan Year (October 1) for HB 2557 eligible member and dependent(s) who have submitted the required enrollment information by the submission deadline; or

(b) Following confirmation that an individual not initially identified as eligible for benefits is eligible for benefits:

(A) All required enrollment information must be received from the member by OEBB by close of business on the date specified in the written eligibility notice sent to the HB 2557 eligible member. Failure to meet the due date will be considered a declination of coverage for the Plan Year;

(B) Coverage selected will be effective the first day of the month following eligibility confirmation and receipt of the required enrollment information.

Stat. Auth.: ORS 243.860 - 243.886

Stats. Implemented 243.864(1)(a)

Hist.: OEBB 4-2010, f. & cert. ef. 3-15-10; OEBB 7-2013(Temp), f. & cert. ef. 7-12-13 thru 1-7-14; OEBB 17-2013, f. & cert. ef. 10-23-13; OEBB 4-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 1-2017, f. & cert. ef. 3-16-17

ADMINISTRATIVE RULES

111-070-0020

Effective Date

(1) HB 2557 eligible members who are eligible for membership in PERS during a calendar year are eligible for medical benefits through OEBB for the following Plan Year.

(2) Eligibility will be determined annually within 30 days after the first quarter of the current calendar year.

Stat. Auth.: ORS 243.864, 2009 OL Ch. 351 (HB 2557)

Stats. Implemented: 2009 OL Ch. 351 (HB 2557)

Hist.: OEBB 4-2010, f. & cert. ef. 3-15-10; OEBB 4-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 1-2017, f. & cert. ef. 3-16-17

111-070-0040

Qualified Status Changes (QSCs)

(1) HB 2557 eligible members experiencing a change in family status the plan year, have 31 calendar days beginning on the date of the event to make changes. If the event is gaining a child, as defined by 111-070-0040(2)(c), or results in a loss of eligibility, the eligible member has 60 calendar days after the event to make changes.

(a) The member must report the Qualified Status Change (QSC) to OEBB within the specified timeframe. Failure to report a QSC that would result in a removal of a spouse, domestic partner or child within the timeframe stated in 111-070-0040(1) may be considered intentional misrepresentation by OEBB and OEBB may retroactively terminate the individuals coverage back to the last day of the month in which the individual lost eligibility. If benefits are to be terminated retroactively, OEBB shall give the affected individual 30 days' notice of the termination and an opportunity to appeal before the retroactive termination takes effect.

(b) The member's failure to report timely a QSC that allows the addition of a spouse, domestic partner, or child means that the individual does not have coverage. The next opportunity the HB 2557 eligible member has to add their spouse, domestic partner, or child will be during open enrollment.

(2) The HB 2557 eligible member can only make those changes that are consistent with the event for themselves and eligible dependent(s).

(3) Qualified Status Changes which allow the member to make changes to his or her coverage are:

(a) Gaining a spouse by marriage or domestic partner by meeting domestic partner eligibility;

(b) Loss of a spouse or domestic partner by divorce, annulment, death or termination of domestic partnership,

(c) Gaining a child by birth, placement for/or adoption, or Domestic Partner's children (by affidavit of domestic partnership), 60 days from the event;

(d) Event by which dependent child satisfies eligibility requirements under OEBB plans;

(e) Event by which dependent ceases to satisfy eligibility requirements under OEBB plans;

(f) Related laws or court orders. For example: Qualified Medical Child Support Order (QMSCO), Entitlement to Medicare or Medicaid, HIPAA or Children's Health Insurance Program (CHIP). Changes are determined by the applicable law or court order.

(4) Changes in cost or coverage do not constitute a Qualified Status Change. All changes resulting from a change in cost or coverage must be made during Open Enrollment.

Stat. Auth.: ORS 243.860 - 243.886

Stats. Implemented: ORS 243.864(1)(a)

Hist.: OEBB 4-2010, f. & cert. ef. 3-15-10; OEBB 14-2010(Temp), f. 9-30-10, cert. ef. 10-1-10 thru 1-29-11; OEBB 5-2011, f. & cert. ef. 2-11-11; OEBB 4-2014(Temp), f. & cert. ef. 7-31-14 thru 1-27-15; OEBB 5-2014, f. & cert. ef. 11-5-14; OEBB 4-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 1-2017, f. & cert. ef. 3-16-17

111-070-0050

Premium Payment

(1) HB 2557 Eligible Member Payment Methods and Due Dates:

(a) HB 2557 eligible members will submit payment to OEBB for benefits through Direct Payment via ACH (ACH Debit).

(b) OEBB may grant an exception from the requirement in section (1) to pay by ACH Debit if the HB 2557 eligible member demonstrates their financial institution cannot accommodate an ACH transfer, or the member does not maintain an account at a financial institution.

(c) Notwithstanding section (2), the ACH Debit will occur on the 25th day of the month prior to the next month's health care coverage. All payments will be subject to this due date.

(2) If the HB 2557 member has a checking account, but submits a written letter declining to use the ACH Debit payment method, a \$35.00 processing fee shall be applied to the HB 2557 member's monthly premium.

(3) HB 2557 Eligible Member Invoicing:

(a) OEBB will enroll a new HB 2557 eligible member after one of the following is completed:

(A) The required ACH Debit Authorization Form is received from the member, processed and set-up with their financial institution; or

(B) The Exception Request Form is received from the member, reviewed and approved;

(b) OEBB will mail payment reminders to HB 2557 eligible members to provide notification of the amount and date the ACH Debit will occur.

(c)(A) If the payment is not received in full by the 25th calendar day of the month, the member's coverage will be terminated on the last day of the month in which a full premium payment was received. All premium payments must be paid in full before payment to the carrier will be made.

(B) OEBB shall not be responsible for any unpaid portion of premiums for coverage and will terminate the HB 2557 eligible member and dependent coverage for non-payment or underpayment of premiums due.

(4) HB 2557 Eligible Member Overpayments:

(a) OEBB will mail notification of overpayments to the HB 2557 eligible member. This written notice shall inform the member of the amount overpaid and a description of the overpayment.

(b)(A) OEBB will automatically apply any overpayments to the next month's premium due. The member may complete a Request for Reimbursement form if a refund of an overpayment is desired. However, the member may be responsible for processing fees associated with refunds less than \$100.

(B) Remaining balances on coverage that has ended will be refunded in full.

(5) HB 2557 Eligible Member Underpayments:

(a) Premiums that are not paid in full by the 25th calendar day of the month prior to the coverage effective month will result in the eligible member's and dependent's coverage being terminated at the end of the last month for which premiums were paid in full.

(b)(A) HB 2557 eligible members will be notified if their coverage was terminated due to the premium not being paid in full, including payments returned by the bank for Non-Sufficient Funds (NSF), closed bank accounts, and frozen accounts.

(B) A check or ACH transaction that is returned for NSF, closed bank account, or frozen account is considered non-payment of premiums.

(c) Coverage terminated due to non-payment or underpayment cannot be reinstated until a following Plan Year in which a person is deemed a HB 2557 eligible member.

Stat. Auth.: ORS 243.860 - 243.886

Stats. Implemented 243.864(1)(a)

Hist.: OEBB 4-2010, f. & cert. ef. 3-15-10; OEBB 7-2013(Temp), f. & cert. ef. 7-12-13 thru 1-7-14; OEBB 17-2013, f. & cert. ef. 10-23-13; OEBB 4-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 1-2017, f. & cert. ef. 3-16-17

Rule Caption: Amendments to update benefit plan names changes, other housekeeping updates and clarifications.

Adm. Order No.: OEBB 2-2017

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Rules Amended: 111-030-0010, 111-030-0035, 111-030-0040, 111-030-0045, 111-030-0046, 111-030-0047, 111-030-0050

Rules Repealed: 111-030-0010(T), 111-030-0035(T), 111-030-0040(T), 111-030-0045(T), 111-030-0046(T), 111-030-0047(T), 111-030-0050(T)

Subject: Amendments to update benefit plan name changes, other housekeeping updates and clarifications on rate structures for different groups.

Rules Coordinator: April Kelly—(503) 378-6588

111-030-0010

Medical, Pharmaceutical, Dental and Vision Plan Selection Criteria

Entities may choose or allow all medical, dental and vision plans available in the service area to be available to some or all Entity Employee Groups with the following exceptions:

(1) The HMO vision plan offered through Kaiser Permanente is only available if the HMO medical plan offered through Kaiser Permanente is available.

(2) Moda Health Evergreen Plan can only be offered to employee groups who have the option to participate in a Health Savings Account (HSA) effective October 1, 2016. (Previously Moda Health Plan H)

ADMINISTRATIVE RULES

Eligible employees must qualify and contribute to an HSA during the plan year to enroll in Moda Health Evergreen Plan.

Stat. Auth.: ORS 243.860–243.886

Stats. Implemented: ORS 243.864(1)(a)

Hist.: OEBB 8-2010(Temp), f. & cert. ef. 8-3-10 thru 1-29-11; OEBB 2-2011, f. & cert. ef. 2-11-11; OEBB 3-2012(Temp), f. & cert. ef. 4-20-12 thru 10-16-12; OEBB 8-2012, f. & cert. ef. 10-9-12; OEBB 8-2013(Temp), f. & cert. ef. 7-12-13 thru 1-7-14; OEBB 14-2013, f. & cert. ef. 10-23-13; OEBB 5-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 2-2017, f. & cert. ef. 3-16-17

111-030-0035

Optional Benefit Plans Selection Criteria

(1) Basic Life Insurance — Entities may select or allow one Basic Life plan per Employee Group unless otherwise specified in an OEBB administrative rule. Note: Employee Groups may select one Basic Life amount and offer optional life. Basic Life requires 100 percent enrollment if selected.

(2) Basic Accidental Death and Dismemberment (AD&D) — Entities may select or allow one Basic AD&D plan per Employee Group unless otherwise specified in an OEBB administrative rule. Note: Employee Groups can select one Basic AD&D plan and offer optional AD&D if desired. The Employee Group must select Basic Life coverage to select a Basic AD&D plan. Basic AD&D requires 100 percent enrollment if selected.

(3) Optional Employee Life Insurance and Optional Employee AD&D — Entities may select or allow Optional Employee Life and Optional AD&D for each Employee Group unless otherwise specified in an OEBB administrative rule. No minimum enrollment requirement.

(4) Optional Spouse/Partner Life Insurance and Optional Spouse/Partner AD&D — Entities may select or allow Optional Spouse/Partner Life and Optional Spouse/Partner AD&D coverage for each Employee Group unless otherwise specified in an OEBB administrative rule. No minimum enrollment requirement. The Employee Group must offer Optional Employee Life and Optional AD&D to offer this coverage. The Optional Employee Life Insurance and Optional Employee AD&D must be greater or equal to Optional Spouse/Partner Life Insurance and Optional Spouse/Partner AD&D.

(5) Optional Child Life Insurance and Optional Child AD&D — Entities may select or allow Optional Child Life and Optional Child AD&D coverage for each Employee Group unless otherwise specified in an OEBB administrative rule. No minimum enrollment requirement. The Employee Group must offer Optional Employee Life and Optional AD&D to offer this coverage. Optional Child Life Insurance and Optional Child Life AD&D requires enrollment in the minimum amount of Optional Employee Life and Optional AD&D by the employee.

(6) Optional Early Retiree Life Insurance and Optional Early Retiree AD&D — Entities may select or allow Optional Early Retiree Life and Optional Early Retiree AD&D coverage unless otherwise specified in an OEBB administrative rule. No minimum enrollment requirement, but enrollment is limited to initial open enrollment period only and subject to the following restrictions:

(a) Optional Early Retiree Life and Optional Early Retiree AD&D are only available to early retirees who had this coverage as an active employee.

(b) The Entity must offer this coverage for the early retiree to continue enrollment.

(c) When an employee moves from active to retiree status they may select coverage up to the amount they had as an active employee, or decrease coverage. Increases in coverage are not allowed.

(7) Voluntary Short Term Disability (STD) — Entities may select or allow one Voluntary STD plan per Employee Group unless otherwise specified in an OEBB administrative rule. No minimum enrollment requirement. The employee pays all or part of the premium. An Employee Group cannot select more than one STD Plan (Voluntary, Mandatory, or Mandatory/Employee-paid).

(8) Mandatory Short Term Disability (STD) — Entities may select or allow one Mandatory STD plan per Employee Group unless otherwise specified in an OEBB administrative rule. This plan requires 100 percent enrollment if selected and the premium is employer-paid. An Employee Group cannot select more than one STD Plan (Voluntary, Mandatory, or Mandatory/Employee-paid).

(9) Mandatory/Employee-paid Short Term Disability (STD) — Entities may select or allow one Mandatory/Employee-paid STD plan per Employee Group unless otherwise specified in an OEBB administrative rule. This plan requires 100 percent enrollment and the premium is paid by the employee. An Employee Group cannot select more than one STD Plan (Voluntary, Mandatory, or Mandatory/Employee-paid).

(10) Voluntary Long Term Disability (LTD) — Entities may select or allow one Voluntary LTD plan per Employee Group unless otherwise specified in an OEBB administrative rule. No minimum enrollment requirement. The employee pays all or part of the premium. An Employee Group cannot select more than one LTD Plan (Voluntary, Mandatory, or Mandatory/Employee-paid).

(11) Mandatory Long Term Disability (LTD) — Entities may select or allow one Mandatory LTD plan per Employee Group unless otherwise specified in an OEBB administrative rule. This plan requires 100 percent enrollment and the premium is employer-paid. An Employee Group cannot select more than one LTD Plan (Voluntary, Mandatory, or Mandatory/Employee-paid).

(12) Mandatory/Employee-paid Long Term Disability (LTD) — Entities may select or allow one Mandatory/Employee-paid LTD plan per Employee Group unless otherwise specified in an OEBB administrative rule. This plan requires 100 percent enrollment and the premium is paid by the employee. An Employee Group cannot select more than one LTD Plan (Voluntary, Mandatory, or Mandatory/Employee-paid).

Stat. Auth.: ORS 243.860 - 243.886

Stats. Implemented: ORS 243.864(1)(a), 243.868(1) & 243.872(2)

Hist.: OEBB 8-2010(Temp), f. & cert. ef. 8-3-10 thru 1-29-11; OEBB 2-2011, f. & cert. ef. 2-11-11; OEBB 5-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 2-2017, f. & cert. ef. 3-16-17

111-030-0040

Long Term Care (LTC) Benefit Plan Selection Criteria

Entities may select or allow LTC options to be available for or to each Employee Group unless otherwise specified in an OEBB administrative rule. OEBB offers employer-paid and employee-paid LTC options.

(1) Employee-paid LTC is a voluntary plan where members can choose to enroll. No minimum enrollment requirement.

(2) Employer-paid LTC requires 100 percent eligible employee enrollment if selected.

Stat. Auth.: ORS 243.860 - 243.886

Stats. Implemented: ORS 243.864(1)(a), 243.868(1) & 243.872(2)

Hist.: OEBB 8-2010(Temp), f. & cert. ef. 8-3-10 thru 1-29-11; OEBB 2-2011, f. & cert. ef. 2-11-11; OEBB 5-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 2-2017, f. & cert. ef. 3-16-17

111-030-0045

Employee Assistance Program (EAP) Plan Selection Criteria

(1) Entities may select or allow an EAP option to be available to all Entity employees including, but not limited to, OEBB benefit-eligible employees and their dependents.

(2) Enrollment will happen automatically if selected by an Entity.

Stat. Auth.: ORS 243.860 - 243.886

Stats. Implemented: ORS 243.864(1)(a), 243.868(1), 243.872(2)

Hist.: OEBB 8-2010(Temp), f. & cert. ef. 8-3-10 thru 1-29-11; OEBB 2-2011, f. & cert. ef. 2-11-11; OEBB 5-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 2-2017, f. & cert. ef. 3-16-17

111-030-0046

Development of Health Savings Accounts (HSA)

(1) Effective October 1, 2011, OEBB will offer the use of an employer sponsored vendor for Health Savings Accounts (HSA). For purposes of this rule, an HSA vendor will be considered employer sponsored if the Entity offers:

(A) Employer contributions to the HSA; or

(B) Pre-tax or direct deposit of employee contributions to the HSA.

(2) If an Entity chooses to offer an employer sponsored HSA, the Entity may offer this plan through the OEBB-contracted HSA.

(3) Entities may select or allow the HSA option to be available to eligible employees who enroll in OEBB's high-deductible health plan (HDHP) option (currently Moda Health Evergreen Plan and Kaiser Medical Plan 3).

(4) Eligible employees who are eligible to enroll in an HSA, and choose the employer sponsored HSA vendor, may do so directly through the HSA vendor or their Entity.

(5) Eligible employees must meet requirements established by the Internal Revenue Service (IRS) to qualify for enrollment in an HSA. Once enrolled in an HSA, members are responsible to adhere to tax requirements of the IRS.

(6) Because IRS requirements for an individual to qualify for enrollment in an HSA include concurrent enrollment in a high-deductible health plan (HDHP), an Entity that offers an employer sponsored HSA must offer its employees the choice of a HDHP option, currently Moda Health Evergreen Plan and Kaiser Permanente Plan 3, from among OEBB's medical plans. If an employee is enrolled in an OEBB medical plan other than OEBB's HDHP, the employee may not enroll in the OEBB HSA.

ADMINISTRATIVE RULES

Stat. Auth.: ORS 243.860 - 243.886
Stats. Implemented: ORS 243.874(5)
Hist.: OEBB 13-2011(Temp), f. & cert. ef. 8-2-11 thru 1-28-12; OEBB 21-2011, f. & cert. ef. 10-14-11; OEBB 8-2013(Temp), f. & cert. ef. 7-12-13 thru 1-7-14; OEBB 14-2013, f. & cert. ef. 10-23-13; OEBB 5-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 2-2017, f. & cert. ef. 3-16-17

111-030-0047

Development of Flexible Spending Accounts

(1) Effective October 1, 2012, OEBB will offer the use of an employer sponsored vendor for Flexible Spending Accounts (FSAs) including a Health Care Flexible Spending Account, Limited Health Care Spending Account and Dependent Care Flexible Spending Account.

(2) If an Entity chooses to offer an employer sponsored FSA, the Entity may offer this plan through the OEBB-contracted FSA vendor.

(3) Eligible employees who are eligible to enroll in an FSA, and choose the employer sponsored FSA vendor, do so directly through their Entity.

(4) Eligible employees must meet requirements established by the Internal Revenue Service (IRS) to qualify for enrollment in an FSA. Once enrolled in an FSA, members are responsible to adhere to tax requirements of the IRS.

Stat. Auth.: ORS 243.860–243.886
Stats. Implemented: ORS 243.874(5)
Hist.: OEBB 3-2012(Temp), f. & cert. ef. 4-20-12 thru 10-16-12; OEBB 8-2012, f. & cert. ef. 10-9-12; OEBB 5-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 2-2017, f. & cert. ef. 3-16-17

111-030-0050

Premium Rate Structure Selection Process and Limitations

(1) Educational Entities may choose a composite or tiered rate structure for each Employee Group for medical, dental and vision coverage unless otherwise specified in an OEBB administrative rule. The rate structure selected for each coverage type applies to all individuals electing to participate as active employees within an Employee Group. Local Governments are limited to using the tiered rate structure for medical, dental and vision plans.

(2) Educational Entities may select a composite or tiered rate structure for early retirees unless otherwise specified in an OEBB administrative rule. Local Governments are limited to using the tiered rate structure for medical, dental and vision plans.

(3) Educational Entities may select a composite or tiered rate structure for part-time employees of an Employee Group unless otherwise specified in an OEBB administrative rule. If a different rate structure is selected for part-time employees that structure must apply to all participating part-time employees within that Employee Group. Local Governments are limited to using the tiered rate structure for medical, dental and vision plans.

(4) Rate structures must be selected during the plan selection process.

(5) Once an Educational Entity elects a change in rate structure for a type of coverage within an Employee Group, the rate structure selection cannot be changed for at least three plan years. The rate structure change will go into effect on the first day of the next plan year, October 1.

(6) Educational Entities or Local Governments who offered LTD on a composite rate structure prior to moving to OEBB coverages can continue to do so. Use of the composite rate structure for LTD plans is only available on a mandatory LTD plan and requires 100 percent enrollment.

(a) Employee Groups using a composite rate structure for mandatory LTD plans effective October 1, 2012, may continue to use either the employer-paid or employee-paid option.

(b) Effective October 1, 2013, OEBB will expand the availability of the composite rate structure for mandatory LTD plans only to those Employee Groups that chose to elect an employer-paid plan option.

(c) Rate structures must be selected during the plan selection period and become effective the first day of the next plan year, October 1.

Stat. Auth.: ORS 243.860 - 243.886
Stats. Implemented: ORS 864(1)(a)
Hist.: OEBB 8-2010(Temp), f. & cert. ef. 8-3-10 thru 1-29-11; OEBB 2-2011, f. & cert. ef. 2-11-11; OEBB 1-2013(Temp), f. & cert. ef. 2-21-13 thru 8-19-13; OEBB 4-2013, f. & cert. ef. 5-10-13; OEBB 10-2013(Temp), f. & cert. ef. 10-11-13 thru 4-8-14; OEBB 21-2013, f. & cert. ef. 12-27-13; OEBB 5-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 2-2017, f. & cert. ef. 3-16-17

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Rule Caption: Amendments to update benefit plan name changes and other housekeeping updates

Adm. Order No.: OEBB 3-2017

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Rules Amended: 111-010-0015

Rules Repealed: 111-010-0015(T)

Subject: Amendments to update benefit plan names and other housekeeping updates.

Rules Coordinator: April Kelly—(503) 378-6588

111-010-0015

Definitions

Unless the context indicates otherwise, as used in OEBB administrative rules, the following definitions will apply:

(1) “Actuarial value” means the expected financial value for the average member of a particular benefit plan.

(2) “Adverse Benefit Determination” means a denial, reduction, or termination of, or a failure to provide or make payment (in whole or in part), for a benefit, including any such denial, reduction, termination, or failure to provide or make payment that is based on but not limited to:

(a) A determination of a member’s eligibility to participate in the plan;

(b) A determination that the benefit is not a covered benefit; or

(c) A rescission of coverage, whether or not, in connection with rescission, there is an adverse effect on any particular benefit.

(3) “Affidavit of Domestic Partnership” means a document that attests the eligible employee and one other eligible individual meet the criteria in section (15)(b).

(4) “Benefit plan” includes, but is not limited to, insurance or other benefits including:

(a) Medical (including non-integrated health reimbursement arrangements (HRAs));

(b) Dental;

(c) Vision;

(d) Life, disability and accidental death;

(e) Long term care;

(f) Employee Assistance Program Plans;

(g) Supplemental medical, dental and vision coverages (including Integrated General Purpose and Integrated Post-Deductible health reimbursement arrangements (HRAs); and Limited Purpose, Post-Separation/Retiree, and Premium Only health reimbursement arrangements (HRAs));

(h) Any other remedial care recognized by state law, and related services and supplies;

(i) Comparable benefits for employees who rely on spiritual means of healing; and

(j) Self-insurance programs managed by the Board.

(5) “Benefits” means goods and services provided under Benefit Plans.

(6) “Board” means the ten-member board established in the Department of Administrative Services as the Oregon Educators Benefit Board under chapter 00007, Oregon Laws 2007.

(7) “Child” means and includes the following:

(a) An eligible employee’s, spouse’s, or domestic partner’s biological son or daughter; adopted child; child placed for adoption; or legally placed child, who is 25 or younger on the first day of the month. An eligible employee must provide the required custody or legal documents to their Educational Entity showing proof of adoption, legal guardianship or other court order if enrolling a child for whom the employee, spouse, or domestic partner is not the biological parent. Grandchildren are only eligible when the eligible employee is the legal guardian or adoptive parent of the grandchild.

(b) A person who is incapable of self-sustaining employment because of a developmental disability, mental illness, or physical disability. There is no age limit for a dependent child who is incapable of self-sustaining employment because of a developmental disability, mental illness, or physical disability. When the dependent child is 26 years of age or older all the following requirements must be met:

(A) The disability must have existed before attaining age 26.

(B) The employee must provide evidence to the Entity or OEBB that

(1) the person had health plan coverage, group or individual, prior to attaining age 26, and (2) health plan coverage continued without a gap until the OEBB health plan effective date.

(C) The person’s attending physician must submit documentation of the disability to the eligible employee’s OEBB health insurance plan for review and approval. If the person receives health plan approval, the health plan may review the person’s health status at any time to determine continued OEBB coverage eligibility.

(D) The person must not have terminated from OEBB health plan coverage after attaining the age of 26.

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(c) Eligibility for coverage under this rule includes people who may not be dependents under federal or state tax law and may require an Entity to adjust an eligible employee's income based on the imputed value of the benefit.

(8) "Comparable cost (Medical, Dental and Vision)" means that the total cost to a district for enrollment in OEBB plans comparable in design to the district's plan(s) do not exceed the total cost to a district for enrollment in the district's plan(s) using the rate(s) in effect or proposed for the benefit plan year.

(9) "Comparable cost (Basic and Optional Life Insurance, Accidental Death & Dismemberment, and Short and Long Term Disability)" means that the premium rates of an OEBB plan design option do not exceed the average, aggregate premium rates of a district's pre-OEBB plan design in effect the year prior to implementation.

(10) "Comparable plan design (Medical, Dental and Vision)" means that the actuarial values of two plan designs are within 2.5 percent higher or lower of each other.

(11) "Comparable plan design (Basic and Optional Life Insurance and Accidental Death & Dismemberment)" means that 90 percent of district employees can obtain a maximum benefit through an OEBB plan design that is within \$2,500 of the maximum benefit obtained through a pre-OEBB plan design in effect the year prior to implementation.

(12) "Comparable plan design (Short and Long Term Disability)" means 90 percent of the district employees can obtain the same elimination period, percentage of covered compensation, definition of covered compensation, coverage period duration, and maximum payment per benefit period through an OEBB plan design as through a pre-OEBB plan design in effect the year prior to implementation.

(13) "Dependent" means and includes the eligible employee's spouse or domestic partner, or child as defined by OAR 111-010-0010(7), unless otherwise defined in another OEBB rule.

(14) "Documented entity policies" means Entities' policies and practices that apply to an employee group and are submitted to the Oregon Educators Benefit Board during the plan selection process. Entities' policies and practices must be identified and submitted with the applicable employee group plan selections.

(15) "Eligible Domestic partner," unless otherwise defined by a collective bargaining agreement or documented district policy in effect on January 31, 2008, means and includes the following:

(a) An unmarried individual of the same sex who has entered into a "Declaration of Domestic Partnership" with the eligible employee that is recognized under Oregon law; or

(b) An unmarried individual of the same or opposite sex who has entered into a partnership that meets the following criteria:

(A) Both are at least 18 years of age;

(B) Are responsible for each other's welfare and are each other's sole domestic partners;

(C) Are not married to anyone and have not had a spouse or another domestic partner within the prior six months. If previously married, the six-month period starts on the final date of divorce;

(D) Share a close personal relationship and are not related by blood closer than would bar marriage in the State of Oregon;

(E) Have jointly shared the same regular and permanent residence for at least six months immediately preceding the date the Affidavit of Domestic Partnership is signed and submitted to the Entity; and

(F) Are jointly financially responsible for basic living expenses defined as the cost of food, shelter and any other expenses of maintaining a household. Financial information must be provided if requested.

(G) The eligible employee and domestic partner must jointly complete and submit to the Entity an Affidavit of Domestic Partnership form, within five business days of the electronic enrollment date or the date the Entity received the enrollment/change form. If the affidavit is not received, coverage will terminate for the domestic partner retroactive to the effective date.

(c) The eligible employee must notify the Entity within 31 days of meeting all criteria as defined in 111-010-0015 (15)(b) or obtaining the "Declaration of Domestic Partnership" which is recognized under Oregon law.

(d) Entities' must calculate and apply applicable imputed value tax for domestic partners covered under OEBB benefit plans.

(16) "Educational Entity" means public school districts (K-12), education service districts (ESDs), community colleges and public charter schools participating in OEBB.

(17) "Eligible employee" means and includes an employee of an Educational Entity or Local Government who is actively working or on paid or unpaid leave that is recognized by federal or state law, and:

(a) Is employed in a half time or greater position or is in a job-sharing position; or

(b) Meets the definition of an eligible employee under a separate OEBB rule or under a collective bargaining agreement or documented district policy in effect on January 31, 2008; or

(c) Is an employee of a community college who is covered under a collectively bargained contract and has worked a class load of between 25 percent and 49 percent for a minimum period of two years and is expected to continue to work a class load of at least 25 percent. Coverage is limited to medical to include Kaiser Medical Plan 2, Kaiser Medical Plan 3 (where available), Moda Health Cedar Plan, Moda Health Dogwood Plan, or Moda Health Evergreen Plan. Moda Health Evergreen Plan can only be elected if the eligible employee is eligible for and actively contributing to a Health Savings Account (HSA). The tiered rate structure will apply to all medical plans.

(18) "Eligible Early Retiree" means and includes a previously eligible employee who is:

(a) Not Medicare-eligible; or

(b) Under 65 years old; and

(A) Receiving a service or disability retirement allowance or pension under the Public Employees Retirement System (PERS) or under any other retirement or disability benefit plan or system offered by an OEBB participating organization for its employees;

(B) Eligible to receive a service retirement allowance under PERS and has reached earliest retirement age under ORS Chapter 238;

(C) Eligible to receive a pension under ORS 238A.100 to 238A.245 and has reached earliest retirement age as described in ORS 238A.165; or

(D) Eligible to receive a service retirement allowance or pension under another retirement benefit plan or system offered by an OEBB participating organization and has reached earliest retirement age under the plan or system.

(19) "Employee Group" means employees and early retirees of a similar employment type, for example administrative, represented classified, non-represented classified, confidential, represented licensed, or non-represented licensed, within an Entity. If one or more collective bargaining unit exists within an employee group, each unit will be considered a separate employee group.

(20) "Entity" means an Educational Entity, Local Government or Special district.

(21) "Flexible benefit plan" includes plans that allow contributions on a tax-favored basis including health savings accounts.

(22) "Health Reimbursement Arrangement (HRA)" means an account established and funded solely by the employer that can be used to pay for qualified health care expenses for eligible employees and their spouses and federal tax dependents, up to a maximum dollar amount for a coverage period, and any unused portion of the maximum dollar amount at the end of a coverage period is carried forward to increase the maximum reimbursement amount in subsequent coverage periods. This definition should be interpreted to comply with the guidelines established by the IRS for treatment of HRAs on a tax-favored basis in Technical Release No. 2013-03, IRS Publication 969 and IRS Notice 2002-45. HRA includes, but is not limited to, the following:

(a) "Integrated General Purpose HRA" is an HRA that allows participants to be reimbursed for all IRS qualified expenses and is available only to eligible employees who are enrolled in an OEBB medical plan as the primary subscriber, or as an eligible dependent.

(b) "Integrated Post-Deductible HRA" is an HRA that allows participants to be reimbursed for expenses up to a certain amount, but only after the participants have met the annual deductible on an OEBB medical plan in which the employee participant is enrolled as the primary subscriber, or as an eligible dependent.

(c) "Limited Purpose HRA" is an HRA that allows participants to be reimbursed for only standard dental, vision, and orthodontia expenses and does not require the employee participant to be enrolled in an OEBB medical plan as the primary subscriber, or as a dependent.

(d) "Non-integrated HRA" is an HRA that allows participants to be reimbursed for all IRS qualified expenses when the employee participant is not enrolled in an OEBB medical plan as the primary subscriber, or as an eligible dependent.

(e) "Post-Separation/Retiree HRA" is an HRA that allows participants to be reimbursed for qualified expenses only after the employee sepa-

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rates/retires and does not require the employee participant to be enrolled in an OEBB medical plan as the primary subscriber, or as a dependent.

(f) "Premium Only HRA" is an HRA that allows participants to be reimbursed only for insurance premiums paid on an after tax basis, where the employee participant has no ability to pay the premium on a pre-tax basis and the HRA does not require the employee participant to be enrolled in an OEBB medical plan as the primary subscriber, or as a dependent.

(23) "Health Savings Account (HSA)" means a tax-exempt trust or custodial account that is set up with a qualified HSA trustee to pay or reimburse certain incurred medical expenses, as defined in 26 U.S.C. Sec. 223(d) and IRS Publication 969.

(24) "High Deductible Health Plan (HDHP)" means a health plan that meets the criteria for a "high deductible health plan" as outlined in 26 U.S.C. Sec. 223(c)(2). Enrollment in an HDHP is one of the requirements that must be met in order to qualify to contribute to a health savings account (HSA).

(25) "Local Government" means cities, counties and special districts in Oregon.

(26) "Members" means and includes the following:

(a) "Eligible employee" as defined by OAR 111-010-0015(17).

(b) "Child" as defined by OAR 111-010-0015(7).

(c) "Domestic Partner" as defined by OAR 111-010-0015(15).

(d) "Spouse" as defined by OAR 111-010-0015(34).

(27) Newly-hired and newly-eligible employee means a benefit-eligible employee who is being hired at an Entity and has not been employed or eligible for benefits through the hiring Entity in the past six months, or within the same benefit Plan Year.

(28) "Non-subject District" means a community college not yet participating in benefit plans provided by the Oregon Educators Benefit Board, or a charter school whose employees are not considered employees of a school district.

(29) "Oregon Educators Benefit Board or OEBB" means the program created under chapter 00007, Oregon Laws 2007.

(30) "OEBB participating organization" means a Subject District, Non-subject District, or Provisional Non-subject District that participates in benefit plans provided by the Oregon Educators Benefit Board (OEBB).

(31) "Provisional Non-subject District" means a common school district, a union high school district, or an education service district that:

(a) Was self-insured on December 31, 2006;

(b) Had an independent health insurance trust established and functioning on December 31, 2006; or

(c) Can provide comparable plan designs at a comparable cost as defined by sections (8) and (10) of this Rule.

(32) "Qualified Status Change (QSC)" means a change in family or work status that allows limited mid-year changes to benefit plans consistent with the individual event. Outside of open enrollment, a QSC is the only time a change in enrollments can occur.

(33) "Special district" means any district listed in ORS chapter 198 "Special Districts Generally," or as determined by the Board.

(34) "Spouse" means a person who is married under the laws of the State of Oregon or under the laws of any other state or country. The definition of spouse does not include a former spouse and a former spouse does not qualify as a dependent.

(35) "Subject District" means a common school district, a union high school district, or an education service district that:

(a) Did not self-insure on January 1, 2007;

(b) Did not have a health trust in effect on January 1, 2007; or

(c) Does not provide comparable plan designs at a comparable cost as defined by sections (8) and (10) of this rule.

Stat. Auth.: ORS 243.860 – 243.886

Stats. Implemented: ORS 243.864(1)(a)

Hist.: OEBB 2-2007(Temp), f. & cert. ef. 9-21-07 thru 3-18-08; OEBB 2-2008, f. & cert. ef. 1-4-08; OEBB 10-2008(Temp), f. & cert. ef. 8-13-08 thru 2-6-09; OEBB 1-2009, f. & cert. ef. 1-30-09; OEBB 5-2009(Temp), f. & cert. ef. 3-10-09 thru 9-4-09; OEBB 8-2009, f. & cert. ef. 5-1-09; OEBB 12-2009(Temp), f. & cert. ef. 7-31-09 thru 1-26-10; OEBB 19-2009, f. & cert. ef. 12-17-09; OEBB 7-2010(Temp), f. & cert. ef. 8-3-10 thru 1-29-11; OEBB 11-2010(Temp), f. 9-30-10, cert. ef. 10-1-10 thru 1-29-11; OEBB 1-2011, f. & cert. ef. 2-11-11; OEBB 6-2011(Temp), f. & cert. ef. 2-15-11 thru 8-13-11; OEBB 14-2011, f. & cert. ef. 8-2-11; OEBB 15-2011(Temp), f. & cert. ef. 8-2-11 thru 1-28-12; OEBB 16-2011(Temp), f. 9-30-11, cert. ef. 10-1-11 thru 1-28-12; OEBB 20-2011, f. 10-13-11, cert. ef. 10-14-11; OEBB 22-2011, f. & cert. ef. 12-14-11; OEBB 13-2012, f. & cert. ef. 12-19-12; OEBB 6-2013, f. & cert. ef. 7-12-13; OEBB 12-2013(Temp), f. & cert. ef. 10-11-13 thru 4-8-14; OEBB 19-2013(Temp), f. & cert. ef. 11-19-13 thru 4-8-14; OEBB 20-2013, f. & cert. ef. 12-27-13; OEBB 24-2013(Temp), f. & cert. ef. 12-27-13 thru 4-8-14; OEBB 1-2014, f. & cert. ef. 3-7-14; OEBB 6-2016(Temp), f. & cert. ef. 10-18-16 thru 4-15-17; OEBB 3-2017, f. & cert. ef. 3-16-17

Oregon Health Authority, Public Health Division Chapter 333

Rule Caption: Ambulance Service Licensing

Adm. Order No.: PH 7-2017

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Rules Adopted: 333-250-0220, 333-250-0225, 333-250-0230, 333-250-0235, 333-250-0255, 333-250-0265, 333-250-0310, 333-250-0320, 333-250-0350, 333-250-0360, 333-250-0380, 333-250-0390, 333-250-0410

Rules Repealed: 333-250-0031, 333-250-0042, 333-250-0044, 333-250-0045, 333-250-0048, 333-250-0049, 333-250-0100

Rules Renumbered: 333-250-0000 to 333-250-0200

Rules Ren. & Amend: 333-250-0010 to 333-250-0205, 333-250-0020 to 333-250-0210, 333-250-0030 to 333-250-0215, 333-250-0080 to 333-250-0240, 333-250-0040 to 333-250-0250, 333-250-0041 to 333-250-0270, 333-250-0043 to 333-250-0280, 333-250-0046 to 333-250-0290, 333-250-0047 to 333-250-0300, 333-250-0085 to 333-250-0330, 333-250-0050 to 333-250-0340, 333-250-0060 to 333-250-0370, 333-250-0070 to 333-250-0400

Subject: The Oregon Health Authority (OHA), Public Health Division, Emergency Medical Services (EMS) and Trauma Systems Program is permanently adopting, amending and renumbering, and repealing Oregon Administrative Rules in chapter 333, division 250 relating to the licensing requirements for ambulance service agencies. The amendments seek to:

- Update language and terms used to reflect current terminology, technology and statutory references;

- Align rules with other facility licensing types including streamlining the organization of the rules;

- Clarify licensing requirements and actions necessary;

- Require criminal background checks on qualified drivers that are not a licensed EMS provider;

- Recommend minimum requirements for a quality assessment and performance improvement (QAPI) program;

- Clarify ambulance service agency responsibilities; and

- Clarify OHA responsibilities.

Rules Coordinator: Brittany Hall—(503) 449-9808

333-250-0200

Effective Date and Preemption

(1) No person shall operate an ambulance service unless issued an ambulance service license by the Oregon Health Authority, Public Health Division.

(2) These rules preempt any local ambulance ordinances and county ambulance service area plans that are in conflict. This rule does not prevent a city or county from establishing requirements more stringent than those set forth in these rules.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.117 & 682.991

Hist.: HD 18-1994, f. 6-30-94, cert. ef. 7-1-94; OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; Renumbered from 333-250-0000, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0205

Definitions

(1) "Advertise" means to communicate information to the public, or to any person concerned, by any oral, written, or graphic means including, but not limited to, pamphlets, newspapers, television, billboards, radio, Internet and telephone directories.

(2) "Agent" has the same meaning given that term in OAR 847-035-0001.

(3) "Ambulance" or "Ambulance Vehicle" means any privately or publicly owned motor vehicle, aircraft, or watercraft that is regularly provided or offered to be provided for the emergency transportation of persons who are ill or injured or who have disabilities.

(4) "Ambulance Based Clinician":

(a) Means a registered nurse, physician, or physician assistant who:

(A) Has an active license in Oregon and is in good standing with the Oregon Board of Nursing or the Oregon Medical Board; and

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(B) Staffs an ambulance for a licensed ambulance service.
(b) Includes an EMS medical director or agent that staffs an ambulance.

(5) "Ambulance Service" means a person, governmental unit, or other entity that operates ambulance(s) and that holds itself out as providing pre-hospital care or medical transportation to persons who are ill or injured or who have disabilities.

(6) "Ambulance Service Administrator" means an individual responsible for the professional, supervisory and administrative work in the operation of the ambulance service and its staff.

(7) "Ambulance Service Area (ASA)" means a geographic area served by one ground ambulance service provider, and may include all or portion of a county, or all or portions of two or more contiguous counties.

(8) "Ambulance Service License" means the documents issued by the Authority to the owner of an ambulance service when the service is found to be in compliance with ORS chapter 682; OAR chapter 333, division 255 and these rules.

(9) "Authority" means the Emergency Medical Services and Trauma Systems Program, within the Oregon Health Authority.

(10) "Business Day" means Monday through Friday when the Authority is open for business, excluding holidays.

(11) "Emergency Care" means the performance of acts or procedures under emergency conditions in the observation, care and counsel of persons who are ill or injured or who have disabilities; in the administration of care or medications as prescribed by a licensed physician, insofar as any of these acts is based upon knowledge and application of the principles of biological, physical and social science as required by a completed course utilizing an approved curriculum in prehospital emergency care. However, "emergency care" does not include acts of medical diagnosis or prescription of therapeutic or corrective measures.

(12) "EMS" means Emergency Medical Services.

(13) "EMS Medical Director" has the same meaning as "Supervising physician" in ORS 682.025.

(14) "Emergency Medical Services Provider (EMS provider)" has the meaning given that term in ORS 682.025.

(15) "Employee" means any full-time paid or part-time paid person acting within the scope of his or her duties and for or on behalf of an ambulance service.

(16) "Fraud or Deception" means the intentional misrepresentation or misstatement of a material fact, concealment of or failure to make known any material fact or any other means by which misinformation or false impression is knowingly given.

(17) "Non-emergency Care" means the performance of acts or procedures on a patient who is not expected to die, become permanently disabled or suffer permanent harm within the next 24-hours, including but not limited to observation, care and counsel of a patient and the administration of medications prescribed by a physician licensed under ORS chapter 677, insofar as any of those acts are based upon knowledge and application of the principles of biological, physical and social science and are performed in accordance with scope of practice rules adopted by the Oregon Medical Board in the course of providing prehospital care as defined in this rule.

(18) "Owner" means the person having all the incidents of ownership in an ambulance service or an ambulance or where the incidents of ownership are in different persons, the person, other than a security interest holder or lessor, entitled to the possession of an ambulance vehicle or operation of an ambulance service under a security agreement or a lease for a term of 10 or more successive days.

(19) "Paramedic" means a person who is licensed by the Authority as a Paramedic.

(20) "Patient" means a person who is ill or injured or who has a disability and who is transported in an ambulance.

(21) "Patient Care Report (PCR)" means an Authority-approved form or electronic field data format that is completed by an EMS provider or ambulance based clinician for all patients receiving prehospital assessment, care or transportation to a medical facility.

(22) "Person" has the meaning given that term in ORS 174.100.

(23) "Physician" means a person licensed under ORS chapter 677, actively registered and in good standing with the Oregon Medical Board as a Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO).

(24) "Prehospital Care" means care rendered by EMS providers as an incident of the operation of an ambulance and care rendered by EMS providers as incidents of other public or private safety duties, and includes, but is not limited to "emergency care" as defined in this rule.

(25) "Procedure" means a written, dated and signed course of action to carry out a directive. A procedure must be able to answer the questions; who, what, why, when and where.

(26) "Qualified Driver" means someone who is not licensed by the Authority and who meets Authority requirements to operate a ground ambulance.

(27) "Volunteer" means a person who is not compensated for their time to staff an ambulance or EMS agency, but who may receive reimbursement for personal expenses incurred.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: HD 18-1994, f. 6-30-94, cert. ef. 7-1-94; OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 11-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2013, f. & cert. ef. 1-25-13; Renumbered from 333-250-0010, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0210

Application for an Ambulance Service License

(1) Any person who furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the provision of ambulance service must be licensed by the Authority and comply with ORS chapter 682; OAR chapter 333, division 255 and these rules before offering such service to the public.

(2) An applicant for an ambulance service license must:

(a) Possess at least one ambulance, facilities, equipment, and a communications system meeting the requirements of these rules and OAR chapter 333, division 255;

(b) Have adequate staffing that supports the type of service, local call volume and the needs of the area as approved by the Authority; and

(c) Comply with all applicable state and federal regulations if laboratory tests are conducted by the ambulance service.

(3) An application for a license to operate an ambulance service shall be submitted electronically in a manner prescribed by the Authority and shall include, but is not limited to, the following information:

(a) The name and address of the person or public entity owning the ambulance service;

(b) If other than the applicant's true name, the name under which the applicant is doing business;

(c) A corporation, limited partnership, or limited liability company shall attach to the application:

(A) A written statement from the Oregon Secretary of State's Corporation Division that the ambulance service is registered in accordance with the requirements of the Secretary of State's Corporation Division and that the ambulance service is in good standing, has filed required annual reports and has paid all registration fees;

(B) The name of the registered agent of the ambulance service that is on file with the Secretary of State's Corporation Division; and

(C) All trade names recorded with the Secretary of State's Corporation Division for the business entity, and if the business entity is a subsidiary, all trade names or names of all other subsidiaries recorded with the Secretary of State's Corporation Division.

(d) A public agency shall attach to the application documentation from an applicable local city or county agency authorizing operation as an ambulance service;

(e) Documentation clearly defining the organizational structure including responsibility, authority and chain of command for all necessary functions within the organization;

(f) The name of the principal contact person that the ambulance service wants contacted regarding official communications from the Authority, if different than the person identified in subsection (3)(a) of this rule;

(g) The mailing and actual street address of the principal place of business of the ambulance service and the actual street address of all fixed locations where an ambulance is parked when not in operation;

(h) Proof of financial responsibility as specified in ORS 682.105;

(i) Copies of all licenses issued by the Federal Communications Commission (FCC) for the operation of the ambulance service's communications equipment and radio configuration data as required by OAR 333-250-0290 or written authorization from a FCC license holder to use the license holder's frequencies;

(j) If laboratory tests are conducted that require a Clinical Laboratory Improvement Amendment (CLIA) Certificate or CLIA Certificate of Waiver, a copy of the certificate(s);

(k) A copy of the licensed ambulance service's Air Carrier Operating Certificate, if the service will be operating an air ambulance;

(l) Copies of all primary modes of advertising used by an ambulance service, including but not limited to, brochures and website addresses;

(m) A copy of the PCR;

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(n) The name of the approved EMS medical director and any designated agent(s) meeting the requirements in OAR 333-250-0300;

(o) A roster of all EMS providers, ambulance based clinicians, and qualified drivers specifying who shall either operate an ambulance or attend to patients, or both, along with the following information for each employee and volunteer:

(A) The full legal name;

(B) The employment status as either full-time paid, part-time paid or volunteer;

(C) The level of professional license held; and

(D) License numbers, including EMS provider license numbers, driver and pilot license numbers for those persons operating the ambulance.

(p) A list of all ambulances to be operated by the ambulance service under the ambulance service license along with photos and the information required for an ambulance license pursuant to OAR chapter 333, division 255;

(q) A statement under the penalties of perjury that certifies the following:

(A) There has been no attempt to knowingly and willfully falsify, conceal, or omit a material fact, or make any false, fictitious, incomplete or fraudulent statements or representations, or make or use any false writing or document knowing the same to contain any false, fictitious, or fraudulent statement or entry for the purpose of obtaining or attempting to obtain an ambulance service license to operate in the State of Oregon. Where an applicant relies on documents submitted by employees, volunteers, ambulance based clinicians, agents or EMS medical directors, the applicant has made a reasonable effort to verify the validity of those documents;

(B) The applicant authorizes any persons or entities, including but not limited to hospitals, institutions, organizations, or governmental entities to release to the Authority any information, files, or records requested by the Authority in connection with the processing of an application; and

(C) Upon receiving an ambulance service license, the licensed ambulance service authorizes to release information by insurance companies, physicians, health care facilities (including but not limited to, hospitals, nursing homes, urgent care centers or primary care facilities) to the Authority relating to services provided by the ambulance service to those facilities or to patients being taken from or to those facilities.

(r) The completed application must contain the signature(s) of the person(s) having the lawful responsibility for the overall operation of an ambulance service or the authorized person empowered to sign on behalf of the ambulance service; and

(s) Such other information as the Authority may reasonably require.

(4) If the applicant's primary ambulance service business office is located in another state, the applicant must:

(a) Meet requirements listed in sections (1) through subsection (3)(s) of this rule; and

(b) Attach copies of current ambulance service and ambulance license(s) for that state to the application.

(5) The completed application to license an ambulance service must be accompanied by a nonrefundable licensing fee in accordance with ORS 682.047.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: HD 18-1994, f. 6-30-94, cert. ef. 7-1-94; OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 11-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2013, f. & cert. ef. 1-25-13; Renumbered from 333-250-0020, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0215

Review of License Application

(1) In reviewing an application for a license to operate an ambulance service, the Authority shall:

(a) Verify compliance with ORS chapter 682; ORS 820.300 through ORS 820.380; OAR chapter 333, division 255; OAR 847-035-0020 through 0025 and these rules; and

(b) Conduct an on-site licensing survey in accordance with OAR 333-250-0370.

(2) In determining whether to license an ambulance service, the Authority shall consider the following factors:

(a) The use of proper medical and communication equipment;

(b) The level of care provided ranging from basic life support to advanced life support;

(c) The level of staffing to support the type of service, local call volume and the needs of the area;

(d) Whether there are adequately trained staff;

(e) The ability to safely operate the ambulance service; and

(f) Whether there is a documented need for the service supported by the county government.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: HD 18-1994, f. 6-30-94, cert. ef. 7-1-94; OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 1-2013, f. & cert. ef. 1-25-13; Renumbered from 333-250-0030, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0220

Approval of License Application

(1) The Authority shall notify an applicant in writing if a license application is approved and include instructions on how to access the license electronically.

(2) A license shall be conspicuously displayed in the main business office of the ambulance service, or as otherwise directed by the Authority.

(3) An ambulance service license shall be issued only to the owner of the ambulance service named in the application and shall not be transferable to any other person, governmental unit, or ambulance service.

(4) Except when specifically exempted by ORS 682.035, an out-of-state ambulance service that operates or advertises in Oregon must be licensed by the Authority. An out-of-state ambulance service is not required to obtain an ambulance service license and ambulance license for the following situations:

(a) Transporting a patient through the state;

(b) Delivering a patient to a medical facility or other location within the state, if the beginning of the transport originated outside of the state;

(c) Picking up a patient at a medical facility or airport within the state for the purpose of transporting the patient to a medical facility or other location outside of the state, unless prohibited by the county's Ambulance Service Area plan; or

(d) In the event of a man-made or natural disaster declared by federal, state or local officials and resulting in the need to utilize all available resources to provide patient care and transportation in the affected area.

(5) When an ambulance service is found to be in non-compliance with ORS chapter 682; ORS 820.300 through 820.380; OAR division 333, chapter 255; OAR 847-035-0020 through 0025 or these rules, the Authority may deny, suspend or revoke an ambulance service license or place an ambulance service on probation in accordance with OAR 333-250-0390 or 333-250-0400.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0225

Denial of License Application

If the Authority intends to deny a license application, it shall issue a Notice of Proposed Denial of License Application in accordance with ORS chapter 183.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0230

Expiration and Renewal of License

(1) Each license to operate an ambulance service:

(a) Shall be valid until June 30 of each year, unless sooner revoked or suspended. The initial licensing period may not exceed 15 months; and

(b) Shall expire on June 30 of the following year, if a license is applied for and issued between April 1 and June 30.

(2) If a license renewal is desired, the licensed ambulance service shall make application and pay the appropriate fee at least 30 days prior to the expiration date in a manner prescribed by the Authority.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0235

Return of License

If an ambulance service license is suspended, revoked, or expires, the license certificate and any applicable license decals shall be returned to the Authority by registered mail immediately.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0240

Surrender of License

(1) An ambulance service license is non-transferable.

(2) When an owner sells or closes the ambulance service, the owner must:

(a) Provide a minimum 30-days written notice of the intent to cease operation to the Authority;

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(b) Provide the required notice as prescribed in the county ASA plan to the county health department and the ASA authority in which the ambulance service operates; and

(c) Take such other actions as may be determined to be necessary by the Authority or the county health department, or the ASA authority to assure the smooth transition to a new ambulance service provider, including but not limited to permitting the continued operation of the existing provider for more than the required period of legal notice or making equipment and supplies available to an interim ambulance service provider.

(3) Within 10 days of final closing of the ambulance service sale, the owner must return the ambulance service license to the Authority.

(4) An owner may not terminate the ambulance service business or otherwise cease operations in violation of any provisions, rules or ordinances established under the provision of ORS chapter 682.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: HD 18-1994, f. 6-30-94, cert. ef. 7-1-94; OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 1-2013, f. & cert. ef. 1-25-13; Renumbered from 333-250-0080, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0250

Operational Requirements

(1) A licensed ambulance service may only utilize an ambulance for the provision of providing ambulance services that has been issued a license by the Authority, and that complies with all of the requirements of these rules, ORS chapter 682, ORS 820.300 through 820.380, OAR division 333, chapter 255, and other applicable federal, state and local laws and regulations governing the operation of a licensed ambulance service.

(2) A licensed ambulance service must:

(a) Document the organizational structure of the agency including identifying lines of responsibility and authority;

(b) Notify the Authority, upon making initial application or within 14-days of the date of registration, of any new "trading as", "division of", or "doing business as" names utilized by the licensed ambulance service;

(c) Transport only patients for which it has the resources to provide appropriate medical care and transportation unless in transfers between medical facilities, the sending or receiving facility has provided medically appropriate life support measures, personnel, and equipment to sustain the patient during the transfer; and

(d) Document any mutual aid agreements with other licensed ambulance service organizations that are necessary to respond in emergency situations.

(3) A licensed ambulance service may advertise only when the ambulance service and ambulance meets the requirements of ORS chapter 682 and these rules.

(a) If a licensed ambulance service does not provide the level of service advertised, the ambulance service license may be suspended or revoked, or a renewal application denied in accordance with OAR 333-250-0390 or 333-250-0400 for failure to comply.

(b) No licensed ambulance service shall advertise or promote the use of any telephone number other than "9-1-1" for emergency ambulance service.

(c) A licensed ambulance service which offers non-emergency service may advertise its non-emergency or business telephone number for other than emergency use, provided that in any print, audio or video advertising the phrase "FOR EMERGENCIES — CALL 9-1-1" is provided. When using the phrase "FOR EMERGENCIES — CALL 9-1-1" in print, it must be in bold-faced type at least one and one-half times the font size in which the non-emergency or business telephone number is displayed.

(d) Contents of ambulance service advertising must include:

(A) The legal name of the ambulance service indicated on the license issued by the Authority;

(B) If advertising 24-hours-a-day operation, the licensed ambulance service must provide uninterrupted service 24-hours-a-day, 7 days-a-week, 365 days-a-year; and

(C) If the licensed ambulance service provides service for only a portion of a 24-hour day or week, any advertising must specify the hours and days of operation.

(e) The licensed ambulance service must maintain copies of all print, audio, video, and all other types of advertisements for one year after use and distribution have ceased, and must make those copies available to the Authority upon request.

(f) Novelty or promotional items which are not distributed to the general public do not meet the definition of advertisement.

(4) A licensed ambulance service shall require each person staffing an ambulance or providing prehospital emergency or non-emergency care to display his or her level of licensure on the outermost garment of his or her

usual work uniform at all times while staffing an ambulance or rendering patient care, and shall make reasonable efforts to display this information under other circumstances.

(5) If a licensed ambulance service accepts students for Paramedic internships from an accredited teaching institution, the licensed ambulance service must:

(a) Have a signed and dated contract with each teaching institution providing internship students; and

(b) Use qualified preceptors, as defined by OAR 333-265-0000, who will be assigned to supervise, document and evaluate the Paramedic interns.

(6) Any EMS related continuing education offered by the licensed ambulance service or designee must be documented in accordance with OAR 333-265-0140 sections (3) and (4) and provided to the employee or volunteer.

(7) All records relating to an ambulance service's operations must be retained by the licensee or the licensee's successors or assignees for not less than seven years from the date of implementation, purchase, dispatch, creation or longer if so required by law or regulation. The record keeping mechanism may be in any permanent form including paper or on magnetic media provided that the information can be made readily available for inspection by the Authority.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991, 820.330

Hist.: HD 18-1994, f. 6-30-94, cert. ef. 7-1-94; OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 11-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2013, f. & cert. ef. 1-25-13; PH 14-2016, f. & cert. ef. 4-28-16; Renumbered from 333-250-0040, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0255

Facility

(1) A building used by the licensed ambulance service shall be kept clean, in good repair and free from fire and safety hazards.

(2) A licensed ambulance service must provide:

(a) A facility or area for sleeping or resting for an employee or volunteer working a 24-hour shift;

(b) Adequate toilet, hand-washing and shower facilities with hot and cold running water, antiseptic soap and clean towels for hand and body drying. If the licensed ambulance service does not have shower facilities, the licensed ambulance service must have a signed agreement or contract with a medical facility or other entity to make available shower facilities to ambulance personnel for the purpose of showering after coming in contact with medical or other biohazardous waste;

(c) Clean and soiled linen receptacles in separate areas in accordance with the Oregon Occupational Safety and Health Division and other rules governing the handling of special medical wastes;

(d) Designated secure storage for all medications which are deteriorated, outdated, misbranded, adulterated or otherwise unfit for use;

(e) Designated storage for malfunctioning patient care equipment clearly marked "out-of-service" until the equipment has been repaired or replaced; and

(f) Secure storage for patient care equipment, supplies and medications, or alternatively, a signed agreement with a medical facility that the medical facility will provide the patient care equipment, supplies, and medications.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0265

Policies and Procedures

(1) The licensed ambulance service must have written policies and procedures to carry out daily ambulance service operations including, but not limited to:

(a) Work practice controls for bloodborne pathogens in compliance with OAR chapter 437, division 2, subdivision Z;

(b) Storage and security of medications including controlled substances if authorized by the EMS medical director that meet the requirements of the Oregon Board of Pharmacy in OAR chapter 855 and the US Drug Enforcement Administration found in 21 CFR 1301.75(b);

(c) Identification, storage and security of all medications, fluids and controlled substances that are deteriorated, outdated, misbranded, adulterated or otherwise unfit for use that are readily identified as defective and stored in a separate location from usable products. Security procedures must be the same as for usable supplies;

(d) Destruction of outdated medications including controlled substances if authorized by the

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EMS medical director that meet the requirements of the Oregon Board of Pharmacy in OAR chapter 855 and the US Drug Enforcement Administration found in 21 CFR 1307.21;

(e) Identification and storage of malfunctioning patient care equipment clearly marked "out-of-service" to assure that defective equipment will not be used, if applicable;

(f) Employee, volunteer or ambulance based clinician notification requirements to the licensed ambulance service when an employee, volunteer or ambulance based clinician is impaired by excessive fatigue, illness, injury or other factors that may reasonably be anticipated to constitute a threat to the health and safety of patients or the public;

(g) Reporting of suspected child abuse as required in ORS 419B.005 through 419B.050;

(h) Reporting of suspected elder abuse as required in ORS 124.050 through 124.095;

(i) Patient rights in accordance with OAR 333-250-0330;

(j) Providing secure transport for patients in custody in accordance with OAR 309-033-0435, if the licensed ambulance service has been authorized to perform this service;

(k) Operation of an ambulance for both emergency and non-emergency situations;

(l) Vehicle cleanliness standards including frequency of cleaning and cleaning required after each patient transport;

(m) Removal of an ambulance from service when the mechanical condition of an ambulance is sufficiently unreliable so as to endanger or potentially endanger the health, safety, or welfare of a patient or crew member;

(n) Managing a mechanical breakdown including repairing or replacing a damaged tire or wheel when the ambulance is in operation;

(o) Actions necessary when an ambulance is involved in an accident, including the submission of a legible copy of the Department of Motor Vehicles Accident Report to the Authority within 10 business days of the accident;

(p) Release of continuing education records completed by an EMS provider or employee through the licensed ambulance service in a verifiable format to a requesting party within five business days of the request; and

(q) Release and destruction of patient care reports (PCRs) in accordance with OAR 333-250-0310;

(2) The licensed ambulance service must have a process in place to assure that employees, volunteers, ambulance based clinicians, agents and EMS medical directors:

(a) Have access to current policies and procedures;

(b) Have access to state, federal and local rules and regulations governing the operation of a licensed ambulance service; and

(c) Are informed of changes to policies or procedures.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0270

Personnel

(1) The licensed ambulance service must ensure that the service, employees, volunteers, ambulance based clinicians, agents and EMS medical directors comply with all of the requirements of these rules, ORS chapter 682, ORS 820.300 through 820.380, OAR division 333, chapter 255, and other applicable federal, state and local laws and regulations governing the operation of a licensed ambulance service.

(2) Prior to an employee, volunteer, or ambulance based clinician being allowed to staff an ambulance, the licensed ambulance service shall:

(a) Provide and require that each employee, volunteer, and ambulance based clinician complete an initial orientation program that includes but is not limited to:

(A) Ambulance service standing orders;

(B) Ambulance service policies and procedures;

(C) Driving and operating requirements for ambulance vehicles; and

(D) Operations of equipment.

(b) Ensure that each employee, volunteer, and ambulance based clinician has successfully completed the following training:

(A) Bloodborne pathogen and infectious disease training that meets or exceeds standards found in OAR chapter 437, division 2, subdivision Z;

(B) Hazardous materials awareness training that meets or exceeds standards found in OAR chapter 437, division 2, subdivision H;

(C) Emergency vehicle operator's course of instruction prior to independently operating an ambulance. The course must meet or be equivalent to the National Safety Council for Emergency Vehicle Operators Course

(EVOV 3) or National Fire Protection Agency (NFPA) Fire and Emergency Service Vehicle Operations Training standards;

(D) Air medical crew training in accordance with chapter 333, division 255 when operating an air ambulance; and

(E) Proper operation of all ambulances and equipment that he or she is authorized to use, and is physically capable, and has the ability to lift and move patients, and assist in extrication of patients when necessary, if authorized to do so.

(3) In addition to the initial orientation program described in subsection (2)(a) of this rule, a licensed ambulance service shall ensure and document in the personnel file that all EMS providers and ambulance based clinicians receive training on:

(a) The proper use of any new equipment, procedure or medication prior to being placed into operation on an ambulance; and

(b) Secure transportation of patients in custody in accordance with OAR 309-033-0437, if the licensed ambulance service has been authorized to perform this service.

(4) If a licensed ambulance service contracts with or employs an ambulance based clinician for the purpose of providing advanced level care, the licensed ambulance service shall ensure that the ambulance based clinician meets all of the applicable training requirements in sections (2) and (3) of this rule and have documentation that the clinician has completed the following:

(a) A current AHA, Advanced Cardiac Life Support course or equivalent and a current AHA, Pediatric Advanced Life Support course or equivalent; and either

(b) A current Prehospital Trauma Life Support course;

(c) A current Basic Trauma Life Support course;

(d) A current Trauma Emergency Assessment Management (TEAM) course; or

(e) A Trauma Nurse Core Course (TNCC).

(5) The TEAM and TNCC courses referenced in section (4) of this rule must include a supplemental prehospital rapid extrication training session.

(6) In order to operate a ground ambulance, the licensed ambulance service must:

(a) Ensure the licensed ambulance service and its employees, volunteers or ambulance based clinicians:

(A) Comply with all applicable Oregon Motor Vehicle Code statutes relating to motor vehicle and emergency vehicle operations, ORS 820.300 through 820.380 and ORS chapter 445;

(B) Complete an emergency ground ambulance operator's training in accordance with subsection (2)(b) of this rule; and

(C) Comply with all applicable policies and procedures.

(b) Ensure the driver of a ground ambulance is a licensed EMS provider in accordance with OAR chapter 333, division 265 and has a valid driver's license or if the driver is not a licensed EMS provider, ensure that the driver:

(A) Has a valid driver's license;

(B) Has a current Basic Life Support (BLS) Provider card or proof of course completion that meets or exceeds the 2015 American Heart Association (AHA) Cardiopulmonary Resuscitation (CPR) and Emergency Cardiovascular Care (ECC) guidelines;

(C) Has completed the following training:

(i) Emergency ground ambulance operator's training in accordance with subsection (2)(b) of this rule;

(ii) Bloodborne pathogen and infectious disease training that meets or exceeds standards found in OAR chapter 437, division 2, subdivision Z; and

(iii) Hazardous materials awareness training that meets or exceeds the Oregon Occupational Safety and Health Division standards found in OAR chapter 437, division 2, subdivision H;

(D) Signs a statement that he or she is:

(i) Not addicted to alcohol or controlled substances and is free from any physical or mental condition that might impair his or her ability to operate or staff an ambulance; and

(ii) Physically capable of assisting in the extrication, lifting and moving of a patient at the direction of an EMS provider; and

(E) Had a criminal background check conducted by the licensed ambulance service that determined the driver was suitable to operate a ground ambulance; or

(F) Has been certified by the Department of Public and Safety Standards and Training within the last 365 days.

(c) Have a certified copy of the qualified driver's driving record completed through the Oregon Department of Motor Vehicles, Automated

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Reporting System (ARS) Program or equivalent. If the driver has an out-of-state driver's license, the licensed ambulance service must obtain an equivalent certified copy driving record from that state, if available and if not available, conduct an annual driving record check. The latest copy must be kept in the driver's personnel file.

(7) A licensed ambulance service may not permit an employee, volunteer or ambulance based clinician to operate an ambulance, equipment, or have contact with a patient if the employee, volunteer or ambulance based clinician:

(a) Is taking any medication that could impair safe operation and handling of the ambulance, equipment, or patient; or

(b) Has consumed any alcoholic beverages within the last eight hours.

(8) In order to provide air ambulance service, the licensed ambulance service must ensure that the licensed ambulance service, employee, volunteer or ambulance based clinician:

(a) Comply with the Federal Aviation Regulation (FAR), 14 CFR Part 135; and

(b) Successfully complete the 2004 Association of Air Medical Services (AAMS) Guidelines or equivalent. There must also be an annual review of the Air Medical Crew course material, the length of which must be established by the EMS medical director.

(9) Prior to independently staffing an ambulance, an employee, volunteer or ambulance based clinician must begin the Hepatitis-B immunization series or have a signed statement of declination.

(10) The licensed ambulance service must submit a completed reportable action form to the Authority, within the times specified, for any of the following actions:

(a) Hiring a new employee or volunteer, within 14 business days;

(b) Terminating or suspending an employee or volunteer for cause, within 14 business days; and

(c) Disciplinary action taken by the licensed ambulance service or the EMS medical director for unprofessional conduct as defined in OAR 333-265-0000, within 14 business days.

(11) A licensed ambulance service must not schedule or allow an employee, volunteer or ambulance based clinician to serve on an ambulance who is impaired by excessive fatigue, illness, injury or other factors that may reasonably be anticipated to constitute a threat to the health and safety of patients or the public.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: OH 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 11-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2013, f. & cert. ef. 1-25-13; PH 14-2016, f. & cert. ef. 4-28-16; Renumbered from 333-250-0041, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0280

Personnel File Documentation

The licensed ambulance service must maintain a complete and current personnel file for each employee, volunteer, ambulance based clinician, agent and EMS medical director including but not limited to, the following information:

(1) Full name;

(2) Current home mailing address;

(3) Affiliation status, listed as either an employee full-time paid, employee part-time paid, contractor or volunteer;

(4) Verifiable written documentation that the employee, volunteer or ambulance based clinician has completed required training including when and where training was obtained;

(5) Copies of:

(a) Reportable action forms as required under OAR 333-250-0270(10);

(b) Applicable professional certificates or licenses;

(c) A current driver's license;

(d) A current pilot's license if the employee or volunteer operates an air ambulance;

(e) A certified driving record in accordance with OAR 333-250-0270(6)(c);

(f) A current BLS Provider card or proof of course completion that meets or exceeds the 2015 American Heart Association (AHA) ECC and CPR guidelines or equivalent;

(g) Training records that identify completion of an initial orientation program and training requirements specified in these rules;

(h) Health records documenting:

(A) Initial tuberculosis (TB) screening and any subsequent screenings in accordance with the Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health-Care Settings, 2005, published in the Morbidity and Mortality Weekly Report by the Centers for Disease

Control and Prevention (CDC), December 30, 2005, and incorporated by reference; and

(B) Hepatitis-B immunizations or a signed statement of declination; and

(i) Qualified driver statement in accordance with OAR 333-250-0270(6)(b)(D).

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: OH 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 11-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2013, f. & cert. ef. 1-25-13; Renumbered from 333-250-0043, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0290

Communications and Dispatch

(1) The licensed ambulance service is responsible for:

(a) Having a valid license from the Federal Communications Commission (FCC) to operate an EMS radio on assigned frequencies, or proper authorization from another agency holding a valid FCC license to operate on designated radio frequencies;

(b) Having 24-hour-a-day telephone answering, or 24-hour-a-day telephone and text-to-9-1-1 answering, and dispatching capabilities or having a signed agreement or contract with a recognized primary or secondary Public Safety Answering Point (PSAP), that will provide telephone answering, or telephone and text-to-9-1-1 answering, and emergency dispatching services;

(c) Providing a reliable means of alerting and communicating with an ambulance crew before, during and after an ambulance call;

(d) Immediately routing all emergency calls received from the public on any of the licensed ambulance service's 10-digit telephone number or if received by text to the primary PSAP. When a licensed ambulance service receives a request for an emergency ambulance and the licensed ambulance service is a recognized secondary PSAP, the licensed ambulance service shall dispatch the ambulance and notify the primary PSAP for coordination of other emergency responder agencies;

(e) Ensuring that any request for an ambulance received on the licensed ambulance service's 10-digit telephone number or if received by text is answered or responded to by a live person or that there is an answering machine referring the caller to the appropriate emergency telephone number; and

(f) Maintaining ambulance dispatch records as prescribed in ORS 820.330 and 820.340. The records must be kept by the licensed ambulance service or the licensed ambulance service must have a signed agreement with the PSAP, service or agency that provides telephone answering, or telephone and text-to-9-1-1 answering, and dispatching services that they will maintain and make available copies of the official dispatch records for a minimum of seven years.

(2) When the licensed ambulance service employs dispatchers for the purpose of answering the telephone or responding to text-to-9-1-1, taking information regarding the need for an ambulance and dispatching the ambulance, the dispatcher must have written documentation of completing:

(a) The Department of Public Safety Standards and Training's Emergency Medical Dispatcher's Course or equivalent; and

(b) Four hours of annual refresher training for dispatchers that meets the standards set forth by the Department of Public Safety Standards and Training.

(3) An air ambulance must meet Federal Aviation Regulation (FAR), 14 CFR Part 135 of the Operating requirements; Commuter and on demand operations and rules governing persons on board such aircraft.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: OH 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 11-2010, f. 6-30-10, cert. ef. 7-1-10; Renumbered from 333-250-0046, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0300

EMS Medical Direction

(1) A licensed ambulance service must have an EMS medical director responsible for the duties described in OAR 847-035-0025(1) except:

(a) When the licensed ambulance service operates in non-contiguous counties, then the licensed ambulance service may have one EMS medical director in each non-contiguous county of operation; or

(b) Where a county or regional EMS system prescribes that multiple agencies within a county or region must have a governmentally appointed EMS medical director, that agency may have a different EMS medical director in contiguous counties. In this event, the signed agreement or contract may be between the EMS medical director and the county or regional EMS system.

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(2) The EMS medical director may delegate the duties described in OAR 847-035-0025(2) to one or more agents as defined in OAR 333-250-0205.

(3) A licensed ambulance service must ensure that an EMS medical director:

(a) Meets the requirements and duties as prescribed in OAR 847-035-0020 through 847-035-0030;

(b) Has a written set of treatment protocols for each level of service offered by the licensed ambulance service; and

(c) Has a signed and dated agreement or contract with the licensed ambulance service.

(4) When an EMS medical director authorizes the administration of controlled substances, the EMS medical director must have on file with the licensed ambulance service:

(a) A US Drug Enforcement Administration License listing the name of the licensed ambulance service and address where the controlled substances are stored when not on an ambulance; and

(b) A signed and dated policy describing the type and amount of controlled substances stored on each ambulance and how controlled substances will be stored, accessed, recorded, administered, destroyed and secured. It is the responsibility of the EMS medical director to ensure that the procedure meets the minimum US Drug Enforcement Administration requirements found in 21 CFR 1301.75(b).

(5) A licensed ambulance service shall ensure that:

(a) Controlled substances, when authorized by the EMS medical director, are stored, accessed, inventoried, administered, destroyed and secured in a manner consistent with the signed and dated procedure established by the EMS medical director. The procedure must be in accordance with the regulations promulgated by the US Drug Enforcement Administration (DEA) found in 21 CFR 1301.75(b).

(b) A copy of the EMS medical director's DEA license is maintained in a secure manner, inaccessible to the public, at each fixed ambulance location where controlled substances are stored other than in the ambulance.

(c) Pharmacological and medical supplies with expiration dates affixed thereon by the manufacturer or packager are removed from service no later than the expiration date. Expired pharmacological and medical supplies must be disposed of in accordance with applicable laws and regulations.

(d) Medications and equipment are stored in a manner that protects viability and proper operation; and

(e) Ambulances available for or subject to a call are maintained to allow immediate starting of the engine and to prevent medications and medical supplies from becoming environmentally degraded.

(6) A licensed ambulance service must notify the Authority in writing of:

(a) Any denial, suspension, or voluntary surrender of an EMS medical director's or agent's medical license or US Drug Enforcement Administration license within 72 hours; and

(b) Any change in the EMS medical director or agents, 21 days prior to the change.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 11-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2013, f. & cert. ef. 1-25-13; Renumbered from 333-250-0047, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0310

Patient Care Report

(1) A licensed ambulance service must complete a PCR in each instance where an ambulance arrives on the scene and patient contact is initiated.

(2) A complete PCR must be prepared by ambulance personnel and delivered to appropriate hospital staff at the time patient care is transferred, unless the PCR is provided electronically under section (3) of this rule.

(3) If a PCR is provided via electronic format, the licensed ambulance service shall ensure that personnel relay pertinent patient care information to hospital staff prior to leaving the hospital. A completed electronic report must be submitted to the hospital at a location designated by the hospital within 12 hours of the patient being transported to the hospital.

(4) If the ambulance crew is unable to complete the PCR at the time patient care is transferred, the ambulance crew may depart after receiving verbal verification from an emergency department employee involved with providing patient care that sufficient patient information has been transferred to support safe and timely continuation of patient care.

(5) The physician caring for the patient may request additional information or a completed PCR can be faxed or electronically sent to the hospital.

(6) A licensed ambulance service must ensure that a PCR contains:

(a) Data points as defined in the National Highway Transportation Safety Administration dataset dictionary (NEMESIS), using a version determined by the Authority; and

(b) For any patient meeting the criteria for trauma patient as defined in OAR 333-200-0010:

(A) The trauma band number; and

(B) Triage criteria as defined in OAR chapter 333, division 200, Exhibit 2.

(7) Notwithstanding the requirements in this rule, a completed PCR is not required when:

(a) There is a disaster or a multiple patient incident consisting of more than five patients or the number of patients prescribed in the county's ASA plan, and which results in a single ambulance transporting two stretcher patients at the same time or when an ambulance is required to make more than one trip to and from the incident site.

(b) In the situation described in subsection (7)(a) of this rule, the following information is acceptable patient care documentation as allowed by the triage tag used by the licensed ambulance service:

(A) The trauma system identification bracelet number or other identifier if not a trauma;

(B) A record of the times and results of vital signs and list of injuries; and

(C) A record of the times and types of treatment given.

(8) Every reasonable attempt must be made by the ambulance personnel or ambulance based clinicians to complete an approved PCR for each patient at the conclusion of the incident. The following minimum information is required:

(a) The time the crew assumed care;

(b) The time the patient was dropped off at the hospital; and

(c) The triage tag number or other identifier.

(9) The licensed ambulance service is responsible for:

(a) Storing PCRs in a secure manner, with limited access to the PCRs by office and ambulance personnel;

(b) Organizing the PCRs in a manner that will allow an authorized ambulance service representative to locate a PCR within a reasonable amount of time, given a patient's name and the date and time of the ambulance call;

(c) Establishing a procedure for releasing a PCR to a medical facility receiving the patient, the patient, the patient's family, the patient's legal guardian, an insurance company, an attorney, a law enforcement officer, or a law enforcement agency;

(d) Protecting the confidentiality of patient information including during quality improvement sessions by limiting access to the PCR and having all persons having access to PCRs sign a confidentiality statement; and

(e) Establishing a procedure for the method and verification of the destruction of a PCR which includes at a minimum:

(A) A medical record or report about a patient may not be destroyed for 10 years after the record or report is made, or longer if so required by law or regulation unless the patient is notified; and

(B) In the case of a minor patient, a medical record or report may not be destroyed until the patient attains the age of majority plus three years or for 10 years after the record or report is made, whichever is later, unless the parent or guardian of the minor patient is notified.

(10) In accordance with paragraph (9)(e)(B), the notification of a minor patient or the parent or guardian of the minor patient of the potential destruction of a prehospital care report must:

(a) Be made by first class mail to the last known address of the patient;

(b) Include the date on which the record of the patient shall be destroyed; and

(c) Include a statement that the record or synopsis of the record, if wanted, must be retrieved at a designated location within 30 days of the proposed date of destruction.

(11) A PCR is considered protected health information and may only be used or disclosed in accordance with state and federal privacy regulations.

(12) A PCR must be made available for review and duplication when requested by the Authority as authorized by ORS 41.675 and 41.685.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

ADMINISTRATIVE RULES

333-250-0320

Quality Assessment and Performance Improvement

(1) The licensed ambulance service shall establish and maintain an effective quality assessment and performance improvement program that is approved by the EMS medical director and ambulance service administrator and may include:

(a) A method to monitor, evaluate and improve organizational efficiency and care delivery;

(b) A method to select and track performance improvement indicators which may include, but are not limited to:

(A) Accurate patient assessment;

(B) Medical intervention delivered in accordance with established protocols;

(C) Success of skills;

(D) Quality of clinical documentation; and

(E) Clinical outcome data;

(c) A process for investigating and addressing patient safety issues raised by means other than measured indicators; and

(d) A defined quarterly reporting process for performance improvement activities and issues including:

(A) Documenting and reporting individual issues and clinical indicator results; and

(B) Documenting and reporting aggregate data of clinical indicators and other activities to staff.

(2) To assist the licensed ambulance service and the EMS medical director in determining if appropriate and timely emergency medical care was rendered to a patient, the ambulance service designated official may request the following information from the receiving hospital as authorized by ORS 682.056:

(a) Patient admit status and unit admitted to;

(b) Any procedure listed in the National Highway Transportation Safety

Administration dataset dictionary (NEMESIS), using a version to be determined by the Authority, and performed on the patient within the first hour of being admitted;

(c) Any medication administered to the patient within the first hour of being admitted; and

(d) Trauma system entry by emergency department staff.

(3) Information provided under section (2) of this rule is considered confidential pursuant to

ORS 682.056. Any employee or volunteer participating in a quality improvement session must have a signed confidentiality statement in their personnel file.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0330

Patient Rights for Emergency Medical Care and Transportation

(1) An ambulance service licensed by the Authority shall maintain written policies and procedures regarding patient rights.

(2) A statement of patient rights shall be distributed to each employee or volunteer and made available in the business office and in each satellite location.

(3) The statement of patient rights shall include, but is not limited to, the following:

(a) Access to appropriate emergency medical care and transportation without regard to race, ethnicity, religion, age, gender, sexual orientation, or disability;

(b) EMS providers will be considerate and respectful to all patients regardless of status;

(c) Opportunity to refuse any medical care or transportation to a medical facility when informed about the care to be provided and the risks associated with refusing medical care or transportation;

(d) Transportation to a clinically appropriate medical facility of the patient's choice without questioning ability to pay. The agency may elect to transport to a closer, appropriate medical facility if a patient's facility of choice:

(A) Is unreasonable due to unsafe conditions; or

(B) Requires an ambulance to be taken out of service for an unreasonable amount of time;

(e) When appropriate, opportunity to request private transport, for example from a friend or family member;

(f) Patient's health information will be protected in accordance with state and federal privacy laws;

(g) Opportunity to receive, upon request, medical information relating to the care or transport provided by EMS providers;

(h) Opportunity to receive, upon request, a reasonable explanation of any charges for emergency medical care provided by EMS providers or for ambulance services; and

(i) Information on how and where to file a complaint about the services performed is posted and available.

(4) Notwithstanding subsection (3)(d) of this rule, a licensed ambulance service may transport a patient without consent if the patient is incapacitated or cannot make sound decisions based upon illness, injury or age.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.99

Hist.: PH 14-2016, f. & cert. ef. 4-28-16; Renumbered from 333-250-0085, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0340

Variance from Standards

(1) A licensed ambulance service may request a variance from the standards established in ORS 820.330 to 820.380, ORS chapter 682 and these rules when:

(a) The licensed ambulance service believes that compliance with a rule is inappropriate because of special circumstances which would render compliance unreasonable, burdensome, or impractical due to special conditions or causes, or because compliance would result in substantial curtailment of necessary ambulance service; and

(b) A city ordinance or county ASA plan exists, and the licensee has presented his or her request for a variance to the local city or county governing body and that body has given their approval for the proposed variance.

(2) A request for a variance must be submitted to the Authority in writing and include the following information:

(a) The specific rule for which a variance is requested;

(b) A description of the special circumstances relied upon to justify the variance;

(c) What alternatives were considered, if any and why alternatives (including compliance) were not selected;

(d) An explanation of why the proposed variance will not jeopardize patient health and safety;

(e) The proposed duration of the variance; and

(f) A detailed and realistic plan to resolve the need for a future variance.

(3) The request for a variance may be presented to the State Emergency Medical Service Committee at a regularly scheduled meeting. The EMS Director or EMS Deputy Director, after considering the Committee's recommendation, when requested, may grant a variance.

(a) A variance shall be granted for a period of time as prescribed by the Authority; and

(b) A subsequent variance may only be granted when the licensed ambulance service has demonstrated to the Authority, insofar as possible, adequate progress in resolving the need for the initial variance as described in the plan.

Stat. Auth.: ORS 682.017, 682.068 & 682.079

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: HD 18-1994, f. 6-30-94, cert. ef. 7-1-94; OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 1-2013, f. & cert. ef. 1-25-13 Renumbered from 333-250-0050, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0350

Complaints

(1) Any person may make a complaint verbally or in writing to the Authority regarding an allegation against a licensed ambulance service of a violation of any licensing law.

(2) The identity of a person making a complaint will be kept confidential as permitted by law.

(3) An investigation will be carried out as soon as practicable after the receipt of the complaint in accordance with OAR 333-250-0360.

(4) If the complaint involves an allegation of criminal conduct or an allegation that is within the jurisdiction of another local, state or federal agency, the Authority will refer the matter to that agency.

(5) The Authority does not have jurisdiction over and shall not take action on complaints that relate solely to rates charged to a patient by a licensed ambulance service.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

ADMINISTRATIVE RULES

333-250-0360

Investigations

(1) As soon as practicable after receiving a complaint, taking into consideration the nature of the complaint, Authority staff will begin an investigation.

(2) An ambulance service shall permit Authority staff access to the service agency during an investigation. For purposes of an investigation, giving advanced notice to the licensed ambulance service is not required.

(3) An investigation may include but is not limited to:

(a) Interviews of the complainant, patients of the ambulance service, patient family members, witnesses, ambulance service management and staff;

(b) On-site observations of staff performance and the physical environment of the ambulance service or ambulance; and

(c) Review of documents and records.

(4) The Authority may make photographic, video-graphic or audio recording documentation as part of an investigation of non-compliance with ORS chapter 682 and these rules.

(5) Information obtained by the Authority during an investigation of a complaint or reported violation under this rule is confidential and not subject to public disclosure under ORS 676.175. Upon the conclusion of the investigation, the Authority may publicly release a report of its findings but may not include information in the report that could be used to identify the complainant or any patient of the ambulance service. The Authority may use any information obtained during an investigation in an administrative or judicial proceeding concerning the licensing of an ambulance service, and may report information obtained during an investigation to a health professional regulatory board as defined in ORS 676.160 as that information pertains to a licensee of the board.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0370

Surveys

(1) In addition to any investigation conducted under OAR 333-250-0360, the Authority may conduct a survey for the purpose of evaluating the eligibility of an ambulance service or an ambulance to receive or retain a license and to ensure the health, safety, and welfare of the persons who utilize ambulances.

(2) An ambulance service that acquires and maintains current status with a nationally recognized EMS service accreditation program that meets or exceeds Oregon requirements may be exempted from the survey process. A copy of the survey report from the nationally recognized EMS service accreditation program must be filed with the Authority for approval.

(3) Routine surveys of an ambulance service or an ambulance shall be scheduled with the management of the ambulance service at least 72 hours in advance of the survey unless otherwise mutually agreed upon by the Authority and the ambulance service representative.

(4) In conducting a survey or interview, the Authority representative must:

(a) Identify him or herself by presenting the Authority identification to the owner, manager, or ranking employee or volunteer present at the site of a survey or interview;

(b) Inform the ambulance service representative of the purpose for the survey or interview; and

(c) Inform the ambulance service representative when the survey or interview has been completed and the preliminary results of the survey only.

(5) An ambulance service shall permit Authority staff access to the facility and ambulance vehicles during a survey.

(6) A survey may include but is not limited to:

(a) Interviews of patients, patient family members, ambulance management and staff;

(b) On-site observations of staff performance and the physical environment of the ambulance facility or ambulance; and

(c) Review of documents and records.

(7) An ambulance service shall make all requested documents and records available to the surveyor for review and copying.

(8) The Authority may accept local city or county governing body inspections that meet or exceed requirements outlined in ORS chapter 682, OAR chapter 333, division 255 and these rules in lieu of a survey by the Authority.

(9) Following the survey, Authority staff shall prepare and provide the ambulance service administrator or designee specific and timely written notice of the findings.

(10) If the findings result in a referral to another regulatory agency, Authority staff shall submit applicable information to that referral agency for its review and determination of appropriate action.

(11) If no deficiencies are found during a survey, the Authority shall issue written findings to the ambulance service administrator indicating that fact.

(12) If deficiencies are found, the Authority shall take informal or formal enforcement action in accordance with OAR 333-250-0390 or 333-250-0400.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: HD 18-1994, f. 6-30-94, cert. ef. 7-1-94; OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 11-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2013, f. & cert. ef. 1-25-13 Renumbered from 333-250-0060, PH 7-2017, f. & cert. ef. 3-21-17

333-250-0380

Violations

In addition to non-compliance with any rules or laws that governs an ambulance service or ambulance service vehicle, it is a violation to:

(1) Refuse to cooperate with an investigation or survey, including but not limited to failure to permit Authority staff access to the ambulance service, its documents or records;

(2) Fail to implement a corrective action plan;

(3) Refuse or fail to comply with an order issued by the Authority;

(4) Refuse or fail to pay a civil penalty;

(5) Be convicted of a crime, including Medicare or Medicaid fraud, relating adversely to the person's capability of owning or operating an ambulance service;

(6) Make a material omission or misrepresentation of facts on an application for a license or variance, or in response to an inquiry or investigation. This includes fraud or deception in obtaining or attempting to obtain a license or variance or in any other transaction with the Authority;

(7) Loan, borrow, or use the license of another, or knowingly aid or abet the improper granting of a license;

(8) Deface, alter, remove or obliterate any portion of any official entry upon a license, licensing decal, or variance issued by the Authority;

(9) Refuse to respond to or render prehospital emergency care because of a patient's race, ethnicity, religion, age, gender, sexual orientation, disability, medical problem or financial inability to pay;

(10) Fail to promptly notify the Authority of a change of ownership;

(11) Fail to report to the Authority any matter required by ORS 682.220(4) and OAR 333-265-0080;

(12) Fail to protect health information from unlawful use or disclosure in accordance with state and federal privacy laws;

(13) Alter or inappropriately destroy medical records;

(14) Willfully prepare or file false reports or records, or induce another to do so;

(15) Engage in a pattern of any of the following:

(a) Incompetence, negligence or misconduct in operating the ambulance service or in providing emergency medical care and transportation to patients;

(b) Abuse or abandonment of patients;

(c) Failure to comply with the county ASA plan, area trauma plan, or other lawfully promulgated policies, plans, or procedures;

(d) Failure to meet response time standards as prescribed by the county ASA plan or if no ASA plan is in effect, the area trauma plan;

(e) Misuse or misappropriation of medications or medical materials;

and
(f) Other conduct determined by the Authority to pose a significant threat to the health, safety and well-being of ambulance patients.

(16) Fail to return a license as provided in OAR 333-250-0235; or

(17) Operate without a license.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0390

Informal Enforcement

(1) If during an investigation or survey Authority staff document violations of ambulance service licensing rules or laws, the Authority may issue a statement of deficiencies that cites the law or rule alleged to have been violated and the facts supporting the allegation. The Authority may share the statement of deficiencies with the applicable EMS medical director, local government, or county ASA administrator.

(2) Upon receipt of a statement of deficiencies, an ambulance service shall be provided an opportunity to dispute the Authority's survey findings but must still comply with sections (3) and (4) of this rule.

ADMINISTRATIVE RULES

Hist.: HD 18-1994, f. 6-30-94, cert. ef. 7-1-94; OHD 7-2001, f. & cert. ef. 4-24-01; PH 2-2007, f. & cert. ef. 2-1-07; PH 11-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2013, f. & cert. ef. 1-25-13; Renumbered from 333-250-0070, PH 7-2017, f. & cert. ef. 3-21-17

(a) If an ambulance service desires an informal conference to dispute the Authority's survey findings, the ambulance service shall advise the Authority in writing within three business days after receipt of the statement of deficiencies. The written request must include a detailed explanation of why the agency believes the statement of deficiencies is incorrect.

(b) An ambulance service may not seek a delay of any enforcement action against it on the grounds the informal dispute resolution has not been completed.

(c) If an ambulance service is successful in demonstrating the deficiencies should not have been cited, the Authority shall reissue the statement of deficiencies, removing such deficiencies and rescinding or modifying any remedies issued for such deficiencies. The reissued statement of deficiencies shall state that it supersedes the previous statement of deficiencies and shall clearly identify the date of the superseded statement of deficiencies.

(3) Depending on the nature and severity of the deficiency, a signed corrective action plan must be mailed to the Authority within a minimum of 24 hours or maximum of 30 business days, as specified by the Authority, from the date the statement of deficiencies was received by the ambulance service. A signed corrective action plan will not be used by the Authority as an admission of the violations alleged in the statement of deficiencies.

(4) An ambulance service shall correct all deficiencies by the date identified by the Authority, unless an extension of time is requested from the licensed ambulance service. A request for such an extension shall be submitted in writing and must accompany the corrective action plan.

(5) The Authority shall determine if a written corrective action plan is acceptable. If the corrective action plan is not acceptable to the Authority, the Authority shall notify the ambulance service owner in writing:

(a) Identifying which provisions in the plan the Authority finds unacceptable;

(b) Citing the reasons the Authority finds the provisions unacceptable; and

(c) Requesting that the corrective action plan be modified and resubmitted no later than 14 business days from the date notification of non-compliance was received by the ambulance service owner.

(6) Failure to respond to the Authority or if the ambulance service does not come into compliance by the date specified by the Authority, the Authority may:

(a) Propose to deny, suspend, or revoke the agency license;

(b) Place the ambulance service on probation; or

(c) Impose civil penalties.

(7) The Authority shall confirm by survey or other appropriate means that all deficiencies have been corrected.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

333-250-0400

Formal Enforcement

(1) If during an investigation or survey, Authority staff document a substantial failure to comply with ambulance service licensing rules or laws, or if an agency fails to pay a civil penalty imposed under ORS 682.224 and these rules, the Authority may issue a Notice of Proposed Suspension or Notice of Proposed Revocation in accordance with ORS 183.411 through 183.470.

(2) If during an investigation or survey, Authority staff document that an ambulance manifests evidence of a mechanical or equipment deficiency, which poses a significant threat to the health or safety of patients or crew, the Authority shall immediately suspend that ambulance from operation. No ambulance that has been suspended from operation may be operated until the licensed ambulance service has certified and the Authority has confirmed that all of the violations have been corrected.

(3) In the event that a license is suspended or revoked, the licensee must cease ambulance service operations and no person except the Authority may permit or cause the service to continue.

(4) The Authority shall notify applicable local government, county ASA administrator, and the EMS medical director of the ambulance service of the suspension or revocation of an ambulance service license, or the placing of a service on probation.

(5) If a principal owner of an ambulance service has had its ambulance service license revoked, following the opportunity for a hearing as provided by ORS chapter 183, that person may not be eligible to apply for or hold an ambulance service license for a period of two years from the date of revocation as specified in ORS chapter 682.

Stat. Auth.: ORS 682.017 & 682.068

Stats. Implemented: ORS 682.017 - 682.117, 682.991

333-250-0410

Civil Penalties

A person that violates licensed ambulance service rules or laws, an administrative order, or settlement agreement is subject to the imposition of a civil penalty not to exceed \$5,000 per violation.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.224

Hist.: PH 7-2017, f. & cert. ef. 3-21-17

Rule Caption: EMS Course and EMS Provider Licensure Requirements

Adm. Order No.: PH 8-2017

Filed with Sec. of State: 3-30-2017

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Notice Publication Date: 12-1-2016

Rules Amended: 333-265-0000, 333-265-0010, 333-265-0012, 333-265-0014, 333-265-0015, 333-265-0016, 333-265-0018, 333-265-0020, 333-265-0022, 333-265-0023, 333-265-0024, 333-265-0025, 333-265-0030, 333-265-0040, 333-265-0050, 333-265-0056, 333-265-0060, 333-265-0070, 333-265-0080, 333-265-0083, 333-265-0085, 333-265-0087, 333-265-0090, 333-265-0105, 333-265-0110, 333-265-0140, 333-265-0150, 333-265-0160, 333-265-0170

Rules Repealed: 333-265-0011

Rules Ren. & Amend: 333-265-0100 to 333-265-0045

Subject: The Oregon Health Authority (Authority), Public Health Division, Emergency Medical Services (EMS) and Trauma Systems Program is permanently amending, repealing and amending and renumbering Oregon Administrative Rules in chapter 333, division 265 relating to EMS course requirements and requirements for EMS provider licensure. Amendments are necessary in order to remove outdated fees, continuing education references, and provisional licensure requirement; align the rules with current national registry language and education standards; and provide additional options for rural communities to provide courses to EMS providers. Amendments also clarify EMS provider licensure reinstatement requirements after reverting to a lower level. Non-substantive changes have been made to ensure consistent use of terminology, make general updates consistent with current practice, update statutory and rule references, and clarify processes.

Rules Coordinator: Brittany Hall—(503) 449-9808

333-265-0000

Definitions

(1) "Advanced Emergency Medical Technician (AEMT or Advanced EMT)" means a person who is licensed by the Authority as an Advanced Emergency Medical Technician.

(2) "Ambulance Service" means any person, governmental unit, or other entity that operates ambulances and holds itself out as providing pre-hospital care or medical transportation to persons who are ill or injured or who have disabilities.

(3) "Authority" means the Emergency Medical Services and Trauma Systems Program, within the Oregon Health Authority, Public Health Division.

(4) "Business day" means Monday through Friday when the Authority is open for business, excluding holidays.

(5) "Candidate" means an applicant that has completed training in an emergency medical services provider course and has not yet been licensed by the Authority.

(6) "Clinical Experience (Clinical)" means those hours of the curriculum that synthesize cognitive and psychomotor skills and are performed under a preceptor.

(7) "Continuing Education" means education required as a condition of licensure under ORS chapter 682 to maintain the skills necessary for the provision of competent prehospital care. Continuing education does not include attending EMS related business meetings, EMS exhibits or trade shows.

(8) "Didactic Instruction" means the delivery of primarily cognitive material through lecture, video, discussion, and simulation by program faculty or through web or Internet-based communication.

ADMINISTRATIVE RULES

(9) "Direct Visual Supervision" means that a person qualified to supervise is at the patient's side to monitor the emergency medical services provider in training.

(10) "Educational Institution" means a degree granting community college, college or university or a licensed vocational school that is authorized or licensed by the Higher Education Coordinating Commission.

(11) "Emergency Care" means the performance of acts or procedures under emergency conditions in the observation, care and counsel of persons who are ill or injured or who have disabilities; in the administration of care or medications as prescribed by a licensed physician, insofar as any of these acts is based upon knowledge and application of the principles of biological, physical and social science as required by a completed course utilizing an approved curriculum in prehospital emergency care. However, "emergency care" does not include acts of medical diagnosis or prescription of therapeutic or corrective measures.

(12) "EMS" means Emergency Medical Services.

(13) "EMS Medical Director" has the same meaning as "Supervising Physician" in ORS 682.025.

(14) "Emergency Medical Responder (EMR)" means a person who is licensed by the Authority as an Emergency Medical Responder.

(15) "Emergency Medical Services (EMS) Agency" means any person, governmental agency or unit, or other entity that utilizes emergency medical services providers to provide prehospital emergency or non-emergency care. An emergency medical services agency may be either an ambulance service or a nontransporting service.

(16) "Emergency Medical Services Provider (EMS provider)" means a person who has received formal training in prehospital and emergency care, and is licensed to attend to any person who is ill or injured or who has a disability. Police officers, fire fighters, funeral home employees and other persons serving in a dual capacity, one of which meets the definition of "emergency medical services provider" are "emergency medical services providers" within the meaning of ORS chapter 682.

(17) "Emergency Medical Technician (EMT)" means a person who is licensed by the Authority as an Emergency Medical Technician.

(18) "EMT-Intermediate" means a person who is licensed by the Authority as an EMT-Intermediate.

(19) "Governmental unit" means the state or any county, municipality or other political subdivision or any department, board or other agency of any of them.

(20) "In Good Standing" means a person who is currently licensed and who does not have any restrictions placed on his or her license, or who is not on probation with a licensing agency or the National Registry for any reason.

(21) "Key party" means immediate family members and others who would be reasonably expected to play a significant role in the health care decisions of the patient or client and includes, but is not limited to, the spouse, domestic partner, sibling, parent, child, guardian and person authorized to make health care decisions of the patient or client.

(22) "Licensing Officer" is a person who is responsible for conducting an Emergency Medical Technician (EMT) or EMT-Intermediate psychomotor examination in a manner consistent with the standards of the National Registry and the Authority.

(23) "National Registry" means the National Registry of Emergency Medical Technicians.

(24) "Non-Emergency Care" means the performance of acts or procedures on a patient who is not expected to die, become permanently disabled or suffer permanent harm within the next 24-hours, including but not limited to observation, care and counsel of a patient and the administration of medications prescribed by a physician licensed under ORS chapter 677, insofar as any of those acts are based upon knowledge and application of the principles of biological, physical and social science and are performed in accordance with scope of practice rules adopted by the Oregon Medical Board in the course of providing prehospital care as defined by this rule.

(25) "Paramedic" means a person who is licensed by the Authority as a Paramedic.

(26) "Patient" means a person who is ill or injured or who has a disability and who is transported in an ambulance.

(27) "Person" has the meaning given that term in ORS 174.100.

(28) "Prehospital Care" means care rendered by EMS providers as an incident of the operation of an ambulance and care rendered by EMS providers as incidents of other public or private safety duties, and includes, but is not limited to "emergency care" as defined in this rule.

(29) "Preceptor" means a person approved by an educational institution and appointed by the EMS agency, who supervises and evaluates the performance of an EMS provider student during the clinical and field

internship phases of an EMS provider course. A preceptor must be a physician, physician assistant, registered nurse, or EMS provider with at least two years field experience in good standing at or above the level for which the student is in training.

(30) "Protocols" has the same meaning as standing orders.

(31) "Reciprocity" means the manner in which a person may obtain Oregon EMS provider licensure when that person is licensed in another state and certified with the National Registry.

(32) "Scope of Practice" means the maximum level of emergency or non-emergency care that an EMS provider may provide as set forth in rules adopted by the Oregon Medical Board.

(33) "Skills Examiner" means a person who attends an EMS provider psychomotor examination and who objectively observes and records each student's performance consistent with the standards of the National Registry.

(34) "Skills Instruction" means providing direct practical experience in the operation or function of specific tasks or equipment through active, hands-on participation by the student.

(35) "Standing Orders" means the written protocols that an EMS provider follows to treat patients when direct contact with a physician is not maintained.

(36) "Successful completion" means having attended 85 percent of the didactic and skills instruction hours (or makeup sessions) and 100 percent of the clinical and field internship hours, and completing all required clinical and internship skills and procedures and meeting or exceeding the academic standards for those skills and procedures.

(37) "Unprofessional Conduct" means conduct unbecoming a person licensed to perform emergency care, or detrimental to the best interests of the public and includes:

(a) Any conduct or practice contrary to recognized standards of ethics of the medical profession or any conduct or practice which does or might constitute a danger to the health or safety of a patient or the public or any conduct, practice or condition which does or might impair an emergency medical services provider's ability safely and skillfully to practice emergency or nonemergency care;

(b) Willful performance of any medical treatment which is contrary to acceptable medical standards; and

(c) Willful and consistent utilization of medical service for treatment which is or may be considered inappropriate or unnecessary.

(38) "Volunteer" means a person who is not compensated for their time to staff an ambulance or EMS agency, but who may receive reimbursement for personal expenses incurred.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 - 682.991

Hist.: HD 18-1994, 6-30-94, cert. ef. 7-1-94; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0010

Application for Approval of EMT, AEMT, EMT-Intermediate, and Paramedic Courses

(1) The Authority is responsible for approving EMT, AEMT, EMT-Intermediate and Paramedic courses.

(2) EMT, AEMT, EMT-Intermediate and Paramedic courses must be offered by an educational institution and must meet the standards established by the Oregon Department of Education in OAR chapter 581, division 49.

(3) Notwithstanding section (2) of this rule, the Authority may:

(a) Allow a non-educational institution to conduct an EMT course if there is no training available at an educational institution in a rural part of the state.

(b) Allow a non-educational institution to conduct an EMT-Intermediate course if there is no training available at an educational institution.

(4) A non-educational institution that wishes to conduct an EMT or EMT-Intermediate course in accordance with section (3) of this rule shall send a written request to the Authority including evidence that there is a documented need for the course and lack of training offered by an educational institution.

(5) EMT, AEMT, EMT-Intermediate and Paramedic courses must meet the requirements prescribed by the Authority in OAR 333-265-0014.

(6) EMT, AEMT, EMT-Intermediate and Paramedic courses must be taught by instructors that meet the requirements of OAR 333-265-0020.

(7) An educational institution or a non-educational institution approved by the Authority under section (3) of this rule must submit an application to the Authority on a form prescribed by the Authority that

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includes all the information necessary to determine whether the course meets the standards prescribed in OAR 333-265-0014 and 333-265-0020. The form must be received by the Authority at least 30 business days prior to the first day of class.

(8) The Authority will return an application that is incomplete to the applicant.

(9) The Authority will inform an applicant in writing whether the application has been denied or approved.

(10) No educational institution shall conduct an EMT, AEMT, EMT-Intermediate or Paramedic course until the Authority has approved the course.

(11) The Authority may deny or revoke the approval to conduct an EMT, AEMT, EMT-Intermediate or Paramedic course in accordance with ORS chapter 183 for failure to comply with OAR chapter 333, division 265.

Stat. Auth.: ORS 682.017, 682.208

Stats. Implemented: ORS 682.017, 682.208, 682.216

Hist.: HD 63, f. 6-6-74, ef. 6-25-74; HD 1-1981, f. & ef. 1-14-81; Renumbered from 333-023-0630; HD 19-1984, f. & ef. 9-10-84; HD 16-1986, f. & ef. 9-9-86; HD 19-1991, f. & cert. ef. 10-18-91; HD 8-1993, f. 6-22-93, cert. ef. 7-1-93; HD 18-1994, 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0030; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0012

Requirements for Conducting Emergency Medical Responder Courses

(1) An ambulance service or any other entity in Oregon may conduct an EMR course that meets the requirements of OAR 333-265-0014, if approved by the Authority.

(2) An ambulance service or entity that wants to conduct an EMR course must submit an application to the Authority on a form prescribed by the Authority that includes all the information necessary to determine whether the course meets the standards prescribed in OAR 333-265-0014 and whether the course director meets the requirements in OAR 333-265-0018. The form must be received by the Authority at least 30 business days prior to the first day of class.

(3) The Authority shall return an application that is incomplete to the applicant.

(4) No entity shall conduct an EMR course until the Authority has approved the course.

(5) The Authority may deny or revoke the approval to conduct an EMR course in accordance with ORS chapter 183 for failure to comply with OAR chapter 333, division 265.

Stat. Auth.: ORS 682.017, 682.208

Stats. Implemented: ORS 682.017, 682.208, 682.216

Hist.: PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0014

EMS Provider Course Requirements

(1) All EMS provider courses must have an EMS medical director. The EMS medical director must meet the qualifications of a supervising physician as defined in OAR 847-035-0001.

(2) All EMS provider courses must have a course director as defined in OAR 333-265-0020.

(3) An Oregon educational institution conducting EMT, AEMT, or Paramedic courses must have program faculty consisting of a designated program administrator, course EMS medical director, course directors, and may have guest instructors. The number of persons carrying out the responsibilities of conducting an EMT, AEMT, or Paramedic course may vary from program to program. One person, if qualified, may serve in multiple roles.

(4) An Oregon educational institution or Authority approved non-educational institution conducting EMT-Intermediate courses must have program faculty consisting of a designated program administrator, course EMS medical director, and course directors, and may have guest instructors. The number of persons carrying out the responsibilities of conducting an EMT-Intermediate course may vary from program to program. One person, if qualified, may serve in multiple roles.

(5) An EMR course must include:

(a) A curriculum that meets or exceeds the National Emergency Medical Services Education Standards published by the National Highway Traffic Safety Administration, January 2009 (DOT HS 811 077B);

(b) Didactic and skills instruction; and

(c) A psychomotor and cognitive examination.

(6) An EMT course must include:

(a) A curriculum that meets or exceeds the National Emergency Medical Services Education Standards published by the National Highway Traffic Safety Administration, January 2009 (DOT HS 811 077B);

(b) Didactic and skills instruction;

(c) Clinical education of at least eight hours in a hospital or acute care department or other appropriate clinical or acute care medical facility where the skills within an EMT scope of practice are performed under the supervision of a preceptor; and

(d) Prehospital experience of at least eight hours under the supervision of an EMT or above where the skills within an EMT scope of practice are performed.

(7) An AEMT course must include:

(a) A curriculum that meets or exceeds the National Emergency Medical Services Education Standards published by the National Highway Traffic Safety Administration, January 2009 (DOT HS 811 077B);

(b) Didactic and skills instruction; and

(c) A field internship that is described in OAR 333-265-0015.

(8) An EMT-Intermediate course must include:

(a) The EMT-Intermediate curriculum as prescribed by the Authority; and

(b) Didactic and skills instruction.

(9) A Paramedic course must include:

(a) A curriculum that meets or exceeds the National Emergency Medical Services Education Standards published by the National Highway Traffic Safety Administration, January 2009 (DOT HS 811 077B);

(b) Didactic and skills instruction;

(c) Clinical experience in hospital clinical areas where the skills within a paramedic scope of practice are performed under the supervision of a preceptor; and

(d) A field internship that is described in OAR 333-265-0016.

(10) All EMS provider courses must include instructions on Oregon statutes and rules governing the EMS system, medicolegal issues, roles and responsibilities of EMS providers, and EMS professional ethics.

(11) The Authority may deny or revoke course approval in accordance with the provisions of ORS chapter 183 for failure to comply with the requirements of this rule.

(12) A person must have a current Oregon EMT license or higher at the time of enrollment in an AEMT or Paramedic course.

Stat. Auth.: ORS 682.017, 682.208

Stats. Implemented: ORS 682.017, 682.208, 682.216

Hist.: PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0015

Advanced Emergency Medical Technician Field Internships

(1) A field internship is required as part of an AEMT course and shall include:

(a) Clinical experience performed under the supervision of a preceptor in a hospital emergency department, medical clinic, or in the field where a student must adequately demonstrate the ability to:

(A) Safely administer medications at least 5 times to a live patient;

(B) Safely gain vascular access at least 10 times on live patients of various age groups;

(C) Effectively ventilate at least 5 live patients of various age groups;

(D) Perform an adequate assessment and formulate and implement a treatment plan for the following:

(i) Patients with chest pain;

(ii) Patients with respiratory distress;

(iii) Patients with altered mental status; and

(iv) Pediatric, adult and geriatric patients; and

(b) Prehospital experience of at least eight hours participating in the provision of care during EMS or AMBULANCE CALLS under the supervision of an AEMT or above where the skills within the scope of practice of an AEMT are performed.

(2) Notwithstanding section (1)(a) of this rule, if a student with documented proof of clinical and field experience is unable to meet the live patient contacts prescribed, the student may complete the remainder of the requirements in a simulation lab performed under the supervision of a preceptor.

(3) A field internship must provide a student the opportunity to demonstrate the integration of didactic, psychomotor skills, and clinical education necessary to perform the duties of an entry-level AEMT.

(4) A student must successfully demonstrate a skill in the classroom lab or hospital clinical setting before that skill is performed and evaluated in a field internship.

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(5) All EMS and AMBULANCE CALLS shall be under the direct visual supervision of a preceptor. In order for a call to be accepted, the preceptor must document and verify satisfactory student performance, including application of specific assessment and treatment skills required of a licensed AEMT.

(6) For purposes of this rule., "AMBULANCE CALL" means an advanced life support, prehospital emergency medical services response which includes dispatch, scene response, patient care while riding in the patient compartment of an ambulance, and participation in specific assessment and treatment skills required of a licensed AEMT.

(7) "EMS CALL" means an advanced life support, prehospital emergency medical services response which includes dispatch, scene response, patient care and participation in specific assessment and treatment skills required of a licensed AEMT, but does not include the transport of a patient to a hospital.

(8) A student participating in a field internship shall not be considered one of the minimum staff required for an ambulance as described in OAR chapter 333, division 250.

Stat. Auth.: ORS 682.017, 682.208

Stats. Implemented: ORS 682.017, 682.208, 682.216

Hist.: PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0016

Paramedic Field Internships

(1) A field internship is required as part of a Paramedic course.

(2) A field internship must provide a student the opportunity to demonstrate the integration of didactic, psychomotor skills, and clinical education necessary to perform the duties of an entry-level paramedic.

(3) The student must successfully demonstrate a skill in the classroom lab or hospital clinical setting before that skill is performed and evaluated in a field internship.

(4) During a field internship a student must participate in providing care in at least 40 EMS or AMBULANCE CALLS with no less than eight each in cardiac, respiratory, general medical, and trauma emergencies, and with at least 30 of the calls being AMBULANCE CALLS. All EMS and AMBULANCE CALLS shall be under the direct visual supervision of a preceptor. In order for a call to be accepted, the preceptor must document and verify satisfactory student performance, including application of specific assessment and treatment skills required of a licensed Paramedic.

(5) A student participating in an internship shall not be considered one of the minimum staff required for an ambulance as described in OAR chapter 333, division 250.

(6) AMBULANCE CALL and EMS CALL has the same meaning given those terms in OAR 333-265-0015, except that all references to an AEMT are replaced with Paramedic.

Stat. Auth.: ORS 682.017, 682.208

Stats. Implemented: ORS 682.017, 682.208, 682.216

Hist.: PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0018

Course Director Qualifications for EMR Courses

(1) An ambulance service or entity that has been approved by the Authority to conduct an EMR course must have a qualified course director.

(2) An EMR course director must:

(a) Have appropriate training and experience to fulfill the role and have the credentials that demonstrate such training and experience;

(b) Be currently licensed in Oregon as an EMT or higher, have a minimum of three years of prehospital care experience and be in good standing with the Authority, or be an EMS medical director;

(c) Have a current Basic Life Support (BLS) instructor card or certificate of course completion that meets or exceeds the 2015 American Heart Association ECC guidelines or equivalent, unless this requirement is waived by the Authority in advance; and

(d) Have successfully completed one of the following:

(A) The National Association of EMS Educators Instructor I Course, developed in accordance with the U.S. Department of Transportation, National Highway Transportation Safety Administration, 2002;

(B) The National Fire Protection Association (NFPA) Fire Instructor I course;

(C) Have at least 40 hours of the Instructor Development Program offered by the DPSST;

(D) A minimum of three college credits in adult educational theory and practice or vocational educational theory and practice from an accredited institution of higher learning;

(E) A minimum of three years working as a full time EMT or higher with a licensed ambulance service and has experience conducting training; or

(F) Other instructor course approved by the Authority.

(3) An EMR Course Director:

(a) Is responsible for course planning and organizing, including scheduling lectures, coordinating, arranging, and conducting the written and psychomotor course completion and licensure examination;

(b) Is the primary instructor, who conducts at least 50 percent of the didactic sessions, unless this requirement is waived by the Authority in advance;

(c) Must ensure, if guest instructors are used, that the guest instructor is qualified to teach the subject matter, meets requirements set forth in OAR 333-265-0020, and presents lessons that address all objectives identified in the course curriculum for the topic being presented. A guest instructor must:

(A) Be qualified and have the expertise in the specific course subject; and

(B) Follow the course curriculum and meet the course objectives for that specific subject.

(d) Must ensure that after completion of the course and successfully passing the written and psychomotor examinations each student is offered guidance on the process and how to apply for licensure through the Authority; and

(e) Must have written documentation showing whether a student has successfully completed the course as defined in OAR 333-265-0014.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017

Hist.: PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0020

Approved EMT, AEMT, EMT-Intermediate, and Paramedic Course Director

(1) A course director for an EMT, AEMT, EMT-Intermediate or Paramedic course must:

(a) Be an EMS medical director; or

(b) Hold at least the level of Oregon licensure as the course being taught, be in good standing with the Authority, and have at least three years of experience at that licensure level or higher, and:

(A) Have a current Basic Life Support (BLS) instructor card or certificate of course completion that meets or exceeds the 2015 American Heart Association ECC guidelines or equivalent standards approved by the Authority; and

(B) Have successfully completed one of the following:

(i) The National Association of EMS Educators Instructor Course, developed in accordance with the U.S. Department of Transportation, National Highway Transportation Safety Administration, 2002;

(ii) The National Fire Protection Association (NFPA) Fire Instructor I course;

(iii) At least 40 hours of the Instructor Development Program offered by the DPSST; or

(iv) A minimum of three college credits in adult educational theory and practice or vocational educational theory and practice from an accredited institution of higher learning.

(2) In addition to the course director requirements in section (1) of this rule, a paramedic course director must:

(a) Be an EMS medical director and hold a current:

(A) American Board of Emergency Medicine Certificate; or

(B) Advanced Cardiac Life Support (ACLS) Instructor certificate and Advanced Trauma Life Support certificate or equivalent; or

(b) Be a licensed Paramedic in good standing with the Authority with at least three years of experience at the licensure level, and:

(A) Possess at least an associate's degree from an accredited institution of higher learning;

(B) Hold an ACLS Instructor certificate from the American Heart Association or equivalent; and

(C) Hold a Basic Trauma Life Support (BTLS) Instructor certificate or equivalent, or a Prehospital Trauma Life Support (PHTLS) Instructor certificate or equivalent.

(3) A guest instructor must:

(a) Be qualified and have the expertise in the specific course subject; and

(b) Follow the course curriculum and meet the course objectives for that specific subject.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017

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Hist.: HD 8-1993, f. 6-22-93, cert. ef. 7-1-93; HD 18-1994, 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0032; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0022

Program Administrator and Faculty Responsibilities

(1) A program administrator is responsible for course planning, the organization and administration of courses, periodic review of courses, program evaluation, and continued development and effectiveness of courses.

(2) A course EMS medical director shall:

(a) Provide medical direction for the didactic, clinical and field internship portions of an EMS provider course; and

(b) Act as the ultimate medical authority regarding course content, procedures and protocols.

(3) A course director for a specific course:

(a) Is responsible for organizing and planning the course, including scheduling lectures, coordinating and arranging clinical rotations, and field internships;

(b) Is the primary instructor, who conducts, is present at, or facilitates at least 50 percent of the didactic instruction sessions, unless this requirement is waived by the Authority in advance;

(c) Must ensure that:

(A) If guest instructors are used, that the guest instructor is qualified to teach the subject matter, meets the requirements set forth in OAR 333-265-0020, and presents lessons that address all objectives identified in the course curriculum for the topic being presented;

(B) Each student is aware of how to access the EMS provider licensure webpage, create a profile and apply for licensure; and

(C) Written documentation showing whether a student has successfully completed the course as defined in OAR 333-265-0014 is retained in accordance with the educational institution's policies and procedures.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017

Hist.: PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0023

EMS Provider Examinations

(1) EMR Exam:

(a) In order to be licensed as an EMR, a candidate shall complete and pass both a cognitive and psychomotor examination within 12 months of completing the required course.

(b) The EMR cognitive and psychomotor examination must be administered by an entity approved by the Authority to conduct EMR courses and shall use a cognitive and psychomotor exam approved by the Authority.

(2) EMT Exam:

(a) In order to be licensed as an EMT, a candidate shall complete and pass both the cognitive and psychomotor examination designated by the National Registry.

(b) The Authority has adopted the National Registry exam standard: Emergency Medical Technician, Psychomotor Examination User Guide; November 1, 2011, incorporated by reference.

(c) An EMT examination for licensure will be administered by a licensing officer and hosted by an educational institution or Authority approved non-educational institution that offers EMT courses.

(d) An EMT psychomotor examination must be attended by a licensing officer approved by the Authority who:

(A) Is licensed in Oregon at least at the level of examination they are administering with a minimum of two years field experience at that level or above and is in good standing with the Authority; and

(B) Has completed any training offered by the Authority explaining the role and responsibilities of a licensing officer.

(3) AEMT Exam:

(a) In order to be licensed as an AEMT, a candidate shall complete and pass both the cognitive and psychomotor examination designated by the National Registry.

(b) The Authority has adopted the National Registry exam standard: Advanced Level Examination Coordinator Manual; August 1, 2013, incorporated by reference.

(c) An AEMT psychomotor examination is a National Registry examination offered at various times during the year by the Authority. An AEMT candidate may also take the appropriate psychomotor examination in any state.

(4) EMT-Intermediate Exam: In order to be licensed as an EMT-Intermediate, a candidate shall complete and pass a psychomotor examination in accordance with OAR 333-265-0024.

(5) Paramedic Exam:

(a) In order to be licensed as a Paramedic, a candidate shall complete and pass both the cognitive and psychomotor examination designated by the National Registry.

(b) The Authority has adopted the National Registry exam standard: Advanced Level Examination Coordinator Manual; August 1, 2013, incorporated by reference.

(c) A Paramedic psychomotor examination is a National Registry examination offered at various times during the year by the Authority. A Paramedic candidate may also take the appropriate psychomotor examination in any state.

(6) The Authority shall establish the passing scores for EMR and EMT-Intermediate exams. The National Registry shall establish the passing scores for EMT, AEMT and Paramedic exams.

(7) In order to take the cognitive or psychomotor exam for an AEMT, EMT-Intermediate or Paramedic, the EMS provider must be currently licensed at the level immediately below the level they are wishing to attain, except as provided in section (8) of this rule.

(8) Notwithstanding section (7), a currently licensed EMT or AEMT may take the Paramedic cognitive or psychomotor exam if the EMT or AEMT is enrolled in a two year degree program at an educational institution.

(9) A candidate seeking accommodation under the American with Disabilities Act shall notify:

(a) The National Registry for the EMT, AEMT or Paramedic exam; or

(b) The Authority for the EMR or EMT-Intermediate exam.

(c) The Authority shall consider and act on the request in accordance with its policies and relevant laws. [Publications: The publication(s) referred to or incorporated by reference in this rule are available from the National Registry of EMT's website: www.nremt.org.]

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the National Registry of EMT's website: www.nremt.org.]

Stat. Auth.: ORS 682.017, ORS 682.208, & ORS 682.216

Stats. Implemented: ORS 682.017, 682.208, 682.216

Hist.: PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 15-2015, f. 8-28-15, cert. ef. 9-3-15; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0024

EMT-Intermediate Provider Examination

(1) The EMT-Intermediate examinations for licensure will be administered by a licensing officer and hosted by an educational institution or Authority approved non-educational institution that offers EMT-Intermediate courses.

(2) In order to take the EMT-Intermediate provider examination, a candidate shall be currently licensed as an AEMT or be registered with the National Registry as an AEMT.

(3) An EMT-Intermediate candidate who fails:

(a) Three or fewer skill stations of the EMT-Intermediate psychomotor examination may retest those skill stations failed on the same day with no additional charge by the Authority.

(b) One or more skill stations a second time must submit a re-examination fee and be scheduled through the Authority to retest any skill station failed.

(c) More than three skill stations of the EMT-Intermediate psychomotor examination must schedule a retest for a separate day, and submit a re-examination fee to the Authority.

(4) If a candidate fails the psychomotor examination three times, the candidate must submit official documentation of remedial education before becoming eligible to re-enter the licensure examination process. Following successful completion of remedial education, a candidate must re-take and pass the psychomotor examination within three additional attempts.

(5) A candidate must pass the psychomotor examination within 24 months after the completion of the required courses.

(6) A candidate who fails the psychomotor examination six times or does not complete the examination process within 24 months of the completion date of the initial required courses must successfully complete the entire EMT-Intermediate course and reapply for licensure.

(7) An EMT-Intermediate psychomotor examination must be attended by an Authority-approved licensing officer who:

(a) Is licensed in Oregon at least at an EMT-Intermediate level with at least two years field experience at that level or above and is in good standing with the Authority; and

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(b) Has completed training offered by the Authority explaining the role and responsibilities of a licensing officer.

Stat. Auth.: ORS 682.017 & 682.208
Stats. Implemented: ORS 682.017, 682.208 & 682.216
Hist.: PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0025

Application Process to Obtain an EMS Provider License

(1) For any person to act as an EMS provider, a license must be obtained from the Authority.

(2) All applicants for licensure:

(a) Must submit a completed electronic application in a manner prescribed by the Authority along with the applicable fees; and

(b) Consent to a criminal records check through the Law Enforcement Data System (LEDS), including a nationwide criminal records check by fingerprint identification in accordance with ORS 181A.195 and ORS 181A.200 if required.

(3) On or after January 1, 2018, all applicants for initial licensure must consent to a nationwide criminal records check by fingerprint identification in accordance with ORS 181A.195 and ORS 181A.200.

(4) The Authority may use information obtained through criminal history records to determine suitability for licensure in accordance with OAR 125-007-0200 through 125-007-0330.

(a) If the Authority determines the information contained in the criminal history record may result in denial of the application or imposed sanctions on the license, the applicant will be afforded reasonable time to complete, challenge, or correct the accuracy of the record before a final disposition or sanction is imposed.

(b) Procedures for obtaining a change, correction, or updating of an FBI identification record are set forth in Title 28, C.F.R., 16.34. Procedures for obtaining a change, correction, or updating of an Oregon criminal history record are set forth in OAR 257-010-0035.

(5) An applicant for EMR must:

(a) Be at least 16 years of age;

(b) Submit proof of successfully completing an approved course, including completion of all clinical and internship requirements, if applicable;

(c) Submit proof of passing the required cognitive and psychomotor examinations;

(d) Submit the electronic application for licensure within 12 months from the date that the applicant successfully passed the examinations described in subsection (5)(c) of this rule; and

(e) Provide authorization for the release of information, as necessary, from any persons or entities, including but not limited to educational institutions, employers, hospitals, treatment facilities, institutions, organization, governmental or law enforcement agencies.

(6) An individual who wishes to become licensed as an EMT, AEMT, EMT-Intermediate, or Paramedic shall:

(a) Be at least 18 years of age;

(b) Submit proof of passing the required cognitive and psychomotor examinations;

(c) For an EMT, AEMT or EMT-Intermediate applicant, submit proof that the applicant:

(A) Received a high school diploma;

(B) Passed a general education development test (GED); or

(C) Has a degree from an accredited institution of higher learning;

(d) For a Paramedic applicant, submit proof that the applicant has received an associate's degree or higher from an accredited institution of higher learning; and

(e) Provide an authorization for the release of information, as necessary, from any persons or entities, including but not limited to educational institutions, employers, hospitals, treatment facilities, institutions, organizations, governmental or law enforcement agencies in order for the Authority to complete the review of the application.

(7) Any fee for a criminal background check through LEDS or a nationwide criminal background check shall be the responsibility of the applicant.

(8) An applicant for an initial license as an EMS provider, who completed training in a program outside Oregon and has never been licensed in another state, must:

(a) Meet all requirements for that level as established in these rules;

(b) Demonstrate proof of current National Registry certification; and

(c) Make application within 24 months from the date that their training course was completed.

(9) Notwithstanding subsection (8)(c) of this rule, an applicant that has been on active duty in the military within the last four years may sub-

mit the application within 48 months from the date the training course was completed.

(10) An initial license must not exceed 30 months.

(11) If an applicant has been on active duty in the military within the past four years and the applicant can demonstrate proof of current National Registry certification for the level of license desired, current licensure in another state is not mandatory.

(12) The Authority may reject any application that is incomplete or is not accompanied by the appropriate fees.

Stat. Auth.: ORS 682.017 & 682.208

Stats. Implemented: ORS 682.017, 682.204, 682.208, 682.212, 682.216 & 682.218

Hist.: OHD 9-2001, f. & cert. ef. 4-24-01; Hist.: PH 10-2008, f. & cert. ef. 6-16-08; PH 11-2008(Temp), f. 6-19-08, cert. ef. 6-20-08 thru 12-12-08; Administrative correction 12-22-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0030

Fees for Licensure and License Renewal of an EMS Provider

(1) The following fees apply:

(a) Initial application for EMR — \$45;

(b) The initial application and same-day psychomotor examination fees for EMTs:

(A) EMT — \$110;

(B) AEMT — \$125

(C) EMT-Intermediate — \$125; and

(D) Paramedic — \$290.

(c) Cognitive re-examination fees for EMT-Intermediate — \$60.

(d) Psychomotor re-examination fees:

(A) EMT — \$55;

(B) AEMT — \$85

(C) EMT-Intermediate — \$85; and

(D) Paramedic — \$100.

(e) Reciprocity licensure fees:

(A) EMR — \$50;

(B) EMT — \$140;

(C) AEMT — \$165

(D) EMT-Intermediate — \$165; and

(E) Paramedic — \$300.

(f) Provisional licensure fee is an additional \$50.

(g) License renewal fees:

(A) EMR — \$23;

(B) EMT — \$55;

(C) AEMT — \$85

(D) EMT-Intermediate — \$85; and

(E) Paramedic — \$150.

(2) As authorized by ORS 682.216, a license renewal application submitted or postmarked after June 1 of the license renewal year must include a \$40 late fee in addition to the license renewal fee.

(3) If an EMS provider has been on active military duty for more than six months of a license renewal period which prevented the EMS provider from accessing continuing education, the Authority may approve an extension of the current license to permit obtaining the required educational hours.

(4) The Authority may waive the EMS provider license renewal fee for an ambulance service or non-transport EMS agency which utilizes volunteers to provide a majority of its services. The ambulance service or non-transport EMS agency may only request one waiver per renewal period on a form prescribed by the Authority.

(5) All fees established in this rule are nonrefundable. The Authority may waive a subsequent examination fee for a person who fails to appear for an examination due to circumstances that are beyond the control of the candidate.

(6) The fees established in section (1) of this rule apply to any application submitted on or after the effective date of these rules.

Stat. Auth.: ORS 682.017, 682.212, 682.216

Stats. Implemented: ORS 682.017, 682.212, 682.216

Hist.: HD 19-1984, f. & ef. 9-10-84; HD 16-1986, f. & ef. 9-9-86; HD 19-1991, f. & cert. ef. 10-18-91; HD 18-1994, 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0017; HD 8-1995, f. & cert. ef. 11-6-95; OHD 2-1999, f. & cert. ef. 2-4-99; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0040

Application Review and Approval

(1) The Authority will review an application for licensure as an EMS provider and will conduct a criminal background check in accordance with OAR 125-007-0200 through 125-007-0330.

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(2) If there are no issues that arise during the review of the application and the applicant meets all the requirements of ORS chapter 682 and these rules, the Authority will grant the applicant a license.

(3) If the applicant does not meet the standards for licensure or there are criminal history or personal history issues that call into question the ability of the applicant to perform the duties of a licensed EMS provider in accordance with ORS chapter 682 or these rules, the Authority may deny the applicant on the basis of the information provided in the application, or conduct an investigation in accordance with OAR 333-265-0085.

(4) Following an investigation the Authority may:

- (a) Deny the application;
- (b) Grant the application but place the applicant on probation;
- (c) Grant the application but place practice restrictions on the applicant; or
- (d) Grant the application if the criminal or personal history issues were resolved through the investigation to the Authority's satisfaction.

(5) Final actions taken by the Authority in denying an applicant, placing an applicant on probation, or by placing restrictions on the applicant's practice shall be done in accordance with ORS chapter 183.

(6) Nothing in this rule precludes the Authority from taking an action authorized in ORS chapter 682.

Stat. Auth.: ORS 682.017 & 682.208

Stats. Implemented: ORS 682.017, 682.204, 682.208, 682.216 & 682.220

Hist.: HD 63, f. 6-6-74, ef. 6-25-74; HD 1-1981, f. & ef. 1-14-81; Renumbered from 333-023-0615; HD 19-1984, f. & ef. 9-10-84; HD 16-1986, f. & ef. 9-9-86; HD 19-1991, f. & cert. ef. 10-18-91; HD 18-1994, 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0015; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 11-2008(Temp), f. 6-19-08, cert. ef. 6-20-08 thru 12-12-08; Administrative correction 12-22-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0045

Renewal of License

(1) The licenses of EMRs expire on June 30 of even-numbered years.

(2) The licenses of EMTs, Advanced EMTs, EMT-Intermediates and Paramedics expire on June 30 of odd-numbered years.

(3) An applicant for license renewal must:

(a) Complete and sign an application form prescribed by the Authority certifying that the information in the application is correct and truthful;

(b) Meet the requirements of ORS chapter 682 and these rules;

(c) Consent to a criminal background check in accordance with OAR 333-265-0025;

(d) Provide an authorization for the release of information to the Authority, as necessary, from any persons or entities, including but not limited to employers, educational institutions, hospitals, treatment facilities, institutions, organizations, governmental or law enforcement agencies in order for the Authority to make a complete review of the application.

(e) Complete the continuing education requirements in OAR 333-265-0110; and

(f) Submit a fee specified in OAR 333-265-0030.

Stat. Auth.: ORS 682.017 & 682.208

Stats. Implemented: ORS 682.017, 682.204, 682.208, 682.212 & 682.216

Hist.: HD 63, f. 6-6-74, ef. 6-25-74; HD 1-1981, f. & ef. 1-14-81; Renumbered from 333-023-0640; HD 19-1984, f. & ef. 9-10-84; HD 16-1986, f. & ef. 9-9-86; HD 19-1991, f. & cert. ef. 10-18-91; HD 18-1994, 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0040; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; Renumbered from 333-265-0100, PH 8-2017, f. & cert. ef. 3-30-17

333-265-0050

Licensure by Reciprocity

(1) A person registered with the National Registry as an EMR, EMT, AEMT, or Paramedic may apply to the Authority for licensure by reciprocity.

(2) A person registered with the National Registry may request licensure at a lower level than their National Registry certification if the person has previously been certified by the National Registry at the level of licensure for which the person is applying.

(3) A person applying for Oregon EMS provider licensure by reciprocity shall:

(a) Submit a completed electronic application in a manner prescribed by the Authority along with the applicable nonrefundable fee;

(b) Submit documentation of the EMS provider training which meets or exceeds the requirements for Oregon EMS provider licensure at the level of licensure for which the person is applying;

(c) If applying for Paramedic licensure by reciprocity, submit proof of having received an associate's degree or higher from an accredited institution of higher learning approved by the Authority or submit proof of hav-

ing worked for at least three years out of the last five years as a paramedic in either another state or in the United States military at the National Registry Paramedic level;

(d) If licensed in another state, be in good standing with that state's licensing agency and with the National Registry; and

(e) Consent to a criminal background check in accordance with OAR 333-265-0025.

(4) The Authority shall review an application for licensure by reciprocity and shall conduct a criminal background check.

(5) If there are no issues that arise during the review of the application and the applicant meets all the applicable requirements of ORS chapter 682 and these rules, the Authority shall grant the applicant a license by reciprocity.

(6) If the applicant does not meet the standards for licensure, or there are criminal history or personal history issues that call into question the ability of the applicant to perform the duties of a licensed EMS provider, in accordance with ORS chapter 682 or these rules, the Authority may deny the application on the basis of the information provided, or conduct an investigation in accordance with OAR 333-265-0085. Following such an investigation the Authority may take any action as specified in OAR 333-265-0040.

(7) The Authority shall be the sole agency authorized to determine equivalency of EMS provider course work presented from an out-of-state accredited institution of higher learning.

(8) The Authority shall be the sole agency authorized to determine equivalency of work experience in lieu of the associate degree requirement for paramedics.

(9) The Authority shall return any application that is incomplete, or cannot be verified.

Stat. Auth.: ORS 682.017, 682.208 & 682.218

Stats. Implemented: ORS 682.017, 682.204, 682.208, 682.212, 682.216, 682.218 & 682.220

Hist.: HD 63, f. 6-6-74, ef. 6-25-74; HD 1-1981, f. & ef. 1-14-81; Renumbered from 333-023-0620; HD 19-1984, f. & ef. 9-10-84; HD 16-1986, f. & ef. 9-9-86; HD 18-1990(Temp), f. & cert. ef. 6-19-90; HD 19-1991, f. & cert. ef. 10-18-91; HD 8-1993, f. 6-22-93, cert. ef. 7-1-93; HD 18-1994, 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0020; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2011, f. & cert. ef. 1-6-11; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0056

Temporary Licensure for Wildland Fire Response

(1) Notwithstanding OAR 333-265-0050, an individual licensed and in good standing as an emergency medical services provider in another state and currently certified by the National Registry may apply for a temporary license at the same level the EMS provider is currently certified by the National Registry for the purpose of providing emergency or non-emergency care to other individuals involved in responding to a wildland fire in Oregon.

(2) To apply for temporary licensure an individual must complete a temporary license application and provide any additional information required in the application.

(3) The Authority may conduct a criminal background check on an individual applying for temporary licensure.

(4) If the Authority issues a temporary license that license is only valid:

(a) For 90 calendar days from the date issued;

(b) While the individual is deployed firefighting or otherwise responding to a wildland fire; and

(c) For the purpose of treating individuals engaged in wildland fire response in Oregon.

(5) An individual licensed under this rule must:

(a) Function within the Oregon scopes of practice for EMS providers as described in OAR 847-035-0030;

(b) Practice with written standing orders issued by a supervising physician as defined in OAR 847-035-0001; and

(c) Comply with ORS chapter 682 and all rules adopted under ORS chapter 682.

Stat. Auth.: ORS 682.017, 682.216

Stats. Implemented: ORS 682.017, 682.216

Hist.: PH 12-2016, f. & cert. ef. 4-7-16; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0060

Paramedic Provisional Licensure

(1) As authorized by ORS 682.216, the Authority may issue a provisional Paramedic license to a Paramedic licensed in another state who meets the requirements in OAR 333-265-0050, except for the educational or employment experience requirements in OAR 333-265-0050(3)(c) and is

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in the process of obtaining an associate's degree or higher from an accredited institution for higher learning.

(2) The Authority may approve a provisional license if an applicant has twelve or fewer credits remaining to obtain an associate's degree or higher, and the credits can be completed within one year of provisional license approval.

(3) A provisional license may only be approved one time per applicant.

(4) An applicant shall comply with the application requirements in OAR 333-265-0050 and shall submit:

(a) A letter of sponsorship from an EMS agency in Oregon that states the applicant shall be immediately employed or has a conditional offer of employment, whether in a paid or volunteer capacity, and that the agency plans to sponsor the applicant throughout the duration of their provisional license if approved; and

(b) A letter from the applicant's sponsoring EMS agency's EMS medical director stating that the EMS medical director will serve as his or her EMS medical director while being provisionally licensed.

(5) The Authority may return any application that is incomplete, cannot be verified, or is not accompanied by the appropriate fee.

(6) A Paramedic with a provisional license issued under these rules shall enter into an agreement with the Authority and shall submit quarterly reports to the Authority describing the license holder's progress in obtaining an associate's degree or higher from an accredited institution for higher learning.

(7) A Paramedic provisional license shall be revoked if the person:

(a) Ceases active involvement with the sponsoring EMS agency;

(b) Fails to meet the conditions set forth in the agreement;

(c) Fails to cooperate or actively participate in a request from the Authority in order to obtain more information or required materials;

(d) Has his or her EMS provider scope of practice revoked or restricted by his or her EMS medical director; or

(e) Does not submit written documentation of the successful completion of any of the educational requirements set out in this rule

Stat. Auth.: ORS 682.017, 682.216

Stats. Implemented: ORS 682.017, 682.216

Hist.: HD 18-1994, 6-30-94, cert. ef. 7-1-94; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0070

Out-of-State EMS Provider Rendering Patient Care in Oregon

(1) Any person who provides prehospital emergency or non-emergency care in Oregon must be licensed as an Oregon EMS provider and function under an Authority-approved EMS medical director.

(2) Oregon EMS provider licensure is not required when:

(a) Specifically exempted by ORS 682.035;

(b) An out-of-state licensed EMS provider is transporting a patient through the state;

(c) An out-of-state licensed EMS provider is caring for and transporting a patient from an Oregon medical facility to an out-of-state medical facility or other out-of-state location;

(d) An out-of-state licensed EMS provider is caring for and transporting a patient originating from outside of Oregon to a medical facility or other location in Oregon; or

(e) A disaster or public health emergency has been declared under ORS chapter 401 or 433 and licensing provisions have been waived by the Governor.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017 & 682.204

Hist.: HD 63, f. 6-6-74, ef. 6-25-74; HD 1-1981, f. & ef. 1-14-81; Renumbered from 333-023-0625; HD 19-1984, f. & ef. 9-10-84; HD 16-1986, f. & ef. 9-9-86; HD 19-1991, f. & cert. ef. 10-18-91; HD 18-1994, 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0025; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0080

Reporting Obligations

(1) In accordance with ORS 676.150 and using a written or electronic form prescribed by the Authority, an EMS provider must notify the Authority within 10 calendar days of any action or event listed in sections (2) or (3) of this rule. Failure to comply with the reporting requirements of this rule may result in disciplinary action against the EMS provider.

(2) An EMS provider who has reasonable cause to believe another EMS provider has engaged in prohibited, dishonorable or unprofessional conduct as defined in ORS 676.150, 682.025, 682.220, and OAR 333-265-0083 shall report that conduct to the Authority after the EMS provider

learns of the conduct unless state or federal laws relating to confidentiality or the protection of health information prohibit such a disclosure.

(3) An EMS provider shall report to the Authority the following:

(a) Conviction of a misdemeanor or felony;

(b) A felony arrest;

(c) A disciplinary restriction placed on a scope of practice of the license holder by the EMS medical director;

(d) A legal action being filed against the license holder alleging medical malpractice or misconduct;

(e) A physical disability that affects the ability of the license holder to meet the applicable Functional Job Analysis of the National Standard Curriculum and the license holder continues to respond to calls and is providing patient care; or

(f) A change in mental health which may affect a license holder's ability to perform as a licensed EMS provider.

(4) State or federal laws relating to confidentiality or the protection of health information that might prohibit an EMS provider from reporting prohibited or unprofessional conduct include but are not limited to:

(a) Public Law 104-191, 45 CFR Parts 160, 162, and 164 (The Health Insurance Portability and Accountability Act, HIPAA);

(b) 42 CFR Part 2 (federal law protecting drug and alcohol treatment information);

(c) ORS 192.553 through 192.581 (state law protecting health information); and

(d) ORS 179.505 (written accounts by health care providers).

(5) After receiving a report described in sections (2) and (3), the Authority may conduct an investigation in accordance with OAR 333-265-0085.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017, 682.220 & 682.224

Hist.: HD 63, f. 6-6-74, ef. 6-25-74; HD 1-1981, f. & ef. 1-14-81; Renumbered from 333-023-0635; HD 16-1986, f. & ef. 9-9-86; HD 19-1991, f. & cert. ef. 10-18-91; HD 18-1994, 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0035; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0083

Conduct or Practice Contrary to Recognized Standards of Ethics

The following list includes, but is not limited to, conduct or practice by an EMS provider that the Authority considers to be contrary to the recognized standards of ethics of the medical profession:

(1) Knowing or willful violation of patient privacy or confidentiality by releasing information to persons not directly involved in the care or treatment of the patient;

(2) Illegal drug use on or off duty;

(3) Alcohol use within eight hours of going on duty or while on duty or in an on-call status;

(4) Violation of direct verbal orders from a physician who is responsible for the care of a patient;

(5) Violation of orders given by an online medical resource physician, whether delivered by radio or telephone;

(6) Violation of standing orders without cause and documentation;

(7) Use of invasive medical procedures in violation of generally accepted standards of the medical community;

(8) Any action that constitutes a violation of any statute, municipal code, or administrative rule that endangers the public, other public safety officials, other EMS providers, patients, or the general public (including improper operation of an emergency medical vehicle);

(9) Instructing, causing or contributing to another individual violating a statute or administrative rule, including an EMS provider acting in a supervisory capacity;

(10) Participation in the issuance of false continuing education documents or collaboration therein, including issuing continuing education verification to one who did not legitimately attend an educational event;

(11) Signing-in to an educational event for a person not actually present;

(12) Knowingly assisting or permitting another EMS provider to exceed his or her lawful scope of practice;

(13) Unlawful use of emergency vehicle lights and sirens;

(14) Providing false or misleading information to the Authority, to the State EMS Committee, to the Subcommittee on EMT Licensure and Discipline, to an EMS educational institution or clinical/field internship agency;

(15) Responding to scenes in which the EMS provider is not properly dispatched ("call-jumping"), whether in a private auto, ambulance, or other vehicle, in violation of local protocols, procedures, or ordinances, or interfering with the safe and effective operation of an EMS system;

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(16) Cheating on any examination used to measure EMS related knowledge or skills;

(17) Assisting another person in obtaining an unfair advantage on an EMS provider examination;

(18) Defrauding the Authority;

(19) Knowingly providing emergency medical care aboard an unlicensed ambulance;

(20) Violation of the terms of a written agreement with the Authority or an order issued by the Authority;

(21) Sexual misconduct that includes but is not limited to:

(a) Sexual harassment;

(b) Engaging or attempting to engage in a sexual relationship, whether or not the sexual relationship is consensual, with a patient, client, or key party; or

(c) Using an EMT-patient, EMT-client, or EMT-key party relationship to exploit the patient, client or key party by gaining sexual favors from the patient, client or key party.

(22) Arriving for duty impaired or in a condition whereby the EMS provider is likely to become impaired through fatigue, illness, or any other cause, as to make it unsafe for the employee to begin to operate an ambulance or provide patient care;

(23) Failure to cooperate with the Authority in an investigation, including failure to comply with a request for records, or a psychological, physical, psychiatric, alcohol or chemical dependency assessment; and

(24) Any violation of these rules or any law, administrative rule, or regulation governing ambulances, EMS providers, or emergency medical service systems.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017, 682.220, & 682.224

Hist.: PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0085

Investigations

(1) The Authority may conduct an investigation of an EMS provider if:

(a) The Authority receives a report in accordance with ORS 676.150 or complaint concerning an EMS provider;

(b) Personal or criminal history questions arise during a review of an application that raise questions about the EMS provider's ability to safely perform the duties of an EMS provider;

(c) A reportable action is received pursuant to OAR 333-265-0080; or

(d) The Authority receives information in any manner that indicates an EMS provider:

(A) Has violated ORS chapter 682 or these rules;

(B) May be medically incompetent;

(C) May be guilty of prohibited, unprofessional or dishonorable conduct; or

(D) May be mentally or physically unable to safely function as an EMS provider.

(2) The Authority may investigate the off-duty conduct of an EMS provider to the extent that such conduct may reasonably raise questions about the ability of the EMS provider to perform the duties of an EMS provider in accordance with the standards established by this division.

(3) Upon receipt of a report or complaint about an EMS provider or applicant, the Authority may conduct an investigation as described under ORS 676.165 and 682.220. Investigations shall be conducted in accordance with ORS 676.175, ORS 682.224, and this rule.

(4) The fact that an investigation is conducted by the Authority does not imply that disciplinary action will be taken.

(5) During an investigation the Authority may do any of the following:

(a) Request additional information from the EMS provider;

(b) Conduct a phone or in-person interview; or

(c) Request or order that the EMS provider undergo a psychological, physical, psychiatric, alcohol or chemical dependency assessment.

(6) Information obtained during an investigation shall be kept confidential and not disclosed to the public.

(7) In determining the appropriate disciplinary action, the Authority shall consider the following:

(a) The nature of the violation and relevant facts;

(b) The number of repeated or related offenses;

(c) Any other discipline or corrective action taken by an employer or supervising physician; and

(d) Letters of support, recommendation or concern if offered by the licensee or other party.

(8) Prior to taking any disciplinary action the Authority must determine if the EMS provider has been disciplined for the questioned conduct by the EMS provider's employer or supervising physician. The authority shall consider any such discipline or any other corrective action in deciding whether additional discipline or corrective action by the Authority is appropriate.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 676.165, 676.175, 682.017, 682.220, & 682.224

Hist.: PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0087

Discipline

(1) Upon completion of an investigation the Authority may do any of the following:

(a) Close the investigation and take no action;

(b) Issue a letter of reprimand or instruction;

(c) Place the EMS provider on probation;

(d) Place a practice restriction on the EMS provider;

(e) Suspend the EMS provider;

(f) Revoke the license of the EMS provider;

(g) Enter into a stipulated agreement with the EMS provider to impose discipline; or

(h) Take such other disciplinary action as the Authority, in its discretion, finds proper, including assessment of a civil penalty not to exceed \$5,000.

(2) Any disciplinary action taken by the Authority will be done in accordance with ORS chapter 183.

(3) The Authority may assess the costs of a disciplinary proceeding against an EMS provider. Costs may include, but are not limited to:

(a) Costs incurred by the Authority in conducting the investigation;

(b) Costs of any evaluation or assessment requested by the Authority;

and

(c) Attorney fees.

(4) An EMS provider may voluntarily surrender his or her license if the EMS provider submits a written request to the Authority specifying the reason for the surrender and the Authority agrees to accept the voluntary surrender.

(a) The Authority may accept a voluntary surrender of the EMS provider on the condition that the EMS provider does not reapply for licensure, or agrees not to reapply for a specified period of time.

(b) If an EMS provider who voluntarily surrendered his or her EMS provider license applies for reinstatement, the Authority may deny that person's application if the Authority finds that the person has committed an act that would have resulted in discipline being imposed while they were previously licensed.

(5) If an EMS provider's license is revoked, he or she may not reapply for licensure for at least two years from the date of the final order revoking the license.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017, 682.220 & 682.224

Hist.: PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0090

Reverting to a Lower Level of EMT Licensure

(1) An EMT, AEMT, EMT-Intermediate, or Paramedic may revert to a lower level of licensure at any time during a license period if the EMT, AEMT, EMT-Intermediate, or Paramedic:

(a) Submits a written request to the Authority specifying the reason for the change in the licensure level;

(b) Submits an application for license renewal for the lower level of licensure sought with the appropriate fee;

(c) Surrenders his or her current EMT, AEMT, EMT-Intermediate, or Paramedic license to the Authority;

(d) Is in good standing with the Authority;

(e) Adequately documents appropriate continuing education hours and courses for the licensure level the individual would revert to; and

(f) Receives written approval from the Authority for a change in licensure level.

(2) If an EMT, AEMT, EMT-Intermediate, or Paramedic requests reinstatement of the higher level of licensure after reverting to a lower level of licensure, the EMT, AEMT, EMT-Intermediate, or Paramedic must complete the following requirements:

(a) Submit a written request to the Authority specifying the reason for the request for reinstatement;

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(b) Submit an application for license renewal for the higher level of licensure requested for reinstatement;

(c) Consent to a criminal background check in accordance with OAR 333-265-0025;

(d) Provide an authorization for the release of information to the Authority, as necessary, from any persons or entities, including but not limited to employers, educational institutions, hospitals, treatment facilities, institutions, organizations, governmental or law enforcement agencies in order for the Authority to make a complete review of the application; and

(e) Submit the required fee specified in OAR 333-265-0030.

(3) In order to be considered for reinstatement in accordance with section (2) of this rule, the EMT, AEMT, EMT-Intermediate or Paramedic must be in good standing with the Authority and must have maintained required continuing education for the highest level of licensure requested for reinstatement as specified in OAR 333-265-0110.

(4) The continuing education required pursuant to section (3) of this rule must be maintained in accordance with OAR 333-265-0140 for the entire time period the EMS provider was reverted to a lower level.

(5) The Authority shall conduct an audit in accordance with OAR 333-265-0150 in order to verify compliance with sections (3) and (4) of this rule. If continuing education has not been maintained for the required time frame and at the level of licensure requested for reinstatement, the Authority shall deny reinstatement.

Stat. Auth.: ORS 682.017 & 682.208

Stats. Implemented: ORS 682.017, 682.204, 682.208, 682.212 & 682.216

HD 19-1991, f. & cert. ef. 10-18-91; HD 18-1994, 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0037; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 16-2010(Temp), f. & cert. ef. 7-16-10 thru 1-1-11; PH 1-2011, f. & cert. ef. 1-6-11; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0105

Reinstatement of an EMS Provider License

(1) To reinstate an expired Oregon EMR, EMT, AEMT, EMT-Intermediate, or Paramedic license that has been expired for less than one year, an applicant must:

(a) Submit a completed application for license renewal;

(b) Submit the appropriate license renewal fee plus a late fee; and

(c) Provide proof of National Registration or provide evidence of completion of continuing education requirements as specified in Appendix 1, incorporated by reference, and courses completed from the license holder's last successful application through the date of the present application for license renewal, as specified in this rule.

(2) Reinstatement of an EMR license that has been expired for more than one year will require retaking and passing the course and examinations.

(3) To reinstate an EMT-Intermediate license that has been expired for more than one year, but less than two years, a license holder must:

(a) Submit a completed application for licensure with the appropriate fee;

(b) Successfully complete the reinstatement program described in section (6) of this rule; and

(c) Successfully complete a simulated cardiac arrest management skill evaluated by the EMS medical director or a person approved by the Authority.

(4) To reinstate an EMT, AEMT or Paramedic license that has been expired for more than one year, but less than two years, a license holder must:

(a) Submit a completed application for licensure with the appropriate fee; and

(b) Successfully complete an Authority-approved reinstatement program described in this rule or

(c) Hold a current National Registry card.

(5) Reinstatement program for an EMT:

(a) Obtain an American Heart Association "Basic Life Support (BLS) Provider," or equivalent CPR course completion document;

(b) Complete an EMT Refresher Training Program accredited by the Commission on Accreditation for Prehospital Continuing Education (CAPCE);

(c) Pass the EMT cognitive and psychomotor examinations in accordance with OAR 333-265-0023(2); and

(d) Complete the above listed program requirements within two years from expiration date.

(6) Reinstatement program for an AEMT:

(a) Obtain an American Heart Association "Basic Life Support (BLS) Provider," or equivalent CPR course completion document;

(b) Complete a Basic Trauma Life Support (BTLS) course, or Prehospital Trauma Life Support (PHTLS) course;

(c) Pass the AEMT cognitive and psychomotor examinations in accordance with OAR 333-265-0023(3); and

(d) Complete the above listed program requirements within two years from expiration date.

(7) Reinstatement program for a Paramedic:

(a) Complete an Advanced Cardiac Life Support (ACLS) course;

(b) Complete a Basic Trauma Life Support (BTLS) course, or Prehospital Trauma Life Support (PHTLS) course;

(c) Complete an Advanced Pediatric Life Support (APLS), Pediatric Advanced Life Support (PALS), Pediatric Education for Prehospital Professionals (PEPP), or Neonatal Advanced Life Support (NALS) course;

(d) Complete the U.S. Department of Transportation, National Highway Traffic Safety Administration 2001 Paramedic: National Standard Curriculum Refresher Training Program, incorporated by reference;

(e) Pass the Paramedic cognitive and psychomotor examinations in accordance with OAR 333-265-0023(5); and

(f) Complete the above listed program requirements within two years of applying for reinstatement.

(8) If the reinstatement requirements described in sections (5) through (7) of this rule cannot be met prior to two years from the last EMS provider license expiration date, an applicant must follow the National Registry's re-entry requirements to obtain a new National Registry certification before applying for a new license as outlined in OAR 333-265-0025.

[ED. NOTE: Appendices referenced are not included in rule text.]

Stat. Auth.: ORS 682.216

Stats. Implemented: ORS 682.017, 682.216

Hist.: PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 16-2010(Temp), f. & cert. ef. 7-16-10 thru 1-1-11; PH 1-2011, f. & cert. ef. 1-6-11; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0110

Continuing Education Requirements for License Renewal

(1) All licensed EMS providers must maintain current CPR certification as specified in Appendix 1, complete continuing education requirements as specified in sections (4) through (8) of this rule and maintain and submit records in accordance with OAR 333-265-0140. Continuing education credits shall be completed between the date of the license holder's last successful application to the date of the license holder's current license renewal application.

(2) The following standards shall apply to the continuing education requirements identified in Appendix 1, incorporated by reference:

(a) Hour for hour credit shall be granted for:

(A) Attending training seminars, educational conferences, and continuing education classes within the license holder's scope of practice;

(B) Attending a live, webinar, or interactive online course for the same or higher level of licensure. For purposes of this rule, a webinar or interactive online course must have the ability to give, receive, and discuss information in real time;

(C) Online continuing education that provides a certificate of completion and is approved by the CAPCE;

(D) Attending an accredited college course relating to medical and EMS-related topics. For purposes of this rule, hour for hour credit shall only be granted if a course syllabus is provided to the Authority that specifies the number of hours on a specific topic; or

(E) Teaching any of the topics listed in Appendix 1, if the license holder is qualified to teach the subject.

(b) No more than 50 percent of the total hours needed for each subject may be obtained by:

(A) Self-study of medical journals, video or other media that is not CAPCE approved and is not facilitated by a live instructor. For purposes of this rule, each session of self-study will count 30 minutes per topic area and must be approved by the agency training officer, EMS medical director or the Authority; or

(B) Being a psychomotor skills examiner, if the license holder is qualified as such.

(3) An EMS medical director may require additional continuing education requirements and skill competency.

(4) An EMR is required to:

(a) Complete 12 hours of continuing education as specified in Appendix 1, incorporated by reference; or

(b) Complete all requirements of the National Registry for EMR recertification.

(5) An EMT is required to:

(a) Complete 24 hours of continuing education as specified in Appendix 1, incorporated by reference; or

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(b) Complete all requirements of the National Registry for Emergency Medical Technician recertification.

(6) An AEMT is required to:

(a) Complete 36 hours of continuing education as specified in Appendix 1, incorporated by reference; or

(b) Complete all requirements of the National Registry for AEMT recertification.

(7) An EMT-Intermediate is required to obtain at least 36 hours of continuing education as specified in Appendix 1, incorporated by reference.

(8) A Paramedic is required to:

(a) Complete all requirements of the National Registry for Paramedic recertification; or

(b) Obtain at least 48 hours of continuing education as specified in Appendix 1, incorporated by reference.

(9) In addition to the hours of continuing education required in this rule, any affiliated licensed EMS provider must, as specified in section 2 of Appendix I, demonstrate clinical skills competency through a hands-on evaluation supervised by the EMS medical director or his or her designee. An EMS medical director may require successful performance in a minimum number of clinical skills in these areas on either a human subject or a training mannequin (for example venipuncture or endotracheal intubation).

(10) It shall be the responsibility of each license holder to ensure the hours obtained meet the Authority's license renewal requirements.

[ED. NOTE: Appendices referenced are available from the agency.]

Stat. Auth.: ORS 682.017 & 682.208

Stats. Implemented: ORS 682.017, 682.208 & 682.216

Hist.: HD 18-1994, 6-30-94, cert. ef. 7-1-94; HD 63, f. 6-6-74, ef. 6-25-74; HD 1-1981, f. & ef. 1-14-81; Renumbered from 333-023-0645; HD 19-1984, f. & ef. 9-10-84; HD 16-1986, f. & ef. 9-9-86; HD 19-1991, f. & cert. ef. 10-18-91; HD 18-1994, f. 6-30-94, cert. ef. 7-1-94, Renumbered from 333-028-0045; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 1-2011, f. & cert. ef. 1-6-11; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0140

Maintaining Continuing Education Records

(1) A license holder is responsible for retaining verifiable and accurate records that show successful completion of all required continuing education for the two previous licensure periods.

(2) A license holder must submit continuing education records to the Authority upon request.

(3) Acceptable records that show proof of successful completion shall include any of the following documents:

(a) A course roster;

(b) A certificate of course completion for one or more topics;

(c) A computer generated printout history of the license holder's continuing education record. The agency responsible for the printout must verify the accuracy of the record by memo or signature; or

(d) Self-study documentation.

(4) The documents specified in subsections (3)(a) through (c) of this rule must include the following information:

(a) The full name of the license holder attending the course or for which the computer generated history applies;

(b) The name of the institution hosting or conducting the course;

(c) The physical location where the course was held;

(d) The course topic;

(e) The date(s) of the course(s);

(f) The length of each course; and

(g) The full name of each instructor teaching the course.

(5) Self-study documentation must include the following:

(a) Source (journal name and location, web link or video title);

(b) Topic; and

(c) Date completed.

Stat. Auth.: ORS 682.017 & 682.208

Stats. Implemented: ORS 682.017, 682.208 & 682.216

Hist.: HD 18-1994, 6-30-94, cert. ef. 7-1-94; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0150

Continuing Education Records Audit

(1) The Authority may conduct an audit of a license holder's continuing education records:

(a) The Authority shall notify the license holder that he or she is being audited and provide him or her with the necessary audit forms and the date the completed forms are to be returned to the Authority; and

(b) Upon the return of the completed audit forms to the Authority, the Authority shall begin the process of verifying the continuing education records.

(2) If, in the course of an audit of continuing education records, the Authority learns that, contrary to the sworn statement in the application for license renewal or in the official audit form, the license holder has not completed all necessary continuing education requirements, or used fraud or deception in reporting continuing education, the Authority may:

(a) Discipline the license holder as set out in OAR 333-265-0087;

(b) Assess a civil penalty per each hour of deficient continuing education; or

(c) Require the license holder to demonstrate his or her knowledge and psychomotor skills by taking and passing a cognitive and psychomotor examination conducted by the Authority.

(3) The actions taken by the Authority in section (2) of this rule will be done in accordance with ORS chapter 183.

Stat. Auth.: ORS 682.017 & 682.208

Stats. Implemented: ORS 682.017, 682.028, 682.208, 682.216, 682.220, 682.224

Hist.: HD 18-1994, 6-30-94, cert. ef. 7-1-94; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0160

Responsibility to Notify the Authority of Changes

(1) A license holder must keep the Authority apprised of and report the following changes within 30 calendar days of a change in:

(a) EMS medical director, unless the license holder is affiliated with an ambulance service that is on file with the Authority;

(b) Legal name;

(c) Mailing address;

(d) Electronic mail (e-mail) address;

(e) Main contact phone number; and

(f) EMS affiliation.

(2) When reporting a new affiliation, an EMS provider must supply the Authority with verification of completion of skills competency as referenced in Appendix 1 and it must be signed by his or her medical director or designee unless verification was completed during the most recent license renewal period.

[ED. NOTE: Appendices referenced are not included in rule text.]

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017

Hist.: HD 18-1994, 6-30-94, cert. ef. 7-1-94; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 13-2010, f. 6-30-10, cert. ef. 7-1-10; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 1-2013, f. & cert. ef. 1-25-13; PH 8-2017, f. & cert. ef. 3-30-17

333-265-0170

Displaying EMS Provider Licensure Level

(1) A licensed EMS provider providing patient care must display his or her level of licensure on the outermost garment of his or her usual work uniform.

(2) A licensed EMS provider licensure level need not be displayed on emergency work apparel not normally worn during the provision of pre-hospital patient care, such as hazmat suits, anti-contamination or radiation suits, firefighting apparel, etc.

(3) A licensed EMS provider responding from home or other off-duty location shall make a reasonable effort to display his or her licensure level. Baseball-type hats, T-shirts, and safety vests, for example, are accepted for this purpose.

Stat. Auth.: ORS 682.017

Stats. Implemented: ORS 682.017

Hist.: OHD 9-2001, f. & cert. ef. 4-24-01; PH 10-2008, f. & cert. ef. 6-16-08; PH 15-2011, f. 12-28-11, cert. ef. 1-1-12; PH 8-2017, f. & cert. ef. 3-30-17

Oregon Medical Board Chapter 847

Rule Caption: Visiting Physician privileges for out-of-state physicians acting as expert witnesses

Adm. Order No.: OMB 4-2017

Filed with Sec. of State: 4-7-2017

Certified to be Effective: 4-7-17

Notice Publication Date: 2-1-2017

Rules Amended: 847-010-0066

Subject: The rule amendment allows physicians who are actively licensed and in good standing in another state or country to apply for visiting physician approval for the purpose of performing physical or mental examinations while acting as an expert witness for up to 30 days per year.

Physicians who will only review records, confer with attorneys, and testify are not practicing medicine and do not need to seek Board

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approval. However, physicians who will perform examinations are practicing medicine and must be approved by the Board. If the physician will serve as an expert witness for more than 30 days in Oregon in a year or will not act under the supervision of an actively licensed Oregon physician in good standing, the physician must apply for a full active license or a locum tenens license.

Rules Coordinator: Nicole Krishnaswami—(971) 673-2667

847-010-0066

Visiting Physician Approval

(1) The Board recognizes that physicians with a particular specialty, skill or interest are occasionally needed to fill a narrow teaching, clinical or legal role for a brief period of time upon short notice. In fulfillment of the Board's mission to protect the health, safety and wellbeing of Oregon patients while promoting access to quality care, the Board may approve visiting physicians. This approval allows an out-of-state physician to practice medicine in Oregon for a limited time within a narrowly defined purpose under the supervision of an actively licensed Oregon physician in good standing. An approved visiting physician is subject to all the provisions of ORS Chapter 677 and to all rules of the Board. An approved visiting physician has the same duties and responsibilities and is subject to the same penalties and sanctions as any other Oregon physician.

(2) A physician may apply for visiting physician approval to practice medicine in Oregon for one of the following limited purposes:

(a) To obtain or provide training unrelated to enrollment in a post-graduate training program for a period up to 30 days per year in a hospital, ambulatory surgical center or accredited office-based surgery facility per OAR 847-017-0010; or

(b) To provide health care services without compensation at a community nonprofit organization for a period up to five consecutive days per year; or

(c) To review medical records, perform physical or mental examinations and offer an opinion on a person's diagnosis or treatment as an expert witness in an Oregon civil or criminal case for a period up to 30 days per year.

(i) A visiting physician approved under this subsection must report any clinical or secondary findings to the patient's primary care provider or specialist.

(ii) A visiting physician approved under this subsection may not prescribe, administer or dispense medications and may not order laboratory or imaging studies.

(3) To qualify for visiting physician approval, a physician must:

(a) Be currently licensed in good standing in another state or country in which they are actively practicing medicine;

(b) Have an actively licensed Oregon physician in good standing without disciplinary action who will supervise the visiting physician's practice of medicine in Oregon; and

(c) Be asked to practice medicine in Oregon for one of the limited purposes provided in section (2) of this rule.

(4) To apply for visiting physician approval, the physician must:

(a) Submit an application at least two weeks before the requested date for starting practice in Oregon, and

(b) Ensure that the following documents are sent directly from the source to the Board:

(i) Documentation that the applicant's medical license is current and in good standing in the state or country where the physician is actively practicing medicine; and

(ii) A letter from the requesting hospital administrator or administrator of the accredited facility and a letter from the hospital chief of staff, hospital department chairperson or member of the governing body of the accredited facility; or a letter from the community nonprofit organization; or a letter from the Oregon licensed physician supervising the visiting physician. The letter(s) must contain the following information:

(A) Dates of Oregon practice of the visiting physician;

(B) Description of the medical services;

(C) Name of the responsible Oregon-licensed physician who will supervise; and

(D) If the visiting physician application is requested under section (1)(a) of this rule, documentation that the requesting hospital, ambulatory surgical center or accredited facility has approved privileges for the visiting physician.

(5) Approved visiting physicians shall not hold themselves out or allow another person to represent the visiting physician as an Oregon licensed physician. Visiting physicians shall inform patients and/or all par-

ties involved in the criminal or civil case that the physician is an approved visiting physician, who is not an Oregon licensed physician.

(6) The visiting physician who requests additional time or who requests to practice beyond the limitations of this rule in Oregon must apply for and obtain a license to practice in the State of Oregon.

Stat. Auth.: ORS 677.265

Stats. Implemented: ORS 677.060, 677.085, 677.132, 677.190, 677.265

Hist.: BME 7-2000, f. & cert. ef. 7-27-00; BME 13-2002, f. & cert. ef. 10-25-02; BME 24-2006, f. & cert. ef. 10-23-06; BME 17-2009, f. & cert. ef. 10-23-09; OMB 31-2013, f. & cert. ef. 10-15-13; OMB 4-2017, f. & cert. ef. 4-7-17

Oregon State Lottery Chapter 177

Rule Caption: Amends and updates public records request rule; housekeeping edits

Adm. Order No.: LOTT 2-2017

Filed with Sec. of State: 3-17-2017

Certified to be Effective: 4-1-17

Notice Publication Date: 2-1-2017

Rules Amended: 177-010-0100

Subject: The Oregon Lottery amended the above referenced administrative rule to update the provisions of its public records request rule. Other amendments are housekeeping edits.

Rules Coordinator: Mark W. Hohlt—(503) 540-1417

177-010-0100

Requests and Fees for Copies of Public Records

(1) Procedure: Any person may request to inspect or obtain a copy of a "public record" (as defined in ORS 192.410(4)) which is in the custody of the Lottery.

(2) Reasonable Access: The Lottery will allow reasonable access to any public record in its custody during the Lottery's regular business hours, unless the record is exempt from disclosure. The Lottery may determine the time and manner of inspection or copying to protect the public record and to prevent interference with the regular activities of the Lottery and its employees. The Lottery will determine reasonable access by taking into account the necessity to maintain the fairness, integrity, security, and honesty of the Lottery.

(3) Requests: Any member of the public may request a public record verbally, in writing, or by submitting the request on a Lottery-provided form. Each request must include:

(a) The requestor's contact information;

(b) The identification, description, or type of public record requested; and

(c) The format requested (but the Lottery is not obligated to produce a record in a format other than as it is maintained by the Lottery).

(4) Processing Requests: The Lottery will generally acknowledge receipt of a public records request within two business days. The Lottery may contact the requestor to discuss the parameters of the request and may provide an expected timeframe for completion of the request. Involved or complicated public records requests involving electronic records searches will require more response time than routine requests. The Lottery will normally process requests in the order received. The Lottery may advise the requestor whether a record may be disclosed, the date, time, and place the requestor may inspect the record or obtain a copy, and the estimated cost of inspection, copying, and other fees described in this rule. If the requested record contains information exempt from disclosure, the Lottery will provide the requestor with a copy of the record with the exempt information redacted, if it is reasonably possible to do so. If it is not reasonably possible to redact the exempt information, the Lottery will not make the record available.

(5) Fees — General: Unless otherwise provided herein or by law, the Lottery shall charge a fee, in accordance with ORS 192.440, reasonably calculated to reimburse the Lottery for its actual costs of providing a copy of a public record or furnishing a reasonable opportunity to inspect the record.

(a) Fees — Paper Records: The Lottery will charge \$.05 a page for photocopies.

(b) Staff Time Charges: The Lottery will charge a fee for the staff time used to respond to public records requests.

(A) Lottery Staff: The Lottery will charge the hourly rate of the staff member or members who respond to the request.

(B) Oregon Attorney General Staff: If the Lottery uses the services of the Oregon Attorney General's Office to review the public records, redact material, or segregate the public records into exempt and non-exempt

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records, the Lottery may bill the actual costs to the requestor. The Lottery will not include the costs for time spent by the Attorney General's staff in determining the application of the provisions of ORS 192.410 to 192.505 to a request for public records.

(C) Outside Contractors: If the Lottery uses the services of an outside facility or contractor to respond to a public records request, the actual costs incurred by the Lottery will be included in the Lottery's estimate.

(c) Mailing or Shipping Costs: The Lottery may charge a requestor the actual postage or freight costs for mailing or shipping a copy of a record to the requestor, including, but not limited to, any special charges such as certified mail, express mail, or restricted delivery. The Lottery shall determine the manner of shipment.

(d) Certification Costs: Upon request, the Lottery shall provide a certified copy of a public record at an additional cost of \$5.00 for each certification. Certified copy means a copy that is certified by the Lottery to be a true and accurate copy of the public record requested.

(e) ADA Format: The Lottery will not charge any extra fee for providing records in an alternative format when required under the Americans with Disabilities Act.

(6) Costs and Estimates:

(a) Notification of Costs: If the actual or estimated costs to make the requested records available exceeds \$500, the Lottery will provide the requestor with a written notification of the actual or estimated costs.

(b) Estimates: If the request requires researching archived records and reviewing or redacting information, the Lottery will estimate the costs and will provide a written notification of that information to the requestor.

(c) Payment: The Lottery requires that all fees and charges, whether actual or estimated be paid before it will search its records, prepare copies, and make the requested records available. The requestor must pay the amount in advance to the Oregon State Lottery. If the total actual costs exceed the estimate, the requestor must pay the total actual costs before the Lottery will release the records. If the total actual cost is less than the estimate, the Lottery will refund the overcharge to the requestor. The Lottery will not refund amounts less than \$1.

(d) Requests by Current Lottery Retailers: With the written or electronic authorization of a Lottery retailer, the Lottery may bill the retailer the cost of fulfilling a public records request made by the retailer through the retailer's electronic funds transfer bank account established for Lottery funds. Such amounts will be deducted from the account during the next regularly scheduled electronic debit of the retailer's account or anytime thereafter.

(7) Waiver of Fees: The Lottery may waive fees for a public records request under the following circumstances:

(a) Amounts under \$500: The Lottery will not charge a fee if the actual cost of providing the records is \$500 or less. The Lottery will charge a fee equal to the total actual cost of providing the records when the actual cost of providing the records is more than \$500. If the estimated cost provided to a requestor was less than \$500, but the actual cost exceeds \$500, Lottery will notify the requestor when the actual cost reaches \$500, provide a new estimate of the cost to fulfill the request, and offer the requestor the option of providing only the records that actually cost less than \$500 to produce, or the option of continuing to fulfill the request after payment from the requestor of the actual cost to fulfill the request.

(b) News Media and Non-Profit Organizations: The Lottery will not charge a fee to members of the news media or non-profit organizations when the request is made in the public's interest.

Stat. Auth.: OR Const. Art. XV, Sec. 4(4)

Stats. Implemented: ORS 192.440

Hist.: LC 6-1994, f. 7-22-94, cert. ef. 8-1-94; LOTT 2-1998, f. & cert. ef. 5-28-98; LOTT 10-2002(Temp), f. 9-6-02, cert. ef. 9-9-02 thru 3-6-03; LOTT 21-2002, f. & cert. ef. 11-25-02; LOTT 2-2006, f. 2-16-06, cert. ef. 3-1-06; LOTT 2-2017, f. 3-17-17, cert. ef. 4-1-17

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Public Utility Commission, Oregon Board of Maritime Pilots Chapter 856

Rule Caption: Amends time window for requiring physical examinations as part of license renewals.

Adm. Order No.: BMP 1-2017

Filed with Sec. of State: 4-7-2017

Certified to be Effective: 4-7-17

Notice Publication Date: 3-1-2017

Rules Amended: 856-010-0015

Subject: Extends the time frame for obtaining federal physicals for license renewals from three months to eleven months prior to state license.

Rules Coordinator: Susan Johnson—(971) 673-1530

856-010-0015

Renewal of License

(1) Application for renewal of license shall be made on a form provided by the board, signed by the applicant, accompanied by the physical examination form provided by the board and presented to the administrator of the board at least thirty (30) days prior to expiration of license.

(2) Every state-licensed pilots shall be required to have an annual physical examination by an Oregon or Washington licensed physician within eleven (11) months prior to the date the pilot is required to submit application for renewal of license to the board, the physical requirements for which are the same as for the original license as specified in OAR 856-010-0010(2), except for drug testing.

(3) All state-licensed pilots shall, within six months prior to the expiration of their license, submit to a test indicating licensee is free of illegal substance abuse. Testing will be for the presence of Cocaine, Opiates, Marijuana (THC), Amphetamines and PCP (phencyclidine). Testing will be in accordance with the Department of Transportation (Coast Guard) guidelines outlined in the Code of Federal Regulations 46, CFR § 16 (2009). Urine specimens are to be analyzed by a laboratory that meets DHHS regulations set forth by the National Institute of Drug Abuse (NIDA); or provide proof to the board that licensee is participating in a US Coast Guard approved random drug testing program;

(4) All applicants for renewal of licenses shall submit a photocopy of their currently applicable United States government license with radar endorsement issued by the United States Coast Guard.

(5) All applicants for renewal of unlimited licenses shall provide certification of meeting the continuing professional development requirements specified in OAR 856-010-0027. Unless waived as provided below in this paragraph, failure to comply with all requirements for renewal of license shall constitute the failure to submit a complete application for renewal and will result in the withholding of the renewal license. A pilot who is unable to complete the requirements within the time allowed due to unexpected, emergency circumstances may request in writing a waiver and the Board may, upon good cause shown, permit a license renewal for one year without the requirements being met, provided that all required certifications must be made by the applicant at the time application for renewal is made the following year.

(6) Each license issued is valid for one year and only the unlimited state license may be renewed.

(7) Notwithstanding subsection (4) of this section, if a pilot has submitted an application for renewal of the pilot's federal license at least 60 days prior to the expiration date of his federal license, but the United States Coast Guard has not completed its renewal process by the expiration date for the federal license and the pilot has, for that reason, no currently applicable federal license at the time of renewing his state license, then the board may issue a provisionally renewed state license. Any pilot to whom a provisionally renewed state license is issued must report to the board every 30 days regarding the status of the pilot's federal license renewal. If the United States Coast Guard completes its processing for the federal license but declines to renew the federal license, the board may treat the refusal to renew the federal license as a suspension or revocation of the federal license

Stat. Auth.: ORS 776, 670

Stats. Implemented: ORS 776.115, 670.310

Hist.: PC 1, f. 10-29-57, ef. 7-1-57; MP 2-1984, f. & ef. 10-4-84; MP 3-1988, f. & cert. ef. 11-9-88; MP 1-1992, f. & cert. ef. 4-29-92; MP 1-1995, f. & cert. ef. 5-9-96; BMP 1-2000, f. & cert. ef. 12-6-00; BMP 4-2006, f. 9-28-06, cert. ef. 10-6-06; BMP 1-2007, f. 1-25-07, cert. ef. 1-26-07; BMP 4-2008, f. & cert. ef. 1-24-08; BMP 1-2009(Temp), f. & cert. ef. 2-10-09 thru 8-7-09; Administrative correction 8-21-09; BMP 5-2009, f. & cert. ef. 8-24-09; BMP 1-2010, f. & cert. ef. 4-27-10; BMP 1-2011, f. 6-28-11, cert. ef. 6-29-11; BMP 7-2011, f. 12-29-11, cert. ef. 12-30-11; BMP 1-2017, f. & cert. ef. 4-7-17

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Secretary of State, Elections Division Chapter 165

Rule Caption: Adopts Revisions to the 2016 Campaign Finance Manual

Adm. Order No.: ELECT 1-2017

Filed with Sec. of State: 4-7-2017

Certified to be Effective: 4-7-17

Notice Publication Date: 2-1-2017

ADMINISTRATIVE RULES

Rules Amended: 165-012-0005

Subject: This amendment revises the 2016 Campaign finance Manual by updating the filing deadline for candidates required to disclose transactions under ORS 260.043(3)(c) and the filing deadlines for 2017 under ORS 260.044, properly referencing a transaction subtype, “Personal Expenditure Balance Adjustment,” clarifying standards related to independent expenditure communications and identifying who is eligible to file initial asset transactions. Additionally, this amendment incorporates non-substantive grammatical changes.

Rules Coordinator: Brenda Bayes—(503) 986-1518

165-012-0005

Designating the Campaign Finance Manual and Forms; Late Penalty Matrix

Pursuant to ORS 260.156, the Secretary of State designates the 2016 Campaign Finance Manual and associated forms as the procedures and guidelines to be used for compliance with Oregon campaign finance regulations.

[Publications: Publications and Forms referenced are available from the agency.]

Stat. Auth.: ORS 246.120, 246.150, 260.156 & 260.200

Stats. Implemented: ORS 246.120, 246.150, 260.156 & 260.200

Hist.: SD 101, f. & ef. 12-3-75; SD 120, f. & ef. 12-21-77; SD 34-1980, f. & ef. 3-6-80; SD 28-1983, f. & ef. 12-20-83; SD 3-1986, f. & ef. 2-26-86; ELECT 32-1988(Temp), f. & cert. ef. 8-26-88; ELECT 22-1989(Temp), f. & cert. ef. 11-9-89; ELECT 19-1990, f. & cert. ef. 6-4-90; ELECT 14-1992 (Temp), f. & cert. ef. 6-10-92; ELECT 37-1992, f. & cert. ef. 12-15-92; ELECT 34-1993, f. & cert. ef. 11-1-93; ELECT 1-1995(Temp), f. & cert. ef. 2-23-95; ELECT 15-1995, f. & cert. ef. 12-18-95; ELECT 9-1996, f. & cert. ef. 7-26-96; ELECT 5-1997, f. & cert. ef. 3-24-97; ELECT 6-1997(Temp), f. & cert. ef. 4-18-97; ELECT 15-1997, f. & cert. ef. 12-31-97; ELECT 5-1998, f. & cert. ef. 2-26-98; ELECT 8-1998, f. & cert. ef. 6-2-98; ELECT 9-1998, f. & cert. ef. 9-11-98; ELECT 13-1998(Temp), f. & cert. ef. 12-15-98 thru 6-13-99; ELECT 2-1999(Temp), f. & cert. ef. 1-15-99 thru 7-14-99; ELECT 3-1999, f. & cert. ef. 3-1-99; ELECT 1-2000, f. & cert. ef. 1-3-00; ELECT 3-2002, f. & cert. ef. 3-13-02; ELECT 23-2003, f. & cert. ef. 12-12-03; ELECT 13-2005, f. & cert. ef. 12-30-05; ELECT 1-2007, f. & cert. ef. 1-5-07; ELECT 2-2007(Temp), f. & cert. ef. 5-2-07 thru 10-29-07; ELECT 4-2007(Temp), f. & cert. ef. 7-16-07 thru 12-31-07; ELECT 13-2007, f. & cert. ef. 12-31-07; ELECT 8-2009, f. & cert. ef. 5-4-09; ELECT 16-2009, f. & cert. ef. 7-30-09; ELECT 27-2009, f. & cert. ef. 12-31-09; ELECT 3-2010, f. & cert. ef. 4-22-10; ELECT 8-2011, f. & cert. ef. 4-8-11; ELECT 12-2011, f. & cert. ef. 7-12-11; ELECT 21-2011(Temp), f. & cert. ef. 9-30-11 thru 12-30-11; ELECT 5-2012, f. & cert. ef. 1-3-12; ELECT 2-2-14, f. & cert. ef. 1-2-14; ELECT 14-2015, f. 12-31-15, cert. ef. 1-1-16; ELECT 2-2016, f. & cert. ef. 7-6-16; ELECT 1-2017, f. & cert. ef. 4-7-17

Teacher Standards and Practices Commission Chapter 584

Rule Caption: Adopts, amends, and repeals rules related to licensure, professional practices and approval of preparation programs.

Adm. Order No.: TSPC 2-2017

Filed with Sec. of State: 4-12-2017

Certified to be Effective: 4-12-17

Notice Publication Date: 3-1-2017

Rules Adopted: 584-420-0305

Rules Amended: 584-050-0020, 584-200-0010, 584-200-0050, 584-210-0030, 584-210-0040, 584-210-0090, 584-220-0185

Rules Repealed: 584-017-1030, 584-420-0300, 584-420-0375, 584-420-0390

Subject: 584-420-0305 is adopted to create one program standard for all single-subject endorsement areas that do not require a full program (e.g. English, Social Studies, Science.)

584-050-0020 is amended to change the 60 day notice for resignations from 60 days “prior to” to “upon or at the time of” resignation. The purpose of this change is to provide a more accurate description of the timing of reporting requirements.

584-200-0010 is amended to create a definition of prekindergarten. Prekindergarten is defined as: “Birth through age 5.”

584-200-0050 is being amended to change the fee for background checks from “\$57” to “Less than \$75.” Removes specific references

to CTE I, as this license is possibly being repealed under proposed redesign.

584-210-0030 is amended to clarify that recency requirements do not apply to applicants moving directly from a reciprocal to a preliminary teaching license.

584-210-0040 is amended to allow TOSA (Teachers on Special Assignments) experience to count toward the experience requirement for the Professional Teaching Experience requirement.

584-210-0090 is amended to allow the International Visiting Teacher License (IVTL) to extend to a fourth and fifth year, as permitted by US Department of State. The current IVTL is limited to three years. The IVTL is also amended to allow a grace period of 120 days and to permit an 18 month term if applied for after January 1.

584-220-0185 is amended to define the scope of the endorsement to begin at birth.

584-017-1030 is repealed as it has been replaced by 584-017-0110.

584-420-0300; 584-420-0375; 584-420-0390 are repealed because they are being replaced by 584-420-0305

Rules Coordinator: Tamara Dykeman—(503) 378-3586

584-050-0020

Suspension for Resignation in Violation of Contract

(1) If a school board charges a teacher with violation of a contract under ORS 342.553, for failure to provide sixty days’ notice upon or at the time of resignation, the Board must submit all of the following documents:

(a) A copy of the Board’s resolution containing the teacher’s notice of resignation and the Board’s request for suspension of licensure;

(b) A copy of the teacher’s contract;

(c) A copy of the applicable collective bargaining agreement;

(d) A statement from the superintendent describing the provisions of the agreement for resignations; and

(e) A statement from the superintendent attesting that the administration made it clear to the educator upon request for resignation that the district may submit the failure to provide 60-day notice to TSPC for consideration of discipline.

(2) A teacher who signs a contract renewal notice will be considered to have accepted the contract to teach the following year.

(3) Upon receipt of the information specified in section (1) of this rule, the Executive Director will refer the case to investigation and proceed pursuant to ORS 342.175 to 342.177.

Stat. Auth.: ORS 342

Stat. Implemented: ORS 342.553

Hist.: TS 15, f. 12-20-76, ef. 1-1-77; TS 17, f. 12-19-77, ef. 1-1-78; TS 6-1980, f. & ef. 12-23-80; TS 1-1982, f. & ef. 1-5-82; TS 6-1984, f. 12-27-84, ef. 1-15-85; TS 1-1992, f. & cert. ef. 1-15-92; TS 4-1997, f. 9-25-97, cert. ef. 10-4-97; TSPC 1-2000(Temp), f. & cert. ef. 1-18-00 thru 7-11-00; TSPC 2-2000, f. & cert. ef. 5-15-00; TSPC 13-2006, f. & cert. ef. 11-22-06; TSPC 7-2007, f. & cert. ef. 12-14-07; TSPC 5-2014, f. & cert. ef. 8-5-14; TSPC 2-2017, f. & cert. ef. 4-12-17

584-200-0010

Definitions for Licensure, Certification and Registration

(1) “Application:” A request for an Oregon license authorizing service in public schools or a request for reinstatement or renewal of such license.

(2) “Appropriately Assigned:” Assignments for administrator, teacher, school counselor, school psychologist, school social worker or school nurse duties for which the person involved holds the proper license, certificate or endorsements. (See OAR 584-210-0150 for License for Conditional Assignment.)

(3) “Approved Institution:” A U.S. regionally accredited institution of higher education approved to prepare education-licensed personnel by a U.S. governmental jurisdiction in which the institution is located.

(4) “Approved Programs:” An Oregon program of educator preparation approved by TSPC and offered by a regionally accredited Oregon institution or other legally approved provider. As it applies to out-of-state programs, a program approved by the licensure body of any U.S. governmental jurisdiction or member of the National Association of State Directors of Teacher Education and Certification (NASDTEC) authorized to approve educator preparation programs.

(5) “Completion of Approved Program:” The applicant has met the institution’s academic requirements and any additional state or federal requirements and has obtained the institution’s recommendation for licensure.

(6) “Endorsement:” The subject matter or specialty education field in which the individual is licensed to teach.

ADMINISTRATIVE RULES

(7) "National Board for Professional Teaching Standards (NBPTS):" A professional board established to award a National Teaching Certificate or National Teacher Leader Certificate to qualified educators.

(8) "Non-Provisional License or Certificate:" Full state certification of licensure issued following completion of a state approved teacher preparation program and valid for full-time teaching assignments.

(a) Non-provisional Oregon teaching licenses include:

- (A) Preliminary Teaching License;
- (B) Professional Teaching License;
- (C) Teacher Leader License;
- (D) Reciprocal Teaching License; and
- (E) Legacy Teaching License;

(b) Non-provisional out-of-state teaching licenses or certificates may include initial state licenses that require additional preparation or other requirements to move to the next-stage license if the initial license is issued following state approved teacher preparation program and is valid for full-time teaching assignments.

(9) Out of State/International Evaluation: Evaluation for the issuance of a license, endorsement or certificate that includes review of one or more of the following:

- (a) A license or certificate issued by a NASDTEC jurisdiction;
- (b) A license or certificate issued by an international body;
- (c) Completion of an educator preparation program for licensure, certification or endorsement that is not Commission-approved to recommend candidates directly for Oregon licensure or endorsement;
- (d) Any other out of state or international credential, coursework, or other supporting documentation that is essential for the issuance of an Oregon license or certificate.

(e) The out of state or international evaluation is not related to the domicile of the applicant. The need for an out of state or international evaluation is based on the documentation submitted with an application for licensure, endorsement or certificate.

(10) "Out of State Licenses or Certificates:" Any educator license or certificate issued from:

- (a) A National Association of State Directors of Teacher Education and Certification (NASDTEC) jurisdiction;
- (b) A U.S. Territory (American Samoa, Commonwealth of Northern Marianas, District of Columbia, Guam, Puerto Rico, and Virgin Islands); or
- (c) The U.S. Department of Defense.

(11) "Personal Qualifications:" Personal qualifications for licensure including attainment of at least eighteen years of age and possessing good moral character and mental and physical health necessary for employment as an educator.

(12) "Prekindergarten:" Birth through age 5.

(13) "Private Schools:" A privately funded school, preprimary through grade twelve, approved, regionally accredited or registered by another U.S. jurisdiction or government.

Stat. Auth.: ORS 342

Stats. Implemented: ORS 342.120 - 342.430, 342.455 - 342.495 & 342.553

Hist.: TSPC 13-2015(Temp), f. 11-13-15, cert. ef. 1-1-16 thru 6-28-16; TSPC 14-2015(Temp), f. 12-18-15, cert. ef. 1-1-16 thru 6-28-16; TSPC 1-2016, f. & cert. ef. 2-10-16; TSPC 2-2017, f. & cert. ef. 4-12-17

584-200-0050

Fees

(1) Pursuant to ORS 342.127, the Commission has established fees for the processing of applications.

(2) All fees are non-refundable.

(3) Effective January 19, 2016, all fees must be paid by Electronic Funds Transfer (EFT) through the TSPC online payment process. Electronic Funds Transfer (EFT) is defined as the movement of funds by non-paper means usually through a payment system, including but not limited, an automated clearinghouse or the Federal Reserve's Fedwire system.

(4) Application fees for first licensure, registration or certification are as follows:

- (a) American Indian Language Teaching license: \$140
- (b) Career and technical education licenses: \$140
- (c) Charter school registrations: \$140
- (d) Emergency licenses: \$140
- (e) Exceptional Administrator license: \$140
- (f) International Visiting Teacher: \$190 (The \$190 fee includes the \$50 out-of-state evaluation fee.)
- (g) Legacy licenses: \$140
- (h) License for Conditional Assignment: \$140
- (i) Limited licenses: \$140
- (j) Preliminary licenses: \$140
- (k) Professional licenses: \$140

(l) Reciprocal licenses: \$190 (The \$190 fee includes the \$50 out-of-state evaluation fee.)

(m) Restricted licenses: \$140

(n) School nurse certificates: \$140

(o) Substitute licenses: \$140

(p) Teacher Leader: \$140

(q) Teacher Associate: \$140

(5) Out-of-state/international application evaluation fee: \$50 (The evaluation fee is in addition to all required application and background clearance fees unless otherwise noted in this rule.)

(6) Renewals, Reissues and Reauthorizations: All renewals, reissues and reauthorizations of licenses, certificates, and registrations: \$140 except as follows:

(a) International Visiting Teacher License (Reissue): \$50

(b) License for Conditional Assignment (Reauthorization): \$50

(c) Restricted teaching, career and technical education, administrator, school counselor and school social worker licenses (Reissue): \$50

(7) Late Fees: Pursuant to ORS 342.127, the Commission has established the following late fee process:

(a) An applicant will pay \$40 per month late fee for each portion of a month following expiration of the license, registration or certificate for a maximum of \$200.

(b) Late fees are in addition to all other required fees.

(c) Late fees may only be imposed one time following the expiration of a license, registration or school nurse certificate. If the applicant does not initially qualify for the license or certificate the applicant is seeking to reinstate, no additional late fees will be imposed upon application for subsequent licenses so long as the applicant has a current active license, registration or certification in effect at the time of application.

(8) Reinstatement of licenses, registrations, and certificates:

(a) Expired: \$340 (The fee includes the application fee but does not include background clearance fee.)

(b) Suspended: \$290 (The fee includes the application fee but does not include background clearance fee.)

(c) Revoked: \$340 (The fee includes the application fee but does not include background clearance fee.)

(d) If the applicant holds another active and valid Oregon educator license at the time of the application for reinstatement, the applicant will not be assessed the additional \$200 reinstatement fee to reinstate the second license.

(9) Endorsements and Specializations:

(a) Adding or removing an endorsement outside of licensure renewal application process: \$140

(b) Adding a specialization outside of licensure renewal application process: \$140

(10) Other Fees:

(a) Background clearance: Less than \$75.

NOTE: The Oregon State Police Department is responsible for determining the level of fee for the background clearance.

(b) Expedited service: \$149

(c) Gold-seal paper license: \$50

Note: Gold seal paper license are only available for current licenses.

(d) Extensions to provisional license: \$50

(e) Non-Sufficient Funds (NSF): \$25

(11) Online Portal Provider Fee: In addition to the Commission-established fees under this subsection, applicants must pay a fee associated with accessing the online application system that is collected by the operators of the online system. This fee is collected and assessed according to agreements with the Commission, Department of Administrative Services and the operators of the online application system.

Stat. Auth.: ORS 342

Stats. Implemented: ORS 342.120 - 342.430, 342.455 - 342.495 & 342.553

Hist.: TSPC 13-2015(Temp), f. 11-13-15, cert. ef. 1-1-16 thru 6-28-16; TSPC 14-2015(Temp), f. 12-18-15, cert. ef. 1-1-16 thru 6-28-16; TSPC 1-2016, f. & cert. ef. 2-10-16; TSPC 2-2017, f. & cert. ef. 4-12-17

584-210-0030

Preliminary Teaching License

(1) Purpose of the License: The Preliminary Teaching License qualifies its holder to teach in prekindergarten through grade 12 Oregon public school districts, education service districts, and charter school assignments. The Preliminary Teaching License is issued to new teachers who have successfully completed an Oregon teacher preparation program or who have entered the state as a licensed beginning teacher. The Preliminary Teaching License signifies that the educator is a novice teacher who has not met the advanced competencies and experience requirements necessary to meet the qualifications of the Professional Teaching License.

ADMINISTRATIVE RULES

(2) Term of Licensure: The Preliminary Teaching License is valid for three years and is renewable as provided in subsection (7) of this rule. The license may be renewed continuously until the applicant has met both the advanced competencies and experience requirements for the Professional Teaching License. The date of the first expiration of the license is three years from the date of issue plus time until the applicant's birthday.

(3) Assignment and Endorsement Authorization: The Preliminary Teaching License qualifies the teacher to accept:

(a) Any instructional assignment from prekindergarten through grade 12 within the scope of the subject-matter endorsement(s) on the Preliminary Teaching License. The scope of the endorsement shall be determined by the National Center for Educational Statistics (NCES) course codes associated with the endorsement as provided by the TSPC Licensure Guide; and

(b) Any substitute teaching assignments.

(4) Recency of Oregon Teacher Preparation: The Commission requires Oregon-prepared applicant for the Preliminary Teaching License to have recent teacher preparation in accordance with the following provisions:

(a) If the applicant completed an Oregon teacher preparation program within the six years preceding their first application for licensure, there are no additional recency requirements to qualify for the Preliminary Teaching License.

(b) If the applicant completed an Oregon teacher preparation more than six years prior to their first application for licensure, the applicant must submit:

(A) A recent passing score on the content test of knowledge for each endorsement the applicant is seeking to hold on their license. A passing score is recent if it has been obtained within the two years immediately preceding the application for licensure; and

(B) Evidence of completion of a pedagogy course. The pedagogy course must:

(i) Include the word pedagogy or methods in the course title or be acceptable to the Commission upon evaluation of course syllabi or other evidence;

(ii) Be at least three quarter hours or two semester hours;

(iii) Be related to the subject-matter endorsement area requested for the license;

(iv) Include official verification that the course was passed within the two years immediately preceding the application for the Preliminary Teaching License; and

(v) Be verified by official sealed transcripts from a regionally accredited college or university.

(c) The Executive Director, or Director of Licensure, may accept alternative evidence of recent practice or professional development if the Executive Director, or Director of Licensure, determines the evidence sufficiently addresses the need for recent engagement in the content knowledge and pedagogy required for the Preliminary Teaching License.

(d) The recency requirements provided in this subsection do not apply to applicants moving directly from a Reciprocal Teaching License to a Preliminary Teaching License or to qualified out-of-state licensed applicants moving directly to the Preliminary Teaching License.

(5) Out-of-state applicants: An out-of-state applicant may apply for the Preliminary Teaching License If the applicant:

(a) Holds a valid and active non-provisional teaching license from another National Association of State Directors of Teacher Education and Certification (NASDTEC) jurisdiction;

(b) Meets the requirements for the Preliminary Teaching License provided in this rule; and

(c) Meets the requirements for the Reciprocal Teaching License provided in OAR 584-210-0060.

(6) To be eligible to apply for a Preliminary Teaching License, an applicant must:

(a) Possess the personal qualifications for licensure including attainment of at least eighteen years of age and possessing good moral character and mental and physical health necessary for employment as an educator;

(b) Hold a bachelor's degree or higher from a regionally accredited institution in the United States, or the foreign equivalent of such degree approved by the Commission. A master's degree or a doctoral degree from a regionally accredited institution in the United States validates a non-regionally accredited bachelor's degree for licensure purposes;

(c) (A) Provide evidence of admission to and completion of an Oregon Preliminary Teaching License preparation program approved by the Commission; or

(B) Provide evidence of completion of a teaching preparation program as provided in OAR 584-210-0060(8)(Reciprocal Teaching License) if applying from out-of-state;

(d) Obtain a passing score as currently specified by the Commission on each of one or more tests of subject mastery for subject-matter endorsement or otherwise complete endorsement requirements established by the Commission;

(e) Meet the recency of preparation requirements as provided in subsection (4) of this rule;

(f) Obtain a passing score on a Commission-approved test of knowledge of U.S. and Oregon civil rights laws and professional ethics;

(g) Complete a background clearance that includes:

(A) Furnishing fingerprints (if necessary);

(B) Providing satisfactory responses to character questions in the form and manner prescribed by the Commission; and

(h) Submit a complete and correct application in the form and manner required by the Commission, including payment of all required fees as provided in OAR 584-200-0050.

(7) To be eligible to apply for renewal of the Preliminary Teaching License, an applicant must:

(a) Complete 75 advanced professional development units as provided in OAR 584-210-0040 Professional Teaching License and OAR 584-255-0010 Professional Development Requirements; or

(b) Complete 75 continuing professional development units as provided in OAR 584-255-0010 Professional Development Requirements.

(c) Submit a complete and correct renewal application in the form and manner required by the Commission, including payment of all required fees as provided in OAR 584-200-0050.

(8) Upon qualifying for the advanced competencies and teaching experience requirements of the Professional Teaching License, an applicant will be promoted from the Preliminary Teaching License to the Professional Teaching License. Licensees may renew the Preliminary Teaching License until they have met all qualifications for the Professional Teaching License.

Stat. Auth.: ORS 342

Stats. Implemented: ORS 342.120 - 342.430, 342.455 - 342.495 & 342.553

Hist.: TSPC 12-2015, f. 11-13-15, cert. ef. 1-1-16; TSPC 1-2016, f. & cert. ef. 2-10-16; TSPC 2-2017, f. & cert. ef. 4-12-17

584-210-0040

Professional Teaching License

(1) Purpose of the License: The Professional Teaching License is a license that qualifies its holder to teach in prekindergarten through grade 12 Oregon public school districts, education service districts, and charter school assignments. The Professional Teaching License signifies that the educator is an experienced teacher who has successfully demonstrated an advanced level of educator knowledge, skills and dispositions.

(2) Term of Licensure: The Professional Teaching License is valid for five years and is renewable as provided in subsection (8) of this rule. The date of the first expiration of the license is five years from the date of issue plus time until the applicant's birthday.

(3) Assignment and Endorsement Authorization: The Professional Teaching License qualifies the teacher to accept:

(a) Any instructional assignment from prekindergarten through grade 12 within the scope of the subject-matter endorsement(s) on the Professional Teaching License. The scope of the endorsement shall be determined by the National Center for Educational Statistics (NCES) course codes associated with the endorsement as provided by the TSPC Licensure Guide; and

(b) Any substitute teaching assignment.

(4) Pursuant to ORS 342.138, the Commission has approved the following advanced professional education programs to develop advanced level competencies required for promotion to the Professional Teaching License:

(a) Advanced Professional Development Program: The purpose of the Advanced Professional Development Program is to provide the individual teacher with the specific professional development needed to advance to a professional teacher level. The program is developed by the applicant in conjunction with the employing district and includes professional development specifically tailored to the performance goals of the novice teacher in accordance with ORS 342.815 to 342.856. To qualify as an Advanced Professional Development Program, the program must consist of:

(A) A teacher who holds the Preliminary Teaching License and is employed in accordance with ORS 342.815 to 342.856; and

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(B) A requirement to complete 150 advanced professional development units while holding a Preliminary Teaching License. To qualify as advanced professional development, the units must:

(i) Be completed in conjunction with the performance goals of the teacher established in accordance with ORS 342.815 to 342.856;

(ii) Be verified as advanced professional development by the employing district or charter school; and

(iii) Meet all other requirements provided in OAR 584-255-0010, Professional Development Requirements.

(b) Advanced Degree Programs: Admission to and completion of an educational specialist, master's or doctoral degree program that is reasonably related to improving the teaching skills of the educator. The program must be regionally accredited or foreign equivalent.

(c) Endorsement Program: Admission to and completion of a Commission-approved subject-matter endorsement program;

(d) Specialization Program: Admission to and completion of a Commission-approved Oregon specialization program;

(e) Advanced Licensure: Admission to and completion of a Commission-approved advanced licensure program;

(f) National Board Certification: National Board of Professional Teaching Standards certification;

(g) Out-of-State Professional Certification: A professional certificate issued by the State of Washington or other equivalent out-of-state professional teaching licenses approved by the Commission; and

(h) Other acceptable advanced coursework or assessment approved by the Executive Director or the Director of Licensure as provided in OAR 584-200-0100, Waiver of Licensure Requirements by the Commission.

(5) All evidence of advanced professional education programs must be equal to at least 150 professional development units as calculated in OAR 584-255-0010(3) and must have been obtained by the applicant after the date of issuance of their first non-provisional teaching license in Oregon or another National Association of State Directors of Teacher Education and Certification (NASDTEC) jurisdiction.

(6) Professional Teaching Experience Requirements: To qualify for the Professional Teaching License, an educator must obtain:

(a) Full-time Experience: Four full of years teaching experience in a 1.0 assignment; or

(b) Part-time Experience: Six full years of teaching experience in at least a .50 to .99 assignment.

NOTE: Teaching experience of .49 or less is not eligible to meet any teaching experience requirement for the Professional Teaching License. Teaching experience from two or more academic years may not be combined to meet the teaching requirements.

EXAMPLE: An applicant may not combine two full years of .25 teaching assignment to equal one year of .5 teaching assignment for the part-time teaching requirement.

EXAMPLE: An applicant may not combine one year of a .75 assignment and one year of a .25 assignment to equal one year of full-time teaching experience.

(c) One full year of teaching experience is equal to 135 days of contracted classroom teaching within an academic year (July 1 to June 30).

(d) The years of teaching experience do not have to be earned consecutively.

(e) Substitute experience is not considered qualifying teaching experience under this subsection unless the educator is assigned to a single substitute assignment in accordance with subsection (6)(c) of this rule.

(f) The applicant must obtain the teaching experience while holding an Initial, Initial I, Initial II, Reciprocal, Preliminary or equivalent non-provisional license from a National Association of State Directors of Teacher Education and Certification (NASDTEC) jurisdiction.

(g) The teaching experience must include direct instruction of students as provided in ORS 342.120 or Teaching on Special Assignment (TOSA) and must occur in one, or a combination of, the following employment settings:

(A) Public prekindergarten through grade 12 classroom;

(B) Private, regionally-accredited, prekindergarten through grade 12 classroom; or

(C) Alternative education, post-secondary or other similar teaching settings closely-related to prekindergarten through grade 12 classroom instruction as approved by the Director of Licensure.

(7) To be eligible to apply for a Professional Teaching License, an applicant must:

(a) Possess the personal qualifications for licensure including attainment of at least eighteen years of age and possessing good moral character and mental and physical health necessary for employment as an educator;

(b) Meet or complete all requirements of the Preliminary, Initial I, Initial II, Basic, Continuing, Standard, or an equivalent teaching license

issued previously by the Commission or issued by another National Association of State Directors of Teacher Education and Certification (NASDTEC) jurisdiction;

(c) Complete an advanced professional education program as provided in subsections (4) and (5) of this rule;

(d) Complete the teaching experience requirements as provided in subsection (6) of this rule;

(e) Complete a background clearance that includes:

(A) Furnishing fingerprints (if necessary);

(B) Providing satisfactory responses to character questions in the form and manner prescribed by the Commission; and

(f) Submit a complete and correct application in the form and manner required by the Commission, including payment of all required fees as provided in OAR 584-200-0050.

(8) To be eligible to apply for renewal of the Professional Teaching License, the applicant must:

(a) Complete continuing professional development requirements as provided in OAR 584-255-0010 Professional Development Requirements and

(b) Submit a complete and correct renewal application in the form and manner required by the Commission, including payment of all required fees as provided in OAR 584-200-0050.

Stat. Auth.: ORS 342

Stats. Implemented: ORS 342.120 - 342.430, 342.455 - 342.495 & 342.553

Hist.: TSPC 12-2015, f. 11-13-15, cert. ef. 1-1-16; TSPC 1-2016, f. & cert. ef. 2-10-16; TSPC 1-2017, f. & cert. ef. 2-1-17; TSPC 2-2017, f. & cert. ef. 4-12-17

584-210-0090

International Visiting Teacher License

(1) Purpose of the License: The International Visiting Teacher License is issued to educators who permanently reside in another country and who are participating in a cultural exchange of teachers and pedagogy strategies between Oregon and their home country.

(2) District Sponsorship: The International Visiting Teacher License requires district sponsorship. The sponsoring district must submit:

(a) A statement that includes:

(A) The grade level(s) and subject-matter endorsement area(s) the applicant has been hired to teach;

(B) The district's plan for supervision of the teacher;

(C) The district's plan to provide a mentor for the applicant. The plan must specifically identify the mentor; and

(D) Verification that the district will obtain the license for the educator prior to assignment within the district.

(b) All materials in the form and manner requested by the Director of Licensure related to the application for the Exchange Visitor Program in the Teacher category.

(3) Renewal of District Sponsorship: To be eligible for a reissue of the International Visiting Teacher License, a sponsoring district must provide:

(a) A statement of renewed sponsorship that confirms:

(A) All assignments of the licensed teacher will remain within the scope the subject-matter endorsements on the license; and

(B) The plan for supervision and mentoring remains in place. The statement must update the name of the mentor, if appropriate.

(b) A copy of the request for extension of the Exchange Visitor Program in the teacher category; and

(c) Verification that the U.S. Department of State has granted the request for extension of the Exchange Visitor Program in the teacher category. An applicant will not be eligible for a third or fourth reissue of the International Visiting Teacher License unless TSPC receives official verification that the applicant has been granted an extension of the Exchange Visitor Program from the U.S. Department of State.

(4) Term of Licensure: The International Visiting Teacher License can be reissued up to four times, for a total of five years, in accordance with the following provisions:

(a) For applications received from July 1 through December 31, the first International Visiting Teacher License is valid through June 30 of the school year for which it is issued.

(b) For applications received from January 1 through June 30, the first International Visiting Teacher License is valid through June 30 of the following school year unless otherwise requested by the sponsoring district;

(c) All subsequent International Visiting Teacher Licenses will expire on June 30.

(d) Upon expiration of the final term of the International Visiting Teacher License, the educator must qualify for another Oregon teaching license if the educator plans to continue teaching in Oregon public schools.

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(5) Assignment and Endorsement Authorization: The International Visiting Teacher License qualifies the teacher to accept within the sponsoring district:

(a) Any instructional assignment from prekindergarten through grade 12 within the scope of the subject-matter endorsement(s) on the International Visiting Teaching License; and

(b) Substitute teaching assignments within the subject-matter endorsement areas authorized by the license.

(6) To be eligible to apply for the International Visiting Teacher License, the applicant must:

(a) Provide a statement from the sponsoring district in accordance with subsection (2) of this rule;

(b) Have not previously held a TSPC license, unless an exemption is approved by the Director of Licensure;

(c) Possess the personal qualifications for licensure including attainment of at least eighteen years of age and possessing good moral character and mental and physical health necessary for employment as an educator;

(d) Provide evidence that the applicant is not a resident of the United States;

(e) Provide a copy of a valid and current J-1 Visa;

(f) Provide transcript evaluation or some other convincing evidence that the applicant holds the equivalent of a U.S. baccalaureate or higher degree and proof that the applicant has completed a professional teacher preparation program in their country. The transcript and other evidence submitted will be evaluated for subject-matter competency in the subject-area in which the license is being requested;

(g) Provide a copy of all the professional teaching credentials from a country other than the United States held by the applicant;

(h) Provide proof of participation in the Exchange Visitor Program in a J-1 Visa status monitored by the U.S. State Department. Proof of participation must include verification from the Designated Sponsor Organization monitored by the U.S. State Department;

(i) All materials requested by the Director of Licensure related to the application for the Exchange Visitor Program in the Teacher category;

(j) Complete a background clearance that includes:

(A) Furnishing fingerprints (if necessary);

(B) Providing satisfactory responses to character questions in the form and manner prescribed by the Commission; and

(k) Submit a complete and correct application in the form and manner required by the Commission, including payment of all required fees as provided in OAR 584-200-0050.

(7) Reissues: To be eligible to apply for a reissue of the International Visiting Teaching License, an applicant must submit:

(a) A PEER form verifying the applicant's assignment;

(b) A statement from the sponsoring district in accordance with subsection (3) of this rule; and

(c) A complete and correct renewal application in the form and manner required by the Commission, including payment of all required fees as provided in OAR 584-200-0050.

Stat. Auth.: ORS 342

Stats. Implemented: ORS 342.120 - 342.430, 342.455 - 342.495 & 342.553

Hist.: TSPC 12-2015, f. 11-13-15, cert. ef. 1-1-16; TSPC 1-2016, f. & cert. ef. 2-10-16; TSPC 2-2017, f. & cert. ef. 4-12-17

584-220-0185

Special Education: Early Intervention

(1) Purpose: A Special Education: Early Intervention endorsement indicates that an educator is qualified to teach from birth through grade 12 assignments in Special Education: Early Intervention as provided by TSPC Licensure Guide for Special Education: Early Intervention.

(2) An educator is not authorized to teach in the endorsed area unless and until the endorsement is officially added to the license, except as provided in OAR 584-210-0170 Atypical Assignments and OAR 584-210-0160, License on Conditional Assignment.

(3) To be eligible to add a Special Education: Early Intervention endorsement to an existing Preliminary Professional, Teacher Leader or Legacy teaching license, an applicant must:

(a) Be admitted to and complete a Commission-approved Special Education: Early Intervention preparation program that meets the standards as provided in Chapter 584, Division 420; and

(b) Submit a complete and correct application to obtain the endorsement in the form and manner required by the Commission, including payment of all required fees as provided in OAR 584-200-0050.

NOTE: Adding the endorsement at the time of renewal will not require an additional cost to the licensure renewal process.

Stat. Auth.: ORS 342

Stats. Implemented: ORS 342.120 - 342.430, 342.455 - 342.495 & 342.553

Hist.: TSPC 12-2015, f. 11-13-15, cert. ef. 1-1-16; TSPC 1-2016, f. & cert. ef. 2-10-16; TSPC 2-2017, f. & cert. ef. 4-12-17

584-420-0305

Single-Subject Endorsement: Program Standards

(1) Candidates who are prepared for the single-subject endorsement areas will demonstrate the knowledge, skills, professional dispositions and cultural competencies necessary to promote the academic, career, personal and social development of students in the single-subject learning environments.

(2) The Commission may provide approval to an educator preparation program that prepares candidates for a single-subject endorsement as provided in subsection (3) of this rule only if it includes:

(a) Content that will enable candidates to gain the knowledge, skills, abilities, professional dispositions, and cultural competencies to meet the standards set forth in this rule and the TSPC Program Review and Standards Handbook;

(b) Field experiences that include supervised teaching or internships in the single-subject area;

(c) A requirement for candidates to complete the Commission-approved test for the single-subject area;

(d) A requirement for preservice candidates to complete a teacher performance assessment in accordance with OAR 584-017-1100 Teacher Candidate Performance Assessments; and

(e) Integration of principles of cultural competency and equitable practice in each competency standard through the entire single subject endorsement program.

(3) For the purposes of this rule, single-subject endorsements include:

(a) Advanced Mathematics;

(b) Agricultural Science;

(c) Biology;

(d) Business: Generalist;

(e) Business: Marketing;

(f) Career Trades: Generalist;

(g) Chemistry;

(h) English Language Arts;

(i) Family and Consumer Sciences;

(j) Foundational English Language Arts;

(k) Foundational Mathematics;

(l) Foundational Science;

(m) Foundational Social Studies;

(n) Health;

(o) Integrated Science;

(p) Physics;

(q) Social Studies;

(r) Speech (Forensics); and

(s) World Languages.

Stat. Auth.: ORS 342

Stats. Implemented: ORS 342.120 - 342.143, 342.153, 342.165 & 342.223 - 342.232

Hist.: TSPC 2-2017, f. & cert. ef. 4-12-17

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141-075-0225	1-12-2017	Repeal	2-1-2017	150-305-0202	1-1-2017	Amend	2-1-2017
141-075-0230	1-12-2017	Repeal	2-1-2017	150-305-0360 T	12-21-2016	Amend(T)	2-1-2017
141-075-0235	1-12-2017	Repeal	2-1-2017	150-307-0470	1-1-2017	Repeal	2-1-2017
141-075-0240	1-12-2017	Repeal	2-1-2017	150-307-0510	1-1-2017	Amend	2-1-2017
141-075-0245	1-12-2017	Repeal	2-1-2017	150-311-0120	1-1-2017	Repeal	2-1-2017
141-075-0250	1-12-2017	Repeal	2-1-2017	150-311-0130	1-1-2017	Repeal	2-1-2017
141-075-0255	1-12-2017	Repeal	2-1-2017	150-311-0510	1-1-2017	Repeal	2-1-2017
141-075-0260	1-12-2017	Repeal	2-1-2017	150-311-0760	1-1-2017	Amend	2-1-2017
141-075-0265	1-12-2017	Repeal	2-1-2017	150-314-0140	1-1-2017	Amend	2-1-2017
141-075-0270	1-12-2017	Repeal	2-1-2017	150-314-0150	1-1-2017	Amend	2-1-2017
141-075-0275	1-12-2017	Repeal	2-1-2017	150-314-0485	1-1-2017	Amend	2-1-2017
141-075-0280	1-12-2017	Repeal	2-1-2017	150-315-0070	1-1-2017	Amend	2-1-2017
141-075-0285	1-12-2017	Repeal	2-1-2017	150-315-0080	1-1-2017	Repeal	2-1-2017
141-075-0290	1-12-2017	Repeal	2-1-2017	150-315-0082	1-1-2017	Repeal	2-1-2017
141-075-0295	1-12-2017	Repeal	2-1-2017	150-315-0084	1-1-2017	Repeal	2-1-2017
141-075-0300	1-12-2017	Repeal	2-1-2017	150-315-0120	1-1-2017	Repeal	2-1-2017
141-075-0305	1-12-2017	Repeal	2-1-2017	150-315-0121	1-1-2017	Adopt	2-1-2017
141-075-0310	1-12-2017	Repeal	2-1-2017	150-315-0125	1-1-2017	Adopt	2-1-2017
141-075-0315	1-12-2017	Repeal	2-1-2017	150-315-0190	1-1-2017	Repeal	2-1-2017
141-075-0320	1-12-2017	Repeal	2-1-2017	150-316-0075	1-1-2017	Repeal	2-1-2017
141-075-0325	1-12-2017	Repeal	2-1-2017	150-316-0086	1-1-2017	Amend	2-1-2017
141-075-0330	1-12-2017	Repeal	2-1-2017	150-316-0100	1-1-2017	Repeal	2-1-2017
141-075-0335	1-12-2017	Repeal	2-1-2017	150-316-0210	1-1-2017	Repeal	2-1-2017

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150-316-0359	1-1-2017	Amend	2-1-2017	255-060-0011	4-5-2017	Amend	5-1-2017
150-316-0435	1-1-2017	Amend	2-1-2017	255-060-0016	1-3-2017	Amend(T)	2-1-2017
150-316-0517	1-1-2017	Repeal	2-1-2017	255-060-0016	4-5-2017	Amend	5-1-2017
150-320-0010	1-1-2017	Repeal	2-1-2017	255-080-0001	4-5-2017	Amend	5-1-2017
150-320-0040	1-1-2017	Amend	2-1-2017	255-085-0010	1-3-2017	Amend(T)	2-1-2017
150-321-0340	1-1-2017	Amend	2-1-2017	255-085-0010	3-21-2017	Amend(T)	5-1-2017
150-321-0810	1-1-2017	Amend	2-1-2017	255-085-0020	1-3-2017	Amend(T)	2-1-2017
150-323-0130	1-1-2017	Amend	2-1-2017	255-085-0020	3-21-2017	Amend(T)	5-1-2017
150-323-0150	1-1-2017	Amend	2-1-2017	255-085-0030	3-21-2017	Amend(T)	5-1-2017
150-418-0010	1-1-2017	Adopt	2-1-2017	255-085-0040	3-21-2017	Amend(T)	5-1-2017
162-050-0030	1-5-2017	Adopt	2-1-2017	255-085-0050	3-21-2017	Amend(T)	5-1-2017
165-012-0005	4-7-2017	Amend	5-1-2017	255-085-0060	3-21-2017	Adopt(T)	5-1-2017
166-150-0005	1-13-2017	Amend	2-1-2017	257-050-0050	11-18-2016	Amend(T)	1-1-2017
166-150-0110	1-13-2017	Amend	2-1-2017	257-050-0050	3-8-2017	Amend	4-1-2017
166-400-0010	1-13-2017	Amend	2-1-2017	257-050-0145	11-18-2016	Amend(T)	1-1-2017
166-400-0015	1-13-2017	Amend	2-1-2017	257-050-0145	3-8-2017	Amend	4-1-2017
166-400-0020	1-13-2017	Amend	2-1-2017	257-095-0000	12-14-2016	Adopt(T)	1-1-2017
166-400-0025	1-13-2017	Amend	2-1-2017	257-095-0010	12-14-2016	Adopt(T)	1-1-2017
166-400-0030	1-13-2017	Amend	2-1-2017	257-095-0030	12-14-2016	Adopt(T)	1-1-2017
166-400-0035	1-13-2017	Amend	2-1-2017	257-095-0040	12-14-2016	Adopt(T)	1-1-2017
166-400-0040	1-13-2017	Amend	2-1-2017	257-095-0050	12-14-2016	Adopt(T)	1-1-2017
166-400-0045	1-13-2017	Amend	2-1-2017	257-095-0060	12-14-2016	Adopt(T)	1-1-2017
166-400-0050	1-13-2017	Amend	2-1-2017	257-095-0070	12-14-2016	Adopt(T)	1-1-2017
166-400-0055	1-13-2017	Amend	2-1-2017	257-095-0080	12-14-2016	Adopt(T)	1-1-2017
166-400-0060	1-13-2017	Amend	2-1-2017	257-095-0090	12-14-2016	Adopt(T)	1-1-2017
166-400-0065	1-13-2017	Amend	2-1-2017	257-095-0100	12-14-2016	Adopt(T)	1-1-2017
170-062-0000	2-23-2017	Amend	4-1-2017	259-008-0010	4-1-2017	Amend	5-1-2017
170-063-0000	2-23-2017	Amend	4-1-2017	259-008-0011	4-1-2017	Amend	5-1-2017
177-010-0100	4-1-2017	Amend	5-1-2017	259-008-0025	12-22-2016	Amend	2-1-2017
177-036-0030	2-1-2017	Amend	3-1-2017	259-008-0045	1-1-2017	Amend	2-1-2017
177-036-0030(T)	2-1-2017	Repeal	3-1-2017	259-008-0060	1-1-2017	Amend	2-1-2017
199-001-0010	11-17-2016	Amend	1-1-2017	259-008-0065	3-22-2017	Amend	5-1-2017
199-005-0080	11-17-2016	Adopt	1-1-2017	259-008-0075	4-1-2017	Amend	5-1-2017
199-040-0027	11-17-2016	Adopt	1-1-2017	259-008-0080	4-1-2017	Amend	5-1-2017
213-003-0001	1-1-2017	Amend	2-1-2017	259-008-0085	4-1-2017	Amend	5-1-2017
213-004-0001	1-1-2017	Amend	2-1-2017	259-008-0090	3-22-2017	Amend	5-1-2017
213-017-0004	1-1-2017	Amend	2-1-2017	259-009-0062	12-22-2016	Amend	2-1-2017
213-017-0005	1-1-2017	Amend	2-1-2017	259-060-0010	3-22-2017	Amend	5-1-2017
213-017-0006	1-1-2017	Amend	2-1-2017	259-060-0015	3-22-2017	Amend	5-1-2017
213-017-0008	1-1-2017	Amend	2-1-2017	259-060-0130	3-22-2017	Amend	5-1-2017
213-017-0011	1-1-2017	Amend	2-1-2017	259-060-0200	3-22-2017	Adopt	5-1-2017
213-018-0075	1-1-2017	Amend	2-1-2017	259-060-0450	3-22-2017	Amend	5-1-2017
213-019-0007	1-1-2017	Amend	2-1-2017	259-060-0600	3-22-2017	Amend	5-1-2017
213-019-0008	1-1-2017	Amend	2-1-2017	259-061-0010	3-22-2017	Amend	5-1-2017
213-019-0011	1-1-2017	Amend	2-1-2017	259-061-0018	3-22-2017	Amend	5-1-2017
213-019-0012	1-1-2017	Amend	2-1-2017	259-061-0110	3-22-2017	Amend	5-1-2017
213-019-0015	1-1-2017	Amend	2-1-2017	291-001-0115	3-9-2017	Adopt	4-1-2017
213-071-0010	12-29-2016	Adopt	2-1-2017	291-061-0061	3-30-2017	Amend(T)	5-1-2017
213-071-0015	12-29-2016	Adopt	2-1-2017	291-063-0030	3-15-2017	Amend(T)	4-1-2017
213-071-0020	12-29-2016	Adopt	2-1-2017	291-065-0006	3-17-2017	Amend	5-1-2017
230-020-0330	12-1-2016	Amend	1-1-2017	291-065-0007	3-17-2017	Amend	5-1-2017
230-030-0150	2-28-2017	Amend	4-1-2017	291-079-0030	11-30-2016	Repeal	1-1-2017
250-020-0091	12-5-2016	Amend(T)	1-1-2017	291-079-0040	11-30-2016	Repeal	1-1-2017
250-020-0091(T)	12-5-2016	Suspend	1-1-2017	291-210-0010	2-15-2017	Amend(T)	3-1-2017
255-005-0005	4-5-2017	Amend	5-1-2017	291-210-0020	2-15-2017	Amend(T)	3-1-2017

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291-210-0040	2-15-2017	Adopt(T)	3-1-2017	309-014-0040	12-1-2016	Amend	1-1-2017
291-210-0050	2-15-2017	Adopt(T)	3-1-2017	309-018-0100	11-28-2016	Amend	1-1-2017
309-008-0100	11-30-2016	Adopt	1-1-2017	309-018-0105	11-28-2016	Amend	1-1-2017
309-008-0200	11-30-2016	Adopt	1-1-2017	309-018-0107	11-28-2016	Adopt	1-1-2017
309-008-0250	11-30-2016	Adopt	1-1-2017	309-018-0160	11-28-2016	Amend	1-1-2017
309-008-0300	11-30-2016	Adopt	1-1-2017	309-018-0210	11-28-2016	Amend	1-1-2017
309-008-0400	11-30-2016	Adopt	1-1-2017	309-018-0215	11-28-2016	Amend	1-1-2017
309-008-0500	11-30-2016	Adopt	1-1-2017	309-019-0100	11-30-2016	Amend	1-1-2017
309-008-0600	11-30-2016	Adopt	1-1-2017	309-019-0105	11-30-2016	Amend	1-1-2017
309-008-0700	11-30-2016	Adopt	1-1-2017	309-019-0105	12-28-2016	Amend(T)	2-1-2017
309-008-0800	11-30-2016	Adopt	1-1-2017	309-019-0110	11-30-2016	Amend	1-1-2017
309-008-0800	1-1-2017	Amend(T)	2-1-2017	309-019-0110	12-28-2016	Amend(T)	2-1-2017
309-008-0900	11-30-2016	Adopt	1-1-2017	309-019-0115	12-28-2016	Amend(T)	2-1-2017
309-008-0900	1-1-2017	Amend(T)	2-1-2017	309-019-0120	12-28-2016	Amend(T)	2-1-2017
309-008-0905	1-1-2017	Adopt(T)	2-1-2017	309-019-0125	11-30-2016	Amend	1-1-2017
309-008-1000	11-30-2016	Adopt	1-1-2017	309-019-0125	12-28-2016	Amend(T)	2-1-2017
309-008-1100	11-30-2016	Adopt	1-1-2017	309-019-0130	11-30-2016	Amend	1-1-2017
309-008-1100	1-1-2017	Amend(T)	2-1-2017	309-019-0130	12-28-2016	Amend(T)	2-1-2017
309-008-1200	11-30-2016	Adopt	1-1-2017	309-019-0135	11-30-2016	Amend	1-1-2017
309-008-1200	1-1-2017	Amend(T)	2-1-2017	309-019-0135	12-28-2016	Amend(T)	2-1-2017
309-008-1300	11-30-2016	Adopt	1-1-2017	309-019-0140	11-30-2016	Amend	1-1-2017
309-008-1300	1-1-2017	Amend(T)	2-1-2017	309-019-0140	12-28-2016	Amend(T)	2-1-2017
309-008-1400	11-30-2016	Adopt	1-1-2017	309-019-0145	11-30-2016	Amend	1-1-2017
309-008-1500	11-30-2016	Adopt	1-1-2017	309-019-0145	12-28-2016	Amend(T)	2-1-2017
309-008-1600	11-30-2016	Adopt	1-1-2017	309-019-0150	12-28-2016	Amend(T)	2-1-2017
309-011-0024	12-27-2016	Amend	2-1-2017	309-019-0150	1-18-2017	Amend(T)	3-1-2017
309-011-0026	12-27-2016	Amend	2-1-2017	309-019-0151	12-28-2016	Adopt(T)	2-1-2017
309-011-0028	12-27-2016	Amend	2-1-2017	309-019-0151	1-18-2017	Amend(T)	3-1-2017
309-011-0031	12-27-2016	Adopt	2-1-2017	309-019-0152	12-28-2016	Adopt(T)	2-1-2017
309-011-0032	12-27-2016	Amend	2-1-2017	309-019-0155	12-28-2016	Amend(T)	2-1-2017
309-011-0034	12-27-2016	Amend	2-1-2017	309-019-0160	12-28-2016	Amend(T)	2-1-2017
309-011-0036	12-27-2016	Amend	2-1-2017	309-019-0165	12-28-2016	Amend(T)	2-1-2017
309-012-0130	12-1-2016	Repeal	1-1-2017	309-019-0175	11-30-2016	Amend	1-1-2017
309-012-0140	12-1-2016	Repeal	1-1-2017	309-019-0175	12-28-2016	Amend(T)	2-1-2017
309-012-0150	12-1-2016	Repeal	1-1-2017	309-019-0180	12-28-2016	Amend(T)	2-1-2017
309-012-0160	12-1-2016	Repeal	1-1-2017	309-019-0185	12-28-2016	Amend(T)	2-1-2017
309-012-0170	12-1-2016	Repeal	1-1-2017	309-019-0195	11-30-2016	Amend	1-1-2017
309-012-0180	12-1-2016	Repeal	1-1-2017	309-019-0210	11-30-2016	Amend	1-1-2017
309-012-0190	12-1-2016	Repeal	1-1-2017	309-019-0215	11-30-2016	Amend	1-1-2017
309-012-0200	12-1-2016	Repeal	1-1-2017	309-019-0215	12-28-2016	Amend(T)	2-1-2017
309-012-0210	12-1-2016	Repeal	1-1-2017	309-019-0220	11-30-2016	Amend	1-1-2017
309-012-0220	12-1-2016	Repeal	1-1-2017	309-019-0225	11-30-2016	Adopt	1-1-2017
309-012-0230	12-1-2016	Repeal	1-1-2017	309-019-0225	12-28-2016	Amend(T)	2-1-2017
309-014-0000	12-1-2016	Amend	1-1-2017	309-019-0225	1-18-2017	Amend(T)	3-1-2017
309-014-0005	12-1-2016	Amend	1-1-2017	309-019-0226	12-28-2016	Adopt(T)	2-1-2017
309-014-0010	12-1-2016	Amend	1-1-2017	309-019-0226	1-18-2017	Amend(T)	3-1-2017
309-014-0015	12-1-2016	Amend	1-1-2017	309-019-0230	11-30-2016	Adopt	1-1-2017
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309-014-0021	12-1-2016	Adopt	1-1-2017	309-019-0235	11-30-2016	Adopt	1-1-2017
309-014-0022	12-1-2016	Adopt	1-1-2017	309-019-0235	1-18-2017	Amend(T)	3-1-2017
309-014-0023	12-1-2016	Adopt	1-1-2017	309-019-0240	11-30-2016	Adopt	1-1-2017
309-014-0025	12-1-2016	Amend	1-1-2017	309-019-0240	12-28-2016	Amend(T)	2-1-2017
309-014-0030	12-1-2016	Amend	1-1-2017	309-019-0241	12-28-2016	Adopt(T)	2-1-2017
309-014-0035	12-1-2016	Amend	1-1-2017	309-019-0242	12-28-2016	Adopt(T)	2-1-2017
309-014-0036	12-1-2016	Adopt	1-1-2017	309-019-0242	1-18-2017	Amend(T)	3-1-2017

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309-019-0245	12-28-2016	Amend(T)	2-1-2017	309-027-0060	12-5-2016	Adopt	1-1-2017
309-019-0248	11-30-2016	Adopt	1-1-2017	309-032-0850	12-1-2016	Amend	1-1-2017
309-019-0248	1-18-2017	Amend(T)	3-1-2017	309-032-0860	12-1-2016	Amend	1-1-2017
309-019-0250	11-30-2016	Adopt	1-1-2017	309-032-0870	12-1-2016	Amend	1-1-2017
309-019-0250	1-18-2017	Amend(T)	3-1-2017	309-032-0890	12-1-2016	Amend	1-1-2017
309-019-0255	11-30-2016	Adopt	1-1-2017	309-033-0210	12-29-2016	Amend	2-1-2017
309-019-0270	12-28-2016	Adopt(T)	2-1-2017	309-033-0410	12-29-2016	Amend	2-1-2017
309-019-0270	1-18-2017	Amend(T)	3-1-2017	309-033-0432	12-29-2016	Amend	2-1-2017
309-019-0275	12-28-2016	Adopt(T)	2-1-2017	309-033-0510	12-29-2016	Amend	2-1-2017
309-019-0275	1-18-2017	Amend(T)	3-1-2017	309-033-0530	12-29-2016	Amend	2-1-2017
309-019-0280	12-28-2016	Adopt(T)	2-1-2017	309-033-0610	12-29-2016	Amend	2-1-2017
309-019-0280	1-18-2017	Amend(T)	3-1-2017	309-033-0710	12-29-2016	Amend	2-1-2017
309-019-0285	12-28-2016	Adopt(T)	2-1-2017	309-033-0720	12-29-2016	Amend	2-1-2017
309-019-0285	1-18-2017	Amend(T)	3-1-2017	309-033-0740	12-29-2016	Amend	2-1-2017
309-019-0290	12-28-2016	Adopt(T)	2-1-2017	309-033-0910	12-29-2016	Amend	2-1-2017
309-019-0290	1-18-2017	Amend(T)	3-1-2017	309-033-0970	12-29-2016	Amend	2-1-2017
309-019-0295	12-28-2016	Adopt(T)	2-1-2017	309-035-0100	3-4-2017	Amend(T)	4-1-2017
309-019-0295	1-18-2017	Amend(T)	3-1-2017	309-035-0105	3-4-2017	Amend(T)	4-1-2017
309-022-0100	12-1-2016	Amend	1-1-2017	309-035-0110	3-4-2017	Amend(T)	4-1-2017
309-022-0105	12-1-2016	Amend	1-1-2017	309-035-0113	3-4-2017	Suspend	4-1-2017
309-022-0105	12-29-2016	Amend(T)	2-1-2017	309-035-0115	3-4-2017	Amend(T)	4-1-2017
309-022-0110	12-29-2016	Amend(T)	2-1-2017	309-035-0117	3-4-2017	Suspend	4-1-2017
309-022-0115	12-29-2016	Amend(T)	2-1-2017	309-035-0120	3-4-2017	Amend(T)	4-1-2017
309-022-0125	12-29-2016	Amend(T)	2-1-2017	309-035-0125	3-4-2017	Amend(T)	4-1-2017
309-022-0130	12-29-2016	Amend(T)	2-1-2017	309-035-0130	3-4-2017	Amend(T)	4-1-2017
309-022-0135	12-1-2016	Amend	1-1-2017	309-035-0135	3-4-2017	Amend(T)	4-1-2017
309-022-0140	12-29-2016	Amend(T)	2-1-2017	309-035-0140	3-4-2017	Amend(T)	4-1-2017
309-022-0155	12-29-2016	Amend(T)	2-1-2017	309-035-0145	3-4-2017	Amend(T)	4-1-2017
309-022-0160	12-29-2016	Amend(T)	2-1-2017	309-035-0150	3-4-2017	Amend(T)	4-1-2017
309-022-0175	12-1-2016	Amend	1-1-2017	309-035-0155	3-4-2017	Amend(T)	4-1-2017
309-022-0175	12-29-2016	Amend(T)	2-1-2017	309-035-0157	3-4-2017	Suspend	4-1-2017
309-022-0180	12-29-2016	Amend(T)	2-1-2017	309-035-0159	3-4-2017	Suspend	4-1-2017
309-022-0192	12-29-2016	Adopt(T)	2-1-2017	309-035-0163	3-4-2017	Adopt(T)	4-1-2017
309-022-0195	12-29-2016	Amend(T)	2-1-2017	309-035-0165	3-4-2017	Amend(T)	4-1-2017
309-022-0200	12-29-2016	Amend(T)	2-1-2017	309-035-0167	3-4-2017	Suspend	4-1-2017
309-022-0205	12-1-2016	Amend	1-1-2017	309-035-0170	3-4-2017	Amend(T)	4-1-2017
309-022-0205	12-29-2016	Amend(T)	2-1-2017	309-035-0175	3-4-2017	Amend(T)	4-1-2017
309-022-0210	12-29-2016	Amend(T)	2-1-2017	309-035-0183	3-4-2017	Adopt(T)	4-1-2017
309-022-0215	12-29-2016	Amend(T)	2-1-2017	309-035-0185	3-4-2017	Amend(T)	4-1-2017
309-022-0220	12-29-2016	Amend(T)	2-1-2017	309-035-0190	3-4-2017	Amend(T)	4-1-2017
309-022-0225	12-29-2016	Amend(T)	2-1-2017	309-035-0195	3-4-2017	Adopt(T)	4-1-2017
309-022-0230	12-29-2016	Amend(T)	2-1-2017	309-035-0200	3-4-2017	Adopt(T)	4-1-2017
309-023-0100	12-29-2016	Adopt	2-1-2017	309-035-0205	3-4-2017	Adopt(T)	4-1-2017
309-023-0110	12-29-2016	Adopt	2-1-2017	309-035-0210	3-4-2017	Adopt(T)	4-1-2017
309-023-0120	12-29-2016	Adopt	2-1-2017	309-035-0215	3-4-2017	Adopt(T)	4-1-2017
309-023-0130	12-29-2016	Adopt	2-1-2017	309-035-0220	3-4-2017	Adopt(T)	4-1-2017
309-023-0140	12-29-2016	Adopt	2-1-2017	309-035-0225	3-4-2017	Adopt(T)	4-1-2017
309-023-0150	12-29-2016	Adopt	2-1-2017	309-035-0250	3-4-2017	Suspend	4-1-2017
309-023-0160	12-29-2016	Adopt	2-1-2017	309-035-0260	3-4-2017	Suspend	4-1-2017
309-023-0170	12-29-2016	Adopt	2-1-2017	309-035-0270	3-4-2017	Suspend	4-1-2017
309-023-0180	12-29-2016	Adopt	2-1-2017	309-035-0280	3-4-2017	Suspend	4-1-2017
309-027-0010	12-5-2016	Adopt	1-1-2017	309-035-0290	3-4-2017	Suspend	4-1-2017
309-027-0020	12-5-2016	Adopt	1-1-2017	309-035-0300	3-4-2017	Suspend	4-1-2017
309-027-0030	12-5-2016	Adopt	1-1-2017	309-035-0310	3-4-2017	Suspend	4-1-2017
309-027-0040	12-5-2016	Adopt	1-1-2017	309-035-0320	3-4-2017	Suspend	4-1-2017

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309-035-0340	3-4-2017	Suspend	4-1-2017	309-040-0445	3-4-2017	Amend(T)	4-1-2017
309-035-0350	3-4-2017	Suspend	4-1-2017	309-040-0450	3-4-2017	Amend(T)	4-1-2017
309-035-0360	3-4-2017	Suspend	4-1-2017	309-040-0455	3-4-2017	Amend(T)	4-1-2017
309-035-0370	3-4-2017	Suspend	4-1-2017	325-005-0015	3-1-2017	Amend	4-1-2017
309-035-0380	3-4-2017	Suspend	4-1-2017	330-063-0010	12-21-2016	Amend	2-1-2017
309-035-0390	3-4-2017	Suspend	4-1-2017	330-063-0015	12-21-2016	Amend	2-1-2017
309-035-0400	3-4-2017	Suspend	4-1-2017	330-063-0020	12-21-2016	Amend	2-1-2017
309-035-0410	3-4-2017	Suspend	4-1-2017	330-063-0025	12-21-2016	Amend	2-1-2017
309-035-0420	3-4-2017	Suspend	4-1-2017	330-070-0010	1-1-2017	Amend	2-1-2017
309-035-0430	3-4-2017	Suspend	4-1-2017	330-070-0013	1-1-2017	Amend	2-1-2017
309-035-0440	3-4-2017	Suspend	4-1-2017	330-070-0014	1-1-2017	Amend	2-1-2017
309-035-0450	3-4-2017	Suspend	4-1-2017	330-070-0022	1-1-2017	Amend	2-1-2017
309-035-0460	3-4-2017	Suspend	4-1-2017	330-070-0024	1-1-2017	Amend	2-1-2017
309-035-0500	3-4-2017	Suspend	4-1-2017	330-070-0025	1-1-2017	Amend	2-1-2017
309-035-0550	3-4-2017	Suspend	4-1-2017	330-070-0026	1-1-2017	Amend	2-1-2017
309-035-0560	3-4-2017	Suspend	4-1-2017	330-070-0027	1-1-2017	Amend	2-1-2017
309-035-0570	3-4-2017	Suspend	4-1-2017	330-070-0029	1-1-2017	Amend	2-1-2017
309-035-0580	3-4-2017	Suspend	4-1-2017	330-070-0060	1-1-2017	Amend	2-1-2017
309-035-0590	3-4-2017	Suspend	4-1-2017	330-070-0073	1-1-2017	Amend	2-1-2017
309-035-0600	3-4-2017	Suspend	4-1-2017	330-092-0015	12-21-2016	Amend	2-1-2017
309-039-0500	11-30-2016	Amend	1-1-2017	330-110-0042	1-25-2017	Amend(T)	3-1-2017
309-039-0510	11-30-2016	Amend	1-1-2017	330-160-0015	12-21-2016	Amend	2-1-2017
309-039-0530	11-30-2016	Amend	1-1-2017	330-160-0030	12-21-2016	Amend	2-1-2017
309-039-0580	11-30-2016	Amend	1-1-2017	330-160-0035	12-21-2016	Amend	2-1-2017
309-040-0300	3-4-2017	Amend(T)	4-1-2017	330-160-0080	12-21-2016	Adopt	2-1-2017
309-040-0305	3-4-2017	Amend(T)	4-1-2017	330-160-0090	12-21-2016	Adopt	2-1-2017
309-040-0307	3-4-2017	Adopt(T)	4-1-2017	330-220-0000	1-25-2017	Amend	3-1-2017
309-040-0310	3-4-2017	Amend(T)	4-1-2017	330-220-0010	1-25-2017	Amend	3-1-2017
309-040-0315	3-4-2017	Amend(T)	4-1-2017	330-220-0020	1-25-2017	Amend	3-1-2017
309-040-0320	3-4-2017	Amend(T)	4-1-2017	330-220-0030	1-25-2017	Amend	3-1-2017
309-040-0325	3-4-2017	Amend(T)	4-1-2017	330-220-0040	1-25-2017	Amend	3-1-2017
309-040-0330	3-4-2017	Amend(T)	4-1-2017	330-220-0050	1-25-2017	Amend	3-1-2017
309-040-0335	3-4-2017	Amend(T)	4-1-2017	330-220-0070	1-25-2017	Amend	3-1-2017
309-040-0340	3-4-2017	Amend(T)	4-1-2017	330-220-0080	1-25-2017	Amend	3-1-2017
309-040-0345	3-4-2017	Amend(T)	4-1-2017	330-220-0090	1-25-2017	Amend	3-1-2017
309-040-0350	3-4-2017	Amend(T)	4-1-2017	330-220-0100	1-25-2017	Amend	3-1-2017
309-040-0355	3-4-2017	Amend(T)	4-1-2017	330-220-0150	1-25-2017	Amend	3-1-2017
309-040-0360	3-4-2017	Amend(T)	4-1-2017	331-910-0000	1-6-2017	Amend	2-1-2017
309-040-0365	3-4-2017	Amend(T)	4-1-2017	331-910-0005	1-6-2017	Amend	2-1-2017
309-040-0370	3-4-2017	Amend(T)	4-1-2017	331-910-0010	1-6-2017	Amend	2-1-2017
309-040-0375	3-4-2017	Amend(T)	4-1-2017	331-910-0015	1-6-2017	Amend	2-1-2017
309-040-0380	3-4-2017	Amend(T)	4-1-2017	331-910-0025	1-6-2017	Amend	2-1-2017
309-040-0385	3-4-2017	Amend(T)	4-1-2017	331-910-0030	1-6-2017	Amend	2-1-2017
309-040-0390	3-4-2017	Amend(T)	4-1-2017	331-910-0035	1-6-2017	Amend	2-1-2017
309-040-0393	3-4-2017	Adopt(T)	4-1-2017	331-910-0040	1-6-2017	Amend	2-1-2017
309-040-0394	3-4-2017	Adopt(T)	4-1-2017	331-910-0045	1-6-2017	Amend	2-1-2017
309-040-0395	3-4-2017	Amend(T)	4-1-2017	331-910-0050	1-6-2017	Amend	2-1-2017
309-040-0400	3-4-2017	Amend(T)	4-1-2017	331-910-0055	1-6-2017	Amend	2-1-2017
309-040-0405	3-4-2017	Amend(T)	4-1-2017	331-910-0060	1-6-2017	Amend	2-1-2017
309-040-0410	3-4-2017	Amend(T)	4-1-2017	331-910-0070	1-6-2017	Amend	2-1-2017
309-040-0415	3-4-2017	Amend(T)	4-1-2017	331-910-0075	1-6-2017	Amend	2-1-2017
309-040-0420	3-4-2017	Amend(T)	4-1-2017	331-910-0080	1-6-2017	Amend	2-1-2017
309-040-0425	3-4-2017	Amend(T)	4-1-2017	331-910-0085	1-6-2017	Amend	2-1-2017
309-040-0430	3-4-2017	Amend(T)	4-1-2017	331-915-0000	1-6-2017	Amend	2-1-2017
309-040-0435	3-4-2017	Amend(T)	4-1-2017	331-915-0005	1-6-2017	Amend	2-1-2017

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331-915-0020	1-6-2017	Amend	2-1-2017	333-008-0010	11-28-2016	Amend	1-1-2017
331-915-0025	1-6-2017	Amend	2-1-2017	333-008-0023	11-28-2016	Amend	1-1-2017
331-915-0030	1-6-2017	Amend	2-1-2017	333-008-0040	11-28-2016	Amend	1-1-2017
331-915-0035	1-6-2017	Amend	2-1-2017	333-008-0600	11-28-2016	Amend	1-1-2017
331-915-0040	1-6-2017	Amend	2-1-2017	333-008-1020	11-28-2016	Amend	1-1-2017
331-915-0045	1-6-2017	Repeal	2-1-2017	333-008-1110	11-28-2016	Amend	1-1-2017
331-915-0050	1-6-2017	Amend	2-1-2017	333-008-1190	11-28-2016	Repeal	1-1-2017
331-915-0055	1-6-2017	Amend	2-1-2017	333-008-1200	11-28-2016	Amend	1-1-2017
331-915-0060	1-6-2017	Amend	2-1-2017	333-008-1200	12-31-2016	Amend(T)	2-1-2017
331-915-0065	1-6-2017	Amend	2-1-2017	333-008-1200(T)	11-28-2016	Repeal	1-1-2017
331-915-0070	1-6-2017	Amend	2-1-2017	333-008-1225	11-28-2016	Repeal	1-1-2017
331-915-0075	1-6-2017	Amend	2-1-2017	333-008-1230	11-28-2016	Amend	1-1-2017
331-915-0080	1-6-2017	Amend	2-1-2017	333-008-1230	12-31-2016	Amend(T)	2-1-2017
331-915-0085	1-6-2017	Amend	2-1-2017	333-008-1230(T)	11-28-2016	Repeal	1-1-2017
333-004-0000	1-10-2017	Amend	2-1-2017	333-008-1255	11-28-2016	Adopt	1-1-2017
333-004-0010	1-10-2017	Amend	2-1-2017	333-008-1500	11-28-2016	Amend	1-1-2017
333-004-0020	1-10-2017	Amend	2-1-2017	333-008-1500(T)	11-28-2016	Repeal	1-1-2017
333-004-0030	1-10-2017	Amend	2-1-2017	333-008-1505	11-28-2016	Amend	1-1-2017
333-004-0040	1-10-2017	Amend	2-1-2017	333-008-1505(T)	11-28-2016	Repeal	1-1-2017
333-004-0050	1-10-2017	Amend	2-1-2017	333-008-1620	11-28-2016	Amend	1-1-2017
333-004-0060	1-10-2017	Amend	2-1-2017	333-008-1730	11-28-2016	Amend	1-1-2017
333-004-0070	1-10-2017	Amend	2-1-2017	333-008-1740	11-28-2016	Amend	1-1-2017
333-004-0080	1-10-2017	Amend	2-1-2017	333-008-1740(T)	11-28-2016	Repeal	1-1-2017
333-004-0110	1-10-2017	Amend	2-1-2017	333-008-1760	11-28-2016	Amend	1-1-2017
333-004-0120	1-10-2017	Amend	2-1-2017	333-008-1770	11-28-2016	Amend	1-1-2017
333-004-0130	1-10-2017	Amend	2-1-2017	333-008-1820	11-28-2016	Amend	1-1-2017
333-004-0140	1-10-2017	Amend	2-1-2017	333-008-2080	11-28-2016	Amend	1-1-2017
333-004-0150	1-10-2017	Amend	2-1-2017	333-008-2120	11-28-2016	Amend	1-1-2017
333-004-0160	1-10-2017	Amend	2-1-2017	333-008-2130	11-28-2016	Repeal	1-1-2017
333-007-0010	11-28-2016	Amend	1-1-2017	333-008-2190	11-28-2016	Amend	1-1-2017
333-007-0010(T)	11-28-2016	Repeal	1-1-2017	333-008-9900	11-28-2016	Amend	1-1-2017
333-007-0090	11-28-2016	Amend	1-1-2017	333-008-9910	12-31-2016	Adopt(T)	2-1-2017
333-007-0090	12-2-2016	Amend(T)	1-1-2017	333-010-0405	12-12-2016	Amend	1-1-2017
333-007-0090	12-15-2016	Amend(T)	1-1-2017	333-010-0415	12-12-2016	Amend	1-1-2017
333-007-0100	11-28-2016	Amend	1-1-2017	333-010-0435	12-12-2016	Amend	1-1-2017
333-007-0100(T)	11-28-2016	Repeal	1-1-2017	333-016-2035	12-1-2016	Adopt	1-1-2017
333-007-0200	11-28-2016	Amend	1-1-2017	333-016-2040	12-1-2016	Adopt	1-1-2017
333-007-0210	11-28-2016	Amend	1-1-2017	333-016-2040	2-1-2017	Amend	3-1-2017
333-007-0220	11-28-2016	Amend	1-1-2017	333-016-2050	12-1-2016	Adopt	1-1-2017
333-007-0300	11-28-2016	Amend	1-1-2017	333-016-2060	12-1-2016	Adopt	1-1-2017
333-007-0310	12-2-2016	Amend(T)	1-1-2017	333-016-2060	2-1-2017	Amend	3-1-2017
333-007-0315	12-2-2016	Amend(T)	1-1-2017	333-016-2070	12-1-2016	Adopt	1-1-2017
333-007-0320	12-2-2016	Amend(T)	1-1-2017	333-016-2070	2-1-2017	Amend	3-1-2017
333-007-0320	12-15-2016	Amend(T)	1-1-2017	333-016-2080	2-1-2017	Adopt	3-1-2017
333-007-0350	12-2-2016	Amend(T)	1-1-2017	333-016-2090	12-1-2016	Adopt	1-1-2017
333-007-0350	12-15-2016	Amend(T)	1-1-2017	333-023-0805	1-10-2017	Amend	2-1-2017
333-007-0360	12-2-2016	Amend(T)	1-1-2017	333-023-0820	1-10-2017	Amend	2-1-2017
333-007-0360	12-15-2016	Amend(T)	1-1-2017	333-023-0830	1-10-2017	Adopt	2-1-2017
333-007-0410	12-2-2016	Amend(T)	1-1-2017	333-028-0220	7-1-2017	Amend	2-1-2017
333-007-0430	12-2-2016	Amend(T)	1-1-2017	333-028-0230	7-1-2017	Amend	2-1-2017
333-007-0440	12-2-2016	Amend(T)	1-1-2017	333-028-0234	7-1-2017	Adopt	2-1-2017
333-007-0440	12-15-2016	Amend(T)	1-1-2017	333-028-0238	7-1-2017	Adopt	2-1-2017
333-007-0450	12-2-2016	Amend(T)	1-1-2017	333-028-0240	7-1-2017	Amend	2-1-2017
333-007-0480	12-2-2016	Amend(T)	1-1-2017	333-028-0250	7-1-2017	Amend	2-1-2017

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333-046-0020	12-22-2016	Adopt	2-1-2017	333-070-0140	1-1-2017	Repeal	1-1-2017
333-046-0030	12-22-2016	Adopt	2-1-2017	333-070-0145	1-1-2017	Am. & Ren.	1-1-2017
333-046-0040	12-22-2016	Adopt	2-1-2017	333-070-0150	1-1-2017	Repeal	1-1-2017
333-046-0050	12-22-2016	Adopt	2-1-2017	333-070-0160	1-1-2017	Am. & Ren.	1-1-2017
333-046-0060	12-22-2016	Adopt	2-1-2017	333-070-0200	1-1-2017	Adopt	1-1-2017
333-046-0070	12-22-2016	Adopt	2-1-2017	333-102-0005	2-1-2017	Amend	3-1-2017
333-046-0080	12-22-2016	Adopt	2-1-2017	333-102-0015	2-1-2017	Amend	3-1-2017
333-046-0090	12-22-2016	Adopt	2-1-2017	333-102-0101	2-1-2017	Amend	3-1-2017
333-046-0100	12-22-2016	Adopt	2-1-2017	333-106-0325	2-1-2017	Amend	3-1-2017
333-046-0110	12-22-2016	Adopt	2-1-2017	333-125-0040	2-1-2017	Amend	3-1-2017
333-046-0120	12-22-2016	Adopt	2-1-2017	333-125-0120	2-1-2017	Amend	3-1-2017
333-046-0130	12-22-2016	Adopt	2-1-2017	333-250-0000	3-21-2017	Renumber	5-1-2017
333-064-0100	12-2-2016	Amend(T)	1-1-2017	333-250-0010	3-21-2017	Am. & Ren.	5-1-2017
333-064-0100	12-15-2016	Amend(T)	1-1-2017	333-250-0020	3-21-2017	Am. & Ren.	5-1-2017
333-064-0110	12-2-2016	Amend(T)	1-1-2017	333-250-0030	3-21-2017	Am. & Ren.	5-1-2017
333-064-0110	12-15-2016	Amend(T)	1-1-2017	333-250-0031	3-21-2017	Repeal	5-1-2017
333-068-0005	1-1-2017	Repeal	1-1-2017	333-250-0040	3-21-2017	Am. & Ren.	5-1-2017
333-068-0010	1-1-2017	Repeal	1-1-2017	333-250-0041	3-21-2017	Am. & Ren.	5-1-2017
333-068-0015	1-1-2017	Repeal	1-1-2017	333-250-0042	3-21-2017	Repeal	5-1-2017
333-068-0020	1-1-2017	Repeal	1-1-2017	333-250-0043	3-21-2017	Am. & Ren.	5-1-2017
333-068-0025	1-1-2017	Repeal	1-1-2017	333-250-0044	3-21-2017	Repeal	5-1-2017
333-068-0030	1-1-2017	Repeal	1-1-2017	333-250-0045	3-21-2017	Repeal	5-1-2017
333-068-0035	1-1-2017	Repeal	1-1-2017	333-250-0046	3-21-2017	Am. & Ren.	5-1-2017
333-068-0040	1-1-2017	Repeal	1-1-2017	333-250-0047	3-21-2017	Am. & Ren.	5-1-2017
333-068-0045	1-1-2017	Repeal	1-1-2017	333-250-0048	3-21-2017	Repeal	5-1-2017
333-068-0050	1-1-2017	Repeal	1-1-2017	333-250-0049	3-21-2017	Repeal	5-1-2017
333-068-0055	1-1-2017	Repeal	1-1-2017	333-250-0050	3-21-2017	Am. & Ren.	5-1-2017
333-068-0060	1-1-2017	Repeal	1-1-2017	333-250-0060	3-21-2017	Am. & Ren.	5-1-2017
333-068-0065	1-1-2017	Repeal	1-1-2017	333-250-0070	3-21-2017	Am. & Ren.	5-1-2017
333-069-0005	1-1-2017	Repeal	1-1-2017	333-250-0080	3-21-2017	Am. & Ren.	5-1-2017
333-069-0010	1-1-2017	Repeal	1-1-2017	333-250-0085	3-21-2017	Am. & Ren.	5-1-2017
333-069-0015	1-1-2017	Repeal	1-1-2017	333-250-0100	3-21-2017	Repeal	5-1-2017
333-069-0020	1-1-2017	Repeal	1-1-2017	333-250-0220	3-21-2017	Adopt	5-1-2017
333-069-0030	1-1-2017	Repeal	1-1-2017	333-250-0225	3-21-2017	Adopt	5-1-2017
333-069-0040	1-1-2017	Repeal	1-1-2017	333-250-0230	3-21-2017	Adopt	5-1-2017
333-069-0050	1-1-2017	Repeal	1-1-2017	333-250-0235	3-21-2017	Adopt	5-1-2017
333-069-0060	1-1-2017	Repeal	1-1-2017	333-250-0255	3-21-2017	Adopt	5-1-2017
333-069-0070	1-1-2017	Repeal	1-1-2017	333-250-0265	3-21-2017	Adopt	5-1-2017
333-069-0080	1-1-2017	Repeal	1-1-2017	333-250-0310	3-21-2017	Adopt	5-1-2017
333-069-0085	1-1-2017	Am. & Ren.	1-1-2017	333-250-0320	3-21-2017	Adopt	5-1-2017
333-069-0090	1-1-2017	Repeal	1-1-2017	333-250-0350	3-21-2017	Adopt	5-1-2017
333-069-0100	1-1-2017	Adopt	1-1-2017	333-250-0360	3-21-2017	Adopt	5-1-2017
333-069-0120	1-1-2017	Adopt	1-1-2017	333-250-0380	3-21-2017	Adopt	5-1-2017
333-070-0075	1-1-2017	Repeal	1-1-2017	333-250-0390	3-21-2017	Adopt	5-1-2017
333-070-0080	1-1-2017	Repeal	1-1-2017	333-250-0410	3-21-2017	Adopt	5-1-2017
333-070-0085	1-1-2017	Repeal	1-1-2017	333-265-0000	3-30-2017	Amend	5-1-2017
333-070-0090	1-1-2017	Repeal	1-1-2017	333-265-0010	3-30-2017	Amend	5-1-2017
333-070-0095	1-1-2017	Repeal	1-1-2017	333-265-0011	3-30-2017	Repeal	5-1-2017
333-070-0100	1-1-2017	Repeal	1-1-2017	333-265-0012	3-30-2017	Amend	5-1-2017
333-070-0105	1-1-2017	Repeal	1-1-2017	333-265-0014	3-30-2017	Amend	5-1-2017
333-070-0110	1-1-2017	Repeal	1-1-2017	333-265-0015	3-30-2017	Amend	5-1-2017
333-070-0115	1-1-2017	Am. & Ren.	1-1-2017	333-265-0016	3-30-2017	Amend	5-1-2017
333-070-0120	1-1-2017	Am. & Ren.	1-1-2017	333-265-0018	3-30-2017	Amend	5-1-2017
333-070-0125	1-1-2017	Repeal	1-1-2017	333-265-0020	3-30-2017	Amend	5-1-2017

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333-265-0023	3-30-2017	Amend	5-1-2017	340-090-0360	1-19-2017	Amend	3-1-2017
333-265-0024	3-30-2017	Amend	5-1-2017	340-090-0370	1-19-2017	Amend	3-1-2017
333-265-0025	3-30-2017	Amend	5-1-2017	340-090-0380	1-19-2017	Amend	3-1-2017
333-265-0030	3-30-2017	Amend	5-1-2017	340-090-0390	1-19-2017	Amend	3-1-2017
333-265-0040	3-30-2017	Amend	5-1-2017	340-090-0400	1-19-2017	Amend	3-1-2017
333-265-0050	3-30-2017	Amend	5-1-2017	340-090-0410	1-19-2017	Amend	3-1-2017
333-265-0056	3-30-2017	Amend	5-1-2017	340-090-0420	1-19-2017	Amend	3-1-2017
333-265-0060	3-30-2017	Amend	5-1-2017	340-090-0430	1-19-2017	Amend	3-1-2017
333-265-0070	3-30-2017	Amend	5-1-2017	340-090-0510	1-19-2017	Amend	3-1-2017
333-265-0080	3-30-2017	Amend	5-1-2017	340-143-0005	3-1-2017	Amend	3-1-2017
333-265-0083	3-30-2017	Amend	5-1-2017	340-143-0010	3-1-2017	Amend	3-1-2017
333-265-0085	3-30-2017	Amend	5-1-2017	340-143-0050	3-1-2017	Amend	3-1-2017
333-265-0087	3-30-2017	Amend	5-1-2017	340-200-0040	1-19-2017	Amend	3-1-2017
333-265-0090	3-30-2017	Amend	5-1-2017	340-220-0030	1-19-2017	Amend	3-1-2017
333-265-0100	3-30-2017	Am. & Ren.	5-1-2017	340-220-0040	1-19-2017	Amend	3-1-2017
333-265-0105	3-30-2017	Amend	5-1-2017	340-220-0050	1-19-2017	Amend	3-1-2017
333-265-0110	3-30-2017	Amend	5-1-2017	345-021-0010	3-8-2017	Amend	4-1-2017
333-265-0140	3-30-2017	Amend	5-1-2017	345-022-0000	3-8-2017	Amend	4-1-2017
333-265-0150	3-30-2017	Amend	5-1-2017	345-022-0060	3-8-2017	Amend	4-1-2017
333-265-0160	3-30-2017	Amend	5-1-2017	350-010-0000	4-1-2017	Adopt	4-1-2017
333-265-0170	3-30-2017	Amend	5-1-2017	350-010-0010	4-1-2017	Adopt	4-1-2017
333-510-0130	1-23-2017	Amend	3-1-2017	350-010-0020	4-1-2017	Adopt	4-1-2017
333-510-0130(T)	1-23-2017	Repeal	3-1-2017	350-010-0030	4-1-2017	Adopt	4-1-2017
333-535-0086	12-23-2016	Amend	2-1-2017	350-010-0040	4-1-2017	Adopt	4-1-2017
339-010-0005	2-15-2017	Amend	3-1-2017	350-010-0050	4-1-2017	Adopt	4-1-2017
339-010-0005	3-13-2017	Amend	4-1-2017	350-081-0017	4-1-2017	Repeal	4-1-2017
339-010-0020	1-27-2017	Amend	3-1-2017	407-007-0210	12-1-2016	Amend	1-1-2017
339-010-0020	2-16-2017	Amend	4-1-2017	407-007-0210	3-15-2017	Amend(T)	4-1-2017
340-090-0005	1-19-2017	Amend	3-1-2017	407-007-0210(T)	12-1-2016	Repeal	1-1-2017
340-090-0010	1-19-2017	Amend	3-1-2017	407-007-0250	12-1-2016	Amend	1-1-2017
340-090-0015	1-19-2017	Amend	3-1-2017	407-007-0250	3-15-2017	Amend(T)	4-1-2017
340-090-0020	1-19-2017	Amend	3-1-2017	407-007-0250(T)	12-1-2016	Repeal	1-1-2017
340-090-0030	1-19-2017	Amend	3-1-2017	407-007-0279	12-1-2016	Amend	1-1-2017
340-090-0040	1-19-2017	Amend	3-1-2017	407-007-0279	3-15-2017	Amend(T)	4-1-2017
340-090-0041	1-19-2017	Adopt	3-1-2017	407-007-0279(T)	12-1-2016	Repeal	1-1-2017
340-090-0042	1-19-2017	Adopt	3-1-2017	407-007-0290	12-1-2016	Amend	1-1-2017
340-090-0045	1-19-2017	Repeal	3-1-2017	407-007-0290(T)	12-1-2016	Repeal	1-1-2017
340-090-0050	1-19-2017	Amend	3-1-2017	407-007-0320	12-1-2016	Amend	1-1-2017
340-090-0060	1-19-2017	Amend	3-1-2017	407-007-0320	3-15-2017	Amend(T)	4-1-2017
340-090-0068	1-19-2017	Adopt	3-1-2017	407-007-0320(T)	12-1-2016	Repeal	1-1-2017
340-090-0070	1-19-2017	Amend	3-1-2017	407-007-0330	12-1-2016	Amend	1-1-2017
340-090-0080	1-19-2017	Amend	3-1-2017	407-007-0330	3-15-2017	Amend(T)	4-1-2017
340-090-0090	1-19-2017	Amend	3-1-2017	407-007-0330(T)	12-1-2016	Repeal	1-1-2017
340-090-0100	1-19-2017	Amend	3-1-2017	407-007-0335	1-24-2017	Amend(T)	3-1-2017
340-090-0110	1-19-2017	Amend	3-1-2017	407-045-0800	12-1-2016	Amend	1-1-2017
340-090-0120	1-19-2017	Amend	3-1-2017	407-045-0810	12-1-2016	Repeal	1-1-2017
340-090-0130	1-19-2017	Amend	3-1-2017	407-045-0820	12-1-2016	Amend	1-1-2017
340-090-0140	1-19-2017	Amend	3-1-2017	407-045-0825	12-1-2016	Adopt	1-1-2017
340-090-0150	1-19-2017	Amend	3-1-2017	407-045-0830	12-1-2016	Repeal	1-1-2017
340-090-0180	1-19-2017	Amend	3-1-2017	407-045-0850	12-1-2016	Repeal	1-1-2017
340-090-0190	1-19-2017	Amend	3-1-2017	407-045-0860	12-1-2016	Repeal	1-1-2017
340-090-0310	1-19-2017	Amend	3-1-2017	407-045-0870	12-1-2016	Repeal	1-1-2017
340-090-0320	1-19-2017	Amend	3-1-2017	407-045-0880	12-1-2016	Repeal	1-1-2017
340-090-0330	1-19-2017	Amend	3-1-2017	407-045-0885	12-1-2016	Adopt	1-1-2017
340-090-0340	1-19-2017	Amend	3-1-2017	407-045-0886	12-1-2016	Adopt	1-1-2017

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407-045-0890	12-1-2016	Amend	1-1-2017	410-138-0000	1-13-2017	Amend(T)	2-1-2017
407-045-0895	12-1-2016	Adopt	1-1-2017	410-138-0000	2-10-2017	Amend(T)	3-1-2017
407-045-0900	12-1-2016	Repeal	1-1-2017	410-138-0000	4-1-2017	Amend	5-1-2017
407-045-0910	12-1-2016	Amend	1-1-2017	410-138-0000(T)	4-1-2017	Repeal	5-1-2017
407-045-0920	12-1-2016	Repeal	1-1-2017	410-138-0005	1-1-2017	Amend	2-1-2017
407-045-0930	12-1-2016	Repeal	1-1-2017	410-138-0005	1-13-2017	Amend(T)	2-1-2017
407-045-0940	12-1-2016	Amend	1-1-2017	410-138-0005	2-10-2017	Amend(T)	3-1-2017
407-045-0940	1-13-2017	Amend(T)	2-1-2017	410-138-0005	4-1-2017	Amend	5-1-2017
407-045-0950	12-1-2016	Amend	1-1-2017	410-138-0005(T)	4-1-2017	Repeal	5-1-2017
407-045-0955	12-1-2016	Adopt	1-1-2017	410-138-0007	1-1-2017	Amend	2-1-2017
407-045-0960	12-1-2016	Repeal	1-1-2017	410-138-0007	1-13-2017	Amend(T)	2-1-2017
407-045-0970	12-1-2016	Repeal	1-1-2017	410-138-0007	2-10-2017	Amend(T)	3-1-2017
407-045-0980	12-1-2016	Repeal	1-1-2017	410-138-0007	4-1-2017	Amend	5-1-2017
409-055-0030	12-22-2016	Amend	2-1-2017	410-138-0007(T)	4-1-2017	Repeal	5-1-2017
409-055-0030(T)	12-22-2016	Repeal	2-1-2017	410-138-0009	1-1-2017	Amend	2-1-2017
409-055-0040	12-22-2016	Amend	2-1-2017	410-138-0009	1-13-2017	Amend(T)	2-1-2017
409-055-0045	12-22-2016	Amend	2-1-2017	410-138-0009	2-10-2017	Amend(T)	3-1-2017
409-055-0050	12-22-2016	Amend	2-1-2017	410-138-0009	4-1-2017	Amend	5-1-2017
409-060-0110	12-22-2016	Amend	2-1-2017	410-138-0009(T)	4-1-2017	Repeal	5-1-2017
409-060-0120	12-22-2016	Amend	2-1-2017	410-138-0020	1-1-2017	Amend	2-1-2017
409-060-0140	12-22-2016	Amend	2-1-2017	410-138-0020	1-13-2017	Amend(T)	2-1-2017
409-060-0150	12-22-2016	Amend	2-1-2017	410-138-0020	2-10-2017	Amend(T)	3-1-2017
409-110-0025	11-29-2016	Renumber	1-1-2017	410-138-0020	4-1-2017	Amend	5-1-2017
409-110-0030	11-29-2016	Renumber	1-1-2017	410-138-0020(T)	4-1-2017	Repeal	5-1-2017
409-110-0035	11-29-2016	Renumber	1-1-2017	410-138-0040	1-1-2017	Amend	2-1-2017
409-110-0040	11-29-2016	Renumber	1-1-2017	410-138-0040	1-13-2017	Amend(T)	2-1-2017
409-110-0045	11-29-2016	Renumber	1-1-2017	410-138-0040	2-10-2017	Amend(T)	3-1-2017
410-120-0000	1-1-2017	Amend	2-1-2017	410-138-0040	4-1-2017	Amend	5-1-2017
410-120-0000(T)	1-1-2017	Repeal	2-1-2017	410-138-0040(T)	4-1-2017	Repeal	5-1-2017
410-120-0006	3-1-2017	Amend(T)	4-1-2017	410-138-0060	1-1-2017	Amend	2-1-2017
410-120-1230	1-1-2017	Amend	2-1-2017	410-138-0060	1-13-2017	Amend(T)	2-1-2017
410-121-0030	12-1-2016	Amend	1-1-2017	410-138-0060	2-10-2017	Amend(T)	3-1-2017
410-121-0030	1-1-2017	Amend(T)	2-1-2017	410-138-0060	4-1-2017	Amend	5-1-2017
410-121-0030(T)	12-1-2016	Repeal	1-1-2017	410-138-0060(T)	4-1-2017	Repeal	5-1-2017
410-121-0040	12-1-2016	Amend	1-1-2017	410-138-0080	1-1-2017	Amend	2-1-2017
410-121-0040	1-1-2017	Amend(T)	2-1-2017	410-138-0080	1-13-2017	Amend(T)	2-1-2017
410-121-0040	2-21-2017	Amend(T)	4-1-2017	410-138-0080	2-10-2017	Amend(T)	3-1-2017
410-121-0040	4-1-2017	Amend(T)	5-1-2017	410-138-0080	4-1-2017	Amend	5-1-2017
410-121-0040	6-1-2017	Amend(T)	5-1-2017	410-138-0080(T)	4-1-2017	Repeal	5-1-2017
410-121-0040(T)	12-1-2016	Repeal	1-1-2017	410-138-0390	1-1-2017	Amend	2-1-2017
410-121-0040(T)	6-1-2017	Suspend	5-1-2017	410-138-0390	1-13-2017	Amend(T)	2-1-2017
410-123-1220	1-1-2017	Amend(T)	2-1-2017	410-138-0390	2-10-2017	Amend(T)	3-1-2017
410-123-1260	1-1-2017	Amend(T)	2-1-2017	410-138-0390	4-1-2017	Amend	5-1-2017
410-125-0085	1-1-2017	Amend	2-1-2017	410-138-0390(T)	4-1-2017	Repeal	5-1-2017
410-125-0085(T)	1-1-2017	Repeal	2-1-2017	410-138-0420	1-1-2017	Amend	2-1-2017
410-125-0360	1-1-2017	Amend	2-1-2017	410-138-0420	1-13-2017	Amend(T)	2-1-2017
410-125-0360(T)	1-1-2017	Repeal	2-1-2017	410-138-0420	2-10-2017	Amend(T)	3-1-2017
410-129-0020	1-1-2017	Amend(T)	1-1-2017	410-138-0420	4-1-2017	Amend	5-1-2017
410-129-0040	1-1-2017	Amend(T)	1-1-2017	410-138-0420(T)	4-1-2017	Repeal	5-1-2017
410-129-0070	1-1-2017	Amend(T)	1-1-2017	410-141-0520	12-1-2016	Amend	1-1-2017
410-129-0190	1-1-2017	Suspend	1-1-2017	410-141-0520	1-1-2017	Amend(T)	2-1-2017
410-131-0040	1-1-2017	Amend(T)	1-1-2017	410-141-0520	3-1-2017	Amend	4-1-2017
410-131-0080	1-1-2017	Amend(T)	1-1-2017	410-141-0520(T)	12-1-2016	Repeal	1-1-2017
410-131-0100	1-1-2017	Amend(T)	1-1-2017	410-141-0520(T)	3-1-2017	Repeal	4-1-2017
410-131-0120	1-1-2017	Amend(T)	1-1-2017	410-141-3015	1-1-2017	Amend	2-1-2017

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410-141-3015(T)	1-13-2017	Repeal	2-1-2017	411-305-0160	1-1-2017	Repeal	2-1-2017
410-141-3070	1-1-2017	Amend	2-1-2017	411-305-0170	1-1-2017	Repeal	2-1-2017
410-141-3145	1-1-2017	Amend	2-1-2017	411-305-0180	1-1-2017	Repeal	2-1-2017
410-141-3145	1-13-2017	Amend	2-1-2017	411-317-0000	2-28-2017	Amend	4-1-2017
410-141-3145(T)	1-1-2017	Repeal	2-1-2017	411-317-0000	5-1-2017	Amend(T)	5-1-2017
410-141-3145(T)	1-13-2017	Repeal	2-1-2017	411-323-0050	12-16-2016	Amend(T)	2-1-2017
410-141-3160	1-1-2017	Amend(T)	2-1-2017	411-323-0050(T)	12-16-2016	Suspend	2-1-2017
410-141-3260	1-1-2017	Amend	2-1-2017	411-325-0020	2-28-2017	Amend	4-1-2017
410-141-3260	1-13-2017	Amend	2-1-2017	411-328-0560	2-28-2017	Amend	4-1-2017
410-141-3260(T)	1-1-2017	Repeal	2-1-2017	411-345-0020	2-28-2017	Amend	4-1-2017
410-141-3260(T)	1-13-2017	Repeal	2-1-2017	411-360-0020	2-28-2017	Amend	4-1-2017
410-141-3300	1-1-2017	Amend	2-1-2017	411-360-0140	2-15-2017	Amend(T)	3-1-2017
410-141-3300	1-1-2017	Amend	2-1-2017	411-375-0010	2-28-2017	Amend	4-1-2017
410-141-3300	1-13-2017	Amend	2-1-2017	411-375-0020	2-28-2017	Amend	4-1-2017
410-141-3300(T)	1-1-2017	Repeal	2-1-2017	411-375-0020	2-28-2017	Amend	4-1-2017
410-141-3300(T)	1-13-2017	Repeal	2-1-2017	411-375-0035	2-28-2017	Amend	4-1-2017
410-141-3395	1-1-2017	Amend	2-1-2017	411-375-0040	2-28-2017	Amend	4-1-2017
410-141-3435	12-1-2016	Amend	1-1-2017	411-375-0050	2-28-2017	Amend	4-1-2017
410-165-0000	2-2-2017	Amend(T)	3-1-2017	411-375-0055	2-28-2017	Amend	4-1-2017
410-165-0020	2-2-2017	Amend(T)	3-1-2017	411-375-0070	2-28-2017	Amend	4-1-2017
410-165-0060	2-2-2017	Amend(T)	3-1-2017	411-380-0020	2-28-2017	Amend	4-1-2017
410-165-0080	2-2-2017	Amend(T)	3-1-2017	411-380-0030	2-28-2017	Amend	4-1-2017
410-170-0110	11-29-2016	Amend	1-1-2017	411-380-0060	2-28-2017	Amend	4-1-2017
410-170-0110(T)	11-29-2016	Repeal	1-1-2017	411-380-0090	2-28-2017	Amend	4-1-2017
410-172-0650	4-4-2017	Amend	5-1-2017	411-415-0020	2-28-2017	Amend	4-1-2017
410-172-0650(T)	4-4-2017	Repeal	5-1-2017	411-415-0060	2-28-2017	Amend	4-1-2017
410-172-0760	4-4-2017	Amend	5-1-2017	411-415-0070	2-28-2017	Amend	4-1-2017
410-172-0760(T)	4-4-2017	Repeal	5-1-2017	411-435-0020	2-28-2017	Amend	4-1-2017
410-172-0770	4-4-2017	Amend	5-1-2017	411-435-0050	2-28-2017	Amend	4-1-2017
410-172-0770(T)	4-4-2017	Repeal	5-1-2017	411-435-0060	2-28-2017	Amend	4-1-2017
410-200-0315	3-1-2017	Amend(T)	4-1-2017	411-435-0070	2-28-2017	Amend	4-1-2017
411-004-0040	12-28-2016	Amend	2-1-2017	411-450-0020	2-28-2017	Amend	4-1-2017
411-019-0000	3-1-2017	Adopt	4-1-2017	411-450-0030	2-28-2017	Amend	4-1-2017
411-019-0010	3-1-2017	Adopt	4-1-2017	411-450-0060	2-28-2017	Amend	4-1-2017
411-019-0020	3-1-2017	Adopt	4-1-2017	411-450-0070	2-28-2017	Amend	4-1-2017
411-019-0030	3-1-2017	Adopt	4-1-2017	413-010-0000	12-1-2016	Amend	1-1-2017
411-027-0170	12-28-2016	Amend	1-1-2017	413-010-0035	1-1-2017	Amend	2-1-2017
411-030-0033	12-28-2016	Amend	2-1-2017	413-010-0035(T)	1-1-2017	Repeal	2-1-2017
411-030-0068	12-28-2016	Amend	2-1-2017	413-010-0500	12-1-2016	Amend	1-1-2017
411-030-0070	12-28-2016	Amend	2-1-2017	413-010-0501	12-1-2016	Repeal	1-1-2017
411-300-0110	2-28-2017	Amend	4-1-2017	413-010-0502	12-1-2016	Amend	1-1-2017
411-300-0120	2-28-2017	Amend	4-1-2017	413-010-0505	12-1-2016	Amend	1-1-2017
411-305-0010	1-1-2017	Am. & Ren.	2-1-2017	413-010-0510	12-1-2016	Amend	1-1-2017
411-305-0020	1-1-2017	Am. & Ren.	2-1-2017	413-010-0510	12-1-2016	Amend	1-1-2017
411-305-0023	1-1-2017	Am. & Ren.	2-1-2017	413-010-0525	12-1-2016	Amend	1-1-2017
411-305-0025	1-1-2017	Am. & Ren.	2-1-2017	413-010-0535	12-1-2016	Amend	1-1-2017
411-305-0027	1-1-2017	Repeal	2-1-2017	413-015-0100	12-1-2016	Amend	1-1-2017
411-305-0030	1-1-2017	Am. & Ren.	2-1-2017	413-015-0100(T)	12-1-2016	Repeal	1-1-2017
411-305-0050	1-1-2017	Repeal	2-1-2017	413-015-0115	12-1-2016	Amend	1-1-2017
411-305-0080	1-1-2017	Am. & Ren.	2-1-2017	413-015-0115	2-7-2017	Amend(T)	3-1-2017
411-305-0090	1-1-2017	Am. & Ren.	2-1-2017	413-015-0125	12-1-2016	Amend	1-1-2017
411-305-0105	1-1-2017	Repeal	2-1-2017	413-015-0125(T)	12-1-2016	Repeal	1-1-2017
411-305-0110	1-1-2017	Repeal	2-1-2017	413-015-0205	12-1-2016	Amend	1-1-2017
411-305-0115	1-1-2017	Repeal	2-1-2017	413-015-0205	2-7-2017	Amend(T)	3-1-2017
				413-015-0205(T)	12-1-2016	Repeal	1-1-2017
				413-015-0210	4-3-2017	Amend	5-1-2017

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413-015-0212(T)	12-1-2016	Repeal	1-1-2017	413-070-0000	2-7-2017	Amend(T)	3-1-2017
413-015-0215	2-7-2017	Amend(T)	3-1-2017	413-070-0010	2-7-2017	Amend(T)	3-1-2017
413-015-0300	12-1-2016	Amend	1-1-2017	413-070-0072	2-7-2017	Amend(T)	3-1-2017
413-015-0300(T)	12-1-2016	Repeal	1-1-2017	413-070-0100	2-7-2017	Suspend	3-1-2017
413-015-0409	12-1-2016	Amend	1-1-2017	413-070-0130	2-7-2017	Suspend	3-1-2017
413-015-0409(T)	12-1-2016	Repeal	1-1-2017	413-070-0140	2-7-2017	Suspend	3-1-2017
413-015-0415	2-7-2017	Amend(T)	3-1-2017	413-070-0150	2-7-2017	Suspend	3-1-2017
413-015-0420	12-1-2016	Amend	1-1-2017	413-070-0160	2-7-2017	Suspend	3-1-2017
413-015-0420(T)	12-1-2016	Repeal	1-1-2017	413-070-0170	2-7-2017	Suspend	3-1-2017
413-015-0432	2-7-2017	Amend(T)	3-1-2017	413-070-0180	2-7-2017	Suspend	3-1-2017
413-015-0440	12-1-2016	Amend	1-1-2017	413-070-0190	2-7-2017	Suspend	3-1-2017
413-015-0440(T)	12-1-2016	Repeal	1-1-2017	413-070-0200	2-7-2017	Suspend	3-1-2017
413-015-0445	12-1-2016	Amend	1-1-2017	413-070-0210	2-7-2017	Suspend	3-1-2017
413-015-0445(T)	12-1-2016	Repeal	1-1-2017	413-070-0220	2-7-2017	Suspend	3-1-2017
413-015-0450	12-1-2016	Amend	1-1-2017	413-070-0230	2-7-2017	Suspend	3-1-2017
413-015-0450(T)	12-1-2016	Repeal	1-1-2017	413-070-0240	2-7-2017	Suspend	3-1-2017
413-015-0455	2-7-2017	Amend(T)	3-1-2017	413-070-0250	2-7-2017	Suspend	3-1-2017
413-015-0620	12-1-2016	Adopt	1-1-2017	413-070-0260	2-7-2017	Suspend	3-1-2017
413-015-0620(T)	12-1-2016	Repeal	1-1-2017	413-070-0512	2-7-2017	Amend(T)	3-1-2017
413-015-0625	12-1-2016	Adopt	1-1-2017	413-070-0516	1-1-2017	Amend	2-1-2017
413-015-0625(T)	12-1-2016	Repeal	1-1-2017	413-070-0516	2-7-2017	Amend(T)	3-1-2017
413-015-0630	12-1-2016	Adopt	1-1-2017	413-070-0518	1-1-2017	Amend	2-1-2017
413-015-0630(T)	12-1-2016	Repeal	1-1-2017	413-070-0518	1-19-2017	Amend	3-1-2017
413-015-0640	12-1-2016	Adopt	1-1-2017	413-070-0519	2-7-2017	Amend(T)	3-1-2017
413-015-0640(T)	12-1-2016	Repeal	1-1-2017	413-070-0625	2-7-2017	Amend(T)	3-1-2017
413-015-1000	12-1-2016	Amend	1-1-2017	413-070-0670	1-1-2017	Amend	2-1-2017
413-015-1000(T)	12-1-2016	Repeal	1-1-2017	413-070-0900	1-1-2017	Amend	2-1-2017
413-015-9030	12-1-2016	Amend	1-1-2017	413-070-0900(T)	1-1-2017	Repeal	2-1-2017
413-015-9030(T)	12-1-2016	Repeal	1-1-2017	413-070-0917	1-1-2017	Amend	2-1-2017
413-015-9040	12-1-2016	Amend	1-1-2017	413-070-0917(T)	1-1-2017	Repeal	2-1-2017
413-015-9040(T)	12-1-2016	Repeal	1-1-2017	413-070-0959	1-1-2017	Amend	2-1-2017
413-017-0000	2-7-2017	Adopt(T)	3-1-2017	413-070-0959(T)	1-1-2017	Repeal	2-1-2017
413-017-0010	2-7-2017	Adopt(T)	3-1-2017	413-070-1020	1-1-2017	Amend	2-1-2017
413-017-0020	2-7-2017	Adopt(T)	3-1-2017	413-070-1050	2-7-2017	Amend(T)	3-1-2017
413-017-0030	2-7-2017	Adopt(T)	3-1-2017	413-080-0050	12-1-2016	Amend	1-1-2017
413-017-0040	2-7-2017	Adopt(T)	3-1-2017	413-080-0050	2-7-2017	Amend(T)	3-1-2017
413-020-0000	2-7-2017	Amend(T)	3-1-2017	413-080-0050(T)	12-1-2016	Repeal	1-1-2017
413-020-0010	2-7-2017	Amend(T)	3-1-2017	413-080-0051	12-1-2016	Adopt	1-1-2017
413-020-0020	2-7-2017	Amend(T)	3-1-2017	413-080-0051(T)	12-1-2016	Repeal	1-1-2017
413-020-0050	2-7-2017	Amend(T)	3-1-2017	413-080-0052	12-1-2016	Amend	1-1-2017
413-020-0075	2-7-2017	Amend(T)	3-1-2017	413-080-0052(T)	12-1-2016	Repeal	1-1-2017
413-020-0090	2-7-2017	Amend(T)	3-1-2017	413-080-0053	1-1-2017	Amend	2-1-2017
413-030-0000	2-7-2017	Amend(T)	3-1-2017	413-080-0053(T)	1-1-2017	Repeal	2-1-2017
413-030-0009	2-7-2017	Amend(T)	3-1-2017	413-080-0054	12-1-2016	Amend	1-1-2017
413-030-0210	2-7-2017	Amend(T)	3-1-2017	413-080-0054(T)	12-1-2016	Repeal	1-1-2017
413-030-0300	1-1-2017	Repeal	2-1-2017	413-080-0059	12-1-2016	Amend	1-1-2017
413-030-0310	1-1-2017	Repeal	2-1-2017	413-080-0059(T)	12-1-2016	Repeal	1-1-2017
413-030-0320	1-1-2017	Repeal	2-1-2017	413-080-0062	1-1-2017	Amend	2-1-2017
413-030-0445	2-7-2017	Amend(T)	3-1-2017	413-080-0062(T)	1-1-2017	Repeal	2-1-2017
413-030-0460	2-7-2017	Amend(T)	3-1-2017	413-080-0070	12-1-2016	Adopt	1-1-2017
413-040-0000	2-7-2017	Amend(T)	3-1-2017	413-080-0070(T)	12-1-2016	Repeal	1-1-2017
413-040-0010	2-7-2017	Amend(T)	3-1-2017	413-090-0000	12-1-2016	Amend	1-1-2017
413-040-0155	2-7-2017	Amend(T)	3-1-2017	413-090-0000(T)	12-1-2016	Repeal	1-1-2017
413-040-0159	2-7-2017	Amend(T)	3-1-2017	413-090-0055	12-1-2016	Amend	1-1-2017
413-040-0310	2-7-2017	Amend(T)	3-1-2017	413-090-0055(T)	12-1-2016	Repeal	1-1-2017

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413-090-0065(T)	12-1-2016	Repeal	1-1-2017	413-200-0260	2-7-2017	Amend(T)	3-1-2017
413-090-0070	12-1-2016	Amend	1-1-2017	413-200-0306	2-7-2017	Amend(T)	3-1-2017
413-090-0070(T)	12-1-2016	Repeal	1-1-2017	413-215-0000	12-1-2016	Adopt	1-1-2017
413-090-0075	12-1-2016	Amend	1-1-2017	413-215-0000	2-7-2017	Amend(T)	3-1-2017
413-090-0075(T)	12-1-2016	Repeal	1-1-2017	413-215-0000(T)	12-1-2016	Repeal	1-1-2017
413-090-0080	12-1-2016	Amend	1-1-2017	413-215-0001	12-1-2016	Amend	1-1-2017
413-090-0080(T)	12-1-2016	Repeal	1-1-2017	413-215-0001(T)	12-1-2016	Repeal	1-1-2017
413-090-0090	12-1-2016	Amend	1-1-2017	413-215-0006	12-1-2016	Repeal	1-1-2017
413-090-0090(T)	12-1-2016	Repeal	1-1-2017	413-215-0011	12-1-2016	Amend	1-1-2017
413-100-0020	2-7-2017	Amend(T)	3-1-2017	413-215-0011(T)	12-1-2016	Repeal	1-1-2017
413-100-0240	2-7-2017	Amend(T)	3-1-2017	413-215-0016	12-1-2016	Amend	1-1-2017
413-110-0000	2-7-2017	Amend(T)	3-1-2017	413-215-0016(T)	12-1-2016	Repeal	1-1-2017
413-110-0280	1-1-2017	Repeal	2-1-2017	413-215-0021	12-1-2016	Amend	1-1-2017
413-110-0282	1-1-2017	Repeal	2-1-2017	413-215-0021(T)	12-1-2016	Repeal	1-1-2017
413-110-0286	1-1-2017	Repeal	2-1-2017	413-215-0026	12-1-2016	Amend	1-1-2017
413-110-0288	1-1-2017	Repeal	2-1-2017	413-215-0026(T)	12-1-2016	Repeal	1-1-2017
413-110-0290	1-1-2017	Repeal	2-1-2017	413-215-0031	12-1-2016	Amend	1-1-2017
413-110-0291	1-1-2017	Repeal	2-1-2017	413-215-0031(T)	12-1-2016	Repeal	1-1-2017
413-110-0292	1-1-2017	Repeal	2-1-2017	413-215-0036	12-1-2016	Amend	1-1-2017
413-110-0293	1-1-2017	Repeal	2-1-2017	413-215-0036(T)	12-1-2016	Repeal	1-1-2017
413-110-0295	1-1-2017	Repeal	2-1-2017	413-215-0041	12-1-2016	Amend	1-1-2017
413-110-0297	1-1-2017	Repeal	2-1-2017	413-215-0041(T)	12-1-2016	Repeal	1-1-2017
413-110-0299	1-1-2017	Repeal	2-1-2017	413-215-0046	12-1-2016	Amend	1-1-2017
413-110-0300	2-7-2017	Amend(T)	3-1-2017	413-215-0046(T)	12-1-2016	Repeal	1-1-2017
413-115-0000	2-7-2017	Adopt(T)	3-1-2017	413-215-0051	12-1-2016	Amend	1-1-2017
413-115-0010	2-7-2017	Adopt(T)	3-1-2017	413-215-0051(T)	12-1-2016	Repeal	1-1-2017
413-115-0020	2-7-2017	Adopt(T)	3-1-2017	413-215-0056	12-1-2016	Amend	1-1-2017
413-115-0030	2-7-2017	Adopt(T)	3-1-2017	413-215-0056(T)	12-1-2016	Repeal	1-1-2017
413-115-0040	2-7-2017	Adopt(T)	3-1-2017	413-215-0061	12-1-2016	Amend	1-1-2017
413-115-0050	2-7-2017	Adopt(T)	3-1-2017	413-215-0061(T)	12-1-2016	Repeal	1-1-2017
413-115-0060	2-7-2017	Adopt(T)	3-1-2017	413-215-0066	12-1-2016	Amend	1-1-2017
413-115-0070	2-7-2017	Adopt(T)	3-1-2017	413-215-0066(T)	12-1-2016	Repeal	1-1-2017
413-115-0080	2-7-2017	Adopt(T)	3-1-2017	413-215-0071	12-1-2016	Amend	1-1-2017
413-115-0090	2-7-2017	Adopt(T)	3-1-2017	413-215-0071(T)	12-1-2016	Repeal	1-1-2017
413-115-0100	2-7-2017	Adopt(T)	3-1-2017	413-215-0076	12-1-2016	Amend	1-1-2017
413-115-0110	2-7-2017	Adopt(T)	3-1-2017	413-215-0076(T)	12-1-2016	Repeal	1-1-2017
413-115-0120	2-7-2017	Adopt(T)	3-1-2017	413-215-0081	12-1-2016	Amend	1-1-2017
413-115-0130	2-7-2017	Adopt(T)	3-1-2017	413-215-0081	2-7-2017	Amend(T)	3-1-2017
413-115-0140	2-7-2017	Adopt(T)	3-1-2017	413-215-0081(T)	12-1-2016	Repeal	1-1-2017
413-115-0150	2-7-2017	Adopt(T)	3-1-2017	413-215-0086	12-1-2016	Amend	1-1-2017
413-120-0000	2-7-2017	Amend(T)	3-1-2017	413-215-0086(T)	12-1-2016	Repeal	1-1-2017
413-120-0020	2-7-2017	Amend(T)	3-1-2017	413-215-0091	12-1-2016	Amend	1-1-2017
413-120-0021	2-7-2017	Amend(T)	3-1-2017	413-215-0091(T)	12-1-2016	Repeal	1-1-2017
413-120-0025	2-7-2017	Amend(T)	3-1-2017	413-215-0096	12-1-2016	Repeal	1-1-2017
413-120-0057	2-7-2017	Amend(T)	3-1-2017	413-215-0101	12-1-2016	Amend	1-1-2017
413-120-0060	2-7-2017	Amend(T)	3-1-2017	413-215-0101(T)	12-1-2016	Repeal	1-1-2017
413-120-0165	2-7-2017	Amend(T)	3-1-2017	413-215-0106	12-1-2016	Amend	1-1-2017
413-120-0175	2-7-2017	Amend(T)	3-1-2017	413-215-0106(T)	12-1-2016	Repeal	1-1-2017
413-120-0625	2-7-2017	Amend(T)	3-1-2017	413-215-0111	12-1-2016	Amend	1-1-2017
413-120-0730	2-7-2017	Amend(T)	3-1-2017	413-215-0111(T)	12-1-2016	Repeal	1-1-2017
413-120-0750	2-7-2017	Amend(T)	3-1-2017	413-215-0116	12-1-2016	Amend	1-1-2017
413-120-0760	2-7-2017	Amend(T)	3-1-2017	413-215-0116(T)	12-1-2016	Repeal	1-1-2017
413-120-0870	2-7-2017	Amend(T)	3-1-2017	413-215-0121	12-1-2016	Amend	1-1-2017
413-120-0880	2-7-2017	Amend(T)	3-1-2017	413-215-0121(T)	12-1-2016	Repeal	1-1-2017
413-120-0925	2-7-2017	Amend(T)	3-1-2017	413-215-0126	12-1-2016	Amend	1-1-2017

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413-215-0131	12-1-2016	Amend	1-1-2017	413-215-0351	12-1-2016	Amend	1-1-2017
413-215-0131(T)	12-1-2016	Repeal	1-1-2017	413-215-0351(T)	12-1-2016	Repeal	1-1-2017
413-215-0201	12-1-2016	Amend	1-1-2017	413-215-0356	12-1-2016	Amend	1-1-2017
413-215-0201(T)	12-1-2016	Repeal	1-1-2017	413-215-0356(T)	12-1-2016	Repeal	1-1-2017
413-215-0206	12-1-2016	Repeal	1-1-2017	413-215-0361	12-1-2016	Amend	1-1-2017
413-215-0211	12-1-2016	Amend	1-1-2017	413-215-0361(T)	12-1-2016	Repeal	1-1-2017
413-215-0211(T)	12-1-2016	Repeal	1-1-2017	413-215-0366	12-1-2016	Amend	1-1-2017
413-215-0216	12-1-2016	Amend	1-1-2017	413-215-0366(T)	12-1-2016	Repeal	1-1-2017
413-215-0216(T)	12-1-2016	Repeal	1-1-2017	413-215-0371	12-1-2016	Amend	1-1-2017
413-215-0218	12-1-2016	Adopt	1-1-2017	413-215-0371(T)	12-1-2016	Repeal	1-1-2017
413-215-0221	12-1-2016	Amend	1-1-2017	413-215-0376	12-1-2016	Amend	1-1-2017
413-215-0221(T)	12-1-2016	Repeal	1-1-2017	413-215-0376(T)	12-1-2016	Repeal	1-1-2017
413-215-0226	12-1-2016	Amend	1-1-2017	413-215-0381	12-1-2016	Amend	1-1-2017
413-215-0226(T)	12-1-2016	Repeal	1-1-2017	413-215-0381(T)	12-1-2016	Repeal	1-1-2017
413-215-0231	12-1-2016	Amend	1-1-2017	413-215-0386	12-1-2016	Amend	1-1-2017
413-215-0231(T)	12-1-2016	Repeal	1-1-2017	413-215-0386(T)	12-1-2016	Repeal	1-1-2017
413-215-0236	12-1-2016	Amend	1-1-2017	413-215-0391	12-1-2016	Amend	1-1-2017
413-215-0236(T)	12-1-2016	Repeal	1-1-2017	413-215-0391(T)	12-1-2016	Repeal	1-1-2017
413-215-0241	12-1-2016	Amend	1-1-2017	413-215-0396	12-1-2016	Amend	1-1-2017
413-215-0241(T)	12-1-2016	Repeal	1-1-2017	413-215-0396(T)	12-1-2016	Repeal	1-1-2017
413-215-0246	12-1-2016	Amend	1-1-2017	413-215-0401	12-1-2016	Amend	1-1-2017
413-215-0246(T)	12-1-2016	Repeal	1-1-2017	413-215-0401(T)	12-1-2016	Repeal	1-1-2017
413-215-0251	12-1-2016	Amend	1-1-2017	413-215-0406	12-1-2016	Repeal	1-1-2017
413-215-0251(T)	12-1-2016	Repeal	1-1-2017	413-215-0411	12-1-2016	Amend	1-1-2017
413-215-0256	12-1-2016	Repeal	1-1-2017	413-215-0411(T)	12-1-2016	Repeal	1-1-2017
413-215-0261	12-1-2016	Amend	1-1-2017	413-215-0416	12-1-2016	Amend	1-1-2017
413-215-0261(T)	12-1-2016	Repeal	1-1-2017	413-215-0416(T)	12-1-2016	Repeal	1-1-2017
413-215-0266	12-1-2016	Amend	1-1-2017	413-215-0421	12-1-2016	Amend	1-1-2017
413-215-0266(T)	12-1-2016	Repeal	1-1-2017	413-215-0421(T)	12-1-2016	Repeal	1-1-2017
413-215-0271	12-1-2016	Amend	1-1-2017	413-215-0426	12-1-2016	Amend	1-1-2017
413-215-0271(T)	12-1-2016	Repeal	1-1-2017	413-215-0426	2-7-2017	Amend(T)	3-1-2017
413-215-0276	12-1-2016	Amend	1-1-2017	413-215-0426(T)	12-1-2016	Repeal	1-1-2017
413-215-0276(T)	12-1-2016	Repeal	1-1-2017	413-215-0431	12-1-2016	Amend	1-1-2017
413-215-0301	12-1-2016	Amend	1-1-2017	413-215-0431	2-7-2017	Amend(T)	3-1-2017
413-215-0301(T)	12-1-2016	Repeal	1-1-2017	413-215-0431(T)	12-1-2016	Repeal	1-1-2017
413-215-0306	12-1-2016	Repeal	1-1-2017	413-215-0436	12-1-2016	Amend	1-1-2017
413-215-0311	12-1-2016	Amend	1-1-2017	413-215-0436(T)	12-1-2016	Repeal	1-1-2017
413-215-0311(T)	12-1-2016	Repeal	1-1-2017	413-215-0441	12-1-2016	Amend	1-1-2017
413-215-0313	12-1-2016	Amend	1-1-2017	413-215-0441	2-7-2017	Amend(T)	3-1-2017
413-215-0313(T)	12-1-2016	Repeal	1-1-2017	413-215-0441(T)	12-1-2016	Repeal	1-1-2017
413-215-0316	12-1-2016	Amend	1-1-2017	413-215-0446	12-1-2016	Amend	1-1-2017
413-215-0316(T)	12-1-2016	Repeal	1-1-2017	413-215-0446(T)	12-1-2016	Repeal	1-1-2017
413-215-0318	12-1-2016	Adopt	1-1-2017	413-215-0451	12-1-2016	Amend	1-1-2017
413-215-0321	12-1-2016	Amend	1-1-2017	413-215-0451(T)	12-1-2016	Repeal	1-1-2017
413-215-0321(T)	12-1-2016	Repeal	1-1-2017	413-215-0456	12-1-2016	Amend	1-1-2017
413-215-0326	12-1-2016	Amend	1-1-2017	413-215-0456(T)	12-1-2016	Repeal	1-1-2017
413-215-0326(T)	12-1-2016	Repeal	1-1-2017	413-215-0461	12-1-2016	Amend	1-1-2017
413-215-0331	12-1-2016	Amend	1-1-2017	413-215-0461(T)	12-1-2016	Repeal	1-1-2017
413-215-0331(T)	12-1-2016	Repeal	1-1-2017	413-215-0466	12-1-2016	Amend	1-1-2017
413-215-0336	12-1-2016	Amend	1-1-2017	413-215-0466(T)	12-1-2016	Repeal	1-1-2017
413-215-0336(T)	12-1-2016	Repeal	1-1-2017	413-215-0471	12-1-2016	Amend	1-1-2017
413-215-0341	12-1-2016	Amend	1-1-2017	413-215-0471(T)	12-1-2016	Repeal	1-1-2017
413-215-0341(T)	12-1-2016	Repeal	1-1-2017	413-215-0476	12-1-2016	Amend	1-1-2017
413-215-0346	12-1-2016	Repeal	1-1-2017	413-215-0476(T)	12-1-2016	Repeal	1-1-2017
413-215-0349	12-1-2016	Amend	1-1-2017	413-215-0481	12-1-2016	Amend	1-1-2017

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413-215-0836(T)	12-1-2016	Repeal	1-1-2017	413-215-1016	12-1-2016	Amend	1-1-2017
413-215-0841	12-1-2016	Amend	1-1-2017	413-215-1016(T)	12-1-2016	Repeal	1-1-2017
413-215-0841(T)	12-1-2016	Repeal	1-1-2017	413-215-1021	12-1-2016	Amend	1-1-2017
413-215-0846	12-1-2016	Amend	1-1-2017	413-215-1021(T)	12-1-2016	Repeal	1-1-2017
413-215-0846(T)	12-1-2016	Repeal	1-1-2017	413-215-1026	12-1-2016	Amend	1-1-2017
413-215-0851	12-1-2016	Amend	1-1-2017	413-215-1026(T)	12-1-2016	Repeal	1-1-2017
413-215-0851(T)	12-1-2016	Repeal	1-1-2017	413-215-1031	12-1-2016	Amend	1-1-2017
413-215-0856	12-1-2016	Amend	1-1-2017	413-215-1031(T)	12-1-2016	Repeal	1-1-2017
413-215-0856(T)	12-1-2016	Repeal	1-1-2017	414-061-0020	12-19-2016	Amend	2-1-2017
413-215-0901	12-1-2016	Amend	1-1-2017	414-061-0040	12-19-2016	Amend	2-1-2017
413-215-0901(T)	12-1-2016	Repeal	1-1-2017	414-061-0050	12-19-2016	Amend	2-1-2017
413-215-0906	12-1-2016	Repeal	1-1-2017	414-061-0080	1-26-2017	Amend(T)	3-1-2017
413-215-0911	12-1-2016	Repeal	1-1-2017	414-061-0100	12-19-2016	Amend	2-1-2017
413-215-0916	12-1-2016	Amend	1-1-2017	414-061-0110	12-19-2016	Amend	2-1-2017
413-215-0916(T)	12-1-2016	Repeal	1-1-2017	414-061-0120	12-19-2016	Amend	2-1-2017
413-215-0918	12-1-2016	Amend	1-1-2017	414-180-0005	1-31-2017	Amend	3-1-2017
413-215-0921	12-1-2016	Amend	1-1-2017	414-180-0010	1-31-2017	Amend	3-1-2017
413-215-0921(T)	12-1-2016	Repeal	1-1-2017	414-180-0015	1-31-2017	Amend	3-1-2017
413-215-0926	12-1-2016	Amend	1-1-2017	414-180-0015	3-27-2017	Amend	5-1-2017
413-215-0926(T)	12-1-2016	Repeal	1-1-2017	414-180-0020	1-31-2017	Amend	3-1-2017
413-215-0931	12-1-2016	Amend	1-1-2017	414-180-0020	3-27-2017	Amend	5-1-2017
413-215-0931(T)	12-1-2016	Repeal	1-1-2017	414-180-0025	1-31-2017	Amend	3-1-2017
413-215-0936	12-1-2016	Amend	1-1-2017	414-180-0025	3-27-2017	Amend	5-1-2017
413-215-0936(T)	12-1-2016	Repeal	1-1-2017	414-180-0055	1-31-2017	Amend	3-1-2017
413-215-0941	12-1-2016	Amend	1-1-2017	414-205-0040	3-27-2017	Amend	5-1-2017
413-215-0941(T)	12-1-2016	Repeal	1-1-2017	414-205-0055	3-27-2017	Amend	5-1-2017
413-215-0946	12-1-2016	Amend	1-1-2017	414-205-0100	3-27-2017	Amend	5-1-2017
413-215-0946(T)	12-1-2016	Repeal	1-1-2017	414-205-0110	3-27-2017	Amend	5-1-2017
413-215-0951	12-1-2016	Amend	1-1-2017	414-205-0120	3-27-2017	Amend	5-1-2017
413-215-0951(T)	12-1-2016	Repeal	1-1-2017	414-300-0040	3-27-2017	Amend	5-1-2017
413-215-0956	12-1-2016	Amend	1-1-2017	414-300-0120	3-27-2017	Amend	5-1-2017
413-215-0956(T)	12-1-2016	Repeal	1-1-2017	414-300-0170	3-27-2017	Amend	5-1-2017
413-215-0961	12-1-2016	Amend	1-1-2017	414-300-0180	3-27-2017	Amend	5-1-2017
413-215-0961(T)	12-1-2016	Repeal	1-1-2017	414-300-0220	3-27-2017	Amend	5-1-2017
413-215-0966	12-1-2016	Amend	1-1-2017	414-300-0295	3-27-2017	Amend	5-1-2017
413-215-0966(T)	12-1-2016	Repeal	1-1-2017	414-300-0350	3-27-2017	Amend	5-1-2017
413-215-0971	12-1-2016	Amend	1-1-2017	414-350-0050	3-27-2017	Amend	5-1-2017
413-215-0971(T)	12-1-2016	Repeal	1-1-2017	414-350-0060	3-27-2017	Amend	5-1-2017
413-215-0976	12-1-2016	Amend	1-1-2017	414-350-0100	3-27-2017	Amend	5-1-2017
413-215-0976(T)	12-1-2016	Repeal	1-1-2017	414-350-0115	3-27-2017	Amend	5-1-2017
413-215-0981	12-1-2016	Amend	1-1-2017	414-350-0160	3-27-2017	Amend	5-1-2017
413-215-0981(T)	12-1-2016	Repeal	1-1-2017	414-350-0170	3-27-2017	Amend	5-1-2017
413-215-0986	12-1-2016	Amend	1-1-2017	414-350-0180	3-27-2017	Amend	5-1-2017
413-215-0986(T)	12-1-2016	Repeal	1-1-2017	414-350-0220	3-27-2017	Amend	5-1-2017
413-215-0991	12-1-2016	Amend	1-1-2017	414-350-0250	3-27-2017	Amend	5-1-2017
413-215-0991(T)	12-1-2016	Repeal	1-1-2017	415-012-0000	12-14-2016	Amend	1-1-2017
413-215-0992	12-1-2016	Amend	1-1-2017	415-012-0010	12-14-2016	Amend	1-1-2017
413-215-0992(T)	12-1-2016	Repeal	1-1-2017	415-012-0010	2-2-2017	Amend(T)	3-1-2017
413-215-0996	12-1-2016	Amend	1-1-2017	415-012-0020	12-14-2016	Amend	1-1-2017
413-215-0996(T)	12-1-2016	Repeal	1-1-2017	415-012-0020	2-2-2017	Amend(T)	3-1-2017
413-215-1001	12-1-2016	Amend	1-1-2017	415-012-0030	12-14-2016	Amend	1-1-2017
413-215-1001(T)	12-1-2016	Repeal	1-1-2017	415-012-0030	2-2-2017	Amend(T)	3-1-2017
413-215-1006	12-1-2016	Amend	1-1-2017	415-012-0035	12-14-2016	Amend	1-1-2017
413-215-1006(T)	12-1-2016	Repeal	1-1-2017	415-012-0035	2-2-2017	Amend(T)	3-1-2017
413-215-1011	12-1-2016	Amend	1-1-2017	415-012-0040	12-14-2016	Amend	1-1-2017

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415-012-0060	12-14-2016	Amend	1-1-2017	436-050-0055	1-1-2017	Amend	1-1-2017
415-012-0060	2-2-2017	Amend(T)	3-1-2017	436-050-0060	1-1-2017	Repeal	1-1-2017
415-012-0065	12-14-2016	Amend	1-1-2017	436-050-0110	1-1-2017	Amend	1-1-2017
415-012-0067	12-14-2016	Amend	1-1-2017	436-050-0120	1-1-2017	Amend	1-1-2017
415-012-0075	2-2-2017	Adopt(T)	3-1-2017	436-050-0150	1-1-2017	Amend	1-1-2017
415-012-0090	12-14-2016	Amend	1-1-2017	436-050-0160	1-1-2017	Amend	1-1-2017
415-020-0000	12-14-2016	Amend	1-1-2017	436-050-0165	1-1-2017	Amend	1-1-2017
415-020-0005	12-14-2016	Amend	1-1-2017	436-050-0170	1-1-2017	Amend	1-1-2017
415-020-0010	12-14-2016	Amend	1-1-2017	436-050-0175	1-1-2017	Amend	1-1-2017
415-020-0090	12-14-2016	Amend	1-1-2017	436-050-0180	1-1-2017	Amend	1-1-2017
415-055-0000	12-5-2016	Amend	1-1-2017	436-050-0180	1-1-2017	Amend	2-1-2017
415-055-0010	12-5-2016	Amend	1-1-2017	436-050-0185	1-1-2017	Amend	1-1-2017
415-055-0035	12-5-2016	Amend	1-1-2017	436-050-0190	1-1-2017	Amend	1-1-2017
415-060-0010	12-14-2016	Repeal	1-1-2017	436-050-0195	1-1-2017	Amend	1-1-2017
415-060-0020	12-14-2016	Repeal	1-1-2017	436-050-0200	1-1-2017	Amend	1-1-2017
415-060-0030	12-14-2016	Repeal	1-1-2017	436-050-0205	1-1-2017	Amend	1-1-2017
415-060-0040	12-14-2016	Repeal	1-1-2017	436-050-0210	1-1-2017	Amend	1-1-2017
415-060-0050	12-14-2016	Repeal	1-1-2017	436-050-0220	1-1-2017	Amend	1-1-2017
416-070-0010	1-31-2017	Amend	3-1-2017	436-050-0230	1-1-2017	Amend	1-1-2017
416-070-0020	1-31-2017	Amend	3-1-2017	436-050-0260	1-1-2017	Amend	1-1-2017
416-070-0040	1-31-2017	Amend	3-1-2017	436-050-0270	1-1-2017	Amend	1-1-2017
416-070-0050	1-31-2017	Amend	3-1-2017	436-050-0280	1-1-2017	Amend	1-1-2017
416-070-0060	1-31-2017	Amend	3-1-2017	436-050-0290	1-1-2017	Amend	1-1-2017
416-335-0090	12-8-2016	Amend	1-1-2017	436-050-0300	1-1-2017	Amend	1-1-2017
436-009-0004	1-1-2017	Amend(T)	2-1-2017	436-050-0340	1-1-2017	Amend	1-1-2017
436-009-0004	4-1-2017	Amend	4-1-2017	436-050-0400	1-1-2017	Amend	1-1-2017
436-009-0010	1-1-2017	Amend(T)	2-1-2017	436-050-0410	1-1-2017	Amend	1-1-2017
436-009-0010	4-1-2017	Amend	4-1-2017	436-050-0420	1-1-2017	Amend	1-1-2017
436-009-0020	4-1-2017	Amend	4-1-2017	436-050-0440	1-1-2017	Amend	1-1-2017
436-009-0023	4-1-2017	Amend	4-1-2017	436-050-0450	1-1-2017	Amend	1-1-2017
436-009-0025	4-1-2017	Amend	4-1-2017	436-050-0455	1-1-2017	Amend	1-1-2017
436-009-0030	4-1-2017	Amend	4-1-2017	436-050-0460	1-1-2017	Amend	1-1-2017
436-009-0040	1-1-2017	Amend(T)	2-1-2017	436-050-0470	1-1-2017	Amend	1-1-2017
436-009-0040	4-1-2017	Amend	4-1-2017	436-050-0480	1-1-2017	Amend	1-1-2017
436-009-0060	4-1-2017	Amend	4-1-2017	436-060-0001	1-1-2017	Repeal	1-1-2017
436-009-0110	4-1-2017	Amend	4-1-2017	436-060-0002	1-1-2017	Repeal	1-1-2017
436-010-0001	4-11-2017	Amend(T)	5-1-2017	436-060-0003	1-1-2017	Amend	1-1-2017
436-010-0210	4-1-2017	Amend	4-1-2017	436-060-0005	1-1-2017	Amend	1-1-2017
436-010-0280	4-11-2017	Amend(T)	5-1-2017	436-060-0006	1-1-2017	Repeal	1-1-2017
436-030-0003	4-11-2017	Amend(T)	5-1-2017	436-060-0008	1-1-2017	Amend	1-1-2017
436-030-0020	4-11-2017	Amend(T)	5-1-2017	436-060-0009	1-1-2017	Amend	1-1-2017
436-030-0035	4-11-2017	Amend(T)	5-1-2017	436-060-0010	1-1-2017	Amend	1-1-2017
436-035-0003	4-11-2017	Amend(T)	5-1-2017	436-060-0011	1-1-2017	Adopt	1-1-2017
436-035-0006	4-11-2017	Amend(T)	5-1-2017	436-060-0015	1-1-2017	Amend	1-1-2017
436-035-0013	4-11-2017	Amend(T)	5-1-2017	436-060-0017	1-1-2017	Amend	1-1-2017
436-050-0001	1-1-2017	Repeal	1-1-2017	436-060-0018	1-1-2017	Amend	1-1-2017
436-050-0002	1-1-2017	Repeal	1-1-2017	436-060-0019	1-1-2017	Amend	1-1-2017
436-050-0003	1-1-2017	Amend	1-1-2017	436-060-0020	1-1-2017	Amend	1-1-2017
436-050-0005	1-1-2017	Amend	1-1-2017	436-060-0025	1-1-2017	Amend	1-1-2017
436-050-0006	1-1-2017	Repeal	1-1-2017	436-060-0030	1-1-2017	Amend	1-1-2017
436-050-0008	1-1-2017	Amend	1-1-2017	436-060-0035	1-1-2017	Amend	1-1-2017
436-050-0015	1-1-2017	Amend	1-1-2017	436-060-0040	1-1-2017	Amend	1-1-2017
436-050-0025	1-1-2017	Amend	1-1-2017	436-060-0045	1-1-2017	Amend	1-1-2017
436-050-0040	1-1-2017	Amend	1-1-2017	436-060-0055	1-1-2017	Amend	1-1-2017

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436-060-0105	1-1-2017	Amend	1-1-2017	436-120-0001	1-1-2017	Repeal	1-1-2017
436-060-0135	1-1-2017	Amend	1-1-2017	436-120-0002	1-1-2017	Repeal	1-1-2017
436-060-0137	1-1-2017	Amend	1-1-2017	436-120-0003	1-1-2017	Amend	1-1-2017
436-060-0140	1-1-2017	Amend	1-1-2017	436-120-0005	1-1-2017	Amend	1-1-2017
436-060-0147	1-1-2017	Amend	1-1-2017	436-120-0006	1-1-2017	Repeal	1-1-2017
436-060-0150	1-1-2017	Amend	1-1-2017	436-120-0007	1-1-2017	Am. & Ren.	1-1-2017
436-060-0153	1-1-2017	Amend	1-1-2017	436-120-0008	1-1-2017	Amend	1-1-2017
436-060-0155	1-1-2017	Amend	1-1-2017	436-120-0012	1-1-2017	Amend	1-1-2017
436-060-0160	1-1-2017	Amend	1-1-2017	436-120-0014	1-1-2017	Repeal	1-1-2017
436-060-0170	1-1-2017	Amend	1-1-2017	436-120-0016	1-1-2017	Repeal	1-1-2017
436-060-0180	1-1-2017	Amend	1-1-2017	436-120-0017	1-1-2017	Repeal	1-1-2017
436-060-0190	1-1-2017	Amend	1-1-2017	436-120-0018	1-1-2017	Repeal	1-1-2017
436-060-0195	1-1-2017	Amend	1-1-2017	436-120-0115	1-1-2017	Amend	1-1-2017
436-060-0200	1-1-2017	Amend	1-1-2017	436-120-0125	1-1-2017	Repeal	1-1-2017
436-060-0400	1-1-2017	Amend	1-1-2017	436-120-0135	1-1-2017	Repeal	1-1-2017
436-060-0500	1-1-2017	Amend	1-1-2017	436-120-0145	1-1-2017	Amend	1-1-2017
436-060-0510	1-1-2017	Amend	1-1-2017	436-120-0155	1-1-2017	Am. & Ren.	1-1-2017
436-105-0001	1-1-2017	Repeal	1-1-2017	436-120-0165	1-1-2017	Amend	1-1-2017
436-105-0002	1-1-2017	Repeal	1-1-2017	436-120-0175	1-1-2017	Amend	1-1-2017
436-105-0003	1-1-2017	Amend	1-1-2017	436-120-0185	1-1-2017	Amend	1-1-2017
436-105-0005	1-1-2017	Amend	1-1-2017	436-120-0340	1-1-2017	Am. & Ren.	1-1-2017
436-105-0006	1-1-2017	Amend	1-1-2017	436-120-0400	1-1-2017	Am. & Ren.	1-1-2017
436-105-0008	1-1-2017	Amend	1-1-2017	436-120-0410	1-1-2017	Amend	1-1-2017
436-105-0500	1-1-2017	Amend	1-1-2017	436-120-0430	1-1-2017	Am. & Ren.	1-1-2017
436-105-0510	1-1-2017	Amend	1-1-2017	436-120-0443	1-1-2017	Amend	1-1-2017
436-105-0511	1-1-2017	Amend	1-1-2017	436-120-0445	1-1-2017	Amend	1-1-2017
436-105-0512	1-1-2017	Amend	1-1-2017	436-120-0448	1-1-2017	Am. & Ren.	1-1-2017
436-105-0520	1-1-2017	Amend	1-1-2017	436-120-0449	1-1-2017	Repeal	1-1-2017
436-105-0530	1-1-2017	Amend	1-1-2017	436-120-0451	1-1-2017	Am. & Ren.	1-1-2017
436-105-0540	1-1-2017	Amend	1-1-2017	436-120-0455	1-1-2017	Am. & Ren.	1-1-2017
436-105-0550	1-1-2017	Amend	1-1-2017	436-120-0500	1-1-2017	Amend	1-1-2017
436-105-0560	1-1-2017	Amend	1-1-2017	436-120-0510	1-1-2017	Amend	1-1-2017
436-110-0001	1-1-2017	Repeal	1-1-2017	436-120-0520	1-1-2017	Amend	1-1-2017
436-110-0002	1-1-2017	Repeal	1-1-2017	436-120-0530	1-1-2017	Amend	1-1-2017
436-110-0003	1-1-2017	Amend	1-1-2017	436-120-0700	1-1-2017	Amend	1-1-2017
436-110-0005	1-1-2017	Amend	1-1-2017	436-120-0710	1-1-2017	Amend	1-1-2017
436-110-0006	1-1-2017	Amend	1-1-2017	436-120-0720	1-1-2017	Amend	1-1-2017
436-110-0007	1-1-2017	Amend	1-1-2017	436-120-0755	1-1-2017	Amend	1-1-2017
436-110-0150	1-1-2017	Amend	1-1-2017	436-120-0800	1-1-2017	Amend	1-1-2017
436-110-0240	1-1-2017	Amend	1-1-2017	436-120-0810	1-1-2017	Amend	1-1-2017
436-110-0290	1-1-2017	Amend	1-1-2017	436-120-0820	1-1-2017	Amend	1-1-2017
436-110-0310	1-1-2017	Amend	1-1-2017	436-120-0830	1-1-2017	Repeal	1-1-2017
436-110-0320	1-1-2017	Amend	1-1-2017	436-120-0840	1-1-2017	Amend	1-1-2017
436-110-0325	1-1-2017	Amend	1-1-2017	436-120-0900	1-1-2017	Amend	1-1-2017
436-110-0330	1-1-2017	Amend	1-1-2017	436-120-0915	1-1-2017	Amend	1-1-2017
436-110-0335	1-1-2017	Amend	1-1-2017	437-002-0170	1-1-2018	Amend	3-1-2017
436-110-0336	1-1-2017	Amend	1-1-2017	437-004-6000	1-1-2018	Amend	3-1-2017
436-110-0337	1-1-2017	Amend	1-1-2017	437-004-6001	1-1-2018	Adopt	3-1-2017
436-110-0345	1-1-2017	Amend	1-1-2017	437-004-6401	1-1-2018	Adopt	3-1-2017
436-110-0346	1-1-2017	Amend	1-1-2017	437-004-6501	1-1-2018	Adopt	3-1-2017
436-110-0347	1-1-2017	Amend	1-1-2017	437-004-6502	1-1-2018	Adopt	3-1-2017
436-110-0350	1-1-2017	Amend	1-1-2017	437-004-6508	1-1-2018	Adopt	3-1-2017
436-110-0351	1-1-2017	Amend	1-1-2017	437-004-6509	1-1-2018	Adopt	3-1-2017
436-110-0352	1-1-2017	Amend	1-1-2017	440-007-0200	1-6-2017	Repeal	2-1-2017

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440-007-0230	1-6-2017	Repeal	2-1-2017	461-110-0210	4-1-2017	Amend	5-1-2017
440-007-0240	1-6-2017	Repeal	2-1-2017	461-110-0370	1-1-2017	Amend	2-1-2017
440-007-0250	1-6-2017	Repeal	2-1-2017	461-110-0630	4-1-2017	Amend	5-1-2017
440-007-0260	1-6-2017	Repeal	2-1-2017	461-110-0750	4-1-2017	Amend	5-1-2017
440-007-0270	1-6-2017	Repeal	2-1-2017	461-115-0020	1-1-2017	Amend	2-1-2017
440-007-0272	1-6-2017	Repeal	2-1-2017	461-115-0020(T)	1-1-2017	Repeal	2-1-2017
440-007-0275	1-6-2017	Repeal	2-1-2017	461-115-0190	4-1-2017	Amend	5-1-2017
440-007-0280	1-6-2017	Repeal	2-1-2017	461-115-0230	4-1-2017	Amend	5-1-2017
440-007-0285	1-6-2017	Repeal	2-1-2017	461-115-0610	4-1-2017	Amend	5-1-2017
440-007-0290	1-6-2017	Repeal	2-1-2017	461-120-0125	4-1-2017	Amend	5-1-2017
440-007-0300	1-6-2017	Repeal	2-1-2017	461-120-0330	4-1-2017	Amend	5-1-2017
441-025-0005	2-1-2017	Amend	3-1-2017	461-120-0345	1-1-2017	Amend	1-1-2017
441-025-0010	2-1-2017	Repeal	3-1-2017	461-120-0510	4-1-2017	Amend	5-1-2017
441-025-0020	2-1-2017	Amend	3-1-2017	461-130-0305	1-1-2017	Amend	2-1-2017
441-025-0050	2-1-2017	Amend	3-1-2017	461-130-0305(T)	1-1-2017	Repeal	2-1-2017
441-025-0121	2-1-2017	Amend	3-1-2017	461-130-0310	1-1-2017	Amend	2-1-2017
441-035-0005	2-1-2017	Amend	3-1-2017	461-130-0310	4-1-2017	Amend	5-1-2017
441-035-0030	2-1-2017	Amend	3-1-2017	461-130-0310(T)	1-1-2017	Repeal	2-1-2017
441-035-0040	2-1-2017	Repeal	3-1-2017	461-130-0315	1-1-2017	Amend	2-1-2017
441-035-0045	2-1-2017	Amend	3-1-2017	461-130-0315(T)	1-1-2017	Repeal	2-1-2017
441-035-0300	2-1-2017	Adopt	3-1-2017	461-130-0327	4-1-2017	Amend	5-1-2017
441-049-1001	2-1-2017	Amend	3-1-2017	461-130-0330	1-1-2017	Amend	2-1-2017
441-049-1011	2-1-2017	Amend	3-1-2017	461-130-0330(T)	1-1-2017	Repeal	2-1-2017
441-049-1051	2-1-2017	Amend	3-1-2017	461-135-0085	4-1-2017	Amend	5-1-2017
441-065-0270	2-1-2017	Repeal	3-1-2017	461-135-0520	1-1-2017	Amend	2-1-2017
441-175-0002	2-1-2017	Amend	3-1-2017	461-135-0520(T)	1-1-2017	Repeal	2-1-2017
441-175-0020	2-1-2017	Amend	3-1-2017	461-135-0560	4-1-2017	Amend	5-1-2017
441-175-0030	2-1-2017	Amend	3-1-2017	461-135-0730	1-1-2017	Amend	1-1-2017
441-500-0020	2-1-2017	Amend	3-1-2017	461-135-0780	1-1-2017	Amend	1-1-2017
441-505-3030	2-1-2017	Amend	3-1-2017	461-135-0820	1-1-2017	Amend	1-1-2017
441-505-3090	2-1-2017	Amend	3-1-2017	461-135-0832	2-13-2017	Amend(T)	3-1-2017
441-730-0026	4-1-2017	Amend	3-1-2017	461-135-0835	2-13-2017	Amend(T)	3-1-2017
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441-745-0300	4-14-2017	Amend	5-1-2017	461-135-0915	4-1-2017	Adopt	5-1-2017
441-745-0310	4-14-2017	Amend	5-1-2017	461-135-0930	4-1-2017	Amend	5-1-2017
441-745-0330	4-14-2017	Amend	5-1-2017	461-140-0040	4-1-2017	Amend	5-1-2017
441-810-0020	4-14-2017	Amend	5-1-2017	461-140-0210	4-1-2017	Amend	5-1-2017
441-810-0030	4-14-2017	Amend	5-1-2017	461-140-0296	1-1-2017	Amend	1-1-2017
441-810-0040	4-14-2017	Amend	5-1-2017	461-140-0296(T)	1-1-2017	Repeal	1-1-2017
441-810-0050	4-14-2017	Amend	5-1-2017	461-145-0000	12-28-2016	Adopt	1-1-2017
441-810-0080	4-14-2017	Amend	5-1-2017	461-145-0005	1-1-2017	Amend	1-1-2017
441-860-0020	4-1-2017	Amend	3-1-2017	461-145-0005	4-1-2017	Amend	5-1-2017
441-860-0025	4-1-2017	Amend	3-1-2017	461-145-0035	1-1-2017	Adopt	1-1-2017
441-860-0050	4-1-2017	Amend	3-1-2017	461-145-0035	4-1-2017	Amend	5-1-2017
441-880-0310	1-1-2017	Amend	2-1-2017	461-145-0088	4-1-2017	Amend	5-1-2017
441-885-0010	4-1-2017	Amend	3-1-2017	461-145-0140	1-1-2017	Amend	1-1-2017
441-910-0010	4-14-2017	Amend	5-1-2017	461-145-0184	1-1-2017	Repeal	1-1-2017
441-910-0030	4-14-2017	Amend	5-1-2017	461-145-0220	1-1-2017	Amend	1-1-2017
441-910-0050	4-14-2017	Amend	5-1-2017	461-145-0300	4-1-2017	Amend	5-1-2017
441-910-0055	4-14-2017	Amend	5-1-2017	461-145-0365	4-1-2017	Amend	5-1-2017
459-005-0525	1-27-2017	Amend	3-1-2017	461-145-0417	1-1-2017	Adopt	1-1-2017
459-005-0545	1-27-2017	Amend	3-1-2017	461-145-0430	4-1-2017	Amend	5-1-2017
459-017-0060	1-1-2017	Amend	1-1-2017	461-145-0470	4-1-2017	Amend(T)	5-1-2017
459-080-0500	1-27-2017	Amend	3-1-2017	461-145-0505	4-1-2017	Amend	5-1-2017
461-025-0310	1-1-2017	Amend	2-1-2017	461-145-0530	4-1-2017	Amend	5-1-2017

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461-145-0930	1-1-2017	Amend	1-1-2017	573-050-0016	12-6-2016	Amend	1-1-2017
461-145-0930	4-1-2017	Amend	5-1-2017	573-050-0025	12-6-2016	Amend	1-1-2017
461-150-0050	1-1-2017	Amend	1-1-2017	573-050-0040	12-6-2016	Amend	1-1-2017
461-155-0020	4-1-2017	Amend(T)	5-1-2017	573-050-0045	12-6-2016	Amend	1-1-2017
461-155-0150	1-1-2017	Amend	2-1-2017	581-002-1800	2-1-2017	Adopt	3-1-2017
461-155-0180	3-1-2017	Amend(T)	4-1-2017	581-002-1805	2-1-2017	Adopt	3-1-2017
461-155-0225	4-1-2017	Amend	5-1-2017	581-002-1810	2-1-2017	Adopt	3-1-2017
461-155-0250	1-1-2017	Amend	1-1-2017	581-013-0005	3-1-2017	Adopt	4-1-2017
461-155-0250	4-1-2017	Amend(T)	5-1-2017	581-013-0010	3-1-2017	Adopt	4-1-2017
461-155-0270	1-1-2017	Amend	1-1-2017	581-013-0015	3-1-2017	Adopt	4-1-2017
461-155-0290	3-1-2017	Amend	4-1-2017	581-013-0020	3-1-2017	Adopt	4-1-2017
461-155-0291	3-1-2017	Amend	4-1-2017	581-013-0025	3-1-2017	Adopt	4-1-2017
461-155-0295	3-1-2017	Amend	4-1-2017	581-013-0030	3-1-2017	Adopt	4-1-2017
461-155-0300	1-1-2017	Amend	1-1-2017	581-013-0035	3-1-2017	Adopt	4-1-2017
461-155-0300	4-1-2017	Suspend	5-1-2017	581-020-0600	12-20-2016	Amend	2-1-2017
461-155-0660	4-1-2017	Amend(T)	5-1-2017	581-020-0603	12-20-2016	Amend	2-1-2017
461-155-0670	4-1-2017	Amend(T)	5-1-2017	581-020-0606	12-20-2016	Amend	2-1-2017
461-160-0015	4-1-2017	Amend	5-1-2017	581-020-0609	12-20-2016	Amend	2-1-2017
461-160-0100	4-1-2017	Amend	5-1-2017	581-020-0612	12-20-2016	Amend	2-1-2017
461-160-0160	4-1-2017	Amend	5-1-2017	581-020-0613	12-20-2016	Adopt	2-1-2017
461-160-0430	2-1-2017	Amend(T)	3-1-2017	581-020-0615	12-20-2016	Amend	2-1-2017
461-160-0580	1-1-2017	Amend	1-1-2017	581-020-0621	12-20-2016	Adopt	2-1-2017
461-160-0620	1-1-2017	Amend	1-1-2017	581-020-0624	12-20-2016	Adopt	2-1-2017
461-165-0010	1-1-2017	Amend	2-1-2017	581-022-1920	2-1-2017	Amend(T)	3-1-2017
461-165-0030	4-1-2017	Amend	5-1-2017	581-022-2440	2-1-2017	Adopt	3-1-2017
461-165-0160	3-24-2017	Amend(T)	5-1-2017	581-027-0005	3-1-2017	Amend	4-1-2017
461-165-0180	1-1-2017	Amend	2-1-2017	581-027-0010	3-1-2017	Amend	4-1-2017
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461-170-0011	3-10-2017	Amend(T)	4-1-2017	581-027-0020	3-1-2017	Amend	4-1-2017
461-170-0101	3-10-2017	Amend(T)	4-1-2017	581-027-0025	3-1-2017	Amend	4-1-2017
461-175-0220	4-1-2017	Amend	5-1-2017	581-027-0030	3-1-2017	Amend	4-1-2017
461-180-0050	1-1-2017	Amend	1-1-2017	581-027-0035	3-1-2017	Amend	4-1-2017
461-190-0211	3-1-2017	Amend(T)	4-1-2017	581-027-0040	3-1-2017	Amend	4-1-2017
461-190-0231	4-1-2017	Amend	5-1-2017	581-027-0045	3-1-2017	Amend	4-1-2017
461-190-0360	1-1-2017	Amend	2-1-2017	581-027-0050	3-1-2017	Amend	4-1-2017
461-190-0500	1-1-2017	Amend	2-1-2017	584-010-0004	2-1-2017	Adopt	3-1-2017
461-193-0031	4-1-2017	Amend	5-1-2017	584-010-0125	2-1-2017	Adopt	3-1-2017
461-195-0501	1-1-2017	Amend	2-1-2017	584-017-1030	4-12-2017	Repeal	5-1-2017
461-195-0601	4-1-2017	Amend	5-1-2017	584-020-0060	2-1-2017	Am. & Ren.	3-1-2017
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471-007-0230	4-5-2017	Repeal	5-1-2017	584-200-0050	4-12-2017	Amend	5-1-2017
471-007-0240	4-5-2017	Repeal	5-1-2017	584-210-0030	4-12-2017	Amend	5-1-2017
471-007-0250	4-5-2017	Repeal	5-1-2017	584-210-0040	2-1-2017	Amend	3-1-2017
471-007-0260	4-5-2017	Repeal	5-1-2017	584-210-0040	4-12-2017	Amend	5-1-2017
471-007-0270	4-5-2017	Repeal	5-1-2017	584-210-0050	2-1-2017	Amend	3-1-2017
471-007-0280	4-5-2017	Repeal	5-1-2017	584-210-0060	2-1-2017	Amend	3-1-2017
471-007-0285	4-5-2017	Amend	5-1-2017	584-210-0070	2-1-2017	Amend	3-1-2017
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584-225-0065	2-1-2017	Adopt	3-1-2017	603-075-0015	1-17-2017	Repeal	3-1-2017
584-420-0015	2-1-2017	Adopt	3-1-2017	603-075-0025	1-17-2017	Amend	3-1-2017
584-420-0016	2-1-2017	Adopt	3-1-2017	603-075-0050	1-17-2017	Amend	3-1-2017
584-420-0020	2-1-2017	Amend	3-1-2017	603-075-0100	1-17-2017	Amend	3-1-2017
584-420-0300	4-12-2017	Repeal	5-1-2017	603-075-0110	1-17-2017	Amend	3-1-2017
584-420-0305	4-12-2017	Adopt	5-1-2017	603-075-0120	1-17-2017	Amend	3-1-2017
584-420-0310	2-1-2017	Amend	3-1-2017	603-075-0130	1-17-2017	Amend	3-1-2017
584-420-0345	2-1-2017	Amend	3-1-2017	603-075-0140	1-17-2017	Amend	3-1-2017
584-420-0360	2-1-2017	Amend	3-1-2017	635-004-0215	1-1-2017	Amend	1-1-2017
584-420-0365	2-1-2017	Amend	3-1-2017	635-004-0223	1-1-2017	Adopt	1-1-2017
584-420-0375	4-12-2017	Repeal	5-1-2017	635-004-0275	2-15-2017	Amend	3-1-2017
584-420-0390	4-12-2017	Repeal	5-1-2017	635-004-0330	1-1-2017	Amend	1-1-2017
584-420-0415	2-1-2017	Amend	3-1-2017	635-004-0350	1-1-2017	Amend	1-1-2017
584-420-0420	2-1-2017	Amend	3-1-2017	635-004-0355	1-1-2017	Amend	1-1-2017
584-420-0425	2-1-2017	Amend	3-1-2017	635-005-0240	1-1-2017	Amend	1-1-2017
584-420-0440	2-1-2017	Amend	3-1-2017	635-005-0263	1-1-2017	Adopt	1-1-2017
584-420-0460	2-1-2017	Amend	3-1-2017	635-005-0355	12-15-2016	Amend(T)	1-1-2017
584-420-0490	2-1-2017	Amend	3-1-2017	635-005-0355	3-24-2017	Amend(T)	5-1-2017
584-420-0630	2-1-2017	Amend	3-1-2017	635-005-0465	11-23-2016	Amend(T)	1-1-2017
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603-011-0255	3-22-2017	Amend	5-1-2017	635-005-0465	12-22-2016	Amend(T)	2-1-2017
603-018-0005	3-24-2017	Amend(T)	5-1-2017	635-005-0465	2-2-2017	Amend(T)	3-1-2017
603-018-0020	3-24-2017	Amend(T)	5-1-2017	635-005-0465	2-8-2017	Amend(T)	3-1-2017
603-025-0400	2-2-2017	Adopt(T)	3-1-2017	635-005-0465	2-10-2017	Amend(T)	3-1-2017
603-025-0400	2-8-2017	Amend(T)	3-1-2017	635-005-0465(T)	12-18-2016	Suspend	1-1-2017
603-025-0400	2-10-2017	Amend(T)	3-1-2017	635-005-0465(T)	12-22-2016	Suspend	2-1-2017
603-025-0400(T)	2-10-2017	Suspend	3-1-2017	635-005-0465(T)	2-2-2017	Suspend	3-1-2017
603-048-0010	3-15-2017	Amend(T)	4-1-2017	635-005-0465(T)	2-8-2017	Suspend	3-1-2017
603-048-0100	3-15-2017	Amend(T)	4-1-2017	635-005-0465(T)	2-10-2017	Suspend	3-1-2017
603-048-0200	3-15-2017	Amend(T)	4-1-2017	635-005-0505	11-21-2016	Amend(T)	1-1-2017
603-048-0300	3-15-2017	Amend(T)	4-1-2017	635-005-0915	1-1-2017	Amend	1-1-2017
603-048-0400	3-15-2017	Amend(T)	4-1-2017	635-006-0210	1-1-2017	Amend	1-1-2017
603-048-0500	3-15-2017	Amend(T)	4-1-2017	635-006-0210	2-2-2017	Amend(T)	3-1-2017
603-048-0600	3-15-2017	Amend(T)	4-1-2017	635-006-0210(T)	2-2-2017	Suspend	3-1-2017
603-048-0650	3-15-2017	Amend(T)	4-1-2017	635-006-0232	1-23-2017	Amend	3-1-2017
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603-048-0700	3-15-2017	Amend(T)	4-1-2017	635-008-0123	3-21-2017	Amend	5-1-2017
603-048-0800	3-15-2017	Amend(T)	4-1-2017	635-008-0170	11-17-2016	Amend	1-1-2017
603-048-0900	3-15-2017	Amend(T)	4-1-2017	635-008-0175	11-17-2016	Amend	1-1-2017
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603-048-2305	3-15-2017	Adopt(T)	4-1-2017	635-011-0104	4-22-2017	Amend(T)	5-1-2017
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603-048-2315	3-15-2017	Adopt(T)	4-1-2017	635-014-0080	1-1-2017	Amend	2-1-2017
603-048-2320	3-15-2017	Adopt(T)	4-1-2017	635-014-0090	1-1-2017	Amend	2-1-2017
603-048-2330	3-15-2017	Adopt(T)	4-1-2017	635-014-0090	1-25-2017	Amend	3-1-2017
603-048-2340	3-15-2017	Adopt(T)	4-1-2017	635-016-0080	1-1-2017	Amend	2-1-2017
603-048-2350	3-15-2017	Adopt(T)	4-1-2017	635-016-0090	1-1-2017	Amend	2-1-2017
603-048-2380	3-15-2017	Adopt(T)	4-1-2017	635-017-0080	1-1-2017	Amend	2-1-2017
603-048-2440	3-15-2017	Adopt(T)	4-1-2017	635-017-0080	4-1-2017	Amend(T)	5-1-2017
603-048-2450	3-15-2017	Adopt(T)	4-1-2017	635-017-0090	1-1-2017	Amend	2-1-2017
603-048-2480	3-15-2017	Adopt(T)	4-1-2017	635-017-0090	1-25-2017	Amend	3-1-2017
603-052-0127	4-15-2017	Amend(T)	5-1-2017	635-017-0095	1-1-2017	Amend	2-1-2017
603-052-0360	2-17-2017	Amend(T)	4-1-2017	635-018-0080	1-1-2017	Amend	2-1-2017

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635-018-0090	4-15-2017	Amend(T)	3-1-2017	635-042-0180	3-30-2017	Amend(T)	5-1-2017
635-018-0090(T)	4-15-2017	Suspend	3-1-2017	635-042-0180(T)	2-6-2017	Suspend	3-1-2017
635-019-0080	1-1-2017	Amend	2-1-2017	635-044-0000	1-24-2017	Repeal	3-1-2017
635-019-0090	1-1-2017	Amend	2-1-2017	635-044-0002	1-24-2017	Repeal	3-1-2017
635-021-0080	1-1-2017	Amend	2-1-2017	635-044-0005	1-24-2017	Repeal	3-1-2017
635-021-0090	1-1-2017	Amend	2-1-2017	635-044-0010	1-24-2017	Repeal	3-1-2017
635-021-0090	1-18-2017	Amend(T)	3-1-2017	635-044-0015	1-24-2017	Repeal	3-1-2017
635-023-0080	1-1-2017	Amend	2-1-2017	635-044-0020	1-24-2017	Repeal	3-1-2017
635-023-0090	1-1-2017	Amend	2-1-2017	635-044-0025	1-24-2017	Repeal	3-1-2017
635-023-0090	1-25-2017	Amend	3-1-2017	635-044-0030	1-24-2017	Repeal	3-1-2017
635-023-0095	1-1-2017	Amend	2-1-2017	635-044-0035	1-24-2017	Repeal	3-1-2017
635-023-0095	3-25-2017	Amend(T)	4-1-2017	635-044-0035	1-24-2017	Repeal	3-1-2017
635-023-0095	3-30-2017	Amend(T)	5-1-2017	635-044-0040	1-24-2017	Repeal	3-1-2017
635-023-0125	1-1-2017	Amend	2-1-2017	635-044-0045	1-24-2017	Repeal	3-1-2017
635-023-0125	3-1-2017	Amend(T)	4-1-2017	635-044-0050	1-24-2017	Repeal	3-1-2017
635-023-0125	4-7-2017	Amend(T)	5-1-2017	635-044-0051	1-24-2017	Repeal	3-1-2017
635-023-0125	4-13-2017	Amend(T)	5-1-2017	635-044-0060	1-24-2017	Repeal	3-1-2017
635-023-0128	1-1-2017	Amend	2-1-2017	635-044-0075	1-24-2017	Repeal	3-1-2017
635-023-0130	1-1-2017	Amend	2-1-2017	635-044-0080	1-24-2017	Repeal	3-1-2017
635-023-0134	1-1-2017	Amend	2-1-2017	635-044-0120	1-24-2017	Repeal	3-1-2017
635-023-0140	1-1-2017	Amend	2-1-2017	635-044-0125	1-24-2017	Repeal	3-1-2017
635-039-0080	1-1-2017	Amend	2-1-2017	635-044-0130	1-24-2017	Repeal	3-1-2017
635-039-0080	2-15-2017	Amend	3-1-2017	635-044-0132	1-24-2017	Repeal	3-1-2017
635-039-0090	1-1-2017	Amend	1-1-2017	635-044-0400	1-24-2017	Adopt	3-1-2017
635-039-0090	1-1-2017	Amend	2-1-2017	635-044-0410	1-24-2017	Adopt	3-1-2017
635-041-0005	2-21-2017	Amend	3-1-2017	635-044-0420	1-24-2017	Adopt	3-1-2017
635-041-0025	2-21-2017	Amend	3-1-2017	635-044-0430	1-24-2017	Adopt	3-1-2017
635-041-0030	2-21-2017	Amend	3-1-2017	635-044-0440	1-24-2017	Adopt	3-1-2017
635-041-0050	2-21-2017	Amend	3-1-2017	635-044-0450	1-24-2017	Adopt	3-1-2017
635-041-0061	2-21-2017	Amend	3-1-2017	635-044-0460	1-24-2017	Adopt	3-1-2017
635-041-0063	2-21-2017	Amend	3-1-2017	635-044-0470	1-24-2017	Adopt	3-1-2017
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635-041-0065	2-7-2017	Amend(T)	3-1-2017	635-044-0480	1-24-2017	Adopt	3-1-2017
635-041-0065	2-15-2017	Amend(T)	3-1-2017	635-044-0490	1-24-2017	Adopt	3-1-2017
635-041-0065	2-22-2017	Amend(T)	4-1-2017	635-044-0500	1-24-2017	Adopt	3-1-2017
635-041-0065	3-1-2017	Amend(T)	4-1-2017	635-044-0500	3-9-2017	Amend	4-1-2017
635-041-0065	3-17-2017	Amend(T)	4-1-2017	635-044-0510	1-24-2017	Adopt	3-1-2017
635-041-0065(T)	2-7-2017	Suspend	3-1-2017	635-044-0520	1-24-2017	Adopt	3-1-2017
635-042-0100	4-1-2017	Amend(T)	5-1-2017	635-044-0530	1-24-2017	Adopt	3-1-2017
635-042-0130	2-2-2017	Amend(T)	3-1-2017	635-044-0540	1-24-2017	Adopt	3-1-2017
635-042-0145	2-6-2017	Amend(T)	3-1-2017	635-044-0550	1-24-2017	Adopt	3-1-2017
635-042-0145	3-30-2017	Amend(T)	5-1-2017	635-044-0560	1-24-2017	Adopt	3-1-2017
635-042-0145	4-6-2017	Amend(T)	5-1-2017	635-044-0570	1-24-2017	Adopt	3-1-2017
635-042-0145	4-13-2017	Amend(T)	5-1-2017	635-044-0580	1-24-2017	Adopt	3-1-2017
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635-042-0160	3-20-2017	Amend(T)	5-1-2017	635-050-0045	3-9-2017	Amend(T)	4-1-2017
635-042-0160	3-30-2017	Amend(T)	5-1-2017	635-060-0000	3-2-2017	Amend	4-1-2017
635-042-0160	4-6-2017	Amend(T)	5-1-2017	635-065-0625	3-2-2017	Amend	4-1-2017
635-042-0160	4-13-2017	Amend(T)	5-1-2017	635-065-0625	3-31-2017	Amend(T)	5-1-2017
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635-042-0170	3-20-2017	Amend(T)	5-1-2017	635-066-0010	3-2-2017	Amend	4-1-2017
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635-069-0000	3-2-2017	Amend	4-1-2017	661-010-0021	1-1-2017	Amend	2-1-2017
635-070-0000	3-2-2017	Amend	4-1-2017	661-010-0025	1-1-2017	Amend	2-1-2017
635-071-0000	3-2-2017	Amend	4-1-2017	661-010-0030	1-1-2017	Amend	2-1-2017
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635-075-0022	3-21-2017	Amend	5-1-2017	661-010-0068	1-1-2017	Amend	2-1-2017
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635-500-6715	12-15-2016	Amend	1-1-2017	690-240-0005	2-16-2017	Amend	4-1-2017
635-500-6715	1-25-2017	Amend	3-1-2017	715-045-0001	1-1-2017	Amend	2-1-2017
635-500-6715	4-4-2017	Amend	5-1-2017	715-045-0007	1-1-2017	Amend	2-1-2017
635-500-6720	12-15-2016	Amend	1-1-2017	715-045-0033	1-1-2017	Amend	2-1-2017
635-500-6720	1-25-2017	Amend	3-1-2017	734-005-0015	12-16-2016	Amend	2-1-2017
635-500-6720	4-4-2017	Amend	5-1-2017	734-010-0285	11-28-2016	Adopt	1-1-2017
635-500-6725	12-15-2016	Amend	1-1-2017	734-010-0290	11-28-2016	Amend	1-1-2017
635-500-6725	1-25-2017	Amend	3-1-2017	734-010-0300	11-28-2016	Amend	1-1-2017
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635-500-6730	1-25-2017	Amend	3-1-2017	734-010-0330	11-28-2016	Amend	1-1-2017
635-500-6730	4-4-2017	Amend	5-1-2017	734-010-0340	11-28-2016	Amend	1-1-2017
635-500-6735	12-15-2016	Amend	1-1-2017	734-010-0350	11-28-2016	Repeal	1-1-2017
635-500-6735	1-25-2017	Amend	3-1-2017	734-010-0360	11-28-2016	Amend	1-1-2017
635-500-6735	4-4-2017	Amend	5-1-2017	734-010-0380	11-28-2016	Amend	1-1-2017
635-500-6740	12-15-2016	Amend	1-1-2017	734-050-0105	12-16-2016	Am. & Ren.	2-1-2017
635-500-6740	1-25-2017	Amend	3-1-2017	734-059-0015	11-28-2016	Amend	1-1-2017
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635-500-6745	1-25-2017	Amend	3-1-2017	734-060-0000	11-28-2016	Amend	1-1-2017
635-500-6750	12-15-2016	Amend	1-1-2017	734-060-0010	11-28-2016	Repeal	1-1-2017
635-500-6750	1-25-2017	Amend	3-1-2017	734-060-0175	11-28-2016	Amend	1-1-2017
660-023-0030	2-10-2017	Amend	3-1-2017	734-060-0180	11-28-2016	Adopt	1-1-2017
660-023-0200	2-10-2017	Amend	3-1-2017	734-060-0190	11-28-2016	Amend	1-1-2017
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660-039-0010	2-27-2017	Adopt	4-1-2017	734-065-0035	11-28-2016	Amend	1-1-2017
660-039-0020	2-27-2017	Adopt	4-1-2017	734-065-0040	11-28-2016	Amend	1-1-2017
660-039-0030	2-27-2017	Adopt	4-1-2017	734-065-0045	11-28-2016	Amend	1-1-2017
660-039-0040	2-27-2017	Adopt	4-1-2017	735-001-0100	2-1-2017	Amend	3-1-2017
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660-039-0060	2-27-2017	Adopt	4-1-2017	735-024-0015	11-22-2016	Amend	1-1-2017
660-039-0070	2-27-2017	Adopt	4-1-2017	735-024-0025	11-22-2016	Amend	1-1-2017
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660-044-0025	3-1-2017	Amend	4-1-2017	736-040-0100	2-2-2017	Adopt	3-1-2017
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740-200-0040	3-7-2017	Amend	4-1-2017	811-010-0090	1-6-2017	Amend	2-1-2017
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800-025-0060	1-27-2017	Amend	3-1-2017	813-006-0005	12-19-2016	Amend	2-1-2017
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801-005-0010	1-4-2017	Amend	2-1-2017	813-006-0010(T)	12-19-2016	Repeal	2-1-2017
801-010-0060	1-4-2017	Amend	2-1-2017	813-135-0010	3-9-2017	Adopt	4-1-2017
801-010-0065	1-4-2017	Amend	2-1-2017	813-135-0010(T)	3-9-2017	Repeal	4-1-2017
801-010-0080	1-4-2017	Amend	2-1-2017	813-135-0020	3-9-2017	Adopt	4-1-2017
801-010-0110	1-4-2017	Amend	2-1-2017	813-135-0020(T)	3-9-2017	Repeal	4-1-2017
801-010-0115	1-4-2017	Amend	2-1-2017	813-135-0030	3-9-2017	Adopt	4-1-2017
801-010-0120	1-4-2017	Amend	2-1-2017	813-135-0030(T)	3-9-2017	Repeal	4-1-2017
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801-010-0340	1-4-2017	Amend	2-1-2017	813-135-0040(T)	3-9-2017	Repeal	4-1-2017
801-010-0345	1-4-2017	Amend	2-1-2017	813-135-0050	3-9-2017	Adopt	4-1-2017
801-020-0690	1-4-2017	Amend	2-1-2017	813-135-0050(T)	3-9-2017	Repeal	4-1-2017
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801-030-0005	1-4-2017	Amend	2-1-2017	813-135-0060(T)	3-9-2017	Repeal	4-1-2017
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801-040-0020	1-4-2017	Amend	2-1-2017	818-021-0025	3-1-2017	Amend	3-1-2017
801-040-0030	1-4-2017	Amend	2-1-2017	819-005-0005	1-3-2017	Adopt	2-1-2017
801-040-0050	1-4-2017	Amend	2-1-2017	819-020-0015	1-3-2017	Adopt	2-1-2017
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836-005-0405	1-10-2017	Adopt	2-1-2017	845-025-5350	12-27-2016	Amend	2-1-2017
836-010-0135	1-9-2017	Amend	2-1-2017	845-025-5500	12-27-2016	Amend	2-1-2017
836-010-0140	1-9-2017	Amend	2-1-2017	845-025-5540	12-27-2016	Amend	2-1-2017
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837-120-0540	2-1-2017	Adopt	3-1-2017	845-025-7700	12-27-2016	Amend	2-1-2017
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845-006-0500	12-1-2016	Amend	1-1-2017	845-025-8520	12-27-2016	Amend	2-1-2017
845-013-0100	3-1-2017	Amend	4-1-2017	845-025-8560	12-27-2016	Amend	2-1-2017
845-015-0142	3-1-2017	Adopt	4-1-2017	845-025-8750	12-27-2016	Adopt	2-1-2017
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845-025-2840	12-27-2016	Amend	2-1-2017	852-005-0005	7-1-2017	Amend	3-1-2017
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845-025-3255	1-1-2017	Adopt(T)	2-1-2017	852-020-0045	3-14-2017	Amend	4-1-2017
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860-032-0620	11-22-2016	Am. & Ren.	1-1-2017	860-036-0345	1-24-2017	Repeal	3-1-2017
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860-032-0660	11-22-2016	Renumber	1-1-2017	860-036-0370	1-24-2017	Repeal	3-1-2017
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860-036-2410	1-24-2017	Adopt	3-1-2017	918-525-0260	1-19-2017	Amend(T)	3-1-2017
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918-001-0310	4-1-2017	Adopt	5-1-2017	918-530-0320	1-19-2017	Suspend	3-1-2017
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